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Context – A Better Way

The status quo in the delivery of Children's Mental Health Services in the province is not sustainable. Agencies are being asked to do more with less and collectively resources are not being maximized. The possibility of amalgamating is a chance to enhance and revitalize the current service delivery system so that it can be sustained for the next generation.

This is an opportunity for our community to be creative, innovative and leading-edge about creating the best children's mental health service delivery system.

To this end, Craigwood Youth Services, Vanier Children's Services, Oxford-Elgin Child and Youth Centre, and Western Area Youth Services engaged in an emerging praxis process to explore whether a possible amalgamation between the four agencies would be a viable option and a better way to provide the best services possible for children, youth and families in our communities. The Centre for Organizational Effectiveness', Principal Consultant, Maria Sánchez-Keane managed and facilitated the Phase I process.

General overview of the four organizations:

Organization	Founded	Budget	Staff	Location	Other
Craigwood	1954	\$6.5M	140	Ailsa Craig London	Youth 12-21
OECYC	1987	\$3 M	40	Woodstock St. Thomas	Children & Youth 0-18 Oxford Children & Youth was awarded the ministry contract to serve Elgin County in 2008
WAYS	1967	\$10 M	220	London Chatham Sarnia	Children & Youth 0-21 Amalgamation 1996 Acquisition 2005
Vanier	1965	\$7 M	130	London	Children 0-14
TOTAL		\$ 26.5 M	530		

After careful consideration and dialogue with youth, parents and community partners, the Boards of Directors of Craigwood Youth Services, Oxford Elgin Child & Youth Centre (OECYC), Vanier Children's Services and Western Area Youth Services (WAYS) have agreed in principle to amalgamate. The organizations will now move to the second phase of amalgamation - business planning and transitioning.

Better service for children, youth and families is the ultimate goal of this amalgamation. By combining resources, a more integrated service system will be created which will be easier for families to access and navigate. Serving children and youth ages 0-21 years, programs and services will be delivered as close to home as possible in the counties of Oxford, Elgin, London/Middlesex, Chatham/Kent and Sarnia/Lambton.

For years the children's mental health sector has been significantly under-funded. Without amalgamating, and with the potential of further funding cutbacks, the very survival of children's mental health is threatened. Amalgamation is a great opportunity for us to reduce, contain and avoid costs, increase effectiveness and efficiency, and build a unified, sustainable and flourishing organization. We look forward to taking the best of each organization to a new and exciting level for the collective good.

The ministries involved are aware, interested and committed to ongoing dialogue as we move forward. Business planning and transitioning will take place over the coming months with a proposed goal to fully amalgamate by April 2012.

Through these transitioning months, service to clients is of utmost importance. Every effort will be made to continue, or enhance where possible, services to children, youth and families. The voluntary nature of this amalgamation affords the four participating organizations proper time to intentionally transition and integrate their programs and services – setting everyone up for success.

This report provides an overview of the Conceptual Model; the ideal model which, over time, we hope to achieve. This will be the focus of our efforts – to integrate all aspects of our organizations. For reference, the report also includes:

- An overview of current Programs & Services – Appendix A
- An overview of the Comparative Analysis conducted in Phase I – Appendix B
- Terms of Reference for Phase II of this amalgamation – Appendix C

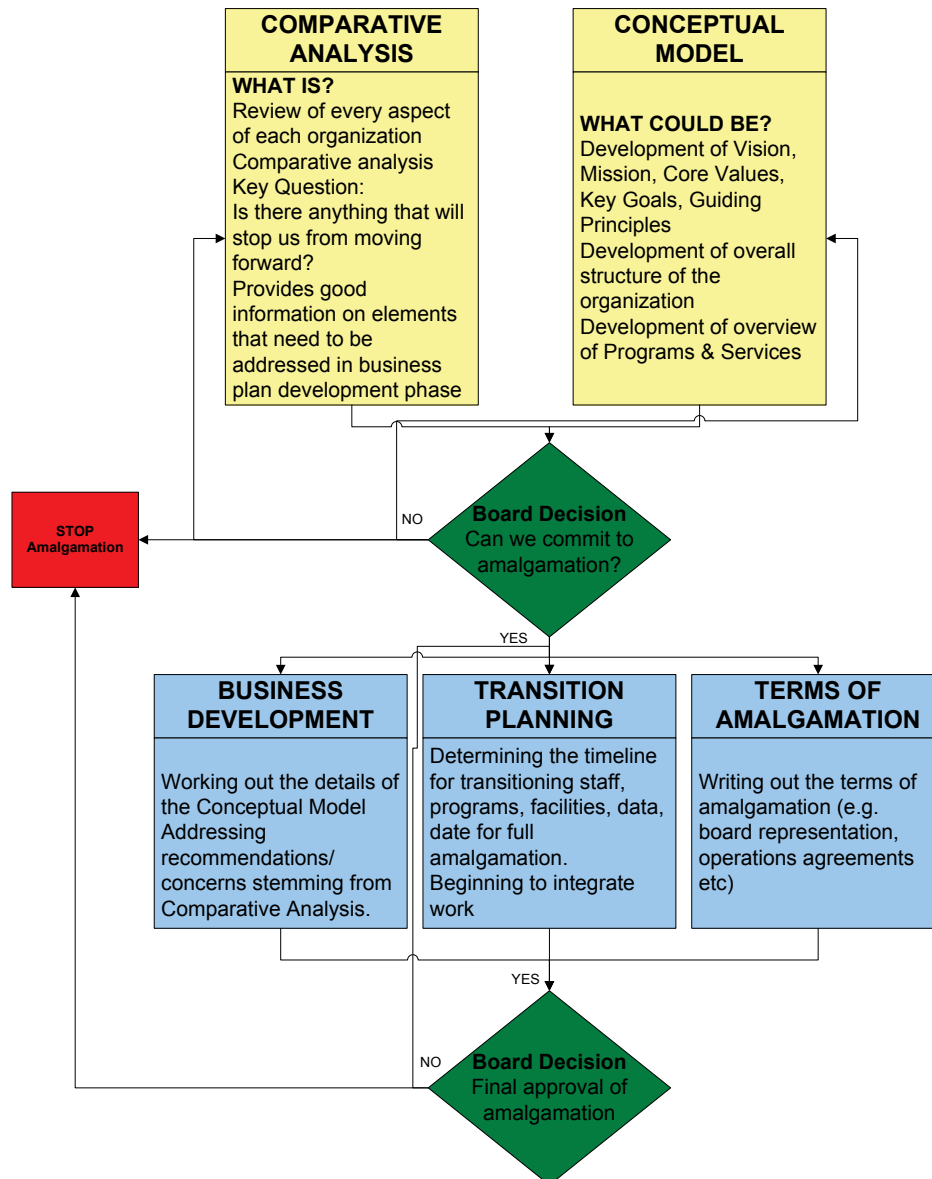
Desired Outcomes

It is hoped that the new organization will:

- **Create better services for children, youth and families.**
- Decrease the confusion and increase the ability of those referring to navigate the system.
- Combine resources (financial, human and creative) to create a broader (ages 0-21), more integrated service system that will be easier for families to access and work within.
- Build a flourishing organization and create a great place to work.
- Increase the capacity to support, develop and strengthen all staff.
- Increase the visibility and credibility of the Children's Mental Health sector.
- Increase awareness and advocacy in our community on behalf of those we serve.
- Contain, reduce and avoid costs increasing value for money.
- Consolidate and focus resources to better address infrastructure issues, gaps and growing demands.
- Increase capacity to leverage funding from the corporate sector and from donors.
- Provide efficient reporting to the ministry working with one organization instead of four.
- By maximizing our resources, create a sustainable Children's Mental Health system in our region for the next generation. Absorb some service cutback through reallocation of resources.
- Our pro-activity will serve as further impetus toward system change.

