

Executive summary

The Toronto Community Crisis Service aims to provide a Toronto-wide, non-police-led, alternative crisis response service. Launched on March 31st, 2022 through partnerships between the City of Toronto, Toronto Police Service, Findhelp 211, and four community-based anchor partners – Gerstein Crisis Centre, TAIBU Community Health Centre, Canadian Mental Health Association – Toronto, and 2-Spirited People of the 1st Nation – this service model is the first of its kind in Canada. Third party Evaluators from the Provincial System Support Program and Shkaabe Makwa at the Centre for Addiction and Mental Health were retained to evaluate key implementation and service delivery processes and outcomes associated with the Toronto Community Crisis Service. From June 2021 to March 2022, evaluators engaged all project partners in the collaborative design of an evaluation framework that was grounded in the needs of the local context and communities of interest. The framework design focuses on yielding useful and relevant data; is responsive to changing needs and priorities over the course of implementation; and incorporates Indigenous-led evaluation principles throughout.

The current report reflects the findings of a six-month implementation evaluation, which details Toronto Community Crisis Service partner and staff perspectives and experiences regarding implementation of the program from March 31st, 2022 to September 30th, 2022.

This implementation evaluation was guided by five key evaluation questions:

1. To what extent were non-emergency 911 mental health and crisis-related calls diverted to the Toronto Community Crisis Service?
2. To what extent were service user connections made to appropriate community-based follow-up supports through the Toronto Community Crisis Service?
3. How was the Toronto Community Crisis Service implemented?
4. How feasible was it to implement and deliver the Toronto Community Crisis Service?
5. How suitable is the Toronto Community Crisis Service for the system and setting in which it is operating?

To answer these questions, a variety of primary and secondary mixed method data was collected from a range of sources including monthly administrative data, mixed method surveys, interviews and focus groups, and an implementation tracker. All Toronto Community Crisis Service partners participated across a range of leadership levels and staff positions. Mixed method data was iteratively integrated to generate a robust and nuanced analysis and narrative of the implementation of the Toronto Community Crisis Service to date.

The resulting large mixed-methods dataset reflecting a breadth of operational activities and diverse partner perspectives collectively suggests that ***overall, the Toronto Community Crisis Service has been successfully implemented to date.*** Alongside successes, this report details a diverse array of implementation challenges faced by partners, in hopes of informing opportunities for learning and quality improvement. Overall, the data reveals a dedicated and forward-thinking collaborative of partners working together toward implementing a highly complex intervention in a complex context, with data further demonstrating positive results to date. Key findings are presented below.

Key Findings

- Preliminary program data provided by the City of Toronto indicate the Toronto Community Crisis Service has met one of its primary objectives by successfully diverting 78% of calls received from 911. From March 31st, 2022 to September 30th, 2022, the Toronto Community Crisis Service received 2,489 unique calls, including 1,530 from 911. Of these, 1,198 mobile crisis team dispatches were successfully completed. Emergency services were requested by mobile crisis teams in 4% of events responded to.
- Toronto Community Crisis Service mobile crisis teams provided a wide range of on-site supports including risk assessments, direct crisis care, facilitating access to information and resources, safety planning, and meeting basic needs.
- Mobile crisis teams made over 700 referrals to community-based follow-up supports and enrolled over a quarter of service users (28%) in post-crisis case management.

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- The cultural supports most commonly referred to included those for Africentric and West Indian/ Caribbean-centric supports and Indigenous-specific supports, which reflects and aligns with the previously identified underserved communities of interest.
- System-level capacity gaps in key support services such as housing, shelter and safe beds, and specific service subtypes like harm reduction and Indigenous-specific services have impeded mobile crisis teams' ability to successfully connect service users to needed follow-up supports.
- Toronto Community Crisis Service partners and staff showed a high level of individual and partner buy-in and willingness to collaborate, engagement in strong partnerships, and a collective commitment to continuous quality improvement.
- The Toronto Community Crisis Service core training curriculum emerged as a key implementation facilitator but one that was not equitably or sustainably implemented across partners. Expanding access across partners and revising core training content and processes that prioritize interpersonal interaction across intervention partners will support role clarity, trust, efficiency and effectiveness in service delivery, as well as reduce discrepancies in partner capacity and readiness.
- Adequate staff capacity and access to appropriate staff training and mental health supports are essential to promote workforce effectiveness and burnout prevention. Ensuring Toronto Community Crisis Service staff in all positions across partners have awareness of and access to ongoing training resources and workplace mental health supports will enable staff to successfully enact their respective roles for this intervention.
- Process improvements are required to increase role clarity, trust, efficiency and effectiveness in service delivery, particularly with regard to how Toronto Community Crisis Service staff and other first responders on site (police, fire and paramedic services) interact and work together with each other and with service users to meet service user needs.
- Existing technology and data system infrastructure is inadequate for the needs of the Toronto Community Crisis Service. Barriers include incompatible systems, duplicative processes, and differences in organizational capacity to meet data collection and reporting requirements. This context has increased the burden of data collection and reporting, impeding partners' overall capacity to participate in monitoring and evaluation; and negatively impacted the quality of resulting data. Quality improvement processes to improve the overall efficiency and quality of data collection and reporting have been identified and many are underway to mitigate challenges identified in this report.
- Race and disability data was missing at a rate of 96%. This critical data gap precludes determination of whether the Toronto Community Crisis Service is reaching its intended communities. Additional time and resources dedicated specifically toward quality improvement of sociodemographic data is essential to allow for evaluation of health equity and appropriateness across the intervention.
- Public awareness of the Toronto Community Crisis Service and community engagement activities have been limited to date; staff across partners report significant time spent explaining the intervention to service users in order to receive their consent. This, in turn, has increased burden on staff and created capacity pressures, particularly for 911 and Findhelp 211. While increased awareness is needed to reduce time spent by staff explaining the Toronto Community Crisis Service, increased awareness is also expected to yield an overall uptick in calls and sufficient staff capacity to manage this projected increase over time will be essential to sustainability.

In considering the primary and program data, and the varied implementation experiences and outcomes described across Toronto Community Crisis Service partners and staff, PSSP and Shkaabe Makwa evaluators developed a series of recommendations critical to continued successful implementation and future sustainability and scaling potential of the intervention. The recommendations listed here include a series of sub-recommendations or specific actions, which are detailed in the report body. In addition, recommendations are subject to the design and data limitations noted at the end of this report.

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Recommendations

1. Commit more time and space to partnership and engagement activities within the intervention.
2. Streamline communication and transition protocols between partners, particularly other first responders.
3. Increase support for data system implementation and quality improvement in data collection and reporting.
4. Dedicate time and resourcing toward strengthening sociodemographic data collection processes.
5. Implement a co-designed, centralized and sustained ongoing training curriculum.
6. Build organizational capacity in Indigenous cultural safety amongst all partners to support recruitment and retention of Indigenous staff.
7. Design and implement a deliberate and robust community awareness and engagement campaign that targets strategies to community needs.

Given the developmental and utilization-focused approach to the evaluation of the Toronto Community Crisis Service, immediate next steps include revising the intervention's evaluation framework to improve the quality and feasibility of existing indicators and data collection processes based on the results of the current report. Following this report, PSSP and Shkaabe Makwa look forward to leading the Toronto Community Crisis Service project partners through the co-design and implementation of a revised framework to reflect the outcomes and impacts of this intervention on the health, safety and wellbeing of service users and their communities, the service providers who serve them, and the health, social and justice systems in which they are embedded. These outcomes will be reported in a follow-up evaluation report in 2023.