



Moving on Mental Health

2015 Collective Impact Summit Report
London-Middlesex





Acknowledgement

Thank you to the following organizations for supporting the
Moving on Mental Health Collective Impact Summit

Anago (non-residential) Services
Boys & Girls Club of London
Centre for Addictions and Mental Health
London Children's Aid Society
Child & Youth Network
CPRI - Child Parent Resource Institute
Craigwood Youth Services
Community Services Coordination Network
CSC Providence
Family Services Thames Valley
Local Health Integration Network – SW Ontario
London Child & Youth Network
London District Catholic School Board
London Family Court Clinic
London Health Science Corporation
London Intercommunity Health Centre

Merrymount Family Support & Crisis Centre
Middlesex County
mindyourmind
Ministry of Children and Youth Services
Oxford Elgin Child & Youth Centre
Ontario Trillium Foundation
St. Josephs Health Centre – Parkwood Institute
Mental Health Care – Adolescent Outpatient
St. Leonard's Community Services
Thames Valley Children's Centre
Thames Valley District School Board
United Way London & Middlesex
Vanier Children's Services
WAYS Mental Health Supports
Youth Opportunities Unlimited

Thank you also to parent leaders and other advocates who participated.

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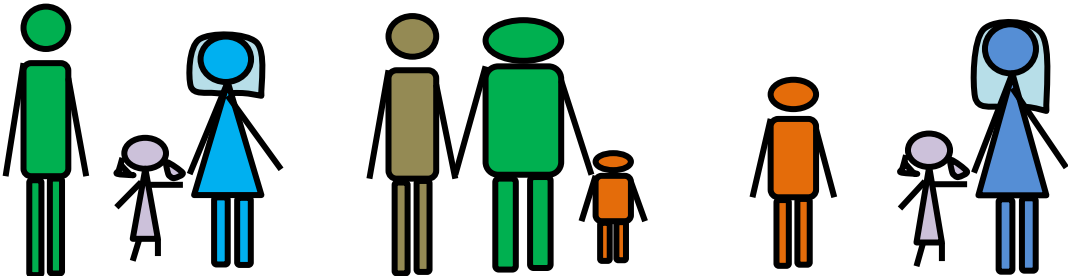
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Introduction and Appreciation

Moving on Mental Health (MOMH) is an initiative of the Ministry of Children and Youth Services to transform child and youth mental health services in Ontario. Implicit is the understanding that local community leaders, staff, families and advocates closest to the issues are the best positioned to understand the complexity of child and youth mental health. There is real opportunity for communities to develop shared leadership capacity that can drive system change and inform government policy.

How to engage a whole community in supporting children and youth with mental health and related issues is the challenge. As the Lead Agency for MOMH in London and Middlesex, Vanier Children's Services takes very seriously the enormous responsibility that is inherent in the vision set out by the Ministry to engage the public and professionals in meaningful ways that will lead to positive changes in the service system. The Ministry describes the desired system as one that "makes sense" for children, youth and families by responding to their needs as close to home as possible. To begin the process of community engagement, Vanier Children's Services and the Tamarack Institute led a Collective Impact Summit in December 2015 to explore the Collective Impact (CI) model with community partners.

Large-scale initiatives intended to make the service system more coherent, integrated and responsive have been happening for many years. Positive changes may result and yet the same gaps and barriers in the system are identified year over year. We must learn to see, think and work *collectively* to make real system change. A collective perspective cannot be anticipated in advance or by a single voice, instead it emerges from bringing people together with various perspectives who have a common goal. The greater the diversity of perspectives, the more likely it is that a whole big picture can come into view. Each voice is critical and offers another dimension to the ongoing conversations required for change initiatives.

The longstanding common 'problem' to be solved is the fragmentation of the system. The child and youth mental health sector in London and Middlesex has a rich history of collaboration and innovation. As a community, we have strong leadership and key relationships in place that can help us achieve shared goals. The centrality of developing meaningful and ongoing engagement across the system cannot be underestimated to achieving our true potential. "It's all about relationships."

With this in mind, the Summit experience points to a number of next steps that can help us begin to chart a path as a group. At every step, we want to be thinking about how to engage others.

This report is intended to provide initial analysis from the Summit to mine for themes and ideas that were generated by the activities and discussions. The report sets out a potential program of action for the coming year using the conditions of Collective Impact as a framework. The report will also serve as a 'reality check' for the Summit participants to reflect on their own experience, hopefully to spark additional input or ideas toward the still emerging articulation of a common agenda. By definition, a common agenda is one that people can support. Learning to engage everyone in system change is a fundamental and ongoing learning objective. The Summit is a first step down a long road.

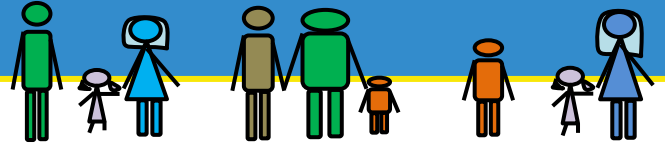
I want to thank Sylvia Cheuy from Tamarack, Margaret MacPherson – Vanier "Interim System Coordinator", and Susan Ralyea for their leadership, and support in preparing and guiding the Summit process. This type of event requires both passion and dedicated time to craft the end product. We learned much from the event as you will discover in reviewing this summary document.

Thank you to all of our community leaders and special guests who participated and contributed.

A handwritten signature in cursive script that reads "Joanne Sherin".

Joanne Sherin
Executive Director,
Vanier Children's Services

Executive Summary



The Moving on Mental Health (MOMH) Collective Impact Summit held in London in December 2015 was hosted by Vanier Children's Services to explore the interest in applying a collective impact framework to the MOMH transformational agenda. Over eighty participants from the child and youth mental health sector participated. The majority of Summit participants were drawn from the eleven core service agencies to support development of a cohort of champions at the centre of potential collective impact work. Sixty-five were active in providing feedback using clicker polling technology at the summit on day one, 45 on day two. A separate meeting was held in the evening of the first day for Executive Directors and Board Directors of the eleven core service agencies.

At the conclusion of the summit:

- 97% of (45) respondents indicated support for a common agenda for the coming year of learning how to work collectively on the MOMH collective impact initiative

The online post-summit feedback on the overall Summit experience shows that:

- 90% of (40) respondents report being inspired and energized by the goal to work collectively
- 93% believe they can contribute to achieving collective impact
- 90% believe their organization is committed to being involved in moving forward
- 88-93% are willing to be active in various activities over the coming year

At the evening session with EDs and Board Directors, a similar willingness to move forward on a collective initiative was expressed by respondents using clickers:

- 88% of (22) respondents are willing to explore working together
- 81% are willing to help 'figure out' shared leadership

The clear support for collective work does not reflect the uneven experience of the Summit itself, but rather the commitment of participants to work together to make significant system change. Feedback on the Summit was mixed with only 62% reporting they were engaged throughout.

The experimental design of the Summit sought to create the conditions for participants to actively experience collective seeing and thinking – described as 'ah-ha' moments that are only possible through the engagement of diverse perspectives in discussion. The emphasis on producing this

type of experience acknowledges how difficult it is to avoid the deep ruts of system discussions that are too general or that lead to 'motherhood' ideals. By definition, collective impact is a model that gathers perspectives and data to allow the emergence of new ideas and directions.

We need to do things differently

Moving on Mental Health as a collective impact initiative is a stake in the ground on learning to work collectively, for the common good of the community. The need to do things 'differently' is widely accepted yet the potentially creative tensions needed to build collective capacity have to be acknowledged at the outset. There are a number of such tensions that will need to be attended to in setting out the actions for the coming year:

- **Collective impact requires broad and ongoing engagement.** Leaders report meeting fatigue and the daily wear of resource-stressed environments and competing priorities does not allow much slow time for reflection and dialogue, especially if there is no immediate and clear action that results.
- **Collective impact initiatives are emergent and adaptive.** Priorities surface, action plans form and reform through dialogue of diverse groups over time. The bottom-up approach is more time consuming and is distinctly different from strictly top-down leadership that carries a greater sense of control for leaders. Both are needed.
- **We want change until it means change for me.** A collective approach will generate a higher level system perspective and insights that may lead to restructuring. Fear of change is something we share. Left unspoken, it will impact people's ability to engage fully. Seasoned relationships based on trust, compassion and ongoing dialogue are critical to mitigate the fear of change.
- **Shared leadership with power differences.** The ideal of shared leadership does not erase existing hierarchies of power and varied responsibilities attached to roles. A collective approach strives to encourage and enable leadership at all levels of the system. This will be difficult to support or defend in risk-averse environments.

There were important ideas and actionable items identified at the Summit that resonated with the group. Using the collective impact model as a framework, the next step is to put structures into place that can support the unfolding initiative.

A common agenda to learn and build our collective muscle

Before closing the summit, it was proposed that the common agenda for the coming year is to learn how to work collectively. As well, a pilot project was proposed for summit participants to test the theory that small changes of behaviour can have system-level impacts. Both were endorsed. The pilot will borrow from a Tamarack case study where 'three simple rules' were applied in a large hotel chain to shift the workplace culture to support enhanced customer satisfaction. In addition to

the simple rules pilot, ongoing opportunities to continue the discussions that have started with the summit will be organized into next steps.

Next steps

The table below outlines next steps proposed to create the infrastructure that will support both specific initiatives and the broader collective impact work. The chart shows a phased approach drawing from collective impact research. The phases are not linear and work is already happening across the columns. Leaders from the core service agencies will meet at the end of January to set a course for the coming year for the leadership advisory team and for their organizations. The summit findings will provide the frame to begin to identify priorities and working groups. Summit participants will have a variety of opportunities and options to contribute and shape the direction as well as specific actions for the Moving on Mental Health collective impact initiative.

