

Infant Early Childhood Mental Health Eastern Ontario - Logic Model

VISION: Building Capacity for Infant and Early Childhood Mental Health through our collective/collaboration

- GOALS:**
- Build a comprehensive spectrum of mental health and other necessary services which are organized into a coordinated network to meet the multiple and changing needs of infants and children prenatal to 6 and their caregivers in our region.
 - Provide, share, and promote exceptional mental health promotion, intervention and treatment services to infants, young children and families.
 - Create a system that promotes infant and early childhood mental health across several sectors.
 - An effective and accessible system of care defined by a comprehensive spectrum of mental health and other necessary services organized into a coordinated network to meet the multiple and changing needs of infants/children prenatal/birth-6 and their caregivers.

COMPONENTS	ACTIVITIES	OUTPUTS	Short-Term Outcomes (6-12 months)
Comprehensive Spectrum of Services	<ul style="list-style-type: none"> • Adopt and promote a common definition and language of Infant and Early Childhood Mental Health (I/ECMH) in system planning work across all sectors. • Compile inventory of services across the spectrum from health promotion to treatment including information to inform capacity work (capacity within our system (e.g., FTEs, budget). • Compile demographic and surveillance data/ information on population to inform capacity. • Analyze the capacity of the current infant and early childhood mental health services to meet the need / demand for service in Eastern Ontario • Review of early ID, screening and assessment tools currently being used in infant and early childhood mental health. • Identify indicators for measuring I/ECMH outcomes and assess for feasibility of collection, etc. 	<ul style="list-style-type: none"> • Use of common definition and language of Infant and Early Childhood Mental Health. • Analysis of the infant and early childhood mental health spectrum of services in our region. • Identification of workforce capacity to respond to need gaps. • Plan created to address gaps in services developed. • Recommendation of early ID, screening and/or assessment tool (s) to be used by infant and early childhood mental health service providers. • Key indicators for measuring I/ECMH determined, and data collection plan developed. 	<ul style="list-style-type: none"> • Increased common understanding and use of infant and early childhood mental health definition across sectors. • Increase use of common early ID, screening, and assessment tools by infant and early childhood mental health providers. • Increase in collection of common key indicators of infant and early childhood mental health.
Coordinated Network of Services – regional Pathway(s)	<ul style="list-style-type: none"> • Understand the key process and structure elements of a coordinated network e.g., access, intake, referral - regionally when possible, using the framework of a stepped care approach. • Understand the current state of the key structure and process elements of the infant and early childhood mental health system in our region. • Analyze the current state in comparison to the elements of a coordinated network. 	<ul style="list-style-type: none"> • Identification of strengths, barriers, and weaknesses of the key process/ structure elements in the infant and early childhood mental health network in our region. • Plan to minimize/ address barriers and challenges as well as risk mitigation in network of services developed. 	<ul style="list-style-type: none"> • Increased implementation of core components of key processes and structure elements of a coordinated network.
Building Capacity- Training & Education	<ul style="list-style-type: none"> • Identify, promote and coordinate evidence-based training opportunities for the partners. For example, participate in the “Laying the Path for Lifelong Wellness Learning Series”. • Participate in Provincial Training Initiative. • Convene CoP to support case-based learning. 	<ul style="list-style-type: none"> • Creation of an Action Plan. • Identification of key indicators and data collection plan to measure impact of training sessions. • Creation of CoP. 	<ul style="list-style-type: none"> • Increase knowledge of IEMHP among service providers. • Explore feasibility and applicability of offering identified training opportunities (i.e., PTI & Laying the Path Forward) including early evaluation. • Review funding opportunities to support the activities.

LONG-TERM OUTCOMES

- Decrease gaps in spectrum of services (mapping of services, pathway work, and workforce capacity should inform gaps and areas of needs)
- Increase in access pathways and protocols between IMH service providers.
- Sustained improvements to programs and services targeting families prenatal to 6 to promote I/ECMH
- Parents/caregivers/families have increased knowledge and skills about how to promote I/ECMH among their children prenatal/birth to 6 and know when and how to access appropriate services quickly when needed.
- Service providers, community leaders, academics and families advocate for needed services and supports to promote I/ECMH
- Children and families experience a seamless, coordinated, and integrated approach from health promotion, early ID, intervention and treatment.
- Increased awareness of the general public regarding the importance of I/ECMH and the availability of programs and services
- Human health resources strategy has been developed that is inclusive of initial orientation and education, and on-going professional development to ensure a robust workforce.

