



# **ACCOUNTABILITY REPORT**

2024-25

Office of Addictions and  
Mental Health

© Crown copyright, Province of Nova Scotia, September 2025

Accountability Report 2024–2025

ISBN: 978-1-77448-804-1

Office of Addictions and Mental Health  
2024-25 Priority Results in Support of Government’s Accountability Report

Contents

Accountability Statement ..... 2

Introduction ..... 3

Measuring Performance ..... 3

    Strengthen Workforce ..... 4

    Increase Access to Mental Health and Addictions Services (community and through the health authorities) ..... 5

    Build in Equity, Diversity and Inclusion into OAMH-supported Programs and Services ..... 7

    New Models of Care and Expansion of Services ..... 8

    Inquiry Response..... 8

Financial Summary and Variance Explanation ..... 10

*Public Interest Disclosure of Wrongdoing Act*..... 11

## Accountability Statement


The Accountability Report of the Office of Addictions and Mental Health for the year ended March 31, 2025, is prepared pursuant to the *Finance Act* and government policies and guidelines. The reporting of the Office of Addictions and Mental Health outcomes necessarily includes estimates, judgments, and opinions by the Office of Addictions and Mental Health management.

We acknowledge that this Accountability Report is the responsibility of the Office of Addictions and Mental Health management. The report is, to the extent possible, a complete and accurate representation of outcomes relative to the goals and priorities set out in the Office of Addictions and Mental Health 2024-25 Business Plan.

### Original signed by:

Office of Addictions and Mental

Minister Brian Comer: 

Deputy Minister Kathleen Trott: 

## Introduction

The Office of Addictions and Mental Health (OAMH) works with Nova Scotia Health (NSH), the IWK Health Centre and community partners to provide mental health and addictions (MHA) education, prevention, treatment and recovery programs for Nova Scotia.

Health system transformation was a priority of OAMH in the 2024-25 fiscal year. This was supported by OAMH, NSH and IWK's collaborative work to implement Universal Mental Health and Addictions Care. The focus areas of this work included:

- Investing in the formal health care system, such as investments in Integrated Youth Services, Mental Health Day Hospitals, and Recovery Support Centres;
- Tapping into capacity that already exists in our communities, private sector, universities and virtually to improve access; and
- Enhancing integration – making it easier for people to get the care they need at the right time from the right provider.

Delivering Universal Mental Health and Addictions Care is supported through *Action for Health*, the government's multi-year roadmap to transform the health system. *Action for Health* outlines solutions for creating a world class health system that will be ready when Nova Scotians need it, is responsive to their needs, and provides reliable care they can count on. A significant legislative change required to advance Universal Mental Health and Addictions Care was achieved in the fall of 2023 with the Royal Assent of Bill 334. This Bill included amendments to the *Health Services and Insurance Act* (HSIA) that authorize the Minister of Addictions and Mental Health to define insured MHA services and to establish programs that ensure Nova Scotians can access them.

This report outlines the achievements of OAMH over the 2024-25 fiscal year and the work underway to ensure every Nova Scotian receives the MHA care they need and deserve.

## Measuring Performance

Bill 334 aligned the Minister's authority with that of the Minister of Health and Wellness under the HSIA, enabling the creation of insured service programs – including those involving private sector providers – to strengthen healthcare service delivery. This legislative change is a key enabler of the Universal Mental Health and Addictions Care initiative, supporting the delivery of government's 2021 commitment to provide universal access to MHA care – regardless of a person's location, condition, or ability to pay. The initiative is grounded in the principle of universality: timely, appropriate care must be available to all, no matter where or how they enter the system.

Universal Mental Health and Addictions Care is guided by six core outcomes:

- Universal & Equitable Access
- Timely Access
- Quality Care
- A Thriving Workforce
- Effective Partnerships
- A Sustainable MHA System

Building on the evaluation work of previous years to track progress and support accountability, in 2024-25 OAMH initiated the development the Impact and Progress Map – a dynamic tool that will monitor changes in the MHA system. When complete, the map will support continuous improvement by providing clear direction and enabling ongoing assessment and reflection.

As the system evolves to better meet the needs of Nova Scotians and the people delivering services, the map and its indicators will adapt to remain relevant and useful. It is designed to support decision-making at all levels-from operational planning and business cases to strategic and policy direction.

Ultimately, the Impact and Progress Map will ensure Universal Mental Health and Addictions Care delivers care that is accessible, effective, transparent, and accountable – building a sustainable MHA system for all Nova Scotians.

