

*Mental health policy **in action***

Enablers of knowledge flows
in the Quebec Ministry of Health and Social Services

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Authors, affiliations, sponsors

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Context

- In 2005: Quebec Ministry of Health and Social Services initiated reforms of the province's mental health care system (Mental Health Action Plan 2005-2010)
- **Key objective:** strengthen mental health services within primary care
- **Key action:** creation of mental health care teams within public-sector primary care services

Primary mental health care teams

- To be established in each local Health and Social Service Centre servicing a population of 50,000 or more
- Interdisciplinary teams consisting ideally of general practitioners, nurses, psychologists, social workers and other professionals
- **Functions:** Evaluation, treatment, referral, support
- A gatekeeper and important expert resource for primary care and mental health providers in the community

My involvement

- In 2008, in the first year of my PhD I was a trainee of the Research on Addictions and Mental Health Policy and Services (RAHMPS) strategic training program
- **Training requirement:** complete a Policy Practicum in a decision-maker / policymaker environment
- **My practicum:** Support the writing of a ministerial policy document aimed at structuring the development of Quebec's new primary mental health care teams

Policy practicum

- **Where:** In Mental Health Branch at Ministry of Health and Social Services in Quebec City
- **When:** From May 2009 until September 2009 (officially) or January 2011 (unofficially)
- **With whom:** Louise Latulippe, agent responsible for developing the policy document and André Delorme, Director of the Mental Health Branch
- **My role:** Assistant, writer, knowledge broker

Ministerial policy document

- Development process initiated in 2008
- **Purpose:** Provide clinical-administrative strategies that could support and structure the activities of primary mental health care teams and promote best practices in the care of adults with mental health problems
- **Content:**
 - Clarification of teams' role, membership and philosophy
 - Guidance regarding the teams' key clinical activities
 - List of helpful resources and tools

Policy making process and knowledge management

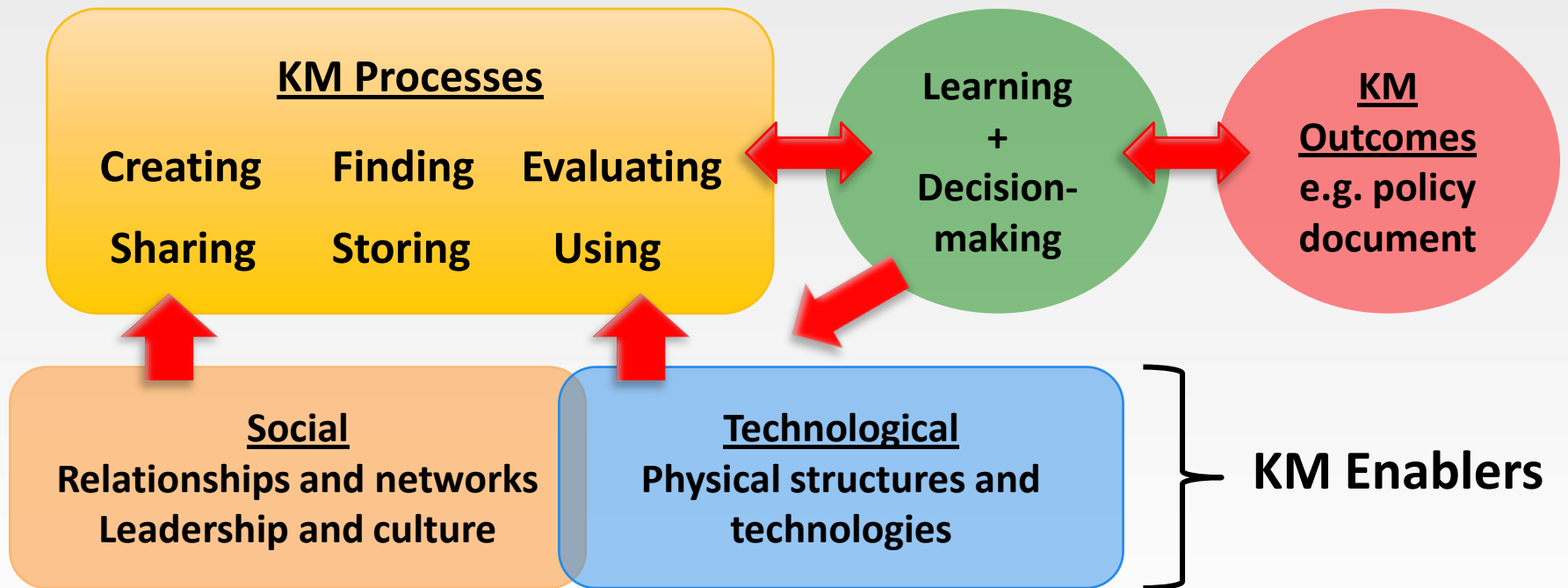
- There is great interest in understanding how health research informs policies and policymaking
- Literature suggests that the process by which research influences policy is non-linear and convoluted
- We still have much to learn about this process and knowledge management concepts offer a novel way of understanding how knowledge flows support the practice of policymaking

Knowledge management

- A concept that emerged in the 1990s as a response to major social and economic trends (e.g. digital revolution, globalization, complexity of modern organizations)
- Knowledge management (KM) is about making deliberate efforts to bring people, processes and technologies together in such a way that the knowledge needed for an organization to succeed is created, captured, shared and used¹

¹ Guptil (2005) J Health Care Finance, 31(3), 10-14.

