

Core Services Delivery Plan for Children and Youth: 2014-2015 Reporting Template for Phase One Lead Agencies

Instructions and Guidelines for Completing the Core Services Delivery Plan

Child and youth mental health is a shared responsibility. Reflecting this, Ministry of Children and Youth Services (MCYS) child and youth mental health lead agencies are responsible for engaging with their child and youth mental health and broader sector partners to develop a Core Services Delivery Plan (CSDP) and a Community Mental Health Plan (CMHP):

- The CSDP focuses on describing the current delivery of core child and youth mental health services within a service area and how MCYS funding is being used to support these. It also identifies activities that will result in improvements to these services, and support a more effective and efficient system.
- The CMHP describes child and youth mental health services and supports delivered by other sectors (such as education, health, early years, child welfare and youth justice), as well as services delivered by the lead agency that are not core. This plan reflects the valuable role that broader sectors play in the delivery and funding of child and youth mental health services and will support the lead agency's work with their community partners to improve service delivery and pathways to, through and out of care.

Program Guidelines and Requirements are under development which will describe the requirements for the plans at maturity, including their role in supporting planning over a three-year horizon and an annual budget cycle. The two plans are complementary, and together will support a fulsome description of, and action plan for, the child and youth mental health system, including steps to be undertaken by the lead agency, and others, within each service area.

The objectives of the CSDP are to:

- strategically align resources for the provision of core services with child and youth mental health system goals and service area needs;
- put forward a course of action for improvements to service provision based on evidence and service area priorities;
- facilitate constructive engagement with child and youth mental health core service providers, youth and families, about better meeting system and service needs within available resources;
- demonstrate accountability for the use of public funds by ensuring high-quality provision of core services in the service area;
- support effective transitions of children and youth through "core" services; and
- support an enhanced provincial understanding of the child and youth mental health system through analysis and identification of common themes and priorities.

Over time, lead agencies will be responsible for ensuring the delivery of the full range of core services (ranging from targeted prevention through to intensive treatment services), and associated key processes. Reflecting this, services funded through the following detail codes should be included as part of the CSDP:

Core Services

- A356 – Targeted Prevention
- A348 – Brief Services
- A349 – Counselling/Therapy Services
- A350 – Crisis Services
- A351 – Family/Caregiver Skills Building and Support
- A352 – Access Intake Service Planning

- A353 – Intensive Treatment Services

Key Processes

- A354 – Service Coordination
- A355 – Specialized Consultation and Assessment Service

Lead agencies are responsible for leading the development of the plan and submitting it to the ministry. As of April 1, 2014, all agencies receiving MCYS funding to deliver child and youth mental health services are required through their service contracts to work in collaboration with the identified lead agency in this process. Ministry staff will also support lead agencies with this process.

Program Guidelines and Requirements 02 – Core Services Delivery Plan which will be released at a future date, describes the requirements for the CSDP at maturity, which will include the following components:

- 1) Executive Summary
- 2) Profile of Service Area Child and Youth Population
- 3) Service Landscape
- 4) Strategic priorities
- 5) Budget

The expectation in 2014/15 is for lead agencies to undertake a realistic, achievable process that also demonstrates progress. The 2014/15 CSDP will focus on the “Service Landscape” component outlined above so that lead agencies build a foundational understanding of their service area from which they can build moving forward. This is integral to the development of a complete service plan that will support real change and enhancements on the ground. Through the completion of the template lead agencies will be able demonstrate their progress in assuming the planning functions of a lead agency.

Minimum Expectations for 2014/15:

- each lead agency is responsible for leading the completion of the template and submitting it to their MCYS program supervisor by March 31, 2015 for approval;
- all service providers who deliver MCYS-funded core child and youth mental health services in a service area with an identified lead agency are expected to participate in the process;
- consideration should be given to integrating the perspectives and insights of youth and families:
 - Engagement with youth and families needs to be an evidence-informed, planned and thoughtful process that is respectful, tailored and appropriate. Where mechanisms are already in place agencies should utilize these to integrate youth and families' perspectives into the identification of service needs and priorities.
 - Where appropriate mechanisms are not in place agencies should address this expectation by noting this and integrating this as an area of focus for 2015/16;
- the needs of particular diverse groups (e.g. Francophone, Aboriginal) in a community should be considered (note: where comprehensive mechanisms do not exist this should be noted and considered an area of focus for 2015/16); and
- identified priorities must be supported by a clear rationale associated with areas of need identified through work undertaken to support the completion of the CSDP template and/or the CMHP template.

The following sections provide a description of each section in the 2014/15 CSDP reporting template, including additional context and what should be captured in each section.

Section A: Engagement Activities

- Engagement is a critical component to understanding the local needs of children and youth as well as local realities facing service providers. This section will describe both the engagement that was undertaken to support the development of the 2014/15 plan, as well as the ongoing engagement plan moving forward over 2015/16.
- In this section please describe:
 1. Who was engaged and how they were engaged;
 2. Any challenges that arose through engagement, and how they were addressed; and
 3. How the lead agency will build on the engagement activities over the next fiscal year (e.g., where the agency does not have a comprehensive/evidence-informed approach to engaging with youth this section would speak to how this will be developed over the following year).

Section B: Core Services Summary

- Understanding the service landscape is also a critical component of planning for service delivery. This section focuses on describing the current state of child and youth mental health services and processes in the service area. Ministry staff will also provide support in completing this activity.
- Please refer to the draft *Program Guidelines and Requirements 01: Core Services and Key Processes* for detailed descriptions of the core services and the levels of need on the service continuum.

B.1: Core Services Summary:

- In this section please describe the core services in your service area, including target population, age, geographic spread, budget, targets and measures used to assess service quality associated with that program.
- Lead agencies should complete the summary chart in full. Where particular information is not available by service area (e.g., regional services), agencies should use their best estimate to determine the appropriate numbers for their service area. Ministry staff in the regional office will also provide support in completing this activity.

B.2: Core Services Summary:

- In this section please provide an inventory of existing formalized referrals, protocols, and intake/access points that support effective transitions and pathways between and through core services at the local level (note, referral into and out of core services from broader sector partners (e.g., the health and education sectors), will be captured in the CMHP Template).
- Optional: A separate space has been provided for you to document more informal relationships/practices with other MCYS-funded core service providers if you choose to. Please note this additional element is optional.

Section C: Service Priority Identification

- Setting service priorities is the process where lead agencies, informed through their engagement with youth, families, other populations and service providers, as well as through analysis of data, assess local needs and develop a workplan for the next year for how these priorities will be addressed.

C.1: Service Priority Identification:

- In this section, please identify three priorities that you as the lead agency, in partnership with other MCYS-funded child and youth mental health core service providers, will focus on over the next year. For each priority please outline an initial workplan indicating key activities that will result in demonstrable progress over the next 12 months.

- This is a preliminary workplan and it is expected that lead agencies will continue to refine it further through implementation.
- These priorities should focus on the 2015/16 fiscal and be based on an assessment of needs identified through the CSDP template and the CMHP template.
- Examples of priorities may include:
 - the establishment/enhancement of engagement mechanisms;
 - formalizing/enhancing relationships with a particular sector;
 - taking initial steps to address an identified service need (e.g., a gap in provision of a particular core service or a gap in age coverage of a particular core service);
 - addressing service quality/responsiveness; or
 - unmet population need (e.g., the provision of French-language services where there is a Francophone population).

