

Northern Capacity Building Project June 2020 to March 2021



Special Acknowledgement

Child & Community Resources would like to extend a sincere thank you to the committee members from the Kenora / Rainy River, Thunder Bay, Algoma, and Sudbury-Manitoulin Districts. We understand and appreciate that each of you have multiple competing priorities, however managed to undertake a task with ambitious deadlines, system-wide implications, and a considerable investment of your time. The progress noted below is a direct reflection of your tireless work in developing strategies to build professional capacity, with special attention dedicated to rural and remote communities, bilingualism and culturally inclusive services, across the North Region of Ontario.

A heartfelt thank you to:

Kenora / Rainy River District	Thunder Bay District	Algoma District	Sudbury- Manitoulin District
April Szpara* Suzanne Morris Sheelagh Reid Sarah Pyzer Karly Janisse Christie Nerino Joelle Willett Fallon Cody Barb Stainke Kate Ronnebeck Allison Dresen	Danielle Paananen* Patty Haney Adrianna Atkins Krista Smith Alina Cameron Carolyn Mancuso Liz Hathazi Nicole Deschamps Melissa Bianco Sherry Fournier	Kathy Sutherland* Clint Baic Morgan Fiaschetti Carolyn Nadeau Kerry Maisels Lisa Henderson Karen Kennedy Nicole Keating Sherry Fournier	Sara Kitlar-Pothier* Julien Bonin Shannon Lavoie Christa Morel Kristen Norman Kim Morris Michelle Bascom Natalie Croteau Dr. Terri Barriault Sylvie Grenier Sherry Fournier
Sherry Fournier *denotes committee co-chair			

Summary

In the fall of 2019, Child & Community Resources (CCR) submitted a proposal to the Ministry of Children, Community and Social Services (MCCSS) to support the development of the Northern Collaborative.

The Northern Collaborative was designed to plan beyond CCR and focus our efforts on supporting local service providers in order to increase service options and professional capacity, with special attention dedicated to rural and remote communities, bilingualism and culturally inclusive services.

Northern Capacity Building Advisory Committees

As a result of the MCCSS supporting CCR's proposal, and confirming funding to March 31st, 2021, Northern Capacity Building Advisory Committees were formed in the districts of: Kenora / Rainy River; Thunder Bay; Algoma; and Sudbury-Manitoulin. Each committee is comprised of parents and professionals, who have worked together to identify opportunities and develop strategies to build professional capacity across the North Region of Ontario.

Each committee is guided by a Terms of Reference (Appendix A) which is utilized to define the project scope. Additional tools were developed to guide the committees in identifying, prioritizing, and tracking goals related to each capacity building opportunity. These tools included a project timeline / calendar (Appendix B), goal tracking worksheet (Appendix C), opportunity prioritization chart (Table 1 – discussed in detail below), and logic model (Table 3 – discussed in detail below).

The following project overview and the details herein, is a result of the combined efforts of each committee, who attended a total of 22 meetings (since June 2020). Committee members have devoted approximately 24 hours of their personal time towards attending meetings, with additional time spent between meetings dedicated to further discussions and follow-up items.

Funding Allocation:

MCCSS approved a total budget of \$821,015 for the project. Funding was dispersed evenly across all districts (\$150,000 each), with an additional \$150,000 set aside for regional opportunities. The remaining \$71,015 is reserved for miscellaneous expenses to support implementation. Any unused funds will be redirected to supporting outcomes. The total funding allotment will not be exceeded, however a detailed summary of project costs will be provided upon project completion, as part of the overall results and accountability to our families, community partners, and MCCSS.

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Identifying Capacity Building Needs

Each individual committee set out to identify opportunities to enhance professional capacity and access to quality services within each of their districts. However, as discussions evolved, each committee noticed commonalities existed across the districts.

In the interest of reducing repetition within the project summary and pending results, opportunities and strategies have been grouped (where possible).

Opportunities

Opportunities and subsequent strategies are discussed in detail below. However, the following is meant to provide a high-level overview of the opportunities identified by each District, as well as opportunities that were common across districts, defined further as "regional opportunities."

Kenora-Rainy River District:

• Access to, and retention of, quality trained respite workers with ability to provide inhome services.

Thunder Bay and Sudbury-Manitoulin Districts:

• Access to trained professionals resulting in high quality, needs-based, one-to-one, consultative-type Applied Behaviour Analysis services.

Algoma District:

• Enhanced support and system-wide capacity of providers in the Algoma District to assist children, youth, and families with Autism Spectrum Disorder.

Regional:

- Enhanced service capacity within First Nations' Communities.
- Lack of post-secondary institutions within the North Region offering curriculum required to train and retain professionals.
- Access to service providers in rural and remote communities, forcing caregivers to absorb the cost of travel to receive services in their home community or assume the responsibility of having to travel to the provider.

- Lack of pre- and post-diagnosis support, including the need to improve navigation and coordination supports, develop formal connections between parent advocate groups, mentors, and Ontario Autism Programs (i.e. Foundational Family Services - Northern Collaborative, organizations).
- Access and services to support youth (specifically in rural and remote areas of the district), which includes the development of, and access to "specialty clinics."
- Lack of availability of trained professionals in the North Region has resulted in parents and caregivers expressing an interest in obtaining credentials to provide much needed services and supports to their children and youth.

Prioritizing Capacity Building Opportunities

Based on the wide variation and number of opportunities presented by each committee, an opportunity prioritization chart (Table 1) was used to support the committee in determining which opportunities would require the least amount of effort and have the highest impact. Considerations were made based on the amount of funding available, and the timelines within which strategies were to be developed and implemented.

By prioritizing opportunities, it was concluded that only two of eleven opportunities fell outside of the scope, timelines and / or budget available for the project:

- The need for a community of practice among local providers to conduct and share research and best-practices.
- The development of a resource directory which includes links to community-based services and supports.

Although these two opportunities, which were identified by the Sudbury-Manitoulin committee, were identified as lower priority, initial discussions took place to address each opportunity:

The need for a community of practice among local providers to conduct and share research and best-practices.

As a result of the new Ontario Autism Program, Child & Community Resources had to significantly reduce their staffing compliment. This resulted in many highly trained professionals leaving the organization. Prior to the new Ontario Autism Program,

Child & Community Resources was well positioned to leverage the expertise and vast knowledge of the highly trained professionals they employed. The result was a community of practice within Child & Community Resources which extended to other Regional Providers.

The current system, which includes many of the trained professionals noted above, is made up of several private providers. The main barrier for private providers to form a community of practice, is release time (and associated wages lost), required to fully engage in a meaningful community of practice.

The development of a resource directory which includes links to community-based services and supports.

Families have expressed the need for a resource directory which allows them to independently source out local providers and businesses offering ASD-related services and supports. This item fell outside of the scope of this project as Autism Ontario has been collaborating with provincial agencies and businesses to create a comprehensive list, to be posted and promoted on their website.

Child & Community Resources has supported Autism Ontario with communication of the resource directory by sending the invite to key contacts and asking them to register. Child & Community Resources will also promote the resource directory via social media so community partners and families are aware of the new tool.

High	MAYBE (Determine Feasibility based on progress of "Yes")	YES (Address First)
	 The need for a community of practice among local providers to conduct and share research and best-practices. The development of a resource directory which includes links to community-based services and supports. Deemed a 'lower' priority based on the timelines and / or budget available for this project.	 Access to, and retention of, quality trained respite workers with ability to provide in-home services (Kenora / Rainy River District) Access to trained professionals resulting in high quality, needs-based, one-to-one, consultative-type Applied Behaviour Analysis services (Thunder Bay and Sudbury-Manitoulin District) Enhanced support and system-wide capacity of providers in the Algoma District to assist children, youth, and families with Autism Spectrum Disorder (Algoma District). Access to service providers in rural and remote communities, forcing caregivers to absorb the cost of travel to receive services in their home community or assume the responsibility of travel to the provider (Regional). Lack of post-secondary institutions within the North Region offering curriculum required to train and retain professionals (Regional). Access and Support for services to support youth (specifically in rural and remote areas of the district), which includes the development of, and access to "speciality clinics."
Value		
	NO (High Effort and minimum Impact)	YES (Address Next)
		 Enhanced service capacity within First Nations' Communities (Regional). Lack of availability of trained professionals in the North Region has resulted in parents and caregivers expressing an interest in obtaining credentials to provide much needed services and supports to their children and youth (Regional). Lack of pre- and post-diagnosis support, including the need to improve navigation and coordination supports, develop formal connections between parent advocate groups, mentors, and Ontario Autism Programs (i.e. Foundational Family Services - Northern Collaborative, organizations) (Regional).
Low		

High

Effort

Low

Strategy Design and Implementation

Upon prioritization of the opportunities identified by each committee, work began on identifying a measurable goal for each opportunity, as well as identifying solutions, and intended short- and long-term outcomes.

Kenora-Rainy River District Opportunity

Access to, and retention of, quality trained respite workers with ability to provide in-home services.

Background:

Parents and caregivers have identified respite opportunities as essential to supporting their child or youth, as well as providing them the time to fully participate in Ontario Autism Program (OAP) services.

Northern Ontario has experienced long-term challenges associated with access to quality respite services. These challenges are evolving into crisis situations for two reasons:

- 1. Families have funds available but no access to qualified respite workers; or
- 2. Families do not have access to respite at all.

With the introduction of the new OAP, families are now expected to recruit OAP professionals as well. In addition, many families want to participate in Family Foundational Services however they are unable to do so as they do not have the appropriate supports to fully engage.

The Kenora-Rainy River Capacity Building Advisory Committee selected this goal as it is a critical element of support for their child, youth, and family.

