



# Developing a Community Mental Health Planning Mechanism for Children & Youth in Peel

June 27, 2016

*A Work in Progress*

# Agenda

- Introduction and Context
- An Update - Core Services Delivery Plan
- Consultation - Community Mental Health Plan, including Q&A
- Small Group Discussions - Design of the Mechanism
- Large Group Discussion - Feedback to the Lead Agency
- Summary & Next Steps



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# ***The Provincial Context***

# Goals of Policy Framework (2006)



1. A child and youth mental health sector that is coordinated, collaborative and integrated at all community and government levels, creating a culture of shared responsibility;
2. Children, youth and their families have access to a flexible continuum of timely and appropriate services and supports within their own cultural, environmental and community context;
3. Optimal mental health and well-being of children and youth is promoted through an enhanced understanding of, and ability to respond to, child and youth mental health needs through the provision of effective services and supports; and
4. A child and youth mental health sector that is accountable and well-managed.

## Moving on Mental Health

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

# The Responsibilities of Lead Agencies

## System Management responsibilities

### Core Service responsibilities

Are community-based core services available in my service area?

### Local System responsibilities

Are services across the continuum working together to meet the needs of children, youth and their families?

# Core Services & Key Processes

Coordinated Access/Intake

Targeted Prevention

Brief Services

Counselling and Therapy Services

Family Capacity Building and Support

Specialized Consultation/Assessment

Crisis Support Services

Intensive Treatment Services – *In-Home*

Intensive Treatment Services – *Day Treatment*

Intensive Treatment Services – *Out-of-Home*

Case Management/Service Coordination

# Lead Agency Consortium

## CYMH LEAD AGENCY CONSORTIUM

(31 of 33 Lead Agency Communities named)

Joanne Lowe & Humphrey Mitchell, Co-Chairs

### *Vision*

An exceptional system of mental health services for children and youth in Ontario

### *Mission*

Help Lead Agencies and their partners succeed in delivering value and improving access to equitable services