C.2: Service Priority Identification:

- Where priorities and plans to address them involve potential changes to service delivery, please describe the engagement plan, including how any affected service providers have been and will be engaged in the process. Note that service delivery decisions remain with the ministry – where identified priorities may require changes to existing service provision, ministry staff must provide input. The identification of priorities should be clearly linked to information in the plans.

2014/15 Core Services Delivery Plan Template

Section A: Engagement Activities

Complete a description of the local engagement processes undertaken by your agency to develop the CSDP, as well as a forward-looking engagement plan for the 2015/16 fiscal year. Please document your engagement efforts, including:

1. Who was engaged, and how they were engaged:

Who was engaged	How they were engaged
<p>Core Service Providers</p> <ul style="list-style-type: none"> ▪ Blue Hills Child and Family Centre ▪ Family Services York Region ▪ Mackenzie Health ▪ Youthdale Treatment Centre ▪ The York Centre ▪ Southlake Regional Health Centre ▪ York Region Abuse Program 	<ul style="list-style-type: none"> ▪ In November 2014 Kinark sent an initial letter to MCYS-funded child and youth mental health (CYMH) core service providers in York expressing our pleasure at being named lead agency in York and inviting them to a first meeting. ▪ MCYS Central Region held a <i>Moving on Mental Health</i> (MOMH) town hall in November where Kinark also met with York core service providers to ‘kick-off’ this new way of working together and to discuss next steps. ▪ Kinark introduced the MOMH strategy, our agency and our CYMH senior team, and our new role as lead agency to the York Region Mental Health Collaborative (primary table in York for multi-service cross-sector planning for mental health) in November ▪ In advance of meeting individually with Kinark, each core service provider was asked to complete an online survey to gather information about their core service provision and funding, to identify perceived service gaps and service priorities and to detail their current youth and family engagement mechanisms. ▪ This information, together with the funding and service activity data provided to Kinark by MCYS, was a key input to the subsequent meetings with individual providers. The purpose of the individual meetings was to begin building the new relationship, discuss services and funding and responses to the surveys, as well as enable Kinark to learn more about each organization’s unique organizational history, structure, and culture. ▪ In January Kinark held a meeting with all the core service providers together to share information learned through the individual meetings and provided by MCYS, and to begin to build an approach to planning. This meeting laid the groundwork for identifying three York priorities for 2015-16 and for plans to engage the broader community providers and families and youth, and established an agenda for a subsequent meeting. Also at this meeting guiding principles were distributed in draft and participants agreed to provide feedback on the principles prior to our next meeting. Participants also agreed to canvass their respective Boards to assist in planning a Board to Board engagement at a later date. ▪ In March core service providers met together for a second time. The primary purpose of this meeting was to come to consensus on three priorities for the 2015-16 York Core Services Delivery Plan. Consensus was achieved. Other discussion included feedback on the draft guiding principles, approaches to potential Board to Board engagement, and the broader community webinars and parent engagement sessions.

Who was engaged	How they were engaged
Families (e.g., parents)	<ul style="list-style-type: none"> ▪ Kinark hosted two meetings for York Region families, introducing them to the MOMH initiative. Each of the core service providers contributed in promoting the events with their clients' families and the meetings were publicized in local media. ▪ The meetings were co-chaired by Kinark and a parent. The agenda included outlining the goals of MOMH, introducing the role of the Lead Agency, and soliciting ideas on how best to engage families in service area mental health planning. ▪ Family members were eager to outline some of the challenges they had faced when accessing the CYMH service system and provided some ideas for system improvement. Family engagement strategies identified were divided into two categories: sharing information with families and gathering information from families. Thirty families attended the two meetings.
Youth	<ul style="list-style-type: none"> ▪ In partnership with the York Region District School Board, two meetings were held with students in grades 10-12. ▪ A third meeting was held with young people (ages 18-23) in collaboration with the group <i>Youth Speak</i>, a York organization that supports and empowers young people in anti-stigma and mental health awareness work. ▪ The purpose of the meetings was to introduce young people to the MOMH initiative, to provide an opportunity for youth to share their experiences in seeking and receiving mental health treatment and hear their suggestions for system improvement.

2. Any challenges that arose through engagement, and how they were addressed:

Challenges that arose through engagement	How challenges were addressed
<p>The eight core service providers are fairly diverse, and their levels of funding for CYMH, and generally, is quite variable. Three of our providers, in addition to Kinark, are child and youth mental health agencies. For all the others, CYMH is a smaller part of what they do. This means that our providers have, and may continue to have, differential degrees of interest and capacity to engage with children and youth mental health transformation York. This has already manifested itself in a number of ways including meeting participation, Board interest and responsiveness.</p>	<ul style="list-style-type: none"> ▪ Given the short timeframe for engagement in 2014-16, opportunities have necessarily been limited. As we began to experience a range of interest and capacity in participation, we began to adapt our approaches in response. This will continue in 2015-16. ▪ Expectations will need to be sized accordingly and engagement mechanisms will be tailored to allow, and expect, greater and lesser participation according to the relevance of the issues and the capacity of the providers. A range of engagement/feedback mechanisms will continue to be employed to ensure relationships continue to be built and critical perspectives are gathered from all core providers.

3. How will you build on the engagement activities over the next fiscal year (e.g., where the agency does not have a comprehensive/evidence-informed approach to engaging with youth this section would speak to how this will be developed over the following year):

Sector	Engagement Activities for 2015/16
Families (e.g., parents)	<ul style="list-style-type: none"> ▪ In 2008, as part of Kinark’s commitment to parent and youth engagement (PYE), Kinark established a lead for PYE within the organization. This position has been actively fostering increased capacity in the agency by establishing parent advisory groups, developing and implementing policy to promote and guide the inclusion of the diverse perspectives of youth and families in our work and collaborating with community partners to build staff competence in PYE. This work, and strong practices from other York providers, will be leveraged to enhance engagement as we move forward. ▪ See Priority #1 ▪ Kinark and our service partners will share information and receive information with/from families in the following ways throughout 2015-16: <ul style="list-style-type: none"> ○ continue to hold ‘town hall’ style meetings quarterly throughout the year ○ host a number of web-based discussion groups to enable families to participate regardless of geography ○ begin to gather information on key questions via online surveys ○ develop a ‘list serve’ to enable York core service providers and Kinark to provide information about MOMH and York service area updates ○ using a range of media to promote engagement opportunities including: personal contact through core service providers, flyers posted in locations such as family physicians’ offices, recreation centres, libraries and through social media, radio and newspapers.
Youth	<ul style="list-style-type: none"> ▪ In 2008, as part of Kinark’s commitment to parent and youth engagement (PYE), Kinark established a lead for PYE within the organization. This position has been actively fostering increased capacity in the agency by establishing parent advisory groups, developing and implementing policy to promote and guide the inclusion of the diverse perspectives of youth and families in our work and collaborating with community partners to build staff competence in PYE. This work, and strong practices from other York providers, will be leveraged to enhance engagement as we move forward. ▪ See Priority #1 ▪ The key messages received from youth throughout this early engagement were that information about mental health and mental illness and how to access services could most effectively be provided to youth through the school system and that this would also be a preferred mechanism for youth engagement. School settings were also identified as providing the preferred avenues to gather input into mental health service planning work. Youth recommended partnering with school boards to regularly seek youth input. ▪ Based on feedback from youth: <ul style="list-style-type: none"> ○ Schools will be used as a primary vehicle for communicating with, and engaging youth. ○ Kinark and partners will prioritize work with youth and the two school boards in York to establish appropriate engagement mechanisms

Sector	Engagement Activities for 2015/16
Diverse Populations (including Francophone and Aboriginal)	<ul style="list-style-type: none"> ▪ York Region has one of the most increasingly culturally diverse populations in Ontario, and has a growing newcomer population. ▪ York is not a designated Francophone area but does have the First Nation of Georgina Island within its service boundaries. ▪ To date engagement in child and youth mental health planning with York's diverse populations has been extremely limited. ▪ Sustained and targeted outreach and partnership-building will be necessary to effectively engage a range of populations. As a component of Priority #1 for 2015-16, we will prioritize building relationships with other organizations providing services to these populations to better understand service needs and to determine effective and sustainable engagement strategies.
Other child and youth mental health sector providers	<ul style="list-style-type: none"> ▪ Kinark will continue to provide information about MOMH and create engagement opportunities as critical first steps with all providers to establish a common foundational understanding across the York service system (see Priority #1 and the York Community Mental Health Plan).

