



## Provincial Human Services and Justice Coordinating Committee Quarterly Newsletter September 2010

**Welcome** to the premiere edition of the Provincial Human Service and Justice Coordinating Committee's newsletter. Members of regional and local human service and justice coordinating committees (HSJCCs) will receive the newsletter on a quarterly basis. The newsletter will serve as a vehicle to move information across the provincial HSJCC network and share ideas about innovative practices and emerging issues related to persons with complex service needs who come into conflict with the criminal justice system. Within this inaugural edition of the newsletter, the mandate, priorities and activities of the Provincial HSJCC are highlighted. Within each coming issue you will hear updates about the work of the Provincial HSJCC as well as initiatives occurring within regional and local HSJCCs. You'll learn about new and promising practices and receive information about new research and articles or reports pertaining to issues related to persons with complex needs involved with the criminal justice system. You'll also learn about educational or networking opportunities occurring within the province.

Submissions for and comments about the newsletter are very much encouraged. This is your forum to share ideas and highlight the important work of your HSJCC, organization or program as it relates to the service population served by HSJCCs. Submission for the newsletter may include but are not limited to information about new or promising programs, service initiatives or partnership, educational opportunities or articles of interest. Submissions should be forwarded to Marion Evans [mevans@conestogac.on.ca](mailto:mevans@conestogac.on.ca). We look forward to hearing from you.

Provincial HSJCC Communication Committee

**Index** : Control/Click on the Section title to move to the section

- [Provincial HSJCC News](#)
- [Regional and Local News](#)
- [Innovation and Promising Practices](#)
- [Articles, Research and Media](#)
- [Provincial News](#)
- [Links](#)

### Provincial HSJCC Co-Chairs' Update

The Provincial Human Services and Justice Coordination Committee offers a provincial leadership mechanism to support the implementation of the Ontario government's policy framework (1997) for people who come into contact with the justice system and who have needs which can be met by one or more of the provincial human services systems collaboration.

While our biannual conferences have been hugely successful (and a lot of fun!), it is becoming clear our tiered level of responsibility (local, regional and provincial) is acknowledged as unique and has a level of success not enjoyed by other planning bodies.

This past year, CMHA – Ontario has provided, pro bono, a policy research analyst who has contributed significantly to the success of the work of the committee by assisting in the production of documents such as a provincial response to the Mental Health And Addictions Strategy discussion paper, the Mental health and Addiction strategy roundtable discussion, a survey of regional and local committees culminating in an HSJCC needs assessment report, a police/mental health collaboration policy brief and charter. Uppala and Michelle are wonderful assets to our team!

Work continues on ensuring that the provincial table can use its resources to meet its goals of:

- a) supporting the individual and collective efforts of Regional and Local Committees
- b) identifying solutions to systemic problems and policy issues
- c) promoting knowledge exchange.

This is YOUR provincial table. If you are involved in a local or regional table, you have representation to the provincial table through your appointee. The success of our work depends upon everyone's positive contribution. We look forward to your help in contributing to the overall success of our human services and justice coordination initiatives!

*Vicky Huehn and Lisa Cameron, Provincial HSJCC Co-Chairs*

### Provincial HSJCC Mandate

The Human Services and Justice Coordinating Committee network (HSJCCs) was established in response to a recognized need to coordinate resources and services, and plan more effectively for people who are in conflict with the law. Priority consideration is to be given to people with a serious mental illness, developmental disability, acquired brain injury, drug and alcohol addictions, and/or fetal alcohol syndrome.

The two primary areas of emphasis for the committees are:

1. to provide a planning table to bring together service providers to find solutions to the problem of the criminalization of people with the defined unique needs, and;
2. to develop a model of shared responsibility and accountability in dealing with this group of individuals at points of intersection with the justice system.

