Ontario

Slide 1: (Speaker 1) Title slide

• Good morning/afternoon. Welcome to a brief description of Program Guidelines and Requirements #01: Core Services and Key Processes, or as we call it, PGR 1.
• Before we get started, a quick word on the format of this presentation. The presentation will follow a "question and answer" format where you will see slides with a number of specific questions relating to PGRs, and PGR#01 specifically, followed by answers to those questions. We have also inserted some video clips from CYMH, health and education sector leaders supporting some of the concepts we are presenting.
• Transcripts of the presentation will be made available upon request in both French and English.
• Let's get started.

Slide 2: (Speaker 1) "What is a 'Program Guidelines and Requirements' (PGR) document?"

Slide 3: (Speaker 2) Program Guidelines and Requirements
• Let's start with a question that is likely on the minds of many of you, just what is a PGR?
• A Program Guidelines and Requirements document will provide clear information to MCYS funded child and youth mental health service providers about the ministry's minimum expectations across a range of topics.
• Through the use of PGRs we are striving to provide clear and concise information to MCYS funded CYMH service providers across the province.
• In order to provide consistent services at the local level, we must clearly state what the minimum requirements of those core services offered in every community.
• Once the required, minimum provincial consistency is clear, local communities will have flexibility to adapt the approaches to the circumstances of their own service area.

Slide 4: (Speaker 1) Why this presentation?
• Our objective of this presentation is to make the following matters clear:
o We hope that service providers have a much better understanding that the defined core services and key processes must be available in every service area across the province;
o We expect that lead agencies and other core service providers recognize that there are province wide minimum expectations in place for CYMH core services and key processes; and
o We want lead agencies and other core service providers to have a clear understanding of the work that is upcoming and where they can find more information.

Slide 5: (Speaker 2) "What is the purpose of PGR #01?"

Slide 6: (Speaker 1) Purpose
• Work on PGR #01 began in earnest with development of the draft Child and Youth Mental Health Service Framework in 2013.
• As many of you will recall, when we released the draft Service Framework, we embarked on an extensive engagement process.
• We sought input from parents and youth; and from a time-limited advisory committee, including membership from key leaders in the CYMH community, to assist MCYS with the development of the core services.
• Based on that feedback, and from consultation with colleagues from across government, we refined the

content of the Service Framework and made the decision to release the information in a collection of PGRs.
• As the slide indicates, the objective of PGR#01 is to provide direction to lead agencies and all MCYS funded child and youth mental health providers who are delivering core services and executing key processes.
• PGR#01 provides information to these two primary stakeholder groups about:
o Defining the client population and continuum of needs-based services and supports;
o Describing the core services to be available in each service area, including their target population; and
o Outlining the key processes that support these services and the minimum expectations for core services and key processes.

Slide 7: (Speaker 2) "What exactly are 'defined core services'? Why define them?"

Slide 8: (Speaker 1) Continuum of needs
• Each person lies somewhere along the mental health continuum. Movement along that continuum can change depending on particular circumstances, challenges and stresses that a person may be experiencing on any given day.
• This slide you see here provides a snapshot of the continuum of needs across the CYMH spectrum and the associated levels of intensity associated with them.
• In order the meet all of the needs of individuals along the continuum, there must be shared responsibilities amongst all CYMH providers in a service area.
• To that end, important roles will be played by people working in schools, hospitals, public health units - and by community-based mental health service providers. We will need all these organizations together in order to meet the needs of children and youth with mental health problems in Ontario.
• Working together, we know that collaboration at the local community level happens most effectively when service delivery providers understand who is doing what, and which services are best delivered by which sector.
• For example, a public health unit may be best placed to deliver universal mental health programming to those in the least intensive area of the continuum, level 1, whereas a hospital may be best placed to deliver services for clients in level 4 of the continuum, such as intensive psychiatric mental health services.

Slide 9: (Speaker 2) By defining core services MCYS will:
Here is why defining core services is so important:
• We know that parents, caregivers and youth are often frustrated when trying to find mental health services. At such a stressful time, it should be easy to find help.
• Because of this, the government defined a set of CYMH "core services" so that no matter where families happen to live in Ontario they will know what those core mental health services are.
• Having core services also enhances consistency across the province, provides clarity in terms of minimum expectations, and improves system accountability. Defining core services for the community based sector will help clarify information for families and minimize confusion.
• These core services and key processes support the independent judgements about particular interventions made by clinicians every day. The key processes such as access, intake, service coordination and transition planning, are meant to provide a consistent approach and understanding for all CYMH service providers across the province.
• Slide 10 presents all 7 core services, and all 8 key processes.