Phase 1: Initiate Action	Phase 2: Organize for Impact	P3: Sustain Action/Impact
Identify key players and existing work underway – champions, baseline data on the social problem to develop the case for change	Establish common goals and shared measures, create a supporting backbone infrastructure, and begin the process of aligning the many organizations involved against the shared goals and measures	Pursue prioritized areas for action in a coordinated way, systematically collect data, and put in place sustainable processes that enable active learning and course correcting as they track progress toward their common goals.
11 CYMH core service providers and their Boards - Develop mandate for the learning labs	Advisory groups are exploring shared and system leadership As the Lead Agency, Vanier will provide the backbone supports, organize and facilitate meetings, track activities and communicate with all partners	Priorities: <ul style="list-style-type: none"> • Connect with L&M C&Y Networks • Engage partners in Francophone, Aboriginal and other ethno-cultural communities
Summit participant group - Identify champions, priorities, desired outcomes and working groups for the coming year	Monthly learning labs will be held to: <ul style="list-style-type: none"> • support collective impact learning • identify & advance specific projects, topics from the summit or are already underway in the community • share info and updates • build relationships and test ideas • coordinate the various groups/projects 	<ul style="list-style-type: none"> • 3 simple rules pilot • Ongoing communication (newsletter and email) • Engagement of whole organizations
Parent Leaders & Advocates - Define leadership role	Priority to develop a clear leadership role for parents, guardians and other advocates <ul style="list-style-type: none"> • Participate/lead the CI learning labs 	Inform design of 3 simple rules pilot and evaluation process

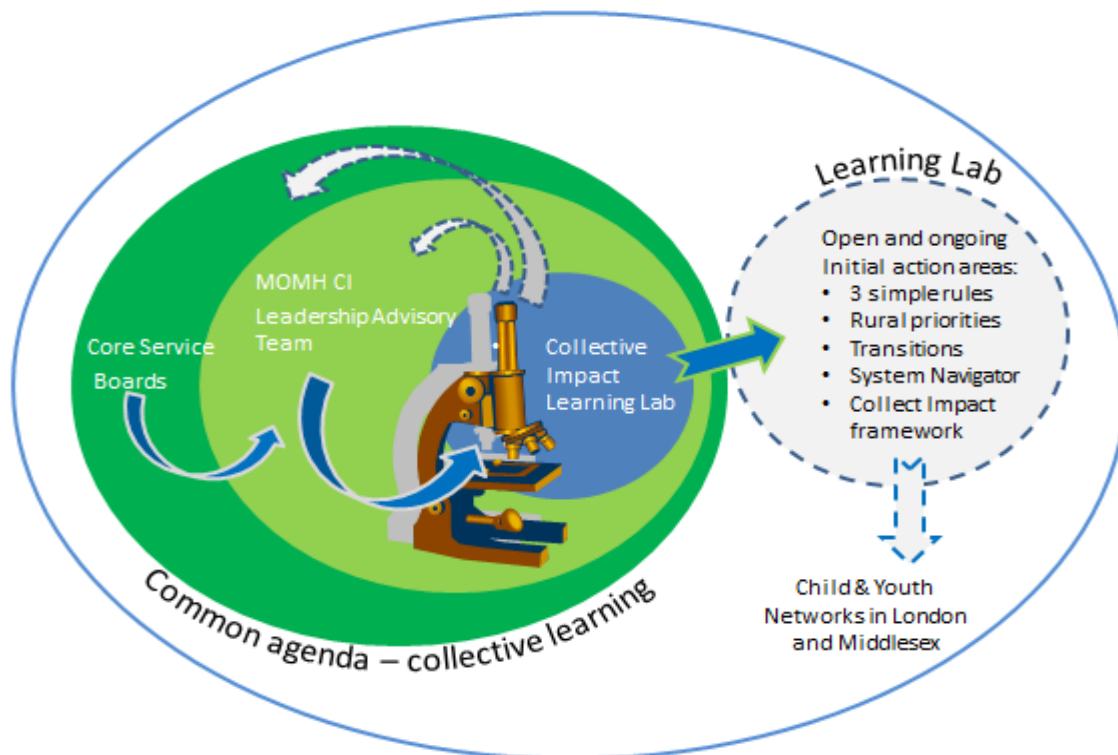
Giving Structure to MOMH for Collective Impact – Year 1

Three groups are proposed to provide the necessary structure to begin the collective impact learning process. The learning process will be mostly project-based.

1. MOMH CI Leadership Advisory Team – comprised of the 11 core service providers
 - Regular meetings to develop and drive CI work, explore shared system leadership
2. Core Service Boards – shared meetings to deepen cross-Board involvement and understanding
3. CI Learning Labs – regular meetings to advance identified action areas, build collective capacity

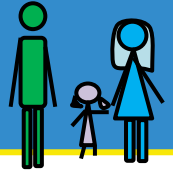
The MOMH System Coordinator will support the different groups, ensure communication flows are taking place and liaise with other stakeholder groups.

The drawing below shows the operationalization of the common agenda to facilitate learning about working collectively for the coming year. The ongoing flow of information coming from the activities of the Learning Lab informs the leadership advisory team and core service Boards which further allows them to inform and build on the Learning Lab initiatives in a mutual learning loop. The initiative occurs within the larger context of Child & Youth Networks in London and Middlesex County. Engaging and aligning with the city and county Networks is a priority identified at the Summit.



The report is intended to provide an overview of the Summit and to stimulate more discussion about how to engage others in collective work of system change. Section 1 of the report provides a chart overview of the Summit activities and content generated. Critical reflections on the Summit and lessons learned are included in the report in Section 2. The appendix includes raw content that was captured during Summit activities. Future summits will benefit from reflecting on this first event and from the added depth of experience acquired over the coming year.

Overview of Summit Activities



The chart below provides an overview of the Summit agenda, activities and the key concepts that were presented. Participants voted anonymously with clickers throughout the day and a half long event. Clickers can support a view of the collective perspective as individual responses are aggregated to show similar and varied beliefs, patterns and experiences present in the room.

Day 1: Morning Session		
Agenda Item	What were the main ideas and/or activities?	Key Concepts
Welcome, introductions and warm up	<p>Participants were asked to say good morning in their first language</p> <p>In small groups, participants were asked to tell others about the reason they first became involved with child and youth mental health.</p> <p>Clicker questions indicated the shared commitment in the room. 100% of participants are passionate about creating a just world where all children can reach their potential. There was some doubt expressed that this is possible.</p> <p>100% of participants believe they do things every day that contributes to a just world. 60% are aware of their contributions, 40% don't think about it. No one said they don't believe their actions make a difference.</p>	<p>Create a welcoming environment. Acknowledge diversity that is present as a strength in the room</p> <p>The common agenda grows from the shared commitment ...with this kind of total commitment, we can figure out how to make positive system change...</p> <p>System change is the long game – it takes time and commitment</p> <p>As a whole, we see ourselves as contributors to a just world. The challenge is to better align and combine our efforts.</p>
Context: Moving on Mental Health	<p>Moving on Mental Health is an initiative by the Ministry of Children and Youth Services to “transform” services by enabling community leadership to determine directions and priorities for the service system.</p> <p>The MCYS language is ...to engage the public and professionals in meaningful ways that will lead to a system that “makes sense” for children, youth and families by responding to their needs as close to home as possible.</p>	<p>Community leadership to work together to determine directions and priorities</p> <p>Engagement</p> <p>Transformation of the system is wanted to address fragmentation and other issues</p>
Questions	<p>Can we use the Moving on Mental Health transformation agenda to make meaningful change?</p> <p>Is the Collective Impact model appropriate and useful?</p> <p>How can we build individual and organizational capacity to think – see – work collectively?</p>	

<p>A video message from Jean Vanier was offered as a fundamental frame of reference to orient our efforts</p>	<p>Jean Vanier speaks about the universal needs of children to be loved and appreciated no matter their circumstances. He calls on citizens to create the conditions for children to realize their competencies and to learn to “trust themselves.”</p> <p>Vanier believes that children with special needs can teach us about love and to be fully human.</p>	<p>All children need to be loved and appreciated</p> <p>More than empathy – we have to consciously create the conditions to nurture potential</p> <p>Children with special needs are our teachers</p>
<p>Questions</p> <p>What has to change for me/us to see special needs children as our teachers? Does this happen already? Where? How do we know?</p>		
<p>International leader on social change, Peter Senge adds another orienting idea (video)</p>	<p>Peter Senge believes that “global transformation is deeply personal.” This idea goes to the reality that our society is interdependent and interconnected and therefore working at the individual level can have system level effects.</p> <p>In the video, Senge notes that no person gets up and decides they are going to do harm or create a bad system and yet we participate in activities that cause harm to the very people the system is supposed to help.</p> <p>The system is a sum total of our unintentional actions. He refers to this phenomenon as “systems ignorance” and requests that his audience take responsibility to develop “systems intelligence”.</p>	<p>Global transformation is deeply personal</p> <p>No one decides to create a bad system...and yet here we are</p> <p>Develop systems intelligence to overcome systems ignorance</p>
<p>Questions</p> <p>How aware are we of the ways in which our actions unintentionally uphold the status quo? How do we foster system-level consciousness of systems as emergent phenomenon – in which our individual actions may be amplified in synergistic inter-relationships? (feedback loops etc.)</p>		
<p>TRIZ exercise Table activity</p>	<p>Participants worked at their tables to identify the necessary conditions that create the worst possible system. From the list, each group identified activities that they can stop doing.</p> <p>A clicker question asked participants to assess how much of their work is life-sucking vs. life giving:</p> <p>None - 1 person 0 – 20% - 2 people 20-40% - 23 people 40-60% - 17 people 60-80% - 15 people 80-100% - 8 people</p> <p>We can assume that the life-sucking activities are bureaucratic in nature. These are not the activities that participants think about when asked if they contribute to a just world every day.</p>	<p>If we intentionally created the worst possible system it would have many of the elements that exist in the system now.</p> <p>There are things we can stop doing</p> <p>Many people spend much of their day in life-sucking activities</p> <p>Look for the life in the system – the resonance - as the places where we want to do more of what is working</p>
<p>Questions</p> <p>How can we put more life-giving actions into the system? Can we track the life-sucking activities that can be stopped?</p>		

