



SERVICE PLAN

2016-2017

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Client vignette from our Internet Childhood Exploitation (ICE)

Danielle is 16 and is a triplet. She has constantly compared herself to her sisters. She shared that she has often felt inadequate compared to them. Last summer she started chatting with a guy online. She reported 'falling for him'. She began sending him naked pictures. Every time she suggested they meet in person he would make excuses. Finally, he disclosed online that he was wasn't 16, the age he originally stated, he was in fact 30. Danielle was at first 'creeped out', but eventually realized that it didn't bother her that much that he had lied since she never felt loved like this before. Six months into their online relationship, Danielle and he met in person. He was not in fact 30, but in his mid 40s. He told Danielle a sad story about how his wife had passed away and he hadn't connected with anyone, until he had met her, since his wife's death. Danielle shared that she 'feels for him' and could see past his deception.

They continued to meet up. Danielle shared that he cared for her and gave her attention like no one had ever done before. She disclosed that they had started engaging in sexual activity and slowly that changed to coerced sex. Danielle reported that he told her that he had a daughter her age. He convinced Danielle to reach out to his daughter to encourage her to talk to him. Danielle did. She didn't know that his daughter had an order of protection against her dad for abuse. He then slowly became emotionally abusive to Danielle to the point where she felt unsafe. She realized that everything he told her was a lie and that he had manipulated her in order to gain power and control.

EMYS is currently providing trauma counselling to Danielle through the ICE (Internet Child Exploitation) program. She has decided to press charges against her abuser. She has thrived in therapy. Her trauma symptoms have reduced significantly. She recently texted her therapist saying "Just wanted to say you're helping me so much and I really appreciate how much you care about helping me. Thank you, thank you".

Client vignette from our French Youth In Transition Program (YIT)

Lexi is an 18 year old female who is bilingual. Lexi is also a crown ward and has been involved with the Toronto Children's Aid Society (CAS) since she was 9. Lexi is originally from Congo and moved to Canada when she was 4 years old. Lexi's contact with her biological family is limited to her older brother who lives in another province in Canada. She is not in contact with anyone else from her family. Lexi has lived in foster homes and group homes for most of her life. At the age of 17, Lexi moved in with friends from her church.

Lexi was referred to the French Speaking Youth in Transition Worker (YITW) at East Metro Youth Services through her Child Welfare worker. During the initial meeting with Lexi and her CAS worker it was identified that Lexi needed to vacate her current place and find stable and reasonably priced housing. During the process of finding housing for Lexi, she became a victim of an online housing scam. With support from her YIT Worker she completed a report to the police. Lexi indicated that she was very interested in the social work field and was currently looking for a summer job in the social services field. The YIT Worker helped Lexi to complete her resume and cover letter and supported her in applying to various summer jobs. During the summer Lexi was hired at the Children Aid Society of Toronto for a Youth Leadership position. Things had been going well for Lexi and she reported that she did not require further YIT Services and her file was closed. Lexi connected back to the French Speaking (Bilingual) YIT Worker during the holiday season and expressed her interest in becoming a social worker. She was then supported in applying to various Universities. She was later accepted at York University and is scheduled to start in September 2016. Lexi recently finished working with her YIT Worker on her OSAP application.

Overall, Lexi reported feeling very excited to be working with a wrker who is connected to French resources in the community. Lexi reports that her social connections have improved since the time she has been working with the YIT Worker and she has achieved all her goals.

Introduction and Organizational Overview

2015-2016 has been an extraordinary year for East Metro Youth Services (EMYS) as we worked to continue to do 'business as usual' in East Toronto, while launching a large scale Toronto wide service system development project. We have been challenged both as individuals as well as an organization struggling sometimes more successfully than other times, to balance the needs, wants and ambitions of both sides of the agency. Lacking adequate infrastructure for both the service work and that of the lead agency we once again depended on the EMYS 'whatever it takes' ethic to pull it off. And as you read this year's service plan you will conclude that notwithstanding the stresses and strains each one of us has endured we have indeed pulled 'it' off ...again.

Transformation

A report from our Lead Agency team with respect to the Toronto Region Core Services Delivery Plan and the Community Mental Health Plan **[Appendix 1]** is impressive and is the culmination of over 200+ meetings to include individual core service agencies, hospitals, school boards, ethno cultural, Aboriginal and Francophone organizations, provincial associations, youth justice and child welfare agencies, the city of Toronto, LHINs, foundation partners, United Way Toronto & York Region. We have struck 6 Core Services Working Committees with a combined membership of 60, providing staff support in over 20 committee meetings and have held 5 Core Services Member Meetings during which our 33 core service agencies came together in response to our request that we undertake a Collective Impact approach to our work together.

By the end of this fiscal year we can report that we have recruited 4 dedicated members to the EMYS Lead Agency Team acknowledging that communications, IT and administrative staff function as a shared resource, as has just about every staff person at the agency, playing an active role in furthering our lead agency work. In fact as we look back on the year remembering our September Annual General Meeting, when every Board member and many front line staff came together to welcome and engage our core service agency guests, we can now understand that this served as a precursor for all that has followed.

Lead Agency

By September 2015 EMYS also better understood that in addition to the two aforementioned plans required by the Ministry of Children and Youth Services (MCYS), the ministry is also expecting the Lead Agency to develop infrastructure capacity so as to ensure readiness to undertake full lead agency responsibilities by 2018. **[Appendix 2]**. Towards this end, EMYS successfully submitted a proposal to the ministry that has allowed us to further our IT, Communications, Administrative and general corporate service capacity. We have also been able to expand our footprint to include a downtown office space at 365 Bloor Street East, so as to better 'lead' on the Moving on Mental Health Toronto (MOMH – TO) agenda by improving our accessibility to all of our core service agencies. And we are hoping that we can leverage technology to include a video conferencing capability that might mitigate some of the risks involved in careening down the DVP between our two offices.

Finally, we have engaged the Institute on Governance to consult with our Board of Directors as they consider what design elements are required for the establishment of a MOMH-TO Board of Directors with respect to future lead agency roles, responsibilities and accountabilities. In short,

our core service delivery plan, community mental health plan and the progress that we have made re: infrastructure development is foundational to our goal to move from lead agency 'early readiness' to 'mid readiness' by March 2017.

The work of our own 'core service agency' has also moved forward this past year. Our Youth Outreach Worker (YOW) program has seen expansion of the reach and use of our province wide database. As well it has been cited by MCYS as a model of choice with respect to developing best practice interventions with Syrian newcomer youth. 'What's up walk-in' funding has stabilized as has our Saturday morning walk in service and we look forward to furthering our Mandarin and Cantonese speaking capabilities. We have continued to work with CAMH, TEGH, Sickkids and others to ready the South East Family Health Team Danforth office to participate in the National YOUCAN research study. **[Appendix 3]**. And finally, we have been recognized as one of the foremost experts in the delivery of a comprehensive program as regards the issue of Human Sex Trafficking/ Gender Based Violence. It must be duly noted that our staff Carly Kalish has received the City of Toronto's 2016 Vital People Grant in honour of her efforts in this regard, and again, EMYS has been asked to consult with the province as they consider funding a response to this distressing issue.

Program
Expansion

As per usual all of our Programs have undertaken a program review so that all staff at every level can better appreciate and reflect upon the impact of their work. Moreover, our WIT Program has developed a formidable case management evaluation tool based on national case management standards, and our EMYS Family Engagement Survey will undoubtedly inform the development of an intentional EMYS Family Engagement Strategy circa 2016. **[Appendix 4]**

As an agency we got caught up in the city wide debate around which tools to use to measure service outcomes once both BCFPI and CAFAS were officially 'decommissioned' by the Ministry. Similarly we have made little progress on client satisfaction, again because we were caught up in city wide efforts to develop a common tool. The Staff Engagement Survey is also a work in progress. The double irony here is that delays around measurement tools and client satisfaction surveys can be directly linked to the EMYS MOMH-TO agenda, wherein one of our core service agencies committee undertook to study data related issues on behalf of our city wide effort, and thus as a service agency we chose to defer our decision making. The recruitment of a Director of Performance Management to begin in April 2016 will be part of a solution focused response to the quality assurance challenges we are facing. The other part lies in ensuring that we embrace the Strategic Impact Statements and Theories of Change that we have developed over the past 6 months as per the Innoweave model.

