

Toronto Lead Agency – East Metro Youth Services
2015/16 Community Mental Health Plan for Children and Youth

Submitted to the Ministry of Children and Youth Services

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SECTION A – EXECUTIVE SUMMARY

As requested by MCYS, EMYS has completed the Community Mental Health Plan (CMHP) using the template for lead agencies identified in August 2014. The Phase 1 agencies completed an initial CMHP in March 2015 and some requirements listed in this template build on the first CMHP. As EMYS was named a lead agency in February 2015, this document represents our first CMHP. There are aspects of this template that cannot be completed until next fiscal year when we will build on the findings and recommendations of this first CMHP.

Context

Year 1 as Toronto Lead Agency has been a busy and exciting time for EMYS. The size and scope of the City of Toronto, the number of core service agencies (33) for which we are responsible and the range and number of external stakeholders with whom the Lead Agency needs to build relationships necessitated priority-setting to ensure our ability to demonstrate progress on both the Core Services Delivery Plan (CSDP) and the CMHP. It was determined that the majority of our efforts in year 1 should be dedicated to launching the Collective Impact process that provides the framework for the needed development of the Toronto service system with our MCYS-funded agencies. Without a foundation and understanding of the Toronto service landscape we recognized it would be difficult to effectively begin discussions with the broader network of community partners.

Although the focus of the six year 1 working groups (**Service Mapping; Knowledge, Information, Data Systems and Performance Measurement; Centralized Point of Access; Communications; French Language Services and Residential Services**) was on developing our first Core Services Delivery Plan, EMYS has engaged in many planning and research activities in support of community mental health planning that will underpin a more comprehensive plan in year 2.

A significant challenge in Toronto is the sheer number of sector partners with whom the Lead Agency must develop relationships in order to build a CMHP inclusive of all the players who are involved in child and youth mental health. This includes **five LHINS, 34 hospitals, 24 Community Health Centres, 23 Early Years Centres, four school boards, four child welfare agencies and the City of Toronto which has multiple entry points into the system**. Planning must also take place to ensure francophone and Aboriginal needs are included. There are potentially hundreds of planning tables, advisory mechanisms, working groups and information-sharing bodies. The Lead Agency must determine not only those forums where it should have a presence, but also what structures may need to be established to ensure we can meet our goals.

A Diverse City

In addition to the many sector partnerships we must forge, it is imperative that youth and family engagement that acknowledges and works effectively with Toronto's diverse communities be embedded our work. Over the past year, the Lead Agency has met with representatives of a number of these communities who have cautioned against a "one size fits all" consultation approach and provided excellent advice on the need for thoughtful approaches that will see this important work be an ongoing priority in our development and long-term role as Lead Agency.

According to the 2011 census, 312,265 young people in Toronto aged 0 – 18 identify as belonging to a visible minority. That number represents 60.3 percent of our child and youth population, almost twice as high as the provincial share of 31.7 percent.

There are over 92,000 immigrant children in Toronto. This equals 17.8 percent of the child and youth population, again, a share nearly twice as high as the provincial average and highest among MCYS Regions. And finally, immigrants who have arrived in the past 10 years make up almost 15 percent of the child and youth population in Toronto. As such, working with our core service providers (CSPs), the Lead Agency has been heavily involved in the province's response to the recent arrival of Syrian refugees this past year.



Claire Fainer, Executive Director, EMYS Lead Agency, addresses the challenging volume of broader sector partners during one of the many research activities in support of more comprehensive community mental health planning

The Process

Early in year 1, the Lead Agency decided to adopt the Collective Impact Model to provide a framework for the transformation of the Toronto system. Implementing a Collective Impact approach requires a strong ‘backbone’ organization and this is the role EMYS fills as Lead Agency. As the backbone organization, the Lead Agency maintains the overall strategic coherence, coordinates and manages day-to-day operations and implementation of work covering all aspects of the CMHP.

