



Embedding the Science of Infant Mental Health in Practice and Policy

COMMUNITY REPORTS

**A Collaborative Approach to Embedding
the Science of Infant Mental Health and
Enhancing Infant Mental Health Services**

Volume 1

Simcoe County,
Niagara,
Ottawa,
Muskoka Parry Sound,
and Regent Park Toronto



A program of

SickKids

Chaya Kulkarni, Director
Infant and Early Mental Health Promotion (IEMHP),
The Hospital for Sick Children, Toronto
chaya.kulkarni@sickkids.ca

416-813-6062

Table of Contents

- Executive Summary1**
- Key Findings/ Recommendations2**
- Project Overview 6**
- Methodology 7
 - Selection of Communities7
 - Establishing Community Tables 7
 - Data Collection: Learning About Each Community, Their Policies, Practices, and State of Knowledge Specific to Infant Mental Health..... 8
 - The Rationale for a Focus on Infant Mental Health: What Science is Telling Us 9

Supporting Infant Mental Health in Simcoe County

- About Simcoe County 13
- Core Prevention & Intervention for the Early Years 15**
- What is Happening in Simcoe Today..... 15
 - Support for All Families with a Focus on Those at Risk 16
 - Early Screening and Assessment Activities 19
 - Early Intervention Services 21
 - Existing Collaborations among Services and Sectors Positively Supporting IMH 26
- Short Term Opportunities to Enhance Core Prevention and Intervention 28
 - Support for All Families with a Focus on Those at Risk 28
 - Early Screening and Assessment Activities 28
 - Collaboration 29
- Long Term Opportunities for Core Prevention 30
 - Supports for All Families with an Emphasis on Those at Risk..... 30
 - Early Screening and Assessment..... 30
 - Early Intervention 30
 - Collaboration 31
 - Strengthening Data Collection/Statistical Analysis and Assessment 31

Competencies for Practice in the Field of Infant Mental Health 32

- What is Happening in Simcoe Today..... 32
- Knowledge 32
- Skills 33
- Short Term Opportunities for Competencies..... 34
 - Knowledge Building for Professionals..... 34
 - Skill Building for Professionals 34
- Long Term Opportunities for Competencies 35
 - Knowledge 35
 - Skills..... 35

- Organizational Policies & Practices 37**
- What is Happening in Simcoe Today..... 37
- Short Term Opportunities for Organizational Policies & Practices..... 37
- Long Term Opportunities for Organizational Policies & Practices 37
 - Service Delivery..... 37
 - Knowledge Mobilization for Professionals..... 37
 - Data Collection 38

Supporting Infant Mental Health in Niagara

- About Niagara 38
- Core Prevention & Intervention for the Early Years 40**
- What is Happening in Niagara Today 40
 - Universal Programs for all Children and Families 40
 - Support for All Families with a Focus on Those at Risk 41
 - Early Screening and Assessment Activities..... 45
 - Early Intervention Services 48
 - Existing Collaborations among Services and Sectors Positively Supporting IMH..... 50
- Short Term Opportunities to Enhance Core Prevention and Intervention..... 52
 - Support for All Families with a Focus on Those at Risk 52
 - Early Screening and Intervention Services 52
- Long Term Opportunities to Enhance Core Prevention and Intervention 53
 - Support for All Families with a Focus on Those at Risk 53
 - Early Assessment and Screening..... 53
 - Early Intervention Services 53
- Competencies for Practice in the Field of Infant Mental Health..... 54**
- What is Happening in Niagara Today 54
- Knowledge and Skills 54
- Short Term Opportunities for Competencies..... 56
 - Skill Building for Professionals 56
- Long Term Opportunities for Competencies 57
 - Knowledge Building for Professionals..... 57
 - Skills..... 57
- Organizational Policies & Practices 59**
- What is Happening in Niagara Today 59
- Long Term Opportunities for Organizational Policies & Practices 59

Supporting Infant Mental Health in Muskoka and Parry Sound

About the Districts of Muskoka and Parry Sound.....	61
Core Prevention & Intervention for the Early Years	63
What is Happening in Muskoka and Parry Sound Today	63
Universal Programs for all Families	63
Support for All Families with a Focus on Those at Risk	64
Early Screening and Assessment Activities	68
Early Intervention Services	71
Existing Collaborations among Services and Sectors Positively Supporting IMH.....	74
Short Term Opportunities to Enhance Core Prevention and Intervention.....	75
Support for All Families with a Focus on Those at Risk	75
Early Screening and Assessment Activities.....	75
Collaboration	75
Long Term Opportunities for Core Prevention	76
Early Screening and Assessment.....	76
Collaboration	76
Strengthening Data Collection/Statistical Analysis and Assessment	76
Competencies for Practice in the Field of Infant Mental Health.....	77
What is Happening in Muskoka and Parry Sound Today	77
Knowledge	77
Skills	78
Short Term Opportunities for Competencies.....	79
Knowledge Building for Professionals.....	79
Collaboration	79
Long Term Opportunities for Competencies	80
Knowledge Building for Professionals.....	80
Collaboration	80
Organizational Policies & Practices.....	81
What is Happening in Muskoka and Parry Sound Today.....	81
Opportunities for Organizational Policies & Practices	81

Supporting Infant Mental Health in Ottawa

About Ottawa	86
Core Prevention & Intervention for the Early Years	87
What is Happening in Ottawa Today	87
Universal Programs and Services for Children and Families	87
Support for All Families with a Focus on Those at Risk	89
Early Screening and Assessment Activities.....	93

Early Intervention Services	95
Treatment	98
Existing Collaborations among Services and Sectors Positively Supporting IMH	99
Short Term Opportunities to Enhance Core Prevention and Intervention	101
Support for All Families with a Focus on Those at Risk	101
Early Screening and Assessment Activities	101
Early Intervention	101
Collaboration	101
Long Term Opportunities for Core Prevention	103
Support for All Families with a Focus on Those at Risk	103
Early Screening and Assessment	103
Early Intervention	103
Treatment	103
Collaboration	104
Competencies for Practice in the Field of Infant Mental Health	105
What is Happening in Ottawa	105
Knowledge	105
Skills and Training	106
Short Term Opportunities for Competencies	109
Knowledge	109
Skills	110
Long Term Opportunities for Competencies	110
Knowledge	110
Organizational Policies & Practices	112
What is Happening in Ottawa	112
Long Term Opportunities for Organizational Policies & Practices	112

Supporting Infant Mental Health in Regent Park - Toronto

About Regent Park	116
Core Prevention & Intervention for the Early Years	118
What is Happening in Regent Park Today	118
Support for All Families with a Focus on Those at Risk	122
Early Screening and Assessment Activities	129
Early Intervention Services	132
Existing Collaborations among Services and Sectors Positively	139
Supporting Infant Mental Health	139
Short Term Opportunities to Enhance Core Prevention and Intervention	141
Support for All Families with a Focus on Those at Risk	141
Early Screening and Assessment Activities	141

Collaboration	141
Long Term Opportunities for Core Prevention	142
Supports for All Families with a Focus on Those in High-risk Situations.....	142
Strengthening Data Collection/Statistical Analysis and Assessment	142
Competencies for Practice in the Field of Infant Mental Health.....	143
What is Happening in Regent Park Today	143
Knowledge	143
Skills	144
Short Term Opportunities for Competencies.....	145
Knowledge Building for Professionals.....	145
Collaboration	146
Long Term Opportunities for Competencies	147
Knowledge Building for Professionals.....	147
Collaboration	147
Organizational Policies & Practices.....	148
What is Happening in Regent Park Today	148
Opportunities for Organizational Policies & Practices	148
References.....	144



Embedding the Science of Infant Mental Health in Practice and Policy

Executive Summary

Ontario is a vibrant province diverse in its communities ranging from large urban settings to rural communities that span a great geographic distance. The diversity of Canadian communities underscores the need to work locally with agencies and experts to determine how the science and best practices for infant mental health can be effectively embedded into policies, programs and services.

While some aspects of mental health services may be well designed or under construction in some regions, an inclusive and coordinated system of infant mental health services is in itself in its infancy. Building on the findings of an environmental scan conducted by IMHP of a sample of Ontario communities and subsequent recommendations included in the recent *Supporting Ontario's youngest minds: Investing in the mental health of children under 6* report, (Clinton, et al., 2014 p. 21) it is evident that:

- Practitioners in the field of infant mental health come from a wide range of backgrounds and sectors that may be outside of traditional mental health services. The level of training among staff delivering services varies, and there is an inconsistent understanding of what infant and early childhood mental health means.
- The types of early mental health care, including a variety of access points, tools, and interventions available to young children and families in direct service settings varies among agencies. The extent to which these services are accessible also varies.
- Agencies use a variety of screening and assessment instruments to understand family needs and develop treatment plans. A systematic protocol for regular screening and assessment to support mental health and typical development is not consistently in place, and initiatives vary between agencies and sectors.
- While internal referrals for service delivery within agencies appear to be relatively fast, wait times for referrals between agencies to obtain external assessments and mental health services are reportedly an average of four to six months, with wait times for services ranging from six weeks to a full year. This poses significant barriers to access to services, with young children often “aging” out and losing eligibility for the recommended services during the early years.

In December, 2014, the Public Health Agency of Canada (PHAC) provided funding to Infant Mental Health Promotion at the Hospital for Sick Children to create a collaborative, community-based process to further explore the issues at play for direct service delivery agencies.

Through this project, IMHP consulted with five communities in Ontario (Niagara, Simcoe, Muskoka and Parry Sound, Ottawa, and Regent Park Toronto) to gain a better understanding among all agencies and sectors concerned with infant mental health as to the existing gaps or

barriers, opportunities for improved service delivery, and potential solutions for inter-systemic supports. Common themes emerged across communities about infant mental health practices, policies, services and in relation to the knowledge and competencies of those working with this young population and their families.

Key Findings/ Recommendations

1) **The current system of supports for families is fractured. Increased communication and transparency between sectors is imperative.**

- Each sector would benefit from clearly defined roles (i.e. prevention, intervention, treatment) and a common language across sectors.
- Adopt the Zero to Three Infant Mental Health Task Force (2014) definition of infant mental health and an understanding of core concepts:

"Infant mental health" is defined as the healthy social and emotional development of a child from birth to 3 years; and a growing field of research and practice devoted to the:

- promotion of healthy social and emotional development;
 - prevention of mental health problems; and
 - treatment of the mental health problems of very young children in the context of their families.
- Create and implement the dissemination of a universal brief/ pamphlet for physicians and practitioners to use with families that informs of key messages about developmental milestones, the importance of early mental health and responsive caregiving relationships for babies. Encourage all agencies in the region to use these documents to support a common language and understanding.
 - Explore how to strengthen coordinated, targeted messaging around parenting, child development and infant-early mental health to reach families more effectively in the public. The location of these messages is essential in reaching the families who may not otherwise access services or be aware of services available. Leverage existing parent and professional education initiatives.

2) **Practitioners working with infants and families often do not have specific expertise or knowledge of infant mental health and early development.**

- Build capacity and enhance the skills of frontline practitioners and clinicians to make observations of infant and toddler development, recognize the risk for early mental health and respond to concerns with appropriate services.
- Explore and identify both strengths and limitations in infant mental health expertise in your region's services. Look to engage children's mental health services in a collaborative discussion on building capacity for infant mental health treatment.
- Promote existing and/ or implement more multi-sector opportunities for staff to be coached on communicating and sharing information with parents about normal development and developmental concerns.

- Engage and begin a conversation with the post-secondary sector and professional associations to share knowledge of early mental health and encourage the inclusion of key topics in curricula across disciplines, for example, working with parents with unresolved trauma and how it can affect their parenting capacity. Explore the development and delivery of an Infant Mental Health Program at your local college/ university.
- Explore building capacity specific to infant mental health as new staff are hired.

3) Screening initiatives, protocols and tools for developmental screening and observation including social and emotional aspects of mental health are not consistently available or used.

- Increase early screening opportunities across sectors (physicians, early learning and care settings, child welfare, public health, etc.). Explore existing initiatives that could be adopted or adapted in your community, e.g., implementation of developmental screening clinics.
- Ensure that the tools used are robust and include a strong social-emotional component. Explore the inclusion of the *Ages & Stages Questionnaires®, Third Edition (ASQ-3™) A Parent-Completed Child Monitoring System* (Squires & Bricker, 2009) and the *Ages & Stages Questionnaires®: Social-Emotional (ASQ:SE™) A Parent Completed Child Monitoring System for Social-Emotional Behaviors* (Squires, Bricker & Twombly, 2002) tools in developmental assessments. Explore how existing tools and resources can include a stronger focus on infant and early childhood mental health concerns.
- Review admissions and follow-up forms (which document the child's history) and explore if possible how to embed infant mental health/ screening and/ or assessment components.

4) Agencies are often unaware of existing programs and services.

- Conduct environmental scans to identify current prevention and early intervention programs, service availability, mandates, efficacy, and capacity for infant/ preschool development in the community with a focus on those addressing early mental health and parent support.
- Ensure that all community agencies, sectors and disciplines are included in environmental scans. Working documents should be shared with the community to ensure the inclusion of services as they are being mapped. As a community, review the environmental scan and referral pathways together once they are complete.
- Coordinate existing scans between the Mental Health Transformation Table and public health agencies to determine overlaps or gaps.

5) Transparency is key to collaboration and effective referral.

- Develop a “local developmental services pathways” reference document for parents/ families and community partners (i.e. health and social services) outlining local services available for prenatal to three years of age for early development,

screening, assessment, prevention, intervention and treatment. Included in the pathways document should be:

- ✓ Agencies and programs serving infants, toddlers, and families
- ✓ Screening tools and initiatives being used in your region.
- ✓ Intervention and treatment services that require a formal referral from a physician.
- ✓ Services/tools that can be accessed by front-line practitioners.
- ✓ A clear protocol for referral and transitions between services.

6) Wait lists are a significant barrier to effective access to intervention and treatment.

- Explore opportunities to strengthen co-located models/services for mental health and addictions for vulnerable populations.
- Implement interim strategies and provide resources for families while transitioning into/ between services.
- Explore what strategies can be presented to families, including implementation of a developmental support plan and/ or systematic referrals to supportive services such as HBHC, while they wait for specialized care.
- Broaden mandates of agencies to include prenatal components.

7) Existing protocols do not facilitate effective follow up with clients.

- Identify strategies including but not limited to the use of a shared record system to increase system capacity for follow up and coordination of referrals for universal, early indicated intervention, and treatment. Explore how a shared record system can be used to enhance coordinated referrals, early intervention and treatment.
- Develop a form of passport document and/ or shared electronic record for families for when they visit physicians, nurses, and other support services. Explore existing models of developmental passports from other sectors (e.g. health care) that could be replicated for early mental health services.

8) There is little existing data on early mental health, prevalence, and program efficacy.

- Explore evaluation of programs, services and tools used to serve infants, toddlers, and families. Measure critical outcomes for children, not just quantitative measurement. Evaluate the number of referrals from one year to the next.

9) Each child and family is different and client engagement is a key concern.

- Explore ways for parents/families with young children can better inform practitioners/ professionals of their needs (e.g., through a checklist document

families fill out, etc.). This could include questions regarding the child's temperament and/ or the familial/ caregiving structure, for instance.

- Use the documents parents complete as an opportunity to engage, open conversation, dialogue, motivate families and to build relationships with staff. For example, the early learning and child care (ELCC) sector could look to create an “intake” resource for practitioners to learn more about a child, facilitate discussion between staff and families, and support families on a daily basis.
- Increase practitioner/ agency capacity for providing socially inclusive, empathetic, culturally and linguistically competent practices.

10) There needs to be more information regarding organizational policies and practices that support infant mental health in order to identify gaps and opportunities.

- Survey front-line practitioners and staff to gain a better understanding of staff perceptions and of the organizational policies and practices of agencies working with infants and toddlers in each community.
- Adopt a reflective supervision model that is specific to an infant mental health context.
- Develop a “Community of Practice” amongst peers and agencies to establish and support the implementation of early screening, assessment, prevention and early intervention practices.

It is evident across all communities that there is a passion and commitment to strengthen infant mental health from all perspectives and in all areas of services – policies, practice, and knowledge of those delivering service. Practitioners are excited by the science of infant mental health and are eager to integrate and embed it into their work with infants and families. There is both evidence and will for a shift in our understanding and support of infant and early childhood mental health. This is an exciting time with potential for significant change of paradigm.

References

Clinton J, Kays-Burden A, Carter C, Bhasin K, Cairney J, Carrey N, Janus M, Kulkarni C & Williams R. (2014). Supporting Ontario's youngest minds: Investing in the mental health of children under 6. Ontario Centre of Excellence for Child and Youth Mental Health. Retrieved from http://www.excellenceforchildandyouth.ca/sites/default/files/policy_early_years.pdf

Zero to Three Infant Mental Health Task Force (2014) Early Childhood Mental Health. (webpage) retrieved July 1, 2015) from (http://main.zerotothree.org/site/PageServer?pagename=key_mental)

Project Overview

Across Canada attention to mental health has never been greater. While significant efforts focus on adolescent and adult mental health, there is a growing awareness of how significant early mental health is to physical and mental health outcomes across the life span. The prevailing definition of infant mental health used in the United States and in many parts of Canada states:

Infant and early childhood mental health, sometimes referred to as social and emotional development, is the developing capacity of the child from birth to five years of age to form close and secure adult and peer relationships, experience, manage and express a full range of emotions, and explore the environment and learn – all in the context of family, community, and culture (Cohen, Oser & Quigley, 2012, pg. 1).

As the availability of scientific research supporting early mental health and development and our understanding of this science grows, how is it influencing the design and delivery of our programs and services for this young age group? Do practitioners and clinicians working with this young age group and their families have the knowledge and skill to embed this science into daily practice? Are the policies that support programs, services and those delivering and developing these reflective of this science? While many continue to provide leadership in knowledge translation activities, are we effectively translating the science to practice or is there potential to be doing more in light of what we now know? It is evident that early development including mental health can influence a child's developmental trajectory, their capacity to learn, their physical and mental health, and their behaviour throughout their life. What happens during the early years doesn't just "count" - it shapes outcomes throughout an individual's life.

Childhood is an extremely sensitive period in human development, during which the brain, especially the circuitry governing emotion, attention, self-control and stress, is shaped by the interplay of the child's genes and experiences. As children grow, the biological and environmental factors that determine their development become increasingly intertwined. When the environment is a secure, positive one, these factors join forces to help maximize their potential (Boivin & Hertzman, 2012, pg. 2).

While some aspects of mental health services may be well designed or under construction in some regions, a system of infant mental health services is in development leading to a variety of access points, tools, and interventions available to families. In an environmental scan that surveyed a sample of Ontario communities (Clinton, Kays-Burden, Carter, Bhasin, Cairney, Carrey, Janus, Kulkarni, & Williams, 2014, p. 21) it was found that:

- The type of early mental health care available to young children in direct service settings varies among agencies. The extent to which these services are accessible also varies.
- Agencies use a variety of screening and assessment instruments to understand family need and develop treatment plans.
- The level of training among staff delivering services varies, and there is an inconsistent understanding of what infant and early childhood mental health means.

- Agencies typically have, or are working on, referral arrangements with other agencies to provide complementary and mental health specialty services, with varying degrees of coordination between schools and community partners. Special Needs Resourcing funding appears to help facilitate internal agency referrals.
- Internal referrals appear to be relatively fast but average wait times for assessments and mental health services were reported at four to six months, with wait times ranging from 6 weeks to a year.

Practitioners are excited by the science and eager to integrate and embed it into their practice – there is both science and will for change in how we understand and support infant and early childhood mental health.

Methodology

Selection of Communities

Ontario is a vibrant province diverse in its communities ranging from large urban settings to rural communities that span a great geographic distance. As a pilot, the goal was to select five communities that represented the diversity of Ontario. The following criteria were used to guide the selection of communities:

- Presence and leadership of a strong Community Action Program for Children (CAPC) and Canada Prenatal Nutrition Program (CPNP) in the community;
- Participation by some community partners in the online Infant Mental Health Community Training Institute offered by IMHP during the past three years;
- A willingness among community partners to commit 3 days toward discussions at a community table;
- Support for infant mental health and the process to identify strengths and opportunities from:
 - ✓ the local Medical Officer of Health or LHIN;
 - ✓ at least one child welfare agency in the community;
 - ✓ regional/municipal child care body;
 - ✓ board of education;
 - ✓ an existing early years or best start table in the community;
 - ✓ three local champions of infant mental health;
 - ✓ some practitioners who had participated in the training provided by IMHP, with attendance from at least one person in three sectors.

Establishing Community Tables

Once the five communities were selected a local champion of infant mental health was identified as the lead for organizational purposes. Each community champion was asked to assist with scheduling to organize 2.5 days of face to face meetings.

The following is a list of the communities selected:

- Niagara
- Ottawa
- Simcoe County
- The Districts of Muskoka and Parry Sound
- Regent Park, Toronto

In all communities a CAPC and/or CPNP site was the champion either on their own or in partnership with another agency. The champions were asked to reach out to all sectors and to ensure that the community table was diverse from a systems perspective. They were also asked to ensure that those at the community table were in management positions within their agencies with the hope that this would ensure a rich source of information gathered and effective communication back to each agency.

Data Collection: Learning About Each Community, Their Policies, Practices, and State of Knowledge Specific to Infant Mental Health

A standard template was created to guide discussions and examine core prevention and intervention activities, competencies and organizational policies. The *Infant Mental Health Promotion Best Practice Guidelines* (2011) were the framework that guided these discussions. The information gathered was organized into the categories below.

- **Current programs and/or services** that the community considered to be part of their system of infant mental health services that were available to all families or targeted toward high risk families.
- **Current strategies for developmental screening** and what aspects of this looked at mental health.
- **Current early intervention programs** with a focus on those addressing infant mental health.
- **The current state of knowledge and skill of practitioners** in the community working with this age group within the following sectors:
 - ✓ Education
 - ✓ Child Protection
 - ✓ Early Learning and Care
 - ✓ Children's Mental Health
 - ✓ Public Health
 - ✓ Rehabilitation Services
 - ✓ Speech and Language Services
 - ✓ Existing collaboration among agencies

- **Short term opportunities to strengthen practices, services, and policies.** These were identified as activities the community felt could be achieved within one year.
- **Long term opportunities to strengthen practices, services and policies.** These were identified as activities the community felt would require more than one year to achieve.
- **Organizational policies and procedures** specific to infant mental health. For instance, were caseloads within agencies reflective of the intense work often required when an infant's mental health is vulnerable or did staff receive regular supervision that offered opportunities for reflection and also provided support to the trauma some staff witnessed?

Infant Mental Health Promotion was the lead on recording all information and writing the final reports. As information was gathered and organized it was sent back to each community for review, edits and suggestions. It was essential that all community partners agreed with the information that was documented. The editing phase was often conducted through email and at least one teleconference call with each community.

It is important to note that within each community the level of honesty and candour was impressive. Speaking about strengths was easy and enriching to hear, often with moments of clarity among partners as they gained insight into what others were doing. Identifying where services could be better, or policies needed to be refined because of the science, was more challenging. Within each community table there were members who helped to create a safe environment in which these conversations could take place. These more difficult conversations were honest and positive and were not riddled with blame or judgments from one sector to another, but were guided by what the science is telling us - how that science is shaping local infant mental health efforts, and ultimately how infant and early childhood mental health can be better supported and vulnerability responded to more effectively.

The Rationale for a Focus on Infant Mental Health: What Science is Telling Us

The Center on the Developing Child at Harvard University is a leader in translating decades of complex brain and behavioral science into information that can and should be influencing and guiding the practice of any practitioner or clinician working with young children and their families. This translation has led to the articulation of the following core concepts that should guide practice, program development and policy for young children (Center on the Developing Child, 2015):

Brains are built over time in a bottom up sequence. The brain begins to develop before birth and continues to develop into adulthood. Simple circuits are formed first with every level of circuitry that follows taking on more complex tasks.

The brain's capacity to change decreases over time. While it is never too late to influence brain development, we now know that earlier is better and easier. In the early years of development the brain is most plastic creating an exciting opportunity to support a child's development.

Serve and return experiences are essential to early learning, health and well-being over the lifespan. Babies are born relationship ready and in fact, their development depends on the immediate relationships in their world. We now understand how these daily interactions influence gene expression and the wiring of the brain in the early years. Positive

interactions support positive development. Unreliable and inconsistent interactions are more likely to lead to poor brain development and poor developmental outcomes for a child.

Toxic stress derails development in young children. Toxic stress is triggered when an infant, toddler or preschooler experiences prolonged activation of the stress response system in the absence of a protective relationship that can buffer the stress and the negative impact it can have on a child's development. Neglect, abuse, unresponsive and inconsistent care are just some of the experiences that can lead to toxic stress in young children.

Social, emotional, and cognitive development are connected with each other and cannot be pulled apart. Social and emotional development together provides the foundation for cognitive development. Collectively, they will influence developmental outcomes over the life of a child include school achievement.



Embedding the Science of Infant Mental Health in Practice and Policy

Supporting Infant Mental Health in Simcoe County



A program of

SickKids[®]

About Simcoe County

Simcoe County is part of Southern Ontario, located North of Toronto and nestled in between Lake Simcoe and Georgian Bay (Tourism Simcoe County, 2013). The 2011 census reported that it is home to 446,063 people and covers 4,859.16 km² of land area (Statistics Canada, 2012). Simcoe is informally distinguished as “North” and “South” Simcoe (County of Simcoe, 2014). North Simcoe is made up of municipalities including Collingwood, Wasaga Beach, Clearview, CFB Borden, Barrie, Springwater, Oro Medonte, Severn, Penetanguishene, Tiny, Midland, Tay, Orillia, and Ramara (County of Simcoe, 2014). South Simcoe is comprised of 5 municipalities including Innisfil, Bradford West Gwillimbury, New Tecumseth, Adjala Tosorontio and Essa (County of Simcoe, 2014). Simcoe is diverse with small and large rural areas sprinkled with medium to small urban centres and towns (Tourism Simcoe County, 2013). A tourism hotspot year round, this part of the province is robust in culture and outdoor opportunities such as skiing, boating, and hiking (Tourism Simcoe County, 2013).

While one of its jewels is the rural landscape, this is also one of the challenges for those agencies providing health, education and social services to families. In 2011 in the County of Simcoe, there were 23,350 children age 0-4 years old and 4,320 live births (Simcoe Muskoka Health Stats, 2015). While some funding acknowledges the challenges faced by rural communities, many programs are stretched to meet the needs in a timely way given the distances. Funding was a recurring theme in discussions as many of the programs, Healthy Babies Healthy Children (HBHC), and Community Action Program for Children (CAPC) and the Canada Prenatal Nutrition Program (CPNP) programs serve high risk communities but have experienced either a funding freeze or a reduction leading to fewer staff resources.

Simcoe County has also benefitted from some longstanding champions of infant mental health who have persisted in sharing the knowledge in the community as much as possible. This expertise was evident at the table, as was a willingness to collaborate.

Simcoe County echoed the thoughts of other Community Tables about engaging the post-secondary sector to ensure new graduates arrived with this science rather than trying to share it with them once they are in the workforce. Efforts will be made to engage the post-secondary sector in such talks.

Strength within the community is their relationship with First Nations, Métis and Inuit communities who, while not at the table due to scheduling challenges, will have input and access to the final report.

There are a couple of things that really stood out in Simcoe County. First, the County has developed and implemented a flagship entity within the community called **Early Screening Matters (ESM)**. This initiative which includes early screening and referrals for developmental delays also results in shared electronic record among agencies involved with a child. There was recognition that infant mental health needs were not well supported in this process, but ESM is still new and there was a definite willingness infant mental health in some way and also including any agencies and services that were not involved as yet such as Healthy Babies Healthy Children.

The second initiative that stood out in the County was the **funding by the Local Integrated Health Network and the County of Simcoe** for participation of all health, education and social service agencies in the online Infant Mental Health Community Training Institute offered by

IMHP. Hundreds of practitioners, clinicians and educators participated. The group felt strongly that once completed, embracing opportunities to discuss at the local level the science and how to embed it into practice was a logical next step.

This report provides a snapshot of current infant mental health efforts in the District of Simcoe County.

The Simcoe Community Table included the following agencies:

- Catulpa Community Support Services : Community Action Program for Children & Canada Prenatal Nutrition Programs of Simcoe County
- County of Simcoe: Children and Community Services
- County of Simcoe: Early Intervention Services
- New Path Youth and Family Services of Simcoe County
- North Simcoe Ontario Early Years Centre
- Royal Victoria Regional Health Centre: Children's Development Services
- Simcoe Community Services: Preschool Services
(Including Simcoe County Infant Development Program, Resource Teacher Program Barrie, Innisfil, Bradford and Ontario Early Years Centres, Barrie, Innisfil and Bradford)
- Simcoe County District School Board
- Simcoe Muskoka Catholic District School Board
- Simcoe Muskoka Child, Youth, and Family Services
(formerly known as Simcoe Children's Aid Society)
- Simcoe Muskoka District Health Unit: Healthy Babies Healthy Children

Simcoe County Core Prevention & Intervention for the Early Years

What is Happening in Simcoe Today

Note: This is not an exhaustive list of all programs, services, initiatives and projects present for children under five and their families in the Simcoe community. It is solely based upon the participation of the identified community partners over the two day event.

Simcoe County is a leading community in recognizing the importance of infant-early mental health and how it relates to immediate and long term community wellness and prosperity. The community has a long-standing multi-sector Child, Youth, and Family Services Coalition of Simcoe County and Best Start Network. Recently the Local Integrated Health Network (LIHN) and Simcoe County Best Start Network provided the entire region funding for registration to enable access to a 15 part series on infant mental health. Staff were encouraged and supported to participate in the series that was broadcast on line in real time but are available for up to one year from the date the session aired through an archived website. Some agencies allowed staff to view the webcasts during work hours while other participants were eager and viewed them on their own time. While the agencies/services in this community agree that there are many strengths they also identified some very clear opportunities that can improve developmental outcomes, in particular mental health outcomes for young children. The information below highlights current activities that are available and clearly support infant mental health promotion, early identification of risk for poor mental health and intervention.

Universal Programs for All Children and Families

Ontario Early Years Centres (OEYC)

- Ontario Early Years Centres provide key programs and services such as:
 - ✓ early learning programs and activities for children
 - ✓ early literacy activities and resources
 - ✓ parent/caregiver education
 - ✓ resources and supports
 - ✓ pre and post-natal resources and information
 - ✓ information about and a connection to other community services
 - ✓ linkages to the community and to local early years services
 - ✓ outreach services
 - ✓ developmental screening

- OEYC sites provide parent-child play groups in OEYC centres and in outreach community locations. OEYC offer capacity and skill building programs which require registration that target specific topics and run in blocks over a number of weeks such as “Life with Baby”

Simcoe County

This 10 week program is designed for first time parents and their babies aged 10 months and under.

- There is currently a program in Innisfil at the Best Start Child and Family Hub in which Resource Teachers are delivering parent-child interactive play groups that provide parent education and coaching.
- OEYCs in Simcoe County have Francophone staff, including a Coordinator of Francophone Services supporting Francophone families and their children. Parent-child interactive programs, parenting workshops and resources are available in French.
- OEYCs in Simcoe County have a Coordinator of Aboriginal Services, supporting First Nation Métis and Inuit (FNMI) families and their children with access to OEYCs. Aboriginal Coordinator provides FNMI programming within the OEYC setting.