### Strengthen Workforce

OAMH has undertaken work to implement Phase One of activities for a Health Human Resource (HHR) Plan that supports the delivery of Universal Mental Health and Addictions Care in partnership with NSH, IWK, Department of Health and Wellness (DHW), Department of Advanced Education (DAE), academic institutions and community-based organizations. The aim of this work is to support and strengthen the MHA workforce. The plan aligns with the *Action for Health* (<https://actionforhealth.novascotia.ca/>) Workforce Strategy by focusing on three main pillars: retain, recruit, and redesign. Specific actions that were undertaken in 2024-25 include:

- Launching the first Doctor of Psychology (PsyD) program in Nova Scotia through collaboration with DAE and Mount Saint Vincent University. The four-year PsyD in School and Child Psychology program and residency will provide specialized training to prepare more future psychologists to support the population’s mental health needs. It will focus on applied knowledge and practical training. (<https://news.novascotia.ca/en/2025/04/02/province-funds-groundbreaking-psychology-training-program>)
- Ongoing work with Dalhousie University’s Centre for Psychological Health (CPH). Fully operational in September 2023, the CPH continued to provide increased access to psychological services by providing evidence-based services to people facing significant barriers to access. The CPH also provides opportunities for clinical psychology PhD students to gain critical skills and better prepare the future workforce to meet population needs. OAMH has conducted six-month and one-year evaluations of the CPH. Highlights from the evaluations show success in the areas of community collaboration, student learning and satisfaction, low-barrier service access for underserved and equity-deserving populations, and client satisfaction. Other impacts such as health outcomes will be measured as more data is collected. ([https://www.dal.ca/faculty/science/psychology\\_neuroscience/programs/graduate-programs/clinical-psychology/centre-psychology-health.html](https://www.dal.ca/faculty/science/psychology_neuroscience/programs/graduate-programs/clinical-psychology/centre-psychology-health.html))
- Funding the Canadian Mental Health Association (Provincial Branch) to enhance a peer support network and increase training opportunities for community-based organizations.
- Continued support of NSH’s implementation of the Knowledge Collaborative, a provincial hub that offers enhanced training opportunities for non-profit community-based service providers (external to Government, NSH/IWK Health staff) providing MHA support and/or services in Nova Scotia. (<https://mha.nshealth.ca/en/clients-and-providers/resources-providers/knowledge-collaborative>)

- Ongoing prioritization and implementation of a trauma-informed care approach across the MHA care system, including the work undertaken by the IWK to create processes and care pathways to support Trauma-Informed Care.

In addition, the WellNS survey (<https://wellnssurvey.ca/>) was launched in January 2025. The survey will be completed in 2025-26 and will help OAMH understand the MHA needs across the life span. This information will provide a lens to assist in identifying gaps and identifying what services will best respond to MHA needs along the continuum of services and support at a community level.

#### [Increase Access to Mental Health and Addictions Services \(community and through the health authorities\)](#)

In 2024-25 OAMH continued work to establish the Mood and Anxiety Insured Services Program (ISP). This program is being established to increase access to mental health care for individuals experiencing moderate mood and anxiety symptoms. The program was co-designed by OAMH, NSH, and IWK and aims to respond to the growing demand for MHA care in Nova Scotia by integrating the private and public mental health care systems.

The Mood and Anxiety ISP will leverage the capacity of the private sector, engaging a diverse range of professionals, including Registered Psychologists (Master and Doctoral), Registered Counselling Therapists (Master), and Registered Social Workers (Master and Doctoral). The goal is to provide all eligible children, youth, and adults with MHA support and services within 28 days.

The ISP has been informed by the Clinical Psychology Services (CPS) Pilot which was launched in November 2023 and ended in November 2024. The CPS Pilot functioned as a small-scale test environment to explore the feasibility and efficacy of contracting private psychologists to deliver publicly funded diagnostic assessment services. 192 children/youth waiting for services by public providers were offered access to a diagnostic assessment for autism and ADHD through the pilot with private psychologists.

OAMH continued to support existing multi-year agreements with community-based organizations across Nova Scotia. Additionally, OAMH launched their Community Wellness Framework (CWF). The purpose of CWF is to provide opportunities for growth and sustained funding to community-based organizations (CBOs) to deliver mental health, wellness and addiction services and supports and increase capacity to conduct MHA focused research to maintain and increase community wellness. The framework aims to provide sustainable funding options under three streams: MHA Community Wellness Grants, Project Grants, Research and Innovation Grants.

