



# Maintaining Wellness After In-Patient Care

A PSYCHOEDUCATIONAL WORKSHOP





Hi! My name is

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*(she/they) ~ Quw'utsun (Unceded Coast Salish territory)*

*Deep Sea Psychology*  
telehealth counselling via  
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*Caution* - some topics may be  
distressing

# Overview

- 01 What is **inpatient care**?
- 02 Why **aftercare** matters
- 03 How to **maintain wellness** after inpatient care
- 04 Where to find **support**

LEARN MORE →





# What is inpatient care?

## ***VOLUNTARY*** Admission

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If you're experiencing a mental health crisis, you may be admitted to inpatient care voluntarily by visiting a **hospital emergency room.**



**TIARA'S STORY** (*she/they*)

# ***INVOLUNTARY*** ***Y*** Admission



You may be brought to a hospital for examination if a **doctor, judge, or police/peace officer** believes that you're at **serious risk** of harming yourself or others **because of a mental health condition** (*even if you don't agree to*).

# ***CONDITIONS*** for admission, Mental Health Act

1. Suffering from a mental disorder (affecting thoughts, mood, perception, orientation, or memory, impairing judgment, & behaviour)
  2. Potential to benefit from treatment
  3. Likely to harm self or others within reasonable timeframe, or to suffer serious mental or physical decline due to mental disorder
1. Need specific care that can only be provided as a “formal patient”

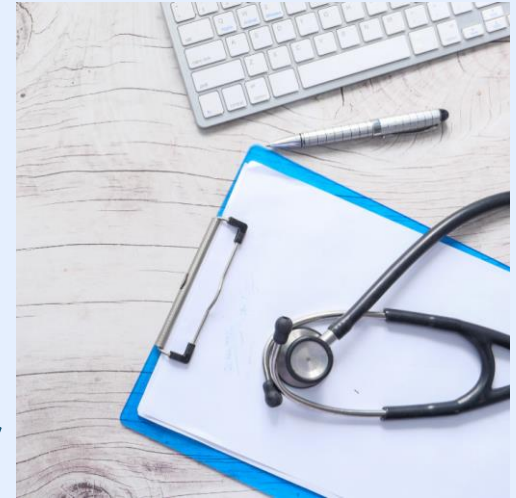


Province of Alberta

**MENTAL HEALTH ACT**

# ***APPREHENSION:*** Doctor or Qualified Health Professional (QHP)

- After a medical assessment, a doctor or QHP can issue an **admissions certificate**
  - Valid for **72 hours**. If the person is not apprehended within this timeframe, another certificate must be made.





# ***ADMISSION & RENEWAL*** Certificates

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- Legal document, “**Form 1**”
- Physician or Nurse Practitioner gives their opinion that you meet the 4 criteria to be detained, after **examining** you first



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Protected B (when completed)

**Admission Certificate (Form 1)**

*Mental Health Act* Section 2

# ***APPREHENSION:*** Provincial Court Judge

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- Anyone can swear an **information under oath** if they believe a person is:
  - Suffering from a mental health disorder &
  - At risk of causing harm to others or self due to a mental health condition
- Judge can issue a **warrant** for apprehension, valid for **7 days**, can be renewed for another 7 days



# ***APPREHENSION:*** Police or Peace Officer

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- Can apprehend someone if they have an admission certificate from a QHP or a warrant from a judge with:
  - Person's name
  - Reason for apprehension
  - Who issued it
  - When it was issued



# ***APPREHENSION:*** Police or Peace Officer

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- Can apprehend someone **without** an admission certificate or warrant if they have “**reasonable grounds**” to believe:
  - Person has a mental health condition
  - Person is likely to harm self or others
  - Person needs to be examined for safety
  - It would be too dangerous to wait for a judge to issue a warrant



# ***FIRST 24*** Hours

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- If apprehended based on an **admissions certificate**, a 2nd QHP must examine the person and determine if 4 conditions met
- If apprehended by police on **reasonable grounds**, or with a **warrant**, 2 QHPs must examine the person independently & determine that 4 conditions are met



## **BEYOND 24** Hours

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- If 2 admission certificates are issued, can be held for up to 1 month
  - 2 QHPs (1 must be a psychiatrist) must re-examine & can issue a **renewal certificate**, for another month.
  - Subsequent renewal certificates: 6 month
- If the 4 conditions are not met at any time, free to leave



# ***WHAT HAPPENS*** During Care?

Connect with a **treatment team** for evaluation, treatment planning (doctor, counsellor, social worker, nurse), review symptoms, diagnosis & options.



