

SUMMIT

Integrated Care Hub and Outreach Services





SUMMIT INTEGRATED CARE

SUAP Community Collaboration

For Those Struggling With Substance Use, Mental Health & Housing Challenges

Executive Summary

The Summit Integrated Care Program (Summit), will create a collaborative, peer-led social support and care delivery system for those struggling with mental health, substance use and housing by bringing together healthcare, public health and social service providers in the community.

Summit embodies a cohesive, individual-centered approach to care that creates a single point of access rooted in harm reduction, equity, diversity, inclusion, trauma and violence informed care for people who are struggling with substance use, addictions, mental health challenges and lack of housing. System navigation and coordination will focus on a variety of health care services, such as primary and acute care, harm reduction services, social services support, service referrals to treatment agencies and other not for profit agencies in the community.

The summit of mental health and addictions recovery is not a single peak to be conquered, but a continuous ascent – an evolving journey rather than a final destination. Some days, the summit feels within reach – clarity, resilience standing tall before us. Other days, the path is obscured by fog, the weight of the climb pressing down. The climb is not easy; it demands support, resilience, self-awareness and strength to navigate. Each step taken is towards higher ground, where the air is clearer, and the view is one of hope.

Summit aims to reduce barriers to care, improve access to essential services, and foster a sense of community for individuals facing substance use, addiction and mental health challenges. The project will be delivered through a fixed location in Brockville and through a supportive outreach team, that will extend throughout Leeds and Grenville. The fixed site will create a safe, inclusive, non-stigmatizing, respectful and coordinated one stop access point for vulnerable individuals and will provide them with access to basic needs items, nutritious snacks, harm reduction single use supplies, wound care supplies and health care navigation. The outreach team will strive to provide access to individuals who may be hesitant or unable to attend the fixed location or those who are discharged from various services after regular hours. Summit is a community united in navigating the journey, together.

Mission: To break the cycle of stigma, improve mental health outcomes, and reduce addiction-related harm by delivering integrated services, raising awareness, and engaging the community. To improve health outcomes in underserved communities by providing integrated, accessible, and compassionate care through coordinated efforts of healthcare providers, Community Paramedics, and community partners.

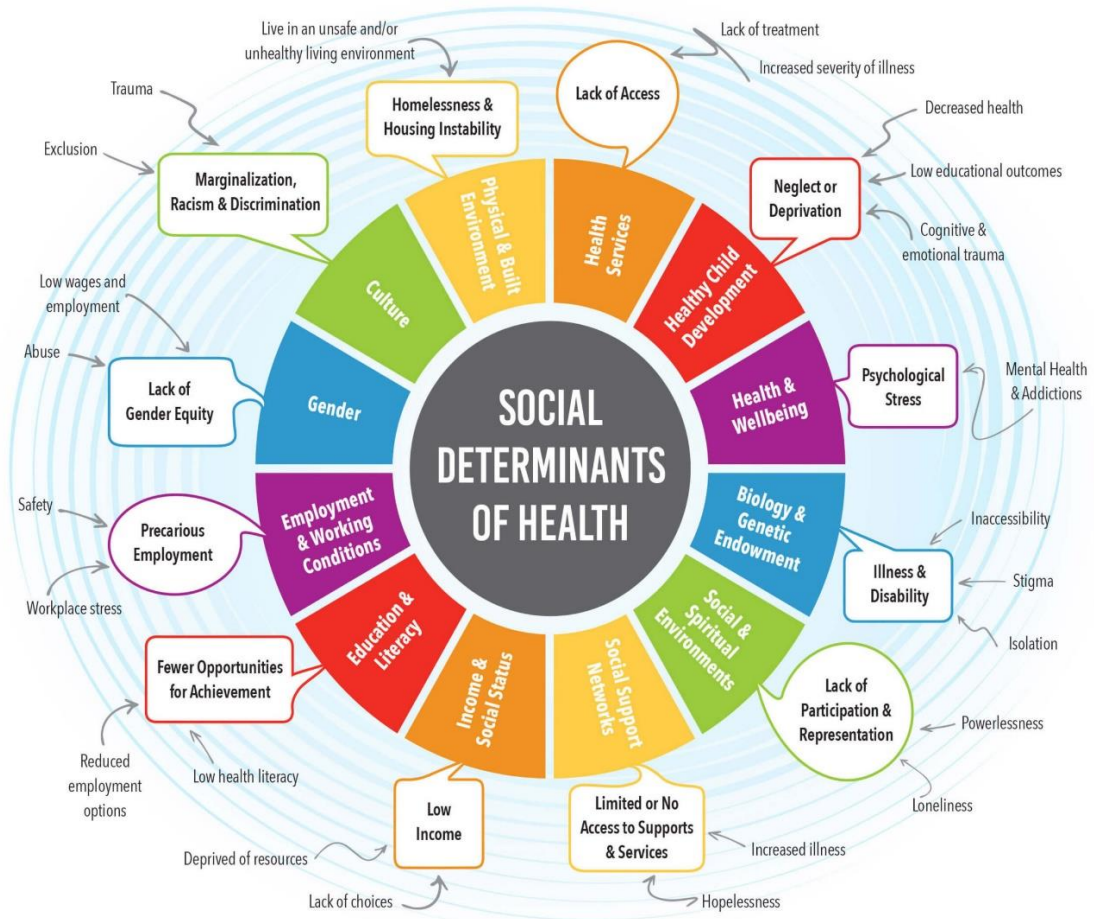
Vision: A community where individuals with substance use and addiction challenges are treated with dignity, supported in their challenges and empowered to thrive. To become a leading model of community-based, interdisciplinary healthcare delivery, empowering individuals to manage their health and reducing reliance on emergency services.



