



WECOSS Treatment & Recovery Working Group Meeting Minutes

Monday, February 3rd, 2025 | 1:30 p.m. – 3:30 p.m.
Via Microsoft Teams

Present: Toluwalope Adedugbe (WECHU), Erica Bassakos (WEOHT), Kamillo Lamosa (ESCC), Judy Lear-Zylstra (HDGH – Co-Chair), Ron Sheppard (WFHT), Patrick Kolowicz (HDGH), Alexis Erickson (WECHU), Anastasia Adams (Welcome Centre Shelter), Holly Busi (HCCO), Jennifer Cline (WEC Housing Corporation), Elizabeth Dulmage (Brentwood – Co-Chair), Kayla Leckonby (Social Worker), Milvia Mendoza-Ramesar (Salvation Army), Emily McKenna (Welcome Centre Shelter)

Regrets: Rio Anzolin (WRH), Kristi Benjamin (Peer Rep.), Robert Cameron (RE:ACT), Holly Kettle (ESH), Melissa Major (MHART), Alison Malott (Peer Rep.), Kevin Matte (HDGH/CMHA), Mack Park (UofW), Jacob Riches (Schulich), Stacey Shepley (MHART), Chris Thibert (Downtown Mission), Kelsey Vasovski (AEGIS Health), Amy Visser (weCHC), Kelly Barill (WECHU – Recorder), EMS VPN/MHART.

Co-Chairs: Judy Lear-Zylstra & Elizabeth Dulmage

		Action Required
1.0	Welcome & Introductions (E. Dulmage) Meeting called to order at 1:30 p.m.	
2.0	Approval of Agenda (J. Lear-Zylstra) Agenda approved.	
3.0	Review of Action Items from October 21st, 2024 (E. Dulmage) <ul style="list-style-type: none"> • Present 2025 project proposal to the WECOSS Leadership Committee in December of 2024 for discussion and approval (E. Dulmage). <ul style="list-style-type: none"> ○ Complete and 2025 project proposal approved. • Contact P. Kolowicz if interested in leadership opportunities with the PAT Committee (P. Kolowicz/ A. Erickson). <ul style="list-style-type: none"> ○ Call was put out for new leadership on the PAT committee. ○ New leadership was voted in at the January 16th PAT meeting. ○ Existing leads from HDGH will be supporting transitions to the new leads over the coming months. • Forward minutes and materials from all PAT Committee meetings to the TRWG (A. Erickson). <ul style="list-style-type: none"> ○ Complete and ongoing. A. Erickson continues to forward PAT committee minutes and materials to the TRWG. 	



	<p>Approval of Minutes from October 21st, 2024 (E. Dulmage)</p> <ul style="list-style-type: none"> • Change request from K. Leckonby – Remove K. Leckonby from the list of attendees at the October 21st meeting. K. Leckonby was not present at this meeting. <ul style="list-style-type: none"> ○ WECHU to revise the minutes as follows and re-issue to the membership. • Minutes approved otherwise. 	Remove K. Leckonby from the list of attendees in the meeting minutes from October 21 st , 2024 (K. Barill).
4.0	<p>Meeting Goals (J. Lear-Zylstra)</p> <ol style="list-style-type: none"> 1. Discuss TRWG Co-Chair role. 2. Provide closing updates on 2024 TRWG projects. 3. Discuss strategies and next steps for 2025 project implementation. 4. Review 2025 membership for the TRWG. 	
5.0	<p>WECOSS TRWG Co-Chair Role (E. Dulmage)</p> <ul style="list-style-type: none"> • E. Dulmage advised that this would be her last meeting as Co-Chair, as she will be retiring this year. • Following this meeting, there will be a vacant Co-Chair position for the TRWG. • Members were encouraged to consider the Co-Chair role. The time commitment is about 2-3 hours monthly, in addition to facilitating meetings. Administrative support is provided by the WECHU. • If interested or have any questions, members can contact E. Dulmage and J. Lear-Zylstra. 	Contact E. Dulmage and J. Lear-Zylstra if interested in the vacant Co-Chair position.
6.0	<p>2024 Project Wrap-Up</p> <p>WEC Connect Program and Service Inventory (T. Adedugbe)</p> <ul style="list-style-type: none"> • WEC Connect program and service inventory launched and available at https://wecoss.ca/wec_connect. • WECHU Web Specialist pulled metrics from the launch of the inventory on October 23rd, 2024 to January 17th, 2025. In total, there were 4,579 visits to WEC Connect over this time period. Programs accessed over 50 times each include those from RE:ACT, Brentwood, the weCHC Street Health site, and CMHA. • There are currently 125 programs and services on WEC Connect. • WEC Connect wallet cards are available in print format upon request. If interested, contact kbarill@wechu.org. • WEC Connect is also being promoted through posters, paid Google ads, WECHU social media posts, and Windsor transit ads. • From December 8th, 2024 until February 2nd, 2025, in-transit bus ads were posted on 10 buses. The ads contain information about WEC Connect and have a QR code that commuters can scan to get to the inventory. 	Contact K. Barill (kbarill@wechu.org) if interested in WEC Connect wallet cards.