# ***TREATMENT DECISIONS:*** Age & Competence

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- Physician may determine a person is not mentally competent if:
  - Cannot understand treatment decisions
  - Cannot understand the consequences of making treatment decisions
- If a minor, or not mentally competent, a **substitute decision maker** is chosen





# ***IN-PATIENT RIGHTS***

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- Be provided reason for & copy of certificates
- Appeal decisions & contact the **Review Panel**
- Contact the **Mental Health Patient Advocate**
- Refuse treatment unless deemed “incompetent,” under **treatment order** or review panel decided it’s in the person’s best interest
- Send & receive notes/letters without censorship
- Interpreter for language barrier
- Confidentiality (within limits)
- Legal aid, access to a lawyer



## ***DISCHARGE*** planning

- Doctor's report: assessment, diagnosis, treatment, & recommendations sent to your family doctor



## ***COMMUNITY TREATMENT ORDER (CTO)***

- Legal document requiring treatment in community instead of in a hospital (medication, appointments)
  - Less restrictive than detainment
  - 6 months, eligible for renewal
  - If not followed, peace officer can apprehend & convey to hospital for re-examination within 72 hours by 2 QHPs

***Supporting*** a loved one in in-patient care

Turn to a friend, spiritual support, or counsellor with any difficult feelings.



Be considerate of hospital protocols. Share what you know with the treatment team.

Be encouraging. Ask about the discharge plan.

