

Development of an evaluation tool for the Peterborough Youth Services (PYS) Crisis Response Service program

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Abstract

Peterborough Youth Services (PYS) is a mental health and youth justice organization dedicated to providing many forms of support for youth and families in need. The PYS Crisis Response Service (CRS) program assists youth experiencing urgent mental health crises that place them and/or others at severe risks of harm. To ensure high-quality service and desired outcomes for the program, PYS seeks to develop and implement a comprehensive evaluation tool. This research sought to determine the most appropriate structure, form, and content of an evaluation instrument for the CRS program, taking into account program accessibility, inclusivity, effectiveness, and participant experience. The preliminary literature review entailed an analysis of existing PYS evaluation instruments alongside evaluation tools employed by similar mental health organizations. The findings facilitated semi-structured interviews with key PYS informants to determine the relevance of specific information for inclusion in the questionnaire. Following a pre-test with the PYS Youth Advisory Committee, a concise and simple Likert scale-formatted questionnaire with open-ended response opportunities was created. The questionnaire was also converted into semi-structured interview format. This questionnaire will allow PYS to more adequately implement and enhance the CRS program to facilitate optimal outcomes for youth and their families.

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Executive Summary

The Crisis Response Service (CRS) program at Peterborough Youth Services (PYS) serves to assist children and youth experiencing urgent mental health crises that place them and/or others at risk of serious harm. Amid comprehensive reviews of many PYS programs, the organization now seeks to develop and implement program and outcome evaluation tools to ensure and uphold quality services and favourable outcomes. This report examines the most appropriate structure, form, and content of evaluation tools for the CRS program, taking into account program accessibility, inclusivity, effectiveness, and participant experience. Firstly, a literature review was conducted to examine elements of existing evaluation tools from PYS and other mental health organizations. These findings were then incorporated into a semi-structured interview conducted with key informants in PYS to determine the pertinence of specific elements for inclusion in the questionnaire. Subsequently, several drafts of the questionnaire were developed drawing on pre-tests with the PYS Youth Advisory Committee. These drafts were created to ultimately form a coherent and concise tool in which respondents indicate their

agreement with various statements relating to the four constructs. Participants are also provided with opportunities to open-endedly explain ratings and provide feedback for the program. The final questionnaire is a clear, concise, and comprehensive tool that encompasses the four aforementioned themes. The tool was also converted into semi-structured interview format. Ultimately, this instrument will facilitate quality maintenance and improvement of the CRS program to optimally support the needs of children, youth, and their families.

Introduction

Peterborough Youth Services (PYS) is a mental health and youth justice organization providing numerous programs, services, and processes for youth and their families. Ultimately, PYS seeks to enhance the safety and well-being of clients and the larger communities at hand. PYS is presently collaborating with its partner agency Kinark Child and Family Services to develop improved service pathways, service mapping, and a coordinated access and service procedure that decreases first- and third-party confusion. At the same time, the agencies are working to increase their ability to identify clients' needs and ensure clients get access to appropriate services without obstructions.

This project sought to support subsequent evaluations of the Crisis Response Service program, which serves children and youth experiencing imminent mental health crises placing them and/or others at risks of critical harm. Specifically, this endeavour sought to determine and implement the most appropriate structure, form, and content of an evaluation tool for the program. This allows PYS to enhance the quality of the CRS program to better address and service children and youth with urgent mental health crises that place clients and/or others at serious risk of harm.

Research Questions And Methodology

This project sought to answer the following core research question: “What is the most appropriate structure, form, and content of an evaluation instrument for the Crisis Response Service program of Peterborough Youth Services?” Two subsidiary questions follow: “What is the most appropriate form and content of evaluation modules on accessibility, inclusivity, and effectiveness of the program?” and “What is the most appropriate form and content of a participant experience study for the program?”

The first methodological component consisted of a literature review of tools from PYS and existing evaluation instruments used by similar organizations, all of which were found online. The findings of this review were synthesized in the context of accessibility, inclusivity, effectiveness, and participant experience.

Next, the findings of the literature review were incorporated into semi-structured interview questions directed to key informants in PYS. These questions inquired about what was relevant to include in the evaluation instruments in the context of the literature review findings and the key outcomes of the program. The interviews were conducted online via Zoom and were recorded and transcribed afterwards. A thematic analysis of the responses was conducted with respect to the subsidiary questions, facilitating multiple drafts of the evaluation questionnaire. Afterwards, pre-tests were conducted with the PYS Youth Advisory Committee alongside stakeholders Anne Leavens and Dakota Hamilton; these were conducted to evaluate the tool’s clarity, relevance, comprehensiveness, and length. Finally, the questionnaire was converted into a semi-structured interview format.

Literature Review

In this section, I will critically evaluate the existing literature on clinical counseling programs, analyzing the variables of effectiveness, accessibility, and inclusivity, while examining the structure and content of these services' participant experience studies. Amid these findings, I will present recommendations to optimally evaluate the Crisis Response Service (CRS) offered by Peterborough Youth Services (PYS), while proposing avenues for further research into this program's evaluation.

It should be noted, however, that many of the findings in this literature review were ultimately not incorporated into the final version of the evaluation questionnaire. Nevertheless, the original literature review appears in its entirety below.

The Effectiveness Of Clinical Counseling Programs

Participants' attendance at clinical counseling programs is influenced by various factors that predict one's engagement and commitment to these services. First, variables of individual clients such as age, gender, race, income, and the psychological disorder at hand are all potential factors in counseling attendance, with clients' gender, ethnicity, and highest level of education being statistically significant predictors (Cade & Fidai, 2021). As such, PYS should consider these three client factors when designing, implementing, and evaluating the CRS program. To do so, one must meticulously analyze the various intricate means through which these variables manifest in clients; by knowing how these variables exert their influence, one can effectively target these factors to mitigate said impacts, thereby helping to increase the likelihood of clients' attendance and minimizing the probability of attrition.

At the same time, one must not disregard the significant role of therapist factors in clients' treatment outcomes (Flemotomos et al., 2021). Particularly, the alliance between the therapist and the client is integral in predicting positive outcomes for youth-catered interventions (Ryan et al., 2021). This relationship can be impacted by factors such as whether the client's problems are internalizing or externalizing, alongside clinician factors such as in-session behaviours (Ryan et al., 2021). Furthermore, youth demographics have indicated the need for clinicians to exhibit care, trustworthiness, openness in listening to clients, and respect (Ryan et al., 2021). Accordingly, CRS evaluation modules should incorporate these clinician factors to closely observe and analyze interpersonal interactions between therapists and clients in an accurate and precise manner. Yet, one must determine the exact manner through which these factors should be incorporated into CRS evaluation modules. Ideally, one should consult with PYS administrators, and potentially the clients themselves to ascertain how these factors would manifest in client-therapist interactions. Such meticulous monitoring would facilitate the provision of accurate, performance-based feedback, which can contribute to more effective training, quality improvement, and skill development endeavours (Flemotomos et al., 2021) for clinicians and clinicians-in-training.

