



Kitchener Cambridge Human Services and Justice Coordination Committee Meeting Minutes

Date: Monday, December 12, 2016

Time: 1 p.m. - 3 p.m.

Location: Crown Attorney's Office, 3rd Floor, 85 Frederick St., Kitchener

Present: Linda Elliott, Joslyn Gaston, Don Roth, Todd Parish, Shirley Gutenberg, Tom Matthews, John Goodman, Shelley Huisken, Mark Booker

Regrets: Sue Werden, Melanie Smid, Angela Vanderheyden, Tammy Mercer, Sarah James, Nelly Silva, Stephanie Robinson, Cheryl Skirving-Mills.

Recorder: Catherine Bassarab

Item for Discussion	Discussion
<p>1. Welcome and Introductions Review of Minutes</p>	<p>Chairs: Linda Elliott and Joslyn Gaston opened the meeting with a round of introductions. Agenda was accepted by consensus. Minutes of October 24, 2016 were accepted.</p>
<p>2. Provincial HSJCC Updates</p>	<ul style="list-style-type: none"> • The HSJCC 2017 Conference is on November 20-22, 2017 in Toronto. Members are encouraged to consider presenting on projects and topics of interest and submitting Abstracts. The regional committee is promoting participation by HSJCC members. • Toolkit on Hospital Partnership • New HSJCC website will launch that is more up-to-date and with local materials available. • Member Engagement Plan is to improve 1,200 community committees' communication, engagement and how regional committees are getting tracked and being brought together. • <i>Handout: "A Strategy to Prevent Opioid Addiction and Overdose in Ontario."</i> The provincial announcement on October 12, 2016 to provide oversight across the province is very timely as high strength opioids are increasing and are such a complex problem with no one solution but to work in a common direction. There is gratitude for the steps forward, but other steps are needed within the Strategy and community. Feedback is requested - refer to discussion package, last page. • <i>Hand-out: "Opioid Education Workshop" sponsored by WRIDS, WRPS, HSJCC</i> The Opioid Education Workshop is being held on Friday, December 16 for community agencies



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	<p>at Bingeman’s Centre, Kitchener at 8:30am-12:00pm. Guest presenters include Detective Ian Young of WPRS; Dr. Michael Beazley and Dr. Kelly Grindrod, University of Waterloo School of Pharmacy, and Robert Crossan of the Region of Waterloo Paramedic Services.</p>
<p>3. Work Plan and Budget Allocation</p>	<p><i>Hand-out: Waterloo Wellington HSJCC Budget Policy (2016-2017)</i> <i>Hand-out: HSJCC Work Plan 2016-2017 & Provincial Reporting Template–Definitions of the Pillars</i> Each local and provincial group is required to report. Definitions of the Pillars are highlighted and HSJCCs are positioned to do our work and planning in conjunction with the phases outlined. This is a draft and some options going forward. For consideration:</p> <ul style="list-style-type: none"> ○ Want to give booklet for the area that helps educate front-line staff. The Crystal Meth harm-reduction booklet content is pulled together and quotes were submitted for approval (\$1,500 contribution). The booklet exists in electronic form, and the publication (500 copies approx.) should be done well in advance of March 2017. ○ Opioid Education Workshop for service providers on December 16th, request for contribution of \$1,000. The Opioid presentation will be well attended. <p>Motion: To accept \$1,000 be spent to assist the Opioid Education Workshop. Moved by John Goodman / Seconded by Mark Booker Motion Accepted.</p>
<p>4. Feedback on Survey</p>	<p><i>Hand-out: WW HSJCC Summary of HSJCC Surveys in Waterloo Wellington, Nov 2016</i> We wanted to listen to the local members about the system and membership of our three coordinating committees. Fifteen completed the survey; response could come from one member or one responding as a member of all committees. Responses on page 2-3 were reviewed. Survey results were reviewed at the regional committee; now time to consult and involve people to take next steps to make things better. There were some issues with TOR. (improving reporting structure, enhancing representation and leadership of local agencies)</p> <p>Suggestion: If we could have a System Project Coordinator, then we could get resources –for discussion at the next meeting.</p>



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5. Grand River Hospital Services Presentation

Shelly Huisken of Grand River Hospital provided a thorough presentation overviewing the services offered by Grand River Hospital and the processes involved. *(briefly recorded)*

For further information, contact Shelly Huisken.

