

PROVINCIAL ASSESSMENT CENTRE
Family and Caregiver Handbook

LAST UPDATED: NOVEMBER 2024

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We want to acknowledge with great gratitude and appreciation that the Provincial Assessment Centre (PAC) and the Outreach Team are located on the unceded, traditional and ancestral lands of the kʷikʷəł'əm First Nation.

The səmiqʷəʔelə lands, meaning "Place of the Great Blue Heron", embody a sanctuary of healing. This name, bestowed by the kʷikʷəł'əm people, historically represented a refuge of safety before the onset of colonization. We are grateful to the kʷikʷəł'əm people for their ongoing stewardship, which has cultivated a healing environment for individuals seeking care at the həyχʷət kʷəθə šxʷhəliʔ leləm (Healing Spirit House).

This handbook outlines helpful information about the Provincial Assessment Centre (PAC) program and was created for the families and caregivers of individuals attending PAC. It can also be used as a helpful tool to help your loved one better understand what their time at PAC will look like. This handbook was a collaborative effort between staff, Lived Experience partners, patients at PAC, and their loved ones who want to use their voice help make improvements.

We hope this handbook will be a helpful resource to you before, during, and after your loved one's time at PAC. Although not possible to reflect the enormous diversity in family and individual circumstances, we have made every effort to honour different experiences. In this handbook, a loved one is anyone who is identified by the individual as an important support in their treatment and recovery. This person may be involved in various parts of their care and decision-making and may include immediate and extended family members, friends, caregivers, community support workers and others unique to their experience and can change over time.

We welcome and encourage your partnership and support, and are committed to providing you with all the information you and your loved one needs to have a positive experience at PAC.

Important Phone Numbers

Front Office: 604-660-0228

Unit: 604-660-0234

PAC Location: 3rd Floor, 2721 Lougheed Highway
Coquitlam, B.C.
V3C 4J2

PAC is located in Coquitlam, at the həyχʷət kʷəθə šxʷhəliʔ leləm (Healing Spirit House). Free parking is available on site, and it is accessible by public transportation.

About BC Mental Health and Substance Use Services

BC Mental Health and Substance Use Services (BCMHSUS), part of the Provincial Health Services Authority (PHSA), provides highly specialized assessment and treatment for people across British Columbia with complex mental health, developmental disabilities and substance use issues. You can learn more about our other services on our [website](#).

The Provincial Assessment Centre (PAC) is a part of BCMHSUS and provides specialized treatment for people across British Columbia with intellectual and/or developmental disabilities experiencing complex mental health and/or behavioural challenges.

Our Commitment to You

PAC is dedicated to empowering individuals, families, and caregivers with the assistance they need. We believe that fostering healthy, supportive relationships and attachments is essential for leading fulfilling and meaningful lives. Our commitment extends to collaborating closely with individuals, their families, caregivers, and the wider community. This specialized assessment and treatment resource can be of great value to families, caregivers, and professionals, ensuring coordinated and focused assistance that helps identify the most effective treatments and supports for those they care for.

For more information about referrals, please read: [Provincial Assessment Centre Referral webpage \(bcmhsus.ca\)](#)

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We acknowledge with gratitude the many voices, perspectives, and experiences that have contributed to the development of this handbook. The patients and families who have contributed to its creation have walked the path and, with their guidance, we have created this resource based on what they wish they had known about the Provincial Assessment Centre before accessing its services. There has been a sincere effort to make this resource as accessible as possible. We hope you find it useful.

Introduction to Provincial Assessment Centre

Description of Provincial Assessment Centre's Services

The Provincial Assessment Centre (PAC) is designated as a tertiary mental health service (specialized care for serious and persistent illness whose care needs extend beyond the regional health resources) under the Mental Health Act for individuals 14 years and older with developmental disabilities who are experiencing mental health and/or behavioural challenges.

Our goal is to establish continuity of care while developing comprehensive multidisciplinary care and safety plans. PAC is comprised of an inpatient program and an outreach program, working to provide the best approach for support and treatment.

The PAC inpatient program provides short term assessment, behavioral stabilization, and treatment. Individuals are assessed by an interdisciplinary team in a holistic model. The general length of this component is about three months.

In addition to providing short-term assessment and treatment, PAC also provides outreach supports virtually to individuals, families/caregivers, and community partners. The PAC Outreach Team is a multidisciplinary team that consists of a social worker, behavioral consultant, nurse, occupational therapist, and psychiatrist.

The PAC Outreach Team supports individuals across B.C. in one of two pathways, outlined below. Both pathways are short-term services with the aim of assessing an individual's current needs and providing recommendations and knowledge-transfer services to the individual and their community-based support team. The Outreach Team will conduct their work predominantly through virtual remote support. If an individual and their community team believe in-person support/assessment is necessary, this can be discussed with the PAC team, who will determine whether this request can be accommodated logistically.

Pathway A: Transition Services

The purpose of this pathway is to aid with an individual's transitions to and/or from their inpatient stay at PAC, and their community setting. This is to ensure that assessment information gathered is shared across settings, to help enable smooth transitions.

Pathway B: Community Support Services

The purpose of this pathway is to provide support to individuals in the community. This may be a suitable option for individuals who are not suitable or necessary candidates for an inpatient setting.

The PAC Team

The multi-disciplinary team at PAC includes physicians, psychiatrists, psychologist, occupational therapist, social worker, dietitian, behaviour consultant, art therapist, registered nurses, recreation therapist, pharmacist, and mental health support workers. As needed, patients may be assessed by neuropsychiatrist and a speech and language therapist. They may also get connected to an Indigenous Wellness Keeper.

PAC Building

PAC and the Outreach Team are located at the hə́yχʷət kʷθə ʃxʷhəliʔ leləm (Healing Spirit House) located on the səmiqʷəʔelə lands in Coquitlam, B.C.