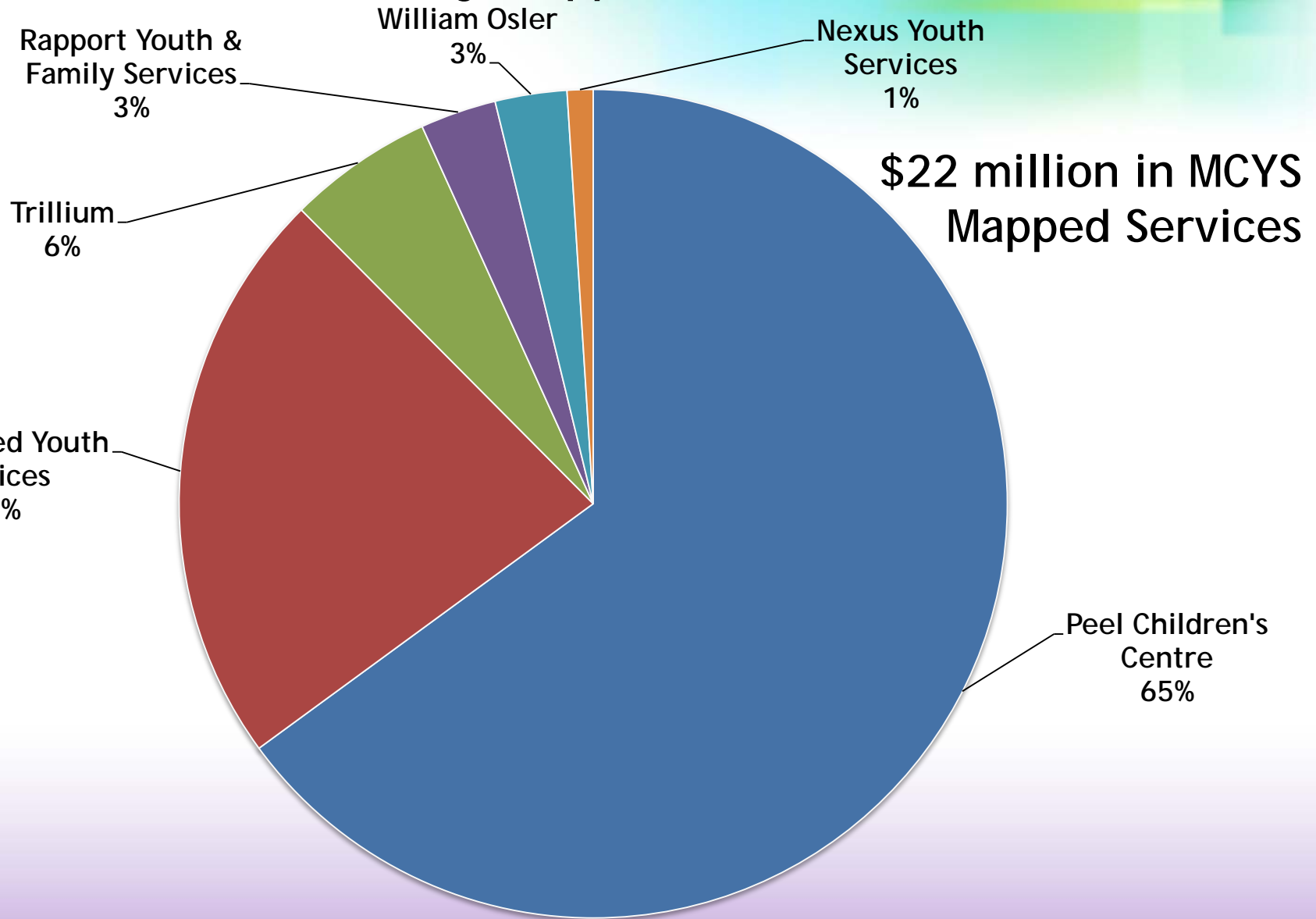
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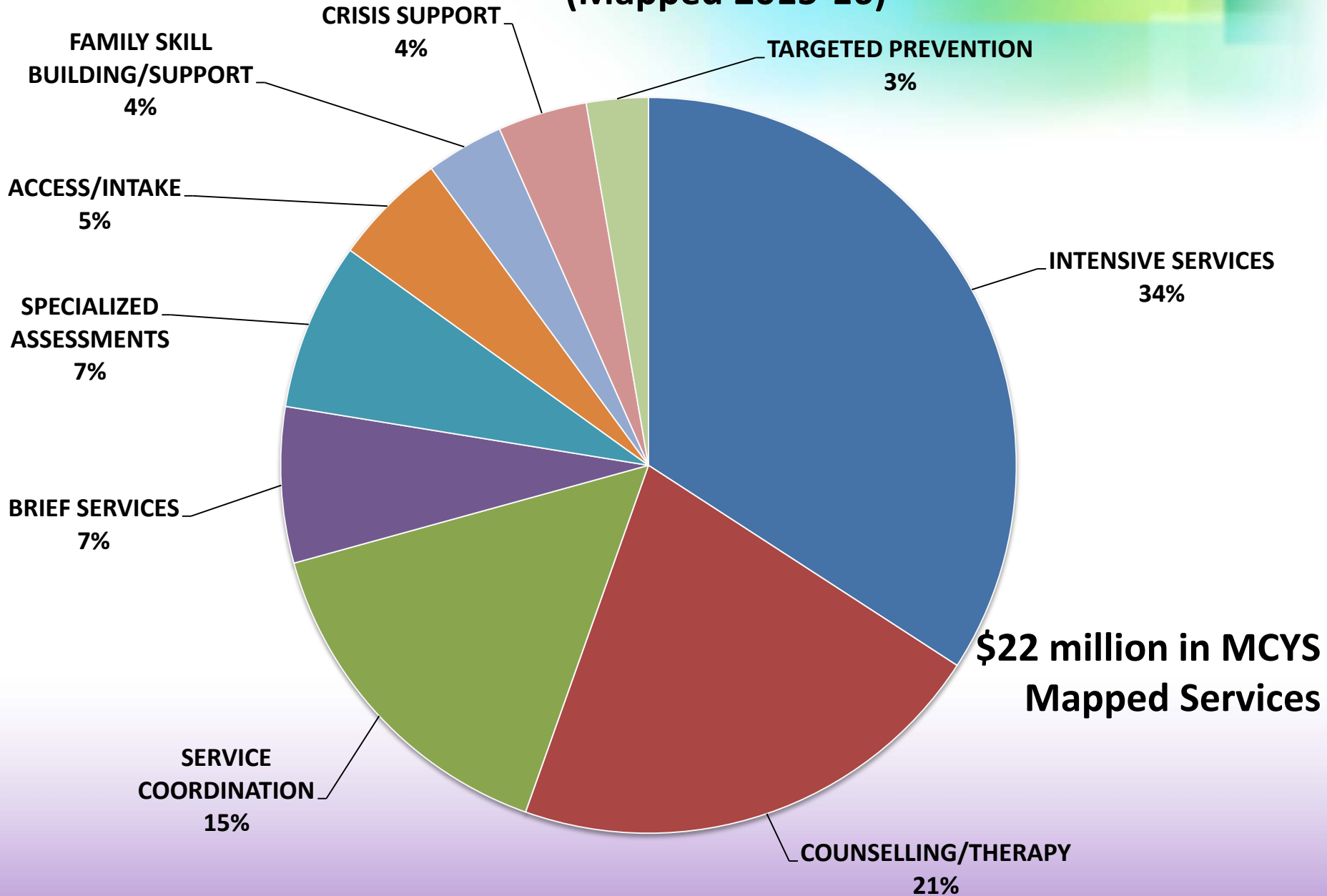


