

HSJCC Meeting Minutes: September 12th, 2018

Present:

Sara Dias, Executive Director, CMHA Kenora Branch
Bob Bernie, Community Mobilization Officer, OPP
Nancy Hendrickson, Ontario Review Board Transitional Case Manager, Thunder Bay Regional Health Sciences Center
Barb Brazao, Manager of Court Operations, Kenora Courthouse (via Audio)
Patti Dryden-Holmstrom, Mental Health & Addictions Programs Manager, LWDH (via Audio)
Diane Pelletier, KACL Director of Adult Services
Chrysta Wood, FASD Worker, Northwestern Ontario FASD Diagnostic Clinic
Tammy Zurkan for Sarah Stevenson, Kenora District Services Board (via Audio)
Kylie Holmstrom, Dual Diagnosis Court Diversion/Court Support Worker, Canadian Mental Health Association, Kenora Branch
Michelle Guitard, Regional Implementation Coordinator, Center for Addiction & Mental Health
Nan Normand, Northwest Legal Clinic
Sharon Scharfe, Lawyer, Legal Aid Ontario
Sheri Norlen, Manager, William Creighton
Rikki Kellar, Court Diversion/Court Support Worker, CMHA Fort Frances (via phone)
Michelle Mauro, Court Diversion/Court Support Worker, CMHA Fort Frances (via phone)
Derek Laffin, Forensic Case Manager, CMHA Kenora Branch
Jessica Gilbertson, Court Diversion/Court Support Worker, CMHA Kenora Branch
Deborah Hatfield, Rehabilitation Facilitator, BISNO
Michelle Queen, Executive Director, Changes Recovery Homes
Carol Peterson, Nurse Manager, Kenora District Jail
Jim Neild, Sergeant for the OPP in Kenora
Kelly Hall, Sergeant for the OPP in Red Lake (audio)
Louise Marston, ODSP Manager, Ministry of Community and Social Services, Ontario Disability Support Program

Regrets:

Jana-Rae Dewson, Kenora Crown's Office
Lindsay Gillett, Manager, Sioux Lookout Community Counselling & Addiction Services
Greg Iwasiw, Defense Counsel
Chad English, Youth Probation Manager
Brad Peterson, ACT Team, CMHA Kenora Branch
Leslie Shields, Supervisor, Brain Injury Services of Northern Ontario
Henry Wall, CEO, Kenora District Services Board
Sue Devlin, Mental Health Lead for the Kenora District Catholic School Board
Candice Kerkermeir, Mental Health Lead, Keewatin Patricia District School Board
Arthur Huminuk, Grand Council Treaty #3

Brenda Robertson, Mental Health Nurse, Kenora District Jail
 Marcel Penner, Director, Crisis Response Services (via OTN)
 Steve Walker, Superintendent, Kenora District Jail
 Patti Fairfield, Executive Director, Ne-Chee Friendship Center
 Ashley Hendy, Clinical Manager, FIREFLY
 Jeff Duggan, OPP Manager, Ontario Provincial Police
 Josh Brodhagen, Probation Manager, Kenora Rainy River District, Youth Services for the Ministry of Children & Youth Services North Region (via Audio)
 Charlotte Caron for Laura Dowdell, Manager, Victim Witness Assistance Program, Ministry of Attorney General
 Amy Stamp, Youth Mental Health Court Worker, FIREFLY
 Barb Jackson, Atikokan Community Counselling & Addiction Services (via Audio)
 Ann Tkachyk, Sergeant for Dryden Police Service (audio)
 Logan Haney, Bail Verification/Supervision Program and Case Manager
 Sherry Baum, Executive Director, Community Living Dryden-Sioux Lookout (via audio)

<p>Introductions</p>	<p>New Committee Members were introduced:</p> <p>No new members were presented.</p> <p>Removal Committee Members:</p> <p>No members were removed.</p> <p>Discussion of what other membership needs to be represented at the table:</p> <ul style="list-style-type: none"> • Adult Protection Worker – Diane Pelletier indicated that she would discuss with her agency to determine which programs would be presented at the table for the Kenora Association for Community Living Diane Pelletier indicated that she will be presenting the Adult Protection Workers. • Treaty 3 Police Service – Bob Bernie will follow-up to request representation on the committee <p>This was completed by Bob & Jeff and they are waiting to hear from who this representative will be.</p> <ul style="list-style-type: none"> • There was a discussion that the following may be representation that is 	<p>SARA: will move this from the minutes.</p> <p>BOB & JEFF: to provide an update for the next meeting.</p> <p>MICHELLE GUITARD: will follow-up with KCA</p>
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	<p>required at the table:</p> <ul style="list-style-type: none"> - Dr. Zahlan - Kenora Chiefs Advisory <p>Invitations were sent to both representatives above and no response has been received.</p> <p>The Schedule One Facility was identified as joining the committee.</p>	<p>PATTI: will follow-up with the Schedule One Facility on identifying a representative.</p>
<p>Approval of agenda</p>	<p>Agenda was approved</p>	
<p>PRESENTATION: <i>Embedded lawyer program for Indigenous Persons and persons with mental health needs in the North</i> – A.J. Grant-Nicholson J.D., Policy Counsel, Mental Health Strategy, Legal Aid Ontario</p>	<p>A.J. Grant-Nicholson provided the following information on the initiative:</p> <ul style="list-style-type: none"> • This initiative assists persons who are Indigenous and who have mental health needs. • It provides services to people where they are at and places lawyers in the community. • The lawyers complete applications for legal aid as well as provide legal advice. The lawyers do not take on the individuals legal matters but do provide summary legal advice. • The lawyers would be embedded in the community and help refer individuals to the appropriate services. • The Hamilton area completed an environmental scan of their needs and this information will be provided to the group to review. • The Toronto area completed an environmental scan of their needs and this information will be provided to the group to review. • It was requested that the committee also complete an environmental scan of the area to provide this information to Legal Aid on where the potential sites would be and how much time a lawyer would need to be required for that site. 	<p>A.J.: will provide the environmental scan documents of the two sites to the committee to review.</p> <p>SARA: will put together an environmental scan document for the committee to complete that will be submitted to A.J.</p>
<p>Presentation: <i>Developmental Services Ontario Northern Region: Service Navigator</i>, Jolene Pulgiese</p>	<p>Jolene indicated the following:</p> <ul style="list-style-type: none"> • Passport Funding provides everyone with \$5000.00 each year for those on the waitlist. 	

