

EVERYTHING YOU WANTED TO KNOW ABOUT WORKING WITH FORENSIC CLIENTS IN THE COMMUNITY

Jim Cyr
Joan Dervin
Vanessa Sigouin
Helen Ward
Richard Robins

3rd Biannual Provincial Human Services and Justice Coordinating
Committee

HSJCC: Accomplishments, Changes and Opportunities

November 22, 2011

Hospital and Community-Based Collaborative Initiatives in Durham Region to Serve Forensic Clients

Collaborative Initiatives in Durham Region

- Canadian Mental Health Association (CMHA) Durham
 - Transitional Rehabilitation Housing Pilot Project (TRHPP)
- Durham Mental Health Services (DMHS)
 - Forensic Transitional Case Managers (FTCMs)
- MH Services and Housing
- Durham Regional Police Services (DRPS)
 - Ontario Shores – DRPS Liaison Work Group
 - Case Illustration (Review of Clients Who Go AWOL)
- Assertive Community Treatment Teams (ACTTs)
 - Forensic Clients
- University of Ontario Institute of Technology (UOIT)
 - First Responder Interactive Simulation Training
- Durham HSJCC
 - Case Illustration (Jane Doe)

Collaborative Initiatives in Durham Region: Ontario Shores / CMHA Durham TRHPP Initiative

- Goals of OS / CMHA Durham's Transitional Rehab-Housing Pilot Program:
 1. Provide additional capacity in the community for the successful reintegration of hard to place forensic patients; and
 2. Enhance the existing capacity of the forensic mental health system by positioning the new resources to facilitate its effective utilization by decreasing bed-blocking by hard-to-place forensic patients in the community.

Collaborative Initiatives in Durham Region: Ontario Shores / CMHA Durham TRHPP Initiative

KEY ISSUE

- THROUGHPUT of forensic clients in the forensic mental health system as determined by:
 - INPUT: demands for service from the courts and Ontario Review Board
 - CAPACITY: the volume of service within the WMHC's forensic mental health system proper
 - OUTPUT: the system's (e.g., OS) ability to outplace forensic patients who are ready for community placement

KEY CHALLENGE:

- Placement of forensic clients in community housing for rehabilitation purposes who do not meet criteria adhered to by the current community-based housing resources and associated agencies

Collaborative Initiatives in Durham Region: Ontario Shores / CMHA Durham TRHPP Initiative

CHALLENGE DESCRIPTION:

- There remains a cohort of clients who remain “discharge resistant”, i.e., clients who require more intensive case management services than can be offered by current clinical staff (e.g., FTCMs)
- These forensic clients typically have committed index offences that the public considers heinous crimes, such as arson, first degree murder, or pedophilia
- These clients have diagnoses that community-based agencies that provide mental health and housing services consider treatment resistant (e.g., pedophilia)
- This cohort of forensic patients, although considered to be discharge ready clinically, are declined rehabilitation services and housing accommodations by community-based agencies due to the perceived higher risk to the public which eliminates any possibility of community reintegration for them

Collaborative Initiatives in Durham Region: Ontario Shores / CMHA Durham TRHPP Initiative

SOLUTION:

- Community-based agencies, who provide mental health services and housing for OS's forensic clients, indicated that they would consider these clients if it could be demonstrated that they could be managed successfully for a year or so
- Once these forensic clients have demonstrated that they could be managed successfully in the community without any incidents, such as re-offending, then they would consider them eligible for transfer to their services, including housing
- The OS / CMHA Durham TRHP Program was tailor-made to meet this specific need

Collaborative Initiatives in Durham Region: Ontario Shores / CMHA Durham TRHPP Initiative

SUPPORT FOR INITIATIVE:

- Recommendation made by the Forensic Mental Health Expert Advisory Panel (December 2002) to build greater capacity in community-based services, thereby increasing greater capacity for hospital-based forensic programs and services without necessarily having to increase overall bed capacity in the forensic system; and
- Supports the MOHLTC's over-arching goal of decreasing wait times in the hospital sector, including the mental health system, by increasing its throughput

Collaborative Initiatives in Durham Region: Ontario Shores / CMHA Durham TRHPP Initiative

Program Services Plan:

- Two (2) Intensive Case Managers (CMs) provide rehabilitation support for 6 high needs forensic clients
- The Intensive CMs provide a variety of supports, including vocational placement / training opportunities, educational opportunities, treatment / rehabilitation via a number of community-based programs and services supported by CMHA Durham, Assertive Community Treatment Teams (ACTTs), and specific needs-based interventions (e.g., Alcoholics Anonymous, Narcotics Anonymous, etc.)

