

# Ontario Autism Program

## Independent Intake Organization

**Call for Applications Guidelines**

December 2020

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# Section 1: Introduction

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## 1.1 Introduction to the Ontario Autism Program

In December 2019, the Ministry of Children, Community and Social Services (MCCSS) announced key elements of the new needs-based, sustainable and family-centred Ontario Autism Program (OAP), including a broad range of services that will offer families more supports for their child's specific needs.

Aligned with the recommendations of the Ontario Autism Program Advisory Panel, the new OAP will offer a range of services and interventions designed to respond to the individual needs of children and youth on the autism spectrum, and their families.

In the new needs-based OAP, all children/youth up to age 18 with a written diagnosis of autism spectrum disorder (ASD) from a qualified professional will be eligible to register for the OAP. Families will have access to the following service pathways and program supports in the new program:

- **Core clinical services** that include Applied Behaviour Analysis, speech and language pathology, occupational therapy and mental health services;
- **Foundational family services** for all families in the program, to build their capacity to support their child's learning and development;
- **Caregiver-mediated early years programs and entry to school supports** to help young children access critical services when they will benefit most, and to prepare them to enter school;
- **Urgent response services** to support children and youth who are in service, or are waiting for service, and have significant and immediate needs; and
- **Care Coordinators** to support families throughout their journey by providing orientation to the program, service planning and navigation, and help with managing transitions.

As part of the new needs-based design framework, the government will be establishing a provincial Independent Intake Organization (IIO) with a regional presence in each of the five MCCSS defined regions (Appendix A - MCCSS Defined Regions). This organization will administer and oversee several key functions of the new needs-based program. To support the unique needs and local demands of the communities in each region, the organization will mobilize regional networks of local service providers so that services are integrated and accessible for families regardless of where they are located. The establishment of the IIO will help to increase consistency and clarity for families accessing OAP services in the province of Ontario.

## 1.2 Key Objectives

As part of the new needs-based OAP, MCCSS is seeking to contract with an organization to provide a single point of access to the OAP. The organization would also provide a coordinated, integrated and high-quality experience for OAP families and a single point of accountability for MCCSS.

The objective of the Call for Applications (CFA) is to select an organization for the role of the IIO in the OAP. The IIO will be accountable for the following functions of the new needs-based OAP program:

- **Intake, registration** and management of the provincial **waitlist**;
- **Determination of needs process**;
- Employment, management and training of **OAP Care Coordinators**;
- **Funding** allocation and **reconciliation** functions for families;
- Establishing **Regional Service Networks (RSNs)**, with one in each of the five defined MCCSS regions, comprised of a range of service providers across key children's services, health and education sectors, including, but not limited to, public and private OAP service providers;
- Promoting **quality improvement** and **capacity-building** initiatives within the RSNs, including the provision of culturally appropriate and accessible information, with a focus on underserved, rural and remote communities;
- Coordinating a **dispute resolution process** for families; and
- **Collection**, use and disclosure of data and information to support program administration, planning and evaluation.

## Section 2: Terms and Conditions of the CFA

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Please refer to Section 1: Terms and Conditions in the Call for Applications Applicant Response Document for information on terms and conditions of the CFA.

## Section 3: Current Environment

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### 3.1 Background

The OAP supports children and youth, until the age of 18, who have been diagnosed with autism spectrum disorder to receive a range of services and supports.

On February 6, 2019, the government introduced significant changes to the OAP with the goal of giving families more choice, eliminating long and growing waitlists. This included the introduction of Childhood Budgets, a direct funding allocation under which

families could receive \$20,000 per year for children under the age of six and \$5,000 per year for children six years old and over to purchase eligible services from providers of their choice. The introduction of Childhood Budgets required a corresponding change to a fee-for-service model for Transfer Payment Agencies, who were delivering publicly funded evidence based behavioural services under the previous service delivery model.

In response to the February 2019 announcement, families, services providers, and other stakeholders expressed concerns about Childhood Budgets not addressing the individual clinical needs of children on the autism spectrum, particularly those with complex needs.

In Spring 2019, the Ontario government engaged in a province-wide public consultation process including an online survey, telephone town halls and written submissions from families, professionals and experts in the community to seek input and advice on how to better support the needs of children, youth on the autism spectrum and their families.

MCCSS also established an OAP Advisory Panel comprised of parents with lived experience, autistic adults and experts from a range of disciplines including psychology, behaviour analysis, rehabilitation services, education, developmental pediatrics and research.

The Panel was tasked to review and analyze results from the public consultations along with relevant evidence, science and data, to provide input and advice for a new, needs-based OAP that is responsive to the individual needs of children and youth, is sustainable within an annual budget of \$600M, and serves as many children as possible.

The OAP Advisory Panel presented their final report to the Minister of Children, Community and Social Services in October 2019. The report made a series of recommendations addressing the concerns of children, youth and their families, which included recommendations for a new needs-based OAP that is aligned and coordinated with school and the health system to facilitate a child centered approach.

In December 2019, aligned with the Panel's recommendations, the government announced key elements of the new needs-based OAP (see Section 1.1). Implementation of the first phase of the new needs-based program began in early 2020, with additional phases throughout 2020 and 2021. While the new program is being implemented, MCCSS is providing families on the waitlist with interim one-time funding. Families receive \$20,000 per year for children under the age of six and \$5,000 per year for children six years old and over.

Families can use Childhood Budget and interim one-time funding to purchase a range of eligible services and supports for their child. These include but are not limited to evidence-based behavioural services, speech-language therapy, physiotherapy, occupational therapy, respite services, technology, and travel.

Also aligned with the Panel's recommendations, MCCSS established an Implementation Working Group (IWG) to provide input to the government on the implementation and operationalization of the new needs-based program. The IWG is composed of a broad range of research and clinical experts, including autism service providers, self-advocates, individuals on the autism spectrum and parents and representatives from Ontario's Northern and Indigenous communities. It also includes representatives from the former autism advisory panel to help facilitate consistency and continuity.

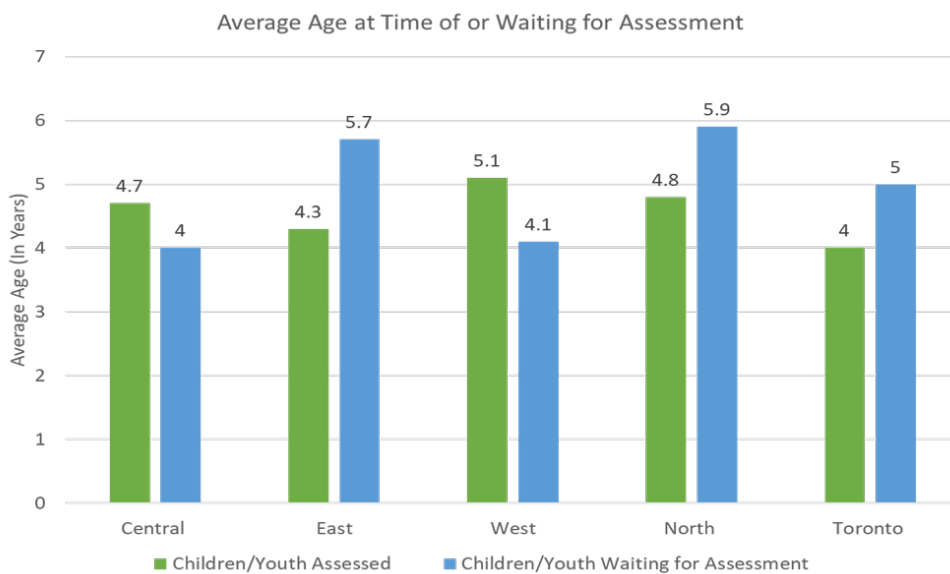
The IWG continues to meet virtually on a regular basis to provide input to the government on key elements of the program.

### 3.2 Children and Youth Registered for the OAP

As of November 30, 2020, there are 44,878 children registered in the OAP. A total of 11,444 families have been issued invitations for Childhood Budget and a total of 28,737 families have been issued invitations for Interim One-Time Funding.

#### 3.2.1 Age at time of diagnostic assessment

As of September 30, 2020, the average age of a child or youth receiving a diagnosis of autism spectrum disorder through one of the five hubs was 4.1 years of age. The average age of a child or youth waiting for a diagnostic assessment was 4.9 years of age. In East, North and Toronto regions, the average age of children/youth waiting for an assessment is higher than the average age of children and youth diagnosed. The reverse is true for West and Central regions.



Children and youth are not required to seek a diagnostic assessment through one of MCCSS's funded diagnostic hubs in order to register for the OAP.

### **3.2.2 2020-21 Age Distribution**

In 2020-21, approximately 8%-11% of children will be 0-3 years of age, 24%-29% will be 4-6 years of age, and 59% to 68% will be 7-17 years of age.

The age distribution of children and youth registered for the OAP in 2020-21 is similar for four out of five regions.

The age distribution of children and youth registered in the North region is slightly older, with nearly three-quarters (74%) of children and youth registered between 7 and 17 years of age (Please see Appendix B: Detailed Regional Distribution).

### **3.2.3 Intake, Registration, and Central Registry**

To register for the OAP a child/youth must:

- be under age 18;
- currently live in Ontario; and
- have a written diagnosis of autism spectrum disorder from a qualified professional.

In response to the government's announcement that signaled changes to autism services, in 2019 MCCSS established the Central Intake and Registration Team (CIRT) to support intake and registration functions for the OAP. Since April 1, 2019, 7,836 new families have registered directly with CIRT. CIRT is considered temporary in nature while the IIO is established.

Prior to the establishment of CIRT, all administrative functions, including intake, registration and waitlist management were managed by nine Transfer Payment recipients (TPRs) across the province. These TPRs also delivered evidence based behavioural services to families in the OAP.