# Why aftercare matters

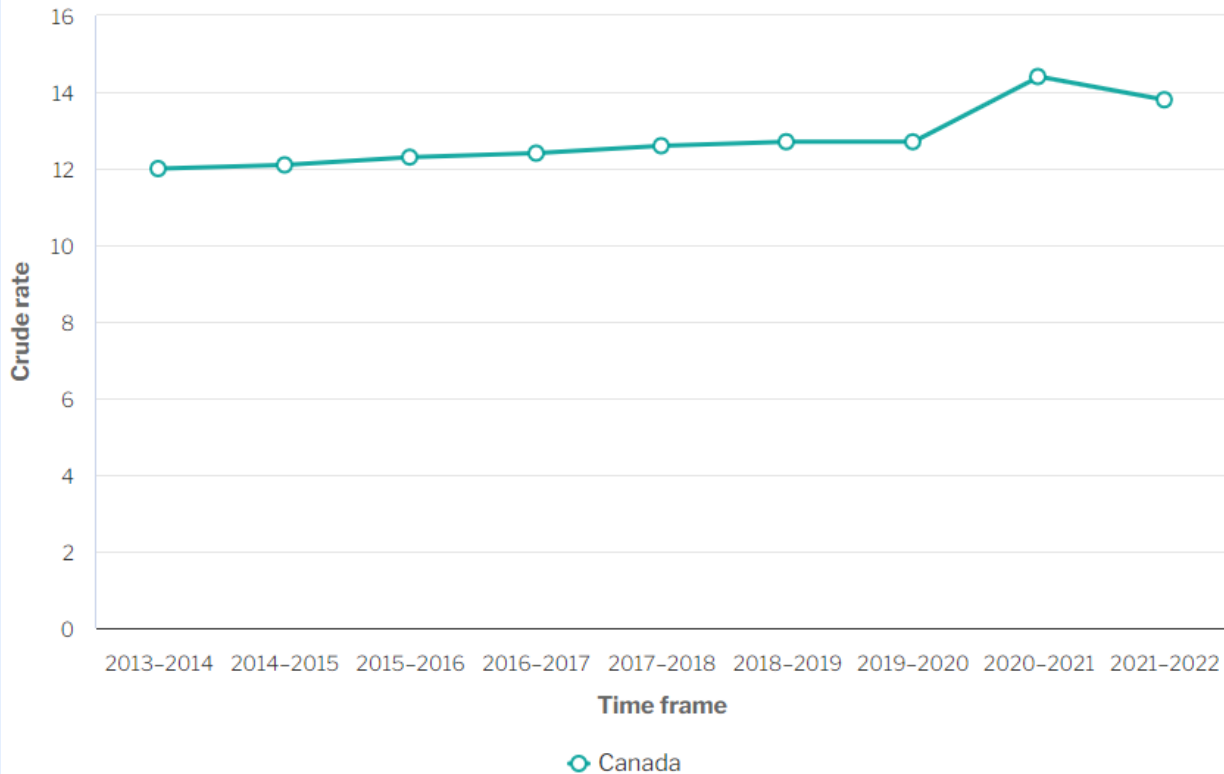


**~12-14%**  
**readmission**  
**rate** within 30  
days of  
discharge.



### 30-Day Readmission for Mental Health and Substance Use

Crude rate, trend for selected locations, 2013-2014 to 2021-2022



Suicide risk **strongly**  
**increases** in the weeks to  
months post-discharge.

(Krause et al, 2020)



## *IMMEDIATE* Risk

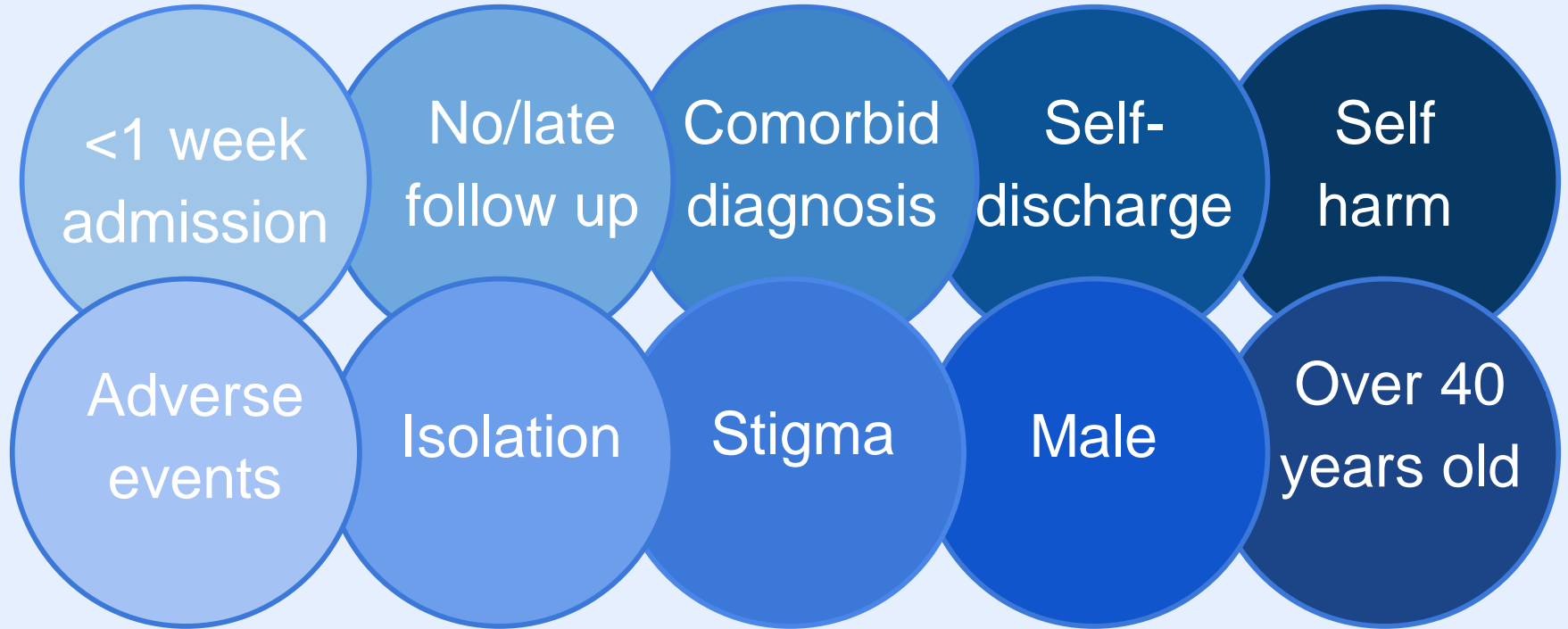
Suicide risk is **11.6x** higher in the first **3 months** after discharge vs. same diagnosis without inpatient care (Musgrove et al, 2022).