Slide 10: Core services and Key processes (for viewing only)
• (Speaker 1) Here is a short video clip from Humphrey Mitchell, CEO of Peel Children's Centre, speaking to the idea of why defining core services is such a pivotal moment in time for children, youth

and families in Ontario.

Video clip: Well, one of the critical issues that's been true for child mental health in the province of Ontario as long as I've been in the business and this goes back to 1980, is that every community had a different mix of services and families and other people in the community who needed this kind of services really didn't know what they could expect, or how they could access these services. So, one of the dreams that I and others of my colleagues have had for decades, literally, was that the province would come up with a core or set of services that would be available anywhere in the province of Ontario to any child or youth and their families. And we are at that milestone now, we're at the beginning of it, but in fact we're going to have communities across the province who offer the same service available to families and kids and that's a huge, huge accomplishment.

Slide 12: (Speaker 2) "You say the defined core services need to be available in each service area. What's a service area?"

Slide 13: (Speaker 1) Service areas
• In 2014, the ministry reached a major milestone in the Moving on Mental Health action plan by identifying defined service areas across the province in which to base the delivery of core services and key processes.
• The purpose of service areas is to ensure all clients across the province will be able to access the same core services, and to facilitate planning and pathways.
• After considering many options, (LHIN, school board, public health boundaries, etc) Statistics Canada census divisions were ultimately recommended as the preferred geographic unit. They have been in place for a significant amount of time, they are large enough, and have relevant and stable data available to support CYMH planning.
• The defined service areas will not be barriers to service. Children, youth and families will be able to access services from any service area.
• (Speaker 2) Here's a short video clip from Mary Broga, Senior Director of Child and Youth Mental Health at Hotel-Dieu Grace Healthcare, explaining the importance of defining a set of core CYMH services provincially for local service providers and what that will mean for planning purposes.

Video clip: Having a provincial definition of core services puts us all on the same landscape to begin with. And that's really important to know that even our local community, we're not just designing it on our own, that actually we are following some provincial guidelines. I think that's really important for standardization. Because now that we have common definitions for all our core services we can actually map them out. How much of counselling and therapy do we have and for what ages? Where are there gaps, where do we have duplication? How do we really make the best use of the dollars that we have to serve the most kids that are in need? So that really puts us at a table where we can all say: "OK, I now understand what you're offering, and you know what, I'm doing this but I really don't think I need to do this, I can probably focus on something else that we're missing." So, it really gives a chance for everybody to be very transparent in terms of what they're providing, in terms of the sector for children and youth mental health and also where we really need to bone up and where we actually may have to divert some resources in order to pay attention to some crucial gaps. So, I think that's a very important conversation to have with the local community but what it also does again, on a grander level, is that we can tie up that information provincially. How do we fare in terms of upping these core services and the amount, with some of our benchmarks across the province, where do we have more, where do we have less, what do we have to kind of shift in order to be in a more of the same landscape as other providers in the province? So I think it really helps to give that framework and that we are not working in isolation.

Slide 15: (Speaker 1) "What role will lead agencies have in the delivery of core services?"

Slide 16: (Speaker 2)
• Lead agencies will be established in each defined service areas across Ontario and they will be responsible for delivering or contracting for the range of defined core MCYS-funded CYMH services, and holding sub-contracted agencies accountable.
• Under the leadership of one lead agency in each defined service area:
• Parents, caregivers and youth will know what CYMH services are available and where exactly they need to go in order to receive those services;
• Accountability will be clarified and MCYS will be able to work with a single service provider in each service area; and
• Other CYMH partners, such as primary care, public health, justice, and education, will know where to go to build partnerships and protocols, so that all can better meet the mental health needs of families, children and youth in an integrated, transparent and coordinated way.
• (Speaker 1) Here is a short video from Dr. Jean Clinton, Associate Clinical Professor, McMaster University; Advisor to the Premier and Minister of Education, speaking about the importance and opportunity of having lead agencies in place.