From September 2015- March 2016 a small team at EMYS worked with consultant Robin Cory to develop strategic clarity so as to articulate what we understand to be the strategic impact that the agency must achieve to deem itself successful as both a service agency and a lead agency.

'Intended impact defines success for your organization; it represents your point of accountability' and as reiterated by our consultant on every occasion, the essence of intended impact is to decide what outcomes we will hold ourselves accountable for achieving.

At the writing of this Service Plan our draft Intended Impact Statement for our **Lead Agency** Work is as follows:

By 2019, EMYS' will have collaboratively created and be managing a coordinated, responsive system that is easy to navigate and ensures effective pathways to timely, evidenced based, culturally and linguistically appropriate, barrier free services for some parents/caregivers and children/youth in Toronto that require infant, children and youth mental health services within the existing Toronto Region funding envelope.

Our draft Intended Impact statement for the **Service Agency** is: *By 2019, as a result of our clinical services and engagement programs serving primarily, but not exclusively, East Toronto:*

Children and youth between the ages of 0 and 29 requiring mental health services will have:

- *increased capacity for improved relationships*
- *will be better able to respond and react to life situations*
- *will have improved self-efficacy and,*
- *will have improved pro-social skills.*

Our impact will be deepened by the intentional engagement, support and treatment of families, caregivers and adult allies.

A full report of our work to date is attached. **[Appendix 5]** Our next step is to build out a full Strategic Plan and this work has already begun with Chris Brown leading a team whose members are Judy Marshall, Alanna Burke, Alisha Singh, Collette George, David O'Brien, Deborah Kernohan, Janice Sellon, Janice Wiggins and Oleg Valin. We anticipate that the complete plan will be tabled by June 2016.

As we move forward in the new fiscal year, EMYS will face continued challenges in managing the pace and the impact of fundamental change to the nature of the agency. How we best position the lead agency vis-à-vis the service agency will be emergent, and will get played out in the course of every decision we make as we consider all aspects of functioning from governance to communications. Our tolerance for ambiguity will be tested as will our interpersonal connections, as firmly grounded as they might be. The service agency will influence our lead agency work as it will continue to bring 'reality' to our system development plans and our lead agency work will be reciprocal as it offers us opportunity for levels of sophisticated thinking and expertise otherwise unavailable to us. It will be imperative that we each take advantage of the other in the noblest spirit of collaboration.... but mostly because this will ensure that our EMYS clients and their families and those served by other agencies across the city '...have the supports to reach their optimal mental health.'

Review of Service Plan Goals 2015-2016		
Goal	Activities	End of year update:
Corporate Services		
Strategic Planning Process	To complete Impact and Strategic Clarity exercise including a Theory of change [Appendix 5]	Completed and hired the same consultant to proceed with our strategic planning process to begin March 2016- June 2016
Establish collaborative processes to guide development of Lead Agency activities and deliverables	Secure funding to support the implementation of a Collective Impact model to guide Lead Agency implementation Establish governance structure to guide Lead Agency policy and operations Establish working groups tasked with the development of Year 1 deliverables and various lead agency processes and activities (e.g., data management, central point of access, needs of diverse communities) [Appendix 1]	Additional funding was secured through MCYS. Proposal completed and approved August 2015 allowing staffing of Communications Manager and Project Managers and funds to support Lead Agency Planning Process. The Institute on Governance was contracted in Feb. 2016 to conduct the first phase of a Governance Review. Initial engagement with Board Chairs through EMYS AGM on October 8 th , 2015. Five meetings held with all 33 Core Services Agencies. 4 working groups plus 2 newly established groups, chaired by Toronto Executive Directors. All working groups meeting regularly with March 31, 2016 deliverables to support Core Services Delivery Plan and Community Mental Health Plan. Initial community partnership meetings in progress.
Meet Year 1 Lead Agency deliverables	Complete initial Core Services Delivery Plan	Initial Core Services Delivery Plan and

	Complete initial Community Mental Health Plan	Community Mental Health Plan on track for March 31, 2016.
Implement the next stage of EMYS French Language Services (FLS)	<p>Report to the Ministry regarding referral clause and service clause</p> <p>Establish MOA with Centre Francophone within the context of Lead Agency</p>	<p>Completed FLS Compliance report [Appendix 6]</p> <p>FLS Working Group from Lead Agency established (Nov 2015) with mandate to June 2016; Chaired by Centre Francophone and applied for grant to assist in implementation of best practices; Expectation that short term and long term deliverables will continue through 2016</p>
To implement a new budget monitoring process to increase management accountability for program budgets.	Kevin will work with program managers and directors to develop the budget for FY2016. Periodic review of the financial actuals vs. budget by program will be conducted. Significant variances need to be explained and presented to the management team.	Fiscal Year 2016 budget has been created with the joint effort from program managers/directors, and was approved by the Board. The actual financial results have been reviewed with program managers/directors on a regular basis.
Secure on going funds for Saturday walk in as well as Chinese Walk-in therapist.	<p>We currently have funding to secure Saturdays at Scarborough site until July 31st, 2016.</p> <p>Develop new proposals for ongoing support to the walk in</p>	<p>Additional funds received from Echo Foundation \$25,000 to recruit Mandarin and Cantonese capacity for Saturdays. We have hired a Mandarin and Cantonese speaking therapist for the walk in</p> <p>Proposal submitted to the Hedge Fund for \$33,000. We should hear from them by May 2016</p>
To review and revise our current Volunteer policies and programming opportunities	Recognizing the discrepancy regarding the definition of volunteer activities and accountabilities between United Way, City of Toronto and the Canadian Centre for Accreditation, revised policies will be developed to meet all funders' criteria.	This process continues; Dawn Scott has been delegated as the point person for volunteerism in the Agency, the CR has been reviewed and adjustments have been made to accommodate the information and tracking

		<p>needs as prescribed by the range of volunteers within the Agency (this will require a role out plan before it goes live in the CR), policy and procedures will require a revision and the intake process and relevant paperwork is under review.</p>
<p>Evaluate and revise our current Staff Engagement (SES), Consumer satisfaction and referral source surveys.</p>	<p>We will gather input from staff re: our staff engagement survey (SES) to better formulate questions that they deem relevant</p> <p>Consumer Satisfaction has been assumed within the Toronto-wide Client Voice. Given that this is a web based tool, it will be important to acquire clients/participants emails addresses for this tool to be utilized and enhance the response rate</p>	<p>A team to review and revamp the SES was established that represented a cross section of the agency. A draft survey has been created and will be piloted with a group of staff before the final version is disseminated to ensure that we are asking the best questions.</p> <p>The latest version of the Client Voice will only be piloted in April 2016. We have continued to use the previous version via Survey Monkey to canvass clients as they close out of service. However, the response rate was. Contributing to this problem is the fact that this survey has been dependent upon having email addresses and for the most part we did not have client and participant email addresses in our CR. A potential solution to this is to utilize iPads or smart phones to allow clients and participants to complete the survey in the last session. An additional factor that requires addressing is the need for a parent/family survey that gathers data on their satisfaction. The current Family Engagement</p>

	<p>The Referral Survey response rate continues to be very low and this will be explored with other evaluators across the city regarding best practices to enhance response rate.</p>	<p>Survey could be modified to serve this purpose.</p> <p>Similarly, the response rate to our current Referral Source survey also has been quite low. The City-Wide Evaluation Group has suggested that we should not survey referral sources on an annual basis. It appears that we are not alone as other CYMH agencies reported the same results.</p> <p>Instead, we believe that a more effective plan would be to send out surveys immediately following the actual referral. We should also review the questions of the survey itself to ensure their relevance. Future efforts in these areas will fall under the new Performance Management Director for review.</p>
<p>To stabilize Citrix environment and provide on-going support and training to staff on Citrix.</p>	<p>After Citrix migration was completed, the next several months (April to September, 2015) was spent in stabilising Citrix and supporting staff with Citrix. Regular weekly meetings were conducted with Third Octet to ensure all Citrix complaints were resolved. A Citrix 'Lunch' & 'Learn' event was completed in May, 2015 and training manuals was provided to staff. A Citrix FAQ, Support FAQ and IT FAQ were produced. EMYS internal Citrix capacity was increased by training the internal IT Helpers committee</p>	<p>As a result staff are comfortable with Citrix and adoption of Citrix technology as an useful IT solution commenced for EMYS. Some staff gave feedback that Citrix technology was very powerful especially when working from home.</p>
<p>To Manage IT support and services for the agency</p>	<p>Support was provided for various needs related to setting up laptops and computers, setting up Citrix and email, troubleshooting IT issues, liaising with Third Octet, Radiant Communications and other service providers. A new Internet service</p>	<p>All IT services were working efficiently for 80 to 90% of the time. For the next fiscal year IT Manager will work towards increasing the efficiency of IT services.</p>

