



15/16

annual report

  
blue hills  
child and family centre



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## LEADERS WITHOUT A TITLE

It is with great pleasure, as the President, to provide my thoughts on the year that just past and also my reflections over the past 5 years as a Board member. This will conclude my personal Journey with this remarkable organization.

My journey with Blue Hills started back in 2011. With many mixed feelings and emotions as to my capabilities to contribute and my abilities to fulfill overall expectations of the board, I quickly learnt that worrying was a thing of the past and indeed I found myself comfortably fit into the role with the right support and leaders around me.

The strength of any organization depends directly on the strength and diversity of its individual members and service providers. Blue Hill's strength and success is attributed to the commitment, hardworking and its client centric employees.

Sylvia Pivko, Executive Director, is an excellent leader who, through her role as the Executive Director, leads with no fear.

The number one priority for any organization is to establish and maintain a solid, transparent, respectful and trustworthy relationship between its board and its Executive Director. The Blue Hills Board of Directors acknowledges and appreciates the openness and the level of leadership that Sylvia displays at every interaction.

Sylvia, and Joanne Pariseau, our expert Operations Manager and Support to the Board, made it a welcoming journey for me from day one. They made sure I fit right

in and provided unconditional support to make me feel welcomed and have the support that I need throughout my entire journey. My very special thanks to Sylvia and Joanne!

Working with Sylvia and been an honor. Her direct and charismatic approach to ensuring the team and the board is focused on matters at hand has been very rewarding. On a continuous basis, she has brought the right and important context to the board's attention. Her attention to detail and her passion to ensure whatever we do is centered on the children, families and communities that we serve is second to none.

With her dedication and commitment to excellence, I had my job cut out for me without any worries.

The volunteer Board of Directors at Blue Hills consists of an amazing and talented group of dedicated ordinary people who of their own accord have decided to give back their time, knowledge and wisdom. Every Board member has his or her own story as to why they have joined Blue Hills but I believe our common ground for being here is because we all believe in the cause and firmly believe the differences this organization is making in the community and in the lives of the children.



“We are dedicated to improving the social, emotional and behavioural capacity of children, youth, and their families.”

This fantastic group of diverse and dedicated Directors have come together and have helped moving the organization in the right direction. While the diversity of the Board speaks of itself, each Director has the backing of the rest of the Board to speak freely, voice their views and concerns and ensure we do not diverge from our vision and goals.

The monthly Board meetings were well received and augmented by the excellent and transparent report and feedback from our ED. The management team also played a key role by taking time of their personal schedule and meet with the board in the evenings to ensure the board is familiar with what was happening in the field. I have said this before and I say it again, I personally enjoyed these sessions very much and on behalf of the board, a heartfelt thank you to the entire management team for their interest and participation.

We thank all of our outgoing members of the Board for their services to Blue Hills; Franca Porcelli, Grace Jones, Ingrid Hann and Ron Jones.

Recently, the Board welcomed new members Sofia Mavumba and Steven Rebellato. Other members include Patti Skrypek, Nalini Jugnundan, Sherry Bahaw, Brendan Lounsbury, Ijaz Rauf, Simon Cheng, Larry Wigelius, Basil Mwawasi and myself. As you know, our Board has been awarded for its focus on diversity and I am happy to say that each Board member brings their own views, personality, cultural perspectives and experiences to make the Board stronger.

To the entire Board, thank you for your guidance and input. The difference that you are making in the life of Blue Hills is magnificent and I appreciate your engagement, support and extraordinary leadership.

I would also like to acknowledge the work of the entire management team and staff at Blue Hills for your unwavering love and hard work as you truly creates hope and peace in the life of many children and families. Remember, some, only need a gleam of hope to see the light. You all are true leaders and true leaders are dealers of hope!

Finally, I would like to acknowledge and thank the children, the youth, the parents and family members for choosing us to be your companion of hope and together, we will make a difference and create pathways to better mental health.

AGM is the celebration of YOUR accomplishments. The celebration of the lives that YOU have touched and changed and YOUR celebration of new beginnings.

### Service Re-Design

Congratulations on a well-executed plan at all levels. As you all know by now, the aim of the Service Re-Design was to partner with our families and help them to access and choose from a spectrum of quality mental health services when and as needed. The successful implementation of this complex strategy will lower wait times for families to navigate the system and find the help they need. It also will streamline many processes and better and clearer accountability at all levels of the organization.

Service Re-Design practically impacted every employee at Blue Hills and the feedback received to date from our ED and the management team is very positive and welcoming. Thank you for everyone's leadership in embracing change.

### Kinark / Blue Hills – Board 2 Board Collaboration

In January of this year, Blue Hills hosted our Lead Agency Kinark for an informal yet collaborative discussion between the two organizations. Executive members along with Board members from both agencies were present at this meeting. All in all, this was an excellent opportunity to discuss and elaborate on the future plans and how both agencies can strategically work closer and be better partner and service providers.

### Accreditation

In September, we all witnessed the presence of the Accreditation Team. After many weeks of digging, analyzing, questioning, interviewing and countless number of hours that all of us put into this, the outcome was nothing but positive with the following feedback summary:

- Diverse and Committed team / Board
- Live and breathe the culture, values and vision
- Well organized & aware
- Client focused and client's voice is alive in what we do. These are moments of truth, moments that we all need to be proud of. Congratulations for this very important milestone.

### Turnover

Our turnover rates continue to be higher than we would like at Blue Hills. While there are limits as to what can be done in this area, both the Board and the management team are fully aware and continue to collaborate and brainstorm around this concern. A number of measures have been put in place including staff exit interviews, discussions with Ministry and the Lead. We are learning a lot about the why's and the how's. Rest assured that management continues to work diligently to find solutions to help overall employee engagement and retention.

### 2016/2017 Outlook

Blue Hills continues to work with the Ministry and other partners and service providers to ensure the voices of our children and families are front and centre at every discussion and planning stage. We continue to embrace our vision of being a better Mental Health Provider in the York region and we do that through our strength in leadership, transparency and passion for what the kids and families expect from us.

