
A NEW ERA FOR CHILD AND YOUTH MENTAL HEALTH IN SDG AND ACROSS THE PROVINCE

Vision Statement:

“We envisage 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 support that meet their needs.”

-Moving on Mental Health

Fiscal 2015/16 marks a new era in the field of child and youth mental health in SDG community and across the Province of Ontario as we begin to experience unprecedented “on the ground” transformation in the child and youth mental health sector.

In 2011, the Ontario government launched a comprehensive 10-year Mental Health and Addiction Strategy, focused on creating a more responsive and integrated system, starting with children and youth. A commitment to strengthen and improve a community-based system of mental health support resulted in the **Moving on Mental Health** action plan. This action plan announced 33 geographical service areas needed to ensure children, youth and their families can access the same services and have pathways to care. www.ontario.ca/movingonmentalhealth

In 2014, the Cornwall Community Hospital (CCH) was named as the lead child and youth mental health agency for SDG.

As a lead agency, CCH is providing strategic leadership and system planning to improve the delivery of core services for children and youth. One of the key goals is to strengthen effective collaboration with other sectors and community partners.

CCH's Children's Mental Health Program and L'Équipe psycho-sociale are the two agencies that currently offer children's mental health services in SDG, each service helping approximately 1,000 children and youth every year. Both agencies offer core services, from the youth transition improvement program to the day treatment program to intensive home support services. These services will remain with no abrupt changes to core services in the area.

PROGRAM GUIDELINES AND REQUIREMENTS (PGR)

The Ministry of Children and Youth Services (MCYS) developed a suite of documents which, along with Child and Family Services Act (CFRSA), are guiding the direction and planning:

1. **PGR #01:** Core Services and Key Processes - sets out requirements of MCYS-

funded providers of seven core services, and informs broader sector partners about service expectations

2. **PGR #02:** Core Services Delivery Plan describes expectations re: core services delivery plans
3. **PGR #03:** Community Mental Health Plan describes expectations re: community mental health plans which focus on the child and youth mental health services and supports delivered by community partners (such as education, health, early years, child welfare, youth justice)

More information as well as copies of the PGRs can be found at: www.ontario.ca/movingonmentalhealth

PROGRESS TO DATE

Along with other lead agencies, CCH has been engaged at the provincial level in a variety of information-sharing/gathering/planning forums with one another and with representatives of the Ministry of Children and Youth Services (MCYS), the Education and Health Ministries, and the Ontario Centre of Excellence for Child and Youth Mental Health. Locally and regionally, CCH has also engaged with partner child and youth mental health providers as well as with the MCYS Regional Office, other lead agencies from across the Eastern Region, the broader community, including consultations with families, and with specific representatives from various sectors such as Health, Education and Justice.

Following these discussions, CCH completed a service mapping /inventory and identified three priority service areas: Youth & Family Engagement; Crisis Services and; Specialized Assessment & Intensive Treatment Services.

Two transformation plans for the SDG Area: a Core Service Delivery Plan (CSDP) and a Community Mental Health Plan (CMHP) were submitted to MCYS at the end of March. An approval letter was received in May from the Ministry.

WHAT'S NEXT?

Lead Agencies are, in a graduated fashion, in the process of assuming greater responsibility for the client experience, service pathways, and the planning and delivery of core services.

In partnership with MYCS-funded service providers and the broader community, we are now tasked with implementing priorities and activities outlined in the CSDP and the CMHP for 2014/15 – see attached summary table. The mechanism for completing these deliverables will be mix of lead agency work, establishment of smaller working

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groups, and enjoining other planning process already underway. We also anticipate setting up a Child and Youth Mental Health Community Steering Committee to oversee activities and provide advice and support.

We will be continuing conversations with key partners on strategies to meet the needs of particular diverse groups.

Progress Summary Reports, CSDP 2015/16 and CMHP 2015/16 are due to the Ministry at end of December 2015

HOW CAN YOU GET INVOLVED?

As Lead Agency, and together with our partner CYMH core service provider, L'Équipe psycho-sociale, we are committed to providing timely and useful information about our Moving on Mental Health progress in SDG. If you have any questions or would like to know how you and your organization can be more involved in this work, please contact us. We also welcome any suggestions on how we can improve our communications.

For more information, contact the Lead Agency:

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Attachment: Priorities Areas

CSDP - SERVICE AREA PRIORITY	RATIONALE	MAIN OBJECTIVE(S)
<p>Youth and Family Engagement – development and implementation of system-wide mechanisms for engagement with expert support from the Ontario Centre for Child and Youth Mental Health</p>	<p>Aligns with Moving on Mental Health expectations. Feedback from consultations with families who want more involvement in the planning process. Youth engagement is a guiding service principle.</p>	<p>-To ensure that system change addresses issues that Families/Youth are facing when in need for MH services. -To build capacity and support for families -To ensure awareness of services and how to access. -To ensure other sectors (e.g., primary care providers) are aware of services and how to refer</p>
<p>Crisis Services:</p> <ul style="list-style-type: none"> • Emergency Department Clinical Pathway • Service Delivery Awareness and identification of gaps (e.g. mobile services, walk-in clinics) • Integrated Care Planning 	<p>Education/Support for Primary Care Providers and ED physicians. Gaps in service continuum. Services only at a distance (residential crisis unit). Lack of awareness of regional crisis line. Lack of coordination of services across multi -sectors for youth with complex needs.</p>	<p>-Memorandum of Understanding with hospital EDs, CHEO and Children/Youth Mental Health Providers -Building awareness -Service delivery models / enhancements to meet service gaps -Planning table/team for youth in crisis - use of an integrated plan of care – shared treatment planning</p>
<p>Specialized Assessment and Intensive Treatment Services</p>	<p>Gaps identified by providers and families: -Accessing specialized assessments in French -Longer term psychiatric services and follow ups -Accessing level 4 services in Ottawa -Addiction services -Services for youth with concurrent disorders -Out-of-home respite services</p>	<p>-Francophone families able to access specialized services in their language -Improve capacity to access specialized services through the use of OTN -Improve communication with primary care providers and community psychiatrists -Addictions services available in English and French -Out-of-home respite services available</p>

CMHP - RECOMMENDATIONS	RATIONALE	MAIN OBJECTIVE(S)
<p>-Develop a Community Mental Health Steering Committee</p> <p>Refer to Service Priority Area #1 – Family and Youth Engagement re:</p> <p>-Establish a Family/Caregiver Advisory Committee</p> <p>-Establish a Youth Advisory Committee</p>	<p>4 planning tables in SDG: 1) The Best Start Network; 2) Children’s Access & Service Resolution Team; 3) Mental Health & Addictions Strategic Implementation Committee; and 4) Champlain Youth Justice Service Collaborative - SDG Region. None of come together for the specific purpose of coordinating and planning Child & Youth Mental Health Services for SDG at a broader system level.</p> <p>Missing: voice of family/caregivers or youth, local primary care providers, pediatricians and psychiatrists, regional specialized service providers (CHEO, ROH, YSB), all 3 acute hospitals in SDG, addictions services</p>	<p>-Have in place processes to support community planning around the full continuum of child and youth mental health services, and the development of transparent pathways to, through and out of care.</p>