ADAPTING TO A NEW REALITY
# Table of Contents

- Background .................................................. 1
- Mandate ..................................................... 2
- Key Functions and Roles ................................. 2
- Referral Process ............................................ 3
- Community Networks of Specialized Care-Ontario Updates & Highlights ..................................................... 4
- Connections Between Ministry of Children, Community and Social Services/Developmental Services Reform and the Community Networks of Specialized Care .................. 6
- Complex Support Coordination .......................... 7
- Health Care Facilitation ..................................... 10
- Dual Diagnosis Justice Coordination/Case Management 12
- La Ressource ................................................ 14
- Videoconferencing .......................................... 16
- CNSC Contacts .............................................. 17
BACKGROUND

In August 2016, the Ontario Ombudsman’s Report identified the current gaps in the developmental services system. As a result, the Ministry of Children, Community and Social Services (MCCSS), developed a new Community Networks of Specialized Care (CNSC) mandate outlining the increased need for enhanced case management support for people with developmental disabilities with multiple and complex care needs. In April 2018, a refreshed mandate was implemented addressing the Ombudsman’s concerns, including the Ministry’s commitment to improve access to complex support coordination across the province.

MCCSS is committed to transforming developmental services into a more accessible, fair, and sustainable system of support for adults with developmental disabilities. This will aid in greater inclusion, independence, and choice for people with a developmental disability. This person-centered approach is essential for the transformation and modernization of service delivery and system management.
MANDATE

To provide support to adults with developmental disabilities and high support and complex care needs (HSCCN) by:

- Coordinating support and service within and across sectors, by providing complex support coordination for people;
- Acting as a resource to service agencies, Developmental Services Ontario and local planning tables (including urgent response and service solutions / case resolution);
- Building system capacity to better support people with complex needs through education, mentorship and support to other case management and service agencies.
- Providing provincial coordination of videoconferencing and French Language specialized resources.

KEY FUNCTIONS AND ROLES

- Complex Support Coordination
- Health Care Facilitation
- Dual Diagnosis Justice Coordination Case Management
- Service System Resources
REFERRAL PROCESS

The CNSC refreshed mandate is now in effect, and the referral process of people being connected to the CNSC is in place.

• People can access CNSC support through a referral from Developmental Services Ontario (DSO).
• Referrals to, and access of CNSC support will be tracked in the Developmental Services Consolidated Information System (DSCIS).
• Once an individual’s complex support coordination needs have been met, the CNSC may support the person to be transitioned to other lesser intensive or generic case management support and will advise the DSO.
CNSC-O UPDATE & HIGHLIGHTS
With the support of People Minded Business, the CNSC, recently conducted an evaluation targeting program progress and effectiveness, developing provincial outcome measures, as well as developing the strategy for the future.

A summary of the strategy follows:

INTERNAL OPERATIONS ACTIONS

• Develop a CNSC operation structure that advances the strategy and allows for decisions to be made in a timely manner.
• Provide administrative support through the Chair of the Leads and Managers group.
• Agree upon a way to ensure decisions move forward.
• Identify a process to link past information and completed work to the current strategy.

EXTERNAL RELATIONS ACTIONS:

• Select a Quality-of-Life measurement tool and implement its use across the province.
• Develop greater awareness and clarity around the CNSC efforts within the DS sector, across the integrated health and justice system.
• Engage with MCCSS, to identify and work with a CNSC champion.
• Prepare and respond to the DS Reform, including the preparation of individual stories and survey results. Create a year-end report identifying qualitative and quantitative data, input from Champions and preliminary Quality of Life measures.
CONNECTIONS BETWEEN MCCSS DS REFORM AND THE CNSC

Read about the connections with the principles of the DS Reform and CNSC’s mandate here.

COVID-19 RESPONSE SURVEY RESULTS

In September 2020, the Provincial Network on Developmental Services requested that the Community Networks of Specialized Care (CNSC) collect information related to their ongoing CNSC health work and their COVID-19 response efforts. The CNSC worked alongside MCCSS to understand the current provincial COVID-19 related initiatives, and to identify the key focus areas as it relates to COVID-19 response assessment. The survey also included additional questions related to Developmental Services Reform. A summary of the survey results from all provincial CNSC’s can be found here.
The role of the Complex Support Coordination (CSC) is to coordinate support and service within and across sectors to address people’s complex support needs. The CSC is a resource to service agencies, Developmental Services Ontario (DSO), and local system planning tables (including urgent response and service solutions/case resolution). The CSC helps to build capacity in the service system through education, mentorship and support to other case managers and service agencies. In situations where adults with developmental disabilities have high-support and complex care needs that exceed the available transitional supports and services, and/or require coordination with inter-ministry service providers/partners, the CSC provides direct support.