<p>Introduction to Collective Impact</p>	<p>Collective Impact is a model: “a disciplined, cross-sector approach to solving complex social and environmental issues on a large scale”.</p> <p>There are five conditions for collective impact:</p> <ol style="list-style-type: none"> 1. a common agenda 2. shared measures 3. reinforcing activities 4. continuous communication 5. backbone support <p>Mindset shifts are needed The way I think... the options I see... the choices I make... Create a common intent Balance content & context expertise (lived experience) Structure to take advantage of emergence</p> <ul style="list-style-type: none"> • Collective seeing, learning, framing <p>Cultivate adaptive responses that are:</p> <ul style="list-style-type: none"> • Participatory – diverse stakeholders build trust and develop shared understanding of the issue • Systemic – focus on reshaping systems and addressing root causes • Experimental and Emergent – improvisation and experimentation with promising solutions 	<p>Collective Impact as a <i>disruptive</i> innovation (disruption of the status quo)</p> <p>Ready by 21 – case study example of a shift from thinking about solving problems to preparing children to be “ready for life”</p> <p>Start with willing partners, learn from the experience and then expand</p> <p>Three simple rules as a way to reduce complexity and effect system change – case study</p>
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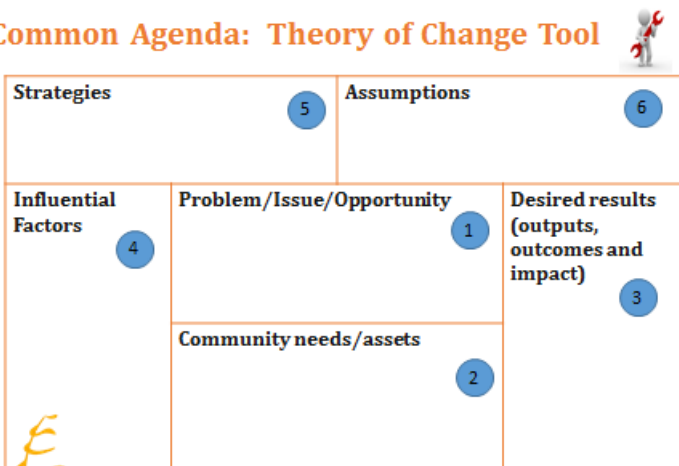
Question	What challenges and opportunities do we see using a CI model?
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Day 1: Afternoon Session

Agenda Item	What were the main ideas and/or activities?	Key Concepts
<p>Building as we go... central working ideas and assumptions for the afternoon</p>	<p>Vanier’s challenge to create the conditions for human potential to emerge, alongside Senge’s assertion that we are all part of a living system, interdependent and interconnected, means that we can’t talk about system change without understanding that our attitudes and beliefs shape it.</p> <p>If we want to change the system – then we can start with how we are in it. ‘Be the change’ we want is the underlying idea to explore.</p>	
<p>3 concepts were presented as potential tools to disrupt our own business-as-usual ways of working, thinking, seeing.</p>	<p>1. Response to Trouble Continuum – is your natural orientation to ‘solving’ or ‘avoiding’ when people you know are in trouble? Both ends have an upside and a downside. The middle ground is learning to ‘be with’ others – neither solving their trouble nor avoiding it.</p> <p>Most participants tend toward being ‘solvers’.</p> <p>2. YOU Power – we have to rethink the way power works in the 21st century. In a world that is interdependent and interconnected – every action has an impact that ripples out. The example from chaos theory of the butterfly that flaps its wings in one place and makes a tornado far away expresses the idea that tiny actions can have big impact.</p>	<p>Other people are not problems to be solved</p> <p>The downside of solving is that even with the best of intentions, we can end up “doing for and doing to” others</p> <p>You are a powerful being in the world – your every action has an impact. <i>Do you pay attention to the impact?</i></p> <p>Paying attention to our individual impact and making</p>

	<p>3. Finite and Infinite Games: Life as Play and Possibility There are two kinds of games – in the 20th century we have played the finite game. In the 21st century we are just learning to play the Infinite Game.</p> <p>In Finite Games there are only winners and losers. The point of playing is to win. Once a winner is declared, the game is over.</p> <p>In the Infinite Game – the point of playing is to keep the game going. Life is not a finite game although we have been taught to play it that way. System transformation is an infinite game that involves ongoing engagement, learning and adaptation.</p> <p>Finite players believe they can decide to play or not, if the game or rules suit them. Infinite players realize that even a decision not to participate is part of the infinite game and has an impact that unintentionally creates the system.</p>	<p>choices collectively under the common agenda can help us develop systems intelligence</p> <p>Individual actions can interact to produce larger system-level impacts</p> <p>You know you are playing a finite game if you get caught up in the deadly serious game of winning or losing</p> <p>You can become an infinite player by doing whatever you can to stay involved and keep the game (of system change) going</p>
<p>Seeing the system with an eye to supporting human potential in HuBe</p>	<p>Each table had a cut-out representation of human potential in the form of HuBe (Human Being). Every HuBe had a different set of life circumstances and at least one known area of strength or talent. The purpose of the exercise was to map HuBe’s journey through life from child to young adult, keeping in mind Jean Vanier’s call for community to create the conditions for HuBe to realize his/her competencies and develop trust in themselves.</p> <p>Each person at the table was asked to write themselves into their HuBe’s life so that all participants would interact in with HuBe. The group was directed to ‘pool’ perspectives as ‘protectors’ to ensure HuBe would be ready for life and to think about the different parts of community and the service system their HuBe would need.</p> <p>Finally, participants were asked to consider how their work already supports HuBe and how it could be improved.</p>	<p>HuBe is always unique and needs a whole community - a service is only a piece in a much bigger picture of a life</p> <p>To be ready for life, every child needs to be academically and vocationally productive, socially and civically connected, physically and emotionally healthy and safe. K. Pittman – Forum for Youth Investment</p>
<p>Questions</p>	<p>Thinking from HuBe’s vantage point out to the system level, does it change the way we see it? How can a system flex to be responsive to each HuBe? Where is the quality of responsiveness found?</p>	
<p>Conversation Cafe</p>	<p>Participants worked individually to answer three questions to shape the common agenda. Responses were written onto post-it notes and then assembled in clusters and mined for themes and common ideas:</p> <ul style="list-style-type: none"> • What is our common agenda? • What is the aspirational change we want to create? • What is important about how we work together? <p>The large group split into three and synthesized the harvest of ideas into working statements:</p>	<p>Preliminary themes: Collective –building and creating together</p> <ul style="list-style-type: none"> • Innovative • People-centred • System that is seamless, accessible, holistic, responsive, well-funded <p>Relationships based on:</p> <ul style="list-style-type: none"> • trust, openness, respect,

	<p>Our aspirational change: We will collectively build an innovative and well-funded system with child, youth and families at the centre – seamless, accessible, holistic and responsive.</p> <p>How we work together: Values of trust, respect, openness, listening, hope and courage. Methodology of a balanced system, sharing of power, co-creation, coordination, co-operation. Outcomes of care and innovation</p> <p>Common Agenda: a vision of getting children ready for life (all children – emotional mental health). A mission to work together across sectors to create/design a child/youth mental health strategy for London-Middlesex.</p>	<p>hope, courage</p> <p>A common agenda that prepares children for life</p> <p>A mission to develop a cross-sector strategy</p>
Questions	How is the desired system change reflective of the 'deeply personal' nature of transformation? Is there a change in me / for me that would allow for 'us' to realize the common agenda?	

Day 2 Morning		
Agenda Item	What were the main ideas and/or activities?	Key Concepts
Welcome back and warm up	Summit participants reflected on Day 1 and shared insights and ah-ha moments with other participants in 1 minute intervals.	Transformation is deeply personal – where is the life in the Summit?
Review of Day 1 'harvest' of ideas	<p>The group reviewed: The aspirational change that is wanted, the way we will work together and the common agenda</p> <p>Group reflection indicated that more discussion is needed before the common agenda set out in day 1 can be taken up</p>	Individual work is part of the same large project under a common agenda
Common agenda: Theory of Change Tool	<p>Participants worked through the Theory of Change tool at their table</p> <p>Common Agenda: Theory of Change Tool</p> 	<p>The different perspectives are needed to create the conditions for collective seeing.</p> <p>System change may be too broad a topic for meaningful discussion – we have to focus our attention on specific issues that go toward the common agenda</p> <p>How do we think about the big system without losing sight of HuBe?</p> <p>Fragmentation and responsiveness of the system are key elements to be addressed</p>

Agenda Item	What were the main ideas and/or activities?	Key Concepts
Conversation Café	Participants returned to the concept of looking for the life in the system by paying attention to how and where the Summit generated moments of meaning for them as individuals.	Working collectively does not generate 'answers' however, we can learn to sense our way along by paying attention and looking for the resonance – build the road as we walk it
Proposition for two take-aways	<p>Common Agenda for the coming year – that we are learning to work collectively on system change</p> <p>Three simple rules as a pilot project: Complexity theory says that you can fundamentally change a social issue if everyone makes 1-3 behaviour changes.¹ Proposition was made to test the theory with a small group of summit participants in the coming year.</p> <p>Using the case study from the Collective Impact presentation – we will explore application of similar rules as a positive disruptor to the status quo over the coming year – across the participant group. Clickers showed 100% endorsement, one person indicated their organization may not support their involvement.</p>	<p>Three simple rules for child & youth mental health system change:</p> <ol style="list-style-type: none"> 1. All children and their families get exceptional and personalized service 2. Everyone is responsible for helping achieve number 1 3. If a client or family member asks a question, I am responsible for finding an answer
Next steps	<p>An online survey was posted to capture Summit feedback</p> <p>A Summit report to be generated to gather up all of the content and reflect it back to the participants as part of an ongoing, iterative, emergent collective process.</p> <p>A series of action items to be identified based on participant input and activities that support the Collective Impact model.</p>	<p>The Summit is a first step down a long road – we are committed to system change.</p> <p style="text-align: right;">"Together we are wiser" Margaret Wheatley</p>

Note: the questions flagged throughout the overview are potential discussion areas for the CI Learning Lab.

