

Provincial HSJCC Quarterly Newsletter

July 2012

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Provincial HSJCC News 

Provincial HSJCC Co-Chairs Update

It has been a busy and thought provoking time for the Provincial Human Services and Justice Committee. On May 14, 2012 it was decided by a majority of the voting members, the representatives of the fourteen regional committees, that the provincial format would be restructured to allow more input from regional and local membership. Rather than the provincial group attempting to do all of the work resulting from the awareness of the issues of justice and human services, workgroups will be established with membership from local and regional membership, and others with an interest in the issue invited, to research and provide options for consideration by the provincial membership. It is hoped to establish a secretariat for the Provincial HSJCC to continue to move forward on the collaboration with others and provide the necessary resources to keep it alive and well.

For many years, this group of provincial representatives has been people who assumed the duties voluntarily in addition to their full time positions. Several years ago, the Ontario division of CMHA stepped in with the secondment of a researcher to assist us for several days a week. This time has been invaluable in moving forward our mandate.

It is clear that we need to find the resources to finance this new endeavor. We will not be looking to the current regional and local HSJCCs, many of whom receive funding through their LHIN. Rather, we will be looking to the benefactors of our work. These would include various Ontario Ministries.

During the next few months, we will be working on a transitional time of movement towards our new structure which will include these working groups.

We look forward to new opportunities for all members of the HSJCC throughout Ontario to be more active in the issues which are of importance to them.

Vicky Huehn

Katie Almond

Co-chairs
Provincial HSJCC

 **Update from the Communications and Knowledge Transfer Committee (CKT) Chair**

The Communications and Knowledge Transfer Committee is responsible for this quarterly newsletter, and the HSJCC website (www.hsjcc.on.ca). We're happy to tell you that Google Site Search has been added to the site, so searching it should be much easier and the results more comprehensive. Also, please be sure to visit the site and read the recent annual report from the provincial committee to the Ministry of Health and Long-Term Care.

The website will soon have a membership database for the entire HSJCC - provincial, regional, and local. In the future this will help with sending out information from the provincial committee, including this newsletter. In the meantime, I am asking that the regional chairs forward this to their members, and that they in turn ask the local chairs to do the same.

Finally, the CKT Committee is always looking for volunteers and submissions. The committee meets monthly, for less than an hour, by teleconference. And we are always looking for submissions for both the website and the newsletter. We're especially eager for articles (even short articles) from the committees themselves. If you'd like to join the committee or submit anything, please email me at altstuff@gmail.com

Trevor Tymchuk
Chair
Communications and Knowledge Transfer Committee

Update from Algoma District – Justice Workers at the Sault Ste. Marie courthouse

Having office space for supporting social agencies in a courthouse would be a wonderful idea, a place to put our coats and boots in the winter, a quiet place to complete required notes or to make a phone call. Yes an office at the courthouse would be a wonderful idea, but having a courthouse is more important.

Recently, Sault Ste. Marie's courthouse was reopened after being closed for seven months due to a fire, air quality, and security reasons. For seven months CMHA court workers along with other social agencies attempted to assist individuals tackling the court system.

Temporary courts were set up in various locations in the downtown area which included a local hotel, City Hall, Government office spaces and a privately owned building. Finding the right courtroom was a process for agencies, as well as if you had matters in different courtrooms in various buildings. For the individuals with a court appearance, there was a letter posted at the front of the courthouse directing them to the right facility. For our Mental Health Court, CMHA staff would make the circuit of stopping at the various sites to direct individuals that misread the directions.

Courts would often start late as the court support staff, reporters and clerks would have to take down the courtroom nightly and set up again in the morning. Often when court was running at the local hotel, a conference would be presenting as well, the hallways would be noisy and it could be distracting in the courtroom.

The most difficult issue that arose was meeting with clients before their appearance in court. The individuals would arrive in the paddy wagon, were they would sit until their appearance, always with others, so having a private conversation did not exist. Fitness Screenings were not completed. Screenings for any urgent needs before returning to Algoma Treatment and Remand Centre were not completed. Unless something was communicated during the court appearance, Fitness or NCR were difficult to consider.

So, while having an office in the courthouse would be wonderful, we are just glad to have the courthouse back.