Support for All Families with a Focus on Those at Risk

Simcoe Muskoka District Health Unit: Healthy Babies Healthy Children (HBHC)

- HBHC is mandated through the Ontario Public Health Standards to be offered by all public health units throughout the province. The Ministry of Children and Youth Services provides 100% funding for the Program. HBHC is delivered through Simcoe Muskoka District Health Unit.
- HBHC is a voluntary program for women and their families in the prenatal period and families with children from birth until their transition to school, identified with risk that will be provided with opportunities to achieve their potential.
- Every child and parent identified with risk in Ontario will have access to evidence-informed programs and services that support healthy child development and effective parenting (Ministry of Children and Youth Services, HBHC Guidance Document, 2012).
- In-home visits with women and their families in the prenatal period and families with children from birth until their transition to school by a public health nurse and a lay home visitor.

Simcoe Muskoka Child, Youth, and Family Services (SMCYFS – formerly Children's Aid Society of Simcoe County)

- SMCYFS provides a range of services to our mainstream, FMNI and FLS community including:
 - ✓ Investigating allegations of child abuse and neglect;
 - ✓ Protecting children who have suffered abuse or neglect (or are at risk of harm) by assisting and supporting their families to reduce harmful circumstances;
 - ✓ Offering guidance, counseling and referral services to families whose children are at risk of abuse or neglect;
 - ✓ Referring families to other service providers when we do not offer a service;

- ✓ Arranging for treatment services for children in care;
- ✓ Placing children with kin whenever possible, and/or in alternative family based care arrangements depending on the legal status of the child and his or her needs;
- ✓ Recruiting, developing, educating and supporting foster and adoptive homes;
- An infant assessment framework is used to determine strengths, needs, risks and protective factors;
- In-home family support (admission prevention, practical support and education and therapeutic family contact (access) if an infant/young child requires out of home care;
- The Watch, Wait & Wonder (WWW) program is offered to families in need of parenting support;
- Enhanced Parenting Specialists (EPS) supports frontline practice with infants and young children;
- Family centered case conferencing and Family Finding to increase the circle of support for infants/young children and their families.

Community Action Program for Children (CAPC) and the Canada Prenatal Nutrition Program (CPNP) Simcoe County

The Community Action Program for Children (CAPC) and the Canada Prenatal Nutrition Program (CPNP) programs are federally funded initiatives through Public Health Agency of Canada (PHAC) and are often embedded in community based programs and services.

Below is an overview of the program adapted from <http://phac-aspc.qc.ca/hp-ps/dca-dea/program/funding-financement/npf-fpn/index-eng.php> (2010):

- The Community Action Program for Children (CAPC) and the Canada Prenatal Nutrition Program (CPNP) are two programs that are committed to promoting healthy birth outcomes and the healthy development of children. These programs are typically embedded within community based agencies.
- CAPC/CPNP programs in Simcoe County are delivered by Catulpa Community Support Services.
- Referrals and community connections: CAPC and CPNP programs refer participants to community agencies, programs, services and community events. This is a critical role in ensuring that families are aware and connected with much needed services and supports.
- **The Simcoe County MotherCare Program** is one program that receives CPNP funding with which it provides a friendly and supportive environment for pregnant women and new mothers with babies up to 3 months. The program is geared toward promoting and encouraging healthy pregnancies.
- Participants receive support and information on a wide-range of relevant issues such as breast-feeding, health, pre and postnatal nutrition and community resources. Below are the

many ways this funding is used to support expectant families and/or families with young children:

- ✓ A Registered Dietitian with the program who works with staff and participants to understand and support the “Feeding Relationship”.
- ✓ Public Health Nurses work in-kind at all MotherCare.
- **Next Step Postnatal Programs:** Programs for parents with infant 3 months to 3 years of age. Extension of the CPNP MotherCare programs. Participants receive support and information on a wide-range of relevant issues such as breast-feeding, health, pre and postnatal nutrition and community resources. Below are the many ways this funding is used to support expectant families and/or families with young children:
- The following programs are offered by CAPC through Catulpa Community Support Services:
- **Young Parent Support:** Pregnant or parenting youth find emotional support, practical help and access to basic needs in the informal atmosphere of a Young Parent Resource Room. Outreach is provided throughout Simcoe County in schools, home and coffee shops ensuring that all pregnant and parenting youth have access to available supports.
- **Food Skill Building and Meal Clubs:** Each month more than 60 young parents and their children join together at one or more of the Young Parent Supper Clubs to prepare and share a meal together.
- **Parenting Programs:** Each site provides supports to parents to assist in strengthening parenting skills and the parent-child relationship.
- **Integration to Canadian Society Program:** The Integration to Canadian Society Program assists and supports newcomer parents and their children with the successful integration into Canadian society and the school system. This program helps parents to recognize their role, their rights, and responsibilities as residents and parents in Canada through a variety of culturally sensitive programs and supports. Parents gain knowledge through workshops that cover topics such as: car seat/seatbelt laws, Talk to Your Child in Your First Language, immunization, Getting Ready for K, attendance, high school, early warning letter, etc. A summer school readiness program is provided to newcomer children entering Junior or Senior Kindergarten in the month of July.
- **Early Learning Programs:** Many of the programs provided by CAPC sites have a specific focus on enhancing children's early learning skills. Examples of such programs include: Connect with Your Baby, You and Your Toddler, Preparing for Kindergarten, and Success in Kindergarten.

Simcoe County Infant Development Program

- Programs are designed to serve infants and young children who are at risk of or identified with a developmental delay and their families. The target populations include established risk (diagnosed disorder), biological risk (early events which may affect an infant's development), and psychosocial risk (vulnerabilities which may be magnified by environmental factors) which accompanies established or biological risk. The Infant Development Program is primarily a home visiting program. Limited service is offered in community settings such as OEYC programs and Outreach playgroup settings established in high risk communities. Infant Development workers assess infant development and family functioning and work collaboratively with a multiple disciplinary team to provide an integrated Individual Family Support Plan for families.

Early Screening and Assessment Activities

Simcoe County Early Screening Matters Initiative

- **The Simcoe County Early Intervention Council** engaged the community to develop an early developmental screening protocol. The intent is to provide broader screening capacity within the system so that screening is a regular and expected part of community programs which service children. Licensed child care centres, Ontario Early Years Centres (OEYC), and Community Action Program for Children (CAPC) introduce families to Early Screening Matters initiative at registration.
- At registration, developmental milestone information and The Nipissing District Developmental Screen (NDDS) is shared with families as a “conversation starter”. If a concern is found or if a concern is raised by either the parent or Early Learning Professional, the next step is to administer the Early Referral Identification Kit (ERIK) together with families.
- ERIK is a “practice-informed” tool created by York Region Early Intervention and York Preschool Speech and Language, adapted by professionals from Simcoe County Early Intervention and Children’s Development Services in Simcoe. Simcoe County professionals collaborated to build referral pathways to support identification of children who may benefit from multiple services as early as possible, facilitating a system vs. a service based response
- The ERIK is unique in identifying red flags and atypical aspects of development. In Early Learning Centre (ELC), Early Childhood Educators (ECE) complete developmental screenings (note: ERIK is not a validated tool at this time).
- Parents are informed that should they have any concerns about their child’s development the early learning professional can sit down together with the parents and complete an ERIK. Alternatively, if early learning professional has concern, they can approach the parent with the ERIK.
- Agencies using ERIK fax any referrals to Royal Victoria Regional Health Centre intake office which triages the referrals to the correct agency/service. At this point a shared electronic record is created when more than one referral is suggested to support service coordination. ERIK referrals from the Early Screening Matters Initiative are tracked.

Simcoe Muskoka District Health Unit: Healthy Babies Healthy Children (HBHC)

- HBHC offers support in the home (assessment, teaching, referral and service coordination) for every child and parent identified with challenges to provide opportunities to achieve healthy pregnancy, nutrition and feeding (including breastfeeding), healthy child development, safety, adjusting to parenthood, accessing community resources , and more. These visits are done by public health nurses and lay home visitors who work with families, offer health information and support, and connect families to parenting services in the community.
- Public Health Nurses (PHN) and Family Home Visitors (FHV) and work with families to complete the NDDS to help start discussion of healthy child development. The Ages and Stages Questionnaire 3 (ASQ-3) is completed by parents with PHNs if there is a concern and the appropriate referrals are made directly from HBHC to the agency or service deemed appropriate by the Nurse.
- The Nursing Child Assessment Satellite Training (NCAST) “Promoting Maternal Mental Health during Pregnancy” and “Keys to Caregiving” are used to provide tools for staff to promote positive growth and development with a special emphasis on maternal and infant mental health promotion and parent-child attachment.
- The NCAST Parent-Child Interaction Feeding and Teaching Scales are used by PHNs to provide valid and reliable assessments for measuring parent-child interactions. The results from these strength-based tools are discussed with families and guides interventions for enhancing parent-child relationship.

Simcoe Muskoka Child, Youth, and Family Services (SMCYFS - formerly known as Simcoe Children’s Aid Society)

- Some, not all, staff use the Infant Assessment Framework to determine strengths, needs, risks and protective factors within a developmental context;
- Additionally, some but not all staff use the NDDS within the agency. SMCYFS has a made a commitment to become active in the ESM initiative through their Early intervention Services.
- For young children in the agency’s care the Ages and Stages 3 Questionnaires (ASQ-3) and Ages and Stages Questionnaire Social Emotional (ASQ:SE) will be used once embedded in the Action Assessment Record (AAR).

New Path Youth and Family Services

- New Path Youth and Family Services offers early years services to families with children up to 6 years of age who are experiencing social, emotional or behavioural problems. The following services/programs are offered at New Path Youth and Family Services:
 - ✓ Parent & Child Groups (Incredible Years Parent Group and Incredible Years Small Group Dinosaur Treatment Program)
 - ✓ Intensive home-based counselling (for up to a 6 month period)
 - ✓ Consultation with a multi-disciplinary team if appropriate

- ✓ Service coordination with other agencies
- ✓ Supportive services while you wait
- ✓ Follow-up consultations
- ✓ Referral to other community services if appropriate
- ✓ New Path is using the ASQ:SE.

Simcoe Infant Development Program

- Infant Development Programs use the following tools for assessment and planning and Individual Family Service Plan development:
 - ✓ ASQ and ASQ:SE
 - ✓ The Bayley Scales of Infant and Toddler Development, third edition
 - ✓ Brigance Inventory of Early Development II
 - ✓ Portage: Child Development Tool for Observation and Planning
 - ✓ Sensory Profile 2
 - ✓ PICCOLO
 - ✓ The Carolina Curriculum
 - ✓ CSBS DP Infant-Toddler Checklist
 - ✓ Edinburgh Postnatal Depression Scale
 - ✓ Battelle Developmental Inventory 2nd edition
 - ✓ M-CHAT

Physician Enhanced 18 Month Well Baby Visits

- 18 month Well Baby Visits with physicians to assess infant development are available but not occurring consistently.

Early Intervention Services

Simcoe Muskoka District Health Unit: Healthy Babies Healthy Children (HBHC)

- HBHC offers home visiting programs to families deemed to be at risk for poor developmental outcomes.
- HBHC creates a Family Service Plan for each family that supports parents and ensures stronger service coordination and integration for home and clinics. One plan includes several components to prioritize needs and strengths.
- HBHC offers support in the home (assessment, teaching, referral and service coordination) for every child and parent identified with challenges to provide opportunities to achieve healthy pregnancy, nutrition and feeding (including breastfeeding), healthy child development, safety, adjusting to parenthood, accessing community resources, and more. These visits are done by public health nurses/ lay home visitors who work with families, offer health information and support, and connect families to parenting services in the community.

- Positive Parent Program (Triple P) is also offered through HBHC
- The “Partners in Parenting Education” (PIPE) activities are used across the province within HBHC to complement the NCAST assessments and support the enhancement of parent-child relationships.

Simcoe Muskoka District Health Unit

- **Roots of Empathy:** Roots of Empathy focuses on raising levels of empathy, resulting in more respectful and caring relationships and reduced levels of bullying and aggression. Roots of Empathy is offered in selected schools in SCDSB, SMCDSD and TLDSB, as identified by the Boards. Observations of a loving parent-child relationship give children a model of responsible parenting.
- **Muskoka Post-Partum Peer Support Group:** This web-based peer support group can be accessed by women across Simcoe and Muskoka to provide additional support to clients identifying with mild to moderate adjustment issues related to the postpartum period. Neither professional mental health nor medical advice is offered through this service. Supporting women experiencing mild to moderate adjustment issues may help improve adjustment to parenting and the promotion of healthy parent-child interactions.
- **Triple P:** a parenting program to support parents to engage with their infants and children in positive ways. Triple P is offered in a variety of ways throughout Simcoe County in groups, and individually.
- **Breastfeeding Place:** Peer breastfeeding support groups, facilitated by Public health nurses and community peers allows parents to connect with each other, receive information and support on parent-infant attachment and breastfeeding.

Simcoe Infant Development Program

- The Simcoe County Infant Development Program provides in-home services to families across Simcoe County with infants 2 years of age or under who are at risk of or who have been identified as having a developmental delay.
- A child may be referred by parents themselves or by community professionals with parent's consent.
- Recognizing that the family is the primary source of support and nurturing for the child, intervention on behalf of the child is family-centered and directed. Through play, the infant's strengths and needs are identified and appropriate activity suggestions are provided in order to support their optimum development. Parental guidance and support as well as suggestions to encourage and promote healthy parent-child interactions can also be provided.
- As specialists in infant development and infant mental health, Infant Development Workers will assist the family to:
 - ✓ Identify the child's and family's needs.

- ✓ Develop an Individual Family Service plan, focusing on the family's goals and include specific activities that address the child's developmental needs.
 - ✓ Link to and connect with a variety of professional services offered through the Early Intervention System as needed. These could include a physiotherapist, occupational therapist, speech/language pathologist, family counselling, developmental assessment, and/or behavioural intervention.
 - ✓ Co-ordinate services as needed in order to provide a team approach.
 - ✓ Access funding or special subsidies that may be available.
 - ✓ Connect you with local parent support groups and parent education opportunities as available.
 - ✓ Transition to Preschool Resource Services if needed.
(<http://www.simcoecommunityservices.ca/preschool-services/simcoe-county-infant-development-program>)
- Services are available throughout Simcoe County with our main office in Barrie and satellite offices situated in Bradford, Collingwood, Midland and Orillia. There are no costs involved. This service is funded by the Ministry of Children and Youth Services.

Transitional Integrated Program Plan (TIPP):

- Developed to support children involved in Early Intervention as they transition from preschool to school.
- Gathers information such as the child's strengths and needs from the family and Early Intervention team and shares this information with the school using the shared electronic record.
- Designed to inform the development of the Individual Education Plan (IEP) and serve as an initial school plan.

Simcoe Resource Teacher Program

- The Resource Teacher Program provides services to child care programs and families with children between 2 years of age and school entry, who are experiencing a barrier to development or are at risk of doing so.
- Services to children are offered primarily in Licensed Child Care settings and services are offered to families through regular meetings at OEYC locations, in their home or at the agency office location, to support them in their role as the primary decision makers for their child.
- All interventions, whether child or family focused, are based on strengths and are documented by use of an Individual Family Service Plan (IFSP). The IFSP articulates the child and family goals with specific strategies to determine outcomes. Goals often contain cross disciplinary objectives and are prioritized to respect the values of the family and to meet the most critical needs of the child at home, in preschool and in the community, to ensure full participation. An IFSP is in place six weeks after a child has become actively

involved in the service and a full report based on formal and/or informal assessment findings is completed annually.

- Resource Teachers will develop a written Statement of Relationship with the Childcare centres they serve to establish goals and direction for the partnership. The Statement of Relationship will include:
 - ✓ Direct involvement in the program based on minimal sufficiency for optimal outcomes
 - ✓ Consultation Services
 - ✓ Sharing of resources
 - ✓ Joint planning of meetings/case conferences
 - ✓ Training needs and opportunities for childcare staff
 - ✓ Problem Solving Strategies
- Resource Teacher Programs facilitate home visits using “Best Practice Guidelines for Home Visits” as developed by the Early Intervention Council.
- Services to support children in regulated childcare will be determined using a Service Level Continuum Chart and may include the following methods of delivery:
- Consultation: Resource Teachers offer this specific service that is time limited and varied based on the defined Consultation Service Model. Consultation Services may include:
 - ✓ Coaching of Early Childhood educators
 - ✓ Modelling of specific interventions and techniques
 - ✓ Observation of children with special needs for recommendations
 - ✓ On-site Meeting participation
 - ✓ Inclusion plan reviews
 - ✓ Service Coordination
 - ✓ Team meeting participation
 - ✓ Assist in developing program plans
 - ✓ Program/Curriculum modifications/adaptations
 - ✓ Classroom modification
 - ✓ Transition to school planning
 - ✓ Off-site training workshops for Early Childhood educators
 - ✓ Provide parent education/workshops
 - ✓ Mentoring (new programs)
- Direct Service Includes:
 - ✓ 1 to 1 interaction for defined time in a childcare program with the goal to move to consultation model (supporting specific room, period of day, mediation, therapy)
 - ✓ Case Management
 - ✓ Home Visits

- School Transition Follow-up: This is offered for up to three months when children enter the school system to ensure a smooth transition. The Resource Teacher may visit the school or consult with the teacher.
- Assessments: Assessments are regularly completed by Resource Teachers. These may include the Bracken and Sensory Profile, the Portage Checklist, Brigance, etc. Informal observations by the Resource Teachers, family and Early Childcare Educators may also form part of an assessment.
- Community Education/Training: Presentations to parent groups, various college programs and other professionals or in-service training to childcare programs may be offered as requested.

New Path Youth and Family Services

- New Path Youth and Family Services offers Early Years Services to families with children up to 6 years of age who are experiencing social, emotional or behavioural problems.
- Parent & Child Groups (Incredible Years Parent Group and Incredible Years Small Group Dinosaur Treatment Program).
- Intensive home-based counselling (up to a 6 month period).
- Consultation with a multi-disciplinary team if appropriate.
- Service coordination with other agencies.
- Supportive services while you wait.
- Follow-up consultations.
- Referral to other community services if appropriate.
- The Incredible Years Small Group Dinosaur Treatment Program which looks at social emotional development, social skills, regulation, and behavioral concerns for children four and up.
- Triple P programs are available for parenting support at New Path and other agencies in the community including the health unit. They are using toddler and preschool components.

Children's Development Services - Royal Victoria Regional Health Centre

- Provides children and their families with a wide range of services and supports both in the clinic and community to help them develop to their fullest potential.
- Provide Occupational Therapy Services for Barrie, Innisfil and Bradford.
- Provide Speech Language Pathology Services across Simcoe County with offices in Alliston, Barrie, Bradford, Collingwood, Midland & Orillia.
- Offers integrated models of education, assessment and intervention. Speech Language Pathologists and Occupational Therapists assess jointly and prepare a joint assessment report and intervention plan.
- Responsive parenting is inherent in the parent coaching models of intervention.
- Hanen programs are regularly delivered to families across the county including: It Takes Two to Talk, Target Word, More Than Words, Talkability.
- Assessment and intervention services in French. Integrated education for parents and early learning professionals is offered in French.
- A full time Speech Language Pathologist is devoted to early identification and education activities across the county of Simcoe. This SLP acts as the lead for the Early Screening Matters Initiative as well as delivering a wide range of education opportunities often in conjunction with Occupational Therapist and/or a Resource Teacher. Learning Language & Loving It - The Hanen Program for Early Childhood Educators is also delivered by this SLP.

Children's Therapy Services - Orillia Soldiers' Memorial Hospital

- Offers Occupational Therapy Services in Alliston, Angus, Collingwood, Midland and Orillia. Services are delivered in a variety of settings.
- Offers Physiotherapy across the county of Simcoe. Services are delivered in a variety of settings.

Existing Collaborations among Services and Sectors Positively Supporting Infant Mental Health

- Best Start Network of Simcoe County: An example of collaboration among service providers is the Community Integration Leaders Initiative which was endorsed by the Best Start Network.
- As a strategic and innovative response to the need to provide more integrated, coordinated services closer to home, parents and service providers in Simcoe and York advocated the provincial government to form the Children's Treatment Network. The Network's goal is to create a new service delivery model that links existing service providers across sectors so they can take a team approach to each child's care. The Children's treatment Network was the lead agency for the Initiative.

- Early Screening Matters Initiative is used universally by those agencies providing children's development services across Simcoe County and learning modules were purchased to support this work through the CIL Project.
- Early Intervention Services and Simcoe School Board collaborate with the Transition Integrated Program Plan (TIPP) which are used to support children involved in early intervention services as move from preschool into the school system.
- There is a Learning Management System (LMS) in place and used by the ELC community (Child care, OEYC, HBHC, Public Health Nurses, Early Intervention Services).
- The Simcoe County Early Intervention Council has created integrated support materials for families and the broader system including an Early Intervention shared website and parent handbook. www.earlyintervention.simcoe.ca

Best Start Network of Simcoe County is a children's planning table of the Child Youth and Family Services Coalition of Simcoe County:

- Prenatal, Infant, and Early Years Mental Health Task Group (Best Start Network subgroup) was established which include the various sectors working with infants, toddlers, and their families.
- Simcoe Infant Development Program accessed and coordinated in partnership with resource teachers, home visitors, child care, OEYC, HBHC, and school transition agencies.
- Prenatal-Infant and Early Years Mental Health Task Group, LHIN Child and Adolescent Mental Health Steering Committee collaboration for IMHP professional development.
- Best Start Early Years Professional Development Committee is a collaboration for professional development for childcare, JK/SK teaching teams, special needs resourcing and other early years providers
- Shared electronic records are used when the need for multiple services is identified.
- There is currently an Aboriginal Children's planning table (Biinoojinsag) in Simcoe County which meets monthly. First Nation Metis Inuit members are also present at Best Start Network and planning tables.

Short Term Opportunities to Enhance Core Prevention and Intervention

Support for All Families with a Focus on Those at Risk

- Promote existing and implement more multi-sector opportunities for staff to be coached on how to communicate and share information with parents about normal development and developmental concerns.
- Explore the development of parenting messages on child development (using a universal language) to be shared on social media by agencies.
- Explore effective outreach methods for agencies working with vulnerable families in high risk situations
- Explore and review what resources are available on developmental milestones that could be promoted online or face to face with families as a consistent resource for parents and professionals.
- Ensure families that are waiting for intensive services are provided with interim resources and strategies they can use to support their child's development while they wait.
- Identify pre-existing campaigns using locally developed key messages (based on the science) and explore funders to promote and advocate the importance of Parent- Child relationships, accessing developmental screenings, engaging and empowering parents, healthy development, parental mental health and impact on infants and toddlers.
- Support the development of Best Start Child and Family centres to address the needs of vulnerable families in Simcoe Country.

Early Screening and Assessment Activities

- Broaden and implement opportunities for physicians and other health professionals to become aware of infant and parental mental health through education (through CME credits).
- Explore and identify ways to increase early screening opportunities across sectors (physicians, early learning and care settings etc.).
- HBHC and SMCYFS are committed to formally becoming a part of the ESM initiative as well as, train staff on the ESR (Electronic Shared Record), the Preschool CANS and the Common Assessment Framework
- Continue to support the Community Learning Library to continue efforts in module development for the Early Screening Matters Initiative.

Collaboration

- Explore and create a universal one page document for physicians to use during visits; all agencies in the region will have this document that includes key messages about the importance of relationships for babies.
- Expand Simcoe County Prenatal Infant and Early Years Mental Health Task Group to include FNMI community, Francophone community, midwives, doctors, parents, and other professionals in the community to the table. (Identify parents who can be invited to the table).
- Communicate and align the work of Simcoe's Prenatal Infant and Early Year Mental Health Task Group with the Special Needs Strategy.
- Create a package and executive summary for Special Needs Strategy and Service integration tables to highlight key points and recommendations made.
- Advocate for government/agencies to address the impact adult mental health has on infant mental health.
- Have IMHP attend Local Health Integration Network (LHIN) meeting to discuss the initiative completed by Simcoe Prenatal Infant and Early Years Mental Health Task Group in June. Look to share the report with a broader group of agencies.
- Explore and work toward the inclusion of a parent at the task group.
- Expand involvement with First Nation, Métis, Inuit and Francophone partners through the Best Start Network to review the report and ensure that it is inclusive and respectful to the specific needs of FNMI and Francophone families in the county.
- Coordinate a meeting with Adult Mental Health Services including the FNMI service lead.
- Explore further how the ESM initiative can be more inclusive and reflective of population of the country.

Long Term Opportunities for Core Prevention

Supports for All Families with an Emphasis on Those at Risk

- Explore opportunities to enhance the development of a model that supports family time through parent education and coaching applicable or adaptable to a variety of settings including child protection and Ontario Early Years Centres.
- Enhance a county-wide strategy to support infant feeding and general nutrition from birth to five, including the Baby Friendly Initiative (BFI).
- Broaden mandates of agencies to include prenatal components.

Early Screening and Assessment

- Explore the ideal intervals for screening to occur.
- Explore and identify all current services that provide developmental screening including infant and early mental health.
- Identify and document which agencies are using what screening tools and the protocol followed by each when there is a developmental concern.
- Explore what other services or agencies could explore the implementation of developmental screening including infant and early mental health.
- Create a process to recognize the risk for early mental health and respond with appropriate services.
- Create a process to evaluate the Early Screening Matters initiative including the ERIK tool
- Explore how ERIK can include a stronger focus on infant and early childhood mental health concerns.
- Continue to roll out and implement the pre-school CANS tool and the Common Assessment Framework.

Early Intervention

- Identify strategies to increase the system capacity for referrals to be followed up and coordinated both universally, early/ indicated intervention, and treatment including but not limited to the used of the shared records system.
- Explore how the shared records system can be used by those currently not using it to enhance coordinated referrals, early intervention and treatment.

- Create and implement an updated 'transition to school' plan before the child enters kindergarten so all are aware of any new information from May to September.
- Strengthen service coordination for children transitioning from one system to another such as from preschool to school to ensure continuation and consistency.
- Explore and identify current infant mental health experts within sectors and share this information at the Best Start Network table. This may include a discussion about what criteria would identify any individual as an "infant mental health" expert.

Collaboration

- Include physicians and midwives in the process of Shared Records, Early Screening Matters, and other early identification initiatives.
- At local teams, determine what could be done to engage all practitioners and clinicians to create a more robust team and strengthen and expand relationships.
- Identify opportunities to leverage agencies who have established relationships with families when sharing plans for care.
- Advocate for a parenting course in school and high schools to teach child development, families/parenting, and life skills (including Roots of Empathy).
- Maintain a strong focus and commitment to ensuring culturally and linguistically competent services, supports and processes for families.

Strengthening Data Collection/Statistical Analysis and Assessment

- Determine what information is currently being collected by agencies to help learn where in the region families are accessing services and where there is less involvement.
- Explore a provision within the Early Screening Matters Initiative that allows new information that would be relevant to professionals/clinicians to be prompted for relevant practitioners with an alert message.
- Explore a plan that uses a universal tool to capture family/child, assessment, referral, and screening information.
- Explore how technology can be used to increase information gateways for families.

Competencies for Practice in the Field of Infant Mental Health

What is Happening in Simcoe Today

- Over 25 agencies from across Simcoe County and across many disciplines (health, education, early learning and care, child protection etc...) are engaged in the Infant Mental Health Community Training Institute, integrating the knowledge presented on varying infant mental health topics into practice. This was funded by the LHIN and the County of Simcoe.
- The Best Start Network member agencies established the Early Years Professional Development Committee to better coordinate activities, services and professional development. The County of Simcoe contributes substantial funding through a capacity building envelope provided by the Ministry of Education to address training needs for licensed child care and Early Years partners in Simcoe County.

Knowledge

- The Best Start Network and Professional Development committee facilitate infant mental health knowledge in the county. For the last three years, the Best Start Professional Development survey has indicated priority be given to training opportunities in early year mental health.
- There is an annual “We Are Strong Together” conference for Early Years professionals.
- Through the Royal Victoria Regional Health Centre, Preschool speech services deliver workshops on topics of interest to ECEs and OEYC. Simcoe CAS uses the high-risk infant curriculum (developed by OACAS) available for child protection staff
- Through Best Start, Early Intervention Services can create a Service Pathways Mapping which is available for children in the county.
- 3 modules (Early Screening Matters, Developmental Screening Tools, Sharing Developmental Information) are currently available on our locally developed learning management system. These 3 modules are also available in French. These modules are also being adapted for and by the First Nation, Metis and Inuit Practitioners.

Skills

- Within Simcoe Muskoka Child Youth and Family Services, there are some staff who are trained to deliver Watch, Wait and Wonder which is an attachment intervention. As well the agency delivers an Anti-Oppression practice training to increase staff's understanding of the dynamics of privilege, power, oppression and social location, how her/his own social identities impact their interactions with clients and colleagues and to understand that being a change agent and an ally is integral to the role of Child Welfare Workers. Additionally, the agency has developed a policy and framework for the delivery of supervision.
- Kindergarten teachers are equipped with education kits on self-regulation.
- Professional Learning Communities (PLC) are teaching kindergarten staff how to work with special needs children in a full day play based kindergarten setting.
- Infant Development Team and HBHC have been trained on attachment and methods for staff sharing ways to use this knowledge in their practice with families.
- Early Literacy Specialists provide skills based workshops to services across the county on "Reading With Children"

Short Term Opportunities for Competencies

Knowledge Building for Professionals

- At the Best Start Network, Child, Youth, and Family Coalition of Simcoe County and LHIN community meetings, initiate a dialogue about parental mental health and how that can create developmental vulnerability for infants and toddlers.
- Create and promote relevant training opportunities for all sectors annually.
- Strengthen the opportunities for cross disciplinary, collaborative professional development training using the Best Start Network Table to share opportunities.
- At the Coalition Table, create a mechanism so experts from one agency can provide some training to other agencies that may want to strengthen that particular area.
- Explore how we can create infant mental health experts and champions within agencies and the region.

Skill Building for Professionals

- Create an opportunity to debrief what was learned from IMH Community Training and how the information was interpreted from different sectors and how it can be practiced.
- Enhance the Best Start Service Mapping Tool to identify further mental health services for referrals – <http://maps.simcoe.ca/Public/?MODE=theme&THEME=BESTSTART>

Long Term Opportunities for Competencies

Knowledge

- Determine long term sustainable strategies and opportunities to support practitioners as they apply what they learned through IMH Community Training.
- Explore how to engage supervisors to be a part of conversations about service integration around the new knowledge from community training.
- Gain support and develop strategies to evidence based practices/programs to assist with manageable caseloads.
- Advocate to provide sufficient resources to support infant, child and family mental health.
- Explore ways to strengthen empathy, culturally competent, and linguistically competent capacities within staff.
- Have the system incorporate a strategy of empowerment for parent/caregiver- this can be built into competencies.

