

NEWS

Fall 2009

A Twice Annual Bulletin of the Habilitative Mental Health Resource Network

Inside this

issue:

Interministerial News Page 1

Submit your nomination for NADD Ontario Recognition Award Page 2

New NADD Ontario Strategic Directions Page 3

Do you want to join NADD?
Call or write NADD at 132
Fair St., Kingston, New
York 12401-4802.
Telephone 845-331-4336
Fax 845-331-4569
E-mail: nadd@aol.com
Website: http//
www.thenadd.org
Inquire about family, student, individual and organizational memberships. Cost is paid in U.S. dollars with 20% returned to support Ontario Chapter activities.

 Check out our website for what's new, great links and resources

www.nadd.ontario.org

0r

www.dualdiagnosisontario.net

Habilitative Mental Health Resource Network

Advertise your employment opportunities FREE of charge on the website. Submit a copy ready word document with expiry date to: contactus@dualdiagnosisontario.org

Message from the Chair

Season's greetings from the NADD Board! Based on the feedback from those who attended the May 2009 AGM about what we should continue to do, stop doing or start doing we have taken your advice and identified 5 new strategic directions! We unveil the directions in this issue of the Bulletin. These directions will form the basis of our committee work, thus we will be looking for NADD members and non-members to join us in our efforts. Please read on!

As part of our commitment to engaging families and developing a competent workforce, we are also pleased to be a co-sponsor of the upcoming International Dual Diagnosis Congress that will be held in Toronto, April 14-16. NADD Ontario will be sponsoring families or students to attend. Stay tuned for more information coming your way via e-mail. Also, in collaboration with Developmental Services Toronto (DSTO) families from outside Toronto will be able to access respite services for their family members to support their attendance.

So, mark your calendars. The keynote speakers include Tony Holland speaking about behavioural phenotypes, Nirbhay Singh and Richard Hastings (returning to Toronto) to talk on mindfulness-based interventions. Preconference topics include Innovations in Autism, Cognitive Psychotherapy and the NADD Competency-Based Certificate Program.

Safe holidays and we'll see you April.

Susan Morris, President

INTERMINISTERIAL NEWS

NADD presents to the Ontario Legislature Select Committee on Mental Health and Addictions

In October Jim Johnston and Susan Morris presented to the all party legislative committee on System Design for Individuals with Developmental Disabilities and Mental Health Needs. It was a packed 15 minutes (the same amount of time allotted to all deputations). Following a brief introduction to NADD, we provided examples of current integration initiatives that work well at the system and service level. This was followed by four areas of recommendation outlined below.

Jim Johnston then held the MPPs full attention as he spoke eloquently about what families require including: co-ordinated assessments, quality measures for programs, salaries adequate to attract and keep skilled workers, assurances that supports will be there when families are unable to provide support, better education

of doctors, psychiatrists and other support workers, flexibility and respect for their children.

NADD Ontario's recommendations for the system include:

1. Flexible system structure:

- <u>Integration at both the system and service levels</u> requires consistent ongoing interministerial structures
- Systems are designed to facilitate <u>flexibility in movement</u> of people in any direction
- Resources for system and service level integration Facilitators/case managers/system navigators who hold an integrated understand of the person.
- 2. Funding formula within health that de-emphasizes hospital beds and recognizes the cost of community care

Adequate resources to provide community based interprofessional care, housing, support and employment

3. Development of a competent workforce

- define <u>minimum care stan-</u> <u>dards and benchmarks for training</u> <u>programs</u>
- <u>investment</u> in human resource knowledge and skills training and education that establishes career paths

4. Continuum of services

• including a <u>tiered approach</u> to make the best use of the most expensive intensive/specialized resources

Cont. on page 2

INTERMINISTERIAL NEWS

NADD presents to the Select Committee on Mental Health and Addictions cont.

The slide presentation can be found on our web site. The Minister of Health Advisory Group consultation paper, "Every Door is the Right Door" is available at www.health.gov.on.ca. This paper, released July 2009, outlines the government's broad vision for the strategy.

Bill 77 response to regulations

NADD Ontario again collaborated with the Dual Diagnosis Implementation Committee of Toronto on a response to the draft regulations in August 2009. Eleven recommendations are included in the final submission – some of the key points are summarized below. As regional offices move toward implementation of the *Application Entities*, these recommendations should be kept in mind.

