



**Toronto Regional Human Services and Justice Coordinating Committee  
(T-HSJCC)  
Meeting Minutes  
December 16, 2016  
9:30 a.m. - Noon  
CMHA, 700 Lawrence Ave, West, Suite 480**

**Present:** Steve Lurie, CMHA; Paul Van de Laar, Cota; Domenica Dileo, HSJCC; A Kathy Chau, CMHA; Andrew Graham, Cota; Susan Davis, Gerstein Centre; Natasha Bartlett, Fred Victor; Patricia Pagnani, Toronto Bail Program; Amber Kellen, John Howard Society of Toronto; Nicole Nosworthy, CAMH; Jennifer Altosaar, Toronto Network of Specialized Care; Dr. Samim Hasham, Pharmacist; Michael Burgess, Toronto Police Service; Sarah Greig, SEHRC, Jonathan Berges, CAMH; Enoch Landau, CAMH

**Call-in:** Charissa Levy, Toronto ABI Network; Chris Boddy, Toronto Police Service; Judy Moir, CHIRS

**Regrets:** Debbie Lynch, CTYS, New Outlook; Mary Jarrell, MAG; Sandy Simpson, CAMH; Katie Almond, Probation and Parole; Gerald Ngangue, Christian Horizons; Melody Little, Correctional Service Canada; Jennifer Gravelle, Correctional Service Canada; Linda Ngan, Toronto ABI Network; Nancy Blades, Cota; Jacqueline Phan, CAMH; Scott Large, TSDC; Paula Beard, LAO

**Welcome and Introductions**

Everyone introduced themselves. Samim Hasham was welcomed as the rotating Co-chair of S-HSJCC.

**Review and Approval of October 7, 2016 minutes**

The minutes of October 7, 2016 were approved.

**Update from the Service Resolution Project:**

At the last T-HSJCC meeting Paul Van de Laar, Charissa Levy and Nikki Nosworthy were asked to explore various options.

Paul Van de Laar thanked the CAMH team for their engagement contribution.

Nikki Nosworthy reported that they had meetings with the FOCUS teams, SPIDER and Health Links.

They learned that SPIDER addresses complex care for individuals using Toronto services. FOCUS teams deal with prevention issues brought by the Toronto Police Service. They do not have a justice focus. These tables are a last resort.

Themes discussed:

- Hard to say how these teams will work given that they are new tables. Some HSJCC committee members are members at these tables.
- They address elevated risk with current situations dealing with the justice system or elevated risk around the health system.
- Complex client situations can now be brought to multiple tables.
- FOCUS tables have similar structure that the Jason Newberry HSJCC report recommended.
- It was acknowledged that there are opportunities for alignment

It was recommended that a Coordinator be hired to work one day per week. This person will engage with the Health Links, FOCUS and SPIDER. Goal is to bring more collaboration to the table. HSJCC committing \$20,000 to the project.

Themes discussed: What do we want to evaluate by March 2017?

It was acknowledged that the Coordinator will need agreement to be effective and act, can't just be an advice position. This position can be a seconded staff from an agency. Need to be realistic of problems we can solve given that housing is an issue. What are the skill sets of the Coordinator? Not just an admin position.

Next step: Develop a job description and posting. Circulate to only HSJCC members and Partners. It was suggested that the Justice Mental Health Network be included. Continue working with the CAMH team, access to \$20,000, have an evaluation plan to be re evaluated for the first year, including metrics.

The committee approved that the Service Resolution Committee take charge and become the Steering Committee of the project. Jennifer Altosaar, Charissa Levy and Paul Van de Laar are the main committee members. Kathy Chau can be contacted when Steve Lurie is away.

The CAMH team, Charissa Levy and Paul Van de Laar were thanked for their contribution.

**Presentation:** Sarah Greig, South Etobicoke Harm Reduction Coalition (SEHRC)

- PowerPoint presentation. The slide decks and video will be circulated with minutes.
- SEHRC is addressing concerns regarding access to methadone when people are in custody.
- Showed video of personal accounts of active opioid users discussing their experience going through the justice system.
- The impact of not having access to methadone while in custody. Within 6-8 hours one experiences withdrawal, can't think. When admitted to jail and they inform staff about their need to take methadone they feel that their needs are not addressed. Individuals who use opioids become sick very quickly when incarcerated. People brought concerns to the LAMP Community Health Centre. If the police knows one is a drug user when apprehended can be a liability. The SEHRC is a service provider coalition addressing trends.