Overview of the Process

Following is the amalgamation process:



The Conceptual Model

Preamble

The Conceptual Model represents a model of service delivery that the new organization will aspire to achieve. How quickly it becomes a reality is dependent on many factors such as available resources (human, financial, infrastructure) as well as the flexibility provided by the ministry. The work of Phase II will begin to move service delivery in this direction; however it may take some time before the full model can be implemented. As well, as integration begins, better ways of service delivery or significant barriers which have not yet been envisioned or encountered may cause the Conceptual Model to shift. In addition, the excellent work and best practice models, already in place within the four organizations, will form foundational pieces of the model itself.

The Conceptual Model outlines these aspects for the amalgamated organization:

- Vision Statement
- Mission Statement
- Values Statement
- Philosophy of Approach
- Programs & Services Model – Children’s Mental Health (voluntary services)
- Programs & Services Model – Youth Justice (mandated services)
- Overview of the Organizational Structure
- Phase II Recommendations

The first drafts of the Vision, Mission and Values Statement were developed during the Summit – Day One with the Boards of Directors and Senior Manager participants. These statements will serve to guide the process until the amalgamation is completed. Once the new organization is officially merged, the new Board of Directors will review these statements and determine any changes needed.

High End Statements

Vision Statement

Our creative and innovative approaches contribute to the lasting positive change in the lives of children, youth and families building healthy, accepting communities.

Mission Statement

Through a holistic approach, we provide mental health and youth justice services that meet the needs of children, youth and families building on their strengths and fostering resiliency.

Values Statement

Respect

We partner with children, youth and families as we listen, honour and value the voices of others. We advocate and contribute to creating a community in which people are valued and included.

Responsivity

We develop innovative responses that reflect and embrace the unique and diverse needs and strengths of our clients and communities.

Learning

We value and support the continuous development of our people and support their full involvement in the life of the organization. We contribute toward research and development within the larger system.

Excellence

In our desire to sustain and optimize the resources entrusted to us, we support the constant pursuit of the highest standards for superior outcomes.

Collaboration

As systems thinkers, we seek partnerships that enhance client and community well being.

Organizational Vitality

We commit to the development of knowledgeable, highly skilled staff and we provide a fair and caring environment that promotes innovation, growth, learning, trust-worthiness and well-being.

Philosophy of Approach

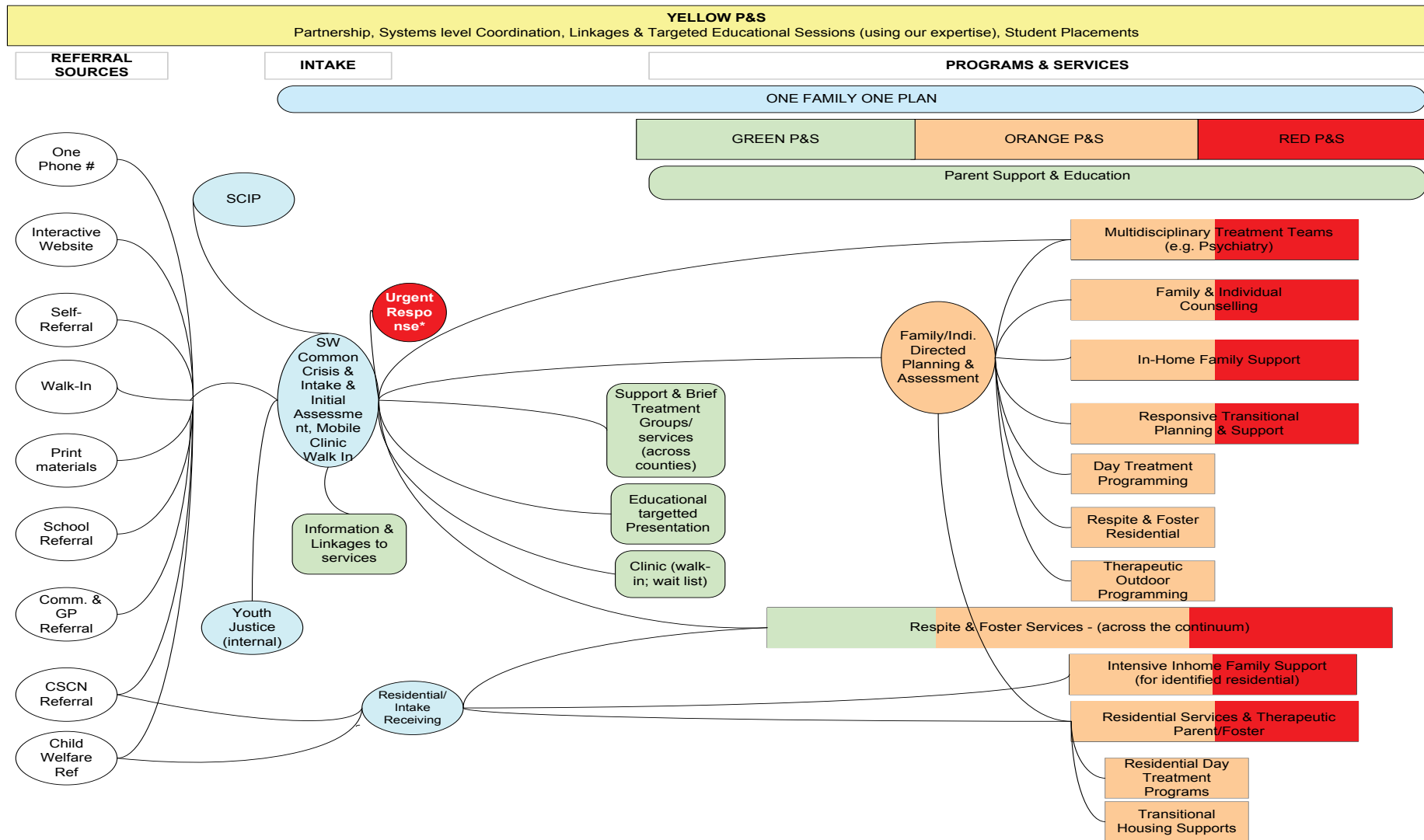
Keeping the child, youth and family at the centre of our work, we begin with the client's understanding of their story, their strengths and resiliency. Together, we co-create one, flexible plan of service that involves both professional and natural supports to address a child, youth and family's unique needs. We honour, respect, and embrace the diversity of each client's story.

Through a variety of professionals we provide a continuum of services from targeted prevention to specialized treatment, both voluntary and mandated, for children and youth ages 0-21 and their families. We believe that trusting relationships between professionals and families is the key to healing and promoting change. Creating an environment of safety, confidence and respect is of utmost importance to us.

To increase accessibility and remove barriers, we provide services as-close-to-home as possible and seek to make transitions within services smoothly. We will do all that we can to remove system barriers that impact negatively on children, youth and families. We are committed to research and development so that we constantly offer the very best to our clients.

Programs & Services Delivery Model – Children’s Mental Health

The Programs & Services Delivery Conceptual Model for Children’s Mental Health is depicted below as a Process Flow Map:



Programs & Services – Children’s Mental Health Description

While there will be many ways in which children and youth can be referred into the new organization following the concept that *every door is the right door*, all community non-residential referrals will enter through a common crisis, intake and initial assessment process. This could be facilitated by one telephone number and an interactive website. Responsive protocols for referrals will be developed with key community partners including schools, child welfare and family physicians. To ensure that services are delivered *close to home*, a walk-in mobile clinic will also be available throughout the region at different times throughout the month.

This centralized intake will work collaboratively with other community initiatives related to intake and intake staff will be also be aware of other community resources so that appropriate linkages can be made for families. An urgent response team will be available to assist children, youth and families who require immediate assistance. This service will work in collaboration with other urgent/crisis services in the communities and will be available 24/7. It is hoped that crisis/urgent beds will also be a part of the new organization.