Collaborative Initiatives in Durham Region: Ontario Shores / CMHA Durham TRHPP Initiative

CASE #1

- John Doe 1
- Age: 56
- Index Offence: Second Degree Murder
- Date of Index Offence: July 1989
- Date of Original NCR Finding: March 1990 (20 years in forensic system)
- Date of Admission to OS: October 1997 (13.5 years)
- Axis I Diagnosis: Paranoid Schizophrenia
- History of Alcohol Abuse
- History of Head Injury (1984) with Parietal Temporal Dysfunction

Collaborative Initiatives in Durham Region: Ontario Shores / CMHA Durham TRHPP Initiative

CASE #2

- John Doe 2
- Age: 49
- Index Offences:
 - Sexual Assault
 - Assault
 - Kidnapping
 - Uttering Threat to Cause Bodily Harm
 - Failure to Comply
 - Possession of a Knife
 - Possession of Stolen Property(12.5 years)
- Date of Index Offence: January & March 1990
- Date of Original NCR Finding: June 1991 (19 years in forensic system)
- Date of Admission to OS: March 1998 (12 years)
- Axis I Diagnosis: Schizophrenia, Paranoid Type
- Paraphilia, NOS
- Substance Dependence, in Remission in a Controlled Environment
- Axis II: Obsessive Compulsive Personality Disorder
- Axis III: Stage I Hypertension

Collaborative Initiatives in Durham Region: Ontario Shores / DMHS FTCM Initiative

FORENSIC TRANSITIONAL CASE MANAGERS (FTCMs)

Goal of the FTCM Program:

- To expedite the community placement and successful reintegration of individuals with a NCR status into the community

Fundamental Purpose of the FTCM Program:

- To assertively facilitate and support the successful transition of Ontario Shores forensic inpatients with a “minimum secure” (aka General Forensic Service) Detention Order with an ORB Disposition that allows for community placement

Collaborative Initiatives in Durham Region: Ontario Shores / DMHS FTCM Initiative

Forensic Transitional Case Manager Role:

- Focus specifically on increasing the throughput of forensic clients by assisting appropriate individuals discharged from hospital in obtaining and maintaining support in community placements
- Transitional support includes activities such as:
 - Participating in discharge planning
 - Service brokerage
 - Short-term supportive counseling
 - Psychosocial rehabilitation and life skills training
 - Linking to other community mental health resources
 - Securing housing
 - Facilitating temporary returns to the hospital while maintaining the person's community housing, etc.
- Develop a case (service) plan with the client for identifying needs and planning ongoing support

Collaborative Initiatives in Durham Region: Ontario Shores / DMHS FTCM Initiative

<i>TCM</i>	<i>Active clients As of April 1</i>	<i>Inactive clients As of April 1</i>	<i>Number of New clients 10/11 FY</i>	<i>Number of Clients Discharged 10/11 FY</i>	<i>Active clients As of March 31</i>	<i>Inactive clients As of March 31</i>
a. 1 OS Staff	13	0	9	9	11	2
b.						
c.						
d.						
<i>Total</i>	13	0	9	9	11	2

Active clients **defined as** individuals with regular, ongoing intervention, in accordance with the client intervention plan

Inactive clients **defined as** individuals **remaining on TCM caseload** and without contact for a period greater than 30 days

Collaborative Initiatives in Durham Region: Ontario Shores / DMHS FTCM Initiative

- Number of individuals who have been moved from an inpatient bed to residing in the community during the reporting period (2010-11): 6
- For the total of all clients on your caseload during the reporting period:

Number of individuals that were able to access and become clients of a:	
supportive housing program	5
peer support group	2
vocational rehab program	2
Other (i.e., mental health or addictions program, primary care linkage, etc.)	6
<ul style="list-style-type: none"> • Addiction Services (Pinewood) • CMHA Day programs (New Horizons) • Pathways program (Rouge Valley Health System) • ACTT (East Metro, Durham ACTT) • Seneca College (Redirection through Education) • Hong Fook Society, ESL program 	

Collaborative Initiatives in Durham Region: Ontario Shores / DMHS FTCM Initiative

- Number of clients readmitted to, and discharged from, hospital while remaining on the TCM caseload during the fiscal year: **3**
- Average length of stay of these readmissions in hospital for all TCM clients from April 1, 2010 to March 31, 2011: **33.17 days**
- Patient Treatment Cost Reduction:
 - Estimated annual cost for forensic clients in hospital: **\$365,000**
 - Estimated annual cost for forensic clients in the community: **\$55,000 (approx. 15% of inpatient cost)**
 - Average treatment cost reduction of **\$310,000 per client per year**
 - **X3 = \$930,000; X12 = \$3,720,000!**

Collaborative Initiatives in Durham Region: Ontario Shores / CMHA Durham / DMHS Housing Initiative

- An MOU describes the service delivery agreement that has been reached between the Canadian Mental Health Association, Durham (CMHA), Ontario Shores Centre for Mental Health Sciences (Ontario Shores), and Durham Mental Health Services (DMHS), to provide housing and short-term case management for forensic patients of Ontario Shores who are transitioning into the community, following discharge from Ontario Shores

Collaborative Initiatives in Durham Region:
Ontario Shores / CMHA Durham / DMHS Housing
Initiative

- The parties have recognized the benefit in expanding current services available to patients with a serious mental illness by including 24 dedicated housing units provided by CMHA, to better meet the community reintegration and rehabilitation needs of forensic patients following discharge

Collaborative Initiatives in Durham Region: Ontario Shores / CMHA Durham / DMHS Housing Initiative