Challenges and barriers include:

- Limited or no access to quality respite services.
- Access to funds but limited number of qualified respite workers.
- Some access to virtual respite services but limited support in preparing the child and youth for optimal participation (i.e. session prep, teaching child/youth how to participate virtually, little to no training for child/youth or family particularly in the area of online safety).

- Lack of understanding from government that if families do not have access to respite, they are unable to fully participate in the services available.
- Little to no formal connection between existing respite programs and OAP services (current respite mandates are limited, wait lists are years long and funding is limited).
- Limited supports to assist with travel costs/time to deliver service in rural and remote communities.
- No formal community strategy in place to identify gaps and solutions
- Access is not equitable throughout district.
- Lack of a long-term retention strategy (i.e. how can respite workers also become future OAP therapists? etc.)
- Families have expressed this need must be addressed to ensure they are maximizing the free Foundational Family Services available while reserving individual budgets for treatment services.

<u>Goals:</u>

To establish a formal strategy to enhance the existing respite program at a local service provider to support the recruitment, training, deployment, and retention of respite workers. Special attention will be dedicated to supporting families in rural and remote areas.

And

To utilize this strategy as the first phase of establishing a long-term capacity building strategy for all positions that support children with a diagnosis of Autism Spectrum Disorder.

Solution:

A partnership will be formed with a local service provider to:

- Engage a small group of families to identify key areas of improvement, innovative ideas and supports to improve access to respite.
- Enhance the existing recruitment strategy to invite new respite workers into the field.
- Work in collaboration with a variety of professionals to develop free training opportunities for respite workers.

- Develop or connect to existing portals containing helpful resources to support a positive respite experience for the family and workers.
- Develop a strategy to address the challenges associated with delivering respite in rural and remote communities,
- Explore current virtual respite strategies to determine what works well and identify opportunities for improvement.
- Develop a robust training strategy to support professional development (RBT training, goal development, access to supervision, etc.)

Short-Term Outcome

Enhancing the current recruitment, training, and retention strategy to support respite workers and improve access to a quality respite experience. Respite is essential to ensuring family engagement in OAP services. A local service provider will develop strategies to recruit, implement training strategies, monitor effectiveness, identify gaps and course correct if the solution is not effective. Data and lessons learned will be utilized to inform future direction related to respite services and the vital role in the system of supports families need.

Long-Term Outcome / Sustainability

Lessons learned will inform the next phase of capacity building in the Kenora / Rainy River District. For example, developing a successful respite recruitment, training and retention strategy can be expanded to recruit ABA therapists and other professionals required to deliver quality OAP services.

Funding Allocation: \$130,000

Funding allocation is to support the development and implementation of the strategy by a local service provider.

Thunder Bay and Sudbury-Manitoulin District Opportunity

Access to trained professionals resulting in high quality, needs-based, one-to-one, consultative-type Applied Behaviour Analysis services.

Background:

With the implementation of the new Ontario Autism Program, service capacity throughout the North Region of Ontario has declined. The decline is a result of the reduction of trained professionals available to provide high-quality autism services.

Primary concerns include:

- Sustainable full-time employment for therapists due to the variation of hours required by each family, resulting in high staff turnover.
- Feasibility of providers to hire professionals due to costs associated with on the job training, as well as costs associated with staff retention.

<u>Goal:</u>

To provide Capacity Building Grants to providers within the Thunder Bay and Sudbury-Manitoulin Districts, to enhance professional capacity and serve more children, youth and families with Autism Spectrum Disorder.

Solution:

With the support of the Northern Capacity Building Advisory Committee, a Capacity Building Grant has been developed (Appendix D). The grant is available to providers that would benefit from financial support to enhance professional capacity resulting in additional services for children, youth, and families. The grant will provide financial support intended to cover or offset costs associated with:

- Staff training;
- Increasing number of employees (therapists);
- Increasing hours for new or existing employees; and
- Therapist supervision.

Short-Term Outcome

Enhanced professional capacity within local public providers to offer quality autism services to children, youth, and families who would not have received services should the grant have not been available.

Long-Term Outcome / Sustainability

Increased professional capacity within the Thunder Bay and Sudbury-Manitoulin Districts to provide high-quality services to children, youth, and families with Autism Spectrum Disorder. Sustainability may be achieved through the new needs-based Ontario Autism Program and / or Foundational Family Services.

Funding Allocation: \$130,000 per District (\$260,000 total)

Algoma District Opportunity

Enhanced support and system-wide capacity of providers in the Algoma District to assist children, youth, and families with Autism Spectrum Disorder.

Background

Northern Ontario has a long history of collaboration to ensure resources are maximized within communities, organizations and across sectors. This is out of necessity but also an example of the unique approach professionals in the north have adopted to guide their work, as well as to support families and communities. In addition to supporting professional capacity, families in rural and remote communities are often required to build their own expertise as accessing and retaining qualified professionals is not always possible.

As the committee approached this work, multiple opportunities were presented and there was early recognition and commitment to develop strategies that:

- Acknowledge the skills, expertise and credentials that are currently available (via families, organizations, and communities).
- Support and retain this level of expertise wherever possible.
- Create a system to share the expertise amongst families, organizations and community.
- Address gaps to ensure families and communities have access to the services they deserve.

<u>Goal:</u>

To enhance and support system-wide capacity of providers in the Algoma District to support children, youth, and families with Autism Spectrum Disorder.

This goal will build on the northern philosophy: to work together to improve services and supports for families, harness current expertise and commitments that are currently available throughout the district.

Solution:

THRIVE Child Development Centre has been selected to guide this work. Activities below include but are not limited to:

- Enhancing the connection and relationships amongst families, organizations and communities.
- Complete a needs assessment to identify existing expertise, gaps, opportunities for collaboration, ongoing skill development.
- Maximize current capacity, identify learning opportunities, share resources and training opportunities where possible.
- Improve connections between organizations and communities, specifically building on lessons learned and exploring what can be done to improve/support.
- Ensure all efforts result in meaningful supports to children, youth and families.
- Pilot the above-mentioned strategies to support the most significant gap access to quality respite supports (description below)

Background: Pilot – Access to Quality Respite Supports

The Algoma Capacity Building Advisory Committee selected this pilot as it is a critical element of support for their child, youth, and family.

Parents and caregivers have identified respite opportunities as essential to supporting their child or youth, as well as providing them the time to fully participate in Ontario Autism Program (OAP) services.

Northern Ontario has experienced long-term challenges associated with access to quality respite services. These challenges are evolving into crisis situations for two reasons:

- 1. Families have funds available but no access to qualified respite workers; or
- 2. Families do not have access to respite at all.

With the introduction of the new OAP, families are now expected to recruit OAP professionals as well. In addition, many families want to participate in Family Foundational Services however they are unable to do so as they do not have the appropriate supports to fully engage.

Challenges and barriers include:

- Limited or no access to respite services or trained respite workers especially in rural and remote areas.
- Some access to virtual respite services but limited support in preparing the child and youth for optimal participation (i.e. session prep, teaching child/youth how to participate virtually, little to no training for child/youth or family particularly in the area of online safety).
- Little to no formal connection between existing respite programs and OAP services (current respite mandates are limited, wait lists are years long and funding is limited).
- Limited supports to assist with travel costs / time to deliver service in rural and remote communities.
- No formal community strategy in place to identify gaps and solutions.
- Lack of a long-term retention strategy (i.e. how can respite workers also become future OAP therapists? etc.)
- Families have expressed this need must be addressed to ensure they are maximizing the free Foundational Family Services available while reserving individual budgets for treatment services.

Solution:

THRIVE Child Development Centre will work in partnership to:

- Engage a small group of families to identify key areas of improvement, innovative ideas and supports to improve access to respite.
- Enhance the existing recruitment strategy to invite new respite workers into the field.
- Work in collaboration with a variety of professionals to develop free training opportunities for respite workers.
- Develop or connect to existing portals containing helpful resources to support a positive respite experience for the family and workers.
- Develop a strategy to address the challenges associated with delivering respite in rural and remote communities.

- Explore current virtual respite strategies to determine what works well and identify opportunities for improvement.
- Develop a robust training strategy to support professional development (RBT training, goal development, access to supervision, etc.)

Short-Term Outcome:

Established formal strategy to enhance the existing respite services to support the recruitment, training, and deployment of respite workers. Special attention will be dedicated to supporting families in rural and remote areas.

Long-Term Outcome:

To utilize this strategy as the first phase of establishing a long-term capacity building strategy for all positions that support children with a diagnosis of Autism Spectrum Disorder.

Funding Allocation: \$130,000

Funding allocation is to support the development and implementation of the strategy by THRIVE Child Development Centre.

Regional Opportunity 1

Enhanced service capacity within First Nations' Communities.

Background:

The Northern Capacity Building Advisory Committees are comprised of members who have firsthand knowledge of service capacity gaps within First Nations' Communities.

Primary barriers include:

- Awareness of unique challenges and barriers faced by families who receive diagnosis of Autism Spectrum Disorder.
- Culturally appropriate, accessible services that take into consideration traditions, language, and service modality.
- Navigational support to access services.

<u>Goal:</u>

To enhance capacity and knowledge of Autism Spectrum Disorder and available service options within a First Nations Community.

Solution:

With the support of the Autism Spectrum Disorder Subgroup Committee led by Nishnawbe Aski Nation, Thunder Bay First Nations Community(s) will be selected to pilot culturally appropriate and accessible Autism-related resources and training sessions. Training will conclude with an overview of available service options and pathways. The target population will include community Elders, families, and professionals.

The training session will be developed in collaboration with professionals who work within the First Nations Community, and Elders.

Training(s) to be delivered in-person in a manner that respects the traditions and languages of First Nations Community.

Short-Term Outcome

Enhanced knowledge and capacity within identified First Nations' Community, related to Autism Spectrum Disorder, and associated services.

