



## **SERVICE PLAN**

**2017-2018**

## Table of Contents

1. <a href="#">Introduction and Organizational Overview</a> .....	pg.2
2. <a href="#">Review of the Strategic Implementation Objectives</a> .....	pg.6
3. Client and Participant Statistics- to be added post March 31st 2017	
4. <a href="#">Quality Assurance</a> .....	pg.7
5. <a href="#">Risk Management Plan</a> .....	pg.8
6. <a href="#">Staff Training and Development Plan</a> .....	pg.10
7. <a href="#">List of Appendices Referred to in Service Plan</a> .....	pg.16

## Organizational Overview

As we had anticipated this time last year, EMYS has continued to face and to tackle the challenges accompanying the transformation we are leading vis-à-vis the government's Moving on Mental Health Policy Initiative, as well as the transformation we are undertaking within the agency itself.

Organizational transformation has been characterized as 'a process of profound and radical change that orients an organization in a new direction and takes it to an entirely different level of effectiveness.' And at the writing of this Service Plan every level of our organization is in the throes of change.

To ready ourselves to further our lead agency capacity development one of our first priorities has been to effect change at a governance level. This past year our work with the Institute on Governance (IOG) has proceeded through an initial discovery phase and included an extensive review of potential models that might meet our lead agency requirements. That we have accomplished this much is to be admired owing to the totally unforeseen modifications which MCYS proposed to the lead agency role and associated responsibilities in August 2016. This modification which sees MCYS retaining its contractual relationship with core service providers came as an unwelcome surprise for lead agencies across the province as it was perceived as having the potential to compromise the leverage that lead agencies might require to affect the service transformation that is the heart and soul of Moving on Mental Health. [Appendix 1]

Governance

In response, the lead agency consortium to include EMYS has worked long and hard to co create a revised roles and responsibilities document that will align with recent MCYS policy and process revisions, yet retain the essential integrity of the lead agency model as originally envisioned. As we begin the new fiscal year the EMYS Board of Directors will be deliberating as to if and how this revised model can work in Toronto wherein EMYS is contending with 30 proudly independent core service providers. Towards this end, we will apply the Collective Impact approach that has worked so well for us to date such that the next phase of IOG work will consist of stakeholder engagement opportunities. They will allow us to test out the receptivity of our core service provider community to continue to commit to service system development while concomitantly informing the development of a new governance model which we hope to have in place by the fall of 2017. The EMYS Board of Directors will also work through the consortium to consider the regulations to be developed as per recent amendments to the Child and Family Service Act with respect to lead agency roles and responsibilities, as well evaluate the extent of alignment between those roles and responsibilities and the system management funding to be directed to EMYS at lead agency maturity. [Appendix 2]

While the lead agency roles and responsibilities were and are being renegotiated at a provincial level, the agency has continued its work with respect to infrastructure development. Undoubtedly one of the benefits of achieving lead agency status has been the opportunity it has afforded the organization to enhance and further much needed business capacities. We are indeed fortunate to have recruited a Senior Director of Corporate Services, a Director of Data Management and Quality Assurance, a Manager of Communications and enhanced IT support. Similarly, the knowledge and expertise of lead agency project management staff offer us invaluable planning capability. Thus, while

Infrastructure

acknowledging that even positive change can be difficult, especially when it comes to IT related issues, we have already experienced the benefits of enhanced capacities with respect to financial forecasting, data analytics, outcome evaluation, public relations, telecommunications and research.

The establishment of a more robust corporate services capacity has had implications for our senior director team, but it must also be recognized that every team within the organization has experienced staff change; we have seen veteran staff retire, front line staff move into managerial roles and we have welcomed a group of new staff who have already invigorated and renewed the EMYS community. In short, we have managed to enhance senior leadership, to provide progressive opportunities for existing stellar staff to grow and to recruit new staff who can bring new perspective and ‘the latest’ expertise to further our work.

One of the highlights of 2016-2017 and indeed one of EMYS’ major accomplishments was the creation of a new 5-year strategic plan we which have operationalized for the purpose of organizing our annual service plan reports. As such, this 2017-2018 service plan provides us with our first opportunity to prepare and present an annual overview of our work to date and our future plans relative to the intent of the 7 strategic priorities we had articulated in our strategic plan. As you continue through this document you will note and appreciate the progress we have made even in these early days. The only priority that has not been pursued to date is that related to Strategic Alignment - ‘... Getting critical resource decisions right- allocating time, talent and dollars to the activities that have the greatest impact.’

