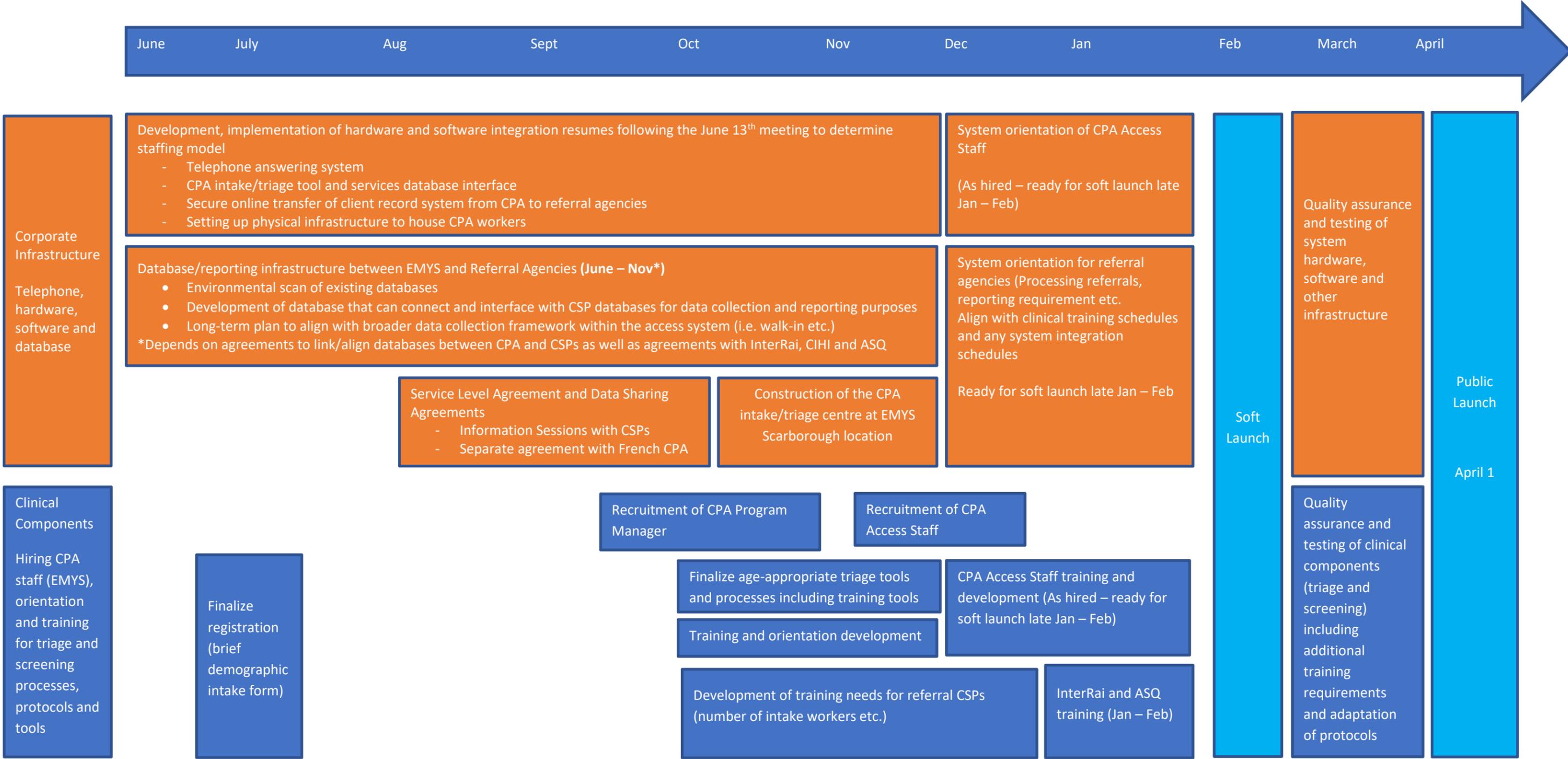


**Toronto CPA  
Estimated (High Level) Timeline to Launch**

**Notes:**

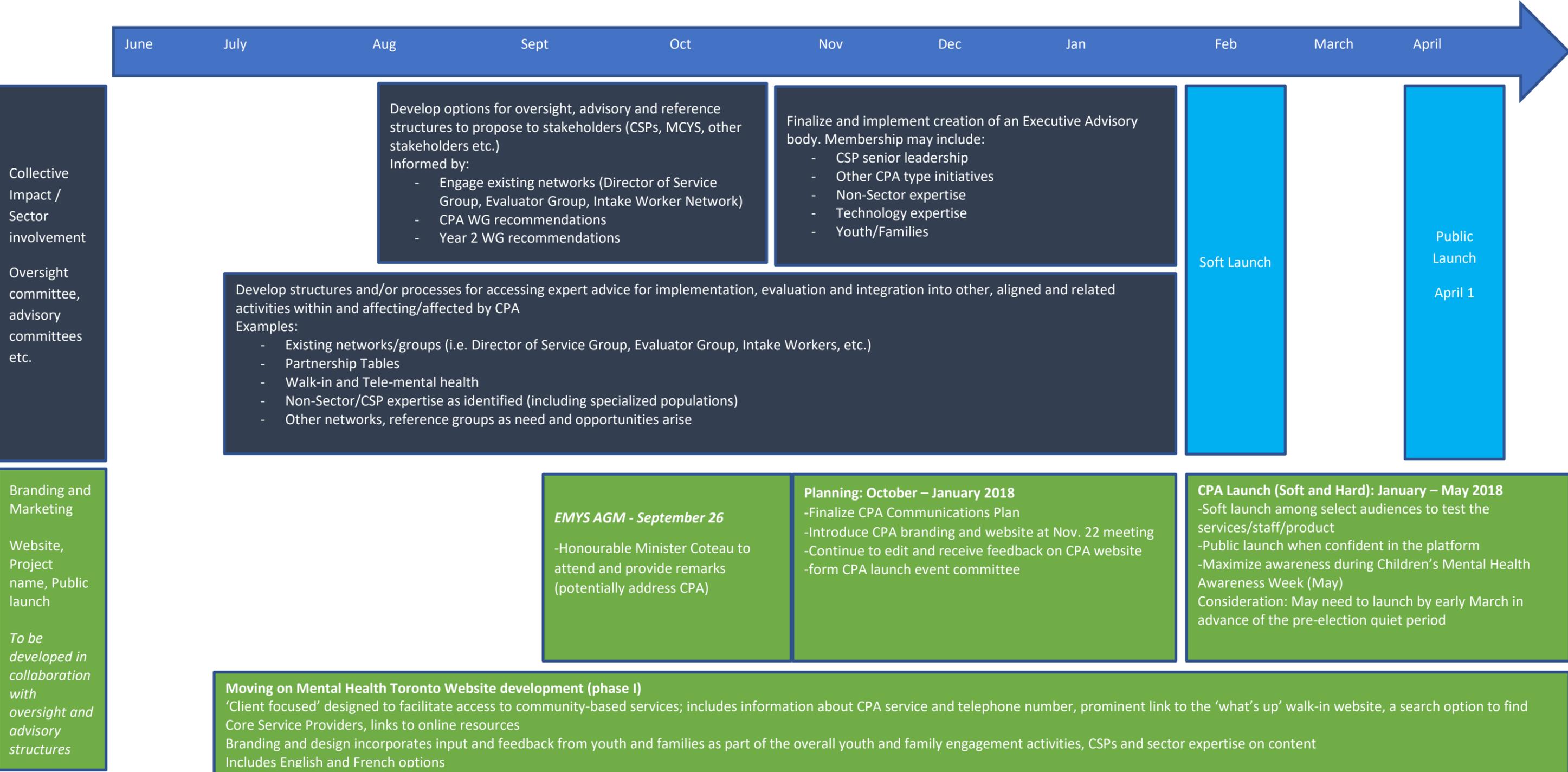
- Exact training of triage and screening tools will depend on agreements for use of each type of tool and the number of intake/screening staff in the referring agencies
- Access for French speaking clients is being developed by Centre francophone, working in alignment and partnership with EMYS/Lead Agency
- Youth and Family engagement and feedback embedded into system-wide processes
- Data sharing and privacy legislation is incorporated into overarching "Participation Agreements" with each referring agency



**Toronto CPA  
Estimated (High Level) Timeline to Launch**

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- Youth and Family engagement and feedback embedded into system-wide processes
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## Appendix B.1

July 12, 2017

Robert Sears  
Chair, Director of Service Group  
Director Client Services and Quality Improvement  
Central Toronto Youth Services

Dear Robert,

I would like to formally acknowledge as well as thank your group as one of the leading reference groups to the Lead Agency, both to our working groups as needed and most recently with the development of the CPA service.

When EMYS assumed the role of Lead Agency for Toronto, we recognized that it could not do this work alone. Rather, a significant part of our role as Lead Agency was to facilitate, support and leverage new and existing opportunities for agencies to bring to the table their clinical expertise, community experience, talent and commitment on behalf of the populations they best know and serve. In the initial stages of this process we established targeted working groups and community partnership tables, each with a specific mandate and term. Additionally, we have been fortunate to call upon existing groups such as yours to help inform our planning and decision-making.