Pilot training provides opportunity to evaluate and reflect on successes and barriers of training, to apply approach to a broader range of First Nations Communities.

Long-Term Outcome / Sustainability

Using a train-the-trainer approach, the training can be used to enhance the capacity of professionals who work within First-Nations communities. The training can then be utilized by these professionals to enhance family and Elder capacity within additional communities throughout the North region.

Funding Allocation: \$100,000

To be allocated to Nishnawbe Aski Nation to support the work of the Autism Spectrum Disorder Sub-Group Committee.

Regional Opportunity 2

Lack of post-secondary institutions within the North Region offering curriculum required to train and retain professionals.

Background:

With the implementation of the new Ontario Autism Program, service capacity throughout the North Region of Ontario has declined. The decline is a result of the reduction of trained professionals available to provide high-quality autism services.

Primary concerns include:

- Lack of northern strategy designed to attract professionals to the field.
- Lack of opportunity to access post secondary opportunities from northern colleges and universities.
- Lack of access to post secondary options for professionals seeking francophone and culturally appropriate academic experiences.
- Lack of funding to support the costs of post secondary and ongoing professional development.

<u>Goal:</u>

To work with the Minister of Children Community and Social Services (Todd Smith), the Minister of Colleges, Training and Universities (Ross Romano), and representatives from northern colleges and universities to develop a northern strategy to attract new professionals and support existing professionals in the field.

To engage academic institutions throughout the province to inform the strategy, partner and mentor where possible.

Solution:

With the support of the Capacity Building Advisory Committee's Chairs, CCR will engage the appropriate Minister(s) to discuss the development of the strategy and necessary resources to support. The strategy will include short-term solutions to address the immediate need, as well as long term solutions to ensure the north has access to post secondary training for all positions required to deliver quality OAP services.

Committee members from all committees interested in this goal will also be invited to inform the development of the strategy.

Short-Term Outcome

A commitment to re-establishing a Northern Grant for professionals in the process of obtaining the necessary credentials i.e. BCBA, BCaBA.

Long-Term Outcome / Sustainability

Secure partnership with at least one northern college and one university to discuss the potential of delivering programs.

Funding Allocation:

This goal does not include costs with the exception of travel and accommodation costs for Committee Chairs if some meetings are in person.

Regional Opportunity 3

Access to service providers in rural and remote communities, forcing caregivers to absorb the cost of travel to receive services in their home community or assume the responsibility to travel to the provider.

With the implementation of the new Ontario Autism Program, service capacity throughout the North Region of Ontario has declined. Families residing in rural or remote communities do not have access to quality autism services. This challenge is a significant part of the northern experience and impacts all services in all sectors. Despite best efforts and intentions of service providers, a long-term and sustainable strategy has yet to be achieved.

The tables below are an example of the distances families or providers are required to travel to receive or deliver service. Note: this table only reflects <u>examples</u> of travel distances within the district and does not include all communities.

Travel distances from closest urban centre

Sault Ste. Marie / Algoma District

Community	Travel Distance (one-way)
IRON BRIDGE	120 KM
BLIND RIVER	143 KM
WAWA	230 KM
HORNEPAYNE	415 KM

Kenora / Rainy River District

Community	Travel Distance (one-way)
SIOUX LOOKOUT	100 KM
WHITEDOG	100 KM
LAC SEUL FIRST NATION	108 KM
IGNACE	110 KM
EAR FALLS	150 KM
ATIKOKAN	152 KM
RED LAKE	220 KM
COCHENOUR	230 KM
MADSEN	230 KM
MISHKEEGOGAMANG OJIBWAY FIRST NATION	306 KM
PICKLE LAKE	360 KM
KASABONIKA*	100 KM + 3.5 hr flight
KEEWAYWIN*	100 KM + 2 hr flight
PIKANGIKUM*	100 KM + 1 hr flight
WAPEKEKA*	100 KM + 1.5 hr flight
WEBEQUIE*	100 KM + 1 hr flight
*No accommodations available many in fly-in communities; must complete travel in one day	

Thunder Bay District

Community	Travel Distance (one-way)
RED ROCK	110 KM
NIPIGON	112 KM
MACDIARMID	170 KM
PAYS PLAT	175 KM
SCHREIBER	203 KM
TERRACE BAY	217 KM
GERALDTON	280 KM
LONGLAC	300 KM
MARATHON	300 KM
MANITOUWADGE	387 KM
KINGFISHER LAKE*	100 KM + 2 hr flight
LANSDOWNE HOUSE*	100 KM + 1 hr flight
*No accommodations available in many fly-in communities; must complete travel in one day	

Sudbury-Manitoulin District

Community	Travel Distance (one-way)
MASSEY	110 KM
BIRCH ISLAND	120 KM
SPANISH	130 KM
LITTLE CURRENT	140 KM
MINDEMOYA	178 KM
ELLIOT LAKE	180 KM
WIKWEMIKONG	186 KM
SPRING BAY	195 KM
GORE BAY	200 KM
NEW LISKEARD	220 KM
SHESHEGWANING	250 KM
CHAPLEAU	427 KM

The most common practice in the north is to establish teams in urban centers and assign staff to support families in rural communities when required. However, the preferred approach is to build professional capacity in each community, but without long term sustainable funding this goal will never be achieved.

Primary concerns include:

- Lack of trained professionals in families' home community.
- Travel costs for providers to meet families in their home communities, and provide treatment, are high.
- Caregivers travel long distances with their children to gain access to services in urban communities.

- Families have limited funding available to them via Childhood Budget or One Time Funding and are often left to pay for travel-related costs with their own money.
- Funding should be directed towards treatment, and not to addressing the lack of trained local professionals, or travel costs.

<u>Goal:</u>

To increase accessibility to Autism services in rural or remote communities.

Solution:

Providers delivering service to families in rural and remote communities can request "access funds" to support these costs. Once approved, a claim form and process to reimburse providers for costs associated with travel to rural or remote communities, will be developed. By providing limited funding for travel directly to public and private providers, families can direct their Childhood Budget or One Time Funding to treatment, resulting in improved outcomes for their child or youth.

Short-Term Outcome

Increased access to professionals within rural or remote communities, resulting in additional services delivered to children, youth, and families, with Autism Spectrum Disorder.

To document successes, challenges, detailed costs and anecdotal information that will inform future Ontario Autism Program planning.

Long-Term Outcome / Sustainability

As this will be a long-term issue, it is critical that the data collected for this goal is presented to MCCSS to inform future program design for the OAP. Regardless of the design of the new OAP, families in rural and remote communities will not have access to these important services without a strategy to support the true cost of delivering service.

Funding Allocation: \$130,000 (\$32,500 per district)

As this goal impacts all districts, each Northern Capacity Building Advisory Committee will dedicate \$20,000, with CCR assigning an additional \$50,000 from the regional allocation, to support this goal.

Regional Opportunity 4

Lack of pre- and post-diagnosis support, including the need to improve navigation and coordination supports, develop formal connections between parent advocate groups, mentors, and Ontario Autism Programs (i.e. Foundational Family Services - Northern Collaborative, organizations).

Background:

This barrier was identified as a part of the Capacity Building Advisory Committee work. With the introduction of Foundational Family Services and the reorganization of CCR's limited resources this goal will be addressed outside of the Capacity Building funding.

This goal has been expanded considerably to address a number of access and support issues identified by families and service providers. Although this goal will be funded outside of the Capacity Building allocation, the same process of implementation will be monitored and evaluated along with all goals identified by the Capacity Building Advisory Committees.

With the implementation of the new Ontario Autism Program, Northern Ontario has experienced the following:

- Loss and confusion related to accessing and obtaining diagnostic services.
- Confusion related to the various roles available to support navigation and coordination of OAP services.
- Access to an overwhelming amount of virtual and foundational services with little to no guidance as to which service is best suited for each child, youth, and family.
- A disconnect between Regional OAP services and local services provided in each community.
- Little to no formal connection between parent advocates, mentors and the organizations delivering OAP services.

Primary barriers include:

- An overwhelming amount of information available to families.
- Multiple organizations responsible for navigation, service coordination, and support with little clarity as to how these positions work together.
- Little to no formal strategy in place to identify gaps.

- Access is not equitable throughout the region; each district requires a strategy.
- Families require access to coordination and clinical support to select services.
- Families need access to and support from parent advocates and mentors outside of the formal service system.
- Families have expressed they need support to ensure they are maximizing the free foundational services available reserving individual budgets for treatment services.
- Families in rural communities require access to services in their home community, to reduce the need for the family to have to travel to the provider.

<u>Goal:</u>

To establish a formal strategy to support families in the area of navigation / coordination, access to diagnostic assessments, and to create a formal linkage to connect families to parent advocates and mentors.

Solution:

Child & Community Resources has introduced a Regional Family Service Coordinator. Functions of this role are to:

- Respond to questions from families related to the services offered through the Northern Collaborative
- Respond to inquiries related to the Ontario Autism Program
- Connect families to local service providers
- Offer access to one-hour clinical consultations to determine best fit in regard to services
- Connect and engage with parent advocates and mentors
- Be readily available to respond to all inquiries related to accessing diagnostic assessments
- Connect families to local resources
- Accept referrals for districts that do not have a formal point of access
- Support families in accessing Early Intervention (Pivotal Response Training or Social ABCs)
- Work in collaboration with current and new diagnostic hub partners to support the diagnostic process
- Engage with early years providers throughout the region to increase awareness and capacity to screen and refer children as early as possible

• Work in collaboration with provincial and regional partners to evolve existing practice to reduce wait times and improve access

A strategy to ensure services are delivered in the child or youth's home community.

