

CF
AGM

Congratulations and thanks to Minister Chambers, and her officials

Process was good – a true partnership driven by a mutual commitment to better outcomes for Ontario's children and youth

Framework reflects the principles, values and priorities that emerged during stakeholder meetings in fall 2005

A focussed and sensible plan that sets the stage for multi-year investment to re-vitalize and transform CYMH services

The results we expect are:

- more awareness by families, child and youth serving professionals, and communities of CYMH needs
- more mental health promotion, and earlier intervention
- more timely, and less confusing, access to treatment
- better linkages between children's mental health centres, physicians and pediatricians, schools, child welfare and youth justice services, and adult MH services
- more use of evidence-based practices that are culturally-appropriate, and
- continuous quality improvement based on rigorous outcome measurement

Minister, you got it right. This framework points to a much brighter future for the 5-600,000 children in Ontario with MH problems - and for their families, their teachers, their classmates, and their communities

BUT ... A framework can only be built on a solid foundation

The essential foundation for mental health services is in the skilled people who deliver those services. During the past decade we have found many ways to improve efficiency and productivity in the CYMH sector:

- more than 30 agencies have been involved in amalgamations
- telepsychiatry has enabled the most scarce of our skilled professionals to reach more children than ever
- agencies have introduced walk-in clinics, briefer forms of therapy and a host of other innovations to improve their productivity and efficiency

And we will continue to find new ways to stretch dollars further.

But we cannot get around the reality that children's mental health services are delivered by people with specialized

training who need to be fairly compensated ... and when they're not fairly compensated they go elsewhere.

So, while we are truly excited about the promise of the new policy framework, we know - and we ask you to remember - that the foundations of the current system must first be repaired if that promise is to be achieved.

A survey this fall of children's mental health centres confirms the extent of the repair that's needed:

46% anticipate deficits this year, averaging \$143,000
= \$5.5 million

Many of those that expect to break even will do so only by leaving staff vacancies unfilled

40% anticipate staff cutbacks in 2007-08, averaging 2.74 FTEs

= 90 staff, enough to treat more than 2000 children

44% are planning for program cutbacks in the next 12 months in areas that include:

- Outreach counselling in the community
- School support services, including crisis support
- Treatment for children who have been sexually abused
- Intensive in-home support

- Speech and language services
- Parenting programs
- Wraparound services for young mothers
- And much more

This information comes from agencies that have, for the most part, struggled successfully to maintain their services until now, despite having received only one base funding increase in the last 15 years.

Some of the comments in the survey results clearly explain what's happening. Here are a few of them:

"We have eliminated all services for children & youth who are not exhibiting significant mental illness."

"We are 25 to 30% lower in salaries than CASs and the Ontario Public Service."

"In the past 12 years no one has moved up our salary grid, nor has the grid moved, except 2 years ago when we got the 3% overall increase."

"Right now, we're losing our psychological associate to the school board due to the additional \$15,000 she'll make, plus enhanced benefits."

"Staff recruitment and retention have not surprisingly become a critical issue."

"There is a laudable emphasis on more and more reporting and measuring but ... we cannot provide the training, monitoring, supervision, etc. to sustain our services."

"New money going into designated projects is useless in preventing cuts to existing proven evidence-based ongoing programs."

"Our ED is also the Clinical Director, the Clinical Supervisor, and carries a caseload."

"Of the 38 groups for children and parents that we offer, only 2 are funded by the Ministry ... this is what the community looks to us to provide ... we need help."

A handwritten signature in black ink, consisting of a vertical line on the left and a horizontal line extending to the right, with a small loop at the end.

Minister, we are entirely supportive of the policy framework that you have released today. We are very grateful for the outstanding work that you have done to deliver a plan that is focussed and achievable.

We are eager to work in partnership with you to get it implemented, and we understand that it will take several years to do so.

We also know that you will face tough competition at the Cabinet table from other Ministers with other important priorities. We will support you in every way that we can.

We look to you as our ally and the champion for a mental health system that will truly serve the needs of Ontario's children and youth. And we ask that you and your colleagues in government remember the need to shore-up the foundations of our existing system so that we can build a better and stronger one.

Like you, we are deeply committed to ensuring that children and youth with mental health problems can achieve their fullest potential at school, at home, and in their communities.

We are ready to take on our share of the responsibility for realizing the promise of the new policy framework, and once again we thank you for your leadership in getting it this far.