COVID-19 HIGHLIGHTS

- CSCs have adapted to provide virtual support, working to build resilience as they navigate the many challenges because of the pandemic.
- To address the challenge of supporting people virtually, CSCs relied on networking and collaboration with multiple sectors to maintain meaningful, effective connections.
- Ongoing shortages in services, staffing support, and resources, led to increased collaboration among the provincial CSC group, identifying different resources to meet objectives. Developed virtual networking opportunities for people and their families to connect with others having similar experiences.
- Shifted from long-term planning to short-term or emergency planning to reduce the risk of crisis for people.
- Advancement of planning and placements focused on the CNSC’s ability to collaborate with other networks, organizations, sectors, and ministries, to secure the services and support people need.
HIGHLIGHTS & TRENDS

• Successful multi-system collaboration for those with most complex challenges to access residential supports and affordable housing options.
• Identified increased need for supported employment and day options.
• Difficulty accessing community psychiatry for people with a dual diagnosis.
• Increased caregiver burnout due to lack of resources.
• Additional people being placed in Outside Paid Resources (OPRs) and fee-for-service supports due to the hold placed on funded supports during the pandemic.
• Longer wait times reported for clinical services such as behavioural support service, Occupational Therapy, and Speech Therapy. Virtual services have increased capacity however have limitations.
• Existing residential/respite/community participation models don’t meet the needs of complex people referred to the CSCs.
• Additional planning within developmental services is necessary to support access to community addictions and mental health services that will not accept people who have a dual diagnosis into their services.
• With Multi-Year Residential Planning active in some regions, there has been significant planning for placement for people in the highest priority of need. There are still many people in urgent need of residential support.
• Successful collaboration among the CSCs particularly relating to referred people with multiple, complex needs and people who are transient.
• Involved in the CNSC project with Conestoga College to investigate options for assessing risk of people referred.

PROVINCIAL DATA ON HOW MANY PEOPLE RECEIVED CSC SUPPORT IN 2020/2021:

560 people
CLIENT STORY:

“CSC received a referral for a young woman with a complex profile that included a traumatic childhood, a newly identified genetic disorder and mental health diagnoses. Despite the support of multiple professionals, her aggressive behaviour was a danger to herself and to others. Her network of support accessed emergency shelters, domiciliary hostels and short-term respite, yet none were able to meet her needs and eventually, she was admitted to hospital. The CSC team connected with the CNSC support team in her home region. With the guidance of the Complex Support Coordinat (CSCs), her mental health and medical team at the hospital were able to develop a comprehensive profile that provided an overview of her history, her strengths, and best practices for supporting her. An agency near her hometown requested to get to know her so that they could plan for her residentially. They came to visit her in the hospital followed by several virtual visits. The entire team including CSC, the residential staff, and specialized services had weekly virtual meetings to develop a budget and strategy to support her transition. Although the transition had some challenges, she now has a room painted her favourite colour, a place to keep her important belongings and a space to call her own.”
HEALTH CARE FACILITATION

The Health Care Facilitation (HCF) is a resource for people, families, agencies and other members of the CNSC teams (CSC and DDJC/CM) to navigate the health care system and coordinate supports and services within and across sectors for people with developmental disabilities and complex medical needs. HCFs promote health equity and build system capacity to better support adults with developmental disabilities who have complex medical needs through education, mentorship and assistance to healthcare providers and cross-sectoral community service agencies. In doing so, the HCF identifies gaps, trends and opportunities and collects data to gain an understanding of the provincial needs of people served.

COVID-19 HIGHLIGHTS

- Dissemination of COVID-19 research, tools, and best practices.
- Support provincial training for healthcare providers providing direct support and family caregivers.
- Advocate for public policy that considers the unique needs of people with developmental disabilities.
- Provide advice, feedback, and subject-matter expertise to provincial public policy.
  - Intensive Care Unit (Ventilator) Triage Protocol
  - Personal Protective Equipment Supply Chain
  - COVID-19 Vaccination Prioritization
- Advocate and support access to vaccines for people with developmental disabilities and their caregivers.
- Coordinate developmental services and community health services to relieve caregiver burden.
- Manage clients who are reluctant to seek healthcare in acute care settings due to risk of contracting COVID-19.
- Support virtual health care appointments.
- Provide tools, resources and information specific to COVID-19
- Providing practice guidance on topics such as:
  - Infection Prevention and Control (IPAC).
  - Advance Care Planning in the context of COVID-19.
  - Creation of community isolation spaces.
HIGHLIGHTS & TRENDS

• Collect information and address sector-specific trends.
• Provincial peer case review.
• Collaborate with Developmental Disabilities Primary Care Program (DDPCP) and Health Care Access Research and Developmental Disabilities (HCARDD) for point of care resources.
• Create and disseminate plain language materials (videos, tools, checklists).
• Support the healthcare knowledge gap of Direct Support Professionals through consultation and coaching.
• Support the delivery and engagement of Project ECHO education in collaboration with The Centre for Addiction and Mental Health (CAMH).