There is some irony in having chosen to side step the alignment issue thus far as the longstanding need to rationalize the myriad of diverse programs we operate was one of the most compelling reasons that we undertook our Intended Impact and Strategic Clarity work in the first place. The reasoning behind postponement ostensibly was related to the belief that there were big resource decisions to be made in related service sectors and/or by our funders that might weigh heavily on our decisions about future agency investments in every program currently offered. However, a fresh look at the imperative to ‘Examine strategic alignment to optimize impact’ recently undertaken has led to conversations that suggest other motives are in play.

Strategic  
Alignment

During recent management team meetings, which we organized to undertake our annual ‘year in review’ conversations the notion of how and when and even if to proceed with a strategic alignment exercise was passionately debated. The lack of data to inform good decision making was cited as a reason for further postponement. Others noted that it is difficult to consider the topic unemotionally if staff jobs are on the line. Some asked whether we could imagine the agency without all our current program offerings. Still others wondered about the very probity of defining limitations with respect to acceptable expressions of child and youth mental health work. There was also the expressed fear that we might be closing doors to service pathways on behalf of our most marginalized youth. Then there was the argument that the future is essentially unknowable and that keeping all our options open was and will continue to be the smart strategy. Further, it was posited that our ‘lead agency status’ along several domains is the direct result of the fact that the organization has always intentionally sustained those conditions which foster advanced and inventive program development which in turn positions us

to take advantage of new funding opportunities that come along. In other words, in one way or another EMYS staff expressed the anxiety that in the pursuit of alignment, the spirit of innovation and creativity that has and continues to inspire us will be compromised.

Throughout the debate that ensued reference was made to EMYS as an incubator, a space where new models and new approaches related to community based child and youth mental health service delivery could be inspired, modelled, tested and refined. And there have been several examples of just that during the past fiscal year wherein EMYS rolled out several high-profile programs across the city and indeed the province that originated in our local agency- What's Up Walk-in Clinic, Urban Tele Mental Health, YOW Community of Practice, the Syrian Refugee Youth Outreach Worker Initiative, ED pathways project. These examples not only confirm the effectiveness of the 'incubator' argument, but strongly suggests that we exploit it further.

Our strategic plan includes two impact statements and two theories of change as per Lead Agency and Service Agency, but the strategic directions that comprise our plan are shared and very much integrated. In fact, over the course of the past year the interdependency between EMYS lead agency and EMYS service agency has deepened. We are well reminded that there is only one Agency-East Metro Youth Services and that every EMYS staff is a system development leader if for no other reason that they inform our thinking about the efficacy of the services delivered throughout the city and the province and thus contribute to our planning efforts. We are proof positive that embedding the planning function in a service agency increases the likelihood that those plans can be realized on the ground. And as we move forward in 2017-2018 we are committed to realigning our organizational structure if necessary to take best advantage of this rather unique opportunity to inform theory via practice and vice versa. One Agency

We are reminded that as Lead Agency for Child and Youth Mental Health, the YOW East Quadrant Network and the YOW Provincial Database and Community of Practice the focus of our work has been to lead our respective partners in the very alignment work with which we are struggling. We are also reminded of our responsibility to role model, to steward system development and ongoing system management and of our capacity to leverage the interdependency between our planning and our practice functions. Thus, the agency has decided to move ahead with strategic alignment in the coming fiscal year and commit to adopting a lean experimentation approach that will see us will carry out such an exercise beginning with one of our community programs. [ Appendix 3]

In summary, EMYS is now in the thick of managing transformational change as an agency and of making transformational change in our various roles as systems leaders. Each present considerable challenge about our change management capacities and capabilities. We recognize however the extraordinary opportunities afforded to us in recent years so it seems inevitable that we must take advantage of this 'moment in time'. This means that throughout 2017-2018 we must not only protect, but commit ourselves to enhancing our instinctive organizational predisposition for bold innovation and thus role model what this looks like for others. In short we must hold true to the very essence of EMYS' definition of system leadership.

