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### **Child and Youth Mental Health**

# Business Intelligence Solution Data Dictionary

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| March 1, 2018      | 1.0     | CYMH BI Solution team | Amendments made to P7 re: "during reporting period"  |
| September 12, 2018 | 1.1     | CYMH BI Solution team | Updated the value description for CS58: Consent to share information<br>Updated CS74-77 – Replaced child and youth worker with direct service staff  |
| October 2, 2018    | 1.2     | CYMH BI Solution team | Added Appendix I – CS58 Consent to Share   |
| June 30, 2020      | 1.3     | CYMH BI Solution team | Updated definitions of Business Attributes CS71 (Client Wait Status Type) and<br>CS73 (Removal from Wait List Reason); reflected transition of the CYMH<br>program from MCYS to MOH since April 2019 |
| September 28, 2020 | 1.4     | CYMH BI Solution team | Updated the definition of Business Attribute CS58 (Consent to share information)<br>and descriptions in Appendix I: CS58 – Consent to Share; various text and<br>diagram updates                     |

#### **Revision Log**

#### **Reviewers / Endorsers**

| Name                          | Date                     | Organization                                |
|-------------------------------|--------------------------|---|
| CYMH BI Solution team         | Oct. 17, 2016            | CYSSC                                       |
| CYMH BI Solution team         | Oct. 18, 2016            | MCYS  |
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| CYMH Data Technical Sub-Group | Jan. 17 – April 28, 2017 | CYMH Data Lead Agencies Technical Sub-Group |

#### Approvals

|          | Name | Role               | Organization |               |
|----------|------|--------------------|--------------|---------------|
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| CYMH Data Lead Agencies Technical | Endorsed (March 1 <sup>st</sup> , 2017) | CYMH Data Working Group |
|-----------------------------------|---|-------------------------|
| Sub-Group                         |   |                         |

#### List of Reference

| Document Name  | <b>Document Version</b> | Document Owner   |
|--|-------------------------|--|
| CYMH BA – Business Architecture Report   | v1.2 2014-06-30         | Information Management and Architecture Branch, Children, Youth and Social Services I&IT Cluster |
| TPBP Training Worksheet  | v Feb 2015              | Policy Development and Program Design Department, Children and Youth at Risk Office, MCYS        |
| MCYS 2015-16 TPBP Generic Package – Children and Youth at Risk                       |                         | MCYS   |
| E-Mental Health in Canada: Transforming the Mental Health System<br>Using Technology |                         | Mental Health Commission of Canada   |
| Community-Based Child and Youth Mental Health Program Guidelines<br>and Requirements | September 2013          | MCYS   |

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# 1. Document Purpose

The Data Dictionary is defined as the data standards between the business and an IT system. It provides detailed information about the business data, such as standard business definitions of data elements, their meanings, and allowable values.

CYMH BI Solution Data Dictionary defines the data standards for CYMH BI Solution domain. This domain has several business attribute sets depending on the data source and/or the business content:

- Client-Service business attributes sourced from Client Information (Management) System (CIS)
- SOR and Complaints from Client Information (Management) System (CIS)
- Financial business attributes sourced from Service Management Information System (SMIS)
- Population Demographics that contains census data sourced from Strategic Information and Business Intelligence Branch (SIBI)

Note: Business attributes for Needs Subcategory and Diagnose Details listed in the attached document in <u>Appendix C</u>. These business attributes are not part of the initial data requirements and there is no standard classification in the sector.

The document also defines the CYMH Performance Indicators (PIs) that will be the outcomes of the CYMH BI Solution:

The structure of the document is based on SNOMED CT<sup>® 1</sup>. **SNOMED CT** or <u>SNOMED Clinical Terms</u> is a systematically organized computer processable collection of <u>medical terms</u> providing codes, terms, synonyms and definitions used in clinical documentation and reporting.

The document collects business terms and intended for CYMH Lead Agencies consumption; it is not intended as an IT artefact (e.g. CDM) and because of this is not subject to GO-ITS standards.

<sup>&</sup>lt;sup>1</sup> Terminology and specifically Health terminology (SNOMED CT) <u>https://en.wikipedia.org/wiki/International\_Health\_Terminology\_Standards\_Development\_Organisation</u> <u>https://en.wikipedia.org/wiki/SNOMED\_CT</u>

# 2. CYMH Program Description<sup>2</sup>

#### CHILD AND YOUTH MENTAL HEALTH SERVICES

Child and youth mental health (CYMH) services were funded by the Ministry of Children and Youth Services (MCYS) and this has now transitioned to the Ministry of Health (MOH) to achieve the vision of an Ontario in which child and youth mental health is recognized as a key determinant of overall health and well-being, and where children and youth grow to reach their full potential.

Ministry-funded child and youth mental health services are provided to children and youth from birth to 18 years of age under the authority of the *Child and Family Services Act* (CFSA). These services are not mandatory under the CFSA but are provided to the level of available resources. Services and supports that address a range of social, emotional, behavioural, psychological and/or psychiatric problems are provided to children and youth who are at risk of, or who have developed, mental health problems, illnesses or disorders.

#### TARGET POPULATION

Core child and youth mental health services are funded by the ministry, either directly or indirectly through identified lead agencies in communities across the province and are available to all children and youth ages 0-18 who are experiencing, or at risk of experiencing, mental health problems, illness or disorders. Mental health problems, illnesses, and disorders represent different aspects on what is a continuum of overall mental health and well-being.

For the purpose of this service framework, a client is defined as the intended direct recipient of the child and youth mental health service. A person/individual becomes a client once he/she has provided consent for service (including verbal consent); until such time he/she is considered a prospective client.

### CORE SERVICES AND KEY PROCESSES

Core services available to clients in every service area:

- Targeted Prevention
- Brief Services
- Counselling and Therapy
- Family Caregiver Skill-Building and Support
- Specialized Consultation and Assessments
- Crisis Support Services

<sup>&</sup>lt;sup>2</sup> The section is an extract from Child and Youth Mental Health Service Framework (draft) <u>http://www.children.gov.on.ca/htdocs/English/documents/specialneeds/mentalhealth/ServiceFramework.pdf</u>

Intensive Treatment Services

Supporting the provision of these core services are key processes that support the child or youth and family throughout their involvement with the child and youth mental health service system. These processes are not specific to individual core services but are common to, and support, all of the services. These processes are:

- Access Intake Service Planning Process
- Service Coordination Process

#### PERFORMANCE INDICATORS

Key performance indicators have been identified for the child and youth mental health service system.

The performance indicators have been informed by: a comprehensive inter-jurisdictional scan; cross-references with key data reported provincially in child and youth mental health and other sectors (i.e. special needs/autism, youth justice, child welfare, etc.); extensive consultation with external stakeholders, experts and ministry staff; and a business architecture analysis (modeling and documenting the future child and youth mental health service system).

| Question   | Domain         | Indicator  |
|--|----------------|--|
| Who are we serving?                                    | Client Profile | <ul> <li>Proportion of children/youth population served</li> <li>Profile of children/youth served by gender and age</li> <li>Average age of children/youth served at initial assessment</li> <li>Profile of children/youth with complex mental health needs</li> </ul> |
| What are we providing?                                 | Efficiency     | <ul> <li>Service Utilization (per core service)</li> <li>Service Duration (per core service)</li> <li>Proportion of child/youth receiving brief treatment requiring no other services</li> </ul>   |
| How well are we serving children, youth, and families? | Responsiveness | <ul> <li>Proportion of children/youth with positive outcomes as identified by children/youth worker</li> <li>Proportion of children/youth survey respondents with positive perception of the outcome</li> </ul>  |
|  | Safety         | <ul> <li>Number of child/youth with serious occurrence reports and/or<br/>complaints</li> </ul>  |
| How well is the system                                 | Access         | Average children/youth time on service waitlists   |
| performing?  | Effectiveness  | <ul> <li>Proportion of children/youth survey respondents with positive perception of the service system</li> <li>Value for investment</li> </ul>   |

# 3. CYMH BI Solution Description<sup>3</sup>

The BI Solution will receive anonymized client and service data at the finest level of granularity (i.e., at individual level) from existing client information systems, through an automated process. It will then check data quality; integrate client, service, financial and population demographic data; and aggregate the data to calculate the CYMH performance indicators for the CYMH program.

The anonymization process (known as "Hashing") will enable the ministry to uniquely (with an estimated accuracy of 60-70%<sup>4</sup>) count children and youths across the CYMH sector and over time while protecting the privacy of individuals. Agencies continue to be responsible for selecting their client information systems, which will help them capture and use the information they need to best respond to children and youth.

### 3.1. CYMH BI Solution Enhancements

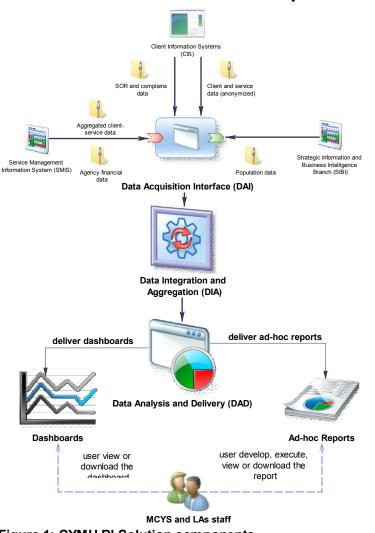
Standards and Controls:

- Data Standards The project will define and implement Information Quality, Consistency and Completeness standards and processes. CIS vendors/agencies will be required to enhance their systems to align with Ministrydefined data requirements and standards (for more details regarding Gold Standard for a Record see Appendix H)
- Data Anonymization CIS vendors will be required to meet the anonymization requirements and standards to enable uploading of anonymized personal information to the BI Solution
- Data Security The BI solution will require CIS vendors to implement security controls to protect the data including encryption during data transfer and data at rest, and role-based data access controls and ownership permissions

Data Quality Verification – The data standards, anonymization and security controls will be built into the BI Solution components and at the CIS data sources. As part of the data governance processes, there will be assignments of data quality verification roles at different levels [e.g., Lead Agencies, Regional Offices, Resource Management Branch, Client Services Branch and Strategic Information and Business Intelligence Branch (SIBI)] – in order to verify the quality of data received and verify the integration/aggregation of client/service data.

<sup>&</sup>lt;sup>3</sup> This is an extract from CYMH BI Solution Business case approved on September 2016

<sup>&</sup>lt;sup>4</sup> CYHM BI Solution business case has been approved (ARB, ITEC, ITPAC, TB/MBC) with the understanding of the limitations for unique client count using client anonymized personal information.



#### 3.2. CYMH BI Solution Components

Figure 1: CYMH BI Solution components

The CYMH Business Intelligence (BI) Solution will have three components:

- Data Acquisition Interface (DAI) allows the system to receive:
  - Anonymized Client-Service data from lead agency CIS.
  - Anonymized SOR & Complaints data from lead agency CIS<sup>5</sup>.
  - Financial data from SMIS
  - Aggregated client-service data from SMIS
  - Population Demographics data from SIBI
- Data Integration and Aggregation (DIA) allows data from multiple systems to be integrated and aggregated to produce consistent Performance Indicators<sup>6</sup>
- Data Analysis and Delivery (DAD) allows for the delivery of dashboards with PIs and ad-hoc queries

#### Note:

- The sector is comprised of lead agencies (LAs) and core service providers (CSPs)
- CIS Client Information System
- SMIS Service Management Information System
- SIBI- Strategic Information and Business
   Intelligence branch

### 3.3. CYMH BI Solution Data

CYMH BI Solution receives input data (business attributes) from multiple sources, it verifies that the data complies with data standards; it integrates the data to create a holistic view of the CYMH sector and generates the outputs as performance indicators (PIs).

Input data types:

- Client-Service business attributes will be sent by Lead Agencies Client Information System (CIS). The business
  attributes contain client information (anonymized) and data about the services and processes offered to the client
  by the service providers.
- SOR and Client Complaints business attributes will be sent by Lead Agencies Client Information System (CIS)<sup>7</sup>.
   The business attributes contain client information (anonymized) and data about the Client's SOR or Complaints.
- Financial business attributes will be sent by SMIS (Service Management Information System). The business
  attributes contain data about the TPRs/TPBEs allocations and expenditures for the CYMH services that they
  provide. The CYMH services can be financed by multiple organizations. SMIS provides only information about
  CYMH services financed by the ministry.
- Population Demographics business attributes are census data of the population (based on age and gender) per census area. The data is used as the denominator for some of the PI calculations e.g. P1 - Proportion of Child and Youth Population Served

Business Data Dictionary: provides detailed information about the business attributes, such as standard definitions of data elements, their meanings, and allowable values.

#### Outputs:

#### > Who are we serving?

- ≻ P1:
  - > P1a: Proportion of children/youth population served
  - > P1b: Number of participants in sessions / workshop / training
  - > P1c: Proportion of prospective children/youth not eligible for services
- ▶ P2:

<sup>&</sup>lt;sup>5</sup> SOR & Complaints data from CIS on hold for security and privacy consideration

<sup>&</sup>lt;sup>6</sup> BI Solution integrates client-service data with financial data at the level of CSP/TPR, not at the level of the client. Financial data does not have client level

<sup>&</sup>lt;sup>7</sup> SOR & Complaints data from CIS on hold for security and privacy consideration

- > P2a: Profile of children/youth served by gender and age
- > P2b: Profile of children/youth by need category and level of severity at initial (intake) assessment
- > P2c: Profile of children/youth by need category and level of severity at last (discharge) assessment
- > **P3:** Average ages of children/youth served at intake
- ▶ P4:
  - > P4a: Profile of children/youth with complex mental health needs served
  - > P4b: Proportion of high risk children/youth served at intake
- > What are we providing?
  - ≻ P5:
    - P5a: Service Utilization (per core service)
    - > P5b: Intensive Service Utilization
  - ≻ P6:
    - P6a: Service Duration (per core service)
    - > P6b: Client direct service hours received (per core service)
    - > P6c: Direct service hours delivered by staff (per core service)
    - > P6d: Indirect service hours delivered by staff
  - > **P7:** Proportion of children/youth receiving brief treatment requiring no other services
- > How well are we serving children, youth and families?
  - ≻ P8:
    - > P8a: Proportion of children/youth with positive outcomes as identified by child/youth worker
    - P8b: Proportion of children/youth with positive outcomes as identified by standardized assessment tool
  - > **P9:** Proportion of survey responses with positive perception of the outcome
  - ▶ P10<sup>8</sup>:
    - > P10a: Number of children/youth with serious occurrence reports and/or complaints
    - > P10b: Number of children/youth with client complaints (used to inform P10a)
    - > P10c: Number of children/youth with serious occurrence reports (SOR) (used to inform P10a)
- How well is the system performing?
  - ➢ P11:
    - > P11a: Average service latency
    - > P11b: Average children/youth time on service waitlists

<sup>&</sup>lt;sup>8</sup> SOR & Complaints data from CIS on hold for security and privacy consideration

- P11c: Length of wait-list
- How well is the system performing?
  - ≻ P12:
    - > P12a: Proportion of survey responses with positive perception of the service system
    - > P12b: Proportion of children/youth requiring transitions
  - ≻ P13:
    - P13a: Value for investment
    - P13b: Proportion of administrative expenses
    - P13c: Variance to budget
    - P13d: Program output index
    - P13e: Financial risk
    - > P13f: Financial sustainable indicator

Business Data Dictionary: provides detailed information about the performance indicators, such as definitions, computation, domain of applicability and utility.

# 4. Data Standards: Identity-based and Evidence-based

CYMH BI Solution Data Dictionary complies with Identity-based and Evidence-based initiatives.

### 4.1 MCYS Identity-based Data Collection Initiative (IDbD)<sup>9</sup>

In 2015 MCYS was directed by Cabinet to work with ministry partners to develop recommendations for a standardized cross-government framework to support identity-based client data collection.

- Identity-based data describes socio-demographic information about people (e.g. their gender, race / ethnicity, language, citizenship status, etc.).
- Dis-aggregating client data by socio-demographic characteristics (e.g., by gender, language or ethnicity), provides information regarding how different sub-groups of clients are accessing and fairing in public services.

MCYS developed a draft Identity-based Data Collection Framework:

<sup>&</sup>lt;sup>9</sup> Extracts from IDbD, MCYS, 2016 v 10 - deck

- The Data Standard, which includes a 'taxonomy' of standardized data elements including: race, language, citizenship status, Indigenous status, sexual orientation, gender identity, disability status, religion/spiritual affiliation, postal code, marital status, age, family status, place of birth, ethnicity etc.
- Supporting resources including a User Guide, Workbook and FAQs.

The purpose of the Data Standard is to facilitate the consistent collection of identity-based data elements, and to support alignment and analytic capacity with 'higher order' / population level data sets (i.e. Census data).

The data standard is modular, to promote customization within a standardized framework. The level of data collection for each data element, e.g. Level 1 (L1), Level 2 (L2) or Level 3 (L3) should be determined based on the specific needs, objectives and monitoring / evaluation goals of each program.

The following are some of the attributes that are relevant to CYMH BI Solution.

Do you identify yourself as an Aboriginal person, that is, First Nations, Métis or Inuit?

L1 Yes

L1 No

- L1 If you identify yourself as an Aboriginal person, are you: (Check all that apply)
- L1 First Nations
- L1 Métis

L1 Inuit

L2 Optional data elements: (Check one only)

L2 Are you registered under the Indian Act of Canada (i.e. a Status Indian)?