- A formal connection between the Regional Family Service Coordinator, Regional Services Supervisor and a selected group of parent advocates and mentors will be established. CCR will look to parents throughout the region to express interest in this work, seek advice regarding the design, determine if formal training is required, and work in collaboration with CCR to develop strategy for ease of access.
- The option for families in immediate need of consultative services to select a provider of their choice to receive a one-hour consultation.

Short-Term Outcome

All solutions above will be implemented from September to March 31, 2021. Data and anecdotal data will be gathered to monitor effectiveness, identify gaps and course correct if the solution is not effective. Data and lessons learned will be utilized to inform training and professional capacity needs related to the implementation of the current OAP. CCR will also actively utilize the data to influence and inform the development of the future OAP.

Long-Term Outcome / Sustainability

A well connected and supportive system available to all families from first point of connection with the OAP and throughout their service experience. Improved linkages between OAP and local service providers. Clear process to identify gaps and develop solutions. A commitment to ensure families are supported by identified parent advocates/mentors as well as the formal service system. A clear and well managed access process for all OAP services will ultimately inform what families need and the professional capacity required to deliver on that need.

Funding Allocation:

As the solutions identified above fall within the mandate of the OAP Family Service Coordinator role, Foundational Family Services, the Diagnostic Hub and CCR's commitment to establishing a strong connection with parent advocates, and mentors this project will be funded within existing resources.

Regional Opportunity 5

Access and services to support youth (specifically in rural and remote areas of the district), which includes the development of, and access to "specialty clinics."

Background:

Despite the introduction of the new Ontario Autism Program significant gaps still exist for youth requiring services and supports. Services include but are not limited to: accessing consultation and treatment for youth requiring mental health supports, specific activities and programs available for youth from 12 to 18, programs and opportunities to prepare and engage in the workforce, and opportunities to learn age-appropriate skills to prepare for adulthood.

Primary barriers include:

- Limited or no access to appropriate mental health supports.
- Limited or no access to age appropriate social, employment and transition services and supports.
- No local access to specialized service and supports (i.e. accessing certain programs or specialists is challenging, long waiting lists and the expectation is the family travels to the service versus the service being available in the youth's community).

<u>Goal:</u>

To work in collaboration with advisory committee members, specifically parents that are currently experiencing the lack of services and supports for their youth.

To work in collaboration with regional and provincial providers to explore service options and supports that are available to address this need.

Solution:

To select a small working group of parents and professionals to clearly articulate the needs, prioritize and select a service to pilot. Child & Community Resources will connect with regional and provincial partners to find the provider best suited to support the development and implementation of the priority service.

This goal will focus on two areas:

- 1. Developing a model that will identify gaps.
- 2. Securing expertise, and successfully implementing the priority service in a rural area to determine if this approach will ensure youth continue to have access to these much-needed services in the future.
- 3. Establishing relationships with local specialists to host "Specialty Clinics" tailored to meet the unique needs associated with youth transitions.

Additionally, with the support of the Northern Capacity Building Advisory Committee, as well as parents, caregivers and professionals across the province, Child & Community Resources is providing Northern Collaborative Phase 4 – Foundational Family Services.

Feedback was received from parents and caregivers on the "types" of service required which was used to inform proposals and subsequent services offered by the partners participating in the Northern Collaborative (16 total).

Child & Community Resources, and our partners, are offering 119 unique Foundational Family Services, with the capacity to support over 1600 families. Many of the services being offered, are ideal for older children, or youth transitioning to adulthood, including (but not limited to):

Anxiety in Children and Youth with ASD: Caregiver CBT Workshop with Individualized Follow-Up

Children and youth with ASD experiencing anxiety are not alone! During this 3-hour training, caregivers will learn about anxiety, the various ways it presents in children/youth with ASD, and what Cognitive and Behaviour Therapy strategies to use with their child/youth at home. Caregivers will practice strategies and develop a plan to support their child/youth with a specific goal. Two one-hour individualized follow-up consultations are provided following the training.

Become A Social Superhero

Children learn to become their own personal superheroes by recognizing social obstacles. First, as "social detectives" they recognize social cues in their environment. Then, as "superheroes" they work on being flexible thinkers and increase self-regulation skills in a fun interactive way.

Cooking Groups

Come together and prepare a meal! Cooking is a basic life skill that can lead to greater independence and possibly a job within the food industry. It can also be a way to make community and family connections by meaningfully contributing to bake sales, pot lucks, or get-togethers. People are also more apt to try a new dish they've made themselves, so through exposure, your child may be interested in trying new foods and expanding their food repertoire!

Participants will work 1:1 with a Therapist to follow a recipe and contribute to a meal that is prepared by the group. Participants will be taught basic cooking techniques and kitchen safety considerations. Each session ends with an opportunity to practice social behaviours and mealtime etiquette while enjoying each others' culinary creations.

In order to foster generalization of skills, participants will be asked to bring their own utensils from home so they can learn with and practice using the items they would have available to them at home.

Daily Living Skills Workshop

The objective of this workshop is to provide an introduction to the importance of building independence in daily living routines such as getting dressed, brushing teeth, showering and more! The workshop will review how parents/caregivers can use the principles of Applied Behaviour Analysis (ABA) to help their child or youth build independence in these areas.

Enhancing Independent Behaviours

Running for 8 individualized sessions, E.I.B. focuses on enhancing the independent life skills of individuals. Working with an ABA Therapist, teens will have the opportunity to work on different life skills.

Skills include:

- Personal Living Skills (grooming, hygiene, dressing...),
- Home Living Skills (clothing care, meal planning and cooking, home safety...),
- Community Living Skills (money management, shopping, community safety...).

Family Life and Sexual Health

This small group learning opportunity focuses on learning about relationships and sexual health and well-being with a respectful and caring facilitator. Topics include: Introduction, relationships, communication, exploitation, understanding the body and resources and review.

Job P.R.E.P.

Get job ready! Job P.R.E.P. is for teens ages 14-17, who are looking to develop skills to help them find and maintain a job. The 10 session individualized program will work on skills such as, resumes, interview skills, public vs private, managing stress & anxiety, hidden social rules, and much more!

Life Transitions and Autism Spectrum Disorder: How to Support a Child Transitioning into Elementary School, High School, and Adulthood

Virtual workshop and Q&A session designed to provide information and strategies to help parents and caregivers support their child(ren) to transition various major life events, such as changing schools, graduating from different academic levels, entering adulthood, and entering the workforce.

Mental Health 101 for Adolescents on the Spectrum

This virtual therapy group is intended for adolescents with Autism Spectrum Disorder, aged 14 to 18 years, who are interested in learning about their own mental health. The group will focus on increasing knowledge about a variety of common diagnoses and symptoms, the relationship between stress and stressors faced by adolescents and young adults with ASD, and where and how to access mental health support. In addition, the group will focus on understanding one's own emotions and the relationship between thoughts, feelings, and behaviours, and to learn strategies to better regulate emotions and behaviour in the face of stress and adversity.

Mental Health Clinics for Youth with ASD

Youth with ASD can access up to three individualized 1-hr consultations with a registered psychologist experienced in working with youth having ASD and mental health difficulties. Participants will complete mental health screening questionnaires prior to the first appointment. Presenting concerns could be challenges with anxiety, stress, depression, anger or emotion regulation. A strength based, cognitive behavioural approach will help children and youth to problem solve, to discover new coping strategies and to determine next steps for support in their home community.

Mindfulness Group for Adolescents

This virtual therapy group is intended for adolescents with Autism Spectrum Disorder, aged 14 to 18 years, who are interested in learning about how mindfulness and being in the "here and now" can help to improve various aspects of their lives. The group will focus on increasing knowledge about the core components of mindfulness and various practical ways that mindfulness can be applied and practiced. Participants will learn strategies such as, but not limited to, deep breathing, progressive muscle relaxation, visualization and guided imagery, and self-compassion.

Navigating Through Adolescence (Boys and Girls)

Adolescence can be a confusing and stressful time for both children and families as parents try to introduce key concepts of human development. As children struggle to understand the rapid changes they are experiencing, it may feel discomforting for children to openly ask questions to parents. From bodily changes, hormonal changes, and new hygiene habits it can be overwhelming for children with ASD to grasp all that is encompassed during puberty. The focus of this group is to break down this complex period in human development and inform children of the normal stages of development they will experience. Sessions will focus on the following aspects: biological, psychological, social, behavioral, and new hygiene routines. Concepts will be broken down and taught with clear, concise and engaging teaching materials. Lessons will also be accompanied with visual aids and social stories for the home environment. There will be a strong emphasis to create a safe space where children feel comfortable to ask questions or discuss challenges they are experiencing.

Pre-Vocational & Vocational Skills Workshop

The objective of this workshop is to provide an introduction to pre-vocational and vocational skills. This workshop will help the parent/caregiver to brainstorm areas of strength and areas of need for their youth with autism, in an effort to determine what vocational experience might be best for their child. It will review some tips for preparing the youth with autism for a vocational opportunity such as resume building, interviewing and social skills on the job.

Puberty Series: Live Virtual Sessions: Boys and Girls

Objectives of the presentation:

- To provide education about what is happening to your child in terms of puberty
- To enable you to assess where your child is at and if they are ready for building their independence in a variety of skills
- To provide you with the language in order to have a comfortable and confident conversation with your child
- To provide options in tools and equipment to support skills development and/or accommodate sensory concerns

Supporting Youth with Autism Spectrum Disorders: Sexual Health and Wellness

Facilitators will lead an online workshop on the topic of sexual health and wellness for parents of youth with ASD. Parents will learn how to support their youth explore issues including puberty, consent, and sexual boundaries. Parents/youth will be offered online follow-up sessions for further support.

