

Children's Mental Health Treatment and Bill 148

Who We Are

Children's Mental Health Ontario (CMHO) is the association representing Ontario's publicly-funded Child and Youth Mental Health Centres. Our primary goal is to promote a coordinated and high-quality system of mental health treatment that puts children and families first.

CMHO's nearly 100 member organizations operate in every region of the province, providing treatment and support to infants, children, youth, and their families. Services range from early intervention, short- and long-term counselling and therapy, addictions services, and intensive services such as residential treatment. Services are provided at no cost and no doctor's referral is required.

CMHO is a non-profit association and registered charity.

CMHO's Response to Bill 148

CMHO urges the government to fully fund the financial shortfalls in the community-based child and youth mental health sector that will result from costs related to Bill 148.

CMHO further recommends that the Ministry of Labour works with the Ministry of Children and Youth Services to ensure that new cost pressures do not result in a reduction of life-saving mental health treatment and services for children, youth and families.

CMHO and our members see the many benefits that the changes outlined in Bill 148 would bring for the clients served by our member centres and for our centres' part-time and precarious workers, their families and communities. With healthier and better-supported workers, Child and Youth Mental Health Centres will be better positioned to deliver high-quality services to those in need. In fact, we have long advocated for increased funding to support wage enhancements that would allow agencies to attract and retain high-quality, well-trained, professional staff and to remain competitive with other sectors – like health and education.

However, without additional funding commitments to cover shortfalls, the proposed changes under Bill 148, such as increases to the provincial minimum wage, pay enhancements for part-time workers, and minimum vacation and emergency leave enrichments, will further contribute to operating deficits at our agencies – with many agencies expressing very real concern that they will become permanently unsustainable and be forced to terminate services and close their doors.

For some CMHO members, the risk of closure once Bill 148 is rolled out is very high. One agency in the South West region with an operating budget of approximately \$5.5M estimates additional financial strain of

\$270,000 – a 5% increase for which there is no contingency. Another agency in Toronto with an operating budget of approximately \$6M reports an expected financial strain of approximately \$200,000 – which yields a percentage increase of more than 3%. Finally, a third agency in the GTA reports increased pressure in the amount of approximately 5% - contributing to their already burdensome operating deficit of 6%, to total an annual expected deficit of 11%. With the added financial burden that Bill 148 presents, these important agencies and the valuable services they provide, could be extinct in just a few years.

The Financial Risks Facing Child and Youth Mental Health Centres

Since 1992, Child and Youth Mental Health Centres have only seen two base funding increases – in 2004 and 2006 of 3% and 5% respectively. During this time, inflation has risen by more than 55%. Additional funding that has come into the sector during this period has been tied to increased service requirements and has not allowed agencies to invest in crucial components like infrastructure, IT, supervision or wage enhancements. As a result, some agencies now estimate that they are running at a deficit of approximately 40%, compared to 1992 funding levels. Because of this, some agencies are unable to offer competitive wages or pay enhancements, and report that, as a result, they are routinely losing qualified professional staff to other sectors, like health and education, where wages are higher and funding more secure.

Ontario's Auditor General reported that Child and Youth Mental Health Centres served 120,000 infants, children and youth last year alone. These services are provided free of charge and do not require a doctor's referral. But agencies have long wait times. As CMHO reported in our [2017 Pre-Budget Submission](#), more than 12,000 children and youth are waiting for treatment at Child and Youth Mental Health Centres. With an estimated demand increase of approximately 10% per year, this figure is now closer to 13,000. In some cases, children are waiting an unacceptable 18 months for treatment.

Agencies make every effort to ensure that funding is prioritized for services and treatment, which provide life-saving support to thousands of children and youth. When funds are scarce, Child and Youth Mental Health Centres must make difficult choices about how to allocate funding and sometimes this means that the needs of children, youth and families go unmet – which can have grave outcomes.

Hospitals are already overcrowded and pressed to cope with the increased demand they are seeing for child and youth mental health services. [Data released by the Canadian Institute for Health Information](#) earlier this year demonstrated that emergency department visits and hospitalizations for child-and-youth-related mental illness went up by 63% and 67% respectively since 2006/2007 – during a time in which hospital visits for all other disorders fell by 18% for this age group.

In short, if Child and Youth Mental Health Centres close – there will be nowhere for these kids to go. Many will experience worsening conditions, which could lead to higher rates of youth suicide, self-harm, behavioural issues at and/or absenteeism from school, as well as spillover pressures in child welfare, youth justice, supportive housing, health care, and other sectors.

Conclusion

CMHO agencies desperately want to support the changes being proposed in Bill 148 – which would bring about promising improvements for both staff and agency well-being. But Child and Youth Mental Health Centres cannot support these changes unless the government comes forward to fully fund the short-falls they will create. Without additional funding, transfer payment agencies like Child and Youth Mental Health Centres will need to reduce their service levels – with some facing the very real risk of closure.

CMHO urges the government to fully fund the shortfall that Bill 148 will create in the community-based child and youth mental health sector in order to ensure that children, youth and their families can obtain the care they need, when and where they need it.

We also recommend that the Ministry of Labour take a cross-government approach when introducing these changes and work with the Ministry of Children and Youth Services specifically to ensure that mental health services for children, youth and their families are not inadvertently hindered as a result of this plan. Failure to do so will result in the loss of progress made under MCYS's Moving on Mental Health initiative and the loss of services for thousands of infants, children, youth and families in need.

We look forward to working together with both Ministries to support and guide the development and implementation of this initiative going forward.