	<ul style="list-style-type: none"> • Next steps include: <ul style="list-style-type: none"> • Promotion to and targeting of specific centers, such as schools, libraries, community centers, and pharmacies, with education about the inventory. • Development of a survey on the inventory that asks end users to provide feedback about their experience (e.g., why they are on the site, what kind of service they are looking for, user-friendliness of site, etc.). • Distribution of a follow-up feedback survey to the Patient and Family Advisory Committee at HDGH, who were previously consulted on the development of the inventory. • Development of an online survey that organizations can use to submit updates related to their program and service information for the inventory. • WEC Connect is updated every six months. In April 2025, every program and service that is represented on 211 will be updated on WEC Connect, per the data sharing agreement established with 211. Those that are not listed on 211 will be contacted for an update. <p>WECOSS Wallet Card (A. Erickson)</p> <ul style="list-style-type: none"> • Revised version of the WECOSS wallet card was presented for review. • Revisions were made to address feedback from community partners since the TRWG released the card in 2024. • Revisions were as follows: <ul style="list-style-type: none"> ○ Added the Urgent Crisis Centre as a resource. ○ Added the addresses of the agencies listed on the card to reduce barriers for those who cannot contact agencies by phone. • Additional suggestions from TRWG members for the revised wallet card: <ul style="list-style-type: none"> ○ Add “next to Ouellette ED” beside the Urgent Crisis Centre and remove the hours of operation. ○ Add “for self-identified women” under the Welcome Centre’s listing. ○ Add “delivery available” under Pozitive Pathways’ listing. 	
7.0	<p>2025 Project Implementation – Enhancing Access of Opioid Agonist Therapies (OAT)</p> <p>Project Overview, Current Status, and Strategies/Next Steps for Implementation (A. Erickson)</p>	