	<ul style="list-style-type: none"> • The Top 5% of the waitlist is prioritized. • It was identified that there have been changes to the Urgent Response Process and now individuals have to go through 2 rounds of Urgent Response to get on the waitlist for permanent funding. <p>It was identified that committee members wanted more information from the adult protection worker at KACL on the changes to the Urgent Response process.</p> <p>Diane Pelletier indicated that there were some procedural changes to the urgent response process as the request now goes to the committee who then will make recommendations. KACL is no longer involved in the urgent response process and there is no worker as of July 1st, 2018 as this is now indicated as a Community Case Management.</p> <p><u>A presentation on the above will be coordinated for the next meeting with Kelly O'Brien to receive further clarification.</u></p> <p>It was also indicated that committee members wanted to have a further discussion with key partners around this issue as this will be a barrier for those involved in the criminal justice system to obtain permanent funding through the Ministry of Community and Social Services.</p>	<p>DIANE: to coordinate a presentation with Kelly O'Brien for the next meeting.</p> <p>SHERRY: to follow-up with a meeting with the network and key partners.</p>
<p>Approval of minutes of February 6th, 2018</p>	<p>The minutes were adopted by consensus.</p>	
<p>Business arising out of the minutes</p>	<p><u>Discussion</u></p> <p>It was indicated that in Kenora through the proceeds of crime grant that a pilot project for individuals 12-18 years of age was submitted and the working group is waiting on a response for this grant.</p> <p>It was also indicated that other diversion models for adults are being looked into. It was noted that this is a work plan item for the KRRDHSJCC and any discussions needs to incorporate those on this working group to not duplicate current efforts.</p> <p>Further discussion on this topic will be completed at the next meeting</p>	<p>ASHLEY, JEFF, BOB: to provide further updates on this for the next meeting.</p> <p>PATTI: to include committee members on these discussions moving forward. These members are: Chad</p>

The committee would like data shared on the outcome of the pilot project.

English, Michelle
Guitard, Sara Dias,
Diane Pelletier
SARA: to place this
item on the next
agenda for discussion.
JIM: will provide data
for the next meeting.

Presentation: *Developmental Services Ontario Northern Region – Estelle Cains*

SARA: will coordinate
with a presentation on
Passport Funding for a
future meeting

Highlights from the presentation were as follows:

- Once a referral is received to Developmental Services Ontario they have 20 days to respond
- If there is an urgency on a case it is easiest to pick up the phone and call Developmental Services Ontario to identify this urgency as they will accommodate as best they can to address the urgent situation

The committee indicated that they would like a presentation on Passport Funding

Constable Bob Bernie & Marcel Penner to follow-up on the information below:

Sara followed up with information shared by Kyla Storry on the numbers of calls received by police which was the following:

In 2014 there was 55 calls from police (this includes Treaty 3, OPP, Dryden Police Service and NAPS). Kyla did indicate that this is not a true picture of how many calls are from police as they do not collect information on secondary service involvement or referral sources. It is anticipated that over 50% of referrals for individuals that come to the Dryden Regional Mental Health Center are brought in by police.

In 2014 the Kenora Rainy River District Crisis Response Services received 559 referrals from the hospitals in the Kenora Rainy River District.

The police, hospitals and the crisis program collaborated on at least 300 of those calls

Based on this information the committee would like more information from the OPP in Kenora on mental health contacts and will request that Constable Bob Bernie provide

this to the committee.

Bob Bernie provided the following information on how many police contacts the OPP had that were mental health related which is reported from April 2015-November 2015 which is 88. Bob will be looking into more specific data on how many times the Crisis Response Services were contacted.

Constable Rhone indicated that there is way to run reports related to mental health calls that are district wide.

Bob Bernie indicated that a meeting has been set up with Marcel Penner from the District Crisis Response Services to discuss the above.

Bob Bernie indicated that a meeting occurred last week at FIREFLY and there have been 24 kids under the age of 16 that have accessed the Kenora Rainy River District Crisis Response Services. They are looking at an interim solution to be implemented until the end of March 2017 with the collaboration of the following agencies:

- OPP
- FIREFLY
- Kenora Chiefs Advisory
- Kenora Rainy River Child & Family Services
- Anishinabee Abinoojii Child & Family Services
- Kenora Rainy River District Crisis Response Services
- Lake of the Woods District Hospital

They will then be looking at funding for sustainability on the solution they develop.

Bob indicated that the conversation has been ongoing and there is currently a funding proposal being discussed with the District Crisis Response Services. This proposal is looking at a mobile crisis response model for both youth and adults.

Bob indicated that the District Crisis Response Services has been completing shift briefings with their officers and a collaborative protocol is being put in place for all police services in the province

BOB & MARCEL will provide an update on the collaborative protocol for the next meeting.

Provincial HSJCC

i. Transportation issues in relation to court ordered assessment for children and youth

Sara presented the information to the committee that was in the briefing note dated February 25th, 2016. The committee indicated that they would be taking the information back to their district tables for discussion and provide the KRRDHSJCC with any information that they may have around this area.

Ryan Baird from the Ministry of Children & Youth Services indicated that if a youth is currently under a services there may be potential for some assistance from their ministry. Ryan indicated that he would be discussing this with Chad English from our region to provide an update.