Moving forward, we can expect the need to call upon our expert networks and groups again. We also want to ensure that groups such as the Director of Service Group, are able to retain the strengths and benefits gained as an independent peer-based networking group. To that end, as per your correspondence of September 2016, we propose to work with you and your existing members to adapt your current structure and process to the extent that EMYS can solicit advice as required on those clinical matters associated with our core services and community mental health planning initiatives.

Please let me know how you might like to proceed.

Sincerely,

Claire Fainer  
Executive Director

**TORONTO**  
moving on mental health  
**LEAD AGENCY**

365 Bloor Street East,  
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Registration No. 13056 3166 RR0001



## Appendix B.2

July 12, 2017

Dr. Irene Bevc  
Chair, Evaluators' Group  
Director of Program Evaluation  
Sick Kids Centre for Community Mental Health

Dear Irene,

I would like to formally acknowledge as well as thank your group as one of the leading reference groups to the Lead Agency, both to our working groups as needed and most recently with the development of the CPA service.

When EMYS assumed the role of Lead Agency for Toronto, we recognized that it could not do this work alone. Rather, a significant part of our role as Lead Agency was to facilitate, support and leverage new and existing opportunities for agencies to bring to the table their clinical expertise, community experience, talent and commitment on behalf of the populations they best know and serve. In the initial stages of this process we established targeted working groups and community partnership tables, each with a specific mandate and term. Additionally, we have been fortunate to call upon existing groups such as yours to help inform our planning and decision-making.

Moving forward, we expect the need to call upon our expert networks and groups again. We want to also ensure groups such as the Evaluators' Group are able to retain the strengths and benefits gained from an independent peer-based networking group. To that end, respecting the will of the group, we propose to work with you and your existing members to adapt your current structure and process the extent that EMYS can solicit advice as required on those matters associated with our core services and community mental health planning initiatives.

Please let me know how you might like to proceed.

Sincerely,

Claire Fainer  
Executive Director

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## Appendix C

**Article 23, United Nations Declaration on the Rights of Indigenous Peoples (2007) reflects the overarching intention of this engagement.**

*Indigenous peoples have the right to determine and develop priorities and strategies for exercising their right to development. In particular, Indigenous peoples have the right to be actively involved in developing and determining health, housing and other social programs affecting them and as far as possible, to administer such programs through their own institutions.*

**The Toronto Indigenous Health Advisory Council (2015/16) developed a number of principles to guide their multi-year process, one of which is very relevant to this engagement:**

*Wherever Indigenous Peoples go to access programs and services, they receive culturally appropriate, safe and proficient care, and all barriers to optimal care have been removed.*

**Truth and Reconciliation Commission of Canada (TRC) Calls to Action:**

*In December 2015, the TRC released its final report, including 94 “Calls to Action” or recommendations to further reconciliation between Canadians and Indigenous peoples. In its Summary Report, the TRC explains reconciliation as “establishing and maintaining a mutually respectful relationship between Aboriginal and non-Aboriginal peoples”. This concept of building a mutually respectful relationship, respecting self-determination guides our planning and engagement activities as the MOMH Lead Agency for Toronto.*

### **What is OCAP®?**

The First Nations principles of OCAP® are a set of standards that establish how First Nations data should be collected, protected, used, or shared. They are the de facto standard for how to conduct research with First Nations. Standing for ownership, control, access and possession, OCAP® asserts that First Nations have control over data collection processes in their communities, and that they own and control how this information can be used.

### **What do the four “OCAP” principles mean?**

There are four components of OCAP: Ownership, Control, Access and Possession.

**Ownership** refers to the relationship of First Nations to their cultural knowledge, data, and information. This principle states that a community or group owns information collectively in the same way that an individual owns his or her personal information.

**Control** affirms that First Nations, their communities, and representative bodies are within their rights in seeking to control over all aspects of research and information management processes that impact them. First Nations control of research can include all stages of a particular research project-from start to finish. The principle extends to the control of resources and review processes, the planning process, management of the information and so on.

**Access** refers to the fact that First Nations must have access to information and data about themselves and their communities regardless of where it is held. The principle of access also refers to the right of First Nations communities and organizations to manage and make decisions regarding access to their collective information. This may be achieved, in practice, through standardized, formal protocols.

**Possession** While ownership identifies the relationship between a people and their information in principle, possession or stewardship is more concrete: it refers to the physical control of data. Possession is the mechanism by which ownership can be asserted and protected.

## Year 2 Working Group Reports

<http://emys.on.ca/leadagency/reports/>

0-6 Age Related Working Group

7-12 Latency Age Working Group

13-18 Adolescent Working Group

Residential Treatment Working Group

School-Focused Initiative Worker Working  
Group

Section 23