	contract was signed with Radiant communications at a new rate that is 40% cheaper than the last contract. A service contract was signed with Third Octet in July, 2015 for Citrix and IT hosting services.	
To evaluate IT needs of the agency especially after being selected as Lead Agency of Toronto	A preliminary evaluation of IT needs and functions was completed in Oct, 2015 and currently the needs have further increased. With Lead Agency operations taking shape, IT needs for EMYS will be now be addressed into two categories 'Corporate IT needs' and 'Lead Agency IT needs" [Appendix 7]	Based on the results of the IT needs exploration exercise, the newly hired IT Manager met with the Executive Director to ensure EMYS IT needs are prioritized. As a result the following new projects and activities are in development for the next fiscal year <ol style="list-style-type: none"> 1. Procure new laptops for staff who are due for replacement 2. Set up IT Infrastructure for the new downtown office 3. Implement SharePoint for Lead Agency Communication needs 4. Implement EMYS own Private Cloud Solution 5. Install new voice solution for EMYS offices 6. Implement video collaboration solution for growing video conferencing needs 7. Revise IT policies and define clear roles and responsibilities for various IT functions that will improve IT services for programs and staff
Improve internal communications Develop internal communications plan:	Audit existing activities including need to respond to and communicate appropriately on feedback received from annual employee survey Establish staff working group to discuss and make recommendations on internal communications activities and staff engagement in process	The Communications Manager has met with Human Resources to discuss a proposed format for an internal monthly newsletter that would outline key initiatives at EMYS on a consistent basis to help staff feel

	<p>Investigate improved information sharing activities between managers and staff, e.g. meetings with staff following joint management team meetings, staff discussion of annual goals and activities</p> <p>Draft plan and share with staff for input and feedback</p>	<p>more informed. For example, featuring WITness award winners and other staff as profile stories are possibilities.</p> <p>The Communications Manager has met with both individual staff and presented in team meetings. Key individuals have expressed an interest in involvement in contributing perspectives and ideas. A communications working group is in the developmental stage</p> <p>Based on feedback from staff, HR and IT, a new format for a monthly staff communications was created. Entitled, 'what's up' @EMYS, the first internal newsletter was circulated on Jan. 13, 2016. The new format provided staff with an HTML-formatted newsletter filled with short readable news articles, events, images and links. There is also an online version of the newsletter located here http://emys.on.ca/whats-emys-january-2016-internal-newsletter/</p> <p>The second edition was issued on Feb. 23 and is located here. http://emys.on.ca/whatsupfebruary2016/</p>
<p>Enhancing Family engagement throughout the agency</p>	<p>Strike a committee to assess the agency's efforts in family engagement and make recommendations for enhancement.</p>	<p>A small committee began looking at developing a definition of family engagement, exploring best practices as well as gathering feedback from staff and families. A report has been created encompassing these elements and summarizing</p>

		the results of the survey. [Appendix 4]
Continue development re Services for Transitional Aged Youth	<p>Collaborating with cross sector partners</p> <p>Pursue funding options for Transitional Aged youth</p>	<p>We are involved with the Toronto Central LHIN evaluating services for Transitional youth across the city</p> <p>We have developed a funding proposal within our Walk in collaborative to RBC for funding specifically for Transitional Aged youth</p> <p>Funding from MAC/Canadian Women's Foundation is funding programming for youth and young adults 16-29 This funding is secured 'till Sept. 2016. WE are eligible to renew this funding for one more year.</p> <p>EMYS is pursuing a potential opportunity to secure a partnership and joint research pilot looking at transitions for youth to community from the shelter system</p>
Support the enhancement of the YOW program	<p>Develop and implement infrastructure for the Provincial YOW Community of Practice</p> <p>Develop and provide training for Enhanced YOWs (EYOWs) and YOWs</p>	<p>YOW lead agencies will engage in an exercise to develop a terms of reference for the group in April 2016</p> <p>Following a tendering process EMYS will engage in formal curriculum development with a university to establish a learning portal and will also provide in person YOW training on the Stages of Change model and related Motivational Interviewing intervention.</p>

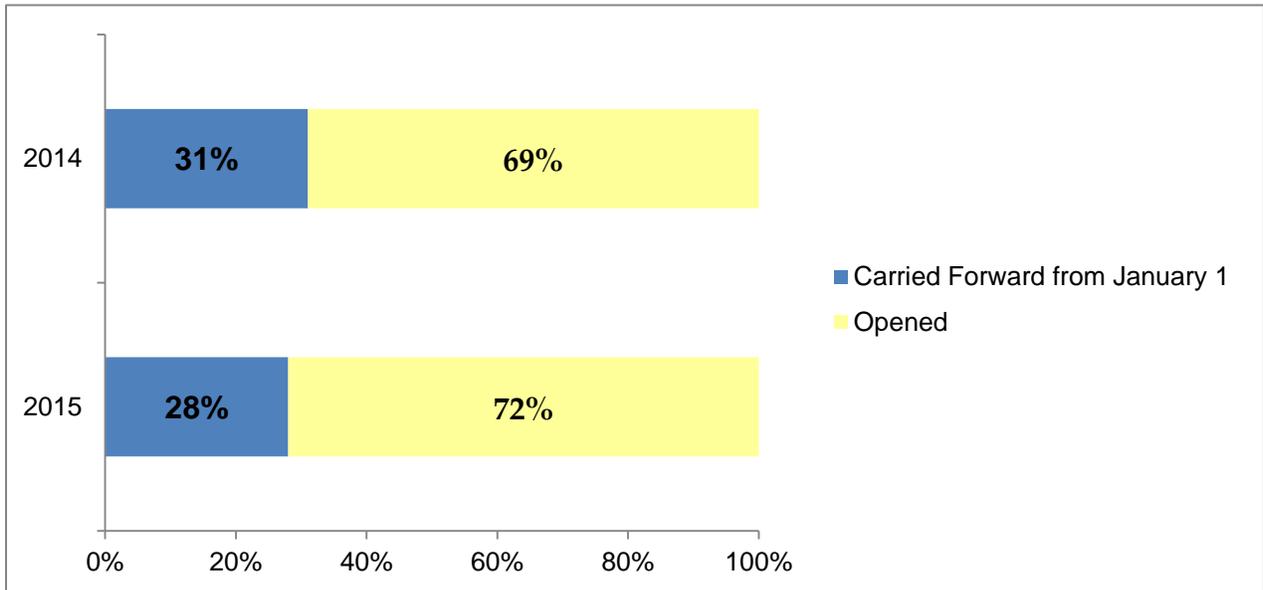
Review of Client Statistics

Service Plan Draft (Annual Calendar Statistics 2015)

Review of Client Statistics

January 1, 2015 – December 31, 2015

Individuals Served	2015	2014
Carried Forward from January 1	492	483
Opened	1261	1088
Total Served	1753	1571
Closed	1049	1046
Carried Forward to January 1	704	525

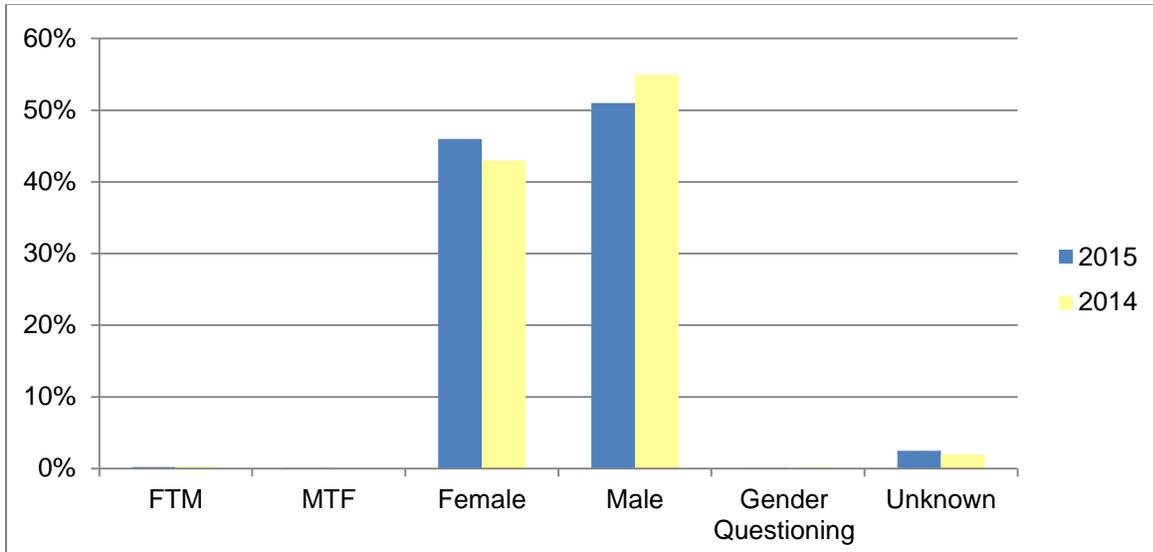


Compared with last year, there was an increase in the total number of individuals served by East Metro¹