Chad provided the following response:

Youth Justice would only be part of funding transportation if the client is actively assigned to a Probation Officer. If the youth is in detention being held in one of our facilities, we will most certainly cover the cost of the transportation. If the youth is within 30 days of a release from detention (undertaking etc.) we can still look at funding. However, once 30 days passes, the youth is no longer under the Youth Justice supervision and therefore no mechanism to fund for transport.

The committee indicated that this is still a problem for s.34 assessments being ordered for youth who are out of custody. OTN is not the ideal option and without any adjudication there is no funding available for these use to obtain transportation to get to the assessment. The Psychologist comes to Kenora to complete the assessments.

The committee has requested that the above response and issue be sent to the Regional and Provincial HSJCC for further comments.

The Provincial HSJCC Committee has requested that this be sent to the Regional HSJCC (NCOR)

This issue has been taken to the NWCOR and is moving through their issues management process.

The NWCOR spoke to this issue and connected with FIREFLY who provided the following information:

SARA: to provide information to the table has it is received from the other District tables within the province.

SARA: to remove this items from the next agenda.

In response to the request for further details related to strategies we are implementing to address the potential barrier posed by travel for Section #34 Assessments, please see below in terms of the procedure we are currently following based on feedback from both Dr. Stambrook as to the limitations of utilizing OTN and Ginette Henwood, MCYS Program Supervisor for FIREFLY Youth Justice Programs.

STEP ONE

Once a Section #34 assessment order is received for a youth residing in a remote northern community, the FIREFLY Counsellor (Amy Stamp) contacts the client's legal counsel to confirm who the probation officer is and whether or not there are any existing mental health supports in the youth's home community (or wherever they are currently residing).

STEP TWO

Once a determination is made as to who best understands the youth's needs currently, follow up occurs to explore the possibility of the Section #34 taking place over OTN in the community OR if the youth would be better served by travelling to Kenora to participate in the assessment. Once additional feedback is received, a decision is made about whether the youth will be supported to travel to Kenora OR receive the assessment through OTN.

Youth Who Travel to Kenora for Section #34 Assessment:

Several factors are considered in deciding whether or not to support travel for the youth to Kenora for the assessment. This includes whether or not there is a parent / guardian able to accompany and supervise the youth while in Kenora due to potential risk factors. If travel is required, FIREFLY alerts MCYS Program Supervisor, Ginette Henwood as to the anticipated costs associated with the required travel.

Youth Who Received Section #34 Assessment via OTN in their home community:

In order for the assessment to take place over OTN, and ensure the safety and well-being of the youth, the support and presence of a responsible adult (mental health counsellor, remote community worker, probation officer, guardian / parent) is required.

It was indicated that funds will be available by the Program Supervisor through MCYS as needed.

Northwest District Advisory Committee Meeting: May 13th, 2016

Sara has been requested to sit on this Advisory Committee for Legal Aid Ontario. The first meeting occurred and there have been updates on the following:

- Legal Aid's Mental Health Strategy
- Aboriginal Justice Strategy
- Expanded Legal and Financial Eligibility for service levels.
- Thunder Bay is coordinating an Indigenous Court in Thunder Bay

NorthWest District Advisory Committee Meeting: November 18th, 2016

Meeting took place and Sara was in attendance the following were areas discussed:

- i. Legal Aid Ontario Mental Health Strategy updates

Strategy is underway and focuses on 3 Pillars:

1. Rights:

- Legal Aid has a special responsibility as a leading mental health rights advocacy organization in Ontario
- Need to expand financial and legal eligibility to deal with more mental health rights advocacy matters
- Recognize growing need for civil mental health rights advocacy in areas like police records, driver's license suspensions, etc.

2. Access:

- Relationships are transactional, services are siloed, assistance is reactive and hard to find, and that legal needs are multiple and intersectional
- Developing more embedded community-based services to increase trust, ease access to justice and provide

SARA: will request Legal Aid Ontario present at upcoming meetings of the information listed.

SARA: will request Legal Aid Ontario present at upcoming meeting of the information listed.

- continuity and connection across multiple legal services
- Partnering with trusted intermediaries to expand access to legal services
- Exploring development of more flexible, open-ended certificates to better address multiple and intersecting legal issues

3. Sustainability

- Too many mental health initiatives are one-offs that don't sustain change
- Introducing province-wide mental health training program in November 2016
- Expand mental health rights advocacy capacity around the province with greater mentorship and specialized services
- Foster great voice for clients
- Commit to long-term changes
- Continue the conversation

Mental Health District Leads

Sharon Scharfe has been identified as the Mental Health District Lead for Northwestern Ontario for Legal Aid Ontario.

LEADS are asked to update the training manual and create communities of practice within their districts.

Intake Tools for lawyers are to be localized and developed with community partners.

iii. "Core Training" for lawyers

Sharon indicated that Legal Aid is advocating for base training for lawyers.

Mental Health Leads will have access to the forensic bed registry

ii. New intake tools for lawyer

Sharon indicated they will be discussing intake tools at their next meeting and this will be unique to each district/region.

Sharon has indicated that she has completed training internally for staff and that full training will be coordinated for the spring.

Claudine Longboat-White provided the following update in regards to the Northwestern Ontario FASD Clinics:

SHARON: will provide updates at the next meeting on developments.

SARA: will make this a standing agenda items for the committee moving forward.

- A Northwestern Ontario FASD Clinic Referral Process map was shared with the group and this information is for internally use only and is not provided to families but to service providers
- There have been 10 clinics that have been completed
- In October of 2017 additional funds were received to completed 10 further assessments in addition to what was received for funding
- Youth justice clients get moved ahead of everyone on the list
- There has been a decrease in the number of individuals diagnosed
- Reasons for this decrease are because of the new guidelines as some people would have received a diagnosis with the old guidelines
- Previously the clinic was seeing the most serious cases
- Now the clinic only needs to have a confirmation from a reliable resource of consumption of alcohol in utero
- The clinic has partnered with FASD for research and will be contributing to a national and international database
- The added pieces to the diagnosis can now prolong the assessment being completed. Now affect regulation determination has be assessed and this will prolong the assessment
- *****Manitoba uses a screening tool specific to FASD*** This tool was provided to everyone for this meeting.**
- Non-Insured will not fund transportation for assessments in the far north
- FIREFLY has supported these costs and child welfare organizations as well
- Police can make referrals to the program and these referrals are normally being received once the individual has been to the RISK Table and there is confirmation of alcohol exposure

Treaty 3 Police: Crisis Services – Kris Miclash

This was tabled as Constable Miclash is no longer on the committee. The committee will require representation from Treaty 3 Police on the committee to address the identified issue above.

