



The Chilliwack Child and Youth Committee - Chilliwack Clinical Sub- Committee



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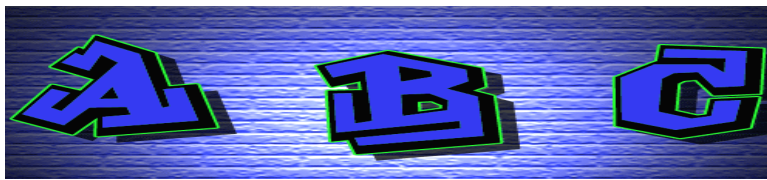


Builds



Community

The Chilliwack Clinical Sub-Committee Terms of Reference



CHILLIWACK CHILD AND YOUTH COMMITTEE –
Chilliwack Clinical Sub-Committee

TERMS OF REFERENCE

The Chilliwack Clinical Sub-Committee is guided by the Chilliwack Child and Youth Committee’s Mission, Vision and Core Values as stated below.

Mission Statement

“The Chilliwack Child and Youth Committee (CYC) provides leadership and advocacy in the delivery of human/ social services to children, youth and their families. Our mission is to work collaboratively in the design, implementation and evaluation of the continuum of services that promote and build capacity of children, youth and families at risk.”

Vision Statement

The CYC aspires to be recognized for enhancing and developing services which contribute to the health and wellness of children, youth and families at risk in the Chilliwack Community.

Core Values

The CYC values relationships and the context of work between community partners in the process of engaging families, neighborhoods, and the community to enhance the well-being of our children and youth.

The CYC engages in the following best practices to provide optimal services to children, youth and families at risk in Chilliwack:

1. Using a Humanistic Approach to empower children, youth, and families to advocate for themselves and identify their priorities, strengths and needs.
2. Using effective strength-based approaches such as Care Team Meetings and Appreciative Inquiry to assist children, youth and families with the development of cohesive individual plans and collaborative systems of care.
3. Using an ecological approach to service delivery to ensure that all systems of the child, youth and families life are positively engaged.
4. Allocating services and resources to children and youth based on a three tier prevention approach to service delivery.
5. Integrating inclusive community collaboration for the following processes:
 - Consultation
 - Pooling and allocating resources
 - Decision making
 - Planning



1.0 Purpose of the Chilliwack Clinical Sub-Committee

- To provide a place within the CYC structure where issues pertaining to clinical and educational best practice, as well as communication and/or integration of services can be identified and discussed.
- To review, support, and encourage the development of well functioning Care Team processes so that integrated and cohesive services are provided to young people and their kin.
- To plan and promote coordinated and collaborative, clinical and educational programs and integrated practices which benefit children, youth and families.

2.0 Membership on the Chilliwack Clinical Sub-Committee

Membership on the Chilliwack Clinical Sub-Committee includes representation from the following:

- MCFD, Community Services Manager and others designated by the CSM
- School District #33 District Principal and others designated by District Principal
- Chilliwack Community Services Program manager or other designated by Program Manager
- Fraser Valley Child Development Centre Representative
- Ann Davis Representative
- Xyolhemeylh Representative
- Sto:lo Health Representative
- Fraser Health Representative
- Chilliwack Addictions and Prevention Services Representative
- Representation from any Clinical Sub-Committee working group
- Representative from the Child and Youth Committee

Each member will be committed to attend regular monthly meetings or they will cover absences with an alternate individual from their organization.



3.0 Chilliwack Clinical Sub-Committee Working Groups

- 3.1** The following four working groups provides support and facilitates the purposes of the Clinical Sub-Committee
- The Integrated Case Management Working Group
 - The Treatment Resistant Youth (TRY) Working Group
 - The Suicide Prevention Working Group
 - Special Projects, such as the Connect Parenting Working Group
- 3.2** Each of the working groups will develop an annual work plan and or report to meet the outcomes of the Chilliwack Clinical Sub-Committee's Strategic Plan.
- 3.3** Work plans/reports will be submitted by March 31st of the fiscal year to the Clinical Sub-Committee.

