

— VIRTUAL SYMPOSIUM —

Responding to Complex Needs Among Children & Youth in Ontario: *Catalyzing System Solutions*

October 18th, 2024



Presented by:

POLICY BENCH
Fraser Mustard Institute for
Human Development



With Speakers From:



Dnaagdawenmag Binnoojiiyag
Child & Family Services



Acknowledgements

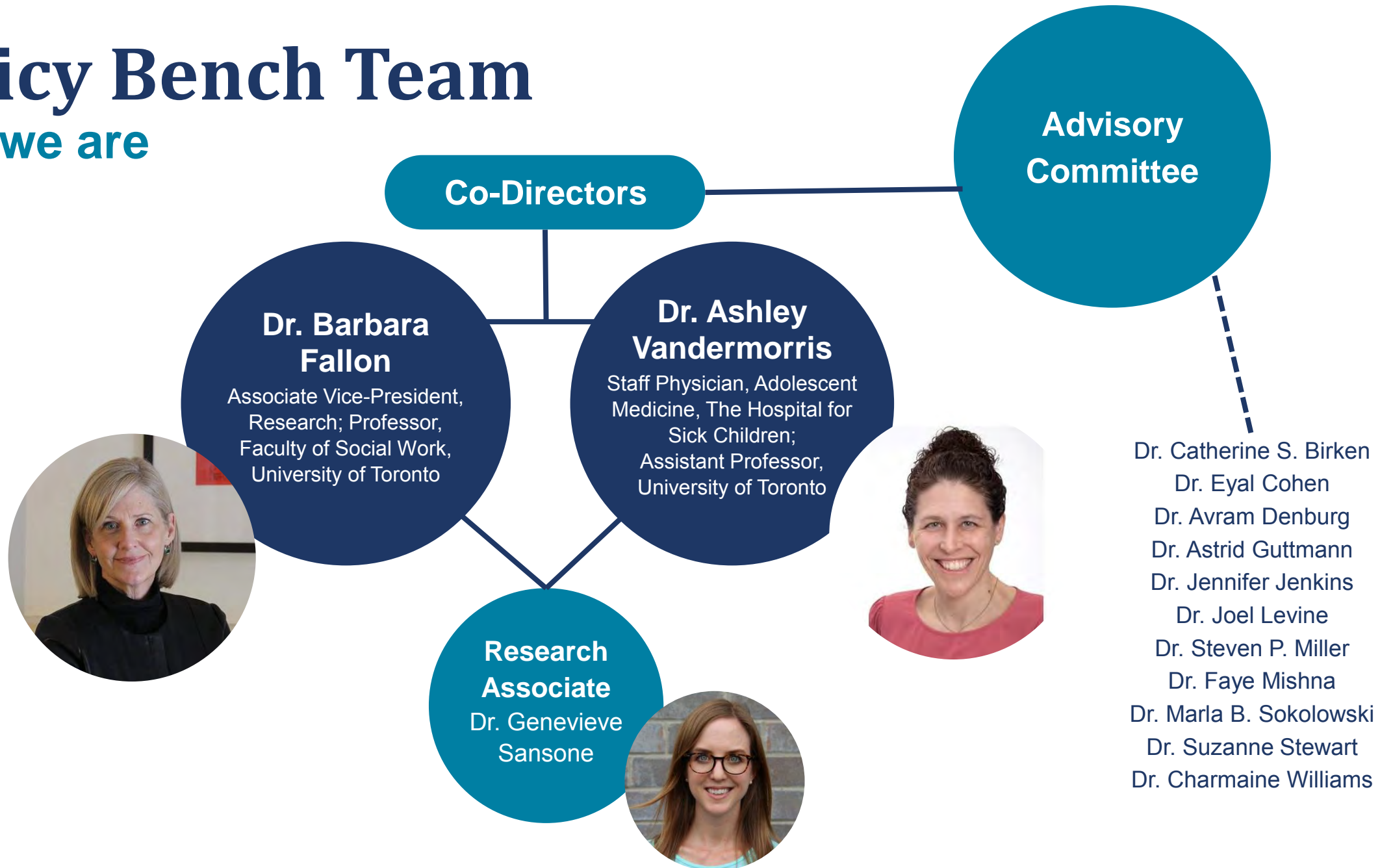
We recognize this land on which we have gathered today and the enduring presence of Indigenous peoples connected to, and on this land. For thousands of years it has been the traditional land of the Huron-Wendat, the Seneca, and the Mississaugas of the Credit and is still the home to many Indigenous people from across Turtle Island today.

We are grateful to have the opportunity to work on this land.



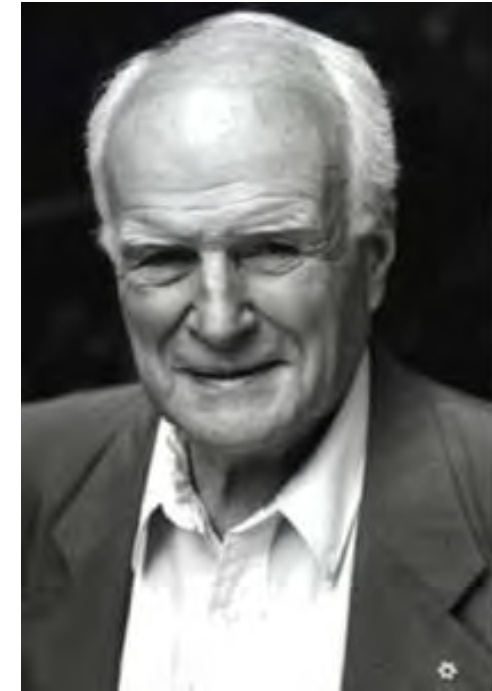
Policy Bench Team

Who we are



The Fraser Mustard Institute for Human Development Policy Bench

- The **Policy Bench** is an initiative of the **Fraser Mustard Institute for Human Development (FMIHD)**. Dr. J. Fraser Mustard (1927-2011) galvanized the international community with his belief that interventions in the early years of life offer unparalleled potential for improved quality of life.
- The FMIHD honours Dr. Mustard's legacy through key initiatives such as the Policy Bench that support the University of Toronto academic community by providing **transdisciplinary opportunities for collaboration and knowledge mobilization** in the area of human development.
- The Policy Bench brings together leaders at U of T and SickKids with transdisciplinary expertise from an array of academic disciplines (i.e., health, psychology, education, economics and medical sciences) to support **optimal human development and health equity across the life course**, from the early years into adulthood.
 - This involves the synthesis, creation and dissemination of knowledge designed to assist decision makers, practitioners and relevant stakeholders in making evidence-based policy decisions that improve outcomes for children and youth.



