

Windsor-Essex Opioid Strategy Leadership Committee

April 24, 2017 at 2:30 p.m., Room 1A

Minutes are draft until approved at a subsequent meeting

Present:

Dr. Wajid Ahmed	Associate Medical Officer of Health	WECHU
Dr. Paul Bradford	Emergency Department Physician	Windsor Regional Hospital <i>(by phone)</i>
Peter Chevalier	Staff Sergeant	LaSalle Police Service
Ramsey D'Souza	Manager, Epidemiology & Evaluation	WECHU
Steve Dale	Director of Critical Care	Leamington District Memorial Hospital <i>(by phone)</i>
Nicole Dupuis	Director of Health Promotion	WECHU
Jim Farrand	Inspector	Windsor Police Services
Dr. Sonja Grbevski	V.P. Brain and Behaviour Health	Hotel Dieu Grace Healthcare
Joe Karb	Director of Mental Health & Addictions	Hotel Dieu Grace Healthcare
Bruce Krauter	Chief	Essex-Windsor EMS <i>(by phone)</i>
Justin Lammers	Deputy Chief	Essex-Windsor EMS
Jeff Mailloux	Staff Sergeant	Windsor Police Service
Dawn Maziak	Health System Design Manager	Erie St. Clair LHIN <i>(by phone)</i>
Kari Meloche	RN BScN, Nursing Education	Leamington District Memorial Hospital <i>(by phone)</i>
Rob Modestino	Pharmacist	
Eric Nadalin	Manager, Chronic Disease and Injury Prevention	WECHU
Jelena Payne	Community Development and Health Commissioner and Corporate Leader Social Development	City of Windsor <i>(by phone)</i>
Mackenzie Slifierz	Epidemiologist	WECHU
Gillian Stager	Health Promotion Specialist	WECHU
Mike Symons	Detective Sergeant	Ontario Provincial Police
Elspeth Troy	Executive Assistant	WECHU (recorder)

Regrets:

Tim Berthiaume	Chief	Amherstburg Police Service
Claudia Den Boer	CEO	Canadian Mental Health Association
Jeanie Diamond-Francis	Integrated Manager, Mental Health Services	Canadian Mental Health Association
Al Frederick	Chief	Windsor Police Service
Theresa Marentette	Director of Health Protection	WECHU
Edward Marocko	Inspector	Ontario Provincial Police
Robert Moroz	Integrated Director, Outpatient & Community Services	Hotel Dieu Grace Healthcare

Chair: W. Ahmed

1.0	Welcome and Introductions A roundtable of introductions was done both in person and on the phone.
2.0	Agenda Approval – no additions

3.0	Review of Minutes	
3.1	Advisory Committee Meeting – February 27, 2017 Minutes have been approved and accepted.	
4.0	Business Arising/Updates	ACTION REQUIRED
4.1	Indicators; Data; Mapping; Sources; Data Sharing Agreements R. D’Souza is still analyzing data received from Windsor-Essex EMS. He has connected with the Ministry of Health to obtain more data from our community. R. Modestino advised that since 2015, every narcotic prescription has to go through the Ministry so there is no need for third party insurance information as it would be captured already. Data from ODB would be somewhat skewed as it would not include this information.	
5.0	New Business	ACTION REQUIRED
5.1	Confirmation of Co-Chair Bruce Krauter offered to be the co-chair. There were no concerns from the group.	
5.2	Terms of Reference – Windsor-Essex Opioid Strategy Leadership Committee W. Ahmed asked the group if there were any issues with the name as it stands currently. It was suggested to replace Opioid with “drug”. W. Ahmed advised that given the recent opioid overdoses across the country, the focus is on Opioids. Later on, based on the desire of the committee we can start talking about a larger drug strategy. W. Ahmed gave some background on the creation of this committee including identifying the need to work together and data sharing needs. W. Ahmed discussed the rationale for the membership (representing the four pillars of any drug strategy) and asked the committee to review the membership to see if anyone was missing. W. Ahmed also suggested each group nominate only one or two individuals to be representatives to solve any scheduling issues and make the representation more clear.	Any feedback for the Terms of Reference should be sent to W. Ahmed
5.3	Environmental Scan of Opioid Misuse Support Service Providers WECHU will be doing an environmental scan of the opioid-related services in the area. Data collection methods was discussed. Focus groups will be used to supplement the surveys. Target populations are organizations that offer substance use programs as well as those with lived experience with opioids. There will be consultation with the community to validate the results of the survey. Four working groups would be created to implement the strategies. The survey will be sent out to the group for feedback. The LHIN has a list of community providers that will be used as a starting point in compiling a comprehensive list. The list does not have services that aren’t funded by the Ministry. This list will be sent out to the group at a future date.	Feedback on the survey should be sent to E. Nadalin and G. Stager

5.4	<p>Mid-Summer Meeting</p> <p>W. Ahmed suggested the next meeting occur at the end of June, keeping in mind that if one person could not attend, their backup person is welcome. Email contact will continue in between meetings.</p> <p>N. Dupuis advised that ideally the next meeting would align somewhat with the collection of data from the survey in order to provide the group with an update.</p>	
6.0	<p>Questions</p> <p>None at this time.</p>	
7.0	<p>Next Steps</p> <p>There will be membership details and a truncated version of the minutes to be posted to the WECHU website for public information.</p>	
8.0	<p>Next Meeting</p>	
8.1	<p>Windsor-Essex Opioid Strategy Leadership Committee – Date to be Confirmed via Doodle Poll</p> <p>Doodle poll will be sent out in the coming weeks to choose the next meeting date.</p>	
9.0	<p>ADJOURNMENT: 3:30pm</p>	