Many communities, particularly rural and underserved urban areas, face significant barriers to accessing healthcare services. These include geographical isolation, shortages of healthcare providers, and socioeconomic factors that exacerbate health disparities. The result is a heavy reliance on emergency services, often for non-urgent issues that could be managed more completely through primary or preventive care.

This operating plan details the framework, operations, and key processes necessary to ensure the success of Summit. It emphasizes the organizational structure, staffing, workflows, service offerings, community connections and strategies for long-term sustainability.

FIGURE 1: SOCIAL DETERMINANTS OF HEALTH AND WELL-BEING¹⁴



Core Components of the Summit Program:

1. Primary Care / Community Paramedic & Outreach Medical Services:

- **Goal:** To provide accessible, person-centered healthcare for individuals facing substance use, mental health and addiction challenges.
- **Activities:** Provide NP led primary care services with Community Paramedic support for Summit clients in the fixed site location, in addition to providing services for individuals that may be averse to accessing traditional care pathways in their own environment on their own time through our Outreach Medical Services activities.

2. Peer Navigation / Referral Services:

- **Goal:** To provide a single point of access to coordinated care that is peer led for people who are struggling with mental health, substance use and housing by leading individuals through the health care and social services system at a pace most suitable for their needs.
- **Activities:** Collaborating with local organizations, healthcare providers, law enforcement, and social services to establish and implement referral pathways of support that will lead to a coordinated, holistic response that addresses both the medical and social determinants of health.

3. Peer Support Networks:

- **Goal:** To empower individuals with lived or living experience to support others in their journeys.
- **Activities:** Establishing peer-led support groups and mentorship programs, where individuals can share experiences, provide emotional support, and offer practical advice.

4. Harm Reduction:

- **Goal:** To increase the availability of harm reduction services to clients and to provide education and training to community partners, when needed.
- **Activities:** Provide single use harm reduction supplies to clients, include safe disposal methods. This includes the provision of Naloxone and any training required.

5. Education and Public Awareness:

- **Goal:** To educate the public about mental health and addiction, dispel myths, and reduce the stigma that prevents individuals from seeking help.

Impact and Outcomes:

Summit is committed to measurable outcomes, including:

- To increase by 90% the total number of people accessing the Summit integrated care hub and outreach services who are connected to one or more partner agencies and retained in care for longer than 3 months by the end of April 2027.
- To increase by 70% the number of people accessing the Summit integrated care hub and outreach services who report positive interactions with local service providers, including but not limited to, reduced stigma and discrimination, improved relationships with community partner agencies etc. by the end of March 2028.
- To have 80% of the staff recruited for positions directly funded by the SUAP grant identify as having lived or living experience with mental health, substance use and/or homelessness by the end of March 2028.

By addressing mental health and addiction challenges through a multi-faceted approach, the Summit Program is leading the charge toward a healthier, more inclusive community. It provides a roadmap for overcoming stigma, fostering resilience, and building supportive environments where individuals can heal, recover, and thrive.