Kim McBride
Justice Worker, CMHA-Sault Ste. Marie Branch

Update on COAST (Court Outreach and Support Team) Niagara

COAST (Crisis Outreach and Support Team) began operations in Niagara in November of 2011. COAST Niagara was started as project of the local Human Service and Justice Coordinating Committee and is managed by a committee of local agencies and the hospital. Mental Health Professionals work as a team in a unique partnership with police officers who are specially trained in mental health. Information is collected by telephone. If needed, the outreach mobile team which includes a non uniformed police officer and a social worker or nurse, will assess the person experiencing the mental health crisis in the community. Ongoing telephone support and/or referral may be recommended to prevent further crisis.

A recent example, of an intervention, demonstrates the daily work of the COAST program. The mobile team had just completed a scheduled client home visit when they received a call on their police radio. They responded to a suicide in progress which was attended by uniformed officers. Uniformed officers on the scene had secured the site but asked for assistance from the COAST team in negotiating with the suicidal client who was fleeing her home. After a short period of interaction in the street, the team supported the client in returning to her home, developing a safety plan and accessing additional community supports. COAST monitored the situation by telephone for a few days to assure themselves that the plan was implemented. As a result of mobile, and in this case, curb side intervention, the client's issues were addressed immediately preventing further escalation of the crisis while establishing needed supports.

The COAST Niagara program, in its short history, has indicated both its necessity and value to the community. It has surpassed its target of total clients for the past year serving 550 clients to its targeted 220. Early data returns

indicate success in many areas. For example, COAST Niagara has surpassed the hospital diversion target by 137%. COAST is changing the crisis landscape in Niagara demonstrating the ability to service and maintain individuals successfully in their community while helping to decrease unnecessary hospital visits.

George Kurzawa
Executive Director, CMHA Niagara Branch

 **Opinion letter in support of proposed restructuring of the Provincial HSJCC Committee – Trevor Tymchuk**

I've been involved with the Human Services and Justice Coordinating Committee for many years. I joined the Sudbury-Manitoulin HSJCC in 2000, then the Northeast Regional HSJCC when it was formed, and a few years ago, I joined the Algoma HSJCC. I live in East Algoma, which receives services through agencies in both Algoma and Sudbury-Manitoulin districts, which is why I travel to both Sudbury and Sault Ste Marie, both as a consumer and a board member of a mental health agency in Elliot Lake. Last fall, I was honoured to become the co-chair of the Northeast Regional HSJCC, and through that, join the Provincial HSJCC. Earlier this year, I became Chair of the Communications and Knowledge Transfer Committee, the group responsible for this newsletter, and for the HSJCC website.

The drive to Sudbury is two hours, each way; about two and a half for Sault Ste Marie; and 8 hours for the Provincial meetings in Toronto (there are no flights from my area). Sometimes when I mention attending these meetings, people are amazed that I would drive four or five hours to attend a two-hour meeting. I have always been happy to explain that I find the meetings to be well worth the time and effort. At the local level, I am pleased to see connections made between services that have helped clients. Someone will mention a difficult case they are dealing with, and frequently someone else is able to make a suggestion that can make all the difference for that individual. And from that point, the connection exists for future clients as well. At the local level, we may not be changing the world, but we are changing things for the

people we serve. This may explain why I am so passionate about the HSJCC.

In my years on local and regional committees, I have always felt troubled that our committees send issues and concerns to the provincial committee, and that that's where they seem to stay. Now that I'm on the provincial committee, I see that the committee faces the same problem that the local and regional committees face - everyone there is a volunteer, with a full-time (and then some) job. The PHSJCC is one of many things on everyone's plates. And, quite simply, that makes it extremely difficult to affect change on a systemic or legislative level. Changes like that take far more time and effort than volunteers can provide, or be expected to provide.

The proposed restructuring of the Provincial HSJCC involves two major changes. The first is to form working groups on specific issues, drawing involvement from both within the HSJCCs and from others with an interest in the issue. This will allow for meetings that will be focused on a single problem, in the hopes of solving the problem, or at least reducing the problem. I can only see this as a benefit, to say the least.

The second part of restructuring is for the PHSJCC to hire full-time staff. There has been some question as to the value of this. Putting aside the probable difficulty of obtaining funding for this, I have to say that having staff makes perfect sense to me. While I have always been happy to see individual clients benefit from the HSJCC at the local level, I have always been disappointed that at a provincial level we have not been able to accomplish as much as we should when it comes to changing things for all clients. I have always wished that more could be done. I have to say that having staff to work full-time at the provincial level sounds like my wish has been granted. As I explained at the last PHSJCC meeting, while I have been prone to delusions, I have no grand delusion that having a staff will solve all the problems facing the populations we serve. But I do feel that will give us a fighting chance to actually make some problems easier to handle.