## Review of the Strategic Implementation Objectives

Attached in Appendix 4 is a description of all the activities from the last fiscal year, as well as goals for the upcoming year. The strategic implementation objectives are based on the seven priorities defined in our 2016-2021 Strategic Plan, which include: Family Engagement, Case Management, YOW Leadership, Service Sector Partnerships, Strategic Alignment, Performance Management and Information Management and Shared services.

Each priority was assigned a lead Director and relevant Program Managers. The activities, for the most part, outline the goals for the upcoming year and include items such as:

- Developing a family engagement framework
- Evaluating the implication of case management responsibilities on clinical case loads
- To further develop our Provincial YOW leadership role through the community of practice to include developing a theory of change and impact statement for the program
- Launch tele-psychiatry as one of the efforts to advance pathways to community and hospital services
- Moving forward on accreditation and developing Sharepoint as a platform to facilitate this process
- The development of a comprehensive Disaster Recovery Plan (DRP) and Business Continuity Plan (BCP)

## Quality Assurance

As described in the mid-year review, EMYS's Quality Assurance(QA) plan reflects on the strategic priorities of EMYS and serves as the enabler to provide outstanding service to every client, every day. The QA initiatives for this reporting period are centered around building new reporting infrastructure that will lay foundation for future Quality Improvement initiatives and finally will result in the creation of an overarching Quality Improvement Plan for EMYS.

Quality improvement is a strategic priority of East Metro Youth Services and a focus of how we deliver services to our clients and families. Our Quality Improvement initiatives will be based on the following enabling principals:

1. Safety
2. Effectiveness
3. Access
4. Client Centered

Our QA/QI initiatives will concentrate on the following areas:

1. Introducing and implementing a new seamless comprehensive assessment system. After extensive consultations with the Directors of Service and Evaluators group in the Toronto Region we are gearing towards one single assessment tool, most likely CYMH Inter-RAI short screener tool. This would allow Toronto Lead Agency to be more aligned with provincial partners and other Lead Agencies.
2. Data Quality – development of a data quality framework. Explore the possibility of Implementing a “Gold Record” approach. This will enable to have more consistent client record and contribute the overall data quality. “Gold record” – is the set of mandatory fields in the Client Record system that EMYS believes that are essential and will allow for a richer data analysis.
3. Privacy – implement privacy audits and re-evaluate the privacy officer role and responsibility
4. Implement a more accurate mechanism for program target setting in our annual submission to the Ministry
5. Introduce program performance management meetings and data reporting compliance tracking mechanisms for early detection of target variances and enable more informed annual program review process.
6. Client Satisfaction – continue engagement with Youth Voice and the Clinical Evaluators Group to ensure alignment across the region as well age groups. Explore an opportunity to create an integrated Client Experience Index, that would account for client satisfaction and clinical outcomes.
7. Initiate Referral Source satisfaction feedback system by eliciting “on the spot” feedback from referral providers is currently under review due to the development of the Centralized Point of Access.
8. Staff Engagement – continue with the newly designed staff engagement survey format.

## Risk Management Plan

As outlined in the mid-year review MCYS modified Transfer Payment Risk Assessment (TPRA) methodology and mid-2016 introduced a new statistically validated risk assessment web based tool to conduct and document risk.

These new mechanisms and revised tool will provide details of recording qualitative and quantitative assessment of risk present in the governance, organization, business practices and the internal and external relationships of all service providers.

EMYS adopted the new TPRA methodology and completed its first assessment in September 2016. Appendix 9 outlines core changes embedded in the new approach along with 7 risk dimensions that EMYS was assessed on in order to determine agency's risk rating.

Following comprehensive review of EMYS TPRA assessment MCYS concluded the overall calculated risk rating to be low, as per Appendix 10. The only identified weakness was in IT area where it was determined that EMYS did not have robust and tested back-up plan for its physical sites / locations, both where services were delivered to clients as well as the agency's head office.

EMYS mitigation plan included utilizing new available location in central Toronto as a back-up plan for our main Markham Road site. This entailed development of a comprehensive IT recovery plan and updating our Disaster Recovery Plan (DRP) and Business Continuity Plan (BCP) to be inclusive of the new site by March 31, 2017.