The Centre for Addiction and Mental Health (CAMH) (2018) delineated numerous guidelines for effective practice. These recommendations include the support of professionals and non-professionals in establishing relationships of care and trust with populations, while ensuring the services and information provided are culturally appropriate, holistic, and equitable (Centre for Addiction and Mental Health, 2018). As such, it is integral to determine how these variables can be appropriately operationalized and incorporated into the evaluation modules for the CRS. Furthermore, the guidelines focusing on self-efficacy, skill building, empowerment,

and resilience (Centre for Addiction and Mental Health, 2018) can aid in evaluating the Brief Service intervention, directly addressing problem-solving skill development, emotional regulation skill development, and coping strategies. These guidelines can also facilitate evaluating the outcome of the client's coping abilities in immediate and urgent crisis situations while improving awareness and understanding of the presenting issue. As such, one can inquire about how the CRS fosters participants' self-efficacy, skill-building, empowerment, and resilience, and the degree to which clients experience positive outcomes due to these considerations.

Evaluating Program Accessibility

Levesque et al. (2013) conceptualized a multidimensional framework for evaluating the accessibility of healthcare services. The concept of "approachability" relates to a prospective client (with health needs) identifying that some types of services are in place, can be reached, and can influence one's health (Levesque et al., 2013). This dimension can be influenced by variables such as transparency and information regarding available services and treatments (Levesque et al., 2013). The concept of "acceptability" pertains to the importance of ensuring that the needs of various cultural, socioeconomically disadvantaged, and vulnerable populations are met when participating in the services (Levesque et al., 2013). The dimension of "availability" entails the physical existence of services with adequate capacities to deliver services (Levesque et al., 2013). Numerous factors influence accessibility, including features of facilities (density, building accessibility, etc.), urban contexts (transportation systems, urban spread, etc.), aspects of providers (the professional's presence and qualifications, etc.), and means of providing services (virtual consultation possibilities, etc.) (Levesque et al., 2013). The "ability" to reach services pertains to personal mobility, transportation availability, and one's

knowledge about the services at hand; these factors would influence prospective clients' abilities to physically reach services (Levesque et al., 2013). The "affordability" dimension pertains to one's economic ability to expend time and resources to access appropriate resources (Levesque et al., 2013). Finally, the aspect of "appropriateness" refers to the fit between the services at hand and the client's needs, the service's timeliness, the care amount spent assessing the problems at hand and determining the right treatment, alongside the quality of service (Levesque et al., 2013).

Amid this framework, PYS should incorporate these dimensions in assessing the accessibility of the CRS in modules of evaluation. One should determine the degree to which the CRS addresses and incorporates the concepts of approachability, acceptability, availability, ability, affordability, and appropriateness, and how the program can thoroughly address and incorporate these six factors to enhance its accessibility. Finally, one should determine how these dimensions can be adequately incorporated into an evaluation module assessing the program's accessibility.

In light of Levesque et al.'s (2013) framework, a study by Kourgiantakis et al. (2023) explored the perspectives of youth, caregivers, and service providers (via thematic analyses of semi-structured interviews) in examining the accessibility of addiction and mental health services in Ontario. Six themes were identified that delineated structural barriers to service accessibility: difficulty in determining where to look for services, lengthy waitlists, affordability, perceptions of providers' inadequate attention to clients' concerns, services' inclusivity and welcomeness, and the perceived ineffectiveness of healthcare laws (Kourgiantakis et al., 2023). As such, it is recommended that PYS determines the degree to which these variables significantly impede the accessibility of the CRS program, At the same time, one should

ascertain how these six dimensions can be incorporated and assessed with respect to an evaluation module on the program's accessibility, through the perspectives of clients, families, and clinicians. As a result, the CRS program can more effectively accomplish its goals of providing immediate and early-as-possible interventions amid PYS's timeframe of operations (Monday to Friday, from 9:00 am to 5:00 pm).

Evaluating Program Inclusivity

The American Association of Medical Colleges (AAMC) advocates that inclusion is essential for diversity and that an inclusive organizational culture can be fostered through education, professional development, practice, and policy; these organizational changes would aid in the pursuit of a climate that promotes everyone's belonging, respect, and value (Moreno & Chhatwal, 2020). This is particularly important amid the mental health disparities prevalent within various social groups (based on race, ethnicity, gender, sexual orientation, etc.) (Moreno & Chhatwal, 2020). Thus, it is integral to examine and evaluate the organizational climate of the CRS program, assessing the degree to which clients' belonging, respect, and values are promoted and upheld. To do this, one must determine how an evaluation tool can appropriately and adequately assess these outcomes.

Other organizational aspects that can instill and foster inclusive services include policies, procedures, and accountability (Kurzawa et al., 2022). This can be partly facilitated through the creation and implementation of culturally responsive spaces for clientele from various social groups (e.g. sweat lodges for Indigenous clients) (Kurzawa et al., 2022). Additionally, organizations can express commitments to equity (e.g. anti-oppression or antiracism statements) while implementing and modifying policies to pertinently address these pledges (Kurzawa et al.,

2022). Therefore, it is worth inquiring whether PYS has committed to instilling and upholding principles of equity in the CRS program, and the means through which the organization is accomplishing these goals. Moreover, one can assess if the present model of care employed by the CRS is culturally responsive and innovative (Kurzawa et al., 2022), as illustrated by feedback from clients. Furthermore, one can assess the degree to which the CRS program is based on a Eurocentric, colonial, patriarchal, and heteronormative model of care (Kurzawa et al., 2022), which could present a systemic barrier to the provision of culturally sensitive and appropriate care for diverse demographics.

The seeking and accessing of mental health care among disadvantaged social groups are in part affected not only by providers' overt prejudice and discrimination but implicit biases (e.g. stereotypes, microaggressions) as well (Moreno & Chhatwal, 2020; Knowledge Institute on Child and Youth Mental Health and Addictions, 2023). Considering the reflexive and unconscious cognitive processes that may underlie such biases (Moreno & Chhatwal, 2020), it is particularly integral to evaluate these cognitive inclinations and behaviours in CRS providers, who must immediately provide suitable interventions in a time-sensitive period. Accordingly, one should assess the degree to which CRS providers covertly and overtly exhibit such biases and discriminatory actions towards various minority groups, while determining how an evaluation module should adequately incorporate and assess these variables.

Subsequently, PYS can provide training for staff to enhance their understanding of various facets of equity and develop skills to adequately address the needs of disadvantaged groups (Kurzawa et al., 2022). In a study conducted by Kurzawa et al. (2022) at least 50% of surveyed agencies provided staff training initiatives on antiracism, anti-oppression, and cultural responsiveness, with 49% of organizations conducting training on implicit biases. One can

accordingly inquire about the types and effectiveness of trainings on equity and inclusivity that PYS currently implements for CRS staff, and whether improved and/or additional training initiatives are warranted amid disadvantaged clients' feedback on the program's inclusivity and equity.

Participant Experience Studies

For a survey provided to and completed by patients receiving mental health and addiction services at Western Health, participants were allowed to complete the evaluation electronically or by paper (Parcon, n.d.). If participants chose to complete the survey electronically, they were given instructions on how to do so (Parcon, n.d.). Importantly, privacy, confidentiality, and anonymity were maintained with no names being provided; to illustrate, completed paper-based surveys were placed in sealed envelopes and participants' data were stored on a password-protected computer (Parcon, n.d.). Ideally, the participants should have been proactively informed about the study's upholding of privacy, confidentiality, and anonymity. Moreover, participants should be able to complete the evaluations voluntarily without any coercion (implicit or overt) whatsoever (Parcon, n.d.). With these implementation procedures in mind, it is worth inquiring about the degree to which present participant experience surveys allow clients to complete evaluations through various means, and how participants' privacy, confidentiality, and anonymity are maintained throughout the survey process.

