



The Power of the Councils – Selected Highlights Queen Street Patient’s Council 1992-2002 Empowerment Council 2002-2017

ADVOCACY

- **Centre for Addiction and Mental Health** – EC Partnered with CAMH to:
 - create the CAMH Bill of Client Rights – *the highest standard of hospital based mental health rights in Canada to date.*
 - implement the Least Restraint Initiative - *reducing CAMH restraint use.*
 - send numerous joint submissions to all levels of government on Housing, Basic Income, various aspects of Policing, etc.
- EC advocated for many measures adopted at CAMH: evening & weekend activities for inpatients, trauma informed care, rights (not “privileges”) of voluntary patients, etc.

- **Supreme Court:** QSPC was the first mental health peer advocacy organization in Canada to intervene in a case applying the Canadian Charter of Rights and Freedoms. The EC (and at one point in time a bridging organization – the Mental Health Legal Advocacy Coalition) regularly intervenes in cases before the Supreme Court of Canada.
- **The Accessibility Directorate** The EC participated and informed this project aimed at removing communication barriers for people with mental health disabilities who are involved with the justice system (i.e. Mental Health Court 102 ; Criminal Court ; The Social Services Tribunal ; The Refugee and Immigration Board ; Social Services (ODSP) Tribunal ; Housing Tribunal ; Drug Treatment Court ; Family Court ; Small Claims Court).
- **Policing:** EC negotiated creation of Mental Health Committee of Toronto Police Services Board, allowing community input into policing decisions relevant to people in crisis, develop a TPS mental health strategy, etc. EC has influenced TPS competencies. EC

influenced review of Mobile Crisis Intervention Teams. EC has addressed numerous TPS policies and practices, and TPS has implemented inquest recommendations by the EC.

- **Deputations and Submissions on proposed legislation:** The EC (and the QSPC) presented to numerous Provincial and federal Standing Committees. More difficult to track effect, but EC was named on the floor of federal legislature when passing legislation that allowed people who were found Unfit to stand trial to access freedom. EC has also communicated with government in support of human rights protection for gender identity, humane treatment of people with mental health issues in Corrections, nonprescription access to naloxone, more detox beds etc.
- **Local Health Integration Network:** EC has participated in LHIN steering committees, been liaison between the committee and Client Reference Groups, & organized comprehensive education sessions in preparation for consultations for the LHIN.

- **Inquests:** The QSPC was the first mental health peer advocacy organization to acquire standing at an inquest in Ontario, and the EC is the only such organization consistently acquiring standing in cases that affect people with mental health issues across Ontario. The Councils have had a voice at inquests into the deaths of 15 people. *Some of what has been accomplished:* following education of Toronto Police Service directly by people with mental health histories only one death of person with mental health issues by TPS in 8 years; resources (beds) for a Toronto community based crisis service increased; restraint use by Ontario

hospitals reduced and requiring more safeguards, etc.

- **Community Treatment Orders** The EC has been involved in advocacy since the start of legislation rolled out. We conducted three focus groups with clients and were involved in a constitutional challenge.
- **Ontario Human Rights Commission (OHRC)** The EC participated in consultations with clients at CAMH in development of the OHRC “Minds that Matter Report on the consultation on human rights, mental health and addictions” and Launch.

PATIENT ENGAGEMENT

- ⇒ Researched and wrote paper titled: “More than Paint Colours: Dialogue about Power and Process in Patient Engagement”.
- ⇒ Contributed to pilot of Safewards program at CAMH, designed to enhance the engagement of forensic clients and staff. EC produced the report for CAMH: “Safewards: Including Service User Voices”.
- ⇒ Organized countless client consultations at CAMH: for CAMH on rights, restraint use, strategic planning, discharge plans, redevelopment planning, forensic services, women’s equity, “Arriving at Camh” Focus group, Information session to clients on budget cuts to Gym, Physiotherapy, Swimming, NRT subsidy, smoking, etc. For Commissioners on Social Assistance Review organized meeting for direct client feedback. Organized other consultations with CAMH clients for Consent and Capacity Board, Legal Aid Ontario, etc.
- ⇒ Forums for clients to gather their voice on: driver’s license suspensions, police records checks, medically assisted death, representation on CAMH committees, rights at CAMH, visions for future of CAMH, Sex, Love, Relationships and Bodies and Access to Services for Women. Etc.
- ⇒ Outreach to clients on high security units, women’s unit, forensic units, etc.
- ⇒ Presentation to CAMH Constituency “Patient Engagement: Past and Present”.
- ⇒ Client consultations for CAMH on discharge planning, Patient Portal Prevention and Management of Aggressive Behavior curriculum, Forensic Units and redevelopment planning.

