



Ministry of Health and Long-Term Care Community Mental Health and Addiction Programs

Transfer Payment Agreement Schedules Guide and Template

INTRODUCTION

The intent of the “Community Mental Health and Addiction Program” (CMHAP) funding is to strengthen system support functions and direct services for the purpose of advancing **Phase 2 of Ontario’s Comprehensive Mental Health and Addictions Strategy**, which consists of five strategic pillars:

- Pillar 1. Promote resiliency and well-being in Ontarians
- Pillar 2. Ensure early identification and intervention
- Pillar 3. Expand housing, employment supports, and encourage diversion and transitions from the justice system
- Pillar 4. Right service, right time, right place (improve coordination and transitions)
- Pillar 5. Fund based on quality and need (funding reform)

CMHAP activities relate to one or more of the following system support functions and/or direct services:

1. **Information Management:** activities related to the management of mental health and addiction service system information, including personal client information.
2. **Collaboration & Collaborative Care:** activities related to collaborative care and collaboration in general, including new inter-agency relationships resulting in new protocols and agreements.
3. **Training and Professional Development:** activities intended to ensure appropriate initial & ongoing education and training of professionals/ para-professionals required to perform the full range of system functions.
4. **Knowledge Translation and Exchange:** activities intended to influence service provider behaviour through better knowledge of emerging issues and best-practices. Activities include clinical guideline development, promising practice identification, knowledge translation, knowledge transfer and mentoring, as well as monitoring and evaluation of the success of research and knowledge exchange.
5. **Service and System performance, Monitoring and Evaluation:** all quality assurance and standards activities intended to ensure that: a) services and supports are producing desired client outcomes; b) the system is operating in a way that supports improved client outcomes.
6. **Direct services:** activities involving client assessment and care planning, referrals to follow-up services/supports, and interventions to improve functioning and quality of life, support self-management, wellness, recovery and harm-reduction.

INSTRUCTIONS FOR COMPLETION OF SCHEDULES

This template is the required format for Schedule A.

SCHEDULE "A"

PROGRAM DESCRIPTION AND TIMELINES

I. HSJCC Information:

Regional or Local HSJCC: Toronto Regional HSJCC

HSJCC Chair/Co-Chairs: Steve Lurie

Chair/Co-chairs contact: Steve Lurie, slurie@cmha-toronto.net or 416-789-6886

Transfer Payment Agency: CMHA – Toronto Branch

Transfer Payment Agency Contact: Steve Lurie, slurie@cmha-toronto.net or 416-789-6886

II. HSJCC Objectives

a) Committee's overall goals and key commitments:

The T-HSJCC works collaboratively:

- To provide a planning table to bring together service providers to find solutions to the problem of the criminalization of people with defined unique needs, and;
- To develop a model of shared responsibility and accountability in dealing with this group of people at points of intersection with the justice system.

b) Committee's specific objectives:

The T-HSJCC works collaboratively:

- To assist in facilitating communication through effective linkages among health, criminal justice and social service sectors, and between local committees.
- To assist in identifying issues with respect to service delivery and capacity.
- To assist in addressing issues such as access to and duplication of services.
- To consult with local committees to determine predominant issues.
- To assist in coordinating regional training opportunities for all sectors involved in serving the target population.
- To assist in providing informed input and advice concerning research, system design, planning, program implementation, and resource allocation to the partner ministries.

III. System Support Function and/or Direct Services

a. Please check one or more of the relevant boxes to indicate which system support function(s) (see page 1 for descriptions) the program and activities correspond to.

- Information management --
- Collaboration & collaborative care -
- Training and professional development
- Knowledge translation & exchange
- Service and system performance, monitoring and evaluation
- Direct services

IV. Scope of Program

Provide the list of activities to be completed. Each activity should be mapped to one or more outputs and outcomes. Please also demonstrate how the activity contributes to one or more of the MH&A strategic pillars. Provide the start and end date of each activity. See Appendix A for more examples.