¹ Influencer: The Power to Change Anything. Kerry Patterson, Joseph Grenny et al. 2007

A Deeper Look at the Summit

Moving on Mental Health



With a mandate to move forward under the common agenda of learning how to work collectively, this section provides a narrative account of the Summit with a look at the thinking and theory behind the event and also reflections on lessons learned.

Getting Started

The Summit was held to introduce Collective Impact as a model to advance system change under the Moving on Mental Health transformation agenda. As Lead Agency, Vanier Children's Services wanted to check that there is broad support in the child and youth mental health sector to embark on a collective impact initiative. Once the support was confirmed, the Summit provided the opportunity to begin to talk about the 'how to' of system change. Sylvia Cheuy from the Tamarack Institute was enlisted to help design the Summit and co-facilitate the event. She brought the CI background with examples of initiatives in other communities to help us take some first steps.

It's exciting to hear how the sector is coming together to support a holistic system for children, youth and families

Who Attended?

A decision was made to direct the majority of invitations to leaders and influencers in the Core Service agencies. A successful Collective Impact initiative will require a coherent core group of champions from the different agencies to work together under a common agenda to build collective capacity. Engaging more broadly to be cross-sectoral, inclusive and diverse will be included in future work. As well, the initiative will seek to engage whole organizations in shared collective action. This means each agency needs its own core group of aligned leaders able to communicate and champion the unfolding initiative internally, in order to drive the work right through the system.

A small number of parent leaders were also invited to attend with the acknowledgement that the service sector has work to do to become genuinely ready to learn from and develop opportunities that specifically supports and includes citizen leadership.

System Issues Persist

System issues are well known and persistent. They include:

- Erosion of funding and infrastructure over years, children’s mental health has been described as the “orphan of the orphan”²
- Fragmentation of the system – a patchwork of services funded by multiple ministries
- The patchwork is difficult to navigate
- Long waitlists
- Uneven access to services
- Services that don’t meet the real needs of people
- Siloed services in a competitive funding environments
- Little /no funding for coordination creates lack of coordination between services, sectors
- Transition issues between age groups, concurrent issues
- Rural issues – transportation, urban-centred services

We also know from service system users that they want to be treated as whole human beings, not as problems to be solved or as a diagnosis.

Rather than focus on how the system and people are ‘broken’, how can we make the wealth of resources available to the real needs of people? This is the ‘wicked’ question at hand.³ The implicit proposal made at the Summit is to invest ourselves in the application of social innovation through availing ourselves of complexity and systems theories. In other words, we would use the Summit to experiment with evoking collective intelligence.

The Summit – Thinking and Theory

The goal to make the Summit a valuable use of everyone’s time was a priority. The need to make real and lasting system change sits right alongside the spectre of many past attempts with varied results. Transformation agendas come and go. Systems endure because they are complex, resilient and absorb change.

- How can Moving on Mental Health, as a collective impact initiative, actually lead to interruption of the status quo to address seemingly intractable problems?
- How is it any different from everything that has come before?

These were fundamental questions that factored into the pre-Summit thinking and design. While there is widespread recognition that system transformation is needed, there is also acknowledgement that there is not a straightforward or existing roadmap to follow.

We will build the road as we walk it.

Everyone has a role to play in helping to shape the way forward.

The whole is greater than the sum is of its parts.

² Senator Michael Kirby, 2006

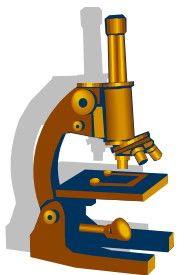
³ A **wicked problem** is a problem that is difficult or impossible to solve because of incomplete, contradictory, and changing requirements that are often difficult to recognize. The use of term "wicked" here has come to denote resistance to resolution, rather than evil. Moreover, because of complex [interdependencies](#), the effort to solve one aspect of a wicked problem may reveal or create other problems.

These are foundational ideas that are consistent with systems theory and the concept of emergence.⁴ Emergence is a process whereby a 'superpower' of collective intelligence forms through the interaction of individuals, none of whom possesses the superpower themselves; rather it emerges as a result of their combined interactions. In this way, collective intelligence belongs to no one person or organization and everyone.⁵ It cannot be commanded or controlled and requires hospitable environments that promise enough time to let discussions deepen. This is a challenge in a sector where meeting fatigue and long hours spent just keeping the lights on, is the norm. It is a daunting task to just to ask people on the frontlines of our most complex issues to start down this road of no guarantees.

Being ok with not having the answers – it's uncomfortable but necessary for change...

"We need to do things differently." How?

The intention for the Summit was to begin the system transformation journey by facilitating a collective experience for participants to make the theory as concrete as possible. Optimally, the event provided time and space to create the conditions for a system level view to begin to emerge, with a goal to see beyond the well documented and entrenched system issues. There was no expectation that an action plan would result but rather, a belief that by gathering a seasoned group of cross-agency leaders and advocates, the experience would produce important insights about how to structure next steps. This did occur for many; there were a number of insights and ideas that have been incorporated into next steps. Nevertheless, there were comments in the online survey that conveyed a sense of frustration that the agenda did not hang together in a way that moved the group through a clear progression to a plan.



Lessons Learned: Assuming it was known in advance, it would have been helpful in the lead-up to the Summit to spell out the experimental nature of the Summit design so that expectations of coming away with an action plan would have been addressed up front and people could have made more informed decisions about whether and/or how to participate.

Also, the agenda itself was uneven in the sense that the activities did not build on each other for the majority of participants. It may have contained too many elements that did not allow for a flow of experience.

⁴ Systems theory is the interdisciplinary study of systems in general, with the goal of discovering patterns and elucidating principles that can be discerned from, and applied to, all types of systems at all nesting levels in all fields of research. (Wikipedia) See also Peter Senge: <https://www.solonline.org/?SystemsThinking>

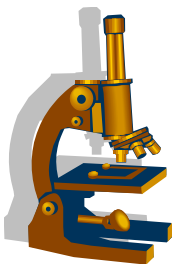
⁵ See an informative lecture on emergence: <https://www.youtube.com/watch?v=D9LiMrcm7Kg>

To the notion that we need to do things differently, there were a number of 'differences' proposed:

- Collective Impact as the model to guide MOMH with an emphasis on fostering collective capacity and starting with a core group of champions
- Grounding the system discussions in the idea that:
 - children with special needs are our teachers
 - large system change is deeply personal – we are not separate from it and,
 - as part of the system we are trying to change, we are unintentionally complicit in maintaining the status quo – there is work to do to develop “systems intelligence”
- Participants were asked to pay attention to ideas and activities that resonated for them, referred to as looking for the 'life' as a key strategy
- By looking for the life in the system, each participant acts as a 'sensor' for the group. *Sense-making has recently been named a leadership competency in the Ontario government*
- Shifting perspective from talking about the system as 'broken' to thinking about the community as a whole with many and different kinds of resources that can be assembled for individual lives as referenced by the cut-out figures at each table, 'HuBe' (human being)
- Framing the system discussions in the afternoon with the specific needs of each HuBe as the starting point to keep the discussion grounded in real world individual needs

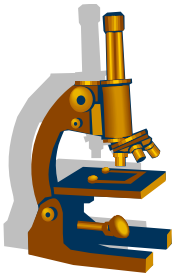
Participants were asked to make sense of the different ideas for themselves because concepts are not a one size fits all. The literature on emergence says, create the conditions for people to put their experience and perspectives together and trust that something unexpected or surprising will come out of it, also called wisdom of the group. A challenge to working this way is that there are no guarantees and people have to be willing to muddle along until clarity shows up, characterized throughout the Summit as an 'ah-ha' moment. Without a direct ah-ha experience, the entire discussion of collective capacity remains abstract and runs the risk of alienating people who want to focus valuable time on tangible action and more familiar methods of getting down to it. The underlying assumption is that collective seeing-thinking-doing is the capacity that most needs to be developed if we are going to achieve collective impact. Developing collective capacity is therefore a priority and a beginning point.

Comments offered by participants in the post-Summit survey showed that even though learning to create the conditions for ah-ha moments was stated as an objective, there was a lack of understanding about why this was a focus or discussion to support it as a strategy.



Lessons Learned: The very idea that building collective capacity is the first step on the road to system change is a major concept that could have been more clearly articulated and checked for resonance with participants at the beginning of the Summit.

Concepts that support a shift in how we look at and/or interact with the system were presented as tools. The tools were provided to assist participants in questioning their own 'business-as-usual' ways of thinking and perceiving. There were a variety of tools to choose from. It was hoped that at the small table discussions, a variation of these 'idea tools' would help during the discussions to move the conversation around and avoid the inevitable drive to familiarity and solutions. In this way, each person was charged with a responsibility to remain faithful to what had life for them in the discussion and to contributing that information for the benefit of the group.⁶

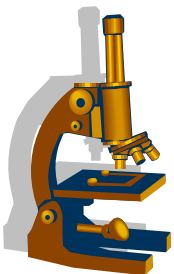


Lessons Learned: This explanation of why the tools were presented was not clear. It would have helped clarify if participants understood the request to stay alert to the ideas and activities that had life for them described the central role they were being asked to play at the Summit. As well, the agenda may have flowed better if people had understood that it was designed to stimulate personal reflection on business-as-usual mindsets.

Concepts presented during the morning session speak to cultural attitudes and beliefs that were not specifically checked as to whether the participants agree or resonate with them. These were central ideas that provided context for the notion of how we can do things differently by shifting individual behaviours as a potential strategy.

- All children need love and acceptance
- Children need community support to reach their potential
- Special needs children can teach us to be fully human
- No one decided to create a fragmented system
- We are unintentionally complicit in maintaining the status quo
- Social change is "deeply personal" – we all have a stake in change

The last three concepts in particular warranted discussion and a check for resonance.



Lessons Learned: The clickers could have been used to check the assumption that we have to become aware of our complicity. For such an important idea, time could have been included on the agenda to consider the wisdom and utility of a focus on individual complicity as a way to interrupt the status quo.