Skills

- As a community, we would like to strengthen knowledge, capacity, and skills in the following areas:
 - ✓ Trauma informed practices among more disciplines and services.
 - ✓ Child focused intervention within a parental mental health context that is coordinated.
 - ✓ Supporting parent-child relationships for families experiencing antenatal mood disorders.
 - ✓ Evidence based practices and programs – ensuring we are using interventions and programs that have been evaluated.
 - ✓ Responding to parental mental health concerns in a timely way with age appropriate interventions.
 - ✓ Capacity for staff engagement with families in a collaborative way in other agencies/ services/ programs
 - ✓ Adopt a supervision model that is specific to an infant mental health context.
 - ✓ Create a community based mentoring calendar amongst professionals which would include job shadowing, professional development events and staff swapping opportunities to assist in strengthening observational skills specific to infant mental health. This could enhance skills but also enhance understanding among disciplines about roles and scope of practice.

- ✓ Enhance the skills of practitioners and clinicians to make observations of infants, toddlers and their development within the context of infant mental health with a clear protocol established.
- ✓ Create a collaborative practice with adult mental health practitioners, strengthening the bridges between community agencies and adult mental health services.
- ✓ Acknowledge the needs to strengthen the capacity and resources to provide family counseling
- ✓ Increase skill and capacity for all staff working with young families in the area of engagement and relationship building with vulnerable individuals and families.

Organizational Policies & Practices

What is Happening in Simcoe Today

Within Simcoe County, many agencies are trained on cultural sensitivity and awareness. Having this knowledge and understanding, allows agencies to respond more effectively to the needs of each client's unique cultural. Particularly as a community, we are looking to strengthen our understanding of the First Nation, Metis, Inuit community and the Francophone community to better respond to their needs.

Short Term Opportunities for Organizational Policies & Practices

Knowledge Mobilization for Professionals

- Explore how to build capacity in staff specific in infant mental health as new staff are hired.
- Adopt the Zero to Three Definition of *Infant Mental Health* and identify where it needs to be included across the region.

Long Term Opportunities for Organizational Policies & Practices

Service Delivery

- Assess if the hours of operation at our agencies are accommodating for different types of family services.
- Explore ways to create more flexibility within agencies to accommodate individual family needs.
- Work towards service integration.

Knowledge Mobilization for Professionals

- Enhance knowledge and awareness of vicarious trauma to practitioners.
- Voice and request support at Best Start Network to explore compliance with the Children's Charter in Simcoe County.

Data Collection

- Create and implement a staff survey on organizational policies and practices for agencies working with infants and toddlers for each community. IMHP would develop the survey based on the needs determined by the community from our organizational policies and practices document. The outcome of the survey would be used to support and emphasize the need for the development of agency policies and procedures that support practitioners and clients.



Embedding the Science of Infant Mental Health in Practice and Policy

Supporting Infant Mental Health in Niagara



A program of

SickKids

About Niagara

The Niagara region includes Fort Erie, Grimsby, Lincoln, Niagara-on-the-Lake, Niagara Falls, Pelham, Port Colborne, St. Catharines, Thorold, Wainfleet, Welland and West Lincoln (Niagara Region 2015). There are 12 municipalities within the region that include urban and rural communities (Niagara Region, 2015). Niagara is a tourism hotspot with Niagara Falls and a robust and growing vineyard industry.

Over the years, the Niagara region has benefitted from exceptional leadership in the area of early development including infant mental health. A number of sectors have and continue to collaborate in an ongoing effort to support optimal development for all young children in the region. One of the flagship entities in the region is the Early Childhood Community Development Centre (ECCDC) that is dedicated to supporting the ongoing knowledge building of any practitioner working with young children. The service is well used by the childcare community. In addition, the level of collaboration among some agencies in the Niagara region is a reflection of the commitment to promoting healthy development and an understanding of the concept that it truly does take a village to raise a child.

While there are many identified strengths, those at the Niagara Community Table agreed that a better understanding of infant mental health and a more focused approach to those children who may be vulnerable for poor infant or early childhood mental health could further strengthen the community and lead to better outcomes for children. In 2014 there were 3917 births in the region. In 2012 there were 20,431 children four years of age and under (Statistics Canada, 2012).

Funding remains a struggle for services to young children, in particular for those who may be vulnerable or at risk for poor mental health. Ministry of Children and Youth Services programs, Healthy Babies, Healthy Children (HBHC) and Infant and Child Development Services (ICDS) have had a funding freeze for many years forcing them to reduce services and further target those they provide. Agencies such as Strive Niagara have experienced funding cuts to a critical staffing position, the Community Worker, who supports their vulnerable client population; the teen parent. Many at the table felt that the need for targeted services for families with young children who are at risk for poor developmental outcomes is growing, and while the science supports the case for increased funding to this population, they have instead experienced freezes and funding cuts.

The Niagara Community Table included the following agencies:

- Bethlehem Housing Supports
- CAPC Niagara Brighter Futures
- CPNP Healthy from the Start
- A Child World Child Care
- Child Care Sector
- Early Childhood Community Development Centre (ECCDC)

- Family and Children's Services Niagara (FACS Niagara)
- Hannah House Maternity House
- The Niagara Children's Centre
- Niagara College: Department of Early Childhood Education
- Niagara Region: Children Services
- Niagara Region Public Health – Child Health
- Niagara Region: Public Health – Infant and Child Development Services (ICDS)
- Niagara Region Public Health - Healthy Babies Healthy Children (HBHC)
- Pathways Academy
- Pathstone Mental Health
- Strive Niagara

Core Prevention & Intervention for the Early Years

What is Happening in Niagara Today

Note: This is not an exhaustive list of all programs, services, initiatives and projects present for children under five and their families in the Niagara community. It is solely based upon the participation of the identified community partners over the two day event.

Universal Programs for all Children and Families

A Child's World

- A Child's World is a non-profit organization, which provides quality care for children, infant to 12 years old. It currently operates 22 centres in six municipalities within the Niagara Region.
- A Child's World provides a positive environment for your child that enhances his or her level of development. Through play experiences and the guidance of specially trained staff, your child will be exposed to situations that will stimulate:
 - ✓ Curiosity, initiative and independence.
 - ✓ Self-esteem and decision making capabilities.
 - ✓ Interaction with, and respect for others.
 - ✓ Physical activity developing gross motor skills.
 - ✓ Communication skills.
 - ✓ Fine motor development.
 - ✓ The stimulation of imagination through dramatic play.

Niagara Region Public Health: Child Health

- Offer universal parenting programs, including: Love my Baby, Make the Connection, Triple P, and Baby Talk.
- Offer and operate parent talk line where nurses are available to offer screening referrals and information to families who call.
- Breast feeding support is also offered to any family through clinics, workshops, and telephone support.

Ontario Early Years Centres (OEYC)

- Ontario Early Years Centres provide key programs and services such as:
 - ✓ early learning programs and activities for children birth to six years old and their families
 - ✓ early literacy activities and resources
 - ✓ parent/caregiver education
 - ✓ resources and supports
 - ✓ pre and post-natal resources and information
 - ✓ information about and a connection to other community services
 - ✓ linkages to the community and to local early years services
 - ✓ outreach services
- OEYC sites provide parent-child play groups in OEYC centres and in outreach community locations. OEYC offer capacity and skill building programs such as “Life with Baby” which require registration that target specific topics and run in blocks over a number of weeks. This 10 week program is designed for first time parents and their babies aged 10 months and under.

Support for All Families with a Focus on Those at Risk

Bethlehem Housing Supports

- Bethlehem Housing and Support Services assists people of low to moderate incomes including victims of abuse and people facing issues of homelessness and family breakdown.
- Through their early learning centres, the agency provides education in effective parenting skills, resource materials and opportunities for interactive play activities that promote the healthy development of children from birth to six years of age.
- All programs offered are free which include parent/ child workshops and parent education opportunities.
- As part of their program for families with young children, Triple P (Positive Parenting Program) is offered.

The Community Action Program for Children (CAPC) and the Canada Prenatal Nutrition Program (CPNP)

The Community Action Program for Children (CAPC) and the Canada Prenatal Nutrition Program (CPNP) are federally funded initiatives through Public Health Agency of Canada (PHAC) and are often embedded in community based programs and services.

Below is an overview of the program adapted from <http://phac-aspc.gc.ca/hp-ps/dca-dea/prog-ini/funding-financement/npf-fpn/index-eng.php> (2010):

- The Community Action Program for Children (CAPC) and the Canada Prenatal Nutrition Program (CPNP) are two programs that are committed to promoting healthy birth outcomes and the healthy development of children. These programs are typically embedded within community based agencies.
- Within Niagara a variety of agencies partner with each other in order to provide locations where families can connect with their local community and obtain information, referrals and access to public health and social services.
- Staff encourage role modeling behaviours within the program. Education is offered on several topics from parenting to personal growth.
- This funding provides programs that offer a stepping stone for isolated families to become connected in their community.
- In Niagara there are CAPC/CPNP funded sites for the Francophone and Aboriginal communities as well.
- **CAPC- Niagara Brighter Futures at Strive Niagara:** A weekly free drop in program that values family and community cohesiveness. Programming builds upon the strengths that each individual brings, supporting families to overcome barriers for success and eliminates isolation. Participants have an opportunity to engage in peer to peer connections, referrals to community agencies, education through facilitation on topics that will enhance positive outcomes within the family. Programs are available in St. Catharines, Welland, and Niagara Falls.
- **CPNP Healthy from the Start at Strive Niagara:** Promotes prenatal well-being to foster healthy term infant in Niagara. Programming provides healthy lifestyle and nutritional information for pregnant women at risk. CPNP offers food certificates, nutritious snacks, vitamin voucher, cooking classes and access to a registered dietitian and public health nurses. Weekly drop-in programs and services are available in St Catharines, Welland and Niagara Falls, and Port Colborne.

Family and Children's Services Niagara (FACS Niagara)

- FACS Niagara is Niagara's largest child and family serving agency. FACS Niagara is a multiservice agency responsible for the provision of mandated child protection services in addition to many other community parent/family services, resources and supports.
- Mandated Child Protection Services – includes responding to concerns related to the care and safety of children/youth at risk of abuse or neglect and ensuring that the wellbeing, safety and permanency needs of children/youth in Niagara are met. The vast majority of work is done with families who are caring for their children at home. A variety of in home parenting supports are provided to assist families develop and strengthen parenting skills to meet the needs of their children. For those children who are in care, a variety of family visiting programs and services (including infant specific) are provided in family friendly community-based locations. Visiting programs offer parental education and support with the goal of strengthening parent/child bonds with a view of reunification whenever possible. Foster care, kin care and adoption services are provided for those children who cannot remain with their family of origin.

- **The Family Counselling Centre (FCC)** – operated by FACS Niagara. The FCC provides a range of individual counselling services and therapeutic groups and programs for children/youth, families and individuals.
- **Child Care** – FACS Niagara operates two licensed child care programs in St. Catharines, staffed by registered early childhood educators. A full time resource consultant is onsite at each program. Sites offer quality child care, with an emphasis on educational activities; play based learning and healthy child development. Referrals can be made by parents or community professionals, a subsidy may be available through the Regional Municipality of Niagara.
- **Resource Consultants** – FACS Niagara operates the West Niagara Resource Consultant Program, providing second stage developmental screens and assessment across West Niagara.
- **Ontario Early Years Programs** – FACS Niagara is the lead agency for a number of OEYC programs in Niagara. Programming is offered at variety of convenient sites throughout the region. Services are available to parents, caregivers and children from birth to 6 years. Services offered and/or hosted include; hearing clinics, prenatal support, breast feeding support, play and learn together programs and access to a variety of parenting and child based resources. Infant massage and the Baby and Me Stay and Play program promote parental engagement and bonding. Early identification and referrals for assessment and support can be made to appropriate professionals and other agencies in the community.
- **Early Years Mobile Program and Toy Lending Library** – FACS Niagara visits a number of locations throughout Niagara, bringing programming, educational resources and toys into communities and neighbourhoods where access to these important resources for children and families might not otherwise be available.

Hannah House

- Hannah House Maternity Home provides supported transitional housing to pregnant and parenting young women under the age of 21 in order to prevent homelessness.
- Each young mother is invited to stay in the home for the full term of her pregnancy and up to 6 months after her baby is born. During her stay, she is encourage to participate in programs which foster her emotional well-being, teach financial management equip her in her parenting abilities, propel her education encourage healthy relationships and develop her life skills.
- A comprehensive system of programs and services empowers young mothers to develop the necessary life skills that promote healthy outcomes, for themselves and their children breaking the cycle of homelessness, abuse and property in the Niagara Region.

Niagara Children's Centre

- Niagara Children's Centre is a children's treatment centre funded through MCYS for pediatric rehabilitation.
- The centre provides screening, assessment and intervention for infants and children at risk of developmental concerns. Parents are supported through the screening, assessment and intervention process utilizing a family-centred care philosophy.

- Parents may be connected with social work to assist in their adjustment to having a child who may be identified at risk for developmental concerns.
- Parent education is provided on a variety of topics related to early childhood development including Triple P for families with children with special needs (2-5).

Niagara Region Public Health: Healthy Babies Healthy Children (HBHC)

- HBHC is delivered through Niagara Region Public Health, and funded by the Ministry of Children and Youth Services.
- Voluntary program for women and their families in the prenatal period and families with children from birth until their transition to school. Information and support are offered to families who identify as with risk.
- HBHC is based on a blended model of home visiting that uses both public health nurses and family home visitors to complete home visits with families to support family/ client identified goals related to parenting and child development.
- HBHC offers support in the home and community through screening/assessment, health teaching, referrals, and service coordination to provide opportunities to achieve healthy pregnancy, nutrition and feeding (including breastfeeding), healthy child development, safety, adjusting to parenthood, accessing community resources, and more.
- The Parenting in Partners Education (PIPE) curriculum is used across the province within HBHC to support families.
- HBHC nurses are certified to use the Nursing Child Assessment Satellite Training (NCAST) parent-child interaction scales to observe and assess parental response and sensitivity to cues during feeding and/ or teaching
- The Seeing is Believing program is also offered in HBHC. Parent-child interactions are videotaped and debriefed together with families through an attachment focused and strengths based perspective.
- HBHC staff work closely with the Child Health Program within Public Health, whose focus is on universal health promotion.

Niagara Region Public Health: Infant and Child Development Services (ICDS)

- ICDS is delivered through Niagara Region Public Health, funded by Ministry of Children and Youth Services (MCYS).
- It is an early intervention service for children birth to 5 years of age who are at risk for developmental delays or have developmental delays.
- Infant and child developmental therapists provide in home visiting with ongoing assessments/screenings with program plans and activities within a family centered approach, networking with service partners in case co-ordination and referrals.

- ICDS follows the Ontario Association of Infant Development (OAICD) guidelines and best practices.

Strive Niagara

- Strive is a non-profit organization dedicated to assisting the needy by fostering the independence of young families pursuing an education through the provision of child care and other necessary supports.
- **Centre Based Child Care:** We provide quality licensed child care in St. Catharines, Welland and Niagara Falls. All child care staff are registered early childhood educators (RECE's). We offer care for children from 6 weeks to 6 years of age. RECE's demonstrate a thorough knowledge of child development theories. They use this knowledge to plan, implement and assess developmentally appropriate learning strategies.
- **Outreach Program:** For many young mothers it is not possible to return to a regular mainstream school with the added responsibilities of an infant. The Outreach class is an informal program offering personalized academic and parenting support where you can achieve high school credits. As part of the Outreach Program, Strive also supports expectant students in their last trimester.
- **Resource Consultation:** Strive has a qualified resource consultant on staff. The resource consultant recognizes children's unique characteristics, and assesses the resources necessary to adapt the early learning environment to suit the child. They recognize that child development milestones and behaviours vary and they acknowledge and respect those differences.
- **Support Services:** Strive Niagara establishes and maintains reciprocal relationships with the young student parent and their children under the professional supervision of the agency. These relationships are based on trust, openness and respect for confidentiality. Strive Niagara collaborates with community partners, the District School Board of Niagara and families by exchanging knowledge and sharing practices and resources.

Early Screening and Assessment Activities

CAPC Niagara Brighter Future Program

- Early screening through the DISC Preschool Screen (DPS), ASQ-3 and ASQ:SE take place in all CAPC Niagara Brighter Futures programs, to identify risk of a developmental delay, and offer supports to families.

Child Care Services and Ontario Early Years Centres (OEYC)

- Fee subsidy staff use the NDDS during intake for new clients.
- NDDS, DISC preschool screen as a first stage for developmental screening.
- Resource Consultants use the Diagnostic Inventory for Screening Children (DISC) and BRIGANCE® Early Childhood Screens. Additionally they consult to child care service, licensed home child care sites, OEYC, Family Resource Programs (FRP), and other agencies regarding individualized program plans for children.

Family and Children's Services Niagara (FACS Niagara)

- FACS Niagara Resource Consultants use the Diagnostic Inventory for Screening Children (DISC) and BRIGANCE® Early Childhood Screens.
- FACS Niagara Resource Consultants support and assess families within our two child care centres as well as in community run child care programs. Resource consultants collaborate with other community professionals on a regular basis to support children and families. Home visits are arranged as required. Community resource information is provided to caregivers and play-based goal plans are created to further development. Referrals for additional developmental and supportive services are made as required.
- FACS Niagara Child Protection Workers currently use the Nipissing District Developmental Screen (NDDS) as checklist to engage parents and caregivers in discussions about their infants and children's development.
- FACS Niagara staff work closely with Niagara Region Public Health and the Infant and Child Development Services (ICDS) and Healthy Babies Healthy Children (HBHC) programs, community medical professionals and educators, OEYC's and other community agencies to ensure that infants and children receive appropriate referrals, assessments and supportive services.

Niagara Children's Centre

- Infants and children may be referred by parents or other community agencies or physicians due to identified developmental concerns or where there are questions regarding the child's development. A variety of developmental screening tools are used at therapist discretion which evaluate gross motor, fine motor and speech and language/communication development.
- Screening tools that may be used include the Alberta Infant Motor Skills (AIMS), Peabody Developmental Motor Scales, Rossetti Infant Toddler Scales, Preschool Language Skills Fifth Edition (PLS-5) Sensory Profile Scale, Ages and Stages Questionnaires (ASQ-3) and Ages and Stages Questionnaire: Social Emotional (ASQ:SE).
- The Infant Hearing Program is a province wide universal newborn hearing screening program that was launched in 2002. The program was designed to provide all newborns the opportunity to have their hearing screened.
- Infants and children at risk of mental health concerns may be concurrently referred to other community agencies (i.e. Children's Services for Resource Teacher support, Children's Mental Health for additional supports).

Niagara Region Public Health: Child Health Program

- Use the NDDS, Diagnostic Inventory for Screening Children (DISC) tools with families.

Niagara Region Public Health: Infant and Child Development Program

- Use the NDDS, Child and Adolescent Needs and Strengths (CANS), ASQ-3, ASQ-SE, AIMS tools in their programs.
- When referrals are made they are followed up to determine if the service was used.
- Provide services through home visits with individualized program plans and activities with monitoring.
- The model of service pathways focus on early interventions within a family centered approach including service co-ordination and family service plans.

Niagara Region Public Health: Healthy Babies Healthy Children (HBHC)

- HBHC uses the NDDS routinely with clients in the home visiting program.
- HBHC family home visitors (2) are also piloting the use of the ASQ 3 and ASQ-SE.
- There are three screening points within the program that strive to identify potential risk to a child's development. When two risk factors are identified a Public Health Nurse (PHN) does in-depth assessment in the home. The three screening points are:
 - ✓ Prenatal
 - ✓ Postpartum
 - ✓ Early childhood (6 weeks to transition to school).

Pathstone Mental Health

- Resource Consultants use "Children's Actions, Relationships and Emotions (CARE)" to identify children 2-6 who are struggling with social/emotional issues and provides support/strategies in child care, at OEYCs and in the child's home based on the items identified using the tool.
- Generally, these Resource Consultants work with children who have a DPS score over 7 but are still exhibiting areas of concern (e.g. dysregulation, inattention, impulsivity) that is not specifically related to an identified developmental concern.
- The Resource Consultants have been trained in the use of the ASQ-3 and ASQ:SE and the importance of creating individualized Developmental Support Plans.

Strive Niagara

- Early screening through the DPS tool and follow-up DISC Preschool Screen , when required, ASQ-3 and ASQ:SE take place to identify risk of a developmental delay, and offer supports to families. Strive Niagara staff also utilizes the Brigrance and Nipissing to support them in program development and engaging in conversations with the parent. Monthly Class-wide Adaptive meetings with RECE, supervisors and resource consultant take place to collaborate and plan for the needs of each group and child holistically.

Early Intervention Services

The Niagara Infant Mental Health Promotion Advisory Committee is embarking on a pilot study to evaluate if the process of developmental screening and planning is an effective intervention for services in the region. Children five and under within the participating agencies will receive the ASQ-3 and ASQ:SE followed by a developmental support plan every three months for a full cycle year. The screening scores will be tracked and analyzed to determine if this intervention can improve the development of children five and under in the Niagara region.

Bethesda

Since 1937, Bethesda has provided a wide range of supports and services to individuals in Niagara, Hamilton, Brant, and Haldimand/Norfolk regions who have special needs. Owned and operated by the Ontario Conference of Mennonite Brethren Churches the agency provides the following services for children with special needs or developmental disabilities:

- Children's Behaviour Support Services
- Children's Developmental Assessment Services
- Autism Consultation Services
- Autism Respite Services
- Autism Intervention Services
- Applied Behaviour Analysis Services and Supports

Child Care Services and Ontario Early Years Centres

- Currently there are systems with various methods for family engagement and assisting families with referrals for specific concerns about a child.

Contact Niagara

- Contact Niagara provides a central information and referral access point for local children and youth, ages 0-18, who are experiencing emotional, behavioural and/or developmental concerns.

Family and Children's Services Niagara (FACS Niagara)

- All infants and children who receive services through FACS Niagara including Child Protection families, families with infants and children receiving counseling, children attending Child Care and OECY programs are evaluated upon initial activation of service and on an ongoing basis. FACS Niagara works closely with community collaterals and medical professionals to ensure appropriate assessment and supportive services are provided internally and externally. Services include; assessment, case management, individualized developmental service planning, counseling, parental education/training and provision of and advocacy to access a variety of instrumental supports.

Niagara Children's Centre

- Niagara Children's Centre serves over 3000 children with a wide range of needs. This includes children with developmental disabilities and delays related to premature birth, medical syndromes, genetic disorders and autism, physical disabilities such as cerebral palsy, muscular dystrophy, spina bifida, cancer, and communication difficulties in language, articulation, fluency and voice.
- Niagara Children's Centre provides physiotherapy, occupational therapy, and speech and language interventions infants and children with single service or complex rehab needs. Services are provided at the centre, in home or in community settings such as child care or OEYC's. Services include direct and group intervention as well as consultation to families and other service providers. Families involved in services may access social work, developmental paediatrics for assessment, recreation therapy and resource teacher support.
- Niagara Children's Centre is the lead agency for Speech Services Niagara, a speech and language service, for children from birth to senior kindergarten who have delays in language acquisition, speech sound production (articulation), grammar, comprehension of spoken language, and/ or disorders such as, stuttering and voice (vocal quality). The service is delivered in partnership with the Niagara Health System and operates in various locations throughout the Niagara region. Our services include: screening, assessment, treatment of speech and language delays/disorders, education and universal literacy promotion.
- Speech Services Niagara is a unique entity that brings emergent literacy specialists together with speech-language pathologists and communicative disorders assistants under one program to cooperatively promote healthy early literacy and communication development in preschoolers living in Niagara.

Niagara Region Public Health: Child Health, Infant and Child Development Services (ICDS) and Healthy Babies Healthy Children (HBHC)

- Facilitate referrals/service co-ordination at the Parent Talk Line (Child Health)
- Provide services through referrals (HBHC & ICDS)
- Both HBHC and ICDS programs use a home visiting model but HBHC uses a blended model of family home visitors and public health nurses. The model of service focuses on early interventions within a family-centered approach, including service co-ordination and family service plans.
- Create and monitor individualized program plans for children
- When referrals are made they are followed up to determine if the service was used.

Pathstone Mental Health

- Pathstone Mental Health is the only accredited provider of children's mental health treatment in the entire Niagara Region. We offer a broad spectrum of treatment services and programs, delivered by highly qualified staff to strengthen children and families.

- The Early Assessment, Support, and Intervention Service (E.A.S.I.) promotes the healthy, social, and emotional development of preschool-aged children and their families. Children are assessed and services are individualized to meet the needs of the child and family. Services include assessment, counseling, play therapy, parent training and guidance, intensive outreach, consultation with child care providers and/or school personnel, and incredible years treatment program.
- **Niagara Preschool Resource Service** provides consultation and training services for parents, caregivers, and other professionals, who are involved with children from birth to 6 years of age. Niagara Preschool Resource Services include information & assistance in accessing community services, assistance in the development of effective behaviour management interventions in the home, guidance in strengthening parenting skills, presentations, groups, and educational workshops for parents, professional development and training workshops for professionals, and consultation with professionals regarding behavioural issues.
- **Child Wellness Clinics** are held throughout the Niagara region. Families and their children 0-4 years of age are invited to call to arrange to attend a clinic. The Child Wellness Clinics can provide brief consultations, recommendations, referrals to other community agencies, information and education and a chance to network with other families.
- Play therapists and family therapists work with children 0-6 and their families. Activities often include Theraplay, “I love you rituals” and trauma-based work for children and families for who past trauma impacts parents’ ability to nurture and impedes attachment.

Existing Collaborations among Services and Sectors Positively Supporting Infant Mental Health

- **Niagara Infant Mental Health Promotion Advisory Committee:** Committees includes various sectors/agencies serving children under 5 and their families. They meet monthly to discuss current events or potential opportunities to embed Infant Mental Health into the Niagara region. They are currently conducting a pilot study where developmental screening and support planning are being analyzed across the region.
- **Quality Child Care Niagara (QCCN)** is a standardized, research-based approach designed to enhance the quality of early childhood programs. QCCN has strengthened the foundation of child care and early childhood education through high quality child care experiences, individual developmental programming and outcomes, and supports and services throughout Niagara. Consisting of parents, early childhood educators (ECEs), an advisory committee (parents, ECEs and community partners) and community organizations, QCCN is a region-wide community based partnership.
- **The Niagara Children's Planning Council** is a public/private collaboration established in 1998 to enhance the lives of children and families within the communities of Niagara region. The planning council is comprised of agency and organization representatives within the region of Niagara who share a keen interest and shared vision of insuring the rights of children and their families are optimized, protected, and serve as the foundation of decision-making and planning. NPCC works towards ensuring that Niagara is a community where every child will reach their optimal potential through cooperative investment and integrated systems planning.

- **A Joint Implementation and Planning Committee (JIPC)** meet monthly consisting of managers from 7 local agencies including Speech Services Niagara, Niagara Children's Centre, Bethesda, FACS, HBHC, Contact Niagara and Pathstone Mental Health. The various agencies focus on service coordination and improving service pathways for infants and children.
- Annually, JIPC committee organizes frontline staff from each of the 7 agencies to come together for a **Community Infant and Preschool Services Team** meeting to focus on improving service pathways, service navigation and coordination for families who may be receiving services from partner agencies.

Short Term Opportunities to Enhance Core Prevention and Intervention

Support for All Families with a Focus on Those at Risk

- Develop strategies to engage and motivate families to have an understanding of the relationships with staff. Use the documents parents complete as an opportunity for open conversation and dialogue.
- The early learning and care sector will look to create a resource that supports ELCC practitioners to learn more about a child so there can be a discussion between staff and families to do more for families on a daily basis.

Early Screening and Intervention Services

- Develop and/or promote web friendly resource for parents to access that will include milestones for different developmental stages. **Parentdirectniagara.ca** (operated by the ECCDC) can be used as a portal.
- Create a care pathways document/resource for parents when concerned about development.
- Develop a plan and additional resources to support and teach problem solving strategies to children for staff.

Long Term Opportunities to Enhance Core Prevention and Intervention

Support for All Families with a Focus on Those at Risk

- Identify more media opportunities and resources in effort to reach out to the general public, promoting awareness of infant mental health in the Niagara region– through radio, TV stations, commercials at movie theatres, etc.

Early Assessment and Screening

- Continue to embed infant mental health where applicable into programs, services, and treatments in the Niagara region.
- Identify all tools used for early developmental screening and ensure all agencies working with this age group understand the purpose of the tool, how to interpret the score and how to combine information from a screen with other sources of information about a child.

Early Intervention Services

- Look for ongoing opportunities to implement and strengthen early screening and developmental support planning in Niagara particularly in individual, home-based, and clinic-based treatment plans within Early Learning and Care settings.
- Increase the opportunities for developmental screening from an infant mental health context – use an infant mental health lens when completing developmental screenings and assessments across the region.
- Create a plan with specific strategies to increase family engagement, particularly with isolated and reluctant families. IMHP committee can explore how this can be done.
- Create a process to gather data on the number of completed assessments and screenings for children ages 0-5 years in the Niagara region. Child care services has the capacity through QCCN to collect data as well as HBHC and Niagara Children’s Centre.

Competencies for Practice in the Field of Infant Mental Health

What is Happening in Niagara Today

As a community, Niagara is able to recognize additional training and education opportunities to involve and include other agencies from different sectors at an affordable level. Agencies are very committed to continued professional development for their staff. Unique to Niagara is Quality Child Care Niagara (QCCN) and early learning.

Knowledge and Skills

- Quality Child Care Niagara (QCCN) coordinates and support training for quality programs in the following areas: child development, screening, environmental ratings, program planning. Many agencies have access to these education opportunities and leverage them. They are available to ECE and non-ECE professionals.
- The Early Childhood Community Development Centre (ECCDC) is an independent charitable organization dedicated to providing early learning and care professionals and programs with affordable access to resources, professional learning opportunities and supports they need to deliver high quality education and care to young children. In the 20 years since its creation, the ECCDC has become Canada's leading early learning and care resource, referral and support organization.
- Niagara Region Public Health supports ongoing professional development, including planning joint education days for HBHC, Child Health, ICDS, and Prenatal teams for ongoing skill development. There is annual, required certification for NCAST for HBHC nurses.
- Community Infant and Preschool Services Team hosts annual meetings involving frontline service providers from 7 agencies. The event includes program updates from agencies, case scenario discussions and education on various topics related to service provision for infants and children.
- Niagara Children's Centre provides education for staff in Family Centred Care and Cultural Competency and Diversity annually in addition to supporting clinical professional development through regular funding of courses and conferences.
- Niagara College is in the process of designing a new program of instruction for September which includes three foundational concepts:
 - ✓ Quality of the relationship/community/child
 - ✓ Attachment (including parent's history of attachment)
 - ✓ Brain Development – connecting brain and behavior

- Currently in the Niagara College curriculum there are courses which cover infant mental health, relational trauma, and risk factors. Niagara College also provides two ECE student conferences on varying relevant topics.
- Early Learning and Child Care, Niagara Children's Centre, Family Resource Program, Niagara Public Health-Child Health, HBHC, Infant and Child Development Services have strong understanding of both atypical and typical development, and maternal development.
- Licensed home child care staff in the region are all registered ECE and long-term employees.
- Children Services, ICDS, Strive Niagara attend conferences within their respected fields to receive current information for practice. Many agencies leverage knowledge of staff who attend additional training or increased education by holding team meetings on how this can be embedded in their program.
- Through www.parentdirectniagara.ca, ECCDC allows agencies to post learning opportunities for families on a shared calendar.
- Family and Children's Services Niagara (FACS Niagara) supports and provides opportunities for continuing education and development for all staff. All new hires receive a fulsome orientation including an over view of supports available to families in Niagara including OEYCs, Child Care programs, Public Health, Children's Mental Health Services and Screening Programs, Children's Developmental Services (Speech, Hearing, OT, PT, etc) and Parental Support Services.
- The Family Counselling Centre (FCC) operated by FACS Niagara provides individual and psycho-educational group counselling to families who are experiencing difficulties bonding with and/or meeting the developmental needs of their children. Therapists participate in ongoing clinical professional development in this area.
- Hannah House is participating in the Infant Mental Health Community Training Institute offered by Infant Mental Health Promotion.
- Children are Safe committee are presenting a workshop for childcare staff/ managers on the impacts that family violence can have on a child and how to recognize the signs. This committee is also providing a workshop on bullying and empathy given by Mary Gordon (Roots of Empathy) for childcare staff and parents.

