

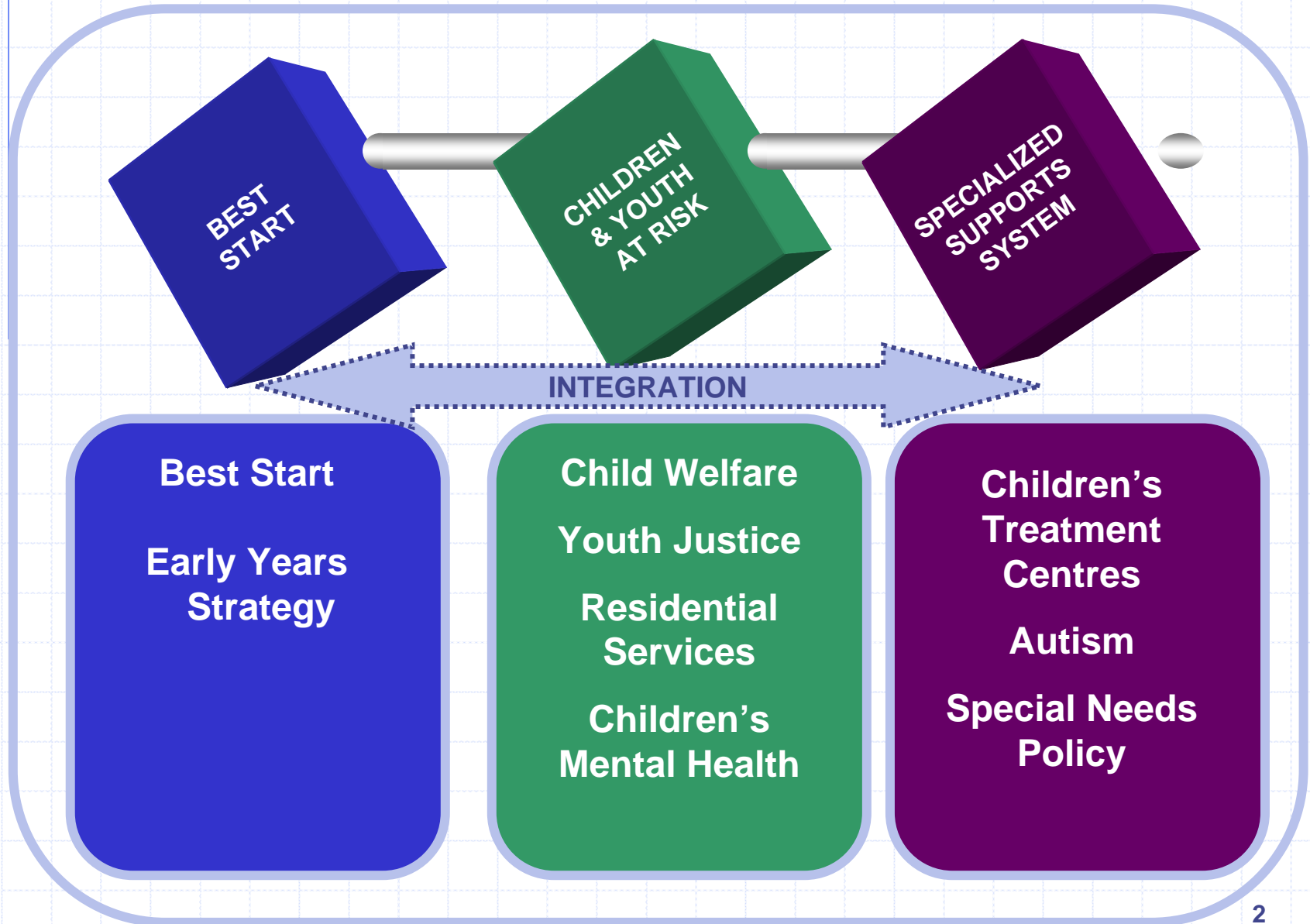
# Ontario's Policy Framework for Child and Youth Mental Health

Ministry of Children and Youth Services  
Children's Mental Health Ontario  
2006 Conference