Section B: Core Services Summary

B.1: Core Services Summary:

Please complete the summary chart below describing all MCYS-funded core child and youth mental health service delivery in the service area.

- With minor modifications, the information contained in Section B.1 is the information that MCYS provided to Kinark in October 2014. It has been excerpted from the 2014-15 service description schedules of York's funded, 'mapped' core service providers.
- Through engagement with core service providers it was evident that while York providers understood the potential relevance of this type of information to informed planning for CYMH, there were a number of factors that brought into question the reliability of this information 'as is' as a basis for planning. Providers identified issues with the process and timelines for the 2014-15 mapping of historical envelopes to new core services, lack of common approaches to mapping, differential understandings of catchment and processes to account for service activity/volumes. In addition, providers flagged that this was forecast data that was not rationalized with actuals for 2014-15.
- The activity of validating this data is included in our Priority #3 for 2015-16 and Kinark cannot confirm the accuracy of the data below. Please note that data related to *Brief Description* and *Target Population* has not been included as part of this plan as these two areas were identified as being particularly subject to interpretation and not useful to document at this time. Priority #3 in the core services plan will provide the opportunity to more accurately understand and clarify the data associated with the service plans of core service providers and will drive to a more comprehensive and shared understanding of the service landscape in York.
- Appendix A includes the full unvalidated Core Services Summary chart as the data was provided by MCYS, including the components of Brief Description and Target Population.

Core Service and Key Processes (based on PGR 01)	Agency Delivering Services (lead agency of other MCYS-funded child and youth mental health core service provider)	Geographic coverage in service area	Age group served	Service Commitment Per Year e.g., service targets and service specifics (per the service contract)	Method to Assess Service Quality (e.g. CANS, client satisfaction survey)
Brief Services	Blue Hills	York Region	0 - 18	COMPASS - 44 clients; CMHP - 25 cases	client feedback questionnaires, interviews
	Family Services York Region (FSYR)	York Region	0 - 18	150 clients	client surveys; Therapy Tools; Client Information System
	Kinark	York Region	0-18	125 clients	BCFPI; CAFAS; Client Satisfaction; Triple P evaluation Questionnaire;
	York Centre	York Region	0-18	74 clients	Surveys; CANS; BCFPI; CAFAS; Database information/statistic
Counselling/ Therapy Services	York Region Abuse Program (YRAP)	York Region	3 - 18	TT for Children and Youth - 40 clients; TGT for Supportive Caregivers and Youth - 40 clients	end-use surveys
	Blue Hills	York Region	0-6 7-16 0 - 18	215 families; 200 families; 78 clients; 61 clients 2 clients at a time; 45 clients	Program Logic Model Tool; BCFPI; CAFAS; CANS; Client feedback questionnaires and interviews
	FSYR	Richmond Hill; Markham; Georgina	0 - 18	350 clients	Session Rating Scale; Outcome Rating Scale; Client Survey
	Kinark	York Region	0-18	600 Clients	BCFPI; CAFAS; Client Satisfaction; Triple P evaluation Questionnaire
	Mackenzie Health	York Region	6 - 18	260 patient; Psycho-educational group for parents of children with ADHD is offered three times/ year	BCFPI; Patient Surveys
	SRHC	York Region	0 - 18	140 cases	Qualitative and Quantitative evaluation based on: Client satisfaction and feedback; data elements

Core Service and Key Processes (based on PGR 01)	Agency Delivering Services (lead agency of other MCYS-funded child and youth mental health core service provider)	Geographic coverage in service area	Age group served	Service Commitment Per Year e.g., service targets and service specifics (per the service contract)	Method to Assess Service Quality (e.g. CANS, client satisfaction survey)
	York Centre	York Region	0 - 18	136 clients	CANS;BCFPI;CAFAS;Database information/statistics;Exit CAFAS; Client feedback questionnaires
	Youthdale	York Region	15 - 20	110 clients	Client evaluation; Internal tracking
	Kinark	York Region	0-18	858 Clients	Client Satisfaction Questionnaire; Referral Source Satisfaction Questionnaire; Crisis Evaluation
	SRHC	York Region	0 - 18	100 cases	Qualitative and Quantitative evaluation based on: Client satisfaction and feedback; data elements
Family/Caregiver Skills Building and Support	YRAP	York Region	0 - 18	40 clients	end-use surveys
	Blue Hills	Aurora; Richmond Hill; Maple/Vaughan; Markham; Newmarket;	Caregivers Parents Child Care and Kindergarten Centres	PGW - 65 caregivers; Triple P - 85 parents; CCES - 50 caregivers; 0-6 - 16 client participants and 24 participants through program consultations	BCFPI; CAFAS; Triple P; Client feedback questionnaires and interviews
	FSYR	Newmarket; Richmond Hill; Unionville; Georgina	0-18	50 clients	Session Rating Scale; Outcome Rating Scale; Client Survey
	Kinark	York Region	0-18	513 clients	Triple P Evaluation Questionnaire; Family Satisfaction Questionnaire; Parenting Stress Index
	York Centre	York Region	Caregiver; Parents; 0-6	40 clients	Triple P; RIRO survey; Bounce Back and Thrive Survey
Access Intake Service Planning	YRAP	York Region	3-18	40 clients	end-use surveys
	Blue Hills	York Region	0 - 18	Enhanced Intake - 400 families; COMPASS - 175 clients	BCFPI; CAFAS; CANS; client questionnaires and interviews
	FSYR	York Region	0 - 18	800 clients	Client Information System; Feedback Informed Therapy
	Kinark	York Region	0-18	612 Clients	Client Feedback; Analysis of services clients referred based on identified risk and need to assess effectiveness of triaging process

Core Service and Key Processes (based on PGR 01)	Agency Delivering Services (lead agency of other MCYS-funded child and youth mental health core service provider)	Geographic coverage in service area	Age group served	Service Commitment Per Year e.g., service targets and service specifics (per the service contract)	Method to Assess Service Quality (e.g. CANS, client satisfaction survey)
	Mackenzie Health	York Region	6 - 18	472 patients; Psycho-educational group for parents of children with ADHD is offered three times/ year	BCFPI; Patient Surveys
	SRHC	York Region	0 - 18	CandF Clinic and DBP - 350 clients; DHP - 50 clients	SRHC Patient Tracking system (HBOC); Statistical Reports
	York Centre	York Region	0 - 18	285 clients	Intake service evaluation; Database information/statistics
	Youthdale	York Region	15 - 18	110 clients	Client evaluation;Internal tracking
Intensive Treatment Services	Blue Hills	York Region	0 - 18	CII - 85 Families;DT - 33 students;IFSIP - 12 clients;IPT Georgina Is - 21 clients	BCFPI; CAFAS; CANS; client questionnaire and interview; focus groups
	Kinark	York Region	0-18	145 Clients	BCFPI; CAFAS; Client Satisfaction Questionnaire; Referral Source Satisfaction Reports; Residential Evaluation Project
	York Centre	York Region	4-18	139 clients	Database information/statistics; CAFAS; Exit CAFAS; Treatment Review Meetings; Exit interview/ Survey; Group Service Surveys; Community Partner Feedback; BCFPI
	Youthdale	York Region	12 - 18	DTP - 13 clients; ASB - 2 clients	BCFPI; CAFAS
Service Coordination Process	Blue Hills	York Region	0 - 18	780	BCFPI; CAFAS; CANS; client questionnaire and interview; focus groups
	FSYR	Newmarket; Richmond Hill; Unionville; Georgina	0 - 18	1250 cases	Session Rating Scale; Outcome Rating Scale; Client Survey
	Kinark	York Region	0-18	650 Clients	Client Feedback- Client Satisfaction Questionnaire; File Audits of transition, discharge plans