The Board will also continue to play an active role in the overall Risk Management, Financial stability of the organization and reviewing of Policies, Bi-Laws and Advocacy.

### And finally,

My personal journey with this first-class and inspired organization has been a joy. What I have learned over the past 5 years, the relationships that I have built and the knowledge that I have gained will serve me well in my future endeavors.

It has been an absolute honor and privilege to have had the opportunity to serve on the Board and as the Chair of this superb Board.

I thank you all individually for coming to work with the desire to make a difference in the life of those who have been impacted by mental health challenges. You bandage many wounds every day but you also go deeper and ensure proper planning and care is in place for an optimal road to recovery.

I leave Blue Hills with the notion that I gave it my best and at the same time walking away as a better person and a far deeper appreciation for mental health. The strength in our leadership and our Board makes my departure much easier.

Thank you for letting me be part of this remarkable journey and for allowing me to share it with you.

I would like to finish this report by leaving you the following quote from Sujit Lalwani:

“Leadership is all about caring, daring, and sharing! Caring for people, daring to Act fearlessly, & sharing the success with all!”

**Amin Roomani**

BOARD CHAIR

## THE YEAR THAT WAS!

As we all take a moment to reflect upon this past year, many of us would be breathless — and all of us would be full of pride and awe! Pride in that we accomplished so much and have collectively raised the bar and set the direction for Blue Hills for years to come!

Across the board, Blue Hills has focused on strengthening our services, improving results for our families and positioning ourselves to tackle future challenges. In these pursuits, we have realized more than ever the value of engaging everyone to work together toward a common outcome.

Like many children's mental health agencies, Blue Hills faces a challenging transformational landscape, policy and funding environment, increasing demand for services and increasingly complex client needs. In response, we have collectively redesigned our service flow, restructured our entire leadership team and clinical services, realigned our internal structure in order to better support the families seeking our services.

Healthy working relationships make for a more productive and effective workplace. Through our Organizational & Learning Culture Design Teams, we have focused on ensuring that workplace effectiveness and client results are maximized when the relationship between leaders and staff, and likewise between staff and families, is

founded on trust, respect, empathy and integrity. It emphasizes the need to fully understand people's needs, values, goals and strengths and is making a difference in both workplace culture and results with our families.

Our major preoccupation and investment of time and resources this past year has been the Service Redesign and subsequent Organizational Restructuring. More can be found on this later in this Report. Suffice it to say that for six months there were Design Team meetings every morning of each week except for Fridays! There were 14 co-leads and over 50 staff participating. The dedication and commitment to the work of each design team was wondrous to see. Consequently the recommendations that emerged were exemplary, leading edge, evidence informed and family centred. We are now poised for implementation and the delivery of a new service model by September! All this with heroic efforts by staff without compromising our day to day delivery of clinical services!



### Other Highlights from this past year include:

- 1 ▶ Under the leadership of Simone Shindler, Supervisor, we developed a wonderful team of clinicians (Mathew Ridley, Blythe McKinlay, Christina Lanteigne, Warren Elardo, Natalie Birk, Cynthia Marques, Lisa Visinski, Sue Browne, Erin Thornton, Saily Maurer, Alessandra Panico, Natalie George, Lauren McCabe Arinola Akinbobola, Julia Zucker, Anne Kirvan, Seema Sharma, Samantha Cohen and Zhara Kara) who connected with the over 350 families who were on our wait list and offered each of them up to 3 sessions of Brief Services. This effort was deemed necessary in order to prepare for the implementation of our new service model with a significantly reduced group of families waiting for service.
- 2 ▶ We held in April 2015 a successful **Aboriginal Approaches to Alternative Resolution Conference** sponsored by Blue Hills in partnership with DBCFS. Over 50 participants attended and the MCYS Central Region Director Wendy Nelson and the Children's Program Manager Brenda LeMoine attended and brought greetings. **Lisa MacDonald**, our contract staff coordinated the Conference with the support of **Amanda Lal** our ADR Administrator. This was a very meaningful day as we had many different reps from each of the 7 First Nations.
- 3 ▶ Many of our Clinical staff have been diligently preparing for their membership to the **College of Registered Psychotherapists** – quite an onerous task. Congratulations to all staff who have received this designation!
- 4 ▶ We worked on the amalgamation of the **YRCCAAS & DEC** both specialized consultation and assessment services throughout the year culminating in the Launch on May 5th, 2016 of our new service **CCAAS** – Community Consultation and Assessment Service, a partnership with Youthdale Treatment Service. This would not be possible without the hard work of **Julia Glowinski, Sharon Ramsey and Robin Marshment**.
- 5 ▶ We achieved a very successful **ACCREDITATION** in September 2015 after two years of work and preparation. Appreciation to **Gail Glatt** our consultant, **Paul McDowell** and **Steffanie Pelleboer** our internal Leads.
- 6 ▶ Clinical Staff were provided 3 days training on **Family System Therapy**. This key knowledge and approach is a central part of our Clinical Framework.
- 7 ▶ We rolled out the new ADR 4th option called **Road 2 Resolution** with York CAS. This encompasses a neutrally facilitated conference for every child and their family within three weeks of their apprehension. **Amanda Lal** coordinated this initiative under her ADR portfolio and **Laura Stevenson** Supervisor Family Mediation & Information Service with **Becky Stewart** ADR Coordinator continued to support and implement this once Amanda left on her maternity leave. A thank you to York CAS Supervisor, **Denise Lehman Brown** for her hard work to implement this new service with us.
- 8 ▶ There were multiple automation initiatives including the implementation of **EMHware** our client information system as well as **ADP** our new payroll and HR system. These two were led by **Joanne Pariseau** Director of Operations and **Joanne Gaston**, HR Specialist and **Peter Mukundi** Director of Finance & HR.
- 9 ▶ Markham's **Community Connects** initiative funded by the Ontario Trillium Foundation, shared the results of some key Focus Groups of community members living in South Markham. We had over 25 community reps interested (United Way, Library, Social Services Agencies, York Region, City of Markham, School Trustee, etc.). **Deb Manion** Community Outreach Supervisor, assisted in organizing this event as well as a subsequent one on in April 2016. The hope is that some of the needs and gaps identified can be picked up by other groups as we at Community Connects are limited in our scope.
- 10 ▶ On April 16th 2015 **Steffanie Pelleboer**, on behalf of the **High Conflict Forum** organized an all day Workshop with Associate Professor **Michael Saini** from the Factor-Inwentash Faculty of Social Work at University of Toronto on "Ending the High Conflict Shuffle". We had close to 100 people and it was a great success!

