



CASE STUDY

Northwest Catholic District School Board (TNCDSB)

The problem

TNCDSB was stuck using a dated and general system.

- Gaps in Accessibility. Outdated technology meant accessing student records could only be done on-site. A major problem for a school board that has five schools spread over hundreds of kilometres.
- Non-PHIPA compliant. Inability to audit client files, improper documentation, lack of security.
- No reporting capability. Couldn't measure impact of programs, missing justification for funding and board trustees.

"If you're using something that's not PHIPA compliant, you are in a position of significant liability."

– Lisa Devlin

Overview

The Northwest Catholic District School Board (TNCDSB) operates five Catholic elementary schools serving communities from Sioux Lookout, Dryden, and Atikokan to Fort Frances, Rainy River, and the First Nations within the Board's jurisdiction in Northwestern Ontario.

This case study examines the three years since implementing EMHware at TNCDSB in the summer of 2021. Learn how impactful changes were made to the board's mental health programming by extracting meaningful data from EMHware.



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The solution

EMHware's feature set quickly filled all the gaps presented by TNCDSB. To learn more about our software's wide range of capabilities, visit.

Making meaningful changes to programming using data.

Using EMHware's extensive reporting functionality, TNCDSB can extract critical data and make impactful changes to their programming.

- ✓ 34% of referrals are re-referrals. It was found that the majority of these files were closed because students were referred to another service. Re-entering the system could mean that the student never received those services or something else happened.

Outcome: TNCDSB is building a Transition of Care plan with community providers to address the gap.

"It's resulted in more collaboration with our Community partners, information sharing and developing more robust processes on transfer of care."

– Lisa Devlin

- ✓ Grief referrals are unusually high. An increasing trend in grief-related referrals posed a problem for staff.

Outcome: Prompted grief training programs with teachers and on-site staff.

- ✓ Measuring Cause-and-Effect. Performing In class language and body safety programs was being met with resistance.

Outcome: data showed an increase in disclosures immediately after programs were completed, leading to additional groups being run.

- ✓ Funding Opportunities. Measuring hours of direct service for funder and trustee reports.

Outcome: More funding for future mental health programs.

"It's revealed gaps that we weren't aware were there and sent us in the right direction to address things."

– Lisa Devlin