There are 14 Regional committees with 35 associated local committees. Each of the Regional committees appoints a representative to the Provincial HSJCC and these 14 representatives comprise the voting membership of the Provincial committee. There are ex-officio members from five provincial government Ministries including the Ministry of Health and Long-Term Care which funds the HSJCC network, the Ministry of the Attorney General, the Ministry of Community Safety and Correctional Services, the Ministry of Community and Social Services and the Ministry of Children and Youth Services. A number of additional ex-officio representatives have been invited onto the provincial committee representing key stakeholders such as police forces and Correctional Services of Canada.

The purpose of the provincial committee is to support the individual and collective efforts of Regional and Local Committees by the sharing of information and ideas as well as encouraging consistency while recognizing regional diversity. As well, when provincial service and policy challenges are identified the Provincial HSJCC will make recommendations for solutions to address these to appropriate government and other bodies as determined by the nature of the issues.

### **Provincial HSJCC Top Five Priorities**

The Provincial committee set the top five priorities for its policy agenda based on the input of the needs assessment done with the Regional Committees over the summer of 2009.

1. Police/Mental Health Services Collaboration
2. Clients with complex needs
3. Housing
4. Release from Court Custody
5. Mental Health Courts

As a result, the Police/Mental Health Collaboration project was initiated and is moving into its last stages with the report being prepared for submission to the Provincial HSJCC in the fall. For more details please refer to the article below. Work has moved forward on the other priorities as resources have permitted. This fall these priorities will be revisited and resource allocations revised accordingly.

## **Provincial HSJCC Activities**

The last year has been a busy one for the Provincial HSJCC.

- |              |  |
|--------------|--|
| July 2009    | Partnership with CMHA Ontario Division launched  |
| August       | Provincial HSJCC response to MOHLTC Every Door is the Right Door discussion paper - <a href="http://www.hsjcc.on.ca/Uploads/HSJCC%20Response%20to%20Every%20Door%20-%20FINAL.pdf">http://www.hsjcc.on.ca/Uploads/HSJCC%20Response%20to%20Every%20Door%20-%20FINAL.pdf</a>  |
| September    | HSJCC Needs Assessment Report<br><a href="http://www.hsjcc.on.ca/Uploads/Provincial%20HSJCC%20Needs%20Assessment%20Results%20-%20October%201,%202009.pdf">http://www.hsjcc.on.ca/Uploads/Provincial%20HSJCC%20Needs%20Assessment%20Results%20-%20October%201,%202009.pdf</a>   |
| October      | Provincial HSJCC Conference with over 400 attendees - <a href="http://www.hsjcc.on.ca/conference.aspx">http://www.hsjcc.on.ca/conference.aspx</a><br>Mental Health And Addiction Strategy Stakeholder Consultation With Provincial HSJCC   |
| November     | Co-Chair Position Established for the Provincial HSJCC – The new co-chair elected is a Crown Attorney from Ministry of the Attorney General  |
| December     | Provincial HSJCC response to Ontario Human Rights Commission’s Mental Health Strategy Public Consultation paper <a href="http://www.hsjcc.on.ca/Uploads/HSJCC%20Response%20to%20OHRC%20-%20December%2024%202009.pdf">http://www.hsjcc.on.ca/Uploads/HSJCC%20Response%20to%20OHRC%20-%20December%2024%202009.pdf</a>      |
| January 2010 | Police/mental health collaboration policy launched - <a href="http://www.hsjcc.on.ca/HSJCCReportsAndPresentations.aspx">http://www.hsjcc.on.ca/HSJCCReportsAndPresentations.aspx</a><br>Ontario Association of Chiefs of Police representative is appointed to Provincial HSJCC and begins attending provincial meetings |
| March 2010   | Official launch of new HSJCC Website and Resource Base - <a href="http://www.hsjcc.on.ca/ServiceResources.aspx">http://www.hsjcc.on.ca/ServiceResources.aspx</a>   |
| June 2010    | Provincial Forensic Network consultation with HSJCC Steering Committee   |

## Provincial HSJCC Embarks on Police/Mental Health Project

In October 2009, the Provincial HSJCC conducted a needs assessment of the Regional HSJCCs. As a result of identifying multiple needs, the Provincial HSJCC undertook a priority setting exercise to rank potential projects. The criteria which were utilized included opportunities that built upon existing successes, engaged multiple sectors, would benefit Ontarians in contact with the law, offered feasible solutions, and could build momentum within the Provincial HSJCC. With this in mind, needs pertaining to police/mental health collaboration was ranked as the highest priority.