Regional or Local HSJCC: Toronto Regional HSJCC				
2016/2017 Annual Report (Due: June 1, 2017)				
HSJCC Activities (Name and Brief Description) What is done to meet program objectives	MH&A Pillar(s) this activity contributes to (see page 1)	Actual Outputs (to be completed for annual reports)	Actual Outcomes (to be completed for annual reports)	Actual Budget
<i>Example:</i> <i>Training and professional development:</i> Provide training on appropriate prescribing for management of pain	<input type="checkbox"/> Pillar 1 <input type="checkbox"/> Pillar 2 <input type="checkbox"/> Pillar 3 <input checked="" type="checkbox"/> Pillar 4 <input type="checkbox"/> Pillar 5			
1. Facilitate communication through effective linkages among health, criminal justice and social service sectors, and between local committees.	<input type="checkbox"/> Pillar 1 <input type="checkbox"/> Pillar 2 <input type="checkbox"/> Pillar 3 <input type="checkbox"/> Pillar 4 <input type="checkbox"/> Pillar 5	<p><i>Held 4 Toronto Regional meetings during May, October, November and March</i></p> <p><i>52 committee members attended 4 meetings. 19 members attended the meetings regularly. Each meeting has an average of 13 members. Total membership is 47</i></p> <p><i>Held 4 Toronto Steering Committee meetings during June, October, December and March</i></p> <p><i>Each meeting has an average of 7 members. Total membership is 13</i></p> <p><i>Held 20 Local meetings</i></p> <p><i>HSJCC Coordinator provides support to the Toronto Service Resolution Project Committee</i></p> <p><i>Toronto Regional Chair attends P-HSJCC</i></p>	<p><i>Increased cross-sectoral communication on Provincial System Support Program, Toronto Service Resolution Project, New Courthouse Consortium, South Etobicoke Harm Reduction Coalition (SEHRC)</i></p> <p><i>Increased communication between systems and services leads to effective and on going cross-sectoral co-ordination, shared responsibility and planning</i></p> <p><i>Conducted annual members evaluation and membership confirmation to ensure information is accurate and up-to-date.</i></p> <p><i>100% of Regional committee members agreed that the meetings are helpful and</i></p>	See Attached HSJCC Financial Report

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		<p>meetings</p> <p>252 committee members attended 5 Local HSJCC meetings. 69 members attended the meetings regularly. Local meetings have an average of 50 members</p> <p>Circulated current information about the human services and justice sector such as training opportunities, job postings, available services, new programs, workshops, information, educational resources, community events.</p> <p>Maintain and circulate Regional, Local and TSRP membership lists</p> <p>Continue with regular regional and local meetings and minutes distribution</p> <p>Update PHSJCC website with local/regional membership contact information and local resources</p> <p>Regional Chair provides updates regarding identified issues at the P-HSJCC meetings</p> <p>Local Co-chairs provide updates about identified issues at the T-HSJCC meetings</p> <p>3 new members joining the Regional committee</p> <p>33 new members joined the Locals committee</p> <p>31 Regional/Local welcome package sent</p>	<p>informative</p> <p>100% of Regional committee members agree that they are informed about the activities of the HSJCC</p> <p>Added membership resulted in increased cross-sectoral coordination, planning and collaboration</p> <p>3 new members joined the Regional committee from – Christian Horizons, Fred Victor and Canadian Mental Health Association</p> <p>33 new members joined the Local committees from - Probation and Parole (5) Defense Counsel, Crown Attorney's Office (2), Legal Aid Ontario (2), CAMH (6) WoodGreen Centre; Vanier Centre for Women (2) St. Michael's Hospital Catch ED, Fred Victor Centre, Voices From The Street, PASAN, Toronto Bail Program (4) Schizophrenia Society of Ontario; LOFT, YMCA – Youth Substance Abuse Program, Judiciary (2), Toronto East Detention Centre, and CHIRS</p> <p>67 % of Regional members who completed the member evaluation identified as female, 20% as male, 40% as LGBTQ, 20% Aboriginal, 0% as Racialized/visible minority,</p>	

