

# **Developmental Services Community Service Plan**

*Niagara Region*

*Prepared by:*

**Contact Niagara for Children's and Developmental Services  
in collaboration with the Niagara Community**

*Prepared for:*

**The Ministry of Community and Social Services  
The Ministry of Children and Youth Services**

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# Executive Summary

## **PREAMBLE**

This Community Service Plan is the result of a community-wide collaboration that has created a shared vision for developmental services in the Niagara region. The focus of this plan is on services provided to adults and children with developmental disabilities that are funded by the Ministry of Community and Social Services (MCSS) and the Ministry of Children and Youth Services (MCYS).

A wide-ranging planning process collected information on the community, the service system, and the experiences of people using the system, as well as those providing the services. It resulted in a vision and a series of strategic directions, goals and priorities that will help set the course for the future development of these services.

## **INTRODUCTION AND BACKGROUND**

The Community Service Plan was created at the request of the Hamilton Niagara Regional Office of the MCSS and the MCYS. The Regional Office and community organizations are committed to a systems approach to finding the best match between resources and needs. With this in mind, a process was initiated for the development of community service plans for the children's and developmental services sectors in each of the four communities that comprise the Hamilton Niagara Region.

The responsibility for leading this process was placed in the hands of the four Contact agencies – Contact Hamilton, Contact Brant, Contact Niagara and Contact Haldimand-Norfolk – that serve as the single point of access to developmental and children’s mental health services in each community.

The plan is designed to provide advice on future resource allocation decisions with regard to developmental services, delivered by 15 community agencies in Niagara and directly funded by the two ministries. It is also anticipated that the plan will assist community agencies, boards of directors and future community planning processes.

The process for creating this community service plan was devised as a result of a comprehensive consultation involving input and participation from providers and users of services, as well as other key stakeholders. It was agreed that the process should involve the following five steps:

- Collecting information on patterns to provide an overview of the general population; the current service system; usage rates; and the broader context.
- Collecting information on experience to capture the perceptions and opinions of people requesting service; people receiving service; community groups and organizations; providers of Ministry-funded children’s and developmental services; and providers of related services.
- Collating and analyzing information in order to shed light upon perceived strengths or opportunities within the service system; perceived gaps or duplications; issues and/or barriers related to the availability or delivery of services; views regarding priorities for service; and potential trends in a variety of areas relevant to planning. A Technical Advisory Group comprised of a small number of external experts in information collection and analysis would be established to assist in accomplishing this step.
- Developing a shared vision and set of priorities for the children’s and developmental services system for the next three years. This would be accomplished through a community consultation process guided by a reference group comprised of key stakeholders.
- Completing a community service plan containing the findings of all previous steps, as well as the agreed-upon vision, priorities and goals.

The process of gathering information and conducting community consultations began in the summer of 2003. A Technical Advisory Group was formed and consultants were hired to assist in gathering the quantitative and qualitative information to address the following questions:

1. What is the nature and magnitude of the demand for ministry-funded service and supports within a jurisdiction?

2. What resources are available to respond to that demand and how are they currently being used?
3. What are the identified strengths, weaknesses and pressures of the current service system?
4. What should be the priorities for enhancing the current service system over the next three years?
5. Where are the opportunities to address population well-being and achieve positive change within the current system?
6. What are the characteristics of the local community that need to be taken into account when planning?
7. What areas require further exploration?

The answers to these questions are provided in the following sections: a profile of the Niagara community; a description of the service system; a summary of perceptions about the service system; and a statement of the vision, strategic directions, goals and priorities that were established through the Reference Group and community consultation process.

## **NIAGARA COMMUNITY PROFILE**

The first step in creating this Community Service Plan involved collecting information on the community and the general population, in order to describe the social, political and economic context in which planning will take place.

With a population of 410,575, the Niagara Region occupies a 1,896 square kilometre peninsula bounded by the City of Hamilton to the west, Lake Ontario to the north, Lake Erie to the south and the Niagara River that marks the U.S. border to the east. Its two-tier local government structure is headed by a regional council comprised of representatives from twelve local municipalities: Grimsby, Lincoln, St. Catharines, Niagara-on-the-Lake, West Lincoln, Pelham, Thorold, Niagara Falls, Welland, Wainfleet, Port Colborne, and Fort Erie.