L2 If you identify yourself as a First Nations person, do you live on a reserve?

Note: These data elements are used in the Aboriginal Self-Identification Data Standard (Ministry of Indigenous Relationships and Reconciliation).

Which racial group do you identify as? (Check all that apply)?

| L1 | Arab                                   |
|----|--|
| L1 | Black                                  |
|    | L2 Canadian / American                 |
|    | L2 African                             |
|    | L2 Caribbean                           |
|    | L2 None of the above (please specify): |
| L1 | Filipino                               |
| L1 | Japanese                               |
| L1 | Korean                                 |
| L1 | Latin American                         |
| L1 | Chinese                                |

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| L1    | South Asian   |
|-------|---|
|       | L2 East Indian<br>L2 Pakistani                          |
|       | L2 Sri Lankan<br>L2 None of the above (please specify): |
| L1    | Southeast Asian   |
|       | L2 Vietnamese<br>L2 Cambodian                           |
|       | L2 Malaysian  |
|       | L2 Laotian  |
| L1    | L2 None of the above (please specify):<br>West Asian    |
|       | L2 Iranian  |
|       | L2 Afghan<br>L2 None of the above (please specify):     |
| L1    | White   |
| L1    | None of the above (please specify):                     |
|       | is your gender identity1? (Check all that apply)        |
| L1 Fe |   |
|       | nother gender identity (please specify):                |
|       | L2 Intersex   |
|       | L2 Trans / Transgender2<br>L2 Gender Non-Conforming     |
|       | L2 Two-Spirit   |
|       | L2 None of the above (please specify):                  |
|       |   |

Note: Gender identity is an Ontario Human Rights Code ground. These data elements are aligned with terminology used in the Ontario Human Rights Commission's Policy on preventing discrimination because of gender identity and gender expression.

What is your year of birth? L1 YEAR L1 Do not know

What is your postal code? L1 Postal code (primary place of residence/address)

L1 Do not know

### 4.2 Evidence-Based Decision Making<sup>10</sup>

Launched in 2014, Program Review, Renewal and Transformation (PRRT) introduced a new approach to planning and budgeting. Led by the President of the Treasury Board/Deputy Premier and supported by a sub-committee of Treasury Board/Management Board of Cabinet, PRRT is both the government's ongoing fiscal planning and expenditure management approach and a continuous review of programs, including public services and internal administration. It is designed around four key principles:

- Examining how every government dollar is spent;
- Using evidence to inform better choices and improve outcomes;
- Looking across government to find the best way to deliver services; and
- Taking a multi-year approach to find opportunities to transform programs and achieve savings

The 2015 Budget announced the creation of a new Centre of Excellence for Evidence-Based Decision Making (CoE) to build capacity to assess how programs are performing, using evidence to inform choices and lead change in critical public services.

- Develop an enterprise-wide framework that will embed standards for evidence-based decision making.
- Identify and develop the required mix of tools to support the implementation of the framework.
- Build capacity, within line ministries and central agencies, for evidence-based policy development, performance and outcome measurement, data analytics and evaluation.
- Support the decision-making process by undertaking priority projects through collaboration with ministries and enhancing how information is presented to decision-makers.

Performance measurement is integral to all important public sector decision-making and is a component of a management process that aligns initiatives, strategies and operations with broader government priorities.

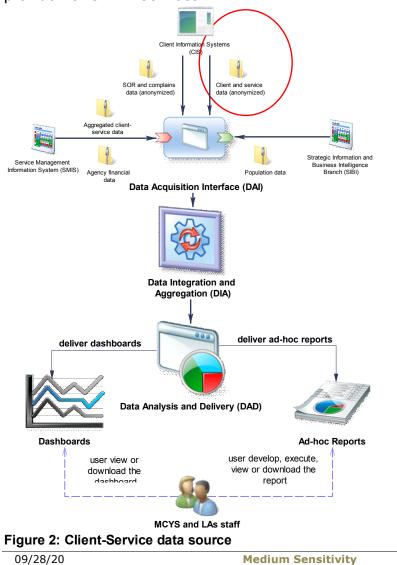
Performance measures include three distinct and related levels.

- Level 1: Output measures capture what a policy or program produces in terms of specific goods, services, or products.
- Level 2: Outcome measures capture the results of the policy or program, or the impact it is having in the context of its objectives.
- Level 3: Key Performance Indicators (KPIs) are high-level measures that capture changes in the social, environmental, and economic conditions that result from government action.

<sup>&</sup>lt;sup>10</sup> The section is an extract from <u>Centre of Excellence for Evidence-Based Decision Making</u>

# **5. CYMH Client-Service Business Attributes**

The source for client-service business attributes is the Client Information Systems (CISs) that supports the core service provider for CYMH services.



#### 5.1 CYMH Client-Service BAs Structure

The business attributes arranged in a hierarchical (nested) structure representing the relationships between data sets.

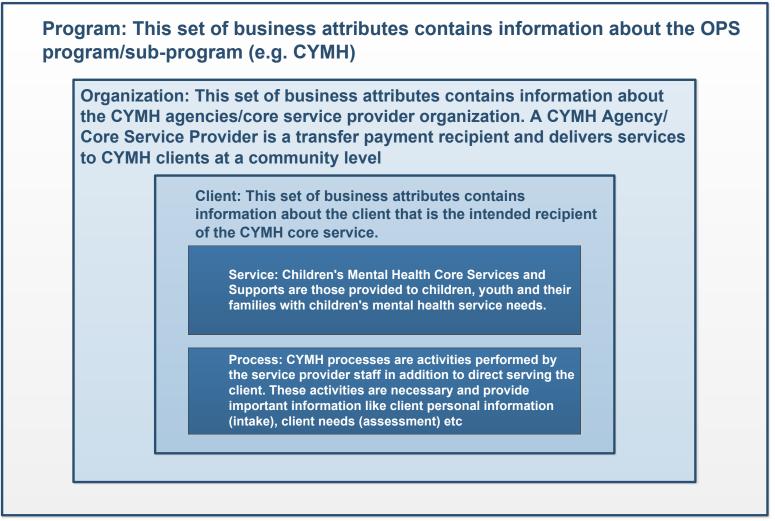


Figure 3: Client-Service business attributes structure

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#### 5.2 Regular Calendar Year Hierarchy

Client-service business attributes represents events in the client's service cycle timeline. The events occur during the Regular Calendar Year that starts on January 1<sup>st</sup> and ends on December 31<sup>st</sup>.

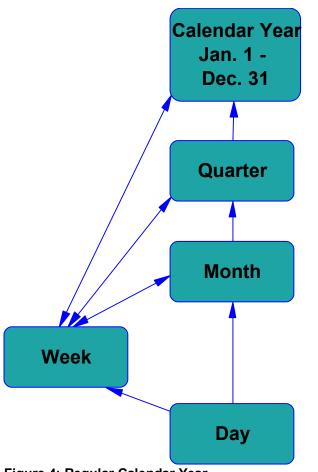
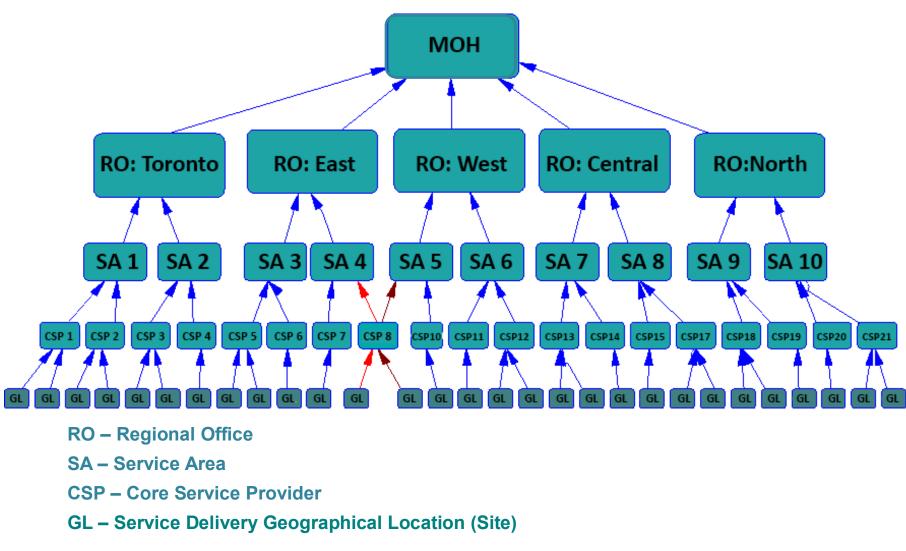


Figure 4: Regular Calendar Year



### 5.3 CYMH Organization Hierarchy (view of service delivery data)

Figure 5: CYMH Organization Hierarchy - service delivery

| Code | Business<br>Attribute Name           | Business Attribute<br>Description  | Business Attribute<br>Standard Value    | Business Attribute Standard<br>Value Description   |
|------|--------------------------------------|--|---|--|
| CS1  | (Sub-)Program<br>Identification      | The id and the official name<br>(label) that uniquely identifies<br>the (Sub-) Program.  | Child and Youth Mental<br>Health (CYMH) | A grouping of ministry<br>activities that have a common<br>goal and which provide<br>services to the public.<br>Programs are delivered<br>through a collection of<br>services that contribute to the<br>program goals and comply<br>with the program strategy.<br>The Child and Youth Mental<br>Health (CYMH) is a program<br>of the Ministry of Health. |
| CS2  | Program Start<br>Date                | The date when the program started  | TBD                                     | Child and Youth Mental<br>Health (CYMH) program –<br>start date  |
| CS3  | Program End<br>Date                  | The date when the program<br>ended. This date is NULL if<br>the program is in effect.    | null                                    | Child and Youth Mental<br>Health (CYMH) program – still<br>active  |
| CS4  | Program<br>Manager<br>Identification | The id and the official name<br>(label) that uniquely identifies<br>the Program Manager. | Ministry of Health (MOH)                | The Program Manager is the OPS Organization with direct responsibility for the Program   |

# 5.4 CYMH Client-Service BAs for Program

# 5.5 CYMH Client-Service BAs for Reporting

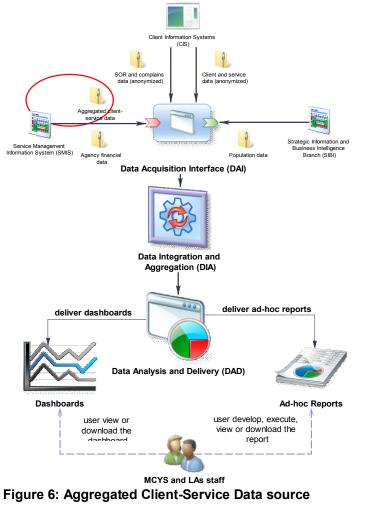
| Code | Business<br>Attribute Name        | Business Attribute<br>Description  | Business Attribute<br>Standard Value | Business Attribute Standard<br>Value Description  |
|------|-----------------------------------|--|--------------------------------------|---|
| CS5  | Reporting<br>Period Start<br>Date | The start date of the reporting period for the CYMH BI Solution purpose.                 | N/A                                  | The proposed reporting period is<br>quarterly. In this case, the start<br>date will be the first day of the<br>quarter. |
| CS6  | Reporting<br>Period End Date      | The end date of the reporting period for the CYMH BI Solution purpose.                   | N/A                                  | The proposed reporting period is<br>quarterly. In this case, the end<br>date will be the last day of the<br>quarter.    |
| CS7  | Reporting Date                    | The date when the file with<br>client-service data has been<br>sent to CYMH BI Solution. | N/A                                  |   |

| 5.6  | CYMH Client-Service BAs for Organization            |   |   |  |  |
|------|---|---|---|--|--|
| Code | Business<br>Attribute Name                          | Business Attribute<br>Description   | Business Attribute<br>Standard Value Name   | Business Attribute Standard Value Description  |  |
| CS8  | Lead Agency<br>Identification                       | The id and official name that<br>uniquely identifies a CYMH<br>lead agency                                      | http://www.children.gov.on.ca/htdocs/<br>English/professionals/specialneeds/<br>momh/moving-on-mental-health.aspx | Lead agencies, as system<br>leaders, are responsible for<br>planning for the delivery of<br>MOH-funded core community-<br>based child and youth mental<br>health (CYMH) services and<br>working with community<br>partners across the broader<br>continuum of CYMH services<br>and supports. |  |
| CS9  | Core Service<br>Provider<br>Identification          | The id and official name that<br>uniquely identifies a CYMH<br>core service provider.                           | TBD   | CYMH core service providers<br>are responsible for delivering<br>the CYMH  |  |
| CS10 | Service Delivery<br>Geographical<br>Location (Site) | The id and official name that<br>uniquely identifies a CYMH<br>service delivery<br>geographical location (Site) | TBD   | Postal Code<br>Not in scope for this Rollout 1   |  |
| CS11 | Regional Office                                     | The id and official name that   | North   | http://www.children.gov.on.ca/ht   |  |
|      | Identification                                      | uniquely identifies a CYMH  | East  | docs/english/about/regionaloffic   |  |
|      |   | regional office (RO).   | Central   | es.aspx  |  |
|      |   |   | West  |  |  |
|      |   |   | Toronto   |  |  |
| CS12 | Service Area<br>Identification                      | The id and official name that<br>uniquely identifies a CYMH<br>service area.                                    | http://www.children.gov.on.ca/htdocs/<br>english/about/regionaloffices.aspx                                       |  |  |

## 5.6 CYMH Client-Service BAs for Organization

### 5.7 CYMH Client-Service Aggregated BAs

The CYMH Client-Service Aggregated BAs cannot be automatically generated by CISs and the assumption is that aggregated BAs will be collected and computed by humans (CSP staff). Currently several aggregated client-service BAs are sent through TPBP to SMIS. The assumption is that the process will continue through TPBP package for existing aggregated client-service BAs. The new aggregated client-service BAs (added through the sessions with Data Working Sub-Technical Group) have been identified in this document as On-Hold until the decision on the collecting/sending process through TPBP to SMIS.



### 5.7.1 CYMH Client-Service Aggregated BAs Structure

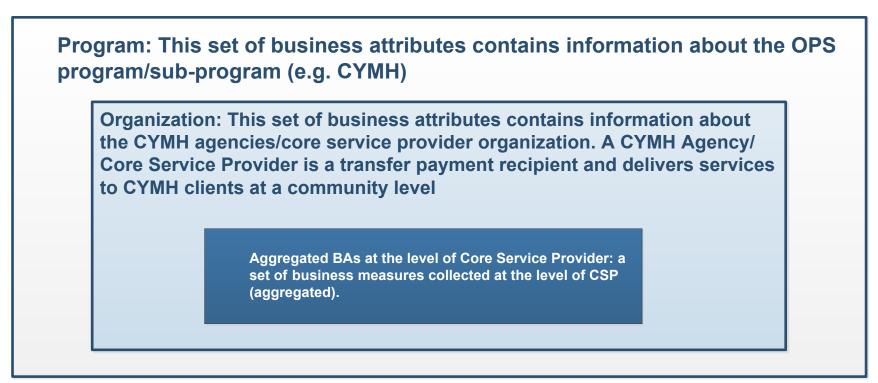


Figure 7: Aggregated Client-Service BAs Structure

| Code | Business<br>Attribute Name                      | Business Attribute<br>Description  | Business Attribute<br>Standard Value | Business Attribute Standard<br>Value Description   |
|------|---|--|--------------------------------------|--|
| CS13 | Direct Service<br>Hours Delivered by<br>Staff   | The total number of hours of "direct"<br>service provided by staff to<br>individuals during the fiscal year.<br>"Direct" Hours: Service. (Note:<br>each individual in the group is<br>recorded under 'no. of individuals<br>served' where there is a record).<br>Measure collected at the level of the<br>CSP (aggregated) | N/A                                  | The hours spent interacting, whether<br>in a group or individually; face to face<br>or on the phone. It does not include<br>work done "on behalf of" clients, such<br>as telephone calls, advocacy,<br>etc. Administrative support to the<br>service is not to be included. For<br>group service, one hour of service<br>equals one hour of service for the<br>entire group. |
| CS14 | Indirect Service<br>Hours Delivered by<br>Staff | The total number of hours delivered<br>by staff "on behalf of" clients, such<br>as telephone calls, advocacy,<br>Administrative support to the<br>service is included<br>Measure collected at the level of the<br>CSP (aggregated)   | N/A                                  |  |
| CS15 | Total number of<br>Program<br>Consultations     | The total number of program<br>consultations provided to agency<br>staff during the reporting period<br>Measure collected at the level of the<br>CSP (aggregated)  | N/A                                  | Applicable to the following services:<br>A355 Specialized Consultation and<br>Assessment Service   |
| CS16 | Total number of<br>Education<br>Sessions        | The total number of education<br>sessions provided to agency staff<br>during the reporting period.<br>Measure collected at the level of the<br>CSP (aggregated)  | N/A                                  | Applicable to the following services:<br>A355 Specialized Consultation and<br>Assessment Service   |