Currently, the primary responsibilities of CIRT are:

- Intake and registration of families to the OAP waitlist;
- Reviewing and processing registration forms and funding applications;
- Issuing payments to families and/or service providers and the associated reconciliation of funds;
- Managing the government technology platform that supports these functions, Ontario Autism Client Information System (OACIS);



- Receiving and responding to inquiries from MPPs, the media, Ombudsman and other stakeholders regarding concerns and issues related to autism services; and
- Supporting families directly with information and guidance on registration and funding processes, eligible and ineligible expenses, application status updates.

Efforts are underway to streamline and digitize the online experience for families with respect to registering their child for the OAP, applying for funding, documenting spending and updating information in a user-friendly and efficient way (see Section 5.1 Current State for more information on the OAP family portal).

When the current OAP was introduced in April 2019, there was a waitlist of over 24,000 families who were waiting to receive behavioural services. MCCSS introduced the Childhood Budget, and later Interim One-Time Funding, to support these families to purchase eligible services and supports as they await entry into the new needs-based OAP. At this time, all new families began registering directly with CIRT. The nine transfer payment recipients continued to maintain their waitlists but no new families were added. MCCSS and the nine Transfer Payment recipients worked collaboratively to create unique client IDs and invite families to apply for Childhood Budgets and interim one-time funding.

In July 2020, MCCSS requested OAP agencies to provide the personal information of families for the purpose of creating a central registry of all OAP families. A central registry enables MCCSS to efficiently plan and administer the program, along with other purposes that are set out in the Notice of Collection of Personal information, which is posted on MCCSS's website to inform families of the collection of their personal information.

MCCSS can collect and use families' personal information as authorized by section 283(1) of the Child, Youth and Family Services Act, 2017, S.O. 2017, c. 14, Sched. 1 (CYFSA). A central registry with all OAP families will support the transition of families into the needs-based program.

As of November 2020, MCCSS is in the process of consolidating the family information reported by OAP agencies with the family information contained within MCCSS's family information system OACIS. The work to establish an OAP central registry is scheduled to be completed between January and March 2021, and is currently managed by MCCSS's Central Intake and Registration Team.

### 3.2.4 Family Cohorts

Due to the programmatic history of the OAP over the past several years, in addition to new registrants, three primary family cohorts exist, including:

- **Children with OAP Behaviour Plans** – children and youth are receiving evidence-based behavioural services through an existing OAP Behaviour Plan. These services are delivered through either one of the existing OAP transfer payment recipients or through direct funding to the family to purchase services privately. Families with current OAP Behaviour Plans can continue to have their behaviour plans extended with no gap in service (up to their current level of intensity, or less where clinically appropriate) until their child transitions into the new program's core clinical services.
- **Children receiving Childhood Budgets** – families on the OAP waitlist were invited to apply for Childhood Budgets as part of the government's announcement in February 2019. Families have up to 18 months to spend their budgets, at which time they can receive an Interim One-time funding payment upon submitting their expense form.
- **Children receiving Interim One-time Funding** – families on the OAP waitlist, or who have elected to end an OAP Behaviour Plan, receive an invitation to apply for an interim one-time funding payment. Families have up to 18 months to spend their funding. The government has committed that families in receipt of this funding will retain their position on the OAP waitlist based on their initial registration date for entry into the new program.

In addition to new registrants, these three family cohorts will need to transition from current services and/or funding arrangements into core clinical services in the OAP. These cohorts will also be eligible to receive other OAP services such as Foundational Family Services, Urgent Response Services and Early Years supports, based on eligibility.

### 3.2.5 Foundational Family Services

Foundational Family Services (FFS) aim to build a family's capacity to support their child's learning and development. Services will be flexible and responsive to families' changing needs over time and are based on a child or youth's strengths and needs across all developmental stages. These evidence-informed services may include:

- Caregiver resource and clinic days;

- Caregiver training workshops and coaching sessions;
- Short-term targeted counselling or consultation from professionals;
- Family and peer mentoring; and
- Transition supports.

FFS are available to all children and youth registered for the OAP (i.e., children/youth up to age 18 with a written diagnosis of autism spectrum disorder from a qualified professional). Families can choose to access these services at any point based on their needs, at no cost.

On August 7, 2020, MCCSS launched the first phase of FFS as part of the ongoing implementation of the new OAP. Currently there are over 35 service providers that are offering families these services across the province, with a focus on virtual service delivery. The agencies providing these services can be found online here.

To continue to build upon the expertise and partnerships that were leveraged in the first phase of implementation, existing OAP Transfer Payment recipients currently delivering FFS will work in collaboration to develop a common framework for the delivery and expansion of FFS in April 2021, focusing on a life-course approach<sup>1</sup> to the new needs-based Ontario Autism Program. This will ensure services are based on a family's changing needs over time and their child's needs, strengths, and developmental stage.

## 3.3 Other Services and Supports

### 3.3.1 Service Navigation

There are several different ways that families are supported with navigation, orientation and information, including:

- Service Ontario;
- Regional Offices;
- OAP Family Support Workers; and
- Autism Ontario's Service Navigation Program.

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<sup>1</sup> **Life-course approach** –Consideration of the holistic experience of a person across their life, including biological, social and cultural factors.

Service Ontario offers a 1-800 line for families to call with questions about the OAP. Depending on the question, families may be referred to a local regional office to speak with a local MCCSS representative or CIRT.

MCCSS currently provides funding to Autism Ontario to deliver the [OAP Service Navigation Program](#), offering families across the province workshops, training sessions, and individual support. Autism Ontario may help families with:

- understanding what types of services are available to purchase with a childhood budget or interim one-time funding;
- getting help with OAP application forms, eligible and ineligible services and submitting expenses;
- finding qualified providers;
- finding local services and supports in their community;
- accessing parent resources and webinars; and
- connecting with other families through mentoring and social learning opportunities for their child or youth.

MCCSS is also continuing to fund OAP Family Support Workers (FSW) at nine regional lead service providers to support families transitioning to Childhood Budgets. FSWs were positioned to be the main point of contact for families in the OAP to answer questions and provides individualized support for families on their caseload. With the shift towards Childhood Budgets and Interim One-time funding, FSWs are primarily focused on supporting families with existing OAP Behaviour Plans.

While these current supports will be in place during the on-boarding and transition period, for future consideration the IIO may want to gauge the service navigation experience that individuals and families have when accessing the above listed services and resources, as these supports will be a responsibility of the OAP Care Coordinators following the initial transition period.

### **3.3.2 Diagnostic Hubs**

MCCSS funds five autism spectrum disorder diagnostic hubs to conduct diagnostic assessments for children and youth (under the age of 18) across the five MCCSS regions. Hubs partner with other agencies to conduct assessments in local communities. The five hubs are:

- West Region: McMaster Children's Hospital/Ron Joyce Children's Health Centre;
- Central Region: Children's Treatment Network of Simcoe York;

- North Region: Child and Community Resources;
- East Region: Children’s Hospital of Eastern Ontario (CHEO); and
- Toronto Region: Holland Bloorview Kids Rehabilitation Hospital.

The objectives of the autism spectrum disorder hubs are to increase access to early diagnostic services for children and youth who may be showing signs of autism spectrum disorder, and to increase the number of professionals able to conduct diagnostic assessments by delivering training and capacity-building to health professionals in their local communities.

In addition to the five diagnostic hubs, families can seek a diagnostic assessment from qualified professionals who have undergone specific training. These include, but are not limited to:

- doctors, such as family physicians, pediatricians, developmental pediatricians and psychiatrists;
- psychologists and psychological associates; and
- nurse practitioners.

Families are not required to get a diagnosis from the hubs in order to apply for the OAP. Families can also access diagnostic services through fee-for-service arrangements, and/or through physicians who bill OHIP for their services.

### 3.3.3 Other Special Needs Services

Children and youth with special needs, including children and youth on the autism spectrum, may access a range of special needs services, including but not limited to healthy child development programs (i.e. early intervention services), children’s rehabilitation services, respite services and other direct-funded family supports such as Special Services at Home (SSAH) and Assistance for Children with Severe Disabilities (ACSD), and may be eligible for supports through the tax system from both federal and provincial governments. They also may receive supports through the education system.

MCCSS funds the following programs and services for children with special needs:

**Early intervention** services are available to all children from birth to school entry when there are concerns about their early development, including for children with special needs. These services include the Infant Hearing, Blind-Low Vision, Infant and Child Development and Preschool Speech and Language programs.

**Children’s rehabilitation services** (occupational therapy, physiotherapy, and speech and language pathology) support children’s functioning and development so they can participate fully at school, at home and in their communities, from birth into adulthood. Services may be provided in various settings (communities, schools), accessible throughout the year including summer and during school breaks and tailored to be responsive to the needs of children and families based on their service plans.

**Respite services** that provide temporary relief and support to caregivers of children and youth with special needs. These services help them cope, keep families together and provide children and youth with social opportunities.

**Assistance for Children with Severe Disabilities (ACSD):** This is an entitlement-based program that provides financial assistance to low and moderate-income families to cover some of the extra costs of caring for a child with a severe disability under the age of 18.

**Special Services at Home (SSAH):** This program provides direct funding to families who are caring for a child or youth under the age of 18 who has a developmental and/or physical disability to purchase supports related to personal development and growth and caregiver relief.

**Coordinated Service Planning (CSP)** assists families of children and youth with multiple and/or complex special needs in navigating and coordinating services across programs and sectors (including community, health and education) through the support of a Service Planning Coordinator.

### **3.4 Other OAP Calls for Applications**

As MCCSS moves ahead with the implementation of the new service pathways and program supports for the OAP, MCCSS is also releasing several calls for applications/proposals over the coming weeks and months to select service providers for the caregiver-mediated early years programs, urgent response services and entry to school services. For more information regarding the upcoming calls for applications, please visit [MCCSS’s website](#).