The PAC inpatient program consists of 10 beds. The facility includes individual bedrooms, three distinct areas, four lounge areas, shared washrooms (two bedrooms have their own washrooms), an art and library room, family visitation room, fitness room and two outdoor patios. There is also a physician examination office, staff meeting rooms and administration offices.

PAC is staffed 24 hrs/day with nurses and health care workers who provide direct patient care. PAC also has an on-call physician and psychiatrist for after-hours.

PAC shares many similarities with other mental health facilities and operates in accordance with the Mental Health Act. Our facility is equipped with secured doors, ensuring that individuals admitted involuntarily cannot leave the unit without the approval of the psychiatrist overseeing their care, prioritizing their safety and well-being.

As a mental health facility, PAC has two secure rooms, which are up to the provincial standards. These are only used when all other options have been tried, and on a temporary basis if an individual presents a safety risk to themselves or others. The PAC team strive to prevent escalations in behavior through a relationship-based approach. Additionally, robust protocols are in place to ensure that the use of these rooms prioritizes physical and psychological safety.

Accessibility

- PAC is located on the third floor.
- The main entrance is wheelchair accessible. There are curb cuts located in the sidewalk between the drop off area and the front entrance, as well as within the parkade.
- All visitor washrooms are accessible.

Food and Housekeeping

We are dedicated to delivering exceptional service and quality meals, prepared by our skilled in-house cooks. Each dish is freshly made, reflecting the comfort and care of a home-cooked meal. Individuals can enjoy a thoughtfully curated four-week menu cycle that aligns with the guidelines of the Canadian Food Guide. We are also committed to accommodating therapeutic diets, such as those for diabetes, as well as various food preferences, including portion sizes and vegetarian or vegan options.

Upon arrival, clients receive a comprehensive bedroom cleaning schedule, ensuring a clean and comfortable living environment. Additionally, all shared washrooms are cleaned daily, maintaining high standards of hygiene and cleanliness throughout the facility. This commitment to cleanliness and quality extends to all aspects of our services, enhancing the overall experience for everyone in our care.

Mental Health Act and Individual Rights

For many individuals and families, admission to a mental health facility is new and unfamiliar. There are important things to know both about how designated mental health facilities operate and what rights individuals and families have. Below is information about the *Mental Health Act* and admission to a designated mental health facility.

Client rights	Family rights
<p>Clients at the centre have the right to:</p> <ul style="list-style-type: none"> ✓ Be treated with dignity and respect ✓ Privacy and confidentiality ✓ Be viewed as a person who can change, grow, and be positively connected with their family ✓ Be a partner in their own treatment ✓ Have their culture recognized as a strength and request services that respect their culture and beliefs ✓ Ask that their personal care plan recognize their individual strengths as well as needs, limitations, and challenges ✓ Learn from any past mistakes and not to be viewed only in terms of those mistakes ✓ Hear messages of hope throughout treatment ✓ Receive care from people who know how to help them build upon their strengths and competencies ✓ Participate in their treatment plan rather than to have a plan developed for them, by others ✓ Set their own goals regarding substance use and other health issues 	<ul style="list-style-type: none"> ✓ Be treated with respect ✓ Ask for and receive help ✓ Receive appropriate information on your loved one's illness and treatment, with consent ✓ Receive necessary information to support your loved one, with consent ✓ Receive comprehensive information that may be useful in the care of your loved one ✓ Visits and connection with your loved one ✓ Protect your own health and well-being

Understanding the Mental Health Act

Every province has a law that governs how someone living with a mental illness should be protected and treated. Under the B.C. Mental Health Act, the Provincial Assessment Centre is recognized as a designated provincial mental health facility.

Individuals can be admitted to PAC voluntary or involuntary. If you are certified under the Mental Health Act, you can receive treatment for a mental disorder against your will. A medical professional can certify you for involuntary mental health treatment if you:

- Are suffering from a mental disorder that seriously impairs the person's ability to react appropriately to their environment or to associate with others.
- Requires psychiatric treatment in or through a designated facility.
- Requires care, supervision and control in or through a designated facility to prevent the person's substantial mental or physical deterioration or for the person's own protection or the protection of others.
- Not suitable as a voluntary patient.

Being certified under the Mental Health Act is used as a last resort.

If someone is involuntarily admitted to the Provincial Assessment Centre, they have rights under the Mental Health Act, including the right to:

- Know the name and location of the facility and ward to which they have been involuntarily admitted
- Know why they have been involuntarily admitted to the facility
- Get advice from a patient advocate lawyer about the admission at any time
- Look at the documents authorizing their involuntary admission to ensure that they have been treated according to the law

For more information, search for the B.C. Mental Health Act online. You can also find a list of these rights and more information in the links below:

- <https://www2.gov.bc.ca/assets/gov/health/forms/3513.pdf>
- <https://irasbc.ca/>

Referrals to PAC and the Admission Process

PAC accepts referrals from Community Living BC (CLBC) and Ministry of Child and Family Development (MCFD). Typically, a PAC referral occurs when available regional health services have not been able to facilitate significant improvement in the individual's situation. This may include cases where the individual is at risk of self-harm or poses a danger to others, or when the underlying causes of certain symptoms or behaviors remain unclear, indicating that further inpatient assessment may be beneficial. During this process, referral agents and families are encouraged to connect with our Access and Discharge Coordinator for any questions or to obtain updates regarding the status of the referral. Our team is committed to providing timely communication and support to ensure that all stakeholders are informed and engaged throughout the referral process.

Eligibility Criteria

1. Developmental disability and a mental illness and/or behavioral issues
2. 14 years of age or older
3. Requires care in an inpatient care facility because other community and treatment supports have not resolved health and/or safety concerns
4. Individuals have dual diagnosis and qualify for CLBC services or will be eligible if under 18 years of age

Admission Criteria

- A Community Living BC facilitator/analyst, or Ministry of Child and Family Services staff member in the case of youth, must be involved in the care of the individual.
- The individual's caregivers and support network must agree about the referral.
- Individuals must be medically stable at the time of admission. If an individual has been stabilized in a hospital setting, they can be considered for admission with their community care team's commitment to ongoing care.