In terms of demographics, respondents can indicate their age, sexual orientation, reason(s) for attending services (e.g. "medical certificate", "child welfare authority", "condition/pressure from family", "other"), program field(s) attended, and how far along participants are in their treatment progress (e.g. "just getting started", "completed or almost

completed”, “left early”, “other”) (Parcon, n.d.). Moreover, participants can be asked if they received assistance in completing the survey (e.g. help in reading questions and/or writing answers), which can be due to difficulties such as visual impairments and literacy problems (Parcon, n.d.). Accordingly, one should evaluate the extent to which present CRS participant experience questionnaires are accessible and can be readily completed by various populations, such as individuals with disabilities. Accommodations can include (among other implementations) texts written in dyslexia-friendly fonts, surveys written in multiple languages, descriptive audio and Braille surveys (for visually impaired respondents), and the use of both images and texts.

In Fernandes et al.’s (2020) systematic review and analysis of many measures of patient-reported experiences, the most prevalent domain determining the quality of mental health care was “interpersonal relationships”, followed by “respect and dignity” (e.g. staff treating clients with respect, staff’s sensitivity to cultural needs) (Parcon, n.d.), “access and care coordination” (e.g. providing responses to crises or urgent needs when required, agreement between staff and clients on treatment services and support plans) (Parcon, n.d.), “drug therapy”, “information” (e.g. having an adequate and thorough understanding of one’s treatment and support plan) (Parcon, n.d.), “psychological care” (e.g. referral and access to other services when necessary) (Parcon, n.d.), and “care environment” (e.g. clients’ safety in facility; feeling that the facility is welcoming, non-discriminatory, and safe) (Parcon, n.d.). Additionally, clients can offer feedback on the access and entry to services (e.g. reasonableness of wait times, convenience of location and times of service), clients’ participation and rights (e.g. assurance of personal information’s confidentiality, clients’ involvement in decisions regarding treatment programs and supports), and the discharge from and completion of the program (e.g. staff’s assistance in identifying

where to obtain support following the program's completion, post-treatment plans) (Parcon, 2020). These criteria are integral for PYS to achieve their various principles, goals, and outcomes (e.g. ability to destabilize and de-escalate immediate risks, decrease symptoms' severities, ensuring continual support of clients' needs). In light of these criteria and the program's objectives, one should determine the degree to which these domains are incorporated into the present participant experience questionnaire of the CRS program, and how PYS can effectively incorporate these criteria to accomplish the program's objectives.

Finally, participants should have the opportunity to provide comments about individual experiences relating to each questionnaire dimension (Parcon, 2020), in addition to being supplied with broad open-ended questions that could elicit feedback on facets such as clients' general experiences, ways in which the program was of benefit to the client, and ways in which the program can be improved (Appiah et al., 2021). As such, one should ascertain the degree to which the present participant experience questionnaires for the CRS incorporate broad and open-ended questions to address the program's objectives.

Findings

The evaluation instrument is structured in a Likert scale format in which respondents indicate their level of agreement on various statements related to accessibility, inclusivity, effectiveness, and participant experience. Participants are also provided with opportunities to explain their ratings for each statement, express their concerns, suggest areas for improvement, and provide additional comments about their experiences, all in an open-ended format.

The first draft was reworked to ensure that the statements were written at a Grade 4 reading level, redundancy was eliminated (particularly removing repeated definitions of "identity

and lived experiences”), and participants were provided with additional options on the Likert scales (i.e. 6 options instead of 5). Yet, the second draft was deemed too lengthy and time-consuming by the PYS staff, who intended for the survey to be completed within a limited amount of time. As such, several items had to be eliminated, with one statement having to be included per goal in each module; items were removed if they were redundant or irrelevant to the program’s outcomes. Furthermore, each item needed to be one sentence in length. The Likert scale was shortened so that participants were provided with three levels of agreement to choose from (i.e. “disagree”, “neutral”, and “agree”), and each statement was simplified even further. Finally, only one open-ended question inquiring about feedback and improvements on the program was included at the end of the questionnaire, instead of multiple forms of this question presented after each module.

During the pre-test, it was recommended that the formatting be consistent, in which the 4-option Likert scale (“Not at all”, “Very little”, “Somewhat”, “Very much”) is implemented throughout the tool. Additionally, the open-ended sections were recommended to be retained at the end of each section [“Please share more details (if needed)”] and the survey altogether [“Are there any other comments you would like to share regarding your experience in the Crisis Response Service Program (including suggestions for improvement)?”]. Minor revisions were made for the inclusivity module to ensure the items are written at a Grade 4 reading level, without any academic language. With respect to the effectiveness module, the language of the third and fourth items was modified to a form that is more coherent and less stigmatizing (i.e. eliminating the word “problem”). The questionnaire was subsequently converted into a semi-structured interview format.

The final version of the questionnaire is structured in a four-point Likert-scale format, in which respondents, consisting of clients and/or their caregivers, indicate their levels of agreement with statements encompassing the four constructs. Participants can choose one of four options of agreement for each statement: “1: Not at all”, “2: Very little”, “3: Somewhat”, or “4: Very much”. The four-point scale discourages respondents from selecting a “neutral” option. There are four sections of the questionnaire, each addressing a separate theme. Participants are also provided with opportunities to open-endedly share more details about their ratings at the end of each section. Respondents can also provide additional comments about their experiences alongside suggestions for improvement at the end of the questionnaire. The questionnaire is written at a Grade 3 level to facilitate easy understanding by respondents. Given the mere three-page length of the tool, one can complete the questionnaire in a limited time span, given the many commitments and busy schedules of respondents.

The content of the questionnaire adequately encompasses the four modules as per the outcomes of the program and the input from Sheridan and Kroes. For example, the first section addresses aspects of accessibility such as technology costs for virtual services and time spent on the waitlist. The second section addresses aspects of participant experience such as feeling valued, heard, and secure. The third section addresses “Inclusivity” by asking about, for example, feeling respected and understood amid one’s identity and lived experiences. Finally, the fourth section, concerning “Effectiveness”, addresses whether participants could cope in emergencies and tough situations, alongside whether clients’ risks were diminished, among other aspects.

The semi-structured interview format of the questionnaire poses the same questions featured in the survey, with probes (e.g. “How about how much time you spent on the waitlist?”)

provided for respondents to elaborate on their responses. Like in the questionnaire, participants can provide additional comments and feedback at the end of the interview.

Recommendations

Amid the findings, PYS should implement the questionnaire and its semi-structured interview format to clients and their caregivers, utilizing responses to facilitate quality maintenance and improvement for the CRS program. Possibly, clients can be consulted in a focus group after the survey's completion to share their insights on how the program can be improved. In light of potential changes in the program's goals and outcomes to optimally address clients' needs, the tool should be modified accordingly.

PYS can also adapt the questionnaire in various formats to address the needs of their diverse clientele. For example, the survey can be implemented online and translated into various languages. Visually impaired clients can be provided with large-print or Braille versions of the tool.

Certain psychometric properties of the tool may need to be assessed or refined. To illustrate, one may need to assess and modify the instrument's validity, reliability, and factor structure, among other properties. Additionally, the lack of reverse-coded items in the questionnaire would increase the likelihood of acquiescence bias in respondents who could haphazardly answer without carefully examining the statements and responses. PYS should thereby rectify this weakness.