Of those who died by suicide within 2 weeks of discharge, **55%** died within **1 week**; **49%** before first follow up (Bickley et al, 2013).





# ***RISK*** Factors



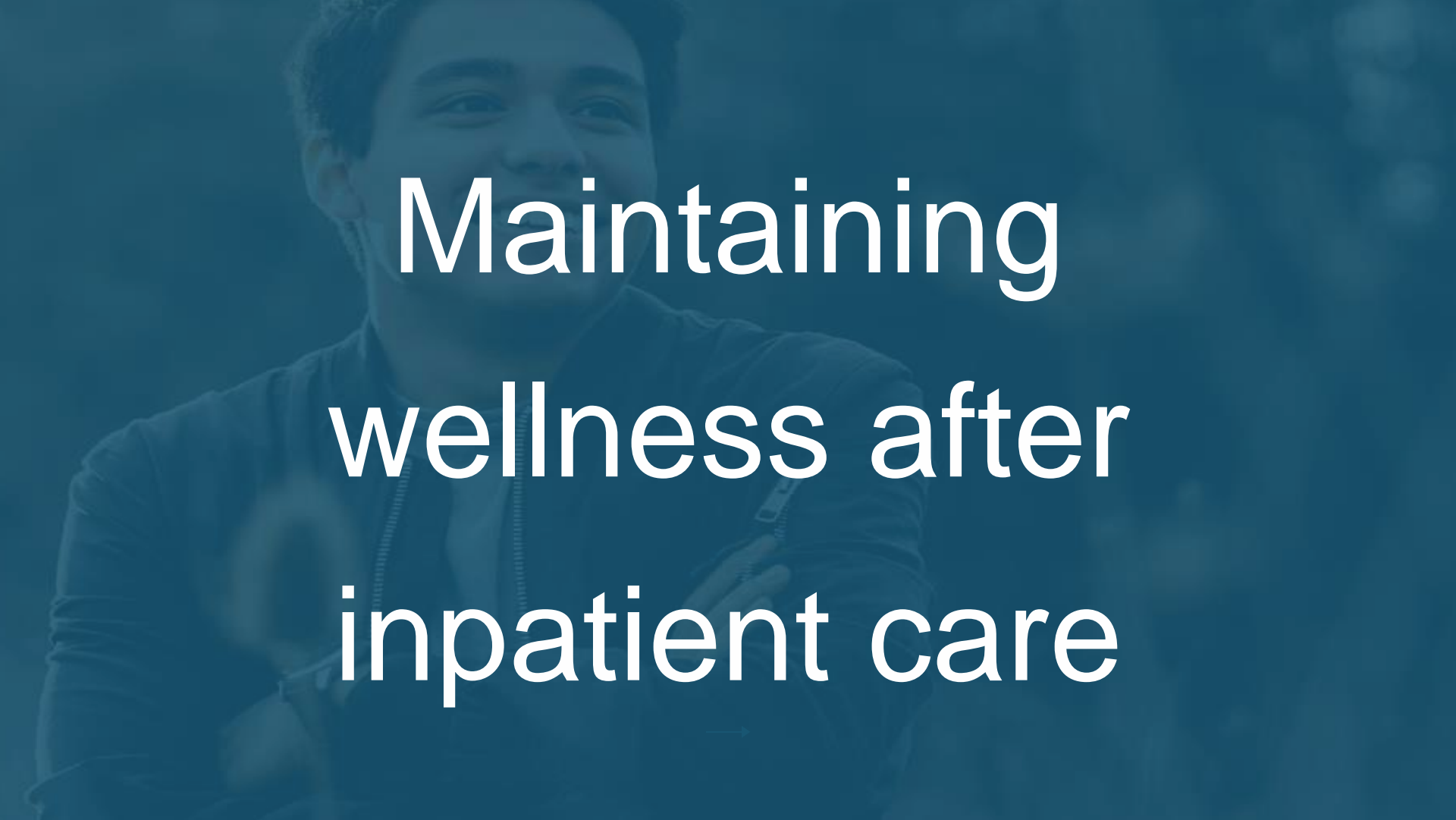
# ***PROTECTIVE*** Factors



Be mindful of  
short stays & life  
circumstances.

Immediate &  
continued follow-  
up care.

Reduce isolation  
& stay connected.



# Maintaining wellness after inpatient care

# *ANATOMY* Of Crisis



1. Nervous system overwhelmed, **unsafe**:  
fight, flight, fawn, freeze  
*(sympathetic, dorsal  
vagal parasympathetic)*

2. Coming out of crisis  
means **regulating** the  
nervous system *(ventral  
vagal parasympathetic)*

3. Preventing crisis:  
maintaining a **felt sense  
of safety**, resilience  
*(window of tolerance)*

## ***Connect*** well

Sense of connection improves resilience to stress, & boosts self-esteem



Family, friends, support network, community, culture, creativity, spirituality, ancestors, nature,

elders, **self**  