Section 18 of the *Mental Health Act* prevents us from admitting in situations where we believe we are not able to provide “adequate treatment and care” because our location is not suitable, because the individual does not have a mental illness, or because the individual cannot be adequately treated and cared for because of their mental illness.

Referral Process

The referral process generally starts with a phone call to the PAC Access and Discharge Coordinator to discuss the individual's current situation. Referral information can be found here: [Provincial Assessment Centre Referral \(bcmhsus.ca\)](http://bcmhsus.ca)

- **Step 1:** Please contact PAC directly at 604-660-0228 ext. 336525 or PACReferrals@phsa.ca and speak with the PAC Intake Coordinator for a referral package.
- **Step 2:** After establishing eligibility, the PAC Intake Coordinator will provide a PAC Referral Package and request that the package be completed and forwarded as indicated.
- **Step 3:** PAC's clinical team reviews the referral documents and comes to a decision on an admission in the Intake Committee. PAC's Intake Coordinator communicates this information to all parties involved with the referral.
- **Step 4:** PAC Intake Coordinator sets up a Pre-Admission Care Planning Meeting between PAC and the client's support team.
- **Step 5:** PAC Intake Coordinator communicates assigned admission date to all parties involved. Prior to admission, clients or their caregivers will be given information to help them prepare for the admission.

Waitlist Process

The amount of time an individual has to wait for an admission date is determined by the length of the waitlist, when the referral was submitted, and the circumstance and acuity needs of the individual and unit.

We prioritize individuals accepted for admission using these criteria:

- 1) Date of referral completed
- 2) Ability of the person to fit the current milieu of the unit and balance the acuity of the individuals
- 3) PAC will also prioritize admission for individuals who are pregnant or experiencing absolute homelessness

When an admission date is offered, PAC typically strives to provide at least two weeks' notice. While we aim to plan admissions carefully, unforeseen circumstances may occasionally lead to delays. For instance, if the discharge of a currently admitted individual is postponed, it may impact the planned admission date for a new client.

To ensure a smooth transition, one week prior to the admission, the PAC team will hold a virtual meeting with community supports, care providers, and family members. This meeting serves as an opportunity to gather valuable insights about the individual and to address any questions or concerns regarding the PAC process. We believe that open communication and collaboration with all involved parties is essential for providing the best possible care.

Preparing For Admission Day

Individuals come to PAC for short-term assessment and treatment, not long-term residential care. An essential component of the admission process involves developing a comprehensive plan that supports each individual's successful transition back to their home and community.

This plan is tailored to address their unique needs and ensures continuity of care after their stay at PAC, promoting ongoing well-being and integration into their community.

This may be the first time your loved one is leaving their home or away from family for any extended period of time. When, what and how you tell the individual will depend on a variety of factors and we encourage you to contact the team if you're having difficulty in informing your loved one. We understand that this can be a challenging time for families and caregivers as they navigate the process of transitioning their loved one into the care of PAC.

For additional support, please refer to the Resources and References section below, which provides a variety of options available to assist you during this time. Your well-being, as well as that of your loved one, is important to us, and we are here to help you every step of the way.

Everyone admitted to the PAC receives their own bedroom and is given care based on individual planning, supportive relationships, and continuity of care.

There can be a lot to prepare when someone is admitted to PAC. Below is some information you may find helpful.

Tips for Families and caregivers to help prepare for arrival:

- PAC is located on the third floor of the həyχ^wət k^wθə šx^whəli? leləm (Healing Spirit House)
- To best support you, please call the care station number (604.660.0234) with the estimated time of arrival.
- Unless otherwise instructed, you will enter through the main entrance and take the elevator to the third floor. Once on the third floor, there is a visitors' area with washroom amenities.
- Upon arriving on the third floor of the building, staff will be there to escort you and your loved one to the unit. We will assist with bringing in personal belongings and all medications, which will be stored in the medical room.
- Once settled in, the individual will receive a comprehensive orientation to PAC, including a tour of their bedroom, washroom facilities, and an overview of the general routine. This orientation also serves as an opportunity to address any questions or concerns, ensuring that both you and your loved one feel comfortable and informed about the transition.

- Within 24 hours, the PAC psychiatrist will visit with the individual.
- The general practitioner will conduct a physical exam within 24-48 hours.
- It's important for your loved one to be well-rested, ensuring they get a good night's sleep before travel.
- If you are traveling a long distance to reach PAC, please make sure your loved one has a regular meal and stays hydrated by drinking plenty of fluids. It might also be helpful to bring along a favourite snack for comfort during the journey.
- We recommend scheduling a follow-up time for either a visit or a phone call to look forward to, helping ease any feelings of separation. Additionally, consider bringing comfort items and activities for your loved one to enjoy during their free time, such as a book, tablet, puzzles, or a cozy blanket. These personal touches can provide reassurance and make the transition a little smoother.

What to bring to PAC

A suggested list of items is in **Appendix A**. If you're not sure whether you need to bring an item, please call the PAC Access and Discharge Coordinator at 604-660-0228 ext. 336525, or for general questions, please email PACReferrals@phsa.ca

Limit items of sentimental value, unless absolutely necessary. Staff will do their utmost to treat your belongings with respect and care, but PAC will not be held responsible for loss or damages.

We ask that **all items** be labelled, including charger cables and electronics.

Family & Community Team Participation and Communication

When an individual is admitted to PAC, it is essential that the family, caregivers and community care team stay involved. Unless there are unique circumstances, the family and caregivers are encouraged to regularly phone and visit their loved one while at PAC.