# 5.7.2 CYMH Client-Service Aggregated BAs

| Code | Business<br>Attribute Name                                     | Business Attribute<br>Description  | Business Attribute<br>Standard Value | Business Attribute Standard<br>Value Description   |
|------|--|--|--------------------------------------|--|
| CS17 | Number of spaces<br>available for A353-<br>Intensive Treatment | The total number of spaces (i.e.,<br>desks) available in the Intensive<br>Treatment program:<br>a) residential beds<br>b) day treatment<br>placements<br>Measure collected at the level of<br>the CSP (aggregated)   | N/A                                  | Applicable to the following services:<br>A353 Intensive Treatment Service/<br>Service Sub-Type Day Treatment,<br>A353 Intensive Treatment Service<br>> Service Sub-Type Out-of-Home<br>Residential Service |
| CS18 | Number of spaces<br>occupied for A353-<br>Intensive Treatment  | The number of spaces (i.e., desks)<br>occupied in the Intensive<br>Treatment program:<br>a) residential beds<br>b) day treatment<br>placements<br>Measure collected at the level of<br>the CSP (aggregated)  | N/A                                  | Applicable to the following services:<br>A353 Intensive Treatment Service/<br>Service Sub-Type Day Treatment,<br>A353 Intensive Treatment Service<br>> Service Sub-Type Out-of-Home<br>Residential Service |
| CS19 | Number of<br>Participants in<br>Sessions/Workshop/<br>Training | The total number of individuals<br>participating in skill building or<br>educational sessions/ workshops/<br>training to assist with building<br>parenting skills, child/youth<br>management skills, self-<br>management, anger management,<br>risk reduction, resiliency building,<br>etc.<br>Measure collected at the level of<br>the CSP (aggregated) | N/A                                  | Applicable to the following services:<br>A351 Family/Caregiver Skills Building<br>and Support and A356 Targeted<br>Prevention  |

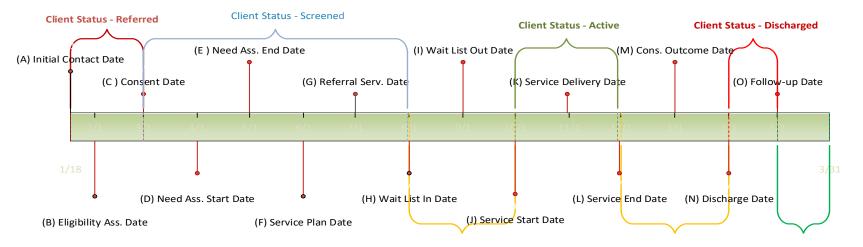
| Code | Business<br>Attribute Name   | Business Attribute<br>Description  | Business Attribute<br>Standard Value | Business Attribute Standard<br>Value Description |
|------|--|--|--------------------------------------|--|
| CS20 | The number of clients<br>with feedback at<br>discharge   | The number of survey<br>responses from whom feedback<br>was received in a consistent<br>method (by example, a<br>consistent feedback form,<br>verbal questionnaire, or app) at<br>discharge.<br>Measure collected at the level of<br>the CSP (aggregated)<br>TPBP denominator for<br>CPOSOC# and POSOC#<br>(A354)  | N/A                                  |  |
| CS21 | The number of survey<br>responses<br>(anonymous) at<br>discharge reporting<br>positive outcome | The number of survey<br>responses (anonymous) in a<br>consistent method (by example,<br>a consistent feedback form,<br>verbal questionnaire, or app) at<br>discharge who indicated their<br>experience of service resulted in<br>an outcome that was positive.<br>It is subjective and based on<br>caregiver or youth perception of:<br>• Reduction in level of<br>needs; or<br>• Improvement in level of<br>strengths; or<br>• Many treatment goals<br>successfully attained (at<br>least 50%)<br>Measure collected at the level of<br>the CSP (aggregated)<br>TPBP - POSOC# for A354 | N/A                                  |  |
|      |  | П Ы -1 0000# Ю Абба  |                                      |  |

| Code | Business<br>Attribute Name   | Business Attribute<br>Description  | Business Attribute<br>Standard Value | Business Attribute Standard<br>Value Description |
|------|--|--|--------------------------------------|--|
| CS22 | The number of survey<br>responses<br>(anonymous) at<br>discharge reporting<br>positive perception of<br>the system | Numerator: the number of<br>survey responses who report<br>positive experience with the<br>service system at end of service<br>(once service plan is complete<br>and/or discharge is planned).<br>Positive experience of the<br>service system is subjective and<br>based on caregiver/youth<br>perception of:<br>(1) Reasonable length of<br>time waiting for service;<br>or<br>(2) Extent to which service<br>plan was integrated and<br>coordinated; or<br>(3) Client/caregiver was<br>involved in key service-<br>related decisions; or<br>(4) Transitions/referrals<br>were supported and<br>timely<br>Measure collected at the level of<br>the CSP (aggregated)<br>TPBP CPOSOC# for A354 | N/A                                  |  |
| CS23 | The Survey Date  | The survey submission date.<br>Assumed the survey does not<br>span over multiple days.   | N/A                                  |  |

| Code | Business<br>Attribute Name                             | Business Attribute<br>Description  | Business Attribute<br>Standard Value Name | Business Attribute Standard<br>Value Description   |
|------|--|--|---|--|
| CS24 | CIS Client Identifier                                  | A unique identifier for the<br>client in the context of CSP's<br>CIS                           | N/A                                       | The identifier is unique per CSP/CIS, the attribute is intended for tractability back to the source system (for errors) not for uniqueness         |
| CS25 | Unique Client<br>Identifier (OHIP)                     | A unique identifier for the client in the context of CYMH Program (e.g. OHIP)                  | N/A                                       | Global: the identifier uniquely identifies the<br>client across the sector. The OHIP is not<br>mandatory for CYMH services.<br>Anonymized (hashed) |
| CS26 | Client First Name                                      | The client's First Name  | N/A                                       | Anonymized (hashed)  |
| CS27 | Client Middle Name                                     | The client's Middle Name   | N/A                                       | Anonymized (hashed)  |
| CS28 | Client Last Name<br>(Client Single Name)               | The client's Last Name   | N/A                                       | Anonymized (hashed)<br>Singe Name as per "Reclaiming<br>Indigenous Names, Single Name as<br>Legal Name in Ontario"                                 |
| CS29 | Client Birth Date                                      | The date when the client was born.   | N/A                                       | Anonymized (hashed)  |
| CS30 | Client Birth Year                                      | The month and year when the client was born  | N/A                                       |  |
| CS31 | Client Gender  | The identified gender of the<br>client.  | Male                                      | For another gender identity:<br>L2 Intersex  |
|      |  |  | Female                                    | L2 Trans / Transgender<br>L2 Gender Non-Conforming   |
|      |  | Another gender identity  | L2 Two-Spirit<br>L2 None of the above     |  |
| CS32 | Client Self-<br>Identification as<br>Indigenous person | The client identify self as an<br>Indigenous person, that is,<br>First Nations, Métis or Inuit | Yes                                       | L2 First Nations<br>L2 Métis<br>L2 Inuit   |
|      |  |  | No  |  |

### 5.8 CYMH Client-Service BAs for Client

| Code | Business<br>Attribute Name       | Business Attribute<br>Description                                   | Business Attribute<br>Standard Value Name | Business Attribute Standard<br>Value Description            |
|------|----------------------------------|---|---|---|
| CS33 | Client Postal Code               | The client's primary home postal code                               | N/A                                       | Anonymized (hashed)   |
| CS34 | FSA Code                         | Forward Sortation Area; the first 3 characters from the postal code | N/A                                       |   |
| CS35 | Client Self-                     | The client identify self as one                                     | Arab                                      |   |
|      | Identification as Race/Ethnicity | of the race/ethnicity   | Black                                     | L2 Canadian / American<br>L2 African<br>L2 Caribbean        |
|      |                                  |   | Chinese                                   |   |
|      |                                  |   | Filipino                                  |   |
|      |                                  |   | Japanese                                  |   |
|      |                                  |   | Korean                                    |   |
|      |                                  |   | Latin American                            |   |
|      |                                  |   | South Asian                               | L2 East Indian<br>L2 Pakistani<br>L2 Sri Lankan             |
|      |                                  |   | Southeast Asian                           | L2 Vietnamese<br>L2 Cambodian<br>L2 Malaysian<br>L2 Laotian |
|      |                                  |   | West Asian                                | L2 Iranian<br>L2 Afghan                                     |
|      |                                  |   | White                                     |   |
|      |                                  |   | None of the above                         |   |



#### **Client Status - Waiting**

Client Status - Waiting Client Status - Closed

| Code | Business Attribute<br>Name | Business Attribute Description   | Business Attribute Standard Value<br>Name | Business Attribute Standard Value Description  |
|------|----------------------------|--|---|--|
| CS36 | Client Status              | The client status for receiving services.<br>The client can have multiple statuses | Referred                                  | Includes clients that are waiting for eligibility determination and/or consent for the services  |
|      |                            | during the reporting period.   | Screened                                  | Includes eligible clients that consented to service;<br>that have been assessed and/or that have a service<br>plan developed. The client has no active service.  |
|      |                            |  | Waiting                                   | Includes assessed clients with a service plan<br>developed; that are waiting for initial service or<br>between services. The client has no active service.   |
|      |                            |  | Active                                    | Active, receiving at least one service. The client can<br>be assessed or could wait for other services but<br>must have at least one service active.   |
|      |                            |  | Discharged                                | Discharged, service plan complete with follow up pending. The client has no active service.  |
|      |                            |  | Closed                                    | Closed, service plan complete; follow up complete;<br>closed to the agency. Includes status for a client<br>that is not eligible for CYMH services or client<br>(parent/guardian) did not consent for the services |
| CS37 | Client Status Start Date   | The date when the client status was<br>determined                                  | N/A                                       |  |
| CS38 | Client Status End Date     | The date when the client status<br>changed   | N/A                                       | Can be NULL  |

### 5.9 CYMH Client-Service BAs for Services

#### CYMH Services and Sub-Services<sup>11</sup>

- A348 Brief Services
- A349 Counselling/Therapy Services
- A350 Crisis Support Services
- A351 Family/Caregiver Skills Building and Support
- A353 Intensive Treatment Services
  - A353-1: Intensive community-based/day treatment services
  - A353-2: Intensive in-home services
  - A353-3: Intensive out-of-home services.
- A355 Specialized Consultation and Assessment
- A356 Targeted Prevention
- A357 System Management

| Code  | Business<br>Attribute Name | Business Attribute<br>Description  | Business Attribute<br>Standard Value              | Business Attribute Standard<br>Value Description           |
|-------|----------------------------|--|---|--|
| CS39  | Service<br>Identification  | A code and name that<br>uniquely identifies the CYMH<br>service type offered to the<br>client  | http://www.children.gov.on.ca/hte<br>omh/pgr.aspx | docs/English/professionals/specialneeds/m                  |
| CS39a | TPBE ID                    | The ID for Transfer Payment<br>Budget Entity   | N/A   | Applicable to Intake, Assessment and Service (Sub-Service) |
| CS40  | Service Start Date         | The date when the service<br>started for the client. If the<br>service started in a previous<br>reporting period, the start date<br>is still reported. | N/A   |  |
| CS41  | Service End Date           | The date when the service<br>ceased to be delivered to the<br>client. If the service is still<br>offered the date is null.                             | N/A   | Can be NULL  |

<sup>&</sup>lt;sup>11</sup> For more details see PGR at <u>Community-Based Child and Youth Mental Health Program Guidelines and Requirements</u>

| CS42 | Service Sub-Type<br>Identification         | A code and name that<br>uniquely identifies the CYMH<br>service sub-type offered to the<br>client  |   | Applies only to A353 – Intensive<br>Treatment Services  |
|------|--|--|---|---|
| CS43 | Service Delivery<br>Start Date             | The start date and time when<br>the unit of service output (an<br>instance) began being<br>provided  | N/A   | out of scope  |
| CS44 | Service Delivery<br>End Date               | The end date and time when<br>the unit of service output (an<br>instance) stopped being<br>provided  | N/A   | out of scope  |
| CS45 | Consultation Type                          | A classification of the consultation that the client received as part of the specialized consultation and assessment service.  | diagnosis<br>clinical formulation<br>treatment directions<br>medication consultation<br>other | Applicable to the following services: A355<br>Specialized Consultation and Assessment<br>Service  |
| CS46 | Client Direct<br>Service Hours<br>Received | The number of direct service<br>hours the client received (as<br>opposed to staff delivered see<br>Staff Direct Service Hours<br>Delivered). This is the no. of<br>hours for the client, service<br>and service sub-type defined<br>above.<br>Measure collected at the level<br>of the CSP for each client | N/A   | Applicable to the following services:<br>A355 Specialized Consultation and<br>Assessment Service;<br>A348 Brief Service,<br>A349 Counselling/Therapy Service,<br>A350 Crisis Service,<br>A353 Intensive Treatment Service/<br>Service Sub-Type Day Treatment,<br>A353 Intensive Treatment Service /<br>Service Sub-Type Intensive In-Home<br>Service,<br>A353 Intensive Treatment Service,<br>Service Sub-Type Out-of-Home<br>Residential Service,<br>A351 Family/ Caregiver Skills Building<br>and Support |
| CS47 | Client Residential<br>Resource Allocated   | The resource type allocated to the client.   | residential bed   | Applies only to A353 – Intensive<br>Treatment Services  |
|      |  |  | day treatment placement   |   |
|      |  |  | other   |   |

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### 5.10 CYMH Client-Service BAs for Process

#### CYMH Processes and Sub-Processes<sup>12</sup>

- A352 Access Intake Service Planning
  - 1: Coordinated Access
  - 2: Intake, Eligibility and Consent
  - 3: Identifying Strengths, Needs and Risks
- A354 Service Coordination
  - 4: Child, Youth and Family Engagement
  - 5: Service Planning and Review
  - 6: Case Management and Service Coordination
  - 7: Monitor and Evaluate Client Response to Service
  - 8: Transition Planning and Preparation

#### For Business Processes diagrams see Appendix A: CYMH Client-Service Business Processes.

| Code | Business<br>Attribute<br>Name      | Business Attribute<br>Description   | Business Attribute<br>Standard Value  | Business Attribute Standard<br>Value Description  |
|------|------------------------------------|---|---|---|
| CS48 | Process<br>Identification          | A code and name that uniquely identifies the process offered to the client. <sup>13</sup>   | http://www.children.gov.on.ca/htdocs/English/documents/specialneeds/men<br>talhealth/pgr1.pdf |   |
| CS49 | Process Sub-Type<br>Identification | A code and name that uniquely identifies a CYMH process sub-<br>type offered to the client.   | http://www.children.gov.on.ca/htdocs/English/documents/specialneeds/mentalhealth/pgr1.pdf     |   |
| CS50 | Initial Contact<br>Date            | The date the prospective client<br>or parent/guardian with<br>permission contacted the<br>service provider to seek help or<br>service (e.g. a phone call) | N/A   | Access Intake Service Planning Process<br>/ Intake And Eligibility Determination<br>Sub-Process |
| CS51 | Intake Date                        | The date when a prospective<br>client provides basic<br>information and eligibility<br>determination is done.   | N/A   | Access Intake Service Planning Process<br>/ Intake and Eligibility Determination<br>Sub-Process |

<sup>&</sup>lt;sup>12</sup> The processes defined as per PGR at <u>Community-Based Child and Youth Mental Health Program Guidelines and Requirements</u>