There are multiple circumstances where police may encounter individuals with mental illnesses, including situations where the public or the families of people with mental illnesses ask for help, police apprehensions under the *Mental Health Act* or other legislation, arrests in which the accused person appears to have a mental illness, situations in which a person with a mental illness is the victim of crime, and police response to mental health crises out in the community. When assisting in these situations, police services often collaborate with other agencies across the province, including community mental health services, hospitals, corrections organizations, consumer/survivor organizations as well as the HSJCCs, to provide a more coordinated response. The current Provincial HSJCC project examines provincial issues related to police/mental health collaboration, and identifies successes and the challenges of these types of collaborations.

An advisory committee was convened, which is a working group of the Provincial HSJCC. Over the past six months, research for this project was gathered through three methods: a document review, a survey, and a series of key informant interviews. The document review consists of legislation, policies, academic articles and grey literature relating to police and mental health issues. Local and Regional HSJCCs were also surveyed to gather information about the police/mental health initiatives across the province. In addition, 25 key informant interviews were conducted across multiple sectors, including healthcare and mental health services, justice, corrections, consumer/survivor organizations and municipal and provincial police services; many of the key informants were also members of an HSJCC.

Research findings will be received and reviewed by the Provincial HSJCC, and next steps for moving forward will be determined by the Provincial Committee this Fall.

*Submitted by Uppala Chandrasekera, Policy Analyst, CMHA Ontario and resource to Provincial HSJCC*

## CMHA Ontario Joins Provincial HSJCC

In the summer of 2009, the Provincial HSJCC began working with Canadian Mental Health Association, Ontario. Michelle Gold, Senior Director of Policy and Programs and Uppala Chandrasekera, Policy Analyst, from CMHA Ontario joined the Provincial HSJCC as in-kind resources to support the policy capacity of the Provincial Committee.

Over the past year, CMHA Ontario has been assisting the Committee with provincial level work on agenda setting, policy research, and facilitating the development of policy options to support a coordinated and responsive human services and justice system in Ontario for people with mental illnesses and addictions, developmental disabilities and other special needs.

CMHA Ontario has already been involved with several initiatives on behalf of the Provincial HSJCC, including conducting a needs assessment of the Regional HSJCCs, preparing policy submissions regarding the 10 Year Mental Health and Addictions Strategy, responding to the Ontario Human Rights Commission's Human Rights Mental Health Strategy, and conducting research for the new Provincial HSJCC police/mental health project.

A review of this working relationship was conducted in May of this year, and both the Provincial HSJCC and CMHA Ontario are looking forward to continuing to work together.

*Submitted by Uppala Chandrasekera, Policy Analyst, CMHA Ontario and resource to Provincial HSJCC*

## Regional and Local News

### Durham Regional HSJCC - Meeting the Needs of Individuals in the Community

One of the primary mandates of HSJCCs throughout the province is to develop strategies to address the needs of individuals who present with complex, challenging issues that cannot be met effectively by any one provincial ministry or sector in our communities. As noted in the original Human Services and Justice Coordination Project report, the Project “was set up in response to a recognized need to better coordinate, resource and plan services for people with clinical needs who come into conflict with the law” (p. 1). Recently, the Durham HSJCC has responded to a situation that reaffirmed this important HSJCC mandate.