The Collective Impact approach will guide the continued development of the CMHP. It is equally applicable to tackling a complex social challenge with like-minded sector partners as it is to working with related sectors:

***Collective Impact** is the commitment of a group of actors from different sectors to a common agenda for solving a specific social problem, using a structured form of collaboration.*

- Stanford Social Innovation Review (2011)

A number of the six core services working groups established in support of developing the CSDP included members from other partner sectors including health care, developmental services, early years, Toronto Public Health and the Ontario Centre of Excellence for Child and Youth Mental Health. The involvement of these individuals has broadened the discussion in working groups and set a model for increased involvement by other sectors in some of the core services work as well as community mental health planning.

In addition to overseeing Lead Agency working groups, EMYS also participated in a number of broader sector tables:

Latency Age Work Group: This multi-sectoral work group includes representatives of organizations serving latency age children including child and youth mental health agencies, education, child welfare, health/hospitals, crisis services and French language services.

Syrian Refugee Crisis: The Lead Agency represented the community-based child and youth mental health sector on this cross-government/cross-sector province-wide response.

Health Care/MCYS/Lead Agency Quarterly Meeting: The Lead Agency meets regularly with representatives from MCYS, CAMH and Hospital for Sick Children to share information and discuss opportunities to collaborate.

Toronto Central LHIN Children and Youth Advisory Table: The composition of this group reflects a diversity of perspectives, skills and experience from across the continuum of care and non-health-care sectors.

Developmental work on the CMHP has not been confined to participation on multi-sectoral tables. EMYS began receiving calls and e-mails immediately following the agency’s appointment as Lead Agency. Over the course of year 1 operations, Executive Director Claire Fainer held **132 meetings with sectors other than child and youth mental health core service providers** (see below). These discussions, as well as several speaking opportunities to other sectors, have informed our first report and are the foundation for strong focus on building this work in year 2.

Total Number of Meetings by Sector	
Child and Youth Mental Health	56
Mental Health	4
Health	27
Education	7
Aboriginal	2
Youth Justice	3
Other	19
Government	31
Municipal government	3
Diversity	1
Lead Agency Consortium/Partnership	32
Private Sector	1
Child Welfare	2

The Communications working group also conducted a dedicated Community Mental Health Planning Exercise and produced a research document *Moving on Mental Health – Toronto Community Engagement Planning and Recommendations* that will inform engagement with partner sectors, youth, families and diverse communities in year 2.

To summarize, this initial Community Mental Health Plan of the Toronto Lead Agency lays the groundwork for a complex and multi-layered process moving forward. This plan will continue to be informed by the ongoing work with the 33 CSPs to optimize core services delivery will ensure alignment with community mental health providers and the broad array of partners with a stake in the success of child and youth mental health sector transformation.

SECTION B – ENGAGEMENT SUMMARY

Engagement At A Glance

As a service agency, East Metro Youth Services has built many collaborations and partnerships, engaging system partners in designing and delivering programs for children and youth. Upon taking on the responsibilities associated with the Lead Agency role in Toronto, the network of

system partners expanded almost immediately as interest in Moving on Mental Health in Toronto grew with other organizations, agencies and ministries. While the primary focus of engagement for the development of the Community Mental Health and Core Service Delivery Plans has been on strengthening the relationships with the core service providers and immediate sector partners, the Lead Agency has also been engaged in an information-sharing and preliminary network strategy.

EMYS has added a Lead Agency focus to its website. We share our communications products with other sector partners and will be expanding distribution of our newsletter in year 2 both through active promotion and adding a subscription option. Currently we rely on our network of agencies and partners to forward our communications, but planned activities such as adding subscription and news alert options to our communications vehicles will increase our reach.

In addition to the 132 meetings mentioned above with other sectors, the Executive Director and other senior staff have been invited to speak at a number of events that have included broader sector partners including frontline workers from health, education and social services. Audiences have ranged from 20-250 participants. For example, Executive Director Claire Fainer presented at a public policy class at the University of Toronto in late 2015. (See **Appendix 1** for a copy of the presentation)

Centre for Addiction and Mental Health (CAMH), Hospital for Sick Children (Sick Kids) and Toronto Central LHIN

A number of high profile organizations in the primary care system have been very interested in the work of the lead agency and initiated many discussions and invitations to participate in event.

