## HSJCC Meeting Minutes: September 11th, 2014

Present: Bob Bernie, Community Mobilization Officer, OPP

Carol Peterson, Nurse Manager, Kenora District Jail

Steve Walker, Superintendent, Kenora District Jail

Michelle Ott, Youth Diversion Worker, Firefly

Sara Dias, Executive Director, CMHA Kenora Branch

Norine Van Breda, Adult Community Case Manager, Firefly

Will Scutt, Chair, Kenora Crown's Office

Alastair Greig, Mental Health Diversion Worker, CMHA Kenora Branch

Barb Jackson, Atikokan Community Counselling & Addiction Services (via OTN)

Sherry Nolen, Student at Atikokan Community Counselling & Addiction Services (via OTN)

Sean Scally, Red Lake Community Counselling & Addiction Services (via OTN)

Jennifer Marquis, Kenora District Jail

Charlene Strain, Mental Health Diversion/Case Manager, CMHA Fort Frances Branch (OTN)

Brad Peterson, Forensic Case Manager, CMHA Kenora Branch

Sharon Scharfe, Lawyer, Legal Aid Ontario

Nan Normand, Northwest Legal Clinic

Peter Kirby, Defense Counsel

Alastair Greig, Mental Health Diversion Worker, CMHA Kenora Branch

Kyla Storry, Director, Crisis Response Servcies

Adam Ward, Anishinabie Abinoojii Child & Family Services

Christi Ousineau, Case Manager, CMHA Fort Frances (OTN)

Gina Clark, Regional Implementation Coordinator, CAMH

Pavan Passi, Articling Student, Legal Aid Ontario

Regrets: Katherine Kinger, Regional Manager, Ministry of Corrections and Community Safety

Miranda Duggan, Abuse Issues Liaison, OPP

Bayley Kurts-Ostenfeldt, Rehabilitation Facilitator, BISNO

Mike Goold, Deputy Supervisor, Kenora District Jail

Michelle Queen, Changes Recovery Homes

Greg Iwasiw, Defense Counsel

Gail Wetendorf, Pre-Arrest Diversion, Kenora Chiefs Advisory

Stephen Mitchell, Youth Probation, Ministry of Children and Youth Services

Dave Allen, Kenora Crown's Office

Arthur Huminuk, Grand Council Treaty #3

Simon Owen, Defense Counsel

Jack Martin, Manager Community Support Team, WW Creighton Centre

Patti Dryden-Holmstrom, Mental Health & Addictions Programs Manager, LWDH

Chad English, Youth Probation Manager

Diane Pelletier, KACL Director of Adult Services

Kelly O'Brien, DSO Northern Region, Program Manager (via OTN)

Introductions	See list of those present	
Approval of agenda	By consensus	
Presentation: Kenora Rainy River District Crisis Response Services – Kyla Storry	Kyla Storry provided program information for the Crisis Response Services within the Kenora Rainy River District.  It was indicated that there are crisis beds available within the district and they are located in Dryden, Kenora and Fort Frances. The bed within Kenora is located at the Morningstar Detox Center and the one in Fort Frances within Nelson House.  The addiction recovery treatment that is an 8 week treatment program is located in Dryden  There is a kids support line that is accessible 24 hours It was indicated that the current calls to the Crisis Response Services is from the police. It was indicated that it would be more than half of the calls received are from police. It was indicated however that there is not enough volume of calls from police to warrant a full time professional to attend to police calls with police It was indicated that the Crisis Response Service will respond to a call within 30 minutes.  It was indicated that there is a protocol with hospitals in regards to Crisis Response Services  It was indicated that the Crisis Response Service can be accessed through the Kenora District Jail and that the service has received calls from the jail. In order to process calls the Crisis Response Service is required to speak to the person directly  It was indicated that Fort Frances numbers are not high in regards to calls to the Crisis Response Service from the hospital	Sara to provide the HSJCC Guidelines for Strategies for Implementing Effective Police-Emergency Department Protocols in Ontario from April 2013 to the committee to review
Approval of minutes of May 8 <sup>th</sup> ,	Kyla indicated that the key messages that she would like brought forward to the Regional and Provincial HSJCC's would be the following:  a. The District to create tighter process with emergency departments and the Crisis Response Services  b. Greater use of OTN to allow the police service to access ER Departments  It was indicated that the HSJCC Guidelines for Strategies for Implementing Effective Police-Emergency Department Protocols in Ontario from April 2013 would be sent to Kyla for review as well as the entire District HSJCC to review for the next meeting.  Adopted by consensus	Sara & Will to provide this feedback to the Regional Committee
Business arising out of the minutes	No issues	

