

DESCRIPTION SCHEDULE

Organization Name: Contact Brant for Children's and Developmental Services

TPR #: 100925

Initiated In: 2019 - 2020

TP Subline and Name:

E645 - E705 – Coordinated Service Planning

Detail Code and Service Name:

F261 FASD Services

Legislation: Child, Youth and Family Services Act (CYFSA)

The Service Description Schedule is part of the contractual agreement between the Ministry and the transfer payment agency. This Schedule outlines the services that the Ministry is purchasing, with public funds, on behalf of the citizens of Ontario including specific expectations and conditions that apply, as defined in this document. The Service Provider will complete the activities as set out in the Ministry completed section of this schedule. The Service Provider will also complete the activities, in accordance with any additional requirements that may be set out in the Agency Completed section.

MINISTRY COMPLETED SECTION

Service Objectives:

This investment introduces new expectations regarding services being delivered by Coordinating Agencies in special needs service delivery areas.

Objectives are to:

- Build capacity of communities to respond to the needs of children and youth with FASD by hiring FASD workers who will provide support within the respective Coordinating Agency service area.
- Work with youth, and their family and service providers across sectors to plan for a transition from child and youth services to adult services, if required.

- Deliver child, youth and family-centred services to children and youth with FASD and/or suspected FASD and their families by leading the development of a strengths-based support plan.
- At a local system level, work to improve awareness of FASD and support local cross-sectoral planning tables to identify gaps and opportunities to increase capacity among other service system providers serving children and youth with FASD (e.g. Service Planning Coordinators, rehabilitation service providers, health care providers, educators and providers in the justice sector).

Service Description:

Services will be available to all children and youth under the age of 18, and young people between the ages of 18 and 21, who remain in school. A formal diagnosis of FASD will not be required to access the services and support of a FASD worker. FASD workers will provide direct services to children, youth and families with FASD, including consultation and system navigation support, as required.

FASD workers will:

- Work with children/youth with FASD, or suspected FASD, and their families to develop a service plan based on individual strengths and needs, and informed by the child/youth and family's vision, goals and concerns.
- Support connections to diagnostic supports (as available), and provide information to families as post-diagnosis support.
- Support connections to other services and, with consent, share information and the service plan so the family doesn't have to repeat their story.
- Work with the family, service providers and educators supporting the child/youth to build capacity, identify strategies and make adaptations to meet the child's needs.
- Explore flexible and innovative approaches (e.g. a neurobehavioral approach) for service delivery to meet the needs of children/youth and families and to bring forward innovative solutions.
- Provide information to parents, caregivers and school personnel about behavioural symptoms associated with FASD and helpful approaches.
- If a child/youth has multiple and complex needs and their family requires the more intensive support of a Service Planning Coordinator and the Coordinated Service Planning Process, support a transfer to a dedicated Service Planning Coordinator and remain involved as part of the Coordinated Service Planning team.
- Work with youth, and their family and service providers across sectors to plan for a transition from child and youth services to adult services, if required.
- At a local system level, work to improve awareness of FASD and support local cross-sectoral planning tables to identify gaps and opportunities for improving supports for FASD.
- Engage with diverse populations (e.g. Indigenous, Francophone) to discuss how to best meet needs of children and youth with FASD in their communities.
- Facilitate parent-to-parent connections.

- Participate in provincially-offered training to increase both their own and their organization's capacity to support children and youth with FASD and their families.

The FASD workers will not duplicate an existing service.

Program / Service Features:

Services will be:

- Reflective and responsive to individual, family and community strengths and needs;
- Sensitive to the social, linguistic and cultural diversity of families and communities, including Francophone and Indigenous children, youth, and their families;
- Staffed by individuals with the appropriate range of skills and abilities necessary to respond effectively to the needs of adults, children and their families; and
- Delivered in a manner that is collaborative in nature and coordinated with schools and other service providers.