The Durham Regional Police Service (DRPS) member of the Durham HSJCC identified an individual in the community who had multiple contacts with police services and had used a variety of resources extensively. They were contacted once beginning in 2006, gradually increasing to 2 contacts in 2007, 5 contacts in 2008, 19 contacts in 2009, and 17 contacts by the end of June 2010, with 12 of these contacts occurring in June alone! Not only were the number of contacts increasing over time but the seriousness of the calls was also escalating, with the most recent incident resulting in her arrest based on a call to the police when she stated she had a knife and was standing in a school yard. The police and the Tactical Support Unit attended, the school was locked down, the kids were kept inside, and the individual was arrested. The police did not want to put her in front of the courts but felt they had no other options given the multiple calls and the gravity of the most recent incident. The DRPS came to the Durham HSJCC looking for effective strategies on how to deal with this individual with the hope of eliminating contacts with the police initiated by her. **The full article is at** <http://www.hsicc.on.ca/Uploads/HSJCC%20Article%20Durham.pdf>

## **Haliburton HSJCC: Ed from Haliburton County...An HSJCC success story...**

Ed had an extensive history dating back to 1997, with local Mental Health Services and Police Services. It appears that his circumstances generally worsened as he approached middle age. Police records indicate progressive offences, initially associated with alcohol use (thefts, mischief and threatening statements).

Ed was described as suffering from a long term Bipolar Disorder and acknowledged a history of drug and alcohol dependency. Medically, from a diagnostic/treatment standpoint Ed's file indicated a Mood Disorder with some ambiguity surrounding the Bipolar aspect. Apparently, initial medication trials demonstrated poor results and Ed subsequently indicated a clear preference to using herbal approaches, which he said worked better. At court, when Ed was 'high', he would turn down the assistance of the Mental Health court workers, claiming that they just thought he was crazy but that he knew exactly what he was and had no problems with being bi-polar because he got a lot done that way.

Despite these difficulties and living a somewhat rambling, marginalized life-style, Ed had developed strengths and resiliencies that enabled him to work hard, acquire property and play in a band. He also reported being married for about 8 years.

In early October 2009, Ed breached his probation order, had to be charged and taken into police custody. It was obvious that Ed was not his normal, feisty self; he had soiled his pants during the arrest, he was distressed, his socks were almost threadbare and he was in frail physical health. One of the officers helped Ed to clean up and found him some socks, and also called the new local Crisis Case Manager who advised he could be there in 5 minutes.

Thankfully, as a result of the Haliburton HSJCC's continuing efforts to promote collaboration amongst local agencies, the Officer was aware that a crisis worker had recently been assigned to work out of the Haliburton Highlands Mental Health Services (HHMHS) office in Minden. This information had been shared during a regular monthly HSJCC meeting the previous week.

The Crisis Case Manager (CCM) was already actively connected with Ed, as was a counsellor at HHMHS. Ed was to be transported for a bail hearing in Lindsay (an hour's drive away) within a few hours. His anxiety was increasing, and he needed a change of clothing. By collaborating, the police and the Crisis worker were able to respond to Ed's immediate needs, which improved the situation not only for Ed but also for the police. It was also agreed that the Crisis worker would accompany Ed to the bail hearing to continue to provide assistance and support. The possibility of Ed remaining in custody was a serious concern given his precarious mental and physical health.

Prior to arriving at bail court, the Crisis Case Manager contacted the Crown's office, another active HSJCC partner, and described the situation. By liaising with the Crown's office, the CCM and the Crown were able to create a release plan that addressed public safety issues, Ed's issues, and the fact that he had no one to sign bail for him. The release plan was sorted out by the time that Ed arrived at bail court.

This collaboration meant that not only was Ed released, but he spent very little time in the courthouse cells. As part of the release plan, the Crisis worker took Ed from bail court to the hospital. Upon release from hospital, the Crisis worker took Ed to the detachment to retrieve his belongings and then home. Ed agreed to engage regularly with his long-term counsellor from HHMHS. The release conditions were guided by a genuine concern for Ed's well-being and his access to treatment and support within his community, all of which inured to the benefit of Ed and the community.

Ed's experience that day left him with a positive feeling towards the police and he verbalized his gratitude for being treated so kindly. He was even joking; his spirits had obviously been lifted over the course of the day. Ed complied with his release conditions and the plan of care set forward, and was in steady contact with committee members over the following weeks.