Gender	2015	2014
Female To Male (FTM)	4	4
Male To Female (MTF)	2	1
Female	804	669
Male	897	863
Gender Questioning	2	3

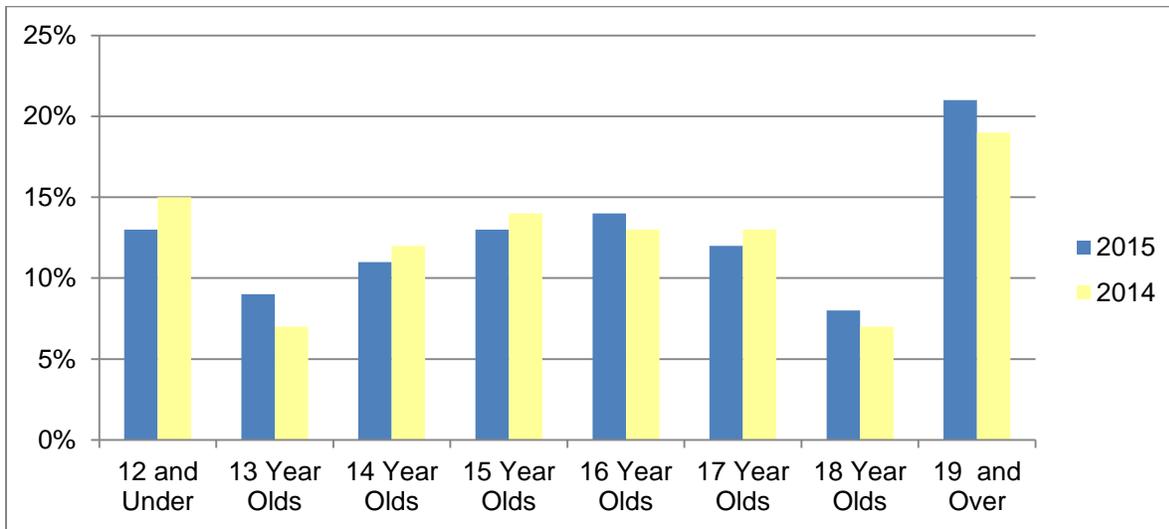
¹ This total does not include numbers of individuals served through our Youth Outreach Worker program.

Unknown	44	31
Total	1753	1571



Gender Distribution

There has been an increase in the number of females served in the last year. This in part is related to the inclusion of our new gender based violence programs.



Age Distribution

Both this year and last year we managed to raise funds from sources other than MCYS that specifically targeted services for the transitional aged youth population. It is well documented (e.g. Mental Health Commission of Canada) that transitional aged youth are a very vulnerable population and from this chart it is evident that this group of young people are making use of our mental health services. We have been serving this group in our Walk-in and in our Gender Based Violence Intervention services.

Primary Mental Health Diagnosis*

Primary Mental Health	2015		2014	
	N	%	N	%
Anxiety	135	21%	119	20%
ADD/ADHD	134	21%	123	20%
Autism Spectrum Disorder*	96	13.9%	107	18%
Mood Disorders	83	13.1%	71	11.8%
Learning Disorder	59	9%	66	11%
Oppositional Defiant Disorder	57	9%	44	7%
Obsessive Compulsive Disorder	21	3%	14	2%
Adjustment Disorder	12	1.8%	12	2%
Psychotic Disorder	11	1.7%	10	1.5%
Post-Traumatic Stress Disorder	9	1.4%	16	3%
Borderline Personality Disorder	9	1.4%	6	1%
Conduct Disorder	9	1.4%	5	0.8%
Tourette's Disorder	9	1.4%	2	0.3%
Eating Disorder	6	0.90%	4	0.6%
Total	650	100%	617	100%

*The category of Autism Spectrum Disorder includes Pervasive Developmental Disorder and Aspergers. It is important to note that while we are not a designated agency per se for Developmental Disorders a very large segment of our clients fall within this category and are seen in programs across the agency.

Programs and Services

The following section of the report examines the numbers for our various programs and services. The Ministry has defined core service categories for Child and Youth Mental Health (CYMH) Programs. In order to reflect this change the Service Plan draft now includes the following categories of service:

- Intensive Treatment Services
- Brief Services
- Counselling/Therapy Services
- Service Coordination
- Targeted Prevention
- Developmental Services
- Non-MCYS Funded Services
- Groups
- Youth Engagement Programs

Intensive Services

Intensive Services include our Intensive Child and Family Services, Day Treatment programs and Residential program. These services have been grouped below accordingly.

Intensive Treatment Services	2015	2014
Intensive Child and Family Services	40	40
Day Treatment - Borden Dialectical Behaviour Therapy – 1	17	17
Day Treatment - Borden Dialectical Behaviour Therapy – 2	14	10
Day Treatment - Charles Gordon	12	12
Day Treatment - Wexford	16	18
Residential - Megan Residence	11	11
Intensive Treatment Services Unduplicated Total	85	88

Brief Services

Brief Services	2015	2014
Brief Intensive Child and Family Services	13	10
Brief Priority Access Child Welfare	30	14
'what's up' walk-in	703	661
Brief Services Unduplicated Total	734	673

Our walk-in brief service has grown considerably over the last year as has our brief services for Priority Access Child Welfare

'what's up' walk-in visits	2015	2014
Total # of Sessions Walk In	1420	1403
Total # of Sessions Walk In Saturday	51	N/A

Counselling/Therapy Services

Counselling/Therapy Services	2015	2014
Individual and Family Therapy for Day Treatment Clients	72	64
Individual and Family Therapy (IFT) for Megan Clients	12	11
Priority Access for Child Welfare	30	50
Priority Access for Schools (includes SAL)	158	156
Counselling/Therapy Unduplicated Total	217	223

The reduction in Priority Access for Child Welfare clients (by 20) can be explained by the increase in clients being served in our Brief Priority Access Child Welfare service (by 16).

Service Coordination

Coordination of services begins with the process of developing an individualized plan for service delivery which is reviewed throughout treatment to monitor the client's progress in meeting the goals of the plan. Therefore Service Coordination includes all MCYS funded programs except for Brief Services. Given that there was a reduction in Counselling clients as a result of newer Brief Services (e.g. Brief Priority Access for Child Welfare) there was an anticipated reduction in the offering of formal Service Coordination

Service Coordination & WIT	2015	2014
Service Coordination	384	389
Whatever It Takes (WIT)	41	45
Service Coordination & WIT Unduplicated Total	274	291

Targeted Prevention	2015	2014
RISE Volunteer Program (Borden)	8	7
RISE Volunteer Program (West Hill)	42	N/A
Targeted Prevention Unduplicated Total	50	28

The increase in Rise Participation is due to the revitalized interest at a new school (West Hill)

Developmental Services

Developmental Services	2015	2014
Adult Achieving Independence (AAIMS)	26	21
Aspergers After School	28	26
Aspergers Saturday Respite	8	13
Aspergers School Break	19	28
Fee for Service/Time for the Taking	15	16
Galloway After School	32	36
Respite-Holiday	11	21
Respite-March Break	15	19
Respite-Summer	30	26
Development Services Unduplicated Total	101	109

Non-MCYS Funded Services

Non-MCYS Funded Services	2015	2014
Day Treatment- operated by Springboard via Youth Justice	9	N/A
Estimated Time of Arrival (ETA) 12-18 year olds (Gender based violence program)	38	N/A
Internet Child Exploitation (ICE) (Gender based violence program)	6	N/A
Sexual Wellness Education Empowerment Team (SWEET)	16	N/A

(Gender based violence program)		
Individual and Family Therapy for D'Arcy Clients	20	29
Residential - D'Arcy Residence	9	16
Residential - Megan Transitional Unit	1	1
TAPP-C (The Arson Prevention Program for Children)	1	1
Transitional Support Services	33	26
'what's up' walk-in Saturday	50	N/A
Non-MCYS Funded Services Unduplicated Total	157	49

The significant area of growth for EMYS in this category is related to Gender Based Violence programs and the Saturday walk-in. Given that D'Arcy was closed in March 2015, this explains the drop in numbers reported for this year.