# *The Peel Context*

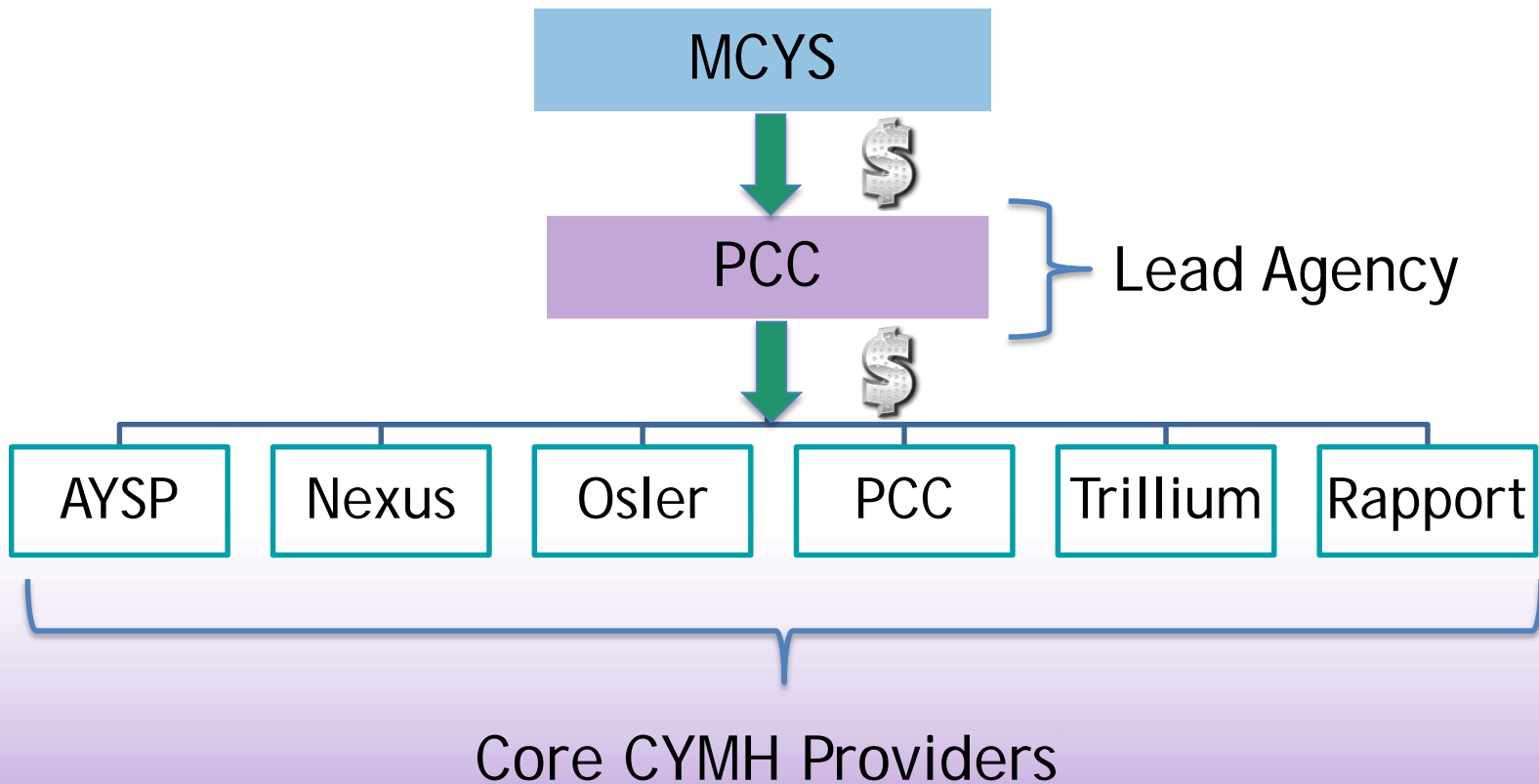
# Core Services Providers in Peel - % Total MCYS Funding (Mapped 2015-16)