“Canada’s tomorrow depends on our ability to leverage what we know into policies and practices that benefit children today.”
– Dr. J. Fraser Mustard

Symposium Overview & Objectives

- This symposium brings together experts from the domains of child welfare, health and medicine, and education to offer different perspectives on the issue of how systems can better respond to complex needs through an integrated approach
- Panelists will present the latest evidence and observations on the challenges experienced by children and families with multiple complex needs in Ontario as well as findings from promising clinical, provincial, and community-based programs that aim to provide support to this population

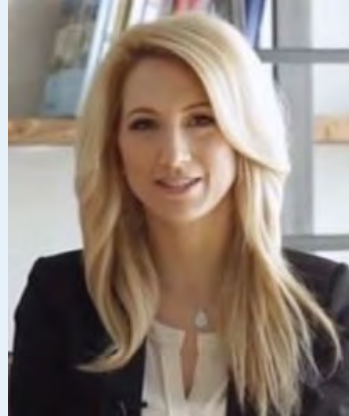
Learning Objectives:

- ✓ Understand complex behavioural and mental health needs and the current context around this issue in Ontario from different perspectives
- ✓ Identify examples of models, programs and other approaches to address complex needs
- ✓ Recognize the remaining barriers and gaps in accessing needed services and supports
- ✓ Generate potential solutions and next steps at a broad systems level

Panelists



Amber Crowe
Executive Director
of Dnaagdawenmag
Binnoojiiyag Child &
Family Services



Joeline Huber
Executive
Director,
ABILITY
program,
SickKids



Kathryn Decker
Director,
Extensive
Needs
Service,
Holland
Bloorview



Deanna Swift
Mental Health
Promotion
Area Lead,
School
Mental Health
Ontario



& Nicole Staples-Dorey

Developmental Case Manager,
ABILITY program,
SickKids



& Irene Drmic
Clinical
Director,

Extensive Needs Service,
McMaster Children's
Hospital



& Heather Carter

System Collaboration and
Partnerships Area Lead,
School Mental Health Ontario

Symposium Format & Schedule

Friday October 18th, 2024
10am-12pm

- Welcome and Overview
- Presentations (15-20 mins each)
- Q & A Session

Questions: Please
use the Q&A box to
submit questions
anytime!



Moderator: Jama Maxie

Clinical psychology
graduate student and
lived experience expert

Strengthening System Responses to Complex Mental Health Needs Among Children and Youth

Amber Crowe

Policy Bench Virtual Symposium
October 18th, 2024



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Fraser Mustard Institute for
Human Development

Supports and Systems to Respond to
Complex Needs Among Children and Youth
in Ontario



Policy Brief

June 2024



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TORONTO

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Fraser Mustard Institute for
Human Development

What do we mean by ‘complex needs’?

- Multiple terms used in the literature
 - E.g. complex needs, complex care needs, complex mental health needs, multiple complex needs, special needs, high needs
- No standard or agreed definition
 - Can be subjective and context dependent
 - May not fit into existing diagnostic categories or criteria
- Broadly speaking, refers to children and youth who:
 - Experience multiple or co-occurring challenges or needs (not just one or two); that are
 - Significant or high level; and chronic or ongoing; and that
 - Cross multiple service sectors or life domains and cannot be met by individual sectors alone
- In this policy brief:
 - We **are** focusing on children with complex *mental health and behavioural* needs
 - E.g. a child with a developmental condition such as ADHD or autism along with a co-occurring mental health condition such as anxiety or depression
 - We **are not** focusing on children with complex *medical* needs (i.e. medical complexity)
 - E.g. a child with chronic health conditions requiring specialized care, with high health care needs and functional limitations



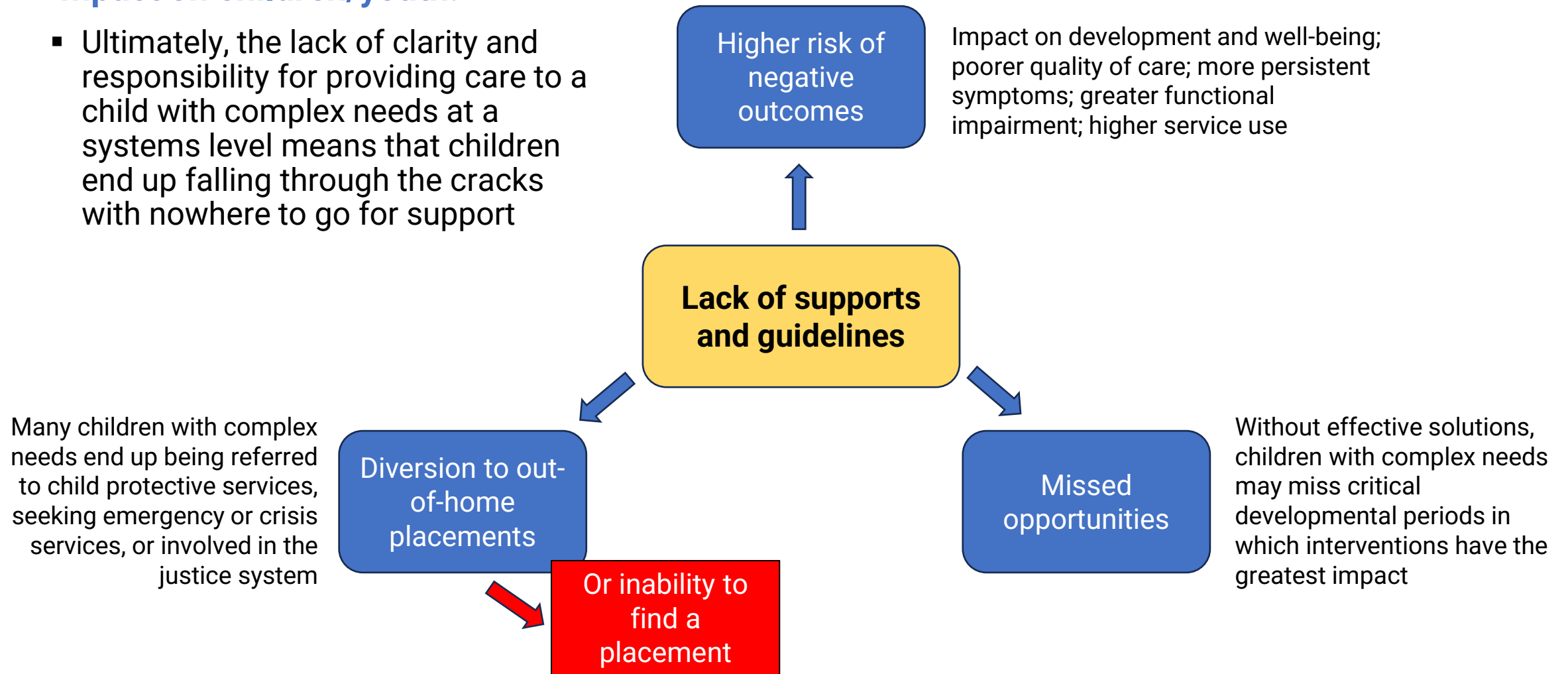
What is the issue?

- Inadequacy of systems (health, social, education, child welfare) to support children and youth with complex needs
- The prevalence of complex needs among children and youth in Ontario appears to be rising, but they are not provided with adequate supports and families continue to experience challenges with navigating various systems and accessing needed services
- **Why is this happening?**
 - Complexity of the child's condition(s) can mean they are excluded from or denied access to services
 - Lack of resources and capacity of service providers
 - Lack of evidence and guidance for both families and practitioners
 - Lack of coordination and integration across systems
 - Impact of COVID-19 – breakdown in services led to increase in demand, along with more acute mental health needs

Why is it important?