Groups

Groups	2015	2014
My Place Parent Substance Group	10	14
Youth Groups		
Cognitive Behaviour Therapy (CBT) Youth Group PAS	15	N/A
LGBTQ	59	19
L.I.K.E. Youth Justice Group	22	27
Priority Access for School (PAS) Dialectical Behavioural Therapy Group	0	9
The New Mentality Group	4	3
Groups Unduplicated Total	109	89

The significant increase in group numbers is a reflection of our increased number of participants in our LGBTQ group - East Qrew. This group has been supported by our enhanced profile in the community through such things as the Pride Dance in September. The PAS DBT group has not yet resumed but possibly could do so for the remainder 2016. The L.I.K.E. Youth Justice Group saw a dip in numbers from 2014 as they had offered more summer groups in the previous year.

Youth Outreach Worker Program

Youth Outreach Worker (YOW) Program (East Network)	2015	2014
Total Youth Participants	2105	2386

The numbers, which include our partner agencies, were lower this year due to the network carrying several staff vacancies from April to October at different points and only having a full complement of staff across the network as of October 2015. Along with less staff seeing fewer youth, more time was spent by the YOWs supporting their new contacts before referrals were made, resulting in increased interactions with existing youth.

Youth Engagement Programs

Our youth engagement programs include our Newcomer Youth Settlement programs funded by Citizenship and Immigration Canada. As well as various youth engagement programs, including Multimedia, Peer Leadership and Drop-in.

Reaching Youth Through Engagement (RYTE) Programs	2015	2014
Say Word Journalism Program	12	25
Sound Lab	120	90
Studio 2 Multimedia Program	104	123
Volunteer Readiness Program (Peer Leadership)	40	57
Youth In Transition (YIT) Worker Program	83	38
Zone Drop-In	385	361
Newcomer Youth Program – Leadership and Mentorship Training	119	155
Newcomer Youth Program – Orientation to Canada	119	155
RYTE Programs Unduplicated Total	618	521

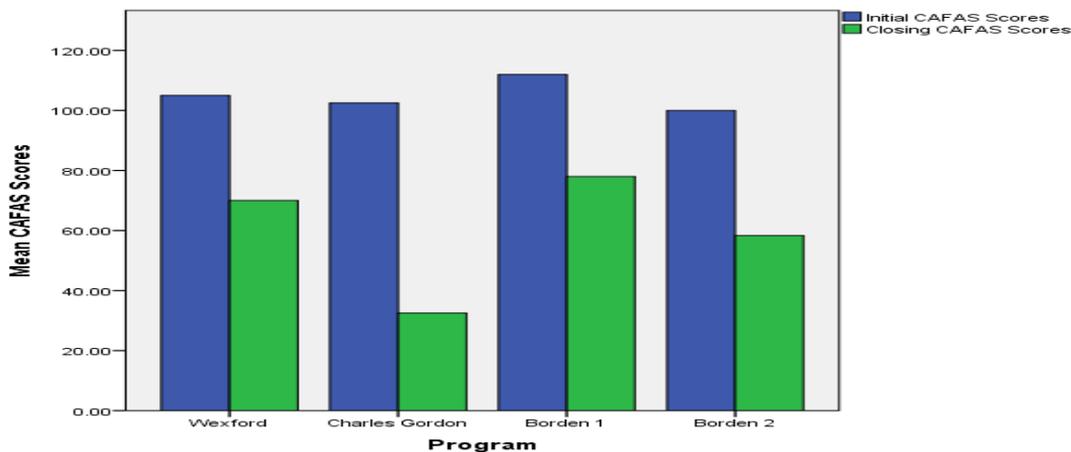
- The newcomer numbers may be lower due to settlement workers being protective of their schools and blocking our access to recruiting new participants. Also, the target for outreaching youth who have been in the country less than a year was reduced. However, there are outreach plans already in place to increase participation in our program.
- The Sound Lab continues to attract more youth and the increase in YIT is related to returning clients.
- Say Word completed its commitment in the last year (only one cycle) as is reflected in the lower numbers.
- The Volunteer Readiness Program numbers have dropped due to a gap in staffing.
- The lowered Multimedia participation numbers were due to lack of referrals.

Quality Assurance

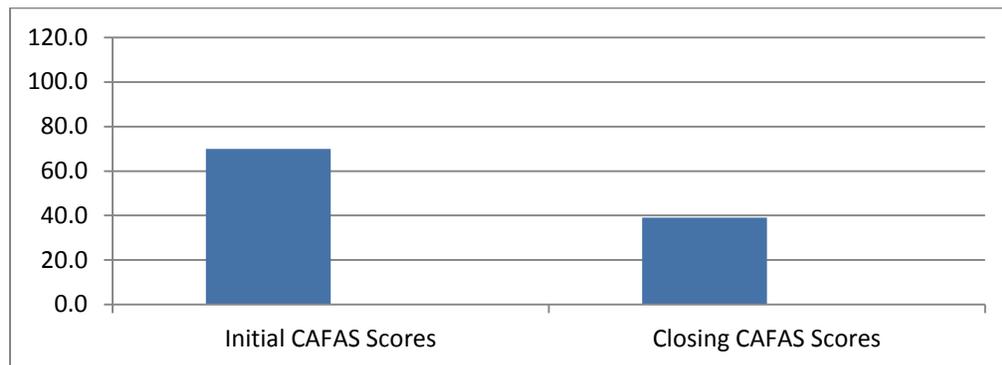
Our Quality Assurance process has continued to undergo some changes during this past year. The Ministry of Children and Youth Services (MCYS) has developed and further refined new reporting criteria that address aspects of quality assurance and as a result we have had to continue to modify our existing Client record (CR) to meet these new requirements. Moreover, in consultation with the Directors of Service and Evaluators group in the Toronto Region we are all struggling to find the perfect screening tool as well as the perfect assessment tool. Not an easy decision and with our Lead Role the decision may be even more significant. In the meantime our CR has been modified in order to screen youth on a number of domains based on The Child and Adolescent Needs and Strengths (CANS) tool. However this is not a tool that we can roll up and present findings in aggregate format. Instead it serves as an individualized screening tool. We are exploring the InterRAi screener for this purpose and will, hopefully by next year, have more useful data to report in terms of the issues youth are presenting with, upon their admission to services.

We have continued to utilize CAFAS for assessment and outcome measurements and report on the scores, where relevant in individual program reviews. The CAFAS Aggregate Report from Jan 2015-Jan 2016 [Appendix 8] compared CAFAS scores at treatment onset and then the most recent CAFAS scores available at that time (a total of 52). Overall, an improvement was seen in almost every domain. In fact, although a limited sample, 63% of the clients showed significant improvement, even though they may have not completed treatment at the time of measurement. In order to provide examples of more meaningful outcomes we have included some results from clients who have completed treatment in two of our programs- Day Treatment and Priority Access for Schools.

The average initial and closing CAFAS scores for clients in each of our Day Treatment programs are displayed below. On average clients' initial CAFAS scores were reflective of pronounced challenges with an average initial CAFAS score in the 100-110 range. Upon closing clients' overall improved functioning is indicated by the notable decline in CAFAS scores.



The chart below displays the average CAFAS scores at initial assessment and at treatment closing for clients in our Priority Access for Schools (PAS) program. As would be expected their initial CAFAS scores are somewhat lower than those youth referred to our day treatment program, seen above, but are indicative of moderate clinical concern. The reduction, on average of more than 20 is considered a clinically significant improvement in both the Day Treatment and Priority Access for Schools programs.