Niagara's most heavily populated cities of St. Catharines, Niagara Falls and Welland contain 62 percent of the region's population. Much of the remainder of the region is rural, though there are several other urban areas, widely dispersed around the peninsula, including Fort Erie, Port Colborne, Grimsby, Thorold and Niagara-on-the-Lake. The widely-dispersed population and large geographic area make it difficult to provide services that are equally accessible to all.

The region attracts millions of visitors every year to Niagara Falls and other popular tourist attractions. The tourism, retail and service sectors therefore loom large in the region's diverse economy which also features transportation, manufacturing telecommunications and agriculture.

The population is growing more slowly than the rest of the province and has a higher concentration of older people, with proportionately fewer children and young people. The birth rate is higher than average, however, it has been projected that the population of children and youth will rise slowly but steadily in coming years.

The community is less ethnically, culturally and linguistically diverse than others in Ontario, though it receives a large influx of refugees at the border post in Fort Erie. Two urban centres – Welland and Port Colborne – have been designated under the French Language Services Act.

Education levels in Niagara are generally lower than elsewhere in the province– a factor that could influence public awareness of services and people’s ability to take advantage of them.

Unemployment in Niagara is relatively low, though it fluctuates due to the seasonal nature of the tourist industry. Family incomes tend to be lower than elsewhere in the province. There are more low income people and more people receiving social assistance. These are factors to be considered in planning, not only because low income may contribute to the needs for which families seek help, but also because of its impact on people’s ability to access the service system.

All of these characteristics of the community -- its geography, economy, demographics and culture as well as the social circumstances of families and individuals -- must be considered in planning for children’s services.

## **DEVELOPMENTAL SERVICES: CHILDREN AND ADULTS**

This planning process collected and analysed data available from existing sources and agency surveys, in order to provide a description of the Ministry-funded programs and how the programs are classified and funded. It identified the services provided; who receives them; what their needs are; and what types of services are required. It also indicated the extent to which people have to wait to receive service and how urgent situations are addressed.

The Ministry allocates its funding for developmental services in Niagara through 15 categories of programs, each of which is identified with a unique project code. The project codes are used by the province to classify the categories of services. The money designated for any one code cannot readily be transferred to another.

For adult services, the program categories range from supported living environments where people with developmental disabilities are provided with support and care, either in their own homes or in a group home setting; respite services for caregivers; and community supports to enable people to participate fully in community life. For children with developmental disabilities, programs are funded through the Ministry to provide accommodation and care in approved group homes; respite for parents; and a range of

community support for children to encourage participation in community activities. A further category includes services that assesses the needs of people with developmental disabilities and refers them to the appropriate community program.

The planning process examined the service system by analyzing data from Contact Niagara's WEBTRACKER information system, information from the Ministry of Community and Social Services Detail and Transfer Payment Reports and an Agency Data Template that was completed by each agency for the fiscal year 2002/03.

Collectively, the system supported 5,826 individuals (children and adults) in 2002/03. It is important to note that these are not unique individuals as multiple agencies may provide support to the same individual and/or one individual may receive multiple supports, therefore would be counted more than once.

Of the 5,826 individuals served, 26 percent (1,519) were children receiving children's programs and services. The access mechanism provided service to 836 individuals.

Between April 1, 2003, and January 31, 2004, Contact Niagara received 2,643 requests for intake, information and consultation for both children's mental health and developmental services. Of the total new requests for intake (1,205) 327 were within the developmental sector and 11 within the 'both' sectors.

A total of 982 referrals were made on behalf of 594 unique clients during the period April 1, 2003, and January 31, 2004. Of these:

- 193 (9.3%) were for both children's mental health and developmental services. The majority of these directed to two agencies in particular: the Niagara Child Development Centre and Hotel Dieu Hospital each had 21% (41) of the total referrals
- 789 (80.7%) were within the developmental services sector.

Waitlist data shows that there was a total of 116 unique individuals waiting for non-residential resources as of January 31, 2004, and 128 referrals were made on behalf of these individuals.

A total of 297 unique individuals were waiting for residential resources. Of the 297 individuals:

- 55 (or 18.6%) are without support from community programs
- 242 (81.4%) are attached to an agency
- 74 (25.3%) indicated that placement is required in less than one year, while 139 (46.3%) need placement within 1 to 3 years and 84 (28.4%) will require placement in 3 to 5 years.

