Exploration

Selection Criteria and Prioritization Tool

This tool is a method for prioritizing potential areas of focus while ensuring that overall project parameters and essential criteria remain in focus. For the Service Collaborative initiative, these criteria reflect policy directions of *Ontario's Comprehensive Mental Health and Addictions Strategy*.

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What is the Selection Criteria and Prioritization Tool?

This tool provides support and guidance for early exploratory discussions, ensuring a focus on project parameters and criteria. It was developed to support Service Collaboratives in the exploration phase to narrow in on a potential system gap to address.

How was the Selection Criteria and Prioritization Tool used?

The tool supported CAMH's Regional Implementation Teams working within Service Collaborative communities to facilitate early discussions and focus in on an area or issue. Each Service Collaborative community could select only one system level gap to address within the time limited project. At the point of employing this tool, the Regional Implementation Team would have already gathered research and input on potential gap areas from Service Collaborative members and other community stakeholders, as well as discussed this with the Service Collaborative group. This tool provided a litmus test of sorts, ensuring that any gap areas under consideration were in scope of the criteria and direction set out within *Ontario's Comprehensive Mental Health and Addictions Strategy*.

In addition to ensuring congruence with the overall Strategy, the Selection Criteria and Prioritization process allowed consistent consideration for health equity issues and population needs identified by consolidating Provincial data. A health equity community profile was developed prior to the selection of a community gap. The profile outlined populations with considerable mental health needs or those impacted most significantly by health inequities. In addition, a Provincial Needs Validation identified issues pertinent to youth mental health and well being by presenting available data. Both the Needs Validation and health equity community profile are important considerations related to Selection Criteria and Prioritization.

Though the criteria are static and the tool (below) provides a template for guided conversation, it can be and was employed in various ways across Service Collaborative communities. Some examples include:

- Review of the criteria followed by a general large group discussion
- Review of the criteria and systematic discussion of each possible focus area as it relates to each guiding question
- Review of the criteria followed by small group discussion, with each group measuring one of the potential areas of focus against the criteria and reporting conclusions back to the larger group.

Regardless of the method for using the tool, it provides a touchstone to ensure the project remains within the intended parameters (which is more likely to have the intended impact). The intent of the discussion is to eliminate possibilities and narrow the field to those that have closest relationship to the criteria.

There are four overarching questions to guide the selection and prioritization of system gaps and population needs. These are:

1) Is it aligned with *Ontario's Comprehensive Mental Health and Addictions Strategy*'s three year plan?
2) Is it feasible?
3) What does the needs validation point to?
4) What kinds of interventions does the evidence support?

Gap / Need Selection Criteria			
Question	**Criteria**	**Definition**	**√**
Is it aligned with the 3-year strategy?	Alignment with 3-year strategy objectives	1) Will focus on key transition points, including: • Between hospital and community-based service settings; • From children and youth services to adult services; and • Between health and justice systems. 2) Opportunity for organizations to build on existing partnerships and cross sector integration. 3) To make improvements to processes associated with transitions to: • Enhance client experience (i.e., reduce drop out from treatment and support); • Improve seamless and timely access to appropriate services (i.e., better continuity of care, reduce ER visits); • Better integrate sectors that provide services to Ontarians living with mental health and/or addiction issues (i.e., shorter wait times for services); and • Enhance the quality of services delivered. 4) Focus on Equity: • Reducing systemic barriers to equitable access to high quality services for all.	
What is feasible?	Actionable	Considers the scale of resources required to have an appreciable effect. Is there an opportunity to leverage existing initiatives?	
	Sustainable	Is addressing this gap sustainable? Will it contribute to a system-based and repeatable solution?	
What does the needs validation point to?	Accessible	Considers geography, population and cultural accessibility.	
	Promotes Health Equity	• Considers equity issues and opportunities identified in the health equity community profiles. • There may be opportunity to reduce barriers for one or more priority populations.	
	Measurable	Gaps and potential solutions / recommendations can be expressed in measurable terms (process and outcome).	
	Existing Initiatives	Gaps and potential solutions / recommendations add value to system change efforts and do not add to confusion.	
What interventions does the evidence support?	Outcome-Focused and Evidence-Based	There is evidence that this gap points to solutions that will have the necessary impact to improve client outcome and system performance.	

How can you use this tool in your work?

The tool can be adapted for use within agencies to make decisions related to programming or for use within community collaboratives embarking on a project. Inserting the criteria (related to intended outcomes) and developing guiding questions for discussion can support early decision making processes.