<sup>&</sup>lt;sup>13</sup> See Appendix A for process diagrams, extracts from CYMH Business Architecture (2012-2014)

| Code | Business<br>Attribute<br>Name          | Business Attribute<br>Description                  | Business Attribute<br>Standard Value   | Business Attribute Standard<br>Value Description   |
|------|--|--|--|--|
| CS52 | Third Party<br>Referral Source<br>Type | The classification of the referral source types.   | school<br>early years<br>health providers<br>youth justice<br>child protection<br>developmental<br>other   | Access Intake Service Planning Process<br>/ Intake And Eligibility Determination<br>Sub-Process. |
| CS53 | Self-Referral Type                     | The classification of the self-<br>referral types. | <ul> <li>Adopted Child</li> <li>Adoptive Parent</li> <li>Aunt</li> <li>Brother</li> <li>Brother-in-law</li> <li>Child</li> <li>Common-Law Partner</li> <li>Cousin</li> <li>Daughter</li> <li>Daughter-in-law</li> <li>Ex-spouse</li> <li>Foster Parent</li> <li>Friend</li> <li>God Child</li> <li>Grandfather</li> <li>Grandmother</li> <li>Nephew</li> <li>Niece</li> <li>Parent or sole legal<br/>custody or Joint<br/>legal Custody or Shared<br/>legal Custody or Split legal<br/>Custody or non-custodial<br/>parent</li> <li>Partner</li> <li>Self</li> </ul> | Access Intake Service Planning Process<br>/ Intake And Eligibility Determination<br>Sub-Process. |
|      |  |  |  |  |

|      |  |  | <ul> <li>Sister</li> <li>Sister-in-law</li> <li>Son</li> <li>Son-in-law</li> <li>Spouse</li> <li>Stepchild</li> <li>Stepfather</li> <li>Step-parent</li> <li>Step-sib</li> <li>Substitute Decision<br/>Maker or Court<br/>Appointed Guardian or<br/>Temporary Care<br/>Agreement or Crown Ward<br/>or Society Ward</li> <li>Uncle</li> <li>Other</li> </ul> |  |
|------|--|--|---|--|
| CS54 | Eligibility<br>Assessment Date                       | The date when a prospective<br>client meets the eligibility rules<br>(can be same as intake date)  | N/A   | Access Intake Service Planning Process<br>/ Intake And Eligibility Determination<br>Sub-Process. |
| CS55 | Agreement Start<br>Date (Consent to<br>Service Date) | The date that consent is<br>provided to engage in service.<br>E.g. prospective client meets<br>eligibility criteria and agrees to<br>services offered. | N/A   | Access Intake Service Planning Process<br>/ Intake And Eligibility Determination<br>Sub-Process  |
| CS56 | Non-Eligibility                                      | A code and name for non-   | Over 18 years of age  | Access Intake Service Planning Process   |
|      | Reason   | eligibility reason. Includes the<br>reason when the client or  | Not an Ontario resident<br>No consent for services  | / Intake And Eligibility Determination<br>Sub-Process  |
|      |  | parent/ guardian does not sign the consent for services.   | No consent for services   |  |

| Code | Business<br>Attribute<br>Name | Business Attribute<br>Description                                | Business Attribute<br>Standard Value | Business Attribute Standard<br>Value Description   |
|------|-------------------------------|--|--------------------------------------|--|
| CS57 | Consent to<br>Services        | Indicates client (or<br>parent/guardian) consent for<br>services | Yes<br>No<br>Not required            | Access Intake Service Planning Process<br>/ Intake And Eligibility Determination Sub-<br>Process   |
| CS58 | Consent to share              | The value of true or false for the                               | Yes                                  | Sharing of de-identified data with the   |
|      | information                   | client (or parent/guardian)<br>consent to share information      | No                                   | Ministry does not require explicit client<br>consent. The default value for consent to<br>share should be 'Yes'. It can also be left<br>as blank.  |
|      |                               |  |                                      | For the exceptional scenario, where<br>clients are very concerned about sharing<br>any of their information for general<br>planning purposes, they can choose to<br>opt out of consenting to share data (i.e.<br>consent to share is 'No'). CIS Vendors<br>should not send these records to the<br>ministry. |
|      |                               |  |                                      | Data Sharing Agreements are to be<br>established prior to sending any data and<br>it is expected that core service providers<br>will adhere to PHIPA requirements when<br>sharing client information with lead<br>agencies.  |
|      |                               |  |                                      | Refer to Appendix I: CS58 – Consent to Share for further details on usage of this element.   |

| Code | Business<br>Attribute<br>Name      | Business Attribute<br>Description   | Business Attribute<br>Standard Value | Business Attribute Standard<br>Value Description   |
|------|------------------------------------|---|--------------------------------------|--|
| CS59 | Client Risk Level                  | A number and name that identifies client risk level   | No risk                              | Access Intake Service Planning Process / Intake<br>And Eligibility Determination Sub-Process   |
|      |                                    | identifies client fisk level  | Low risk                             | High Risk Client:  |
|      |                                    |   | Medium risk                          | - risk of harm to self<br>- risk of harm to others   |
|      |                                    |   | High risk                            | - in immediate need of hospitalization   |
| CS60 | Referral to Crisis<br>Service Date | The date when client is<br>referred to the crisis service<br>once client or parent/guardian<br>has agreed. (can be same as<br>intake date)        | N/A                                  | Access Intake Service Planning Process<br>/ Intake And Eligibility Determination<br>Sub-Process  |
| CS61 | Needs<br>Assessment Start<br>Date  | The date the needs<br>assessment process starts.<br>Assessment Start Date may be<br>the same date as the Referral<br>Date for a specific service. | N/A                                  | Access Intake Service Planning Process / Identify<br>Needs And Strengths Sub-process; Service<br>Coordination Process / Monitor Needs And Adjust<br>Services Sub-process |
| CS62 | Needs<br>Assessment End<br>Date    | The date the needs<br>assessment process is<br>completed (can be same as<br>Needs Assessment Start Date)  | N/A                                  | Access Intake Service Planning Process / Identify<br>Needs And Strengths Sub-process; Service<br>Coordination Process / Monitor Needs And Adjust<br>Services Sub-process |
| CS63 | Client Need                        | A code and name for high-level  | Behaviour                            | Access Intake Service Planning Process   |
|      | Category <sup>14</sup>             | need category   | Substance Use                        | / Identify Needs And Strengths Sub-  |
|      |                                    |   | Emotional                            | process; Service Coordination Process /  |
|      |                                    |   | Self-Harm                            | Monitor Needs And Adjust Services  |
|      |                                    |   | Sexual                               | Sub-process  |
|      |                                    |   | Social                               |  |
|      |                                    |   | Psychiatric<br>Trauma                |  |
|      |                                    |   | Adaptive-Functioning                 |  |
|      |                                    |   | Family Needs                         |  |
|      |                                    |   | Other                                |  |
|      |                                    |   | Other                                |  |

<sup>14</sup> For Client Needs Sub-Category see Appendix B: Client Needs Category and Sub-Category

| Code | Business<br>Attribute<br>Name     | Business Attribute<br>Description  | Business Attribute<br>Standard Value   | Business Attribute Standard<br>Value Description   |
|------|-----------------------------------|--|--|--|
| CS64 | Client Strength<br>Category       | A code and name for the various strengths identified for the client  | Talents / Interests<br>Attributes<br>Activities<br>Formal / informal supports<br>Cultural identity<br>Family relationships<br>Family attributes<br>Other | Access Intake Service Planning Process<br>/ Identify Needs And Strengths Sub-<br>process; Service Coordination Process /<br>Monitor Needs And Adjust Services<br>Sub-process   |
| CS65 | Client Needs<br>Category Level    | A code and name that identifies the level for each identified client need.   | no need<br>risk/no action<br>need identified/action<br>urgent/priority need  | Access Intake Service Planning Process<br>/ Identify Needs And Strengths Sub-<br>process; Service Coordination Process /<br>Monitor Needs And Adjust Services<br>Sub-process   |
| CS66 | Client Strength<br>Category Level | A code and name that<br>identifies the level for each<br>identified client strength.   | key strength<br>opportunity for strength to be<br>developed<br>no strength; needs<br>development   | Access Intake Service Planning Process<br>/ Identify Needs And Strengths Sub-<br>process; Service Coordination Process /<br>Monitor Needs And Adjust Services<br>Sub-process   |
| CS67 | Client With<br>Complex Needs      | An indicator that identifies the<br>clients with complex needs.<br>The indicator capture<br>child/youth worker assessment<br>based on PGR. | Yes<br>No  | Access Intake Service Planning Process<br>/ Identify Needs And Strengths Sub-<br>process; Service Coordination Process /<br>Monitor Needs And Adjust Services<br>Sub-process<br>See PGR (page 6)<br>Note: The assessment to "complex<br>needs" can be done at intake or at any<br>point in client lifecycle. |

| Code        | Business<br>Attribute<br>Name | Business Attribute<br>Description  | Business Attribute<br>Standard Value                      | Business Attribute Standard<br>Value Description   |
|-------------|-------------------------------|--|---|--|
| CS68        | Referral to Service<br>Date   | The date(s) when client is referred to service(s) once client or parent/guardian has agreed.   | N/A   | Service Coordination Process /<br>Development Services Plan Sub-<br>process<br>Each service has a Referral to Service<br>Date                  |
| CS69        | Service Plan<br>Version Date  | The date(s) when the service<br>plan version(s) is/are created or<br>revised   | N/A   | Service Coordination Process /<br>Development Services Plan Sub-<br>process<br>Each service has a Service Plan<br>Version Date                 |
| CS70        | Wait List In Date             | The date(s) when the client is placed on the waitlist for specific service(s).   | N/A   | Service Coordination Process /<br>Development Services Plan Sub-<br>process<br>Each service has a Wait List In Date                            |
| CS71        | Client Wait Status<br>Type    | A classification of the client wait<br>status in the waiting list for a<br>service as: Wait Time or Client   | Wait Time   | Service Coordination Process /<br>Development Services Plan Sub-<br>process  |
|             |                               | not available.   | Client not available                                      | It is assumed that when a client Wait<br>Status Type is 'Client not available',<br>the time is not considered for time on<br>service waitlist. |
| CS72        | Wait List Out Date            | The date(s) when client is<br>removed from a wait list often<br>due to service start up. This<br>date can be the start date for a<br>specific service. | N/A<br>Can be Null  | Service Coordination Process /<br>Development Services Plan Sub-<br>process<br>Each service has a Wait List Out Date                           |
| <b>CS73</b> | Removal from Wait             |  | Client opts out   | Service Coordination Process /   |
|             | List Reason                   |  | Services booked or delivered<br>Client no longer eligible | Development Services Plan Sub-<br>process<br>Each service has a Removal from<br>Wait List Reason if Wait List Out Date<br>is not null          |

| Code | Business<br>Attribute<br>Name                      | Business Attribute<br>Description  | Business Attribute<br>Standard Value Name | Business Attribute Standard<br>Value Description               |
|------|--|--|---|--|
| CS74 | Client Clinical<br>Determination Of                | From the perspective of direct service staff, indicates that   | Yes                                       | Service Coordination Process / Discharge<br>Client Sub-process |
|      | The Outcome  | there has been an overall<br>clinical determination on the<br>outcome for the child/youth  | No  |  |
| CS75 | Client Clinical<br>Determination As                | As identified by direct service staff, indicates that child/youth  | Yes                                       | Service Coordination Process / Discharge<br>Client Sub-process |
|      | Positive Outcome                                   | has positive response to<br>treatment<br>Positive outcome is a clinical<br>formulation based on: Reduction<br>in severity of needs or symptoms;<br>and/or Improvement in<br>functioning/enhanced strengths;<br>and Majority (more than 50%) of<br>treatment goals successfully<br>attained | No  |  |
| CS76 | Client Clinical<br>Determination Of<br>The Outcome | As identified by direct service<br>staff, indicates the client with<br>whom a validated tool was   | Yes                                       | Service Coordination Process / Discharge<br>Client Sub-process |
|      | (standardized tool)                                | completed at start of service<br>and discharge (also known as<br>a pre/post using a<br>standardized measure)   | No  |  |
| CS77 | Determination As                                   | As identified by direct service staff, indicates the clients with  | Yes                                       | Service Coordination Process / Discharge<br>Client Sub-process |
|      | Positive Outcome<br>(standardized tool)            | whom a validated tool was<br>completed at start of service<br>and discharge, and use of the<br>tool indicated a positive<br>outcome at discharge   | No  |  |

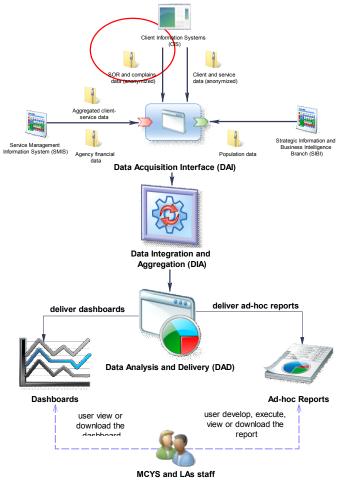
| CS78 | Standardized tool<br>used for client<br>outcome<br>determination | The code and name that<br>identifies the standardized tool<br>used for client outcome<br>determination  | <ul> <li>BCFPI-3 (Brief Child<br/>and Family Phone<br/>Interview)</li> <li>CAFAS (Child And<br/>Adolescent Functional<br/>Assessment Scale)</li> <li>CANS (CHILD AND<br/>ADOLESCENT NEEDS<br/>AND STRENGTHS)-<br/>MH</li> <li>GAIN-SS (GAIN- Short<br/>Screener)</li> <li>HONOSCA (Health of<br/>the Nation Outcome<br/>Scales Child and<br/>Adolescent Mental<br/>Health)</li> <li>interRAI Assessments</li> <li>SDQ (Strengths and<br/>Difficulties<br/>Questionnaire)</li> <li>Other</li> </ul> | Service Coordination Process / Discharge<br>Client Sub-process |
|------|--|---|--|--|
| CS79 | Client Consent on<br>Outcome                                     | Indicates the client and/or<br>parent/guardian (as<br>appropriate) agree on the<br>service outcome.<br>To be applied for CS75 and/or<br>CS77. | Yes<br>No<br>Client/Guardian Not Available   | Service Coordination Process / Discharge<br>Client Sub-process |

| Code | Business<br>Attribute<br>Name       | Business Attribute<br>Description                        | Business Attribute<br>Standard Value Name | Business Attribute Standard<br>Value Description  |
|------|-------------------------------------|--|---|---|
| CS80 | Client Transition<br>Need           | The client need for transition to                        | Adult mental health                       | Service Coordination Process / Discharge  |
|      |                                     | other services.  | Developmental                             | Client Sub-process  |
|      |                                     |  | Addictions                                |   |
|      |                                     |  | Education Supports                        |   |
| 0004 | Transition Consist                  |  | Other                                     | Comise Coordination Process / Discharge   |
| CS81 | Transition Service<br>Provider Type | A classification of the transition service provider type | school<br>adult services                  | Service Coordination Process / Discharge<br>Client Sub-process  |
|      | i lovider Type                      | service provider type                                    | health providers                          | Cheft Oub-process   |
|      |                                     |  | youth justice                             |   |
|      |                                     |  | child protection                          |   |
|      |                                     |  | developmental                             |   |
|      |                                     |  | addiction service provider                |   |
|      |                                     |  | other                                     |   |
| CS82 | Discharge Date                      | The date a client is discharged from the agency          | N/A                                       | Service Coordination Process / Discharge<br>Client Sub-process  |
| CS83 | Client Discharge<br>Reason          | A code and name that identifies the client discharge     | Client opts out                           | Youth/parent opt out, refuses to participate in service/no-show for service   |
|      |                                     | reason.  | Services delivered                        | Services delivered and goals achieved   |
|      |                                     |  | Client no longer eligible                 | Client no longer eligible location/age for<br>service and/or transitioned to non-MOH<br>services. The client will be transitioned to<br>other service providers. Details of<br>transition are captured in Outgoing<br>Referral Event. |

| Code        | Business<br>Attribute<br>Name             | Business Attribute<br>Description  | Business Attribute<br>Standard Value Name | Business Attribute Standard<br>Value Description               |
|-------------|---|--|---|--|
| CS84        | Follow-up Date                            | The date when a client is<br>contacted for follow-up after<br>discharge to determine if<br>progress has been sustained<br>or if more services are<br>required. | N/A                                       | Service Coordination Process /<br>Discharge Client Sub-process |
| <b>CS85</b> | Client Disposition The code and name that |  | continued improvement                     | Service Coordination Process /                                 |
|             | After Follow-up                           | identify the client disposition  | no change                                 | Discharge Client Sub-process                                   |
|             | after follow-up                           |  | worsened                                  |  |

# 6. CYMH Client Serious Occurrences (SOR) and Client Complaints Business Attributes

The source for Client SOR and Client Complaints business attributes is the Client Information Systems (CISs) that supports the core service provider for CYMH services. SOR & Complaints data from CIS is out of scope due to security and privacy concerns.





# 6.1 CYMH Client SOR and Complaints BAs Structure

The business attributes arranged in a hierarchical (nested) structure representing the relationships between data sets.

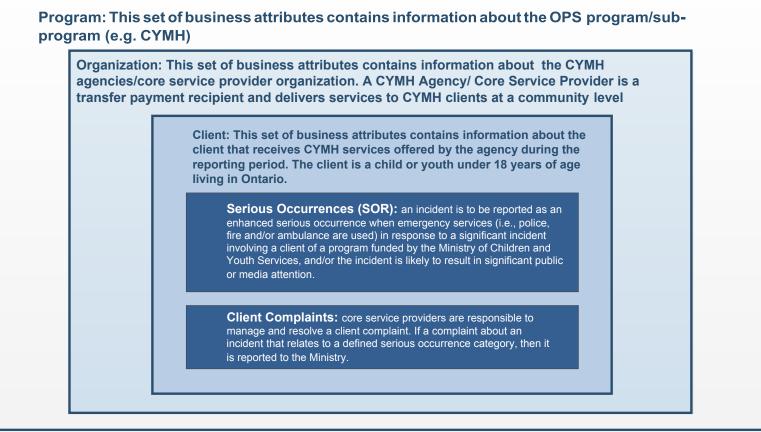


Figure 9: Client SOR and Complaints Structure

Client SOR and Complaints share the same business attributes for Program, Reporting, Organization and Client from Client-Service set.