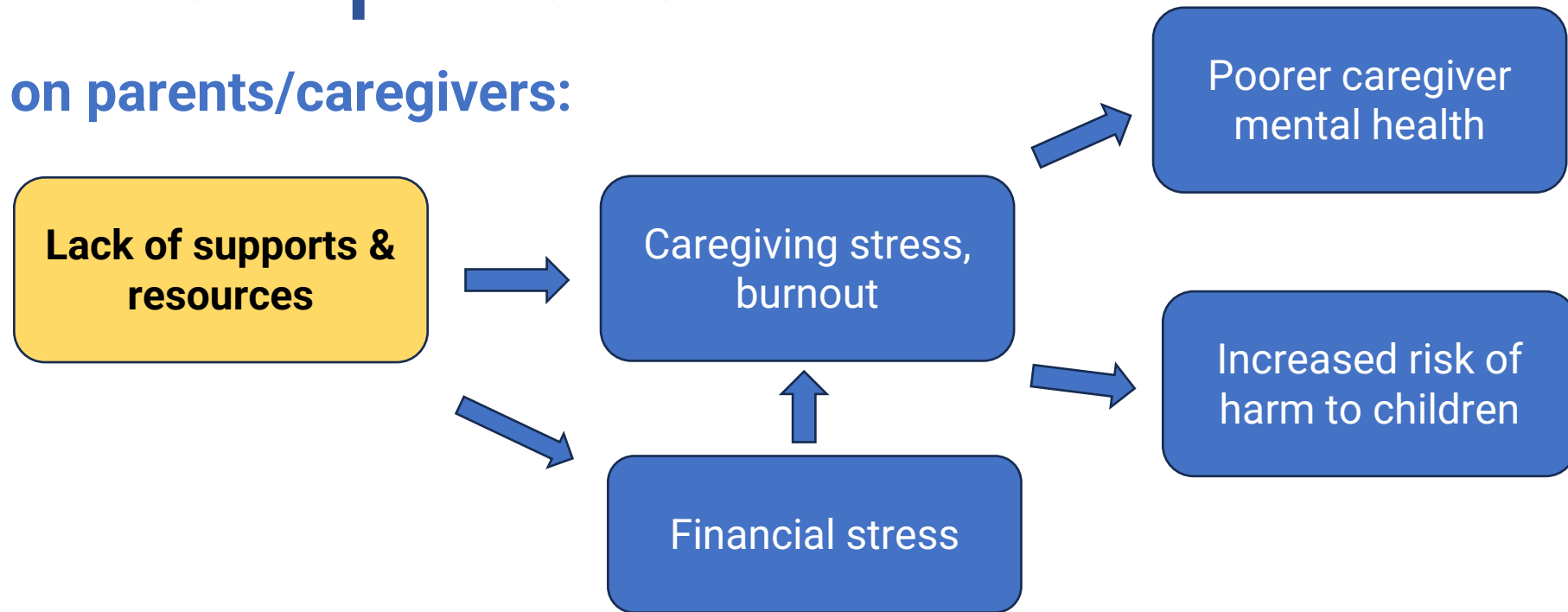
Impact on children/youth:

- Ultimately, the lack of clarity and responsibility for providing care to a child with complex needs at a systems level means that children end up falling through the cracks with nowhere to go for support



Why is it important?

Impact on parents/caregivers:



Impact on racialized/Indigenous families:

- Indigenous and racialized children and families already face discrimination and barriers in access to culturally relevant and appropriate services
- These challenges and barriers are amplified for Indigenous children with complex needs

Research Questions



Primary Research Question:

- How can systems can best support children with complex behavioural and mental health needs to improve health, social, developmental and other outcomes and reduce harm?

Additional Research Questions:

- What models or approaches have already been implemented in Ontario or other jurisdictions and is there any evidence of their impact?
- What can we learn from the literature on existing approaches to support children with complex needs and how can we use this knowledge (or lack of information) to help inform or accelerate future efforts and interventions?
- What are the barriers and challenges that prevent children and families from accessing supports and services?
- What other factors might play a role in the impact of interventions for individual children or families?
- What approaches or factors should be considered to support children from racialized and Indigenous families?

Objectives

Overall aim: to inform the development of evidence-based, cross-sectoral solutions to support optimal development and health equity for children and their families experiencing complex needs in Canada

Specific Objectives:

- To identify needs, challenges, and vulnerabilities among children with complex mental health and behavioural diagnoses in Canada as well as existing gaps in knowledge around how to address these needs at a systems level
- To examine the literature on opportunities to strengthen supports for children with complex mental health care needs through early prevention and intervention strategies and any evidence of their effectiveness
- To provide transdisciplinary perspectives on the issue of how systems (health, social, educational) can best support children with complex needs and develop insights to inform future policy and practice

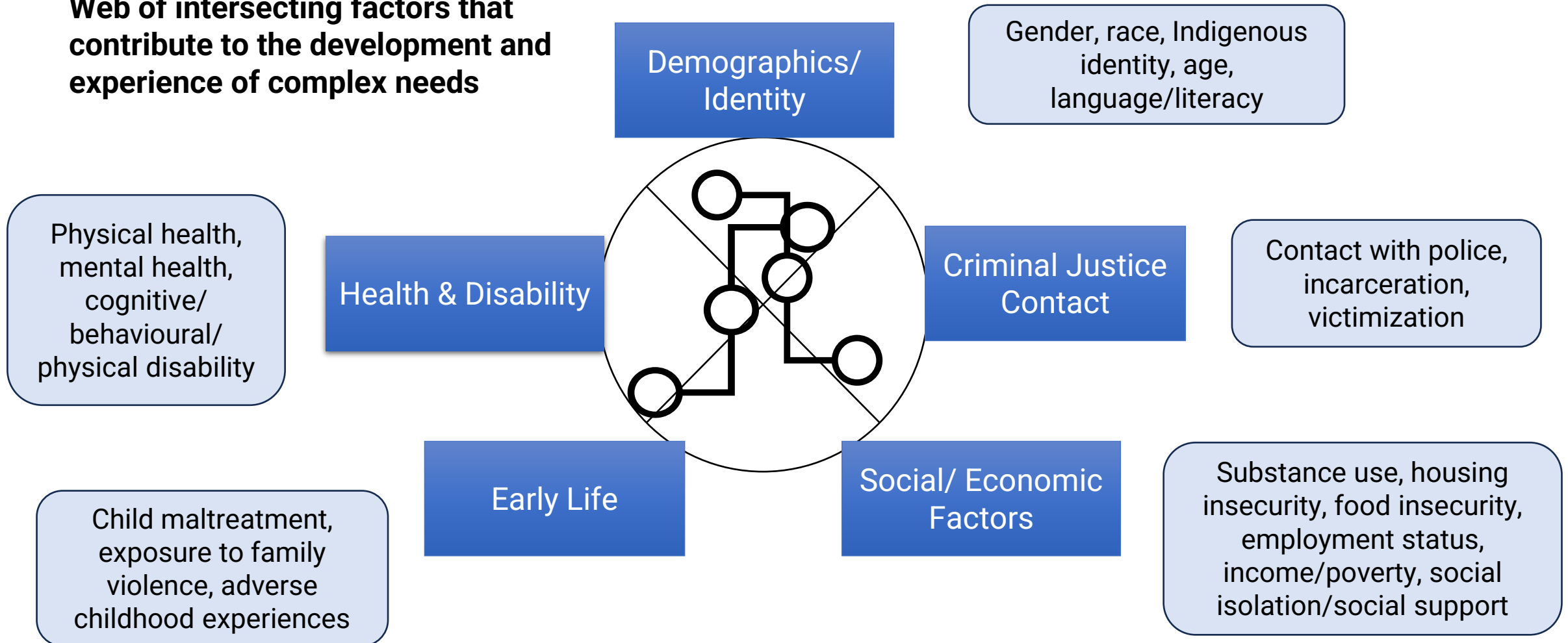
Background: Understanding Complex Needs

- The challenge of responding to complex needs can be further complicated by other intersecting factors that contribute to the development and maintenance of these needs
- Includes factors that directly impact the child's functioning or that affect the family's ability to access services or manage the child's needs



Background: Understanding Complex Needs

Web of intersecting factors that contribute to the development and experience of complex needs



Adapted from Baldry & Dowse (2013)

