	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 SCHEDULE

This template is the **required** format for Schedule A.

SCHEDULE "A"

__PROGRAM DESCRIPTION AND TIMELINES__

I. HSJCC Information:

Regional or Local HSJCC: Scarborough HSJCC

HSJCC Chair/Co-Chairs: Samim Hasham and Mary Jarrell

Chair/Co-chairs contact: **Samim Hasham,** samim.morrish.hasham@gmail.com

or 416-287-6674 and **Mary Jarrell,** Mary.Jarrell@ontario.ca or 416-326-4132

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 over all goals and key commitments:

> *The S-HSJCC works collaboratively:*
> - *To engage in joint cross-sectoral planning, coordination, collaboration and integration of service for individuals with mental health and substance use issues who are involved or at significant risk of being involved with the criminal justice system.*
> - *To* identify local priorities for planning coordinated services, and establish a process for planning and joint problem solving in relation to these local priorities.
> - *To improve transition at juncture points within services and systems for individuals who come into contact with the justice system*
> - To assist with addressing local needs and reporting to the Toronto HSJCC to help inform systems planning at a regional level.

b) Committee's specific objectives:

> *The S-HSJCC works collaboratively:*
> - To assist in developing and maintaining an accessible and well-functioning system of mental health, justice and related services that work together to improve the transition between services and sector, of the Committee's target population, to and through the services and supports that they need, when they need them.
> - To assist to improve the quality of services for individuals with mental health and substance use issues who are involved with the criminal justice system, including the specific matches made between clients and services both initially and through clients' individual recoveries over time.
> - To assist to minimize the amount of time people spend in correctional facilities waiting for the assessments, (e.g., fitness, Form 6 and/or services they need to support their safe, successful release and re-integration back into the community).
> - To assist in reducing recidivism.
> - To assist to Identify barriers to achievement of any of the above objectives, with particular foci on identifying and addressing barriers at the juncture between the mental health, criminal justice and related systems.

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.

S-HSJCC 2018-2019 WORKPLAN AND ANNUAL REPORT SUBMISSION								
Regional or Local HSJCC:								
WORKPLAN (Due: March 1 of each year)							**Annual Report Submissions (Due: June 1 of each year)**	
HSJCC Activities (Name and Brief Description) What is done to meet program objectives	**Anticipated Outputs** What is produced or delivered resulting from activities	**Anticipated Outcomes (if available)** What are the regional or community effects / changes that occur as a result?	**MH&A Pillar(s) this activity contributes to** (see page 1)	**Timeline** Start and End Date	**Anticipated Budget**	**Actual Outputs** (to be completed for annual reports)	**Actual Outcomes** (to be completed for annual reports)	**Actual Budget**
Example: *Training and professional development:* Provide training on appropriate prescribing for management of pain	• # of health care professionals trained • # of training sessions	• Level of competence • Level of knowledge • Intention to change practice as a result of training	☐ Pillar 1 ☐ Pillar 2 ☐ Pillar 3 ☒ Pillar 4 ☐ Pillar 5					
1. Information Sharing: Share information about mental health, substance use, criminal justice and related services that are accessible to individuals 16 years of age or older with a mental illness and/or substance use issue 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/or	*10-20 committee members attending meetings,* *3 presentations at meetings,* *2 PowerPoint slide decks and resources distributed to the members* *Circulate current information about the human services and*	*Increase knowledge exchange between systems and services. How to support individuals with mental health and addictions issues who come into contact with the justice system* *Increase usefulness of information sharing resulting in informed decision making and improved client services*	☐ Pillar 1 ☐ Pillar 2 ☐ Pillar 3 ☐ Pillar 4 ☐ Pillar 5	*April 2018- March 2019*				

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a developmental disabilities.	*Justice issues* *Maintain and circulate membership list* *Update PHSJCC website with membership contact information and local resources* *Committee members provide updates about new services and programs at every meetings* *Year - end member's evaluation and membership confirmation*							

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2. System-building: Develop effective linkages among the services in Scarborough so as to increase their accessibility and capacity to effectively meet the needs of the target population and support community safety.	*5 new members joining the committee* *5 Welcome packages sent* *50 members maintained* *5 meetings per fiscal year* *# of members who identify as being part of equity seeking groups*	*Maintain and increase representation from across sectors and equity seeking groups such as aboriginal groups, people with lived experience, families and seniors* *Increase the knowledge and awareness of emerging issues and best-practices about serving individuals who come into contact with the justice and mental health systems and support community safety initiatives.* *Increase collaboration and awareness of client-centred approaches to improve coordination and transition between services and sectors for individuals who come into contact with the justice system* *Strengthen relevant partnerships to improve coordination and transitions between services and sectors*	☐ Pillar 1 ☐ Pillar 2 ☐ Pillar 3 ☐ Pillar 4 ☐ Pillar 5	*April 2018- March 2019*			*5 meetings held*		