The developmental services system in Niagara received \$42,842,886 from the Ministry. Of that total, the following four funding categories account for approximately 86 percent of total expenditures:

- 65 percent (\$27.6m) is directed towards services within the group living supports
- 11 percent (\$4.8m) for community access supports
- 6.3 percent (\$2.7m) for associate living supports
- 4.3 percent or (\$1.8m) for adult individual living supports

To help explain how this system is structured, a service framework was developed to describe how services are differentiated from one another and organized within the community. It describes services in the following four categories.

- *Highly Specialized Services* include services and supports that address the most severe and complex needs of people with developmental disabilities. These include medical support and consultation, behavioural/emotional support and consultation, psychiatric support and consultation, crisis response/treatment, assessment/clinical and specialized residential services.
- *Residential Services* are provided in group home settings, associate family homes or in the individual's own home.
- *Core Services* refers to a range of services provided in the community, such as social and recreational programs, assessment and clinical services, day support or employment related activities, case management and respite.
- *Access Services* provide individuals and their families with information about the system, referral to services and case resolution which is a process for addressing the complex needs of children and adults in very difficult and challenging circumstances.

Approximately \$32.5m or 75.6 percent of the total funding is provided to residential service areas and \$10.4m or 24.4 percent to non-residential areas, while core services account for approximately \$8.7m or 20.25 percent of the total expenditures. Highly specialized services account for approximately \$1.7m or 4.08 percent of the total expenditures.

## **PERCEPTIONS OF THE DEVELOPMENTAL SERVICE SYSTEM**

The next step involved finding out about people's experience with the service system. This entailed gathering information about people's perceptions, observations and opinions. Several methods were used to capture the experience of users, providers, other stakeholders in the system and key informants. Telephone surveys, as well as printed questionnaires, were supplemented by focus groups and telephone interviews, in order to

ensure, not only that a broad and representative range of views were elicited, but also that the responses were interpreted correctly in an unbiased manner.

Five major themes appeared consistently in the open ended comments from stakeholders in the developmental services sectors. These were also common across the four jurisdictions studied - Brant, Haldimand-Norfolk, Hamilton and Niagara.

### ***Resource Pressures***

There was a consistent feeling among stakeholders that the developmental service system was under-funded and experiencing considerable pressure on resources.

### ***Service Gaps***

Stakeholders also believed there were major gaps in services in the developmental services systems.

### ***Quality of Service***

Families, individuals, service providers and other agencies all agreed that the quality of the developmental services that were provided was very high and had a positive impact on clients.

### ***Collaboration***

Collaboration between agencies was identified as a major system strength by many stakeholders, but also surfaced as a suggested weakness, usually in the context of a lack of collaboration interfering with service coordination and continuity. The collaboration theme also appeared frequently as a suggested opportunity, with the most significant opportunity being increased partnerships and linkages between agencies, ministries, and service sectors. This was further reinforced in many of the suggestions for system improvement offered by stakeholders.

### ***Staffing***

The dedication and responsiveness of staff in the developmental services system was frequently mentioned by stakeholders as a major system strength. On the other hand, staffing was also listed as an area of weakness because resource limitations were seen as restricting the ability to hire staff on a full time basis and also placing restrictions on training. Low salary levels and demanding working conditions also presented difficulties in recruitment and retention of qualified staff – and this fact was often cited as a system threat.

The experiences and perceptions of families, service providers and key informants pointed to the following conclusions with regard to strengths, weaknesses and pressures of the current service system:

- The major strengths are: the quality of existing services; the dedication and commitment of staff; and the level of collaboration between agencies.
- Weaknesses are: issues with the timeliness and fragmentation of service; a lack of services for certain levels and age groups; poor transportation; and a lack of human and financial resources that underlies all the other weaknesses.
- Obstacles and barriers to accessing services include: having to take time off work because of the hours that services are offered; limitations on the types of services offered; financial costs; and transportation.
- Major gaps were identified between the demand and supply of developmental services, particularly with regard to residential services, psychiatric services, specialized services and respite.
- Lack of funds and future pressures arising from an aging population were perceived as key threats or pressures on the system.

It was suggested that priorities for enhancements over the next three years should be: residential services, followed by social and recreational services, respite, life skills and psychiatric services.