Yellow Programs & Services

The work of partnerships and system level coordination will continue however, fewer resources will be expended as one representative (vs. the current four) would be needed at partnership and planning tables. The new organization would focus on targeted prevention programs (vs. universal prevention) with a focused approach to leveraging expertise and working with partners. Student placements and the Intern Program (currently at Vanier) would be enhanced creating a stronger learning environment given the variety of settings within one organization in which a student/intern could learn. A stronger partnership with UWO and Fanshawe could be forged and the expertise of students leveraged for the benefit of children, youth and families in our communities.

One Family: One Plan

One of the greatest promises of amalgamation is the ability to work in a unified way with a family and all the children. The fragmented approach that can currently occur due to the age restrictions of programs (and agencies) will be virtually eliminated through amalgamation. Families will be able to work with less agencies and it is hoped that this new organization will be able to develop one plan for the family. Other partners may be a part of the plan and each child may have specialized services however the family would be seen as a whole *and* the needs of all its members would be taken into account. Services would be wrapped around families throughout their journey.

Parent Support, Advocacy & Education

More and more research is demonstrating the importance of the involvement of parents as supporters, advocates and educators. The new organization plans to involve parents in all these roles. Building from the work each agency already does with parents, it is hoped that the role of parents would be more fully explored and used. This could include parent support groups, parents as educators, parents involved with families on wait lists, parents as facilitators, parents involved as mentors and parents involved at Board level.

Green Programs & Services

While early intervention and programs for children and youth identified as being at risk are available in each agency, the new organization would have a stronger strategy across the age continuum and across the region. The creativity and innovation in each organization would now be shared across the organization creating better and more consistent programming across the region. Programs and services that may be currently available for some age groups or in some regions now have the potential of being shared across the organization. A consistent philosophy and approach would be a part of all programs creating clarity of message for families.

An important shift that would occur in the new organization would be the creative use of **respite and foster services** across the continuum starting with children, youth and families using *green* services. Often, the use of foster or residential respite services are reserved for extreme, last-effort cases even though those working with the child, youth or family are aware that providing these interventions earlier would greatly support families. Foster services for Chatham-Kent, provided by WAYS are used in this manner and research is demonstrating the value of using foster and residential services more creatively. The new organization would develop a stronger, earlier intervention strategy to use foster and residential respite services in this manner across the ages, across the region and across the continuum. In addition, a **clinical strategy** would be developed that incorporated a walk-in component (which may assist with wait list issues) as well as a wait-list strategy.

Orange & Red Programs & Services

The focus on **One Family/Youth: One Plan** would begin for those children and youth with more serious mental health issues that impact their functioning in some or all domains of their lives. The process would begin by linking each family with a facilitator who would assist them throughout their involvement with the organization. The key service provider within the organization would take the role of facilitator. This facilitator would listen to the child, youth and families story, work with their strengths and create a plan that addressed all domains of their lives. When necessary, other community resources would be included and the link with natural supports would be a priority. Together, the facilitator and the child, youth and family would develop goals and priorities. This holistic plan would guide the work of the organization with the child, youth and family. In a complex situation a separate facilitator could be added to assist the family. With respect to the needs of the child or youth's mental health challenges, the facilitator would have a variety of internal resources from which to draw including:

- **A Multidisciplinary Treatment Team** – a clinical team consisting of psychiatrist, psychologists, nurses, social workers and child and youth workers
- **Family & Individual Counselling** services
- **Day Treatment Programming**
- **Respite & Foster Residential** – as described above
- **Responsive Transitional Planning & Support** services – led by the facilitator/navigator in conjunction with the child, youth and family and those involved in their plan, a transitional plan of support would be created so that the child, youth and family is supported and set up for success beyond their involvement with the organization.

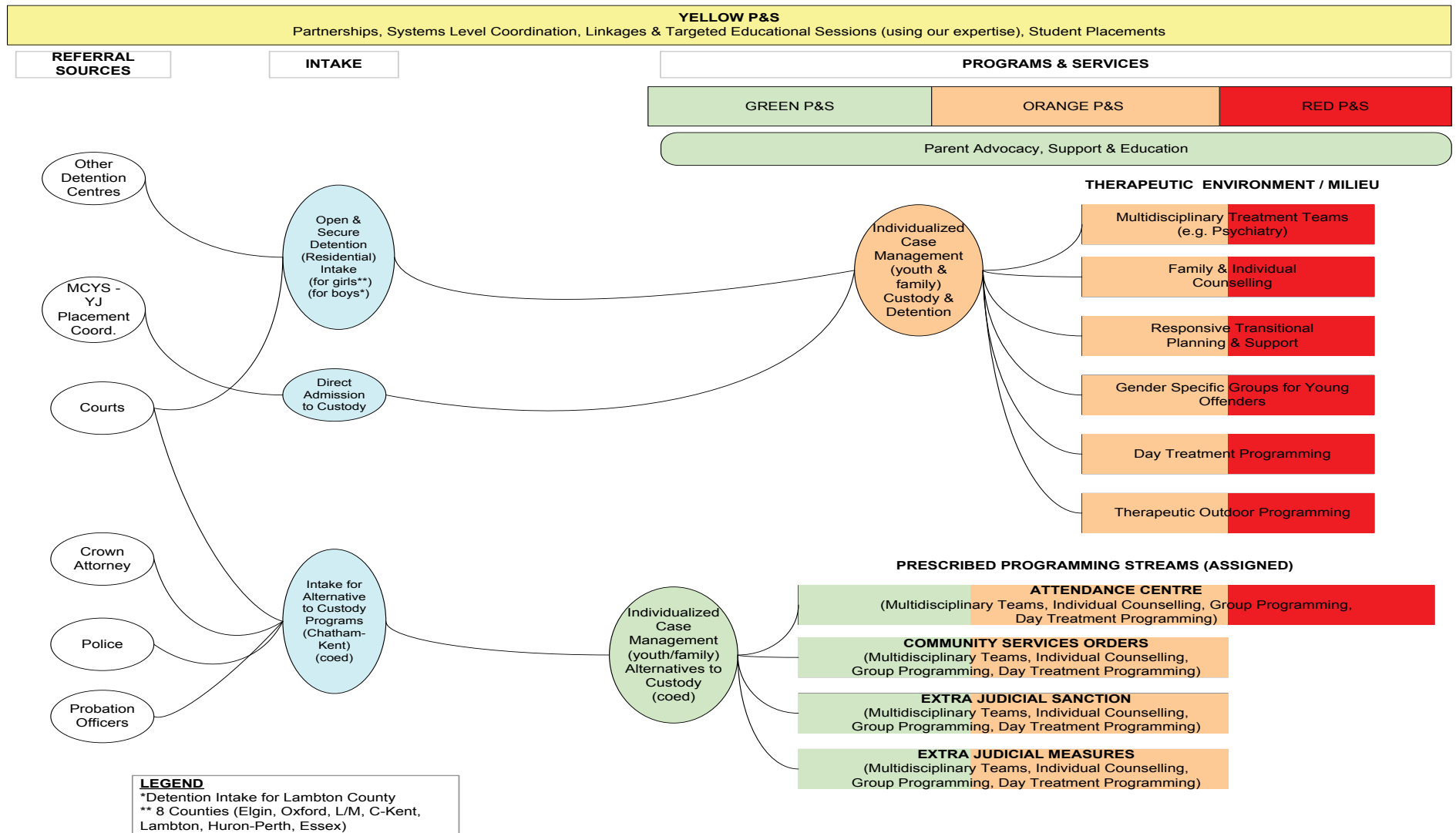
The positive impact of being involved in **Therapeutic Outdoor Programming** is well researched. This type of programming, currently available through Craigwood would be available to those children and youth involved in *orange and red* programs. Other summer camp programs offered (e.g OECYC) would also be incorporated into an Outdoor Programming strategy.