EDUCATION

- DVD created to educate on the CAMH Bill of Client Rights. Centre wide education on BOCR conducted by EC and CAMH. Ongoing evaluation of rights support in hospital.
- Presentations at CAMH to Constituency, Education, Orientation, CAMH Board, etc.
- Assisted CAMH in train the trainer week(s) of provincial Correctional staff.
- Delivered courses with CAMH for on Understanding Mental Health and Addictions, Empowerment.
- TPS: taught de-escalation to every uniformed officer in Toronto, assist in debrief of unbiased policing, review training related to mental health, race, human rights, teach trauma informed relating to MCIT members, co-created training video with TPS of people who had been in crisis speaking on encounters with police.
- Developed curriculum to teach six-week pilot program on the client perspective for University of Toronto psychiatric residents. Contracted for a second year with triple the number of students.
- Developed and assisted in delivery of CAMH Prevention and Management of Aggressive Behaviour Curriculum.
- Law Association of Ontario grant to conduct mental health training, “Understanding Disability for Advocates”, for lawyers and advocates.
- Organized conferences, symposiums: Cheap and Crazy symposium – one day conference on clients rights, madness, addictions, law, and the future of advocacy; Toronto’s first conference on Recovery in mental health; Alternatives to the Use of Lethal Force by Police in partnership with the Urban Alliance on Race Relations and the Toronto Police Service.
- Conference Presentations: Keynote on “Tensions in Peer Work” (Niagara Falls), “Madness and the Politics of Violence” (Lancaster), Keynote on Advocacy (Quebec), “Creating A Powerful Voice for the People” (Vancouver); “We’re All Agents of Change” (Toronto); Race, Mental Health and Police (Toronto), and many, many more.

AWARDS



- ❖ City of Toronto Unsung Hero Award to Jennifer Chambers
- ❖ City of Toronto Access Human Rights Award to Lucy Costa
- ❖ CAMH Honourary Social Work Award: Jennifer Chambers
- ❖ Ontario Association of Patient Councils Award to EC and CAMH for the Bill of Client Rights.
- ❖ CAMH Education Awards: Tucker Gordon, Lucy Costa, Jennifer Chambers
- ❖ Parkdale Community Legal Services Dorothy Leach Memorial Award to Lucy Costa
- ❖ Law and Mental Disorder Association Advocacy Award to Jennifer Chambers.
- ❖ Mental Health Legal Committee Awards for Advocacy - Lucy Costa & Jennifer Chambers

RESEARCH

- *(W)righting women: Constructions of gender, sexuality and race in the psychiatric chart* Andrea Daley, Lucy Costa, Lori Ross in *Culture, Health & Sexuality: An International Journal for Research, Intervention and Care*
- “*Assisted Death – Our Last Best Judgement*” In *Ethics in Mental Health Substance Use*, Co- Authorship Lucy Costa, Edited by David B. Cooper
- Key Practices for Community Engagement in Research on Mental Health or Substance Use <http://lgbtqhealth.ca/projects/keypracticesforcommunityengagement.php> Team members: Lori Ross, Joyce Brown, Jennifer Chambers, Michele Heath, Sheryl Lindsay, Brenda Roche, and Jijian Voronka
- “Community-based research: Partnering with scientists” by Jennifer Chambers and Melissa Marie Legge <http://lgbtqhealth.ca/docs/GuidelinesCommunityBasedResearchProjectOutcome.pdf>
- Working group member for “Mental Health Recovery: Users and Refusers” research study funded by the Wellesley Institute.
- Women’s College Hospital XChange Grant recipient for research on access to sexual health services for women with mental health and addiction issues – produced online video.
- Parkdale Anti-Violence grant: conducted focus groups and contributed to publishing of paper, “Clearing a Path: A Psychiatric Survivor Anti-violence Framework”.
- Grant from LHINS for the Access Point Client Reference Group to help with preparation of report, “Consults, Feedback and the Future of Service User inclusion in System Planning”.
- Status of Women Canada grant to study intersection of women, mental health and addictions, and barriers to accessing housing, “A Place of My Own”.
- *Putting a Human Lens on the “Burden” of Mental Health and Addictions* with Public Health Ontario and the Institute for Clinical Evaluative Sciences.
- Barriers and facilitators to primary care for people with mental health and/or substance use issues: a qualitative study *BMC FamPract.* 2015;16:135 Lori E. Ross, Simone Vigod, Jessica Wishart, Myera Waese, Jason Dean Spence, Jason Oliver, Jennifer Chambers, Scott Anderson, and Roslyn Shields. For additional recommendations, tips for clients seeking primary healthcare, educational intervention and community report and videos (portico), see also report on <http://lgbtqhealth.ca/projects/accesstoprimarycare.php> and <https://www.porticonetwork.ca/learn/videos/access-to-primary-care>.
- Where is the client/patient voice in interprofessional healthcare team assessments? Findings from a one-day forum, *Journal of Interprofessional Care* Vol 31, 2017, Issue 1 pp 122-124 Sophie Soklaridis, Donna Romano, Wai Lun Alan Fung, Maria Athina Martimianakis, Joan Sargeant, Jennifer Chambers, David Wiljer & Ivan Silver.