# 6.2 CYMH Client SOR Specific BAs

SOR & Complaints data from CIS out of scope due to security and privacy concerns.

| Code | Business<br>Attribute<br>Name              | Business Attribute<br>Description                               | Business Attribute<br>Standard Value Name | Business Attribute Standard Value Description |
|------|--|---|---|---|
| SOR1 | Serious<br>Occurrence Report<br>Identifier | The string that uniquely identify the SOR                       | N/A                                       |   |
| SOR2 | Client SOR Status                          | atus The status of the client at the time of the SOR occurrence | Crown Ward                                |   |
|      |  |   | Society Ward                              |   |
|      |  |   | Temporary Care Agreement                  |   |
|      |  | Continued Care and Support<br>for Youth                         |   |   |
|      |  |   | Customary Care                            |   |
|      |  |   | In Parental/ Guardian(s) Care             |   |
|      |  |   | Other                                     |   |

| Code | Business<br>Attribute<br>Name                          | Business<br>Attribute<br>Description | Business Attribute<br>Standard Value Name | Business Attribute Standard Value<br>Description   |
|------|--|--------------------------------------|---|--|
| SOR3 | Serious<br>Occurrence Report<br>Category <sup>15</sup> | The<br>t classification<br>of an SOR | 1. Death of a client                      | Occurs while participating in a service, including all clients receiving<br>community-based support services that are funded or licensed by MCSS<br>and/or MCYS  |
|      |  |                                      | 2. Serious injury / illness to a client   | Occurs while participating in a service. Serious injuries may include:<br>medication errors that resulted in an injury/illness; Injuries (consider<br>whether an injury should be reported if professional medical treatment,<br>such as a doctor or dentist, is required, not in-house first aid) |

 <sup>15</sup> SOR Category defined as per SOR Guidelines (Appendix C)

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 Medium Sensitivity

| 3. Alleged, witnessed or suspected abuse                     | Alleged abuse or mistreatment of a client' which occurs while<br>participating in a service With regard to children, see CFSA Sections 37<br>and 72, with respect to a child in need of protection and the duty to<br>report.<br>Under the Ministry of Community and Social Services Act (VAW,<br>interpreter, and intervenor programs), abuse includes: (a) to suffer<br>physical harm; (b) to be sexually molested or sexually exploited; (c) to<br>require but not be provided with medical treatment; and (d)<br>psychological, verbal, emotional, financial abuse or mistreatment. |
|--|---|
| 6. Complaint about operational, physical or safety standards | Is considered serious by the service agency, which could include:<br>adverse water quality; reports of excess lead; improper storage of<br>hazardous/dangerous substances, including but not limited to toxic<br>cleaners or lamp oil, in the residence; medication error (not resulting in<br>an injury/illness); missing or stolen files; and neighbour complaint about<br>noise or physical appearance of the property (only where municipal<br>authorities are involved).   |
| 7. Complaint made by or about a client                       | Involving a person participating in a service (client or staff) that is<br>considered by the service agency to be of a serious nature, e.g.: police<br>involvement with a client (client charged by police); assault by client<br>against staff, peers or community member; assault by non-caregiver<br>against client, e.g., friend, another client, stranger; inappropriate<br>disciplinary techniques, e.g., excessive, non-sanctioned; and complaints<br>arising from sexual contact between clients  |
| 8. Restraint of a client                                     | A holding technique to restrict a resident's ability to move freely. See<br>Child and Family Services Act (CFSA) R.R.O. 1990, Regulation 70,<br>Sections 109.1-3. Does not include the restriction of movement, physical<br>redirection or physical prompting, if the restriction of movement is brief,<br>gentle and a part of a behaviour teaching program, or the use of helmets,<br>protective mitts or other equipment to prevent a resident from physically<br>injuring or further physically injuring himself or herself.  |

| Code | Business<br>Attribute<br>Name                | Business Attribute<br>Description  | Business Attribute<br>Standard Value Name | Business Attribute Standard Value Description     |
|------|--|--|---|---|
| SOR4 | Serious<br>Occurrence Report<br>Sub-Category | The classification of an SOR sub-category  | See appendix D                            | Place Holder for future development <sup>16</sup> |
| SOR5 | Serious<br>Occurrence Date                   | The date when the SOR occurred. If the incident started in a previous reporting period, the date is still reported.                                  | N/A                                       |   |
| SOR6 | Serious<br>Occurrence Report<br>End Date     | The date when the SOR ended<br>and a resolution was delivered<br>to the client. If the incident is<br>not resolved, the attribute<br>should be null. | N/A                                       |   |
| SOR7 | Serious                                      | The description of the SOR   | submitted                                 |   |
|      | Occurrence Report                            | status   | under investigation                       |   |
|      | Resolution Status                            |  | approved                                  |   |
|      |  |  | closed                                    | Closed-Resolved<br>Closed-Unresolved              |

<sup>&</sup>lt;sup>16</sup> See Appendix D for more details 09/28/20

# 6.3 CYMH Client Complaints Specific BAs

SOR & Complaints data from CIS are out of scope due to security and privacy concerns.

| Code  | Business<br>Attribute Name                | Business Attribute<br>Description  | Business Attribute<br>Standard Value Name | Business Attribute Standard<br>Value Description   |
|-------|---|--|---|--|
| SOR8  | Client Complaint<br>Identifier            | The string that uniquely identify the client complaint   | N/A                                       |  |
| SOR9  | Client Complaint                          | The classification of a client   | Client-related                            |  |
|       | Category                                  | complaint category   | Service-related                           |  |
|       |   |  | Agency-related                            |  |
|       |   |  | Other                                     |  |
| SOR10 | Client Complaint<br>Sub-Category          | The classification of a client<br>complaint sub-category   | TBD                                       | Place Holder for future development <sup>17</sup>  |
| SOR11 | Client Complaint<br>Date                  | The date the client submitted the complaint. Assumed the complaint does not span over multiple days. | N/A                                       |  |
| SOR12 | Client Complaint The code and name of the | The code and name of the<br>complaint status   | submitted                                 |  |
|       |   |  | under investigation                       |  |
|       |   |  | approved                                  |  |
|       |   |  | closed                                    | Closed-Resolved<br>Closed-Unresolved   |
| SOR13 | Client Complaint<br>Resolution Date       | The date when the resolution is recorded   | N/A                                       |  |
| SOR24 | SOR Identifier<br>Linked to Complaint     | The identifier of the SOR that the compliant is connected to (if applicable)                         | N/A                                       | The attribute captures the link between<br>the complaint and SOR. A complaint<br>can be done as effect of an SOR and/or<br>a complaint may become and SOR. |

<sup>&</sup>lt;sup>17</sup> See Appendix D for more details for needs sub-category

# 7. CYMH Financial Business Attributes

The source for financial business attributes could be the Service Management Information System (SMIS) for CYMH services; or Integrated Financial Information System (IFIS).

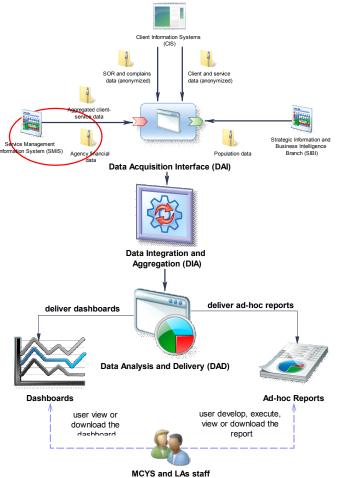


Figure 10: CYMH Financial source

The list of business attributes were developed based on <u>Electronic Manual of Ministry Administration (EMMA)</u>. The attributes support the development of the Performance Indicators (P13).

#### 7.1 CYMH Financial BAs Structure

The business attributes arranged in a hierarchical (nested) structure representing the relationships between data sets.

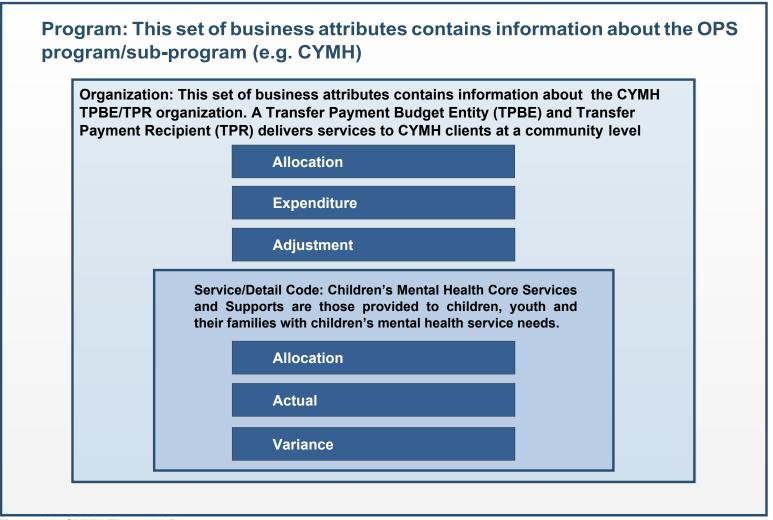


Figure 11: CYMH Financial Bas structure

09/28/20

#### 7.2 Financial Calendar Year Hierarchy

Financial business attributes represent core service provider (TPR) allocations and expenditures data. This data is issued during the Financial Calendar Year that starts on April 1<sup>st</sup> and ends on March 31<sup>st</sup>.

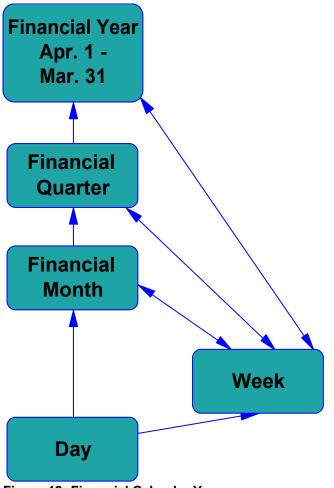
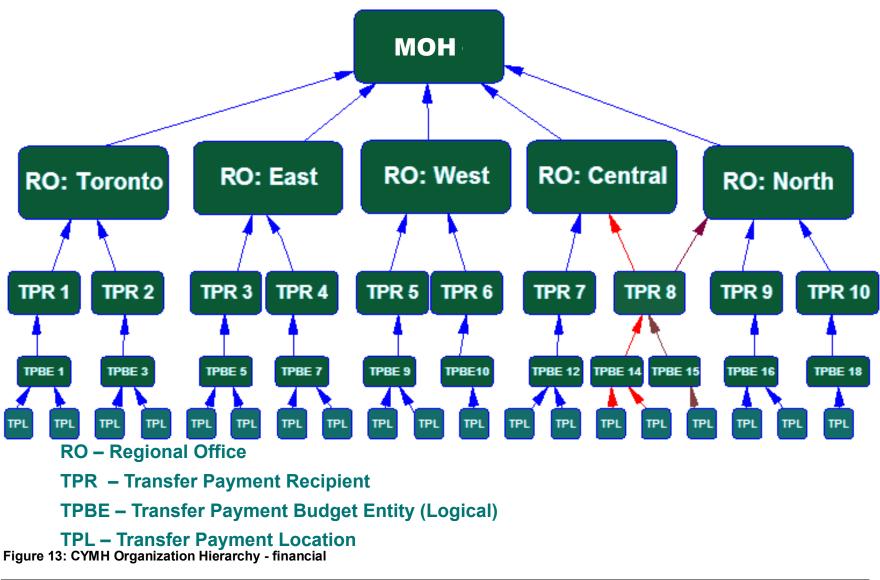


Figure 12: Financial Calendar Year

# 7.3 CYMH Organization Hierarchy (view of financial data)



| 7.4 | CYMH Financial BAs for Program |  |
|-----|--------------------------------|--|
|-----|--------------------------------|--|

| Code | Business<br>Attribute Name                            | Business Attribute<br>Description   | Business Attribute<br>Standard Value                | Business Attribute<br>Standard Value<br>Description   |
|------|---|---|---|---|
| FN01 | (Sub-)Program<br>Identification in IFIS               | The id and the official name (label)<br>that uniquely identifies the (Sub-)<br>Program in IFIS.                 | Child & Family Intervention<br>Services (B091-B245) |   |
| FN02 | Program Start<br>Financial Date                       | The date in the financial calendar when the program started   | TBD   |   |
| FN03 | Program End<br>Financial Date                         | The date in the financial calendar<br>when the program ended. This date<br>is NULL if the program is in effect. | null  |   |
| FN04 | Funding Legislation                                   | The legislation for funding of the program  | Child and Family Services Act<br>(CFSA)             |   |
| FN05 | Program Legislated<br>Share Funded by<br>the Ministry | The % that the ministry owner of the program finances the program   | N/A   | Note: the Ministry does not want<br>agencies to report on activities where<br>there is funding from non-Ministry<br>sources |

# 7.5 CYMH Financial BAs for Reporting

| Code | Business<br>Attribute Name               | Business Attribute<br>Description   | Business Attribute<br>Standard Value | Business Attribute<br>Standard Value<br>Description |
|------|--|---|--------------------------------------|---|
| FN06 | Reporting Period<br>Start Financial Date | The start date in the financial<br>calendar of the reporting period for<br>the CYMH BI Solution purpose.      | N/A                                  |   |
| FN07 | Reporting Period<br>End Financial Date   | The end date in the financial<br>calendar of the reporting period for<br>the CYMH BI Solution purpose.        | N/A                                  |   |
| FN08 | Reporting Financial<br>Date              | The date in the financial calendar<br>when the file with financial data has<br>been sent to CYMH BI Solution. | N/A                                  |   |

#### 7.6 CYMH Financial BAs for Service

| Code | Business<br>Attribute Name    | Business Attribute<br>Description  | Business Attribute<br>Standard Value Name   | Business Attribute<br>Standard Value<br>Description |
|------|-------------------------------|--|---|---|
| FN09 | Detail Code<br>Identification | The code and name that identify the service/process in IFIS <u>Subline ID Description</u> : The eight-digit subline and corresponding description from the <i>Chart of Accounts</i> <u>Detail Code Description</u> : The three-digit detail code from the Chart of Accounts. | <u>Electronic Manual of Ministry</u><br><u>Administration (EMMA)</u><br><u>http://intra.smis.css.gov.on.ca/s</u><br><u>mis/pdfnn/22a_Appendix%20to</u><br><u>%20Reports.pdf</u> | IFIS/SMIS   |

| Code | Business<br>Attribute<br>Name               | Business Attribute<br>Description                | Business Attribute<br>Standard Value Name              | Business Attribute Standard<br>Value Description |      |
|------|---|--|--|--|------|
| CS11 | Regional Office<br>Identification           | The id and official name that                    | North  | http://www.children.gov.on.ca/htdocs/e           |      |
|      | Identification                              | uniquely identifies a CYMH regional office (RO). | East   | nglish/about/regionaloffices.aspx                |      |
|      |   |  | Central  |  |      |
|      |   |  |  | West   | West |
|      |   |  | Toronto  |  |      |
| FN10 | Transfer Payment<br>Recipient (TPR)         | The id, name and description of TPR              | Electronic Manual of Ministry<br>Administration (EMMA) |  |      |
| FN11 | Transfer Payment<br>Budget Entity<br>(TPBE) | The id, name and description of the TPBE         | Electronic Manual of Ministry<br>Administration (EMMA) |  |      |
| FN12 | Transfer Payment<br>Location (TPL)          | The id, name and description of the TPL          | Electronic Manual of Ministry<br>Administration (EMMA) | Out of scope for rollout #1                      |      |

# 7.7 CYMH Financial BAs for Organization

| 7.8 CYMH FINANCIAI BAS for Ministry Level | 7.8 | CYMH Financial BAs for Ministry Level |
|---|-----|---------------------------------------|
|---|-----|---------------------------------------|

| Code      | Business<br>Attribute Name               | Business Attribute<br>Description  | Business Attribute<br>Standard Value<br>Name | Business Attribute Standard Value Description  |
|-----------|--|--|--|--|
|           | Ministry Level                           |  |  | AC-1A Allocations<br>EMMA – Budget Master File/ Expenditure Worksheet  |
| FN13 (M)  | Allocation                               |  |  | Year to Date: although reported quarterly the values<br>are accumulative year to date  |
| FN13a (M) | Fiscal Allocation (\$)                   | Allocations based on a fiscal year period (April 1 to March 31)  | N/A  | Includes all allocation statuses and types   |
| FN13b (M) | Annualized Allocation                    | The projected funding provided to<br>each service entity for a full 12-month<br>period. This amount does not<br>include any one-time funding applied<br>in the current fiscal allocation | N/A  | Annualized figures ensure that funding will continue at<br>an appropriate level even if an amended ongoing<br>contract or CFSA approval is not available prior to the<br>end of the current term of the budget schedule  |
| FN13c (M) | Calendar Allocation                      | When the budget period of a contract<br>is Jan1 to Dec 31, the subsidy<br>provided to a service entity calendar<br>year  | N/A  |  |
| FN13d (M) | School Calendar<br>Allocation            | When the budget period of a contract is Sep1 to Aug 31   | N/A  |  |
| FN14 (M)  | Gross Expenditures (\$)                  | <u>EMMA – Budget Master File/</u><br>Expenditure Worksheet   | N/A  | This line is the sum of (Salaries & Benefits),<br>(Transportation and Communication), (Services),<br>(Supplies and Equipment), (Other Transactions). It<br>reflects the total costs for the delivery of a service and<br>may also be useful in analyzing the costs of a unit of<br>service. Although the Ministry may only fund a portion<br>of this total cost, it is important to know the real costs of<br>the service and not just what the Ministry subsidizes. |
| FN15 (M)  | Adjustments                              |  |  | Year End (Q4)  |
| FN15a (M) | Adjusted Service<br>Expenditures (\$)    | EMMA – Budget Master File/<br>Expenditure Worksheet  |  | Not in SMIS but could be calculated Adjusted Service<br>Expenditures = Adjusted Gross Expenditures -<br>Allocated Central Administration   |
| FN15b (M) | Allocated Central<br>Administration (\$) | EMMA – Budget Master File/<br>Expenditure Worksheet  |  |  |
| FN15c (M) | Adjusted Gross<br>Expenditures (\$)      | Adjusted Gross Expenditures =<br>Adjusted Service Expenditures +<br>Allocated Central Administration   | N/A  | The Adjusted Gross Expenditures are expenditures<br>approved for ministry funding. This is the amount upon<br>which the ministry funding formula is applied. This is<br>determined by taking the Gross Expenditures and<br>applying the appropriate adjustments (e.g., adding or<br>subtracting adjustments/recoveries, offsetting revenue<br>and allocated central administration).   |