Residential Services

MCYS funded residential services for this region are coordinated by CSCN and in this model, the new organization would continue to receive referrals from CSCN. There would now be a single points of access for fee for service residential beds. Referrals would continue to come from the Child Welfare organizations across southwestern Ontario as well as insurance companies (an area with further potential for development). The intensive, therapeutic residential services would continue. These include **Intensive In home Family Support, Residential Day Treatment Programming and Transitional Housing Supports**. There is opportunity to create a comprehensive residential strategy for the region that optimizes each organizations' current resources to serve children, youth and families better and an opportunity to expand fee-for-service residential, foster, respite, group care, focused family therapy etc.

Programs & Services – Youth Justice

The current Programs & Services Delivery Model for Youth Justice is depicted below as a Process Flow Map.



Programs & Services – Youth Justice Description

The Youth Justice Programs & Services that will be offered by the new organization will not shift dramatically as Youth Justice Programs across the province are mandated, prescriptive services. The diagram illustrates the ways in which youth enter the organization and the different roles the new organization would have in the different counties which vary significantly.

Although there are few changes that can be made in the area of Youth Justice, moving to an amalgamated organization will still see some “wins” for Youth Justice. This includes:

- Linkages to more comprehensive mental health programs (as described above)
- A strong targeted prevention strategy (in partnership with other agencies involved in Youth Justice), continued involvement in system level coordination with less resources being expended, and a stronger Student Placement Program since students would have a variety of settings in which to learn.
- It is hoped that a stronger Parent Involvement Strategy for Youth Justice would be developed using the combined expertise of WAYS, Craigwood and OECYC.
- A stronger team (of combined staff) would ensure greater support, opportunity for learning and development and cross-training of roles.
- Synergies would occur as expertise and resources could be shared across programs (e.g Transitional Workers). The use of current facilities could be optimized for all current programs. The training resources could be used across the organization. Better coordination within the agency (vs. across agencies) would occur.

Overview of Organizational Structure

While an organizational chart has not yet been developed since more detailed work needs to occur to develop the structure, there are some critical guiding principles that will be used to develop the full organizational structure. These include:

- The organization will continue to have staff presence in each of the counties in which it is currently located (i.e. Oxford, Elgin, London/Middlesex, Kent and Lambton) and services will be delivered *as close-to-home* as possible
- We will focus on having a horizontal, flat organization and strive to only have four layers *between* front line workers and the Board of Directors (i.e. Board of Directors, Executive Director, Senior Managers, Team Leads and Staff)
- The structure will be nimble and flexible in its structure so that it can quickly adapt to changing needs
- Communities of Practice/Professional Learning Communities will be used to support depth of knowledge and expertise in each profession
- Cross-functional teams will be used where possible to ensure services can wrap around the child, youth and family
- The infrastructure areas that would support programs and services would include:
 - Finance & Operations
 - Information Systems
 - Human Resources (including volunteer management), Training & Organizational Development
 - Research, Development & Quality Assurance

Phase II Recommendations

The work of Phase II in Programs & Services is significant and will require the involvement and expertise of Programs & Services staff. Engaging staff in the integration of programs and in the detailed design and implementation of the Conceptual Model is essential for its success.

In Phase II, it is recommended that **Programs & Services Planning Team** be created to oversee and coordinate the programs and services integration and development of the Conceptual Model. Stemming from this Planning Team, focused **Integration Teams** with staff membership from across the pertinent organizations would gather to:

- Learn about programs and services
- Building on the work already accomplished, brainstorm possibilities of serving clients optimally within the Conceptual Model
- Determine synergies and potential efficiencies
- Develop the service delivery model (based on their experience, best practice and allocated resources) for that specific area
- Recommend an integration plan for creating a more unified approach to serving clients across the region in that specific area
- Coordinating and aligning with other Children Mental Health community services
- Consult with parents and front-line staff as this is developed
- Ensure coordination and alignment with other Children’s Mental Health agencies, other community services and the work of community planning tables

These focused Integration Teams would include (and review across the age groups)

- Crisis, Intake & Initial Assessment
- All Green Programs across the age groups
- Respite and Residential Foster
- Residential Programs & Services (Children’s Mental Health and fee-for-service programs)
- Multidisciplinary Treatment Teams (and contracted services)
- Family & Individual Counselling
- Day Treatment Programming
- Therapeutic Outdoor Programming
- Youth Justice

In addition, the Programs & Services Planning Team would also oversee and coordinate, with input from key stakeholders (e.g. parents, staff, community partners) the strategy for:

- Family/Individual Directed Planning & Assessment Facilitator (guidelines)
- Parent Advocacy, Support and Education Strategy
- Targeted Prevention Program Strategy
- Identify differences in clinical cultures and practices and build towards an integrated approach

Twenty relevant articles in the field were selected. The review focused on:

- key values and principles
- pertinent strategic directions
- compelling research
- best practices
- sample service delivery models

The literature review confirmed many of the ideas already working in the current organizations. In addition, new ideas and best practices were integrated into the Conceptual Model where possible. A summary presentation of the literature review was provided during the Summit Day One.

After the Literature Review, the Programs & Services Committee decided that the guiding framework that would be used to develop the Conceptual Model was the South Western Ontario's Ideal Model. To review this document click here: [An Ideal Model](#).

Programs & Services Inventory – Process

A comprehensive data base collating all the programs and services was generated as part of the review. A brief overview of the collective programs and services is provided below. The information collected for programs and services included:

- Program Name
- Brief Description
- Strengths | Weaknesses of Program
- Category (Youth Justice | CFI | OPR | Residential | Community)
- Ages range (0-6 | 7- 12 | 13-18| 18+
- Continuum of Intervention (based on the Shared Responsibility Framework)
- Average Wait list in the past year (less month | 1-3 months | 3-6 months | 6 months+
- Numbers served per year (under 10 | 11-25| 26-50|51-100|101-150|151-200|201-250|...)
- Average length of service (under month | 1-3 months | 4-6 | 6-12 | year +)
- FTE Equivalentents to run program
- Disciplines involved

An overview was provided during Summit Day One and informed the development of the Conceptual Model. This data base will prove helpful into Phase II as the integration of programs begins.

Current Programs & Services

Continuum of Services

The Continuum of Intervention (yellow, green, orange, red) used is a common way of outlining programs and services and is used for the Conceptual Framework. A link to the document which contains the Continuum of Intervention is a key document for the Ministry of Children & Youth Services. To review click here: [A Shared Responsibility](#) (see page 10). Following is a brief overview of this continuum:

Yellow	Green	Orange	Red
The general population who would receive universal prevention programs. In Youth Justice, Extrajudicial measures could be consider in this category.	Children/Youth – identified as being at risk for, or who are experiencing, mental health problems that affect their functioning ^[1] in some areas, such as at home, school and/or in the community. For Youth Justice Programs, Extrajudicial Sanctions, CSO and Attendance Centre Programs.	Children/Youth who are experiencing serious or significant mental health problems that affect their functioning in some areas, such as at home, school and/or in the community. In Youth Justice, Open Custody and Open Detention Centres would be included.	Children/Youth experiencing the most severe, complex or persistent diagnosable mental health problems that significantly impair their functioning in most areas, such as at home, school and in the community. In Youth Justice, Secure Custody is included.

Overview – All Programs & Services

This table covers Children’s Mental Health, Youth Justice and fee-for-service programs.

Age Range	Total number of programs	# of Yellow	# of Green	# of Orange	# of Red	Average # of units of service per year	# of registered clients per year
0-6	20	4	7	14	9	2300	782
7-12	35	4	10	16	21	3000	381
13-18	37	4	17	28	26	2800	1481
18+	2	0	2	0	0	125	125
	94	12	36	58	56	8,225	2,614

Notes:

- There are many programs that cross-over the age ranges and across the continuum. If a specific program serves more than one age range it is counted under each age group it serves.
- Average number of units of service per year does not represent unique individuals as some children/youth may be involved in more than one program; others are groups/opportunities for children, youth families who are not registered
- Units of service cover a variety of services as brief as one hour crisis call to a youth in residence for a year
- The total number of unique programs across the four organizations combined is 94
- Registered clients are clients with a file counted in 2009/2010 fiscal year
- Craigwood numbers are lower in 2009/2010 since a facility was closed for two months and a new program slowly introduced

- Many programs have restrictions placed on them (e.g. age, region, youth justice) by the ministry and would require permission to change; however there are Children's Mental Health and fee-for-service programs that do provide opportunity for shifting how they are delivered

Programs & Services (0-6 yrs) - Highlights

The majority of services for infants and children (0-6 years) are at Vanier and OECYC with respite and foster services at WAYS. As a ratio, there are very few staff for the number of children served. Only 4-5 programs are completely dedicated to this age group. All programs are provided within the context of the Early Years community programs and supports. For this reason, the work tends to focus on children in the *orange-red range* as these are services not provided by other Early Years agencies.