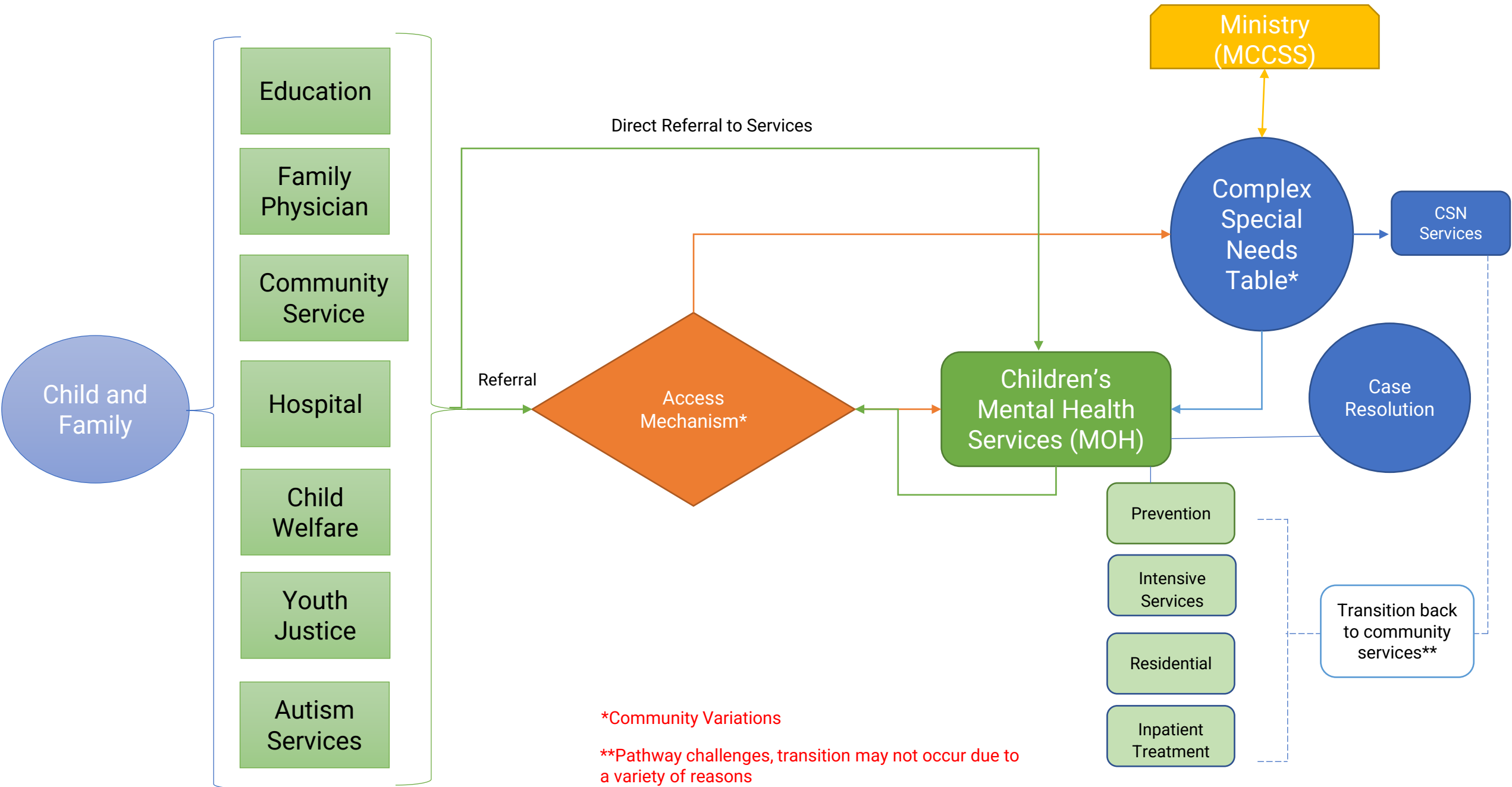
A brown teddy bear is sitting on a dark, mossy rock in a forest. The bear has a white muzzle and a dark brown nose. The background is a blurred green forest.

Prevalence of Complex Needs

- Difficult to estimate prevalence due to inconsistencies in definitions and lack of integrated data collection
- In Ontario, at least 10% of children & youth seeking mental health services estimated to have increased complexity
- In other provinces, 10-17% of all children/youth estimated to have complex needs
- Prevalence/risk is likely higher among certain sub-groups:
 - Children in child welfare system
 - Indigenous children

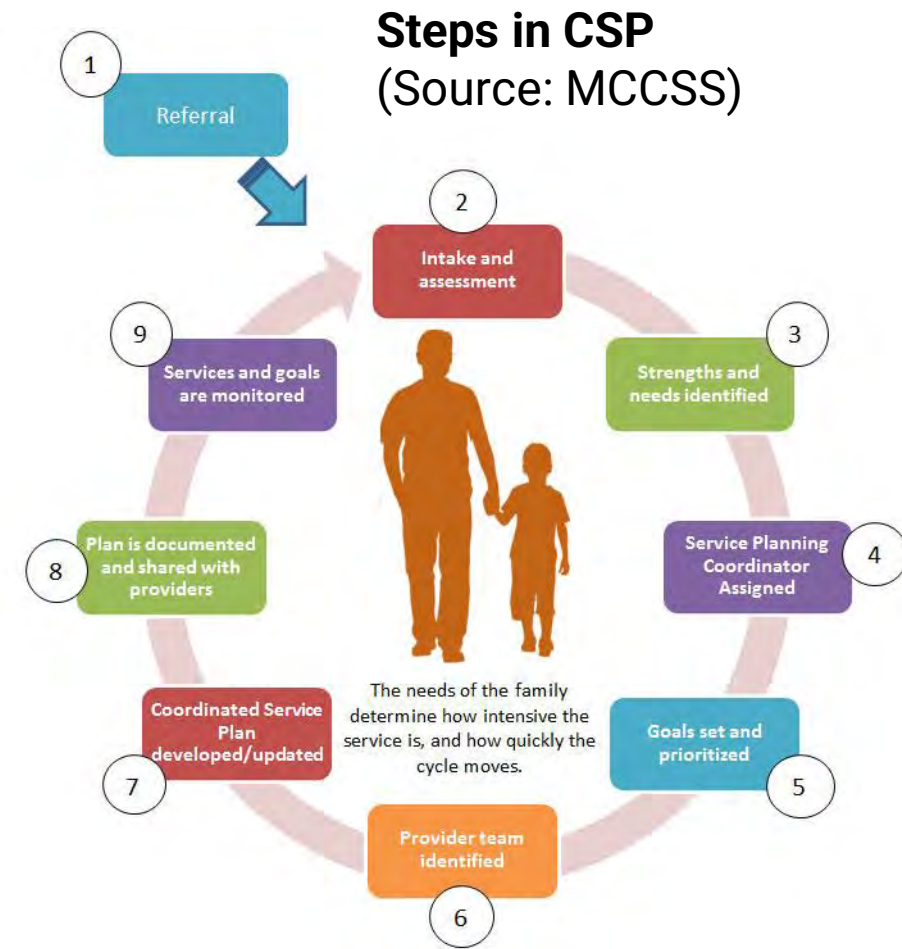
Services in Ontario





Examples of Services in Ontario

- **Coordinated Service Planning (CSP)**
 - Dedicated service coordinator works with families with children with complex needs to help connect them to appropriate services and supports and develop a holistic, coordinated service plan that responds to their individual needs and goals
 - Available in 34 regions across the province
- **Community Consultation and Assessment Service (CCAAS)**
 - Provincial resource for service providers working with children and youth with complex mental health needs
 - Provides consultation service for providers and assessment service for families
- **Child and Parent Resource Institute (CPRI) (London, ON)**
 - Offers highly specialized programs and services for children and youth with complex combinations of special needs (e.g. inpatient and clinical services, autism services, clinics for children with behavioural and mental health disorders)
- **Extensive Needs Service**
 - New pilot program offered through 3 children's hospitals in Ontario to support children with complex behavioral, developmental, medical, social and mental health care needs
- **Whatever it Takes Service – Lumenus (Toronto, ON))**
 - Offers clinical support and facilitates collaboration of service providers for children with complex clinical needs that cross various sectors (i.e. health, education, youth justice, child welfare, child mental health) to help close gaps in service delivery