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		<p>47 Toronto Regional maintained members</p> <p>276 Local and Regional HSJCCs maintained members</p> <p>20 Toronto Service Resolution Project Committee maintained members</p> <p>Year - end regional and local member's evaluation and membership confirmation</p> <p>The Toronto Regional coordinator, provides administrative support to four Local HSJCC and the Toronto Service Resolution Project Committee</p>	<p>0% as person with a disability</p> <p>Toronto Regional Chair attends Provincial HSJCC meetings. He reports on the Toronto Regional identified issues and priorities resulting in increased coordination, planning and collaboration by building capacity and shared responsibility</p>	
2. To assist in identifying issues with respect to service delivery and capacity.	<input type="checkbox"/> Pillar 1 <input type="checkbox"/> Pillar 2 <input type="checkbox"/> Pillar 3 <input type="checkbox"/> Pillar 4 <input type="checkbox"/> Pillar 5	<p>Continued to provide Regional Updates to the Provincial HSJCC meetings</p> <p>Committee members continue to work collaboratively utilizing a participatory group decision-making model</p>	<p>Regional Updates were submitted to the Provincial HSJCC</p> <p>Member evaluation was conducted demonstrating increased collaboration and coordination between human services and justice sector.</p> <p>Participatory decision-making improves members involvement and increases cross-sectoral collaboration</p> <p>Increased Regional and Local collaboration, coordination and planning with the Toronto Service Resolution Project (TSRP) in addressing system barriers for people involved with the justice sector who are hard to serve or are stuck due to systemic</p>	

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			<i>barriers</i>	
3. Work collaboratively to address issues such as access to and duplication of services.	<input type="checkbox"/> Pillar 1 <input type="checkbox"/> Pillar 2 <input type="checkbox"/> Pillar 3 <input type="checkbox"/> Pillar 4 <input type="checkbox"/> Pillar 5	<p><i>Formalized the Toronto Service Resolution Project partnership with the Provincial System Support Program CAMH by signing and Maintaining the MOU agreement.</i></p> <p><i>The Service Resolution Project hired a New Justice Coordinator. She is being seconded from her position at Fred Victor for one day per week. New position funds provided by the T-HSJCC.</i></p> <p><i>Provided feedback to the Provincial System Support Program, GTA Region/CAMH, Toronto Service Resolution Project, New Courthouse Consortium and South Etobicoke Harm Reduction Coalition</i></p>	<p><i>Increased shared responsibility, collaboration and coordination between human services and justice sector in addressing system barriers for people involved with the justice sector who are hard to serve or are stuck due to systemic barriers</i></p> <p><i>Continue to have Locals, TSRP and Justice Collaborative updates as an agenda item at every meeting. This increases collaboration, coordination, problem solving and build capacity.</i></p> <p><i>Increased access to reliable and current information and analysis of human services and justice issues as demonstrated by the member evaluation</i></p> <p><i>We provide a forum for data sharing through educational presentations at committee meetings</i></p>	

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4. Consult with Toronto local committees to determine predominant issues.	<input type="checkbox"/> Pillar 1 <input type="checkbox"/> Pillar 2 <input type="checkbox"/> Pillar 3 <input type="checkbox"/> Pillar 4 <input type="checkbox"/> Pillar 5	<p>Continued to have Local HSJCCs updates as an agenda item at every meeting</p> <p>Analyze identified issues and respond appropriately</p> <p>TTC Tokens and food vouchers were distributed to the Locals courthouse and Reintegration Centre</p> <p>Committee members have input regarding presentation topics</p> <p>WT-HSJCC reported on the South Etobicoke Harm Reduction Coalition (SEHRC). SEHRC is addressing concerns regarding access to methadone when people are in custody.</p> <p>DT-HSJCC reported on lack of access to public transportation as a gap for low fixed income and vulnerable individuals who have health and justice issues, if the TTC tokens are replaced with Presto Cards.</p> <p>T-HSJCC reviewed the committee Terms of Reference.</p>	<p>Local Co-chairs attend the Toronto Regional HSJCC and Steering Committee meetings. They report on the Local HSJCC's identified issues and priorities resulting in increased coordination and collaboration by building capacity and shared responsibility</p> <p>Effective and ongoing collaboration leads to better coordination by engaging in joint cross-sectoral knowledge sharing</p> <p>Quarterly TTC tokens and food vouchers reports were submitted to the Toronto HSJCC.</p> <p>Held a Toronto Regional presentation on the SEHRC.</p> <p>Increased cross-sectoral knowledge by hosting and circulating the presentation PowerPoint and video about the SEHRC.</p> <p>The SEHRC concerns were referred to the Provincial HSJCC for further coordination and issue identification</p> <p>The DT-HSJCC letter to the TTC was circulated to T-HSJCC members. This increased knowledge sharing, networking, shared responsibility and capacity building.</p> <p>Circulated the T-HSJCC Terms of Reference survey to the Locals HSJCCs to provide input. This will assist with succession planning for Co-chairs.</p>	