	<ul style="list-style-type: none"> • The 2025 TRWG project proposal was presented to the WECOSS Leadership Committee for approval in December 2024. The Leadership Committee was in favour of the TRWG moving forward with the project. • The proposal itself outlined the project background, purpose, goals, and milestones associated with the work. It was meant to be the foundation to work from to inform overall deliverables and approaches. • A recap of the project proposal was provided to the group. • Interactive polls were used to gather members’ input on the “who”, “what”, “where”, “how”, and “when” of the project. • Poll #1 – The first poll focused on defining the project’s target audiences (“Who?”). Members were asked to rank a list of potential target audiences for OAT education and training from highest to lowest. Poll results were as follows: <ul style="list-style-type: none"> ○ Ranked 1st: Regulated counsellors ○ Ranked 2nd: Non-regulated service professionals ○ Ranked 3rd: Regulated health professionals ○ Ranked 4th: Post-secondary students in relevant programs • Discussion Following Poll #1: <ul style="list-style-type: none"> ○ Targeting regulated counsellors and non-regulated service professionals will allow for in-depth information-sharing. These providers are the individuals that are most likely to be in touch with someone who may indicate use and give that first opportunity for intervention. They’ll have the clinical context to relate to clients and help them make decisions related to their care. • Poll #2 – The second poll focused on defining the project’s target settings (“Where?”). Members were asked to submit open text responses with their ideas, which were displayed on the meeting screen in a Word Cloud. Key results were as follows: <ul style="list-style-type: none"> ○ Common suggestions were community health, substance use, and mental health services as target settings. ○ Other options included private practitioners, RAAM clinics, Psychology Today, community centers, crisis centers, sober living houses, and substance use providers for younger teens at school. • Discussion Following Poll #2: <ul style="list-style-type: none"> ○ Parents/children need to understand how important it is for them to know what substance use disorders are and the issues associated with them in general. <ul style="list-style-type: none"> ▪ The WECOSS Prevention and Education 	
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	<p>Working Group is looking to do a project this year that will focus on illicit substance use prevention among school-aged youth, so there could be a tie in with this.</p> <ul style="list-style-type: none"> ○ Oftentimes, there is a need for peers and family members to understand OAT. <ul style="list-style-type: none"> ▪ Could target services operated by regulated professionals for friends, family, and loved ones of those who use substances to reach both audiences at the same time. ○ Discussed that lived experience should be integrated into the training to share success stories, which could have a huge impact on providing hope in recovering. ● Poll #3 – The third poll focused on defining the project’s delivery formats (“What?”). Initial idea proposed by Co-Chairs and A. Erickson was to create a virtual training that can be delivered to community agencies to support training of their staff on a continual basis (and as staffing changes occur). This format would also provide resources for staff to refer back to as needed. To complement the virtual training, the group could also comprise a list of experts/providers that are willing to be contacted for in-person trainings as needed. Members were asked to provide their input on delivery formats in a single choice poll. Poll results were as follows: <ul style="list-style-type: none"> ○ 80% agreed with delivering a hybrid training (i.e., blend of virtual and in-person). ○ 20% agreed with delivering a virtual training only. ● Discussion Following Poll #3: <ul style="list-style-type: none"> ○ Cornerstone (HR Download and Citations Software) may be a good place to upload a virtual training, if many agencies are using this platform. ○ For small organizations that do not have the ability or opportunity to host/maintain a virtual training on an HR training software, an option may be for someone to go in person, host a Team’s meeting to answer questions, or have a guest speaker. ● Discussion questions were then posed to the group to define strategies for developing and implementing project deliverables (“How?”): <ul style="list-style-type: none"> ○ Who in our community has the knowledge, experience, and expertise to contribute to content development and/or delivery around OAT? ○ Are you aware of any training or education resources that have already been developed on this topic that can be leveraged for the purposes of this project? 	<p>Investigate if your agency has a learning module software system that can accommodate an externally-created virtual learning (All).</p>
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	<ul style="list-style-type: none"> ○ What partnerships might we explore to support project implementation? ○ How might we approach the development of new or improved care pathways for OAT (e.g., WEC Connect, existing referral tools)? ● Discussed that the WECHU can support with planning, coordination, and evaluation, but will need support of local experts who have strong experience in this area to help deliver and develop the content. ● Health Quality Ontario has a specific quality standard for opioid use disorder for the care of people 16 years of age and older with guides geared towards clinicians and patients. See links below for more information: <ul style="list-style-type: none"> ○ https://www.hqontario.ca/portals/0/documents/evidence/quality-standards/qs-opioid-use-disorder-clinician-guide-en.pdf ○ https://www.hqontario.ca/Portals/0/documents/evidence/quality-standards/qs-opioid-use-disorder-recommendations-for-adoption-en.pdf ○ https://www.hqontario.ca/portals/0/documents/evidence/quality-standards/qs-opioid-use-disorder-patient-guide-en.pdf ○ https://www.ccsa.ca/sites/default/files/2019-04/CCSA-Best-Practices-Treatment-Opioid-Use-Disorder-2018-en.pdf ○ https://www.bccsu.ca/opioid-use-disorder/ https://physicians.nshealth.ca/sites/default/files/2022-08/321.full .pdf ● There is local expertise within our RAAM clinics. ● HDGH has community withdraw management counsellors that are already offering education with a prepared presentation. Staff and nursing units are being trained accordingly. ● Must be cautious of a possible perceived conflict of interest with respect to access to these services. ● An addiction doctor presented relevant information at HDGH, along with resources: https://www.metaphi.ca (PHI Provincial Network Ontario). ● eConsult Resource: Led by eHealth to give physicians the ability to reach out to a specialist in various areas of expertise to obtain recommendations for follow-up and follow-through, including mental health and substance use. ● Project Timelines: <ul style="list-style-type: none"> ○ Identify organizations and/or service providers to engage for OAT education and training – April 30th, 2025 (Co-Chairs & WECHU) ○ Develop and deliver relevant education/training and resource materials to service providers – October 31st, 2025 (Local Experts, WECHU & Co- 	<p>Reach out to RAAM doctors for local expertise on OAT (E. Dulmage).</p> <p>Share contact information for physicians who may be able to provide local expertise on OAT (All).</p>
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	<p>Chair Supports)</p> <ul style="list-style-type: none"> ○ Collaborate with community partners to create, implement, and promote additional care pathways for OAT across health and social service settings – October 31st, 2025 (Local Experts, WECHU & Co-Chair Supports) ○ Evaluate the efficacy and effectiveness of service provider education resources and care pathways established through this project – November 30th, 2025 (WECHU). 	
8.0	<p>2025 Working Group Membership (A. Erickson)</p> <ul style="list-style-type: none"> ● Annual membership review emails have been sent to TRWG members by A. Erickson, asking all to confirm their membership status for 2025. Members were asked to please provide the requested information by Friday, February 7th. This will help to finalize the membership list for 2025. ● Current membership list was reviewed with the TRWG. Additional suggestions for membership were as follows: <ul style="list-style-type: none"> ○ Leamington Centre of Hope ○ House of Sophrosyne ○ Journey’s Recovery Home ○ New Beginnings ○ Teen Health Center ○ Downtown Windsor Community Collaborative ● Discussed representation from CMHA and HDGH’s integrated services. <ul style="list-style-type: none"> ○ Confirmed that these services are no longer integrated. ○ Suggested that the TRWG reach out to CMHA directly to confirm if they would like to be a part of this year’s project. 	<p>Connect with suggested agencies to inquire about interest in joining the TRWG for 2025 (Co-Chairs & A. Erickson).</p> <p>Reach out to the Co-Chairs and A. Erickson with any other suggestions related to 2025 TRWG membership (All).</p>
9.0	<p>Community Agency Roundtable (All)</p> <ul style="list-style-type: none"> ● WEOHT is offering another system navigation 211 training event virtually on February 13th from 10:00 a.m. – 11:15 a.m. Focusing on mental health and substance use service providers to get a refresh on how to update their records in 211, as well as accessibility and navigation. Registration page is available at: https://www.weoht.ca/events/weoht-system-navigation-211-virtual-training/ 	
10.0	<p>WECOSS Pillar Updates (A. Erickson)</p> <ul style="list-style-type: none"> ● Harm Reduction Working Group: Focusing on an anti-stigma project to improve local understanding and attitudes towards harm reduction. Meeting at the end of February to define project specifics. 	