- SEHRC conducted its own research and found that there is inconsistency in detention centre practices regarding methadone. Inmates cannot have methadone unless they have a prescription. Heroin users do not have a prescription for methadone.
- Given that there are different medical stages relating to the amounts of methadone used, once they leave the detention centres treatment starts from the beginning. It becomes a revolving door.
- Harm Reduction lens is grounded in best practices – World Health Organization United Nation report.
- Community members in south Etobicoke brought up community concerns about opiate users being arrested without access to methadone or suboxone while in holding. If the police know they are drug users they can be put at a disadvantage.
- Considerations discussed: Withdrawal symptoms negatively impacts individual preparedness for court including their ability to pay attention and understand legal proceedings.
- Opioid users express feelings of stigmatization from justice/correctional and medical staff attributed to their substance dependence.
- Opioid users needing ‘a break’ from using behaviours are known to commit crimes to enter jail system as defacto detox centres.

#### SEHRC, OUR ASK:

- For all inmates, including inmates on remand: Access to an addictions doctor/specialist within 24 hours of intake
- Access to methadone/suboxone with 24 hours of intake even for opioid users who only use street drugs
- A referral to harm reduction services and methadone prescribing services in the community upon release (so there is little to no interruption in methadone maintenance treatment which in turn decreases the likelihood of participating in risky drug using behaviour, overdose and crime to fund addictions)

Themes discussed: Changes to methadone treatment in 2013. Federal institute mandated to provide methadone. Provincial legislation does not have a mandate. What can our role be to help with the problem? There is an opportunity since the Ministry of Health has taken over the health in Corrections. To set a meeting with the medical chief at Corrections. What would it take to make access to addiction doctors with in 24 hours?

- It was recommended for the CAMH team to bring these concerns to CAMH. It was suggested that Amber Kellen and Sarah Greig to meet with the medical doctor at TSDC.
- Steve Lurie will bring concerns to the PHSJCC. Katie Almond is doing policy work at Corrections and he will debrief her on the situation.
- Sarah Greig was invited to join the committee.  
Susan Davis invited Sarah Greig to do the presentation to other networking groups.

Sarah was thanked for her valuable and informative presentation.

### **Action Item Follow-Up**

Kathy Chau reported on the New Toronto Courthouse (NTC). She and Amber Kellen had a teleconference meeting with Beverly Leonard from the NTC. PowerPoint will be circulated with minutes. Issues addressed: Space, Distance to travel/parking, safety, communication and consultations. The design is not finalized. HSJCC will be invited to participate in the discussion about space needs. Other sectors that are not part of MH will also be invited. Have a quarterly news letter that provides updates. Domenica Dileo will circulate to the HSJCC members. Moving forward there will be a consultation in March 2017. Who should attend? The court consortium will need a plan regarding who should attend the consultation and report back to the T-HSJCC. Questions: How are people going to be connected to services? How will people be connected to the safe beds network? Contact Kathy Chau, as she will send the names to Beverly Leonard.

Domenica Dileo reported that a TTC Tokens Ad Hoc Committee was set-up to coordinate and address the needs and gaps in relation to public transportation among people with mental health going through the criminal justice system. There is representation from the five courthouses. No decision has been made regarding TTC tokens for 2017. It was agreed that we maintain the status quo with a 10 cent increase for adult tokens starting in January 2017. The budget will increase by approx. \$150

### **Update from the Women's Justice Access: Project Overview**

Nikki Nosworthy reported on the project. CAMH has partnered with Fred Victor Adelaide Drop-in Centre. Working to build legal support on site.

- Build staff capacity
- Working with Cleo for staff training
- Develop an orientation guide
- Implementing workshops
- Engaging with different legal clinics to see if they can provide support
- Evaluation part of the project

Themed discussion: Initially College Park was part of the Justice Collaborative Project – How is College Park going to be part of this? It was suggested that we can have a Toronto HSJCC webinar on the work of the drop-in. The Enabling Change Training package can be used for the drop-in staff.

### **Review T-HSJCC Terms of Reference**

They have not been reviewed since 2010. What is the best process to review the Terms of Reference? Bring them to the Steering Committee or set a sub-committee? It was agreed to have the Steering Committee review them. People agreed that the objective are relevant.

### **Updates from the Toronto Local HSJCCs**

Deferred to the next meeting

### **Update from the PHSJCC**

Deferred to the next meeting

### **Actions**

- CAMH follow-up regarding bringing concerns of opioid users going through the criminal justice system to CAMH leadership.
- New Toronto Courthouse Updates.
- Service Resolution Updates.

**Next Meeting:** Friday, March 24, 2017 from 9:30 to noon at Cota, 700 Lawrence Ave. West, Suite 325 (Co-chairs meeting to follow).