## 7.9 CYMH Financial BAs for RO Level

| Code       | Business<br>Attribute Name               | Business Attribute<br>Description   | Business Attribute<br>Standard Value<br>Name | Business Attribute Standard Value Description  |
|------------|--|---|--|--|
|            | Regional Office L                        | evel  |  | AC-1A Allocations<br>EMMA – Budget Master File/ Expenditure Worksheet  |
| FN13 (RO)  | Allocation                               |   |  | Year to Date: although reported quarterly the values are accumulative year to date   |
| FN13a (RO) | Fiscal Allocation (\$)                   | Allocations based on a fiscal year period (April 1 to March 31)   | N/A  | Includes all allocation status and types   |
| FN13b (RO) | Annualized<br>Allocation                 | The projected funding provided to<br>each service entity for a full 12-<br>month period. This amount does not<br>include any one-time funding applied<br>in the current fiscal allocation | N/A  | Annualized figures ensure that funding will continue at<br>an appropriate level even if an amended ongoing<br>contract or CFSA approval is not available prior to the<br>end of the current term of the budget schedule  |
| FN13c (RO) | Calendar Allocation                      | When the budget period of a contract<br>is Jan1 to Dec 31, the subsidy<br>provided to a service entity calendar<br>year   | N/A  |  |
| FN13d (RO) | School Calendar<br>Allocation            | When the budget period of a contract is Sep1 to Aug 31  | N/A  |  |
| FN14 (RO)  | Gross Expenditures<br>(\$)               | EMMA – Budget Master File/<br>Expenditure Worksheet   | N/A  | This line is the sum of (Salaries & Benefits),<br>(Transportation and Communication), (Services),<br>(Supplies and Equipment), (Other Transactions). It<br>reflects the total costs for the delivery of a service and<br>may also be useful in analyzing the costs of a unit of<br>service. Although the Ministry may only fund a portion<br>of this total cost, it is important to know the real costs of<br>the service and not just what the Ministry subsidizes. |
| FN15 (RO)  | Adjustments                              |   |  | Year End (Q4)  |
| FN15a (RO) | Adjusted Service<br>Expenditures (\$)    | EMMA – Budget Master File/<br>Expenditure Worksheet   |  | Not in SMIS but could be calculated Adjusted Service<br>Expenditures = Adjusted Gross Expenditures -<br>Allocated Central Administration   |
| FN15b (RO) | Allocated Central<br>Administration (\$) | EMMA – Budget Master File/<br>Expenditure Worksheet   |  |  |
| FN15c (RO) | Adjusted Gross<br>Expenditures (\$)      | Adjusted Gross Expenditures =<br>Adjusted Service Expenditures +<br>Allocated Central Administration  | N/A  | The Adjusted Gross Expenditures are expenditures<br>approved for ministry funding. This is the amount upon<br>which the ministry funding formula is applied. This is<br>determined by taking the Gross Expenditures and<br>applying the appropriate adjustments (e.g., adding or<br>subtracting adjustments/recoveries, offsetting revenue<br>and allocated central administration).   |

## 7.10 CYMH Financial BAs for TPR/TPBE Level

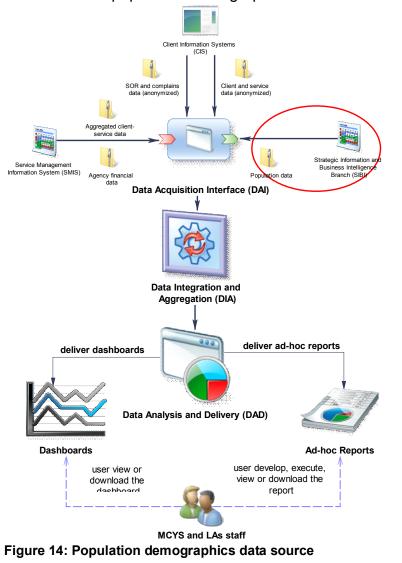
| Code       | Business<br>Attribute Name               | Business Attribute<br>Description  | Business Attribute<br>Standard Value<br>Name | Business Attribute Standard Value Description  |
|------------|--|--|--|--|
|            | <b>TPR/TPBE</b> Level                    |  |  | SD-2A, SD-2E,<br>EMMA – Budget Master File/ Expenditure Worksheet  |
| FN13 (TP)  | Allocation                               |  |  | Year to Date: although reported quarterly the values are accumulative year to date   |
| FN13a (TP) | Fiscal Allocation (\$)                   | Allocations based on a fiscal year period (April 1 to March 31)  | N/A  | Includes all allocation statuses and types   |
| FN13b (TP) | Annualized Allocation                    | The projected funding provided to<br>each service entity for a full 12-month<br>period. This amount does not<br>include any one-time funding applied<br>in the current fiscal allocation | N/A  | Annualized figures ensure that funding will continue at<br>an appropriate level even if an amended ongoing<br>contract or CFSA approval is not available prior to the<br>end of the current term of the budget schedule  |
| FN13c (TP) | Calendar Allocation                      | When the budget period of a contract<br>is Jan1 to Dec 31, the subsidy<br>provided to a service entity calendar<br>year  | N/A  |  |
| FN13d (TP) | School Calendar<br>Allocation            | When the budget period of a contract is Sep1 to Aug 31   | N/A  |  |
| FN14 (TP)  | Gross Expenditures<br>(\$)               | EMMA – Budget Master File/<br>Expenditure Worksheet  | N/A  | This line is the sum of (Salaries & Benefits),<br>(Transportation and Communication), (Services),<br>(Supplies and Equipment), (Other Transactions). It<br>reflects the total costs for the delivery of a service and<br>may also be useful in analyzing the costs of a unit of<br>service. Although the Ministry may only fund a portion<br>of this total cost, it is important to know the real costs of<br>the service and not just what the Ministry subsidizes. |
| FN15 (TP)  | Adjustments                              |  |  | Year End (Q4)  |
| FN15a (TP) | Adjusted Service<br>Expenditures (\$)    | EMMA – Budget Master File/<br>Expenditure Worksheet  |  | Not in SMIS but could be calculated Adjusted Service<br>Expenditures = Adjusted Gross Expenditures -<br>Allocated Central Administration   |
| FN15b (TP) | Allocated Central<br>Administration (\$) | EMMA – Budget Master File/<br>Expenditure Worksheet  |  |  |
| FN15c (TP) | Adjusted Gross<br>Expenditures (\$)      | Adjusted Gross Expenditures =<br>Adjusted Service Expenditures +<br>Allocated Central Administration   | N/A  | The Adjusted Gross Expenditures are expenditures<br>approved for ministry funding. This is the amount upon<br>which the ministry funding formula is applied. This is<br>determined by taking the Gross Expenditures and<br>applying the appropriate adjustments (e.g., adding or<br>subtracting adjustments/recoveries, offsetting revenue<br>and allocated central administration).   |

## 7.11 CYMH Financial BAs for Subline/Detail Code Level

| Code  | Business<br>Attribute Name       | Business Attribute<br>Description   | Business Attribute<br>Standard Value Name | Business Attribute Standard Value Description                           |
|-------|----------------------------------|---|---|---|
|       | TPR / TPBE / Subline             | / Detail Code   |   | <u>SD-2A, SD-2E</u><br>EMMA – Budget Master File/ Expenditure Worksheet |
| FN16  | Service Data                     | Measure as no. of units (quantity). Total number of clients   |   | YTD, Y/E  |
| FN16a | Service Data<br>Approved Targets | The service target under the service entity for each service data element.                              | N/A                                       |   |
| FN16b | Service Data Actuals             | The actual services for the<br>service entity for each<br>service data element.                         | N/A                                       |   |
| FN16c | Service Data<br>Variances        | The difference between the expected target and the actual for each data element for the service entity. | N/A                                       |   |

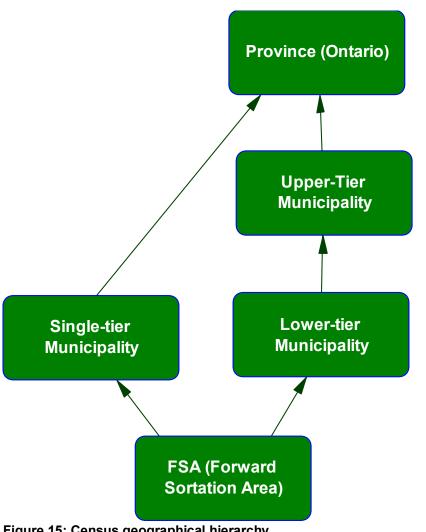
# 8. CYMH Population Demographics Business Attributes

The source for population demographics attributes is Strategic Information and Business Intelligence (SIBI).



09/28/20

#### Census Geographical Hierarchy (view of population demographic data) 8.1



| Code | Business<br>Attribute Name                            | Business Attribute<br>Description   | Business Attribute<br>Standard Value Name   | Business Attribute Standard<br>Value Description   |
|------|---|---|---|--|
| PD1  | Census Year of<br>Publishing Data                     | The year when the census data was published   |   | It is assumed that for CYMH BI<br>Solution census data for population<br>demographic is published by <u>Census</u><br><u>division of Ontario</u>   |
| PD2  | Population Data<br>Type                               | The census data type could be projected and actual  | projected<br>actual   |  |
| PD3  | Population<br>Estimates Year of<br>Reference for Data | The year that population<br>estimates data is referring (as<br>projected or actual)                 |   |  |
| PD4  | Census Division of<br>Ontario<br>Identification       | The id and the official name<br>(label) that uniquely identifies<br>the Census Division of Ontario. | <u>https://en.wikipedia.org/wiki/Census_division</u><br><u>s_of_Ontario</u>             | The census divisions of Ontario are<br>used by Statistics Canada to<br>aggregate census data.<br>With two exceptions,[1] they<br>correspond to Ontario's first-level<br>administrative divisions, of which there<br>are three types: single-tier<br>municipalities, upper-tier municipalities,<br>and districts. |
| PD5  | Type of Census<br>Divisions                           | The code and name that<br>classifies the Census Division<br>of Ontario                              | https://en.wikipedia.org/wiki/Census division<br>s of Ontario#Types of census divisions |  |
| PD6  | Population Subject<br>Identifier                      | The code and name of the census subjects of measurement   | Population Demographic  | A simple model: subjects of<br>measurement ("Subjects") and their<br>possible demographic breakdowns<br>("Qualifiers")<br>E.g. Subject: Total Population;<br>Applicable Qualifiers: Sex, Age, etc  |
| PD7  | Population Qualifier<br>Identifier                    | The code and name of the census qualifier of  | Age   |  |
|      |   | measurement   | Gender  |  |
| PD8  | Population<br>Estimates Quantity<br>Measure           | The measure that specifies the no. of population per qualified for a specific Census division       | N/A   |  |

## 8.2 Population Demographics Business Attributes

# 9. CYMH Performance Indicators (PIs)

Performance Indicators: collect measures of output types. These types of metrics are collected for short-term and intermediate-term, should be developed to demonstrate the achievement of ministry strategies and/or the contribution of ministry strategies to meeting government priorities.

- Efficiency: collects performance indicators that measure the extent to which a strategy (program) is producing its planned outputs in relation to use of inputs.
  - Service Utilization
  - Service Duration
  - Clients Receiving Brief Treatment Requiring No Other Services
- Effectiveness: collects performance indicators that measure the extent to which a strategy (program) is producing its planned outcomes and meeting intended objectives.
  - Access: Wait time for clients receiving services
  - Client perception of the service system
  - Value for investment
- Customer Satisfaction (Responsiveness): collects performance indicators that measure the degree to which the intended recipients or beneficiaries of a product or service indicate that the product or service meets their needs and expectations for quality and efficiency.
  - Clients with positive outcomes
  - Client and/or parent/caregiver perception of positive outcome
  - Number of incidents (including serious occurrence and client complaints)
- Client Centeredness: profiling the client to ensure that the child & youth is at the enter of the CYMH services
  - Proportion of Children and Youth Population Served
  - Profile of Children and Youth Served (age, gender)
  - Profile of Children and Youth with Complex mental health needs

#### 9.1 CYMH PIs Endorsed Minute

- On January 17, 2017 and February 2, 2017, the Technical Sub-Group of the CYMH Data Working Group reviewed the CYMH Performance Indictors (PIs) as originally defined during the 2012-13 Business Architecture Exercise.
- On these dates, the Technical Sub-Group provided feedback to the PIs. That feedback includes language changes for clarity, the removal of some calculated performance measures, and additional calculated performance measures for data collection. This feedback is to be incorporated into the data dictionary which is a critical artifact to be used for the design of the CYMH BI Solution.
- This document entitled "CYMH PIs Endorsed (March 1, 2017) by CYMH Data Working Technical Sub-Group" has a complete list of the CYMH PIs and summary of the changes made to original PIs from 2012-13 Business Architecture Exercise.
- On March 1, 2017, the Technical Sub-Group endorsed the CYMH PI framework for the CYMH BI Solution.
- It was noted that there will be future opportunities to review and refine the PIs.

#### 9.2 CYMH Performance Indicators

| Code   | Output<br>Measure<br>Name                               | Output Measure<br>Description  | Output Measure Calculation  | Applicable to<br>Business Process /<br>Service /<br>Tool  | Interpretative<br>Utility  |
|--------|---|--|---|---|--|
| 1. Who | o are we servin   | ıg?  |   |   |  |
| Client | Profile   |  |   |   |  |
| P1     |   |  |   |   |  |
| P1a    | Proportion of<br>children/youth<br>population<br>served | Number of unique<br>children/youth served<br>during the reporting<br>period as a proportion<br>of child/youth<br>population, by<br>community | <ul> <li>Numerator = Number of (unique)<br/>children/youth served during the<br/>reporting period</li> <li>Denominator =Total children/youth<br/>population</li> <li>Number of (unique) children/youth<br/>served: the total number of unique<br/>children/youth who were eligible and<br/>consented to receive CYMH services<br/>from the core service provider and for<br/>whom a record has been created, within<br/>one reporting period (i.e., a unique<br/>count of open clients whether waiting,<br/>receiving or between services).</li> <li>Unique: A child/youth served by multiple<br/>core service providers counted only<br/>once at SA, RO or Ministry level<br/>(uniqueness on the organization<br/>hierarchy). A child/youth served through<br/>multiple quarters counted only once at<br/>year-end or year-to-date (uniqueness<br/>on the calendar year hierarchy).</li> </ul> | Clarification: the<br>performance indicator<br>does not include the no.<br>of families served as<br>A356 – Targeted<br>Prevention<br>Includes no. of unique<br>children/youth registered<br>for A351 – Family/<br>Caregiver Skills Building<br>and Support, although the<br>child/youth may not<br>participate in the service<br>but his/her family did.<br>The indicator can be reported at<br>multiple level in the organization<br>hierarchy: province (ministry)<br>level, at regional office level and<br>at service area level (drill-down) | Monitor at<br>community,<br>regional and<br>provincial levels to<br>ascertain reach of<br>program and<br>planning for<br>resources, based<br>on changes in<br>population and/or<br>prevalence<br>estimates |

| Code   | Output<br>Measure<br>Name   | Output Measure<br>Description   | Output Measure Calculation   | Applicable to<br>Business Process /<br>Service /<br>Tool   | Interpretative<br>Utility  |  |  |  |  |
|--------|---|---|--|--|--|--|--|--|--|
| 1. Who | 1. Who are we serving?  |   |  |  |  |  |  |  |  |
| Client | Profile   |   |  |  |  |  |  |  |  |
| P1     |   |   |  |  |  |  |  |  |  |
| P1b    | Number of<br>participants in<br>sessions /<br>workshop /<br>training            | The total number of<br>individuals participating<br>in educational sessions/<br>workshops/ training<br>during the reporting<br>period | The measure is collected at core<br>service provider level (CIS) and sent to<br>BI Solution  | Applicable to the<br>following services: A356<br>Targeted Prevention<br>The indicator can be reported<br>at multiple levels in the<br>organization hierarchy:<br>province (ministry) level, at<br>regional office level, service<br>area level and core service<br>provider (drill-down)   |  |  |  |  |  |
| P1c    | Proportion of<br>prospective<br>children/ youth<br>not eligible for<br>services | Proportion of<br>prospective clients at<br>intake not eligible for<br>services during the<br>reporting period.                        | Numerator = Number of (unique)<br>children/youth at intake not eligible for<br>service. The intake must occur during<br>the reporting period.<br>Denominator = Number of (unique)<br>children/youth at intake. The intake<br>must occur during the reporting period. | No service specific<br>(intake)<br>The indicator can be reported<br>at multiple levels in the<br>organization hierarchy:<br>province (ministry) level, at<br>regional office level, service<br>area level and core service<br>provider (drill-down)<br>The PI reported by non-<br>eligibility reason (age,<br>residency or consent). | Monitor at<br>community and<br>regional level to<br>identify barriers to<br>service due to<br>eligibility or lack of<br>information/<br>understanding re<br>offering |  |  |  |  |

