

# Moving on Mental Health

A System That Makes Sense for Children and Youth

## Peel Region's Lead Agency Progress Report, February 2016

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### Vision Statement:

*We envision an Ontario in which child and youth mental health is recognized as a key determinant of overall health and well-being, and where children and youth grow to reach their full potential.*

**Ontario's Policy Framework for  
Child and Youth Mental Health**

### Goal:

*Together, we will transform the experience of children and youth with mental health problems and their families, so that they will know what high quality mental health services are available in our community; and how to access mental health services and supports that meet their needs.*

**Moving on Mental Health**

Dear Community Partner:

We are happy to share our third Progress Report with you. Since our last report in October 2015, *Moving on Mental Health* (MOMH) has made substantial progress both locally and provincially, including the first time that Lead Agencies have developed and led planning processes in their respective Service Areas to inform the Province's allocation of \$6 million in new funding for Child and Youth Mental Health (CYMH).

### Summary:

In partnership with Peel's six Core Services Delivery (CSD) organizations, we continue to focus on our three priorities as identified in the **Core Services Delivery Plan** (CSDP) – namely, the operationalization of the Peel Coordinated Intake Network (PCIN) and the development of “made in Peel” mechanisms for Youth Engagement and Family Engagement.

At the community level, the focus continues to be on engagement with key sector partners. Outreach to key sectors is underway to support the creation of a robust community planning mechanism specific to child and youth mental health, as identified in Peel's **Community Mental Health Plan** (CMHP).

Peel Children's Centre (PCC) continues to build its capacity to meet **System Management** expectations within the organization and across CSD partners. The issues of governance, staff resource allocations, and system capacity for performance and financial management are examples of current areas of focus.

**Provincially**, the focus has been on the creation of planning and advisory mechanisms to align the efforts of Lead Agencies, remove barriers to effective implementation, and leverage opportunities for efficiency.

### Peel Service Area Updates:

You may recall that the priorities and activities outlined in the CSDP for 2014-15 focused on building a foundational understanding of the current “**service landscape**” in Peel, while the CMHP for 2014-15 focused on developing a base understanding of “**current services and pathways**”.



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CORE SERVICES DELIVERY PLAN 2014/15 – Priorities, Objectives and Updates		
Service Area Priority #1	Rationale	Main Objective(s)
<b>Complete work to operationalize the Peel Coordinated Intake Network model (PCIN)</b>	Builds on the re-visioning of Centralized Intake (Mental Health Services for Children and Youth). The PCIN model is supported by CSD partners and aligns with MOMH expectations for coordinated access/intake processes	Standardized, evidence-based intake/assessment/outcome tool(s) Community referral process Web-based common database for all CSD partners
<p><b>Progress to date:</b></p> <p>Last spring, all CSD providers in Peel decided to adopt the interRAI™ Child and Youth suite of standardized, evidence-based tools (<a href="http://www.interrai.org">www.interrai.org</a>). The training team at CPRI worked with the Peel interRAI™ Implementation Committee to plan a training program for staff across the six CSD organizations on the interRAI™ Screener (for access/intake) and ChYMH (for assessment and clinical outcomes). The training has been completed and competency testing is underway.</p> <p>The second objective, a new community referral package to support referrals to the MCYS-funded service system, is being piloted. Planning will begin this spring for the full rollout in the fall. The questions on the common intake form have also been reviewed and updated, incorporating Diversity considerations in response to feedback received at a Diversity workshop held in July.</p> <p>As Lead Agency, PCC has reviewed web-based clinical data systems, identified a preferred system/vendor, and discussed our findings/recommendations with our CSD partners. System demonstrations are underway with the aim of procuring the new system by early spring.</p>		
Service Area Priority #2	Rationale	Main objective
<b>Develop and implement a system-wide mechanism for youth engagement (YE), with support from the Ontario Centre of Excellence for Child and Youth Mental Health (CoE)</b>	Aligns with MOMH expectations for YE. YE is emerging as a guiding service principle amongst all CSD partners in Peel, most notably Nexus Youth Services (NYS), which has been provincially recognized for integrating YE into service design, delivery and evaluation.	Develop plan to lay groundwork for YE in the Peel Service Area Document successes and lessons learned from NYS case study on YE Host one-hour workshops on the concept of YE for all CSD partners
<p><b>Progress to date:</b></p> <p>A Working Group, with members from all CSD partners, was formed in September to identify, create and sustain opportunities for YE across Peel. It has held three meetings, drafted its terms of reference, and completed the CoE's online Youth Engagement module (an orientation to this evidence-informed practice). In partnership with youth, Peel's YE Coordinator, Nancy Hood, has analyzed existing YE activities and is assessing the Peel Service Area's capacity for expanding YE practice. A report will be ready to share by the first quarter of 2016/17 and will include a case study on the NYS experience. The YE workshop plan has been drafted and will be implemented early in 2016/17 so it can incorporate the findings of the environmental scan. There will also be an opportunity for both service providers and youth to learn about YE theory and practice when the CoE hosts <i>Art of YE</i> training in the upcoming fiscal year.</p>		