Our Quality Assurance process includes a number of elements. We develop annual Program Summaries/Overviews which focus on outcomes within programs, contextualized in a review of staff experiences and impressions, relevant literature and utilizing specific outcome tools and individual goal achievement measures. These program overviews are prepared by program managers in collaboration with their respective teams. **[Appendix 9]**

In addition, each year we seek stakeholder feedback from clients, referral sources, our staff team as well as our Board of Directors, as part of our effort for continuous quality improvement. The purpose of these surveys is to ensure that quality improvement needs at any of these levels are identified and addressed. As such we currently have, a Board survey, a staff survey, a client survey, and a referral source survey. Our Board survey has been completed and the results will be shared with the Board once analysed.

Regarding our Staff Engagement Survey, our Client Satisfaction Survey and our Referral Source Survey, these three items are currently undergoing review and the results will be presented at a later date. Regarding our Staff Engagement Survey (SES), a team that represented a cross section of the agency staff were tasked to review and revamp the previous SES. A draft survey has been created and will be piloted with a group of staff before the final version is disseminated in May to ensure that we are asking the best questions.

The mechanics of disseminating our Client Satisfaction Survey response continued to be problematic. The final version of the Client Voice (a tool developed by a collaborative group of Adolescent serving mental health agencies), has yet to be piloted in April 2016. In the meantime we continued to use the previous version via Survey Monkey to canvass clients as they closed out of service. However, only a few clients and participants responded. Moving forward, our solution will utilize iPads or smart phones and have clients and participants complete the Client Voice survey in the last session, in real time. Within the context of client

satisfaction, we are exploring how we might revamp the existing family engagement tool **[Appendix 4]** to reflect parent and family satisfaction.

Our response rate to our current Referral Source Survey also has been quite low. We are planning to revamp this survey so that it is a better measure of the referral source's experience and recommend that it be sent out immediately following receipt of the referral with the results to be rolled up annually.

Future efforts in all of these above areas will fall under the new Performance Measurement Director and will be subject to his input and recommendations.

Risk Management Plan

Purpose

Risk Management involves activities that deal with uncertainty and potentially harmful future events. The Risk Management Plan is reviewed and revised twice annually- during Service Plan and at Mid-Year Review.

The purpose of this Risk Management Plan is to:

- Identify and minimize risk to EMYS, the individuals served by the agency, and the agency's staff, placement students and volunteers.
- Protect the agency's profile and assets

Risk exists in the day-to-day operations of EMYS. This risk is minimized somewhat by the agency's cooperation with monitoring bodies such as the Workplace Safety and Insurance Board and the Public Services Health and Safety Association, by compliance with Canadian Centre for Accreditation (CCA) under the auspices of the Children's Mental Health Ontario (CMHO), Provincial Residential Licensing Standards, as well as directions from our Financial Auditors.

In addition, our internal Management team, led by the Executive Director who reports directly to the Board of Directors, manages and monitors the organization's potential risk.

General Strategies Used to Address Risk

On an everyday basis, the agency minimizes risk by using training, policies and procedures and supervision. The following chart describes areas of potential risk and mitigating responses.

The following chart describes our efforts to identify and address real and potential risks during the past fiscal year.

CLIENTS/PARTICIPANTS			
Risk	Level	Commentary	Mitigation
Injuries and accidents	Low	<p>EMYS Policies and Procedures are followed and regularly reviewed with staff, student placements and volunteers. All staff, student and volunteer orientation includes elements of safety and prevention (e.g., CPI, First Aid/CPR).</p> <p>Individualized risk assessments are developed as needed for clients and/or participants.</p> <p>Staff annually review all emergency procedures</p>	<p>Trends are evaluated in an annual review of the Serious Occurrence Report which is first reviewed by the Board and then submitted to MCYS. There were a total of 52 Serious Occurrences in the past year with 4 involving significant injuries involving clients and 1 participant who committed suicide from the YOW Program.</p> <p>Currently all staff, including administrative staff, have been trained in Crisis Prevention and Intervention training (CPI) This is an annual practice.</p> <p>Annual fire inspections are supplemented by monthly inspections by the Health and Safety committee.</p>

			Annual city and fire inspections for the residences also provide information on potential risks.
Missing Persons	High	<p>A Missing Persons Reporting Protocol (MPR) has been developed with local police. (Specific interventions developed as needed)</p> <p>MPRs are documented in Incident Reports which are found in individual client files. In the event that a client is missing for longer than 24 hours this would be documented in a Serious Occurrence Report (SOR). SORs are reviewed in January and a report is completed.</p>	There is an on- all system available to assist in these circumstances staffed by Managers and Directors. Trends are evaluated in the Annual Serious Occurrence Report. There were a total of 14 Serious Occurrence Reports made in the last year with regards to a missing person.(last year there were 24 such events)
Violence and Trauma	Low	Staff are trained to assess safety and potential crises and all are trained in Non-violent physical intervention procedures (CPI)	<p>All staff were provided with CPI, allowing for early identification and de-escalation of potentially violent situations as well non-violent physical interventions</p> <p>In the event that a restraint is used, a debriefing process takes place involving the staff, client and supervisor. There were a total of 5 Serious Occurrence Reports made in the last year with regards to a physical restraint.(last year there were 8)</p>
Community complaints	Low	The complaints procedure is published on the agency web site, and available in print.	<p>The Executive Director or delegate is the spokesperson for the agency to respond to community complaints.</p> <p>There was one (1) client/participant complaint that was resolved and no community complaints in calendar year 2015.</p> <p>Complaints are now stored with the privacy officer and are stored under complaints in the private HR folder. Complaints are to be forwarded to the privacy officer via e-mail who then enters the information directly into the form.</p>

FINANCE			
Risk	Level	Commentary	Mitigation
Employee fraud	Low	EMYS complies with good accounting practices for internal controls, including separation of authority	The auditor does substantial testing on internal control for the year-end audit.
Inadequate reserve	Low	United Way has recommended that our reserve equal one month's operating expenses	The reserve currently has more than one month's operating expenses.
Loss of funding	Generally low, but some programs at higher risk	While the diversity of our funding base is increasing, funding is highly concentrated. Possible sector transformation could lead to significant realignment of funding, with new formulae that are outcome rather than historically based.	We are monitoring all of our project funding to ensure continuity of programming. We have not been apprised, as of yet, of any impending realignments that might impact core funding.
Funding inadequate to cover expenses	Medium with high risk for certain programs	Governments are increasingly unwilling to fund rent, administration and full salary and benefit costs while simultaneously making greater demands on agencies (i.e. AODA, French language services, etc.)	Examine overhead structure, in particular rent. Closely scrutinize additional revenue opportunities for sustainability.

Human Resources			
Risk	Level	Commentary	Mitigation
Employee turnover due to uncompetitive wages	Medium	The EMYS salary scale, while competitive with other non-union children's mental health centres, is significantly below hospitals, schools, government and other unionized settings.	<p>The utilization of flexible work arrangements, the encouragement of employee affiliation and the measurement of employee engagement contribute to staff retention. The Agency has continued with staff recognition through the successful introduction of the WITness award program.</p> <p>There has been a 1% average increase in staff turnover during 2015 and this is due in part to our lower employee count due to the closure of 2 residential programs (Ellesmere, 2014 and D'Arcy in 2015) and a slightly higher number of resignations due to career opportunities that were better suited to staff goals, lifestyle and work environment.</p>
Increasing benefit costs to the employer and employees	Medium	While EMYS employs a broker to provide competitive quotes, inflationary dental and prescription pressures together with an aging workforce suggest rising	CMHO's HealthSource Plus rates were locked in from May 1, 2014 to March 31, 2016 with an overall 2.03% increase. This year's renewal is 2.9% and because it is a nominal increase we will remain with HealthSource plus and review

		rates are inevitable in coming years	this decision following the Staff Survey.
Employees, Placement Students and Volunteers injuries and accidents	Overall Low, but moderate in residential and Developmental Services programs	Health and Safety Committee, comprised of Management and front line staff, do monthly program site inspections; Orientation and training for staff, placement students and volunteers include various emergency procedures, universal precautions, CPI, workplace violence, etc.	<p>Injuries are reported and reviewed for trends and are evaluated in the annual review of Serious Occurrence Reports and by the Health and Safety committee both of which are presented to the Board of Directors. We had no WSIB injuries in 2015.</p> <p>Policies and procedures related to behavior management techniques for client and participants are reviewed annually.</p> <p>5 Joint Health and Safety committee (JHSC) members did the JHSC 2.5 day training in 2016 increasing knowledge and competency.</p> <p>Ministry of Labour inspection occurred on January 6, 2016. The focus was trainings (H&S Awareness), safety largely for off-site employees and ergonomics. We had no citations.</p> <p>The committee continues to focus on staff safety issues (e.g. lanyards, locked doors, etc.)</p>
Communicable Diseases	Low	<p>Policies related to Infection Control and Pandemic Preparedness are in place.</p> <p>Policies regarding Universal Health precautions are in place. Regular updates from Public Health are provided to Employees when appropriate.</p>	<p>Communicable Diseases Policies are reviewed annually. No new measures have been put in place for pandemic preparedness. Regular inspections from pest control continue to occur at all sites.</p>