There is a high level of interest in building relationships and exploring opportunities for collaboration during year 1.

- Meetings with senior leadership at the Toronto Central LHIN on several occasions to learn about their evolution and discuss the development of their data and performance management systems.
- Meeting with Medical Officer of Health, City of Toronto, and senior officials
- Various meetings and contacts with representatives of MCYS, CAMH, Hospital for Sick Children, U of T Department of Psychiatry to share information and discuss opportunities to collaborate; such as strengthening access to telepsychiatry, transitional age care and so on
- Participation in the May 2015 [Developing Mental Health Pathways and Partnerships in Toronto for Children and Youth – Conference](#) co-hosted by the McCain Centre Child, Youth and Family Mental Health and the University of Toronto, Fraser Mustard Centre for Human Development. Executive Director Claire Fainer was a keynote speaker at this conference attended by over 200 health care professionals and CYMH agencies.

City of Toronto

- A number of meetings have been held with City of Toronto staff including Harvey Low, Heath Priston of the Social Research and Analysis Division and Chris Brillinger, Executive Director, Social Planning and Finance. As lead agency EMYS has participated in the Child and Family Network Strategic Planning Day and attended the Early Intervention and Identification Sub-Committee. The Communications Working Group consulted with engagement specialists at the City to support development of their community engagement recommendations.
- Sara Koke, Toronto Public Health sits on the Centralized Point of Access Working Group.
- Heath Priston presented an overview of Toronto demographics at the first meeting of Core Services Providers in June 2015 and the lead agency is in discussions regarding future collaborations.

Education

- Several meetings with representatives of Toronto Catholic District School Board and Toronto District School Board to discuss relationships with Toronto CSPs and to improve understanding of various mental health initiatives within schools – both provincial government and board supported.

Planning For Year 2

Engagement: Children, Youth, Families

The size and diversity of Toronto necessitates a considered, thoughtful and intentional approach to engagement. EMYS has intentionally devoted much time in year 1 to discussing and researching how to approach meaningful engagement in such a culturally, racially, linguistically, income and geographically diverse city. Engagement with the many communities identified in year 1 must become a systematic, embedded activity in all of our work both in the early stages of Lead Agency development and longer term as the Toronto service system redefines itself and matures.

It was for this reason that the Communications working group was tasked with researching and producing a report that would consider how to meaningfully engage the many perspectives of Toronto young people and their families. The working group produced a report and recommendations that provide a solid footing for developing a truly responsive approach to engagement in year 2 (Please see **Appendix 2**)

Engagement: Diverse Communities

During year 1 the lead agency met with organizations representing a number of Toronto communities that represent some of the largest ethnic populations in Toronto, including Margaret Parsons from the African Canadian Legal Clinic as well as Helen Poon Hong and Bonnie Wong from Hong Fook, a mental health provider serving the adult Chinese community.

The leadership of these organizations emphasized the importance of individual consultations with different ethnic communities. In the case of the Black community, it was suggested that different conversations would occur in communities with a Caribbean background from those who have recently come from Africa. This was further reinforced by Lise Marie Baudry, Executive Director of Centre francophone de Toronto, who shared demographic information indicating that the largest number of new French speakers in Toronto originates from African countries.

Engagement with Aboriginal People

Aboriginal self-determination is a key principle honoured by the Lead Agency. The Network of Aboriginal providers is working to develop a plan which addresses their unique challenges and strengths. Upon assuming the role of Lead Agency for Toronto, EMYS reached out to engage Toronto's Aboriginal providers, inform them of EMYS's new role and to learn from them about how their work could align. In May 2015 Claire Fainer, EMYS Executive Director made a presentation to the Aboriginal Network about MOMH and EMYS's new role of Lead Agency, inviting them to connect with the Lead Agency as their collective action progressed. In February 2016, the Lead Agency met with MCYS staff working with the Aboriginal Network to provide an update and to explore options for further engagement.

