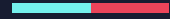


LCMH.ca



# Meeting you where you are at.



Lanark County  
Mental Health

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# Overview

Lanark County Mental Health, deeply embedded in our community, diligently addresses the mental health needs of adults and transitional aged youth aged 17 and older. Operating for over three decades under the Perth and Smiths Falls District Hospital, we offer a robust blend of confidential assessments and evidence-based treatments, guided by our mission to enhance well-being and self-determination. Our approach is defined by the integration of Measurement-Based and Stepped Care principles, ensuring that care is both data-informed and precisely tailored to individual needs. We strive to be a beacon of service excellence, empowering recovery and transcending barriers to improve the lives of those confronting serious mental health challenges.





# Services

1 Counselling & Treatment

2 Case Management &  
Community Support

5 Residential/Supportive  
Housing (Bridge House)

3 Crisis Intervention

4 Mobile Response Teams

6 Primary Care (NP, OT, RN,  
Psychiatry)

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# Access

Individuals, families and service providers can refer to LCMH for mental health services that are tailored to the client's need and in a location they prefer.

## How to make a referral?

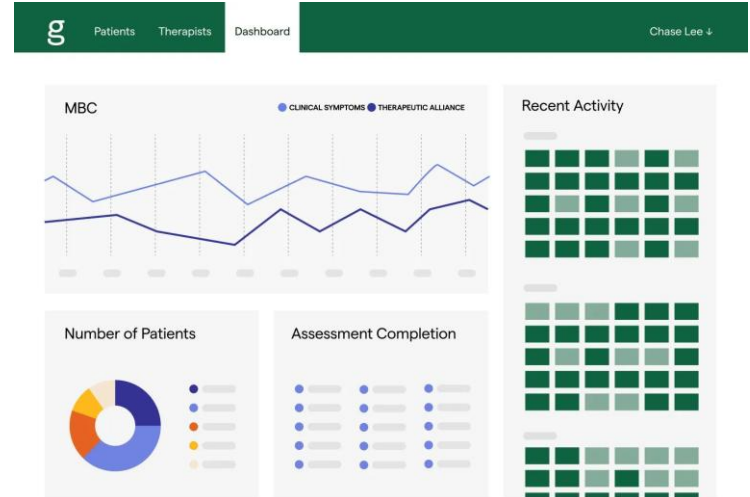
- LCMH.ca
- AssessMHA.ca
- Speak to your primary care provider
  
- Single session with Access & Waitlist Management Coordinator





# Measurement Based Care

One key aspect of our approach at Lanark County Mental Health is the use of a Measurement-Based Care (MBC) framework. MBC involves regular mental health assessments to monitor your progress and adapt your treatment plan, ensuring it remains aligned with your needs. This method places your goals and voice at the forefront of the care process, empowering you to actively participate in shaping your treatment journey.