| Code   | Output<br>Measure<br>Name   | Output Measure<br>Description  | Output Measure Calculation   | Applicable to<br>Business Process /<br>Service /<br>Tool  | Interpretative<br>Utility   |
|--------|---|--|--|---|---|
| 1. Who | o are we serving  | g?   |  |   |   |
| Client | Profile   |  |  |   |   |
| P2     |   |  |  |   |   |
| P2a    | Profile of<br>children/youth<br>served by<br>gender and age   | Number of unique<br>children/youth by gender<br>and age, as a proportion<br>of the total number of<br>unique children/youth<br>served during the<br>reporting period   | Numerator = Number of (unique)<br>children/youth served during the<br>reporting period by gender and age<br>Denominator = Number of (unique)<br>children/youth served during the<br>reporting period                                     | Clarification: the<br>performance indicator<br>does not include the<br>children/youth served<br>during A356 – Targeted<br>Prevention<br>The indicator can be reported<br>at multiple levels in the<br>organization hierarchy:<br>province (ministry) level, at<br>regional office level, service<br>area level and core service<br>provider (drill-down)  | Monitor proportion of<br>clients by gender<br>receiving different<br>services to<br>determine need for<br>program<br>adjustments.   |
| P2b    | Profile of<br>children/youth<br>by need<br>category and<br>level of severity<br>at initial (intake)<br>assessment | Number of unique<br>children/youth by initial<br>need category and level<br>of severity, as a<br>proportion of the total<br>number of unique<br>children/youth served.<br>Initial means the first<br>needs assessment at<br>intake; subsequent needs<br>assessments are not<br>being considered for this<br>indicator. Initial<br>assessment must occur<br>during the reporting<br>period. | Numerator = Number of (unique)<br>children/youth by need category and<br>level of severity assessed at initial<br>(intake) assessment;<br>Denominator = Number of (unique)<br>children/youth served in the reporting<br>period at intake | No service specific<br>(intake)<br>The indicator can be reported<br>at multiple levels in the<br>organization hierarchy:<br>province (ministry) level, at<br>regional office level, service<br>area level and core service<br>provider (drill-down)<br>The PI reported by:<br>- Behavioral Assessed Needs,<br>- Social Assessed Needs,<br>- Substance Use Assessed<br>Needs,<br>- Trauma Assessed Needs,<br>- Complex Assessed Needs. | Monitor proportion of<br>clients by needs<br>receiving different<br>services to track<br>changes in<br>presenting needs<br>over time to adjust<br>service offerings;<br>track change in<br>severity levels over<br>time (i.e., with earlier<br>intervention severity<br>should decrease). |

| Code   | Output<br>Measure<br>Name   | Output Measure<br>Description  | Output Measure Calculation  | Applicable to<br>Business Process /<br>Service /<br>Tool   | Interpretative<br>Utility |
|--------|---|--|---|--|---------------------------|
| 1. Who | o are we servin   | g?   |   |  |                           |
| Client | Profile   |  |   |  |                           |
| P2     |   |  |   |  |                           |
| P2c    | Profile of<br>children/youth<br>by need<br>category and<br>severity at<br>discharge<br>assessment | Number of unique<br>children/youth by final<br>need category and level<br>of severity, as a<br>proportion of the total<br>number of unique<br>children/youth served.<br>Final means the last<br>needs assessment at<br>discharge; previous<br>needs assessments are<br>not being considered for<br>this indicator. Final<br>assessment must occur<br>during the reporting<br>period. | Numerator = Number of (unique)<br>children/youth by need category and<br>level of severity assessed at<br>discharge. Discharge must occur<br>during the reporting period.<br>Denominator = Number of (unique)<br>children/youth discharged in a given<br>period. Discharge must occur during<br>the reporting period. | No service specific<br>(discharge)<br>The indicator can be reported<br>at multiple levels in the<br>organization hierarchy:<br>province (ministry) level, at<br>regional office level, service<br>area level and core service<br>provider (drill-down)<br>The PI reported by:<br>- Behavioral Assessed Needs,<br>- Scoial Assessed Needs,<br>- Substance Use Assessed<br>Needs,<br>- Trauma Assessed Needs,<br>- Complex Assessed Needs. |                           |

| Code   | Output<br>Measure<br>Name                      | Output Measure<br>Description                  | Output Measure Calculation   | Applicable to<br>Business Process /<br>Service /<br>Tool   | Interpretative<br>Utility   |
|--------|--|--|--|--|---|
| 1. Who | o are we serving                               | l?   |  |  |   |
| Client | Profile  |  |  |  |   |
| P3     |  |  |  |  |   |
| Ρ3     | Average ages of<br>children/youth at<br>intake | Average age of<br>children/youth at<br>intake. | Numerator = Total ages of all clients<br>at intake. Intake must occur during the<br>reporting period.<br>Denominator = Number of (unique)<br>children/youth at intake. Intake must<br>occur during the reporting period<br>The child/youth age is to be considered<br>at the end of the reporting period in<br>case that child/youth's birthday occurs<br>during the reporting period. | No service specific<br>(intake)<br>The indicator can be reported<br>at multiple levels in the<br>organization hierarchy:<br>province (ministry) level, at<br>regional office level, service<br>area level and core service<br>provider (drill-down)<br>The PI reported by:<br>-clients who are between ages<br>of 0-5,<br>-clients who are between ages<br>of 6-10,<br>- clients who are between ages<br>of 11 -14,<br>- clients who are between ages<br>of 15-18. | Monitor at<br>community, regional<br>and provincial levels<br>for changes in<br>average age at<br>intake over time,<br>with trending to<br>younger ages<br>providing evidence<br>of earlier<br>intervention<br>occurring. |

| Code   | Output<br>Measure<br>Name | Output Measure<br>Description | Output Measure Calculation | Applicable to<br>Business Process /<br>Service /<br>Tool | Interpretative<br>Utility |
|--------|---------------------------|-------------------------------|----------------------------|--|---------------------------|
| 1. Who | are we servin             | g?                            |                            |  |                           |
| Client | Profile                   |                               |                            |  |                           |
| P4     |                           |                               |                            |  |                           |

| P4a | Profile of<br>children/youth<br>with complex<br>mental health<br>needs served | The proportion of<br>children/youth with complex<br>mental health needs (as per<br>PGR) served as a<br>proportion of total number<br>of unique children/youth<br>served during the reporting<br>period.<br>PGR extract: "Children and youth<br>with multiple and/or complex<br>special needs are those children<br>and youth who may need multiple<br>specialized services (e.g.,<br>rehabilitation services, autism<br>services or respite care) due to the<br>depth and breadth of their needs.<br>They may experience challenges<br>related to multiple areas of their<br>development, including their<br>physical, communication,<br>intellectual, emotional, social<br>and/or behavioural development<br>and require services from multiple<br>sectors and/or professionals. They<br>are also likely to have ongoing<br>service needs. Children and youth<br>with multiple/or complex special<br>needs are a subset of the<br>population of children and youth<br>with special needs." | Numerator = The number of unique<br>children/youth with complex mental<br>health needs, as evaluated by staff<br>working children/youth, served<br>during the reporting period<br>Denominator = The number of<br>unique children/youth served during<br>the reporting period | Clarification: the<br>performance measure<br>does not include the<br>children/youth served<br>during A356 – Targeted<br>Prevention<br>Clarification on<br>assessment: check all<br>assessments completed<br>for a child/youth by the<br>end of reporting period<br>Clarification on service<br>inclusion: include all<br>services except A356<br>received by a child/<br>youth by the end of<br>reporting period<br>The indicator can be reported<br>at multiple levels in the<br>organization hierarchy:<br>province (ministry) level, at<br>regional office level, service<br>area level and core service<br>provider (drill-down)<br>The PI reported by:<br>- clients with complex needs<br>receiving Specialized<br>Consultation / Assessment<br>services | Monitor at<br>community, regional<br>and provincial levels<br>to track change in<br>severity levels over<br>time (i.e., with earlier<br>intervention severity<br>should decrease) |
|-----|---|---|--|---|---|
|-----|---|---|--|---|---|

| Code   | Output<br>Measure<br>Name   | Output Measure<br>Description  | Output Measure Calculation  | Applicable to<br>Business Process /<br>Service /<br>Tool  | Interpretative<br>Utility  |
|--------|---|--|---|---|--|
| 1. Who | are we servin   | g?   |   |   |  |
| Client | Profile   |  |   |   |  |
| P4     |   |  |   |   |  |
| P4b    | Proportion of<br>high risk<br>children/youth<br>served at<br>intake | The number of unique<br>children/youth classified<br>as high risk at intake,<br>as a proportion of total<br>number of unique<br>children/youth at intake.<br>Note: Determined by<br>child/youth worker, is<br>not derived<br>- risk of harm to self<br>- risk of harm to others<br>- in immediate need of<br>hospitalization | Numerator = The number of unique<br>children/youth classified as high risk at<br>intake. Intake must occur during the<br>reporting period.<br>Denominator = The number of unique<br>children/youth at intake. Intake must<br>occur during the reporting period. | No service specific<br>(intake)<br>The indicator can be reported<br>at multiple levels in the<br>organization hierarchy:<br>province (ministry) level, at<br>regional office level, service<br>area level and core service<br>provider (drill-down) | Monitor at<br>community and<br>regional level to<br>track shifts in high<br>risk needs and<br>potential<br>adjustments to<br>service offerings |

| Code    | Output Measure<br>Name                    | Output Measure<br>Description   | Output Measure<br>Calculation  | Applicable to<br>Business Process /<br>Service /<br>Tool   | Interpretative<br>Utility  |
|---------|---|---|--|--|--|
| 2. Wha  | t are we providing?                       | ,   |  |  |  |
| Efficie | ncy                                       |   |  |  |  |
| P5      |   |   |  |  |  |
| P5a     | Service Utilization<br>(per core service) | Proportion of children/youth<br>by each core service, as a<br>percentage of all<br>children/youth served<br>during the reporting period | Numerator = Number of<br>(unique) children/youth by<br>each core service served<br>during the reporting period;<br>Denominator = Number of<br>(unique) children/youth<br>served during the reporting<br>period | Clarification: the<br>performance measure<br>does not include the<br>children/youth served<br>during A356 – Targeted<br>Prevention<br>The indicator can be reported<br>at multiple levels in the<br>organization hierarchy:<br>province (ministry) level, at<br>regional office level, service<br>area level and core service<br>provider (drill-down)<br>The PI reported by:<br>A348 – Brief Services,<br>A349 – Counselling/Therapy<br>Services,<br>A350 – Crisis Services,<br>A350 – Crisis Services,<br>A353 – Intensive Treatment<br>Services,<br>A351 – Specialized<br>Consultation and Assessment<br>Service<br>A351 – Family/ Caregiver<br>Skills Building and Support | Snapshot<br>breakdown at<br>community,<br>regional and<br>provincial levels of<br>services provided<br>to monitor trends in<br>types of services<br>provided over time<br>to inform service<br>system planning<br>and changes to<br>program design |

| Code    | Output Measure<br>Name  | Output Measure<br>Description   | Output Measure<br>Calculation   | Applicable to<br>Business Process /<br>Service /<br>Tool            | Interpretative<br>Utility  |
|---------|---|---|---|---|--|
| 2. Wha  | t are we providing?   |   |   |   |  |
| Efficie | ncy   |   |   |   |  |
| P5      |   |   |   |   |  |
| P5b     | Intensive Service<br>Utilization<br>(per sub-service of<br>Intensive Treatment<br>Services) | The proportion of intensive<br>spaces being utilized in a<br>given period for<br>a) residential beds<br>b) day treatment<br>placements. | On hold; calculation TBD<br>Information includes weekly<br>counts and locations of<br>available beds and<br>placements.<br>Numerator: Number of filled<br>residential beds;<br>Denominator: Total number<br>of residential beds<br>Numerator: Number of filled<br>day treatment spaces;<br>Denominator: Total number<br>of day treatment spaces | Applicable core services:<br>A353 – Intensive<br>Treatment Services | Monitor at<br>community,<br>regional and<br>provincial levels<br>percentage of<br>available residential<br>bed and day<br>treatment capacity<br>utilized (efficiency<br>measure) |

| Code     | Output Measure<br>Name                 | Output Measure<br>Description   | Output Measure<br>Calculation  | Applicable to<br>Business Process /<br>Service /<br>Tool   | Interpretative<br>Utility  |
|----------|--|---|--|--|--|
| 2. What  | are we providing?                      |   |  |  |  |
| Efficien | су                                     |   |  |  |  |
| P6       |  |   |  |  |  |
| P6a      | Service Duration<br>(per core service) | The average length of time<br>between service start date<br>and service end date, by<br>service | Numerator = The length of<br>time between service start<br>date and service end date,<br>by service. The service end<br>date must be during<br>reporting period.<br>Denominator = Number of<br>(unique) children/youth, by<br>service, that ends the<br>service in the reporting<br>period | Clarification: the<br>performance measure<br>does not include the<br>children/youth served<br>during A356 – Targeted<br>Prevention<br>The indicator can be reported<br>at multiple levels in the<br>organization hierarchy:<br>province (ministry) level, at<br>regional office level, service<br>area level and core service<br>provider (drill-down)<br>The PI reported by:<br>A348 – Brief Services,<br>A349 – Counselling/Therapy<br>Services ,<br>A350 – Crisis Services,<br>A353 – Intensive Treatment<br>Services,<br>A355 - Specialized<br>Consultation and Assessment<br>Service<br>A351 – Family/ Caregiver<br>Skills Building and Support | Monitor at<br>community,<br>regional and<br>provincial levels to<br>identify trends in<br>average length of<br>time in service by<br>service type to<br>inform service<br>delivery and<br>program design |

| Code      | Output Measure<br>Name  | Output Measure<br>Description  | Output Measure<br>Calculation   | Applicable to<br>Business Process /<br>Service /<br>Tool   | Interpretative<br>Utility |
|-----------|---|--|---|--|---------------------------|
| 2. What a | are we providing?   |  |   |  |                           |
| Efficienc | су.   |  |   |  |                           |
| P6        |   |  |   |  |                           |
| P6b       | The average direct<br>service hours<br>received<br>(per core service) | The average no. of direct<br>service hours received by<br>child/youth per active<br>children/youth (per core<br>service) | Numerator = The number of<br>direct service hours the<br>client received, by each core<br>service, during reporting<br>period.<br>The numerator is collected<br>at core service provider level<br>(CIS) and sent to BI<br>Solution.<br>Denominator = Number of<br>(unique) children/youth, by<br>service, during reporting<br>period. | Clarification: the<br>performance measure<br>does not include the<br>children/youth served<br>during A356 – Targeted<br>Prevention<br>The indicator can be reported<br>at multiple levels in the<br>organization hierarchy:<br>province (ministry) level, at<br>regional office level, service<br>area level and core service<br>provider (drill-down)<br>The PI reported by:<br>A348 – Brief Services,<br>A349 – Counselling/Therapy<br>Services ,<br>A350 – Crisis Services,<br>A353 – Intensive Treatment<br>Services,<br>A355 - Specialized<br>Consultation and Assessment<br>Service<br>A351 – Family/ Caregiver<br>Skills Building and Support |                           |

| Code     | Output Measure<br>Name  | Output Measure<br>Description  | Output Measure<br>Calculation   | Applicable to<br>Business Process /<br>Service /<br>Tool   | Interpretative<br>Utility |
|----------|---|--|---|--|---------------------------|
| 2. What  | are we providing?   |  |   |  |                           |
| Efficien | су  |  |   |  |                           |
| P6       |   |  |   |  |                           |
| P6c      | Direct service<br>hours delivered by<br>staff<br>(per core service) | The total number of hours of<br>"direct" service provided by<br>staff to individuals, by each<br>core service, during reporting<br>period. | The measure is collected at<br>core service provider level<br>(CIS) and sent to BI Solution<br>The hours spent interacting,<br>whether in a group or<br>individually; face to face or<br>on the phone. It does not<br>include work done "on behalf<br>of" clients, such as<br>telephone calls, advocacy,<br>etc.<br>Administrative support to the<br>service is not to be<br>included. For group service,<br>one hour of service equals<br>one hour of service for the<br>entire group. For example: 1<br>hour of group service with 5<br>participants equals one hour<br>of direct service hour. | Clarification: the<br>performance measure<br>does not include the<br>children/youth served<br>during A356 – Targeted<br>Prevention<br>The indicator can be reported<br>at multiple levels in the<br>organization hierarchy:<br>province (ministry) level, at<br>regional office level, service<br>area level and core service<br>provider (drill-down)<br>The PI reported by:<br>A348 – Brief Services,<br>A349 – Counselling/Therapy<br>Services ,<br>A350 – Crisis Services,<br>A353 – Intensive Treatment<br>Services,<br>A355 - Specialized<br>Consultation and Assessment<br>Service<br>A351 – Family/ Caregiver<br>Skills Building and Support |                           |
| P6d      | Indirect service<br>hours delivered by<br>staff                     |  | On hold; calculation TBD<br>The measure is collected at<br>core service provider level<br>(CIS) and sent to BI Solution   |  |                           |

| Code     | Output Measure<br>Name   | Output Measure<br>Description  | Output Measure<br>Calculation  | Applicable to<br>Business Process /<br>Service /<br>Tool   | Interpretative<br>Utility |
|----------|--|--|--|--|---------------------------|
| 2. Wha   | t are we providing   | ?  |  |  |                           |
| Efficier | псу  |  |  |  |                           |
| P7       |  |  |  |  |                           |
| Ρ7       | Proportion of<br>children/youth<br>receiving brief<br>treatment requiring<br>no other services | Proportion of children/youth<br>that received brief treatment<br>that require no further<br>services (exit cohort), as a<br>percentage of all<br>children/youth receiving brief<br>treatment | Numerator = The number of<br>children/youth that received<br>brief services only. The brief<br>service has completed and<br>the client has been<br>discharged during the<br>reporting period.<br>Denominator = Number of<br>(unique) children/youth<br>receiving brief services. This<br>can be the brief service only,<br>or, the brief service with<br>other services. | Applicable core services:<br>A348 – Brief Services<br>The indicator can be reported<br>at multiple levels in the<br>organization hierarchy:<br>province (ministry) level, at<br>regional office level, service<br>area level and core service<br>provider (drill-down) |                           |