Will Scutt have indicated that he will follow-up with Treaty 3 Police for representation.

Bob has indicated that he has followed up with this and a representative will be provided for the committee.

Sioux Lookout OPP: Crisis Services – Nicholas Rhone

SARA: to remove this item for the next meeting.

BOB: will provide an update on this for the next meeting.

Bob Bernie has indicated that he will follow-up with The Sioux Lookout OPP for representation.

The representative is Inspector Daniel Davidson who has been added to the distribution list.

Patient Advocate Role – Derek Laffin

There is a concern that the role of the patient advocate office is not extended to outpatient clients who are in the community. The committee has indicated they require clarification on this.

Sara has received an update from the Psychiatric Patient Advocate Office in Thunder Bay around the above and it has been clarified that rights advice services are only to inpatient mental health Schedule 1 hospitals and to clients on Community Treatment Orders in hospital or community. There are no other rights advice services. There is a responsibility for a health practitioner to provide “rights information” if declaring a person incapable for treatment, admission long-term care etc. as to their college directive.

The committee would like clarification on if rights advice is offered to individuals who are to be admitted to a long-term care facility.

The committee would also like to have a presentation and dialogue around this for an upcoming meeting.

Sara has received further information from the Psychiatric Patient Advocate Office in regards to the above and it has been indicated that they do not provide rights advice for individuals found incapable for long-term care admissions They only provide rights advice to individuals in Mental Health, Schedule 1 Psychiatric Units or individuals on Community Treatment Orders for treatment incapacity.

The Psychiatric Patient Advocate Office provided an article on Consent and Long-Term Care that was provided to the committee prior to the meeting for review.

Sara will follow with the information below:

Patient Advocate Role – Derek Laffin

There is a concern that the role of the patient advocate office is not extended to outpatient clients who are in the community. The committee has indicated they

SARA: will contact the Patient Advocate Office to request a presentation for the next meeting

	<p>require clarification on this.</p> <p>Sara will follow-up with this once there is time in the agenda for coordination of this presentation.</p>	
<p>Updates on the Work Plan for 2018-2019</p>	<p><u>Information Sharing Network Development: Criminal Justice Service Agreement & Navigation Maps</u></p> <p>The indicators have been finalized by the parties that have signed onto the agreement and Data from 2017-2018 for all 4 Quarters is being requested to be submitted. A report will follow after the third year of data from 2018-2019 has been submitted. This report will therefore be completed in 2019 to be presented to the KRRDHJSCC.</p> <p>The navigation maps require some updating which will be made within the next few months. The maps at the present time can be found on the Canadian Mental Health Association, Kenora Branch's website at www.cmhak.on.ca if anyone would like copies.</p> <p>A meeting occurred with the Ne-Chee Friendship Center to update the navigation maps and currently Sara is waiting to hear from the developer on these to disseminate to staff.</p> <p><u>Developmental Services Ontario:</u></p> <p>The following are the number of individuals involved within the Court Diversion/Court Support Program who have a cognitive disability:</p> <p><u>In Quarter 3 for 2017-2018:</u></p> <p>0 individuals waiting for Diagnosis 1 individuals waiting for completion of the Developmental Services Ontario Application Package 3 individuals completed Developmental Services Ontario Application Package and are waiting services 5 individuals receiving services 3 individuals who have accessed urgent response</p>	<p>SARA, DIANE, MICHELLE & PATTI: will update the committee at the next meeting.</p> <p>SARA: to provide an update for the next meeting.</p>

Sara will request the same information from CMHA Fort Frances, Court Diversion/Court Support Program.

The Dual Diagnosis Collaboration Agreement has been signed and training has occurred with CMHA Kenora Branch staff in regards to the shared program for staff to assist with communication in regards to ongoing high risk behaviours and other information in a consistent and efficient way.

There currently is one individual who has been admitted to the Dual Diagnosis Bed at this time.

The sub-committee has met and reviewed the first year data and will continue to track the indicators identified.

It was identified that there is a transitional coordinated position through Developmental Services that assists youth who have a developmental disability who are transitioning from youth services to adult services. This position was indicated works with Child Welfare organizations to assist with coordinating a transition plan. The committee would like a presentation on this position moving forward.

Mobile Crisis Model Reviews:

Presentations will be coordinated around different models within Northwestern Ontario that are being developed to support mobile police crisis services. The models to review are the following:

- Sioux Lookout OPP
- Thunder Bay Police Service with CMHA Thunder Bay

Presentation occurred at today's meeting and discussion will follow for the next meeting.

Sub-Committee has met and is currently reviewing data to determine next steps.

RIKKI & MICHELLE: to provide numbers for CMHA Fort Frances

SARA & DIANE: to provide an update for the next meeting.

SARA: will connect with Kelly O'Brien to coordinate a presentation at a future meeting.

MARCEL: to provide updates at the next meeting in regards to the work the sub-committee is completing.

Forensic Training:

The sub-committee has begun to meet to discuss the topic for the next training that will be occurring in September of 2018 in Kenora. The following are the topics for the conference:

- *FASD within the criminal justice system*
- *Concurrent Disorders and models of intervention*

Training has been set for Kenora for September 25th & 26th, 2018 and registration, and agenda has been disseminated.

Inventory of mental health & addiction resources available within First Nation Communities within the NorthWest LHIN:

Meeting with the sub-committee has taken place and discussions are being had around what information for the resource will be of benefit. A meeting has occurred with Connex Ontario with the sub-committee and updates will be provided at the next meeting.