INFORMATION TECHNOLOGY			
Risk	Level	Commentary	Mitigation
IT asset management is not up to date	Moderate	The current EMYS IT inventory which was handed over by the previous IT contractor is not up-to-date and not accurate. This also includes various program related IT	<ul style="list-style-type: none"> An IT inventory audit was completed in Feb,

		equipment and software programs. Poor asset tracking options can affect asset retainment which can cost EMYS tens and thousands of dollars	<p>2016</p> <ul style="list-style-type: none"> An asset management software will be installed in Spring, 2016
IT roles and responsibilities is not clear	Low	IT Manager identified risks associated with Data access, billing etc. due to the current de-centralised IT roles and responsibilities.	All IT policies and procedures will be revised in Spring, 2016 and will be communicated to staff at that time.

PROPERTY AND ASSETS			
Risk	Level	Commentary	Mitigation
Vehicles - Damage Accident Theft	Moderate	Insurance policy is in place. Protocols re drivers' abstract are in place. All drivers must be 25 years of age or older. No claims this year. We also only insure drivers without a recent conviction	Review causes of incidents of theft or accident on an as need basis
Buildings- damage, theft, natural disasters	Moderate and High in residences	Insurance policy is in place. Daily and monthly site inspections allow for maintenance of property.	Contracts exist with a variety of service providers (e.g. heating and air conditioning, pest control, etc.)

ORGANIZATIONAL GOVERNANCE			
Risk	Level	Commentary	Mitigation
Board of Directors- Criminal activity Fraud Theft Legal Requirements Liability Board Turnover	Low	<p>The Agency has Liability Insurance.</p> <p>Governance Policies and Procedures are in place.</p> <p>Board Member Recruitment and Screening is conducted by the Board Nominating Committee with recruitment of preferred representation on Board.</p>	<p>The Board is self-monitoring and the annual survey regarding the Board members' knowledge of Governance principles is reviewed by the Board Executive Committee.</p> <p>EMYS Board amended its membership policy re: improving timeliness around identifying Board vacancies, clarifying the skill matrix to be used for purposes of recruitment and the posting methodology. Similar improvements are also intended to inform the development of the slate of officers</p>

Staff Training and Development Plan

This plan outlines the agency's mandatory as well as other forms of staff training, ensuring that staff are up-to-date as per legislation and other requirements to include technology training. In addition, as EMYS continues to implement evidence-based (EBP) and evidence-informed practices (EIP), 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.

Mandatory Training

Type	Staff Group	Purpose/Reason	Update
Crisis Prevention Intervention (CPI)	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.
Cardiopulmonary resuscitation (CPR)	Residential, Day Treatment, Developmental Services and VIP staff	To ensure staff can act as first responders to emergency situations	Staff continued to be trained as is required. This will now included Strengthening Families Staff.
First Aid	Residential, Day Treatment, Developmental Services and VIP staff	To ensure staff can act as first responders to emergency situations	Staff continued to be trained as is required. This will now included Strengthening Families Staff.
Mental Health First Aid	Administration team (4 staff), Peer Support Workers (3 staff)	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	7 staff have received training. Additional training will be decided on a case-by-case basis
Financial Training for Board Members	Board Members	To ensure that the board is knowledgeable of Ontario's Not-for-Profit financial regulations	The Finance Manager provided the training to the Board in regards to the CPA Ontario's Not-For-Profit Finance Leadership Day seminar
Universal Health Precautions	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 will be provided on an as needed basis.
Accessibility for Ontarians with Disabilities Act (AODA)	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.

Harm Reduction Training	All Service-Providing Staff	To provide all relevant staff with the skills and resources to support youth using substances	Staff recently received this training on the June 24, 2015 at an all staff event. This was followed by residential staff attending training on overdosing. The committee plans to support further training in this area. A Harm Reduction Policy and Procedure has been approved by the Board of Directors and is now part of our P&P manual. The committee will be meeting to discuss future training plans.
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Ongoing training to maintain fidelity to existing Evidence Based Practices and Evidence Informed Practices

Type	Staff Group	Purpose/Reason	Update
Dialectical Behavioural Therapy (DBT)	Relevant Access and Counselling, Residential and Day Treatment staff	To provide re-fresher training and consultation in order to maintain fidelity to the model	Articles are being reviewed to address any need for programmatic enhancements Staff booster trainings continue, including lunch and learns A review of overall staff needs will be conducted to decide how best to use the DBT consultant going forward
Solution Focused Brief Therapy (SFBT)	Home Base counselling staff and 'what's up' walk-in staff	To provide all staff with the prerequisite tools and concepts to intervene effectively	The champion has completed training in advanced level SFBT Articles are being reviewed to address any need for programmatic enhancements Staff booster trainings continue Learning materials (e.g. books, videos) continue to be purchased. A consultant has been identified and has signed a contract to consult with the relevant teams until March 31, 2016. Staff will be bringing in audio/and or video recording of sessions for

			consultation
Applied Behavioural Analysis (ABA)	Developmental Services Team	To provide developmental services staff with a universally recognized evidenced based model for intervention	<p>Addition of ABA has been added to our summer respite program in partnership with Kerry's Place for Autism</p> <p>There has been a soft launch of our Saturday ABA program</p> <p>A program year plan (September 2015 – June 2016) has been developed for the ABA consultants as well as the timing of booster sessions for staff</p> <p>Established ABA team meetings Ensured that individual supervision reviews ABA protocols</p> <p>Articles are being reviewed to address any need for programmatic enhancements</p>
Cognitive Behavioural Therapy (CBT)	Priority Access for Schools	To provide specific counselling staff with a universally recognized evidenced based model for intervention	<p>The champion and supervisor are working on finalizing a fidelity tool</p> <p>The champion is planning a booster training</p> <p>A Lunch n' Learn is being created and will be hosted in the Spring of 2016</p> <p>Learning materials (e.g. books, videos) will continue to be purchased</p> <p>An adaptation of CBT for Autism Spectrum Disorder (ASD) training for Developmental Services will be created and conducted upon request</p> <p>Articles are being reviewed to address any need for programmatic enhancements</p>
Motivational interviewing (MI)	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	<p>CMHA has provided training to day treatment as per our knowledge exchange agreement with them (we are training them in DBT). Further Training Plans will be made with our various EMYS programs</p> <p>A champion will be identified in</p>

			the spring of 2016
Trauma	All counsellors working with youth who have experienced trauma	To provide specific counselling staff with a universally recognized evidenced based model for intervention	A champion has been identified and will be participating on the EBP committee An environmental scan will be planned in the Spring of 2016 to identify staff training needs along with a literature review
Aggression Replacement Therapy (ART)	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	A champion has been identified and will be participating on the EBP committee The champion will examine training needs and other supports for the next fiscal year

[Appendix 10- EBP related documents]

Diversity and Engagement Training

Type	Staff Group	Purpose/Reason	Update
LGBTQ	EMYS staff and Joint team	To increase services 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.	All staff have received training through Rainbow Health Ontario An all agency diversity training was held in December with a follow up session to be held in the spring of 2016
Youth Engagement	For the RYTE team	To provide staff with skills and plans to move youth engagement theory into practice	A champion needs to be identified and will participate on the EBP committee The plan will be to provide a team training on youth engagement practices as well as examine trainings needs and other supports for the next fiscal year