**11** ▶ On April 21st our Family Mediation & Information Service hosted another Annual **Open House** at the Court House. **Laura Stevenson** the Supervisor of this service coordinated this successful event. We had approximately 80 reps from the different community organizations, family Law layers, reps from Legal Aid, several Family Court judges and our staff at the FLIC (Family Law Information Centre). This Open House had the best attendance of all "the ones we have done in the past."

**12** ▶ We bid goodbye to **Tracy Arthurs** and welcomed **Anne-Carol Hargreaves**, our new MCYS Program Supervisor.

**13** ▶ May 20th we launched our **Service Redesign** process at our all staff meeting. This work began in earnest in July with a goal of finalizing the implementation plan by December. Outcomes are recommendations for: new Family Centred practice, New Navigator role, New Counselling/Therapy model, New Menu of Mental Health Services, New Service Flow, New Front door service and Orientation, New Learning Organization, New focus on QA, and the Development of new Assessment Tools.

**14** ▶ In June 2015 we held a successful **Joint AGM** with York CAS – profiling all our joint partnerships – CCES, CMHP, CCAAS, IFCR, ADR, Collaborative Day Treatment Classroom and the ICT bed in our Residential Treatment Service.

**15** ▶ We struck the **Transition Team** (HR Specialist **Joanne Gaston**, Finance/HR Director **Peter Mukundi**, Director of Programs and Services **Steffanie Pelleboer**, Special Projects Manager **Paul McDowell** and I) that initially led the Organizational Restructuring and developed the general principles and framework for the process. Ultimately the whole Management Team became part of this team (**Sherri Miller**, **Stacey MacNeil**, **Genevieve Martins** and **Joanne Pariseau**.)

**16** ▶ **Steffanie Pelleboer** joined with the community in discussions about the mental health needs of **Refugee's in York**. This work continues.

**17** ▶ On Feb 16th we met through OTN (video conferencing) with two reps from CPRI in London, Ontario, to discuss the implementation of ChYMH assessment tools that will be replacing the previously mandated BCFPI. CPRI developed this tool for Children's Mental Health and are providing lots of support and training across the Province. This initiative involved significant training of staff over the following 8 weeks so that we were ready for April 1st to implement the ChYMH Screener. The Assessment Working Group as part of the Service Redesign process have come up with several new tools for us to use going forward.

**18** ▶ On February 10th, 2016 we had our annual **Baby Love** event where we celebrate the birth of several babies to our staff in the previous year.

**19** ▶ On March 4th we (**Steffanie Pelleboer**, **Sherri Miller**, **Genevieve Martins** and I) had a very successful meeting with senior staff of York CAS. We have established a standing joint Committee that will guide our partnership and provide opportunities to build trust between our two organizations.

**20** ▶ March 30th, we celebrated the **second anniversary of our RHO office in Richmond Hill!** We have certainly come a long way.

**21** ▶ We have been **recruiting** to fill the many positions created through the organizational restructuring and engaged in a **Participatory Job Assignment** process for the 15 Clinical positions that was very successful.

I am proud and humbled by our dedicated, resilient staff who embraced this year's challenges as opportunities for learning and growth. Many staff rose to the challenge and stepped up to co-lead Design Teams, provide creative ideas, and participate in literature searches and complex discussions. We are collectively all the better for it!

A huge thank you and appreciation for our Chair of the Board **Amin Roomani**, who took on this position last year. His support and leadership at this time of change has been invaluable. My thanks as well to the whole Board of Directors for their lively discussions, questions and above all support to me and the organization.

**Sylvia Pivko, MSW, RSW**  
EXECUTIVE DIRECTOR

## Vision

Blue Hills Child and Family Centre envisions healthy and resilient children and families.

## Mission

In the spirit of collaboration and respectful partnerships with both families and the community, we strive to create opportunities for children and families to nurture their relationships and expand their abilities in realizing improved mental health.

## OUR VALUES & PRACTICES

The values of Blue Hills reflect the philosophy and beliefs of our organization, guiding all our decisions and actions. In our organization we undertake through our actions to promote a climate of trust and harmony in all our endeavours.

### Inclusivity

We recognize and uphold the principle of equality of access to services which are responsive and sensitive to individual's uniqueness.

### Integrity

We are dedicated to and adhere to a high standard of personal and professional moral standard.

### Dignity

We value each person as a unique individual with a right to be respected and accepted.

### Ethical Practice

Ethical practice is to honor the beliefs, morals and values of one's profession and to help others through the process of unbiased decision making.

### Strength-based

Blue Hills is committed to strength-based and solution focused approaches in their work with clients, communities and colleagues. Strength-based, solution focused approaches enhance the capacities of individuals, groups, families, neighbourhoods and communities to deal with their own challenges. Empowerment results from being treated with respect and having strengths acknowledged and enhanced.

### Transparent Practices

We believe strongly in using principles of transparent practice in our work, to help share what we do, how we make decisions, encourage accountability and enable people to learn from our successes and mistakes.

### Self-Reflective Practice

Blue Hills acknowledges that self-reflective practice is key to ensuring that clinicians are better equipped to engage in complex clinical decision making. Reflective practice can be an important tool in practice-based professional learning settings such as ours where individuals learning from their own professional experiences, rather than from formal teaching or knowledge transfer, may be the most important source of personal professional development and improvement.