Family members and caregivers can call our unit directly at any time to get an update on their loved one's general well-being. Any other requests for information should be directed to the PAC Social Worker or through their primary CLBC or MCFD contact. We appreciate when calls are scheduled outside of mealtimes, as this aligns better with the unit's daily routine. It tends to work best when regular call times are arranged—whether daily or on specific days—tailored to the needs of the individual and the availability of family members and caregivers. This consistency can help create a comforting connection and support the individual's adjustment to their new environment.

The social worker will provide a weekly update to those who are involved with the individual and this is communicated through email.

Visits are encouraged and parameters around visitation depends on the leave privileges ordered by the psychiatrist. Privilege levels are discussed at weekly clinical rounds on Wednesdays. Please contact the PAC Social Worker for initial arrangements for outings.

Individuals admitted on an involuntary basis under the *Mental Health Act* are not able to leave PAC without the approval of their treating psychiatrist. Involuntarily admitted individuals that are provided approval to leave PAC but who are unwilling to return may be subject to apprehension by the police.

What can family/caregivers do to support their loved one during their time at PAC?

Provide the care team a written history. You know your loved one best. Your perspective can support the best possible assessment and treatment and will be added to their file and be read by others involved in their care. Be sure to include collateral information, such as family history, treatments that worked and did not work, and perspectives from other people in their life.

To get you started, we have a few prompt questions for you:

- When I'm happy I like to....
- When I'm scared I often...
- When I don't want to talk or engage, you can ask me about....
- I feel safe when...
- My favourite treat is...
- My favourite quiet time activity is...

Stay informed and connected. Learn as much as you can about your loved one's illness. Ask the care team questions. Call, email, and visit in person when possible.

Be patient and manage expectations. It is important to maintain a sense of hope while setting realistic expectations for your loved one. Refrain from the desire to "rescue" your loved one when they are struggling emotionally. Allow the assessment and treatment process to occur without setting your own timeline and priorities. Sometimes simply listening without trying to solve an issue is more helpful.

Use all the resources available to you when making decisions. At PAC, you may need to make decisions about your loved one's care that will involve many people and moving parts. Make time to meet with everyone involved, seek their input, and gather as much information as you can to make an informed decision.

Sample questions to ask the care team

Family and caregiver input is invaluable to us, and we greatly appreciate your involvement. Below are some questions to consider as you prepare for your meeting with the care team. Reflecting on these can help guide the conversation and ensure you get the information you need for your loved one:

- Health problems?
 - *What is their diagnoses?*
 - *What are their symptoms?*
 - *Are their symptoms getting better or worse?*
- Medication?
 - *What will this medication do?*
 - *What are the possible complications?*
 - *Are there any side effects to this medication?*
 - *Will this medication interact with medications they are already taking?*
- Treatment?
 - *What are the treatment options?*
 - *What are the benefits or potential challenges of each option?*
 - *Why do they need this treatment?*

Community Care Team

We emphasize a collaborative team approach, recognizing the importance of keeping everyone involved in the individual's care informed and engaged in clinical meetings. From the moment of admission—and sometimes even before—we begin planning for discharge to ensure a seamless transition. This proactive strategy allows us to identify and coordinate the necessary supports for the individual upon their discharge, fostering a supportive environment that promotes ongoing well-being and successful reintegration into their home and community. By

involving all supports in this process, we can tailor the discharge plan to effectively meet the unique needs of the individual.

The community team is responsible for ensuring that relevant support people are available and able to come to the PAC site as required.

If there are changes to the community team or the supports available for an individual upon discharge, it is important this information is communicated to PAC as soon as possible.

Weekly Updates

Every week, the PAC clinical team conducts "clinical rounds" to discuss each individual in our care. During these meetings, we review the goals of care for each person, ensuring that their care and safety plans are updated as needed. Brief summary notes from these discussions are then sent to the representatives of referring agencies and community service providers each week by the social worker via email. This communication ensures that all parties remain informed and aligned in their efforts to support the individual's ongoing care and progress.

Personal Electronics

The PAC team collects information about how the individual accesses and prefers to use personal electronic devices prior to admission. Our clinical team determines whether additional restrictions are therapeutically warranted given the individual's situation and needs. The individual and their guardian/representative will be informed about additional restrictions prior to or shortly after admission. This may include limiting the number of electronics if it's beyond the typical cell phone and tablet.

Your Feedback is Important

You and your loved one have the right to a consistent, timely, and transparent complaints process in B.C. If you have concerns about the treatment of yourself or your loved one, we encourage you to share your feedback directly with the healthcare team first, as addressing care quality issues where they occur is most effective. The sooner an issue is managed, the less likely it is to escalate.

To voice your concerns, please follow these steps:

1. **Speak with Your Unit Patient Care Coordinator:** Engage directly with the staff member who is immediately available. They are best positioned to address your concerns promptly.
2. **Reach Out to the Clinical Service Manager:** If further support is needed, you may contact the clinical service manager for additional assistance.
3. **Contact the Provincial Health Services Authority's Patient Care Quality Office:** If the issue remains unresolved, you can escalate your complaint to the Patient Care Quality Office. Their office hours are 8:30 a.m. to 4:30 p.m. on weekdays, excluding statutory holidays. For more information, you can call 1-888-875-3256 or email pcqo@phsa.ca.

By following these steps, we can work together to ensure that concerns are addressed effectively, and that the quality of care remains our top priority.

Meetings and PAC Health Care Team Communication

Admission Meeting

The community team (including family/caregiver representative) meet with our full clinical team, typically one week before the day of admission. This meeting addresses the reasons for referral and goals of admission. The health care team may have questions about the individual's likes, dislikes, communication, and care needs. Information that will be helpful are things such as: their hobbies and interests, do they take a shower or bath, when do they prefer to bathe, etc. Staff will do as much as possible to accommodate these details.