Core Service and Key Processes (based on PGR 01)	Agency Delivering Services (lead agency of other MCYS-funded child and youth mental health core service provider)	Geographic coverage in service area	Age group served	Service Commitment Per Year e.g., service targets and service specifics (per the service contract)	Method to Assess Service Quality (e.g. CANS, client satisfaction survey)
	SRHC	York Region	0 - 18	81	SRHC Patient Tracking system (HBOC); Internal Documentation System
	York Centre	York Region	0-18	285 clients	BCFPI; CAFAS; Parenting Scales and questionnaires; client interviews; client feedback questionnaires
	Youthdale	York Region	15 - 18	110 clients	Client evaluation;Internal tracking
Specialized Consultation/Assessment Services	Blue Hills	York Region	3 - 18	DEC - 34 children/youth;YRCCAAS - 46 children/youth and staff capacity building for 300 professionals	follow-up meetings are held with every referral source 6 months from Formulation meeting
	Kinark	York Region	0-18	100 Clients	Performance Review; Analysis of # of clients referred each year to type of specialized service (psychiatry, psychology, nursing) by type of referral (assessment, consultation, etc.)
	SRHC	York Region	0 - 18	38	
	York Centre	York Region	0-18	65 clients	Statistical data; Clinical record reviews; client feedback questionnaires; client interviews; referral source satisfaction surveys
Targeted Prevention	YRAP	York Region	3 - 18	40 children and youth; 40 caregivers	internal surveys
	Blue Hills	York Region	0 - 18	COMPASS - 9 workshops/training; COCB - 10 to 12 events per year depending on request; CMHP - 25 cases; Triple P - 12 seminars/wkshpserving up to 300 caregivers;0-6 Service - 10 medical residents and 15 hrs of training	BCFPI; CAFAS; CANS; client questionnaire and interview; focus groups
	FSYR	York Region	0 - 18	50 attendees	Attendees will be counted at each session

Core Service and Key Processes (based on PGR 01)	Agency Delivering Services (lead agency of other MCYS-funded child and youth mental health core service provider)	Geographic coverage in service area	Age group served	Service Commitment Per Year e.g., service targets and service specifics (per the service contract)	Method to Assess Service Quality (e.g. CANS, client satisfaction survey)
	Kinark	York Region	0-18	400 clients	Client Sign off on Goals; Client Satisfaction
	York Centre	York Region	0-18	30 participants	BCFPI; CAFAS; Parenting Scales and questionnaires; statistical data; clinical record reviews; client feedback questionnaires; client interviews; referral resource questionnaires

B.2: Core Services Summary:

Inventory existing formalized referrals, protocols, and intake/access points that support effective transitions between and through core services.

- This data represents information gathered to date. Priorities #1 and #2 in the 2015/2016 CSDP speak to the work that will continue in the next year to enable the development of a complete inventory with populated with common data elements and additional information.

Organizations/ Partners	Relationship (e.g. MOU, Contract)	Description	Intended purpose (e.g. core service delivery, referrals, program, pathway)
Blue Hills/York Children's Aid Society	Service Level Agreement	York CAS refers children/youth/families to each of the programs that exclusively serve their families. Further intended purpose includes intake, access and assessment. CCES, CMHP, ADR, Day Treatment, ICT Beds, IFCR	Referrals, intake, access and assessment
Blue Hills/York Region District School Board	MOU	5 community based day treatment classrooms	Program/service delivery, intake, access, assessment and case management
Blue Hills/ York Region District and Catholic School Boards/Family Services York Region/The York Centre/Kinark	Terms of Reference	COMPASS – mental health workers in schools	Program/service delivery
Blue Hills/Blue Hills/Youthdale	MOU	York Region Centralized Consultation and Assessment Service. Shared HR, clinical and administrative oversight of the delivery of consultation and assessment service.	Intake/access, service pathway, consultation
FSYR/Blue Hills/Kinark/York Centre	Service Level Agreement	Triple P Parenting Program	Program/service delivery
FSYR/Blue Hills/360 Kids/Catholic Community Services York Region/Ebenezer Church	MOU	Community Connects Hub	Program/service delivery
York Region Community Centre for Safety (YRCCS)/Family Services of York Region	MOU	Hub for delivery of violence against women (VAW) services	Program/service delivery
York Centre/York Regional District School Board	MOU	Day treatment service delivery	Program/service delivery
York Centre/United Way of York Region	Service Level agreement	Community outreach program – group services to schools in York	Program/service delivery
York Centre/Community Inclusivity Equity Council	Terms of Reference	Member on this diversity council that enhances organizational practice of inclusion etc.	
York Region Abuse Program/Family Services of Peel	Contract	Purchase of services related to adult program	Program/service delivery
Youthdale/York District School Board	Service Level Agreement	Day treatment	Program/service delivery

Organizations/ Partners	Relationship (e.g. MOU, Contract)	Description	Intended purpose (e.g. core service delivery, referrals, program, pathway)
Kinark/York Region District School Board	MOU	Day treatment	Program/service delivery
Kinark/ York Region Catholic District School Board	MOU	Day treatment	Program/service delivery
Kinark/ York Region District School Board	MOU	COMPASS worker	Program/service delivery
Kinark/York Support Services	Contract	Crisis response services	Program/service delivery
Kinark/Southlake Regional Health Centre	Contract	Crisis assessment/intervention	Assessment

Optional: If you choose to, please use the following space to document informal relationships/practices with other MCYS-funded core service providers that support effective transitions/pathways between and through core services.

- Kinark/York Centre/Blue Hills – Delivery of services children age 0-6
- York Centre/Markham Stouffville Hospital – ATLAS program – school avoidant youth
- Kinark/York Centre/Blue Hills/Youthdale/TRDSB/YCDSB/ Markham Stouffville Hospital – Centralized Intake Day treatment
- York Centre/Blue Hills/Kinark/New Path/Youthdale/York Region CAS – Central Intake for Residential
- Youthdale/YRDSB/York CAS – Youthdale delivers its Preparation for Independence service to older adolescents. Many identified by YRDSB and/or York CAS
- Mackenzie Health/Central Intake Network – Provide information re child and adolescent mental health day hospital program activity
- Kinark/Children’s Aid Society – Kinark treatment assessment residential placements(KTAP)
- Kinark/ASD Partnership – systems planning
- Kinark/Intake Network – Warm transfer protocol
- Kinark/Forum for Child, Youth and Families – Systems planning

Section C: Service Priority Identification

C.1: Service Priority Identification:

Based on the work undertaken to support the completion of the CSDP template and the CMHP template, please identify three priorities that you as the lead agency, in partnership with other MCYS-funded child and youth mental health core service providers, will focus on over the next year. For each priority please outline an initial work plan indicating key activities that will result in demonstrable progress over the next 12 months.