Teaching Your Teen About Sexuality

This workshop and consultation is designed to support a structure for appropriate sexual behaviour based on ABA strategies and offer opportunities for teaching their teens social integration and healthy sexuality.

Vocational Training

This workshop will support youth on the spectrum that are looking to get into the workforce for the first time. It is geared to youth between the ages of 15-17 who are able to attend independently and participate in a small group setting via a virtual platform or in class.

Youth will learn where to look for job postings, different resume styles, develop the skills for creating a cover letter and resume, Interview tips, common interview questions and how to be prepared for an interview.

Vocational Training - Part 2: Community Project

Following their participation in the Vocational Training introductory course, youth will have an opportunity to apply their newly learned skills in a small community project selected by the group.

The project will address a community need such as expanding a green space in a nonprofit organization; painting an art mural; building items that can be used for play and learning, and/or addressing other innovative ideas that will address a community need.

Participants will have the opportunity to practice their skills in the area of resume creation and interviewing, while also developing further knowledge about their community. The project team will work on skills such as planning, collaboration, creativity, and communication skills.

An honorarium will be provided to each selected participant for this project. One to one job coaching, and supervision will be provided by an ABA Therapist and a BCBA.

Short-Term Outcome

The selection and successful implementation of a priority service delivered in the youth's home community.

A successful model that can be duplicated to address other priority services required for children, youth, and families especially in rural and remote areas.

As per *Ministry of Children, Community and Social Services, Ontario Autism Program: Foundational Family Services (2020, September 10) -* To provide tools to families to work with their child or youth and participate in their ongoing learning and development, through services that are:

- informed by evidence
- delivered by a range of professionals
- responsive to your family's changing needs over time and your child's needs, strengths and developmental stage
- offered in a variety of ways, including virtual, self-directed, in-person or groupbased
- tailored to the unique regional, language and cultural needs in different communities
- offered by organizations using collaborative, innovative and interprofessional approaches to work with other partners in your community

Long-Term Outcome / Sustainability

A well-established model that monitors service needs along with a clear strategy that has demonstrated success in accessing expertise and delivering the service in the youth's home community.

A meaningful capacity building strategy to ensure that the youth, family and community continue to benefit from the service and supports long after the service is complete.

Funding Allocation:

Not applicable as costs are associated to the Ontario Autism Program's Foundational Family Services and are not drawn from the Northern Capacity Building Hub budget.

Regional Opportunity 6

Lack of availability of trained professionals in the North Region has resulted in parents and caregivers expressing an interest to obtain credentials to provide much needed services and supports to their children and youth.

Background:

With the implementation of the new Ontario Autism Program, service capacity throughout the North Region of Ontario has declined. The decline is a result of the reduction of trained professionals available to provide high-quality autism services.

Primary concerns include:

- Needs-based, consultative type and 1:1 service is required to address the unique, individual needs of each child, youth, and family.
- Delay in launch of the Ontario Autism Program's new "needs-based" model has resulted in decline in skills acquired by children and youth.

<u>Goal:</u>

To enhance the capacity of parents and caregivers in the North Region, to better support their child or youth's development and manage behaviours, as parents and caregivers are better equipped to address the needs of their child or youth.

Solution:

With the support of the Northern Capacity Building Advisory Committee, as well as parents, caregivers and professionals across the province, Child & Community Resources is providing Northern Collaborative Phase 4 – Foundational Family Services.

Feedback was received from parents and caregivers on the "types" of service required which was used to inform proposals and subsequent services offered by the partners participating in the Northern Collaborative (16 total).

Child & Community Resources, and our partners, are offering 119 unique Foundational Family Services, with the capacity to support over 1600 families.

Short-Term Outcome

As per *Ministry of Children, Community and Social Services, Ontario Autism Program: Foundational Family Services (2020, September 10) -* Provide tools for families to work with their child or youth and participate in their ongoing learning and development, through services that are:

- informed by evidence
- delivered by a range of professionals
- responsive to your family's changing needs over time and your child's needs, strengths and developmental stage
- offered in a variety of ways, including virtual, self-directed, in-person or groupbased
- tailored to the unique regional, language and cultural needs in different communities
- offered by organizations using collaborative, innovative and interprofessional approaches to work with other partners in your community

Funding Allocation:

Not applicable as costs are associated to the Ontario Autism Program and are not drawn from the Northern Capacity Building Hub budget.

Progress Monitoring and Evaluation

The purpose of monitoring progress and evaluating the Northern Capacity Building Hub Project, is to monitor the activities and processes of the project for the purpose of evaluating the outcome of strategies designed to address barriers to service for families residing in the North Region. Where possible, evaluation measures have been designed and implemented to assess the impact of proposed strategies, and to provide evidence to support the successful implementation of strategies intended to enhance professional capacity resulting in additional children, youth, and families having access to high-quality services in their community.

Considering the scope of the project, a blend of anecdotal, qualitative, and quantitative information will be utilized to evaluate and reflect on successes and barriers of the project.

Results will be published and made public at the conclusion of the project.

Progress Monitoring and Evaluation Matrix

An evaluation matrix (Table 2) has been created to help illustrate the processes in place to monitor progress towards project goals, and where possible, to highlight measures used to evaluate outcomes. Ultimately, the matrices provide an overview of how data is to be collected and reported.

Northern Capacity Building Hub Project: Logic Model

A Logic Model (Table 3) has been created to provide a diagrammatic overview of the critical components of the Northern Capacity Building Hub Project, and includes the identified need, available inputs, opportunities, outputs, target population, and intended outcomes.

<u>Note</u>: The following matrix will be updated to include more concise process and outcome monitoring and measurements, as the project progresses.

Kenora-Rainy River District Opportunity

Goals	Activities	Process Monitoring	Outcome Monitoring
To establish a formal strategy to enhance the existing respite program at a local service provider and to support the recruitment, training, deployment, and retention of respite workers. Special attention will be dedicated to supporting families in rural and remote areas.	 Provide funding to, and work in partnership with, a local service provider to: Engage a group of families to identify key areas of improvement, innovative ideas, and supports to improve access to respite services Enhance current recruitment strategies to attract new respite workers into the field Work in collaboration with a variety of professionals to develop free training opportunities for respite workers Develop or connect to existing respite portals to support a positive respite experience for the family Develop a strategy to address challenges associated with delivering respite in rural and remote communities Review current virtual respite strategies to determine what works well and identify opportunities for improvement Develop a robust training strategy to support professional development 	Progress towards achievement of individual activities and timelines is tracked regularly using the Goal Tracking Worksheet (Appendix C). Goal Tracking Form is monitored by Child & Community Resources to ensure accountability to timelines and milestones highlighted within.	 Local Service Provider Reports: Needs assessment conducted to identify key areas of improvement for Respite Services Plan of Action to address key areas of improvement Evidence to support enhancement of recruitment model (e.g. use of social networks) Type, description and implementation plan for free, quality training opportunities, and subsequent number of trainings provided, individuals trained, and overall satisfaction of training (Survey to be developed based on intended outcomes of training – once selected) Strategy implemented to address service gaps in remote or rural communities and subsequent number of additional families served due to strategy Evidence to support enhancement of virtual respite services Strategy design and implementation plan to support future professional development opportunities

Thunder Bay and Sudbury-Manitoulin District Opportunity

Goals	Activities	Process Monitoring	Outcome Monitoring
To provide Capacity Building Grants to providers within the Thunder Bay and Sudbury- Manitoulin Districts, to enhance professional capacity and serve more children, youth and families with Autism Spectrum Disorder.	Send Request for Proposal to local service providers whom are participants in Northern Collaborative Phase 4 – Foundational Family Services, interested in applying for the Capacity Building Grant. Review committee comprised of parents from the Thunder Bay and Sudbury-Manitoulin District select successful applicants based on criteria included within proposals. Funding is released to providers along with data collection guidelines.	Capacity Building Grant request for proposal includes applicants' projected impact on enhancing capacity due to funding received (allows for monitoring and accountability).	 Capacity Building Grant Data Collection and Reporting Template (Appendix E) captures evidence to support enhanced capacity, such as: Number of newly trained staff Number of direct training hours Number of 'new' children, youth, or families served Number of direct/indirect hours of service delivery Number of hours of supervision Capacity Building Grant Feedback Survey (Appendix F) requests feedback from providers who indicate successful capacity building within agency as a result of receiving the Capacity Building Grant.