PAC clinicians may ask questions to initiate the assessment process. Admission meetings will be held virtually so that community supports and families can attend from wherever they live. Dates for the interim meeting, discharge, and discharge meeting are tentatively set. Members of the community team can ask outstanding questions about the PAC process at this meeting. At the admission meeting, we will also confirm transportation plans and the transition of the individual to PAC.

Interim Meeting

The primary purpose of the interim meeting is to update the family, caregivers and community supports on the individual's progress at PAC. The interim meeting is typically six weeks after admission, but this may be sooner or later depending on how the individual is responding to the assessment and treatment process. If available, the clinical team members will make any tentative recommendations. This is also an opportunity to discuss and clarify any information as a group to ensure that we are working towards the same goal.

Like the admission meeting, you will be asked and encouraged to participate as much as possible in this process.

Discharge Meeting

This meeting is held about one week prior to the discharge date from PAC. The purpose is to communicate recommendations from the clinical team and is an opportunity for community care providers, family, and caregivers to ask any questions. Members of PAC's clinical team and the treating PAC psychiatrist will be in attendance. At this meeting, we will also confirm transportation home and any other pieces to support with successful transition back to the community.

Safety in the Facility

We are committed to providing a safe and therapeutic environment for all individuals and staff. Our commitment extends to supporting those who face complex developmental disabilities, mental illness and associated behaviours. To effectively assist this population, our staff work closely with individuals, families, and caregivers to ensure that treatment is tailored to each person's needs while maintaining a safe environment for everyone. This collaborative approach helps us determine if PAC is the right fit for your loved one.

During a typical day at PAC, individuals generally have the opportunity for interaction with their peers in a low-stimulus environment. This social engagement is typically well received, taking place during small group programs, meals, and in the lounging and common areas. Our staff are attentive in fostering positive person-to-person interactions, while ensuring that individuals are kept away from situations or individuals that may lead to agitation.

Individuals referred to PAC may exhibit behavioral challenges, including low tolerance for peers, intrusive behaviors, and unpredictable outbursts. While we have established safety protocols and plans for those engaging in intrusive behaviors, we may need to set boundaries on interactions. These boundaries will be communicated clearly to you to ensure that everyone's safety is prioritized. Our goal is to create a supportive and safe environment where each individual can thrive.

Assessments and Reports

PAC clinical staff complete reports at the time of interim and discharge. The purpose of these reports is to provide information/clarity on the individual's diagnosis, to outline the treatment process while at PAC, and to make recommendations for on-going treatment, care, and quality of life choices/options for the individual. Reports are completed by individual clinical team members or as a combined multi-disciplinary report.

Interim and discharge reports are reviewed at the interim and discharge meetings and the reports are made available to those who are involved in the continuity of care of the individual. To respect individual confidentiality and requirements of the *Freedom of Information and Protection of Privacy Act*, other reports can only be released upon consent of the individual or the individual's legal representative or related to continuity of care.

All reports completed by PAC are sent to the referring agency (CLBC or MCFD). The PAC general practitioner and the PAC psychiatrist reports are sent directly to the treating general practitioner and psychiatrist in the community.

PAC may be required to release reports when enforced by court order or under the mandate of other Provincial regulatory agencies (i.e., Ombudsman).

Outreach Team

The PAC Outreach Team launched in the fall of 2024, with the goal of providing essential outreach services to better support individuals across B.C. who may not be suitable for inpatient admission. Additionally, the team offers transition services for those who have completed the inpatient assessment at PAC and would benefit from assistance in returning to community placements.

Operating as a fully virtual service, the Outreach Team is dedicated to ensuring equitable access to care for individuals throughout the province.

The team comprises a nurse, behavioral analyst, occupational therapist, and psychiatrist, allowing for a comprehensive range of services, including consultation, assessment, capacity building, education, and transition support. Referrals to the Outreach Team will follow the same process as the Inpatient PAC program, facilitating a seamless transition between services as needed. This initiative underscores our commitment to providing tailored support to individuals at every stage of their care journey.



CONSULT



ASSESSMENT



CAPACITY
BUILDING



EDUCATION



TRANSITION
SUPPORTS

Frequently Ask Questions

Preparing for PAC:

Q: What is the overall goal of PAC?

A: An admission to PAC provides a small snapshot of the individual in a clinical environment, which informs the team about any symptoms, behaviors and other aspects which may be impacting the individual. There is a focus on the reasons for referral, but often other details come to light that may need to be addressed.

Interventions and treatments, including medication changes, are based on what is observed and implemented after consultation with team members and relevant care providers.

Because of the nature of the clinical environment, some interventions may not be relevant or transferrable upon discharge.

Q: What should my loved one bring to PAC?

A: Please refer to Appendix A for a recommended packing list. If you have any questions about specific items, you can ask PAC staff.

Q: Is there a difference if my loved one is involuntary admitted under the Mental Health Act?

A: There are aspects to treatment decisions which fall under the Mental Health Act, however the approach will always be collaborative and consultative and based on the clinical presentation.

Admission to PAC:

Q: What does admission look like?

A: All efforts are made so there is a smooth entry into the building. Each person is unique and typically we allow ample time for any transitional needs. Staff are skilled in reassuring and orientating people to the area and adapt to each person's needs.

Note from a loved one: "On admission day, they really made it feel safe. They came outside to greet her, took her bags, and gently escorted her inside. They told us not to come in, as it might make it harder for her – they did a really good job."

Q: Does my loved one still receive their PWD payment while staying at PAC?

A: Our social worker will assess this and inform the Ministry of the admission and adjust accordingly.

Q: How can I give the PAC team information and tips for working best with my loved one?

A: About one week before admission, you will have a virtual meeting to answer any questions and better understand the goals and timeline of being at PAC. However, if you feel there's anything important and may take time to prepare, please forward any information to the intake coordinator so the team may be informed.