Name of Priority #1: Strengthening Engagement

Rationale:

Understanding that effective engagement is a cornerstone of good planning, providers in York have agreed to invest considerable time and effort in 2015-16 to ensure that the engagement mechanisms required to facilitate future work are appropriately inclusive, efficient and effective.

At the outset of planning in the context of MOMH in York, core service providers were asked to contribute to an inventory of all those organizations that were involved in child and youth mental health service provision and the current planning mechanisms, advisory committees, and service delivery collaborative initiatives currently in place currently to support this work.

Kinark and its partners have developed a tool to document all child and youth mental health providers in York and all of the broader community providers whose services currently support the CYMH system to assist in identifying services available, current York capacity, duplication and gaps. This mapping is represented in a series of concentric circles (see Appendix B). These circles include:

- i. At the centre – Core Service Providers: Kinark and seven other core service providers including hospitals that are delivering CYMH core services funded by MCYS
- ii. The second circle – other agencies providing CYMH core services not funded by MCYS and agencies providing services funded by MCYS that are not ‘mapped’ as core services.
- iii. The third circle – other entities closely involved with/referring children and youth requiring CYMH and related services including: school boards, hospitals, public health, child welfare, youth justice, family physicians, police, Community Care Access Centres and planning entities such as Local Health Integration Networks.

Collaborative planning processes among providers are not new to the York service area and York has a number of “tables” addressing aspects of child and youth mental health (CYMH) and other children’s services that are well attended and well supported by York providers and others. Through the inventory process there were 26 separate tables identified, some of whom also had active sub-committees. General consensus among core providers is that the number of diverse tables may hamper, rather than help, effective planning for child and youth mental health.

In 2014-15 Kinark, in collaboration with core service providers’ parent representatives, organized two community meetings to meet with families to introduce them to MOMH and to gain their perspectives on effective ways to engage and inform them throughout the transformation. In collaboration with the school board and youth serving groups, three engagements with youth were held. For planning and engagement to effectively identify and address the needs of children, youth and families seeking services, there is wide recognition that parent and youth engagement in York must be broadened and deepened. Many providers currently have mechanisms to gather parent and youth input in various forms, but there is an opportunity to consider strengthening existing processes and developing processes across the service area in response to advice received that will guide and inform our collaborative planning.

Name of Priority #1: Strengthening Engagement

While York is a culturally very diverse service area, the diversity is not well reflected in existing planning mechanisms, and services to children and youth appear to be in silos and somewhat disconnected from each other.

The perspectives of families and youth, as well as the perspectives of specific diverse populations are not well included or engaged in existing processes. The plethora of planning mechanism currently in York is not well networked and people are articulating planning 'fatigue'. With the new emphasis on planning provided by MOMH, there is both an opportunity and a need to determine what mechanisms we require in York and what changes to existing mechanisms are required to ensure we have the right information and diverse perspectives to inform our collaborative planning.

Objective:

- *Based on further analysis of existing mechanisms for engagement in York and the effectiveness, build and validate the engagement mechanisms that will be used as the primary means to transform child and youth mental health services in York.*

Over the course of 2015-16 York core service providers and other service providers will be engaged to consider what type of mechanisms are required to effectively optimize the new planning opportunities. A comprehensive analysis of the existing mechanisms will be undertaken, including identifying the perspectives that are currently well represented, or perhaps over-represented, and those perspectives that need to be more effectively engaged and providing a perspective on their functionality. A scan of planning mechanisms in other jurisdictions will be undertaken to identify models that might inform York structures.

We will continue to engage families and youth to help shape planning processes and to gather their perceptions and input on how to better deliver CYMH services in York. Formal consultation with the Georgina Island First Nation will be initiated to gauge interest in establishing integrated or collaborative planning processes. Similar outreach will begin with the key cultural communities in York who make up a significant portion of the York child and youth population and will also include outreach with the off reserve Aboriginal population in York. Kinark will work closely with core service providers to assist with this engagement by drawing on their existing parent and youth engagement processes and leveraging existing relationships with cultural communities.

By the end of the year, a planning mechanism or mechanisms for CYMH planning will be confirmed in York, with established terms of reference, links to other planning tables and an evaluation framework. This will position us to begin to identify service priorities for 2016-17.

Key Indicators of success will include:

- A common understanding of the current planning mechanisms in York and their effectiveness
- Common definitions and understanding of the purpose of current mechanisms
- Information on effective planning mechanisms supported by evidence (literature review)
- A better understanding of the most appropriate approaches to engaging York's diverse communities, including Georgina Island First Nation and the off-reserve Aboriginal populations.
- Common vision/plan for an effective planning mechanism and Terms of Reference, and success criteria
- Implementation of a new mechanism

Name of Priority #1: Strengthening Engagement

Deliverable(s)	Task(s)	Estimated Timelines
	The process of establishing validated planning mechanisms will include, in consultation with all interested stakeholders;	
Activity 1:	Conduct a literature review on effective community planning mechanisms in human services	Q1
Activity 2:	Confirm an inventory of existing mechanisms and engaging with them to better determine their current purpose and effectiveness <ul style="list-style-type: none"> ▪ provide self- assessment tool to current planning tables/mechanisms 	Q1
Activity 3:	Define criteria for inclusive, effective, efficient and successful planning mechanisms	Q2
Activity 4:	Determine changes required to the child and youth mental health planning environment in York in order to effectively plan for MOMH	Q3
Activity 5:	Establish an implementation plan and identify priorities for action	Q3
Activity 6:	Develop terms of reference and key success criteria for a planning mechanism(s) for CYMH in York and strategies for cross-table/sector collaboration	Q4
Activity 7:	Implement the new mechanism(s)	Q4

Name of Priority #2: Understanding our clients and service needs

Rationale:

In order to effectively deliver CYMH services in York, in addition to the appropriate planning mechanisms (Priority #1), Kinark and all York core service providers identified the need to establish a common understanding of the profiles of children, youth and their families who are currently accessing funded services, the services they are accessing and the potentially unmet needs of children and families now and in the future. As with Priority #1, this shared understanding is a crucial building block for future service changes and investments.

Kinark has recently completed an analysis of the demographic and clinical profiles of clients who have received services between April 1, 2012 and March 31, 2014. This work involved linking administrative data with BCFPI and CAFAS data; databases that previously were not connected to be able to understand clients in a comprehensive way. Building on this, Kinark completed a cluster profile, resulting in eight clusters of clients that were then mapped to MCYS' level 1-4 scale of service needs. This enables Kinark to better understand our client mix; which clients are coming to our door, which potential clients are not, and the acuity of need.

This analysis assists Kinark to better align our services to demand and in the future, to need. Kinark has partnered with two other agencies to undertake a similar analysis with the larger data set built by adding their administrative, BCFPI and CAFAS data. By extending this client profiling work to core service partners in York, Kinark hopes to garner a clearer picture of children and youth accessing CYMH services in York. This work will be a key input to planning for service needs in York.

Concurrently Kinark will be working with organizations in York and elsewhere with access to child population data to determine methodologies for forecasting future need for services in York based on mental health prevalence and incidence data as well as projected growth in the child and youth population over time.