November 27 - 28, 2006



# MCYS Transformation Agenda



# MCYS Priorities

## Best Start

- ◆ 15,000 new licensed child care spaces
- ◆ 24 hubs
- ◆ Demonstration sites operational this year:
  - Timiskaming, Hamilton, Lambton/Chatham-Kent

## Youth Opportunities

- ◆ \$28.5 million over 3 years to:
  - Expand employment/training programs;
  - Introduce new student success programs; and
  - Support hiring of outreach workers in at-risk communities
- ◆ Youth in Policing Program

## Youth Justice

- ◆ School-Based Program in 6 high schools
- ◆ \$22M annual investment in alternatives to custody programs

# MCYS Priorities

## Child Welfare

- ◆ Bill 210 and regulations, to be proclaimed November 30, 2006
- ◆ Enhanced permanency options, openness in adoption, Alternative Dispute Resolution, new complaint review process

## Residential Services

- ◆ Review completed; action plan to be released late fall
- ◆ Focus on enhancing standards, improving licensing, increased transparency/consistency

## Children with Special Needs

- ◆ \$10M in new funding provided to Ontario's children's treatment centres to provide service to 4800 more children
- ◆ Policy work underway

## Autism

- ◆ Expanding Autism Intervention Program to serve 120 more children
- ◆ Training for up to 1600 special resource teachers/Early Childhood Educators
- ◆ Capacity building – Autism Ontario Web registry of ABA service providers.

## Child and Youth Mental Health...

# Child and Youth Mental Health

## Priorities:

- ◆ Policy framework
- ◆ Data and information
- ◆ Evaluation
- ◆ Research on evidence-based practices
- ◆ Knowledge dissemination
- ◆ Capacity building; service enhancement

# Why A Policy Framework?

- ◆ Policy framework sets stage for the future:
  - Focus on all children and youth
  - Shared responsibility
  - Broad continuum of needs...health promotion, early identification, intervention, specialized treatment
  - Multi-year blueprint
  - Common understanding/language about what we want to accomplish
- ◆ Framework is **enabler** of change

# A Shared Responsibility...

With:

- ◆ Parents and children/youth:
  - active involvement in plan and “care”
  - effective advocacy and self-advocacy
  - child and family-focused
- ◆ Mental health service providers to ensure best service from childhood through adulthood
- ◆ Education, school boards, schools, professional and training bodies
- ◆ Health, hospitals, family doctors, specialists
- ◆ Academic and research organizations
- ◆ Cross-sectoral community partners

**→ *To achieve better outcomes for children and youth***

# Policy Framework - Overview

## **VISION:**

An Ontario in which child and youth mental health is recognized as a key determinant of overall health and well-being, and where children and youth grow to reach their full potential

# Policy Framework - Overview

## ◆ Principles:

- child, youth and family-centred
- community driven – services and supports should be provided as close to home as possible
- accessible
- coordinated and collaborative
- evidence-based and accountable

## ◆ Strategic Goals

- Levers for change to achieve improved outcomes

## ◆ Priority Areas for Action

- Focus for corporate/local planning

# Overview - Key Elements

**Goal 1: A child and youth mental health sector that is coordinated, collaborative and integrated at all community and government levels, creating a culture of shared responsibility**

## **Priority Areas for Action:**

1. Support enhanced integration of child and youth mental health services and supports within and across:
  - ◆ child- and youth-serving ministries
  - ◆ the child and youth mental health sector
  - ◆ broader child- and youth-serving sectors
  
2. Facilitate effective transitions at multiple points that will support continuity of services and supports for children/youth with mental health problems/illnesses, including during:
  - ◆ various developmental stages (e.g., childhood to adolescence)
  - ◆ school/education transition points (e.g., early childhood education programs to school)
  - ◆ transitions to adult mental health services and supports (e.g., adolescent mental health services to adult mental health services)
  - ◆ transitions within the continuum of needs-based services and supports (e.g., hospital-based crisis services to ongoing community-based services through a mental health agency)
  
3. Enhance the ability of children, youth and their families/caregivers to navigate child and youth mental health services and supports