Ultimately, this tool should be implemented by PYS to evaluate the accessibility, inclusivity, participant experience, and effectiveness of the CRS program. This feedback should then facilitate targeted interventions to maintain and enhance the quality of service to optimally

support and address the needs of at-risk children and youth with urgent mental health crises, alongside their families and the larger communities at hand. This will ensure that these groups receive the best support they need to heal, prosper, and build a future of resilience.

Conclusion

In conclusion, an evaluation instrument for the Crisis Response Service program at Peterborough Youth Services should comprehensively reflect the goals and outcomes of the program, alongside the needs of key stakeholders. The instrument reflects the four key constructs of program accessibility, participant experience, inclusivity, and effectiveness.

The evaluation questionnaire should address numerous aspects of the program. These include, for example, the accessibility and comprehensiveness of the website, clients' feelings of being heard and valued, clients' feelings of being respected and accepted in light of their identity and lived experiences, and whether the risks and severities of clients' problems were decreased.

The survey should be concise, facilitating completion within a limited amount of time to account for clients' and families' busy schedules and additional commitments. The tool should be written at a Grade 3 reading level for straightforward comprehension for clients. Furthermore, the language employed should not stigmatize respondents. A four-point Likert scale should be implemented to deter respondents from selecting "neutral" options. Open-ended items should be included at the end of each section and at the end of the survey altogether to allow participants to explain their ratings, suggest improvements, and provide additional comments about clients' experiences.

If desired, a semi-structured interview format of the questionnaire can be used, employing the same questions in the survey alongside probes to allow interviewees to elaborate

on their responses. Like in the questionnaire, respondents should be given opportunities to provide feedback and additional comments.

In the long term, PYS should utilize this evaluation instrument to maintain and improve the quality of the CRS program, implementing targeted interventions based on response analyses. The tool can be adapted into various formats according to the diverse needs of clients. Furthermore, the tool should be refined as needed amid changes in the program's goals, outcomes, and the needs of clients and PYS. It is also recommended that the tool's psychometric properties are further assessed to preserve and improve the instrument's integrity. All these efforts in refining the questionnaire will ensure that the program adequately addresses and satisfies the needs of at-risk children, youth, and their families, alongside PYS as a whole.

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Appendices

Appendix A: Semi-Structured Interview with PYS (Dec. 11, 2024)

ACCESSIBILITY MODULE

Laura: Perhaps we can begin with the Accessibility Module. There are differences between the programs but let's start with the questions in common. We would like to propose four aspects of accessibility to include namely: i) Accessible Language; ii) Affordability/Costs; iii) Location/Transportation; iv) Availability/Scheduling.

1. (Laura) In terms of accessible language, we had in mind the usage of clear, non-technical forms of oral and written communication with PYS. We intend to ask about the language used in the project-specific activities undertaken by PYS. Would you consider this relevant to include in the questionnaire or not? [If not, probe] Are there any other aspects of accessible language which are relevant to ask about or not?

2. (Karen) In terms of affordability/costs, we understand from our previous meeting that costs associated with time off work, child-care or transportation are relevant to include in the evaluation questionnaire. Are there any other aspects of costs/affordability which you consider relevant to ask about, or not?

3. (Leon) In terms of location/transportation, we understand from our previous meeting that physical accessibility for non-Peterborough-based residents and for those relying on public transportation are relevant issues to include in the evaluation questionnaire. Are there any other transportation-related issues to include or not?

4. (Laura) In terms of availability/scheduling, we intended to ask about the scheduling of services offered by PYS (for example Monday-Friday between 9-5 for some services) and wait times. Would you consider this relevant to include in the questionnaire or not? [If not, probe]. Are there any other relevant aspects of scheduling/availability to consider in the evaluation questionnaire or not?

(Karen) Re. Awareness. For the Parent and Caregiver Support Program and for those participants who were NOT referred to the Crisis Response Program by a third party, we also intended to include a question on awareness of the program. For example, we intended to ask about the PYS website. Would you consider this relevant to include in the questionnaire or not? [If not, probe]. Are there other ways that people become aware of PYS programming to include in the evaluation questionnaire or not?

(Leon) Closing Question: To recap, we proposed questions on: i) Accessible Language; ii) Affordability/Costs; iii) Location/Transportation; iv) Availability/Scheduling and v) Awareness (for the Crisis Response & Parent/Caregiver Support projects). Are there any other Accessibility-related issues to include in the evaluation questionnaire or not?

PARTICIPANT EXPERIENCE MODULE

(Leon): Now, let's move to the Participant Experience Module. Here we are following a set of standard questions which often appear on participant experience surveys. We would like to propose three aspects of the participant experience to include related to: i) Staff Engagement/Interaction; ii) Satisfaction and iii) Feedback

1. (Laura) In terms of staff engagement/interaction, we intended to ask questions about feelings of being: i) respected; ii) heard iii) supported and iv) safe. Would you consider these considerations relevant to include in the questionnaire or not? [If not, probe]. Are there any other relevant aspects of staff engagement/interaction to include in the evaluation questionnaire or not?

2. (Karen) In terms of satisfaction, we intended to ask for client satisfaction with respect to the specific services offered by PYS along with an overall satisfaction question. Would you consider it relevant to include these satisfaction questions in the questionnaire or not? [If not probe]. Are there any other aspects of participants' experience to which the satisfaction questions should be applied or not?

3. (Leon) In terms of feedback, we intended to ask participants if they had any suggestions for improving their experience with specific services offered along with their overall experience. Would you consider it relevant to include these feedback questions in the questionnaire or not? Are there any other relevant areas of feedback to include in the evaluation questionnaire or not?

(Laura) Closing Question: To recap, we proposed questions on: i) Staff Engagement/Interaction; ii) Satisfaction and iii) Feedback. Are there any other Participant Experience-related issues to include in the evaluation questionnaire or not?

INCLUSIVITY MODULE

(Karen) Based on our earlier discussion, we understand inclusivity to apply primarily to issues facing groups with fall under EDI categories. Accordingly, we would like to propose applying this module only to participants who self-identify as belonging to a designated EDI group. First off, we wanted to know if this adequately captures what you have in mind or not.

(Karen) Ok. Perhaps we can give you an idea of some of the questions if they are posed to EDI-related groups. We propose three aspects of inclusivity to include related to: i) Staff

Engagement/ Interaction; ii) Staff Representation & Cultural Competency; iii) Language & Practice

1. (Leon) Re. Staff Engagement/Interaction, we intended to ask the same questions as in the participant experience module concerning feelings of being: i) respected; ii) heard iii) supported and iv) safe. The only difference is that we would append the clause ‘as a member of a distinct cultural group’ to the end of the question. Are you comfortable addressing inclusivity in this way or not? Are there any other relevant aspects of staff engagement/interaction to include in the evaluation questionnaire or not?

2. (Laura) Re. Staff Representation and Cultural Competency, we were interested in including questions concerning i) staff knowledge/understanding of participants’ cultural backgrounds and ii) effect of staffing composition on participant’s experience. Would you consider it relevant to include questions such as these in the evaluation questionnaire or not? [If not, probe]. Are there any other relevant aspects of staff representation and cultural competence to include in the evaluation questionnaire or not?