Findings from the Literature



Systems of Care

- Comprehensive spectrum of mental health and other services, organized into a coordinated, integrated network designed to meet the multiple and unique needs of children with complex health and mental health conditions
- Identified by researchers in Canada and other jurisdictions as a key component in improving outcomes for children and youth with complex needs
- Parents have also highlighted the need for a system of care that provides coordinated services from a multi-disciplinary team working collaboratively across sectors (e.g. Leung et al., 2021)
- Large evidence base in the US showing improvements in home, community and school functioning
- Slower to develop in Canada; guiding principles still in development



WrapAround Programs

- WrapAround has become a model for serving children and youth with complex needs where services are “wrapped around” the child and their family
- Involves a collaborative process that aims to provide coordinated and individualized care and supports to meet the unique needs of children and their families who are involved with multiple systems
- Several agencies in Ontario offer a version of WrapAround; has been used in other provinces and in Canada’s youth justice system
- Growing evidence base in US; limited research in Canada
 - Systematic reviews show mixed findings on effectiveness
 - Some qualitative research and case studies demonstrating benefits for children and families in Canada

Key Features of WrapAround:

- Team-based
- Strengths-based
- Family-driven
- Individualized
- Culturally competent supports
- Community-based
- Supports are unconditional (not time-based)
- Outcome-based

Examples of Indigenous Programs

- **Niniijaanish Nide Program (My Child, My Heart) – Manitoba**
 - Supports families of children with complex care needs living on or off-reserve to ensure they can access services in their own community with delay, denial or disruption (following Jordan's Principle)
 - Provides basic care and culturally responsive supports to address health and social needs
 - Initial evaluations showed many benefits for children, their families, and the community
- **Ngaramadshi Space (NS) – Australia**
 - School-based health care model for students with externalizing behaviour problems
 - Holistic, multidisciplinary approach that integrates health, education and social care sectors
 - Grounded in Aboriginal framework
 - Effective in engaging communities and promoting collaboration across sectors



Phases of the My Child, My Heart program (Source: Canadian Home Care Association, 2017)

Evidence on Challenges & Barriers

- Overall, studies show that young people with complex needs and their families experience difficulties navigating and accessing services and that existing service structures are not responsive enough to their needs
- Barriers to optimal care and service delivery include:
 - Negative perceptions and discrimination
 - Lack of trust and fear of services/service providers
 - Confusion and difficulty navigating complex systems
 - Lack of continuity of care and challenges with transitions across services (e.g. between service systems or from child to adult services)
 - Inadequate training and cultural awareness of service providers
 - Lack of funding and resources
 - Lack of coordination between service providers/sectors



Elements of More Effective Service Delivery

What does the literature say about **system level responses** to improve services for children with complex needs?

- Need for early intervention and assessments to guide appropriate service plans
- Enhance the role of schools as a setting for interventions
- Ensure continuity of services and supports during transitions between schools, homes, care providers, and into adulthood



Elements of More Effective Service Delivery

What does the literature say about the role of **service providers**?

- Strengthen knowledge and training of service providers working with families and children experiencing complex needs
- Enhance cultural competency
- Focus on relational approaches to build trust and increase service engagement
- Follow a person-centered approach – allow children/youth to be involved in decisions around their own care



Elements of More Effective Service Delivery

What does the literature say about the role of **parents and caregivers**?

- Empowering parents to be informed and advocate for the services they need is key to improving outcomes for their child
- Provide parents with the tools and resources they need as caregivers
- Peer support can be beneficial; though evidence is inconclusive
- A care navigator may be helpful to facilitate parents' journeys and provide a single point of contact



Summary of Findings

- Overall, research indicates that multiple strategies are needed at the systems level, practitioner level, and family level to promote positive outcomes for children and youth with complex needs
- Literature supports a comprehensive and longer-term approach to address complex mental health needs that takes into consideration factors at multiple levels (i.e. social and environmental factors, family characteristics)
- Studies consistently identify family-centered care as critical - services should be structured around the individual needs of children, youth and families rather than requiring them to adapt to existing services
 - May require a 'fundamental shift' in the way services are organized (Klassman et al., 2024)
- Research also consistently highlights the need for cross-sector collaboration and greater coordination of services
 - Support for a systems of care approach such as the WrapAround model which integrates services into a single plan of care
 - But challenges around implementation and guidance remain

Conclusions

- Children and youth with complex needs and challenges are frequently identified but we still don't know the best way to support them to improve their trajectories
- Existing services remain fragmented; lacking an integrated and coordinated response in Ontario
 - As a result, children and families continue to experience challenges in accessing adequate supports, leading to inadequate care and unmet needs
- Policymakers and practitioners don't have clear evidence on best practices or guidance to inform system level change
- No simple solution or "one size fits all" approach
 - Complex issue that requires change at multiple levels
 - Need for innovative new approaches
- Whole systems approach – need for greater collaboration and partnerships across service sectors and government ministries with shared responsibility to meet children's needs
- However, systems-level change takes time – short term strategies are also needed



EXTENSIVE NEEDS SERVICE

Policy Bench: Fraser Mustard Institute for Human Development
October 18, 2024



Date

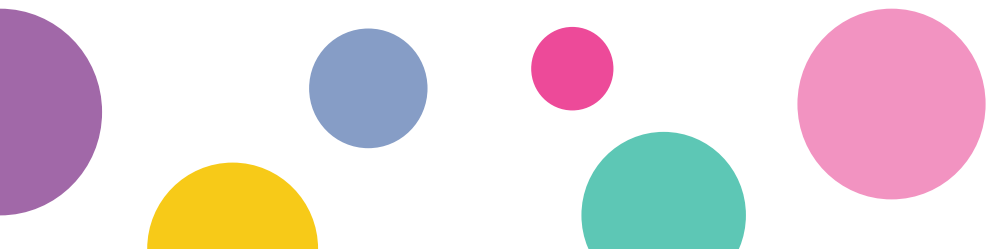
The Extensive Needs Service (ENS): A Primer

In 2021, the ENS program was proposed to support children and youth with neurodevelopmental, behavioral, and mental health challenges, as well as social vulnerabilities, and their families—whose needs had previously gone unmet.

A three-year, proof-of-concept project was jointly funded by the Ministry of Health (MOH) and the Ministry of Children, Community and Social Services (MCCSS).

In partnership, CHEO, Holland Bloorview, and McMaster Children's Hospital have developed a specialized support program to provide intensive clinical services to children with extensive needs and their families.

Multidisciplinary and interdisciplinary specialized professionals provide individualized assessments and intensive treatments focused on reducing challenging behaviors and addressing underlying mental health and medical concerns using a trauma-informed and holistic approach.