With his physical health rapidly deteriorating, Ed was soon admitted to hospital. His only surviving, but estranged, family member was contacted and subsequently re-established a connection with Ed, thanks to the collaboration of several HSJCC members. A couple of months later, Ed was able to pass away in the community with dignity.

*Submitted by Lisa Cameron, Chair, Haliburton HSJCC*

## **Toronto Regional HSJCC Update**

The Toronto Regional HSJCC recently participated in a city-wide data gathering exercise to review service activity across the human service and justice sectors. Organizations within the local HSJCCs aggregated program data collected from their respective administrative data collection systems. Analyses of the aggregated data was limited by a number of factors including the inability to identify multi-service users, the relative response rate among programs within local committees and disparate data elements collected by human service and justice service providers. Despite these limitations, pooling data across service providers enabled comparison of service recipient profiles and service activity across local committees as well as across like service areas. It also provided a crude estimate of service level activity and service needs across the region.

In addition to a system-level data review, a number of the local HSJCCs have engaged in cross-sector knowledge exchange activities such as "lunch and learns" at their local court houses drawing both court personnel and community service providers. Topics have included the criminalization of persons with mental illness involved in the immigration process, concurrent disorders, and barriers to adequate housing. More recently, the four local HSJCCs within Toronto have begun to

plan for a Toronto Region HSJCC conference scheduled for March 2011 which will provide a forum to highlight emerging issues and practices.

To follow up on this article contact Linda Montgomery the HSJCC coordinator for all of the Toronto committees at: [linda.montgomery@sympatico.ca](mailto:linda.montgomery@sympatico.ca).

## **❶ Innovation and Promising Practices**

### **❶ Newmarket Youth Community Treatment Court**

Please join us in celebrating the development and implementation of our first ever Youth Community Treatment Court at the Newmarket provincial court. This new court is a wonderful addition to the Mental Health and Justice Program. These kinds of courts are currently operating in Ottawa and London and we've used some of their experiences and developed some new ideas to complement what they've done.

The mandate of the Youth Mental Health Court Program is to work with youth (ages 12 -18) who are in conflict with the law and who have mental health and or developmental issues. Anyone including families, individuals, and case managers can refer a youth to our program, simply by calling or emailing me Aara Amey of CMHA York Region.

The criteria are somewhat different than our adult program. In youth court we can work with suspected conditions therefore a diagnosis is not necessarily required. We also assist individuals who may have an acquired brain injury, developmental issues, chronic illness such as epilepsy, behavioural issues associated with adolescence and youth who have experienced trauma and grief.

Our court will be very dynamic as we have partnered with Addiction Services of York Region (ASYR) Family Service Association of York Region (FSAYR), Pathways, Sutton Youth Shelter and Operation Springboard. We have arranged for all of these service providers to be present at our Youth Community Treatment Court which operates the last Thursday of each month. This will allow youth to meet with front line workers providing services in addictions, housing, emergency shelter, employment, counselling, group therapy and justice. We are very excited about this opportunity to work cooperatively and collectively to provide the best possible care plan available.

We will continue to develop this program as we evolve. This court was made possible by the generous support of the Provincial Crown Attorneys office, Justice's Chauvin and Blouin and all of the dedicated and enthusiastic staff at our partner agencies. The Crowns are Joseph St. Michael and Elissa Kulpers; there are no dedicated Judges or Justice's.

*Please feel free to contact me should you have any further questions. Aara Amey, R.S.S.W  
Youth Mental Health Court Worker - Mental Health and Justice Team*

## Using Simulation to Engage Police in Learning about Mental Illness: The Impact of Realism on the Learning Process

Police officers are often the first responders to situations in the community involving mentally ill persons. Police contacts with individuals who have a mental illness have risen dramatically over the past few years, and police services are becoming increasingly aware of the need to provide officers with training beyond what is currently offered to new recruits in terms of mental illness and strategies for effectively engaging individuals who are presumed to have a mental illness. The objective of this study was to evaluate the impact of using simulation to educate police officers about mental illness and how to respond effectively to common critical incidents involving mentally ill persons they encounter in the community, using a mixed qualitative-quantitative design which included focus groups, surveys, and use of the Opinions about Mental Illness (OMI) scale.