In the months that followed EMYS embarked on delivery of 2 strategic IT initiatives. The first one involved replacement of an outdated legacy telephone system with a multifaceted Cisco solution that enhanced operational capacity by, among many things, enabling multi-site video-conferencing. The other initiative transformed our IT operating model by migrating our platform in-house from a third-party service vendor. This was not only cost effective but also significantly improved performance and support quality.

With the 2 initiatives now completed EMYS commenced its IT Disaster Recovery Project in early March, with aim to develop full redundancy solution of our IT system at the Bloor Street site. Its design, vendor selection, and procurement decisions are completed with equipment to be delivered on-site by the end of March.

The solution will be fully configured and rolled out by the end of April. This will constitute a critical backbone of EMYS infrastructure in providing uninterrupted service as we embark on developing and implementing system-wide solutions, such as Centralized Point of Access, to support all Toronto based CYMH agencies.

The extent of the above changes to EMYS Technology / IT platforms will require a comprehensive overhaul of our IT policies and procedures, to be completed and approved by August 31<sup>st</sup>. These new policies and procedures will feature as a large component of agency's DRP and BCP. While getting ready for accreditation audit it is imperative that we strengthen both of those plans. To that effect EMYS will create

a task force that will address each area with an augmented view on ability to continue deliver and support not only at the program / service level but also in the system management capacity.

The new and comprehensive DRP and BCP plans will be developed and tested for compliance, with expected implementation date of October 31<sup>st</sup>.

## Staff Training and Skill Development Plan

This plan outlines the agency's mandatory as well as other forms of staff training and skill development, ensuring that staff are up-to-date as per legislation and other requirements. In addition, as EMYS continues to implement evidence-based (EBP) and evidence-informed practices (EIP), see Appendix 11, staff training to maintain fidelity to existing interventions as well as new interventions that meet the clinical needs of our clients and participants for the coming year are listed below.

### Health and Safety

Type	Staff Group	Purpose/Reason	Update
<b>Crisis Prevention Intervention (CPI)</b>	All staff	To ensure staff are adequately trained to verbally and physically intervene (depending on the program) in crisis situations	Staff continued to be trained as is required
<b>Cardiopulmonary resuscitation (CPR)</b>	Residential, Day Treatment, Developmental Services and RYTE staff	To ensure staff can act as first responders to emergency situations	Staff continued to be trained as is required.
<b>First Aid</b>	Residential, Day Treatment, Developmental Services and RYTE staff	To ensure staff can act as first responders to emergency situations	Staff continued to be trained as is required
<b>Universal Health Precautions</b>	All staff	To provide staff with the necessary training to ensure safety when encountering situations that may expose clients and themselves to infectious/communicable diseases	Training is provided on an as needed basis
<b>Workplace Violence and Harassment Training (Bill 132 and 168)</b>	All Managers, Directors and Staff	Defines workplace violence, harassment, and sexual harassment and outlines the requirements under the OHSA including: recognizing and reporting workplace violence, harassment, and sexual harassment, employee and employer responsibilities and work refusals related to violent situations	All new staff and supervisors entering into EMYS programs receive this training
<b>WHMIS Training</b>	All Managers, Directors and Staff	Explains what the GHS (Globally Harmonized System) is and the roles and responsibilities of workplace parties, illustrates the new hazard classes and pictograms, and provides information requirements for safety data sheets and labels. Explores where	All new staff and supervisors entering into EMYS programs receive this training

		to find additional hazard information through workplace-specific education and training	
<b>Safe Food Handling</b>	All GASP, residential and RYTE staff	Training focuses on how to manage and safely handle food and food products	Training will be provided on an as needed basis
<b>Health and Safety Awareness Training</b>	All Managers, Directors and Staff	Covers the minimum requirements set by the Occupational Health and Safety Awareness and Training Regulation in Ontario for Workers, the rights, duties and roles as outlined by the Occupational Health and Safety Act and common workplace hazards and workplace-related illnesses and latency	All new staff and supervisors entering into EMYS programs receive this training

## Equity

Type	Staff Group	Purpose/Reason	Update
<b>Accessibility for Ontarians with Disabilities Act (AODA)</b>	All staff	As per provincial legislative requirements, all staff must undergo training regarding accessibility for persons with a disability	All new staff entering into EMYS programs receive this training as part of orientation
<b>LGBTQ</b>	All staff	To increase services and support for youth that identify with LGBTQ community, increase staff capacity to understand and address issues related to this community as well as increase our knowledge to better inform EMYS' policies, procedures and programming	An all staff training will be delivered by the last quarter of 2016-2017 focusing on trans issues (e.g. their experiences, providing treatment, language, challenging staff assumptions, integrating into supervision, etc.). Plans for the next fiscal year will be made in the first quarter.