The Aboriginal Service Providers belonging to the Aboriginal Network are:

- Aboriginal Legal Services of Toronto
- Anishnawbe Health Toronto
- Native Canadian Centre of Toronto
- Native Child and Family Services of Toronto
- Native Women's Resource Centre
- Toronto Council Fire Native Cultural Centre

The lead agency will continue to work with Aboriginal partners and with MCYS to ensure their involvement in community mental health planning and alignment with the MCYS Aboriginal youth strategy under development.

Participation On Multi-Sectoral Tables, Networks and Committees

Latency Age Work Group

The Latency Age Work Group is a multi-sectoral work group which includes representatives of organizations serving latency age children in child and youth mental health agencies, education, child welfare, health/hospitals, crisis services and French language services. Representatives of the Lead Agency and MCYS are standing members of this committee. Latency Age Work Group Terms of Reference can be found in **Appendix 3** and the membership list can be found in **Appendix 4**.

The purpose of this work group is to define a vision and key components/attributes of an effective mental health service delivery system for latency age children living in Toronto. Additionally, the

Latency Age Work Group will provide advice and recommendations to the Lead Agency regarding the key components of an effective community mental health plan and service delivery system for latency age children living in Toronto.

During the February 2016 meeting, members of the work group extended the mandate to June 2016 to allow for further refinement of the summary report identifying the various issues, needs, gaps and barriers to service and associated recommendations. Key areas being explored by the group include:

System of care

- legislation
- diversity and equity
- funding models
- professional development
- centralized information
- service availability and accessibility
- service coordination/case management
- service navigation

Transition needs of latency age children

- continuity of care
- transition to and from programs and ministries serving latency age
- admission processes
- discharge planning

Specialized supports

- assessment and consultation
- crisis services
- specialized counselling
- in-home intensive
- respite services

Syrian refugees

The influx of Syrian Refugees was a rapidly emerging issue during the autumn of 2015 and it will continue to have a far-reaching impact at the local service level and will be integrated into our evolving CMHP.

The Health Working Group of the Special Advisory Table on Syrian Resettlement is jointly chaired by Rachel Kampus, Assistant Deputy Minister, Service Delivery Division, MCYS and Roselle Martino, Assistant Deputy Minister, Health Equity Branch, Ministry of Health and Long Term Care and includes many other health organizations (e.g. CMHO, CAMH, CMHA, Ontario College of

Family Physicians, Association of Ontario Health Centres). Lead Agency involvement from the beginning has been with the expectation that Toronto would be one of the prime destinations where both privately-sponsored and government-sponsored Syrian newcomers would continue to arrive and settle.

As part of the five-point response outlined by MCYS' Refugee Settlement Support Plan in January 2016, the Ministry has stated it is "expanding the Youth Outreach Worker Program to build trusting relationships with refugee youth. East Metro Youth Services will lead an initial expansion of workers to support immediate arrivals." To date, there has been no confirmation of exactly how this will roll out. While there might be some immediate interventions and treatments, the prediction is that increased support for infants, children and youth mental health needs will be required over a longer period of three to five years.

One observation in Lead Agency conversations with local settlement service providers is that families are larger than initially expected. For example, families of 10 or 12 are arriving. The statistics bear out that many of these newcomers are very young (51 percent are under 17 years of age), and that the parents themselves are young.

The Lead Agency has been monitoring reports and presentations from leading settlement organizations such as OCASI, COSTI and Lifeline Syria, which are emphasizing that currently the lack of housing is one of the biggest challenges facing the incoming Syrians. In Toronto, stories abound that when still billeted in hotels, newcomers are looking for activities. A solution for some of the school-aged children was found through TDSB, by making it possible for children still in temporary housing to attend school and access the Settlement Workers in Schools Program (SWIS). The Lead Agency is now connected with many non-traditional cymh stakeholders throughout the city as a result of the influx of Syrian newcomers.