Algoma District Opportunity

Goals	Activities	Process Monitoring	Outcome Monitoring
To enhance and support system-wide capacity of providers in the Algoma District to support children, youth, and families with Autism Spectrum Disorder. Strategy to be piloted with Respite Services prior to broader system-wide capacity building.	 Provide funding to, and work in partnership with, THRIVE Child Development Centre, to: Engage a group of families to identify key areas of improvement, innovative ideas, and supports to improve access to respite services Enhance current recruitment strategies to attract new respite workers into the field Work in collaboration with a variety of professionals to develop free training opportunities for respite workers Develop or connect to existing respite portals to support a positive respite experience for the family Develop a strategy to address challenges associated with delivering respite in rural and remote communities Review current virtual respite strategies to determine what works well and identify opportunities for improvement Develop a robust training strategy to support professional development 	Progress towards achievement of individual activities and timelines is tracked regularly using the Goal Tracking Worksheet (Appendix C). Goal Tracking Form is monitored by Child & Community Resources to ensure accountability to timelines and milestones highlighted within.	 THRIVE Child Development Centre reports: Needs assessment conducted to identify key areas of improvement for Respite Services Plan of Action to address key areas of improvement Evidence to support enhancement of recruitment model (e.g. use of social networks) Type, description and implementation plan for free, quality training opportunities, and subsequent number of trainings provided, individuals trained, and overall satisfaction of training (Survey to be developed based on intended outcomes of training – once selected) Strategy implemented to address service gaps in remote or rural communities and subsequent number of additional families served due to strategy Evidence to support enhancement of virtual respite services Strategy design and implementation plan to support future professional development opportunities

Regional Opportunities

Goals	Activities	Process Monitoring	Outcome Monitoring
To enhance capacity and knowledge of Autism Spectrum Disorder and available service options within a First Nations Community.	Provide funding to, and work in partnership with, the Nishnawbe Aski Nation, to pilot culturally appropriate and accessible Autism- related resources and training sessions.	Progress towards achievement of individual activities and timelines is tracked regularly using the Goal Tracking Worksheet (Appendix C). Goal Tracking Form is monitored by Child & Community Resources to ensure accountability to timelines and milestones highlighted within.	First Nations' Participant Feedback Survey collects feedback from community Elders and caregivers (collected by facilitators), indicates enhanced knowledge and access to resources within the First Nations' Community (Survey(s) to be developed in collaboration with Nishnawbe Aski Nation based on intended outcomes of training – once selected)
To work with the Minister of Children Community and Social Services (Todd Smith), the Minister of Colleges, Training and Universities (Ross Romano), and representatives from northern colleges and universities to develop a northern strategy to attract new professionals and support existing professionals in the field. To engage academic institutions throughout the province to inform the strategy, partner and mentor where possible.	 Engage the Minister of Children, Community and Social Services Engage the Minister of Colleges, Training, and Universities Work in collaboration with the Minister's to re-establish the Northern Grant for Professionals Work in collaboration with one college and one university to develop/deliver relevant curriculum 	Progress towards achievement of individual activities and timelines is tracked regularly using the Goal Tracking Worksheet (Appendix C).	 Not applicable: Successful outcomes would include: Commitment from the Ministry to re-establish the Northern Grant for Professionals Commitment from one college and/or one university to develop/deliver curriculum
To increase accessibility to Autism services in rural or remote communities.	 Via callout to Northern Collaborative partners, determine which local providers have the staffing capacity to support travel to remote or rural communities Work in partnership with providers and Autism Ontario to identify families in need of support in their home- community 	Providers available to provide services in rural or remote communities, report on the number and location of families they project to serve as a result of Access Funds.	 Remote Communities Access Funds, Data Collection and Reporting Template (appendix G) captures evidence to support enhanced capacity in rural or remote communities, such as: Number of 'new' children, youth, or families served Number of direct/indirect hours of service delivery Cost to deliver service in rural or remote community

Goals	Activities	Process Monitoring	Outcome Monitoring
To establish a formal strategy to support families in the area of navigation / coordination, access to diagnostic assessments, and to create a formal linkage to connect families to parent advocates and mentors.	 "Access Funds" to be distributed to providers who are providing direct, 1:1 service Introduction of a Regional Family Service Coordinator role within CCR Ongoing promotion of role, including the redesign of the CCR website to provide efficient access to an individual who can support families with system navigation, linkages to parent advocates and mentors, provide recommendation on services or service pathways, 	 The Regional Family Service Coordinator will track calls and contacts to assess 'demand for services associated with role' The Regional Family Service Coordinator tracks the number of referrals to service providers from families requesting a 1-hour consult 	 Data is combined to report on successes, challenges, detailed costs, and anecdotal information that will inform future Ontario Autism Program planning. Families report they are adequately supported in making informed decisions regarding Foundational Family Services for their child, youth, or family (as indicated on Foundational Family Services Feedback Survey) (Appendix H) Referrals to relevant services or community partners indicate the Regional Family Service Coordinator has supported families with system navigation
To work in collaboration with advisory committee members, specifically parents that are currently experiencing the lack of services and supports for their youth; <i>and</i> to work in collaboration with regional and provincial providers to explore service options and supports that are available to address this need.	 and provide consultative support (as required) Foundational Family Services are designed and offered based on unique needs of youth aged 12 to 18 Linkages are established with mental health organizations to provide capacity-building opportunities for staff working with youth with ASD Linkages are established with specialists to host virtual or inperson "specialty clinics" in Northern communities 	 Foundational Family Services are available and delivered to youth throughout the region Foundational Family Services data collection indicates attendance from youth Number of youth and families served, including number of hours of service, tracked on the Northern Collaborative Phase 4 – Foundational Family Services Data Collection Template (Appendix I) 	 Feedback from families and youth as indicated on Foundational Family Services Feedback Survey (Appendix H), indicates they are satisfied with the services they have received Feedback from mental health training attendees, indicates enhanced capacity and knowledge related to mental health system navigation (Survey to be developed based on intended outcomes of training – once selected)

To enhance the capacity of parents and caregivers in the North Region, to better support their child or youth's development and manage behaviours, as parents and caregivers are better equipped to address the needs of their child or youth.	 Services are designed and offered based on unique needs of each child, youth, and family Services delivered are family-centered where caregivers are involved throughout the development and implementation of service Services are offered which allow for 'transfer to practice' where parents and caregivers are provided follow-up consultation to further develop skills 	 Foundational Family Services are available and delivered to families throughout the region Number of youth and families served, including number of hours of service, tracked on the Northern Collaborative Phase 4 – Foundational Family Services Data Collection Template 	 Feedback from Specialty Clinic attendees, indicates enhanced capacity and knowledge (Survey to be developed based on intended outcomes of clinic(s) – once selected) Feedback from families as indicated on Foundational Family Services Feedback Survey (Appendix H) indicates they are satisfied with the services they have received, and that they have increased capacity to support their child or youth due to services received
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Table 3. Logic Model

NEED	OPPORTUNITIES	→ OUTPUTS —	→ TARGET —	→ INTENDED OUTCOMES
To plan beyond CCR and focus efforts on: Supporting local service providers to increase service options and capacity Focus on rural and remote communities Bilingual and culturally inclusive services INPUTS Financial Resources: \$821,015 ending March 31, 2021 Human Assets: Advisory Committees comprised of Parents, Professionals and CCR staff. Additional Stakeholders: Community partners to participate in / or provide additional feedback and insight on strategies.	 Access to, and retention of, quality trained respite workers in the Kenora-Rainy River District. Access to trained ABA-professionals. Enhanced support and system-wide capacity of providers in the Algoma District. Enhanced service Capacity within First Nations' Communities. Lack of post-secondary institutions offering curriculum required to train and retain professionals. Access to service providers in rural and remote communities. Lack of pre- and post-diagnosis support, including the need to improve navigation and coordination supports, develop formal connections between parent advocate groups, mentors, and Ontario Autism Programs. Access and services to support youth (specifically in rural and remote areas of the district), which includes the development of "Specialty Clinics." Lack of availability of trained professionals in the North Region has resulted in parents and caregivers expressing an interest to obtain credentials to provide services and supports to their children and youth. 	 Engage families to support with development of enhanced respite model to recruit, train and retain quality respite workers in Kenora-Rainy River District. Capacity-Building Grants for Northern Collaborative partners to enhance professional capacity in the North. PILOT - Engage families to support with development of enhanced respite model to recruit, train and retain quality respite workers within Algoma District. PILOT - Development and delivery of culturally sensitive ASD awareness training in Nishnawbe Aski Nation. Commitment from MCCSS / MTCU to offer programming in Northern communities and offer funding opportunities. Access Funds available to Northern Collaborative partners to provide services in remote / rural communities. Implementation of Regional Family Service Coordinator. Enhanced services and supports available for youth, aged 12 to 18, including access to Mental Health supports and Specialty Clinics. Delivery of Foundational Family Services to families throughout the North Region (and province) - services developed based on 'needs' identified by families. 	 The Northern Capacity Building Hub Projectis focused on a collaborative effort between caregivers and providers to enhance professional capacity throughout the North Region. Targets include: Children, Youth, and Families with a confirmed diagnosis of Autism Spectrum Disorder. Public and Private providers actively participating in the Northern Collaborative. Community Elders, parents, caregivers, children, youth, and professionals within First Nations Communities. Students and professionals interested in obtaining credentials in fields of practice recognized by the Ontario Autism Program. 	 The Northern Capacity Building Hub Project has been designed to focus on opportunities presented throughout the North Region, to increase access to quality Autism-related services and supports. Intended outcomes include: Increased access to quality ABA-based services and supports, including in rural and remote communities. Increased access to quality Respite services and supports, including in rural and remote communities. Enhanced knowledge, capacity, and awareness of ASD, including available services and supports within Nishnawbe Aski Nation. Enhanced support provided to families to make informed decisions about suitable Foundational Family Services AND linkages established between families and additional community services, supports, parent advocates, and mentors to enhance the family experience pre- and post-diagnosis. Enhanced capacity of parents and caregivers who are provided to better support their child or youth (through Foundational Family Services). Increased partnerships with Colleges and Universities, generating new or additional programming offered to enhance professional capacity in the North, and the re-establishment of the Northern Grant for Professionals.



Appendix A: Northern Capacity Building Advisory Committee

Terms of Reference

Context

In the fall of 2019 Child & Community Resources (CCR) submitted a proposal to the Ministry of Children, Community and Social Services (MCCSS) to support the development of the Northern Collaborative.

The Northern Collaborative was designed to plan beyond CCR and focus our efforts on supporting local service providers to increase service options and professional capacity, with special attention dedicated to rural and remote communities, bilingual and culturally inclusive services.

MCCSS supported CCR's proposal and has confirmed funding to March 31, 2021, for the Northern Collaborative.

Scope of Work

Building on the success of the Diagnostic Hub model, the Northern Capacity Building Advisory Committee will:

- Work in collaboration with families and professionals to develop a capacitybuilding strategy which will include short and long-term strategies to recruit, train and retain professionals in the North Region;
- Provide advice and recommendations to CCR on allocation of funding to support professional capacity-building strategies (funding of \$150,000);
- Engage stakeholders (as required), to obtain additional feedback and insight; and
- Monitor and evaluate progress, leverage innovation, and share lessons learned.