# Overview - Key Elements

**Goal 2: Children, youth and their families/caregivers have access to a flexible continuum of timely and appropriate services and supports within their own cultural, environmental and community context**

## **Priority Areas for Action:**

1. Each community should facilitate access to the continuum of needs-based services and supports, with an increased focus on mental health promotion, illness prevention, early identification and early intervention
2. Improve responsiveness of the child and youth mental health sector to meet child and youth mental health needs by enhancing its ability to provide timely services and supports

# Continuum of Needs-Based Services/Supports

- ◆ Mental health focus
- ◆ Recognizes children/youth may need services at any points in the continuum, and may move in, out and across the continuum; and be at several points at the same time
- ◆ Delivery looks different in each community
- ◆ Helps identify opportunities and gaps
- ◆ Reference point to measure progress of service system development in each community
- ◆ Leverages partnerships with education, other community agencies, health, corporate sector and others
- ◆ Must consider “continuum” of family-based supports

## CONTINUUM OF NEEDS-BASED SERVICES AND SUPPORTS

<b>Target population</b>	<b>All children, youth and their families/caregivers</b>	<b>Children and youth identified as being at risk for, or who are experiencing, mental health problems that affect their functioning in some areas, such as at home, school and/or in the community</b>	<b>Children and youth who are experiencing significant mental health problems/ illnesses that affect their functioning in some areas, such as at home, school and/or in the community</b>	<b>Children and youth experiencing the most severe, complex, rare or persistent diagnosable mental illnesses that significantly impair their functioning in most areas, such as at home, school and in the community</b>
<b>Functions provided to meet the needs of each target population</b>	<b>Mental Health Promotion; Illness Prevention; Early Identification; Intervention</b>			
	<b>Screening/Referral</b>	<b>Assessment</b>	<b>Assessment</b>	<b>Assessment</b>
	<b>Social/Community Supports</b> (e.g., recreational programs; housing)	<b>Referral</b>	<b>Referral</b>	<b>Referral</b>
	<b>Public Education</b> (e.g., school-based anti-stigma programs)	<b>Emergency Response/Crisis Intervention</b> (e.g., help lines)	<b>Emergency Response/Crisis Intervention</b> (e.g., short-term crisis support)	<b>Emergency Response/Crisis Intervention</b> (e.g., mobile crisis units)
	<b>Professional Training, Support and Collaboration</b> (e.g., training primary health care professionals to identify at-risk children/youth)	<b>Family/Caregiver Education and Support</b> (e.g., provision of educational materials; advocacy services)	<b>Family/Caregiver Education and Support</b> (e.g., parenting programs/parenting groups)	<b>Family/Caregiver Education and Support</b> (e.g., in and out of home respite services; Aboriginal Elders and traditional teachers)
		<b>Intervention</b> (e.g., counselling; Aboriginal traditional teachers)	<b>Intensive Intervention/Treatment</b> (e.g., multi-professional teams in schools/agencies)	<b>Highly Specialized Treatment</b> (e.g., continued care for those with chronic illnesses; secure treatment/detention and custody)
		<b>Social/Community Supports</b> (e.g., community directory of services and programs)	<b>Social/Community Supports</b> (e.g., peer/mentoring support programs)	<b>Social/Community Supports</b> (e.g., parent support group)
		<b>Navigation/Service Coordination</b> (e.g., web-based information)	<b>Navigation/Service Coordination</b> (e.g., youth justice diversion programs)	<b>Navigation/Service Coordination</b> (e.g., access mechanisms; working with professionals in the adult mental health sector to facilitate transitions for youth)
		<b>Professional Training, Support and Collaboration</b> (e.g., consultation with other professionals)	<b>Professional Training, Support and Collaboration</b> (e.g., knowledge transfer of evidence-based practices in intervention and treatment)	<b>Professional Training, Support and Collaboration</b> (e.g., provision of training to other professionals)

# Overview - Key Elements

**Goal 3: Optimal mental health and well-being of children and youth is promoted through an enhanced understanding of, and ability to respond to, child and youth mental health needs through the provision of effective services and supports**