The opportunities identified include: expanding access to services to meet demand; increased collaboration and partnering; utilizing best practices; and seeking creative methods of service delivery.

## **VISION FOR NIAGARA’S DEVELOPMENTAL SYSTEM**

The next step in the community planning process was to create a vision, strategic directions and priorities for the next three years. This process was guided by a Reference Group comprised of 28 people - senior managers and board members from MCSS/MCYS agencies and representatives from the school boards.

After reviewing the information gathered in the community planning process and considering the issues in a series of workshops, the Reference Group developed a draft vision and strategic directions. Feedback was provided through community consultation sessions and a revised vision, strategic directions, goals and priorities were formulated on the basis of this input.

First principles were established for the developmental service system as follows:

*Re-think Niagara Region’s Developmental Services – less of some services, more of others, strengthen some services and/or introduce a few new services*

*In the allocation of Developmental Services Resources in Niagara Region we will seek to provide the most complete range of services along the least independent – most independent continuum, keeping in mind that this continuum will be influenced by those in greatest need, those most apt to benefit and the greatest good for the greatest number*

The Reference Group adopted the following vision for the Niagara Developmental Service System:

*In Niagara Region, all people with developmental disabilities and their families have access to individualized seamless supports and services that are readily available in their community to enhance quality of life.*

A set of seven strategic directions was established and a series of goals developed in conjunction with each of these directions. The directions and goals are set out in the following table which also notes the priority of each goal in terms of the year in which it should be implemented.

<b>Strategic Directions and Goals Niagara Developmental Services</b>	
<b>STRATEGIC DIRECTION A: PEOPLE WITH DEVELOPMENTAL DISABILITIES LIVING IN NIAGARA REGION HAVE INDIVIDUAL LIFE PLANS</b>	
<b>Goal Area: Individual Life Plans in Place</b>	
Develop and implement Individual Life Plans (ILP's) for people with developmental disabilities.	<b>Year One</b>
Develop an ILP framework that is consistent with an accreditation model and recognizes/addresses all major aspects/milestones of a person's life including: <ul style="list-style-type: none"> <li>• Consideration of the shift from "family centred" to "person centred" as the child becomes an adult</li> <li>• Cross-sectoral services, supports and activities</li> <li>• Evidence-based services</li> </ul>	<b>Year One</b>
<b>Goal Area: Funding Guided By Individual Life Plans</b>	
Negotiate a process with Ministry of Community and Social Services (MCSS)/Ministry of Children and Youth (MCYS) to reallocate existing funds globally under residential services, community support services, and specifically for specialized services, based on the needs identified in ILP's.	<b>Year One</b>
<b>Goal Area: Funding addresses community pressures</b>	

**Strategic Directions and Goals  
Niagara Developmental Services**

Collaboratively develop a process with MCSS/MCYS to ensure that a percentage of new funding is allocated towards community pressures identified through the local planning process and toward community support services	<b>Year One</b>
<b>Goal Area: Cross Sector Protocols</b>	
Ensure the development and use of community-based protocols between all sectors that interface with the Niagara developmental service system, resulting in: <ul style="list-style-type: none"> <li>• Sharing system level plans</li> <li>• Exploring opportunities for shared funding and resources</li> <li>• Better coordinated service to individuals and families.</li> </ul>	<b>Year Three</b>
Develop an implementation process for service coordination considering at a minimum: <ul style="list-style-type: none"> <li>• Cross-sector protocols</li> <li>• An accepted model of service coordination (roles, responsibilities), system coordination and staff training</li> <li>• A process whereby ILP is an accepted standard among all Niagara service providers.</li> </ul>	<b>Year Three</b>
<b>STRATEGIC DIRECTION B: CHILDREN AND ADULTS WITH COMPLEX NEEDS AND THEIR FAMILIES HAVE ACCESS TO THE RANGE OF SERVICES AND FUNDING REQUIRED TO SUPPORT INDIVIDUAL LIFELONG PLANNING</b>	
<b>Goal Area: Support for Service Coordination</b>	
Contact Niagara will assume responsibility for facilitating service coordination and securing funding across ministries based on ILPs for children and adults with complex needs	<b>Year One</b>
Based on the information, issues and insights generated as a result of system coordination activities related to complex cases, identify and/or influence: <ul style="list-style-type: none"> <li>• Changes to ministerial policy that will facilitate coordination at a local and ministerial level</li> </ul> <p>Lifelong individualized funding strategies requiring inter-ministerial funding approaches, and promote these strategies with relevant Provincial Ministries.</p>	<b>Year Two</b>