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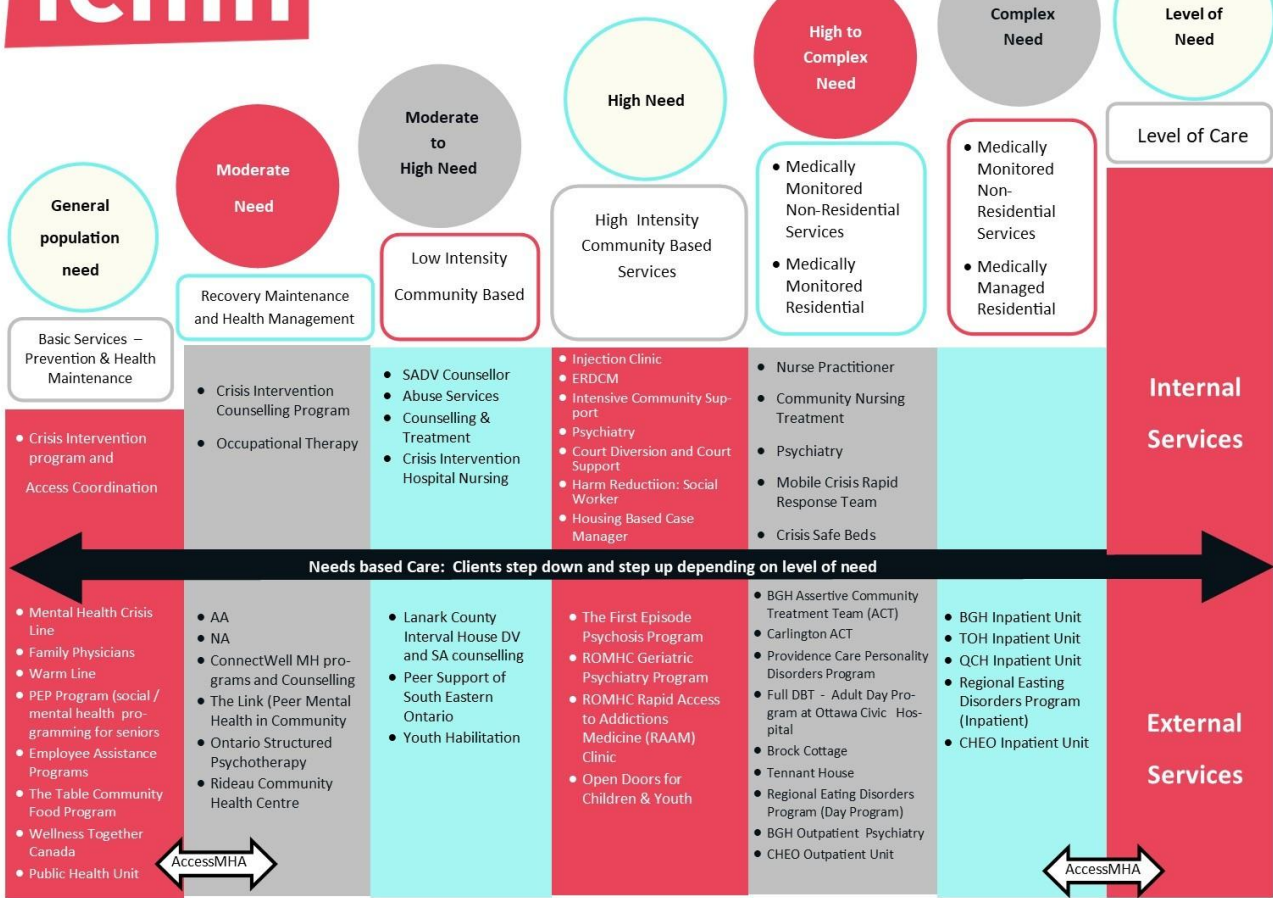
# Stepped Care

We implement a Stepped Care model to optimize treatment efficacy and efficiency. This approach provides a spectrum of interventions, from low-intensity self-help resources to more comprehensive therapeutic support, based on individual needs. The Stepped Care model allows us to dynamically adjust the level of care, ensuring that each client receives the right type of support at the right time.





# Stepped Care Model



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# Our funders & partners



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# Service Expansion



Housing

Whole Health



“Meeting you where  
you are at”




# Lanark Integrated Frontline Team

New mobile clinic offering healthcare, substance use support and social services.



# The data, the need. The opioid crisis in LGL.



In rural and remote areas of LGL, there is not enough access to harm reduction services. This is particularly true for individuals in high-risk environments such as encampments, rent-geared-to-income housing, and adult supportive housing.


- Fentanyl was involved in 70–90% of all reported overdoses (2018–2024).
- Fentanyl started to spike in 2021, with 43 reports (double the prior year).
- Polysubstance risk is high: cocaine, meth, heroin appear in 20–35% of reports depending on year.
- Voluntary reporting = undercount. Actual overdoses far exceed the Overdose Reporting Tool figures.

# The opioid crisis in LGL: hospital visits



- 11.4 emergency department (ED) visits per week on average for opioid and drug toxicity during the past year.
- 1.7 hospital admissions per week on average during the past year.
- ED visits remain elevated year after year across 2018 to 2024. **This is not a brief spike.**
  - Up to 23 emergency department visits in a single week during surges.
  - Up to 5 admissions in a week during spikes.
- Data shows recurrent upticks of hospital visits, suggesting periods of higher risk when the local supply is even more toxic.