Objective:

- *Create a profile of current York child and youth mental health service recipients and their families to better understand who is receiving service, their clinical needs and the services they are receiving*
- *Analyse the current and future child and youth population in York to establish York population's needs for child and youth mental health services and assess to what extent current services meet needs*

In the next year Kinark proposes to introduce this process to York core service providers and together to undertake an analysis of the profile of children and youth who have received child and youth mental health services over a defined period of time. This data will be used to establish a better understanding of the profiles and clinical needs of the children and youth who have been accessing services in York.

This will involve meeting with each of the seven other core service providers to assess the feasibility of this application, or modifications required, as well as supports necessary for this work. Results from these engagements will help to inform the next steps and the degree to which there is some capacity building required or additional resources required to facilitate the linking of administrative data with clinical measures. Over the course of the year, Kinark anticipates the development a database that houses all linked and matched administrative and assessment (BCFPI and CAFAS) data for those agencies that use those tools, or other tools which contain comparable data elements, and completing a York service area analysis. In order to undertake this work, data sharing agreements will need to be established between Kinark and all core service providers.

Name of Priority #2: Understanding our clients and service needs

Concurrently, Kinark will develop a profile of the general York population of children and youth, and by accessing available health planning data, begin to develop a model to estimate potential unmet need in the service area. This will involve partnering with other organizations involved in this type of work such as the Institute for Clinical Evaluative Sciences, Canadian Institute for Health Information, United Way of York Region and hospital partners.

Key indicators of success will include:

- Number of meetings held with core service providers related to data capacity
- Number of data sharing agreements established with core providers
- Number of clients housed in database with matched admin and BCFPI, CAFAS and other tools with common data elements where possible.

Deliverable(s)	Task(s)	Estimated Timelines
Activity 1:	Individual meeting with each core service provider to establish their data analysis capacity to assist with this project and to identify which data measures are used.	Q1
Activity 2:	Establish data sharing agreements between Kinark and each core service provider and subsequent data integration individual agency and combined client profiling.	Q2
Activity 3:	Each agency to match basic administrative data with BCFPI and CAFAS or other comparable data elements.	Q3
Activity 4:	Undertake analysis	Q4
Activity 5:	Seek additional data to inform assessment.	Q4

Name of Priority #3: Validating the service landscape

Rationale:

Moving on Mental Health has at its core the requirement to establish clear service pathways so that children youth and families can better access and understand the CYMH system. Implicit is the requirement for service providers (both core and non-core) to understand the respective roles they each play in effective service provision and the alignment of that service provision with defined core services and key processes. Building on Priority #1 (Strengthening engagement) and Priority #2 (Understanding our clients and their service needs), it is essential to validate our current service landscape before we contemplate any further development of services.

In November 2014 MCYS provided Kinark, as Lead Agency for York, a summary of information extracted from the 2014-15 service plans of core service providers. The information included service description schedules and service targets for 2014-15, as well as financial allocations for core services and key processes. It is worth highlighting that this information was drawn from the first year of efforts of agencies to map historical funding envelopes to new MCYS detail codes for core services and key processes.

The information provided did not include actual expenditure and outputs against the submission nor was any information available with respect to outcomes achieved. In the course of engagement with core service providers in York, Kinark shared a summary of this data as well as an aggregate summary of levels of funding per core service and cumulative service targets for the defined service area.

This was the first time that York service providers had access to this type of information about the funding and services in the York service area. York core service providers immediately recognized the importance of this type of information to collaborative service planning. It also became evident immediately to all the core service providers that each of us had approached the 2014-15 service mapping work somewhat differently based on unique historical contexts and diverse understandings of the new requirements. It was clear that additional work would be required before York service providers could use this critical data as a common basis for future service planning. In the absence of that shared understanding there was only limited ability to articulate, using a common language, what services organizations are actually providing, how many of what profile of clients are receiving services, and at what level of intensity.

Objective

- *By establishing a common approach to MCYS' service framework, develop a shared understanding of the current service landscape in York.*

In 2015-16 Kinark will engage with both core and non-core CYMH providers to better understand and clarify the data associated with the current service plans of core service providers and the service delivery of non-core providers, and drive to a more comprehensive and common understanding of the service landscape in York including:

- common mapping of like services to core services and key processes
- common approaches to forecasting and counting service volumes
- common approaches to establishing service catchments and priority populations.

From this shared understanding, and the work completed in Priorities #1 and #2, we will be better positioned to identify any actual gaps in service provision and duplication in order to inform service planning in 2016-17 and beyond. Notwithstanding the importance of using 2015-16 to build a solid planning foundation, while engaged in this work service providers will be encouraged to identify any potential opportunities in-year to consider realignment of current resources as appropriate to contribute to better outcomes for York children and

Name of Priority #3: Validating the service landscape

families.

Key indicators of success will include:

- A common and shared operational understanding of actual service delivery in York against MCYS defined core services and key processes.
- A more accurate mapping of current service delivery against MCYS defined core services and key processes.
- A beginning rationalization of the current inventory of identified core services and the identification of duplication and gaps.
- A more fulsome understanding of non-mapped services in York
- The establishment of more consistent and reasonable service targets for each core service provider.
- A clearer understanding of service partners in York service area.

Deliverable(s)	Task(s)	Estimated Timelines
Activity 1:	Analysis of 2014-15 actuals and 2015-16 approved budgets for all core service providers	Q2
Activity 2:	Engagement with service providers to operationally define: <ul style="list-style-type: none"> ▪ the core services and processes leading to a consistent understanding of MCYS-defined core services/key processes ▪ service activity target-setting and 'counting' ▪ definitions of service catchments ▪ definitions of client populations 	Q2
Activity 3:	Apply the consistent understanding to re-cast, as needed, the current service landscape in York in terms of: <ul style="list-style-type: none"> ▪ provision of core services/key processes ▪ service catchments ▪ client populations 	Q3
Activity 4:	Apply the consistent understanding to re-cast, as needed, the current service landscape in York in terms of: <ul style="list-style-type: none"> ▪ service activity target-setting and 'counting' 	Q4

C.2: Service Priority Identification:

Where priorities and plans to address them involve potential changes to service delivery, please describe the engagement plan, including how any affected service providers have been engaged in the process. Note that service delivery decisions remain with the ministry – where identified priorities may require changes to existing service provision ministry staff must provide input. (Add rows as necessary).

- In 2015-16 in the York service area, the focus is on establishing a strong foundation for evidence-informed decision-making in the future. Accordingly, we are not submitting any plans to change service delivery in 2015-16.
- Notwithstanding the importance of using 2015-16 to build a solid planning foundation, while engaged in this work service providers will be encouraged to identify any potential opportunities in-year to consider realignment of current resources as appropriate to contribute to better outcomes for York children and families.