Core Values:

- **Collaboration:** Foster strong partnerships among healthcare providers, Community Paramedics, social services, and community groups.
- **Accessibility:** Ensure healthcare and social services are accessible to underserved and marginalized populations.
- **Innovation:** Implement cutting-edge solutions to deliver preventive, acute, and chronic care efficiently.
- **Holistic Care:** Address medical, mental, and social needs to improve overall quality of life for individuals and communities.

1. Organizational Structure

Governance and Leadership

Summit will be guided by a Core Group of community partners, coupled with the education and advice of a greater Advisory Committee, comprising representatives from key stakeholders, including local healthcare organizations, emergency services, social services, and community organizations. The Core Group will provide strategic direction, approve budgets, and set long-term goals for Summit direction, while the Advisory Committee will provide community input, guidance and discussion for collaborative program development.

Key Collaboration:

1. **Community Paramedics:** Community Paramedics are specially trained to provide healthcare beyond emergency responses and are increasingly being recognized as a vital resource in addressing these gaps. A peer-led community program that links Community Paramedics with healthcare providers, social services, and substance use professionals can bridge this gap and create a more effective, patient-centered system. This includes trained Community Paramedics who provide healthcare services, home and community visits, substance use and health literacy, wound care and chronic disease management.
2. **Clinical Services:** Collaborates with local healthcare providers (e.g., primary care physicians, health care practitioners, specialists) to ensure patients receive comprehensive care, including virtual care options.
3. **Public Health:** Offers Naloxone (with training) and harm reduction supplies and support, through single use items and safe sharp disposals.
4. **Social Services and Case Management:** Provides assistance with navigating housing, employment, food security, and other social services.
5. **Community Engagement and Outreach:** Leads efforts to involve the community in health education, prevention, and promotion initiatives.
6. **Government:** As a major funder, Health Canada will help guide and monitor the project to ensure it meets its objectives.
7. **Partner Agencies with Common Goals:** Collaborate with both the United Counties' Supportive Cabin Project and the Lanark, Leeds and Grenville HART Hub to ensure maximum synergy.

2. Staffing and Roles

To ensure the effective operation of Summit, staffing must be adequate, multidisciplinary, and appropriately trained. The program will employ individuals with a wide range of expertise to cover medical, social, psychological, and logistical needs.

Key Staff Positions:

1. Summit Project Coordinator

○ Responsibilities:

- Implement and design improvements to harm reduction services, health care services, substance use treatment in support of the project's work plans.
- Development of programming to reduce barriers to care, improve access to essential services and responsible for planning a comprehensive evaluation framework for the program. Data collection and key performance indicators, managing needs assessment, and making recommendations for improvement based on best practices, develop evaluation procedures for recording program outcome.
- Support a comprehensive communication and engagement strategy in collaboration with all partners and communities.
- Manages the day-to-day operations of the project.

2. Community Paramedics

○ Responsibilities:

- Provide health supports, disease management, wellness checks and emergency interventions.
- Conduct assessments and support treatment plans for patients with complex health needs.
- Provide preventive care, wound care, point of care diagnostics, vaccinations, and health education. Substance use and mental health crisis response. Trauma informed care and cultural competency.

3. Nurse Practitioners

○ Responsibilities:

- Provide clinical oversight, assist with patient assessments, and coordinate in-person and virtual care visits.
- Work with paramedics and team members to ensure continuity of care for patients requiring ongoing medical attention.

4. Health Systems Navigators

○ Responsibilities:

- Assist clients with navigating social services, including housing, employment, and financial support.
- Work with team members to develop care plans that address both medical and social determinants of health.
- Coordinate with community organizations to offer additional resources to clients.

5. Peer Support Workers

○ Responsibilities:

- Establishing peer-led support groups and mentorship programs, where individuals can share experiences, provide emotional support, and offer practical advice.

6. Administrative and Support Staff

○ Responsibilities:

- Manage scheduling, client records, administrative support and coordination with partner agencies.
- Ensure smooth operations by maintaining supply chains, managing logistics, and handling communications.