Q: Can staff at PAC ensure my loved one follows their daily and self-care routines?

A: While staff at PAC are here to encourage and facilitate positive routine and habits, it is important to know that they still have agency while in this program. Staff will do their utmost to maintain and encourage positive and healthy habits, though these may need to be adapted to meet individual needs. We are unable to force your loved one to do things they do not wish (for example, showering when they do not wish to or watching TV for long periods). Because each patient has a unique level of decision-making skills, we will work with the family to make a plan that works best for everyone.

Staying at PAC:

Q: What do the bedrooms and shared spaces look like at PAC?

A: Each person has their own room and there is a bed, a closet for clothes and personal items, and a desk area. Patients are encouraged to personalize the space with things like posters and pictures. The door to the room will always open from the inside.

Washrooms are shared and located in a shared hallway area. Each washroom has a shower, sink and toilet and we also have a large accessible bathroom, which includes an accessible tub.

There are four lounge areas, which include chairs, couches, and TVs. There are spaces for engaging in leisure, gardening, art, and exercise, and there is a large outdoor patio space.

Note from a past client: "I like the privacy of my own room. The bed is comfortable, and you can bring your own blanket and pillow from home if you want."

Q: Can I visit my loved one while they are at PAC?

A: Visits are encouraged and there is a family room on the 3rd floor. Privilege levels may limit where the individual may go, and with space limitations we ask you call the care station (604-660-0234) if you intend to visit so these details can be provided, and the visit may go smoothly.

Q: How do I know how my loved one is doing while at PAC?

A: You will get weekly email report from the social worker via email, which provides a short update. You can also contact staff if you have any questions or concerns.

Note from a loved one: "There is a one-month meeting that can be overwhelming, because multiple staff provide verbal reports. We were given a lot of information, but we still didn't know what it all meant, so we asked lots of questions."

Q: My loved one is currently attending school; is this support offered at PAC?

A: No, PAC does not have any teachers or schooling onsite, and PAC does not replace the supports or learning environments that an individual would have through the school system. Individuals are welcome to bring course work with them and work on assignments as desired while at PAC.

Q: How many staff will be working with my loved one while at PAC?

A: PAC has two nurses and two health care workers per 12-hour shift on the unit who provide direct patient care to a maximum of 10 individuals at a time. PAC also has a variety of interdisciplinary staff who mostly work Monday to Friday during business hours and provide assessments and some small group and individual activities.

Note from a past patient: "I was a little nervous coming here, but it's safe here and staff are there for me when I need help. The staff are all nice, and I am not scared to be here like I was at first."

Q: My loved one has a specific diet they do well with, can this be accommodated at PAC?

A: Yes. Prior to admission, it is important to communicate any dietary needs to the PAC Intake Coordinator so that they can make sure the PAC team is aware. PAC has an onsite kitchen and chef who prepares all meals in consultation with the PAC dietitian. We ask that individuals avoid bringing outside food onto the unit, but they can eat snacks during outings and go for meals off-site with loved ones with approval from the interdisciplinary team and psychiatrist.

Q: What therapies and counselling are offered at PAC?

A: PAC does not offer specific individual counselling or trauma treatment, but we do have clinicians who will support individuals around their concerns. PAC uses a trauma-informed approach to working with individuals, their families, and their caregivers.

Note from a loved one: "We were able to spend an hour with the psychiatrist. He asked about our expectations, and what was important to us and our loved one."

Q: I want my loved one to stop taking all medications, does this happen at PAC?

A: No, the PAC team, including the physician, psychiatrist, and pharmacist, work together to review and slowly adjust medications but do not typically stop all medications.

Q: What is a typical day at PAC like for my loved one?

A: A typical day consists of checking in with the primary nurse at the start of the day, breakfast, lunch, dinner, an afternoon snack, and evening snack.

Activities are provided by a recreation therapist, occupational therapist, art therapist (two days a week) and frontline staff, and these are determined on a daily and weekly basis depending on the group composition and individual needs. These activities may be small group or individual based.

We coordinate continuing contact with community inclusion workers and collaborate with external agencies for activities on and off PAC.

Note from a past client: "There are lots of activities to do. I like going on outings in the community, doing art therapy, and gardening. I got to learn a lot about being in the community and being around people."

Q: Do you plan any special celebrations or events for clients at PAC?

A: Holidays and other typical calendar events are recognized at PAC (i.e., Halloween, Christmas, National Indigenous Peoples Day) including birthdays.

Discharge from PAC:

Q: How long will my loved one stay at PAC?

A: On average, PAC stays are from two weeks up to 90 days. However, **it is important to know** that the length of stay is determined by the PAC interdisciplinary care team and relies on an appropriate discharge plan is in place. This means that sometimes your loved one may stay at PAC for longer, but we aim to keep you involved and updated with any changes.

Note from a loved one: “Try not to tell your loved one a specific discharge date – they might hyper focus on that date and be upset if it doesn’t happen then.”

Q: What information will I be given to prepare me, my family, and community partners for my loved one’s discharge?

A: A discharge report with recommendations will be provided shortly after discharge, but any key information will be communicated at the discharge meeting or earlier.

Coordination of discharge starts at admission, so there will be ongoing communication with all parties, including care providers, CLBC, contracted agencies, physicians, community mental health teams and any other critical person involved with their care.

Q: Will my loved one's behaviours be different after they are discharged from PAC?

A: Many people do show improvements while at PAC due to the change in the environment and support from staff, but it is important to know that sometimes people return to their previous patterns of behaviour after discharge from PAC due to returning to their familiar environment and routines.

Q: After discharge, can my loved one keep in contact with other clients they make friends with while at PAC?

A: We encourage a healthy and safe environment and realize connections will be made between individuals and some individuals continue contact or friendships outside of PAC.

Q: What does discharge collaboration with outside agencies look like and what can I expect in terms of collaboration and recommendations?