- Updated intelligence testing is recommended only when the functioning level is ambiguous, or when determined by a psychologist or psychological associate that the available information is inadequate to determine eligibility.
- All application entities must have access to a psychologist or psychological associate.
- Opportunities for direct funding continue to be part of the range of residential options that are available to the sector to address the variety of supports required.
- When a person does not meet cognitive limitations criteria for overall IQ (e.g., regulation 2(1)(1)), and requires a more nuanced and experienced assessment/clinical determination for the application entity (e.g., regulation 2(1)(2) and 2(1) (3)), the qualified psychologists or psychological associates identified as appropriate to complete assessments to determine eligibility under the Act, in addition to registration with the College of Psychologists of Ontario, would also have:

 -demonstrated experience and competencies in the assessment of individuals with significant limitations in cognitive functioning and mental health needs/challenging behaviours, and in particular, the impact of such difficulties on diagnosis, cognitive and adaptive functioning.
- The following experience, knowledge, and skills are demonstrated by Staff hired by the application entities:
 -significant clinical experience as per MCSS definition of clinical expertise in relation to Community Networks of Specialized Care (e.g., behaviour therapy, social worker, nursing, psychology, speech and language, etc.) and/or
 -significant experience with a range of developmental disabilities and complex needs (including mental health issues and their impact on cognitive, habilitative and adaptive functioning) and,
 -experience working with multidisciplinary teams including psychology, psychiatry, medicine, and demonstrated experience in understanding and applying psychological test results to daily support.
- NADD Ontario request to be included at the Partnership Table to provide the dual diagnosis perspective regarding policy directives to support the Legislation.

The full submission can also be found on the NADD website. www.naddontario.org

NADD Ontario Chapter Recognition Award—Call for Nominations

It's that time again – for you to nominate an individual, group or team within Ontario whose contribution to the field of dual diagnosis is consistent with the NADD new vision and strategic directions. There are 2 categories of potential recipients: 1) family members and persons with developmental disabilities; or 2) providers of service, students, academicians, researchers, educators, or administrators.

Recipients will be selected by the Board of NADD Ontario based on their contribution to:

Increasing the understanding and awareness of the abilities and needs of individuals with dual diagnosis, and/or Enhancing delivery of services to individuals with a dual diagnosis and their families, and/or Life time achievement.

Anyone can nominate an individual, group or team by completing the form found on the web site: www.naddontario.org (Note: The nominee is not required to be a member of NADD). All nominations must be made by or endorsed by a member of NADD. The completed nomination form is submitted to the member of the board in your region. The nominee(s) must be aware that their name(s) has been put forward prior to submission of the form. **Deadline for nominations is February 15, 2010**. The award will be announced at the Spring Annual General Meeting on May 14, 2010

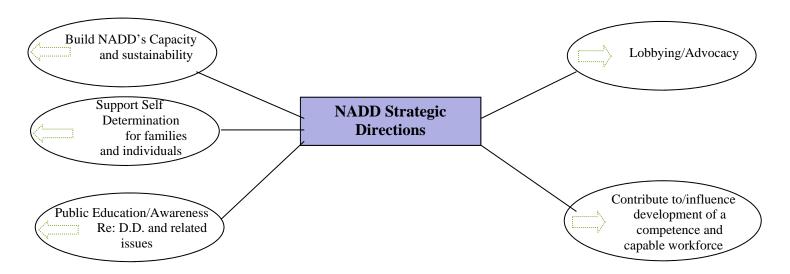
Update from the Board of Directors-NADD Strategic Plan 2009-2012

In our last edition of the bulletin we revealed our renewed graphic vision for NADD. To remind you:

NADD Ontario Vision

To contribute to the evolution of the service system so that families and professionals know what supports there are and how to get them, and there are more competent capable services and supports

We now we have 5 new strategic directions as summarized below. Work plans are under development. We invite you to contact a Board lead in the area of your interest to find out more and how you can join us in this work.



Join us in building the road as we walk it! We need your help to make the vision happen.