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5. Coordinate regional training opportunities for all sectors involved in serving individuals 16 years of age and older with a mental illness, who are currently involved or at significant risk of being involved with the criminal justice system. Individuals may have co-occurring issues such as homelessness, substance use and developmental disabilities.	<input type="checkbox"/> Pillar 1 <input type="checkbox"/> Pillar 2 <input type="checkbox"/> Pillar 3 <input type="checkbox"/> Pillar 4 <input type="checkbox"/> Pillar 5	<p><i>Continue to maintain updated membership list to ensure members receive information about Provincial, Regional, Local HSJCCs network training and/or information sharing to committee members.</i></p> <p><i>Fostering openness about different perspectives through open discussion and value and use evaluation/research and evidence-based practices for decision making</i></p> <p>OUTPUTS RELATED TO LOCAL HSJCC</p> <p>355 participants at the Local Lunch and Learns. 35% increase from previous year of 232 participants</p> <p>86 participants attended the North York Lunch and Learn 2 webinars</p> <p>157 people registered for the 2 webinars</p>	<p><i>Circulated meeting minutes and regular updated membership, posted meeting minutes, PowerPoint presentations on the HSJCC website.</i></p>	

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6. Provide informed input and advice concerning research, system design, planning, program implementation, and resources allocation to the partner ministries.	<input type="checkbox"/> Pillar 1 <input type="checkbox"/> Pillar 2 <input type="checkbox"/> Pillar 3 <input type="checkbox"/> Pillar 4 <input type="checkbox"/> Pillar 5	<p>11 PowerPoint research findings shared among members</p> <p>6 Research finding/papers shared among members</p> <p>Fostering openness about different perspectives through open discussion and value and use evaluation/research and evidence-based practices for decision making</p>	<p>Continue to have Locals, TSRP and Justice Collaborative updates as an agenda item at every meeting. This increases collaboration, coordination, shared responsibility, problem solving and build capacity.</p> <p>Circulated 11 PowerPoints slides from Local HSJCC's Lunch and Learns and meeting presentation: Living Life to the Full for Caregivers 55+, Part 2 on Acquired Brain Injury (ABI) Symptoms and Intervention Strategies, What Is Schizophrenia, Dual Diagnosis, How do I know?...And What Do I Do Now?, Community Treatment Orders, Navigating Prescription Medication: Current Changes, Pilot INKH, WoodGreen Community Services: Introduction to Programs and Services in the Community Care Unit, Navigating Services: the Developmental Sector, Navigating The Criminal Justice System: Youth Justice & Mental Health, NY Mental Health & Justice Treatment and Support Services</p> <p>Circulated 3 audio video/webinar recordings from local HSJCC's Lunch and Learns: Navigating Services: The Developmental Sector, System and Community Perspectives on Opioid Overdoes and Legal and Psychosocial Perspectives on Immigration and Refugee Law to the Toronto Local HSJCC 229 membership</p>	

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			<p><i>Circulated 1 Toronto Regional PowerPoint and video link of South Etobicoke Harm Reduction Coalition</i></p> <p><i>PowerPoints are uploaded to the HSJCC website</i></p> <p><i>Circulated 6 research findings: Unlocking-Change: Decriminalizing Mental Health Issues in Ontario by the John Howard Society of Ontario, Toronto Public Health, Toronto Overdose Action Plan: Prevention & Response, Hidden Homeless in Canada, Legal and Psychosocial Perspectives on Immigration and Refugee Law, Living Life To The Full for Caregivers 55+ and Navigating Prescription Medication: Current Changes</i></p> <p><i>Reviewed Lunch and Learn evaluations for continues improvement and evidence- based decision making</i></p> <p><i>32% of regular members completed the evaluation. 6 out of 19 regular members from a total of 47.</i></p>	