Committee Roles and Responsibilities

The committee includes parents and professionals, from the public and private sector. The committee is accountable to CCR and will play a critical role in ensuring the development of a capacity-building strategy.

<u>Chair</u>

The Northern Capacity Building Advisory Committee will be Chaired by CCR's Executive Director. The Chair will provide leadership and decision-support on the capacity-building strategy and associated funding allocations.

<u>Co-Chair</u>

Committee members will be invited to express interest in assuming the role of Co-Chair. If more than one member expresses interest, the committee will engage in a voting process to select the incumbent.

The Co-Chair will work in collaboration with the Chair to set the agenda and chair the meeting.

Committee Members

Committee members will attend scheduled meetings, review, and comment on meeting materials, provide advice and guidance and seek advice from other stakeholders as required.

Administrative Support

CCR will provide the administrative support for all committee meetings. This includes coordinating meeting schedules and minute taking. Administrative support will also be provided between meetings, which may include distributing materials, and acting as the point-person for questions between meetings.

Meeting Frequency and Duration

The Northern Capacity Building Advisory Committee will meet regularly. A meeting schedule (dates and times) will be established at the first meeting.

The term of the committee is from June 2020 to March 31, 2021.

Meetings will be 90 minutes in length.

Communication

The work of the committee is intended to be transparent and engaging. To ensure we are consistent in our communication, a standing agenda item will be implemented to review meeting content, minutes, actions, and next steps. Meeting minutes will be made public on CCR's website as means to maintain transparency with stakeholders.



Appendix B: Northern Capacity Building Advisory Committee – Calendar 2020-2021

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Focused Action Items	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	April
<u>Meeting 1</u> Introductions/context/review	x										
draft Terms of Reference											
<u>Meeting 2</u>											
 Finalize Terms of Reference Selection of Co-Chair 	Х						5				
<u>Meeting 3</u>		x									
Strategy design		^									
<u>Meeting 4</u>		x									
Strategy design		^									
<u>Meeting 5</u>											
Finalize strategy design/plan for evaluation			х								
Meeting 6				х							
Strategy Launch				^							
<u>Meeting 7</u>											
Monitor implementation/course correct if required					X						
Meeting 8											
Monitor implementation/course correct if required						х					

 X
 Proposed Action Itel

 C
 Actions Completed
 Proposed Action Items

Focused Action Items	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	April
Meeting 9											
Review Evaluation (first 3 months)							х				
 Review funding (are we on track?) 											
Meeting 10											
Monitor implementation/course correct if required								x			
Meeting 11										×	
Review Draft Evaluation Report										X	
Meeting 12 – Final meeting											
Approve Final Evaluation Report											x
Share/present lessons learned with key stakeholders		Ζ,									



Appendix C: Goal Tracking Worksheet

<u>Overview</u>: The Goal Tracking Worksheet has been created to provide a template to record and track progress towards the achievement of strategies created to address opportunities identified by caregivers and professionals participating in the Northern Capacity Building Project.

Title:

Participants: _____

Date:

Opportunity / Goal	Tasks / Activities / Strategies	Assignment	Projected Timeline	Cost	Notes
Identify opportunity to be focused on. Opportunity should evolve to a measurable goal.	Track the tasks, activities and strategies discussed to address the opportunity and / or goal.	Who will participate to ensure tasks, activities and / or strategies are undertaken? Where more than one individual or agency is participating, highlight individual tasks, activities and strategies.	What are the projected timelines associated with the implementation of strategies designed to address the opportunity and / or goal?	What is the projected cost (known or anticipated), to implement strategies?	Includes notes to track discussions related to successes and / or barriers to implementation of strategies. Notes should also include (where possible), recommendations for evaluation of intended outcome(s) associated with the Opportunity / Goal.



Appendix D: Request for Proposal: Capacity Building Grant

Overview

Child & Community Resources (CCR) invites you to submit a proposal to receive a Capacity Building Grant. The Capacity Building Grant is available to providers that would benefit from financial support to enhance professional capacity resulting in additional services for children, youth, and families.

The grant will provide financial support intended to cover or offset costs associated with:

- Staff training;
- Increasing number of employees (therapists);
- Increasing hours for new or existing employees; and
- Therapist supervision.

Considerations

The grant is intended to assist northern providers in recruiting, training, and providing additional services to children, youth, and families within the North Region.

- It is expected that funding is utilized to provide needs-based, ABA-based services to children, youth, and families who would not have had the opportunity to receive service, should the grant have not been available. Service is defined as direct, needs-based, consultative-type or 1:1 service between the family and professional.
- Providers are responsible for maintaining their own client lists (including waitlists), and for identifying the children, youth, or families that will receive services as a result of the grant.
- Providers are responsible for demonstrating an increase in professional capacity as a result of the grant.
- Priority will be given to ABA staffing (BCBA, BCaBA, RBT, ABA Therapists).

Exclusions

Given the purpose of the grant, funding cannot be used to:

- Purchase equipment (e.g. tablets, iPads, computers, for staff or families).
- Provide benefits, sick time or otherwise for staff.
- Support or offset retroactive wages (i.e. funding must demonstrate an increase in direct service hours for children, youth, or families).

Application Process

Providers may apply for a maximum of \$30,000 per proposal and must clearly demonstrate how the funds will be used to increase professional capacity resulting in additional children, youth, and families receiving service. Proposals are due October 1st, 2020 at 4:30 p.m.

Once received, the proposal will be reviewed by an independent review committee comprised of parents from the Northern Capacity Building Advisory Committees, who will make an informed decision on releasing funding based on the information provided within the proposal.

Your confidentiality will be maintained throughout the process. Information shared via the application will not be shared outside of Child & Community Resources and the independent review committee.

Proposal Form

Proposal forms are due to <u>programsupport@ccrconnect.ca</u> no later than Thursday, October 1st, 2020 at 4:30 p.m. EST. Questions related to the proposal process, or information requested herein, can be directed to Trevor Bosse at <u>tbosse@ccrconnect.ca</u>

Agency Name:	
Address:	
Primary Contact:	

Section A: Funding Request

Opportunity 1: Staff Training

Please describe the projected impact on your Agency, children, youth, and families.

This section should include:

- Description of the type or name of training
- □ Number of staff to receive training
- □ Location (e.g. Sudbury-Manitoulin District, Thunder Bay District, etc.) of staff to receive training
- □ Anticipated costs per staff
- Description of how the training will support to build capacity within your agency
- Description of how the increased capacity will have a positive impact on children, youth, and / or families in your service area, including (where possible), the number of children, youth, or families that would benefit as a direct result of the training
- □ Projected timelines for training implementation and completion

Requested Funding Amount: \$ total requested funding must not exceed \$30,000

Opportunity 2: Staff Wages
Please describe the projected impact on your Agency, children, youth, and families.
This section should include:
Description of your plan to apply funding to either:
Hire new staff
Increase hours of existing staff
Location of staff in which funding will be applied towards (e.g. Sudbury-Manitoulin
District, Thunder Bay District, etc.)
The projected number of children, youth, or families that would receive new or
additional services due to the funding
The projected number of direct service hours to be delivered
Projected timelines for the above
Requested Funding Amount: \$ total requested funding must not exceed \$30,000

Opportunity 3: Staff Supervision
Please describe the projected impact on your Agency, children, youth, and families.
This section should include:
 Description of the linkage between funding requested above, and the corresponding staff supervision hours required or
 Description of the requirement for funding to offset staff supervision costs within your current infrastructure
Location of staff requiring clinical supervision
Description of the impact on new or existing children, youth, and familles whom would not have received service should the funding have not been available (may include the number of direct hours of supervision)
Requested Funding Amount:\$ total requested funding must not exceed \$30,000

Section B: Agency Overview

Please provide an overview of your agency.

This section should include:

- Service area
- □ Services offered (including age ranges, and language(s) services are offered in)
- □ Staffing numbers (FTE, part time and / or casual)
- Agency structure

Ensuring high-quality services is an integral component of the Capacity Building Grant. Please describe the knowledge, skills, and expertise of the staff within your agency, as well as your internal process for ensuring quality services are delivered.

This section should include:

- □ Description of the credentials of staff within your agency
- Brief overview of relevant training / employment history for staff within your agency
- □ Where applicable, reference to governing bodies or guidelines followed
- Description of clinical capacity, oversight, and supervision to ensure service quality is monitored and staff skills are maintained

The Capacity Building Grant is time-limited and will not extend beyond March 31, 2021. Please describe how your agency will maintain staffing capacity (built as a result of the grant) o*r*, if sustainability is not feasible, please describe the main barriers and potential solutions which could support with sustainability.

Data Collection and Evaluation

Once funding is received, you will be responsible for data collection and reporting. A report will be due to Child & Community Resources no later than March 15th, 2021, which will include the following information:

Opportunity 1: Staff Training

- □ Number of newly trained staff
- □ Number of direct training hours
- □ Financial summary
- Overview of successes and barriers (if any), of training

Opportunity 2: Staff Wages

- □ Number of 'new' children, youth or families served
- □ Number of direct hours delivered (funded by grant)
- □ Number of indirect hours delivered (funded by grant)
- Overview of successes and barriers (if any), of wage grant

Opportunity 3: Staff Supervision

- □ Number of hours of supervision (funded by grant)
- □ Financial summary

Definitions

Direct hours includes the number of hours of in-person (or virtual) service delivered (i.e. 1:1 treatment hours, assessment delivery (scoring and data tracking only if the child or family are present)). **Indirect** hours includes intake time (where the family is not present), prep time, file reviews, note writing, etc.