Technology Training

Type	Staff Group	Purpose/Reason	Update
Client Records (CR) Training	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 continue to be trained as is required.
Outreach Records (OR) Training	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 continue to be trained as is required.
Microsoft Office Applications Training	Data Management Team	To ensure all data management staff are trained in advanced Excel software skills	Our Finance Manager has begun providing training on Excel to the Data Management Team (DMT). We will assess if there are any

			outstanding needs after this is completed.
SharePoint, 2013 Administrator Training	Kam & Tanya	To use SharePoint for various needs of agency including upcoming e-library & lead agency web portal	New development as of mid year review and is being monitored by the IT Manager
Microsoft Dynamics Preliminary Training	Lead Agency Team, Kam, Tanya, Myra and Claire	To understand basics of Microsoft Dynamics for correlating needs of lead agency operations and help with building a CRM portal	Identified during Mid year and the IT manager is taking a lead on acquiring information for the identified Lead Agency personnel

Service Plan Goals 2016-2017

Goal	Activities	Timeframes	Assigned to:
Corporate Services and Lead Agency			
Strategic Planning Process	Flowing out of the work from the Strategic Clarity process Robin Cory has been retained to work with the committee to create the agency's Strategic Plan through by-weekly meetings with the committee. The Plan will then be delivered to the leadership team, the board and the agency as a whole.	March – June 2016	Chris Brown and members of the Strategic Planning Committee
Lead Agency Readiness	Continue governance work with Board and Institute on Governance – Phase 2 – Case Studies and Best Practices	June – November 2016	Claire and Roberta
	Analyze results from four working groups and regroup to further mapping, data and centralized point of access deliverables	May 2016	Roberta and team
	Staff French Language Service and Residential working groups. Receive reports as per next steps	Sept. 2016	Roberta and team
	Establish joint table with representation from health and education as per Community Mental Health plan deliverables Table Business Case to increase infrastructure development funding for 2016-2018	June 2016 April-March 2017	Darren/Janice W. Claire/Roberta

	<p>Develop and undertake a significant and major Youth and Family engagement strategy</p> <p>Undertake significant Lead Agency communication strategy vis-à-vis core service agency, community partners and the general public</p> <p>Participate at MCYS Partnership Table with Lead Agency consortium and various subcommittees.</p> <p>Develop corporate infrastructure capacity as per Lead Agency readiness assessment tool in the areas of -Performance Management -Financial Management</p>	<p>April 2016</p> <p>April-March 2017</p> <p>April-March 2017</p> <p>April-March 2017</p>	<p>Claire/Roberta</p> <p>Roberta and team</p> <p>Claire</p> <p>Claire and Director of Performance Management, Director of Corporate Services</p>
<p>Space</p>	<p>Space has been leased for a satellite office primarily for lead agency activities. Construction, painting, carpeting, and furniture purchases to be completed no later than April 15th, 2016. The space will be fully operational and occupied by April 29th, 2016.</p> <p>The Danforth site will be expanding to provide space to run the Youthcan [Appendix 3] project which is a collaboration between CAMH, Sick Kids, Toronto East General and East Metro Youth Services. CAMH is paying for the rent and staffing portion of the project and Toronto East General is paying for renovations and start up. East Metro will</p>	<p>March 1, 2016- June 30, 2016</p> <p>May 1, 2016</p>	<p>Judy</p> <p>David, Andrea, Judy, Kam</p>

	be managing the renovation process and the implementation of the project which includes hiring staff, meeting IT needs, etc.		
To set up IT infrastructure for the new downtown office for meeting immediate IT needs but also deploying IT solutions that will be flexible for addressing short term and long term needs.	The setting up of IT infrastructure for the new downtown office located at 365, Bloor street - East is a major IT project that will begin from scratch. This includes understanding business requirements, scoping and finalizing solutions, designing of IT solutions with an immediate, short term and long term focus, cabling, procurement of various IT equipment, setting up IT equipment, contracting internet service, setting up backbone IT network for connecting equipment, installing and testing wifi networks and also setting up other miscellaneous IT equipment such as interactive boards, projectors, printers etc. Then the networks will also be converged between the two EMYS offices to ensure business continuity. Staff training with a special focus on change management will also be strategized.	March to September, 2016	Kam
To set up SharePoint for 'communication and document based collaboration' needs of our agency	SharePoint implementation includes installing SharePoint within current EMYS hosted infrastructure, training staff, setting up of various intranets and extranets followed by communication to staff and other relevant stakeholders.	April 2016 to December 2016	Kam & Tanya
To reduce EMYS Cloud Storage costs	EMYS will deploy a state of the art cloud storage system which not only will save hundreds of dollars on an annual basis but also provide feasibility to implement folder based collaboration with more than 3000 users across Toronto.	March to September, 2016	Kam
To replace staff laptops that are under-performing	A total of 50 laptops were purchased in March which will be distributed to staff who are overdue for replacement and to staff whose laptops are under-performing.	March to May, 2016	Kam
To setup an Unified Communications system that will address voice and video collaboration needs	After 3 months of exploration and research, early March, 2015 EMYS decided to invest on an exclusive CISCO – Voice and Video Collaboration Hybrid System with BE6K and Telepresence server that will address immediate, short	March 2016 to March, 2017	Kam

	<p>term and long term needs.</p> <p>The following are the immediate needs that will be met by this CISCO solution:</p> <ol style="list-style-type: none"> 1. Replace legacy phone system 2 Allow for video and audio teleconferences for the Board, lead agency meetings, internal meetings, etc. <p>This is a major IT project that will be thoughtfully implemented with a special focus on change management for staff</p> <p>Improve end user experience of all IT services and systems and also enhance IT capacity within the agency Consult with Clinical Managers to compile IT improvement areas.</p> <p>Obtain feedback from staff regularly.</p> <p>Review IT policies and procedures with a deeper focus of improving efficiency of IT systems and services</p>		
To review and revise our current Volunteer policies and programming opportunities	Recognizing the discrepancy regarding the definition of volunteer activities and accountabilities between United Way, City of Toronto and Canadian Centre for Accreditation, revised policies will be developed to meet all funders' criteria.	March 2017	Dawn and Andrea
Service Delivery			
To develop an action plan to enhance Family Engagement throughout the agency (all programs)	An Action plan will be developed to identify the direction within the agency including the development of policies and procedures related to enhancing Family engagement	June 2015	Chris/Dawn/ Likwa
Implement services specific to Transitional Aged youth (TAY)	Utilizing RBC funds (proposal in submission via Oolagen) to provide walk in services for TAY	Nov. 2016	Myra /David
Negotiate with United way as per the roll out of their new strategic plan	Submit letter of intent for anchor agency and await outcome	May 2016	Janice
Enhance our position as the go to organization for trauma counselling and other services related to Gender based violence	Develop a scalable response for Ontario regarding Human sex trafficking [Appendix 11]	Sept. 2016	Myra
Outcome Measurement	Determine the most suitable mental health screener and assessment tool(s) Evaluate ongoing use of CAFAS, feasibility of training all staff in InterRAI as well as PCOMS and determine the best tool(s) for outcome evaluation for	Sept. 2016 June 2016	Alex, Myra and Chris

	<p>YOWS</p> <p>Finalize tools and protocol for dissemination of Client and Family Satisfaction, Staff Engagement Survey and Referral Source Survey</p>		
OR expansion	<p>Given the expansion in April 2016 of 5 additional regions with 14 new workers across the province, EMYS will expand the community of practice and provide training and support to all YOWs across the province</p>	April 2017	Janice and Likwa
Roll of FLS orientation training to all staff	<p>Enhance staff understanding of the need to be responsive to French Language clients</p>	Sept. 2016	Myra and Janice

Appendix 12 provides a charted timeline for the 2016-2017 goals.

List of Appendices

1. Toronto Region Core Services Delivery Plan and the Community Mental Health Plan
2. Infrastructure Capacity Proposal
3. National YouthCan research study
4. Family Engagement Survey
5. Innoweave Clarity Impact Statement and Theory of Change
6. FLS Compliance Report
7. IT Updates from Mid year Service plan
8. CAFAS Aggregate report
9. Program reviews

Program Overviews

9a-Applied Behaviour Analysis

9b Gender Based Violence

9c Day Treatment Program

9d-Newcomer Program

9e Priority Access for Schools (PAS)

9f Residential Program

9g Brief Services and “what’s up” walk-in

9h- Whatever It Takes Program (WIT)

9i- Youth in Transition Program (YIT)

9j- Youth Outreach Workers Program (YOW)

10. Evidence Based Program related documents
11. Human Sex Trafficking/Gender Based Violence proposal to MCYS