In order to support families as soon as possible after registering for the OAP, one of the new service pathways in the needs-based OAP will be an early years stream. Two types of early years support will be offered in the new needs-based OAP. These early years supports will be time-limited supports for young children based on their individual needs and will include:

- Caregiver-Mediated Early Years Program
- Entry to School Program

### **Caregiver-Mediated Early Years Programs**

Caregiver-mediated early years programs will be available to children who are registered with the OAP, with a confirmed diagnosis of autism, and are between the ages of 12 to 48 months.

Caregiver-mediated early years programs will be developmentally appropriate programs to help young children learn new skills and meet individualized goals in the areas of social communication and play and build caregiver capacity to support their children. These programs are intended to be offered for up to six months.

These services will be play-based and child-led, and parent/caregiver-mediated. In parent/caregiver-mediated services, parents/caregivers learn therapeutic strategies from professionals and are supported to use these strategies with their child.

### **Entry to School Program**

The Entry to School Program will be a six-month group-based skill-building program for young children, aged three to five years, who are entering school for the first time and will be focused on preparing them to enter school. Following the group-based program, children will receive transition supports as they enter school, and access to consultation for their first six months in school, to support a successful school transition.

### **Urgent Response Services**

Urgent Response Services (URS) will include time-limited services and supports intended to respond rapidly to a child or youth's specific need and prevent further escalation of risk of harm to self, others and/or property.

Once registered for the OAP, children and youth who are in service, or are waiting for service and who **meet certain criteria**, determined through a standardized process, can **access time-limited services and supports including:**

- Short-term interdisciplinary consultation to their intervention team and/or family and/or educator(s);
- Respite up to a maximum number of hours and a maximum duration;
- Service navigation to existing services outside of the OAP; and
- Direct support to the family and/or professionals involved to implement intervention and/or therapy techniques with the child/youth (e.g., mediator model intervention).

# Section 4: Functions and Expectations of the IIO

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The IIO will be accountable for overseeing the following functions of the new needs-based program:

- **Intake, registration** and management of the provincial **waitlist**;
- **Determination of needs process**;
- Employment, management and training of **OAP Care Coordinators**;
- **Funding** allocation and **reconciliation** functions for families;
- Establishing **RSNs**, with one in each of the five defined MCCSS regions, comprised of a range of service providers across key children's services, health and education sectors, including, but not limited to, public and private OAP service providers;
- Promoting **quality improvement** and **capacity-building** initiatives within the RSNs, including the provision of culturally appropriate and accessible information, with a focus on underserved, rural and remote communities;
- Coordinating a **dispute resolution process** for families; and
- **Collection**, use and disclosure of data and information to support program administration, planning and evaluation (Please see Section 5: Technology and Data Needs).

## 4.1 Intake, Registration and Management of Provincial Waitlist

The IIO will be the single provincial point of access for the OAP that will support children and families during the OAP intake and registration process. All children and youth with a diagnosis of autism spectrum disorder from a qualified professional can access the OAP up to the age of 18.

The IIO will have responsibility to:

- Establish, maintain and manage the provincial waitlist for core clinical services, regionally distribute relevant waitlist information, and facilitate access to priority pathways<sup>2</sup>, such as Early Years Supports and Urgent Response Service for eligible children and youth by working with the RSN in each of the five MCCSS regions;
- Provide a clearly publicized single point of access for families to register children and youth for the OAP;
- Establish processes to identify and link families to a Care Coordinator who will be a family's primary point of contact with the OAP, responsible for

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<sup>2</sup> **Priority Pathways** – Once registered in the OAP, children/youth and their families who meet certain eligibility criteria can access the following priority service pathways: Caregiver-mediated early years supports, Entry to School Program, and Urgent Response Services.



- assisting families with service and program navigation/support, and conducting the determination of needs process;
- Establish processes to ensure programs and services are culturally and linguistically appropriate and accessible, ensuring services meet the needs of racialized, Francophone, Indigenous and other underserved communities as well as families living in rural, remote and Northern communities, to respond to the diverse needs, experiences and perspectives of children and youth in the OAP as well as their caregivers; and
- Provide information to families on services they can access immediately (e.g., FFS and other services outside of the OAP).

## 4.2 Determination of Needs Process

Upon access to OAP core clinical services, families will participate in the **Determination of Needs process** conducted by an OAP Care Coordinator. This standardized, clinically-informed process will help to determine a child's profile of support need and associated OAP funding allocation. Care Coordinators will work with families to understand their child/youth's strengths, needs and priority goals. The Care Coordinator will review key information about the child/youth and their family, including relevant assessments.

Once a child/youth's profile of support need is determined by their OAP Care Coordinator, families will receive a corresponding funding allocation that can be used to purchase eligible core clinical services. The determination of needs process is separate and distinct from the clinician-based assessment that would be completed by a clinician as a first step of core clinical service provision. A child's OAP support needs will be assessed at least once annually by the OAP Care Coordinator.

The IWG is continuing to provide advice on additional elements of the determination of needs process, including the standardized tool and a plan to test and evaluate the needs assessment process beginning in early 2021. MCCSS will work with the IIO throughout the testing phase to transfer required information to support operational readiness for provincial implementation of the determination of needs process.

The IIO will oversee and manage the delivery of the Determination of Needs process to all families registered in the OAP by:

- Facilitating training and capacity building of OAP Care Coordinators on standardized assessment tool and determination of needs process;
- Ensuring consistent and equitable provincial implementation of the standardized, clinically informed determination of needs process;
- Implementing processes to support a seamless, family-centred experience for the collection and sharing of information, documentation, assessments and reports with service providers in the RSN that deliver FFS, Early Years

- Supports, Urgent Response Service and/or core clinical services to inform the determination of needs process, and ongoing reassessment process;
- Meeting MCCSS service delivery and data requirements for the determination of needs process;
  - Issuing corresponding funding allocation to families based on profile of support needs identified through the determination of needs process; and
  - Establishing and implementing processes for the collection, use and disclosure of data and information to support program administration, planning and evaluation. This includes the collection of Personal Information and Personal Health Information in compliance with security and privacy standards (e.g., OPS standards on the secure collection, transfer and storage or PI/PHI) and applicable laws and policies (e.g., by securing the family's consent and/or providing notice of collection as applicable).

## **4.3 Management of OAP Care Coordinators**

### **Roles and Responsibilities**

OAP Care Coordinators will be the main point of contact for families in the OAP and will be available to answer questions and provide support for families on their caseload. The primary responsibility of the Care Coordinators will be to conduct the determination of needs process for every child accessing core clinical services. Outside of this process, the level of involvement a Care Coordinator has with each family on their caseload will vary depending on the family's unique needs and the other services and supports they have in place. Ongoing involvement of the Care Coordinator is optional for families.

The following are the primary roles and responsibilities of Care Coordinators:

#### **Lead Determination of Needs Process:**

- Coordinate consent to access or support the parent/caregiver to provide a copy of assessment results and reports from previous service involvement (where appropriate) to build the child's profile;
- Using a standardized, clinically-informed process, gather required information about the child and family to determine the child's level of support need and applicable funding amount for core clinical services;

#### **Support Informed Decision Making:**

- Provide information to support families to understand clinical services eligible through the OAP in order to make informed decisions about their child's treatment;
- Support families to locate local service providers, and refer families to the OAP Provider List to support their provider selection, as required;

- Assist the family with bringing providers together to share information and promote a coordinated and collaborative service experience for children and youth and their families;
- Help families identify early years services that are appropriate to their individual family needs so that they can fully participate; and
- Support families to initiate the Dispute Resolution process where appropriate.

### **Service Navigation:**

- Be the main point of contact for families on their caseload to answer questions and provide general support that is evidence-informed and family-centered;
- Help families understand the types of services available, and supporting families to consider what services may be most relevant based on their needs and priority goals;
- Support families to access FFS and/or other appropriate OAP services;
- Help families find qualified, experienced and trained providers and other services and sources of funding in their local community to complement their child's OAP services; and
- Provide updated supports throughout the duration of the child's service journey to reflect changes in support needs.

### **Transition Planning:**

- Support transition planning (e.g., transitions in, through and out of school, to adult services) that takes a life-course approach and promotes opportunities for connections with other agencies/programs based on the needs of child/youth and family;
- Support and participate in case conferences and/or service planning processes (e.g., transition meetings, urgent response service, coordinated service planning) where appropriate, ensuring streamlined service delivery and communication to avoid duplication of roles;
- Coordinate connections to adult services and/or community supports including education, post-secondary and employment supports; and
- Help families with a child entering school for the first time to register for the entry to school program.

The IIO will be responsible for employing, training and managing OAP Care Coordinators throughout the province to fulfill the above noted responsibilities. During the hiring process, the IIO should evaluate prospective Care Coordinators based on their experience working with families and children of various ages and developmental stages in the special needs sector. Additionally, any experience in the community or the social services sector in case management, and/or experience with multi-disciplinary approaches to supporting children and youth with diverse and unique abilities is considered an asset.

## 4.4 Funding Allocation and Reconciliation and other Financial Considerations

Families eligible to access core clinical services through the OAP will be supported by an OAP Care Coordinator to complete a determination of needs process as described in Section 4.3. Once a child/youth's profile of support need is determined by the OAP Care Coordinator, families will receive a corresponding OAP funding allocation that can be used to purchase eligible core clinical services.

The IIO will be accountable for administering the funding allocation directly to families or to service providers(s) in the RSN as identified by the family. The IIO will also be accountable for the associated reconciliation functions. A child's profile of support needs will be assessed at least once annually by the Care Coordinator.

Applications should include descriptions of how an efficient, lean, and family-centred process will be achieved for allocating and reconciling funds including how technology will be used to streamline and digitize the experience for families where applicable.