3. (Karen) Re. Language, Practice & Resources, we were interested in including questions addressing the effect on participant experience of i) language ii) practices and iii) resource materials used. Questions would likely inquire about ‘level of comfort of x ‘based on your cultural background’. Would you consider it relevant to include questions such as these in the evaluation questionnaire or not? Are there any other relevant aspects of language, practices and resources to include in the evaluation questionnaire or not?

(Leon) Closing Question: To recap, we proposed questions on: i) Staff Engagement/ Interaction; ii) Staff Representation & Cultural Competency; iii) Language & Practice. Are there any other Inclusivity-related issues to include in the evaluation questionnaire or not?

EFFECTIVENESS

“I would like to ask some questions about the effectiveness module in the CRS evaluation tool.”

1) We would like to structure the effectiveness module around the outcomes that you have listed in the program description document. To recall, the 6 outcomes are: i) stabilizing/de-escalating the situation; ii) decrease in severity of presenting symptoms; [List the rest]

- My first question is: Are there any additional outcomes you feel we should include to assess effectiveness or not?
- *Matt answers*
- Ok, now I would like to ask specific questions about a number of the outcomes

2) For the outcome “help the child and family help to cope in crisis situations”, you mentioned “increasing awareness and understanding”. Are there any other aspects of coping that are relevant to include in the CRS evaluation questionnaire?

3) Let's talk about the outcome “transition clients to appropriate treatments”: Can you provide examples of specific treatments that may be relevant to mention in the questionnaire?

4) Let's talk about the outcome “linking clients to other services”, such as addiction services and hospital services. Are there any other services that may be relevant to mention in the evaluation questionnaire?

5) I noted under process interventions, you mentioned “family preservation interventions” or “safety planning”. Are there any specific outcomes related to these interventions which would be relevant to include in the evaluation questionnaire?

Could you provide some examples of treatments that may be appropriate to mention in the questionnaire?

Appendix B: Questionnaire Draft #1

Accessibility

To what extent did the following factors affect or limit your access to the Crisis Response Service program offered by Peterborough Youth Services (PYS)?

a. Scheduling time off work to meet service hours

1- not at all 2-very little 3-somewhat 4-quite a bit 5-very much

Please explain in the space below if relevant.

b. Arranging childcare for children or youth not involved in treatment

1- not at all 2-very little 3-somewhat 4-quite a bit 5-very much

Please explain in the space below if relevant.

c. Cost of technology for virtual services

1- not at all 2-very little 3-somewhat 4-quite a bit 5-very much

Please explain in the space below if relevant.

d. Cost of transportation (public transit, gas, etc.)

1- not at all 2-very little 3-somewhat 4-quite a bit 5-very much

Please explain in the space below if relevant.

e. Offered hours of available services [Monday to Friday 9-5pm, Tuesdays and Wednesdays 9-8pm]

1- not at all 2-very little 3-somewhat 4-quite a bit 5-very much

Please explain in the space below if relevant.

f. The duration of the waitlist

1- not at all 2-very little 3-somewhat 4-quite a bit 5-very much

Please explain in the space below if relevant.

g. Your residential location (e.g. living outside the city limits, such as in counties that do not have access to public transportation)

1- not at all 2-very little 3-somewhat 4-quite a bit 5-very much

Please explain in the space below if relevant.

The counsellor's communication towards me and/or the language or terms used in program materials affected or limited my access to the Crisis Response Service Program offered by Peterborough Youth Services (PYS).

1-Strongly Disagree 2-Disagree 3-Neither Disagree or Agree 4- Agree 5-Strongly Agree

Please explain in the space below if relevant.

How did you become aware of the Crisis Response Program?

1- PYS website

2- Third-party referral; Please specify in the space provided. _____

3- Other; Please specify in the space provided. _____

Feedback

Do you have any suggestions or concerns with how the PYS Crisis Response Service Program was carried out?

Are there any other comments you would like to share regarding your experience in the PYS Crisis Response Service Program?

Participant Experience Module

Staff Engagement/Interaction

1. Overall, I felt respected in the PYS Crisis Response Service Program. (e.g. your counselor didn't make you uncomfortable, wasn't disrespectful, understood you, did not overstep your boundaries, worked with you)

1-Strongly Disagree 2-Disagree 3-Neither Disagree or Agree 4- Agree 5-Strongly Agree

Please explain in the space below if relevant.

-
2. Overall, I felt heard in the PYS Crisis Response Service program? (e.g. your counselor let you speak, they understood what you shared)

1-Strongly Disagree 2-Disagree 3-Neither Disagree or Agree 4- Agree 5-Strongly Agree

Please explain in the space below if relevant.

- 3. Overall, I felt supported in the PYS Crisis Response Service Program (e.g. your counselor made you feel valued, you could share what you wanted, they were paying attention, they shared useful information)

1-Strongly Disagree 2-Disagree 3-Neither Disagree or Agree 4- Agree 5-Strongly Agree

Please explain in the space below if relevant.

- 4. Overall, I felt safe in the PYS Crisis Response Service Program (e.g. I felt physically safe from harm by my counselor or when accessing my sessions, I felt emotionally safe to share my thoughts and opinions in my session)

1-Strongly Disagree 2-Disagree 3-Neither Disagree or Agree 4- Agree 5-Strongly Agree

Please explain in the space below if relevant.

Feedback

Do you have any suggestions or concerns with how the PYS Crisis Response Service Program was carried out?

Is there any other comment you would like to share regarding your experience in the PYS Crisis Response Service Program?

Inclusivity

Staff Engagement/Interaction

1. I felt as if my identity and/or lived experiences (e.g. aspects of who I am including race, ethnicity, gender, sexual orientation, disability, etc.) may have affected my experience in the PYS Crisis Response Service Program.

1-Strongly Disagree 2-Disagree 3-Neither Disagree or Agree 4-Agree 5-Strongly Agree

Please explain in the space below if relevant.

2. I felt as if my counselor paid attention to all aspects of my identity and/or lived experiences (e.g. aspects of who I am including race, ethnicity, gender, sexual orientation, disability, etc.) important to myself.

1-Strongly Disagree 2-Disagree 3-Neither Disagree or Agree 4-Agree 5-Strongly Agree

Please explain in the space below if relevant.

3. I felt as if my counselor valued all aspects of my identity and/or lived experiences (e.g. aspects of who I am including race, ethnicity, gender, sexual orientation, disability, etc.) important to myself.

1-Strongly Disagree 2-Disagree 3-Neither Disagree or Agree 4-Agree 5-Strongly Agree

Please explain in the space below if relevant.

4. I felt I had a sense of belonging, considering my identity and/or lived experiences (e.g. aspects of who I am including race, ethnicity, gender, sexual orientation, disability, etc.) in the PYS Crisis Response Service Program.

1-Strongly Disagree 2-Disagree 3-Neither Disagree or Agree 4-Agree 5-Strongly Agree

Please explain in the space below if relevant.

Staff Representation & Cultural Competency

1. My counselor considered all aspects of my identity and/or lived experiences (e.g. aspects of who I am including race, ethnicity, gender, sexual orientation, disability, etc.) in the PYS Crisis Response Service Program.

1-Strongly Disagree 2-Disagree 3-Neither Disagree or Agree 4- Agree 5-Strongly Agree

Please explain in the space below if relevant.

2. My counselor treated me in a fair and respectful manner.

1-Strongly Disagree 2-Disagree 3-Neither Disagree or Agree 4-Agree 5-Strongly Agree

Please explain in the space below if relevant.