Throughout the period of November 2015 to March 2016, there were several opportunities for the Lead Agency to connect with the community, including City of Toronto Information Fairs for sponsors and agencies serving newcomers (December 8, 2015 and January 21, 2016), and also to become more involved with two of four Local Immigration Partnerships (LIPs).

As a result, the Lead Agency has: liaised with the Toronto Catholic District School Board on common interests; attended the Refugee Mental Health Symposium sponsored by CAMH and Toronto Central LHIN (February 10) and attended the Wisdom to Action on Young Refugees event (March 2). These forums have enabled the Lead Agency to maintain active involvement in the broader community with other stakeholders. These activities have expanded the capacity of the Lead Agency to link the child and youth mental health sector with other new and potential partners to better address the needs of vulnerable populations.

SECTION C – SECTOR PARTNER SERVICES SUMMARY

The lead agency was asked to sit on number of multi-sector planning tables during year 1 and representation at these tables will continue in year 2.

Community Mental Health Mapping Exercise

In June 2015, core service agencies were surveyed and asked about the key task forces and planning committees in which they were involved. This exercise also included identified priority tables that the core services community advised could be critical in creating improved hand-offs and integrated pathways of care for clients.

A short-list of strategic planning tables was created in November 2015. The Communications working group then further refined the list in January 2016. Based on the January 2016 discussion, the team created a broader list of key stakeholders and contacts to round out the community stakeholder or network map which is detailed in the ensuing table.

The identification of existing programs (including who is delivering them, geographic coverage, age group served, specific populations, the services target, etc.) as well as an analysis of the pathways will be a key component of the 2016/17 work.

This exercise was focused on creating a preliminary map of the key partners in Toronto to help the core services agencies plan and create clear and integrated pathways of care for clients.

The Communications working group has identified, through the multi-faceted exercises and discussions held since June 2015, organizations, contacts and planning tables/initiatives which represent the key partnerships, influencers and tables that will help create pathways of care and continuity of hand-offs to ensure every client receives the best possible service.

Priority sectors

- education
- youth justice
- health care
- child welfare
- newcomer/settlement
- cultural and community groups – Aboriginal, African-, Asian-Canadians, LGBTQ2
- parent and family organizations
- young engagement groups
- municipal government divisions and initiatives
- special needs
- complex special needs

- coordinated rehab and speech services

Examples Identified by the Communications Working Group:

Education

School Boards

Organization	Planning Tables or Key Initiatives	Year 1 Contact
Toronto District School Board	Section 23 programs Mental Health Leaders and the Mental Health Leadership team Student Success initiatives	Yes
Toronto Catholic District School Board		Yes
French School Board		Yes
The Ontario Public School Boards' Association		Yes

Education

Organization	Planning Tables or Key Initiatives	Year 1 Contact
Elementary Teachers Federation of Ontario		
Ontario College of Teachers		Yes

Youth Justice

Organization	Planning Tables or Key Initiatives	Year 1 Contact
Courts, Probation and Parole offices	Youth Justice Collaborative	
Youth Justice Ontario		
Toronto Police Services		

Healthcare

Hospitals

Organization	Planning Tables or Key Initiatives	Year 1 Contact
Sunnybrook	Family Navigation Network	Yes
Ontario Shores Centre for Mental Health Sciences (Ontario Shores)		
Scarborough General	Emergency Mental Health Beds Planning Table	
CAMH	Emergency Mental Health Beds Planning Table	Yes
Hospital for Sick Children	Infant Mental Health Promotion (IMHP)	Yes
Humber	Emergency Mental Health Beds Planning Table	Yes
Rouge Valley Centenary	Emergency Mental Health Beds Planning Table	Yes
St Joseph's		
St. Michael's		

Family Physicians

Organization	Planning Tables or Key Initiatives	Year 1 Contact
Ontario College of Family Physicians		
Ontario Association of Pediaticians		
College of Family Physicians of Canada		
Ontario Medical Association		