## 4.5 Establishing Regional Service Networks

The IIO will be responsible for facilitating the establishment of networks of service providers in each MCCSS defined region (see [Appendix A - MCCSS Defined Regions](#)). Each Regional Service Network (RSN) will be composed of a range of service providers across key children's services, health and education sectors, including, but not limited to, public and private OAP service providers. Through cross-sectoral partnerships and multi-disciplinary collaboration facilitated by the IIO, the networks will be expected to provide a coordinated and integrated service experience for children and youth registered in the OAP as well as their caregivers.

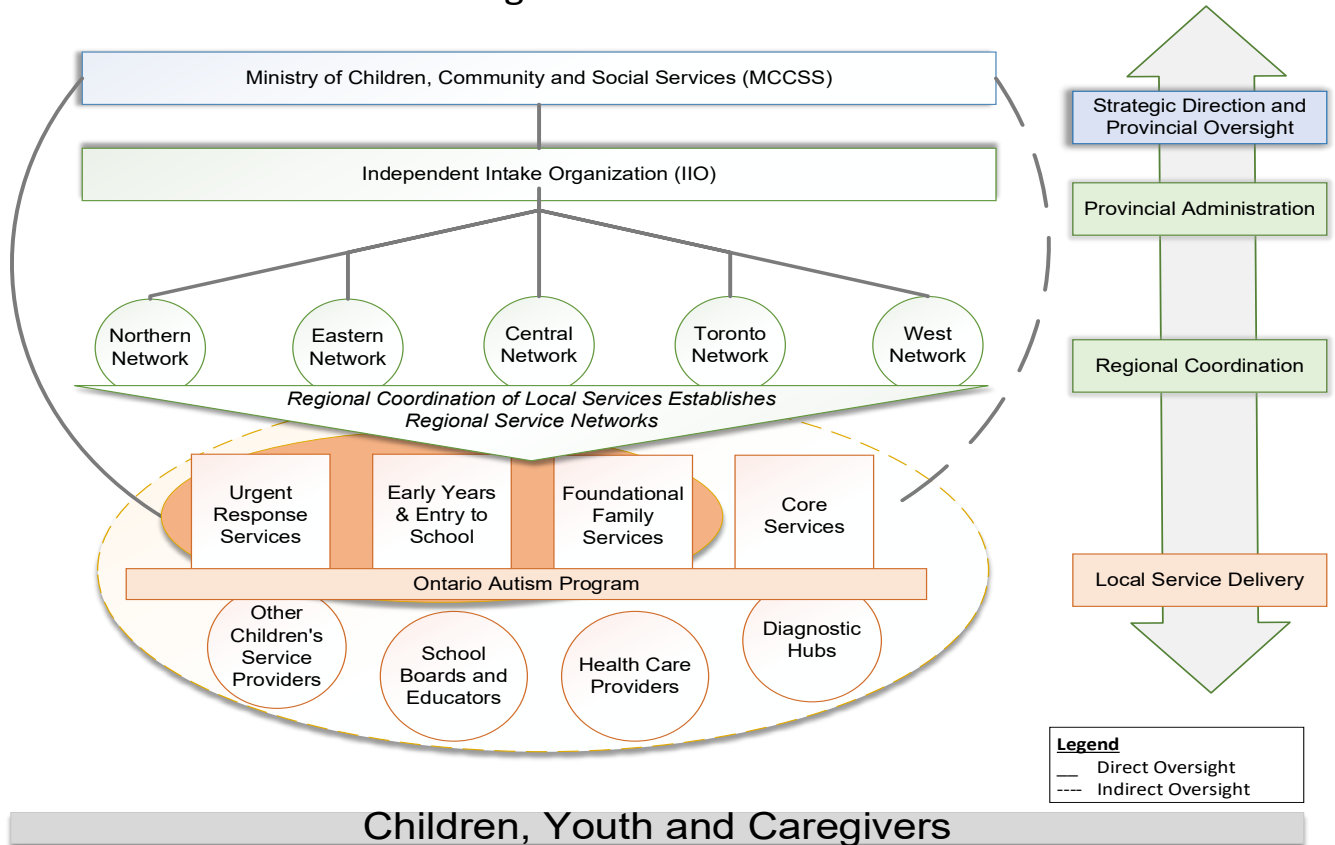
Each RSN should achieve the following goals:

- A **coordinated service delivery** system to enhance child, youth and caregiver access to, and transitions between, service providers within and outside the OAP;
- **Inter-professional collaboration** to support the exchange of information and referrals between service providers in the network and establish a coordinated and integrated service experience for families;
- **Innovative service delivery** to maintain high-quality, accessible care for children and youth in the OAP, as well as their caregivers;
- **Family centred services** that are evidence based and delivered based on relevant assessment of a child or youth's needs, strengths and interests and the family's goals and priorities; and
- **Culturally and linguistically appropriate and accessible programs** and services, including services that meet the needs of racialized, Francophone, Indigenous and other underserved communities as well as families living in rural,

remote and Northern communities, to respond to the diverse needs, experiences and perspectives of children and youth in the OAP as well as their caregivers.

RSNs will be established through a phased approach. Over time, consideration will be given to increased accountability and ongoing expansion and growth of the networks by the IIO, including a focus on workforce capacity planning and initiatives (see Section 4.6) and possible oversight of OAP priority pathways. Fully functioning RSNs will be established by 2023-24.

### IIO Oversight Flowchart



The IIO will be accountable for providing regional leadership and developing a governance structure to effectively facilitate a coordinated and integrated service experience for families delivered by service providers in each RSN. Ongoing capacity building, service delivery and quality assurance measures should be informed by stakeholders within the network including service providers, families and community service partners.

MCCSS encourages applications that describe how the IIO will implement an effective governance structure that provides regional coordination and accountability to meet these goals while maintaining the equitable delivery of programs and services across the province.

## 4.6 Promoting Quality Improvement, Capacity-Building Initiatives, and Scalability

### Quality Improvement

The IIO will be accountable for data collection to inform ongoing program monitoring and evaluation as well as to promote continuous and ongoing **quality improvement** of the program including:

- The IIO will be responsible for meeting performance expectations as set out by MCCSS with respect to waitlist management, delivery of Determination of Needs process, management of Care Coordinators, funding and the associated reconciliation processes;
- The IIO, with support and oversight by MCCSS, will identify and implement performance metrics to regularly monitor performance of the program (e.g., role of Care Coordinators, waitlist management, determination of needs processes), proactively identify and mitigate risks and conduct regular reporting to MCCSS, as required;
- The IIO will regularly collect, monitor and report information related to child, youth and family satisfaction to MCCSS, as required;
- The IIO will be required to work with the Ministry to establish Key Performance Indicators to help evaluate and monitor the program; and
- Promoting quality improvement and capacity-building initiatives within the RSNs, including building workforce capacity and the provision of culturally appropriate and accessible information, with a focus on underserved, rural and remote communities.

### Workforce and System Capacity Planning

The IIO will be accountable for OAP workforce and system capacity planning to promote equitable access to high-quality services for all children, youth, and families registered in the OAP.

The planning process will include regular data collection, monitoring, analysis, and reporting to support an understanding of workforce and system capacity at the local, regional, and provincial levels. Informed by this data, the IIO will work with community partners, including families and service providers in the RSNs, to develop strategies and initiatives that address current and anticipated capacity gaps for the OAP. The IIO will engage MCCSS in the planning process, and will review/approve as deemed necessary.

The planning process must include a special focus on the needs of underserved populations such as Indigenous, low socio-economic status, Northern, rural, remote,

non-English speaking, racialized, and new Canadian families, as the IIO has a responsibility to ensure services and supports are accessible to all eligible children and families. The IIO must also ensure it is abiding by all obligations under the [French Language Services Act](#) and ensuring services and OAP program information are provided in French to Francophone families. Please refer to section 2.10 in the Call for Applications: Applicant Response Document for more information as it relates to French Language Services.

## **Scalability and Innovation**

MCCSS supports opportunities for continuous improvement to the OAP, as well as service system innovation. Implementation of the provincial IIO, role of the OAP Care Coordinators and OAP service delivery model present opportunities to explore new and innovative avenues to deliver a comprehensive, sustainable and family-centered program to children, youth and families. The IIO will be required to adopt flexible and iterative processes to build and refine their service delivery model and strive to improve the OAP and its integration with the broader service system.

The selected organization should also embrace scalability as a general operating principle to allow flexibility and responsiveness to the potential future extension of functions. For example, this could include changes to technology, the scope of core clinical services, and the extension of functions to support some other special needs programs. MCCSS will support the selected organization in convening OAP service providers (RSNs and others), other sector and community partners, and OAP subject matter experts to collaboratively identify opportunities for improvement.

## **4.7 Coordination of Dispute Resolution Process**

The IIO will be accountable for the coordination, with direction from MCCSS, of a dispute resolution process for families accessing core clinical services in the OAP. Implementation of the dispute resolution process could include sub-contracting delivery to ensure independence and neutrality.

Further design of the dispute resolution/exceptions process will be informed by ongoing feedback from the IWG as well as families through the testing phase of the determination of needs process scheduled to begin in early 2021. MCCSS will work with the IIO during the implementation of the testing phase for the determination of needs process as MCCSS evaluates and refines the process. Consequently, as this new element of the OAP is introduced, the scope and focus of the dispute resolution process will continue to evolve and be further defined.

MCCSS encourages applicants to describe how the IIO will coordinate a dispute resolution mechanism. The mechanism should provide a clear and transparent process, promote family engagement, provide alternative options (as required) that are responsive to unique cultural needs and practices (e.g. Indigenous approaches to

dispute resolution), and avoid potential conflicts of interest by demonstrating neutrality and independence from decision making functions, all while maintaining the equitable delivery of programs and services across the province.

## Section 5: Technology and Data Needs

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### 5.1 Current State

MCCSS's Central Intake and Registration Team is currently using OACIS, a custom built application using .NET with a Microsoft SQL backend to manage the administration of the OAP.