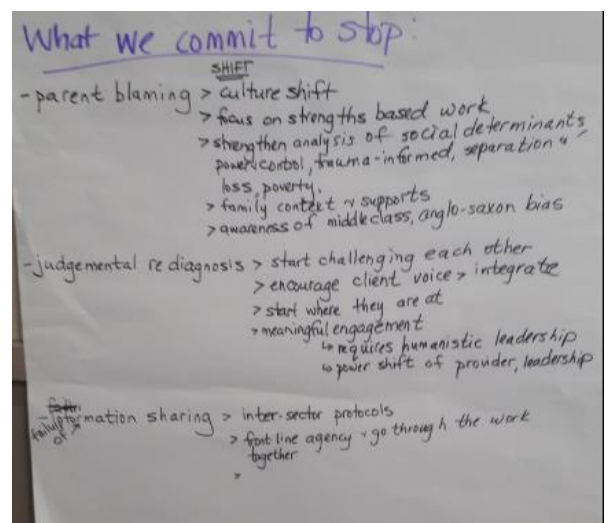
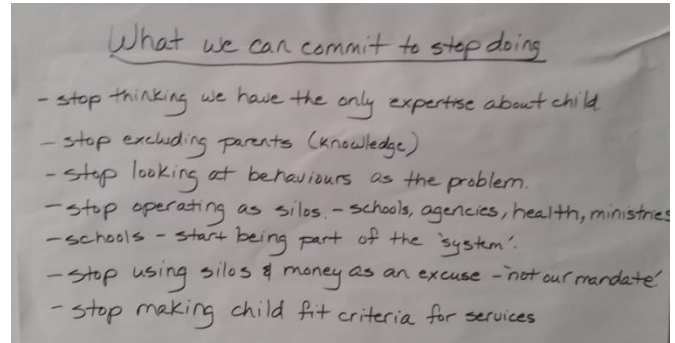
⁶ Peter Senge contends that people who succeed in handling complexity are working in an intuitive domain we don't even consider in our educational theories. Only through the integration of that intuitive domain with the normal, rational awareness domain will we transcend mere modeling. Simply accepting complexity is a major step toward developing that intuitive sense. To accept it means we must recognize two things at a gut level: 1) that everything is interconnected, and 2) that we are never going to figure out that interconnectedness. One implication of that realization is very liberating, because not only are you never going to figure it out, but neither is anybody else. It creates an inherent equality. See: <https://www.solonline.org/?SystemsThinking>

TRIZ

The TRIZ exercise had participants create the worst possible system. From that list, actions that could be stopped were identified. The instructions given stipulated that the stoppable actions had to be immediately do-able. The actions that were identified as 'stoppable' fell into three categories: individuals, organizations and system-level. At the individual level, a number of behaviours were identified.

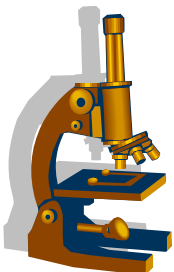
Individuals can stop:

- Blaming parents
- Judging people based on the diagnosis, life circumstances
- Discouraging the parent, youth, child voice
- Not sharing information with other service providers
- Being rigid to structures and program criteria
- Attending useless committees
- Keeping services secret, hidden phone numbers
- Being the expert solving other people's lives
- Being threatened by family insights
- Thinking we have to know it all
- Telling a client in urgent need they don't meet the criteria and not making a link to appropriate service



Following from social change theories and the Vanier-Senge orientation that was presented first thing in the morning, the TRIZ list provides insights into potential next steps for MOMH. These are actions that do not require money or time to implement and they were easily identified. The shift to take seriously the notion that a small number of behaviour changes can impact at the system level was the idea to pursue in the moment.

Reflecting back on the activities of the Summit and reading the comments on the post-Summit survey, it seems TRIZ was the exercise that could have served to pull the different elements of the agenda together to make the Summit journey more coherent and visible.



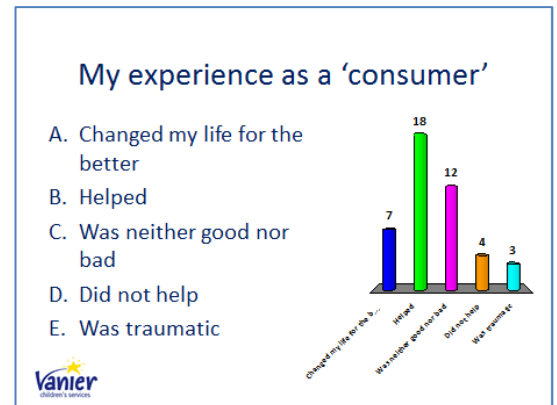
Lesson Learned: As a group, we should have taken time to explore whether participants see the value of prioritizing the stoppable actions as a key strategy for system change. Time was needed to think together how the system could be different if the actions stopped.

As well, what impact or benefit might there be for participants that would go toward enhancing the life in the system? These discussions were opportunities missed at the Summit that can be picked up again for the Learning Lab.

There were also correlations to be made that reduce the invisible line between service providers and service users in thinking about the potential impact of prioritizing stoppable behaviours. Participants were asked if they had sought help in the child and youth mental health system for themselves or a family member. 68% (44) of participants indicated they had. Of those:

- 16% felt it changed their life for the better
- 40% felt it helped
- 27% felt it was neither good nor bad
- 9% felt it did not help
- 7% felt it was traumatic

It would have been useful to ask this group if the behaviours identified during TRIZ would have had an impact on the outcome of their experience as a service user.



The 3 simple rules experiment that was presented on day two was a tangible follow-up to the TRIZ exercise. There was strong endorsement for the pilot project that was proposed; however the connection to TRIZ had not been well established according to post-Summit survey comments.

Collective Impact – Tamarack

The presentation on Collective Impact served to introduce participants to the CI model and to provide examples of other initiatives.

The five conditions of Collective Impact differentiate it from other forms of collaboration. They are:

- a common agenda
- shared measurement
- mutually reinforcing activities
- continuous communication
- backbone support

The CI conditions are not always sufficient to achieve large-scale change. In addition, several mindset shifts are necessary. Who is engaged, how they work together and how progress happens are shifts that can be countercultural and therefore create serious stumbling blocks.



Two case studies provided examples of large CI initiatives using similar orientations to system change proposed during the morning session.

3 Simple Rules case study - addressing complexity

The first case study was an international hotel chain that used the 3 Simple Rules to facilitate the mindset shifts (noted in the text box) in an initiative that set a clear goal of exceptional customer services across the organization. The organization included hotels in many different countries and demographics that were able to achieve collective impact through the application of the rules.

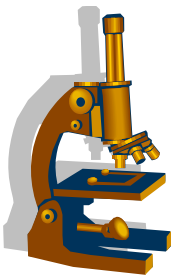
The hotel case study can inform MOMH as a collective impact initiative because the concept of 'client or family-centred service' is already embraced by most organizations.

When asked with clickers:

- 54% of (59) participants indicated their agency operates as a client/family-centred organization
- 37% indicate their organization aspires to be client/family centred
- 8% say their organization is top-down and rule bound

When asked whether their clients would agree, there is some variation on the self-perceptions and the anticipated experience of service users:

- 46% of (57) participants indicated service users would agree they are client/family centred
- 32% indicated service users would say the organization aspires to being c/f centred
- 23% would say their organization is top-down and rule bound



Lesson Learned: The variation between the perception and experience of achieving client/family centred service is a potentially creative space where the experience of families can provide the leadership and experience necessary to align the two. This will be an area to explore in the learning lab with respect to designing the adaptation of 3 simple rules experiment for MOMH in year one.

The leadership experience of organizations in adopting a client/family centred approach provides a rich background that can support the design process for the collective initiative experiment across multiple agencies.

Ready for Life case study

Shifting the orientation from solving problems to preparing children and youth

How Simple Rules Help Navigate Complexity



International Hotel Chain's **3 Simple Rules** for Exceptional Customer Service:

1. Exceptional Customer Service is our number one goal.
2. All staff, at all levels are responsible for helping us to achieve our goal of exceptional customer service
3. If a client asks you a questions, whoever you are, you are responsible for finding them the answer they need.

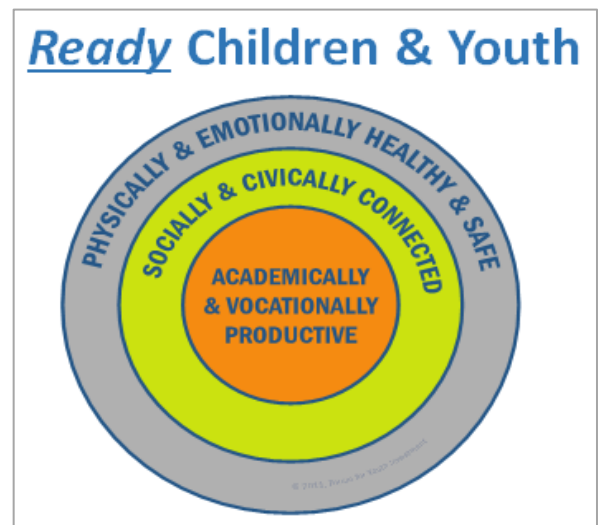
"Simplicity is complexity resolved."
- Constantin Brancusi
Romanian Sculptor



The concept of preparing children to be 'ready for life' was introduced during the Collective Impact presentation as an example of a common agenda that emerged over time in an American initiative led by Karen Pittman.⁷ The statement is contrasted to the more traditional orientation of solving problems for children.

The Readiness Abilities are defined as:

- I can think & create in ways that help me navigate and experience life
- I can feel and express emotion appropriately and as a way to connect with others
- I can get & stay healthy, physically, emotionally, mentally and spiritually
- I can apply learning in the real world to meet life demands
- I can use insights to grow and develop in each stage of life
- I can work and stay focused in each area of life
- I can relate to others & the world by forming, managing and sustaining my relationships
- I can engage with people and places by being present and engaging in meaningful, real and honest ways
- I can persist through struggles and maintain hope no matter my challenges
- I can solve problems and make decisions about intellectual, social, moral and emotional issues



The example of looking at the service system as part of a whole community approach to prepare children for life provided the context for the HuBe afternoon exercise. There was significant interest from Summit participants in learning more about the Ready by 21 initiative. If the 'ready for life' case is to inform the MOMH common agenda, there will need to be more in-depth exploration of the approach and frame. This is a potential action item.