Staff Training and Development:

Staff training is essential for maintaining high standards of care and ensuring that the multidisciplinary team can work together effectively. Key training areas include:

- **Interdisciplinary collaboration:** Ensuring Community Paramedics, healthcare providers, and social services staff understand each other's roles and can work seamlessly together.
- **Cultural competency:** Staff will undergo training on how to effectively engage with diverse populations, considering cultural, language and socioeconomic differences.
- **Technology training:** Training on virtual care and assessment platforms, electronic health records (EHR) systems, and other digital tools.
- **Trauma-informed care:** Ensuring that all staff are trained in trauma-informed approaches to healthcare delivery, particularly for populations with substance use and mental health challenges or those experiencing homelessness.

3. Service Delivery Model

Summit is designed to deliver coordinated, patient-centered services that address both the medical and social needs of the community. Services will be offered in a variety of settings, including homes, clinics, community centers, outreach locations and through virtual platforms.

Care Coordination:

Summit will serve as a central coordinating entity, ensuring that patients receive timely and appropriate care through collaboration with various service providers. Care coordination will be managed through:

- **Care Teams:** Multidisciplinary teams, including Community Paramedics, Nurse Practitioner, social workers, and substance use health professionals will meet regularly to review patient cases and adjust care plans as needed.
- **Shared Electronic Health Records (EHRs):** A centralized EHR system accessible to Summit healthcare providers to track patient care and progress in real time.

- **Systems Navigation:** Health Systems Navigators will act as patient navigators, ensuring that individuals are connected to the services they need, such as primary care appointments, specialist referrals, or social services.

Service Offerings:

1. Referral Services

- Summit will offer referrals to community agencies such as substance use and addiction treatment services, mental health services, housing, and other social service programs.

2. Primary Care and Chronic Disease Management

- Summit will provide routine care to patients with chronic conditions, such as substance use, diabetes, wound care, hypertension, and heart disease, in community settings or in home. This will include monitoring vitals, adjusting medications in collaboration with physicians, offering health education and direction to specialized substance use supports.

3. Emergency and Urgent Care

- Summit Community Paramedics will continue to provide urgent and emergency care but will continue to develop non-emergent services that prevent hospitalization or emergency department visits in support of substance use and addiction.

4. Preventive Care and Health Education

- Summit will offer vaccination programs, harm reduction support, health screenings, and community health education workshops. Summit will engage in preventive health activities, such as medication compliance, wound care and administering vaccines during health visits.

5. Social Services and Support

- Social Workers and Health Systems Navigators will assist clients with applying for housing, accessing food support programs, managing financial assistance, securing transportation to medical appointments and offering guidance on diet, exercise, substance use and harm reduction. They will also coordinate with local agencies to ensure patients receive the necessary support to meet their non-medical needs.



Technology Integration:

1. **Virtual Care:** Patients requiring specialist consultations or immediate physician or nurse practitioner guidance will have access to virtual care services. Summit Community Paramedics will determine the need and use during community, home or clinic visits, allowing real-time consultations or referrals to other healthcare providers.
 2. **EHR System:** Summit will utilize a secure EHR system to store and manage patient records, enabling seamless communication between Summit, healthcare providers, and social services.
 3. **Mobile Health Applications:** Clients may have access to remote patient monitoring where appropriate and/or mobile apps that allow them to monitor their health, schedule appointments, and communicate with Summit care providers.
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4. Operational Workflow

Efficient workflows are critical to ensuring that Summit operates smoothly and effectively. The following outlines the typical workflow for Summit service delivery:

Step 1: Client Identification and Referral

Summit clients will be identified through various channels:

- **Emergency Services:** Patients frequently using emergency services for substance use, mental health and addiction related issues may be flagged and referred to Summit.
- **Community Referrals:** Local clinics, hospitals, social services, and community organizations can refer individuals to Summit for follow-up care, harm reduction supports or chronic disease management.
- **Outreach Programs:** Summit will conduct regular community outreach activities, such as health clinics, where individuals can be introduced, screened and referred for ongoing supportive care.

Step 2: Initial Assessment and Care Planning

Upon referral, a Summit health care professional will conduct an initial assessment, which will include:

- **Health assessment:** Identifying medical conditions, medications, and any urgent harm reduction or immediate health needs.
- **Social needs assessment:** Identifying any social determinants of health that may impact the patient's well-being, such as interest or need for substance use supports, housing insecurity or lack of access to food.

A multidisciplinary care team will then help to create a **personalized support plan** that outlines the services the patient may receive from Summit and its partners.