### Integrated Organizational Clinical Framework

The contributing aspects to the Integrated Organizational Clinical Framework (IOCF) include a common approach to clinical work that is evidence informed and is made up of the seven belief statements and the following ten theoretical constructs. All clinical service delivery at Blue Hills will be provided within the following theoretical constructs:

- Attachment
- Current Child Development
- Trauma Theory
- Group Theory
- Neurobiology
- Milieu Theory
- Cultural Competency and Sensitivity
- Systems Theory
- Family Therapy
- Psycho-educational Theory

## BLUE HILLS STAFF

2015—2016

Sylvia Pivko

Executive Director

Steffanie Pelleboer

Clinical Director

Joanne Pariseau

Manager of Operations

Peter Mukundi

Finance Manager and HR

### Managers of Integrated Clinical Services

Mohammad Dehganpour (Feb/16)

Seagal Eben-Ezra (Feb/16)

Genevieve Martins

Paul McDowell

Stacey MacNeil

Sherri Miller



### Integrated Clinical Workers

- Sue Browne
- Emma Chapelle
- Samantha Cohen
- Warren Elardo
- Kylee Goldman (Sept/15)
- Zahra Kara
- Anne Kirvan
- Marjorie Kortis (Apr/15)
- Blythe McKinlay
- Cynthia Marques
- Saily Maurer
- Monika Parsons
- Heba Ragheb
- Matthew Ridley (Mar/16)
- Seema Sharma
- Jennifer Shields (Mar/16)
- Lisa Visinski
- Na Zhu (Jul/15)
- Danielle Zur

### Intake Coordinators

- Luce Yole Amoussou
- MaryAnn Cole
- Christina Lanteigne
- Robyn Zillmer

### Community Development

- Deborah Manion, Coordinator
- Uma Bhatt

### Children's Program Facilitators

- Deborah Manion, Coordinator
- Shannon Bauer
- Nadia Dongas
- Britany Hill
- Crystal Meyer
- Kelly Setter

### York Region Children's Respite Service

- Sue Browne, Coordinator
- Jeff Bellwood
- Debbie Bleier-Waters
- Kathleen Bushie (Jul/15)
- Matt Grainger
- Michael De La Barrera
- John Montgomery (Dec/15)
- Monica Pontarini (Sept/15)

### Alternative Dispute Resolution

- Amanda Lal, Administrative Coordinator (M/L)
- Laura Stevenson, Interim Admin Coordinator
- Beckie Stewart, Coordinator
- Tracy Penley, Coordinator

### Students

- Emma Bannister
- Lily Bernstein
- Cynthia Buckley
- Angela Cali
- David Connolly
- Courtney Crawford
- Jonathan Drimmell
- Anna Florio
- Alissa Occhiogrosso
- Jessica Panaro
- Patricia Sousek

### Therapeutic Group Program

- Debb Bertazon, Supervisor/Coordinator
- Lisa Visinski, Assistant Coordinator

### Summer Program

- Shannon Bauer
- Paisley Bick
- Kristyn Hartwick
- Dylan Millar

### Consultants

- Dr. Robin Alter
- Dr. Susan Bradley
- Gail Glatt
- Donna Jansen
- Nancy Mayer
- Dr. Robin Mitchell
- Michael Saini
- Dr. Rhonda Vardy
- Karon West

### COMPASS

- Simone Shindler, Supervisor
- Daisy Auty
- Gina Degalas
- Lorraine Panabaker
- Erin Thornton

### Intensive Services

- Arinola Akinbobola
- Natalie Freiberg
- Nia King-Hachey
- Riva Mylabathula (Jun/15)
- Simone Si
- Julia Zucker

### Intensive Family Consultation- IFCR

- Janet Cullen-Coordinator
- Lata Wadhvani (Mar/16)

### Interface Day Treatment

- Susan Blair-Drouin, Assist. Manager
- Melissa Purdy, Coordinator (ML)
- Nadia O'Rourke, Coordinator
- Gabriela Zamorano, Coordinator
- Stephanie Burdi
- Lindsay De La Barrera
- Johanna Leung
- Anne Madill
- Leah McFedries

- Dylan Millar
- Shawn Mohammad
- Roopsi Sohal
- Kelley Swaluk
- Kristi Bruce (Oct/15)
- Amber Bagg, Teacher
- Melissa Bancroft, Teacher
- Sharon Copeland, Teacher
- Rocchi Devuono, Teacher
- Jeff Forrest, Teacher

### Quality Assurance & Improvement

- Lisa Chotowetz

### Community Consultation And Assessment Service

- Robin Marshment, Coordinator

### Children's Treatment Network

- Kim Cross

### Residential Program

- Onika Haywood, Supervisor
- Shiva Esmaeili-Azad
- Sibesthan Balasubramaniam
- Mary Baldeo
- Paisley Bick
- Oliva Bramner
- Travis Clements
- Martin DeLeeuw
- Danny Do
- Melissa Hare (May/15)
- Lishia Parjohn
- Katherine Kim
- Lizette London
- Shawn Mohammad
- Jasmine Peters
- Kelly-Ann Barrett-Robinson
- Glenette Sands (Jul/15)
- Kelley Setter
- Ainsley Stewart
- Jessie Wadekamper

### Integrated Consultation & Treatment (ICT)

- Tammy Baxter
- Jessalyn Ross

### Administration, IT & Maintenance

- Nathaline Budiman
- Ann Marie Cairns
- Helen Carmody
- Ana De Almeida
- Nancy Devine
- Denise Tierney (Sept/15)
- Qian Wang
- Bryan Humenick, Maintenance
- Ramin Mohebian, IT & Data Base Lead
- Sandy Sebastiao (Sept/15)
- Tom Lam, IT

### Play Therapy Program

- Janet MacQuarrie, Supervisor/Coordinator
- Joseph Turpin
- Carolynne Warton
- Kylee Goldman (Sept/15)

### Collaborative Day Treatment

- Karen Leacock, Supervisor
- Lisa Kennedy
- Jeff Bellwood
- Michael De La Barrera
- Anne Hartley, Teacher