Short Term Opportunities for Competencies

Knowledge Building for Professionals

- Discuss with the Families are Strong, Stable and Connected Committee the opportunity of have a training on the influences on child development (risk/protective factors). Strive Niagara and ECCDC will look to mobilize this.
- Niagara College will look to include a component in their new early childhood educator (ECE) curriculum on working with parents with unresolved trauma and how it can affect their parenting capacity.
- Explore and identify both strengths and limitations in infant mental health expertise in the Niagara region services. Look to engage children's mental health services in a collaborative discussion on building capacity for infant mental health treatment.
- Explore the possibility of hosting a community training on how to respond to signs of distress in infants and toddlers.

Skill Building for Professionals

- Engage in advocacy conversations with the Ministry of Children and Youth Services from Healthy Babies Healthy Children to seek much needed support and resources for ongoing home visits to young children in foster homes.
- The Niagara Infant Mental Health Advisory Committee will provide feedback on the new curriculum at Niagara College specifically on Infant Mental Health and Early Intervention.
- Niagara will engage in a conversation with partner in Simcoe County about how they were able to engage their Local Health Integration Network (LHIN) to support knowledge mobilization across sectors specific to infant mental health.
- Look for an opportunity to connect with Brock University Nursing Program to offer a guest speaker to discuss infant mental health.
- Community agencies working with vulnerable infants and toddlers will begin requesting, when appropriate, Nursing Child Assessment Satellite Training (NCAST) Scales and Seeing and Believing be done through HBHC to create an awareness of the need in the region.

Long Term Opportunities for Competencies

Knowledge Building for Professionals

- Explore the possibility of opening up the Early Childhood Educator Student Conferences provided by Niagara College to other colleges.
- ECCDC and IMHP will explore possibilities to leverage resources/education through the online portal.
- IMHP will look to connect with the Registered Nurses Association of Ontario to embed the *Best Practices Guidelines* within theirs.
- Explore the development and delivery of an Infant Mental Health Program at Niagara College.
- Explore potential opportunities as to how the different sectors serving children under 5 years can share their experiences, skills, and knowledge with each other.
- Create an online bulletin board/calendar for training opportunities on the Early Childhood Community Development Centre (ECCDC) website for community partners.
- Create a brief infant mental health online module for foster families in the Niagara region. This training can be provided to all 5 communities involved in the PHAC initiative as it will be created by IMHP.
- Give all community agencies access to the IMHP Bulletin Boards once they are finalized.
- Host a Lunch and Learn for Primary Care Engagement Representative Medical, Public Health Niagara Region. Provide a brief description on the pilot project regarding infant mental health and the ASQ tool and if there is an option for primary care offices to receive training through a lunch or learn. This will be a great opportunity ensuring the tool is being consistently used to help with the circle of care.

Skills

As a community, we would like to strengthen knowledge, capacity, and skills in the following areas:

- Child development specific to children under 3 to make better informed developmental support plans.
- Common behavioural concerns and disorders of early childhood.
- Influences on child development (risk and protective factors)
- Observational skills from an infant mental health lens

- Early Intervention strategies
- The impact of exposure to domestic violence for children under 5
- Assessment and case formulation
- Understanding parental trauma and the influence on children
- Engaging parents in conversations around their child's development – building relationships
- Responding to signs of distress

Organizational Policies & Practices

What is Happening in Niagara Today

As a community, it was discussed that there needed to be more information regarding organizational policies and practices that support infant mental health. It was determined the best method to collect this information is through a survey for front-line practitioners and staff to gain a better understanding how they feel they feel. The survey would be completed anonymously, with the exclusion of name, agency, and sector.

Long Term Opportunities for Organizational Policies & Practices

- Community agreed to develop a survey for frontline practitioners to better understand how those providing direct services feel.
- Include a staff training component- staff will rank which areas they feel they need to increase their knowledge.
- Preface will be very important which outlines how the information will be used. Identify recipients of the survey.
- IMHP will create a draft and seek table's approval and input.



Embedding the Science of Infant Mental Health in Practice and Policy

Supporting Infant Mental Health in Muskoka and Parry Sound



A program of

SickKids

Muskoka and Parry Sound

About the Districts of Muskoka and Parry Sound

The District of Muskoka is located in Southern Ontario, North of Toronto. It is a renowned vacation spot for over 100 years, where many call home to cottages and lake houses. There are several townships within Muskoka District including Bracebridge, Georgian Bay, Gravenhurst, Huntsville, Lake of Bays, and Muskoka Lakes (The District of Muskoka, 2014). The land is comprised of lush forests surrounding several beautiful, vibrant lakes.

Continuing Northwest of Muskoka, the District of Parry Sound can be found. Parry Sound can be divided further into sub-regions: West Parry Sound and East Parry Sound (this is often referred to as Almaguin Highlands) (North Bay Parry Sound District Health Unit, 2010). Parry Sound is also home to many cottages and lake houses as it also shares a border with Georgian Bay.

While these districts continue to be popular destinations for tourism, the health, social service, and child care sectors continue to face challenges. The numbers suggest there is a significant population of children under the age of four that need support. In 2011, there were 4145 children ages four and under in Muskoka District and Parry Sound District combined (Statistics Canada, 2012)

The Districts of Muskoka and Parry Sound continuously face challenges due to geographic borders. For example, the public health units within the community are separated by Simcoe-Muskoka District and North Bay-Parry Sound District. There has been some movement to reduce the segregation as Simcoe Children's Aid and Muskoka Children, Youth and Family Services have amalgamated to form Simcoe-Muskoka Child, Youth and Family Services.

These geographic restrictions play a role in the funding agencies and programs receive, which has decreased over time. Many collaborative efforts such as community planning tables within Muskoka and Parry Sound have dissolved due to a loss of leadership resulting in a loss of funding.

The complexity of borders for families trying to access services and supports is even greater. Due to the significant distances between the scattered services, transportation to access programs and services is an additional challenge, especially for families who do not have the means to own a vehicle. This raises the issue of programs being under-utilized which can lead to programs being cut as families experience difficulty physically attending them.

Within the Muskoka and Parry Sound districts there is a prevalent First Nation, Métis, and Inuit population who experience further distresses accessing services. Among FNMI communities, access to IMH services is challenging and difficult at best due to geography and cultural distance. Risk factors are prominent within this community, emphasizing the need for response. There have been conversations regarding the inclusion of the FNMI community into services and to ensure their unique needs are met. However, service providers have not made much movement. An example of this arises around fee subsidy issues for childcare. The boundaries with Aboriginal community restrict families on reserve to access child care services off reserve. This report provides a snapshot of current infant mental health efforts in the Districts of Muskoka and Parry Sound.

Muskoka and Parry Sound

The Community Table included the following agencies:

- District of Parry Sound Social Services Administration Board: Children Services
- Hands: TheFamilyHelpNetwork.ca
- Muskoka Family Focus and Children's Place
- North Bay Parry Sound District Health Unit: Healthy Babies Healthy Children
- One Kids Place
- Simcoe Muskoka Child Youth and Family Services formerly Family, Youth and Child Services of Muskoka
- Simcoe Muskoka District Health Unit: Healthy Babies Healthy Babies

Muskoka and Parry Sound

Core Prevention & Intervention for the Early Years

What is Happening in Muskoka and Parry Sound Today

Note: This is not an exhaustive list of all programs, services, initiatives and projects present for children under five and their families in Muskoka and Parry Sound. It is solely based upon the participation of the identified community partners over the two day event.

Universal Programs for all Families

Ontario Early Years Centres (OEYC)

- Ontario Early Years Centres provide key programs and services such as:
 - ✓ early learning programs and activities for children
 - ✓ early literacy activities and resources
 - ✓ parent/caregiver education
 - ✓ resources and supports
 - ✓ pre and post-natal resources and information
 - ✓ information about and a connection to other community services
 - ✓ linkages to the community and to local early years services
 - ✓ outreach services
- OEYC sites provide parent-child play groups. OEYC offer capacity and skill building programs which require registration that target specific topics and run in blocks over a number of weeks such as “Make the Connection”. This 7 week program is designed for first time parents and their babies ages 12 months and under. This is offered in the Muskoka region only.
- The Parry Sound OEYC includes two main permanent sites and various satellite programs that serve the rural communities of the town.
- The Muskoka OEYC include three main sites and various satellite programs that serve the rural town and communities.
- Given the geographic challenges some families may experience in accessing the Parry Sound/Muskoka OEYC system, the centres provide transportation services via volunteer drivers, coverage of one roundtrip per week for gas /mileage costs, and additional gas vouchers and taxis.
- Muskoka OEYC offer Baby Talk and Make the Connection programs.

Muskoka and Parry Sound

- Parry Sound OEYC offer Make the Connection, Moms to Mom, and Dads to Dad program.
- Shawanaga First Nation Community provides an OEYC.

Muskoka Family Focus and Children's Place

- Muskoka Family Focus and Children's Place is a not-for-profit and registered charitable organization that is dedicated to providing the following child/family resources and educational services: Licensed Early Learning Centres, Licensed Before & After School Programs, OEYC and Parent Education Workshops. They also offer Licensed Summer School Age Day Camps along with School's Cool (a Kindergarten readiness program), in Huntsville, Bracebridge and Gravenhurst this summer. Through our programs we hope to support and nurture children and their families in Muskoka by providing affordable flexible learning environments.

Support for All Families with a Focus on Those at Risk

These programs are provincially funded and are intended for those children who are identified as being at risk for developmental delays or in need of protection.

Simcoe Muskoka District and North Bay Parry Sound District Health Units: Healthy Babies, Healthy Children (HBHC)

- HBHC is delivered through both North Bay Parry Sound District Public Health Unit and Simcoe Muskoka District Public Health Unit.
- HBHC is mandated through the Ontario Public Health Standards to be offered by all public health units throughout the province. The Ministry of Children and Youth Services provides 100% funding for the Program. HBHC is delivered through Simcoe Muskoka District Health Unit.
- HBHC is a voluntary program for women and their families in the prenatal period and families with children from birth until their transition to school, identified with risk that will be provided with opportunities to achieve their potential.
- Every child and parent identified with risk in Ontario will have access to evidence-informed programs and services that support healthy child development and effective parenting (Ministry of Children and Youth Services, HBHC Guidance Document, 2012).
- In-home visits with women and their families in the prenatal period and families with children from birth until their transition to school by a public health nurse and/or a lay home visitor. HBHC is based on a blended model of home visiting that uses both public health nurses and lay home visitors to do home visits.
- HBHC offers support in the home (assessment, teaching, referral and service coordination) for every child and parent identified with challenges to provide opportunities to achieve healthy pregnancy, nutrition and feeding (including breastfeeding), healthy child development, safety, adjusting to parenthood, accessing community resources, and more. These visits are done by public health nurses and/or lay home visitors who work with families, offer health information and support, and connect families to parenting services.

Muskoka and Parry Sound

- The Parenting in Partners Education (PIPE) curriculum is used across the province within HBHC to support families.
- The Nursing Child Assessment Satellite Training (NCAST) are used.
- Parry Sound HBHC: provides parenting workshop and partner with Ontario Early Years Centre to provide child care in order for parents to attend services.
- Simcoe Muskoka Public Health Unit provides weekly breastfeeding support, a peer support program, and drop-in programs that are in high demand. The North Bay Parry Sound District Health Unit provides breastfeeding support to clients on an as needed basis in both the Burk's Falls and Parry Sound offices within the Parry Sound District
- Rural Health Breastfeeding Services: Nurses visits homes to reach families who are unable to come in person to clinics. This rural health strategy is unique to the North Bay Parry Sound District Health Unit visiting area.

Simcoe Muskoka Child, Youth and Family Services (Child Protection - Muskoka Region)

- Intake Services: The Intake Services of the Agency provide the following services- Accepting and screening all new referrals to FYCSM, investigating allegations and/or evidence that a child or youth may be in need of protection, when the request for services involves child maltreatment or child protection matters, responding to crisis situations by providing initial support services and subsequent follow-up services.
- Family Services: Family Services are provided to families requiring long-term intervention when children are found to be in need of protection. Family Service Workers provide a broad spectrum of services to these families, including: guidance and provision of parenting support; emotional support; residential placement of children/ youth as necessary; parenting education; case management; and referrals to other community based programs identified as helpful to the family.
- Children's Services: Services to children while in care include: daily care and support, educational support, preparation for independence, visits with natural family, appropriate medical, dental and optical care, and counselling.
- Family Support Services: Work with the child or youth's caregiver and encourage them to participate in opportunities to learn about child development, child management, and enhanced parenting skills. They also provide coordination of court ordered supervised access visits for families. Services provided include: teaching and modeling child management techniques, household management, child development education, stress management counselling, assistance with accessing other community resources, and the provision of supervised access visits. Supervised access visits by family support workers can be done therapeutically– this has a focus on the parent-child relationships.
- The resource team also conducts kin care, kin service and customary care assessments and provides supports those homes as deemed necessary. The resource team also provides adoption services. This team further provides family finder services The family

Muskoka and Parry Sound

finding model provides child welfare professionals with techniques for identifying and finding family members and other adults who care about a child placed in foster care.

- All Muskoka staff are in the process of being trained in Triple P.
- Can refer babies with possible neonatal abstinence syndrome to Great Beginnings at HANDS when concerned.

Simcoe Muskoka Child, Youth and Family Services (Children's Mental Health – Muskoka Region)

- Get a Plan Program: Assists young mothers (16-17 years old) who have not made a connection services (social assistance, medical care, other social services and programs)
- Community based mobile crisis services are available for children and youth, and their family in a mental health crisis situation, including 24-hour telephone response, risk assessment, access to appropriate professional and clinical services and supports including hospitalization, where required, and linkage to follow-up services and plans of care. Available 24 hours per day, 7 days per week and linked to trained professionals,
- Counselling Walk In Clinic. The clinic provides an option for quick access to therapy services for families with children between the ages of 0 and 17 years of age. It enables family members to see trained therapists at their chosen moments of need. Its intent is to create opportunities for immediate problem solving and therapeutic conversation, as well as connection to other FYCSM and community Children's Mental Health services if required. For many, a single session is sufficient; however the clinic may be used more than once if needed.

Community Action Program for Children (CAPC) and the Canada Prenatal Nutrition Program (CPNP) Simcoe County

The Community Action Program for Children (CAPC) and the Canada Prenatal Nutrition Program (CPNP) programs are federally funded initiatives through Public Health Agency of Canada (PHAC) and are often embedded in community based programs and services.

Below is an overview of the program adapted from <http://phac-aspc.gc.ca/hp-ps/dca-dea/prog-ini/funding-financement/npf-fpn/index-eng.php> (2010):

- The Community Action Program for Children (CAPC) and the Canada Prenatal Nutrition Program (CPNP) are two programs that are committed to promoting healthy birth outcomes and the healthy development of children. These programs are typically embedded within community based agencies.
- Great Beginnings Prenatal and Growing Up Programs are designated CAPC/CPNP programs for Muskoka, Parry Sound, and North Bay located at HandsTheFamilyHelpNetwork.ca
- Great Beginnings offers a Prenatal Nutrition Program and Growing Up Program. The Prenatal Nutrition Program provides a weekly 2 hour group to participants who are

Muskoka and Parry Sound

pregnant or who have an infant less than 6 months of age. The Growing Up Program provides a weekly 2 hour group to participants with children 6 months to 6 years of age

- Great Beginnings serves pregnant women of any age or mothers with infants up to 6 months of age are eligible to attend the Prenatal Nutrition Program. Parents with children aged 0-6 are eligible to attend the Growing Up Program. The programs are available to support mothers and families who experience social isolation, financial hardship, limited education, lack of knowledge about available resources, domestic abuse, history of substance abuse, medical history of high-risk pregnancy, children with special needs and a need for additional support.
- Prenatal Nutrition participants are provided with a variety of supports including a Public Health Nurse, weekly workshops, gift cards on some occasions, nutritious snack while at the program, prenatal vitamins, free childcare and free transportation. The program aims to improve maternal and infant health, reduce the incident of unhealthy birth weights, promote and support breastfeeding, build partnerships and strengthen community supports for pregnant women.
- Growing Up participants are offered opportunities for play and parent/child interaction as well as a one hour educational workshop. Gift cards, milk, and milk substitute are distributed, free transportation is available and free childcare is provided for the children while parents are in the educational workshop. The program aims to increase social support networks, increase understanding of child development, increase awareness of parenting skills, increase knowledge of community resources, increase parent/child interaction and increase transition to other prevention programs. Often partner with OEYC (DSSAB) in PS for location and child care.

HANDS TheFamilyHelpNetwork.ca: Infant Child Development Services

- Infant child development (ICD) services at HANDS provides a range of services catering to the developmental and mental health needs of infants and young children throughout the Parry Sound and Muskoka districts. Services include consultations, screenings, assessments and interventions on growth and development, mental and physical health, social and emotional needs, as well as parenting support in terms of education, and navigating other community resources required.

One Kids Place

- Feeding Team: The feeding team provides quality care and expertise in the area of childhood feeding issues. The team consists of an occupational therapist, speech-language pathologist, physiotherapist and a social worker. These therapists work in consultation with the family physician and/or paediatrician and a dietician as needed to meet the needs of each individual child. There are many reasons that children may have difficulty with eating.
- Referrals to the feeding team can be made by a parent/caregiver, family physician, paediatrician, Infant Development Program, Healthy Babies Healthy Children Program, or other therapists involved with the child.

Muskoka and Parry Sound

- There is a feeding clinic offered weekly which takes an interdisciplinary approach to feeding.
- This initiative is funded by Best Start.
- There are other regions looking to duplicate this initiative but experience limited funding.

Early Screening and Assessment Activities

Simcoe Muskoka District and North Bay Parry Sound District Health Units: Healthy Babies, Healthy Children (HBHC)

- HBHC offers support in the home (assessment, teaching, referral and service coordination) for every child and parent identified with challenges to provide opportunities to achieve healthy pregnancy, nutrition and feeding (including breastfeeding), healthy child development, safety, adjusting to parenthood, accessing community resources, and more. These visits are done by public health nurses and lay home visitors who work with families, offer health information and support, and connect families to parenting services in the community.
- Public Health Nurses (PHN) and Family Home Visitors (FHV) work with families to complete the NDDS to help start discussion of healthy child development. The Ages and Stages Questionnaire 3 (ASQ-3) is completed by parents with PHNs if there is a concern and the appropriate referrals are made directly from HBHC to the agency or service deemed appropriate by the Nurse.
- The Nursing Child Assessment Satellite Training (NCAST) “Promoting Maternal Mental Health during Pregnancy” and “Keys to Caregiving” are used to provide tools for staff to promote positive growth and development with a special emphasis on maternal and infant mental health promotion and parent-child attachment.
- The NCAST Parent-Child Interaction Feeding and Teaching Scales are used by PHNs to provide valid and reliable assessments for measuring parent-child interactions. The results from these strength-based tools are discussed with families and guides interventions for enhancing parent-child relationship.
- North Bay Parry Sound District Health Unit (West Parry Sound) – Development Screening Clinics: A multidisciplinary team sets up screening clinics for families to attend: use the ASQ-3, ASQ-SE, and Red Flags. This an initiative of the Best Start Network in PS and implemented by DSSAB staff (OEYC & ISS) along with HANDS (Infant Development).
- North Bay Parry Sound District Health Unit complete the 18 Month Well Baby Visits – children with concerns are given priority at One Kids Place.

Simcoe Muskoka Child, Youth and Family Services (SMCYFS)

- Intensive Service Coordination (ISC) Program: The ISC program provides systems level service coordination for complex special needs children, youth and their families. Complex special needs children and youth are those who have high needs stemming from

Muskoka and Parry Sound

significant functional limitations, usually in several domains; and whose families have sought services but are experiencing significant stressors or report an inability to manage the care needs of their child; and who would benefit from an extraordinary service response beyond what is currently available to them in the service system. Referrals come from the community case manager. The ISC becomes involved to create an integrated plan with identified, measureable goals and to coordinate and facilitate existing and new services and service providers in meeting the identified needs of the child, youth and family. The ISC program is also the only avenue to access Bridge Funding and Case Resolution funding for children and youth.

- Psychological Services: Minimal funding is available for psychological services and are for clients already receiving services
- Telepsychiatry: a way for people who live in parts of the province where there are no child and adolescent psychiatrists to receive high quality, specialized psychiatric consultations. The consultation can offer help with a diagnosis, recommendations for medication, suggestions for the best interventions, as well as a second opinion regarding what another medical or service provider has concluded.
- Counselling Walk-In Clinic. The clinic provides an option for quick access to therapy services for families with children between the ages of 0 and 17 years of age. It enables family members to see trained therapists at their chosen moments of need. Its intent is to create opportunities for immediate problem solving and therapeutic conversation, as well as connection to other FYCSM and community Children's Mental Health services if required. For many, a single session is sufficient; however the clinic may be used more than once if needed. It provides an initial assessment of a child and family's needs and strengths.
- Child and Adolescent Needs and Strengths (CANS): A child and adolescent needs and strengths assessment is completed for all families who will access further services. ASQ-SE is used but not a standard tool across the agency
- 0-6 Program: ASQ-SE can be used to assess the needs of this population but it is not yet used as a consistent tool

HANDS TheFamilyHelpNetwork.ca: Infant Child Development Services

- There are a number of screening and assessment tools are being used including the following however this is not an exhaustive list.
- Using the Ages and Stages Questionnaire 3 (ASQ-3) and Ages and Stages Questionnaire: Social Emotional (ASQ-SE) Tools. When there are red flags, resources are provided to the families.
- Psychologists administer the Bayley tool. The psychologist also supervises and administers the Bayley with trained staff.

One Kids Place (OKP) Sensory Secrets

- This is a program developed by one of our occupational therapists to address the ever increasing sensory needs which present in the child population. This program has three components: it offers an eight module training program to early childhood educators and other community partners while also offering parent based information sessions based

Muskoka and Parry Sound

loosely off of these modules. It also offers strategies for both parents and educators to use to help mitigate sensory-based behaviours and issues which arise.

- The eight modules are as follows: sensory defenders, sensory seekers, repressive exploders, body awareness, breathing, moving, rhythm, and co-regulation and self-regulation

These modules are assembled into binders and given to community educators as a resource. This program is available in French and all documents have been translated into French. This was piloted in North Bay in one site and is being piloted in Parry Sound and North Bay (tentative-based on funding) in the upcoming year. We will be evaluating its efficacy and client and educator-based satisfaction in the current implementation year.

Developmental Clinics at One Kids Place

- The Developmental Clinics provides a collaborative multi-disciplinary assessment lead by a paediatrician. This clinic determines the nature and extent of the child's multiple developmental challenges and may or may not include a formal diagnosis.
- Team includes a physician, nurse practitioner, social worker, psychologist, and occasionally an occupational therapist and speech and language pathologist.
- These clinics happen four times a year in each community across the Muskoka region. Children must be attached to a pediatrician to attend.
- HANDS psychology works collaboratively with One Kids Places providing services to the developmental clinics
- The Developmental Clinic assists with: facilitating a medical diagnosis by providing an appropriate multi-disciplinary assessment and/or referrals for further assessment and investigation, determining therapy requirements/interventions that can be provided by One Kids Place, generating a comprehensive treatment plan that may include referrals to community agencies, facilitating provision of counselling and support needs for parent(s)/caregivers as it pertains to the child's diagnosis and/or developmental difficulties.

Parry Sound OEYC and Licensed Child Care

- Use the Nipissing District Developmental Screen (NDDS) and when there are concerns, the Ages and Stages Questionnaire 3 (ASQ-3) and Ages and Stages Questionnaire: Social Emotional (ASQ-SE) tools are used.

Muskoka OEYC and Licensed Child Care

- Use the Nipissing District Developmental Screen (NDDS) and when there are concerns, the Ages and Stages Questionnaire 3 (ASQ-3) and Ages and Stages Questionnaire: Social Emotional (ASQ-SE) tools are used.

Muskoka and Parry Sound

Early Intervention Services

Healthy Babies, Healthy Children (HBHC)

- HBHC offers home visiting programs to families deemed to be at risk for poor developmental outcomes.
- HBHC creates a Family Service Plan for each family that supports parents and ensures stronger service coordination and integration for home and clinics. One plan includes several components to prioritize needs and strengths.
- Simcoe-Muskoka HBHC uses the CANS tool is to prioritize what needs to happen and when using a trans-disciplinary model. For example, one agency might have a better relationship with a family to share the plan.
- In addition, breastfeeding support groups are available for families through HBHC.

Simcoe Muskoka Child, Youth and Family Services (SMCYFS)

- Intensive Service Worker (ISW) Program: Intensive Service Worker Program (ISW) provides children, youth and their families with flexible mental health services in their homes and communities. The focus of this program is to strengthen the functioning of parents and children by building on their individual skills and supports.
- Due to the short duration, either a brief intervention of 4 – 6 sessions or a longer term intervention of 12 – 15 sessions, the service will require the family to focus on clear and concrete goals. The family's strengths and abilities are the foundation for change. The service plan will reflect tasks that the family feels they can achieve. During the sessions, the worker will assist the family by facilitating, mediating, coaching, teaching and supporting.
- Services provided include: behaviour management training, parenting techniques, dealing with discipline, establishing routines, household management, understanding developmental stages, accessing social services / community resources, preparing for individual and / or family counselling,
- Participation in the ISW program encourages self-direction, determination and autonomy in families. Families will be encouraged to develop further problem-solving skills and increase their behaviour management strategies in the home or community setting.
- The program ensures the child and family take a leadership role as part of the team, focuses on individual and family strengths, resembles a “booster shot”; mobilizing resources within the family and community, supports the family in their involvement with community, school and other services, provides information to enhance the understanding of child development.
- This intervention is both practical and clinical in nature and can assist in advocating or completing referrals for more long-term services for the child and family
- SMCYFS 0 – 6 years Program: The 0 – 6 year intensive service workers program provide a broad spectrum of services to families with children ages 0 – 6 years including emotional support, education and referrals to other community-based programs.

Muskoka and Parry Sound

- The 0-6 Year Program enhances early identification, intervention and treatment services for preschool aged children with young children in a community setting, delivers services in the home and community, provides or links families to appropriate parenting classes and life skills training, assists parents in understanding child development and with parenting skills,
- It encourages and enhances the relationship/attachment between caregiver and child, and assists parents in recognizing and managing mental health issues, impacts of early trauma on brain development which may affect the child/family.
- SMCYFS Child and Family Therapists: Children, youth and their families who are experiencing mental health difficulties and want/need either a short term (6 sessions or less) intervention or longer term (12 to 24 sessions) treatment. Therapists assist children, youth and families using a variety of evidence informed interventions (CBT, DBT, narrative therapy, structural/strategic therapy, emotion-based relational therapy, among others).
- All interventions are strength focused and goal or outcome based.
- CFTs provide a certain amount of case management, case coordination with other services/service providers (school, other agency services, ACL, medical).
- Participation in services is voluntary and consent is required. One onsite attachment therapist is available at FYCSM.

HANDS TheFamilyHelpNetwork.ca: Infant Child Development Services

- Infant Child Developmental Services work with parents and guardians addressing the developmental needs of infants and children. This may include growth and development, physical and mental health, social and emotional aspects, and parenting support and education. The program provides community based prevention, case management when appropriate, and an emphasis on early identification and intervention.
- The program is designed to work with families who have infants and children from birth to five years 11 months. Often the children and Infants receiving service have a developmental or diagnostic background, or may have the potential of experiencing one. For others the focus may be on environmental or educational aspects of early development. A diagnosis is not required to refer to the program.
- This service benefits families with infants and children who may have a history of prenatal or neonatal difficulties (prematurity or compromised health), or they may have, or be at risk of experiencing a developmental delay. Benefits may include a family centered approach, strategies to encourage and support development, collaboration with other professionals, improved understanding of a specific diagnoses or delay, as well as increased knowledge of various developmental topics. Benefits of the program increase when families make themselves available and become active participants.
- ICDS is a home based program working with families to identify early developmental needs of infants and children. The service uses initial and ongoing assessments, observations, and relationship building to set goals in the form of a Family Service Plan. Goals and the Family Service Plan may be supported through developmental information, fact sheets, modeling and learning new skills, coordinating services, referring to other professionals, and monitoring progress. Service hours are flexible and duration is unique to each family.

Muskoka and Parry Sound

- Referrals can be made by parents, guardians, and community partners such as family physicians, pediatricians, public health nurses, and others involved with the infant, child, and their family. Any person considering referring to the ICDS program can contact Hands TheFamilyHelpNetwork.ca to discuss the program and the referral process.
- In collaboration with One Kids place, HANDS can refer and add babies born with Down syndrome or premature babies born 33 weeks old or less on the speech and language waitlist at One Kids Place in Parry Sound.
- With permission from the Bands office or Chief can make a request to HANDS to visit reserves to engage in services with First Nations, Métis, and Inuit communities.
- HANDS also offers a Premature Follow-up Clinic in partnership with One Kids Place where extensive information regarding the child is collected through parents and the use of the child history form.

HANDS TheFamilyHelpNetwork.ca: Treatment and Intervention Preschool to Six (TIPS)

- The TIPS program provides intensive home/ community based mental health services for families that are experiencing mental health difficulties in the home and less intrusive measures do not adequately meet the needs of the family. The intensive home/ community based intervention is tailored to meet the needs of each child and his/her family and are time-limited.
- The services provided in the home can be very intensive, intrusive and intimate. This enables the worker to look at the whole picture and challenge the family, while at the same time acknowledge strengths and provide the opportunity to be empowered.
- The TIPS program is an intervention option for children under the age of 6 and their families, who reside in the Districts of Nipissing and Parry Sound, have tried less intrusive interventions and believe that “the family” is the client.
- The most successful interventions are with families who recognize the need and want things to be different and also have the motivation, desire, ability and commitment to work towards making these changes. It is important that the family works in partnership with the worker to develop goals, identify and implement strategies that will support them in addressing their individual family needs. Those that are willing to flex their schedules, compromise on availability and extend invitations for workers to join them in any of their daily activities seem to benefit most.
- Intervention is based on client need, and may include counselling, support, skill enhancement through play based activities, videos, role plays etc. and coordination of resources. The emphasis is on cooperation and partnership with the family. The program focuses on strengths and includes assessment (family, behavioural, psychological or psychiatric) and treatment planning which may involve other services. The hours are flexible, and the intensity (up to 10 hours/week) and duration (up to 12 weeks) will be negotiated with each family.
- The Consultation component may be requested by community service providers such as schools and daycares. The focus is an identified child who presents with challenging behaviour or may be experiencing difficulty in any one of a number of developmental areas.

