IEMH Care Pathways KFL&A

Date and Time	March 6, 2025 9am – 11am EST
Attendees	Rup Patel, Hadir Ashry, Karys Peterson-Katz, Helen Mabberly, Amanda Evaristo, Amanda Posadowski, Émilie Huneault, Theresia Hamilton, Anja Cahill, Susan Potvin, Jennifer Barker, Anne Biggar, Vicki Casey, Darlene Derbyshire, Yu Jier Kou, Kaysi Smith, Karen Dunlop, Jessica Locas (with Kaysi; no email), Sarah Bernhardt (with Kaysi; no email), Sarah Kring
Regrets	Brandon Maracle, Bridget Glasglow, Cheryl Bechard Howe, Colleen Fairholme, Denise Nicholas, Elisa Palmer, Heather Mitchell, Holly Kinstler, Jamie Kring, Jennie Hill, Karen Livicker, Kelly Monaghan, Kim Miller, Laura Conboy, Louise Moody, Madeline Nerenberg, Melanie Darling, Melissa Roberts, Noella Klawitter, Pam Kent, Rana Fowler, **Samantha Patay**, Scot Gillam, Susan Barberstock, Tracy Kennedy

Agenda

1. **Welcome and Recap of Previous Meeting**
    a. Introduction:
        i. Sarah-maternal health coordinator
        ii. Jessica-MBW For family health and child development
        iii. Amanda E.-EarlyON Supervisor for RFCS
        iv. Amanda P.-program manager for school health for South East Health Unit
        v. Helen-KCHS, Early years Team
        vi. Jennifer B.-program Manager
        vii. Karen Dunlop-LARC

2. **Updates on Training**
    a. **Stream 1: Supervisors, Managers, Leadership**
    b. **Stream 2: Staff implementing ASQ's & DSP's**
    c. Helen asking if she can dovetail and add on 2 staff to Vicky's numbers
        i. Her agency is in the same building as A Great Start (Vicky)

3. **Local Pathways Implementation Team**
    a. **IEMH Care Pathways Maps**
        i. Amanda P: where would kids who are school age but not in school go?
            1. Hadir: they can go to one of the other agencies
        ii. Darlene: like where KidsInclusive is listed and that SmartStart Hub is listed above

iii. Sarah: IIPCT support is only for the internal rostered patients (have a primary care provider with IIPCT)
    1. Not available to receive referrals from anyone or give referrals for any families
    2. If not rostered and Indigenous, should go to ONWA
    3. Schools may not know the child is rostered with IIPCT because they don't connect with primary care provider, and therefore they don't know that they can refer the child to IIPCT for supports/services
iv. Helen: KCHC's EarlyON program is open so no referrals required, however some of our other early years services, like school readiness, family health education programs require a pre-registration
    1. Limited capacity in how many children they can screen with the ASQ
    2. Needs to think it through and discuss with Vicky about whether they fit in the Central Hub
v. Anne: had similar concerns about being overloaded, but does think that by spreading out the work between agencies they can combat that work
vi. Darlene: word 'referral' may need to be defined further because people understand it differently
vii. Susan: community tends to over-use the word referral, and therefore defining the word or finding alternative words or language to define it is important
viii. Helen: maybe use the word "self-referral"
ix. Doors:
    1. Keep Parents, Healthcare Providers/Primary Care, combine Health Care Providers and Child and Family Services, School Board
    2. Susan and Anne: want to keep the bubbles as they are so that it helps to strengthen their understanding of where they fall on the maps
    3. Amanda P: By keeping parents/caregivers on a service provider map could advise parents and caregivers that they can also connect; especially if they're not ready at the time of their interaction
x. Hadir shows HPEC map:
    1. Amanda P: liked the HPEC version because it provides clear instructions/guidance
    2. Susan: PowerPoint version would require more additional information; liked the HPEC version's flow

        a. Anne agrees with her; practitioners who are not involved in the work would find the HPEC one easier to follow
    3. Helen: prefers the HPEC map, especially as she has missed a few meetings and has a lot of questions
    4. Consensus is that they want to move forward with the HPEC version
        a. Add 0-6 for the top few referral agencies
        b. Put the Indigenous agency in its own box "Indigenous Families Only"

b. Confirm LPIT Members

i. Tracked here: https://sickkidsca.sharepoint.com/:x:/r/sites/IMHPWorkspace/_layouts/15/Doc.aspx?sourcedoc=%7BD5F3463D-B779-4AC3-95F5-8598BB9B1D10%7D&file=KFL%26A%20Contact%20List.xlsx&action=default&mobileredirect=true

c. Discuss:

i. **Family-Friendly Materials**

ii. **Supplementary Document and Information Sheet**

1. Susan: we need something more concise
    a. Perhaps we design it in an electronic format
2. Amanda P.: don't think a multi-page document is helpful for most users

iii. **Communication/Dissemination Plans**

4. Next Steps

Action Items:

1. Rup:
    a. Follow-up with LARC
    b. Send Stream 1 invite to all managers (Theresia asked for it)