### Children In Care Enrichment Services

- Natalie George
- Julie Gerrits (M/L)
- Lauren McCabe

### HR and Finance

- Joanne Gaston
- Amanda Lewis

### Intensive Family & School Program

- Alessandra Panico, Coordinator
- Robyn Zillmer

### Children's Mental Health Professional

- Anna Derbis

### Mandatory Information Presenters

- Israel Apter
- Jeffrey Benson
- Lisa Chotowetz
- Sanja Curic
- Lauri Daitchman
- Stephanie Di Federico
- Patrick Gaffney
- Dilani Gunarajah
- Joanne Hoffman
- Nicole Kopping-Pavars
- Barbara Kristanic
- Jennifer Lau (M/L)
- Ruby Leung
- Robyn MacFarlane
- Deborah Manion
- Frank Mendicino
- Douglas Millstone
- Christopher Murphy
- Constance Nielsen
- Stephanie Ostreicher
- Tracy Penley
- Jared Persaud
- Anna Siciliano
- Laura Stevenson
- Andrew Sudano
- Victoria Tundo
- Mina Vaish
- Paul Veugelers
- Ed White

### Mediation & Information Services

- Laura Stevenson, Supervisor
- Greg Ambrozic, Mediator
- Mary-Lou DiPaolo, IRC B/U
- Tricia Morris, IRC & on site B/U
- Tracy Penley, IRC
- Merv Rosenstein, Mediator
- Krupa Shah, IRC B/U
- Mina Vaish, Mediator

### Family Mediation Roster

- Greg Ambrozic
- Christine Glynn
- Jennifer Lau (M/L Apr/16)
- Alyson McNiece
- Merv Rosenstein (Jan/16)
- Mina Vaish
- Vicky Visca, Consultant

### Community Consultation & Assessment

- Sharon Ramsay, Clinical Coordinator
- Julie Glowinski
- Kelsey Hernandez
- Alissa Levy
- Connie Taras-Gold
- Jocelyn Kadish
- Shelley Friedman
- Denise Milovan
- Robin Mitchell
- Nathan Scharf

### ALTERNATIVE DISPUTE RESOLUTION (ROSTERS):

#### Child Protection Mediation Roster

- Greg Ambrozic
- Michele Brett
- Christine Glynn
- Alyson McNiece
- Vicky Visca, Consultant

#### Family Group Decision Making Roster

- Dianne Boyd-Learn
- Paul Brown
- Lorraine Campbell
- Sonia Gandhi
- Sandra Garibotti
- Carolyn McAlpine, Facilitator/Mentor/Consultant
- Lisa McDonald
- Alyson McNiece
- Beverly Oke-Hickey
- Heather Patterson
- Maria Perrino
- Alison Cope, Facilitator/Consultant

## THERESA ORTIZ MEMORIAL AWARD

Theresa Olivia Johnson Ortiz was a long-standing Blue Hills Child and Family Centre staff member who passed away in 2005. Co-workers describe Theresa as a team member who had a "servant's heart." She approached situations with an attitude of "how can I support your needs?" Theresa led by serving others. Her totem was the Turtle.

This award honours Theresa's memory by acknowledging a Blue Hills' Individual/Program/Service/Group that has demonstrated alignment in their practice to our strategic directions, with specific emphasis to the application of evidence based and informed interventions; for a group of staff whose shared efforts provided an opportunity for children and their families to begin to see our Blue Hills vision for resilient and healthy families, children and youth come alive; be a motivator/role model; able to empower others; have a passion for their work; demonstrate a sensitivity to diversity and inclusivity; integrate the character attributes in their daily work and through their actions advance our collective work.



## AGENCY AWARDS TO STAFF

### 5 Year

Jeff Bellwood  
Johanna Leung  
Stacey MacNeil  
Paul McDowell  
Beckie Stewart

### 10 Year

Lisa Chotowetz  
Kim Cross  
Qian Wang

### 15 Year

Onika Haywood  
Uma Bhatt  
Lisa Visinski

### 25 Year

Sherri Miller

### 15 Years

Consultant Dr. Bradley

### 2015 Recipients

The Intensive Team:  
Heba Ragheb, Julia Zucker,  
Simone Si, Nia King-Hachey

### 2014 Recipient

Laura Stevenson

### 2013 Recipient

Lydia Bailey

### 2012 Recipient

Deborah Manion

### 2011 Recipient

Joanne Pariseau

### 2010 Recipients

Friends for Life Group Facilitators: Debb Bertazzon, Sue Browne, Lisa Chotowetz, Ruth Francey and Alessandra Panico

### 2009 Recipient

Amanda Lewis

### 2008 Recipient

Sherri Miller

### 2007 Recipient

Carrie Mazzei

### 2006 Recipient

Karen Leacock



## BOARD OF DIRECTORS

2015—2016

### Left to right

Larry Wigelius, Nalini Jugnundan,  
Sherry Bahaw, Basil Mwawasi,  
Brendan Lounsbury, Patti Skrypek,  
Amin Roomani, Ijaz Rauf

### Absent

Simon Cheng, Sofia Mavumba,  
Steven Rebellato

### Executives

Amin Roomani  
President

Nalini Jugnundan  
Vice President

Ijaz Rauf  
Treasurer

Patti Skrypek  
Secretary

### Directors

Sherry Bahaw  
Simon Cheng  
Brendan Lounsbury  
Sofia Mavumba  
Basil Mwawasi  
Steven Rebellato  
Larry Wigelius

## DONATIONS

Allcare  
Maintenance  
Services

Aurora Christmas  
Classic – Paul  
Hewitt

Bell Canada

Ryan Boudreau

Alan Boyd

Jason Boyd

Bill Bradley

Chris Bradley

C.I.B.C. Yonge &  
Mulock

Alanna Carroll

Dave Cox

Fred Cox

Sandra Degan

Nancy Devine

Craig Donaldson

CrossFit

Newmarket Central

Pete Durbano

Enbridge Gas

Distribution Inc.

Rob Frost

James Fryer

Mila Greaves

Jay Hargrave

Jim Helkie

Denise Hunter

Suzanne Jovic

Karen Kuruvilla

Mike Lane

Laureate Beta

Omicron

Bob Lytle

Carlo Mandarino

Eric McMillan

Alyson McNiece

Adam McWhirter

Ruth Pack

Maria Paczek

Dave Pinder

RC Design

Drew Reeves

Brian Rogers

Peter Rossborough

Brad Savage

Scotia Bank, Yonge  
& Henderson

Soctia Bank,  
Bayview &  
Wellington

Brad Smith

Ryan Smith

Springvale Baptist  
Church Women's  
Ministries

Scott Sutherland

Brad Tenn

Dina Waik

Walk It Off  
Recovery

Pat Walsh

Marc Warner

Wojcinski &  
Associates Ltd.