	<ul style="list-style-type: none"> • Enforcement and Justice Working Group: Working on a project that aims to integrate the work of Substance Supports in Neighbourhoods Accessed through Police Partnerships (SSNAPP) into the WECOSS. Existing SSNAPP grant ends in March 2025. This project will engage community housing units in training/education related to SSNAPP's existing neighbourhood safety plans and explore the expansion of the safety plans to Essex-County, particularly the Leamington area. • Prevention and Education Working Group: Working on developing a coordinated substance use prevention strategy for our area, focusing on upstream promotion and prevention amongst the school-aged population. Looking at opportunities to use Planet Youth as the model for intervention, which is a five-year evidence-based prevention strategy targeted to youth. 	
11.0	<p>Summary of Action Items and Next Steps (J. Lear-Zylstra)</p> <ul style="list-style-type: none"> • Remove K. Leckonby from the list of attendees in the October 21st, 2024 meeting minutes (K. Barill). • Contact E. Dulmage and J. Lear-Zylstra if interested in the vacant Co-Chair position (All). • Contact K. Barill (kbarill@wechu.org) if interested in WEC Connect wallet cards (All). • Use the gathered information from this meeting to develop a plan to train frontline providers on OAT (Co-Chairs & WECHU). • Investigate if your agency has a learning module software system that can accommodate an externally-created virtual learning (All). • Reach out to RAAM doctors for local expertise on OAT (E. Dulmage). • Share contact information for physicians who may be able to provide local expertise on OAT (All). • Connect with suggested agencies to inquire about interest in joining the TRWG for 2025 (Co-Chairs & A. Erickson). • Reach out to the Co-Chairs and A. Erickson with any other suggestions related to 2025 TRWG membership (All). 	
12.0	<p>Meeting Wrap-Up</p> <ul style="list-style-type: none"> • Adjournment: 2:54 p.m. • Next meetings: <ul style="list-style-type: none"> ○ Monday, April 28th from 1:30 p.m. – 3:30 p.m. ○ Monday, September 22nd from 1:30 p.m. – 3:30 p.m. ○ Monday, November 17th from 1:30 p.m. – 3:30 p.m. 	