Program Goals:

Expand support for children, youth and families affected by FASD, including increased awareness of the disorder and how it can be prevented.

Ministry Expectations:

The agency will deliver the programs and services in accordance with the requirements as outlined in:

- the legal, financial and service target data portions of the service contract;
- the Agency Governance service description schedules;
- Governance and Accountability: Transfer Payments to Community Agencies framework;
- the Ministry's criminal reference check policy;
- the Ministry's Serious Occurrence Reporting requirements; and
- the Transfer Payment Business Cycle requirements including: annual budget submissions, year-to-date reporting and year-end reconciliation.

A full annualized allocation will be \$90,000 per FASD worker. Coordinating Agencies will absorb any ongoing supervision, administration and travel costs related to the FASD worker within this allocation. Each FASD worker will be expected to provide service to a minimum of 50 clients per year.

Reporting Requirements:

The Service Provider will report on interim service data elements (detailed above) using the transfer payment budget package template.

The Service Provider will report on performance measures for the FASD Workers once finalized.

Agency Completed Section

Plan to Achieve Service Objectives (*standard term*): *This section is to be used by the agency to describe how they will achieve the identified service objectives and respond to specified program/ service features. Comments can be made in a bullet point or narrative format and should have sufficient detail in order that the reader can appreciate the critical aspects of the service.*

- Description of how Service Objectives will be implemented.
 - FASD Worker responds to the needs of children and youth with FASD/suspected FASD by working with child/youth/family and service providers across sectors to develop a strengths-based support plan, support families with service navigation, connection and referral to services reducing the need to families to repeat their story, and plan for transitions including to adult services.
 - Work collaboratively with cross-sectoral committees to improve awareness of FASD, and identify gaps and opportunities to increase capacity among service system providers serving children and youth with FASD. This includes co-chairing the FASD Advisory Committee of local families and service providers, and working collaboratively with Six Nations, Mississaugas of the Credit First Nation, and urban Indigenous service providers
 - Provide children, youth and families with timely information and access to a continuum of appropriate services and supports across sectors through Contact Brant's Access services that include: provision of general community information; intake for Ministry-funded child/youth mental health services, developmental services, Coordinated Service Planning, and FASD supports; triage and referral to appropriate community cross-sectoral services; on-going service navigation and service coordination supports to children, youth and families; facilitate Case Resolution for Complex Special Needs children and youth; coordinate RPAC as appropriate
 - Intake process, when required, includes determining eligibility; completion of the Common Tool for Intake to capture the child/youth/ family's story including strengths, needs and risks; prioritization for need/urgency of services; creation of client record; service options as well as community resources are provided; engagement with the child/youth and family in the development and implementation of their service plan; secure informed Consent for referrals to services and service coordination; and on-going service planning, coordination and navigation

- Services and supports are provided to children and youth presenting with FASD/suspected FASD as well as a range of social, emotional, behavioural, psychological and/or psychiatric problems, developmental disability, Autism, and other special needs
- Provision of services are coordinated with community stakeholders to support collaborative and integrated approach (as reflected in protocols outlining partnerships and intake/service coordination processes); bring together multi-service service providers, as appropriate, to support an integrated and coordinated response to meet clients' needs.
- Description of the specific services and service capacity.
 - As part of the Coordinating Agency mandate, provide FASD to help families with a child/youth with FASD or suspected FASD to navigate the system and develop a coordinated service plan, as well as work with community to increase awareness of FASD and increase capacity to support children and youth with FASD
 - Lead Agency for Coordinated Service Planning in Brant. Collaborate with five other Brant organizations to provide a Service Planning Coordinator as the key service navigator/contact person for families with a child/youth with complex, multiple needs. Collaborate with other cross-sectoral stakeholders to provide coordinated service planning as a best practice and as a part of each professionals' role for all children and youth served (as outlined in the Brant Community Coordinated Service Planning Protocol).
 - Coordinated access/single point Access Mechanism for child and youth mental health services, developmental services, Coordinated Service Planning and FASD supports. Access service includes eligibility confirmation and Intake including identification of strengths, needs and risks as well as Prioritization for services; Gain informed Consent for referral of intake package to appropriate services, as well as provide information/linkage to other community resources
 - Child, youth and family engagement is primary through family-centered service approach. Individual planning and goal setting – begins at intake and on-going through service coordination supports
 - Centralized database used for Intake record as well as Coordinated Service Plan – this decreases families having to repeat their story as information can easily be shared, with consent
 - Service system planning with community partners; reporting of data and information from centralized client database
 - Facilitate the Brant Case Resolution Mechanism; coordinate RPAC for Brant children and youth, as legislated in CYFSA
 - Manage the Brant Haldimand Norfolk Community Information Database, www.info-bhn.ca to provide easy access to information on local services and resources
- Specialized capacity and expertise