*Reflect: what practices nurture your spirit, bring a sense of connection, balance?*

# MOVE Well

## Protective benefits

- Reduces stress, pain, fixation
- Promotes brain & body function, mood coping, presence

## Mindful movement

- *Reflect: Do you over- or under-exercise?  
How does your body want to move?*



## ***EAT*** Well

- *Reflect: Do you over-/under-eat when stressed?*



## **What**

- Nutrient rich
- Stay hydrated
- Meaningful meals

## **Why & How**

- Attitude, intention
- Listen to needs
- Share, connect

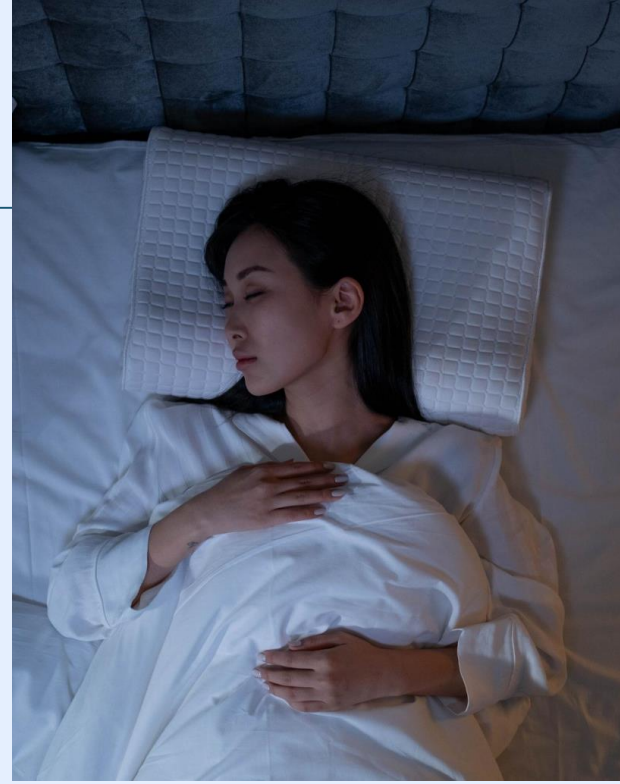
## **Where & When**

- Avoid distraction
- Sit upright
- Rituals, routine

## ***SLEEP*** Well

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- Consistent sleep/wake times
- Comfy space, develop ritual
- Don't take worries to bed
- Associate bed with sleep & sex
- Sleep when sleepy, get up if up
- Avoid caffeine, alcohol, nicotine, heavy meals/hunger, screens, naps





# YOUR PROVIDER'S RECOMMENDATIONS

A **trusting** relationship is important for treatment success.