Service Area Priority #3	Rationale	Main objective
<b>Development and implementation of a system-wide mechanism for family engagement (FE), with expert support from the Ontario Centre of Excellence for Child and Youth Mental Health (CoE)</b>	Aligns with MOMH expectations for FE. When existing agency-specific FE activities are re-conceptualized from a community perspective, future benefits can accrue to the community in addition to the individual agency context.	Develop plan to lay groundwork for FE in the Peel Service Area  Develop system-wide mechanism for FE in the Peel Service Area
<p><b>Progress to date:</b></p> <p>Stephanie Bush is the new part-time FE Coordinator for the Peel Service Area. Since assuming this role in October, Stephanie has completed a preliminary environment scan and conducted additional research into FE practices in local, national and international locations—in both CYMH and other sectors (e.g. healthcare; education). She has also partnered with the CoE, which recently released <i>Best Practices in Engaging Families in Child and Youth Mental Health</i>. Stephanie is preparing to engage senior leaders of all CSD organizations in Peel to share her findings on the implementation of FE as an evidence-informed practice and to facilitate Service Area-wide collaboration moving into 2016-17.</p>		

As mentioned earlier, MCYS is investing \$6 million in new provincial funding for CYMH services. Peel's share of this funding will be \$490,100 annually. A great deal of effort went into a planning process with Peel's six CSD partners and four school boards to analyze service needs/gaps, followed by a day-long meeting of CSD partners to discuss and reach consensus on the allocation of this new investment. PCC as Lead Agency then prepared a funding submission on behalf of the Peel Service Area. MCYS accepted our recommendations to increase funding for Intensive Treatment Services – more specifically, in Dialectical Behaviour Therapy (DBT) and Transitional Aged Youth Outreach (TAYO) at AYSP; and in Intensive Child and Family Services (ICF) at PCC, including the first French Language Service position in the ICF program.

The process for allocating this new investment took a substantial amount of time that could not have been foreseen when we prepared the CSDP and CMHP last year. As such, the process towards identifying a Child & Youth Community Planning Mechanism for the Peel Service Area has been slightly delayed.

COMMUNITY MENTAL HEALTH PLAN 2014/15 – Priorities, Objectives and Updates		
Service Area Priority #1	Rationale	Main Objective(s)
<b>Continue to build on existing relationships</b>	Aligns with MOMH expectations for community engagement	Undertake appropriate engagement activities and document efforts to engage appropriate community partners
<p><b>Progress to date:</b></p> <p>A great deal of time and effort went into a range of engagement activities from spring to fall with non-MCYS sectors including the four school boards, child welfare, youth justice, the two Local Health Integration Networks (LHINs), and paediatricians. The pace of engagement slowed in late fall when available time needed to be devoted to planning for the new MCYS service investment. As described below, engagement activities resumed in the fourth quarter of 2015/16.</p>		

Service Area Priority #2	Rationale	Main Objective(s)
<b>Describe current targeted prevention activities and mental health services delivered by other sectors</b>	Aligns with MOMH expectations for a foundational understanding of current services and pathways	Continue to build an inventory of targeted prevention and mental health services delivered by other sectors (e.g. Health, Education) in the Peel Service Area
<p><b>Progress to date:</b></p> <p>We have completed an inventory of targeted prevention and mental health services in the healthcare and education sectors. Outreach to some sectors (e.g. developmental and specialized children's services) has been delayed, but will resume so that the inventory includes services in all key child- and youth-serving sectors in the Peel Service Area.</p>		
Service Area Priority #3	Rationale	Main Objective(s)
<b>Analyze inventory of existing local community planning mechanisms and create/identify a formal Child &amp; Youth Community Planning Mechanism</b>	Aligns with MOMH expectations for the creation of a Child & Youth Mental Health Community Planning Mechanism	Develop methodology and conduct analysis to inform a decision with respect to a Peel-specific Child and Youth Community Planning Mechanism
<p><b>Progress to date:</b></p> <p>Our assessment of the inventory of existing community planning tables (included in the CMHP for the Peel Service Area) was that none meets MCYS' objectives for a planning table/mechanism specific to CYMH. As such, PCC has contracted with a consultant, Jane Fitzgerald, to assist us in creating a new planning mechanism. Ms. Fitzgerald, whose background includes senior leadership roles in several social service sectors and in government, is meeting with Peel's key child-/youth-serving sectors to collect input and provide a summary report that will help us develop our "made in Peel" Community Planning Mechanism for CYMH Services.</p>		