STRATEGIC DIRECTION	OUTCOMES		
Lobbying and advocacy Board lead: susan_morris@camh.net	-Public Policy at the provincial and national levels makes provision for people with dual diagnosis and their families -Post secondary opportunities for training in dual diagnosis are available		
Contribute to/influence development of a competent and capable workforce Board lead: mcoxon@themills.on.ca	-Co-ordinated and sustained clinical education/training paths with articulated competencies are linked to accrediting institutions -Demonstrated benefits to clients/families are defined for all training -People involved with dual diagnosis are linked and able to share knowledge (e.g. through a Community of Practice)		
Human service awareness re Dual Diagnosis Board lead: gwalker@simcoecommunityservices.ca	 -Human services providers have a basic understanding of dual diagnosis -Services are created and accommodations occur to integrate people with dual diagnosis 		
Support self determination for families and individuals Board lead: npilon@mhcp.on.ca	-Families and individuals know what supports there are and how to access them -Families and individuals have the necessary information to make informed decisions		
Build NADD's capacity and self determination Board lead: khirstwood@catulpa.on.ca	-NADD Ontario has the necessary human and financial resources exists to carry out its work -The membership is involved in implementing key directions -NADD Ontario is recognized as a 'go to" place for information and advice about dual diagnosis		

Partnership in Action

Perspectives™ An innovative new interprofessional education initiative enables health science students to learn how to make a difference in the lives of people living with developmental disabilities.

It is estimated that there are up to one million people in Canada with developmental disabilities. Yet, their needs are not being adequately addressed by the existing patchwork of uncoordinated programs and services in our healthcare system. As a result, these individuals experience more preventable illnesses and higher rates of psychiatric disorders (Ouellette-Kuntz, 2005) than other people in our society. People with developmental disabilities also experience frequent disparities and inequities in accessing health promotion/disease prevention knowledge or services.

One solution to addressing these inequities is to provide health science students and with more access to interprofessional education and opportunities to experience interprofessional collaboration. Traditionally, when students looked for ways to learn about interprofessional collaboration to advance care for people with developmental disabilities, there was a good chance they would come up short – every time.

In response to this need, Surrey Place Centre and the Dual Diagnosis Program (Centre for Addiction and Mental Health) launched a strategy to train health professionals and enable students to gain access to a wide range of learning opportunities in developmental disabilities and interprofessional collaboration. The resulting project, called "PerspectivesTM" is increasing the opportunities for students to learn.

All PerspectiveTM learning opportunities are fully supported by Sick Kids (The Hospital for Sick Children), Bloorview Kids Rehab, and Riverdale Community Health Centre. Students from the University of Toronto, York University and George Brown College have a choice to participate in two ways: 10 two-hour education sessions offered between November 2009 and April 2010 and/or, intensive, four-week, online case studies and discussion forums. The first on-line case study to be launched in January is about a 13 year old boy with autism, the 2nd about a 40 year old woman with a dual diagnosis.

After participating, the students will have gained significant new knowledge and skills in developmental disabilities and collaborative approaches to care. Hopefully this will also interest them to pursue careers in the field. The program is open to behaviour therapy, social work, psychology, nursing, medicine, occupational therapy, physiotherapy, speech and language, pharmacy and dentistry students. Each learning activity brings these students from different disciplines together for a shared learning experience.

The 18 month project is funded by HealthForceOntario. By the end of the project a sustainability plan will be developed that includes a roll out of the initiative to the Tri-Region Community Network of Specialized Care. For more information contact perspectives@camh.net

Here and There

Formal review of the *Accessibility for Ontarians with Disabilities Act* is being conducted to determine whether Ontario is on schedule in meeting its commitment to become compliant with the AODA requirements by 2025. The goal is full accessibility for all people with physical, mental or sensory disabilities. The review will determine whether new changes may be needed to the AODA itself or to the government's implementation of it. The review is scheduled to be complete by January 2010. For more information, visit www.news.ontario.ca.

An **online history of developmental services in Ontario** has been developed through a partnership between Community Living Ontario and the School of Disability Studies at Ryerson University, the Ministry of Community and Social Services has created. Through words, photographs and videos, you can find out why Ontario built institutions, why it closed them and what it would have been like to have lived and worked in them. To learn more, visit **www.ontario.ca/DShistory**

The US Senate has introduced **Rosa's Law**, a bill that will eliminate the terms "mental retardation" and "mentally retarded" from the federal law books. Under Rosa's Law, those terms would be replaced with "intellectual disability" and "individual with an intellectual disability" in federal education, health and labor laws. The bill does not expand or diminish services, rights or educational opportunities. It simply makes the federal law language consistent with that used by the Centers for Disease Control, the World Health Organization and the President of the United States, through his Committee on Individuals with Intellectual Disabilities.

Support Resources

http://challengingbehaviour.org.uk/
The Challenging Behaviour Foundation exists to demonstrate that individuals with severe learning disabilities who are described as having challenging behaviour can enjoy normal life opportunities when their behaviour is properly understood and they receive appropriate individualized support. Under resources they have DVD's that can be viewed on the computer explaining aspects of challenging behaviour.