77% of (56) participants surveyed with clickers indicated the Collective Impact presentation provided the information needed to support using the model for Moving on Mental Health.

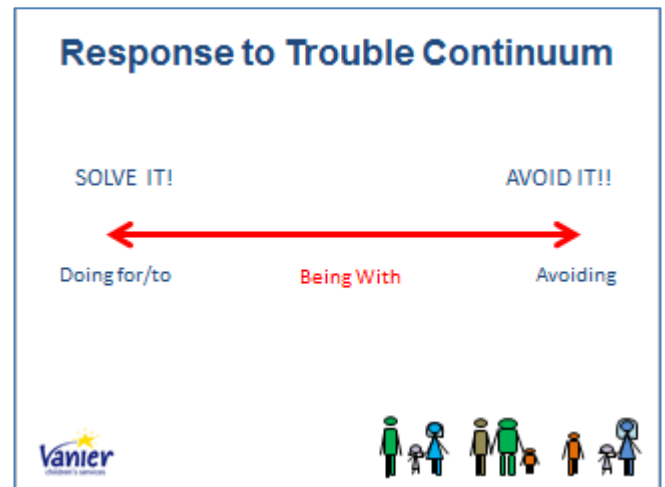
Summit afternoon activities

The afternoon began with a presentation of three concept tools to support Peter Senge's call for development of greater systems intelligence. The tools were specifically intended to support participants in reflecting on the ways in which we are complicit in maintaining the status quo.

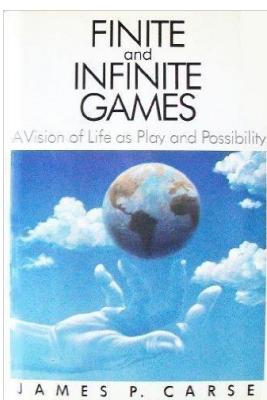
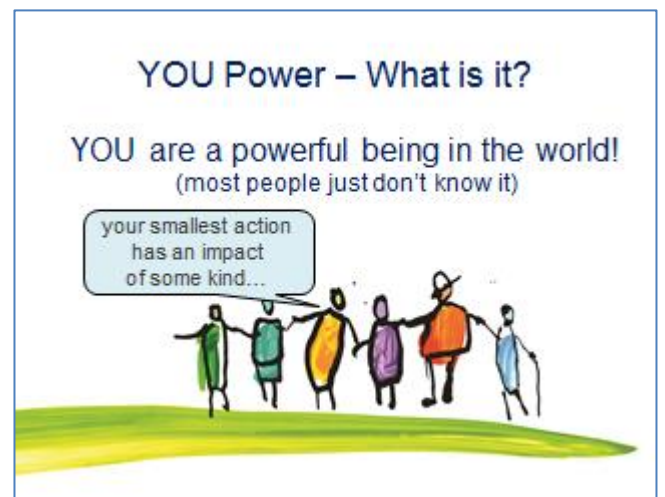
⁷ Karen Pittman – Forum for Youth Investment

They were:

1. **Response to Trouble Continuum** – a short exercise provided for participants to assess their natural orientation to 'solving' or 'avoiding' when others are in trouble. Both ends of the continuum have an upside and a downside. The middle ground is learning to 'be with' others – neither solving their trouble nor avoiding it. Most participants tend toward being 'solvers'. The unintended downside of solving can be 'doing to and for' others in a way that is disrespectful and/or harmful.

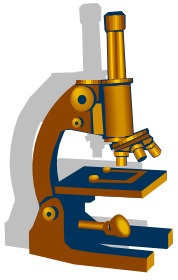


2. **YOU Power** – we have to rethink the way power works in the 21st century. In a world that is interdependent and interconnected – every action has an impact that ripples out. The example from chaos theory is of the butterfly that flaps its wings in one place and makes a tornado far away. Tiny actions can have big impact because of the complex network of relations. The theory suggests that to cultivate systems intelligence, we have to be more aware of own impact at the micro level to realize the potential to combine and harness small actions that can have a collective impact at the system level.



3. **Finite and Infinite Games: Life as Play and Possibility**

There are two kinds of games – in the 20th century we have played the finite game. In the 21st century we are just learning to play the Infinite Game. In a finite game, there are only winners and losers. The point of playing is to win. Once a winner is declared, the game is over. In the Infinite Game – the point of playing is to keep the game going. Life is not a finite game although we have been taught to play it that way. System transformation is an infinite game that involves ongoing engagement, learning, adaptation and innovation. Each of the concept tools held life for different people. Finite and Infinite games held the most resonance for 38% of participants, Response to Trouble for 30% and YOU Power for 18%. Moving to next steps, they are concepts that can help shape thinking and build engagement and learning.



Lessons Learned: Both the orienting ideas in the morning and the concept 'tools' presented in the afternoon are not in themselves 'new' ideas and so may have seemed too familiar to resonate 'life' for some participants. More context and discussion would have been helpful to emphasize the utility aspect of the tools to lever ourselves out of familiar perspectives. An assumption was made based on Senge's definition of systems ignorance that our familiar perspectives need to be challenged. Neither the merit of the assumption, nor the potential utility of the tools were given time for discussion.

HuBe (Human Being potential)

HuBe was a cut-out paper figure at each table to orient participants to systems thinking from individual and real world needs. The HuBe exercise was designed to ground all of the preceding activities in small table discussions with participants charged as protectors of their HuBe. Each HuBe came to the table with a life situation and a talent to be developed. Participants added life challenges that would bring HuBe to their organization or neighbourhood, making each HuBe a complex issues child.



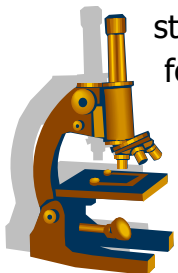
Participants attended to their unique HuBe, imagining a whole life from childhood to young adult by naming services and supports in the community that would meet Jean Vanier's challenge to consciously create the conditions for HuBe to become fully human.

The HuBe exercise was an experiment to see if a group tasked with looking at the system together as HuBe's protectors might prompt a different or altered system view. Rather than talking about the 'brokenness' of the system, the exercise was designed to encourage exploration of a wide variety of opportunities and resources that are needed for a whole life, in addition to services.

In the check for resonance following the HuBe exercise,

- 68% of the participants indicated the exercise had 'life' in it for them, helped them think about their work differently and/or helped them think about HuBe differently.
- 32% indicated they found the exercise too long and/or not engaging.

If responsiveness of the system is an outcome that is wanted for MOMH, then thinking about how to make it responsive to particular HuBe needs across a range of services could be a vehicle to stimulate more discussion and creative ideas. How to consistently do more of what works for each HuBe, is a system-level, collective impact question that bears further discussion.



Lessons Learned: Time was not given to explore the relevance of HuBe in a system discussion. It is a discussion that can be picked up by the Learning Lab.

Toward A Common Agenda – aspirations and how we will work together

The final exercise of the day had participants consider three questions:

- What is our common agenda?
- What is the aspirational change we want to create?
- What is important about how we work together?

Small groups synthesized individual post-it notes that responded to each question to distil common ideas:

1. What is our common agenda? Vision and mission statements were drafted:

Vision: Getting kids ready for life (all kids – emotional mental health)

Mission: Working together across sectors to create/design a child/youth mental health strategy for London-Middlesex

The post-summit survey shows a range of responses:

- 35% resonate with the statement without qualification
- 27% with minimal qualification
- 21% with some qualification
- 15% with significant qualification
- 3% do not resonate or endorse the statement

2. What is the aspirational change we want to create?

We will collectively build an innovative and well-funded system with child, youth and families at the centre – seamless, accessible, holistic and responsive.

The post-summit survey shows a range of responses:

- 42% resonate with the statement without qualification
- 27% with minimal qualification
- 9% with some qualification
- 18% with significant qualification
- 3% do not resonate or endorse the statement

3. What is important about how we work together?

Values of: trust, respect, openness, listening, hope, courage

Methodology: balanced system, sharing power, co-creation, coordination, cooperation

Outcomes: care, innovation

The post-summit survey shows a range of responses:

- 38% without qualification

- 38% with minimal qualification
- 12% with some qualification
- 9% with significant qualification
- 3% do not resonate or endorse the statement

The exercise generated lists that need more careful consideration to embed them into the common agenda, our shared aspirations and the way we will work together. Comments in the survey also ranged from supportive to non-supportive with cautions about the value of 'motherhood' statements that are not made concrete. The proposed Learning Lab can provide time and space to discuss and build on the Summit content.

Summit 'Ah-ha' indicators of collective intelligence

At the end of Day 1, the responses to clicker questions told us that approximately 40% of participants reported having experienced an 'ah ha' moment. 8% of those had more than one experience. While clickers are not precision instruments for data, they can show a group where the heartbeat of experience occurred over the course of the day.

As for the goal to energize and inspire with the Summit experience, only 3 people left feeling energized, 39 felt the day was good but tiring and 13 were not engaged. The Summit day one journey was not a smooth beginning for a significant number (24%) of people. Nevertheless, the commitment to continue down the path was clear in both the clickers and online post survey.

Day 2 – Morning session

Participants briefly revisited the common agenda, aspiration and how we will work together on the morning of the second day and acknowledged that more work is needed to bring life to the ideas that were generated.

It was proposed that our common agenda for the time being can focus on the learning that is needed to participate in a collective impact initiative. It was acknowledgement in the post-Summit feedback that the idea of collective impact seems sound but how to actually bring it about is largely unknown.

Clicker responses at the time indicated 97% of (45) respondents can support *learning to work collectively* as our common agenda.