- **Short-term Psychiatric Clinic:** The person is seen once per month up to six months, no restrictions for discharge/ how and when seen. However it is up to the doctor to decide how long person stays. 1,200 per month attending, 7 psychiatrists staffing and today for example, there are 90 appointments.
- **Centralized Intake:** St Mary's, community agency go straight to appointment without referral. Doing rapid response, social work, go into Hazel Glen facility, RPM does assessment and referrals. Response is within 24 hours. It can happen through EMR but get appointment with family doctor or walk-in clinic. Call / Fax: 519-749-4456 with referrals.
- **PCC- P:** One psychiatrist working with these cases, but if having additional Family doctor or nurse practitioners, or walk-in clinic can Fax Arlene Gluman. Folks who are working, doing well otherwise but have dip times required.
- **Rapid Response:** Team Response time is appointments within 1-2 days to see social worker and check-ins.
- **Hazelglen Program:** is the gold standard, intensive, social and case workers do home visits. If something comes up, can call. These are folks one step away from EMC. The family doctor screens to see if there is a better program. This is done very carefully.
- **Recovery Connect:** Intensive with more severe situations. Christina Page, social worker. Also sets up Connectivity Table with GRH.
- **Day Hospital:** from 1F, EMS for a maximum of 87 clients. It works best if the person is not working, focuses on behavioral DBT, mindfulness.
- **Withdrawal Management:** Observation beds for maximum of 18 people. Working on options to improve. Clients can go directly into Day Program, if not withdrawing. A bed can be pre-booked 2.5 weeks ahead. GRH goal is for person to be in pre-treatment before going into programs.
- **Pharmacy:** is to provide blister packs of meds for 99cents and are willing to deliver for GRH.
- **Kids Centralized Intake** for self-harm.



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<p>6. Updates on Mental Health Court and Drug Treatment Court</p>	<p>Mental Health Court</p> <ul style="list-style-type: none"> • Is churning along, busy, still in some transition due to retirement in October 2016. • Waiting to see Justices rotating through this Court • Need familiarity and acceptance of the community in Court • Save day for folks better in that Court. <p>Drug Treatment Court</p> <ul style="list-style-type: none"> • Have 5 cases; lots of stresses, family support, it is a weekly Court. • Staffing – not have Court during holiday seasons. • Random and specific screens having some trouble with this. It is part of the ebb and flow. • Losing track of the graduates, which is good. It is a process for folks.
<p>7. Updates from Community Partners</p>	<p>Waterloo Region Police Services - John Goodman Staff needed for mental health is very high as suicides are up, attempts are way up, and we have a problem with fentanyl. There is a need to change how we handle, store and destroy the drugs. We will see huge overdoses coming up, and caution was advised using Naloxone in recovering people and their response. Fentanyl is showing up even if not directly taken.</p> <p>Thresholds – Mark Booker Everything is going well.</p> <p>Shelter - Shirley Gutenberg Shelter is a serious and huge public health issue. There are two persons per bunk; the plan was for one person. Booking several nights is still in planning.</p> <ul style="list-style-type: none"> ○ Tool is being used on Wellington side to score the needs. Who is going to units available? ○ Guelph LHIN 15% vacancy rates decrease the need ○ What is suitable for some of our folks? <p>CMHA WW - Don Roth <i>Housing First</i> has seen great success. <i>Patients First</i> has passed the LHIN under 4 sub-regions. Consultation discussion and planning is in progress for Organization Redesign.</p> <p>Probation – Todd Parish Todd has returned to Kitchener from St Thomas. There is a push for more mental health training for staff as opioid and overdoses are ramped across the province.</p>



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	Mental Health & Justice – Joslyn Gaston <i>Hand-out: FACT – Flexible Assertive Community Treatment Team and FACT Eligibility Flow Chart</i> Sue in court house full time. Lutherwood replacement is Brian Courtly who is settling in very well.
8. New Business •	

Adjournment at 3:00 pm

Next meeting: March 6, 2017 at Crown Attorney's Office, 3rd Floor, 85 Frederick Street, Kitchener