*The full article is at* <http://www.hsjcc.on.ca/Uploads/HSJCC%20Article%20Durham.pdf>

## Articles, Research and Media

### At Home / Chez Soi

*At Home/Chez Soi* is a national research project to find the best way to provide housing and services to people who face mental illness and homelessness. A total of 2,285 people will participate across Canada, in Vancouver, Winnipeg, Toronto, Montreal, and Moncton. About half of participants will be provided with an apartment plus specialized support services, following the “Housing First” philosophy. About half will use existing services available in their cities. The study will generate evidence about client outcomes. It will also ask whether it costs less to provide marginalized people with real housing and services, compared to having people stay in hospitals, prisons, and shelters. *At Home/Chez Soi* has funding to provide services for 4 years.

*The latest update can be found at:*

<http://www.hsjcc.on.ca/Uploads/At%20Home%20National%20newsletter%20June%202010.pdf>

### Correctional policy for offenders with mental illness: Creating a new paradigm for recidivism reduction. *Law and Human Behavior*. Pre-pub. May 2010 (Abstract attached)

This comprehensive article analyzes the link between mental illness and criminal justice involvement and proposes a new paradigm based on findings that criminogenic factors predict recidivism better than mental status and that interventions that impact on those factors are required.

<http://www.hsjcc.on.ca/Uploads/Correctional%20policy%20for%20offenders%20with%20mental%20illness%20-%20paradigm%20for%20recidivism%20reduction.pdf>

-  **Criminal justice involvement, behavioral health service use, and costs of forensic assertive community treatment: a randomized trial. *Community Mental Health Journal*. August 2010. (Abstract below).**  
Jail diversion and forensic community treatment programs have proliferated over the past decade, far outpacing evidence regarding their efficacy. The current study reports findings from a randomized clinical trial conducted in California for frequent jail users with serious mental illness that compares a forensic assertive community treatment (FACT) intervention with treatment as usual (TAU). Outcomes are reported at 12 and 24 months post-randomization for criminal justice outcomes, behavioral health services and costs. At 12 months, FACT vs. TAU participants had fewer jail bookings, greater outpatient contacts, and fewer hospital days than did TAU participants. Results of zero-inflated negative binomial regression found that FACT participants had a higher probability of avoiding jail, although once jailed, the number of jail days did not differ between groups. Increased outpatient costs resulting from FACT outpatient services were partially offset by decreased inpatient and jail costs. The findings for the 24 month period followed the same pattern. These findings provide additional support for the idea that providing appropriate behavioral health services can reduce criminal justice involvement.
-  **Effect of full-service partnerships on homelessness, use and costs of mental health services, and quality of life among adults with serious mental illness. *Archives of General Psychiatry*. Vol. 67. June 2010. (Abstract only)**  
Article examines changes in recovery outcomes, mental health service & costs & quality of life associated with participation in FSPs for those with serious mental illness.  
[http://www.hsjcc.on.ca/Uploads/Effect%20of%20FSPs%20on%20homelessness%20\(June%202010\).pdf](http://www.hsjcc.on.ca/Uploads/Effect%20of%20FSPs%20on%20homelessness%20(June%202010).pdf)
-  **Legal experts debate jail for fetal alcohol offenders. *Ottawa Citizen*. August 17, 2010.**  
This fall, federal and provincial justice ministers will address the issue of people with FASD that come into conflict with the law.  
[http://www.hsjcc.on.ca/Uploads/10-08-17%20Legal%20experts%20debate%20jail%20for%20fetal%20alcohol%20offenders%20\(Ottawa%20Citizen\).pdf](http://www.hsjcc.on.ca/Uploads/10-08-17%20Legal%20experts%20debate%20jail%20for%20fetal%20alcohol%20offenders%20(Ottawa%20Citizen).pdf)
-  **Homeless and Jailed: Jailed and Homeless. *The John Howard Society*. August 2010.**  
Report explores the housing situation of adult men serving sentences in Toronto area jails, with focus on those that are homeless.  
[http://www.hsjcc.on.ca/Uploads/Homeless%20and%20Jailed%20-%20Jailed%20and%20Homeless%20\(John%20Howard%20Aug%202010\).pdf](http://www.hsjcc.on.ca/Uploads/Homeless%20and%20Jailed%20-%20Jailed%20and%20Homeless%20(John%20Howard%20Aug%202010).pdf)