Language, Practice, & Resources

1. The resources being provided in multiple languages made me feel welcome in the PYS Crisis Response Service Program.

1-Strongly Disagree 2-Disagree 3-Neither Disagree or Agree 4-Agree 5-Strongly Agree

Please explain in the space below if relevant.

2. The resources being provided in multiple languages made me feel a sense of belonging in the PYS Crisis Response Service Program.

1-Strongly Disagree 2-Disagree 3-Neither Disagree or Agree 4-Agree 5-Strongly Agree

Please explain in the space below if relevant.

3. The resources being provided in multiple languages made me feel a sense of inclusion in the PYS Crisis Response Service Program.

1-Strongly Disagree 2-Disagree 3-Neither Disagree or Agree 4-Agree 5-Strongly Agree

Please explain in the space below if relevant.

4. My counselor communicated and explained things to me clearly and in a way I can easily understand.

1-Strongly Disagree 2-Disagree 3-Neither Disagree or Agree 4-Agree 5-Strongly Agree

Please explain in the space below if relevant.

Feedback

Do you have any suggestions or concerns with how the PYS Crisis Response Service Program was carried out?

Is there any other comment you would like to share regarding your experience in the PYS Crisis Response Service Program?

Effectiveness

1. How effective was the PYS program in helping me and my family cope in emergencies and tough situations?

1 (not at all effective) <-> 3 (somewhat effective) <-> 5 (extremely effective)

Please explain in the space below if relevant.

2. How effective was the CRS program in helping me and my family improve my awareness and understanding of the problem I was facing?

1 (not at all effective) <-> 3 (somewhat effective) <-> 5 (extremely effective)

Please explain in the space below if relevant.

3. How effective was the CRS program in helping to connect me with the best support and link me with other services?

1 (not at all effective) <-> 3 (somewhat effective) <-> 5 (extremely effective)

Please explain in the space below if relevant.

4. How effective was the CRS program in helping me identify risks?

1 (not at all effective) <-> 3 (somewhat effective) <-> 5 (extremely effective)

Please explain in the space below if relevant.

5. How effective was the CRS program in working with me to create and use a safety plan?

1 (not at all effective) <-> 3 (somewhat effective) <-> 5 (extremely effective)

Please explain in the space below if relevant.

6. How effective was the CRS program in making sure the safety plans prevented harm to myself?

1 (not at all effective) <-> 3 (somewhat effective) <-> 5 (extremely effective)

Please explain in the space below if relevant.

7. How effective was the CRS program in making sure the safety plans prevented harm from others?

1 (not at all) <-> 3 (somewhat effective) <-> 5 (extremely effective)

Please explain in the space below if relevant.

8. How effective was the CRS program in making sure the safety plans prevented harm to others?

1 (not at all effective) <-> 3 (somewhat effective) <-> 5 (extremely effective)

Please explain in the space below if relevant.

Feedback

Do you have any suggestions or concerns with how the PYS Crisis Response Service Program was carried out?

Is there any other comment you would like to share regarding your experience in the PYS Crisis Response Service Program?

Appendix C: Questionnaire Draft #2

Accessibility

How did you become aware of the Crisis Response Program offered by PYS?

1- PYS website

2- Third-party referral [health care professional, educators, companies, family or friends, etc.]

3- Other-Please specify in the space provided.

To what extent did the following factors affect or limit your access to the Crisis Response Program offered by Peterborough Youth Services (PYS)?

Scheduling time off work to meet service hours

1 (Not At All) | 2 (Very Little) | 3 (Somewhat) | 4 (Quite A Bit) | 5 (Very Much) | 6 (Not Applicable)

Please elaborate (if relevant)

Arranging childcare for children or youth not involved in treatment

1 (Not At All) | 2 (Very Little) | 3 (Somewhat) | 4 (Quite A Bit) | 5 (Very Much) | 6 (Not Applicable)

Please elaborate (if relevant).

Cost of technology for virtual services

1 (Not At All) | 2 (Very Little) | 3 (Somewhat) | 4 (Quite A Bit) | 5 (Very Much) | 6 (Not Applicable)

Please elaborate (if relevant).

Cost of transportation [public transit, gas, etc.]

1 (Not At All) | 2 (Very Little) | 3 (Somewhat) | 4 (Quite A Bit) | 5 (Very Much) | 6 (Not Applicable)

Please elaborate (if relevant).

Hours of available services

1 (Not At All) | 2 (Very Little) | 3 (Somewhat) | 4 (Quite A Bit) | 5 (Very Much) | 6 (Not Applicable)

Please elaborate (if relevant).

Time spent on the waitlist

1 (Not At All) | 2 (Very Little) | 3 (Somewhat) | 4 (Quite A Bit) | 5 (Very Much) | 6 (Not Applicable)

Please elaborate (if relevant).

Your residential location (e.g. living outside the city limits).

1 (Not At All) | 2 (Very Little) | 3 (Somewhat) | 4 (Quite A Bit) | 5 (Very Much) | 6 (Not Applicable)

Please elaborate (if relevant).

To what extent do you agree or disagree with the following statement?

Communication with PYS staff was clear and easy to understand [including language used in program materials].

1 (Strongly Disagree) | 2 (Disagree) | 3 (Neither Disagree or Agree) | 4 (Agree) | 5 (Strongly Agree) | 6 (Not Applicable)

Please elaborate (if relevant).

For those who answered 'PYS Website' in the Opening Question:

To what extent do you agree or disagree with the following statements?

A) The website was easy to find after a preliminary (Google) search.

1 (Strongly Disagree) | 2 (Disagree) | 3 (Neither Disagree or Agree) | 4 (Agree) | 5 (Strongly Agree) | 6 (Not Applicable)

B) It was easy to find relevant information about the program on the website.

1 (Strongly Disagree) | 2 (Disagree) | 3 (Neither Disagree or Agree) | 4 (Agree) | 5 (Strongly Agree) | 6 (Not Applicable)

C) Information provided on the website was clearly laid out.

1 (Strongly Disagree) | 2 (Disagree) | 3 (Neither Disagree or Agree) | 4 (Agree) | 5 (Strongly Agree) | 6 (Not Applicable)

D) Information on my program was presented in a clear and easy-to-understand manner.

1 (Strongly Disagree) | 2 (Disagree) | 3 (Neither Disagree or Agree) | 4 (Agree) | 5 (Strongly Agree) | 6 (Not Applicable)

E) The information was detailed enough.

1 (Strongly Disagree) | 2 (Disagree) | 3 (Neither Disagree or Agree) | 4 (Agree) | 5 (Strongly Agree) | 6 (Not Applicable)

Feedback:

Are there any other comments you would like to share regarding the accessibility of the PYS Program (including suggestions for improvement)?

Participant Experience Module

To what extent do you agree or disagree with the following statements?:

I felt heard and valued in the PYS Crisis Response Service Program (for example, I could speak openly and I felt understood).

1 (Strongly Disagree) | 2 (Disagree) | 3 (Neither Disagree or Agree) | 4 (Agree) | 5 (Strongly Agree) | 6 (Not Applicable)

Please elaborate (if relevant).

I felt supported by the PYS Crisis Response Service Program (for example, the PYS staff made you feel valued, like you could share what you wanted, that they were paying attention, shared useful information, etc.)

1 (Strongly Disagree) | 2 (Disagree) | 3 (Neither Disagree or Agree) | 4 (Agree) | 5 (Strongly Agree) | 6 (Not Applicable)

Please elaborate (if relevant).