# Core Services & Key Processes in Peel - % of Total MCYS Funding (Mapped 2015-16)



*As of April 2017*



# The Two Plans

- PCC as lead agency is responsible for engaging the CYMH and broader sector partners to develop a Core Services Delivery Plan (CSDP) and a Community Mental Health Plan (CMHP)
- **CSDP** describes current delivery of core child and youth mental health services and how MCYS funding is being used to support these services, as well as system improvements
- **CMHP** describes CYMH services delivered by other sectors (e.g., Education, Health, EY, CW, YJ), as well as services delivered by core services providers that are not core MH, and helps improve pathways into, through and out of care.

# Core Services Delivery Plan 2016/17

- Continue to work collaboratively with Core Service Providers to implement the Peel Co-ordinated Intake Network (PCIN) in support of coordinated access to the CYMH service system
- Develop and implement a branding and communications strategy to support Peel's intake/access mechanism(i.e., PCIN) to the CYMH service system
- Implement InterRAI-Screener at PCIN and InterRAI-ChYMH at assessment/discharge to support consistent system-wide, needs-based understanding of clients in Peel's CYMH Service System (profiles and outcomes)
- Implement new client information system across the Peel Service Area

# Core Services Delivery Plan 2016/17

- Continue to work with Core Services Providers to implement MOMH transformation as outlined in Peel's Core Services Delivery Plan (CSDP)
- Implement system-wide mechanism for youth engagement
- Develop system-wide mechanism for family engagement
- Review Brief Services in the Peel Service Area (recommendation made to MCYS; work to begin in fall/winter of 2016)

# Community Mental Health Plan 2016/17

- Establish a Community Mental Health Planning Mechanism to implement MOMH transformation as outlined in Peel's Community Mental Health Plan (CMHP)
  - ✓ Complete the summary of Peel's CYMH programs delivered by system partners (not core services providers)
  - ✓ Describe referral pathways and protocols between services delivered by system partners and the core CYMH service system





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# ***The CYMH Plan Consultation***

# Building Community Engagement

- In 2014/15 PCC reviewed all of the planning tables dedicated to improving services to children and youth in Peel
- Concluded that **there is no one table** that meets the expectations for a “mechanism dedicated to Community Mental Health planning”
- In February 2016 embarked on a broader community partners consultation process to seek input into the design of a sustainable community planning mechanism for child and youth mental health that would have the **confidence and support of the community**