Muskoka and Parry Sound

One Kids Place

- One Kids Place Children's Treatment Centre (OKP) provides rehabilitation services to approximately 3000 children and youth (to the age of 19) and their families residing in the Districts of Muskoka, Nipissing and Parry Sound. OKP provides center based and community based services in the areas of physiotherapy, occupational therapy, speech language pathology, social work and therapeutic recreation. Specialized services are provided across the region including; Augmentative and Alternative Communication Program; Seating and Mobility Services; Developmental Clinic; Feeding and Swallowing Services and Orthopaedic Clinic. OKP is the lead agency for the Nipissing Timiskaming Preschool Speech and Language Program and the Muskoka Parry Sound Preschool Speech and Language Program. OKP provides services to the Infant Hearing Program and Blind Low Vision Program. OKP is also the lead agency for the North East Regional Applied Behaviour Analysis Program for children and youth with autism spectrum disorder.

Parry Sound District Social Services Administration Board

- Integration Support Services is an early intervention program for a child 0 – 6 years of age with special needs. Any pre-school child who requires additional programming or support and attends a licensed Child Care Program or Early Years Program is eligible for this service. Referrals are accepted from families, pre-school programs and any community agency within the District of Parry Sound with parental consent. The program intends to support the child in an inclusive environment, provide families with the information and skills to choose programs and services to meet their child's special needs, provide families with the opportunities for ongoing education and involvement, provide ongoing support to the pre-school teachers/facilitators involved with the child, assist in the child's transition to school, and review and evaluate the services the family is using based on needs.
- The program ensures that every child, regardless of his or her ability, is able to attend and participate to his or her potential in a community program chosen by the parents.
- Resource teachers provide ongoing support to preschool teachers and early years facilitators along with resources and supports for parents/guardians.

Existing Collaborations among Services and Sectors Positively Supporting Infant Mental Health

- There are current Best Start Networks in Parry Sound, North Bay, and Muskoka. Agencies who participate collaborate to address common issues despite limited funding.
- Generally, community agencies are strong at leveraging when other agencies are travelling to families- this is not a formal protocol but demonstrates collaborative practices in Muskoka District
- There is an Early Years Table in Parry Sound as well as Parry Sound/ Muskoka OEYC Advisory Committees in Parry Sound and Muskoka Districts.

Muskoka and Parry Sound

Short Term Opportunities to Enhance Core Prevention and Intervention

Support for All Families with a Focus on Those at Risk

- Strengthen awareness around for mothers dealing with Postpartum Mood Disorders:
 - ✓ Connect with Linda Rankin and the Postpartum Mood Disorders Strategy as to what can IMHP and the Muskoka District community do to support these efforts
 - ✓ Determine who is collecting current research and statistics of the prevalence rate of PPMD in Northern Ontario. This data will strengthen the advocacy efforts of the community partners
 - ✓ IMHP will create an advocacy resource that explains how PPMD can influence infant-early mental health and the impact of non-treatment.
 - ✓ IMHP will engage PHAC as to what can be done to support families experiencing PPMD.
- Engage in a community discussion on how to address infants and toddlers with a positive toxic screening result with identified Fetal Alcohol Spectrum Disorder or Neonatal Abstinence Syndrome.
- Build on existing efforts (Dad Central, Muskoka Fathering Coalition) to strengthen and create new opportunities for dads Identify programming specific for fathers – IMHP can connect Muskoka District with Life with a Baby as a starting point.

Early Screening and Assessment Activities

- Review the Premature Follow-up Forms (which document the child's history) and explore if possible how to embed infant mental health components within it.
- Utilize a common screening tool across the board to create common language.
- Evaluate if current screen tool are effective at improving child outcomes – for example, look at the NDSS and if it is improving outcomes for our children.

Collaboration

- Engage in conversation with the Local Integrated Health Network (LHIN) regarding:
 - ✓ Muskoka District accessing the Infant Mental Health Community Training archives.
 - ✓ Determine what type of data is being collected by the LHIN that could be helpful to the Muskoka District community partners.
- Develop a more organized system for volunteers in community agencies:
 - ✓ Continue to increase the number of volunteers within community agencies to assist with transportation services for families.

Muskoka and Parry Sound

- ✓ Explore how to develop the capacity for the role of volunteer coordinator – Increase support and resources for coordination of volunteers

Long Term Opportunities for Core Prevention

Early Screening and Assessment

- Collectively as a group, we will look at a second validated screen tool to be used in our community agencies with children under 5. Practitioners will be given the choice of which tools they prefer to use. This will be a part of a long term plan to increase developmental screening across Muskoka District.
- Explore the inclusion of the ASQ-3 and ASQ-SE tools in the Developmental Clinics – IMHP can offer training to those working in the screening clinics.
- Explore how to restart the Developmental Clinics in Muskoka.

Collaboration

- Look for opportunities to strengthen relationship between Muskoka District Hospitals and Community Agencies.

Strengthening Data Collection/Statistical Analysis and Assessment

- Evaluate/ measure One Kids Place: Sensory Secrets program and its outcomes with children – does this screening process capture children who may have been missed otherwise? Evaluate the number of referrals from one year to the next.

Competencies for Practice in the Field of Infant Mental Health

What is Happening in Muskoka and Parry Sound Today

There was a district-wide training in Parry Sound on “Setting the Stage” for the early learning care sector that discussed to not just focus on the behaviour on a child but when a behaviour is identified, the staff are trained to work backwards to determine what led to this behaviour. The district has a strong facilitator for this training

Knowledge

- Ontario Early Years Centres (OEYC), Licensed Child Care, and Healthy Babies Healthy Children (HBHC) have a strong understanding of typical child development knowledge.
- HANDS and Simcoe Muskoka Child Youth Family Services are well equipped to respond to behavioural problems and collaborate with community agencies to support families. There are knowledge exchange efforts between One Kids Place and its community partners.
- Muskoka Manual: Children with challenging behaviour project in Muskoka to provide Positive Behaviour Supports in Muskoka Early Childhood Settings Manual. It is used to educate new staff and to refresh current staff on this behavioural approach. There is capacity being built through a train the trainer format in both Muskoka.
- Positive Behaviour Supports Manual: About Me Album – When a child is enrolled in licensed child care in Muskoka and Parry Sound, the album documents their various aspects of their life up until the first day of kindergarten. Components include; things I need (glasses, comfort item...), things that calm me down, my families, and my accomplishments. This information is also shared with their school when the child begins. There is also a section within this which includes the ‘Circle of the Child’ in which parents fill out.
- North Bay Parry Sound District Health Unit provide updates for staff regarding maternal-child interactions and breastfeeding knowledge.
- Simcoe Muskoka Child Youth and Family Services provide ongoing clinical education for mental health staff regarding trauma, attachment, and narrative therapy.
- There is currently an addictions worker assigned from Canadian Association of Mental Health (CAMH) to OEYC that can work with pre and post natal mothers.

Muskoka and Parry Sound

Skills

- Parry Sound Licensed Child Care Centres offers Seeds of Empathy program which is designed for Early Childhood settings to foster social and emotional competence and early literacy skills and attitudes in children three to five years of age while providing professional development for their educators.
- At HANDS, staff were trained on use the Parenting Interactions with Children: Checklist of Observations Linked to Outcomes Tool (PICCOLO).
- In Parry Sound, HBHC, Early Learning and Care settings, and intervention services (including HANDS and Community Living and Integration Support Services (Resource Teachers in PS) are using a family centered approach to service delivery. Muskoka services are looking to move in this direction as well.
- One Kids Place provide regular workshops on child development for the community- the focus is on physical, cognitive, and speech and language. OKP has taken the lead in the community providing Hanen and Sensory workshop which are offered across the district.
- Roots of Empathy (3-4 years old) is available through SMCYF services at a few schools.

Short Term Opportunities for Competencies

Knowledge Building for Professionals

- Within PPMD, Adult Mental Health, and At Risk Transition Committee (participants of CAPC/CPNP transition to OEYC) High Risk Family Table, examine how infant mental health is managed within their respective areas.
- IMHP will give Muskoka district community partners access to the Infant Mental Health Community Training Institute.

Collaboration

- As a community, we would like to strengthen our partnerships with the First Nations, Métis, Inuit community:
 - ✓ Explore how we can include the FNMI community at the Early Years table and/or Best Start Network – Melanie Honsinger will connect with existing relationships with current partners.
 - ✓ Have a conversation with Debbi Pegahmagabow from B'saanibamaadsiwin (Aboriginal Mental Health Program).
- Family Children and Youth Services of Muskoka: Adult Mental Health services will look to assist HBHC to support babies and families when mothers present a mental health concern.
- When engaging in the Special Needs Strategy Table include and incorporate components for the infant and toddler population.
- When the Special Needs Strategy report is released, the group will review what is available for infant and toddler population.
- Community agencies engaged in this initiative will formally share this report with their Executive Directors and Senior Management to speak to the limitations/ borders and boundaries present to knowledge exchange and service collaboration among agencies.
- Find opportunities to share this report with municipal, provincial, and federal elected officials in Muskoka District regarding:
 - ✓ The delivery of service for young children and their families and the challenges facing.
 - ✓ Transitioning children in mental health services.

Long Term Opportunities for Competencies

Knowledge Building for Professionals

- Build the capacity of Infant Mental Health knowledge within Children's Mental Health services and programs across the districts.
- As a community develop a strategy to build the capacity for an infant mental health expert – HANDS and could be lead on this opportunity.
- IMHP will explore how to develop and share infant mental health resources in the following areas (Information could be added to Parry Sound Best Start Webpage www.foreverychild.ca):
 - ✓ Prepare a resource sheet with free web based resources that support infant-early mental health. The community will then engage in discussions around the resources together. Compare with current resources, have discussions.
 - ✓ Build an inventory sheet of profiles of professionals to highlight their expertise in areas relevant to infant mental health.
 - ✓ Explore how to use Sharepoint program to provide IMHP resources to HBHC.
 - ✓ Host an infant mental health basics workshop which highlights the research.
- As a community, we would like to strengthen knowledge, capacity, and skills in the following areas:
 - ✓ Trauma informed practices.
 - ✓ Supporting the First Nation, Métis, Inuit communities.
 - ✓ Understanding of infant mental health for staff engaged in legal proceeding involving infants and toddlers.

Collaboration

- Develop a collaborative approach among agencies to parent education programs and events across the district.
- Explore how planning might fit into existing community tables or whether a new/separate table is needed.
- Reach out to the FNMI communities affected by the fee subsidy restrictions and boundaries to look for a resolution.

Muskoka and Parry Sound

Organizational Policies & Practices

What is Happening in Muskoka and Parry Sound Today

- HANDS staff complete an annual staff engagement survey as well as pre and post surveys with families regarding some services. Additionally, HANDS also their own reflective supervision practice document and core competencies document.
- SMCYFS also does pre and post surveys with families within their agency.
- As a community, it was discussed that there needed to be more information regarding organizational policies and practices that support infant mental health. It was determined the best method to collect this information is through a survey for front-line practitioners and staff to gain a better understanding how they feel they feel. The survey would be completed anonymously, with the exclusion of name, agency, and sector.

Opportunities for Organizational Policies & Practices

- Community agreed to develop a survey for frontline practitioners to better understand how those providing direct services feel.
- IMHP will create a draft and seek table's approval and input.
- The survey will be broken up by districts: Parry Sound and Muskoka.



**Embedding the Science of
Infant Mental Health in Practice and Policy**

**Supporting Infant Mental Health
in Ottawa**

About Ottawa

Ottawa is the capital of Canada and is border to Gatineau, Québec (Statistics Canada, 2012). The 2011 census reported a population of 883,391 and covers 2,790.22 km² of land area (Statistics Canada, 2012). The Ottawa region is home to Canada's Federal Government and is also a beautiful region. In 2011, the region recorded just fewer than 10,000 births and 49,140 children between 0 to 4 years of age (Statistics Canada, 2012). An urban centre, the region is also rich with cultural diversity.

The Community table in Ottawa was the largest of the five communities we worked with and was the only community to have representation from the Francophone community. Representatives were present from many sectors including:

- Early Learning and Child Care
- Public Health
- Crisis Shelters
- Young Parent Support Services
- Health Care (Including tertiary care and pediatrics hospitals)
- Education
- Children's Mental Health
- Child Welfare
- Community Health Centres
- Mental Health Promotion

Ottawa has a variety of services and resources for families with young children. What did arise during discussions was the absence of a system for addressing infant mental health. Specialized children's mental health centres do offer some services however families currently experience wait times which can be quite extensive. This often leaves families waiting for service with no supports in place. Additionally, the services can also be challenging to navigate.

Recently, in a collaborative effort to address these issues, agencies agreed that had a child been waitlisted on the wrong list, they would move into the same position with the new and hopefully appropriate service so that the time spent on the wrong list was not lost. While a small step, it can be significant for a family that may have already waited several months to know they don't go to the bottom of the list with a different agency.

Facilitators also noted, by the sheer number of people who attended, that Ottawa is eager to improve and enhance their services to young children and their families. There was honest discussion about the need to enhance the knowledge of all practitioners working with this population including public health and hospital nurses, early childhood educators, shelter staff, child protection staff, physicians, teachers and many others. **There was also a clear recognition that there is no systematic approach to infant mental health within the community – but a strong commitment to moving in that direction.** For example, from a health promotion perspective, the Ottawa Child and Youth Initiative: Growing Up Great has a defined approach to build community capacity to promote attachment and self-regulation in young children and families.

The Ottawa report outlines some clear and relatively simple steps that can be taken to begin to strengthen infant mental health practice and ultimately services. Knowledge enhancement was identified as a key element. Engaging the post-secondary sectors and the regulating bodies of various professions also important as not only do those in the field need opportunities to

enhance knowledge, those in training need to be given the science and shown how it can apply to their practice.

Ottawa is well positioned to strengthen knowledge, practice and policy specific to infant mental health. Next steps have already been identified and IMHP is committed to staying involved if our help is needed. This report provides a snapshot of current infant mental health efforts in the Ottawa region. Included at the community table were the following agencies:

- | | | |
|--|--|--|
| ✓ Andrew Fleck Child Care Services | ✓ Ministry of Education | ✓ Pinecrest Queensway Community Health Centre |
| ✓ Best Start Table - Ottawa South | ✓ Ministry of Child and Youth Services | ✓ Royal Ottawa Hospital |
| ✓ Bethany Hope Centre | ✓ Mothercraft Ottawa | ✓ Somerset West Community Health Centre |
| ✓ Carlington Community Health Centre | ✓ Ottawa-Carlton District School Board | ✓ St. Mary's Home |
| ✓ Centre Psychosocial | ✓ Ottawa Catholic School Board | ✓ Vanier Community Service Centre |
| ✓ Champlain Maternal Newborn Regional Program | ✓ Ontario Early Years Program - Ottawa South | ✓ Violence Against Women Integrated Services Project(Western Ottawa Resource Centre & Ottawa Children's Aid Society) |
| ✓ Children's Hospital of Eastern Ontario | ✓ Ottawa Child and Youth Initiative: Growing Up Great | ✓ Wabano Centre for Aboriginal Health |
| ✓ Chrysalis House | ✓ Ottawa Children's Aid Society | ✓ Western Ottawa Resource Centre |
| ✓ City of Ottawa - Childcare | ✓ Ottawa Public Health – Healthy Babies Healthy Children | ✓ Youth Services Bureau |
| ✓ Conseil des écoles publiques de l'Est de l'Ontario | ✓ Ottawa Public Health – Family and School Health | ✓ Youville Centre |
| ✓ Crossroads Children's Centre | | |
| ✓ Emily Murphy Non Profit Housing | | |

There was also representation from the Special Needs Strategy, the Children's Mental Health Transformation, Child and Youth Mental Health Network (CYHMN), Young Parent Support Network (YPSN), and Best Start Leadership Planning Table at the meetings.

Core Prevention & Intervention for the Early Years

What is Happening in Ottawa Today

Note: This is not an exhaustive list of all programs, services, initiatives and projects present for children under five and their families in the Ottawa community. It is solely based upon the participation of the identified community partners over the two days event.

Universal Programs and Services for Children and Families

Carlington Community Health Centre

- **Pre- and Post- natal health:** Carlington offers a variety of program focused on pre-and post-natal health including breastfeeding prenatal information, prenatal nutrition program (Buns in the Oven), postnatal breastfeeding support, well-baby drop-in.
- **Parent-Child Drop-Ins:** Drop-in playgroups for parents/caregivers and their pre-school children (from newborn-6 years); French and English language available.
- **Parent Education/Family Support:** Short group programs and workshops on the tough job of parenting and the joy and challenges of raising children. Child care available for group programs. One-to-one and family support is available
- **School Readiness:** Carlington offers several free school readiness programs to help children reach their full learning potential and be ready for a successful entry into kindergarten, including: Family maths, Backpack Adventures, School's Cool.
- **Headstart Nursery School:** Annavale Headstart Nursery School offer subsidized full day spaces for children 2 to 5 years. Programs include enriched early childhood education, parental support, & speech and language assessments.
- **Baby Cupboard:** A place to get emergency supplies such as diapers, cereal, clothing.

Mothercraft Ottawa

- Not for profit daycare providing part time care for ages 6 weeks to 4 years. Also have a full time program for ages 18 months to senior kindergarten. There is also a home child care division. On site is an Ontario Early Years program.
- Mothercraft Ottawa offers a comprehensive range of support services for parents, including prenatal classes, doula labour support, drop-in play groups and parenting workshops.

Ottawa Public Health: Family and School Health

- **Parentinginottawa.ca** is a new resource for parents created by Ottawa Public Health and its community partners. Information covered includes parenting and pregnancy, breastfeeding, and babies and toddlers.
- **18-month Well-baby Visit Pathway Document** for physicians and healthcare providers to direct them to services after 1 month Well-Baby Visit
http://documents.ottawa.ca/sites/documents.ottawa.ca/files/documents/18month_pathway_en_0.pdf

Pinecrest Queensway Community Health Centre

- **Parent/Caregiver Calendar:** Pinecrest-Queensway offers a variety of free workshops for parents and caregivers to give them the tools they need to raise happy, healthy children. Each workshop is geared towards specific periods in a child's development from birth to age 12, meaning that visitors are sure to find a subject that addresses their most immediate needs
- **Ontario Early Years Centre (OEYC):** Pinecrest-Queensway operates the Ottawa-West Nepean Ontario Early Years Centre (OEYC), providing a variety of free programs and services for parents and caregivers of children aged 0 – 6. Drop-ins are facilitated by qualified staff, whom are happy to answer questions and provide access to referral services.
- **Headstart Nursery:** Pinecrest-Queensway Headstart Nursery School is a fully subsidized preschool program located at Dr. F.J. McDonald School. The program operates in two large classrooms, with an outdoor climber and a spacious play area. Headstart's curriculum fosters creativity, curiosity, independence, interaction, communication and respect for others.
- **Circle of Support Home Visiting:** Pinecrest-Queensway Community Health Centre offers free home visiting and workshops for families living in the Pinecrest Queensway community. The home visiting program, Parent Outreach Program (POP), works with parents with children 0 to 6 to develop parenting goals and to assist parents in reaching those goals. Services are offered in English and Arabic.
- **Pre- and Post-Natal Health:** Pinecrest-Queensway offers a variety of free health promotion programs designed to provide new and expecting parents with support, education and resources.
- **School Readiness:** Preparing to begin school for the first time is an exciting moment, and a great opportunity for children and parents to learn together. Pinecrest-Queensway and the Ottawa-West Nepean Ontario Early Years Centre offer a slate of free, fun school readiness programs help children enhance fundamental skills and help children to achieve their full learning potential.

Somerset West Community Health Centre

- Playgroups and Toy Library: Playgroups offer age appropriate, early learning opportunities for children between the ages of birth and 5 years of age. Playgroup for Dad's, Uncles, Grandpa's and their kids! are also available.
- Well Baby/Breastfeeding Support Drop-In: Weekly education and support to parents of babies up to 24 months of age. Advice on breastfeeding, nutrition, safety and infant development are available from several professionals
- Parenting Support Services: programs are offered to parents, caregivers and their children 0-6 years old. Services include referrals, home visits, toy library, and information on child development.
- Headstart Nursery School Programs: Nanny Goat Hill Nursery School and Queensway Preschool offer subsidized morning or afternoon spaces for children 18 months to 5 years. Programs include enriched early childhood education, parental support, & speech and language assessments.
- Prenatal Breastfeeding Class: offers pregnant women and their partners information on breastfeeding preparation, information and education.

Vanier Community Service Centre

- Various playgroups available for all families including Anglophone families, families with children with special needs, and bilingual playgroups
- **Breastfeeding Support and Baby Express:** A family support worker provides information and resources and refers parents to other services related to breastfeeding, parenting and child development. Programs allow opportunity to meet other parents as well as consult a lactation consultant nurse or public health nurse.

Support for All Families with a Focus on Those at Risk

The Bethany Hope Centre

- Resource centre for young parents (ages 13-26) and their children (ages 0-6). Our mission supports, equips and empowers adults, youth and children in the Ottawa Region by building services, partnerships and a faith-based community spirit with a primary focus on young parents and their children. Services that we offer include: Parent Support Team-Counselling Program (including attachment counselling) Family Basic Needs Services (including food bank), Pregnancy Circle Program, Buns in the Oven programs, Playgroups, and Parenting Programs.

Centre Psychosocial

- **Programme Jeunes Parents:** This program, in partnership with the school transit, welcomes young women 14 to 18 years (pregnant) and mothers 14 to 25 years (with child/ren) who wish to complete their secondary education. This program is offered to the Francophone community.

- The program aims to develop the autonomy of young mothers so that they can fulfill their responsibilities as adults and independent parents.
- The CPS provides child care and therapeutic support service. Therapeutic assistance is individual, group or is made by the accompaniment.
- The multidisciplinary team (clinicians, educators, teachers, etc.) ensures strong knowledge of the needs of young parents enrolled in the program in order to support them and help them overcome their learning difficulties, financial, emotional and social.
- The center also helps young mothers and their children by providing access to essential services such as: a food bank, nurse services, laundry service, response in mid-life, early detection, etc
- **Les Petites Frimousses:** A service for learning, growth and stimulation for the children of the Francophone community in Ottawa. The program receives 25 infants / toddlers (10 babies from birth to 18 months and 15 toddlers from 18 months to 2½ years). The infant / toddler program supports the Young Parents Program of Psychosocial Centre giving priority to applications for a place in the educational center for young parents in the program. Les Petites Frimousses also welcomes children from the community.

Children's Aid Society of Ottawa

- The Children's Aid Society of Ottawa (CAS) is non-profit community organization funded by the Government of Ontario, legally mandated to protect children and youth from abuse and neglect.
- The CAS is obligated to investigate reported situations in which a child or youth may be in need of protection. These are situations where a person has reasonable grounds to suspect that the actions or lack of actions, of a parent or caregiver caused harm or created a risk of harm to a child or youth under sixteen (16) years of age.
- **Support Services:** The Children's Aid Society helps families through difficult situations by supporting and strengthening their relationships, so they are able to parent their children safely. With help from our community and other organizations, they are able to offer many services and programs for families in need.
- **Pre- and Post-Natal Services:** The CAS, together with the Young/Single Parent Support Network of Ottawa, the HBHC Program and medical professionals, provide information to pregnant women with substance abuse or other high-risk indicators as well as providing pre-and-post natal services.
- **The Headstart Nursery Program:** The Headstart Nursery Program is primarily funded by the City of Ottawa. The program is designed for children who come into contact with the CAS and focuses on the social, emotional and cognitive skills required to integrate into the regular school system.

Chrysalis House

- Chrysalis House is a safe and secure 25-bed shelter in Western Ottawa. It is a place where a woman can go to protect herself and her children from violence and abuse. In this supportive environment, a woman can focus on her personal needs and choices, as well as on her children's needs.
- Chrysalis House is open to any woman (over 16) and their dependents who are in an abusive home and need to leave the home to keep herself and her dependents safe. Chrysalis House offers a crisis phone line 24 hours/day at 613-591-5901.
- Chrysalis House is pleased to provide services to women of diverse age, cultures, sexual orientations and abilities.
- Services provided during a woman's stay may include crisis intervention, one-to-one supportive counseling, group support, education and information, assistance with accessing financial, legal and housing support, accompaniment services, advocacy, and referrals to community resources. These services can be provided to children, youth, and parents.

Community Action Programs for Children (CAPC) and Canadian Prenatal Nutrition Programs (CPNP)

- The Community Action Program for Children (CAPC) and the Canada Prenatal Nutrition Program (CPNP) are two programs that are committed to promoting healthy birth outcomes and the healthy development of children. These programs are typically embedded within community based agencies.
- The CAPC/CPNP National Projects Fund (NPF) was created to provide support to the CAPC and CPNP sites in providing them with tools, resources, support and training on specific issues.
- 8 prenatal nutrition programs are provided across Ottawa.
- The network of CAPC/CPNP programs in Ottawa are reaching at risk families and connecting them with other programs/services.
- CAPC/CPNP programs are connecting with HBHC prior to the birth of a child and continuing involvement afterward.

St. Mary's Home

- St. Mary's Home is the sponsoring organization of three CAPC/CPNP programs in Ottawa.
- An agency that provides a comprehensive range of programs and services for young pregnant women, young moms and dads, and their infants and young children. Healthy pregnancy and birth programs include: Pregnancy Circle, Baby Express Drop-in, Buns in the Oven, Kick Butt 'n' Craft, Health Workshops, Breastfeeding Support. Parenting programs offered are: Baby Basics, Parenting Readiness, Infant Massage, Right from the Start, Reading and Parents Program (RAPP), It's My Child Too (for young dads)

- St. Mary's Home programs have a strong Infant Mental Health - attachment focus where the mother is able to recognize what attachment is. Prenatally include community support along with traditional methods.
- St. Mary's Home Residential Program uses the evidence-based Prenatal Version of the Working Model of the Child Interview to help at-risk pregnant youth to identify their internal child's parental representation, parent-infant interactions and later infant attachment. Priority use of this early intervention is with youth who have a CAS involvement / concern about her pregnancy and her ability to care for the child, and with youth who **self-identify** an interest later taking Modified Interaction Guidance.

Emily Murphy Non-Profit Housing

- Affordable housing and support services in a townhouse setting in Blackburn Hamlet for single parents and their children. One third of the units are reserved for single parents under the age of 24. Support services include children's programming, housing support and parenting information.

Ottawa Public Health: Health Babies Healthy Children (HBHC)

- Healthy Babies Healthy Children is delivered by Ottawa Public Health.
- The Healthy Babies Healthy Children (HBHC) Program is a voluntary program for women and their families in the prenatal period and families with children from birth until their transition to school experiencing challenges that could impact on child development.
- HBHC is based on a blended model of home visiting offered by public health nurses, a social worker and family visitors to achieve healthy pregnancy and healthy child development outcomes, respecting the different characteristics of families that may include but are not limited to: social, linguistic, cultural, racial, and gender diversity.
- HBHC services offered to support the parent-child dyad. include: screening and assessing infant and parental health, including an evaluation of any identified risk related to (i.e.: physical health problems, parenting challenges, mental illness including postpartum mood and anxiety disorders, intimate partner violence, addictions, PTSD, infant mental health, etc.), client centered health teaching and counseling; advocacy and referral and service coordination.
- Baby Express drop-ins where families of infants up to one year can consult a PHN 7 days a week, related to nutrition and feeding (including breastfeeding) within a BFI approach, child safety, adjusting to parenthood, accessing community resources, etc.
- HBHC liaises with Ottawa hospitals, St. Mary's Home, Youville Centre, and The Salvation Army Bethany Hope Centre to work with mothers in the community. They are currently connecting with many community agencies and have established relationships. Programs include components of: attachment, parent-child interactions, breastfeeding, infant mental health, Baby Friendly Initiative, prevention efforts. Their work with families begins at preconception.

Vanier Community Service Centre

- **Ça Mijote (Buns in the Oven):** This francophone prenatal nutrition program provides information and support to pregnant women and to mothers of infants.
- **L'éveil des tout-petits:** Resources and support for child development, attachment and the importance of play serving parents and their 6-18 month-old children.

Violence Against Women Integrated Services Project

- The CAS/VAW Integrated Services Program is a co-located service between child welfare and the violence against women sector. The Violence Against Women team works with protection workers at Children's Aid Society of Ottawa in building a strong collaboration with the pre and post team. They are able to go out in the community and work with at risk mothers.
- Child witness programs: 5 agencies in Ottawa offer individual and group support to mothers and their children to understand the impact of being exposed to the abuse of their mother.

Youville Centre

- Located in Ottawa, Youville Centre is a non-profit, registered charity that serves adolescent mothers and their children. Youville's trauma-informed, holistic programs and services include: crisis intervention, intensive mental health therapy and treatment, addiction counseling, collaborative problem solving, a licensed child development program with a focus on infant mental health, attachment-based parenting programs with intervention and treatment, and a fully accredited secondary school. For more than a quarter century, Youville Centre has been an innovative centre that motivates, educates and nurtures young mothers and their children to become self-sufficient, contributing members of society.

Early Screening and Assessment Activities

- St. Mary's Home, Youville Centre, Ottawa CAS, Bethany Hope and Emily Murphy Non Profit Housing began administering the Ages and Stages Questionnaires (both ASQ-3 and ASQ-SE) with their families. The screenings along with observations and parental interviews are used to create development support plans unique to each child's and family's needs. The plans are used to make the most of lengthy wait times if a child is identified as delayed in any developmental domain.

Centre Psychosocial

- Early Detection Program: The program provides standardized screening assessment services in the overall development of children aged 18 months to 5 years. The results of this screening will be shared with parents and professionals involved, and if applicable, the families will be directed to additional services.

Crossroads Children’s Centre:

- Offers walk-in clinic and home based programs for children 0-6 years old – this includes children without a confirmed diagnosis. These services are offered in English.

Education Sector

- Catholic School Board: currently are identifying at-risk children for developmental delays through home visiting for school readiness. Additionally, they are including a survey for kindergarten registration that goes back to child care involved as a transition piece in sharing information regarding the child.
- Ottawa-Carleton School Board: Nipissing District Developmental Screen (NDDS) tool is used within the child care centres located in the schools.

Growing Healthy Screening Clinics

- Ottawa Growing Healthy Screening Clinics (GHSC): Several community partners collaborate to offer the clinics, which are dependent on annual funding. There are between 5-6 clinics a year at different community locations across the city. Families are provided with information and screening from a variety of organizations:- Ottawa Public Health (Immunization, dental screening, developmental screening (NDDS), NutriSTEP screening), Crossroads: Behavioral Screening, First Words: Speech and language Screening (only for children up to 5 years old and children NOT enrolled in senior kindergarten), Ottawa Children Treatment Centre: Developmental Screening, Parent Resource Centre: Promotion of literacy.

Healthy Babies Healthy Children

- HBHC screening is offered in collaboration with health service providers and through referrals received from other agencies and individuals. HBHC also conducts an assessment of families identified with risk for compromised healthy child development and parenting ability. Screening and assessment can occur prenatally, postpartum and/ or during early childhood anytime up to a child’s transition to school.
- St. Mary’s Home, Youville Centre, Ottawa CAS, Bethany Hope and Emily Murphy Non Profit Housing began administering the Ages and Stages Questionnaires (both ASQ-3 and ASQ-SE) with their families. The screenings along with observations and parental interviews are used to create developmental support plans which are unique to each child’s and family’s needs. The plans are used to make the most of lengthy wait times if a child is identified as delayed in any developmental domain.
- Currently a perinatal services pathway is under development in collaboration with community partners.