I felt safe (for example, feeling physically safe from harm or feeling emotionally safe to share my thoughts and feelings)

1 (Strongly Disagree) | 2 (Disagree) | 3 (Neither Disagree or Agree) | 4 (Agree) | 5 (Strongly Agree) | 6 (Not Applicable)

Please elaborate (if relevant).

Feedback:

Are there any other comments you would like to share regarding your experience in the PYS Crisis Response Service program (including suggestions for improvement)?

Inclusivity

In this section, we use the phrase ‘who I am as a person’, to refer to things which define one’s identity and lived experience. Examples include, one’s cultural background, gender, sexual orientation, ethnicity, ability and so on.

To what extent do you agree or disagree with the following statements:

Staff Engagement/Interaction

I felt respected considering who I am as a person.

1 (Strongly Disagree) | 2 (Disagree) | 3 (Neither Disagree or Agree) | 4 (Agree) | 5 (Strongly Agree) | 6 (Not Applicable)

Please elaborate (if relevant).

I felt welcome considering who I am as a person (for example, I could speak openly and I felt understood).

1 (Strongly Disagree) | 2 (Disagree) | 3 (Neither Disagree or Agree) | 4 (Agree) | 5 (Strongly Agree) | 6 (Not Applicable)

Please elaborate (if relevant).

I felt a sense of belonging, considering who I am as a person.

1 (Strongly Disagree) | 2 (Disagree) | 3 (Neither Disagree or Agree) | 4 (Agree) | 5 (Strongly Agree) | 6 (Not Applicable)

Please elaborate (if relevant).

Staff Representation & Cultural Consideration (i.e. openness and respect for other cultures)

I felt comfortable speaking openly with PYS staff considering who I am as a person.

1 (Strongly Disagree) | 2 (Disagree) | 3 (Neither Disagree or Agree) | 4 (Agree) | 5 (Strongly Agree) | 6 (Not Applicable)

Please elaborate (if relevant).

I felt understood by PYS staff considering who I am as a person.

1 (Strongly Disagree) | 2 (Disagree) | 3 (Neither Disagree or Agree) | 4 (Agree) | 5 (Strongly Agree) | 6 (Not Applicable)

Please elaborate (if relevant).

Language & Resources

Communication with PYS staff was appropriate considering who I am as a person.

1 (Strongly Disagree) | 2 (Disagree) | 3 (Neither Disagree or Agree) | 4 (Agree) | 5 (Strongly Agree) | 6 (Not Applicable)

Please elaborate (if relevant).

Resource materials and communication were provided in a way in which I can understand, considering who I am as a person.

1 (Strongly Disagree) | 2 (Disagree) | 3 (Neither Disagree or Agree) | 4 (Agree) | 5 (Strongly Agree) | 6 (Not Applicable)

Please elaborate (if relevant).

I felt reflected in the resource materials provided by PYS considering who I am as a person.

1 (Strongly Disagree) | 2 (Disagree) | 3 (Neither Disagree or Agree) | 4 (Agree) | 5 (Strongly Agree) | 6 (Not Applicable)

Please elaborate (if relevant).

The resource materials made me feel a sense of inclusion in the PYS Crisis Response Service Program.

1 (Strongly Disagree) | 2 (Disagree) | 3 (Neither Disagree or Agree) | 4 (Agree) | 5 (Strongly Agree) | 6 (Not Applicable)

Please elaborate (if relevant).

Feedback

Are there any other comments you would like to share regarding the inclusivity of the PYS Crisis Response Service Program?

Effectiveness

1. How effective was the CRS program in helping me and my family cope in emergencies and tough situations?

1 (not at all effective) | 2 (slightly effective) | 3 (somewhat effective) | 4 (very effective) | 5 (extremely effective) | 6 (not applicable)

Please explain in the space below if relevant.

2. How effective was the CRS program in helping me and my family improve my awareness and understanding of the problem I was facing?

1 (not at all effective) | 2 (slightly effective) | 3 (somewhat effective) | 4 (very effective) | 5 (extremely effective) | 6 (not applicable)

Please explain in the space below if relevant.

3. How effective was the CRS program in helping to connect me with the best support and link me with other services?

1 (not at all effective) | 2 (slightly effective) | 3 (somewhat effective) | 4 (very effective) | 5 (extremely effective) | 6 (not applicable)

Please explain in the space below if relevant.

-
4. How effective was the CRS program in helping me identify risks?

1 (not at all effective) | 2 (slightly effective) | 3 (somewhat effective) | 4 (very effective) | 5 (extremely effective) | 6 (not applicable)

Please explain in the space below if relevant.

5. How effective was the CRS program in working with me to create and use a safety plan?

1 (not at all effective) | 2 (slightly effective) | 3 (somewhat effective) | 4 (very effective) | 5 (extremely effective) | 6 (not applicable)

Please explain in the space below if relevant.

6. How effective were the safety plans in preventing harm to myself?

1 (not at all effective) | 2 (slightly effective) | 3 (somewhat effective) | 4 (very effective) | 5 (extremely effective) | 6 (not applicable)

Please explain in the space below if relevant.

7. How effective were the safety plans in preventing harm from others?

1 (not at all effective) | 2 (slightly effective) | 3 (somewhat effective) | 4 (very effective) | 5 (extremely effective) | 6 (not applicable)

Please explain in the space below if relevant.

8. How effective were the safety plans in preventing harm to others?

1 (not at all effective) | 2 (slightly effective) | 3 (somewhat effective) | 4 (very effective) | 5 (extremely effective) | 6 (not applicable)

Please explain in the space below if relevant.

Feedback

Are there any other comments you would like to share regarding the PYS Crisis Response Service Program (including suggestions for improvements)?

Appendix D: Questionnaire Draft #3

Accessibility

How did you become aware of the Crisis Response Service (CRS) Program offered by PYS?

1- PYS website

2- Third-party referral [health care professional, educators, companies, family or friends, etc.]

3- Other-Please specify:

To what extent did the following factors affect or limit your access to the Crisis Response Service (CRS) program offered by Peterborough Youth Services (PYS)?

Making accommodations (e.g. scheduling time off work, arranging childcare for youth not involved, transportation) to meet hours of service availability.

1 (Not At All) | 2 (Somewhat) | 3 (Very Much)

Please share more details (if needed):

Cost of technology for virtual services (e.g. Internet)

1 (Not At All) | 2 (Somewhat) | 3 (Very Much)

Please share more details (if needed):

Time spent on the waitlist

1 (Not At All) | 2 (Somewhat) | 3 (Very Much)

Please share more details (if needed):

For those who answered 'PYS Website' in the Opening Question:

To what extent do you agree or disagree with the following statements?

A) The website was easy to find after a Google search

1 (Disagree) | 2 (Neutral) | 3 (Agree)

B) Information provided on the website was easy to find and detailed enough.

1 (Disagree) | 2 (Neutral) | 3 (Agree)

Participant Experience Module

Based on your experience in the Crisis Response Service program, select if you agree or disagree with the following statements:

I felt heard and valued (e.g. I could speak openly and I felt understood).

1(Disagree) | 2 (Neutral) | 3 (Agree)

Please share more details (if needed):

I felt like I was matched with the right service.