- FASD Worker is experienced and knowledgeable regarding FASD with the appropriate abilities and skills to respond effectively to children/youth and their families
 - 19 years' experience providing single point access services including coordinated information, intake and referral, and service coordination
 - Staffed by experienced individuals with the appropriate abilities and skills to respond effectively to children/youth and their families, complete intake process and triage to appropriate services, as well as work collaboratively with community stakeholders on behalf of an integrated service plan for clients
 - Highly knowledgeable staff with expertise to respond effectively and provide information to children/youth/families, partner stakeholders, and the broader community
 - Staffed by experienced and skilled individuals who are respectful and sensitive to the social, linguistic and cultural diversity including Indigenous people, as well as individual diversity and abilities of children, youth and families; respectful of privacy and confidentiality and sharing information based on informed consent received
 - Provide leadership and build capacity on service coordination as the Coordinated Service Planning Lead Agency and lead planning and coordination regarding FASD services and supports
 - Quality assurance through regular review of child/youth/family feedback using the Quality Satisfaction Survey developed with the Centre of Excellence, the provincial MPOC tool for Coordinated Service Planning, as well as community feedback on services and partnerships
 - Policies and procedures to ensure accountability as well as operating under evidence-informed/best practices; includes policies and procedures regarding access to and sharing of personal information with consent
 - Strategic directions established by a diverse community Board of Directors are used to drive and align service activities; the Board and staff monitor activities and data in meeting strategic directions
 - Quality provision and management of information services based on policies and AIRS Standards
- Individual planning and goal setting
 - Individual planning and goal setting begins with the intake meeting with the child/youth/family who identify their strengths, needs and goals; this continues through the referral process and on-going service coordination supports. Planning includes goal setting for transitions.
 - Case Notes are regularly documented regarding the on-going development of individual planning and goals which are coordinated with the child/youth/family and other stakeholders
 - The Coordinated Service Plan template (used across the community for any integrated service plan) is used for the development of a service plan and reviewed and revised as needed.