A: Discharge planning starts at admission and PAC utilizes a team approach. Ongoing communication and updates occur from the start, and any matter is approached in a collaborative and consultative manner.

Q: What is the difference between a full discharge and overnight passes/trials?

A: Typically, an individual is discharged back to the care of the community physician and team on their discharge date. Occasionally there are circumstances where short stays may be considered to see how individuals will do at their discharge placement. Overnight passes from PAC may be discussed and planned if practical to do so.

Words of Advice

From loved ones who have supported someone at PAC

“This is where your person needs to be, and as difficult as it is, they are getting the help they need.”

“Sometimes what your person is comfortable with isn’t always the best thing for them.”

“Trust the process – try to trust that PAC staff, [they] know what they are doing.”

“Give your loved one reassurance that all the staff are friendly and supportive. Emphasize that this is a positive thing for them and their health.”

“Talk to your loved one in a way that resonates with them – I described it to my loved one as a place to work on her wellness (instead of being assessed), which eased some of her worries.”

“The whole PAC team has been wonderful, and everyone is responsive, respectful, and friendly.”

Supports for Family

There are numerous supports available for families, including education, self-help groups, and counseling, which can be invaluable for those with a loved one facing developmental disabilities and mental illness. It is essential for family members to educate themselves about their relative's condition to better understand their needs and challenges.

To discover what assistance is available in your community, reach out to your CLBC facilitator, MCFD case manager, social worker, or the clinical team at PAC. They can provide guidance and connect you with resources that can help you and your family navigate this journey.

Families are encouraged to take courses to deepen their understanding of mental illness. Joining a local support group offers the opportunity to connect with other family members who are facing similar challenges. Sharing experiences and learning from others who have navigated comparable situations can be both comforting and empowering, fostering a sense of community and shared resilience. These connections can provide valuable insights and emotional support, helping families feel less isolated in their journey.

If you are feeling overwhelmed, consider seeking support from a counselor who understands mental illness. Look for programs that can help you advocate for both yourself and your loved one. Remember, you are not alone on this journey!

We recognize how complex and challenging this process can be. Here are some tips to support you along the way:

1. **Document Everything:** Maintain a written record of phone calls, visits, and casual conversations related to your loved one's healing process. Keeping track of names, dates, times, and reasons for contact allows for accurate reference later. This practice not only helps clear your mind, but also builds a network of individuals who can assist in managing your loved one's care.
2. **Ask Questions:** Throughout your loved one's treatment, ensure you fully understand what is happening. If your questions aren't being adequately answered, don't hesitate to seek more information, or find out who can provide additional assistance. Remember, you are your loved one's advocate, so keeping track of contacts and resources will help you avoid retracing steps unnecessarily.
3. **Establish a Visitation Schedule:** Staying informed and connected with your family member is crucial. PAC offers in-person, telephone, and virtual visits. The social worker assigned to your loved one can assist you with the visitation process. Your presence and support can be incredibly reassuring, reminding them that they are not alone.
4. **Prioritize Self-Care:** Taking care of yourself is essential. Family members and caregivers often face emotional and physical demands while supporting a loved one at PAC, which can lead to neglecting their own needs. Explore respite services in your area to help you manage your well-being during this challenging time.

By following these tips, you can better navigate the complexities of supporting your loved one while also taking care of yourself.

References and Resources

Guide to the Mental Health Act – 2005 edition:

<http://www.health.gov.bc.ca/library/publications/year/2005/MentalHealthGuide.pdf>

Mental Health Act:

http://www.bclaws.ca/EPLibraries/bclaws_new/document/ID/freeside/00_96288_01

Mental Health Review Board - <http://www2.gov.bc.ca/gov/content/health/about-bc-s-health-care-system/partners/colleges-boards-and-commissions/mental-health-review-board>

BC 211 Redbook: redbookonline.bc211.ca

BC Mental Health and Substance Use Services: bcmhsus.ca

B.C. Ministry of Health Patient and Family Engagement Framework:

www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/health-care-partners/patients-as-partners/patients-as-partners-framework.pdf

British Columbia Schizophrenia Society: bccs.org

Canadian Mental Health Association – BC: cmha.bc.ca

Canadian Patient Safety Institute: patientsafetyinstitute.ca

Community Living British Columbia: <https://www.communitylivingbc.ca/>

Family Caregivers BC: familycaregiversbc.ca

From Grief to Action Coping Kit: bccsu.ca/Coping-Kit

Here to Help BC: heretohelp.bc.ca

Pathways Education Course: pathwayssmi.org/education/family-to-family-course

Toward the Heart – Naloxone Training: towardtheheart.com/naloxone-training

FINANCIAL DISABILITY ALLIANCE OF BC: A place of support, information, and one-to-one assistance for people with all disabilities. <https://www.disabilityalliancebc.org>

FINANCIAL ASSISTANCE FOR PSYCHIATRIC MEDICATION (PLAN G):

<https://www2.gov.bc.ca/gov/content/health/practitioner-professional-resources/pharmacare/prescribers/psychiatric-medications-plan-plan-g>

PROVINCIAL DISABILITY BENEFITS:

<https://www2.gov.bc.ca/gov/content/family-social-supports/services-for-people-with-disabilities/disabilityassistance/on-disability-assistance>

CANADA PENSION PLAN DISABILITY BENEFITS:

https://www.esdc.gc.ca/en/reports/pension/cpp_disability_benefits.page

INDIGENOUS ORGANIZATIONS AND SERVICES

There are various supports for Indigenous patients and families within our facilities at BC Mental Health and Substance Use Services. We provide various supports and programming in partnership with the kʷikʷəł̓ əm (Kwikwetlem) First Nation, along with other Elder residents, Indigenous patients, and navigators. There are patient and family partners who openly identify as Indigenous; therefore, there are opportunities to bring in traditional foods.

www2.gov.bc.ca/gov/content/governments/aboriginal-people/aboriginal-organizations-services

BC ABORIGINAL FRIENDSHIP CENTRES: This is an umbrella organization for the Friendship Centres across B.C. BC Friendship Centres support Indigenous Peoples living in urban areas and away from home to achieve their vision of health, wellness, and prosperity. Call to be directed to a local friendship centre in your home community: 1-250-388-5522.