Youville Centre

- Early Learning for Every Child Today (ELECT) document- provides a framework for information regarding the child’s development.

- Staff create a child portfolio based on development goals and observations supported by pictures, which is then shared with mothers, so that future goals are set collaboratively to support all areas of development including socio-emotional. This program exists for 2 – 30 month old children.

Early Intervention Services

Centre Psychosocial

- **Centre éducatif spécialisé l'Image** is a place of learning, growth and stimulation for the children of the Francophone community in Ottawa. It provides children with learning opportunities and support they need to develop their cognitive, language and social.
- L'Image welcomes children aged between 18 months and 5 years. It is a specialized center for children with special needs in communication, socialization and more specifically children with a diagnosis of autism
- **Services d'intervention en santé mentale:** individual therapy, family and parental counseling and a living environment in response service for various mental health problems (anxiety, ADHD , behavioral problems , etc.)

Children's Hospital of Eastern Ontario

- Provides mental health care services through psychiatry, psychology, social work, nursing, and education) for children 0-18 years old.

Ottawa Children's Treatment Centre

- **Getting Started Services/ Wee Start Services:** As a first step to services following a referral to the centre, Getting Started Services/ Wee Start Services offers families of children under 6 years of age access to a multidisciplinary team to address concerns and offer discipline-specific strategies in the areas of communication, socialization, play skills, self-help skills and behaviour.
- At the Getting Started Services/ Wee Start Services clinic visit, the parent and child are scheduled to meet with one or more of the following professionals for screening and consultation: an early childhood educator, a social worker, a speech-language pathologist, an occupational therapist and a physiotherapist.
- If needed, parent can be referred for additional support to address behavioural and nutritional concerns. Individual, educational or training sessions are available based on the child's developmental profile and needs.
- Children aged 21 months and under are seen at Wee Start Services while children over 21 months and under 6 years of age at Getting Started Services.
- Assessment & diagnostic services are provided by developmental paediatricians and psychologists for children with physical and developmental concerns throughout the region.

Ottawa Children's Treatment Centre at CHEO

- **Infant & Child Development:** Infant and Child Development is a prevention and early intervention service for infants and young children from birth to age five who have a physical and/or developmental disability, or are at risk of a developmental delay.
- OCTC provides Infant and Child Development Services for children and families residing in the Ottawa area. Infant and Child Development Services in the county areas are provided by partner organizations in each community.

Pinecrest Queensway Community Health Centre

- **Blind/Low Vision Program:** The Blind–Low Vision (BLV) Early Intervention Program is an initiative of the Government of Ontario's Ministry of Children and Youth Services. Its objective is to give children who are born blind or with low vision the best possible start in life.
- **First Words:** Preschool Speech and Language Program focuses on the prevention, early identification and treatment of speech and language problems.
- **Infant Hearing:** The Infant Hearing Program is an initiative of the Government of Ontario's Ministry of Children and Youth Services. Its objective is to identify infants who are deaf or at risk of developing hearing loss in early childhood and provide related support and communication development services to families.

Planning Tables

- **The Special Needs Table and Mental Health Transformation Agenda** will look to agencies in Ottawa to deliver interventions appropriate to infant-early mental health.
- **The Mental Health Transformation** is in the process of mapping what is happening, what are the next steps, determining if the interventions are effective.
- **Best Start Leadership Table / Ottawa Network for Children (Best Start Network):** The Ottawa Network for Children is comprised of community members representing children's services networks in Ottawa. This group works to plan and develop strategies to enhance services for children and seeks to establish a comprehensive system of services this will support families with children prenatal to 6 years of age. The scope will encompass the full spectrum of services for this age range, including health, education, social supports, licensed childcare, and other children's services
- **Young Parent Support Network** – a partnership of agencies providing accessible, integrated and flexible services and advocacy to at-risk adolescent pregnant and parenting youth and their children.
- **Child and Youth Mental Health Network** – leadership forum dedicated to sustaining, supporting and enhancing a strong service system for children and youth served by organizations responding to vulnerable and at-risk children, youth and families and funded by the Ministry of Children and Youth.

Somerset Community Health Centre

- Play groups are available where parents come together while waiting for intervention services.

St. Mary's Home

- St. Mary's Home facilitates parent – child interactive playgroups for different child age groupings, facilitated by Early Childhood Educators. Parents are adolescent (13-24).

Thursday's Child Nursery School

- Thursday's Child Nursery School (TCNS) is a licensed center-based program that operates eleven months of the year for nine children aged two to 4.8 years who are diagnosed with Autism Spectrum Disorder. TCNS is a program of Andrew Fleck Child Care Services.
- TCNS provides a learning-through-play environment which focuses on meeting the individual needs of the children. The individual strengths and needs of each child are considered when developing the program plan. Our focus is to support the children to develop independent skills in self-help, communication and socialization to facilitate their successful inclusion in the broader community.

Vanier Community Service Centre

- **Home Instruction for Parents of Preschool Youngsters (HIPPY Program):** HIPPY is a home-based education program that teaches parents to be their preschool children's first teacher and prepare their 3-5 year-olds for school. Parents are provided with carefully developed materials, curriculum and books. The home visitors call upon the family every second week, bringing a new set of materials - usually a storybook and a packet of instructional materials. The home visitor and parent spend about one hour reviewing the materials, using role-play. All of the instructional materials are available in English and French. Parents spend 15 minutes each day doing activities with their child. Every other week, the HIPPY program offers a group meeting at community centres or schools, with enrichment activities for parents.

Youville Centre

- Early Mental Health attachment based programs (Me My Baby Our World, Make the Connection, Positive Parenting) for adolescent mothers (14-20 years) who are at risk of poor parenting outcomes due to mental health and addiction challenges and a history of trauma. Programs are meant to increase parental awareness of their baby's attachment system as well as to empower them to become more confident in their parenting role. Programs also focus on the changing dynamics of the parent-child relationship as the child becomes more independent and teen parents require new and evolving skills and strategies to help guide them in their parenting role. Referrals are made from the program for individual parent-child attachment counselling.

Treatment

Crossroads Children's Centre

- The Crossroads Children's Centre is a fully accredited children's mental health centre that provides services for children up to age 12 and their families. Crossroads offers treatment designed to help children with complex mental health needs.
- The multidisciplinary Crossroads team has specialized expertise in delivering treatment and related services for children with severe emotional, behavioural and social difficulties.
- Collaborative Problem Solving (CPS) is a model for providing treatment and support to children and youth with social, emotional and behavioural challenges. CPS is increasingly recognized as a best practice model in the delivery of mental health services for children and youth. Its two major principles are:
 - Youngsters exhibiting difficult behaviours are doing so because they lack the appropriate skills to behave in healthier ways. This principle recognizes that helping children and youth to develop skills — for example, how to adapt to change and how to tolerate frustration — will support development of healthier behaviour.
 - These challenges are best addressed by collaborating with the child or youth to solve the problems leading to the difficult behaviours.

Early Learning and Care Sector

- Once there is formal diagnosis for a child, Children's Integration Support Services (CISS) provides treatment and interventions for children within the licensed child care programs.
- The Children's Integration Support Services (CISS) team is made up of intake coordinators, resource consultants, resource consultant team leaders, behaviour consultants, behaviour facilitator and administrative staff. The CISS team supports programs and children and their families by coordinating resources through effective partnerships to ensure a positive and inclusive child care experience.

St. Mary's Home

- **Modified Interaction Guidance** to up to 36 young parent families: Modified Interaction Guidance (MIG): MIG is a clinical intervention technique aimed at supporting the development of healthy, secure attachment in very young children.
- It is provided to young parents who are at risk of poor parenting outcomes due to mental health issues, possible addiction issues, history of trauma, young age, social disadvantage, poverty and other high risk factors in a series of 6-10 weekly hour long sessions.
- Each session involves video-taping parent/child interactions, coding of the video by a specifically trained infant Mental Health Team, debriefing of the video with specific attachment-related goals, motivational counseling, one-on-one counseling support and weekly goal-directed parental/ child interactive homework.

- The program is carried out under Dr. Diane Benoit, Hospital for Sick Children in Toronto and is provided in two community based settings. It also provides direct service linkage with the agencies and projects of the Young Parent Support Network.

Youville Centre

- Individual Counselling service for adolescent mothers who are at considerable risk of poor parenting outcomes due to mental health, addiction and a history of trauma. Clinical intervention is aimed at supporting the development of healthy secure attachment in the infants and toddlers of adolescent mothers.
- Series of two hour long sessions twice a week for a period of 6 – 8 weeks. One hour long consultations are available as needed.
- Program based on development sensitive parenting skills and sensitive responsiveness to promote secure attachment.
- Video- taping/debriefing and session feedback are components of the program Pre and Post measures of The Sensitive Parenting Outcome Measure and The Checklist of Disrupted Caregiver Behaviours.

Existing Collaborations among Services and Sectors Positively Supporting Infant Mental Health

- Supporting Practice: There is a community approach initiative to increase capacity on infant mental health including practitioners (through a community of practice) for 0-5 in development under the Ottawa Child and Youth Initiative: Growing Up Great. As part of the initiative, local champions will be identified on a broader scope to promote infant-early mental health.
- In Carlington Community Health Centre has a pilot project that is connecting prenatal breastfeeding resources to primary care physicians. Project coordinator goes out to physicians with important education pieces. This project also includes a component of connecting women to prenatal breastfeeding workshops and breastfeeding support drop- ins. This is a part of a Best Start/Health Nexus project.
- Pinecrest Queensway CHC is leading a pilot project focusing on skin to skin promotion in partnership with Ottawa agencies operating CPNP programs.
- Youville Centre and Ottawa CAS have built a strong relationship to assist with families in their services.
- St. Mary's Home has adapted a model for working with youth addiction which involves a partnership with the Rideau Wood Centre.
- The Bethany Hope Centre has partnered with the Bruyere Family Health Centre. This in turn provides clients with access to a family physician and/or a Nurse Practitioner.
- **School Readiness Working Group** (part of Ottawa Child and Youth Initiative: Growing Up Great): Coalition that includes many service providers, such as Ottawa Best Start, Ottawa

Public Health, and various CHCs working to strengthen early identification strategies using the NDDS and NutriSTEP screens.

- **Ottawa Coalition of Fetal Alcohol Syndrome Disorder (FASD)** does education within community, FASD support, and education groups- the community is beginning to look at how they respond to concerns of FASD.
- **Champlain Maternal Newborn Regional Program (CMNRP)** plays a key role in connecting and networking with maternal-newborn organizations and health care providers of the region, working together on addressing maternal-newborn care priorities identified at the regional and provincial levels.
- Ottawa Parent Resource Centre's Incredible Directory, Directory of Ottawa Community Services (Blue Book), and Best Start Tables have developed and distributed pathways documents for service coordination in Ottawa community
- **Ottawa Collaborative Parenting Support Strategy:** a community of partners working together to build resilient families that can support their children's healthy development, feel empowered, and are able to cope with the ups and downs of everyday living. Looking to develop a centralized system for sharing information with professionals and parents. Components of collaboration focus on accessing services and referrals system, empowering parents, best practices, and outcome evaluation. A part of the Ottawa Child and Youth Initiative. Community partners include Ottawa CAS, Ottawa Public Health, and the Ottawa Parent Resource Centre.
- Crossroads and Ottawa Children's Treatment Centre developed a protocol that if child is sitting on a waitlist for 6 months or more at OCTC then there is an agreement that they will put them waitlist on the date that they were initially on at Crossroads.
- OPH has established relationships with many service providers for including formal liaisons with CAS, hospitals, St. Mary's Home, to work with families in the community .As well OPH is represented in Growing up Great, CMNRP, etc.
- St. Mary's Home has imbedded Addictions Counseling support for pregnant youth, thanks to a long-term partnership with Rideauwood Addiction and Family Services. This initiative is funded in part by the MCYS and by the LHIN's Early Childhood Development Addictions Project.
- St. Mary's Home's Young Parent Outreach Centre is a Multi-Service hub that includes specialty services on site: The Ottawa Hospital's (TOH) Adolescent Obstetrics Clinic; TOH and CHEO run perinatal mental health clinics; Ottawa Public Health provides Prenatal education, Well baby Clinics and Home visits; The Ottawa Catholic School Board provides a prenatal Achievement Centre alternative high school; Bruyere Family Health Centre and the Charitable Dental Clinic. CAPC / CPNP programs are integrated within this Centre, keeping the focus on child development, parenting, and infant mental health.
- St. Mary's Home and Youville Centre are members of the Young Parent and Infant Mental Health Association of Ontario (YPIMH) formerly known as The Ontario Association of Child, Youth and Young Parent Centres (OntChild/ YPRO). YPIMH benefits both the agencies and those populations they serve through promoting education, networking and information sharing opportunities. Member agencies share common goals and as an association we join together to communicate and address mutual concerns with other agencies and the Ministry.

- Youville Centre and St. Mary's Home both have partnerships with The Ottawa Hospital whose ob/gyn clinics are located in both centres.

Short Term Opportunities to Enhance Core Prevention and Intervention

Support for All Families with a Focus on Those at Risk

- Host a meeting with agencies who serve the most vulnerable together to discuss and determine solutions to challenges they face, particularly clients who are difficult to engage. In this conversation, we would like to include topics of child development and parenting approaches.

Early Screening and Assessment Activities

- Create a resource that contains the various tools being used in Ottawa and share best practices around them as a community. IMHP will leverage their existing chart in the Hand in Hand Resource Kit as starting point.

Early Intervention

- Explore hosting a city-wide Developmental Support Plan training for the Ottawa Community.

Collaboration

- Assess and take inventory on what is available in the Ottawa community in regards to models of co-located services.
- Increase the collaboration between CPNP sites in the community and skin to skin pilot project at Pinescrest Queensway Community Health Centre.
- Initiate community meetings to enrich current initiatives and tables to ensure cohesiveness. MCYS and MOE can communicate what is transpiring at the moment and identify how community agencies can become involved.
- When the PHAC report is prepared – as a community, it will be shared with the **Special Needs Table and Mental Health Transformation** in the community to inform them of what was discussed.
- Using/leveraging existing tables and initiatives, including and not limited to Best Start, Mental Health Transformation, and Special Needs Table, and Ottawa Child and Youth Initiative look at coordinated listing and pathways for accessing development and support services.
- Disseminate more information about the Growing Healthy Screening Clinics among professionals to refer families needing follow-up (based on funding).

- Ensure that community agencies are included in existing environmental scans. Working documents will be shared with the community to ensure their inclusion of services as they are being mapped. As a community, review the environmental scan together once it is complete.
- Engage the Local Health Integration Network (LHIN) and share the final PHAC report we create as a community.

Long Term Opportunities for Core Prevention

Support for All Families with a Focus on Those at Risk

- Leverage the Parenting in Ottawa Portal to promote IMH messaging to families
- Increase education opportunities for primary care physicians working with at-risk young mothers to link with community agencies.
- Explore opportunities to strengthen co-located models/services for mental health and addictions for vulnerable populations.
- Identify strategies to build capacity for clients to become more receptive to services, address the barriers they face, and their readiness.
- Explore how to include parents in the development and design of the system that responds early mental health as the many tables are in the midst of evaluating mental health services.

Early Screening and Assessment

- Develop a Community of Practice to establish and support the development of early screening tools, interventions and assessment practices.

Early Intervention

- Promote and enhance existing pathways documents that address early mental health among professionals.
- Have consistency within pathways documents and how they are guiding professionals/parents - create a coordinated listing and pathway documents for professionals/parents. Include details of the extent of programs/services so agencies are aware of expertise they can tap into. This will also include common screening and assessment tools.

Treatment

- Strengthen infant/early mental health services in special needs and mental health sectors.
- Strengthen infant/early mental health pathways in special needs and mental health sectors
- Advocacy for treatment services in both official languages.

Collaboration

- Explore the transferability of the Baby-Friendly Initiative (i.e. creating supportive environments) into other community agencies in Ottawa, and promote organizations to become BFI designated.
- Share the use of collaborative problem solving (CPS) with agencies who are interested and may benefit from it. Look to setup a mechanism for agencies that may not have it – to be used with parents who attend services.
- Explore ways for families/parents with young children to inform practitioners/professional they are engaged with, to better inform them of their needs (e.g. through a checklist document families fill out, etc.).
- As a community, we would like to review the findings of the Carlington pilot project to see if can be replicated in other areas of Ottawa.
- Through the Mental Health Transformation and Special Needs tables, apply a lens for infant mental health as they look at systems and families are engaged on how the system work.
- Have community tables explore possible strategies to providing support to families during wait times for infant developmental strategies
- Explore what strategies can be presented to families, including systematic referrals to supportive services such as HBHC, while they wait for specialized care.
- Explore social media/marketing collaboratively as a community which include cultural components to include more of the population.
- Strengthen cultural sensitivity when looking at developmental assessments and intervention.
- Environmental scan of the services availability, efficacy, and capacity for infant/preschool development in the community- coordinate existing scans between Mental Health Transformation Table and Ottawa Public Health.

Competencies for Practice in the Field of Infant Mental Health

What is Happening in Ottawa

As a community there is a general knowledge across sectors in child development for ages 0-5 years. It was determined as a community, we would like to continue to strengthen this knowledge base as new, current research and information becomes available. There is also a very strong interest in learning more about the science behind infant mental health across sectors and professional disciplines.

Knowledge

Ottawa Public Health: Healthy Babies Healthy Children (HBHC)

- Across province, Keys to Care Giving, the Nursing Child Assessment Satellite Training (NCAST) and Parenting in Partners Education (PIPE) are integrated, into HBHC's strength based approach.
- PHNs have a strong foundation in child development, some also have acquired skills in motivational interviewing and engaged in ongoing education and specialized training related to in IMH and attachment.
- Many HBHC PHNs have attended attachment focused training facilitated by Dr. Benoit from The Hospital for Sick Children, as well as training on brain development, facilitated by Dr. Stuart Shanker. Joint professional development with the CAS on the effects of toxic stress on infants, facilitated by Dr Jean Clinton.
- Prenatal Instructors have three learning modules:
 - Breastfeeding Basics (tips and techniques)
 - Baby basics (preparing for parenthood)
 - Birth Basics (confidence and comfort).
- Public health nurses take child development courses, attachment.
- Home visiting component has a growing body of learning and mentoring around child development.
- Strong foundation around child development within public health prenatal programs.

Growing Up Great: Ottawa Child and Youth Initiative

- Community of Practice: Under the Growing up Great: Ottawa Child and Youth Initiative, there is a proposal which can provide training and discuss practice changes within community agencies. Ottawa Headstart has started a similar process and are evaluating how staff are feeling their practice has changed. This can be used a vehicle to strengthen service coordination and embedding infant-early mental health into Ottawa community agencies.

Children's Hospital of Eastern Ontario (CHEO)

- E-mental health has the structure and mechanisms in place for sharing knowledge and information about agencies not only in Eastern Ontario but across Canada. This could be a vehicle in increasing knowledge around infant-early mental health.

Ministry of Education

- Think, Feel, Act: Lessons from research about young children was developed. The *Ontario Early Years Policy Framework* describes how the experiences children have in the early years can have an extraordinary and long-lasting impact on children's learning, development, health and well-being. Central to this is a view of children as competent, capable of complex thinking, curious and rich in potential. To support educators working in early years settings in their continuous professional learning, the Ministry worked with leading experts in the early childhood field to develop the following thought-provoking resources.
- Topics include: Positive Relationships and Brain Development, Pedagogical Leadership, Pedagogical Documentation, Inclusion, Parent Engagement, Learning Environments, and Self-Regulation
- Exploring the implementation of community hubs within schools making services more accessible to families. The use of space within schools when available could be a way to increase co-located services in the Ottawa community.
- Starting to prepare teachers to serve 3 year olds on self-regulation and executive function. *The Early Years Framework* will be used which is intended for children under 3. There are conversations starting and can be the foundation for strategy for prevention and promotion.

Ontario's Better Outcomes Registry & Network (BORN)

- BORN captures data on all births in Ontario, maternal data, newborn data, and expanding to 18 month follow-up. This is an area where the Ottawa community could leverage collecting useful data from families on components of infant-early mental health

Skills and Training

- There are strong examples of effective approaches being used with families across the Ottawa community such as:
 - ✓ Healthy Babies Healthy Children, St. Mary's Home, and Pinecrest Queensway Community Centre, and Youville Centre are trained in motivational interviewing for families.

- Collaborative problem solving – across various agencies in the Ottawa community, collaborative problem solving is a skill being used effectively with families, which empowers clients can solve problems given their own capacity. Crossroads Mental Health, Carlington Community Health Centre, Centre Psychosocial, Youville Centre and Head Start programs are all agencies using this skill.

St. Mary's Home and Bethany Hope Centre

- Both have strong understanding of attachment focused practices, Trained by Dr. Benoit from the Hospital for Sick Children on Modified Interaction Guidance intervention technique which supports the development of healthy, secure attachment in very young children.
- **Play for the Future:** Attachment Based counseling which helps parent's develop strong, trusting bond with their babies.
- Make the Connection parenting program.

Youville Centre

- Small group attachment programs offered are Me, My Baby, Our World, and Positive Parenting
- One on one therapeutic attachment counseling aims to increase parental sensitivity in our adolescent moms and promote secure attachment in their children.

Ottawa Children's Aid Society

- Staff are trained in the *3-5-7 Model*: a practice that supports the work of children, youth and families in grieving their losses and rebuilding their relationships. The 3-5-7 Model is a strengths-based approach that empowers children and youth to engage in activities that encourage expressions of hurt related to losses and to give meaning to significant relationships towards developing permanent connections. It supports deeper therapeutic work around the traumas of abuse, abandonment and neglect experiences that is or may be provided by other clinical professionals. As individuals begin to reconcile their grief, they may more readily enter into deeper, intensive therapies, if needed.

Ottawa-Carleton School Board

- **Parent Articulation Training:** Parent Articulation Training Program is designed to teach parents how they can help their children overcome mild articulation difficulties through training and proper resources for home use. A training workshop is normally offered in the evenings at the District's administration building on Greenbank Road. At the training workshop participants receive an overview of speech sound development, the stages and phases of therapy, as well as games and ideas for working with their child. Participants are able to participate in a demonstration therapy session. Individualized home program materials are also provided.
- **Reaching In Reaching Out Training:** RIRO Resiliency Skills Training Program provides service providers working in early learning, child care, community/mental health and other settings with the knowledge and skills they need to model and teach resilience approaches to young children, from birth to eight years of age.

Wabano Centre for Aboriginal Health

- **Parenting Bundle:** The Parenting Bundle is a cultural program designed to reintroduce parents and caregivers to traditional roles and responsibilities of parenting. It was developed by the Wabano Parenting Society, comprised of Elders, Knowledge Keepers, Grandmothers and community members. It is a holistic and cultural approach to empowering Aboriginal parents and caregivers in their parenting journey.
- Wabano's model of care for parents has been documented in a learning resource for all parents and caregivers of children. The history of colonization in Canada has eroded many of the traditional family systems and beliefs in our communities. The removal of children from our communities disrupted the sharing and passing on of important traditional teachings, stories and ceremonies that are essential to balanced families and communities. The legacy of colonization, residential schools and harmful welfare policies can still be seen today in the high rates of poverty, addictions, and dysfunction in many Aboriginal families and communities.

Children's Hospital of Eastern Ontario (CHEO) and HBHC

- **The Period of Purple Crying program** is designed to help parents of new babies understand a developmental stage that is not widely known. It provides education on the normal crying curve and the dangers of shaking a baby.
- Additionally the program tries to create a cultural change in how parents, caregivers, and everyone in the community understand the normalcy of this early infant crying and the dangers of reacting to an infant's crying in frustration.
- Emergency department and Neonatal Intensive Care Unit (NICU) Staff at CHEO and HBHC Nurses are trained.

Short Term Opportunities for Competencies

Knowledge

- IMHP will create a resource list with articles of interest for the Ottawa community table on topics around infant mental health (attachment, the science, etc.).
- Engage and begin a conversation with post-secondary sector and professional associations to share knowledge of early mental health.
- Explore ways to collaborate with Ottawa Child and Youth Initiative: Growing up Great to share infant-early mental health knowledge within proposal. As a part of the conversation also include the discussion of common language among services and sharing information/resources used by the family and agency.
- Connect Ottawa CAS with Toronto CAS about the project collaboration between the Toronto CAS and adult mental health agencies.
- Explore existing models of developmental passports from other sectors (health care) that could be replicated for early mental health services. Connect Ottawa Community with City Kids in Toronto to discuss their Developmental Passports. IMHP will help make this connection.
- Communicate with the Mental Health Transformation table the need for knowledge exchange amongst services/programs across Ottawa. Sharing what services look like and any resources families may be using/given. The transition from services needs to be highlighted as well.
- Engage the Special Needs Strategies Tables in conversations around early mental health and service coordination.
- Explore how to strengthen coordinated, targeted messaging around parenting, child development and infant-early mental health to reach families more effectively in the public. The location of these messages is essential in reaching the families who may not otherwise access services or be aware of services available. There are many current resources and activities in the community which could be leveraged to do this, such as the Parenting in Ottawa Portal (OPH).
- Ottawa School Boards will be invited to community tables to leverage and create more awareness of services.
- Convene a multi-sector group to look at the current data collected and develop a database to capture information regarding the 0-5 age group including components relevant to infant-early mental health.
- Conversation with Better Outcomes Register Network coordinators to include elements of infant-early mental health and other useful information

Skills

- IMHP will share Infant Observation Chart with the group to assist with observational skills for practitioners working with parents and infants

Long Term Opportunities for Competencies

Knowledge

- Explore how we can implement strategies and practices from the Ottawa Child and Youth initiative: Growing Up Great.
- Begin conversation with adult mental health agencies in Ottawa – explore how we can collaborate to support both parents and their children.
- Explore how to build capacity within staff about engaging families in conversations on accessing services.
- Look for innovative and new outreach strategies to engage families in services.
- IMHP Family Law Initiative learning modules will be piloted and shared with Ottawa CAS to increase understanding of early mental health.
- As a community, Ottawa will create a more coordinated approach/system to sharing education opportunities on infant/early mental health.
E.g. If one agency is hosting a workshop, look for opportunities to share with other partners. This could be a website portal.
- IMHP will consult with 5 communities what kind of database would be helpful around the services/programs available for infant/early mental health.
- Begin to develop a protocol for sharing information and equipping families through transitioning services.
- Look to connect other community partners in the Ottawa Collaborative Parenting Support.
- Invite First Words to our community meetings as part of this initiative.
- As a community, make a connection with the post-secondary sector to build capacity on early mental health and the science around it. Including the following programs:
 - ✓ Include U of Ottawa Medical School
 - ✓ University of Ottawa and Algonquin College nursing programs
 - ✓ ECE college programs in Ottawa.

- Work with CHEO/ ROH on how to engage physicians in discussion about early mental health.
- Connect with local physician champions in Ottawa to have conversation about early mental health concerns.
- As a community, we acknowledge our local expertise but would like to explore more opportunities to connect with others such as Dr. Jean Clinton and Dr. Jean Wittenberg

Organizational Policies & Practices

What is Happening in Ottawa

As a community, it was discussed that there needed to be more information regarding organizational policies and practices that support infant mental health. It was determined the best method to collect this information is through a survey for front-line practitioners and staff to gain a better understanding how they feel. The survey would be completed anonymously, with the exclusion of name, agency, and sector.

Long Term Opportunities for Organizational Policies & Practices

- Community agreed to develop a survey for frontline practitioners to better understand how those providing direct services feel:
 - ✓ There will be a focus on staff capacity of knowledge of infant-early mental health across the community.
 - ✓ IMHP will create a draft and seek table's approval and input.
 - ✓ There will be a follow up meeting in late summer of 2015 with the community partners to discuss which opportunities identified in the report can be achieved.



Embedding the Science of Infant Mental Health in Practice and Policy

Supporting Infant Mental Health in Regent Park - Toronto



A program of

SickKids

About Regent Park

The Regent Park community is located in East Downtown Toronto enclosed by Gerrard Street (North), River Street (East), Shuter Street (South), and Parliament Street (West) (City of Toronto, 2014). It is home to a large, diverse population with residents coming from a wide range of unique cultures and ethnic backgrounds. It is considered to be one of Toronto's most multicultural neighborhoods.

Historically, Regent Park is known as Canada's largest and oldest social housing project (The Toronto Neighbourhoods, 2015). A large portion of housing in the community is managed by Toronto Community Housing. After its creation in the late 1940's, it became clear the structure, placement, and transportation in Regent Park was isolating for residents. The isolation and status as a low income, high crime community has created a perceived negative stigma for Regent Park.

In 2005, the Regent Park Revitalization Plan was initiated to rejuvenate the community and intended to make it more inclusive through modernized integrative mixed income and social housing, and add a number of large community recreational and cultural facilities (Toronto Community Housing, 2015). The project is still underway in 2015, with phase three of five being completed (Toronto Community Housing, 2015). Through the revitalization plan, many community and social service agencies have been engaged and supported to encourage a sense of community and improve the quality of life for residents.

Although there has been some improvement alleviating this isolation, there are still many families who experience this. Many residents of the Regent Park community are immigrants or newcomers to Canada, where becoming accustomed to a new lifestyle can be an added challenge. For practitioners working with this population, this often results in some difficulty engaging families who may be isolated by language, cultural or economic barriers. There are many programs and services in Regent Park such as the Parents for Better Beginnings: Family Home Visiting Program to engage families. However, due to a lack of funding, questions around sustainability and effectiveness of these programs are yet to be answered. Funding to evaluate current initiatives and programs is required to ensure the needs of these vulnerable families are being met.

Additionally, when services are requested for children and families, there is often a waitlist of over a year due to the high demand in the city of Toronto. This can be problematic for children who are developing rapidly within the first three years and are in need of responsive and early intervention.

With all the advances that have emerged in the Regent Park community over the past decade, there is still much to be done as community agencies and services will look to build on the momentum to support the residents of Regent Park.

This report provides a snapshot of current infant mental health efforts in the Regent Park community. The Regent Park Community Table included the following agencies:

- Children's Aid Society of Toronto
- City of Toronto – Children's Services
- George Brown College – Early Childhood
- Gerrard Resource Centre – Ryerson University

- Native Child and Family Services of Toronto
- Parents for Better Beginnings: Regent Park Community Health Centre
- Regent Park Community Health Centre
- Regent Park Early Learning and Child Care Centres
- Riverdale Community Midwives
- St. Michael's Hospital
- Surrey Place Centre
- Toronto District School Board: Parenting and Family Literacy Centres
- Toronto Public Health: Healthy Families
- Toronto Public Health: Toronto Preschool Speech and Language Services

Core Prevention & Intervention for the Early Years

What is Happening in Regent Park Today

Note: This is not an exhaustive list of all programs, services, initiatives and projects present for children under five and their families in the Regent Park community. It is solely based upon the participation of the identified community partners over the two days.