*Reflect: Do you feel they understand your needs? How do you feel about the recommendations? What are your options?*



# Where to find support



Mental Health  
***PATIENT  
ADVOCATE***



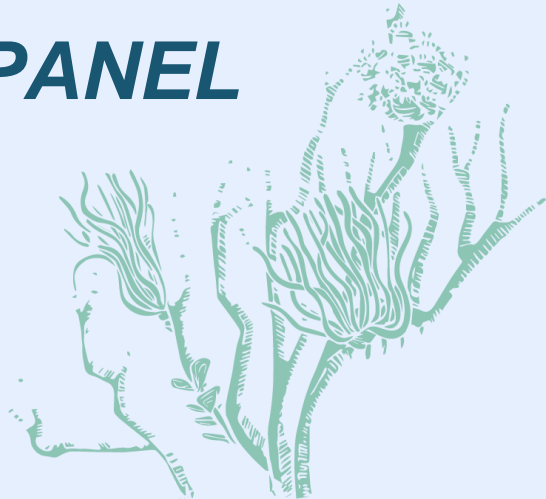
- Info about your rights
- Investigating complaints
- Helping you & those acting on your behalf, e.g. applying for a review panel hearing

**780-422-1812**

Toll-Free: **310-0000** (then dial  
780-422-1812)

[info@albertahealthadvocates.ca](mailto:info@albertahealthadvocates.ca)  
[albertahealthadvocates.ca](http://albertahealthadvocates.ca)

# Mental Health *REVIEW* *PANEL*



- Apply using “Form 12,” [alberta.ca/mhreviewpanel](http://alberta.ca/mhreviewpanel)
- For help, ask a care provider, MH Advocate, guardian.  
Send the application to:

## **Edmonton & North**

Jane Steblecki Corns  
PO Box 53033 RPO  
Glenora Edmonton  
AB T5N 4A8  
Fax 866-971-2112

## **Central Alberta**

Britton O. Mockridge  
PO Box 27006 RPO  
City Centre Red  
Deer AB T4N 6X8  
Fax 587-815-5210

## **Calgary & South**

Deborah Prowse  
PO Box 38167 RPO  
Country Hills Calgary  
AB T3K 5G9  
Fax 844-360-7980

Accessing  
***MEDICAL  
RECORDS***



- If you need help accessing your medical records, contact the Alberta Health Services Disclosure Help Line
  - **1-855-312-2265**
  - [disclosure@ahs.ca](mailto:disclosure@ahs.ca)

## Mental Health ***LEGAL AID***



If you will be in a review panel hearing, you have the right to legal representation at that hearing.

- Legal Aid Alberta: **1-866-845-3425**
- Law Society of Alberta: **1-800-661-9003**
- [Bear Paw Legal Resources](#)

## ***SUPPORT*** Resources



Immediate danger: call **9-1-1** or visit your nearest hospital emergency room.

- Suicide Crisis Hotline: **9-8-8**
- Healthlink: **8-1-1**
- Non-emergency Health & Community Services Directory: **2-1-1**

***INDIGENOUS  
-SPECIFIC***  
Crisis Hotlines

- AHS Indigenous Support: 1-844-944-4744
- Hope for Wellness: 1-855-242-3310
- Residential School Crisis Line: 1-866-925-4419
- MMIWG: 1-844-413-6649





# ***INDIGENOUS -SPECIFIC*** Mental Health Resources



- [Non-Insured Health Benefits \(NIHB\)](#)
- [Residential Schools Resolution Health Support Program](#)
- [Federal Day School Health & Cultural Support Services](#)
- [MMIWG Health & Cultural Support Program](#)
- [AHS Indigenous Wellness Core](#)
- [Thunderbird Wellness App](#)
- **Friendship Centres**



# Thank You

**QUESTIONS?**



**(587) 557-8573**

**[info@deepseapsychology.com](mailto:info@deepseapsychology.com)**

**[www.deepseapsychology.com](http://www.deepseapsychology.com)**