4.0 Guests

- 4.1** Guests are welcome to attend a Clinical Sub-Committee Meeting by a verbal invitation request through a member of the Clinical Sub-Committee.
- 4.2** Guests are encouraged to participate in discussions at the Clinical Sub-Committee Meetings.
- 4.3** Guests may also request to be placed on an available agenda time through a Clinical Sub-Committee member. The Clinical Sub-Committee member will notify the chair of the committee who will then determine availability for the next meeting or subsequent meeting.

5.0 Decision Making Process

- 5.1** The Chilliwack Clinical Sub-Committee has adopted the Chilliwack Early Years Sub-Committee and the Chilliwack Child and Youth Committee's collaborative and participatory model of consensus to support the decision making process.
- 5.2** All participants are encouraged to share in the Chilliwack Clinical-Sub Committee discussion items.
- 5.3** The following process of consensus will be used to assist members in reaching a decisions and/or agreements



STEP ONE:

- Proposal or issue will be presented at the Clinical Sub Committee meeting.
- Members and participants will have the opportunity to ask questions and clarify concerns.

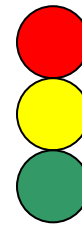
STEP TWO:

- Further group discussion based on the new information.
- A Quorum will need to be achieved in order to make decisions. A quorum will include at least five different agencies participating in a consensus decision.
- The Clinical Sub-Committee Chair will call for consensus asking members to indicate their status based on the following street light legend:

Red Light: - No, I cannot support or agree with decision.

Yellow Light - I am not in total agreement; however I can support the decision

Green Light - Yes – I am in total agreement with the proposed decision.



- If all members state “Green Light” then consensus has been reached.
- If any member indicates a red or yellow light then the process continues to step three.

STEP THREE (Only proceed if Step Two did not reach consensus)

- Concerns will be addressed and group discussion is encouraged to assist in validating or clarifying concerns.
- The chair will call for a consensus.
- A Green Light (Yes I am in total agreement with the proposed decision and Yellow Light (I am not in total agreement: however I can support the decision) from all members would indicate consensus has been reached. A red light would move for the decision to be made at a later time.

STEP FOUR

- Group decisions are either resolved or issues are addressed
- The chair will call for consensus or move to vote.



STEP FIVE

- If a consensus cannot be reached members will be called to vote by the chair.
- A Quorum will need to be achieved in order to vote on a decision. (A quorum would include at least five different agencies participating in a voting process. Only one vote per member agency and decision will be made with a 75% majority vote.)

6.0 Conflict of Interest

- 6.1** A conflict of interest arises when a Chilliwack Clinical Sub-Committee member's personal interests or those of close family, friends, business associates and/or partnership are at stake due to the Clinical Sub-Committee's decision making process.
- 6.2** If a conflict of interest occurs, the member(s) will be asked to step outside during the discussion process and return to the table for the decision making process.

7.0 Strategic Planning

- 7.1** The Clinical Sub-Committee will develop a strategic plan every five years.
- 7.2** Members of the Chilliwack Clinical Sub-Committee will review and monitor the strategic plan annually and report revisions to the Chilliwack Child and Youth Committee.
- 7.3** The Strategic Plan can be revised and updated in response to emerging or disappearing needs/trends as determined by the members of the sub-committee.

8.0 Chair

- 8.1** The Chilliwack Clinical Sub-Committee will be represented by one chair.
- 8.2** The chair is selected through consensus of the Chilliwack Clinical Sub-Committee for a two year term.
- 8.3** Duties of the Chair include:
 - I. Preparing and distributing an agenda one working day prior to the meeting
 - II. Chairing positive group process at the Chilliwack Clinical Sub-Committee meetings and practicing the guidelines of the Terms of Reference.
 - III. Participating on task groups that promote the actions of the Strategic Plan.



- IV. Selecting a record keeper through committee consensus for a one year term.
- V. Ensuring that formal documentation and records are maintained and members receive relevant correspondence.
- VI. Ensuring that new members receive the Chilliwack Clinical Sub-Committee's Strategic Plan and a copy of the Terms of Reference.

9.0 Meetings

9.1 The CYC Clinical Sub-Committee meetings will take place on the second Tuesday afternoons of each month from 1:00 p.m. – 3:00 p.m. September through June. Meetings are usually hosted at the Kipp Center located at 46370 Portage Avenue, Chilliwack, B.C.

10.0 Revisions to Terms of Reference

- The terms of reference will be reviewed on an annual basis.