FIRST NATIONS HEALTH AUTHORITY – RESIDENTIAL SCHOOLS: This website provides information on the Indian Residential Resolution Health Support Program, which includes mental health and emotional support to eligible former Indian Residential School students and their families.

<https://www.fnha.ca/what-we-do/mental-wellness-and-substance-use/residential-schools>

KUU-US CRISIS LINE: The KUU-US Crisis Line Society provides a First Nations and Indigenous-specific crisis line available 24 hours a day, 7 days a week. The KUU-US Crisis Line can be reached toll-free at 1-800-588-8717. Alternatively, individuals can call direct into the Youth Line at 250-723-2040 or the Adult Line at 250-723-4050.

INDIAN RESIDENTIAL SCHOOL CRISIS LINE: The Indian Residential School Crisis Line is a national service for anyone experiencing pain or distress because of their residential school experience. Call toll-free at 1-866-925-4419.

MINISTRY OF CHILDREN AND FAMILY: Ministry of Children and Family Development - Province of British Columbia (gov.bc.ca)

THE MÉTIS CRISIS LINE: The Métis Crisis line is available 24 hours a day, 7 days per week for self-identified Métis people in B.C. Call toll-free 1-833-Metis-BC (1-833-638-4722).

TSOW-TUN LE LUM SOCIETY: The Tsow-Tun Le Lum Society provides confidential services such as counselling, cultural supports, and personal wellness programs. Call toll-free at 1-866-403-3123 or visit tsowtunlelum.org

24-HOUR RESIDENTIAL SCHOOL CRISIS LINE:

1-866-925-4419

MISSING AND MURDERED INDIGENOUS WOMEN AND GIRLS HEALTH SUPPORT SERVICES: This is a national program administered in B.C. by First Nations Health Benefits. The services are available to survivors, family members, and others who have been affected. Call Health Benefits toll-free at 1-855-550-5454 for more information.

HOPE FOR WELLNESS HELP LINE: The Hope for Wellness Help Line offers immediate mental health counselling and crisis intervention by phone or online chat. Call toll-free at 1-855-242-3310 or start a confidential chat with a counsellor at hopeforwellness.ca

We Want to Work with You

At the Ministry of Health, the Provincial Health Services Authority and BC Mental Health and Substance Use Services, we have made a commitment to ensuring your voices as clients, families and caregivers are incorporated at all levels of the health care system – from decisions about your or your loved one’s care, through to policy and strategic planning for the organization.

If you are interested in using your voice to improve our services, here is how to get involved!

- **Partnerships in Care Committee:** A collaborative committee of clients, families and health care providers at Red Fish Centre for Mental Health and Addiction, Heartwood Centre for Women, and Coast Mental Health Rehabilitation & Recovery working together to improve services. Members attend monthly meetings in-person or by telephone. For more information, contact engage_bcmhsus@phsa.ca
- **Lived Experience and Family Partner Network (BC Mental Health and Substance Use Services):** A provincial community of patients, clients, and families with lived experience of mental health and substance use. Network members work in partnership with staff to improve BCMHSUS services. For more information, contact engage_bcmhsus@phsa.ca
- **Patient Voices Network (BC Patient Safety and Quality Council):** A provincial community of patients, clients and families with a wide range of health experiences. Network members work in partnership with staff across the health system to improve care in B.C. For more information, visit patientvoicesbc.ca

Appendix

Appendix A: What to Bring to PAC

Medical:

- Care Card
- Two-day supply of current medications (blister packaged)
- If relevant:
 - Inhalers
 - EpiPen
 - Diabetes supplies
 - Medicated creams/lotions/soaps/mouth wash/shampoo
- Mobility aids and support equipment (for example: walkers, cane, grippy socks, etc.)

Money:

- Comfort money in small denominations, nothing larger than \$20.00 bills please
- Please make sure you bring your bank card and ID if you manage your own money

Entertainment and Comfort:

- Small personal electronics
- If you bring a cell phone, access will be limited. To promote good sleep hygiene, cell phones are handed in by 10 p.m. for overnight charging and given back to individuals after morning routine.
- Batteries/chargers for maximum two devices
- A small selection of games, videos, etc. to use on your devices. Please ensure they are appropriate to watch/use/play with other people present.
- Arts and craft supplies (if desired)
- Toys and books, favourite stuffed animal, favourite pillow and blanket (if desired)
- Pictures of loved ones and/or pets (if desired)

Clothing *Clothing is washed weekly at PAC*

- Enough clothing for 14 days to wear inside and outside (including pyjamas and underwear)
- Please consider what seasonally appropriate clothes you might need for the next three months
- Swimsuit (if desired), rain jacket, sweaters, and indoor and outdoor shoes are good to bring

Personal Care Supplies (as needed/relevant):

- Shampoo, conditioner, body wash, comb and/or brush, hair accessories
- Toothbrush & toothpaste, mouth wash, deodorant
- Razors or electrical shaver (if relevant), shaving cream, after shave
- Nail clippers
- Feminine hygiene supplies, sanitary pads
- Incontinence supplies (adult briefs), if needed; multiply the number of items used in a 24-hr period by 90 days

Please note that we encourage individuals to refrain from bringing any items that are overly valuable or personal, as there is an inherent risk of them going missing. It's best to keep belongings to a minimum to ensure a smooth experience for everyone involved. PAC is not responsible for loss or damage to any personal items that are brought to our site.