There are already strong linkages between OECYC and Vanier in this age group. Services are embedded at Vanier with a strong partnership with OECYC for the Thames Valley region. Vanier provides clinical depth in early years and this permeates out to other counties. In Chatham-Kent similar services to those provided at Vanier and OECYC are provided by children's mental health organizations in the community.

Overall, there are very limited resources for this age group specifically. Of note, currently, the only designated Francophone service for this age group is an Intake worker through C-IT (Crisis Intake Team; a partnership between WAYS, Vanier and Craigwood). Vanier also has a JK/K Classroom - it is one of only two left in the province. Services for this age group also have strong linkages with child welfare.

Programs & Services (7-12 yrs) - Highlights

The resources dedicated to 7-12 year olds are limited. It is assumed that some of prevention and universal programs are occurring within the education system and stronger connections between education and children's mental health are developing. The expertise of children's mental health is leveraged for specific universal programs (e.g. anti-bullying) and there is still greater opportunity for this to continue to develop.

There is a strong Early Intervention Service (*School & Community Intervention Partnership (SCIP)*); a partnership between many community partners including Vanier and OECYC). In London SCIP is linked to 24 schools, in Elgin to 4 and next year it is recommended to expand to Oxford. There is still room to expand this successful partnership.

Worth noting is the lack of Out-Patient Treatment (Family Therapy, Counselling, Psychiatry) in the London/Middlesex Region. This service is virtually non-existent for externalizing problems in the London/Middlesex community except for *Focused Family Therapy* which is part of the Intern Program at Vanier. This program is based on grant funding.

For this age group *In-Home Services* (intensive family in-house service, counselling, parent coaching) have a long waiting list. There is only one Day Treatment classroom in each of Elgin, Oxford and some capacity in London. Once again the only Francophone services for this age group are through C-IT intake worker.

WAYS provides an enhanced *Foster Care Program* currently provided in Southwestern Ontario. Residential services are provided for this age group across the counties (these are fee-for-service and ministry funded beds). At this time, in terms of occupancy, these clusters are between ages 7-9. As well, there is both day and overnight respite; overnight respite has the longest waiting list. The demand for respite service is high and cannot be met at Vanier; WAYS foster provides this service in Southwestern

Ontario with room for expansion. There is a need for models that specialize in long term treatment fostering (such as *Family Bridges*).

Programs & Services (13-18 yrs) - Highlights

All four organizations provide services for this age group across the continuum. Programs in *yellow and green* have the shortest wait list. These are limited prevention and early intervention programs. The wait list increases to about 6 months for mental health services as the programs become more intensive and focus on harder to serve youth. Outpatient services are very limited; however the *community support model* at WAYS is successful in providing outpatient services across the London & Chatham community. There are clinical supports provided for youth; in the case of Vanier these are limited internal resources, for OECYC, Craigwood and WAYS these are purchased/contracted services. The *In-home services* programs have a long wait list.

Craigwood provides community based day treatment programs; however, there are no school-based day treatment programs – a gap for this age group. There are some community supports for youth 16+ in the community that do provide support for counselling services but those with extreme/complex mental health challenges are seen as a Children's Mental Health responsibility. As well, there is a definite gap in concurrent disorders (mental illness and addiction for youth) which is becoming more prevalent.

The *Crisis and Intake* process (serves 0-18) is well defined and shared among the 3 agencies that serve London & Middlesex (Craigwood, Vanier and WAYS). A crisis and intake process also exists in Elgin and Oxford in partnership with CMHA in each community. However there are no crisis residential beds for ages 7-18. Once again, C-IT is the only Francophone service.

Youth Justice Programs are prescribed programs and are delivered in very specific ways. There are over 700 youth served in 3 residential based programs one of which is a *residential secure custody & detention*. Related section 23 classrooms exist. WAYS provides the *Youth Justice Alternatives to Custody* programs in Chatham-Kent. In addition to pen custody and detention, Craigwood provides residential secure custody for females. OECYC provides limited individual counselling programs in Oxford. These Youth Justice programs are complemented by programs provided by other agencies in each community. The only Francophone services for this age group are through C-IT Day; Intake worker.

Although there are many residential treatment beds which have different funding sources available to youth across eight counties, over the past years, they have been underutilized. This is a valuable resource which, could be more fully developed. Child Welfare continues to purchase residential services and as Child Welfare undergoes its provincial review this may impact this residential service delivery.

In addition there are foster beds in Southwestern Ontario available for this population; however, they are not highly used as foster parents prefer younger children. There is a possibility of enhancing this program by providing Therapeutic Foster Treatment but it needs a well defined model of clinical supports. These programs do exist in other communities.

Programs & Services (18+) - Highlights

OECYC offers a program for adults. This program offers support to individuals, 18 years and older, who have been diagnosed with a developmental disability and whose goal is to live independently in the community.

In addition, WAYS has two residential transition homes in London (16-21) focused on preparing youth for independent living; these are not staffed 24/7.

Fee-for-Service Programs – Highlights

Worth noting are the fee-for-service programs across the agencies that include residential group care, residential treatment, foster, respite (day and overnight) and Focused Family Therapy. There is a significant opportunity to expand these services in a coordinated manner through amalgamation.

Key Potential Challenges of Amalgamation – Programs & Services Perspective

This represents an initial assessment of challenges as integration begins, there may be others that will surface.

For Clients

Potential Challenge	Mitigating Strategy
<ul style="list-style-type: none"> • Possibility of getting “lost” in a larger organization • Programs become centralized (no longer close to home) • Loss of focus on children or youth through the transition of amalgamation • More barriers are created for services 	<ul style="list-style-type: none"> • Strong Case Management System (IT & Personnel) • Commitment to keep programs in counties and deliver programs as close to home as possible • Commitment to programming for 0-21 • Ensure less barriers are created as service delivery is developed • Client advisory group established

For Programs & Services

Potential Challenge	Mitigating Strategy
<ul style="list-style-type: none"> • Difference in clinical culture • Difference in treatment approaches • Challenge of integrating programs across a large geographical area • Difference in organizational culture 	<ul style="list-style-type: none"> • The process of integrating approaches, and cultures started in Phase I through the many meetings and opportunities provided to staff and managers for engagement and idea generation • Build on these ideas as transitioning and integration takes place • Ensure high level of staff involvement through Phase II

For Student Placement & Interns

Potential Challenge	Mitigating Strategy
<ul style="list-style-type: none"> • Confusing organization to know and learn • Program too big 	<ul style="list-style-type: none"> • Strong strategic strategy for the Student Placement & Intern Program • Continue to provide opportunities in smaller ***team • Grow program slowly and methodically • Attach resources to assist with its development

For Staff

Potential Challenge	Mitigating Strategy
<ul style="list-style-type: none"> • Organizations too big • Loss of expertise in a specific field (everyone becomes generalists) 	<ul style="list-style-type: none"> • Create a culture of engagement for staff • Create an organizational structure that is not too hierarchical • Support growth and development of staff (become experts in specific areas) • Continue to provide opportunity to work in small team settings

Organizationally

Potential Challenge	Mitigating Strategy
<ul style="list-style-type: none"> Organization becomes too bureaucratic; nothing gets done 	<ul style="list-style-type: none"> Create an organizational structure that is not too hierarchical, with many avenues for input Decision-making taking place at the right level