**Strategic Directions and Goals  
Niagara Developmental Services**

**STRATEGIC DIRECTION C: HUMAN RESOURCE STRATEGIES THAT SUPPORT INDIVIDUAL LIFE PLANNING AND IMPLICATIONS OF INDIVIDUALIZED FUNDING**

**Goal Area: Human Resource Management & Training**

Identify and address human resource issues related to Individual Life Plans	<b>Year One</b>
Identify strategies to increase the capacity of agency infrastructures to support/supervise staff recognizing the need for additional resources	<b>Year Two</b>
Using orientation and training requirements, ensure that MCSS/MCYS recognizes additional funding is required to cover: <ul style="list-style-type: none"> <li>• Mandatory training (NVCII), first aid, etc.</li> <li>• Orientation for new staff</li> <li>• Backfill</li> <li>• Site specific training</li> <li>• Management training</li> <li>• Life plan training (e.g. accessing community programs, resources, etc.)</li> </ul>	
Identify requirements for graduates through College Advisory Committee representative and/or specific program coordinators, and negotiate baseline educational content.	<b>Year Two</b>

**STRATEGIC DIRECTION D: THE DEVELOPMENTAL SERVICES SYSTEM IS POSITIONED TO ATTRACT AND RETAIN STAFF**

**Goal Area: Recruitment and Retention Strategy**

Develop and implement a recruitment and retention strategy for Niagara's developmental services system that will address issues including: <ul style="list-style-type: none"> <li>• Discrepancies in salaries between service systems</li> <li>• Working hours</li> <li>• Working conditions, benefits</li> <li>• Societal attitudes towards Developmental Services</li> <li>• Not an attractive field in which to work</li> <li>• Curriculum.</li> </ul>	<b>Year One</b>
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**STRATEGIC DIRECTION E: A DATA MANAGEMENT SYSTEM THAT SUPPORTS SERVICE DELIVERY AND SERVICE PLANNING**

**Goal Area: Data Requirements**

<b>Strategic Directions and Goals Niagara Developmental Services</b>	
Develop and implement a process to define data requirements to support service delivery, service planning and funding decisions	<b>Year Two</b>
Incorporate ISCIS data base features (or actual software) into Information Technology (IT) business practices for the benefits of provider agencies i.e. facilitate provider access to data and history for each person. ( a related objective includes to re-inventory agencies IT capacity and to develop IT to support this use)	<b>Year Three</b>
<b>STRATEGIC DIRECTION F: CLARIFY THE IMPLEMENTATION OF MAKING SERVICES WORK FOR PEOPLE SYSTEM FEATURES</b>	
<b>Goal Area: Contact Niagara's Role</b>	
Contact Niagara will use their strategic planning process as a vehicle to develop a strategy for accessing agency/community input regarding key functions performed by Contact Niagara	<b>Year Two</b>
<b>STRATEGIC DIRECTION G: COMMUNITY AWARENESS AND UNDERSTANDING</b>	
<b>Goal Area: Education and Awareness Strategy</b>	
Build an education and awareness strategy that informs families, agencies and staff of our community-based system of service provision.	<b>Year Three</b>

## CONCLUSIONS

The completion of this community service plan represents the fifth and final step in an extensive and inclusive process that involved fact finding, community consultations, analysis of information from multiple sources and the far-sighted deliberations of Reference Group members who brought all this together by creating a vision, strategic directions and goals.

It was always envisaged that this plan would be a starting point. The information collected and the conclusions reached will not only serve to guide the service system over the next three years, but also provide a baseline for future planning endeavours. The process as a whole can also serve as a learning experience, as the community looks for

ways of improving upon the information gathering, consultation and consensual decision-making approach that went into developing this plan.

The vision and strategic directions that were created through this planning process are comprehensive and inclusive. They involve extending the reach of the service system to respond to a wide range of community needs. They are also designed to build the capacity of the service system with better data, improved practices, enhanced opportunities for collaboration, and stronger links with the broader community and other service sectors.

The task that lies ahead for all involved is to continue working together to make this vision a reality. The completion of this plan is not the end, but only a beginning.