# Community Partners Consulted

- Between February and May 2016, meetings were held with:
  - Education (Peel District School Board; Dufferin-Peel Catholic District School Board; Conseil scolaire Viamonde; Conseil scolaire de district catholique Centre-Sud)
  - Health (Mississauga Halton LHIN; Central West LHIN)
  - Public Health (Peel Public Health)
  - Canadian Mental Health Association
  - Youth Justice (MCYS Youth Justice Services)
  - Child Welfare (Peel Children's Aid Society)
  - Peel Regional Police
  - Developmental Services
  - Faith Leaders and Newcomer Services
- Meetings with hospitals underway (Trillium, Osler, Halton)
- 58 individuals contributed to the consultation



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# *Designing the Planning Mechanism*

# Summary of Key Considerations

## Engage more Community Partners

*“Think of the engagement process like an accordion .... at times we go wide and involve as many as possible; at times we narrow to bring to the table those who will do the work and ensure progress.”*

## Seek Consensus on Vision and Scope

- Develop shared understanding and well-articulated shared principles essential to establishing a mechanism that delivers results
- Clarity of scope is essential to setting priorities and determining who should be “at the table”

## Key Considerations Cont'd.

### Understand Current Child and Youth Mental Health Service Landscape

- Support expressed for the development of a “Community Map of Services” - to include both the formal and informal services continuum

### Support Inclusive and Customized Approaches

- Unique diversity of Peel and limitations of current data re: service access by various ethnic & French-language groups
- Faith community believes the formal system devalues the informal supports they provide
- Increase connectivity through innovative outreach approaches to faith and ethnic groups

## Key Considerations Cont'd.

### Include Voices of Children, Youth and Families

- Unanimous call - voices of those accessing services must be included
- Ideas included:
  - Establishing an on-going input and feedback link between the Family and Youth Engagement processes and mechanisms
  - Finding unique ways to bring youth voices into this conversation and not just the most vocal, but also the quiet voices that often are not heard



# Key Considerations Cont'd.

## Build on Lessons Learned

- Build on legacy of collaborative, multi-sector planning in Peel; maintain awareness of a rapidly changing planning environment

## Design for Success

- Must be effectively resourced; include effective and transparent communication; respect that there are competing priorities/pressures; ensure involvement is “value-added”; and continue work between meetings to keep things moving



## Key Considerations Cont'd.

### Get Going ... but Take It Slow

- Mixed feedback with respect to time frames and getting started: some feel strongly that we need to build trust and knowledge about each other; another perspective was that "PCC should just get on with it"; and last, "It is okay for PCC to bring some priorities to the table, as we need to get started and not delay moving on this"
- To be successful, the planning mechanism must demonstrate flexibility and ability to respond to emerging demands -- Adapt as we go!

# Achieving Buy-in and Support

- PCC as the Lead Agency will be challenged to meet all of the expectations ... however community partners expressed **considerable commitment to making this process work**
- Advice included: act from a place of transparency; communicate widely; demonstrate that children, youth and parents are at the "centre" of efforts; encourage innovation; reflect on current practices
- Reinforce a **shared process/shared responsibility**  
*"The community needs to own this journey as well as PCC"*

## Moving forward...

- *“The opportunity is larger than the fear of the challenges”*
- Understanding that this will take time ...
- Foster a common understanding of community needs and develop a shared language
- Ensure culturally appropriate/sensitive services
- Enable more seamless transitions between all services ... develop new pathways
- Decrease over time the number of planning tables



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# ***Operationalizing the Planning Mechanism***

# Emerging Priorities

- (1) Understanding Roles, Responsibilities, Services and Capacity of All Sectors/Partners
- (2) Increase Clarity re Pathways and Access to Services
- (3) Protocol for Better Information-Sharing
- (4) Navigation Support

## Emerging Priorities cont.

- (5) Relationship Between Community Mental Health and Hospital-Based Services (**work in progress**)
- (6) Seamless Transitions between Children's and Adult Mental Health
- (7) 24/7 Crisis Support
- (8) DS/Dual Diagnosis Programs

# Recommendations to PCC

*Moving on Mental Health* calls for communities to transform services together ...