Connex Ontario has indicated that they would like to support this work by incorporating the following into their dashboard:

- Nursing Stations
- Nursing Stations which have OTN capability
- Residential Treatment Centers that are on First Nations Communities

The working group will continue to move forward to develop the directory via electronic and paper and will continue to engage in discussions with Connex Ontario on the above and provide further updates.

The current template has been sent to the developer and once completed this will then be shared with Connex Ontario.

Meeting with Ron identified the following:

- In April of 2018 Connex Ontario will be moving to one number for all services (mental health, addictions, gambling) and there will not be 3

SARA, SHERI, NANCY, NAN: to provide an update for the next meeting on developments of the conference.

SARA, SHARON, DIANE & JENNIFER: will provide updates for the next meeting.

separate phone lines.

- Ron indicated that in regards to the workplan item Inventory of mental health & addiction resources available in First Nation Communities within the Northwest LHIN the following can be created for the group in Connex Ontario:
- Identify services by population, age range, Indigenous
- Can match the needs of clients to services
- Can track availability of services
- Can create a secure log for users and this would allow for tracking of who is accessing the information
- Can create the system which is open to the public so anyone can search the information
- Depending on which approach is chosen by the committee this can be changed at a later time
- This information in the system would be reviewed yearly and therefore kept up to date
- Connex Ontario could connect to nursing station to update information

The committee indicated that they would like to develop a dashboard that is available to the public and is not password protected.

The dashboard is currently being developed by Connex Ontario.

There have been updates made to the inventory and the link to the inventory will be sent to all committee members and can be found for future reference on the CMHA Kenora Branch website at www.cmhak.on.ca under the Get Involved Tab which then you click on the KRRDHSJCC Committee.

Form 2 Protocol:

Form 2 Navigation Map and information was approved by the Mental Health Court

SUB-COMMITTEE: will follow-up with Ron on that status of the dashboard.

SARA: to provide an update for the next meeting.

Stakeholders Group and has been disseminated to the Justice of the Peace's, community agencies, clients and families.
The navigation map can be found on the Canadian Mental Health Association, Kenora Branch's website for future reference at www.cmhak.on.ca.

There was an inquiry on what occurs if someone is not admitted on a Form 1 after being sent to the hospital on a Form 2. It was indicated that:

- For Non-First Nation individuals medical services transport individuals
- For First Nation individuals non-insured health benefits will transport

At this time the Mental Health Court Stakeholders Group will be requesting follow-up from the Lake of the Woods District Hospital in regards to setting up a formal protocol with the Kenora Courts. This will be discussed in the next coming year at the meetings and updates will be provided to the KRRDHSJCC.

Form 1 Agreement Development:

Currently the sub-committee has not met as not all parties have been available on holidays. The sub-committee will look at meeting prior to the next HSJCC committee meeting to provide an update.

It was indicated by Carol & Brenda that the reason the committee has not met to date is due to new developments occurring around psychiatry access at the jail. There is an agreement with the Royal Ottawa Hospital to use OTN services for access to psychiatric services. Dr. Zahlan would be the chief psychiatrist. This agreement starts December 7th, 2016 and the psychiatrist via OTN will prescribe and can Form 1 to the Lake of the Woods District Hospital. The process of how the Doctor will Form 1 an individual will be discussed with Dr. Zahlan and will be reported to the committee for the next meeting.

This pilot is being started in Kenora and then Fort Frances and will occur every Wednesday.

Dr. Zahlan will be meeting with the sub-committee to discuss the above process.

The committee is waiting to hear from the Kenora District Jail on how to move forward with this item.

There was some discussion on if psychiatric evaluations around formability under the Mental Health Act can occur over video or OTN.

The Form 1 Collaborative Agreement has been signed by all parties and is finalized.

Development of Post Custody Enhancement Program Collaboration Agreements

A meeting has occurred between CMHA Kenora Branch and the Lake of the Woods District Hospital to identify the issues around release of individuals from Mental Health Court. A further meeting was set up with the Kenora Crown's Office to discuss and a follow-up meeting is occurring in August 2017 with the Court User's Group.

A presentation on the Red Bag Program within the province of Ontario will be set up for the committee.

PRESENTATION: *Discharge from Distant Court Protocol*, Khatija Laloo, Corporate Lead Institutional Services Ministry of Community Safety and Correctional Services

Khatija Laloo provided the following highlights:

- Criteria for the DDCP are: Inmates, 18 years or older, who will be released from a distant court and are identified as vulnerable, with no ability to retrieve essential property from the facility and when released at the distant court. It is up to the local institution to define what a distant court is.
- Vulnerable persons who have a diagnosis or symptoms of altered mental capacity.
- Process is that the gap in service for the inmate is identified.
- The institution has an internal process that is followed.
- The DDCP will be implemented to all institutions who house remand inmates across the province of Ontario over 2018. This will be a phased approach with sites in the province.
- Proposed sites:
 - Easter Region – OCDC expansion and OPP OTP
 - Central Region – Vanier Centre for Women and OPP OTP
 - Western Region – South West Detention Center (SWDC) expansion and OPP OTP
 - Norther Region – North Bay Jail and OPP OTP

The presentation slides will be forwarded to the committee for review.

Brenda Robertson will follow-up with Steve Walker from the Kenora District Jail to discuss this program and provide an update to the committee for the next meeting.

Patti also identified that the Lake of the Woods District Hospital received a Post Custody Worker .5 FTE that is being used for relapse prevention programs at the Kenora District Jail.

BRENDA: to provide an update for the next meeting.