Information Resources

www.lhinexchange.ca The LHIN exchange is an online resource to help mental health and addiction stakeholders across the province share information about what's going on in Ontario's 14 Local Health Integration Networks.

www.mencap.org.uk/document.asp?id=284 Link to "Death by Indifference", a report about institutional discrimination within the UK National Health Service, and people with a learning disability getting poor healthcare. This was the topic at the NADD Ontario AGM in May 2009.

www.hsjcc.on.ca/ Human Service and Justice Coordinating Committee of Ontario website developed to provide a central access point for information pertaining to health, criminal justice, and developmental service organizations in the province of Ontario. There is a French language information handbook on Dual Diagnosis in the news and publications section. Presentations from the recent provincial conference are also available, some of which were on the topic of dual diagnosis.

www.autismspeaks.org. Autism Speaks is North America's largest autism science and advocacy organization, dedicated to funding research into the causes, prevention, treatments and a cure for autism; increasing awareness of autism spectrum disorders; and advocating for the needs of individuals with autism and their families. http://www.un.org/disabilities On-line access to the Enable Newsletter, prepared by the United Nations Secretariat for the Convention on the Rights of Persons with Disabilities with input from UN offices, agencies, funds and programs.

Education Events

International Certificate Programme in Dual Diagnosis. Summer Institute 2008. Brock University. For information email <u>dualdiagnosis@brocku.ca</u> Registration: <u>www.brocku.ca/dualdiagnosis</u>

NADD 2010 International Congress & Exhibit Show, Toronto, April 14-16, 2010. Keynote Speakers: Tony Holland, PhD - Behavioral Phenotypes, Nirbhay Singh, PhD and Richard Hastings, PhD - Mindfulness-Based Interventions.

Pre-Conferences (April 14, 2010) Mental Health Diagnostic Systems for People with ID, Innovations in Autism, NADD Competency-Based Certificate Program, Behavioral Phenotypes, Cognitive Psychotherapy

NADD Ontario Annual General Meeting. May 14, 2010, Centre for Addiction and Mental Health

Website Update

The www.naddontario.org site receives approximately 1,700 to 2,000 hits a month. This makes it a viable location for advertising your employment or educational opportunities free of charge. To make a submission send us a Word ready document at: contactus@dualdiagnosisontario.net

<u>ca</u>

Board of Directors 2009

President		Mike COXON	705-424-5363
Susan MORRIS	416-535-8501, x 1136	Camphill Communities Ontario	mcoxon@rogers.com
CAMH, Queen St. Site	Susan_Morris@camh.net	Angus	
Toronto			
		Liz FROESE	1-866-486-1651
Vice-President		Southern Network of	froese.network@sympatico.ca
Shelley BISHOP	705-567-5370, ext. 3	Specialized Care	
CTRC	sbishop@ctrc.on.ca	Thorold	
Kirkland Lake		No. 1 Gram	510 155 5110 155
m.		Maria GITTA	519-455-5110, x 476
Treasurer	005 500 6404	Developmental Disabilities	mgitta@uwo.ca
Karen HIRSTWOOD	905-722-6484 ext. 228	Program UWO Dept. of Psychiatry	
York Support Services Network	khirstwood@yssn.ca	London	
Sutton West		Nancy, PILON	705-549-3181, x228
Secretary		Mental Health Centre	npilon@mhcp.on.ca
Jo Anne NUGENT	905-891-1790	Penetanquishine	прионениер.оп.са
Nugent Training &	jngent@nugenttraining.com	T chetanquisinne	
Consulting Services	<u>jingoin e nagoinarannig.com</u>	Jim JOHNSTON	416-492-1468(h)
Mississauga		Concerned Parents of Toronto Inc.	
		Toronto	
Past President			
Naseema SIDDIQUI	613-692-8619	Brenda QUINLAN	705-435-4792, x 229
Ottawa, K2J 5N3	nsidd@rogers.com	CLASS	brenda@class.on.ca
		Alliston	
Members at Large			
Elizabeth ARNOLD	519-832-5554	Dr. Robert KING	
Port Elgin	arnoldr@bmts.com	Belleville	robertking.med@gmail.com
AL CONANT	612 520 2400 24	Cl., WALKED	705 707 1025 202
Alex CONANT	613-530-2400 ext. 24	Glen WALKER	705-727-1235. x302
Providence Continuing Care Centre	conanta@providencecare.ca		gwalker@simcoecommunityservices.c
Kingston Kingston			
Kingston			