Sean Wynn

Yappn Corp

York Catholic  
District School  
Board

### Adopt A Family

Linda Caira

Mirella Carlucci

Catholic Women's  
League of  
Nobleton

Julia Chotowetz,  
Walk It Off  
Recovery

Julia Chotowetz,  
CrossFit

Newmarket Central

Leah Findlay

Nelly Gallo

Laureate Beta

Omicron

O'Malley's Catering  
& Rental Inc.

Teresa Poulakos

Soraya Sarra

Mina Vaish –  
York Mediation

Rationale



Families require timely access to quality services when they need it



Service demands/ waitlist pressures  
Balancing supporting demands and wait times



Partnering with families to support greater self-determination and increased choice



MCYS transformation  
Moving on Mental Health has set expectations for timely, accessible, quality services and family engagement.

External Factors

- MCYS Transformation – MOMH
- Family engagement & collaboration expectations
- Fixed Funding Model
- Increased awareness on the effectiveness of brief models of intervention
- Pressure to offer time limited/time sensitive therapy
- Increased public awareness of children’s mental health needs
- Evidenced informed practice – brief services, goal oriented practices
- Value delivery for service

Internal Factors

- Increased demand for services
- Long wait lists
- Increased complexity of clients
- Blue Hills values & strategy
- Integrated Clinical Framework
- Families decompensating while waiting
- Milieu context (higher numbers & access to clinical services)
- Family engagement strategy
- Large Leadership portfolios
- Many direct reports
- Need for efficiencies
- Equal value for every service

Overall Aim

To partner with our families and enable them to access and choose from a continuum of quality mental health services when and as they need them.

Goals for the new service flow

- ▶ Increase the engagement and participation of families in all aspects of service and policy
- ▶ Improve the service experience of families seeking mental health services
- ▶ Provide a continuum of quality, evidenced-informed services and programs that family can access and choose for their children
- ▶ Reposition long term therapy as one of a suite of value-based services for children and youth
- ▶ Improve accessibility to services as they are needed while reducing the wait times

Key Elements of Change

- ▶ Client Directed based on needs
- ▶ Family Engagement Parents as Partners
- ▶ Services offered earlier in Family’s Service Experience
- ▶ All services are valued equally-Continuum
- ▶ Seamless Integration of Services across Service Choices
- ▶ Inter-professional Teams all working together
- ▶ Clinical Framework as foundation for all services

A Collective and Collaborative Effort

The rationale for Design Teams

“Extraordinary change requires building extraordinary relationships, and at some level this requires gathering together diverse people representing diverse views so that they can speak and listen to one another in new ways”  
– Peter Senge

Blue Hills has been committed to inclusionary change processes that align with our values and involves as many staff as are interested to do so.

We adapted the successful ASD Partnership model of Working Groups and System Focused Oversight Group to our Service Redesign.

Scope of the work	7 /	Design teams (involving 55 + staff)	4 /	Working Groups Navigator, Assessment Tool, Therapeutic Groups, Learning Organization
	1 /	Overarching Team Change Management Leadership Team (CMLT)	15 /	Recommendations Does not include sub-recommendations embedded within various recommendation

1 ▶

Access, Intake, Navigation and Orientation Design Team

Recommendation 1

Orientation is an essential process that engages families. Orientation provides families with the necessary information about mental health, Blue Hills and the treatment process so that they can be informed, engaged and involved treatment partners. Orientation is also an iterative process that occurs at various points in the treatment journey.

Recommendation 2

Intake will engage clients in an initial screening and orientation to determine client eligibility, assess risk and triage to internal services.

- The primary function of Intake is to filter eligible families and introduce them to Blue Hills.
- Intake also considers risk assessment, safety planning and internal triaging (navigation or intensive)
- Ensure client orientation to BH – from a variety of proposed modalities.
- To engage families who are not eligible in the warm transfer process within the community

Navigator Working Group

Recommendation 1

A new service navigator role be implemented differentially across all treatment services within the following key principles (not a complete list):

- Every family gets a Navigator or navigation support – may need a differential client profile or service profile
- The navigator will be equipped to respond to a full range of needs and client profiles
- Navigator holds the family story and is the main point person for the family in their Blue Hills journey
- Is a skilled clinical worker in a flexible role – can co-determine level of needed engagement in the moment and over the long term
- Constantly assessing family needs and capacity – adjusting support at key transition points
- Navigation is involved from start to finish of service
- Support at transition times needs to be integrated with the clinician delivery of services
- Ongoing communication with family and other service providers
- Navigator is an integral part of the treatment team, not separate
- Each family has a differential team

2 ▶

Family Engagement and Family Centred Practice Design Team

Recommendation 1

We are recommending a family engagement framework for Blue Hills that is grounded in a Family Centered Model of Care.

This is a model which by definition means that “Professionals view families as equal partners and practices are family-driven. Families are the final decision makers. Intervention is individualized, flexible, and responsive to the family-identified needs of each child. Family intervention focuses on strengthening and supporting family functioning.”

“Nothing about us without us.”



3 ▶

Counselling Therapy +0-6 Redesign and Intensive Services Review Design Team

Recommendation 1

To develop a family-centered approach to counselling and therapy, drawing from social/ecological, systemic, collaborative and neurobiological models.

Recommendation 2

To develop counselling and therapy practices that emphasize collaborative goal-focused work and tracking of indicators.

Recommendation 3

To develop treatment that is phased and fluid, with assessment practices and a service navigator role to support that.

Assessment Tool Working Group

Recommendation 1

Blue Hills adopts a suite of assessment tools that supports screening for eligibility and risk, triage and determination intensity of need, provision of a comprehensive understanding of the family and their needs, supports treatment planning and review as well as provides outcomes on the service experience and outcomes.