<https://beta.novascotia.ca/sites/default/files/documents/1-3703/community-wellness-framework-en.pdf>

The first CWF stream is the MHA Community Wellness Grant which offered up to three years of funding to CBOs to provide MHA programs and supports that meet the needs of the community. This multi-year funding aims to provide stability for these organizations, allowing them to focus more time on providing services. In March 2025, OAMH announced the establishment of 23 contracts with community-based organizations. Organizations were able to apply for up to \$250,000 per year <https://news.novascotia.ca/en/2025/03/06/support-local-mental-health-addictions-programs-across-nova-scotia> .

The second CWF stream is the Project Stream which is administered by the Mental Health Foundation of Nova Scotia through its existing granting streams. This funding is to support one-time grants up to \$25,000 per grant for projects and events focused on addressing mild to moderate mental health and addiction concerns.

The third CWF stream is Research and Innovation Stream providing grants for time-limited projects that are focused on research and innovation. The application process was launched in October 2024 <https://news.novascotia.ca/en/2024/10/10/new-mental-health-addictions-grant-early-career-researchers>.

Additional work funded through OAMH and overseen and implemented by NSH and IWK include:

- The opening of Mental Health Acute Day Hospitals by NSH in Kentville (July 2024) and Truro (October 2024). Along with the existing Day Hospitals in Halifax and Sydney, these sites support individuals with significant mental health concerns through structured, goal-oriented programs. Patients benefit from monitored care during the day while returning home in the evening, creating a balance between intensive treatment and community connection.
- Continued integration of mental health and addiction services into the publicly funded Virtual Health Policy for all Nova Scotians. As a result of the successful uptake of NSH's Clinical Virtual Care Team services, nearly all NSH MHA outpatient services are now available virtually (when deemed appropriate for the client).
- Continued implementation of twelve Recovery Support Centres (RSCs) across Nova Scotia. RSCs are welcoming spaces that provide education, recovery, and harm reduction support (including outpatient withdrawal management), and one-on-one support and group treatment for people struggling with substance use and/or gambling concerns. Services can be accessed by appointment or through drop-in. As of March 31, 2025, ten RSCs have opened providing assessment, provincial group-based recovery support, and outpatient withdrawal management (<https://mha.nshealth.ca/en/rsc>).
- Continued support for e-mental health and addictions (e-MHA) supports and integration of virtual health options. E-MHA services included Strongest Families, Togetherall, Tranquility and Kids HelpPhone/Good2Talk ([www.mhahelpns.ca](http://www.mhahelpns.ca)).
- Continued expansion of the Provincial Pre-school Autism Services (PPAS) <https://iwkhealth.ca/provincial-preschool-autism-service>. IWK is leading PPAS work that includes access to appropriate interventions and single point of access to supports. In 2024-25, province-wide expansion occurred for the direct intervention Early Start Denver Model (ESDM)-informed services. ESDM-informed service helps children learn through play and daily activities at home and in childcare settings. Caregivers and clinicians work together to build a child's motivation to interact, communicate, and learn. The PPAS team is continually developing expertise in this approach while delivering services. This model is added to the PPAS existing services offered through Nova Scotia Hearing and Speech, Intensive Intervention (IWK), and QuickStart programs (Autism Nova Scotia).

OAMH continues to support several human-centered, trauma-informed harm reduction and mental health programs, including managed alcohol programs, overdose prevention sites, and the Pause

Mental Health Clinic through the North End Community Health Centre. Work and investments are focused on:

- Managed alcohol programs (MAP) which provide a safe supply of alcohol to people with severe alcohol use disorder, prescribed by a physician.
  - The first managed alcohol program was established in the Halifax Regional Municipality (HRM) at the North End Community Health Centre in 2020, and a multi-year funding agreement was put in place in 2023-24. In March 2024, the site was serving 67 individuals. Individuals can be connected to other services and support as required.
  - The Ally Centre of Cape Breton MAP program opened in January 2024. The focus was setting up the site and working with supportive housing partners to support program participation. Operating hours were extended for the Ally Centre, including their Overdose Prevention Sites, through additional funding.
- Funding and coordination to support increased access to services for individuals who are homeless and experiencing severe and persistent MHA concerns within Halifax. Staff positions were funded through North End Community Health Centre's Mobile Outreach Street Health Program, the Mi'kmaw Native Friendship Centre and YWCA Halifax. In addition, two new outreach positions were added to NSH's Mental Health and Addiction team to support improved access to services and supports.