## **Priority Areas for Action:**

1. Engage in further stigma reduction efforts that increase community knowledge and understanding of the social determinants of health, the impacts of mental health problems/illnesses, and the importance of social inclusion of all children and youth
2. Build on the child and youth mental health knowledge base, including:
  - ◆ evidence on effectively promoting optimal mental health and well-being of children and youth
  - ◆ evidence on identifying, assessing, treating and reducing the impact of mental health problems/illnesses
  - ◆ data on the prevalence of child and youth mental health problems in Ontario
3. Enhance the ability of the community to identify and respond to the mental health needs of children and youth
4. Enhance the ability of child- and youth-serving professionals to identify and respond to the mental health needs of children and youth
5. Enhance the use of evidence-based knowledge and practice within the child and youth mental health sector to support continuous improvements in professional practice and improved outcomes for children and youth

# Overview - Key Elements

**Goal 4: A child and youth mental health sector that is accountable and well-managed**

**Priority Areas for Action:**

1. Enhance the formal system of accountability between government and the child and youth mental health sector
2. Build on outcome data to guide continuous sector improvements and to track child and youth outcomes
3. Identify and develop service standards, guidelines and outcome measures in accordance with the priorities outlined in the framework

# Roll-out of Framework – Next Steps

- ◆ Mail out to agencies and provincial organizations over the next week
- ◆ Posting on MCYS Website (week of November 27); additional copies available upon request
- ◆ Information sessions for stakeholders as required (beginning January 2007)
- ◆ Regional discussions to begin (January 2007)

# Moving Forward – What Do We Need?

## Leadership – from the sector, from the government:

### Why?

- To champion and sustain needed changes
- To think beyond current portfolio
- To engage community
- To leverage maximum benefit for children and youth

### How?

- MCYS working in partnership with the Ministries of Education, Health and Long-Term Care, Health Promotion, Training, Colleges and Universities
- Identify local champions
- Take responsibility to make change

# Moving Forward – What Do We Need?

## Useful data and information:

### Why?

- Who is waiting for service and for how long?
- Where are the service pressures?
- How effective is the service? Are children/youth getting better?
- Where should we invest?

### How?

- BCFPI and CAFAS data analyzed and used by the ministry, regional offices and agencies

## Consistent use of evidence-based practice:

### Why?

- To ensure that children/youth receive services that work
- To ensure that available funding and human resources are used most effectively

### How?

- Research grants and training awards through the Centre of Excellence
- Provision of database on evidence-based practice in mental health intervention and treatment to
- Provide training/forums through CMHO and Centre to put knowledge into practice

# Moving Forward – What Do We Need?

## Creative approaches to service delivery:

### Why?

- Each community is unique: local solutions work best
- Requires all players to work together to put needs of child first

### How?

- Leadership/champions
- Agreements/protocols with partners in different sectors
- Take advantage of local opportunities/burning platforms
- Collaborative models that leverage more  
e.g., telepsychiatry services, single points of access

# Moving Forward...Medium Term

- ◆ Ministry will work with community and government partners to:
  - Analyze and use data to support system and investment planning
  - Identify opportunities for better coordination and service
  - Disseminate examples of excellence across the province
  - Develop outcome measures for the province and measure performance
  - Develop service standards

# How Can We Support You?

- ◆ What do you need from the Ministry?
  - regional offices?
  - policy, operations, corporate?
- ◆ What do you need from CMHO?
- ◆ What do you need from Centre of Excellence?
- ◆ What do you need from your colleagues?

# How Will We Know We Have Achieved Our Goals?

- ◆ No “shame and blame”
- ◆ Community players are mobilized to identify potential mental health problems and know where to turn for help
- ◆ Services are focused on holistic needs of child/youth and family and move beyond any single paradigm
- ◆ Children and youth get the right service at the right time, for the right duration
- ◆ Services/supports are evidence-based and “work”
- ◆ Knowledge about what works is shared and used to improve services for children/youth
- ◆ Providers work in an integrated way to make the system work for children/youth and their families/caregivers
- ◆ Ministries and levels of government work together for common agenda for children/youth
- ◆ Communities have capacity to address needs