Step 3: Service Delivery

- **Health visits:** Summit Community Paramedics and Health Systems Navigators will visit patients in their homes, respective locations or clinics to provide direct care, harm reduction supports, substance use supports, health and medication reviews and education, and offer preventive services.
- **Virtual Care:** For clients requiring specialist care, virtual consultations can be arranged, often during in-person visits with the Summit health care provider present if appropriate.
- **Social service coordination:** Summit Community Paramedics and Health Systems Navigators will support clients to receive the ongoing social supports they need, such as access to harm reduction supplies, assistance to connect with housing and financial supports or access to food security.

Step 4: Ongoing Monitoring and Follow-Up

Summit care teams will meet regularly to review client progress and adjust supportive care plans as needed. Clients with chronic conditions and ongoing needs will receive **regular follow-up visits** from Summit Community Paramedics and Health Systems Navigators to help support attending appointments, primary care connections and accessing regularly needed substance use and harm reduction resources.

5. Community Engagement and Partnerships

Community involvement is critical for the success of Summit programming. Summit will actively engage local leaders, organizations, and residents to ensure services meet the needs of the population.

Partnership Development:

1. **Local Healthcare Providers:** Partnerships with public health, clinics, hospitals, community and primary healthcare providers will ensure that clients have access to necessary medical services beyond the scope of Summit.
2. **Social Services Agencies:** Collaborations with housing authorities, food banks, and financial assistance programs will provide Summit clients with comprehensive support to address social determinants of health.
3. **Community Organizations:** Summit will work closely with community service providers, harm reduction services, local drop-in services and supportive housing organizations to conduct outreach and deliver services to hard-to-reach populations.

4. **Government:** Partnership with the project’s funder, Health Canada, to ensure project meets the requirement in the Project’s Contribution Agreement.

Community Outreach Initiatives:

1. **Health Education Workshops:** Summit will offer free workshops in community centers, drop-in programs, and other public spaces to educate clients on health topics, including substance use resources, harm reduction strategies, chronic disease management, preventive care, and mental health awareness.
2. **Mobile Health Clinics:** Summit will operate mobile health units that bring services directly to communities, conducting screenings and offering substance use education, harm reduction services and basic medical care in underserved areas.
3. **Volunteer Programs:** Community members will be encouraged to participate in volunteer programs that support Summit’s mission, such as assisting with outreach events or providing needs or logistical support.



6. Evaluation and Continuous Quality Improvement

Summit will implement a rigorous evaluation framework to monitor the quality of care, client outcomes, and overall operational efficiency. Key performance indicators (KPIs) will include:

- **Patient health outcomes:** Tracking improvements in substance use and addictions, chronic disease management, mental health, and preventive care.
- **Patient satisfaction and engagement:** Collecting feedback through surveys and focus groups to assess client satisfaction with services.
- **Community impact:** Measuring improvements in community health, access to services, and social supports with respect to substance use, addictions services and outcomes.

Summit will continuously review data and adjust services to improve care delivery and outcomes.

7. Sustainability and Financial Model

The long-term sustainability of Summit will depend on securing a diverse range of funding sources and establishing cost-effective operations.