Healthcare associations and organizations

Organization	Planning Tables or Key Initiatives	Year 1 Contact
5 Local Health Integration Networks (LHIN)	Early Intervention Network	
Children's Mental Health Ontario (CMHO)	New Mentality	

Canadian Mental Health Association (CMHA)	Human Services and Justice Coordinating Committee	
Rainbow Health Ontario		

Child Welfare

Organization	Planning Tables or Key Initiatives	Year 1 Contact
Children's Aid Society of Metro Toronto (CAST)		Yes
Office of the Provincial Advocate for Children and Youth ("Advocate's Office")		
Catholic Children's Aid Society (CCAS)		Yes
Native Child and Family Services		Yes

Aboriginal

Organization	Planning Tables or Key Initiatives	Year 1 Contact
Native Child and Family Services		Yes
Toronto Aboriginal Support Services Council		Yes
Native Women's Resource Centre		Yes
Aboriginal Children's Mental Health Network	Working to provide coordinated communication between lead agency and Aboriginal service providers	Yes

Key Cultural Groups

Organization	Audience	Year 1 Contact
African Canadian Legal Clinic		Yes
Hong Fook		Yes
Filipino Canadian Youth Alliance/ Ugnayan ng Kabataang Pilipino sa Canada—Ontario		Yes
Midayanta Community Services		Yes

Newcomer/Settlement

Organization	Planning Tables or Key Initiatives	Year 1 Contact
YWCA	YWCA JUMP	Yes
YMCA	Employment and Immigrant services	Yes
Ontario Council of Agencies Serving Immigrants (OCASI)	Open Dialogue New Youth	Yes
COSTI Immigrant Services	Family & Mental Health Program	Yes

Family & Child Care Organizations

Organization	Planning Tables or Key Initiatives	Year 1 Contact
Toronto Child and Family Network	6 Planning Committees Early Learning and Care Family Support Early Identification and Intervention Aboriginal Advisory and Planning Health Réseau régional de langue française	Yes
Child Care Service Providers		Yes

Family Association for Mental Health Everywhere (FAME)		
Parents for Children's Mental Health		Yes
Canadian Family Advisory Network (CFAN)		

Youth Engagement Groups – No Planning Tables or Key Initiatives Yet Identified

Organization	Year 1 Contact
POV 3rd Street	Yes
Delisle Youth Services	
Eva's Place	
Toronto Public Library	
Youthlink	
Yorktown Child and Family Services	
For Youth Initiative	
Leave Out Violence (LOV)	
Supporting Our Youth (SOY)	
LOFT Community Services	
Sketch	

Municipal Government

Organization	Planning Tables or Key Initiatives	Year 1 Contact
Toronto Public Health	Toronto Youth Suicide Prevention School-Aged Children	Yes
Toronto Children's Service Staff		
Neighbourhood		Yes

Improvement Initiative		
Multiple City of Toronto Stakeholders	Middle Years Matter Coalition	Yes
Toronto Community Housing		

SECTION D – LOCAL CHILD AND YOUTH MENTAL HEALTH COMMUNITY PLANNING MECHANISMS

Research in year 1 has revealed numerous local child and youth mental health community planning mechanisms in Toronto. These planning mechanisms are led by numerous partner sectors.

It is the intention of the Toronto lead agency to carry out a comprehensive network mapping exercise in year 2 to understand various linkages, potential mandate overlap, and shared priorities of various tables. We do not intend to create another set of new structures. Rather, we will determine which tables and planning mechanisms of key sectors are most necessary to be members of, or aligned with as we move forward in developing a coordinated system of access and care in Toronto between and through all sectors providing various aspects of child and youth mental health.

The goal of this phase of engagement is to inform existing planning tables about Moving on Mental Health and the Lead Agency and to build the foundation for future alignment, collaboration and potential to strengthen these relationships as the Core Service Delivery and Community Mental Health Plans develop. Meetings have primarily been at the request of other sector partners as the key focus in year one was on the Core Services Delivery Plan. However many agencies, organizations and City of Toronto representatives have requested meetings and every effort has been made to accommodate these requests. These meetings (**Appendix 5**) have been supplemented through engagement by the Lead Agency Director and Project Managers. Additionally, the priority planning tables have been identified as targets for the next phase of engagement.