4 ▶

Development of Menu of Services Design Team

Recommendation 1

Blue Hills is committed to delivering clinical services using a family engagement framework that ensures clinical options are timely, responsive, goal focused and enable families to use their strengths and resiliency. This team recommends that the current menu options (Brief Services-SST, 3 Session model, Workshops, Therapeutic Groups, Counselling/Therapy, Respite, Play Therapies, etc.) remain as part of the clinical model of service with a mechanism for program review. The recommendation is also to augment the clinical options to include brief therapy services to better represent a range of services that reflect Blue Hills' ten theoretical foundations.

Recommendation 2

To implement the principles of transition into clinical practice to support a continuity of care and to enhance service flow into, through and out of the menu options.

Recommendation 3

Implement a service delivery model that is primarily staff dedicated with options for mixed caseloads.

5 ▶ Organizational Culture Design Team

Recommendation 1

Blue Hills adopts a framework that will strengthen our organization's immune system by contributing to the unique social and psychological environment of this organization.

Recommendation 2

To implement a recognition system that is multi-layered and builds upon the SMART model of recognition: to be Specific, Measurable, Authentic, Regular, and Timely.

6 ▶ IT, EMHware and Web redesign Design Team

Recommendation 1

That Blue Hills ensures the differential use of ADP, Outlook and EMHware programs.

ADP to be used for staff information (i.e. staff's personal use for vacation booking etc., as well administration/ manager/ supervisors access to staff contact information such as their personal cell phone numbers)

Outlook to be used for scheduling (staff schedules and room booking) - Staff would be required to input their schedules, have them up to date and share their calendars with administration staff and managers/supervisors, thereby increasing the ability to see who is in the office/at home/ in the community, as well as expanding the use of outlook to schedule meeting rooms.

EMHware to continue to be used for all client information (i.e. contact, demographic and clinical information).

7 ▶ Program/Service Evaluation & Learning Culture Design Team

EVALUATION:

Recommendation 1

Develop a culture of evaluation as an essential step in having a successful evaluation/quality assurance practices.

Develop recommendations for a QA/QI framework and how it can play a strategic role in implementing best practices to achieve positive outcomes for the children, youth and families we serve.

LEARNING CULTURE:

Recommendation 1

Blue Hills to embed the principles of a Learning Organization.

A learning organization is defined as: An organization that facilitates the learning of all its members and continuously transforms itself. This continual organizational renewal is done by embedding a set of core processes that nurture a positive propensity to learn, adapt and change.

It is recommended that the following principles of a learning organization be accepted. These serve to enhance the understanding of what a learning organization is at Blue Hills and provide a beginning point to aspire to.

"We have come to believe that the core capacity needed to access the field of the future is presence. We first thought of the presence as being fully conscious and aware in the present moment. Then we began to appreciate presence as deep listening, of being open beyond one's preconceptions and historical ways of making sense. We came to see the importance of letting go of old identities and the need to control and as (Jonas) Salk said, making choices to serve the evolution of life. Ultimately, we came to see all these aspects of presence as leading to a state of "letting come," of consciously participating in a larger field for change. When this happens, the field shifts, and the forces shaping a situation can move from re-creating the past to manifesting or realizing an emerging future."

Presence: an Exploration of Profound Change in People, Organizations and Society by Peter Senge, et al.

Principles of a Learning Organization

- 1 ▶ Learning is an essential activity and directly linked to improved performance across the organization.
- 2 ▶ Learning is purposeful and intentional
- 3 ▶ Change is constant and welcomed
- 4 ▶ The Responsibility for learning is at all levels. Everyone is accountable
- 5 ▶ Reflection is a way of being
- 6 ▶ Learning is a core component of an effective and positive team experience

Service Redesign key shifts

- ▶ New Front door Service
- ▶ New Orientation process for families to support partnership model
- ▶ Faster access to mental health service (Menu)
- ▶ New structure to support the new service flow
- ▶ Mental Health services more goal oriented and delivered in portions
- ▶ Reduced wait list over time
- ▶ New organizational shifts- Learning culture, Data measurement and performance, family centred practice, change management

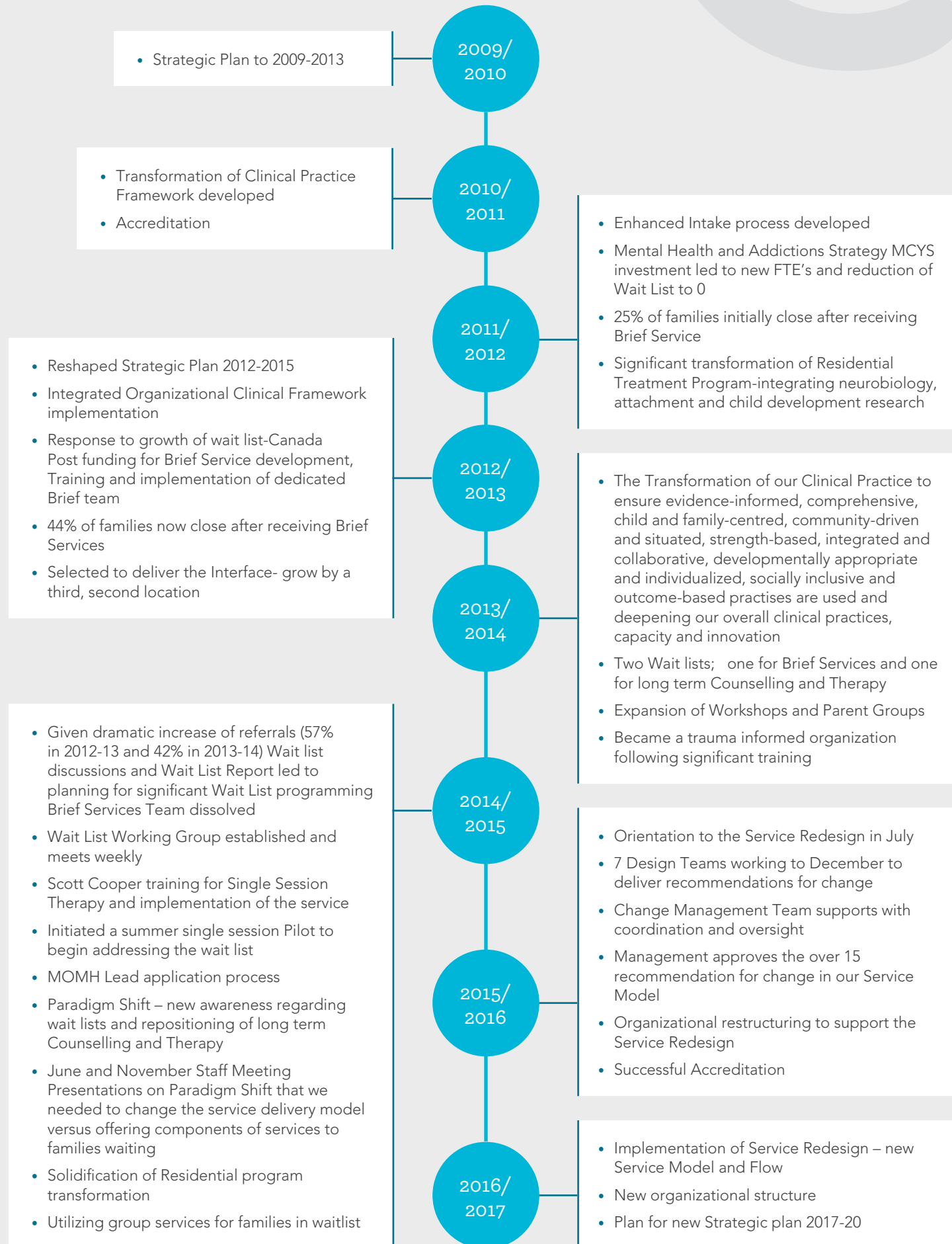
Success Metrics: Tracking Re-structuring outcomes