Theory of Change

The final exercise of the Summit was to begin discussion of identified issues using a Theory of Change tool provided by Tamarack. Each small table identified a problem, issue or opportunity they wanted to discuss.

A number of specific issues surfaced in the discussions that can continue as workgroups post-Summit:

- Transition to adult mental health
- Rural priority – lack of connectivity and services
- Increased needs for ages 3-5
- System navigation

As well, system areas were identified that support a number of themes proposed throughout the Summit as strategic directions that can support a 'different' approach to system change:

- How to become child/youth/family centred as a system
- Ready for Life
- Shifting resources with child needs moves through systems, ages and stages / enhancement of system responsiveness and equity

Influential Factors – priorities

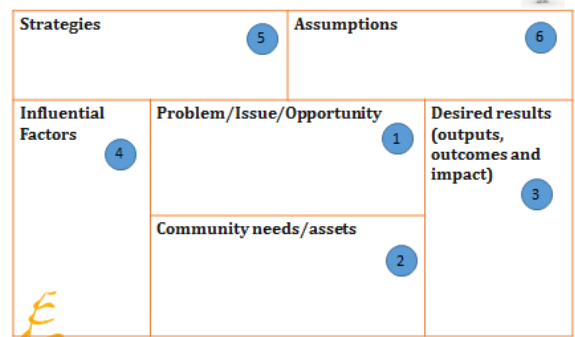
It will be important for MOMH to be nested into larger community initiatives such as the child and youth networks in London and in Middlesex County. There is also an MCYS Special Needs Strategy that is developing concurrently.

Specific Areas for Follow-up – the CI Learning Lab

The invitation beyond the Summit is to continue on as learners working together to build the community's collective muscle in the child and youth mental health sector. A regular Collective Impact Learning Lab has been proposed to continue driving the overall collective impact initiative as well as the specific action areas identified at the Summit. The CI Learning Lab will be a face to face meeting format. Summit participants will be able to participate in person or by providing input through email and/or surveys. Progress will be tracked and reported on through newsletters and by email. At the time of this report, the details of how the Learning Lab will work are still being discussed by the Leadership Advisory Team.

Over the course of the Summit, there were four initiatives that took on enough detail to become early action items for the Learning Lab:

Common Agenda: Theory of Change Tool



1. Three simple rules as a collective impact pilot project
2. Rural priorities – addressing lack of services and connectivity
3. Transition to adult services
4. System Navigation

1. Three simple rules – collective impact pilot

A proposal was made to pilot a *Three Simple Rules* project over the coming year. Social change theories have demonstrated a group can address an entrenched complex issue with a few simple behaviour changes that a whole population takes up.⁸ It is a proven theory with numerous examples. One example is the hand-washing project in hospitals. If every person washes their hands, the infection rates will do down. The challenge is to engage everyone in taking up the behaviour. Three Simple Rules for MOMH is taken from the Tamarack case study with a large hotel chain. The hotel initiative contended that if everyone followed the three rules, customer satisfaction and loyalty would increase. They have had great success.

The Moving on Mental Health pilot has a similar hypothesis with a slight variation on the hotel rules as a starting point. The theory is that if everyone applies the three rules, children, youth and families will experience a more responsive system. The pilot will include summit participants and potentially their organizations for the coming year. At the end of the year, we will assess the impact on families, providers and organizations.

The MOMH proposed rules are:

1. All children, youth and their families get exceptional service
2. Everyone is responsible for helping achieve rule number one
3. If a client or family member asks a question, you are responsible for finding them the answer they need

The logistics of the pilot will be worked out in the CI Learning Lab. Parent leaders will be engaged with the working group to help refine the rules, define 'exceptional', create data gathering methods and identify the shared measures. The pilot has resonance because the concept of person or family centred service is not a new idea for many agencies. Application of the rules across organizations is the potential innovation.

Three simple rules as a pilot was supported by 97% of the participants at the summit.

The online survey showed:

- 83% of respondents already work by the rules
- 84% are willing to put the proposed three rules into practice immediately
- 79% believe consistent application will have real impact on the system

⁸ See Harvard Business Review: <https://hbr.org/2012/09/simple-rules-for-a-complex-world>

- 84% are willing to consciously reflect and document their experiences

2. Rural priorities – addressing the lack of services and connectivity

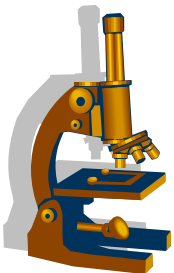
The common agenda exercise on day two propelled a discussion that has created a working group who want to address service inequities in the county and build relationships between city and county organizations and initiatives. The group made considerable progress during the Summit discussion and will be meeting to continue developing a plan of action.

3. Transitions

The Summit provided a similar opportunity for leaders from several agencies to talk with each other about how to address transitions as a common agenda activity. The group has a concrete idea that will be supported through the proposed Learning Lab.

4. System Navigation

Discussion about 'System Navigation' gaps in Middlesex County occurred at another table. "Service coordination" is identified as a Core Child/Youth mental health process. Most of the Core Service Provider agencies offer some percentage of this work; however, "Service Navigation" remains undefined as a specialized classification to support those making the journey through our services, and in/out of other sectors (Health/Education). There was clear interest in continuing the discussion further with regard to potential redeployment of some existing resources to support system navigation activities.



Lessons Learned: The Summit provided moments of inspired thought that did not add up to a whole experience for many participants. In working with large groups, it is important to take the time and check for resonance at each step. Goodwill and commitment to the issue are essential for supporting experimental environments.

The proposed Learning Lab will be an open environment in the sense that anyone who wants to explore an issue or idea will be able to put it out and gather other interested CI champions to explore.

Final Thoughts



The December Summit stands as a marker for Moving on Mental Health as a collective impact initiative in London and Middlesex. The clear mandate to move forward with collective impact is testimony to the commitment of the Summit participants and to the shared vision of a whole service system that is responsive to the real needs of people. The Summit provided an important opportunity to come together and declare that commitment, and to begin the process of thinking together about how to make the big vision of system transformation come to life.

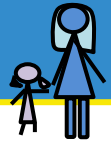
The hope is that this report will continue to fuel discussion and emerging ideas and insights about 'how to' make large scale system change using a number of the ideas and tools proposed at the Summit. The lessons learned speak to design and the experience itself and they will help to inform future summits. It was an imperfect start but also successful if it leads to concrete next steps and movement that engages and enlists people as champions. Next steps will see the installation of regular meeting structures and communication vehicles that will serve to pick up on the Summit learning. Our goal for the coming year is to learn much more about creating the conditions for collective and system intelligence to emerge, working within a collective impact framework and using concrete issues and activities that combine to advance the common agenda of Moving on Mental Health.

Everyone who is willing can be part of the MOMH collective learning community. We will continue to experiment by finding the courage, compassion and persistence to try and fail and try again – always reflecting and learning from our experiences and then looking for the life that can help determine the next small step toward an always emerging horizon. We will need to support each other and champion the collective capacity building work in increasingly larger circles to others in our organizations and in the context of other large social change movements. Learning to engage everyone in a way that enlivens is an ongoing priority because in an interdependent, interconnected world, all people matter and have important wisdom and contributions to make. We need leadership at all levels of the system that is plugged in to the common agenda. Ultimately, it is up to the people who participate to drive social change in small, large and everyday ways.

Thank you again to everyone who participated in the Summit.

Appendices

Moving on Mental Health



1. Participant Feedback – online surveys
2. Content notes – lists from the content generated at the Summit
3. Needs and Contributions – what do you need, what can you give to MOMH?

1. Participant Feedback – online surveys

Thirty-nine participants took time to complete the follow-up online survey. This represents 60% of the participant group who also voted with clickers at the Summit. With respect to their experience:

- 93% felt their ideas were welcomed and space was given to express views
- 77% felt there was a good balance between presentation of ideas and opportunities to engage with others
- 60% felt engaged throughout the Summit, 25% were neutral
- 90% are inspired and energized by the goal to work collectively

Comments from participants show that for some:

- The agenda was uneven in the sense that the flow between ideas and activities was not smooth or connected.
- The agenda was too broad and the knowledge base in the room not well mined to have meaningful dialogue and collaboratively defined steps to move forward
- A pre-summit session was suggested to orient to MOMH and Collective Impact
- Disappointment that there were not more concrete action items identified
- Suggestion to assign seating to mix the groups from the beginning
- For at least two participants, the summit was not a good use of their time and there was real disappointment and frustration that the agenda did not fulfil the promise
- Only 3 people felt energized at the end of the first day – there is much to learn about how to make the experience energizing

With respect to collective impact:

- 84% feel the collective impact approach provides a good basis for working together on system change
- 84% believe they have a good enough grasp of the basic principles and method to see how they can participate in the ongoing process
- 48% experienced the potential power of collective impact during the summit
- 74% believe there is sufficient goodwill and skill among the system stakeholders to work collectively to bring about meaningful system change
- 84% are interested in developing greater skill in thinking and working collectively – learning by doing

- 95% believe they can contribute to achieving collective impact
- 92% believe their organization is committed to being involved in moving forward

Comments included:

- The need for strong leadership to bring people together and to support formal and informal leadership
- Meaningful engagement of the decision makers in the organizations will be key to success
- System level change requires system level leadership from the joint ministries
- Collective impact is critical for a system approach – to get to collective action
- A more cohesive approach / more time to learn about collective impact would have been helpful
- Collective impact is necessary but no one knows how to make it happen. once change is required, people tend to dig in their heels
- The approach is great – my only worry is that people /agencies need to leave their own agenda at the door and at times, this was not my experience at the summit

Going forward, summit participants indicated readiness to be involved:

- 78% to participate on an advisory group
 - 21% somewhat / 36% likely / 21% definitely
- 93% to participate on ad hoc working groups
 - 21% somewhat /41% likely / 31% definitely
- 96% to be an active champion in their agency
 - 3% somewhat / 33% likely / 60% definitely
- 100% to attend learning labs
 - 11% somewhat likely / 32% likely / 56% definitely
- 100% want to receive updates and will take interest in the ongoing process
 - 24% likely / 76% definitely