Video clip: Very little children intersect with so many different ministries. When we reviewed the literature on what's the best well-being system for children, including mental health care, we clearly saw that you need to go from health promotion, supporting parents, decreasing toxic stress on families, that's public health, making sure that parents are learning about reading to their child, that's our early years centres. Making sure that children's health needs are looked after, so that's primary care, and then when something is going off, or the child is having behavioral issues in child care or in full day kindergarten we need to have supports there, so you can see how multisectoral … looking after the well-being and looking after the mental health needs, are for this age group. I would submit for all age groups, throughout the life course we need to be having these partnerships for kids. But particularly given the gaps, this is an ideal opportunity for lead agencies to say: "We can test where this hypothesis of building partnerships and leveraging connections through 0 to 6 lands." When we look at the number of children in our province and we say, let's say 20% of the kids have this mental health disorder. What we now know is that children under 6 have also the same number, about 18%. So that's like half a million kids. We do not, as lead agencies, child psychiatrists, there is no way we have the resources to address all of those children's needs alone. It really must be the community and there was a great presentation by Rob Santos from Manitoba who said that children's mental health has to be a public health agenda and has to be everybody's business. Every day, everywhere. And the way the lead agencies are positioned, they are not being tasked with "OK, bring people together. You do not have to do all the work, but bring people together so that we can actually see how kids' mental well-being can be raised."

Slide 18: (Speaker 1) "What is my role if I provide a core service now but am not the lead agency?"

Slide 19: (Speaker 2)
• Local agencies in service areas bring a wealth of diversity, experience and programmatic variety to families, and lead agencies will certainly need to draw on their experience.
• Looking through a long term lens, funding decisions will be made in each service area to provide effective service delivery to meet the local child and youth mental health needs, and those needs will require the efforts and expertise of a great number of agency partners.
• In the short term, local agencies will be asked to participate in local planning exercises and come to the planning tables and help build a coherent approach to CYMH service delivery in each service area.
• We know the system needs to change, parents, experts and providers have said so, and so we are trying to enable those changes. The challenging part now is that we need to adopt a different stance, one that is focused on collaboration, planning and optimizing changes as they happen.

• Here is a video clip from Camille Orridge, CEO of the Toronto Central LHIN, video clip - speaking to the role and importance of broad engagement with partners and involving them in the planning cycle, and why ultimately this makes a difference to families.

Video clip: Individuals in the community, in their lives, live most of their lives in the community where they manage their own services. What we do in the community is about helping to sustain and maintain them there. We're also seeing the need for institutional care to be part of the care plan as well. So that if institutional care is appropriate, it is sought and accessible at the right time. But more important for us, is that discharge back into the community is also recognized and planned for and is seamless for that person. I would say to the lead agencies to reach out to the LHINs, connect with the LHINs very early on in the process. Sit down together, you have a common outcome. You're working together for the same patient, and work that through. And the advice I would give to the other agencies working with the lead agency is that at the end of the day we are all working for the same thing. It's for the improved outcome and services to that client and let that be the driver and address our differences, and not impact the patient care.

Slide 21: (Speaker 2) "Will other PGRs be released?"

Slide 22: (Speaker 1) Future PGRs
• Yes, there are. The ministry is planning on releasing additional PGRs as a "set". Tentatively we are hoping to release several more of these PGRs in 2015.
• We are not going it alone either. MCYS is working with other ministries, including education and health, to help plan and scope further PGR work.
• Some of the topics for further PGR development include:
o providing direction and expectations for the completion of the Core Services Delivery Plan
o providing direction and expectations for the completion of the Community Mental Health Plan.

Slide 23: (Speaker 2) "Where can I get more information about PGRs and Moving on Mental Health?"

Slide 24: More information
• We will be communicating further information about PGRs as they develop but please keep an eye out for messaging from the ministry, as well as updates we post on the Moving on Mental Health webpage and NING website.
• For your reference the MOMH website address and NING address are posted here.
• However, you may always contact us directly with questions or queries that arise by emailing us at movingonmentalhealth@ontario.ca and we'd be happy to answer your email.
• This concludes our brief presentation on Program Guidelines and Requirements #01: Core Services and Key Processes.
• Thanks very much for participating today and we hope this has been informative. Have a great day.

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