The Youth Community Hub - Kings County uses a case management process that is a “collaborative, client-driven process for the provision of quality health and support services through the effective and efficient use of resources. Case management supports the client's achievement of safe, realistic, and reasonable goals within a complex health, social, and fiscal environment”. The client-centered case management approach ensures that the person who has experienced a variety of barriers has a major say in identifying goals and service needs, and that there is shared accountability. The goal of case management is to empower people, draw on their own strengths and capabilities, and promote an improved quality of life by facilitating timely access to the necessary supports and thus reduce the level of risk. Team members will not refer to the case as complex but realize that the system of supports is complex. The case management team needs to simplify the process, reduce the number of doors, and help the client to experience a caring team that rebuilds trust and inspires hope.

In reviewing case management as a key component of strategies to reduce risks for the youth and/or end homelessness, [Milaney](https://www.homelesshub.ca/resource/dimensions-promising-practice-case-managed-supports-ending-homelessness) identified it as a strengths-based team approach with six [key dimensions](https://www.homelesshub.ca/resource/six-dimensions-promising-practice-case-managed-supports-end-homelessness):

1. Collaboration and cooperation — a true team approach, involving several people with different backgrounds, skills and areas of expertise;
2. Right matching of services — person-centered and based on the complexity of need;
3. Contextual case management — Interventions must appropriately take account of age, ability, culture, gender, and sexual orientation. In addition, an understanding of broader structural factors and personal history (of violence, sexual abuse or assault, for instance) must underline strategies and mode of engagement;
4. The right kind of engagement — Building a strong relationship based on respectful encounters, openness, listening skills, non-judgmental attitudes, and advocacy;
5. Coordinated and well-managed system— Integrating the intervention into the broader system of care;
6. Evaluation for success — The ongoing and consistent assessment of case managed supports.

The Youth Community Hub **Core Team** is is made up of one rep from each the following:

* Mental Health & Addictions – Tara Newcombe
* Child Welfare (DCS)- Tara Jodrey
* ESIA (DCS)- Dolores Gaudet
* Justice/ Probation- Rita Nadasdi
* Annapolis Valley Centre for Education- Meagan Cairns
* Portal Youth Outreach- Russ Sanche

**The extended** Youth Community Hub includes:

* Schools Plus
* Kentville Police
* Integrated Youth Services- Justice
* CMHA Project Hope
* Local recreation staff
* EDGE on Employment
* The Red Door
* NS Works- Community Inc.
* Family Resource Centre- Parenting Journey
* Host Home Program (longer term housing)

**Key change needed in practise across government services/programs**

Most government workers that work with youth do not seem to be mandated to participate in a collaborative case management process and be given the time to do so. The simple change would be that job descriptions could read, “where there are collaborative case management teams that are recognized and have the capacity in the community to effectively meet the need of youth at risk, the incumbent shall participate in regular meetings and develop inter-agency plans to provide the best service for youth possible.”

**The Process**

1. **Interview-** Any frontline worker from a member agency carries out an intake assessing need/ level of risk. Referral to the CCM team is determined. Permission is sought from the youth and/or family to share their information.
2. **CCM Team Meets**- Case summary presented, obstacles identified, lead worker identified, team named, and action plan begun. Core members present and extended team (based upon need) is added.
3. **Plan Executed**- Youth meets with CCM Core team. The youth has a major say in identifying goals and service needs, and that there is shared accountability. Team members take action with and on behalf of youth.
4. **Ongoing Evaluation-** Ongoing and consistent assessment of case managed supports. The plan is adjusted, and outcomes measured at 6-month intervals.

**Youth Community Hub Outcomes**

**Main goal -** that the system of support and services for youth and families would be barrier free, straightforward to navigate, and meet needs seeing youth experience a healthy transition to adulthood.

**Coordinated Services & Supports Outcomes**

* An inclusive, equitable, seamless, single-point of entry & input for all youth.
* Identify and address gaps in the system.
* A well‐developed Collaborative Case Management process to ensure the right people are involved at the right time to get things done.
* Safe spaces and places exist for all children, youth, and their families… shelter, food, and support.
* Everyone working together effectively. (no silos, no territorialism, sharing information, connecting easily, reducing duplication)
* A meaningful movement towards prevention and early intervention.

**Youth Outcomes**

* The process would be Empowered, Engaged, and Proactive.
* Sustained in stable housing (a loving, supportive and safe home).
* Crisis response to basic needs.
* Sustainable access to basic needs- shelter, food, clothes.
* Connection to at least one caring adult.
* Connection to community supports.
* Barrier free access to support across services/supports.
* Decreased risk of exploitation.
* Decrease of Mental Health related stress.
* Increase in Health & Well-Being.
* Increase in School Engagement/ decrease in School Dropout.
* Employment training, attachment to employment and/or access to post-secondary education.

**Evaluation of the Process**

Frontline workers who participate on the Collaborative Case Management Team report that they are finding that:

* Support is inclusive, equitable, seamless, and moving towards a single point of entry for youth.
* They can Identify and address gaps in the system on a case by case basis.
* The right people are involved at the right time to get things done.
* Everyone is working together more effectively. (no silos, no territorialism, sharing information, connecting easily, reducing duplication)
* A beginning point to move towards prevention and early intervention.
* Attendance is very high and points to the motivation of the individual workers.

**Youth Outcomes**

The progress for 15 youth was tracked who consistently accessed support through the Youth Community Hub - Kings County over a 10-month period. The percentage given represents the number of youth that met the stated outcomes. Clearly accessing the collaborative case management process produces better outcomes for youth that are considered at risk. *Not measured here is the increase in engagement in employment training and post secondary education however there are more youth in King’s County attending college or university from this demographic then in the past 10 years.*