I always make the disclaimer that while I am a consumer, I can only speak for myself. I do not represent any formal

consumer group, and I do not pretend that any consumer can speak for all consumers. Also, even if I could speak for consumers, I would still not be able to speak for the other groups that we serve - addictions, developmental, FASD, ABI. With that proviso in mind, I have to say that having staff to work on issues full-time seems like the best possible way for the entire HSJCC structure to affect change for the people we exist to help.

Trevor Tymchuk
Co-Chair, Northeast HSJCC

News Media

 **Crisis Intervention Team training certifies 18. The Philadelphia Tribune. June 13, 2012.**

Police from six municipalities and the county now have specialized training to de-escalate encounters between law enforcement and community members challenged by mental illness.

<http://www.hsjcc.on.ca/Uploads/12-06-13%20Crisis%20Intervention%20Team%20training%20certifies%2018.pdf>

 **Municipal court's specialty dockets focus on treatment, not penalties. The Columbus Dispatch. June 18, 2012.**

Friday morning is reserved for Franklin County Municipal Judge Scott VanDerKarr's drug docket for nearly 40 opiate addicts. VanDerKarr's is one of four specialty dockets in Municipal Court that cater to people who wind up in the criminal-justice system and have specific needs. The strategy is team-based, coordinated treatment to help people get better — instead of fining them or sending them to jail.

<http://www.hsjcc.on.ca/Uploads/12-06-18%20Ohio%20Municipal%20Speciality%20Courts%20.pdf>

 **Opinion: Mental health and addictions - How Ontario and Toronto can improve lives while saving billions. Toronto Star. June 18, 2012.**

The Drummond report identifies mental health and addictions as one of the most serious problems increasing Ontario's health-care costs. It also increases the costs of courts and jails.

[http://www.hsjcc.on.ca/Uploads/12-06-18%20Mental%20health%20and%20addictions%20-%20How%20Ontario%20and%20Toronto%20can%20improve%20lives%20while%20saving%20billions%20\(Toronto%20Star\).pdf](http://www.hsjcc.on.ca/Uploads/12-06-18%20Mental%20health%20and%20addictions%20-%20How%20Ontario%20and%20Toronto%20can%20improve%20lives%20while%20saving%20billions%20(Toronto%20Star).pdf)

 **Domestic assaults involving dementia need new approach. London Free Press. July 2, 2012.**

City police in Sault Ste. Marie are being urged to find another way to handle elderly people with dementia who strike out at their spouses.

[http://www.hsjcc.on.ca/Uploads/12-07-02%20Domestic%20assaults%20involving%20dementia%20need%20new%20approach%20\(London%20Free%20Press\).pdf](http://www.hsjcc.on.ca/Uploads/12-07-02%20Domestic%20assaults%20involving%20dementia%20need%20new%20approach%20(London%20Free%20Press).pdf)

 **Illinois Center of Excellence for Behavioral Health and Justice**

Illinois Center of Excellence for Behavioral Health and Justice: Many jurisdictions are struggling with the challenge of how best to respond to the involvement of people with serious mental illness in the justice system. Illinois has founded a new state-wide entity, the Illinois Center of Excellence for Behavioral Health and Justice located at the University of Illinois' College of Medicine. Does this approach offer Ontario any guidance?

<http://www.hsjcc.on.ca/Uploads/Illinois%20Center%20of%20Excellence%20for%20Behavioral%20Health%20and%20Justice.pdf>

<http://www.illinoiscenterofexcellence.org>

 **Faulty NCR finding quashed – ‘Miscarriage of justice’ concludes the Ontario Court of Appeal. Lawyer’s Weekly. July 13, 2012 Issue.**

A man held in a mental institution for seven years after being found not criminally responsible for attempting a robbery at a bank machine suffered a “miscarriage of

justice” when he was initially misdiagnosed with schizophrenia, the Ontario Court of Appeal has ruled.

The original finding made against Christopher Evans, in 2005, was set aside and replaced with a conviction for robbery and a one-day sentence, in light of the time the 28-year-old man had already spent in custody.

[http://www.hsjcc.on.ca/Uploads/12-07-13%20Faulty%20NCR%20finding%20quashed%20\(Lawyers%20Weekly\).pdf](http://www.hsjcc.on.ca/Uploads/12-07-13%20Faulty%20NCR%20finding%20quashed%20(Lawyers%20Weekly).pdf)

Journal Articles and Research

 **Criminal justice interventions for offenders with mental illness: Evaluation for mental health courts in Bronx and Brooklyn, New York. Final Report. US Department of Justice. April 2012.**

This report presents findings from the process and impact evaluations of the Brooklyn and Bronx Mental Health Court (MHC) programs.