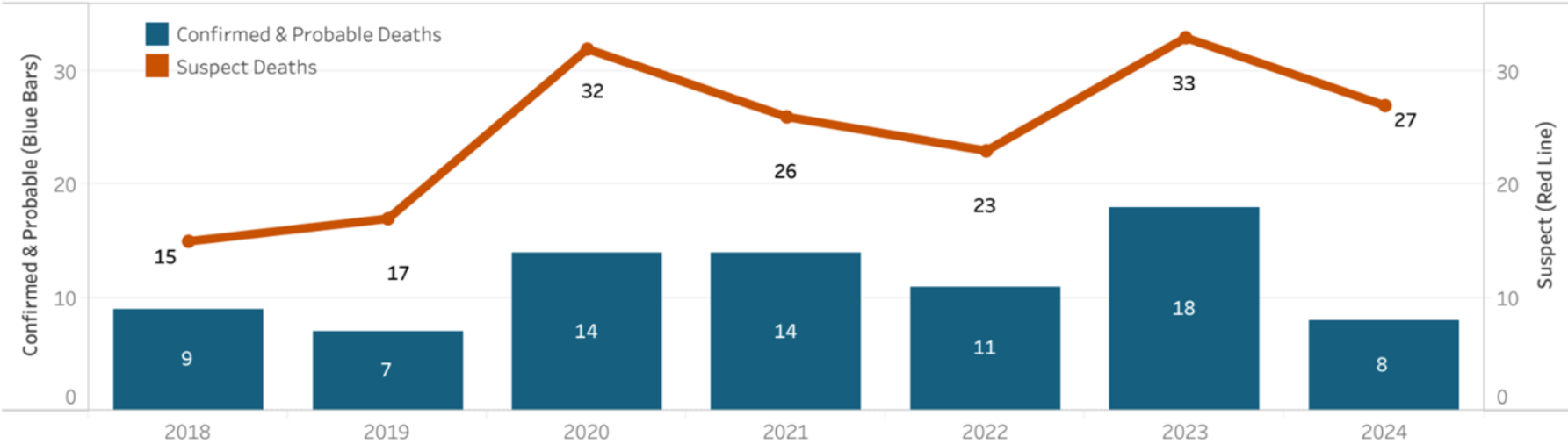
# The opioid crisis in LGL: deaths

-  Confirmed and probable deaths remain high:
  - 33 in 2022
  - 26 in 2023
  - 27 in 2024
- Deaths consistently above 5-year average of 12.8.
- Fentanyl detected in 18 deaths – #1 driver of mortality among drug overdoses.
- Toxic combinations are common: unregulated benzos (12), cocaine (16), methamphetamine (13)
- Most overdose deaths are accidental ( $\approx 88\%$ )
- Working-age adults are hit the hardest (age 30–54 are the majority)


# LGL opioid-related deaths



Trend in Opioid-Related Deaths by Classification for LGLDHU (Source: Office of Chief Coroner)



# LIFT: Mobile clinic, multidisciplinary care team

  
The Lanark Integrated Frontline Team (LIFT) is a new mobile clinic offering healthcare, substance use support and social services. We began operating mid-December.

The clinic van visits communities where our neighbours live and gather, such as encampments and community settings.

Team:

- Reid Burton, social worker
- Angie Wallace, paramedic
- Jessica Cooke, nurse practitioner

**Funding from Health Canada's Substance Use and Addictions Program. Funding runs until March 31, 2027.**

# Mobile. Flexible. Responsive



The Lanark Integrated Frontline Team is a mobile clinic offering healthcare, substance use support and social services.

- General health assessments
- Connections to services
- Counselling
- Substance use care
- Harm reduction supplies
- Housing support
- Referrals to withdrawal management
- Overdose awareness training
- Drug test strips

# Removing barriers to care



Reducing the strain on emergency healthcare services and enhancing client health stability.

The project expects to reach over 100 individuals annually:

- who use substances in high-risk settings
- with co-occurring mental health and substance use disorders
- facing social and economic barriers

Secondary service recipients:

- Bystanders, family members, and community members

# Accessible services on the move



Our mobile clinic van location changes daily, Monday to Sunday, throughout LGL. No appointment is needed, residents can simply come to where we are.

The mobile schedule will soon be posted to [liftlanark.ca](http://liftlanark.ca) (coming soon). The schedule changes weekly.

Reach us at (613) 283-2170, option 3 and [info@liftlanark.ca](mailto:info@liftlanark.ca).

We aim to respond within two business days. This is not an emergency service. Please call 9-1-1 for an emergency response.

# Impact to date (and we're just getting started)



Individuals served: 55

Client visits = 290

Nurse practitioner visits = 28

Total supplies distributed: 378

Test strips

Naloxone kits

Safer consumption supplies