CHEO






Holland Bloorview
Kids Rehabilitation Hospital

**McMaster
Children's
Hospital**

Essential Elements for ENS Model Development

Essential Elements Identified:

ENS Examples:

				
<p>Family Centered: Strength-based, family centered approach with support for the family unit, not just the client.</p>	<p>Wrap-around: Wraparound, interdisciplinary service.</p>	<p>Ecological: Addressing ecological factors and diverse system level barriers.</p>	<p>Direct Care Access: Enhancing direct care access for children/youth, with right service at right time.</p>	<p>Community Network: Strengthen the existing network of community providers to support transition back to community.</p>
<ul style="list-style-type: none"> • Family Check-Up • Support for family navigation needs • Family goals and priorities addressed. 	<ul style="list-style-type: none"> • Multi/Inter-disciplinary team with team case conceptualization and regular team meetings 	<ul style="list-style-type: none"> • Explore and address barriers • Hired Health Equity Specialist: demographic data & social needs. 	<ul style="list-style-type: none"> • Direct services developed and treatment planning captured in Integrated Care Plan. 	<ul style="list-style-type: none"> • Engage all providers from start of ENS, and throughout service.

Components of Multi/Inter-Disciplinary Family-Centered Care Model

INTEGRATED CARE PLAN (ICP) & GOAL IDENTIFICATION	<ul style="list-style-type: none">• Family goals/priorities identified• Development of an Integrated Care Plan
MULTI/INTER-DISCIPLINARY CARE TEAM CASE FORMUATION	<ul style="list-style-type: none">• Case formulation by ENS multi/interdisciplinary team• Family Care Team identified (e.g., behavior therapist, mental health therapist, SLP, OT, etc.).
ASSESSMENT	<ul style="list-style-type: none">• Family Care Team completes needed assessments.
TREATMENT	<ul style="list-style-type: none">• Care team meetings to review treatment/goal progress• Formal care plan review meeting with family to review treatment/goal progress, as well as discharge planning
STEP-DOWN PHASE	<ul style="list-style-type: none">• Generalizing goals and building capacity with caregivers and community (as needed).• Appointment frequency winds down.
DISCHARGE	<ul style="list-style-type: none">• Client will be discharged from service
POST-DISCHARGE CHECK-UP	<ul style="list-style-type: none">• Clients can reach out to a designated provider for questions/booster related to initial ENS goals.
HEALTH MAINTENANCE (*under development)	<ul style="list-style-type: none">• On-going light-touch services still TBD



We have partnered widely to enhance access to timely care in communities where our clients live

SURREY PLACE



NSS



Kids Enfants
Come First | avant tout



The results of the proof-of-concept phase
have been encouraging...



CHEO

Holland Bloorview
Kids Rehabilitation Hospital

**McMaster
Children's
Hospital**



Where to go from here:

Opportunities for enhanced services and system integration in the next phase of ENS



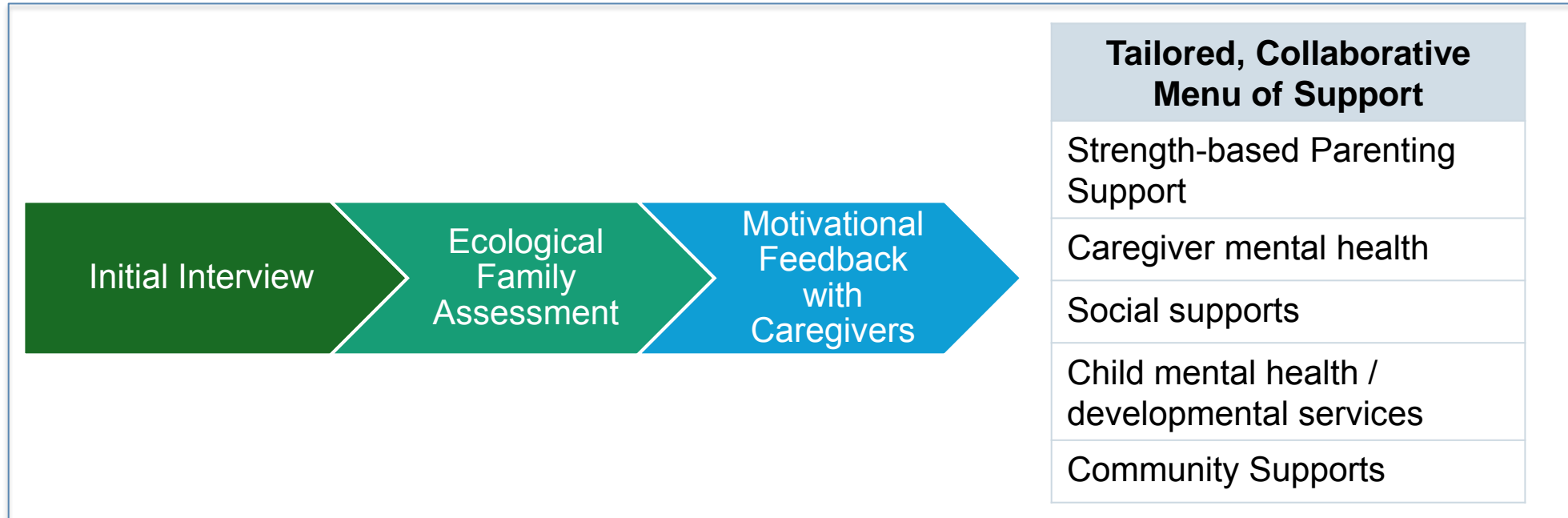
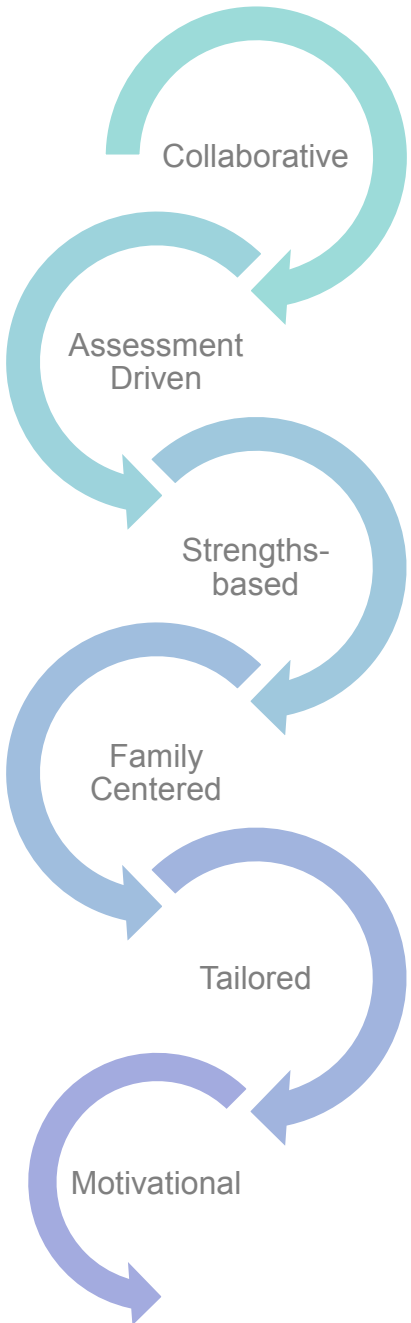
1. Enhanced Care for Families Through a Coordinated Approach

- Families in ENS receive support and treatment through psychologists, social workers, family therapists, and specialized coordinated service planners who act as a conduit to community-based services and supports across sectors
- We offer ACT (Acceptance and Commitment Therapy) groups for caregivers
- Crisis De-escalation training for parents and caregivers is available
- Siblings are supported through Child Life Specialists in both individual and group formats



Family Check Up (FCU)

- A brief, tailored, ecological intervention developed to decrease childhood emotional and behavioral problems and improve caregiver well-being



2. Continued Collaboration with the Child Welfare Sector

- We are focused on building partnerships with the Child Welfare sector to prevent out-of-home placements where possible and to support children and youth in care, with the goal of helping them return to their family homes, where appropriate.
- We are learning from our peers, such as the work led by John Clarke (McKenzie Health) and Child Welfare partners, to implement the Mobile Behavior Treatment Team. This team provides behavior treatment for children at risk of out-of-home care and works to stabilize and reduce challenging behaviors for those already living in out-of-home placements.



