

**Niagara Infant Mental Health Meeting
Family and Children's Services Niagara
10:00 a.m. – 12:00 p.m.**

Date: January 26, 2015

Present: Tracy Belcastro, Dr. Andrea Feller, Amanda Hicks, Kelly Catherwood, Gina Spratt, Julia McNamara, Michelle Walker, Stacy Potter, Kim Cole, Helen Lake, Jennifer MacNeil, Shelley Jobson, Heather Henry, Debbie Bent, Linda Morrice, Lorrey Arial Bonilla, Rochelle Plett, Brenda Packard, Dr. Chaya Kulkarni, Lena Cloutier (recorder)

Regrets: Angela Hayes (Niagara College)

Item	Discussion	Action
1. Welcome and Introductions		
2. Review of Previous Minutes		
	Accepted as written	
3. New Business		
Overview of Jan 8 training at Pathways	Tracy expressed thanks for the use of the Pathways sites for training January 8 th . Those attending felt it would be better to work on plans together as a group. More confident moving forward using tool and Developmental Support Plan.	Received very positive feedback from those who attended. It identified that people felt more equipped and had a better understanding.
Overview re: Kickoff Event	Kickoff event taking place March 3 at 8 a.m. at St. Catharines Museum – Lock 3. Dr. Robin Williams will be the keynote speaker, with Chaya speaking as well.	Have heard that the Niagara Falls fire department will be attending. Waiting to hear if Niagara EMS, Niagara Regional Police and St. Catharines and Welland Fire Departments will be in attendance.
	Asked first responders if logos could be used at the bottom of the poster. Niagara Falls fire department endorses this initiative. Poster to be hung in the fire hall. Poster has very powerful pictures and literature about attachment with child.	Unveiling ceremony – March 3. Each first responder endorsing can take a poster back to their sites – EMS, Niagara Regional Police and Firefighters.
	Niagara Falls fire department has indicated they are very happy to endorse this. They have a donation for Infant Mental Health, although this was not requested, it is appreciated.	Although we are not fundraising, the funds are appreciated and Chaya will look to see where we can best use the donation.
	Having the posters in the fire halls creates awareness with the firefighters and anyone visiting.	As we get responses and confirmation committee will be updated.
	There was discussion whether or not to include pilot sites – on the invitation.	Decision was made to go with Logos.
	Invite will be sent out electronically as well as some invitations to dignitaries.	

	From Public's perspective should it identify pilot sites?	Chaya suggested having logos link to sites when clicked on.
	Nice to be able to see community partners coming together. Like that it is such a diverse group. Will help families to understand that it is not specific to their site – that it is community wide.	
Consent Forms	Top – agency logo Bottom – Infant Mental Health Logo Need to exclude families already receiving intervention services and those with diagnosis. It is for children who have not yet been identified with any delays.	“If your child is already receiving intervention services or a diagnosis, you will not be eligible for this pilot.”
	Niagara Children's Centre identified that referrals come in and children are put on waiting lists for specific therapists i.e. Infant team is called in for children who may start off with child with a feeding concern, then expands from there.	Referrals that are in the waiting process can be piloted, however if there is an agency or therapist involved already, they cannot be part of the pilot.
	Questions that will be targeted include: <ul style="list-style-type: none"> • One or two parent household? • Level of education of parents? • Primary languages spoken at home? • Income level (range) (\$20-40,000, \$50-80,000)? • Are both parents working/going to school? • Are there other family members parenting? Other: _____ 	Studies have used postal codes before. Can look into this. Stats Canada has information on income levels. Postal codes identify where families are coming from. Information gathered could help all agencies.
	Dr. Andrea Feller expressed her appreciation of this group and their efforts related to Infant Mental Health. She advised she would be seeing Dr. Cairney later this week and could remind him to connect with Chaya.	Dr. Feller will approach Dr. Cairney and remind him to connect with Chaya.
	Ethics committee wanted to be sure that replication was being made, not another research model. Nothing is new.	Everything is ready for them, they have the proposal. Need to talk about ownership of the data. Children's Services Director has agreed to co-ownership.
	Can letter be more simplified? Soften language. We invite you to participate in a pilot program being offered. Can customize letter to suit target audience.	Agencies advised they will be sitting down with families and completing this together.
		Include: “Have you been invited to participate in this program elsewhere?”
Data Collection	Program to be used for the data collection is called Redcap – need to go through approval for this.	Chaya will forward email to Tracy. She informed all that when the approval is given it will come with suggestions. Once approval is received, it will not