Priority # 1: _____ Proposed activity: _____ Date: _____			
Stakeholder organization, group, or individual	Potential role in the activity	Engagement strategy <i>How will you engage this stakeholder in the activity?</i>	Follow-up strategy <i>Plans for feedback or continued involvement</i>

Priority # 2: _____ Proposed activity: _____ Date: _____			
Stakeholder organization, group, or individual	Potential role in the activity	Engagement strategy <i>How will you engage this stakeholder in the activity?</i>	Follow-up strategy <i>Plans for feedback or continued involvement</i>

Priority # 3: _____ Proposed activity: _____ Date: _____			
Stakeholder organization, group, or individual	Potential role in the activity	Engagement strategy <i>How will you engage this stakeholder in the activity?</i>	Follow-up strategy <i>Plans for feedback or continued involvement</i>

APPENDICES

APPENDIX A

Core Service and key Processes (based on PGR 01)	Agency Delivering Services (lead agency of other MCYS-funded child and youth mental health core service provider)	Description of Program Brief Description	Geographic coverage in service area	Age group served	Target population if applicable (e.g. Aboriginal Francophone, South Asian)	Service Commitment Per Year e.g. service targets and service specifics (per the service contract)	Method to assess service quality (e.g. CANS, client satisfaction survey)
Brief Services	Blue Hills		York Region	0 - 18		COMPASS - 44 clients; CMHP - 25 cases	client feedback questionnaires, interviews
	Family Services York Region (FSYR)		York Region	0 - 18	LGBTQ children, youth and families	150 clients	client surveys; Therapy Tools; Client Information System
	Kinark		York Region	0-18		125 clients	BCFPI; CAFAS; Client Satisfaction; Triple P evaluation Questionnaire
	York Centre		York Region	0-18	Aboriginal families	74 clients	Surveys; CANS; BCFPI; CAFAS; Database information/statistic
Counselling/ Therapy Services	York Region Abuse Program (YRAP)	Trauma Therapy for Children and Youth; Trauma and Group Therapy for supportive caregivers and youth	York Region	3 - 18		TT for Children and Youth - 40 clients; TGT for Supportive Caregivers and Youth - 40 clients	end-use surveys
	Blue Hills		York Region	0-6 7-16 0 - 18		215 families; 200 families; 78 clients; 61 clients 2 clients at a time; 45 clients	Program Logic Model Tool; BCFPI; CAFAS; CANS; Client feedback questionnaires and interviews

Core Service and key Processes (based on PGR 01)	Agency Delivering Services (lead agency of other MCYS-funded child and youth mental health core service provider)	Description of Program Brief Description	Geographic coverage in service area	Age group served	Target population if applicable (e.g. Aboriginal Francophone, South Asian)	Service Commitment Per Year e.g. service targets and service specifics (per the service contract)	Method to assess service quality (e.g. CANS, client satisfaction survey)
	FSYR	Individual Counselling; Solution Focused and narrative Therapy; Psychoeducational Counselling; Group Therapy; Online Counselling; Case Coordination/ Management; Service Navigation and Advocacy;	Richmond Hill; Markham; Georgina	0 - 18	specialized expertise in delivering services to LGBTIQ children, youth and families	350 clients	Session Rating Scale; Outcome Rating Scale; Client Survey
	Kinark	Individual, Family and Group Therapy including COMPASS, SFBT, CBT, DBT, CBT-Depression, Coping Cat/Cat Project, SNAP	York Region	0-18		600 Clients	BCFPI; CAFAS; Client Satisfaction; Triple P evaluation Questionnaire;
	Mackenzie Health	Specialized Out-Patient assessment and treatment; ADHD Clinic	York Region	6 - 18		260 patient; Psycho-educational group for parents of children with ADHD is offered three times/ year	BCFPI; Patient Surveys
	SRHC	Tertiary Service for specialized psychotherapy services;	York Region	0 - 18		140 cases	Qualitative and Quantitative evaluation based on: Client satisfaction and feedback; data elements

Core Service and key Processes (based on PGR 01)	Agency Delivering Services (lead agency of other MCYS-funded child and youth mental health core service provider)	Description of Program Brief Description	Geographic coverage in service area	Age group served	Target population if applicable (e.g. Aboriginal Francophone, South Asian)	Service Commitment Per Year e.g. service targets and service specifics (per the service contract)	Method to assess service quality (e.g. CANS, client satisfaction survey)
	York Centre	0-6 Counselling and Therapy Service: Solution Focused Therapy; Cognitive Behavior Therapy; Emotionally Focused Therapy; Narrative: Trauma Based Therapy; Attachment Based Therapy; Triple P: COMPASS	York Region	0 - 6	Sensitive to social, linguistic and cultural diversity of families, including aboriginal families but is there specific targeted effort?	136 clients	CANS;BCFPI;CAFA S;Database information/statistics ;Exit CAFAS; Client feedback questionnaires
	Youthdale	Preparation for Independence Program (PFI)	York Region	15 - 20		110 clients	Client evaluation; Internal tracking
Crisis Services	Kinark	Crisis Response, Direct Response, Intake and Treatment, includes partner activity, phone and mobile response	York Region	0-18		858 Clients	Client Satisfaction Questionnaire; Referral Source Satisfaction Questionnaire; Crisis Evaluation;
	SRHC	Crisis Assessments and Intervention Services	York Region	0 - 18		100 cases	Qualitative and Quantitative evaluation based on: Client satisfaction and feedback; data elements

Core Service and key Processes (based on PGR 01)	Agency Delivering Services (lead agency of other MCYS-funded child and youth mental health core service provider)	Description of Program Brief Description	Geographic coverage in service area	Age group served	Target population if applicable (e.g. Aboriginal Francophone, South Asian)	Service Commitment Per Year e.g. service targets and service specifics (per the service contract)	Method to assess service quality (e.g. CANS, client satisfaction survey)
Family/ Caregiver Skills Building and Support	YRAP	(Child, Youth and Family Program) Individual Trauma-focused Therapy	York Region	0 - 18		40 clients	end-use surveys
	Blue Hills	Parent Group Workshops; Triple P; CCES Foster/Kin parent workshops; 0-6 F/C Skills Building and Support	Aurora; Richmond Hill; Maple/Vaughan; Markham; Newmarket;	Caregivers Parents Child Care and Kindergarten Centres		PGW - 65 caregivers; Triple P - 85 parents; CCES - 50 caregivers; 0-6 - 16 client participants and 24 participants through program consultations	BCFPI; CAFAS; Triple P; Client feedback questionnaires and interviews
	FSYR	Parenting Group; Self Care; Parenting Skills; Child, Youth and Family Development;	Newmarket; Richmond Hill; Unionville; Georgina	0-18		50 clients	Session Rating Scale; Outcome Rating Scale; Client Survey
	Kinark	Individual and Group - Triple P, Zero to Six - Preschool Consultations, RIRO,	York Region	0-18		513 clients	Triple P Evaluation Questionnaire; Family Satisfaction Questionnaire; Parenting Stress Index
	York Centre	0 - 6, Triple P, Bounce Back and Thrive (RIRO)	York Region	Caregiver; Parents; 0-6		40 clients	Triple P; RIRO survey; Bounce Back and Thrive Survey

Core Service and key Processes (based on PGR 01)	Agency Delivering Services (lead agency of other MCYS-funded child and youth mental health core service provider)	Description of Program Brief Description	Geographic coverage in service area	Age group served	Target population if applicable (e.g. Aboriginal Francophone, South Asian)	Service Commitment Per Year e.g. service targets and service specifics (per the service contract)	Method to assess service quality (e.g. CANS, client satisfaction survey)
Access Intake Service Planning	YRAP	Eligibility assessment and interviewing will be implemented by Agency's Intake Administrator and Trauma Therapists	York Region	3-18		40 clients	end-use surveys
	Blue Hills	Enhanced Intake; COMPASS;	York Region	0 - 18		Enhanced Intake - 400 families; COMPASS - 175 clients	BCFPI; CAFAS; CANS; client questionnaires and interviews
	FSYR	Intake Interview; Single Session Therapy; Self Care/Parenting Support Groups	York Region	0 - 18		800 clients	Client Information System; Feedback Informed Therapy
	Kinark	Intake, Direct Response Assessment, Behaviour Assessment and Stabilization, COMPASS, MST, Residential, Day Treatment	York Region	0-18		612 Clients	Client Feedback; Analysis of services clients referred based on identified risk and need to assess effectiveness of triaging process
	Mackenzie Health	Specialized Out-Patient assessment and treatment; ADHD Clinic	York Region	6 - 18		472 patients; Psycho-educational group for parents of children with ADHD is offered three times/ year	BCFPI; Patient Surveys
	SRHC	Process referrals for two outpatient program: Child and Family Clinic; Disruptive Behaviours Program; Day Hospital Program	York Region	0 - 18		CandF Clinic and DBP - 350 clients; DHP - 50 clients	SRHC Patient Tracking system (HBOC); Statistical Reports