### A357 - System Management:

In its A357 Service Description Schedule, MCYS defines System Management expectations for Lead Agencies across five domains: Leadership, Planning, Service Delivery and Program Alignment, Performance Management, and Financial Management. MCYS has committed resources to lead agencies in support of building System Management capacity to meet MOMH obligations. Examples of activities to date include:

- working at the governance level within PCC and across CSD partners
- orienting staff across all CSD partners to the MOMH action plan
- assessing current PCC capacity to meet MCYS' expectations and developing/implementing a plan to increase internal capacity to address Lead Agencies' obligations
- offering provincial leadership in areas such as governance, provincial structures and processes, accountability agreements, communications, funding, and data strategy/management
- engaging with PricewaterhouseCoopers (PwC) to conduct a Systems and Processes review, with a focus on financial and performance management, across all CSD partners.

### Provincial Updates:

The Lead Agency Consortium is a foundational leadership structure established to work with MCYS to collectively and collaboratively realize the goals of MOMH. To date, the Consortium has focused on developing a three-year strategic plan. Working groups on Governance/Operating Model; Communications; Accountability Agreements/Subcontracts; Funding; Aboriginal Strategy; and Francophone Services have been identified. Humphrey Mitchell, CEO of Peel Children's Centre, co-chairs with Joanne Lowe, Executive Director of Youth Services Bureau Ottawa.

The CYMH Partnership Table is a joint MCYS/Lead Agency-led mechanism in place to identify and resolve strategic issues that act as barriers or enablers to effective system transformation. The Partnership Table recently expanded its membership to include representation from Toronto and northern Ontario.

### What's Next and What Do I Need to Know?

Provincially, MCYS has identified 31 of 33 Lead Agencies and continues to work towards its goal of having mature lead agencies assume funding responsibility and accountability for their Service Areas at the end of 2016/17. There is still much work to be achieved before this transition can occur. MCYS and the Lead Agencies need to finalize the standard Accountability Agreement (between MCYS and Lead Agency) and Service Agreement (between Lead Agency and sub-contracted CSD partners). Legislative and/or regulatory changes may be necessary and MCYS is working on several fronts (e.g. Business Intelligence Solution; Communications strategy/rollout of CYMH program identifier).

Locally, PCC's focus as Lead Agency is on achieving the deliverables in the CSDP and CMHP, as well as updating the two plans with goals for the year ahead. At the Core Services level, the plan will include the continued implementation of PCIN, the interRAI™ tools and web-based common database, and completing our work on YE and FE mechanisms for Peel. There will be added emphasis on identifying opportunities for service system improvements. At the community level, next year's plan will implement the community CYMH planning mechanism for the Peel Service Area. A further focus will be on fulfilling PCC's System Management responsibilities as laid out in MCYS' A357 Service Description Schedule for Lead Agencies.

To all our community partners, thank you for your continued interest and support of Peel's *Moving on Mental Health* transformation agenda. A special thank-you to Peel's CYMH core service providers:

- Associated Youth Services of Peel
- Nexus Youth Services
- Peel Children's Centre
- Rapport Youth & Family Services
- Trillium Health Partners
- William Osler Health System.

Our collective work is challenging, but it is also energizing as we forge ahead to create a Peel community that is welcoming and accessible for all children and youth who are facing mental health challenges, and to build a provincial system that achieves better mental health outcomes for children and youth.

As Lead Agency, and on behalf of our partner CYMH core service providers, PCC is committed to providing you with timely and useful information about our MOMH progress in the Peel community. We hope you find this update helpful. If you have suggestions that would improve our communications, or if you have any questions, please contact us at [PeelMOMH@peelcc.org](mailto:PeelMOMH@peelcc.org).