PROVINCIAL DATA ON HOW MANY PEOPLE RECEIVED HCF SUPPORT IN 2020/2021:

274 people
DUAL DIAGNOSIS JUSTICE COORDINATION/CASE MANAGEMENT

The Dual Diagnosis Justice Coordination/Case Management provides cross-sector coordination support to divert people with a developmental disability or dual diagnosis in conflict with the law, through securing appropriate services or treatment in place of the usual criminal justice proceedings of trial and/or incarceration.

COVID-19 HIGHLIGHTS

- From March-November 2020, the Ontario court shutdown and shifted to a virtual court, leading to some transitional challenges.
- Majority of support was conducted virtually with some regions offering in-person services on a case-by-case basis.
- Support continued with new processes such as Legal Aid Ontario applications, requesting disclosure, attending virtual court, etc.
- Increased reliance on community partnerships and building capacity; worked together to meet the needs of people supported through DDJC/CM both in and out of custody.
HIGHLIGHTS & TRENDS

• DDJC/CM presentation at CAMH Forensics Dual Diagnosis Specialty Services Conference in September 2020.
• Increased meetings amongst the provincial DDJC/CM team which aided in building capacity and a cohesive team across the province.
• Majority of DD clients accepted for a form of diversion including mental health and informal diversion, community treatment and mental health court.
• Community tables and committees transitioning to virtual.

PROVINCIAL DATA ON HOW MANY PEOPLE RECEIVED DDJC/CM SUPPORT IN 2020/2021: 716 people
The mandate of the French-Language Specialized Services Resource is to improve province-wide access to specialized clinical services in French. It supports Ontario agencies and professionals serving Francophone adults with developmental disabilities and mental health needs and/or challenging behaviours.

COVID-19 HIGHLIGHTS

A virtual platform was provided to professionals whose role was to support French speaking people with developmental disabilities. With 50 virtual members, this platform provided French-language resources as well as the sharing of best practices and challenges.

Hosted Virtual Communities of Practice which led to increased professional knowledge, competencies, confidence in skillsets, and the opportunity to share personal experiences from the pandemic. Prior to the pandemic, the Virtual Communities of Practice met monthly, but due to heightened demand, this increased to weekly sessions from March to June 2020. These sessions allowed support workers to dedicate more time to supporting French speaking people.

- Objective #1: Improve access to services in French.
- Objective #2: Improve the delivery of services in French.
- Objective #3: Strengthen the francophone capacity of all community networks of specialized care.
- Objective #4: Service System Resources (French-Language Specialized Services Resource).
HIGHLIGHTS & TRENDS

- Offer support using a virtual platform.
- The Community of Practice / Portal simplified the process when connecting with professionals working in French. Participating locations included Toronto, Hawkesbury, Ottawa, Sudbury and Windsor.
- Provides French resources at a provincial level that meet the same quality standards as English resources.

PROVINCIAL DATA ON NUMBER OF PEOPLE PARTICIPATING IN COMMUNITY OF PRACTICE (2020-2021)

337 people
VIDEOCONFERENCE

Coordination of provincial service system resources related to videoconferencing and French language specialized services.

• Videoconferencing is a useful tool that allows people to connect together without requiring all those involved to be in the same room. Reduction in time, cost and risk of travel for people, families, support staff and care providers.
• Provides access to specialized services that may not have been accessible otherwise.
• Enables the inclusion of family and clinical supports regardless of location.
• Facilitates improved coordination and continuity of care across health care, social services, developmental services and justice systems.
• An alternative way of meeting with someone who may otherwise be anxious about “in person” appointments.

COVID-19 HIGHLIGHTS

VC HOURS OF USAGE

HIGHLIGHTS & TRENDS

• The use of videoconferencing from 2020-2021 has increased by 721% compared to 2019-2020.
• An increased request for licenses with 345 new accounts provided since April 1, 2020.
• Increased need for larger events with new features such as transcription have been received.
• Daily support for troubleshooting, new user setup and training.
CNSC CONTACTS

Brigid FitzPatrick
Eastern Region
Valor & Solutions
BFitzpatrick@valorsolutions.ca

Jennifer Altosaar
Toronto Region
Surrey Place
Jennifer.Altosaar@surreyplace.ca

Kathleen Peters
Southern Region
Regional Support Associates
kpeters@wgh.on.ca

Leah Jeffery
Southern Region
Bethesda
ljeffery@bethedaservices.com

Lisa Holmes
Eastern Region
Ongwanada
lholmes@ongwanada.com

Marnie McDermott
Central East Region
CLH Developmental Support Services
mmcdermott@clhmidland.on.ca

Nicole Maurice
Southern Region
Regional Support Associates
nmaurice@wgh.on.ca

Patricia Lamarche
Coordonnatricie provinciale – La Ressource
Provincial Coordinator – La Ressource
Valor & Solutions
palamarche@valorsolutions.ca

Tara Hyatt
Central West Region
Central West Specialized Developmental Services (CWSDS)
thyatt@cwsds.ca

Tina Thomason
Northern Region
Hands Family Network
tthomason@handstfhn.ca

A special thank you to the Surrey Place Marketing and Communications team for their support with the development of this report.