Universal Programs for all Families

Gerrard Resource Centre – Family Support Program

- The Gerrard Resource Centre (GRC) is an outreach program of the School of Early Childhood Studies at Ryerson University. The GRC has a special focus on the inclusion of children with disabilities and family supports.
- The Family Support Program provides a drop-in, emergency short-term child care, a toy lending library and child care information and referral.
- The Family Support Program is a strong contact point for families accessing services. Staff in the GRC are assisting families who are accessing services by taking them to their appointments or making the phone calls with the family. This has proven to be an effective strategy for having families accessing services.
- The centre is a designated member of Family Resource Programs Canada.

Native Child and Family Services of Toronto - Aboriginal Head Start: Maajiishkatoong Zoong Mnidoowin – Building Strong Spirits

- Building Strong Spirits is a free school readiness program providing a happy, safe, relaxed learning environment for children with an Aboriginal background aged 2 ½ to 6 years and their families. Development is embraced through play, curiosity and creativity. The program is based on appreciation for the teachings that bind North American Aboriginal people, with a focus on cultural awareness, values, languages, music and craft. It is governed by empowered parents and caregivers who sit on the Parent Council. The Building Strong Spirits program encompasses culture and language, education, health promotion, nutrition, social support, and parental and family involvement.

Nelson Mandela Child Care Centre

- The centre is licensed for infants, toddlers and preschoolers, including a before-and-after school program for full day Kindergarten children. This centre is operated by George Brown College and serves as a training lab school for students from the early childhood education programs at the college while providing care for the children and families in the Regent Park area.

Parents for Better Beginnings: Regent Park Community Health Centre

- Provides school readiness programming to promote children's social emotional health and well-being as well as the various other developmental domains while engaging in activities and routines to set the foundation in preparation for children's lifelong learning process.
- Hosts parent child groups, series workshops or one off sessions providing education and training supporting parents through their parenting process.
- Coordinates community development initiatives, organizing and group development to enhance local leadership skills towards community improvement and cohesion.

Toronto Children Services: Regent Park Early Learning and Child Care Centre (ELCCC)

- Resource consultants are available in ELCCC. Any families enrolled in services can receive regular screening of child's development. If there are concerns in the relational, behavioural, speech/language areas, families (with consent) can meet and access support services.
- Regent Park specifically has a resource consultant in every licensed child care setting. This is a part of the Every Child Belongs initiative, wherein professionals provide the consistent support needed so that every child can take part in the child care program of his or her family's choice. These supports include: regular visits to programs, early identification and intervention, individual consultation, program consultation, program adaptations, staff, provider and parent training, environmental assessments, service coordination, referral, and enhanced staffing/intensive resource support when needed.
- Resource consultants can refer families to accredited children's mental health agencies for prevention and intervention services such as Child Development Institute, Surrey Place Centre, etc.

Toronto District School Board: Parenting and Family Literacy Programs

- Parenting and Family Literacy Centres are free, school-based programs for parents and caregivers with children from birth to age six. These fun, play-based programs are designed to support your child's early learning and development and are aligned with the Kindergarten program. They offer a safe, nurturing and stimulating program where children can play and parents can connect.
- There are 78 centres located in elementary schools across Toronto. These centres provide opportunities for development of social, emotional, physical, cognitive, and language skills, building positive connections with your local school, participation in a family literacy program that helps children develop and build essential literacy and numeracy skills, discussing parenting concerns, and borrowing books from multi-lingual libraries. Parents and caregivers are supported and connected with appropriate interventions services and community agencies when possible.

Toronto Public Health: Healthy Families

Breastfeeding and Infant Feeding Support:

- Toronto Public Health offers free breastfeeding and infant feeding support services to families through face to face intervention in addition to telephone support, breastfeeding clinics and breastfeeding support groups. These services are confidential and clients do not need a health card (OHIP). Interpreter services are available upon request.
- There are Breastfeeding Clinics strategically located throughout the city where Public Health Nurses (PHNs) work in collaboration with physicians, nurse practitioners and lactation consultants in providing breastfeeding support. This includes a complete breastfeeding assessment for the mother and infant dyad, provision of up-to-date evidence based research, breastfeeding education and teaching. Follow-up care and referrals to other services are provided as appropriate.
- The Breastfeeding Support Groups, provide a welcoming and supportive environment where families can share and learn from each other's breastfeeding experiences. This program is a professional/ peer led model in which breastfeeding topics are identified by the group and information and education is shared through facilitated group discussions. Individual consultation and referrals to other services are provided as appropriate. For more information regarding these services families can visit our website at:
www.toronto.ca/health/breastfeeding

Peer Nutrition Program:

- The Peer Nutrition Program provides nutrition education and food skills activities for parents and caregivers of children 6 months to 6 years from diverse ethno-cultural communities in Toronto. The program aims to improve the feeding skills of parents and caregivers to enhance the nutrition status of children. The program is led by trained community nutrition educators (peers) and is supported by registered dietitians (RD). Parents and caregivers attend healthy eating workshops for six weeks where they learn skills such as feeding (infant, toddlers and preschoolers), food labels, shopping, meal planning and preparation, budgeting and food safety tips. They may also then attend bi-monthly support sites where the education process continues for up to 1 year. There is a community gardening component during summer where participants network and plant culture specific vegetables and fruits. Participants also have access to a registered dietitian for nutrition risks assessment.

Parenting Programs:

- Living and Learning with Baby (LLB) focuses on enhancing parenting capacity, strengthening the parent and child relationship, supporting the transition to parenthood and building support systems. Parents are able to share knowledge and experiences of being a parent. Topics include: infant nutrition, adjustment to parenthood, growth and development, caring for a sick child, and keeping your child safe. Living and Learning with Baby is a free program facilitated by a PHN and offered to parents with children 6 weeks to 6 months old in a series of 2 hour sessions held over a 6 week period.
- The Nobody's Perfect (NP) Parenting Program is an evidenced based program developed by Health Canada in 1980s. NP helps parents to recognize their strengths and

to find positive ways to raise healthy, happy children. NP is based on the concept of “experiential learning” which incorporates adult learning principles. Parents take an active role in the learning process by utilizing their own experiences and building on their current knowledge. The program incorporates adult learning principles and theories, experiential learning cycle, and principles of Nobody's Perfect (Empowerment, Safety and Participation) into each session. NP also helps parents build networks among themselves and encourages them to see one another as sources of advice and support. It is a flexible program and can be tailored to meet the needs of parents. Topics discussed are determined by the group which can include child growth and development, child safety, understanding your child's feelings, understanding and managing child behaviour, managing parent stress and parent self-care. The Nobody's Perfect Program is offered to parents and caregivers with children up to 6 years of age and under. It is a series of 2 hour group sessions held over a period of 8 weeks and is delivered in multiple languages. NP is facilitated by a PHN and community partner.

Early Abilities: Infant Hearing Program

- Universal newborn hearing screening is free and available in all birthing Hospitals in Toronto. Infants discharged early or who missed their screening in hospital will be screened in the community at one of 14 locations. Neither OHIP nor Canadian citizenship is required to participate.
- There are two community screening clinic locations in the Regent Park catchment area:
Growing Together, [260 WELLESLEY ST E](#), Toronto, ON M4X 1G6
Toronto Birth Centre [525 DUNDAS ST E](#), Toronto, ON M5A 2B6
- These services are coordinated by Toronto Public Health's Early Abilities (formerly Toronto Preschool Speech and Language Services).

Toronto Public Health: Online Support

- Welcome to Parenting is a free online prenatal program for pregnant individuals and their partners living in Toronto. The program provides expectant parents with the knowledge, skills and confidence to have a baby and prepare for parenthood. It also provides individuals a connection to experts in prenatal education, child development and parenting to answer individual questions, a Parent Zone to connect online with other families in Toronto, and a Dad's Corner.
- eCounselling Service is a free, confidential and anonymous online counselling for Toronto residents. A public health nurse and/ or registered dietitian can provide information on a wide range of topics including: breastfeeding, mental health promotion, pre-conceptual health, prenatal and postpartum depression, and anxiety and parenting.

Support for All Families with a Focus on Those at Risk

- These programs are provincially funded and are intended for those children who are identified as being at risk for developmental delays or in need of protection.

Community Action Program for Children (CAPC) and the Canada Prenatal Nutrition Program (CPNP)

- The Community Action Program for Children (CAPC) and the Canada Prenatal Nutrition Program (CPNP) programs are federally funded initiatives through Public Health Agency of Canada (PHAC) and are often embedded in community based programs and services. Below is an overview of the program adapted from <http://phac-aspc.gc.ca/hp-ps/dca-dea/prog- ini/funding-financement/npf-fpn/index-eng.php> (2010):
- The Community Action Program for Children (CAPC) and the Canada Prenatal Nutrition Program (CPNP) are two programs that are committed to promoting healthy birth outcomes and the healthy development of children. These programs are typically embedded within community based agencies.
- Parents for Better Beginnings Prenatal and Postnatal Program is a designated CPNP/CAPC program for Regent Park.
- The program provides education and resources to pregnant women on the healthy development of the baby, lifestyle during pregnancy, nutrition and exercise while pregnant, labour and delivery, learning what to expect, and preparing for baby's arrival, breastfeeding and newborn care. Women enter the program when they are pregnant and continue until their babies are 6 months old. Weekly sessions include workshops, information about pregnancy and children's development, healthy snacks, assistance with transportation (TTC tickets) and a \$10 grocery voucher. There is support from nurses, a dietician, social workers, family home visitors and a lactation consultant. Program partners include St. Michael's Hospital and Toronto Public Health.
- Native Child and Family Services have both CAPC and CPNP programs available for their families.
- Native Child and Family Services CAPC: This goal of this parent education and support program is to increase knowledge of childhood development, discipline strategies and self-care. Groups, workshops and seminars are a great way for parent to meet other parents who may be experiencing the same struggles, challenges or accomplishments. Programs include Beyond the Basics parenting classes, Positive Parenting classes, community kitchen, and family traditional arts and crafts.
- Native Child and Family Services CPNP: This program for expectant and new mothers helps ensure a healthy start in life for the next generation of Native people. It emphasizes the importance of traditional teachings and spiritual beliefs. The program offers prenatal classes, community kitchen, family in-home visiting, and Mother's Circle postnatal group (0 – 6 months).

Native Child and Family Services of Toronto

- **Child Protection:** As the children's aid society for the Native community in Toronto, Native Child and Family Services Toronto (NCFS) investigates allegations of child abuse and neglect, protects children who have suffered abuse or neglect (or are at risk of harm) by assisting and supporting their families to reduce harmful circumstances. NCFS offers guidance, counselling and referral services to families whose children are at risk of abuse and neglect, refers families to other service providers where we do not offer a service, arranges for treatment services for children in our care, places children with family members or extended family, in foster homes or adoptive homes, depending on the legal status of the child and his or her needs, and recruits, develops, educates and supports foster and adoptive parents. NCFS has partnerships with Healthy Babies Healthy Children/ Homeless at Risk Prenatal (HARP) program nurses, and Anishnawbe Health Toronto to assist with expectant mothers.
- Prenatal cases are included in the full caseloads of staff as relationships are developed prenatally to avoid potential confrontations when the child is born
- Visits with families occur as frequently as once a week.
- **Mooka'am (New Dawn) Children's Mental Health Services** was developed under the guidance of traditional teachers and elders. Mooka'am is comprised of preventative and healing services for children, women and men using a combination of traditional cultural approaches to health and healing and contemporary counselling techniques.
- Using a strength-based approach, this service strives to help families and individuals in the community to restore holistic health by building self-esteem and strong identities, dealing with the effects of trauma, including emotional, spiritual, psychological and sexual abuse, developing healthy relationships with partner, family and community. Services are provided in individual, family and group settings, and include: children's mental health assessments and treatment (0 to 6 and 6+), transitional support for women in domestic violence situations, family work, men's healing, women's healing and group programs.
- **Kognaasowin (Parenting in a Good Way)** – Aboriginal Early Childhood Development Program provides parenting education and support for families with children up to 6 years old. Aboriginal teachings play an important part in these services. There are a variety of programs to prevent problems from developing or to help stop existing problems from getting worse. Parenting groups, workshops, in-home support and family drop-in are offered through the following services: Aboriginal Ontario Early Years Centre, CAPC, CPNP, and Ninoshe – Aboriginal Healthy Babies Healthy Children
- **Ninoshe - Aboriginal Healthy Babies Healthy Children: The Ninoshe** program offers support and parenting skills to new mothers and provides links to community services. NCFST Ninoshe workers provide support to families in the same way that "aunties" play a supporting role in traditional Native societies. Services include family in-home visiting, pre/postnatal groups, and parenting classes.

Regent Park Community Health Centre, Parents for Better Beginnings

- **Early Years Social Work:** Workers seek to improve the quality of life and wellbeing of individuals and families facing social disadvantages such as poverty, mental and physical illness or disability, through one-on-one short term counselling, crisis support and short-term series parenting groups. For expectant families and families with children under the age of six. Within the program there is a resource educator/ social worker who provides intervention work with parent-child dyads.
- **Family Home Visiting Program:** This program provides free and voluntary in home support to assist families prenatally until age four to promote healthy parent, infant and child growth and development. Home visitors work to build on parents' strengths to facilitate positive parenting while cultivating and nurturing parent-child relationships and ensure the home environment is conducive to the child's developmental success. This is especially imperative knowing the home is the child's first learning environment and parent is child's first teacher. A glimpse into the home setting allows for a more meaningful understanding of everyday social issues faced by the family, thereby allowing for a more holistic perspective when developing realistic interventions and access of appropriate resources within the community. Additionally, FHVs visit mothers in hospital and/ or shortly after discharge to ensure appropriate supports are in place.
- **Child and Family Advocate:** Works with parents to ensure children six years of age and younger and their families have access to positive influences and services that will benefit their lives through individual support, referrals and navigating systems related to immigration, income, safety, housing, child welfare, education, and more.
- **Early Childhood Resource:** Provides play-based therapy with families on attachment, separation, communication and special needs guidance regarding infant mental health and positive parent-child relationships, in a way that promotes optimal development to ensure direct and long term benefits in a child's life.

Riverdale Community Midwives

- Riverdale midwives provide primary care to women and their babies throughout their low-risk pregnancy, labour and birth. They continue to care for mother and newborn until 6 weeks postpartum and specialize in childbearing as a normal and healthy event in a woman's life. A compassionate woman-centered care approach is used with a focus on prevention and health promotion. Riverdale Community Midwives are experienced providers of homebirth with a long-standing tradition of safely providing this service to women and their families in the community. For planned hospital births, they hold privileges at St. Michael's Hospital of Toronto.
- They provide prenatal services where families can address any of their parenting concerns with midwife. They can also refer to the Maternal Infant Program and Perinatal Mental Health at Mount Sinai, Postpartum Mood Disorder Services at Women's College Hospital, and Healthy Babies Healthy Children after birth.
- Riverdale community midwives continue to support families following hospital visits or neonatal intensive care unit (NICU) stays through follow-up visits.

SickKids Team Obesity Management Program

- STOMP Early Years is a partnership with SickKids Hospital and Toronto Public Health. The two-year family-based program focuses on healthy living and targets children 6 months to 5 years of age, living in the Toronto area, with BMI greater than the 97th percentile, based on the WHO growth charts. In phase one of the program, parents attend a weekly 2 hours psycho-educational group, individual appointments with inter-professional team members and home visiting by a public health nurse. Group content is related to healthy living and incorporates the Incredible Years Parenting Program curriculum. The second phase of the program consists of medical check-ins and groups every 3 months, with access to continued individual and home visiting support.

St Michael's Hospital

- Patients of St. Michael's Hospital may access prenatal care either through a family medicine obstetrics provider at one of the Academic Family Health Team sites or through the obstetric clinic at St. Michael's Hospital's Women's Health Care Centre. The Women's Health Care Centre offers prenatal care by obstetricians; a special pregnancy unit featuring care by perinatologists with clinics for diabetes in pregnancy and medical complications of pregnancy; prenatal classes preparing for labour and birth and for breastfeeding; breastfeeding teaching and support by lactation consultants; postnatal checkups; nutrition and social work services; and a perinatal psychiatry clinic.
- The My Baby and Me Passport Program was created for young parents with no fixed address. The Passport Program consists of a portable health record, a series of incentives (including TTC tokens and meal vouchers) provided at each prenatal and postpartum visit, and comprehensive care and collaboration with community agencies. The goals of the program are to improve maternal and child health outcomes by motivating pregnant women to attend regular prenatal appointments and to advance communication and coordination of patient care among hospital staff and community agencies.
- The Baby Tuck Shop provides free essential maternity and baby items to families receiving obstetric care at St. Michael's Hospital. Stocked with donations of new clothing, blankets, diapers and more, the store offers easy access to important and costly supplies for families who identify financial need.
- Mindfulness Support Groups for New and Expecting Parents are offered with the goal of helping parents to reduce stress and manage fluctuations in mood, improve relationships and decrease the risk of postpartum depression. Parent-child connections are emphasized with an emphasis on understanding how mindfulness contributes to child development.

Toronto Children's Aid Society (CAST)

- CAST is committed to preventing situations that lead to child abuse and neglect by embracing, strengthening and supporting families, and communities, protecting children and youth from abuse, and neglect, providing safe and nurturing care for children and youth and advocate meeting the needs of children, youth, families, and communities.
- Offer a Pregnancy and Aftercare (PAC) Program for mothers which provide concrete support to families.

- Infant Nurse Specialists visit families in conjunction with the family support workers, occurring biweekly or weekly.

Toronto Public Health: Healthy Families

Canada Prenatal Nutrition Program: Individual Service

- CPNP Individual Service (IS) is offered to all CPNP participants who have an identified health issue, risk or concern. IS is delivered by public health nurses and registered dietitians at CPNPs. The goal of IS is to promote and support healthy pregnancies, healthy birth outcomes and preparation for parenthood through one to one interventions. Interventions include assessment, health counselling, referral and crisis intervention. Overall objectives for IS are to increase the client's capacity (knowledge, skills and behaviours) to address their identified health/nutrition related risks and concerns.

Healthiest Babies Possible Program

- The HBP Program is a unique program of Toronto Public Health which promotes healthy pregnancies and healthy birth outcomes among nutritionally at-risk pregnant clients. The program is delivered by public health registered dietitians at over 65 community sites in Toronto. Eligible clients receive intensive one-to-one nutrition counselling from a public health dietitian throughout their pregnancy and up to one postnatal visit. The counselling sessions include assessment, education, referral and support. Clients who are identified as at risk for poor fetal and infant development are referred to early parenting intervention services such as Healthy Babies Healthy Children and prenatal/ postnatal groups. Eligible clients also receive food certificates, prenatal vitamins and TTC tokens.

Healthy Babies Healthy Children (HBHC)

- HBHC is funded by the Ministry of Children and Youth Services and delivered through Toronto Public Health. It is home visiting program delivered by PHNs and FHV's for families identified with risk, to achieve a healthy pregnancy, optimal child development and positive parenting.
- All consenting families are screened within the postpartum period for eligibility to receive HBHC services and are provided with information about TPH services and programs for parents. HBHC screens can also be completed in the prenatal and early childhood periods where indicated.
- Families who are identified with risk as per the screen, will be offered a home visit by a PHN to complete an in-depth assessment.
- Families who are confirmed with risk are eligible to receive ongoing HBHC services.
- Voluntary program for women and their families offered in the prenatal period and to families with children from birth until their transition to school. Information and support are offered to families who identify as at risk during pregnancy and birth.
- HBHC is based on a blended model of home visiting that uses both public health nurses and family home visitors to do home visits, offer health information and support, and connect families to parenting services in the community.

- HBHC offers support in the home for every child and parent identified with challenges to provide opportunities to achieve healthy pregnancy, nutrition and feeding (including breastfeeding), healthy child development, safety, adjusting to parenthood, accessing community resources, and more. Public health nurses provide screening, assessment, health promotion, education, consultation, and counselling as it relates to the family service plan goals.
- Partners in Parenting Education (PIPE) is implemented by the family home visitor and the PHN in the home and it is implemented across all provincial HBHC programs. PIPE is a parent education curriculum that effectively integrates new parent knowledge with a parent-child activity that supports positive interaction. It is activity based intervention that involves engaging the parent to interact with their child. The focus is on the social emotional development

- HBHC services incorporate the Nursing Child Assessment Satellite Training (NCAST). NCAST is used across all provincial HBHC. It is important to note that NCAST Programs have three components.
 1. For the prenatal period public health nurses implement Promoting Maternal Mental Health During Pregnancy. The purpose of the intervention is to support the emotional, psychological course of pregnancy to prepare the mother and develop a nurturing relationship mother-child relationship.
 2. Keys to Caregiving programs are used by PHNS, to educate and support parents on the many facets of newborn behaviour and to increase the parent's understanding of the baby's capacity to form a relationship with the parent.
 3. Parent Child Interaction Scales are implemented by the PHN in the home. The scale assesses the parent child interaction during two interactions: feeding and/ or teaching. A strength based approach is used and immediate results are discussed with the caregiver. PHN works with the family, and FHV to devise a plan that will strengthen the parent child interaction.

Healthy Babies Healthy Children: Homeless at Risk Prenatal Program (HARP)

- HARP is delivered within the HBHC program. HBHC PHNs and HBP RDs provide prenatal health and nutritional support, through education and through the use of instrumental supports. These women face many challenges with addictions, mental health, physical health issues and staying housed. The goal of the program is a healthy birth outcome. Many of the infants are apprehended at birth, however if the parent maintains custody, the family will continue to receive support through the HBHC program and in collaboration with other service providers such as addiction services, child protection services and housing support.

Postpartum Adjustment Program

- Postpartum Adjustment Programs aim to improve maternal mental health, prevent negative impacts on child development and improve family dynamics. This is achieved by assessment, referral, individual and group counselling. There is a focus on maternal mental health and coping strategies and improved communication. Particular attention is paid to the maternal infant relationship, the parent's ability to soothe the infant and attachment. The group is co-facilitated by an infant mental health therapist and a public health nurse. Expedited access to individual infant mental health services is available. The program is available to families with a child under one year who are experiencing postpartum adjustment difficulties including postpartum depression and anxiety. Interpretation services, childcare, TTC tokens and a healthy snack are offered to reduce barriers to access.

Parenting Programs

- Make the Connection (MTC) 0-1 is a program developed by the non-profit organization First Three Years which is now part of the Psychology Foundation of Canada. This program supports parents' interaction with their babies in ways that promote secure attachment, communication and brain development. It is an intensive and enjoyable series combining hands-on activities, parent reflection and discussion as well as personalized video feedback. The MTC 0-1 is a free program offered to parents with babies under 1 year old. It is a series of 2 hour sessions, held over a nine week period, facilitated by PHNs and community partners.

- Make the Connection 1-2 follows the MTC 0-1 helping parents support their child's development during the second year. Like the Make the Connection for babies, MTC 1-2 combines hands-on activities, parent reflection and discussion as well as personalized video feedback. The MTC 1-2 is a free program offered to parents with toddlers 1-2 years old. It is a series of 2 hour sessions, held over a nine week period, facilitated by PHNs and community partners.
- The Incredible Years Basic Parent Program® (IY) is an evidenced based program developed by Dr. Carolyn Webster-Stratton. It aims to improve parent-child interactions, build positive parent-child relationships and attachment and promote more nurturing parenting. An emphasis is also placed on the promotion of child social competence, emotional regulation, positive attributions, academic readiness and problem solving. Incredible Years teaches parents and/or caregivers interactive play and reinforcement skills, non-violent discipline techniques, logical and natural consequences and problem solving strategies Learning methods include group discussion, videotape modelling and rehearsal intervention techniques. This program is offered to parents and/or caregivers with children ages 2 to 6 who are at risk for behaviour problems. It is a series of 2 hour group sessions with pre-determined topics held over a period of 14 weeks and is offered in multiple languages. IY is facilitated by PHNs and community partners.

Early Screening and Assessment Activities

Child Welfare: Native Child and Family Services and The Children's Aid Society of Toronto

- Once a child is in care for a year, an Action Assessment Record (AAR) is completed which includes various screens/assessments of their wellbeing. These are used to inform Plans of Care.
- As part of their training with IMHP, both agencies are trained on using the ASQ-3 and ASQ:SE screening tools.
- Both agencies use the Edinburgh Postnatal Depression Scale (EPDS).

Riverdale Community Midwives

- Complete prenatal screening of mother which provides a background of her pregnancy experience.

Parents for Better Beginnings: Regent Park Community Health Centre

- PFBB has created a progress report with various components from different screening tools for children in their School Readiness program. Progress reports are completed three times, pre-program, after one month then at the end of the program. The document is then shared with the local TDSB school the child will be attending, follow-up with the teacher in October of that school year is then done to track the child's overall readiness for school.
- Staff also use the Parenting Interactions with Children: Checklist of Observations Linked to Outcomes (PICCOLO) tool and the Edinburgh Postnatal Depression Scale (EPDS)

Child Development Clinic: Regent Park Community Health Centre

- For children under six with suspected developmental challenges, delays or disorders, the clinic specializes in the assessment, diagnosis and follow up with pediatrician and team to support transition of families and to understand and cope with their child's diagnosis.
- Assessments are conducted by a developmental pediatrician. A referral by a family physician is required. Services include childcare and interpreters provided during the assessment, referrals to internal resources such as a social worker, external to local neighbourhood services, and short-term case management to ensure that follow up support is available.

St. Michael's Hospital

- The Pediatric Ambulatory Clinic offers clinics in a number of fields including: antenatal consultation, dermatology, developmental assessment, dietetic and lactation support, fetal alcohol spectrum disorder diagnostic, general pediatric consultation, immigrant health and infectious disease, neonatal follow-up, pediatric cardiology, pediatric hematology, specialized nutrition and a teen's clinic.
- Pediatric outreach clinics are offered at Regent Park Community Health Centre, Robertson House shelter for women and children, and a School-Based Health Clinic focusing on development and mental health in Regent Park serving children and their siblings who attend Sprucecourt Public school as well as nine surrounding schools.

Surrey Place Centre

- Receives the Modified Checklist for Autism in Toddlers (MCHAT) tool from referring community partners.
- Clinicians can provide in depth psychological assessments for clients who are referred to the agency.

Toronto Public Health: Healthy Families

- Some public health nurses delivering Healthy Families programs and services are using the Edinburgh Postnatal Depression Scale (EPDS).

Early Identification Screening Clinics

- TPH partners with community organizations (e.g. Ontario Early Years Centres (OEYC), Family Resource Centres and Community Health Centres) to coordinate comprehensive screening clinics for families with children under 6 years old. PHNs also integrate screening into routine contacts with families attending Early Years programs and services.
- Tools used to support developmental screening include the Nipissing District Development Screen (NDDS), and the Toronto Speech and Language Communication Checklist. FHV's and PHN's facilitate the completion of these tools.
- The Toddler NutriSTEP[®] (18 to 35 months) and NutriSTEP[®] (age 3 to 5 years) are questionnaires that assess a child's nutritional risk and provide early identification of potential nutrition problems. The completion of this tool is supported by a PHN and/or community partner trained in the utilization of the tool.

Healthy Babies Healthy Children (HBHC)

- The HBHC Screen is completed by community partners in the prenatal, postpartum or early childhood periods. Universal screening is offered to all families in the postpartum period. PHNs complete an in-depth assessment and offer the blended home visiting program (i.e. visits by a PHN and FHV) to eligible families.
- FHV and PHNs work with families to complete the NDDS and the Toronto Preschool Speech & Language Communication Checklist to help start discussion of development.
- PHNs are certified in the use of Nursing Child Assessment Satellite Training (NCAST) parent-child interaction scales to observe and assess parental response and sensitivity to cues during feeding and/or teaching.

Postpartum Adjustment Programs and Services

- Public Health Nurses use the Edinburgh Postnatal Depression Scale (EPDS) where appropriate, to identify clients at risk for a perinatal mood disorder.

Toronto Early Learning and Child Care Centres

- Use the Nipissing District Development Screen (NDDS) along with worker observations.
- Resource consultants use the Development Profile Tool, NDDS, Ages and Stages Questionnaires 3 (ASQ-3) and Ages and Stages Questionnaires: Social Emotional (ASQ- SE)

Toronto District School Board: Parenting and Family Literacy Centres

- Connect the families attending their programs to hearing and dental clinics.
- Offer pediatric clinics in partnership with St. Michael Hospital for families who do not have a family doctor.
- Sprucecourt Public School In-School Health Clinic provides community access to a developmental pediatrician for developmental screening and 18-month Well Baby Visits. Physicians and psychologists are also available in the health clinic. The child must be enrolled in a TDSB school to access the clinic.

Early Intervention Services

Child Welfare: Native Child and Family Services Toronto and Children's Aid Society of Toronto

- Children five and under within the agencies can receive the ASQ-3 and ASQ:SE screening to identify any developmental delays. Together with the screening scores, worker observation, and caregiver interviews, a developmental support plan is created to support the child in reaching their developmental milestones. The process is done in collaboration with the families and/or caregivers.

Healthy Babies Healthy Children (HBHC)

- HBHC is a voluntary program for individuals and families who meet eligibility criteria, from the prenatal period until the child's fourth birthday. Length of involvement with the program varies and is guided by family/client identified goals related to parenting and child development.
- PHNs and FHV's provide information and support regarding: achieving a healthy pregnancy, healthy child development and safety, breastfeeding, nutrition and healthy eating, adjusting to parenthood, and accessing community resources.
- Family Service Plans are developed with the family to provide a focus for ongoing home visiting and service coordination.
- PHNs utilize Nursing Child Assessment Satellite Training (NCAST) in their service delivery. In the prenatal period, Promoting Maternal Mental Health During Pregnancy is used. The purpose of these activities is to prepare the individual for parenting and for developing a nurturing parent-child relationship. During the parenting period, Parent Child Interaction Scales are implemented by the PHN in the home. The scales assess the parent child interaction during feeding and/or teaching situations. A strength based approach is used and immediate results are discussed with the parent. The PHN works with the family, and FHV to develop a plan that will strengthen the parent child interaction.
- Partners in Parenting Education (PIPE) activities are implemented by the FHV and the PHN and are used across the province within HBHC to complement the NCAST assessments and support enhancement of parent-child relationships. PIPE is a parent education curriculum that effectively integrates new parent knowledge with a parent-child activity that supports positive interaction. It is an activity based intervention that involves engaging the parent to interact with their child. The focus is on social emotional development.

Healthy Babies Healthy Children: Homeless at Risk Prenatal Program (HARP)

- HARP is delivered within the HBHC program by 6 HBHC PHNs with the support and collaboration of two HBP RDs to homeless pregnant women. These women face many challenges with addictions, mental health, physical health issues and have histories of severe trauma. The goal of the program is the healthiest birth outcome possible, by providing intense, frequent home visiting services in the prenatal period. If the parent maintains custody of the child, the family will continue to receive support through the HBHC program and in collaboration with other service providers such as addiction services, child protection services and housing support.