Priority planning tables

The following were planning tables identified as priorities for the Moving on Mental Health collective:

- National Alliance for Children and Youth
- City of Toronto, Child and Family Advisory Network
- Early Learning and Care, Family Supports, Early Identification and Intervention, Steering Committee

- City of Toronto, Middle Childhood Strategy Workgroup
- Common Table for Childhood Development and Care Ontario
- Infant Mental Health Promotion Steering Committee - Health care
- Middle Years Matters Coalition Toronto - Social Services
- FAME - Families for Mental Health Everywhere - Parents
- Toronto Central LHIN - Early Intervention Network - Health care
- Toronto Public Health - Youth Suicide Prevention - Health care
- Section 23 Collaborations (define) - Education
- School-Aged Mental Health Network - Education
- Youth Mental Health Planning - Transitional Age Youth
- Emergency Mental Health Beds Planning Table - Health care
- Supervised Alternative Learning (SAL) - Education
- Youth Justice Collaborative - Justice
- Parents for Children's Mental Health - Parents
- Family Navigation Network - Health care
- Child and Family Network - Municipal/community planning
- Child Welfare

SECTION E – PRIORITY IDENTIFICATION

Note: Phase 1 lead agencies were not required to identify priorities in their year 1 CMHP. Priority identification, including work plans, will be developed in the year 2 CMHP.

SECTION F – FRENCH LANGUAGE SYSTEM PARTNERS

Note: Plans in this area are not required in the year 1 CMHP. However, the Lead Agency has included the work that is being led by the Lead Agency's French Language Services (FLS) working group to demonstrate progress in this area. (See **Appendix 6** for the French Language Services working group Mandate Letter)

The Collective Impact Model adopted by the Lead Agency led to the creation of four initial working groups which were later supplemented with two more working groups. At least one member of each of the working groups is from Centre francophone.

French language service was included in the Service Mapping survey and reflects a snapshot of 2014/15 with 12 agencies identifying that they provide service in French for some core services. More detailed work needs to be done to assess needs and availability of specific services and resources especially in light of the compliance reporting required by MCYS in relation to "Active Offer" and the 3 Clauses.

The Lead Agency's FLS working group will carry out activities to inform this work through the ongoing engagement of Centre francophone.

The FLS working group was established in December 2015 with a mandate to:

- develop an inventory of French Language Services currently available across the seven core MCYS funded services in Toronto.
- enhance the capacity of core service agencies to deliver French Language Services to target populations.
- disseminate Lead Agency materials in French.
- determine the availability of assistance from MCYS to help agencies in Toronto understand current French language service delivery capabilities and further enhance capacity to deliver services in French.
- develop a work plan for 2016/17 to address these priorities.

This group is set up to respond to the expectation that core service agencies will provide FLS as third parties on behalf of MCYS. The group of agencies in this active offer of French services is abiding by the terms of reference to ensure that they all share a standard of practice that meets the guidelines issued by MCYS and also support all other agencies to facilitate seamless referrals to services in French for children and youth. The intention is to also recruit experts from all French school boards in Toronto to join this working group.

Given the large number of agencies involved in the project, it was decided that the FLS working group will initially build on the capacity of agencies already providing FLS, either directly or indirectly. The other agencies will be expected to adopt a standard referral system ensuring infants, children, youth and families needing support in French are directed to the appropriate services in a timely and respectful manner.

Appendices

Appendix 1 University of Toronto presentation

Appendix 2 Community Engagement Planning Recommendations

Appendix 3 Latency Age Work Group Terms of Reference

Appendix 4 Latency Age Work Group Membership List

Appendix 5 List of meetings attended by Claire Fainer, EMYS Executive Director

Appendix 6 French Language Services working group Mandate Letter