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This **Participation Chart** has been developed as a tool for the Partnership as a whole to track our respective involvement in the Working Groups and activities so that we can more accurately understand the extent of our collective contributions.

Please take the time to fill in reflecting participation from April 1,st 2014 to September 30th , 2014 and send back to Janette Seymour at jseymour2475@rogers.com by **Wednesday October 15th, 2014**.

**York ASD Partnership Member Participation #2**

| **Name of Partner** | **Systems Change****{List current members}** | **Mapping & Pathways – {List names} (completed)** | **Transitions {List names}****(completed)** | **Professional Development****{List current members}** | **Communication {List current members}** | **Screening & Assessment****{List current members}** | **Adult Services & Supports {List current members}** | **Crisis Response****{List current members}** | **Physician Support****{List current members}** | **Steering Committee****{List current members}** | **Full Partnership Meetings****{List current members}** | **Intake Worker Training****(# of Attendees)** | **Proposal Writing****(Specify proposal and name)** | **YASDP Advocacy****(Specify event and name)** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Autism Ontario York Region Chapter |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Blue Hills Child and Family Centre |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Catulpa Community Support Services |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Children’s Case Coordination |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Children’s Treatment Network  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Community Living York South |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Early Intervention Services  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Kerry’s Place Autism Services |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Kinark Child and Family Services  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Mackenzie Health’s Centre  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Muki Baum Treatment Centre |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Parent Representative |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Reena |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| York Catholic District School Board |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| The York Centre for C,Y&F |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| York Region District School Board |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| York Region Preschool Speech and Language  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| York Support Services Network |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| York University Faculty of Health |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| MCYS/MCSS (CE Region (Ex-officio) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Ministry of Education (Ex-officio) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Central LHIN |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Canadian Mental Health Association |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| York Children’s Aid Society |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| York Regional Police |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Other participation:**

1. Voluntary funding contribution Yes No Intend to
2. Other activity not listed above:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Other contribution:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_