3. Develop Enhanced Partnerships with the Education Sector

- Children with complex needs are less likely to consistently attend school programs compared to their peers
- When children aren't attending school, the family system is at risk of breakdown
- We know that in many cases, when families apply for CSN funding, the child is not attending school
- We have seen early successes in collaborating with our school board partners and are committed to building more meaningful partnerships to support school attendance, safety, and meaningful participation

4. Partner Meaningfully with Adult Systems of Care to Support Transition to Adulthood (Including Supportive Housing)

- We recognize that the needs of youth with complex disabilities do not vanish when they age out of the pediatric system, but the service landscape in the adult sector is vastly different
- There is a need to establish clearer pathways between the pediatric and adult systems, as well as to develop genuine partnerships that work in unison for advocacy, government relations, and the provision of truly integrated care



Policy Bench Symposium

October 18, 2024



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en milieu scolaire
Ontario

Presenters



Heather Carter

Implementation Coach

Mental Health System
Collaboration & Partnerships
Area Co-Lead



Deanna Swift

Implementation Coach

Mental Health Promotion and
Literacy Area Co-Lead



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We work together with Ontario school districts to support student mental health



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School Mental Health Ontario



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Did you know?

- ✓ There is a provincial strategy created by School Mental Health Ontario and designed to help all school boards and remote school authorities with student mental health.
- ✓ Every school board in Ontario has a mental health & addictions strategy and action plan to support student mental health.
- ✓ Every school board has a mental health leader and a superintendent who leads the board strategy and action plan.
- ✓ Every school board has a school mental health implementation coach who helps with the strategy and managing tricky issues as they arise.
- ✓ There are resources available to support school/system level staff in promoting student mental health and well-being.