In addition to supporting the regular business planning and monitoring of the program, OACIS supports the following key functions:

- Registration of new families for the OAP;
- Processing of applications for Childhood Budget and Interim One-Time Funding;
- Authorizing funding payments to families and/or their selected service providers; and
- Tracking funding applications, including those that are missing information requiring follow up by CIRT.

MCCSS is also in the process of implementing the OAP family portal, a Software-as-a-Service Portal. The portal will offer families a self-service, digital experience and a mobile channel through which they will be able to:

- Register for the OAP;
- Apply for funding or renew their funding;
- View status of their funding application;
- Upload supporting documentation (e.g. ASD diagnosis, invitation letter) to support registration and funding processes;
- Update their personal contact information;
- Submit their expenses to reconcile funding; and
- Manage accounts for more than one child registered for the program.

The client portal will continue to be enhanced based on user needs defined through user research.



## 5.2 Future State

MCCSS envisions an information management and information technology environment that will support the needs-based OAP.

MCCSS expects that the technology supporting and applied by the applicant will align with the following key principles for the ideal functional requirements of the technology of the IIO:

- User-centered;
- A flexible digital solution;
- Open and interoperable to integrate with other systems;
- Collect and share records with all relevant parties; and
- Support Family Privacy.

See [Appendix D: Technology Key Principles and Standards](#), for an overview of these principles.

MCCSS is open to technical and digital solutions that are adaptable and to working with an organization(s) that demonstrates an ability and willingness to work to scale their current systems, integrate with other government systems and/or adopt new systems, to better fulfill the functional and technical applications of these principles. While some organizations may have the technical capacity, MCCSS is also willing to work in collaboration with the applicant to support the development of a phased approach to help the organization meet its business requirements and needs as it pertains to the IIO.

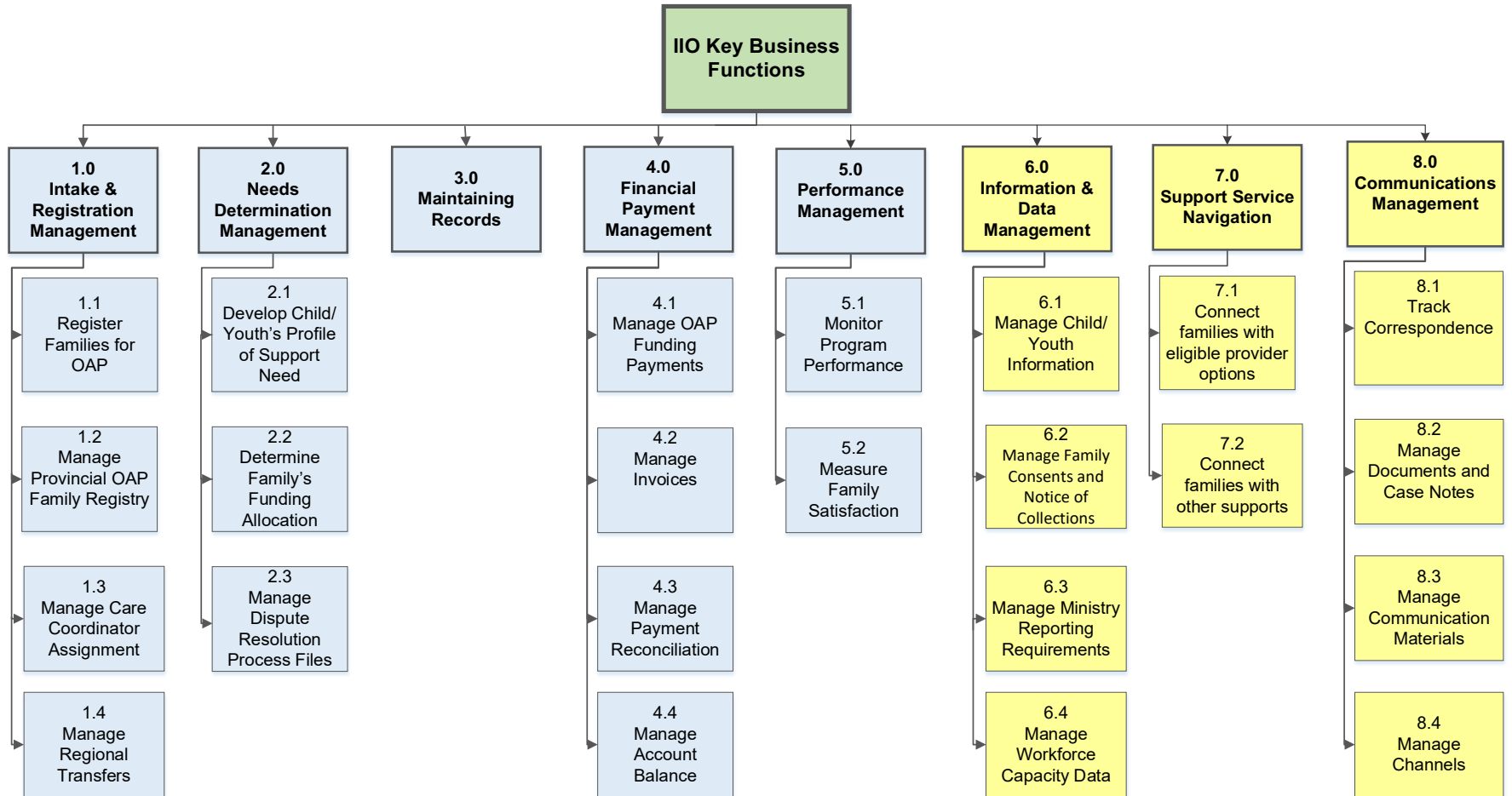
MCCSS will require full access to the data collected by the IIO including personal information and personal health information, as well as information from service providers, in order to manage, oversee, measure and assess the program over time, including the ability to assess how children, youth and their families are using OAP services and supports across their life-course.

In order to provide MCCSS with full access to the data collected by the IIO, the applicant will be required to take all steps to ensure that the data can be disclosed to MCCSS in adherence with applicable laws and that it has no contractual obligations that would prevent it from disclosing all data collected, including personal information and personal health information as requested by MCCSS.

## 5.3 Business Requirements

This section provides a high level functional model that illustrates the key business functions that the IIO's system will need to have or develop, in order to fulfill its roles and responsibilities to families, employees and MCCSS in the OAP.

The functions in blue outline the family facing functions that the IIO's system will need to support to ensure coordination and continuity of service, whereas the boxes in yellow show the back-office administration functions. Refer to Appendix E: Technology and Data: Business Function Descriptions, for a description of each of the functions.



## 5.4 Data Collection, Reporting, and Governance

The IIO will facilitate data collection to:

- Provide Care Coordinators with up-to-date information required to support families with service navigation, access to OAP priority pathways and core clinical services;
- Inform evaluation and quality improvement of OAP services being delivered through the network, based on MCCSS guidelines. Additionally, the IIO will need to ensure appropriate compliance with Part X of the Child, Youth and Family Services Act, 2017, personal information, privacy provisions or other privacy legislation (e.g. FIPPA, PIPEDA, PHIPA) for scenarios not contemplated in the CYFSA, as well as MCCSS data privacy and security policies and procedures; and
- Support MCCSS' analysis, program evaluation and reporting.

The IIO will ensure the security of any Personal Information/Personal Health Information that is collected, and support data management and reporting by:

- Maintaining a provincial database of OAP child/youth records and ensuring that the information is complete and accurate through regular validation;
- Ensuring families can access and validate their personal information, including data elements collected that may identify their demographic characteristics;
- Working with MCCSS to comply with Ontario and MCCSS data standards and directives, implement and improve data quality best practices and support data standardization across service providers;
- Working with MCCSS to ensure compliance with [Ontario's regulations on race-based data](#), including data elements that will enable monitoring of access for marginalized populations;
- Ensuring compliance with the requirements in the Child, Youth and Family Services Act, 2017 (CYFSA) particularly with respect to personal information and privacy provisions or other applicable privacy legislation (e.g. [FIPPA](#), [PHIPA](#));
- Participation in developing an interface to MCCSS's data warehouse for regular sharing of data;
- Participating in data governance tables may also be required to define data management activities including accountability, standardized rules, regulations and definitions, management of sensitive data and data quality standards; and
- Providing advice on policies and procedures related to privacy and data sharing as these apply to the IIO and their partners.

MCCSS is authorized to collect families' personal information under section 283(1) of the CYFSA. For further details on how MCCSS can collect and use personal and personal health information under the CYFSA, please see [Appendix C: Section 283\(1\) of the Child, Youth and Family Services Act, 2017, S.O. 2017, c. 14, Sched. 1 \(CYFSA\)](#).