- FTCCMs (DMHS & OS) provides the following time limited services which are determined on an individual basis for forensic patients discharged from Ontario Shores to CMHA housing:
 - Screen patients for suitability to the CMHA housing, based on screening criteria provided by Ontario Shores' Forensic Program
 - Prepare patients for discharge by establishing Social Assistance, facilitating skill teaching groups and any other self help or educational programs needed
 - Provide crisis prevention management to prepare patient transition into the community
 - Provide skill teaching and support the achievement of the patient's personal goals
 - Facilitate processes for readmission if needed by contacting Central Intake at Ontario Shores
 - Maintain involvement on an as-needed basis if reasonable should the client leave CMHA housing
 - Communicate with CMHA staff regarding concerns related to any identified health and safety issues as soon as they are identified
 - Monitor and document in the outpatient file ongoing progress and adherence with Ontario Review Board Disposition Conditions and provide support for successful compliance

Collaborative Initiatives in Durham Region: Ontario Shores / CMHA Durham / DMHS Housing Initiative

- CMHA Durham provides the following services to forensic patients with serious mental illness discharged from Ontario Shores :
 - 24 dedicated housing units to assist in the community transition of forensic patients discharged from Ontario Shores
 - Assess the suitability and engage the patient in the intake process to determine if the patient will benefit from the housing service
 - Obtain preferred and appropriate choice of housing
 - Provide housing guidelines and respect for property expectations in written format for clients
 - Collaborate and provide regularly scheduled information on patient's progress to the Transitional Case Managers
 - Provide onsite support by assigning a CMHA staff for the client
 - Support and facilitate participation in CMHA programs and in the mental health community
 - Act as landlord

Collaborative Initiatives in Durham Region: Ontario Shores / DRPS Initiatives

- Established an Ontario Shores / DRPS Liaison Task Force
 - Each party identifies issues / problems / challenges encountered with a focus on resolution
 - Examples:
 - Use of illegal drugs by patients on hospital grounds
 - Patients gambling
 - Use of force by police on hospital grounds (e.g., tasers)
 - Procedure for patients and staff to report assaults (e.g., patient-on-patient, patient-on-staff)
- Developed a protocol and procedure to address the efficient retrieval of forensic patients who go AWOL
 - DRPS detective and clinical staff meet within 24 hours of AWOL
 - Relevant material is provided to police to assist in their search (e.g., recent photo, snapshot of video surveillance tape of patient leaving the hospital, banking information, phone information, etc.)
 - Since its inception, the vast majority of AWOLs have been returned to hospital within 48 hours; historically, it was several days to weeks!

Collaborative Initiatives in Durham Region: ACTTs

- Three ACTTs serve the immediate Durham Region:
 1. Newmarket Clinic/CMHA Durham ACTT
 2. Peterborough/Coburg ACTT & Lindsay Clinic/EM ACTT
 3. Durham ACTT & Jackson's Point
- Ontario Shores also works collaboratively with ACTTs from Scarborough, Toronto, North York and Peel

Collaborative Initiatives in Durham Region: UOIT

- **First Responder Interactive Simulation Training**
 - This project is a collaboration between the University of Ontario Institute of Technology, Whitby Mental Health Centre and Durham Regional Police Services
 - The objective of this research project is 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.
- **Product Development and Research Team**
 - **Dr. Wendy Stanyon**
 - Assistant Professor, Collaborative BScN Program
 - Faculty of Health Sciences
 - University of Ontario Institute of Technology
 - **Jim Cyr**
 - Administrative Director, Forensic Program
 - Ontario Shores
 - **Marjory Whitehouse**
 - Clinical Manager, Forensic Rehabilitation Unit
 - Ontario Shores
 - **Inspector Bruce Townley**
 - Durham Regional Police Services
 - **Chris Hinton**
 - Director, Centre for Academic Excellence and Innovation
 - University of Ontario Institute of Technology
 - **Director, Dr. Jay Tashiro**
 - Associate Professor
 - Faculty of Health Sciences
 - University of Ontario Institute of Technology
 - **Erin Banit**
 - Media Developer, Centre for Academic Excellence and Innovation
 - University of Ontario Institute of Technology

Collaborative Initiatives in Durham Region: Durham HSJCC

- Durham HSJCC is a vibrant committee that has participated in research, education and problem-solving very challenging issues with respect to clients who fall through the sectoral cracks of our system
- Example: Jane Doe
 - Ex patient of Ontario Shores
 - Extremely demanding of clinical resources, particularly of an acute health care facility and community-based MH services
 - Refused admission to Ontario Shores
 - Began making numerous suicidal threats to the DRPS which required intervention by them (i.e., bring to local hospital) but would end up back in the community within a few hours
 - Began to make suicidal threats in public areas, of particular concern was on school grounds which resulted with a SWAT Team attending and locking down the school for several hours
 - Problem presented by the Durham HSJCC DRPS rep to the Durham HSJCC
 - As co-chair, I called a meeting with representation from CMHA Durham, DMHS, Crown Attorney's Office, Ontario Shores clinicians, and DRPS
 - In short: Jane Doe finally participated in rehab on a more regular basis; and
 - The number of suicidal threat calls to the DRPS decreased from several per week to zero for a period of several months!