

Gordon Floyd remarks to CMHO AGM – November 23, 2009

As Glen has said, it appears that our big challenge and our big opportunity in the next year or more will be to work with the Ministry of Children and Youth Services to start reforming the child and youth mental health system. We are expecting that Aryeh Gitterman, during the first plenary session at today's summit, will offer some specifics about the Ministry's priorities for change and to indicate their next steps in implementing the policy framework. However, as Glen indicated, we have already gotten some broad hints from the regional presentations of mapping data, all of which have now happened except in Hamilton-Niagara. We have also gleaned some information through our on-going discussions with Ministry officials.

Our sense is that the changes to come could be the most significant since the current system was created almost 40 years ago, when Ontario moved away from large institutions and established a province-wide network of community-based agencies. That system began with a few dozen agencies, but by 1993 had grown to approximately 200, and last year the Auditor-General reported – to everyone's surprise – that almost 400 agencies now receive annual funding under the Child and Family Intervention budget line. This proliferation of services has occurred without any overall plan, or province-wide service standards, or attention to the effectiveness of services. The Auditor-General has repeatedly lambasted successive governments because they know so little about child and youth mental health needs, and almost as little about the services they are funding.

The policy framework that was released in 2006 was the first step towards a more rational, consistent, effective and accountable system. Again to the surprise of many people, the Auditor-General's report last December stated that it is unclear whether the Ministry or agencies will take the lead in implementing the framework. That observation may be one of the reasons why the Ministry is now ready to move, but it's important for all of us to remember that Ontario's child and youth mental health system is overwhelmingly community-based, not government-run. Your agencies, although heavily dependent on government

funding, are all independently governed, and accountable to your communities first. System reform in your community and across the province must happen in partnership between agencies and the Ministry, not by government fiat alone. This means we will have an opportunity, and a responsibility, to ensure that any changes contribute to some combination of serving more children, and improving their mental health outcomes.

Of course when change is on the agenda, we can all conjure up worst-case scenarios. But we know that change has to come, because the status quo is simply not sustainable. Some agencies have already hit the wall and closed their doors or merged with others. Fortunately, there is no indication that the Ministry wants to further weaken the community-based agencies that deliver children's mental health services – quite the opposite, in fact. There is every indication that they see community-base agencies at the heart of a bigger and broader children's mental health 'system', including in particular school-based services and services provided through the formal health system.

Improving the integration across Ministries – especially with school-based services – will be an early priority for policy framework implementation. The Student Support Leadership Initiative has been a warm-up for much more intensive and on-going linkages in the future. A careful reading of the mapping workshop documents indicates that schools and agencies will soon be expected to plan and deliver services collaboratively within their communities. Common tools for risk screening, intake and assessment will be developed. Common language will be negotiated. It's quite possible that schools will be expected to take a larger role in health promotion and in identifying children and youth who need specialized help, while agencies take the lead in providing treatment and support services for larger numbers of children, youth and their families.

The mapping results show that some 43,000 children are currently referred to community-based agencies by the school system, yet prevalence numbers indicate there are at least 400,000 students in Ontario who have mental health problems, including about 260,000 with diagnosable disorders. Think for a

moment of the opportunity to develop a truly integrated service that draws on the resources of both systems to identify, treat and support those children. Think of how information-sharing and referrals across systems could be improved so we could, for instance, link treatment outcomes with indicators of student success as one step toward serving children more holistically. When Glen speaks about a game-changer, there's one good example.

For the past year or more, we have been preparing for and speaking about another potential game-changer: restricting government funding to agencies that are accredited. We estimate that at least one-third of current MCYS funding for child and youth mental health goes to agencies that primarily work in other fields and whose mental health programs meet no quality assurance standards of any kind. With the upcoming transition of CMHO's in-house accreditation program to a more independent third-party accredited body, we are aiming to enhance its credibility so that it could become a tool for consolidating services - and funding - in agencies that have demonstrated expertise and quality. Accreditation is already a funding requirement for most community-based services in Alberta and British Columbia, and in some fields such as credit counselling here in Ontario. It's not on the government's agenda yet, but it's a good example of the type of opportunity that we can advocate for when the system is open for reform anyway.

As the process and priorities for change unfold, we will have to be vigilant both for other opportunities and for dangers. There will need to be clarity about how the costs of change are to be paid for. There will need to be realistic expectations about how much can be done within existing budgets. There will be an opportunity to ensure that better wait time management - which is clearly one of the Ministry's high priorities - includes establishment of wait time standards which will provide a benchmark we can use when we talk about the need for more system capacity. And, since most of the discussions and negotiations about change will happen at the regional and community levels, CMHO will have an important role to ensure that information about both local breakthroughs and problems is shared across the province with all our members.

When I arrived at CMHO almost 6 years ago, my first challenge was to figure out what was needed to get more funding for agencies. The answer I received at Queen's Park was that the system needed to change before significant new money would be invested in it. We have been able to get small increases in some of the years since, but we all know those were just bandaids, and that even annual cost-of-living increases, if we could get them, wouldn't add to overall capacity or make it possible to develop a more effective, evidence-based system. So we have been working towards more fundamental reform, with our leadership in developing the policy framework, with updated accreditation standards and a more independent accreditation process, with more support for the introduction of evidence-based practices, and by raising public awareness about the need for a better system of mental health services for kids and families.

The year ahead, and probably the next few years, promise to be critical for your agencies, this association, and the future of Ontario's child and youth mental health system. It was only last Friday the Globe and Mail editorialized that the current system "borders on fiasco" in large part because "only one in five children who need it receives help". CMHO's new mission says that "we champion the right of every child and youth in Ontario to mental health and well-being" – and that's exactly what we will continue to do – by working to strengthen your agencies through advocacy and direct supports, increasing awareness and understanding, and supporting efforts to improve outcomes – during the coming year and beyond.

Before I end my remarks, I want to pay tribute to the hard work and dedication of our staff team at CMHO, to the commitment and wisdom of our Board under Glen's leadership for the past 2 years, and to all of you and the staff at your agencies for the creativity, skill and perseverance you bring to this very challenging field and these very difficult times. I am honoured to work with all of you, and look forward to achieving major successes together in the years ahead. Thank-you.