- As appropriate, the child/youth/family would be connected to a Service Planning Coordinator or other services
- Community linkages and service collaboration (where appropriate).
 - Inter-agency Protocols with Ministry-funded child and youth agencies, and other sectors (including health and education) to support ease of access to services, sharing of information with consent, and coordinated service planning
 - Access Mechanism for children's developmental services, mental health services, Coordinated Service Planning, and FASD supports. Access mandate includes facilitating Case Resolution as well as RPAC reviews in Brant.
 - Lead Agency for Coordinated Service Planning in Brant; referral to a Service Planning Coordinator or FASD Worker as appropriate
 - Co-Chair of the FASD Advisory comprised of families and other community stakeholders to promote awareness and build capacity
 - Support the two parent facilitators of the Brant Caregiver Support Group that meets monthly
 - Manage the Brant Haldimand Norfolk Community Information Database/website, www.info-bhn.ca; this resource is also utilized by 211 Ontario to provide information on Brant, Haldimand and Norfolk services through their 24/7 phone line and website
 - Coordinate the production and distribution of Your Guide twice annually in collaboration with community stakeholders in Brant, Haldimand and Norfolk; Your Guide is a printed and web-based publication outlining free workshops, courses, groups and events for children, youth and families such as parenting programs, pathways to services, FASD resources, etc.
 - Actively participate in cross-sectoral system planning at the Strategic Leadership Table for children and youth services; facilitate the development and annual review of community protocols that support access and coordination including for children and youth with FASD; provide an annual System Report of demographics and statistics using our centralized client database to inform community planning
 - Support the CSP Steering Committee in their role of oversight and enabling collaboration of the partnerships that support Coordinated Service Planning, as well as advice regarding FASD Worker role; facilitate meetings of the 6 CSP Provider agencies to support a consistent approach to Coordinated Service Planning in Brant; facilitate meetings of the Community of Practice for Service Planning Coordinators and other stakeholders who provide service coordination supports within their professional role to build capacity
 - Coordination with the other Contact Agencies/Access mechanisms and Coordinating Agencies regarding access services, coordinated service planning and FASD services
 - Co-located with the Lead CYMH Agency, Developmental Services Ontario satellite office, and Brant FACS satellite office; this has strengthened linkages and partnerships regarding clear pathways and seamless access to services

Service Location (standard term):

- Address: 643 Park Road North, Brantford, ON, N3T 5L8
- Type of location: Agency office.
- Area served: City of Brantford, County of Brant, Six Nations of the Grand River, and Mississaugas of the Credit First Nation

Method of Evaluation (standard term):

This section identifies the methods used to determine the program's success in meeting the stated Service Objectives. The agency will also evaluate relevant Service Delivery features including quality. Evaluation will provide the organization with needed information to self-correct identified gaps in the achievement of the stated service objectives.

Describe the agency's evaluation processes with specific reference to how:

- **Service objectives will be evaluated**
- **Quantitative (outputs) and qualitative (outcomes) evaluation will be implemented.**
 - Monthly monitoring of service statistics provided through client database (including but not limited to: unique clients, gender, intakes, referrals, requests for information, service coordination, FASD, Case Resolution and RPAC); comparison to previous years and monthly monitoring of service targets
 - Monthly monitoring of pressures reflected in wait lists with community partners, especially related to re-prioritization of clients for immediate service
 - Regular and on-going review of client information in the client database for quality referral reports
 - Ongoing evaluation and feedback from consumers utilizing the Quality Satisfaction Survey (QSS) developed with the Centre of Excellence as well as use of the MPOC ; quarterly QSS Reports reviewed by staff and Board re quality assurance; QSS submitted to Ministry
 - Annual Budget approval by the Board of Directors; accountability through Quarterly Reports to Ministry and Board, including budget, targets, outputs, QSS and feedback
 - Financial accountability through monthly monitoring of expenditures and targets by the Board of Directors and CEO; annual Audited Financial Statement; and annual expenditure reporting (TPAR) to Board and Ministry
 - Risk Management monitoring through annual review of related policies, insurance, and any Serious Occurrences by Board and CEO; accountable through reporting to Board and Ministry
 - Annual review of Governance Policies, By-Laws, and Operational Policies by

Board, CEO and staff

- Annual system review with partners of inter-agency Protocols as well as community Protocols and processes
- Regular communication and review with individual community partners regarding access criteria and prioritization
- Monthly Wait List and In-Service Reports to community partners re referred clients' status as waiting, in-service, or discharged to ensure tracking of clients' status re service and supports
- Evaluation and feedback from community stakeholders using the Community Partner Survey on Service Delivery as well as the Working Together - Reflection on Coordinated Service Planning by CSP Providers, Participants and Service Planning Coordinators
- Regular communication and review with the other Contact agencies/Access agencies and Coordinating Agencies regarding Access and Coordinated Service Planning/FASD services outputs and outcomes
- Follow expectations for Making Services Work for People as well as Agency Governance service description schedules