Parenting Programs

- Make the Connection (MTC) 0-1 is a program developed by the non-profit organization First Three Years which is now part of the Psychology Foundation of Canada. This program supports parents' interaction with their babies in ways that promote secure attachment, communication and brain development. It is an intensive and enjoyable series combining hands-on activities, parent reflection and discussion as well as personalized video feedback. The MTC 0-1 is a free program offered to parents with babies under 1 year old. It is a series of 2 hour sessions, held over a nine week period, facilitated by PHNs and community partners.
- Make the Connection 1-2 follows the MTC 0-1 helping parents support their child's development during the second year. Like the Make the Connection for babies, MTC 1-2 combines hands-on activities, parent reflection and discussion as well as personalized video feedback. The MTC 1-2 is a free program offered to parents with toddlers 1-2 years old. It is a series of 2 hour sessions, held over a nine week period, facilitated by PHNs and community partners.
- The Incredible Years Basic Parent Program® (IY) is an evidenced based program developed by Dr. Carolyn Webster-Stratton. It aims to improve parent-child interactions and attachment, promote positive parenting and foster the parent's ability to provide a nurturing environment for healthy child development. An emphasis is also placed on the promotion of child social competence, emotional regulation, positive attributions, academic readiness and problem solving. Incredible Years teaches parents and/or caregivers interactive play and reinforcement skills, non-violent discipline techniques, logical and natural consequences and problem solving strategies. Learning methods include group discussion, videotape modelling and rehearsal intervention techniques. This program is offered to parents and/or caregivers with children ages 2 to 6 who are at risk for behaviour problems. It is a series of 2 hour group sessions with pre-determined topics held over a period of 14 weeks and is offered in multiple languages. IY is facilitated by PHNs and community partners.

Postpartum Adjustment Program

- Postpartum Adjustment Programs aim to improve maternal mental health, prevent negative impacts on child development and improve family dynamics. This is achieved by assessment, referral, individual and group counselling. There is a focus on maternal mental health and coping strategies and improved communication. Particular attention is paid to the maternal infant relationship, the parent's ability to soothe the infant and attachment. The group is co-facilitated by an infant mental health therapist and a public health nurse. Expedited access to individual infant mental health services is available. The program is available to families with a child under one year who are experiencing postpartum adjustment difficulties including postpartum depression and anxiety. Interpretation services, childcare, TTC tokens and a healthy snack are offered to reduce barriers to access.

SickKids Team Obesity Management Program

- STOMP Early Years is a partnership with SickKids Hospital and Toronto Public Health. The two-year family-based program focuses on healthy living and targets children 6 months to 5 years of age, living in the Toronto area, with BMI greater than the 97th percentile, based on the WHO growth charts. In phase one of the program, parents attend a weekly 2 hours psycho-educational group, individual appointments with inter-professional team members and home visiting by a public health nurse. Group content is related to healthy living and

incorporates the Incredible Years Parenting Program® curriculum. The second phase of the program consists of medical check-ins and groups every 3 months, with access to continued individual and home visiting support.

Parents for Better Beginnings, Regent Park Community Health Centre

- On site screening and assessment for children 3 to 6 years of age to provide early identification and intervention services responsive to cultural and linguistic diversity to ensure healthy communication development.

Surrey Place

- Surrey Place Centre provides specialized clinical services for children and adults living with developmental disabilities, autism spectrum disorder and visual impairments reach their full potential. There are a variety of groups and workshops for clients, families and caregivers, as well as extensive education and consultation services to community agencies. Programs and services range from assessment, diagnosis, and one-on-one treatment, to family counselling and group support and is provided by a broad network of clinicians and professionals.
- The Infancy and Early Childhood Program provides comprehensive clinical services for infants and children up to the age of six who have or are suspected of having a developmental disability. The program uses a family centered, interdisciplinary team approach to establish a unique service plan to meet each child's specific needs, while also placing a special focus on working with parents and caregivers.
- As part of the Toronto Infant and Child Development Program, Surrey Place Centre works specifically infants and toddler with an established risk or biological risk
- Established Risk: The developmental problems of infants and children in this category are related to diagnosed medical disorders. This includes an expected range of developmental handicaps may be associated with these disorders: genetic and chromosomal syndromes (e.g. Down syndrome), neurological disorders (e.g. seizures, cerebral palsy), congenital malformations of the nervous system (e.g. microcephaly, hydrocephalus), sequelae of infections of the nervous system (e.g. meningitis, encephalitis, HIV, CMV, herpes), and metabolic disorders (e.g. untreated hypothyroidism, PKU).
- Biological Risk: Infants in this category have a history of prenatal, perinatal, neonatal and/or early development events that may have affected the central nervous system. Such events and their consequences increase the probability of developmental problems for the child. These may include: prenatal or perinatal complications (e.g. small for gestational age, anoxia, stroke in utero or during or after birth), prematurity and associated complications respiratory distress syndrome, cerebral haemorrhage, jaundice), sensory impairments such as blindness and deafness, child of parent(s) with a developmental disability or sibling having a developmental disability of unknown origin, early global developmental delays, autism, parents with chronic, established mental illness or prenatal substance exposure
- Surrey Place Centre's Blind – Low Vision Early Intervention Program provides early intervention support to children birth to age 6 with a diagnosed visual impairment. This family-centred service provides supports to children and their families in natural settings including the home and early learning settings. The goal of the service is to mitigate the risks of the visual impairment on the child's development. Vision is the primary information gathering sense for sighted children, therefore, as much as 80% of early social interactions,

materials and physical environments are visually based and do not focus on tactile and auditory development essential for children who are visually impaired. Intervention provided through the Blind – Low Vision program will assist the families and caregivers in providing opportunities that support the development of all the senses for optimized learning.

- Toronto Autism ABA Services help children and youth with ASD develop skills in the areas of: communication, social/interpersonal, daily living skills, and emotional/behaviour regulation. They also provide education to parents/caregivers on how to apply ABA strategies which will help their children learn, maintain and generalize skills
- The Toronto Partnership for Autism Services (TPAS) is a community-based service that helps children with autism and their families through Intensive Behavioural Intervention or IBI. IBI is a scientifically proven intervention with the goal of increasing the rate of learning for children with autism.

Toronto Public Health – Infant Hearing Program (IHP)

- Children in the Regent Park community, identified as having a permanent hearing loss, can receive services through either Toronto Public Health's Infant Hearing Program or Toronto Preschool Speech and Language Services Program. Services provided include:
 - ✓ Newborn Hearing Screening
 - ✓ Audiology services – hearing testing
 - ✓ Family support services
 - ✓ Counselling, support and general information about community agencies
 - ✓ Information about the different communication options available for a child who is deaf or hard of hearing
 - ✓ Referrals to community programs as needed
 - ✓ Oral and/or visual communication support
 - ✓ Assessment of children's communication development
 - ✓ Professional guidance to help develop children's language skills
 - ✓ Parent education
- Presently, the only services *provided locally within Regent Park* (through Parents for Better Beginnings) are oral communication support services through TPSLS. Should more intensive services and hearing testing be required, children and their families are seen through The Hospital for Sick Children or through many of our partnership community agencies.
- Intake for IHP is generally completed through the Toronto Public Health central number.
- Referral criteria for Hearing Screening Services: Children 0 to 4 months of age are eligible to receive newborn hearing screening. Children 4 to 24 months of age are eligible if the child's hearing was not screened before and there is a concern that the child may have a hearing loss. Children 24 months to 6 years are eligible if a permanent hearing loss has been identified.
- Referral criteria for Audiology Services or Communication Development Service is for children between birth and 6 years of age who have a permanent hearing loss.

Toronto Public Health - Toronto Preschool Speech and Language Services (TPSLS)

- The South Geographical Service Area (GSA) of TPSLS administers and delivers a range of family-centered and community preschool speech and language services. The overarching objectives are to identify and serve all of the preschool children (from 5 months of age until participation in Full Day Kindergarten) who have speech, language and communication delay and/or disorders. TPSLS aims to maximize positive outcomes for these children with respect to communication, play, social and literacy development while supporting the families.
- At present, a full range of community based services are being offered through a satellite clinic at Regent Park Community Health Centre and in collaboration with staff from Parents for Better Beginnings and the Child Development Clinic:
 - ✓ Initial assessment and counselling
 - ✓ Parent training/parent-implemented intervention
 - ✓ Monitoring/parent consultation
 - ✓ Caregiver and educator consultation
 - ✓ Case/service coordination and referral
 - ✓ Individual and group treatment
 - ✓ Home programming and reassessment
 - ✓ School transition planning
 - ✓ Community screening
- Referral and Intake: Intake is generally completed through a Toronto Public Health central number but the Regent Park caseload is managed at a local level.
- Criteria for service: Referrals are taken for children ages 5 months and older, up until August 31st of the year they enter full day kindergarten (FDK) with suspected or identified communication issues, Children identified with global developmental delay and /or multiple complex needs may be triaged and transferred to a partner agency who may better suit their multiple needs the time of intake (e.g. Surrey Place Centre, Holland Bloorview Kids Rehab), and after entry into full day kindergarten, children may be nominated by a school board speech language pathologist for selected services in their FDK years.
- Transition to school: Prior to a child's entry into school, staff work closely with local community School Board Speech Language Pathologists to ensure smooth transition to school for children requiring continued support.

Toronto Public Health: Early Abilities

- Early Abilities (formerly Toronto Preschool Speech and Language Services) is funded by the Ministry of Children and Youth Services, and is comprised of community partnerships to deliver three programs: Infant Hearing (IHP), Blind Low Vision Early Intervention Program (BLV), and Preschool Speech and Language Program (PSL). These services are free and are coordinated by Toronto Public Health's Early Abilities (formerly Toronto Preschool Speech and Language Services). Neither OHIP nor Canadian citizenship is required to participate. Referral and Intake is completed through an online application and/or the Toronto Public Health–Early Abilities intake number: 416-338-8255.

Infant Hearing Program

- The Infant Hearing Program is designed to identify infants born deaf or hard of hearing, and children (0-6) who may be at risk for permanent hearing loss and intervene early. There are four components to the program: screening, identification, communication development programming and family support.
- IHP services are available to:
 - ✓ Infants identified through the infant hearing screening
 - ✓ Children 4 to 24 months of age who missed their screening and there is a hearing concern
 - ✓ Children 24 months to 6 years who have an identified permanent hearing loss (PHL) outside of the IHP program
- Identification/ Audiology (hearing) testing is conducted at one of five IHP audiology centres in Toronto. Two centres are in downtown Toronto: Hospital for Sick Children and Mount Sinai Hospital.
- Communication Development Programming is based on the degree of hearing loss, the nature of the hearing loss, and the child's overall development:
- Oral Language support with or without augmentative communication is available in Regent Park through partners at Parents for Better Beginnings. Early Abilities provides speech and language pathology services to those children with significant hearing loss. The Hanen Centre is a primary provider of services in Regent Park.
- American Sign Language consultation service is an in-home service delivered by a partner agency Silent Voice.
- Family Support consists of the following services:
 - ✓ counselling
 - ✓ service navigation to community services and supports
 - ✓ referrals to targeted services to support child development
 - ✓ support for financial applications related to the PHL and
 - ✓ parent education

Blind Low Vision Early Intervention Program

- The Blind Low Vision Early Intervention Program is designed provide vision services to children (0-6) who have been identified as blind or with low vision. There are two components to the program: early intervention and family support.
- BLV is available to with a variety of hearing losses including:

- ✓ visual acuity no better than 20/70 in the better eye after correction,
 - ✓ a visual field restriction to 20 degrees,
 - ✓ a physical condition which cannot be medically corrected and as such affects functional vision eg Cortical Visual Impairment(CVI),
 - ✓ delayed maturation or progressive visual loss.
- BLV is delivered by a team of Family Support Workers and Early Childhood Vision Consultants from Toronto Public Health, Surrey Place Centre and Canadian National Institute for the Blind. Services are in-home and include:
- ✓ family support services
 - ✓ targeted early intervention services
 - ✓ childcare consultation
 - ✓ parent education
 - ✓ professional development

Preschool Speech and Language Program

- The Preschool Speech and Language Program is designed to identify and intervene early with children (5 months-school entry) who may be experiencing delays and/or disorders in their speech, language, play, social communication and literacy development. Program's goals are to maximize positive outcomes for children by building families' capacity in strategies to support child development. There are three components to the program: screening, identification, and communication development programming.
- There are over thirty locations across Toronto, one of which is at the Regent Park Community Health Centre. Services include:
- ✓ Initial assessment and counselling
 - ✓ Parent training/parent-implemented intervention
 - ✓ Monitoring/parent consultation
 - ✓ Caregiver and educator consultation
 - ✓ Case/service coordination and referral
 - ✓ Individual and group treatment
 - ✓ Home programming and reassessment
 - ✓ School transition planning with the local school's speech-language pathologist

Existing Collaborations among Services and Sectors Positively Supporting Infant Mental Health

Downtown East Child and Family Network

- The purpose of the Toronto Downtown East Child and Family Network is to provide an opportunity for local services for children prenatal to 12 years old and their families to inform the development of the Provincial framework for the Best Start Child and Family Centre (CFC) concept. The Toronto Downtown East Child and Family Network will implement practices that provide seamless access to services in the community and reflect the unique needs of neighbourhoods through community planning processes that improve the health and well being of children and families.
- The Toronto Downtown East Child and Family Network members will represent key service sectors that offer one or more core functions to children prenatal to 12 years of age, and their families. The definition and scope of the four functions as outlined by the Toronto Child and Family Advisory Network are as follows:
 - I. Health Comprehensive - Services to meet the healthy birth outcomes and developmental needs of children.
 - II. Learning and care - Nurturing, high quality services where children's care and learning needs are met.
 - III. Family support - Range of support services for parents and caregivers of children in their care giving role.
 - IV. Early intervention - Early access to identification and assessment services for all children birth to five years, plus referral and intervention services for children with extra support needs
- Services and programs offered under each core function as well as the delivery of any additional functions will be determined by the needs of the community.
- Currently the Downtown East Child and Family Network is creating a document which outlines the Regent Park community agencies and the services offered.

Women and Children's Community at St. Michaels Hospital

- The Women and Child Committee at St. Michael's Hospital is comprised of staff from St. Michael's and various community partners. The committee works collaboratively to advocate and bring attention to matters concerning the women and children they work with, who are also patients at St. Michael's.

YPNFA (Young Parents of No Fixed Address)

- A "network of over 30 Toronto agencies and organizations dedicated to building strong community partnerships to address the challenges faced by young homeless/street involved, pregnant and parenting youth and their children". This network is not Regent Park specific but does work that supports IMH. The website is <http://www.ypnfa.ca/> for more info.

TARGet Kids! SickKids

- Nurse practitioners as well as the family medicine team at Regent Park will be prospectively enrolling families with children under 6 into this longitudinal cohort study (www.targetkids.ca). This research will measure temperament, development, mental health, nutrition, growth, physical activity, cardio metabolic risk and biomarkers. It will also collect school readiness data from the Early Development Instrument (EDI) in any eligible child who is entering JK or SK. Mothers would be offered enrollment into a trial that will identify and connect mothers with postpartum depression to services, and assess the outcomes for them and their children. TARGet Kids will also offer enrolment for children with iron deficiency into a trial to treat this and evaluate developmental outcomes. The aim of the TARGet Kids! registry is to link early life exposures to health problems including obesity, micronutrient deficiencies, and developmental. This data will work towards advocating to improved child mental health and health care overall

Toronto Public Health

- Toronto Public Health values and recognizes the importance of collaborating with community agencies to promote the health and wellbeing of families and children in the City of Toronto. A vast number of Toronto Public Health programs and services are co- facilitated, offered or coordinated in collaboration with community partners. TPH staff co- facilitate programs such as Make the Connection, Nobody's Perfect, Incredible years Parent Program® and the Post Partum Adjustment Program with community partners. Staff from community agencies interested in facilitating the Make the Connection, Nobody's Perfect or Incredible years Parent Program® are provided training through TPH in house trainers. TPH also continually supports community agencies in the coordination of screening clinics and collaborates with organizations to deliver programs such as the Canada Program Nutrition Program and Breastfeeding Clinics. Lastly TPH recognizes the need for innovation within collaboration as evidenced by partnering with SickKids in delivering the SickKids Team Obesity Management Program: STOMP Early Years.

Short Term Opportunities to Enhance Core Prevention and Intervention

Support for All Families with a Focus on Those at Risk

- Develop a pathways document to share with families for Regent Park on screenings and assessments available for prenatal to three years of age. Included in the pathways document, will be:
 - ✓ Services that require a formal referral from a physician
 - ✓ Services/tools can be accessed by front-line practitioners
 - ✓ A referral process that all community partners are aware of
- Develop a form of passport document for families for when they visit physicians, nurses, and other support services.

Early Screening and Assessment Activities

- The Regent Park community will look to have a larger conversation on screening and assessment for social-emotional development– this will include parents from the community at the table. Included in this conversation will be discussion of a referral procedure for the community – how can the community support families and determine if they have engage and accessed the service successfully?

Collaboration

- The Downtown East Child and Family Network will look to include Regent Park community agencies who wish to join. Meeting dates and times will be sent to those who wish to join.
- The Downtown East Child and Family Network will identify champions for funders to address IMH concerns.
- Parent for Better Beginnings will look to connect with Atkinson research at the University of Toronto on regarding evaluation on their “Progress Report” document.

Long Term Opportunities for Core Prevention

Supports for All Families with a Focus on Those in High-risk Situations

- Explore non-traditional strategies to engage families in services as families often experience challenges in physically attending services (e.g. providing a transportation fare is not enough as public transit is not accommodating to all).
- Educate funders around the difficulty of engaging families and strategies for non-traditional approach.
- Educate practitioners and funders about IMH is and why family centered care is so important to IMH.

Strengthening Data Collection/Statistical Analysis and Assessment

- Each agency will look to explore how to include evaluation component to their programs serving infant, toddler, and families.
- Regent Park Community Health Centre: Parents for Better Beginnings will evaluate the outcomes/effectiveness of the “Progress Report” document.

Competencies for Practice in the Field of Infant Mental Health

What is Happening in Regent Park Today

- Among community agencies, there is a strong will and skill around building and maintaining positive relationships with families in Regent Park. Agencies in this community possess a strong awareness of diversity and implement practices that support diversity of families.

Knowledge

- Through the discussion, it was identified that the level of knowledge and understanding of atypical and typical child development and common behavioural disorders of each professional across sectors varies - some practitioners have a strong knowledge while others could improve.
- Additionally across sectors, there is a strong basic understanding of influences on child development (parental mental health, cultural differences, intimate partner violence, etc.) which also varies among professionals.
- PFBB family homes visitors attend HBHC Professional Development trainings throughout the year and CPNP staff attend trainings as appropriate.
- Parent for Better Beginnings is in the process of forming a subcommittee within the program to identify an infant mental health strategy to ensure all around staff are knowledgeable.
- A Community of Practice is being developed by George Brown College which will include ECE alumni and placement partner agencies.
- HBHC PHNs receive extensive education and training in the use of all the assessment and screening tools mandated to be implemented by MCYS. As stated in a comment earlier PHNs receive education and training in the three components of the NCAST Programs. NCAST has a formalized training and certification process for the use of the Parent Child Interaction Scales. PHNs must be initially trained and reach reliability in the use of these tools prior to implementation with their families. Also nurses have to go through yearly recertification and reach a reliability in the scales in order to continue to use the scales.
- Motivational Interviewing training has been piloted with HBHC PHNs in Toronto and the plan is for all PHNs to receive the training.
- HBHC Family Home visitors are trained in the PIPE curriculum and use the activities with their families at each home visit. The selection of the activities is based on PHN assessment and Family Home Visitor observations of the parent child interaction.

Skills

- Parents for Better Beginnings uses the Infant Mental Health Status Chart and Early Learning for Every Child Today (ELECT) documents to inform their observations.
- Regent Park Community Health Centre have interdisciplinary case conferences where observations are shared. Parents for Better Beginnings provide mutual access to records within the Health Centre which assist in collaborative efforts.
- Staff within Parenting and Family Literacy Programs at Toronto District School Board have strong observational skills as they see families together. Additionally, staff will complete an exercise which requires them identify five things they know what the family- this is important to the relationships they build with families and engaging families.
- Toronto Children Services in Regent Park engage parents as to how they prefer their information to be shared when referrals are made for their children- staff often make referrals together with the families. This encourages parents to become advocates for their children.
- Riverdale Midwives have the opportunity to observe families within their homes and those included in the family circle, which add to their strong observation skills
- HBHC PHNs and FHVs participate in reflective supervision to support their delivery of the HBHC program.

Short Term Opportunities for Competencies

Knowledge Building for Professionals

- IMHP will host an Infant Mental Health Basics workshop for Regent Park Community Partners. It will be hosted at SickKids Hospital to access OTN network which will archive the session. IMHP will look to organize this for June. The pre-knowledge test and post-knowledge test will be administered for participants. The participation of the education sector will be important as the community has identified they would like to include them in infant mental health conversations and initiatives.
- IMHP will create an Infant Mental Health Basics presentation for families in the Regent Park Community. This will be brief workshops with one during the day and one in the evening to accommodate families. IMHP will explore the delivery of a train the trainer event to follow.
- As a community, look to create parent education opportunity for resources for Regent Park families on optimal development periods to reach families before the child enters school. 2-3 easy to understand presentations, bulletin boards, or handouts.
- IMHP will create a central depository of resources for families for all 5 communities engaged in the initiative. IMHP will use their existing resources to begin to explore.
- Leverage current training initiatives by community agencies by exploring how they can be opened up to other partnering agencies:
 - ✓ Create a portal for training opportunities relevant to infant mental health practices.
 - ✓ Contact Humber City Wide Training to see how Regent Park Community Partners can be included in trainings.
- IMHP will share the Infant Mental Health Status Chart with community partners when staff are making observations.
- The Early Learning and Care sector identified specifically they would like to strengthen their approaches of engaging families around concerns about their child's development/behaviours.
- As a community, we would like to strengthen knowledge, capacity, and skills in the following areas:
 - ✓ Working with families who have experienced oppression
 - ✓ Strengthen the capacity to monitor families. There are limited windows when practitioners can do this, especially if they are only involved in a drop-in program.

Collaboration

- School Readiness programs experience difficulty with families who only attend prior to school beginning and think it is about academics, whereas school readiness is built over time. Engage the education sector so they are made aware of this challenge
- IMHP will connect St. Michael's NICU with Life with Baby to explore opportunities to support families once they return home after birth. Additionally IMHP will share the From the Heart campaign materials.
- Community partners will decide if they wish to engage in the Women and Child committee at St. Michael's hospital – Contact Brenda Packard from Toronto CAS if your agencies are interested in joining.
- Explore/ form a subcommittee/ meeting to brainstorm how the Regent Park community can be stronger community around IMH capacity. The group would explore opportunities for a potential pilot project in the community.
- Form a working group to explore how to create a central resource for practitioners on infant-early mental health. Frontline practitioners should be included in this group. IMHP will bring to the community table some of their resources to see what would be useful to practitioners.
- IMHP will connect Regent Park Community partners with Dr.Cindy-Lee Dennis and St. Jamestown/ Mount Sinai partners to see how the community can support mothers with PPMD.
- Riverdale Community Midwives look to refer/ introduce families to the other community agencies and the service they offer to continue to support families after the 6 weeks after birth. One way could be a drop in or a meet and greet with community agencies.
- Identify where the report can be shared with existing tables and groups in the community. Create a list of who the community would like to meet with and select meeting dates.

Long Term Opportunities for Competencies

Knowledge Building for Professionals

- Parenting and Family Literacy Programs at Toronto District School Board would like to continue to strengthen capacity of staff in getting to know families and identify signs of unresolved trauma.
- Strengthen strategies for engaging families specifically when there is a developmental concerns with the child and for screening opportunities.
- Engage agencies in how to create a continuum of learning that is accessible and affordable.
- IMHP will look to create IMH modules to educate in service practitioners; IMHP will look to engage the multiple chairs of each sector (Social work, ECE, Nurses etc.) on having IMH modules.
- Strengthen and support the arrival of family when they return home after a hospital visit. Explore with community agencies how they can support families when they return home/into the community, taking more active role with families. This could be on the agenda at the Women and Child table at St. Michaels.
- Explore how practitioners can build the skills of teams on strategies for building the capacity within of parents/families/etc. on empathizing with babies/children.
- Find expertise to help build the skill within families around developing empathy for babies/children. Identify the experts and figure out how to have them come into the community (such as Mary Gordon, Dr.Wittenberg).
- Look for opportunities to strengthen staff knowledge around recognizing parental trauma and its influence on the child – develop a common understanding of knowing who to refer to and who are the experts.
- Evaluate the effectiveness of programs in the community and whether they lead to better outcomes – utilize existing researchers and teams in the community.

Collaboration

- Explore a strategy to engage the public schools in Regent Park in infant mental health conversations. TDSB Family Literacy Centres can assist in beginning this conversation.
- The community would like form a subgroup in an existing committee/structure to determine a structure to disseminate current research for frontline practitioners on infant-early mental health topics.
- Continue to be aware of making a connection with Fraser Mustard Institute to have Regent Park Community Practitioners present in their information dissemination.

Organizational Policies & Practices

What is Happening in Regent Park Today

As a community, it was discussed that there needed to be more information regarding organizational policies and practices that support infant mental health. It was determined the best method to collect this information is through a survey for front-line practitioners and staff to gain a better understanding how they feel they feel. The survey would be completed anonymously, with the exclusion of name, agency, and sector.

Opportunities for Organizational Policies & Practices

- Develop or identify existing resources that support vicarious trauma in infant mental health settings.
- Develop protocol/pathways for dealing with vicarious trauma, compassion fatigue, and burnout for community partners to support staff. Identify experts on this topic.
- Explore opportunities for supervisors to strengthen their capacity to support and recognize when staff are overwhelmed or experiencing vicarious trauma/compassion fatigue.
- Community agreed to develop a survey for frontline practitioners to better understand how those providing direct services feel. IMHP will create a draft and seek table's approval and input.

References

- Boivin M, & Hertzman C (Eds.) (2012). Early Childhood Development: adverse experiences and developmental health. Royal Society of Canada - Canadian Academy of Health Sciences Expert Panel (with Ronald Barr, Thomas Boyce, Alison Fleming, Harriet MacMillan, Candice Odgers, Marla Sokolowski, & Nico Trocmé). Ottawa, ON: Royal Society of Canada. Available from: https://rsc-src.ca/sites/default/files/pdf/ECD%20Report_0.pdf
- Center on the Developing Child (2015). Core concepts in the science of early childhood development. Retrieved from: http://developingchild.harvard.edu/resources/multimedia/interactive_features/coreconcepts
- City of Toronto (2014). Neighbourhood census: NHS profile. Retrieved from <http://www1.toronto.ca/City%20Of%20Toronto/Social%20Development,%20Finance%20&%20Administration/Neighbourhood%20Profiles/pdf/2011/pdf3/cpa72.pdf>
- Clinton J, Kays-Burden A, Carter C, Bhasin K., Cairney, J, Carrey N, Janus M., Kulkarni C & Williams R (2014). Supporting Ontario's Youngest Minds: Investing in the mental health of children under 6. *Ontario Centre of Excellence for Child and Youth Mental Health*. Retrieved from http://www.excellenceforchildand youth.ca/sites/default/files/policy_early_years.pdf.
- Cohen J, Oser C & Quigley K (2012). Making it happen: Overcoming barriers to providing infant-early childhood mental health. Zero To Three. Available at <http://www.zerotothree.org/public-policy/federalpolicy/early-child-mental-health-final-singles.pdf>
- County of Simcoe (2014). *County base map*. Retrieved from: <http://www.simcoe.ca/InformationTechnology/Documents/Simcoe%20County%20Base%20Map.pdf>
- Infant Mental Health Promotion (2002, rev. 2011). *Competencies for Practice in the Field of Infant Mental Health – Best Practice Guidelines*. The Hospital for Sick Children, Toronto. Retrieved from: http://www.imhpromotion.ca/Portals/0/IMHP%20PDFs/Competencies_Full%20Page_2.pdf
- Infant Mental Health Promotion (2004, rev. 2011). *Core Prevention and Intervention for the Early Years – Best Practice Guidelines*. The Hospital for Sick Children, Toronto. Retrieved from: http://www.imhpromotion.ca/Portals/0/IMHP%20PDFs/Core%20Prevention_Full%20Page_2.pdf
- Infant Mental Health Promotion (2004, rev. 2011). *Organizational Policies & Practices to Support High Quality Infant Mental Health Services – Best Practice Guidelines*. The Hospital for Sick Children, Toronto. Retrieved from: http://www.imhpromotion.ca/Portals/0/IMHP%20PDFs/Organizational%20Policy_Full%20Page.pdf
- Niagara Region (2015). *About Niagara region*. Retrieved from <https://www.niagararegion.ca/about-niagara/default.aspx>
- North Bay Parry Sound District Health Unit (2010). North bay parry sound district health unit service area. Retrieved from http://www.myhealthunit.ca/en/resourcesGeneral/Health_Unit_Area_Map.pdf

- Public Health Agency of Canada (2010). *CACP/CPNP National Projects Fund (NPF)*. Retrieved from <http://phac-aspc.gc.ca/hp-ps/dca-dea/prog-ini/funding-financement/npf-fpn/index-eng.php>
- Simcoe Muskoka Health Stats (2015). Live Births. Retrieved from <http://www.simcoemuskokahealthstats.org/topics/pregnancy-and-before/birth-and-fertility-rates/live-births-and-crude-birth-rate>
- Statistics Canada (2012). Focus on Geography Series, 2011 Census. Statistics Canada Catalogue no. 98-310-XWE2011004. Ottawa, Ontario. Analytical products, 2011 Census. Last updated October 24, 2012.
- Statistics Canada (2012). Muskoka, Ontario (Code 3544) and Ontario (Code 35) (table). Census Profile. 2011 Census. Statistics Canada Catalogue no. 98-316-XWE. Ottawa. Released October 24, 2012. <http://www12.statcan.gc.ca/census-recensement/2011/dp-pd/prof/index.cfm?Lang=E>
- Statistics Canada (2012). Niagara, Ontario (Code 3526) and Ontario (Code 35) (table). Census Profile. 2011 Census. Statistics Canada Catalogue no. 98-316-XWE. Ottawa. Released October 24, 2012. <http://www12.statcan.gc.ca/census-recensement/2011/dp-pd/prof/index.cfm?Lang=E>
- Statistics Canada (2012). Ottawa, Ontario (Code 3506008) and Ottawa, Ontario (Code 3506) (table). Census Profile. 2011 Census. Statistics Canada Catalogue no. 98-316-XWE. Ottawa. Released October 24, 2012. <http://www12.statcan.gc.ca/census-recensement/2011/dp-pd/prof/index.cfm?Lang=E>
- Statistics Canada (2012). Parry Sound, Ontario (Code 3549) and Ontario (Code 35) (table). Census Profile. 2011 Census. Statistics Canada Catalogue no. 98-316-XWE. Ottawa. Released October 24, 2012. <http://www12.statcan.gc.ca/census-recensement/2011/dp-pd/prof/index.cfm?Lang=E>
- Statistics Canada (2012). Simcoe, Ontario (Code 3543) and Ontario (Code 35) (table). Census Profile. 2011 Census. Statistics Canada Catalogue no. 98-316-XWE. Ottawa. Released October 24, 2012. <http://www12.statcan.gc.ca/census-recensement/2011/dp-pd/prof/index.cfm?Lang=E>
- The District of Muskoka (2014). About us. Retrieved from <http://www.muskoka.on.ca/content/about-us>
- The Toronto Neighbourhoods (2015). History: Regent Park. Retrieved from <http://www.torontoneighbourhoods.net/neighbourhoods/downtown/regent-park/history>
- Toronto Community Housing (2015). Regent park. Retrieved from <http://www.torontohousing.ca/regentpark>
- Tourism Simcoe County (2013). Experience Simcoe County. Retrieved from <http://experience.simcoe.ca/>