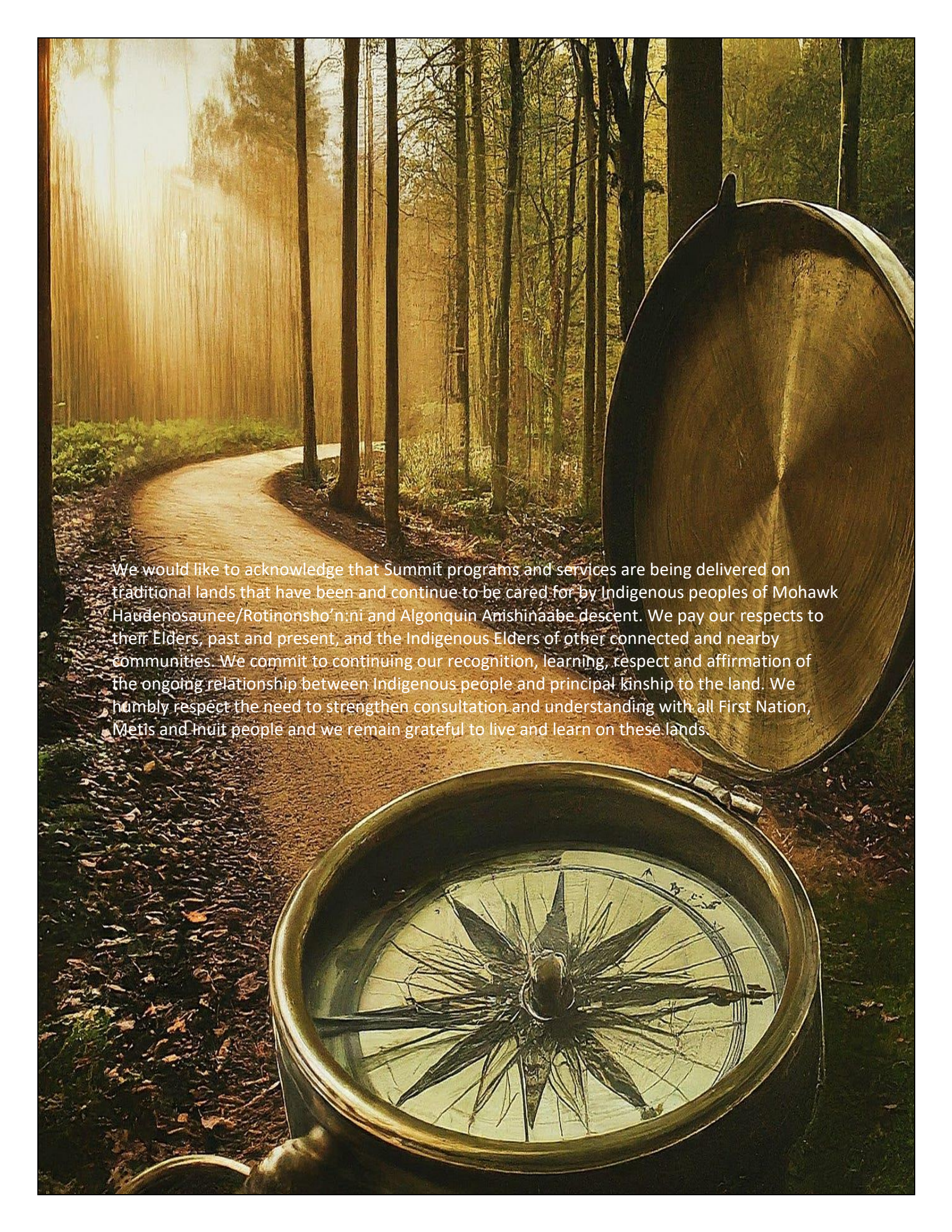
Revenue Streams:

1. **Government Grants:** Continuing to secure future federal, provincial and local funding through healthcare and public health grants.
2. **Philanthropy and Donations:** Engaging local businesses, foundations, and community members to support the program through contributions where appropriate.
3. **Partnerships:** Developing partnerships with healthcare providers who may contribute resources and staffing to support shared community service objectives.



Conclusion

Summit represents a transformative approach to healthcare, providing holistic, community-centered services that address substance use and addictions, medical, mental health, and social needs. By focusing on collaboration, accessibility, and innovation, Summit will strive to improve health outcomes, reduce emergency department utilization, and empower underserved populations to manage their health journey. Through strong partnerships, sustainable funding models, and continuous quality improvement, Summit will serve as a model for integrated, interdisciplinary care delivery in communities across the region.

A photograph of a forest path. In the foreground, a brass compass is open, showing its intricate needle and markings. The path is dirt and covered with fallen leaves, curving through a dense forest of tall, thin trees. Sunlight filters through the trees, creating a warm, golden glow. The compass is positioned in the lower right, and the path leads towards the upper left.

We would like to acknowledge that Summit programs and services are being delivered on traditional lands that have been and continue to be cared for by Indigenous peoples of Mohawk Haudenosaunee/Rotinsonsho'n:ni and Algonquin Anishinaabe descent. We pay our respects to their Elders, past and present, and the Indigenous Elders of other connected and nearby communities. We commit to continuing our recognition, learning, respect and affirmation of the ongoing relationship between Indigenous people and principal kinship to the land. We humbly respect the need to strengthen consultation and understanding with all First Nation, Metis and Inuit people and we remain grateful to live and learn on these lands.