| Code   | Output Measure<br>Name            | Output Measure<br>Description  | Output Measure<br>Calculation   | Applicable to<br>Business Process /<br>Service /<br>Tool   | Interpretative<br>Utility  |
|--------|-----------------------------------|--|---|--|--|
| 3. How | well are we servin                | g children, youth and fa   | milies?   |  |  |
| Respo  | nsiveness                         |  |   |  |  |
| P8     |                                   |  |   |  |  |
| P8a    | Clients with<br>Positive Outcomes | Proportion of children/youth<br>with positive response to<br>treatment during reporting<br>period (exit cohort) as<br>identified by child/youth<br>worker. | <ul> <li>Numerator: The unique<br/>number of children/youth to<br/>whom an assessment was<br/>conducted at discharge by<br/>the child/youth worker. The<br/>child/youth worker identifies<br/>that the child/youth has a<br/>positive response to the<br/>treatment. The child/youth<br/>discharge date is during the<br/>reporting period.</li> <li>Denominator: The unique<br/>number of children/youth to<br/>whom an assessment was<br/>conducted at discharge by<br/>child/youth worker. The<br/>child/youth discharge date is<br/>during the reporting period.</li> </ul> | No service specific<br>(discharge)<br>The indicator can be reported<br>at multiple levels in the<br>organization hierarchy:<br>province (ministry) level, at<br>regional office level, service<br>area level and core service<br>provider (drill-down) | Monitor at<br>community, regional<br>and provincial levels<br>percentage of clients<br>demonstrating<br>positive outcomes to<br>services/treatment |

| Code   | Output Measure<br>Name   | Output Measure<br>Description   | Output Measure<br>Calculation  | Applicable to<br>Business Process /<br>Service /<br>Tool   | Interpretative<br>Utility |
|--------|--|---|--|--|---------------------------|
| 3. How | v well are we servin   | g children, youth and fam   | nilies?  |  |                           |
| Respo  | nsiveness  |   |  |  |                           |
| P8     |  |   |  |  |                           |
| P8b    | Proportion of<br>children/youth with<br>positive outcomes<br>as identified by<br>standardized<br>assessment tool | Proportion of children/youth<br>with whom a validated tool<br>completed at start of service<br>and discharge, and use of the<br>tool indicated a positive<br>outcome at discharge (also<br>known as a pre/post using a<br>standardized measure) | Numerator = The number of<br>children/youth with whom a<br>validated tool was completed<br>at start of service and<br>discharge, and use of the<br>tool indicated a positive<br>outcome at discharge.<br>Denominator = The number<br>of children/youth with whom<br>a validated tool was<br>completed at start of service<br>and discharge | No service specific<br>(discharge)<br>The indicator can be reported<br>at multiple levels in the<br>organization hierarchy:<br>province (ministry) level, at<br>regional office level, service<br>area level and core service<br>provider (drill-down) |                           |

| Code   | Output Measure<br>Name   | Output Measure<br>Description  | Output Measure<br>Calculation   | Applicable to<br>Business Process /<br>Service /<br>Tool   | Interpretative<br>Utility  |
|--------|--|--|---|--|--|
| 3. How | / well are we servin   | ig children, youth and fan   | nilies?   |  |  |
| Respo  | nsiveness  |  |   |  |  |
| P9     |  |  |   |  |  |
| Р9     | Proportion of<br>survey responses<br>with positive<br>perception of the<br>outcome | <ul> <li>Proportion of survey<br/>responses with positive<br/>perception of the child/youth<br/>outcome.</li> <li>It is subjective and based on<br/>children/youth (or caregiver)<br/>perception of: <ul> <li>Reduction in level of<br/>needs; or</li> <li>Improvement in level<br/>of strengths; or</li> <li>Many treatment goals<br/>successfully attained<br/>(at least 50%)</li> </ul> </li> </ul> | Numerator: The number of survey<br>responses (anonymous) in a<br>consistent method (by example, a<br>consistent feedback form, verbal<br>questionnaire, or app) at discharge<br>who indicated their experience of<br>service resulted in an outcome that<br>was positive.<br>It is subjective and based on<br>caregiver or youth perception of:<br>• Reduction in level of<br>needs; or<br>• Improvement in level of<br>strengths; or<br>• Many treatment goals<br>successfully attained (at<br>least 50%)<br>Denominator: The number of<br>survey responses (anonymous)<br>from whom feedback was received<br>in a consistent method at discharge.<br>The numerator and denominator<br>determined at CSP level and sent to<br>BI Solution. | No service specific<br>(discharge)<br>The indicator can be reported<br>at multiple levels in the<br>organization hierarchy:<br>province (ministry) level, at<br>regional office level, service<br>area level and core service<br>provider (drill-down) | Monitor at<br>community, regional<br>and provincial levels<br>the percentage of<br>clients (self or<br>parent) reporting<br>positive outcomes<br>as a result of service<br>to demonstrate<br>results |

| Code           | Output Measure<br>Name   | Output Measure<br>Description   | Output Measure<br>Calculation  | Applicable to<br>Business Process /<br>Service /<br>Tool  | Interpretative<br>Utility  |  |  |  |
|----------------|--|---|--|---|--|--|--|--|
| 3. How         | 3. How well are we serving children, youth and families?   |   |  |   |  |  |  |  |
| Safety         |  |   |  |   |  |  |  |  |
| <b>P10 -</b> S | OR & Complaints dat  | a at the level of the childre   | en/youth out of scope due  | to security and privacy   | concerns   |  |  |  |
| P10a           | Number of<br>children/youth with<br>serious occurrence<br>reports or complains                   | The unique number of<br>children/youth with serious<br>occurrence reports and/or<br>complains during reporting<br>period, by type (SOR or<br>compliant).<br>The number of<br>children/youth with serious<br>occurrence report is<br>different from the no. of<br>SOR incidents. One SOR<br>incident may be associated<br>with multiple children/youth<br>or no children/youth | The unique number of<br>children/youth with serious<br>occurrence reports and/or<br>complains during reporting<br>period                             | No service specific<br>The indicator can be reported<br>at multiple levels in the<br>organization hierarchy:<br>province (ministry) level, at<br>regional office level, service<br>area level and core service<br>provider (drill-down) | Monitor at<br>community, regional<br>and provincial<br>levels to track<br>number of clients<br>with serious<br>occurrence reports<br>and/or complains<br>over time as a<br>measure of service<br>system<br>performance |  |  |  |
| P10b           | Number of<br>children/youth with<br>complaints (used to<br>inform P10a) by<br>category           | The unique number of<br>children/youth with<br>complaints during reporting<br>period by category (e.g.<br>Service, Worker, Agency,<br>System, Other)  | The unique number of<br>children/youth with<br>complaints during reporting<br>period by category (e.g.<br>Service, Worker, Agency,<br>System, Other) | No service specific<br>The indicator can be reported<br>at multiple levels in the<br>organization hierarchy:<br>province (ministry) level, at<br>regional office level, service<br>area level and core service<br>provider (drill-down) |  |  |  |  |
| P10c           | Number of<br>children/youth with<br>serious occurrence<br>reports (SOR) (used to<br>inform P10a) | The unique number of<br>children/youth with SOR<br>during reporting period by<br>category   | The unique number of children/youth with SOR during reporting period by category   | No service specific<br>The indicator can be reported<br>at multiple levels in the<br>organization hierarchy:<br>province (ministry) level, at<br>regional office level, service<br>area level and core service<br>provider (drill-down) |  |  |  |  |

| Code   | Output Measure<br>Name                                 | Output Measure<br>Description   | Output Measure<br>Calculation   | Applicable to<br>Business Process /<br>Service /<br>Tool  | Interpretative<br>Utility  |  |  |  |
|--------|--|---|---|---|--|--|--|--|
| 4. How | I. How well is the system performing?                  |   |   |   |  |  |  |  |
| Acces  | s  |   |   |   |  |  |  |  |
| P11    |  |   |   |   |  |  |  |  |
| P11a   | Average service<br>latency                             | Average length of time that<br>children/youth waited to<br>start services during<br>reporting period                          | Numerator: total number of<br>calendar days children/youth<br>have been waiting (i.e., from<br>initial contact date to service<br>start date) for each service<br>that started during the<br>reporting period (exit cohort<br>from waiting list)<br>Denominator = Number of<br>(unique) children/youth<br>waiting for specific treatment<br>services during the reporting<br>period | Applicable core services:<br>A348 – Brief Services, A349 –<br>Counselling/ Therapy<br>Services, A350 – Crisis<br>Services, A353 – Intensive<br>Treatment Services<br>A355 - Specialized<br>Consultation and Assessment<br>Service<br>The indicator can be reported<br>at multiple levels in the<br>organization hierarchy:<br>province (ministry) level, at<br>regional office level, service<br>area level and core service<br>provider (drill-down) | Monitor at community,<br>regional and provincial<br>levels for trends in wait<br>times for specific services<br>over time, as a measure<br>of service system<br>effectiveness; Capture<br>for brief and crisis<br>services initially during<br>introduction of core<br>services only, to ensure<br>clients are not waiting for<br>these services |  |  |  |
| P11b   | Average<br>children/youth time on<br>service waitlists | The average amount of<br>time that clients were on<br>waitlists, for services that<br>started during the reporting<br>period. | Numerator: total numbers of<br>calendar days children/youth<br>have been on the waitlist<br>(i.e., from waitlist in date to<br>waitlist out date) for each<br>service that started during<br>the reporting period;<br>Denominator: Number of<br>(unique) children/youth that<br>were on the waitlist and<br>started to be served during<br>the reporting period.                    | Applicable core services:<br>A348 – Brief Services, A349 –<br>Counselling/Therapy<br>Services,<br>A350 – Crisis Services, A353<br>– Intensive Treatment Services<br>A355 - Specialized<br>Consultation and Assessment<br>Services<br>The indicator can be reported<br>at multiple levels in the<br>organization hierarchy:<br>province (ministry) level, at<br>regional office level, service<br>area level and core service<br>provider (drill-down) | Monitor at<br>community level to<br>identify lags during<br>intake process<br>contributing to<br>lengthy wait times  |  |  |  |

| Code   | Output Measure<br>Name | Output Measure<br>Description   | Output Measure<br>Calculation  | Applicable to<br>Business Process /<br>Service /<br>Tool   | Interpretative<br>Utility   |
|--------|------------------------|---|--|--|---|
| 3. How | well is the system     | performing?   |  |  |   |
| Acces  | S                      |   |  |  |   |
| P11    |                        |   |  |  |   |
| P11c   | Length of wait-list    | The unique number of<br>children/youth on a service<br>wait list during reporting<br>period | The unique number of<br>children/youth on a service<br>wait list during reporting<br>period. | Applicable core services:<br>A348 – Brief Services,<br>A349 – Counselling/<br>Therapy Services,<br>A350 – Crisis Services,<br>A353 – Intensive<br>Treatment Services<br>The indicator can be reported<br>at multiple levels in the<br>organization hierarchy:<br>province (ministry) level, at<br>regional office level, service<br>area level and core service<br>provider (drill-down) | Monitor at<br>community and<br>regional level trends<br>in demand for<br>different services<br>over time in order to<br>adjust resources<br>accordingly |

| Code    | Output Measure<br>Name   | Output Measure<br>Description   | Output Measure<br>Calculation   | Applicable to<br>Business Process /<br>Service /<br>Tool  | Interpretative<br>Utility  |  |  |  |
|---------|--|---|---|---|--|--|--|--|
| 3. How  | <i>v</i> well is the system  | performing?   |   |   |  |  |  |  |
| Effecti | Effectiveness  |   |   |   |  |  |  |  |
| P12     |  |   |   |   |  |  |  |  |
| P12a    | Proportion of survey<br>responses with<br>positive perception of<br>the service system | Proportion of survey<br>responses who reported<br>positive experience with the<br>service system at end of<br>service (discharge). Positive<br>experience of the service<br>system is subjective and<br>based on caregiver/youth<br>perception of:<br>(1) Reasonable length<br>of time waiting for<br>service; or<br>(2) Extent to which<br>service plan was<br>integrated and<br>coordinated; or<br>(3) Client/caregiver<br>was involved in key<br>service-related<br>decisions; or<br>(4) Transitions/referrals<br>were supported and<br>timely | Numerator: the number of survey<br>responses who reported positive<br>experience with the service system<br>at end of service (once service<br>plan is complete and/or discharge<br>is planned). Positive experience of<br>the service system is subjective<br>and based on caregiver/youth<br>perception of:<br>Reasonable length of time waiting<br>for service; and/or<br>Extent to which service plan<br>was integrated and<br>coordinated; or<br>Client/caregiver was involved<br>in key service-related<br>decisions; or<br>Transitions/referrals were<br>supported and timely<br>Denominator: The number of<br>survey responses from whom<br>feedback was received in a<br>consistent method (by example, a<br>consistent feedback form, verbal<br>questionnaire, or app) at<br>discharge.<br>The numerator and denominator<br>determined at CSP level and sent<br>to BI Solution.<br>TPBP CPOSEX# for A354 /<br>MHENDCY# for A354 | No service specific<br>The indicator can be reported<br>at multiple levels in the<br>organization hierarchy:<br>province (ministry) level, at<br>regional office level, service<br>area level and core service<br>provider (drill-down) | Monitor at<br>community,<br>regional and<br>provincial levels to<br>assess degree to<br>which service<br>experience is<br>perceived positively |  |  |  |

| Code    | Output Measure<br>Name                                   | Output Measure<br>Description   | Output Measure<br>Calculation  | Applicable to<br>Business Process /<br>Service /<br>Tool  | Interpretative<br>Utility  |
|---------|--|---|--|---|--|
| 3. How  | v well is the system                                     | performing?   |  |   |  |
| Effecti | veness   |   |  |   |  |
| P12     |  |   |  |   |  |
| P12b    | Proportion of<br>children/youth<br>requiring transitions | The proportion of<br>children/youth discharged<br>during the reporting period<br>and transitioning to other<br>service providers by<br>Transition Service Provider<br>Type. | Numerator = unique number<br>of children/youth discharged<br>during the reporting period<br>and transitioning to other<br>service provider by<br>Transition Service Provider<br>Type.<br>Denominator = unique<br>number of children/youth<br>discharged during the<br>reporting period and<br>transitioning to another<br>service provider | No service specific<br>The indicator can be reported<br>at multiple level in the<br>organization hierarchy:<br>province (ministry) levels, at<br>regional office level, service<br>area level and core service<br>provider (drill-down) | Monitor at<br>community, regional<br>and provincial levels<br>to identify trends in<br>need for transition to<br>other<br>sectors/providers<br>over time |

| Code           | Output Measure<br>Name                                   | Output Measure<br>Description   | Output Measure<br>Calculation  | Applicable to<br>Business Process /<br>Service /<br>Tool | Interpretative<br>Utility  |
|----------------|--|---|--|--|--|
| 3. How         | / well is the system p                                   | performing?   |  |  |  |
| Effecti        | veness   |   |  |  |  |
| <b>P13</b> (se | ee appendix F for more de                                | tails regarding Financial Perfor  | rmance Measure of Not-For Pro  | fit Organizations)                                       |  |
| P13a           | Value for Investment                                     | Initially - Total dollars<br>invested in the program<br>over time; Future - analysis<br>would take into account<br>number of clients served,<br>varied levels of needs,<br>severity and outcomes to<br>determine value for<br>investment. | On hold; calculation TBD   | No service specific –<br>program level                   | Monitor at community,<br>regional and provincial<br>levels to determine unit<br>cost of services which<br>can vary by client profile,<br>taking into account results<br>achieved |
| P13b           | Proportion of<br>administrative<br>expenses              | Proportion of administrative expenses   | Numerator: Allocated<br>Central Administration (\$) for<br>the reporting period (quarter)<br>Denominator: Gross<br>Expenditures (\$) for the<br>reporting period (quarter) | No service specific –<br>TPR level                       |  |
| P13c           | Growth of program<br>expenses (or Variance<br>to Budget) | Percent variance between<br>expenses to date vs<br>budgeted expenses  | On hold; calculation TBD   | No service specific –<br>TPR level                       |  |

| P13d | Program Output Index:<br>Cost per Client | Program Output Index:<br>Cost per Client                | Numerator: Gross<br>Expenditures (\$) for the<br>reporting period (quarter)<br>Denominator: Number of<br>Unique children/youth<br>served during the reporting<br>period (quarter). Child/youth<br>served includes the<br>children/youth in all statuses<br>except the not eligible or not<br>consent for services (same<br>as P1a numerator). | No service specific –<br>TPR level     |  |
|------|--|---|---|--|--|
| P13e | Financial Risk                           | Non-Ministry revenue<br>divided by total TPR<br>revenue | On hold; calculation TBD  | No service specific –<br>TPR level     |  |
| P13f | Financial Sustainable<br>Indicator       | Financial Sustainable<br>Indicator                      | On hold; calculation TBD  | No service specific –<br>program level |  |

## Data Dictionary

Appendices are available by emailing <u>centre@cheo.on.ca</u>.

- Appendix A: CYMH Client-Service Business Processes
- Appendix B: CYMH Client Needs Category and Sub-Category
- Appendix C: SOR Guidelines
- Appendix D: SOR Category and Sub-Category
- Appendix E: CYMH TPBP Business Processes
- Appendix F: Financial Performance Measure of Non-For-Profit Organizations
- Appendix G: CYMH Performance Indicators Mapping to Business Attributes
- Appendix H: Gold Standard Record
- Appendix I: CS 58 Consent to Share