Knowledge management model



- Inspired by: Orzano et al. (2008) Journal of the American Society for Information Science and Technology, 59(3), 489-505.

Finding knowledge & Enablers

- **Finding knowledge:** Locating and acquiring knowledge that may inform decisions and actions

Ministry Example	Social KM Enablers	Technological KM Enablers
Search for knowledge about best practices in care for anxiety and depressive disorders	Leadership and relationships of Director <ul style="list-style-type: none">➤ Conferences➤ Relationships with researchers + experts	Internet searches Phone calls, emails to researchers + experts
Search for knowledge on professional roles and responsibilities	<ul style="list-style-type: none">➤ Research advisory committee	Ministry library services Ministry Intranet (e.g. government reports)

Evaluating knowledge & Enablers

- **Evaluating knowledge:** Determining relevance, accuracy and value of knowledge for decisions and actions

Ministry Example	Social KM Enablers	Technological KM Enablers
Filtering and making sense of huge amount of information on practices for depressive/anxiety disorders (adults, elderly, special populations)	Meetings with ministry colleagues with relevant knowledge and experience Committee of experts	“VisAge” electronic newsletter Notes on articles, reports that were read

Sharing knowledge & Enablers

- **Sharing knowledge:** Transferring, exchanging and disseminating knowledge, often through interactions

Ministry Example	Social KM Enablers	Technological KM Enablers
Exchanges around the use of the Chronic Care Model to structure ideas about practices to recommend to teams	Expert committee Knowledge broker (me) Ministry colleagues Culture that values research and expert opinion	Internet, phone, videoconferences, email (Lotus Notes) Word processing with annotation (e.g. MS Word and track changes feature) Organization of space in Ministry building

Storing knowledge & Enablers

- **Storing knowledge:** Organizing and retaining knowledge so that it is retrievable for future use

Ministry Example	Social KM Enablers	Technological KM Enablers
Articles, guidelines, documents, ideas relevant to the policy document Drafts of the policy document	Committee of experts	“The Eye” electronic library (repository) Electronic and physical filing systems Summary notes following site visits

Using knowledge & Enablers

- **Using knowledge:** Applying knowledge to solve problems, inform decisions and support actions

Ministry Example	Social KM Enablers	Technological KM Enablers
<p>Using explicit and tacit knowledge to:</p> <ul style="list-style-type: none">➤ Define the problem and justify the guidance➤ Describe interventions and their effectiveness➤ Present information in a strategic (careful) way	<p>Input of director, experts, knowledge brokers, Ministry peers</p> <p>Culture that values research and expert opinion</p>	<p>Word processing</p> <p>Electronic and physical filing systems (taxonomies)</p> <p>Notes on meetings</p>

Creating knowledge & Enablers

- **Creating knowledge:** developing knowledge, know-how and understandings new to the organization

Ministry Examples	Social KM Enablers	Technological KM Enablers
Contextualization of stepped care, collaborative care models Primary care performance assessment	Exchanges with expert committee, knowledge broker, Ministry colleagues Team culture open to innovation	Word processing (e.g. figures) Email, phone Statistical software

Learning and decision-making

- Learning and decision-making takes place at individual, team, organizational levels and is facilitated by KM processes and enablers
- Example:
 - Decision to alter the focus of the policy document from anxiety and depressive disorders to essentially all mental disorders that can be cared for within primary care

Enhancing KM

- What would enhance KM for the Ministry team?
 - Transforming “The Eye” electronic library
 - Electronic bulletins tailored to their knowledge needs
 - Increased training in research and IT skills (e.g. face-to-face, webinars)
 - Create more spaces + opportunities for dialogue and exchange between ministry departments
 - Increased use of videoconferencing tools for exchanges with implementation sites (i.e. primary mh teams)

Conclusion

- Policymakers in the Quebec ministry of health operate in an environment that values and facilitates the flow of research knowledge to support policymaking
- By taking deliberate steps, the Ministry could create an even more enabling environment for KM and more effectively and efficiently pursue its mission
- A KM view of policymaking places novel emphasis on:
 - The social and technological aspects of policymaking
 - The role of explicit and tacit knowledge
 - The sharing, creating and learning processes that take place throughout the policy development process

Thank you!

Please email additional questions/comments to

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