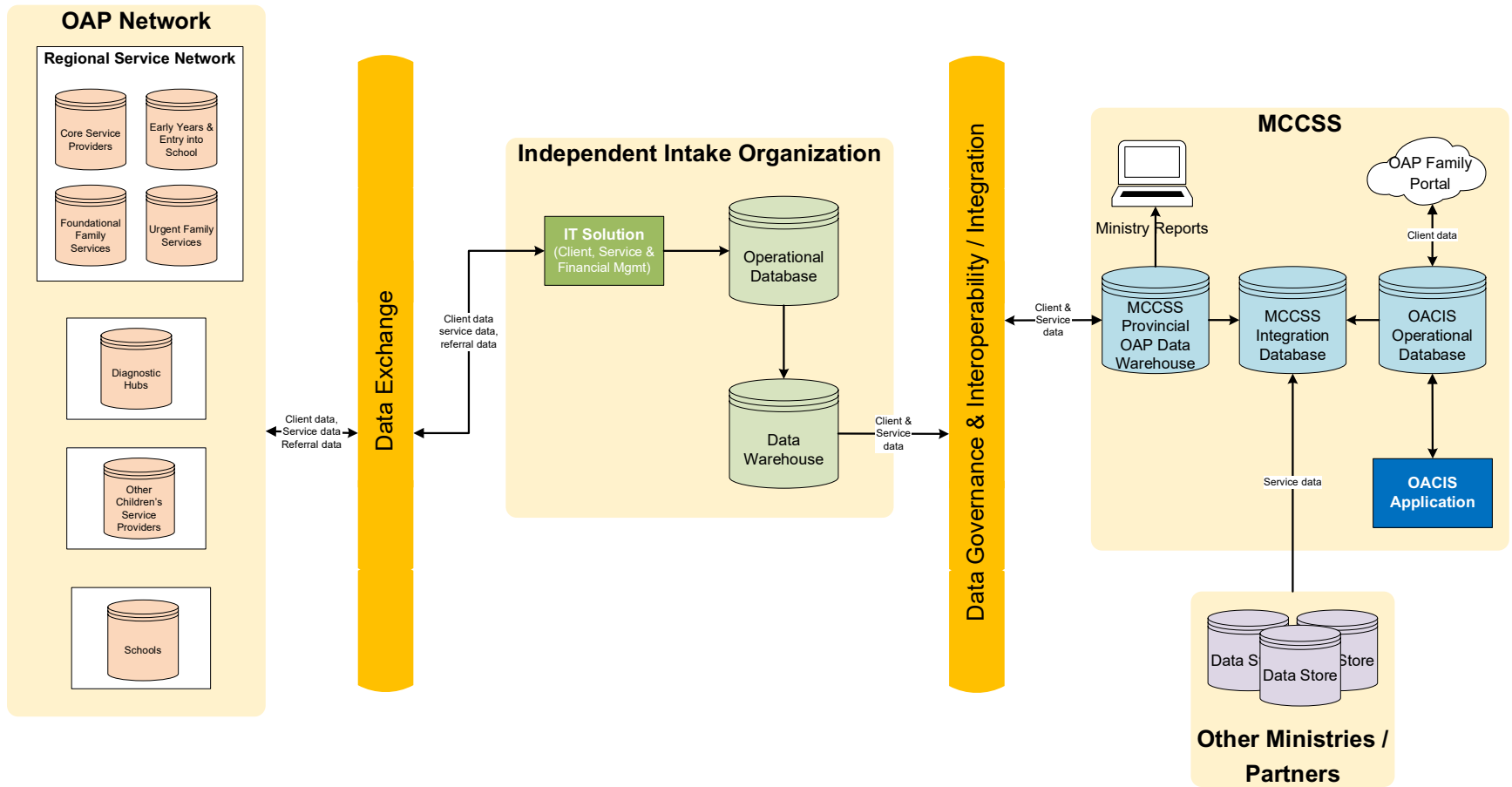
Applicants are required to ensure that any family-level personal information or personal health information that is collected can be disclosed to MCCSS. These conditions are

binding on any third parties with whom the applicant enters into an agreement with. Moreover, applicants should not enter into any agreements with third parties that would limit/restrict their ability to disclose personal information/personal health information to MCCSS pursuant to a request made under Part X of the CYFSA.

The Data Flow diagram below is for illustration purposes only to describe MCCSS's vision for the IIO as a hub for the collection, storage and exchange of family information in the OAP to facilitate a coordinated and integrated approach to service delivery. The approach to data collection and reporting will take into consideration perspectives and information from families, OAP service providers in the RSNs, diagnostic hubs, schools and other providers in the OAP ecosystem.

### 5.4.1 Data Flow in the OAP Ecosystem

#### Ontario Autism Program Data Ecosystem



MCCSS's longer-term data vision includes collecting and integrating data across human and social services and other ministries (e.g. Ministry of Health, Ministry of Education) to optimize the health and well being of children, youth, and their families across their life-course; as well as to improve program and policy analysis and decision-making.

## Section 6: Implementation Plan

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The IIO will assume responsibility for key program functions of the new needs-based OAP beginning in Spring 2021. The IIO will continue to transition and execute all accountable functions including a data and technology strategy, a fully established regional service network in each of the five MCCSS defined regions and possibly increased accountability for OAP priority pathways. The IIO will assume oversight of all accountable functions through a phased approach as the organization continues to ramp up capacity and transition to a fully functioning mature state by 2023-24.

The applicant will be required to develop a two-year project plan that outlines how key milestones will be achieved within short-term, medium-term and long-term timelines, beginning with immediate functions that the IIO will assume in Spring 2021.

This plan must contain, at minimum, a description of how the following will be implemented to meet MCCSS program timelines and objectives:

- Transfer program responsibility for intake and registration, allocating funding to families, and associated reconciliation functions from MCCSS (i.e. CIRT) to the IIO;
- Initiate recruitment and training of new OAP Care Coordinators to conduct determination of needs process to begin provincial implementation in summer 2021;
- Fulfill all technology and data needs; and
- Grow RSNs, including focus on workforce capacity building initiatives.

The IIO will need to assume responsibility for some elements of the program sooner than others, such as intake and registration, funding functions, and the determination of needs process.

## Section 7: Costing Considerations

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### 7.1 Start-Up Costs

Based on the timing and execution of the contracting process, MCCSS will also be considering costs associated with starting and ramping-up services prior to and throughout 2021-22. These costs could include, but are not limited to:

- Recruitments costs;

- Education and training related to OAP Care Coordinators;
- Costs related to the use of standardized tools which may include:
  - Estimated one day training for Care Coordinators;
  - Translation of standardized tools and manuals into French, plus any other languages required;
  - AODA formatting;
  - Printing of standardized tools and manuals
- Technology start up costs:
  - System for data collection and data storage (server)
  - Maintenance and upgrade costs
  - Costs associated with data transfers/integration with MCCSS data systems
  - Please see section 7.3 for details on on-going technology costs

## 7.2 On-going Costing Considerations

There are three main costing considerations that will be on-going throughout and beyond 2021-2022 with respect to funding the IIO:

- Oversight and supervision of OAP Care Coordinators
  - This includes the salaries and benefits of OAP Care Coordinators (note there is a maximum caseload of 80 families per Care Coordinator)
  - Training and capacity building of Care Coordinators to deliver the Determination of Needs Process
  - Supervision of the Care Coordinator role
- Leadership and Governance of RSNs
  - Responsible for the leadership and governance of RSNs in each of the five MCCSS defined regions
  - The leadership and governance structure will be defined by the applicant
- Organization and processing of intake and registration, waitlist management as well as funding and reconciliation processes
  - Intake and registration will require specific, standardized and family-centred processes and to support families entering the OAP. These functions may also include orientation to the OAP and information sharing.
  - Allocating OAP funding and completing associated reconciliation functions will require specific standardized processes to support families to purchase eligible core clinical services.

The IIO must direct the majority of funds provided to service delivery. A maximum of 10% (or 10.5% in the case of Northern communities) of the funding may be directed to administrative support, project management and overhead. For costing associated to technology, please see section 7.3.



## 7.3 Technology Costs

Applicants are required to provide cost estimates for the technology requirements to support the Independent Intake Organization role. This should include a detailed breakdown of costs associated with, but not limited to:

- Enhancing current solution or developing new solutions to support the IIO business functions
- Hardware requirements
- Infrastructure requirements (including storage, hosting, platform)
- Training and change management
- Support, maintenance, and upgrades
- Costs associated with data transfers/integration with MCCSS data systems
- Human resources (Number of FTE, vendor support)

The above list is not prescriptive. In the application, the applicant must identify any additional costs (one-time or on-going), including any required start-up costs, that would be incurred and charged.

## Section 8: Evaluation

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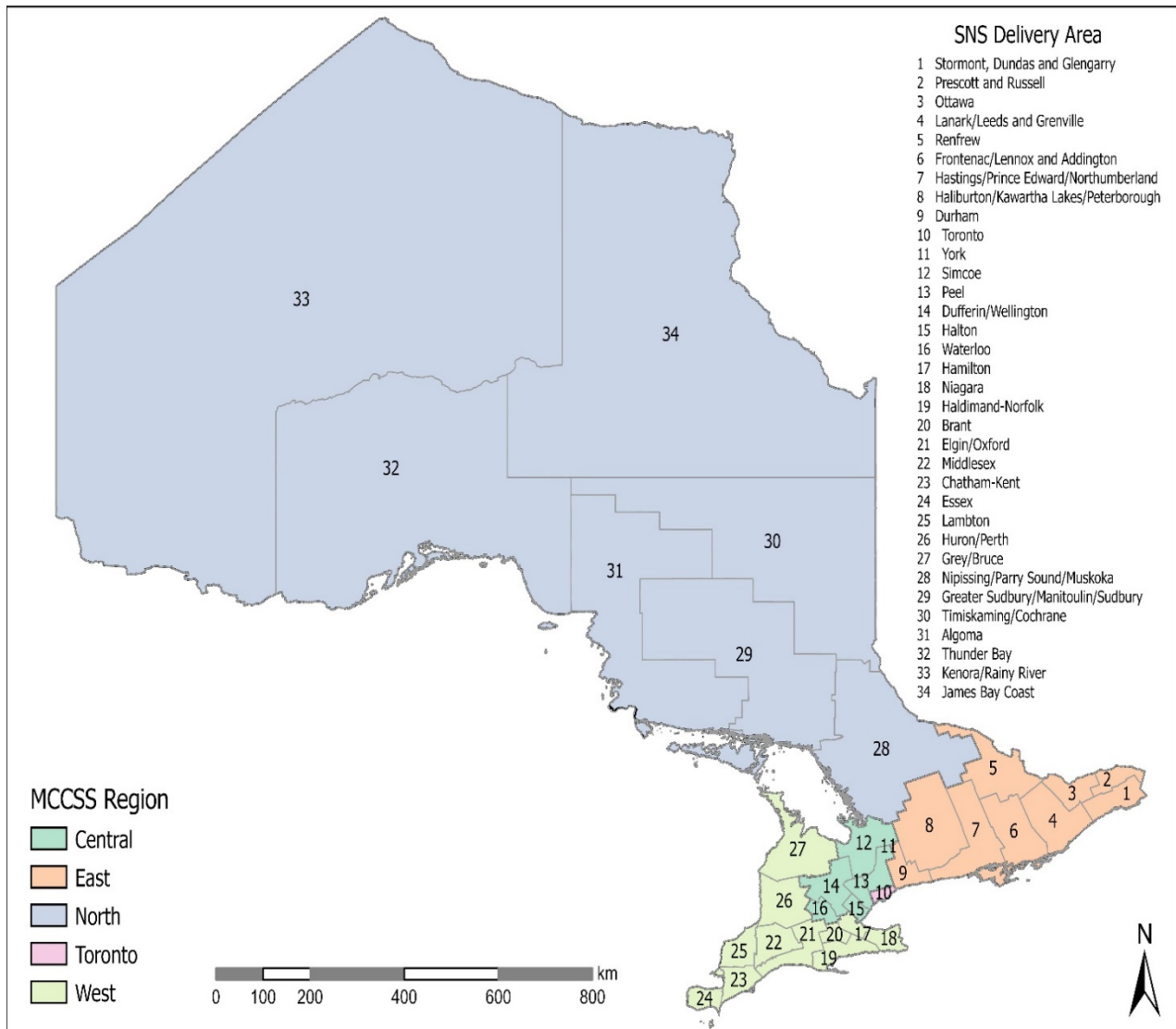
Please see section 2.2. of the Applicant Response Document for the evaluation criteria.