For the Ministry

Potential Challenge	Mitigating Strategy
<ul style="list-style-type: none"> Funding restriction 	<ul style="list-style-type: none"> Greater flexibility in budget lines now across programs and geographical areas

Key Potential Benefits of Amalgamation – Programs & Services Perspective

In children’s mental health, resources across the age groups and continuum are stretched and limited due to the lack of much needed funding over many years. Amalgamation will provide opportunities to leverage the expertise and resources that each organization currently has. Potential benefits from a Programs & Services Perspective included:

For Clients:

- Better outcomes for children, youth and families – research verifies that coordinated and integrated services achieve better outcomes
- The ability to work with infants, children and youth, as they need support, throughout their childhood and adolescent years (serving 0-21 years); continuity of service for the child/youth/family
- Better opportunity to work with the whole family (and all the children) versus children of the same family working with different agencies
- Decreasing waiting time and implementing wait time strategies
- Simplifying the current referral process since referrals would be within one agency
- Creating programming synergies through learnings from specialized programs which may have broad applicability
- Introducing new program models building on existing expertise and resources
- Greater coordination, planning and decision-making at an agency and community level

For Student Placements & Interns

- Enhancing the intern program and student placement as they can gain experience across the age continuum and in a variety of settings and programs
- Opportunity to create new programs and offer programs across a wider age-range for clients

For Staff

- Opportunity to learn and share one another’s expertise
- Opportunity for both horizontal and vertical mobility within the organization
- Greater opportunity for internal training given wide range of expertise and skilled staff
- Better use of staff expertise across a variety of programs
- Attract and retain staff with clinical expertise and other disciplines
- Opportunity to work with different age groups

Organizationally

- Greater opportunity to build capacity and expertise in areas such as volunteer coordination, risk management, research & quality assurance
- Better links with colleges, universities, the medical community and other social service systems
- Greater opportunity to leverage funding corporate sector and other sources
- Through a sustainable organization, greater stability for programs and services

- Create a strong Training Division across the whole organization (leverage resources already in place)

For the Ministry

- Greater alignment with provincial vision for Children’s Mental Health and the Ideal Model
- Greater consistency of programming across the region
- More efficient use of public funds
- Proper infrastructure to support programs and services
- Sustainable Children’s Mental Health organization
- Focused resources to address risk management, legislation changes, evaluation and continuous quality improvement

Appendix B Overview of Comparative Analysis

The following information is an overview of the comparative analysis of the four organizations with respect to infrastructure.

Process

At the initial Governance Committee meeting, members discussed the infrastructure areas which they believed needed investigation and the specific questions in each area on which to gather information.

The areas were:

- Intangible Assets
- Human Resources
- Collective Agreements
- Governance
- Realty
- Finance
- Information Systems
- Other Legal Entities
- Legal
- Programs & Services¹

Templates for each area were created and members of the Infrastructure Committee were asked to provide the necessary information. The templates were then reviewed by a Board of Directors member of the Infrastructure Committee.

While a significant amount of information was collected under each area the focus of this review was to:

- Disclose critical information about each organization
- Conduct a comparative analysis overview
- Determine if there were any significant road blocks in moving the amalgamation process forward
- Discuss approximate cost and complexity in each area if amalgamation was to occur

Following is an overview of the information collected in each area. Details are not disclosed in this report as much of the information is confidential.

Area	Key Questions	Task Force
Governance	<ul style="list-style-type: none"> • Comparative Analysis of: <ul style="list-style-type: none"> ○ Governance model used in each organization ○ Size and expertise/representation of each of the boards governance model ○ By-laws review (with analysis to come in Business Plan phase) ○ Relationship between E.D. & Board (Executive Limitation) • Recommendation of Governance model to use for new organization 	<ul style="list-style-type: none"> • Governance Committee
Human Resources	<ul style="list-style-type: none"> • Organizational charts • Comparative analysis of: <ul style="list-style-type: none"> ○ Administration personnel comparison ○ Salary, benefits, pensions, other compensations/benefits (both unionized and nonunionized employees) ○ Collective Agreements 	<ul style="list-style-type: none"> • Catherine Hammond • Kathryn Hogan • Gary Wood • Sandra

¹ Overview in Appendix A

Area	Key Questions	Task Force
	<ul style="list-style-type: none"> ○ Inventory of HR expertise in each organization ○ Job position comparison & credentials/training ○ Training/professional development allotment ○ Insurance providers ○ WSIB/self-insured/other ○ HR software comparison ○ Staffing strategies (FTE/PTE/Casual) ○ Age of staff (in ranges) ○ Seniority (years of service) ○ Special staffing considerations ○ Unfilled positions ○ Employee turnover rates ● Development of labour relations strategy <p><u>Review Goal:</u></p> <ul style="list-style-type: none"> ● Critical elements to consider if moving to Phase II: Business Plan Development ● Using scale (1-5) (1 being very easy, 5 being very difficult) how easy/difficult will it be to harmonize human resources in amalgamating? ● Potential areas of costs & savings/efficiencies ● If possible, recommendation on process to harmonize HR 	<p>Rutledge</p> <p>Reviewer: Barbara Decker Pierce</p>
I.T./Data Records Keeping	<ul style="list-style-type: none"> ● Comparative analysis of: <ul style="list-style-type: none"> ○ Communications ○ Service Provisioning ○ Systems Inventory / Hardware / Software ○ Back-up / Data Protection / Security ○ Records Management ○ Available Expertise ○ Case Management ○ Networking Infrastructure ○ IT Ventures ● Legal issues/process to move files to new organization (current & past files) <p><u>Review Goal:</u></p> <ul style="list-style-type: none"> ● Critical elements to consider if moving to Phase II: Business Plan Development ● Using scale (1-5) (1 being very easy, 5 being very difficult) how easy/difficult will it be to harmonize I.T in amalgamating? ● Potential areas of costs & savings/efficiencies ● If possible, recommendations on which system to use if amalgamating and process to harmonize data 	<p>IT Subcommittee:: Kathryn Goddard, Phil Kirchgessner, Sandra Rutledge, Ken Northmore</p> <p>Reviewer: I.T. subcommittee</p>
Realty	<ul style="list-style-type: none"> ● Inventory of: <ul style="list-style-type: none"> ○ Location ○ Approximate current value market ○ Liabilities (e.g. hazardous removals) ○ Maintenance costs (associated with the building which may need to be incurred over the next 5 years) ○ Owned/mortgages/rent/lease periods ○ Insurance costs ○ Accessibility and costs to become accessible (new legislation requirements) ○ Security ○ Purpose/use/unfilled space ○ Income generation (if any) ○ Historic properties 	<ul style="list-style-type: none"> ● Gary Wood ● Catherine Hammond ● Don Steeper ● Sandra Rutledge <p>Reviewer: Mary Heisz</p>