## Treatment and Engagement

Type	Staff Group	Purpose/Reason	Update
<b>Harm Reduction Training</b>	All Service-Providing Staff	To provide all relevant staff with the skills and resources to support youth	There will be a harm reduction Awareness Week – April 24th-April

		using substances and that engage in some form of self-harm	28th 2017 – for all staff. This will address many issues such as sexual health, substance abuse and self-harm
<b>Applied Suicide Intervention Skills Training (ASIST)</b>	All Service-Providing Staff	To provide staff with training to recognize when someone may have thoughts of suicide and work with them to create a plan that will support their immediate safety	Initial training has taken in the last quarter of 2016-2017. The next round of training will take place in the first quarter of 2017-2018
<b>InterRai ChYMH-S screener</b>	Access staff and all Individual and Family Therapists	Training staff to utilize this mental health and substance use screening tool to be used at intake, at the time of progress reviews and at closing	Initial training will take place in the second quarter of the fiscal year 2017-2018
<b>Youth Engagement</b>	All Managers, Directors, staff and the board	To provide staff and the board with knowledge, skills and plans to move youth engagement theory into practice	A champion needs to be identified and will participate in the first quarter of the next fiscal year. A training plan and budget will need to be created
<b>Mental Health First Aid</b>	Administration team, Peer Support Workers	To provide non-clinical staff with tools to enhance their mental health literacy and acquire the skills and knowledge to help people better manage potential or developing mental health problems	Training will be provided on an as needed basis

### Agency Operations

Type	Staff Group	Purpose/Reason	Update
<b>Serious Occurrence</b>	All Managers and Directors that provide on-call and all service-providing staff	To ensure that all involved individuals are familiarized on an annual basis on serious occurrence protocols	The management team received a booster during this year's service plan. A booster for staff will be planned for the next fiscal year
<b>Privacy Training</b>	All staff	To ensure that all staff are aware of and are following legislated guidelines (e.g . PHIPPA, PIEPIDA) outlining how and what to communicate with clients, participants and resources	Training will be provided within the next fiscal year

<b>Media/Communications</b>	Relevant staff and Managers/Directors	To provide training to individuals that engage in contact with the media on communication skills and protocols	Training will be provided on an as needed basis
<b>Accreditation</b>	All Managers, Directors, staff and the board	To provide training on Accreditation that is scheduled for June 2018	Training will be provided in the last quarter of the fiscal year 2017-2018

## Management

Type	Staff Group	Purpose/Reason	Update
<b>Management Training</b>	Managers and Directors	Providing management training to address such issues as supervision, performance management, orientation to the role, leadership, finance, hiring, where required	Training will be provided on an as needed basis
<b>Project Management</b>	Project Managers	To provide training to enhance their skill development through such tools as Work Back Schedules	Training will be provided on an as needed basis

## Evidence Based Practices and Evidence Informed Practices

Type	Staff Group	Purpose/Reason	Update
<b>Dialectical Behavioural Therapy (DBT)</b>	Relevant Access and Counselling, Residential and Day Treatment staff	To provide re-fresher training and consultation in order to maintain fidelity to the model	<p>Residence: During the last year two residential staff attended DBT training and also purchased the Emotion Regulation Skills System For Cognitively Challenged Clients Book. In the next year, the residence is planning to be able to access DBT consultations with Dr. Alec Miller.</p> <p>Day Treatment: During the last year, all Day Treatment staff attended a 1 day DBT training with Dr. Alec Miller. In addition, there was Skype consultation with Dr. Miller. In addition, 2 IFTs attended DBT training at Broadview Psychology. 2 IFTs and 1 CYW attended a 2 day DBT training provided by Safeguards</p>