# Appendices

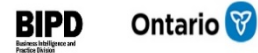
## Appendix A - MCCSS Defined Regions

The map below overlays the 34 special needs service delivery areas with the five MCCSS defined regions (Central, East, North, Toronto, West).

### Special Needs Service Delivery Areas Overlaid with MCCSS Regions



Produced by: Solutions Design and Delivery Unit, Data Strategy and Solutions Platform Branch, Business Intelligence & Practice Division, MCCSS. October 2020



## Appendix B: Detailed Regional Distribution

The tables below provide the number of children and youth registered for the OAP broken down by municipality, based on data contained in OACIS as of July 1, 2020. This represents a subset of children and youth registered for the OAP only and is provided to illustrate potential distribution of children and youth across the province.

Regional distribution of OAP records, OACIS July 1, 2020			
Geographic Location	Age Group		Total
	0-5	6-17	
<b>Central Region</b>	<b>3,687</b>	<b>5,035</b>	<b>8,722</b>
County of Dufferin	34	108	142
County of Simcoe	547	701	1,248
County of Wellington	96	197	293
Regional Municipality of Halton	351	596	947
Regional Municipality of Peel	1,268	1,513	2,781
Regional Municipality of Waterloo	341	621	962
Regional Municipality of York	1,050	1,299	2,349
<b>Eastern Region</b>	<b>2,102</b>	<b>3,148</b>	<b>5,250</b>
City of Cornwall	64	92	156
City of Kawartha Lakes	31	70	101
City of Kingston	116	246	362
City of Ottawa	779	1,050	1,829
City of Peterborough	70	118	188
County of Hastings	67	165	232
County of Lanark	36	117	153
County of Lennox and Addington	19	79	98
County of Northumberland	34	69	103
County of Renfrew	82	91	173
Regional Municipality of Durham	709	844	1,553
UC of Leeds and Grenville	44	124	168
UC of Prescott and Russell	51	83	134

Regional distribution of OAP records, OACIS July 1, 2020			
Geographic Location	Age Group		Total
	0-5	6-17	
<b>Northern Region</b>	<b>320</b>	<b>631</b>	<b>951</b>
Algoma DSSAB	16	26	42
City of Greater Sudbury	68	123	191
Cochrane DSSAB	32	50	82
District Municipality of Muskoka	17	63	80
Kenora DSB	9	29	38
Manitoulin-Sudbury DSSAB	13	27	40
Nipissing DSSAB	40	52	92
Parry Sound DSSAB	11	25	36
Rainy River DSSAB	7	14	21
Sault Ste. Marie DSSAB	54	102	156
Thunder Bay DSB	0	0	0
Thunder Bay DSSAB	42	103	145
Timiskaming DSSAB	11	17	28
<b>Toronto Region</b>	<b>2,380</b>	<b>2,468</b>	<b>4,848</b>
City of Toronto	2,380	2,468	4,848
<b>Western Region</b>	<b>1,160</b>	<b>2,204</b>	<b>3,364</b>
City of Brantford	60	200	260
City of Hamilton	350	418	768
City of London	160	315	475
City of St. Thomas	34	55	89
City of Stratford	22	15	37
City of Windsor	151	231	382
County of Bruce	6	18	24
County of Grey	22	45	67
County of Huron	8	21	29
County of Lambton	41	52	93
County of Norfolk	45	123	168
County of Oxford	29	74	103
Municipality of Chatham-Kent	35	36	71
Regional Municipality of Niagara	197	601	798
<b>Location not determined</b>	<b>123</b>	<b>96</b>	<b>219</b>
<b>Total</b>	<b>9,772</b>	<b>13,582</b>	<b>23,354</b>

## **Appendix C: Section 283(1) of the Child, Youth and Family Services Act, 2017, S.O. 2017, c. 14, Sched. 1 (CYFSA).**

MCCSS is authorized by section 283(1) of the Child, Youth and Family Services Act, 2017, S.O. 2017, c. 14, Sched. 1 (CYFSA) to collect personal information from service providers. The section states that MCCSS may collect personal information, directly or indirectly, for purposes related to the following matters, and may use it for those purposes:

1. Administering the CYFSA and the regulations.
2. Determining compliance with the CYFSA and the regulations.
3. Planning, managing or delivering services that the Ministry provides or funds, in whole or in part, allocating resources to any of them, evaluating or monitoring any of them or detecting, monitoring and preventing fraud or any unauthorized receipt of services or benefits related to any of them.
4. Conducting risk management and error management activities in respect of the services that the Ministry provides or funds, in whole or in part.
5. Conducting activities to improve or maintain the quality of the services that the Ministry provides or funds, in whole or in part.
6. Conducting research and analysis that relate to children and their families, including longitudinal studies, by or on behalf of the Ministry that relate to,
  - i. a service,
  - ii. the transition of children and their families between and out of services, including the resulting outcomes, or
  - iii. programs that support the learning, development, health and well-being of children and their families, including programs provided or funded in whole or in part by the Ministry or any other ministry of the Government of Ontario.

For more information about the ministry's authority to collect personal information under Part X of CYFSA, please see section 283 linked [here](#).

# Appendix D: Technology Key Principles and Standards

## Technology Key Principles and Standards

A people-centered, information technology system to support the OAP will align with the following key principles:

Key Principle	Description and Examples
Person-centered	<ul style="list-style-type: none"> <li>• A solution that supports the needs of children and youth on the autism spectrum and their families throughout their journey in OAP.</li> <li>• Considers the end-user and develops solutions to support the needs of families in a simple and user-friendly way.</li> <li>• Ensures the service is accessible to all users regardless of their individual abilities, device, environment or quality of access, including language preferences. For more information, please refer to the <u>Ontario Digital Service Standards</u>, which references:               <ul style="list-style-type: none"> <li>○ <u>Accessibility - <i>Accessibility for Ontarians with Disabilities Act</i>, Information and Communication Standard</u></li> <li>○ <u>French language - <i>French Language Services Act</i>, Government services in French</u></li> <li>○ <u>Open data - <i>Open Data Directive</i></u></li> <li>○ <u>Social Media - <i>Ontario Public Service social media guidelines</i></u></li> </ul> </li> <li>• Considers the needs of Care Coordinators, service providers and other users in the OAP ecosystem.</li> <li>• System is AODA compliant and provides good user experience               <ul style="list-style-type: none"> <li>○ Refer to MCCSS’s <u>AODA</u> and <u>Integrated Accessibility Standards</u></li> </ul> </li> <li>• Considers all other relevant GO-ITS standards, which includes provisions under:               <ul style="list-style-type: none"> <li>○ <u>The OPS Anti-Racism Policy</u></li> <li>○ <u>FIPPA</u></li> <li>○ <u>PHIPHA</u> regulations</li> </ul> </li> </ul>
Scalable and flexible digital solution	<ul style="list-style-type: none"> <li>• A modern, digital solution will be able to scale to support the needs-based OAP now and in the future as new program elements are introduced.</li> <li>• Adaptable to the changing needs of families over the course of their journey in the OAP.</li> <li>• Scalable to support other special needs programs.</li> </ul>

	<ul style="list-style-type: none"> <li>• Flexible to meet the evolving business needs of the OAP while streamlining workflows and administrative tasks</li> </ul>
Open and interoperable to integrate with other systems	<ul style="list-style-type: none"> <li>• The system has the capability to integrate with MCCSS' data warehouse to enable secure and automated transfer of data in order to meet MCCSS data and reporting requirements. <ul style="list-style-type: none"> <li>○ Regular transfer of up-to-date family data is required to enable MCCSS to oversee, measure and assess how children, youth, and families are accessing the program over time.</li> </ul> </li> <li>• An ideal system will be able to integrate with a myriad of third party external software systems including, but not limited to: financial applications, reporting tools and business intelligence software, as needed.</li> <li>• The system is developed using open standards to facilitate interoperability and data exchange between different systems and services in the OAP ecosystem.</li> </ul>
Collect and share records with all relevant parties	<ul style="list-style-type: none"> <li>• The system will provide a centralized repository of all family records that enables Care Coordinators and other service provider in the RSNs to access all the pertinent information about the family from a single location.</li> <li>• Facilitate sharing and exchange of family information in real-time with relevant professionals involved in the family's service delivery to support access to information to inform decision-making related to the family's services; as well as to provide a holistic view of each family by linking information collected by other health care providers in the ecosystem.</li> <li>• Enable families to access and view their child's OAP record, update address and contact information with ease and at their convenience by offering a self-service portal.</li> </ul>
Support family privacy	<ul style="list-style-type: none"> <li>• Protects privacy of family information through comprehensive safeguards across the data lifecycle (collection, preparation, input, processing, output, storage/archiving). This includes ensuring appropriate compliance with the Child, Youth and Family Services Act (which includes <u>Part X</u> of the Child, Youth and Family Services Act, 2017), personal information, privacy provisions or other privacy legislation (e.g. FIPPA, PIPEDA, PHIPA) for scenarios not contemplated in the CYFSA, as well as MCCSS data privacy and security policies and procedures. Refer to GO-ITS 25.0 General Security Requirements.</li> </ul>
<b>ADDITIONAL STANDARDS:</b>	
Data Integrity	<ul style="list-style-type: none"> <li>• the data maintained by the IIO are accurate, authentic, and without corruption</li> </ul>