Area	Key Questions	Task Force
	<p><u>Review Goal:</u></p> <ul style="list-style-type: none"> • Critical elements to consider if moving to Phase II: Business Plan Development • Using scale (1-5) (1 being very easy, 5 being very difficult) how easy/difficult will it be to harmonize realty in amalgamating • Potential areas of costs & savings/efficiencies • If possible, recommendations on properties to keep/not keep (in alignment with Conceptual Model presented) 	
Intangible Assets/ Liabilities	<p>Inventory of intangible assets & liabilities in each of the following categories</p> <ul style="list-style-type: none"> • Human assets • Intellectual property assets • Value of Brand (risk of losing brand, expertise in branding) • Training/development resources • Research • Programs/expertise • Relationships that have been built (links to the community) • Accreditation • Donors • I.T. <p><u>Review Goal:</u></p> <ul style="list-style-type: none"> • Critical elements to consider if moving to Phase II: Business Plan Development • Using scale (1-5) (1 being very easy, 5 being very difficult) how easy/difficult will it be to harmonize intangible assets in amalgamating? • Potential areas of costs & savings/efficiencies 	<ul style="list-style-type: none"> • Brenda Hall • Lothar Liehmann • Marc Roberts • Willy VanKlooster <p>Reviewer: Barbara Decker Pierce</p>
Legal	<p>Review of process/options to amalgamate including:</p> <ul style="list-style-type: none"> • Potential options to consider in amalgamation • Lengths of process • Ministry involvement • Best approach to transfer assets/remove liabilities • Related costs • Ensuring charitable status is protected • Foundation can continue with new entity • Best way to define objects <p>Comparative analysis of</p> <ul style="list-style-type: none"> • Legal Counsels and costs • Outstanding – potential law suits, whose representing plaintiffs, where you are at in the process • Liability and property insurance <p><u>Review Goal:</u></p> <ul style="list-style-type: none"> • Critical elements to consider if moving to Phase II: Business Plan Development • Using scale (1-5) (1 being very easy, 5 being very difficult) how easy/difficult will it be to amalgamate? • Potential areas of costs & saving/efficiencies • If possible, recommendations on which legal option to consider for amalgamation 	<ul style="list-style-type: none"> • Hary VanBavel • Karen McKay <p>Reviewer: Hary VanBavel</p>
Finance	<ul style="list-style-type: none"> • Comparative analysis of financial information including: <ul style="list-style-type: none"> ○ Program level budget review for the past 2 years ○ Cross subsidization of programs ○ Assets ○ Reserves 	<ul style="list-style-type: none"> • Gary Wood • Don Steeper • Catherine Hammond • Sandra

Area	Key Questions	Task Force
	<ul style="list-style-type: none"> ○ Liabilities (including: environmental assessments, law suits, projected expenses (e.g. upcoming capital expenses)) ○ Funding sources (ministry and revenue generation) ○ Auditors (names, costs) ○ Budget Proportions (% admin, % direct services) <ul style="list-style-type: none"> • Aggregate budget <p><u>Review Goal:</u></p> <ul style="list-style-type: none"> • Critical elements to consider if moving to Phase II: Business Plan Development • Using scale (1-5) (1 being very easy, 5 being very difficult) how easy/difficult will it be to harmonize finances in amalgamating? • Potential areas of costs & saving/efficiencies 	<p>Rutledge</p> <p>Reviewer: Mary Heisz</p>
Other legal entities (Craigwood & Vanier)	<ul style="list-style-type: none"> • Purpose of other organization • Governance • Status of organization and link to main organization • Programs & Purposes still in operations • Audited financial statements • Assets/Liabilities <p><u>Review Goal:</u></p> <ul style="list-style-type: none"> • Critical elements to consider if moving to Phase II: Business Plan Development • Using scale (1-5) (1 being very easy, 5 being very difficult) how easy/difficult will it be to harmonize these other legal entities? • Recommendation on whether or not to keep these other legal entities 	<ul style="list-style-type: none"> • Lothar Liehmann • Gary Wood • Brenda Hall <p>Reviewer: Catherine Harrington</p>
WAYS Foundation	<ul style="list-style-type: none"> • Governance structure • How willing is the WAYS Foundation to move forward? • Review of by-laws <p><u>Review Goal:</u></p> <ul style="list-style-type: none"> • Critical elements to consider if moving to Phase II: Business Plan Development • Using scale (1-5) (1 being very easy, 5 being very difficult) how easy/difficult will it be to include the foundation if there is an amalgamation? • Recommendation on how to proceed 	<ul style="list-style-type: none"> • Catherine Hammond <p>Reviewer: Catherine Harrington</p>

Benefits

As noted throughout the comparative analysis, there can be great benefits to amalgamation. These include:

- Significant number of intangible assets that can be leveraged across organizations
- Opportunity to better use the experience and expertise of staff
- Seasoned managers and young, vibrant staff
- Strong governance experience and structure on all boards
- Many capital assets that can be optimized (\$11.466 million)
- Properties that have been well maintained
- Strong expertise and social enterprise related to Information Systems
- Organizations are not in debt
- Social enterprise experience and entities
- A Foundation and developed donors

Appendix C Terms of Reference

On September 15, 2010 at the Boards of Directors meeting, a motion was presented to decide whether or not each of the four organizations will move forward into Phase II of Amalgamation. These are the Terms of Reference which will be used in Phase II.

Guiding Principles

As Craigwood, OECYC, Vanier and WAYS enter into Phase II the following Guiding Principles will be honoured.

As we work through Phase II we commit to:

Overall

- Keeping children, youth and families as the primary focus
- Focusing on improved outcomes
- Building organizational culture through the way the work is carried out in phase II including:
 - Being guided by the Vision, Mission, Values and Philosophy of Approach for the new organization
 - Being open, transparent communication and dialogue
 - Conducting our work with integrity and respect
 - Working collaboratively with staff, unions and partners
 - Being fiscally responsible
 - Being gentle with one another as we move through the transition, loss and emergence into the new entity
 - Committing to program & service excellence
- Not making major decisions or changes within each organization without consulting with the others and dialoguing about the impact on amalgamation
- Creating as much as possible, a flat organization that ensures the new organization does not become too bureaucratic aiming for four levels *between* the Board of Directors and front line staff (i.e. Board of Directors, Executive Director, Senior Managers, Team Leads and Staff)

Staff & Team

- Making every effort to retain our staff since we foresee minimum loss of positions
- Using a fair and objective process, where a competition is necessary
- Engaging and supporting staff through the process
- Providing staff with leadership development opportunities
- Integrating staff where possible and building team

Programs & Services

- Continuing to have staff presence in each of the counties in which it is currently located (i.e. Oxford, Elgin, London/Middlesex, Kent and Lambton) and services will be delivered *as close-to-home* as possible
- Maintaining an open mind and continuing and ensuring quality of programs & services during the transition remains high
- Being creative and innovative and building on the best of what we are now
- Ensuring the quality of the work we are doing during the transition remains as high as it is now
- Beginning to share expertise, knowledge, skills and potentially resources across the organizations
- Being flexible to change focused on what is best for children, youth and families

Amalgamation Desired Outcomes

Endeavour to meet the Desired Outcomes

- **Create better services for children, youth and families**
- Decrease the confusion and increase the ability of those referring to navigate the system.
- Combine resources (financial, human and creative) to create a broader (ages 0-21), more integrated service system that will be easier for families to access and work within.
- Build a flourishing organization and create a great place to work.
- Increase the capacity to support, develop and strengthen all staff.
- Increase the visibility and credibility of the Children's Mental Health sector.
- Increase awareness and advocacy in our community on behalf of those we serve.
- Contain, reduce and avoid costs increasing value for money.
- Consolidate and focus resources to better address infrastructure issues, gaps and growing demands.
- Increase capacity to leverage funding from the corporate sector and from donors.
- Provide efficient reporting to the ministry working with one organization instead of four.
- By maximizing our resources, create a sustainable Children's Mental Health system in our region for the next generation. Absorb some service cutback through reallocation of resources.
- Our pro-activity will serve as further impetus toward system change

Work for Phase II – Business Planning and Transition

Based on the recommendations from Phase I work of the Governance, Infrastructure and Programs & Services Committees as summarized in the report, *Phase I – Board of Directors – Summary Report*.