	<p>Rapid Intervention Services Kenora (RISK) data review and system issues identified and discussed with Regional & Provincial HSJCC Committees</p> <p>The data is being reviewed by the RISK Steering Committee and a meeting has been set up with FIREFLY and a meeting has been requested with KCA. Information from this meeting will be shared with the committee at the next meeting. Specifically the focus of the meetings are to provide the data that indicates that 12-17 years of age are the highest age demographics of cases being presented to the table at 64%.</p> <p>Data from June 2017 to April 2018 was shared and there were 33 Discussions and 1 of these was a family. Highest age demographic is youth ages 12-17 years of age at 37% that met the Acutely Elevated Risk Definition. Top Risk Factors: Mental Health, Drugs and Alcohol 82% of Overall Risk was lowered.</p> <p><u>The following question has been posed to the NWCOR for discussion based on the data review:</u></p> <p><u>What is happening provincially around inter-ministerial partnerships to address the underlying issues that create barriers to children attending school on a regular basis?</u></p> <p>The Sub-Committee is working on coordinating the Annual Forum. Information on this will be shared with the committee.</p> <p>ALL IDENTIFIED COMMITTEES WITHIN THE WORKPLAN WILL REVIEW ALL FINAL DOCUMENTS FOR APPROVAL TO SEND TO THE DISTRICT HSJCC COMMITTEE FOR DISSEMINATION.</p>	<p>SARA, BOB, ASHLEY & MICHELLE QUEEN: will provide the group with further updates for the next meeting.</p> <p>SARA: will provide an update on this issue.</p>
<p>District Items of Discussion</p>	<p>a. Transportation Costs for Individuals involved within the criminal justice system.</p> <p>The committee was notified that the Kenora Rainy River District Mental Health & Addictions Network is currently looking at accumulating costs associated with transportation needs of individuals within the mental health & addictions network. The committee has requested to know how much funds are being spent on individuals within the criminal justice system in regards to the following areas:</p>	<p>JEFF, BOB & JIM: will provide costs for the next meeting.</p> <p>ALL: Committee members to send Sara this information as she will accumulate this and send to the KRRDMHAN.</p>

- Ongoing transportation issues for those individuals being released from custody.
- Lack of connections within communities for ongoing transportation.
- Difficulties with transitions of clients between transportation types especially for clients with disabilities.
- No same day medical appointments to Winnipeg for individuals to attend which poses great difficulties for clients in regards to coordination of accommodation etc.
- Bus access/times are not accommodating for clients or service providers to assist.
- Clients have had to rely on emergency services to transport to another community for access to care (such as the schedule one facility)
- Some communities have no bus service and rely on police service to transport clients for access to care (such as the schedule one facility)
- There are ongoing Northern Travel Grant restrictions for specialized treatment that require provincial policy changes

Jeff Duggan indicated that the OPP system has another code in their system that identifies mental health calls however does not break this out into cost.

b. Detox Utilization by clients involved within the criminal justice system.

It has been identified that service providers are utilizing the Morningstar Detox Center as a housing unit for individuals involved within the criminal justice system who are not appropriate for the service.

Patti indicated that there are many individuals who are at the Detox facility who are there because they are waiting a bed in a long-term care facility.

There are other individuals who need access to a capacity assessments and can't afford this and then are admitted to the Detox Facility to then have their capacity assessed.

The committee would like to know how other communities are managing these two issues.

No other communities have responded to this inquiry.

Patti indicated that acute care beds at the Morningstar Detox Center are being used at times for individuals waiting to be admitted to long-term care or for individuals being released from custody through the Post Custody Enhancement Program.

It was indicated that there were 7 individuals turned away just recently due to not having any beds available.

c. Post Custody Enhancement Program areas of support that committee can assist with.

It has been identified that there are ongoing issues around individuals being adjudicated in court who have significant mental health and addictions issues without the Post Custody Enhancement Program being aware of their adjudication and not being able to assist properly.

Sara will be setting up a meeting with the Kenora Crown's Office to discuss the above issue and develop a service agreement with the Kenora Crown's Office where appropriate.

This meeting will be occurring within the next few months and the group will also be meeting with the Court Users Group.

This meeting took place and information sharing has begun and further follow-up will be requested as issues arise.

d. Discharge of clients from jail without medication

It was identified that there are a large number of individuals who are being released from custody without proper discharge planning and communication with the Kenora District Jail.

The Kenora District Services Board indicated that if there is anything related to clients who are a part of the KDSB that they can assist with the transitioning planning.

A meeting will be set up with the Court User's Group at the Kenora Courthouse to discuss the above. The following individuals have identified wanting to attend this meeting:

- Brenda Robertson
- Sarah Stevenson
- Jennifer Reimer
- Sara Dias
- Jessica Gilbertson
- Kylie Holmstrom

PATTI: to provide further updates to the committee on this issue.

PATTI: will provide an update on any further developments for the next meeting.

BRENDA: to provide an update for the next meeting.

This meeting occurred and communication has begun amongst service providers to mitigate the issue and will be monitored within the next few months.

Communication is ongoing.

e. Discharge Protocols

There was discussion around the lack of consistency around discharge protocols of individuals from mental health court from the jail. Discussions have been had and the court office will be following up with the jail. There were discussions on the realities of not being able to predict what happens in court for clients which disrupts any seamless discharge process. Lawyers and the courts have indicated that they will do their best to ensure that communication of discharges be discussed with service providers.

Communication is ongoing.

This has improved and we will monitored for the next meeting.

f. Clinical Pathway to Care for Clients Withdrawing from Crystal Meth

Patti indicated that there is a development of a working group to discuss this item. The group will be led by Bruce Siciliano, Vice-President of Mental Health & Addictions Programs for the Lake of the Woods District Hospital. The chair persons of the committee have been invited to participate in this working group.

A discussion on what the pathway of care is individuals withdrawing from crystal meth needs to be identified. The following individuals will be a part of the sub-committee once they meet:

- Carol Peterson
- Sheri Norlen
- Bob Bernie
- Jessica Gilbertson
- Jim Nield
- Patti-Dryden-Holmstrom
- Sara Dias
- Ann Tkachyk

Ann from Dryden Police Service indicated that they have significant issues with having individuals coming into custody under the influence of methamphetamine and are in acute withdrawal. The Detox is not being utilized which is posing a great issue for these clients.