Comments about action steps include:

- Keep the synergy going, provide brief updates and opportunities to continue networking
- Understand and accept that not everyone is ready for change and that our role is to provide information so those that are not can decide for themselves how to be involved
- Define measureable outcomes – can provide assessment from Community Action Research. Can discuss alignment of CYN planning with outcome measures
- We do need clear, explicit terms of reference in terms of scope and sphere of influence of the collective group
- Need a clear plan to involve families and youth in meaningful way
- Start by getting the boards and organizational decision-makers together to make specific commitments

2. Participant content generated through discussion and activities

TRIZ – What can I stop doing? (Day 1: Morning)

The first step of the TRIZ exercise had participants create the worst possible system. From the list, each group identified activities that can be stopped. These included:

Individuals can stop:

- Blaming parents
- Judging people based on the diagnosis, life circumstances
- Discouraging the parent, youth, child voice
- Not sharing information with other service providers
- Being rigid to structures and program criteria
- Attending useless committees
- Keeping services secret, hidden phone numbers
- Being the expert solving other people's lives
- Being threatened by family insights
- Thinking we have to know it all
- Telling a client in urgent need they don't meet the criteria and not making a link to appropriate service

It's exciting to hear how the sector is coming together to support a holistic system for children, youth and families

Organizations can stop:

- Top down leadership
- High ratios of managers to staff
- Narrow criteria for services
- Rigid rules, strict inflexible business hours working families can't access
- Providing service only in crisis, acute, crash and burn stage
- Ignoring family support needs
- Putting people through the hoops only to find out they don't meet program criteria
- Unclear admission and discharge information
- Sending children with attachment issues far from their community and family
- Picking and choosing who gets served
- Culture of the professional expert – being the 'expert' in other lives
- Long irrelevant assessments / physician-based language
- Accepting status quo waitlist problems
- Providing English only
- Penalizing people for missing appointments

Being ok with not having the answers – it's uncomfortable but necessary for change...

System Level stops:

- Complicated intake with copious amount of info at each agency with no sharing between agencies or inter-agency
- Competing government priorities – constant change initiatives with no new resources

- Creating data elements for unknown reasons
- Clinical assessments at the end of services (timed out)
- Funding that is carved up and inflexible
- Doing more with less – staff asked to do many jobs/projects, overloaded and overworked
- Restricting referrals to psychiatrists
- Ignoring the value of prevention and early intervention
- Ignoring the whole of child and family needs – dealing only with issues one by one
- Working in siloes, competing for resources
- Being London-centric

HuBe (Day 1: Afternoon)

Tables attended to their unique HuBe as a child and youth, imagining a whole life through childhood to young adult drawing on services and supports in the community to meet Jean Vanier’s challenge to consciously create the conditions for HuBe to become fully activated. In addition to the services, participants identified important relationships and supports for HuBe. Non-service elements identified include:

- Peer support
- Music / singing lessons
- Fun
- Hugs
- Job readiness / part-time employment
- Scholarships
- Dance lessons
- Opportunities to try and fail and learn to build resiliency
- Pro-social recreational opportunities to support a sense of belonging
- Faith or cultural community support
- Boy Scouts / Girl Guides
- Big Sisters /Brothers
- Art classes
- Encourage goal of post-secondary education
- 4H Club
- Encourage HuBe to volunteer
- Tutor
- Supportive teachers who recognizes HuBe’s unique strengths

One cannot know all of the resources and so we need trust and respect, continuous communication in a network of hubs

Ready for life is an important concept

The HuBe exercise was an experiment to see if a group tasked with looking at the system together as HuBe’s protectors might prompt a different or altered view of the system. Rather than talking

about the 'brokenness' of the system, the exercise was designed to encourage exploration of a wide variety of opportunities and resources in addition to services.

In the check for resonance following the HuBe exercise,

- 68% of the participants indicated the exercise had 'life' in it for them, helped them think about their work differently and/or helped them think about HuBe differently.
- 32% indicated they found the exercise too long and/or not engaging.

Common Agenda Framework (Day 2)

Individual tables generated the content that has been assembled under the headings below.

1. Problem / Issue / Opportunity:

- A mental health system that is child/youth/family centred
- Kids are not as healthy as they could be – 1:5 experience mental health issues
- Transition to adult mental health
- Rural priority – lack of connectivity and services
- Increased needs for ages 3-5 – action inter-relationships
- Ready for Life
- Shifting resources with child needs moves through systems, ages and stages
- Enhance responsiveness and equity

2. Community needs / assets / resources:

- Child & Youth Network London
- Collaboration, coordination among partners (sum is greater than parts)
- Conversations between Child & Youth and Adult sector (collaboration)
- Warm referrals
- Use peers
- Strengths-based resilience approach
- Lots of agencies
- Involve youth and families in designing change
- Define capacity

3. Desired Results (outputs, outcomes & impact)

- Support that keeps kids at home safely
- A blend of formal and informal supports
- Longer term supports - not all brief
- Canadian Index of Wellbeing
- Iter RAI for kids in treatment
- Easy transitions to adult system as reported by youth and family
- Fewer people lost to follow-up

- Less need, shorter involvement in adult system
- Transitions to school
- Support for parents
- Common identifiers
- Deliver the right services at the right time, in the right place by the right people

4. Influential Factors

- Child & Youth Network – London
- Child & Youth Network – Middlesex county
- Circles – Middlesex county
- Special Needs Strategy
- Family-centred research
- Social determinants of health
- Social media
- Engaged parenting
- Funder
- Policy and legislation (provincial and agency)
- Change in government
- Demographics: age/ culture/ economic/ education/ history/ needs etc.
- Youth and families
- Provincial agenda
- Competing agendas between ministries
- Economy

People from across sectors are passionate about the need for a change and agree on the importance of the mental health of children and youth

5. Strategies:

- We need a child and youth mental health strategy
 - With common language and definitions (i.e. ages)
 - Policy changes for transitional age youth
- Implementation of coordinated access
- Single consent
- Broaden partnership to be inclusive
- Patient / family empowerment (ownership of their mental health info)
- Inter-agency transition planning – active involvement of all involved (including youth, families)
- Flex age limit mandate – adult service develops therapeutic relationship with 15 year olds / continue follow-up after transition
- Develop a table with various agencies to develop coordinated effort
 - Join resources
 - Shift resources to focus on this group
 - What can we give, not what can we withhold

- Dialogue around the collection and context of data for the purpose of decision-making
- Share all information to enhance coordinated informed service delivery

6. Assumptions

- Assume people can work together
- Sustainable funding and resources
- Role of Vanier as facilitator but collaborative leadership
- Assume organizations are committed and dedicated
- Ongoing communication, trust, transparency
- All working from the same model
- Flexibility in level of support which is individually determined
- Things will go wrong and that's ok – keep trying and adapting / funders will allow double-dipping
- We need a common language / ownership / understanding
- The appropriate discussions / focus groups will be conducted before any permanent decisions / changes are made

3. Contributions and Needs

Participants were asked what they can offer to the MOMH collective impact initiative, and what they need to be able to participate:	
I can offer	I need
Openness to participate, experience in implementation projects, goodwill	A commitment to consolidate and honour the work done in the last day and a half / a date to meet again / a steering committee
Family Centre Spaces – meetings / IP toolkit to assist with collaboration work / CYN meetings that can include discussion re mental health / CYN bulletins to communicate to members /opportunities to bring people together / social media platforms to promote and communicate with families / service system research	Email invitation to participate
Commitment to change, good ideas about what the new system needs to include	To continue to be given the opportunity to participate in the development of the new system
Consider the fit of our organization going forward and support efforts as necessary	Receive information about the day in an organized way
Commitment and trust we will together create a successful CYMH system	Don't lose track, keep going, keep connecting with us
Collaboration, discussion, consultation, joint responsibility	Continuous information, collaboration in the sectors, recognition of French language right to service
Promote health and wellness	Time and resources to commit and dedicate to the process
To assist in the engagement of parents in this initiative	For parents to be fully involved
Whatever it takes to continue the conversations / reach out across sectors	Momentum creating activities with focus – let's get some early success
Linking, weaving together, facilitating, collaboration, holding the big picture	Openness, candor, communication – face to face / follow-up
	Communication ongoing / report back on forum results / meaningful engagement / participation in future pilots / efforts
Convening, admin, organizing, info-sharing re MOMH	A few willing agencies to work with me in first steps
Time, expertise, connection	
Passion to keep the conversation going	
	Clearly defined outcomes
Time, support from leadership	
Commitment to make time for this	People to continue to work together
Expertise in youth engagement and listening to youth needs	Consolidated info on supports available to help support navigation of services

Involvement and patience	Continued conversation / connecting to 'like-minded' individuals
Space, diverse perspective (continuum)	More tables to discuss wrap-around transitions
Contribute on issue of transition from child to adult services	More discussion and planning for change between CYMH and adult MH
Support for youth's voice at future meetings	More tables to listen to the people we serve – no excuses
Can contribute space, leader's time, staff to implement	Continue to involve adult MH in conversations
People to plan	More tables between adult and child/youth services / need CMHA
Our time and people to participate in the solution	
Change management skills, evaluation skills	Communication, safe environment, time together (face to face)
Hope that things will really change	Voice, action
Eagerness, positive regard for peer organizations	Freedom to contribute in various ways / voice when unable to attend
Systems insights, collaborative experience	Relationships with colleagues beyond the task
Willingness to collaborate with an open mind / support and advocacy	Communication mechanism (consistent) / repository of info (eg. health chat) / contact info – list of participants from summit
	Smoother transition between youth and adult services working together
To be flexible and open to change in how I do what I do	Ongoing involvement and communication / multiple opportunities / repeatedly asked for interaction and engagement
Experience and perspective from other collective work	Connection / respect for experience / willingness and interest to align MH supports with CYN activities
I will participate if requested	Ongoing engagement
We commit to realign services to make an impact	A clear understanding of the goal of this work and my organization fits