Core Service and key Processes (based on PGR 01)	Agency Delivering Services (lead agency of other MCYS-funded child and youth mental health core service provider)	Description of Program Brief Description	Geographic coverage in service area	Age group served	Target population if applicable (e.g. Aboriginal Francophone, South Asian)	Service Commitment Per Year e.g. service targets and service specifics (per the service contract)	Method to assess service quality (e.g. CANS, client satisfaction survey)
	York Centre	Intake with 0-6 services; BCFPI; Assessment and Brief Service; CAFAS; COMPASS	York Region	0 - 18		285 clients	Intake service evaluation; Database information/statistics
	Youthdale	Preparation for Independence Program (PFI); receive and assess all referrals	York Region	15 - 18		110 clients	Client evaluation; Internal tracking
Intensive Treatment Services	Blue Hills	Community Intensive Intervention; Day Treatment; Intensive Play Therapy (Georgina Is.); IFSIP (Intensive Family and School Intervention)	York Region	0 - 18	Intensive Play Therapy (Aboriginal)	CII - 85 Families; DT - 33 students; IFSIP - 12 clients; IPT Georgina Is - 21 clients	BCFPI; CAFAS; CANS; client questionnaire and interview; focus groups
	Kinark	Zero to Six - Behavioural Stabilization, Intensive In-home, MST, Intensive Non-Residential, Intensive Section 23 Day Treatment, Residential - Miiieu, KTAP, TFC, Respite, DBT, ISSP	York Region	0-18		145 Clients	BCFPI; CAFAS; Client Satisfaction Questionnaire; Referral Source Satisfaction Reports; Residential Evaluation Project
	York Centre	Intensive Section 23 specialized day treatment; Prevention and Early Intervention; Summer DT Program with Educational component	York Region	4-18		139 clients	Database information/statistics ; CAFAS; Exit CAFAS; Treatment Review Meetings; Exit interview/ Survey; Group Service Surveys; Community Partner Feedback; BCFPI

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	Youthdale	Day Treatment Program (protected Section 23 classroom); The Assessment and Stabilization Bed	York Region	12 - 18		DTP - 13 clients; ASB - 2 clients	BCFPI; CAFAS;
Service Coordination Process	Blue Hills	Service Planning;Service Coordination/Case Management;Transition Preparation and Planning	York Region	0 - 18		780	BCFPI; CAFAS; CANS; client questionnaire and interview; focus groups
	FSYR	Service Planning; Assessments; Service/Treatment Plan; Goal Setting and Safety Planning; Case Coordination, Case Management	Newmarket; Richmond Hill; Unionville; Georgina	0 - 18		1250 cases	Session Rating Scale; Outcome Rating Scale; Client Survey
	Kinark	Case Management for all services Direct Response, Family, Individual, Residential, Day Treatment, Respite- Includes Post discharge and transitional supports	York Region	0-18		650 Clients	Client Feedback- Client Satisfaction Questionnaire; File Audits of transition, discharge plans;
	SRHC	Child and Family Clinic; Day Hospital Program	York Region	0 - 18		81	SRHC Patient Tracking system (HBOC); Internal Documentation System

Core Service and key Processes (based on PGR 01)	Agency Delivering Services (lead agency of other MCYS-funded child and youth mental health core service provider)	Description of Program Brief Description	Geographic coverage in service area	Age group served	Target population if applicable (e.g. Aboriginal Francophone, South Asian)	Service Commitment Per Year e.g. service targets and service specifics (per the service contract)	Method to assess service quality (e.g. CANS, client satisfaction survey)
	York Centre	Service Coordination; Screening Assessment; interviews	York Region	0-18		285 clients	BCFPI; CAFAS; Parenting Scales and questionnaires; client interviews; client feedback questionnaires
	Youthdale	Preparation for Independence Program (PFI); receive and assess all referrals	York Region	15 - 18		110 clients	Client evaluation; Internal tracking
Specialized Consultation/ Assessment Services	Blue Hills	Developmental Evaluation Consultation; York Region Centralized Consultation and Assessment Service	York Region	3 - 18		DEC - 34 children/youth; YRCCAAS - 46 children/youth and staff capacity building for 300 professionals	follow-up meetings are held with every referral source 6 months from Formulation meeting
	Kinark	Consultation and Assessment - Health, Psychiatric, Psychological, and behavioural	York Region	0-18		100 Clients	Performance Review; Analysis of # of clients referred each year to type of specialized service (psychiatry, psychology, nursing) by type of referral (assessment, consultation, etc.)
	SRHC	Specialized psychological assessments provided for Child and Adolescent Mental Health Programs	York Region	0 - 18		38	

Core Service and key Processes (based on PGR 01)	Agency Delivering Services (lead agency of other MCYS-funded child and youth mental health core service provider)	Description of Program Brief Description	Geographic coverage in service area	Age group served	Target population if applicable (e.g. Aboriginal Francophone, South Asian)	Service Commitment Per Year e.g. service targets and service specifics (per the service contract)	Method to assess service quality (e.g. CANS, client satisfaction survey)
	York Centre	Specialized consultation and assessment; diagnostic assessment;	York Region	0-18		65 clients	Statistical data; Clinical record reviews; client feedback questionnaires; client interviews; referral source satisfaction surveys
Targeted Prevention	YRAP	Goals of Safety and Violence Prevention will be introduced during trauma therapy	York Region	3 – 18		40 children and youth; 40 caregivers	internal surveys
	Blue Hills	COMPASS;Community Outreach and Capacity Building;CMHP;Triple P;0-6 Service (Child Development Rotation Program)	York Region	0 – 18		COMPASS - 9 workshops/training; COCB - 10 to 12 events per year depending on request; CMHP - 25 cases; Triple P - 12 seminars/wkshpserving up to 300 caregivers;0-6 Service - 10 medical residents and 15 hrs of training	BCFPI; CAFAS; CANS; client questionnaire and interview; focus groups
	FSYR	Workshops and presentations for: TAMI (Talking about Mental Illness); Sensitivity and Awareness related to LGBTTTQ Youth; Depression, Suicide and Parenting	York Region	0 - 18		50 attendees	Attendees will be counted at each session

Core Service and key Processes (based on PGR 01)	Agency Delivering Services (lead agency of other MCYS-funded child and youth mental health core service provider)	Description of Program Brief Description	Geographic coverage in service area	Age group served	Target population if applicable (e.g. Aboriginal Francophone, South Asian)	Service Commitment Per Year e.g. service targets and service specifics (per the service contract)	Method to assess service quality (e.g. CANS, client satisfaction survey)
	Kinark	Group and Direct Response - TAPP C, SNAP in Schools, Triple P seminars (includes community activity)	York Region	0-18		400 clients	Client Sign off on Goals; Client Satisfaction
	York Centre	Targeted Prevention; 0-6 service; COMPASS; Triple P; ASSIST	York Region	0-18		30 participants	BCFPI; CAFAS; Parenting Scales and questionnaires; statistical data; clinical record reviews; client feedback questionnaires; client interviews; referral resource questionnaires

York Partners for MOMH