Recruitment Support

Child & Community Resources is prepared to offer in-kind support to our partners related to the recruitment of new employees. Support provided may include:

- Posting to various job boards
- □ Promotion of job opportunities on website and social media
- □ Resume parsing / shortlisting
- □ Interviewing

Additional support may be provided as requested.

Do you require support with recruitment? \Box Yes \Box No



Appendix E: Capacity Building Grant: Data Collection and Reporting Template

Capacity Building Grant: Data Collection and Reporting Template							
Agency Name:							
Total Funding Received:							
Section 1: Data Collection for	Staff Training Grant						
Date	Staff Initials	# of Hours of Training	Type of Training Received	Cost of Training	Is Training Complete? (Y/N)	Notes	
Section 2: Data Collection for	Staff Wages Grant						
Date	Staff Initials	# of Children, Youth, Families Served	Direct Hours Delivered	Indirect Hours	Cost	Notes	
Section 3: Data Collection for	Staff Supervision Grant						
Date	Staff initials (who received supervision)	# of Supervision Hours	Cost			Notes	
Total Funding Received:						Community Descent	
Costs to Date:						z Community Resources rces pour l'Enfance	
Remaining Funding Available:					et la Co	rces pour l'Enfance ommunauté	



Appendix F: Capacity Building Grant Feedback Survey

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Capacity Building Grant Feedback Survey

Thank you for participating in the Capacity Building Grant established by the Northern Collaborative Advisory Committees. Your feedback will help us evaluate the success of the grant in enhancing professional capacity within your organization.

* 1. Agency Name:

]
* 2. Which of the following Capacity Building Grant(s) did your age	ency receive?
Staff Training Grant	
Staff Wages Grant	

Staff Supervision Grant

- * 3. To what extent did the Grant(s) support your agency to enhance professional capacity?
 - To a Great Extent
 - Somewhat
 - Very Little
 - Not at All

Please provide additional context to your response:

4. The Grant was designed to enhance professional capacity within Northern agencies in order to provide ABA-based services to additional children, youth, and families. To what extent did the Grant allow your agency to provide additional services and supports to children, youth, and families?

\smile	To a Great Extent
0	Somewhat
0	Very Little
0	Not at All
	an annual and the set to start an
Plea	se provide additional context to your response:
Plea	se provide additional context to your response.

5. Have you received feedback from children, youth, or families who were able to engage in services with your agency, as a direct result of the grant? If so, can you please summarize the feedback received?

6. Do you have any additional comments or feedback related to the Capacity Building Grant, it's impact on your agency and / or children, youth, and families?



Appendix G: Remote Communities Access Funds: Data Collection and Reporting Template

procy Norma:															
		O MA C	a lection						Proposed Tra	wel Copierses				Projected Travel Rel	ated Staffing Cost
Travel Cate	Child #-intended to represent "brigs #" court (s. g. Child '# Child 'B,' etc.)	Fot Soff who Travelled	# of Ovikiner, Youth, Family energies, Served - intended to represent "hon- unique" count	Direct Neuro Delivered	Indirect New rs.	Ninag	Nileage Calm Travel Expenses: Neal Claim					Claim	Staffing Casts		
						Cases of Trained		Cannue of Tarvet		Date of Torvel		Dates of Toxya		Dona of Travel	
						Travilleon/Tel		TravelFromTo		TaveiFronTo		Tav-4 Ferri Ta		Trad Fem/To	
						#dilde		Netod (of Travel:	Acone	dations:	# d Days		Staffing	Cetain.
						R.Me		Car Rayted		Costere		Baukar - \$2.00		Radec	
		-						Fuelcast		# chigtes		lanch+\$16.02		#cfileas	
								Alba:				Drow - \$20.00			
						Total	\$0.00	Total	\$2.00	Trevi	50.00	Tax	50.00	Tot,4	\$0.0
												-theirun d	\$40.00.00mm		
														Tobi Proposed TravelExpenses	50
	Toria	0	0	0	٥										

Please describe the barriers and excesses associated with taveling to remote invalignmentaties. If applicaties please provide additional notes to provide context to the data provided in the "Data Collection" eaction above.



Appendix H: Foundational Family Services Feedback Survey

The following is a summary of questions asked on the Foundational Family Services Feedback Survey. The survey has been created online, and includes 'question bridging' based on responses, and as such, is multiple pages in length.



Feedback Survey: Foundational Family Services

PAGE TITLE

Thank you for your feedback!

Your feedback is very important to us and will help us make decisions about our services. Your feedback is voluntary and will not impact any services you receive. Your responses will remain anonymous and confidential.

If you have questions regarding this survey or our services, please contact us toll-free at 1-877-996-1599.

Have you received Foundational Family Services?

O Yes

O No

If Response is "No:"

Can you please explain why you have not received services? (e.g. I was not aware these services were being offered, I was not eligible, was unable to attend, etc.)

Regional Family Service Coordinator support.

* Did you receive support from the Regional Family Service Coordinator?

O Yes

- No
- Unsure

If Response is "Yes:"

* Please rate how satisfied you are with the information and support you received from the Regional Family Service Coordinator:

- O Extremely Satisfied
- Very Satisfied
- Satisfied
- O Slightly Satisfied
- O Not at all Satisfied

Do you have any other feedback?

Please select the Service Provider from whom you received services:

Please submit a survey for each service you have received. You will have the option of completing another survey at the end.

- ABA Northern Services and Training Inc.
- Applied Behaviour Analytic Services
- Behaviour Analysis North
- O Behaviour Analysis Training & Supervision (BATS)
- Biglow Behaviour Services
- Child & Community Resources
- Creative Therapy Associates
- FIREFLY
- George Jeffrey Children's Centre
- Ignite Behaviour Consulting
- Kerry Maisels Behaviour Consulting Inc
- Mariani and Associates
- Roots & Wings Psychology
- S. Grenier Consulting
- O The Northern Well-Being & Mental Health Group
- O THRIVE Child Development Centre

Based on the Service Provider selected, respondents will be asked which service they would like to provide feedback for. That is, only services offered by the Service Provider will be shown as an option.

* How was the service delivered?

- Virtually
- O In-person
- A mixture of virtually and in-person

What did you like most about the service you received?

What (if anything), did you like least about the service you received?

* Overall, how satisfied are you with the services you received?

- Extremely Satisfied
- Very Satisfied
- Satisfied
- O Slightly Satisfied
- Not at all Satisfied

* Do you feel the service you have received has increased your knowledge and provided tools to help you support your child or youth?

○ To a Great Extent

- Somewhat
- Very Little
- \bigcirc Not at All

* How likely are you to recommend our services to other families?

\cap	Verv	likelv

- Somewhat likely
- O Neither likely nor unlikely
- Unlikely
- Very unlikely

Do you have any additional comments on how we can improve our services?

Thank you for taking the time to complete the survey.

Friendly reminder to please complete one survey per service. If you would like to complete this survey again for another service, please click the link below:

Take Another Survey



Appendix I: Northern Collaborative Phase 4 – Foundational Family Services: Data Collection Template

Northern Collaborative Phase 4 Reporting Overview

The purpose of data collection is to provide data to our funder regarding Foundational Services provided through Northern Collaborative Phase 4. The data will support CCR in monitoring and reporting the number of children, youth and families served, and associated costs.

Important Notes:

(a) Data is cumulative - once a client enters service, we would expect data to increase over time (until service is complete).

(b) You may have the same client receiving various services. In these instances, it is important that data is reported for each specific service (e.g. you may have the same OAP Reference Number multiple times in the sheet however the child is receiving different services as indicated under 'Title of Service Provided.')

Data Collection Timelines						
In order to ensure access to timely data, and to meet reporting timelines as outlined by MCCSS, reports are to be saved to your secure CCR Portal location , as per the following timelines:						
Reporting Timeline Due to Child & Community Resources (via registrations@ccrconnect.ca)						
September 1st to 30th, 2020	October 11th, 2020					
October 1st to 31st, 2020	November 8th, 2020					
November 1st to 30th, 2020	December 13th, 2020					
December 1st to 31st, 2020	January 10th, 2021					
January 1st to 31st, 2021	February 10th, 2021					
February 1st to 28th, 2021	March 10th, 2021					
March 1st to 31st, 2021 April 4th, 2021						
March 1st to 31st, 2021	April 4th, 2021					



Data Collection Requirements: Northern Collaborative Phase 4 - Foundational Services

The Ministry of Children, Community and Social Services requires Child & Community Resources to collect specific data related to services provided through the Northern Collaborative. In order to be accountable to our funder, and to make the data collection process as seamless, and easy for our partner as possible, we ask for the following data to be provided. Timelines for data collection are included within the Instructions tab, and correlate directly with data collection requirements for the Ministry.

Notes:

1. An OAP Reference Number is required

2. All data below is required by the Ministry, that is, no additional data is being collected

Date of Birth	(must match name of service on	Consultation or Workshop	Ministry Sub-Category (CCR USE ONLY)	Service Start Date (yyyy-mm-dd)	Is Service Complete?	If Service Complete: indicate Service End Date (yyyy-mm-dd)	CUMULATIVE number of Hours of Service Provided (see definition in instructions tab)
	Date of Birth		Date of Birth (must match name of service on Consultation or Workshop	Date of Birth (must match name of service on Consultation or Workshop (COP LISE ON IV)	Date of Birm (must match name of service on Consultation or Workshop (COPUSE ONLY) (pagemend)	Date of Birth (must match name of service on Consultation or Workshop (CORP List CALL V) (CORP. List CALL V) (Service Start Date Is Service Complete?	Date of Birth (must match name of service on Consultation or Workshop (CCP Lise ONLY) (Ministry Sub-Category Service Start Date Is Service Complete? Service End Date