#### Build in Equity, Diversity and Inclusion into OAMH-supported Programs and Services

DHW released the Health Equity Framework in July 2023. This Framework continues to provide concrete, measurable, and attainable actions for Nova Scotia's health system to deliver care that is equitable for all people living in Nova Scotia. OAMH is a partner in this effort and its implementation, which includes data collection to understand how to better address racism and discrimination throughout the health system. To enhance data collection to better understand the health of our communities and to guide policy and investment decisions, OAMH is developing a standardized approach to monitor progress and impact of Universal Mental Health and Addictions Care. Once complete, partners (IWK, NSH, and community partners) will apply it to Universal Mental Health and Addictions Care initiatives.

OAMH has also integrated the Health Equity Framework through initiatives such as establishing the Lived Experience Advisory Group, which is comprised of community-based organizations and individuals that provide diverse perspectives, input, and advice on Universal Mental Health and Addictions Care service planning.

OAMH strives to provide accessible, equitable and accountable mental health care and addictions support for the people of Nova Scotia. OAMH's efforts included:

- OAMH continued to fund the People's Counselling Clinic to address MHA-related concerns. This community-based mental health clinic provides direct services and public education focused on issues of trauma, race, sex and gender. Services are provided to the public for free (<https://news.novascotia.ca/en/2024/04/08/more-mental-health-supports-marginalized-underserved-nova-scotians>).

- OAMH is a member of the Tajikeyimik Strategic Health Partnership Committee, which creates opportunities for collaboration and coordination between Tajikeyimik, the Province, and other partners.

OAMH funded Tajikeyimik to enable them to work closely with Mi'kmaw communities and key partners to understand needs and priorities. Their engagement informed the development of the L'nu'k First Nations Mental Wellness and Healing Framework. The priorities identified in the Framework affirmed continued OAMH funding of clinical services directly, at Eskasoni, Millbrook and Wagmatcook, as well as through the NSH MHA Program so services are provided to Mi'kmaw communities. Furthermore, OAMH funded Eskasoni First Nation's Crisis Line, a service available to Mi'kmaw communities across Nova Scotia

(<https://www.eskasonimentalhealth.org/>).

- OAMH, in partnership with IWK, continued to support an Afrocentric clinic, staffed by a core five-person team, to provide MHA services for youth and caregivers. The team of professionals engage and work directly with African Nova Scotian children, youth and families. The team explores new ways to engage the community and improve the IWK MHA program's capacity and response in the provision of MHA services (<https://iwkhealth.ca/clinics-programs-services/african-nova-scotian-service>).

### New Models of Care and Expansion of Services

OAMH has undertaken work to expand access to wellness, crisis and mental health and addiction support services. A working group between OAMH, IWK, NSH, Department of Justice and policing partners collaboratively co-designed a community-led crisis response pilot. Through a Request for Proposal process, OAMH awarded a contract to the Peer Outreach Support Services Education (POSSE) Project to design and pilot a community-based response to mental health, substance use and addiction crisis. The funding was awarded in late summer 2024. Throughout the fall and winter, the POSSE Project focused on developing and implementing the program and related policies to support a soft launch in June 2025.

Integrated Youth Service (IYS) (<https://news.novascotia.ca/en/2024/04/10/youth-mental-health-sites-announced>) is an evidence-based model that offers low-barrier access to community-based services for youth aged 12 to 25 and their caregivers experiencing challenges with their mental health or substance use. In January 2025, Yarmouth was announced as the eighth IYS site in Nova Scotia. <https://news.novascotia.ca/en/2025/01/24/new-integrated-youth-services-coming-yarmouth>.

### Inquiry Response

OAMH is a partner on the whole of government Inquiry Response that is focused on responding to the recommendations from the Mass Casualty Commission (MCC) Final Report and the Desmond Fatality Inquiry (DFI).

In response to *MCC Recommendation C.13: Reversing the course: Addressing the Public Health emergency In Colchester, Cumberland and Hants Counties*, OAMH, in partnership with IWK, NSH, and community partners have undertaken several focused initiatives. As of March 2025, 25 new health system positions were added to NSH to support MHA outreach work, wellness navigation, health promotion, public engagement, and grief and bereavement expertise. The IWK has also led the creation of processes and care pathways to support Trauma-Informed Care. The Trauma-Informed Care Team trained over 200 staff and leaders in the Northern Zone across community organizations. Trauma-Informed Care also created a train-the-trainer curriculum to build sustainability into the training model.