[http://www.hsjcc.on.ca/Uploads/CJ%20Interventions%20for%20Offenders%20with%20Mental%20Illness%20\(US%20Dept%20of%20Justice\).pdf](http://www.hsjcc.on.ca/Uploads/CJ%20Interventions%20for%20Offenders%20with%20Mental%20Illness%20(US%20Dept%20of%20Justice).pdf)

 **The Adverse Childhood Experiences (ACE) Study – The impact of adverse childhood experiences and implications for health care. The impact of early life trauma on health and disease – Chapter 8. 2010.**

Biomedical researchers increasingly recognize that childhood events, specifically abuse and emotional trauma, have profound and enduring effects on the neuroregulatory systems mediating medical illness as well as on behavior from childhood into adult life.

<http://www.hsjcc.on.ca/Uploads/ACE-%20Childhood%20trauma%20leading%20to%20adult%20health%20care%20issues.pdf>

 **The Adverse Childhood Experiences (ACE) Study & Unaddressed Childhood Trauma. Presentation by Ann Jennings.**

The ACE Study is a decade long collaboration bet HMO Kaiser Permanente Dept of Preventive Medicine in San Diego, and the Center for Disease Control and Prevention (CDC). The two principle investigators were Dr. Vincent Felitti of Kaiser Permanente, and Dr. Robert Anda of CDC.

The study was prompted by Dr. Felitti"s desire to learn why many people, at the point where they were successfully losing weight in a weight-loss program he ran for morbidly obese adults –they dropped out of the program and put the weight back on. What he found over and over again was that these individuals who dropped out had histories of childhood sexual and other cumulative traumas, and the weight for them was a way of coping, eg. Protecting themselves, comforting themselves etc. These findings led to interest on the part of CDC to conduct a larger study looking at the potential relationship of childhood adverse (traumatic) experiences to adult health risk behaviors and health conditions.

<http://www.hsjcc.on.ca/Uploads/Jennings-The-ACE-Study-and-Public-Health-Implications.pdf>

 **Time Served: The High Cost, Low Return of Longer Prison Terms. National Reentry Resource Center Newsletter. July 3, 2012.**

The length of time served in prison has increased markedly over the last two decades, according to a new study by Pew's Public Safety Performance Project. Prisoners released in 2009 served an average of nine additional months in custody, or 36 percent longer, than offenders released in 1990. These extended prison sentences came at a price: prisoners released from incarceration in 2009 cost states \$23,300 per offender--or a total of over \$10 billion nationwide. More than half of that amount was for non-violent offenders.

To download the report, click [here](#).

Events

 **Save the date: South East Ontario Regional Human Services & Justice Coordinating Committee Conference –**

Practical Approaches for Front-Line Workers. November 15th, 2012.

This promises to be an interesting, dynamic and energizing day at the Kingston Banquet & Convention Centre with workshops and fantastic Keynote Presentations.

<http://www.hsicc.on.ca/Uploads/Kingston%20Save%20the%20Date.pdf>

📣 The 2012 International Conference on Special Needs Offenders – Turning Vision into Action for Youth and Women Offenders. August 26 – 29, 2012. Ottawa

The International Institute on Special Needs Offenders identifies areas of focus for each conference, and for the 2012 conference the focus will be on youth and women offenders with mental health and/or developmental disabilities who are in conflict with the law.

For additional information on abstract submissions and registration, visit:

www.specialneedsoffenders.org

📣 Symposium on Prison Crowding and its Implications for Human Rights. August 25, 2012. University of Ottawa Campus.

The John Howard Society of Canada, in collaboration with the Canadian Association of Elizabeth Fry Societies, the Canadian Bar Association, the Canadian Civil Liberties Association, the Centre for Global Challenges, the Criminal Lawyers' Association, and the National Associations Active in Criminal Justice Presents a one-day Symposium on Prison Crowding and its Implications for Human Rights
See link to details and program:

<http://www.johnhoward.ca/media/Prison%20Crowding%20Symposium%20program.pdf>



Links

→ <http://www.hsicc.on.ca>

→ **The Canadian Harm Reduction Network's** dynamic new website has been launched, and we invite you to check it out at

<http://www.canadianharmreduction.com>, to get involved, to give us feedback on the website . . . and to join the Network.