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3. *Issue identification:* Work collaboratively to identify issues and barriers to the achievement of the goals identified above and determine how identified issues should be addressed, (i.e., at which internal/external forums or tables).	*Continue to provide reports to the Toronto HSJCC meetings* *Ensure Co-chair(s) participate at the T-HSJCC meetings* *Collaborate with the Toronto Service Resolution Project (TSRP) to address system barriers for people involved with the justice sector who face multiple challenges due to systemic barriers* *To provide feedback to the Video Adult Fitness Assessment Project* *Explore active engagement strategies*	*Strengthen* coordination and collaboration between human services and justice sectors *Strengthen the awareness of the Toronto Service Resolution Project Committee at the S-HSJCC meetings by providing regular reports.*	☐ Pillar 1✓ ☐ Pillar 2✓ ☐ Pillar 3✓ ☐ Pillar 4✓ ☐ Pillar 5	*April 2018-March 2019*					

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4.Problem solving: Work collaboratively to address issues and barriers to the achievement of the goals identified above i.e., at which internal /external forums or tables.	*Continue to provide a last resource for transportation and food vouchers to individuals who come into contact with the justice system* *Submit quarterly TTC token and food voucher reports to the T-HSJCC* *Committee members continue to work collaboratively, utilizing a participatory group decision-making model* *We continue to have service resolution and coordination issues as an agenda item at every meeting*	*Increase collaboration and coordination for problem solving/resolution of systemic issues that impact individuals who come into contact or are at risk of involvement with the justice system* *Continue with shared accountability* *Review minutes to ensure participatory group decision making takes place* *Review Action Items Follow-up to ensure problem solving service coordination issues at every meeting* *Improve functioning and quality of life over the social determinants of health that impact individuals who come into contact with the justice system* *Reduce recidivism by supporting improved client outcomes*	☐ Pillar 1✓ ☐ Pillar 2✓ ☐ Pillar 3✓ ☐ Pillar 4✓ ☐ Pillar 5☐✓	*April 2018- March 2019*					

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5. Communication: Coordinate a forum and facilitate communication between and among service providers in Scarborough	*Continue with regular committee meetings and distribution of minutes* *We continue to have service resolution and coordination issues as agenda items at every meeting* *Committee members have input regarding presentations and Lunch and Learn topics* *Continue to maintain and circulate a membership list* *Continue to provide information to the Regional and Provincial HSJCC*	*There is evidence of engagement and participation from the cross-sectoral membership as identified in the committee's goals.*	☐ Pillar 1✓ ☐ Pillar 2✓ ☐ Pillar 3✓ ☐ Pillar 4✓ ☐ Pillar 5	*April 2018- March 2019*				

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6.Education: Provide educational opportunities for the cross sectoral membership on relevant topics relating to mental health, substance use, criminal justice and related service providers, people with lived experience, families, and community of interest.	*2 Lunch and Learns are directed by members input* *Collate and review Lunch and Learn evaluations* *6 resources i.e slide decks etc. circulated from other local HSJCC's Lunch and Learns* *10-20 participants attending Lunch and Learns*	*Increase knowledge and awareness about client-centred best practices and trends as it relates to people who come into contact with the justice system* *Increase knowledge and awareness about mental health and substance use and how they relate to the social determinants of health; housing status, poverty, social isolation, family breakdown etc.* *Enhance knowledge and awareness of the impact of stigma for individuals who come into contact who are at risk of involvement with the justice system*	☐ Pillar 1✓ ☐ Pillar 2✓ ☐ Pillar 3✓ ☐ Pillar 4✓ ☐ Pillar 5	*April 2018- March 2019*					

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7. Monitor the performance of the committee: Collect, analyze, monitor and share data and information to continuously improve the system's ability to meet the needs of its target population.	*10-20 members attending committee's meetings* *Fostering openness about different perspectives through open discussion as well as recognizing and incorporate evaluation/research and evidence-based practices for decision making* *Analyze identified issues and respond as appropriate* *2 PowerPoint slide decks shared among members* *1 research paper shared among members*	Increased access to reliable and current information and analysis of human services and justice issues *We provide a forum for data sharing through educational presentations*	☐ Pillar 1✓ ☐ Pillar 2✓ ☐ Pillar 3✓ ☐ Pillar 4✓ ☐ Pillar 5	*April 2018- March 2019*				

… add new rows as needed