Discussion of new Work Plan items for 2014-2016 and identification of LEADS to take on these items	It was discussed that the following would be the focus of the WorkPlan for 2014-2016:  1. Developmental Services Ontario    - Transitional Aged Youth Identification    - Data Collection for DSO around numbers    - Coordination of creative solutions to wait list  2. Information sharing Network Development    - Formalizing local protocols with service providers  3. Mental Health Court Evaluation Follow-up  4. Complex Needs / Dual Diagnosis Gap Analysis  It was indicated that all WorkPlan items are to ensure that they also address youth as it is extremely important to engage the youth sector within each item  It was indicated that the discussion of LEADS and work teams would be discussed at the next meeting	WorkPlan items to be discussed at next meeting and LEADS identified for each
New Business:  a. Youth Service Collaborative	Gina indicated that the collaborative has been meeting since last year The collaborative will be providing trauma training that are first being open to the Justice Sector and then will be open to other health care sectors. There has been a good response to individuals from First Nation Communities attending the training. KLINIC from Winnipeg is the one doing the training The collaborative has chosen the GAIN-SS as the screener tool At this time there is discussion around case management versus a risk management model	Gina to keep the committee informed
b. FASD Justice Clinics	It was indicated that the first clinic started yesterday and there were six youth assessed.  Currently the clinic is booked until spring	Further updates to be made at the next

		There is an FASD meeting being held in Dryden in September 2014 and more updates will be provided at that time	HSJCC meeting
C.	Substance Abuse and Mental Health Take Force	It was indicated that the Task Force was successful in obtaining their Trillium Grant There is now 5 Pillars which now includes a Housing Pillar Currently the Task Force is looking for a coordinator as this posting has been readvertised The funding for this position is currently being sent through the Kenora Chiefs Advisory and the Human Resources piece through the Northwestern Health Unit There have been Blitz advertising for low risk drinking guidelines and homelessness done through the task force The AGM will occur in November of 2014 The Task Force will be looking at rewriting the Drug Strategy The Task Force applied to the Community Foundation for funds to purchase items for promotional purposes. At this time the Task Force is waiting to hear about if this grant was approved	Further updates to be made at the next HSJCC meeting
d.	Community Homelessness Measurement Tool	Nan indicated that the VI-SPDAT is currently being funding through the Homelessness Partnering Initiative – Rural & Remote Projects. This project is to assist with identifying who is homeless within Kenora There will be <b>training on October 29, 2014 on the VI-SPDAT</b> . This tool is widely used and takes 10 minutes to complete. The hope is that there will be a data base that will be developed by engaging community partners who commit to administering the tool when appropriate and this information is then forwarded to the collator.	Information on Training to be sent out to HSJCC Committee.
		The benefits of completing this tool with partners is the following:	
		<ul> <li>Informs the partnering agency of the client's presenting issues</li> <li>The assessment component of the VI-SPDAT will automatically prioritize according to vulnerability risk</li> <li>The completed VI-SPDAT identifies housing support needs for planning purposes</li> <li>The VI-SPDAT screening provides a base line for tracking an individual's life improvements for ongoing client</li> </ul>	
		Those partners that participate will be able to send the data electronically and can use the database The Kenora Fellowship will be taking care of the project and will Transitional Support Worker will be tasked with setting up a rental housing registry and working with the Housing Support Panel to develop individual housing support plans and ensuring the development of a community homeless data base is sustained	
		It was indicated that with the new Poverty Reduction Strategy there will be new funds	

e.	Vulnerable Person Registry & Minty Inquest	Constable Bob Bernie provided an overview of the Minty Inquest and indicated that there is now enhanced police training as there were 7 recommendations from the inquest. There will be further training of police officers and 911 callers. There will also be a Voluntary Vulnerable Person Registry that will be able to identify triggers and mechanisms of how to communicate with individuals on this registry There was conversation on how this registry will impact persons with lived experiences privacy It was also indicated if this registry would flag someone if they were involved within the Mental Health Court in Kenora.	Constable Bernie to keep committee informed of the developments
f.	Tempo: Police Interactions: Mental Health Commission of Canada	It was indicated that there are 16 recommendations within this report and this offers a framework for police training	Constable Bernie to provide a response to this inquiry at the next meeting
		Charlene Strain indicated that Fort Frances is currently working on protocol with their local police detachment	Charlene to update committee on protocol development
		It was indicated that the police will be beginning to use the Inter-Rai which is a brief mental health screener that is a checklist that is provided to physicians and emergency officials by police. The Form can be used for assistance for physicians to use for and Form 1 application under the Mental Health Act. This form is also disclosed to the court and with the jail and is placed on the individual's record.	
g.	Legal Aid Ontario: Mental Health Strategy Consultation Report	It was indicated that Peter Kirby and Greg Iwasiw who are both defence council within the Kenora Rainy River District are both advisors to the Legal Aid Ontario Committee There is conversation on using a mental health and addictions tool for lawyers to assist with screening however there is controversy amongst lawyers on if they are the right individuals to be administering these tools	Greg & Peter to keep committee informed of developments on the strategy

h. Bill C-14 – The Not Criminally Responsible Reform Act Updates	Will indicated that there have been amendments but this is strictly on how the courts look at risk and specifically the threshold to significant risk.  For an individual to be labelled as a high risk accused this application needs to be made by the court. It was indicated that the courts will be careful on how they apply this designation to individuals.  There is also more victim witness coordination through the ORB which keeps all parties involved in the process.  It was indicated that the ORB will not be looking at the least restrictive measure when looking at Dispositions under the Forensic System but at what is most appropriate.	Will to keep committee informed of further updates
Next meeting date January 29, 2015 from 11 a.m. – 2 p.m.	Location of the meeting is Firefly and OTN will be available for those that are unable to travel.	Please forward OTN requests and agenda items to Sara