<b>Solution Focused Brief Therapy (SFBT)</b>	Intensive Community Counselling/Priority Access for Child Welfare counselling staff and 'what's up' walk-in staff	To provide all staff with the prerequisite tools and concepts to intervene effectively	New external consultant, Keith O'Meara, for SFBT has begun. Three consultations have been provided between April 1st 2016-Mar 31st 2017. This will include video taping for future consultations. Formal external staff trainings in SFBT was provided for 4 staff
<b>Applied Behavioural Analysis (ABA)</b>	Developmental Services Team	To provide developmental services staff with a universally recognized evidenced based model for intervention	Developmental Services has had 17 consultation sessions that last between 2 to 2.5 hours each session by a Board-Certified Behaviour Analyst (BCBA). Program Manager Deborah Kernohan and GASP Program coordinator Vanessa Adams have completed their Behaviour Science Diploma at Humber College and are working toward certification
<b>Cognitive Behavioural Therapy (CBT)</b>	Priority Access for Schools	To provide specific counselling staff with a universally recognized evidenced based model for intervention	Training (Fundamentals of CBT certificate program at OISE) was provided to the newly hired individual and family therapist. As the former CBT champion left the organization agency psychologist Dr. Nguyen has been identified as the replacement who will be leading consultations with the team
<b>Motivational interviewing (MI)</b>	YOWs, YITs relevant counselling, day treatment and residential staff	To provide relevant staff with the skills to work with youth experiencing addictions, and other challenging behaviours	A champion has been identified. The EYOWs and some recently hired YOW's from across the province received training through CMHA in late 2016. There was a review of MI practices at the Provincial YOW conference in March 2017
<b>Trauma</b>	Service-Providing Staff	To provide specific counselling staff with a universally recognized evidenced based model for intervention	Staff continue to attend external trainings. The Native Women's Resource Centre provided a training in indigenous trauma in the fall of 2016. A follow up training is being explored for 2017-2018

<b>Aggression Replacement Therapy (ART)</b>	For the YOWs and other relevant staff	To provide staff with skills to improve social skill competent and morale reasoning as well to reduce aggressive behaviour	There have been no trainings in the past year. We are exploring training options for staff as members of the RYTE team have expressed interested in ART
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### Technology Training

Type	Staff Group	Purpose/Reason	Update
<b>Client Records (CR) Training</b>	EMYS Staff, Students and Volunteers	To ensure all relevant staff are able to utilize the CR for case management and to document process and outcomes	Staff continued to be trained as is required
<b>Outreach Records (OR) Training</b>	Youth Outreach Workers and Supervisors	To ensure all YOWs utilize the OR to document their work and to enable supervisors to use the OR as a tool for regular monitoring and supervision of staff	Staff continued to be trained as is required
<b>Microsoft Office Applications Training</b>	Data Management Team	To ensure all data management staff are trained in advanced Excel software skills	Our Finance Manager has provided training on Excel to the Data Management Team (DMT). Future training needs will be explored if required
<b>SharePoint, 2013 Administrator Training</b>	Various programs	To use SharePoint for various needs of agency including upcoming e-library & lead agency web portal	One round of training completed for 6 staff. More to follow by the third quarter of 2017-2018
<b>Microsoft Dynamics Preliminary Training</b>	Lead Agency And Admin Team	To understand basics of Microsoft Dynamics for correlating needs of lead agency operations and help with building a CRM portal	The agency is purchasing this for CPA. Roll out will occur in the first quarter of 2017-2018

## List of Appendices

- Appendix 1- Institute on Governance
- Appendix 2- Lead Agency Roles and Responsibilities
- Appendix 3- Lean Experimentation
- Appendix 4- Strategic Implementation Chart
- Appendix 5- Youth Engagement Funding Updates
- Appendix 6- Gender Based Violence Funding Updates
- Appendix 7- Response to Auditor General Report
- Appendix 8- Accreditation Narratives
- Appendix 9- Risk Assessment
- Appendix 10- 2016 Risk Assessment - TPRA Final Report
- Appendix 11- Evidence Based and Evidence Informed Program Updates

Additional material to support to service plan process

- Client and Participant File Audit
- Client and Participant Success Stories
- Brief Services up Proposals