Objective of this consultation - to seek input on the design of a 'made in Peel' children and youth planning mechanism that has the confidence of the community, can be sustained over time, and links with the other work underway

## Recommendations cont'd.

- Despite the lack of consensus on how to achieve this there was a call for **a shared vision**
- A set of **principles and values** emerged
- These form a starting point from which to proceed; provide direction around what to do first; as well as **operating assumptions** to guide the functioning of the “planning mechanism”



# Recommendations: Initial Steps

1. Host meeting with community partners to share feedback from consultations
2. Receive feedback on
  - who else should be 'engaged'
  - vision, values and guiding principles
  - suggested design of mechanism



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# *Small Group Discussions*

# Who Else Should be 'Engaged'?

Review the list of those who participated in the consultation process.

## *Questions:*

- 1. Are there key sectors not included in the process?*
- 2. Are there other community members who should be engaged as part of this consultation process?*

# Developing a Shared Vision

- The Vision outlined in *Moving on Mental Health* offers a good starting point

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

- Question: *“Are there elements unique to Peel that should be incorporated into the above to make it our vision?”*

# Values

While discussing elements required to ensure the confidence of the Peel community in the planning mechanism, a number of values were expressed as important.

- Act from a place of **transparency and integrity**
- Ensure the **voices of children, youth and parents** are included
- Reflect the **diversity of the community**
- Situate mental health within an **holistic framework of wellness**

# Guiding Principles

Guiding principles to steer the work of the mechanism.

- **Inclusiveness** in the participants, work and processes
- **Ensure linkages** exist between the work of the CSD table, the CMHP mechanism, and YE and FE mechanisms
- **Utilize data** to “tell the Peel story”
- **Support innovation** in outreach, practice and service delivery
- **Communicate** widely and transparently
- **Evaluate results** and be accountable to one another and to the community we serve

# Values and Guiding Principles

## *Questions:*

- 1. Are these values and guiding principles sufficient to guide the way in which we will work together to realize the vision?*
- 2. Is anything missing? What else should be included?*

## Design of the “Mechanism”

Mechanism must be able to expand and contract as required.

Think of it as an accordion ... when specific work is required, time-limited working groups would be brought together to complete a task. When feedback on progress/new directions are being discussed, the mechanism would expand to include the broader sector partners and community members.



# Design of the “Mechanism”

*Key considerations include:*

- Be respectful of pressures on everyone's time
- Build on the existing work and leverage existing planning tables, as appropriate to accomplish required work
- The work to be done and its scope will direct who needs to be involved
- Participants will be reflective of the community and selected based on their 'value-added' to the work to be done
- Our collective capacity and resources will determine pace of work

# Design of the “Mechanism”

## *Question:*

- 1. Does this “Accordion model” allow us to “get on with the work” of the Community Mental Health Plan as required by MCYS?*



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# *Large Group Discussion*

## Summary and Next Steps

- Feedback and reflection by the Lead Agency
- Complete consultations
- Finalize report and share with community partners
- Establish time-limited “working group(s)” to develop a ‘Community Map’ that describes
  - CYMH services delivered by other sectors and community partners (formal and informal)
  - the pathways and formal protocols that exist to transition children and youth into and out of the CYMH system

# Final Thoughts on a “Work in Progress”

- Building on a **shared history of collaborations**, Peel is willing to work together to increase clarity around the broader service landscape and pathways into and out of child and youth mental health service system
- Adding another on-going planning table will not accomplish the challenge before us ... need to develop a **“Made in Peel”** approach that reflects Peel’s diverse community
- All participants spoke to a **willingness and shared commitment to improving the lives of children and youth** in the Peel Service Area
- This is a **“Work in Progress”** ... pilot the mechanism, reflect on experience, adapt as required ...

# Staying Connected

- *Moving on Mental Health* Lead Agency Progress Reports for the Peel Service Area, in English and French, are available for download from PCC's website:  
<http://www.peelcc.org/en/lead-agency> and  
<http://www.peelcc.org/fr/lead-agency>
- We welcome the community's input and feedback. Please email us at [peelmomh@peelcc.org](mailto:peelmomh@peelcc.org) and we will get back to you.