School Mental Health Ontario supports and services



**Provincial
leadership and
guidance**



**Implementation
coaching**



**Role-specific
resource
development**



**Role-specific
learning and
training**



**Mental health
promotion and
literacy programming**



**Brief, evidence-
informed clinical
protocols**



**Research,
evaluation and
monitoring**

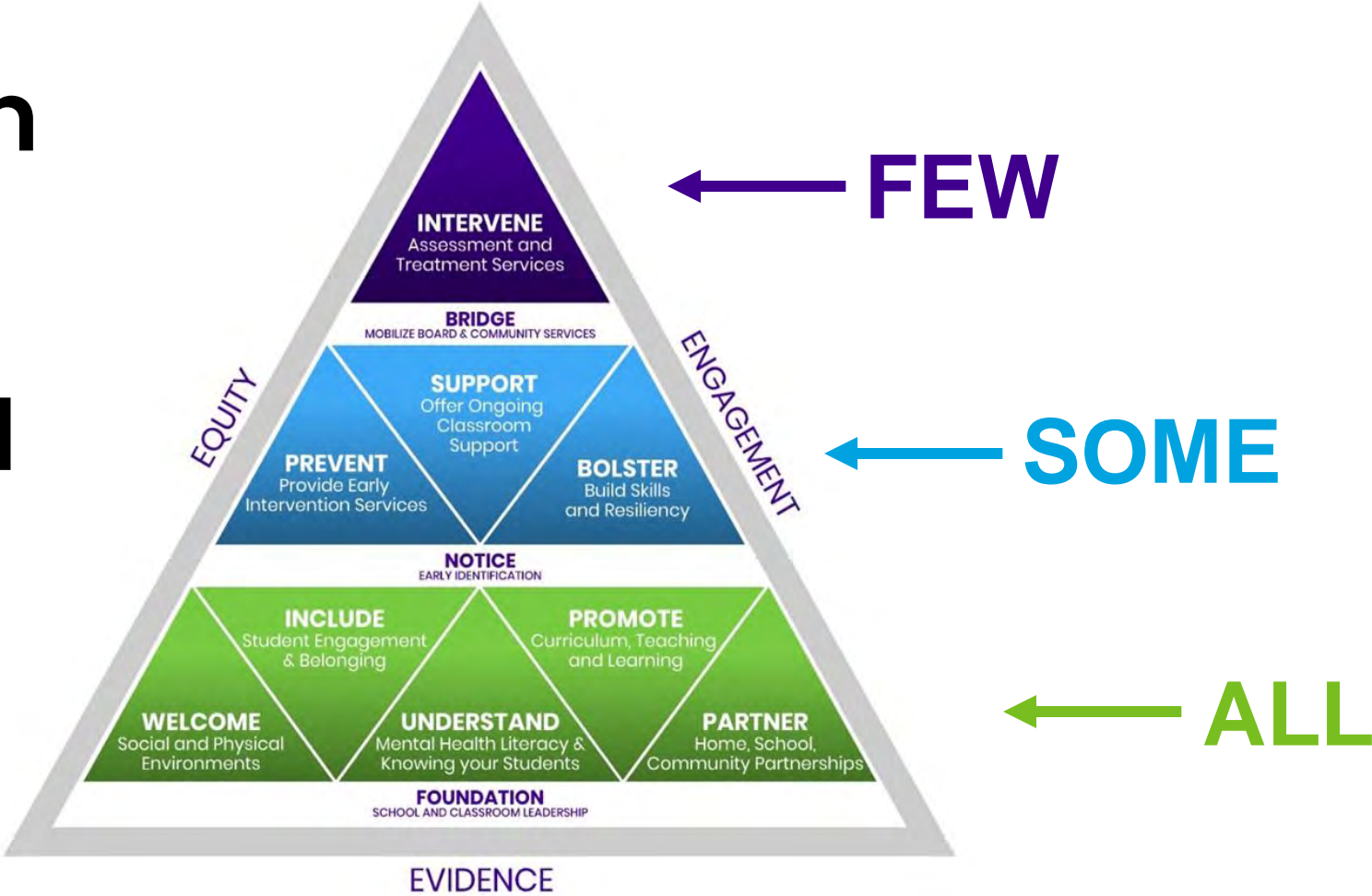


**System
collaboration and
partnerships**

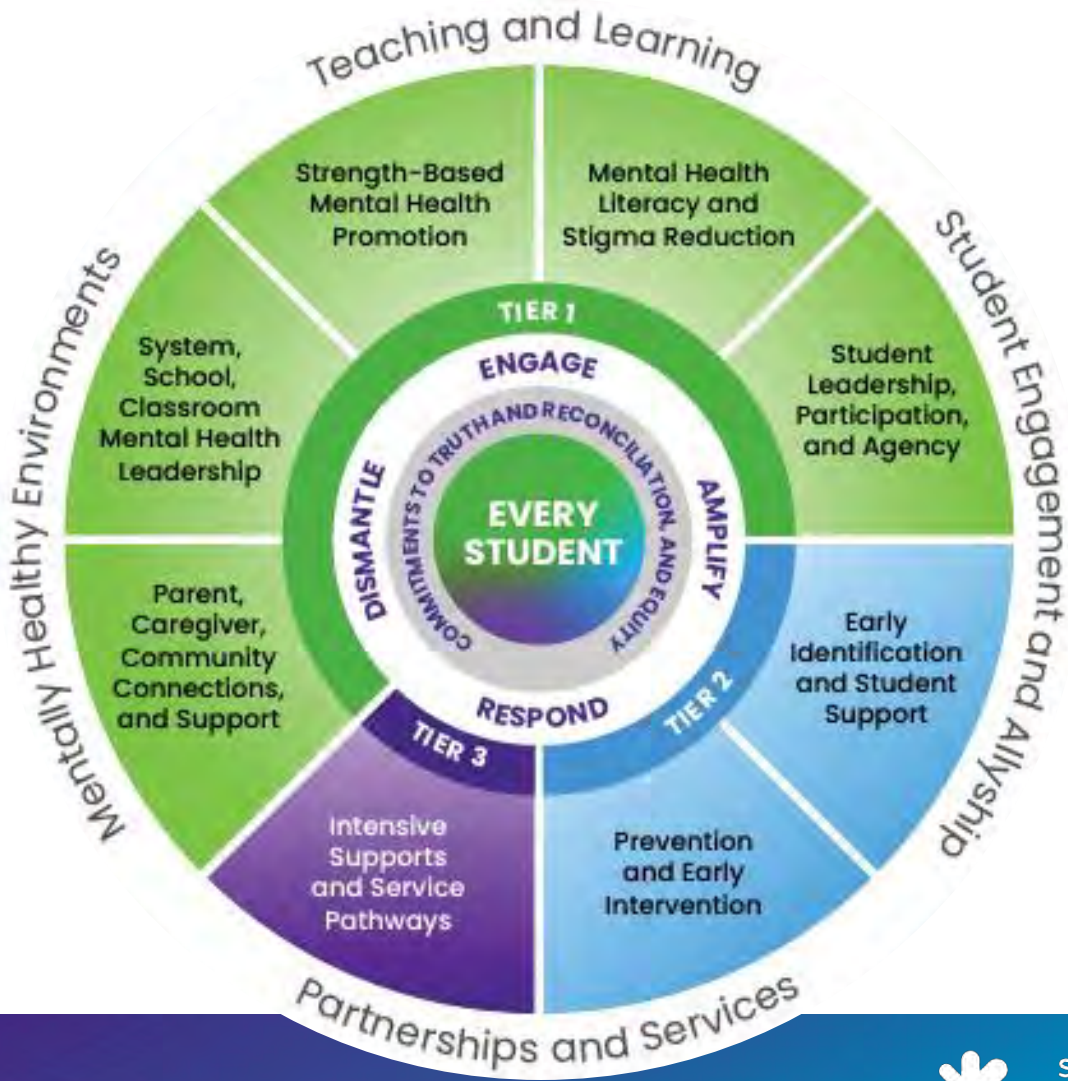


Tiered intervention

Our main role in school mental health is **promotion and prevention**



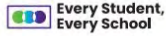
Every Student, Every School



Every Student, Every School

Contributing to an integrated system of care for child and youth mental health

Optimizing the Continuum of Student Mental Health Services Across a Multi-Tiered System of Support



Creating the circle of support

The team of professional and natural supports that can wrap around a student and their parent/caregiver(s) when they are experiencing mental health difficulties.



Schools work in partnership

- Multiple sectors come together to support young people with complex needs
- Education plays a role in supporting this and does this work in partnership with other sectors and organisations (e.g. Child Protection/Child and Family Wellbeing Agencies, Child and Youth Mental Health Agencies, etc.)
- May be informed by protocols, policy and program memorandums, local resources (e.g. Joint Protocol for Student Achievement, Right time, right care, etc.)
- Looks different across communities in Ontario

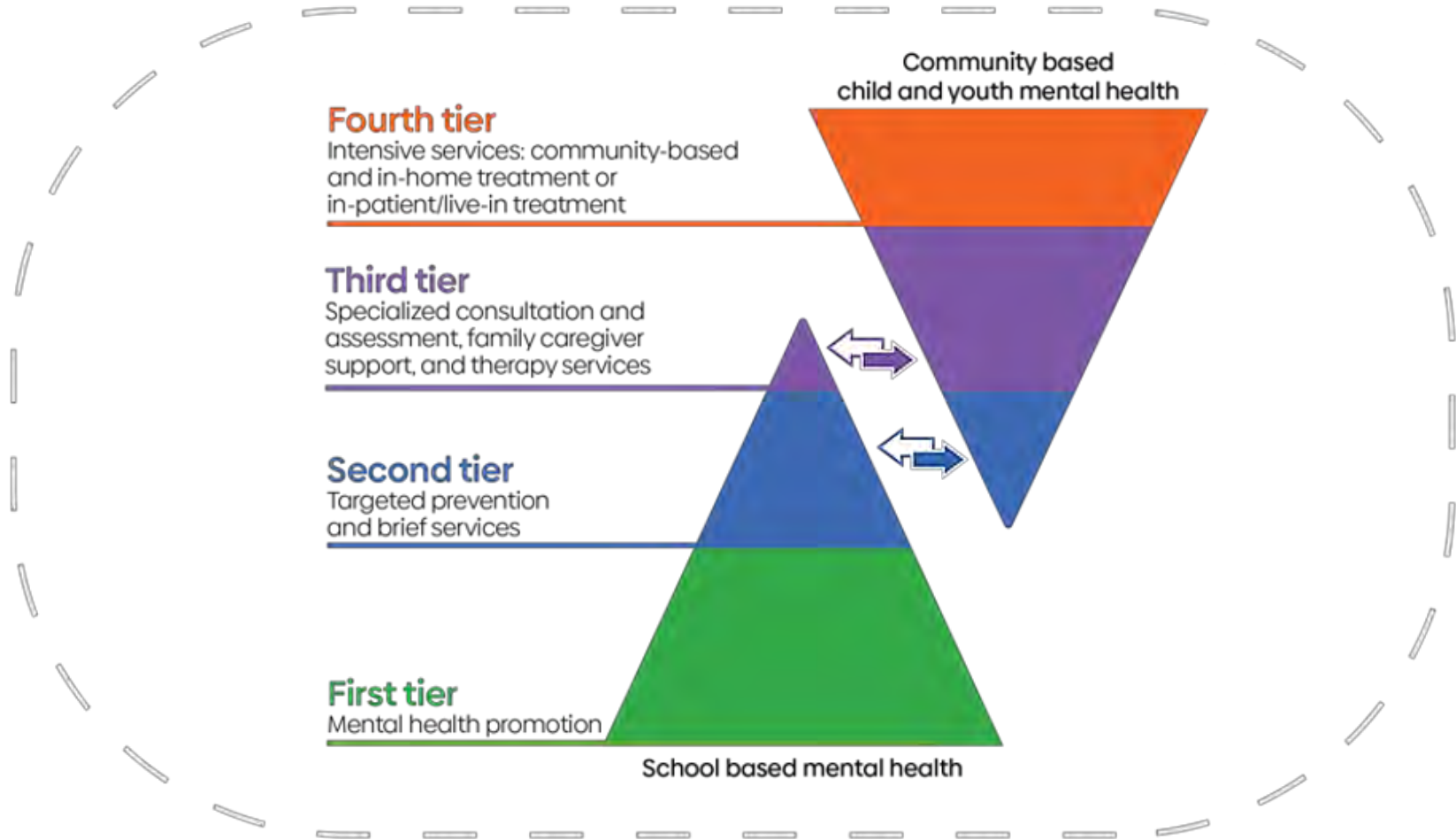


Timeline to Right time, right care (RTRC)



An integrated system of care

RTRC vision:



Right time, right care team



Lead Agency Consortium



Children's Mental Health Ontario



Knowledge Institute on Child and Youth Mental Health and Addiction



School Mental Health Ontario



Youth Wellness Hubs Ontario



Supporting
program
development



Supporting
program
development and
work with
communities

Threading it together

All sectors and partners help form and close gaps in circles of support which surround young people. We can collectively contribute to this by:

- initiating opportunities for communication and collaboration between students, caregivers, schools and agencies
- creating opportunities to centre the voices and needs of young people and their caregivers





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