Programs & Services

Develop the **Programs & Services Planning Team** to oversee and coordinate the programs and services integration and development of the Conceptual Model. Stemming from this Planning Team, focused **Integration Teams** with staff membership from across the pertinent organizations would gather to:

- Learn about programs and services
- Brainstorm possibilities of serving clients optimally within the Conceptual Model
- Determine synergies and potential efficiencies
- Develop the service delivery model (based on their experience, best practice and allocated resources) for that specific area and aligned to the Conceptual Model
- Recommend an integration plan for creating a more unified approach to serving clients across the region in that specific area

These focused Integration Teams would include (and review across the age groups)

- Crisis, Intake & Initial Assessment
- All Green Programs across the age groups
- Respite and Residential Foster
- Residential Programs & Services (OPR, CFI)
- Multidisciplinary Treatment Teams (and contracted services)
- Family & Individual Counselling
- Day Treatment Programming
- Therapeutic Outdoor Programming
- Youth Justice

In addition, the Programs & Services Planning Team would also oversee and coordinate, with input from key stakeholders (e.g. parents, staff, community partners) the strategy for:

- Family/Individual Directed Planning & Assessment Facilitator (guidelines)
- Parent Advocacy, Support and Education Strategy
- Targeted Prevention Program Strategy

Human Resources & Collective Agreement

- Develop a **Human Resources Integration Team** to:
 - Conduct job comparison analysis
 - Develop salary grids
 - Develop a Leadership Development Strategy
 - Develop an Integration of Organizational Culture Strategy
 - Develop a plan to integrate all human resources information
- Develop an **Executive Director** selection process and severance costing, led by the Chairs of the Boards
- Develop a **Management Team** strategy and selection process, led by the Executive Director
- Led by the Executive Directors and in collaboration with Senior Managers, develop the organizational structure for the new organization
- Develop a **Labour Relations Strategy** early in Phase II

Intangible Strategies

- Integrate the intangible assets into appropriate Integration Teams
- Develop a **Research & Development Integration Team** to:
 - Collate all current R&D projects
 - Develop a strategy for R&D
- Develop a **Communications Integration Team** to:
 - Develop a Communication & initial Branding Strategy

Governance

- Develop a **Governance Integration Team** with membership from each of the four organization's boards.
- The Governance Integration Team would develop a Governance Strategy to include:
 - Articulation of Governance Model and membership
 - Selection of by-laws (working in collaboration with the Legal Integration Team)
 - Determination of membership of the new Board for the new amalgamated organization
 - Review of policies and procedures and selection of policies and procedures to govern the new organization
 - Coordination of new amalgamated board to meet prior to amalgamation

Realty

- Develop a **Facilities Integration Team** to review the needs of the new service delivery model, information systems, equipment, accessibility, administration space and to develop a Functional Space Plan Strategy

Information Systems

- Develop an **Information Systems Integration Team** that would
 - Work with Programs & Services Integration Team and the Facilities Integration Team to more fully understand the requirements and limitations
 - Develop an I.S. Strategy taking into account a low, medium and high costing options and a phased in approach
 - Begin sharing expertise, knowledge, skills and potentially resources across the organizations
- A **Case Management System** would be selected by a third party and with input from all organizations clinicians and service providers

Finances

- Develop a **Financial Management Integration Team** that would
 - Integrate all financial information
 - Determine cost savings and efficiencies
 - Assist in determining costs of amalgamation and new costs of the organization
 - Develop a 5 year integrated financial plan
 - Determine plan to amalgamate all financial information

Other Legal Entities

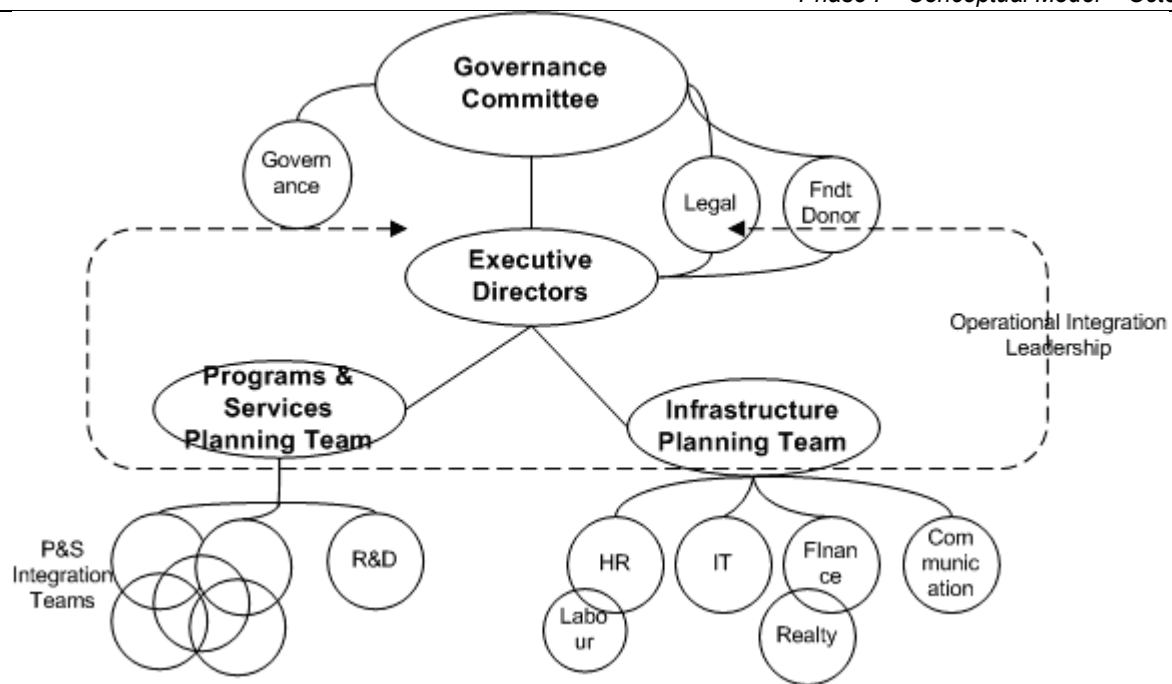
- The **Legal Integration Team** will ensure that the legal requirements are met to transfer the WAYS Foundation
- A **Foundation & Donors Integration Team** is developed to create a Foundation Strategy and ensure all current donors (of all 4 organizations) are informed and updated about amalgamation and transitioned as donors to the new organization

Legal Issues

- Conduct an Legal Due Diligence review of all four organizations to ensure that the information provided is accurate and fully disclosed
- Develop a **Legal Integration Team** to develop the structural and legal integration strategy to include:
 - Develop an RFP to confirm the legal firm that will conduct all legal work including a legal due diligence, review of charitable status, corporate structures, assets, liabilities, contracts and eventual implementation of amalgamation
 - Determine the best approach to amalgamation and legal costs
 - File amalgamation papers
 - Assist in setting objects and bylaws
 - Ensure charitable status is maintained
 - Transfer the WAYS Foundation (including objects and bylaws)

Draft Structure for Phase II

Following is a draft structure of how the Integration Teams would work as well as how the process would be governed.



The Project Manager & Facilitator would assist in managing, supporting and facilitating the work in Phase II through this structure. The Project Manager & Facilitator would be accountable to the Executive Directors Team.

Resolving Conflict through the Process

We will endeavour to work in a spirit of mutuality, honesty and respect realizing that healthy conflict can lead to creativity and better solutions. When conflict escalates we commit to:

- Addressing conflict with the person(s) directly; if no solution is found we will
- Seek the support and guidance of the Integration Team Lead(s); if no solution is found we will
- Seek the support and guidance of the Executive Directors Team; if no solution is found we will
- Involve the Amalgamation Facilitator to facilitate the conversation; if no solution is found we will
- Bring the issue to the Governance Committee for final resolution

Terminating the Agreement to Amalgamate

Craigwood, OECYC, Vanier and WAYS Boards of Directors enter Phase II fully committed and anticipating amalgamation. Only for an extraordinary, serious circumstance would an organization consider removing itself from the agreement to amalgamate. If an organization is considering removing themselves from amalgamation the following process would be followed:

The Executive Director and Chair of the Board of Directors of the organization considering terminating amalgamation would bring the issue to the **Governance Committee**. The Amalgamation Facilitator would facilitate a process that would focus on:

- Seeking to address the situation
- Finding ways to mitigate or resolve the issue with the desired outcome of having the organization continue with the amalgamation process

However if no resolution is found, the Governance Committee (including the organization seeking to leave) would develop a plan to:

- Determine implications
- Address how the organization can best leave
- Address the implications of moving forward
- Develop a communication plan