The Nova Scotia Hospice Palliative Care Association (NSHPCA) was provided funding to coordinate community grief, bereavement, and emotional wellness model of care <https://news.novascotia.ca/en/2024/01/26/new-approach-grief-bereavement-emotional-wellness-services>. Within this, NSHPCA launched the Healing Pathways Community Fund. Fourteen grants were awarded to community-based organizations offering grief, bereavement, and mental health support in Colchester, Cumberland and Hants counties in October 2024 <https://news.novascotia.ca/en/2024/06/10/more-funding-grief-bereavement-mental-health-supports>.

Funding was renewed for NSHPCA in January 2025 to continue their work on grief bereavement and emotional wellness. OAMH funding has supported the continuation of the Healing Pathways Community Fund and additional grants will be provided to non-profit organizations in 2025-26 <https://healingpathways.nshpca.ca/announcements/>.

Furthermore, the funding supported the launch and continued operation of the Grief Alliance, in partnership with NSH. The Grief Alliance is a province-wide initiative dedicated to strengthening grief support through community-based education, resource sharing and collaboration. NSHPCA also launched Healing Pathways – Grieving Well, an online directory and web application designed to connect Nova Scotians with local grief and emotional wellness supports.

## Financial Summary and Variance Explanation

### Departmental Expenses Summary (\$ thousands)

<u>Programs and Services</u>	<u>2024-2025 Estimate</u>	<u>2024-2025 Actuals</u>	<u>2024-2025 Variance</u>
General Administration	454	458	4
Strategic Direction and Accountability	3,152	2,542	(610)
Early Intervention Services	31,562	29,928	(1,634)
Addiction Services	55,320	58,227	2,907
Mental Health Services	268,821	258,719	(10,102)
Capital Grants	310	0	(310)
<b>Total - Departmental Expenses</b>	<b>359,619</b>	<b>349,874</b>	<b>(9,745)</b>
<b>Additional Information:</b>			
Ordinary Revenues	37,879	34,985	(2,894)
Fees and Other Charges	529	498	(31)
Ordinary Recoveries	5,778	6,162	384
<b>Total: Revenue, Fees and Recoveries</b>	<b>44,186</b>	<b>41,645</b>	<b>(2,541)</b>
TCA Purchase Requirements	---	---	---
<b>Funded Staff (# of FTEs)</b>			
<b>Department Funded Staff</b>	<b>26.0</b>	<b>22.0</b>	<b>(4.0)</b>

#### Departmental Expenses Variance Explanation:

The Office of Addictions and Mental Health actual expenditures were \$9.75 million lower than estimate primarily due to \$7.2 million lower IWK operational costs, \$6.0 million related to implementation delays in *Health Services Insurance Act* initiatives, and \$3.1 million related to implementation delays in Health Human Resources initiatives. This was offset by \$5.0 million increase for expenditures related to the Mass Casualty Commission, \$1.2 million increase related to NSH operating pressures, and \$670 thousand increase for higher utilization of Naloxone kits.

#### Revenue, Fees and Recoveries Variance Explanation:

Ordinary Revenue was \$2.9 million under budget due to \$2.0 million of funding reallocated to recoveries and a carryover of \$820 thousand related to the *Working to Improve Healthcare for Canadians Funding Agreement*.

Ordinary Recoveries were \$384 thousand over budget due to \$1.5 million of funding being reallocated from revenue. This was offset by lower gambling services recoveries of \$1.1 million.

#### TCA Purchase Requirements Variance Explanation:

N/A

#### Provincial Funded Staff (FTEs) Variance Explanation:

OAMH is reporting a variance of 4.0 FTEs under budget due to temporary vacancies.

## Public Interest Disclosure of Wrongdoing Act

The *Public Interest Disclosure of Wrongdoing Act* was proclaimed into law on December 20, 2011.

The Act provides for government employees to be able to come forward if they reasonably believe that a wrongdoing has been committed or is about to be committed and they are acting in good faith.

The Act also protects employees who do disclose from reprisals, by enabling them to lay a complaint of reprisal with the Labor Board.

A wrongdoing for the purposes of the Act is:

- a) a contravention of provincial or federal laws or regulations;
- b) a misuse or gross mismanagement of public funds or assets;
- c) an act or omission that creates an imminent risk of a substantial and specific danger to the life, health or safety of persons or the environment; or,
- d) directing or counselling someone to commit a wrongdoing.

The following is a summary of disclosures received by Office of Addictions and Mental Health:

Information Required under Section 18 of the Act	Fiscal Year 2024-2025
The number of disclosures received	0
The number of findings of wrongdoing	0
Details of each wrongdoing (Insert separate row for each wrongdoing)	n/a
Recommendations and actions taken on each wrongdoing. (Insert separate row for each wrongdoing)	n/a