1(Disagree) | 2 (Neutral) | 3 (Agree)

Please share more details (if needed):

I felt secure (i.e. I felt secure sharing my thoughts and feelings, knowing my privacy was protected)

1(Disagree) | 2 (Neutral) | 3 (Agree)

Please share more details (if needed):

Inclusivity

In this section, we use the phrase ‘who I am as a person’, to refer to things which define one’s identity and lived experience. Examples include, one’s cultural background, gender, sexual orientation, ethnicity, ability and so on.

Based on your experience in the Crisis Response Service program, select if you agree or disagree with the following statements:

I felt respected considering who I am as a person.

1(Disagree) | 2 (Neutral) | 3 (Agree)

Please share more details (if needed):

I felt accepted by PYS staff considering who I am as a person.

1(Disagree) | 2 (Neutral) | 3 (Agree)

Please share more details (if needed):

Program materials and communication were provided in a way in which I can understand considering who I am as a person.

1(Disagree) | 2 (Neutral) | 3 (Agree)

Please share more details (if needed):

Effectiveness

1. How effective was the CRS program in helping me and my family cope in emergencies and tough situations (including improving awareness and understanding of my problem)?

1 (not effective) | 2 (somewhat effective) | 3 (effective)

Please share more details (if needed):

2. How effective was the CRS program in helping to connect me with the best support and link me with other services?

1 (not effective) | 2 (somewhat effective) | 3 (effective)

Please share more details (if needed):

3. How effective was the CRS program in decreasing my problem's risk?

1 (not effective) | 2 (somewhat effective) | 3 (effective)

Please share more details (if needed):

4. How effective was the CRS program in decreasing the signs of my problem?

1 (not effective) | 2 (somewhat effective) | 3 (effective)

Please share more details (if needed):

Are there any other comments you would like to share regarding your experience in the Crisis Response Service Program (including suggestions for improvement)?

Appendix E: Final Draft Of Questionnaire

Client Survey Questionnaire For Peterborough Youth Services

Section 1

[Screening Question]

How did you become aware of the Crisis Response Service (CRS) Program offered by PYS?

1- PYS website

2- Third-party referral [health care professional, educators, companies, family or friends, etc.]

3- Other-Please specify:

[For those who answered 'PYS Website' in the Opening Question]

<i>Circle the answer that best reflects your experience.</i>	Not at all	Very little	Somewhat	Very much
The website was easy to find after a simple web search.	1	2	3	4
Program information was easy to locate and clearly defined.	1	2	3	4

How much did the following factors impact or limit your access to the Crisis Response Service (CRS) program?

<i>Circle the answer that best reflects your experience.</i>	Not at all	Very little	Somewhat	Very much
Making accommodations to meet offered hours of services [e.g. scheduling time off work, arranging childcare, transportation].	1	2	3	4
Time spent on the waitlist.	1	2	3	4

Please share more details (if needed):

Section 2

Based on your experience in the Crisis Response Service program, select your level of agreement with the following statements:

<i>Circle the answer that best reflects your experience.</i>	Not at all	Very little	Somewhat	Very much
I felt heard and valued [e.g. I could speak openly and felt understood].	1	2	3	4
I feel like I was matched with the right service [e.g. service was able to address my family's needs].	1	2	3	4
I felt secure sharing my thoughts and feelings, knowing my privacy was protected.	1	2	3	4

Please share more details (if needed).

Section 3

In this section, we use the phrase 'who I am as a person', to refer to things which define one's identity and lived experience. Examples include, one's cultural background, gender, sexual orientation, ethnicity, ability and so on.

Based on your experience in the Crisis Response Service program, select your level of agreement with the following statements:

<i>Circle the answer that best reflects your experience.</i>	Not at all	Very little	Somewhat	Very much
I felt respected considering who I am as a person.	1	2	3	4
I felt accepted by PYS staff considering who I am as a person.	1	2	3	4
All communication with PYS staff was provided in a way in which I can understand considering who I am as a person.	1	2	3	4

Please share more details (if needed).

Section 4

Based on your experience in the Crisis Response Service program, select your level of agreement with the following statements:

<i>Circle the answer that best reflects your experience.</i>	Not at all	Very little	Somewhat	Very much
The CRS program helped me and my family cope in emergencies and tough situations (including improving awareness and understanding of my problem).	1	2	3	4
The CRS program in helped to connect me with the best support and link me with other services.	1	2	3	4
The CRS program was helpful in decreasing risk.	1	2	3	4
The CRS program was helpful in decreasing my symptoms.	1	2	3	4

Please share more details (if needed).

Are there any other comments you would like to share regarding your experience in the Crisis Response Service Program (including suggestions for improvement)?

Appendix F: Semi-Structure Interview (SSI) Version Of Questionnaire

Peterborough Youth Services (PYS) Crisis Response Service Program

Evaluation (SSI Format)

Note:* This survey will be given to **clients and their parents/guardians who have participated in the Crisis Response Service program.

Client Survey Questionnaire of Peterborough Youth Services

In this interview, we are going to be asking about your experience in the Crisis Response Service program. The goal of this interview is to collect information so PYS can update and improve its services.

Section 1

[Screening Question]

Q1: How did you become aware of the Crisis Response Service Program offered by Peterborough Youth Services (PYS)?

[For those who answered 'PYS Website' in the Opening Question]

P1: Did you feel the website was easy to find after a simple web search or not?

P2: Did you feel that all program information was easy to locate and clearly defined or not?

Q2: What factors impacted or limited your ability to access the CRS program, if any at all?

- **P1:** For example, we learned that making accommodations, like scheduling time off work, arranging childcare, or transportation were barriers to accessing the program. Did any of these factors affect you or not?
- **P2:** And how about how much time you spent on the waitlist?

Section 2

Q3: Reflecting on your experiences in the CRS program, did you feel heard and valued throughout your time in the program or not?

P1: For example, this can include feeling able to openly share your thoughts and feelings with PYS staff and feeling understood. Was this your experience with PYS staff or not?

Q4: Reflecting on your experiences in the CRS program, did you feel like you were matched with the right service or not?

P1: Getting matched with the right service can include feeling your family's needs were appropriately addressed. Would you agree that your needs were met or not?

Q5: PYS promises to protect their users' privacy. Did you feel secure sharing your thoughts and feelings with PYS staff or not?

Section 3

In this section, we use the phrase 'who I am as a person', to refer to things which define one's identity and lived experience. Examples include one's cultural background, gender, sexual orientation, ethnicity, ability, and so on.

Q6: Reflecting on your experiences in the CRS program, did you feel respected considering who you are as a person or not?

Q7: Reflecting on your experiences in the CRS program, did you feel accepted by PYS staff considering who you are as a person, or not?

Q8: Reflecting on your experiences in the CRS program, did you feel communication between you and PYS staff was appropriate considering who you are as a person?

P1: Did PYS staff deliver communication in a way you can understand or not?

Section 4

Q9: Reflecting on your experiences in the CRS program, did the program help you and your family cope in emergencies and tough situations?

- **P1:** This can include improving your awareness and understanding of your program. Was this your experience in the program?

Q10: Reflecting on your experiences in the CRS program, did the program help connect you with the best support and link you with other services?

Q11: Reflecting on your experiences in the CRS program, was the program helpful in decreasing risk?

Q12: Reflecting on your experiences in the CRS program, was the program helpful in decreasing your symptoms?

Section 5

Are there any other comments you would like to share regarding your experience in the Crisis Response Service Program, including suggestions for improvement?