Accessibility	<ul style="list-style-type: none"> <li>the system can be used by people with the wildest range of capabilities</li> <li>the system ensures the service is accessible to all users regardless of their individual abilities, device, environment or quality of access, including language preferences</li> </ul>
Availability	<ul style="list-style-type: none"> <li>Degree to which users can depend on the system to be up (able to function) during normal operating hours</li> </ul>
Survivability, Reliability & Supportability	<ul style="list-style-type: none"> <li>the system continues to function and is able to recover quickly in the event of a system failure</li> <li>the system consistently performs the specified functions without failure</li> <li>the software system is cost-effective to maintain</li> </ul>
Business Continuity	<ul style="list-style-type: none"> <li>the system identifies potential impacts that threaten the organization; and</li> <li>provides a framework for building resilience with the capability for an effective response that safeguards the interests of its key stakeholders, reputation, brand and value creating activities and ensures continuity of products/services.</li> </ul>
Disaster Recovery	<ul style="list-style-type: none"> <li>the organization has developed and implemented a Disaster Recovery Plan which:</li> <li>outlines a process and documents arrangements and procedures that enable the organization to respond appropriately to an unplanned incident that causes an unacceptable period of outage.</li> </ul>
Data Migration	<p>the organization has tools and capacity to support data migration activities including extracting data from MCCSS OACIS application that can be uploaded into the IIO's system to create an OAP family registry.</p>

## Appendix E: Technology and Data: Business Function Descriptions

The business function model (BFM) identifies and displays both graphically and textually, in a structured format, the processes that the business performs. Functions provide context and a high-level or strategic view that allows key stakeholders to focus on the critical business without getting caught up on details such as organizational units or data flows. The BFM highlights what the business ought to be doing in order to deliver services. The business function model is useful for project scoping and roadmap definition; it allows for further detailed analysis for mapping requirements and resources. The BFM serves as a starting point to identify the IIO's key functions and processes for technology automation.

#	Function / Process Name	Description
1.0	<b>Intake &amp; Registration Management</b>	Manages the access to one or more OAP services for a child/youth and family. Processes include the initial point of contact for the child/youth and family and the collection of registration and intake information such as name, date of birth, address, contact information, primary and alternative contacts, caregiver/guardian information, intake date, date diagnosed.
1.1	Register Families for OAP	Gathers information from the OAP applicant, included, but not limited to verifying data, confirming eligibility, starting family record.
1.2	Manage Provincial OAP Family Registry	Manages an authoritative list of child/youth data and information (e.g. name, address, demographic data, status). Also includes the development, maintenance and management of the provincial waitlist for core clinical services and facilitating regional access to priority pathways.
1.3	Manage Care Coordinator Assignment	Manages the process of assigning a Care Coordinator to a child/youth and family, taking into consideration the family's geographical area, linguistic



#	Function / Process Name	Description
		and cultural diversity needs and accessibility requirements.
1.4	Manage Regional Transfers	Manages the process for transferring families moving to a different RSN within the province to ensure continuity of services for children and families accessing priority pathways
<b>2.0</b>	<b>Needs Determination Management</b>	Manages the process of assessing & determining a child's profile of support needs and corresponding OAP funding allocation.
2.1	Develop Child\Youth's Profile of Support Need	The collection and storage of the child/youth's information and history of their level of support need, which is determined by the Care Coordinator through a standardized, clinically informed determination of needs process.
2.2	Determine Family's OAP Funding Allocation	The determination of the child's OAP funding allocation based on the child's profile of support need identified through the determination of needs process.
2.3	Manage Dispute Resolution Process Files	The maintenance and storage of a family's dispute resolution file, which moves through the various stages of the process along with the family.
<b>3.0</b>	<b>Maintaining Records</b>	The collection of information, including relevant documents and reports to develop and maintain a record for children and youth registered in the OAP.
<b>4.0</b>	<b>Financial Payment Management</b>	Processes to manage and support financial accounts for Ontario Autism program delivery, including financial administration, OAP funding payments, and associated reconciliation and any issues tied to these processes.
4.1	Manage OAP Funding Payments	Processes for managing the provision of payment to families based on the

#	Function / Process Name	Description
		determination of needs process, including regular (e.g. one-time, monthly) and ad-hoc payments for different payment methods (e.g. cheque or direct bank deposit).
4.2	Manage Invoices	Processes for managing the collection of invoices and receipts to demonstrate proof of eligible expense(s).
4.3	Manage Payment Reconciliation	Processes to support tracking financial flows from one organization/unit/account to another, the validation that appropriate entries were made (e.g. by comparing payment), the handling of anomalies, and the reconciliation of financial transactions, including OAP funding payments.
4.4	Manage Account Balance	Processes for managing, tracking and allocating funding surpluses (e.g., unspent money) for families.
<b>5.0</b>	<b>Performance Management</b>	Manages the performance of accountable functions within the service system against the established performance expectations. This includes processes to support the monitoring and evaluation of effectiveness, accessibility and responsiveness, partnerships and family experience and satisfaction.
5.1	Monitor Program Performance	Processes to review, evaluate and report on the program quality and effectiveness of OAP services and supports against agreed performance expectations, objectives and plans, including but not limited to, waitlist management, determination of needs process.

#	Function / Process Name	Description
5.2	Measure Family Satisfaction	Processes to review and evaluate family experience and satisfaction with services and supports delivered by the IIO.
<b>6.0</b>	<b>Information &amp; Data Management</b>	Processes to manage family and service information resources; and to provide program and case information to support ongoing reporting requirements.
6.1	Manage Child/Youth Information	Manages family case information, information sharing between partners and service providers, ensures privacy and provides access to information throughout the case lifecycle from creation or receipt to final disposition (i.e. secured destruction or transfer to Archives).
6.2	Manage Family Consents and Notice of Collections	A set of processes for providing notice of collection to or obtaining and managing informed consent, as required, from a child/youth and/or parent on behalf of a child/youth lacking capacity to consent to receive service/treatment, obtain and/or share relevant information for service planning and treatment, and documenting consent. While consent is required for the collection and use of data for specific purposes (e.g., research), data can be collected and used for other purposes as stated above via a notice of collection.
6.3	Manage Ministry Reporting Requirements	Processes that manage the collection and delivery of information, including personal information and personal health information, through reports and/or dashboards that support

#	Function / Process Name	Description
		<p>program analysis and decision-making on:</p> <ul style="list-style-type: none"> <li>- IIO Performance Monitoring (e.g. Waitlist management, delivery of Determination of Needs process, financial reporting</li> <li>- Child and Family Satisfaction</li> <li>- Workforce and system capacity initiatives</li> </ul>
6.4	Manage Workforce Capacity Data	Manages workforce and service provider data to support workforce and system planning.
7.0	<b>Support Service Navigation</b>	Processes set-up so the IIO has access to up-to-date information to help families with their service navigation journey.
7.1	Connect families with service provider options	A set of processes to provide service navigation support to families (if requested by the family), which may include referring families to Autism Ontario's OAP provider list for qualified, experienced and trained providers for families to choose from, and connecting families to a variety of service choices within and outside of the OAP based on the area that they live in and their identified needs.
7.2	Connect families with other supports	Processes in place to help families find, refer to, and apply for other supports that they are eligible for and identify sources of funding in their local community to complement their child's OAP services. This may include connecting with non-profits in the region, maintaining a database of local grants/funding opportunities that can be accessed.

#	Function / Process Name	Description
8.0	<b>Communications Management</b>	Manages communication channels and coordinates communication.
8.1	Track Correspondence	Tracks the progress of correspondence with families, service providers and partners
8.2	Manage Documents and Case Notes	Manages formal and informal documentation supporting a child and family's integrated service plan.
8.3	Manage Communication Materials	Manages family communications and publications, such as, but not limited to, information regarding OAP services, service navigation and Point-of-Contact information.
8.4	Manage Channels	Manages communication channels and access (e.g. collaboration site, internet, mail, phone).

## Glossary

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**ABA** - Applied Behavioural Analysis  
**ASD** – Autism Spectrum Disorder  
**CC** – Care Coordinator  
**CFA** – Call for Applications  
**CIRT** – Central Intake and Registration Team  
**CSP** - Coordinated Service Planning  
**CYFSA** – Child, Youth and Family Services Act  
**FFS** – Foundational Family Services  
**FSW** – Family Support Worker  
**IBI** - Intensive Behavioural Intervention

**IIO** – Independent Intake Organization  
**IWG** – Implementation Working Group  
**MCCSS** – Ontario Ministry of Children, Community and Social Services  
**OACIS** – Ontario Autism Client Information System  
**OAP** – Ontario Autism Program  
**RSN** – Regional Service Network  
**SPA** – Single Point of Access  
**SSAH** – Special Services at Home  
**TPA** – Transfer Payment Agreement  
**TPR** – Transfer Payment Recipient