Client Outcomes/Service Outcomes

- Reduction in Wait List
- Increased service options/choices
- Client satisfaction with their service experiences
- Client outcomes/goal achievement
- Greater family involvement and engagement
- Increased family access to and participation in services

Staff /Organizational Outcomes

- Increased supervision capacity
- Aligned portfolios and manageable workloads
- Clear accountability and clearly defined leadership
- Staff engagement
- Evidence informed practices
- Increased HR and IT support/resources
- Enhanced internal and external communications and integration within and between the Blue Hills teams
- Integration and value of Quality Assurance and Quality Improvement
- Improved morale



STATISTICS 2015-2016

	2015/16	2014/15
Inquiries	1305	1707
Total Number of Children, Youth and Families Served	7069	6891
Access Intake	265	457
Brief Services	374	316
Counselling/Therapy	310	433
Intensive Services	193	234
Family/ Caregiver Skill Building/Support	571	555
Specialized Consultation/Assessment Services	111	103
Targeted Prevention	2763	1167
Children, Youth and Families Served through our CAS Partnership Programs (not including ADR)	191	172
Family Mediation - Offsite	150	312
Family Mediation - Onsite	140	240
Mandatory Information Program	1170	986
Child Protection Mediation	143	112
Family Group Decision Making	108	118
Aboriginal Approaches	57	63

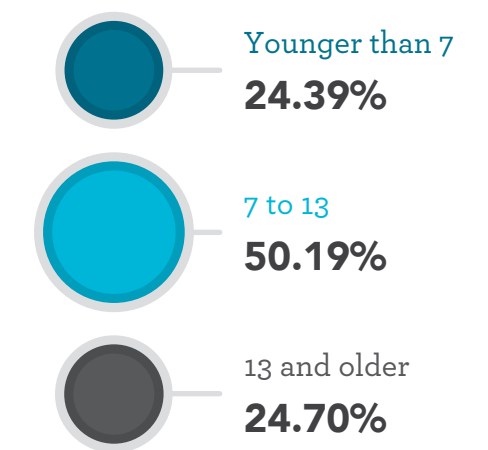
Locations of the Families at the Time of Referral

<b>33.56%</b>	Vaughan
<b>21.17%</b>	Richmond Hill
<b>15.54%</b>	Markham
<b>7.21%</b>	Georgina
<b>6.76%</b>	Newmarket
<b>5.86%</b>	Aurora
<b>3.60%</b>	Other
<b>2.70%</b>	Stouffville
<b>2.25%</b>	East Gwillimbury
<b>1.35%</b>	King City

Top Five Factors in the Families History at the Time of Referral

- ▼ Worry about Child's Formal Diagnosis
- ▼ Marital Separation/Divorce
- ▼ History of Mental Health in the Family
- ▼ Internet and Social Media-Abuse/Bullying
- ▶ Financial Stress-Employment/Resources

Ages of the Children and Youth Served





## HELPING FAMILIES HELP THEMSELVES

Celebrating over 47 years in York Region.

In the spirit of collaboration and respectful partnerships with both families and communities, we strive to create opportunities for children, youth and families to nurture their relationships and expand their abilities in realizing improved mental health.

### Blue Hills Child & Family Centre gratefully acknowledges:

- The Ministry of Children and Youth Services
- The Ministry of the Attorney General
- The York Region Children's Aid Society
- The Ministry of Education
- The Regional Municipality of York
- The Blue Hills Foundation
- The Toronto Southeast Presbytery
- The Ontario Trillium Foundation

For their support for the children, youth and families of our community.



**Our 2015/2016  
financial report  
is available to  
the public.**

Please contact  
Joanne Pariseau at  
**bluehills@bluehillscentre.ca**  
should you want a  
copy of the statement.



t. 905.773.4323  
f. 905.773.8133  
tf. 1 (866) 536.7608

[www.bluehillscentre.ca](http://www.bluehillscentre.ca)

### AURORA

402 Bloomington Road  
Aurora, Ontario  
L4G 0L9

### RICHMOND HILL

10350 Yonge Street, 4th Floor  
Richmond Hill, Ontario  
L4C 5K9

### MAPLE

2354 Major Mackenzie  
Drive West, Unit 4  
Maple, Ontario  
L6A 1W2