		have to be resubmitted.
	Dr. Feller advised that Kelly Catherwood, is the data analysis coordinator for Niagara DACS in every community. They support everyone around the table. The position is paid by province to support Niagara specifically. Kelly supports EDI or any kind of data requests. Working with some organizations to do evaluations or bigger projects.	Data-sharing opportunity. Kelly to email Chaya and Children's Services. Data-sharing will be shared with hospital, and Niagara Region. Will be able to extract more information.
	EDI – mapping possibilities with results – correlation – see what is happening in our neighbourhoods.	Andrea will connect with Darlene to discuss information sharing.
	Talked about capturing level of how families are supported prior and after plans are in place.	Create a questionnaire when parents sign up to complete before and after the pilot. Chaya will draft something up and send to Tracy.
	Research on child care programs – found that those child care programs that offered parent coaching and education component had children who performed better. Makes a difference to the children.	Infant Child Development Services has found that once families start ASQ's, they look forward to the next one.
	Have Researcher. Will connect with John and Bob on the model. As soon as approval is received, will begin collecting data.	
Community Proposal	With Blanca's help, proposal was put forward and accepted.	Must be completed by March 30.
	What do we need to do re: policies and practices that reflect our understanding at the basic level of the science of Mental Health?	Niagara is invited to participate. Will support this. Some agencies will find they are in very good shape.
	Infant mental health developed best practices competencies and guidelines. Needed process to have people look at the guidelines.	
	Taken guidelines, looking at core prevention, competencies organizational policies and practices. Should add column – already completed. How to achieve, who can do it, what are the intended outcomes?	CAS – large book of policies and procedures. Can IMH be added as a standard policy? Yes.
	Part of plan to include leadership with a presentation to make to executive team to introduce. Identify in your plan that it is a piece you need.	Can work together with Chaya to get this done. Could be a 5-year plan.
	How much flexibility is there around the title? See how it gets imbedded in policy.	It can be a part b of the same topic. What are the actual key critical components that must be there for fidelity?
	Infant Mental Health has been promoted for the past 3 years. Effective creating what Infant Mental Health is. Would need to set up some time to meet to start to fill in pages. Each document needs about 2 hours of time.	One representative from each agency is needed. Schedule a couple of meetings to come back to the bigger group.
	le. Objective – Public Health already achieved this and this is how they did it, Child care is beginning to work towards this.....	Sharing of information.
	Richness of process was overwhelming. Have asked researcher to separate	Once plan is complete, IMH will be

	from this study, to create a framework for process of evaluation.	there to support agencies.
	Community development potential? Will this help child care sector to see what Public Health calls it? There is currently lots of information about physical, less about mental.	
	Way to track resources we have for children from 0-3 years. Ground-breaking work. Representative from Niagara Children's Planning Council should be a part of this. Darlene Edgar is chair.	Some people are missing. Chair and co-chairs of Niagara Children's Planning Council to be invited.
	FACS embraces IMH. However, has there been discussion with OACAS? Recently made decision to involve ASQ with some areas.	Chaya will keep FACS representatives posted and support team.
	This is not imbedded in policies, but in practices.	How to get imbedded in policies?
	Need to support staff in policies as well as processes.	Practice note from OACAS – does make reference to the best practice guidelines that IMH has created.
	NHS, NRP –don't have mental health roles, police are called to many mental health calls. Need agencies that don't think about children all the time.	Part of final plan should involve all agencies – firefighters, NRP, NHS.
	Same table – two different meetings to fill out forms together. Feb. 2, 2015 – full day - 8:30 am - 4:00 pm Feb. 10, 2015 – ½ day - 1:00 pm – 4:00 pm	Browse documents. Actual resources on the IMH website. Location to be determined.
	A Niagara College representative was scheduled to attend today, however weather related issue prevented her from attending. She was looking at how the tool could be implemented in the curriculum at Niagara College.	College has access to some funding. Proposals are due March 2 nd . May be some funding to help with implementation things. Innovative transfer of what's happening in the college and what's happening in the community.
	RECEs will be a valuable resource, especially once doing developmental support plans. Interesting model to test.	Chaya believes it would be worth a separate conversation with the college regarding their role.
	Link to be set up and put on website to sign up for meetings.	
Training	Very good turnout – 50 -60 people there. By the end of the day they understood it, and downloaded hand in hand resource kit.	More connected and more on board. Able to work through support plan. May find another basic IMH training opportunity beneficial at a later date.
Future Meetings	Standing appointment in calendars. Team was looking to the last Monday of every month. February 23, 2015 March 30, 2015 April 27, 2015 May 25, 2015 June 22, 2015	Lena to send out to everyone.

Next Meeting	February 23, 2015	
---------------------	-------------------	--