 **Understanding Mental Illness: A Review and Recommendations for Police Education and Training in Canada. *Canadian Alliance on Mental Illness and Mental Health (CAMIMH)*. July 2010.**

Report describes the multi-level TEMPO – a learning model for Training and Education about Mental Illness for Police Officers.

<http://www.hsicc.on.ca/Uploads/CAMIMH%20Report%20-%20Understanding%20Mental%20Illness%20-%20Police%20education%20and%20training.pdf>

## Provincial News

### New Degree Program “Created by the Criminal Justice System for the Criminal Justice System”

This September, a new four year undergraduate applied degree program is commencing at Conestoga College. It is called “Community and Criminal Justice” and develops students’ knowledge and competencies in both law and social work. Many employers within the criminal justice and social service system were consulted about the skills required by effective employees. Their answers guided the curriculum development and many of these individuals remain as members of the Program Advisory Committee.

During the first two years, students are provided with a good theoretical foundation in psychology, sociology, the law and human service practices. In third and fourth year, the students specialize in either Community Justice Studies or Police Studies, and complete one paid co-op placement. As members of the Human Service and Justice Coordinating Committee, you will be pleased to know that mental health curriculum has been embedded in many courses. Throughout the four years, there is a strong emphasis on developing effective writing skills. For those who may wish to pursue graduate studies, the program also contains courses on applied statistics and understanding research. Students who have graduated from a diploma program in Law and Security Administration/Police Foundations or Social Services are also eligible to apply for advanced standing into second year.

We are so excited! Enrolment is full for first year (30). The second year advanced standing enrolment is almost full (26), so clearly there is an interest in this program. Within the HSJCC, we have discovered the benefits of working cooperatively between service sectors. Police, courts, hospitals, prisons, community agencies...we are all so much more effective when we work together. Conestoga believes our new program is reflective of these partnerships. If you would like to read more about this new program, please go to:

<http://www.conestogac.on.ca/fulltime/programoverview.jsp?SchoolID=3&ProgramCode=1240C&v=1001>

*Submitted by Marion Evans, Coordinator, Community and Criminal Justice Degree, Conestoga College Institute of Technology and Advanced Learning*

## 🔊 The London Drug Treatment Court (LDTC)

The London Drug Treatment Court (LDTC) is a supervised drug treatment and rehabilitation program for people that have committed a crime related to their drug addiction. The treatment services that are offered through the program include:

- Individual counselling
- Ongoing case management
- Random drug screening
- Addiction medicine services, including methadone maintenance where appropriate
- Wellness groups, including stress management, nutrition and anger management

The program is completely voluntary and the length of stay in the program varies between 12 and 18 months.

**For more information click on this link:**

<http://www.hsicc.on.ca/Uploads/London%20Drug%20and%20Treatment%20Court%20brochure.pdf>

## Links

<http://www.hsicc.on.ca> The Provincial HSJCC website

<http://www.connexontario.ca> For searchable data bases for addiction, community mental health and gambling addiction services in Ontario

<http://www.ontario.cmha.ca> For the latest CMHA Ontario newsletter 'Mental Health Notes'

*If your HSJCC committee has news, publications, articles or information you would like to share with the HSJCC network please send it to Marion Evans at [mevans@conestogac.on.ca](mailto:mevans@conestogac.on.ca)*

If you know of HSJCC members who did not receive this newsletter directly please make sure their email address is sent to Sherry Sim [sherry@innovative4you.com](mailto:sherry@innovative4you.com) and Oana Gug at [Oana.Gug@Ontario.ca](mailto:Oana.Gug@Ontario.ca) and they will be added to our list.