JESSICA, KYLIE, BRENDA & MICHELLE QUEEN: to provide updates for the next meeting.

PATTI: to provide an update for the next meeting.

ANN: to provide an update for the next meeting on this issue.

	<p>g. <u>NEW ISSUE:</u> In custody client transportation to Court</p> <p>It was identified that inmates are not being transported to court when the remand warrant indicates that they are to appear in person. It was indicated that there are circumstances where inmates will not be transported due to security issues. If this is the case this will need to be communicated to the Court. There was also a discussion if individuals could therefore appear by video if this was the issue and it was identified that where currently Mental Health Court convenes does not have access to video equipment. Therefore the court would need to have any video matters done right at the beginning upstairs on the third floor of the courthouse. Court services will be looking into video equipment for mental health court.</p> <p>h. <u>NEW ISSUE:</u> Remand of inmates in Mental Health Court</p> <p>It was identified that individuals involved in Mental Health Court are being remanded for extensive periods of time. It was identified that there are ongoing reasons why this was the case which the group identified as the following:</p> <ul style="list-style-type: none"> • Housing issues • Access to psychiatric assessments and turnaround times for assessments • Unreasonable conditions for release • Access to treatment services • Long-wait lists for community living resources once individuals are approved for developmental services by Developmental Services Ontario • Lack of wrap around services for some inmates <p>i. <u>NEW ISSUE:</u> Mental Health Court Scheduling</p> <p>It was identified that in the summer months the court was not being scheduled consistently.</p>	<p>SARA: to place this issue on the Mental Health Court Stakeholders Agenda for further discussion and monitoring.</p> <p>SARA: to send the Housing issues to the NWCOR for discussion SARA: to place the rest of the issues on the Mental Health Court Stakeholders Agenda for discussion.</p> <p>SARA: to place the rest of the issues on the Mental Health Court Stakeholders Agenda for discussion.</p>
<p>Standing Program & Committee updates</p>	<p>a. <u>Youth Mental Health Court Worker</u></p> <p>Amy Stamp provided the following update:</p> <p>Kenora:</p>	

- 18 Individuals supported by the program
- 11 individuals in Mental Health Court
- 3 individuals on diversion
- 1 individual up for a potential diversion
- 1 individual successfully complete diversion
- 5 s.34 assessments

Dryden:

- 12 individuals supported by the program
- 9 individuals on diversion

b. Mental Health Court Diversion/Support Workers

CMHA Kenora Branch provided the following update:

- 42 individuals participating in Mental Health Court
- 20 individuals supported through Court Program but not participating in Mental Health Court
- 9 individuals entered into Mental Health Diversion
- 3 individual approved for Mental Health Diversion
- 1 individuals awaiting Diversion Assessment through Forensic Psychiatry Program at CMHA Kenora Branch to determine eligibility
- 1 individuals successfully completed Diversion
- 14 individuals awaiting a Forensic Assessment
- 15 Number of Dual Diagnosed Clients

CMHA Fort Frances did not provide an update.

c. Mental Health Court

Issues identified through the court were identified under Districts Items for Discussion above in items h and i.

There was a discussion of having an information update on the Youth Mental Health Court Position through FIREFLY as there is some confusion on the edibility of the program.

d. Drug Court

It was indicated that currently this court does not have any clients participating.

AMY: to present at a future meeting.

PATTI & BOB: to provide an update for

The number of cases are small as cases are complex. The discussion has been how the court can support withdrawal of clients appropriately. Meth is an ongoing program currently and the length of time it takes to withdraw from this poses difficulty in engaging clients in the process as clients during withdrawal become paranoid. **The question has been how service providers within addictions can educate the courts on this process and what the appropriate length of stay needs to be.**

The members will be having a meeting with the working group on how they will be addressing this.

It was also indicated that currently there are 3 individuals within this court and meth is an increasing substance of choice for individuals involved within the court.

This is a new workplan item for 2018-2019 and training on the Drug Court Model will be coordinated moving forward.

e. Youth Service Collaborative

It was indicated that the discussion is how this collaborative fits with the Youth Wellness Hub.

f. Indigenous Bail Program

Pikangikum's Program is now up and running.

There is an increase from the Sioux Lookout and Dryden area.

Bail Beds will be developed in Kenora in partnership with the Kenora Chiefs Advisory

f. FASD NW Ontario Regional Network Update

This was tabled as Sherry Baum left the meeting early.

There was indication that there is now a FASD Case Worker that is permanent funding at FIREFLY for this and there are approximately 100 people on the waitlist for assessment.

The committee would like a formal presentation on this at some point at a future meeting.

September 26th, 2018 there will e a clinic in Kenora and in October there will be a clinic in Sioux Lookout.

g. Substance Abuse & Mental Health Task Force

the next meeting on this issue.

SUB-COMMITTEE: to provide an update for the next meeting.

MICHELLE GUITARD:

to provide further update for the next meeting.

SARA: to coordinate a presentation at a future meeting.

The session occurred on June 18th, 2018 on Methamphetamine.

h. Healthy Community Task Force

This was tabled as Lindsay did not have the information for this meeting.

i. Risk Table

Further training is being coordinated for October 5th, 2018 at the Northwestern Health Unit for anyone that would like refresher training.

There has been new agencies identified that are participating at the table.

Yearly forum is being coordinated by the Steering Committee.

j. Red Circle Table

Tabled as there was no representation at today's meeting.

j. DARRT

Tabled as there was no representation at today's meeting.

k. Forensic Services for Children & Youth in Ontario

October 11th, 2018 will be an information session around the role of the ORB. Save the Date has been forwarded.

l. Grand Council Treaty 3

No updates at this time as Arthur was not present at today's meeting.

m. NorthWest Center of Responsibility (formerly the Regional HSJCC)

i. Virtual Meeting Evaluation Review

ii. Education Session Report Back Review

iii. ISSUE: Underlying Issues Preventing Youth from Attending School on a Regular Basis

iv. Funding Strategy Updates

v. Future Training Dates for membership

vi. Evaluation Phase One Review by the Lakehead University

vii. Evaluation Updates

viii. Learning Session – October 31st, 2018 at 12:30 p.m.-1:30 p.m.

