Follow-Up Response

The Standing Senate Committee on Human Rights (RIDR)
Regarding Human Rights of Federally-Sentenced Persons in the Correctional System
February 27, 2019 Appearance

2. Question about Mental Health Service Gaps

When Ms. Wheatley, appeared before this committee in February 2017 she discussed improvements in **CSC's delivery of mental health services to prisoners, but also identified gaps.** She said that "there are certainly still gaps for men for intermediate mental health care outside of treatment centres, and for women in a maximum-security environment".[1] What are the gaps she was referring to and what efforts has CSC undertaken to address these gaps in 2019. How have these measures been evaluated and what are the results?

[1] Jennifer Wheatley, Standing Senate Committee on Human Rights, 1 Feb 2017, https://sencanada.ca/en/Content/Sen/Committee/421/RIDR/53027-e

Response:

Data on the prevalence of mental disorders indicates that CSC has a gap in intermediate care beds for men. New funding from Budget 2017 and Bill C-83 has and will continue to bring improvements to close this gap. CSC will monitor the needs of this population as services are expanded through the new funding and will reassess, what, if any, residual gap remains once all new services are in place. Consistent with community models for health care, it is anticipated that the emphasis on early identification and treatment of mental illness, a focus of Bill C-83, will improve the health outcomes for this population.

In Budget 2017 and Budget 2018, funding was provided to establish intermediate care for maximum-security women. Staffing processes are now being finalized to fill the remaining new positions. Once in place, these services will close the gap for maximum-security women who require this level of care.

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3. Question: Section 29 Agreements

Senator Boyer: Thank you all for appearing today. I have a question that I'd just like to pick up in what Senator Cordy had mentioned and you spoke about it as well, for the \$150 million enhancements to mental health care. You also mentioned the two institutions that had beds under section 29 agreements, but I'm wondering how many you're planning on it increasing to and what plan is in place to use section 29 agreements within that \$150 million.

Ms. Kelly: Again I'll ask Ms. Wheatley to elaborate. In Budget 2018, we received money to establish contracts with external psychiatric hospitals. We already had beds at l'Institute Philippe-Pinel. The plan is to increase the number of beds that we have there. In terms of other psychiatric hospitals, we're constantly actually reaching out to hospitals to see if they would be willing to enter into a contract so we could send offenders there. At this point it's mostly l'Institut Phillippe-Pinel.

Ms. Wheatley: Maybe the one piece I can add is we hear from women that travelling great distances is a barrier to care. So they'll either not agree to being transferred to the hospital or they'll discharge themselves early from care when they're still not quite stable enough because they want to stay close, understandably, to their home community, to their families and children. Ideally what we would like is access to hospital beds across the country close to the regional women's facility so they don't have to travel great distances to Saskatoon or Pinel.

So we're continuing to engage the psychiatric hospitals close to our women's facility so we can access a small number of beds for our women at that site so we can reduce the travel and reduce that barrier of care. But as the commissioner said, it's difficult. Psychiatric hospitals I think struggle with bed availability for all Canadians, so this is a challenge for everyone, but we're continuing to stay engaged and seize opportunities as they arrive.

Ms. Kelly: I think the other good thing is again the new health Centre for Excellence in the Atlantic region is going to also provide us with some beds for women, which is a good thing.

Senator Boyer: How many beds are we looking at and when was what my question was really.

Ms. Wheatley: We're in discussions with Pinel to expand the number of beds. I don't want to commit Pinel yet because we haven't finalized the MOU, but our expectation is that that will be wrapped up this spring and we'll be in a position to share more information about that —

Senator Boyer: So we're looking at maybe 10 or more, 20?

Ms. Wheatley: We received new funding in Budget 2018. So Pinel won't be able to provide all the new funding; but once again, I think having a centralized resource for women is not what the women tell us they need. The women want availability at hospitals across the country close to their home and community. So in addition to working with Pinel on some expansion, we're going to continue to engage the psychiatric hospitals across the country to see if we can access more beds locally to the women's facilities.

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Senator Boyer: I understand that, but I was wondering if we have any actual numbers or any dates as to when this is projected to be completed.

Ms. Wheatley: We can share the Pinel numbers in the spring once we finalize the MOU with that organization. At this point there isn't another hospital that is ready to sign a MOU, but we're continuing to engage and ask.

The Chair: I wonder if we could ask you folks to send us that detail when you have it.

Senator Pate: I have a supplemental to that. Certainly information not just about women but about men and when the Brockville contract was terminated as well as the status for — in negotiations that have been happening between the Ontario government and Correctional Service Canada and the Nova Scotia government in particular. My understanding is those negotiations have been ongoing for over a decade and still not been resolved in large part because of funding issues.

Ms. Wheatley: I'm not sure funding is the sole issue. I think it's more capacity in various provinces that the provinces are struggling with the bed capacity, just like most health systems around the world, but we can follow up with the information.

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Response:

It is anticipated the Memorandum of Understanding (MOU) with Institut Philippe-Pinel will be signed in spring 2019 for additional beds, and at that time, CSC can advise the number of additional beds it has obtained. Currently, CSC has 12 beds for women and 3 for men at the Institut Philippe-Pinel.

In addition to the work with Pinel, CSC continues to engage psychiatric hospitals to secure access to a small number of beds close to each women's facility in order to assist women in accessing care without being displaced from their home communities and supports. Unfortunately, many provinces have capacity constraints that limit their ability to provide beds to federal populations.

CSC is continuing to engage East Coast Forensic Hospital, as part of efforts to enhance its capacity to effectively treat offenders with serious mental health needs.