SARA: to provide updates as meetings occur.

	<p>ix. ISSUE: Transfer of Care to Schedule 1 Facilities from Rural Areas</p> <p>n. Provincial HSJCC</p> <p>i. Next Meeting is September 18th, 2018 which will be a Visioning Day to reassess the Provincial Table's role and purpose</p> <ul style="list-style-type: none"> o What are their strengths and weaknesses? <p>The committee identified the Provincial Strengths as the following:</p> <ul style="list-style-type: none"> o Secretariat support o Hospital and Police Protocol Toolkit that was developed o Ongoing support on best practices on issues that are sent out <p>The committee identified the Provincial Weaknesses as the following:</p> <ul style="list-style-type: none"> o Only focused on Thunder Bay which is not representative of all of Northwestern Ontario o Issues identified and taken to the provincial committee are not resolved and there is not feedback loop back to the committee. o Lack of equal representation from Northwestern Ontario at the table o Difficult to advocate or understand issues when there is only one representative from Northwestern Ontario on the Provincial HSJCC Committee o Does not provide equal support to all areas of the province. o Need more focus on Indigenous issues as a Provincial focus. <p>ii. Aging and Justice System</p>	<p>SARA: to provide updates as meetings occur.</p>
<p>New Business:</p> <p>a. HSJCC Training/Webinars</p>	<p>The following training and webinars were disseminated:</p> <ul style="list-style-type: none"> - Reflecting on the Past Year and Looking Ahead <p>All webinars and recordings can be found on the HSJCC website at: hsjcc.on.ca</p>	

<p>b. Robb Nash Event</p>	<p>Sub-Committee has been struck who is Sue Devlin, Candice Kerkermeier, Sara Dias and Amy Stamp. Committee is looking at potentially a date in the Fall of 2018. There was some discussion of issues around potential transportation barriers for students to attend. Michelle Guitard indicated that she would be following up with this. Currently the group is waiting on approval to move forward with the content within the schools. This currently is on hold.</p>	<p>SUE, CANDICE, AMY & SARA: to provide an update for the next meeting. MICHELLE GUITARD: to provide an update for the next meeting.</p>
<p>c. Legal Aid Ontario Mental Health Strategy Updates</p>	<p>i."Core Training" for lawyers ii. New intake tools for lawyers</p> <p>Sharon indicates that she is currently working on the above and will provide updates at the next meeting.</p> <p>Sharon indicated that training is being coordinated for the fall of 2018.</p>	<p>SHARON: to provide updates at the next meeting.</p>
<p>d. Kenora Shelter Update</p>	<p>Henry provided the following update:</p> <p>There are 48 beds and 4 transitional housing units In Kenora in 2019 there will be a 20 unit Supportive Housing Unit that will be built and supports will be put in place with organizations for on site supports as there will be a space for service providers It was identified that the Shelter will be operating in February of 2019.</p>	
<p>e. Hospital Transfer of Care Protocol with the OPP</p>	<p>Bob indicated that locally there is an agreement with the Lake of the Woods District Hospital which is still be worked on. In the agreement there is a process on how the hospital will respond to police attendance. The hospital when the police attend signs off so that the officers can be released and if not the hospital then pays for officer's time to stay. If someone is presenting as violent the officers will staff until the situation is de-escalated. If there is an alcohol or drug issue when police attend a call they are not lodging these individuals in their cells but are taking them to the hospital to be assessed or the detox center. Treaty 3 Police does not have this protocol. At the present time the wait time is less than 2 hours for police at the emergency department which as decreased from 5-6 hours. There is a conversation that occurs with the</p>	<p>BOB & PATTI: to provide an update for the next meeting.</p>

	nursing supervisor as well at the hospital when police arrive.	
i. Collaborative Response Model Protocol	Currently this has been discussed with the District Rainy River Crisis Response Services which is waiting to be signed.	MARCEL & BOB: to provide an update for the next meeting.
f. Member Engagement Plan	The Plan was sent out for committee members to review. A presentation from the Provincial HSJCC on this will be coordinated at a later date.	SARA: to follow-up with Provincial HSJCC for a presentation at a later meeting date.
g. Ministry of Children & Youth Services – Protection Services for 16-17 Year Olds	This was tabled as Sean Spencer & Bill Leonard were not present at the meeting.	BILL & SEAN: to provide an update for the next meeting.
h. Addition of a mental health nurse at the Kenora District Jail	Dianne Longe is an additional mental health nurse available at the Kenora District Jail.	
i. Psychiatric Consultation Process for the Kenora District Jail	Dr. Gelati sees inmates every Wednesday via OTN. The individual is place on the list to be seen if they can be safe in the OTN studio with the nurse and how long they will be in custody. They also require to have an outside provider to assist with transfer and implementation of any recommendations upon release.	
j. Coloring Outside the Lines: Innovations and Creative Community Responses: Provincial HSJCC Conference, November 4th-6th, 2019 in Toronto	The Provincial HSJCC has begun to coordinate the conference for next year which will be in Toronto. Information will be shared with the network as it is received.	SARA: to forward information on the conference as it is received.
k. Safer Ontario Act on Hold	The previous provincial government passed this Act in March of 2018, which would come into force on June 30 th , 2018. On June 29 th , 2018, the current government revoked the proclamation. There will be a full review of the legislation by consulting with experts, police services and the public.	

Next meeting date	Next meeting date is set for <u>December 12th, 2018 at 11:00 a.m.-2 p.m.</u> Location for meetings Firefly and OTN will be available for those that are unable to travel. Please indicate if teleconference is also required.	Please forward agenda items to Sara