

September 12, 2022

Mr. Abid Mavani
Fatality Inquiry Coordinator
Justice and Solicitor General
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Dear Abid:

Re: ROBERT WILLIAM CROWLE – Public Fatality Inquiry, Response to Recommendation

Thank you for providing the Honorable Judge Van de Veen's report. This letter is to provide a response to the recommendation impacting Alberta Health Services (AHS).

Recommendation 1 below is quoted directly from the report and the AHS response to the recommendation follows.

Recommendation 1

It is recommended that the Government of Alberta appoint a task force to address the glaring gaps in the mental health system noted by The Honorable Justice Wittmann and The Honorable Justice Lacobucci, which contribute to police commonly being first responders to people in crisis and emotionally disturbed individuals whose mental health issues have escalated to the point requiring police involvement. The complexity of this problem is considerable and as mentioned by Justice Lacobucci appears to be an aspect of modern society which several countries, as well as Canada, are grappling with. The only way to prevent dangerous encounters with police by persons in crisis and emotionally disturbed individuals is to prevent the crisis from occurring in the first place. This engages the challenge of an early intervention despite dealing with difficult people whose mental health issues fall short of incapacity, but nevertheless cause them to be unable to access the help they need. It involves not only police and mental health services, but also the scientific and academic communities in order to find solutions to the complex problem of police becoming first responders to people in crisis and emotionally disturbed individuals. A recommendation for Alberta Health Services to carry an independent study of this problem was made in the Inquiry Report into the death of David William McQueen dated March 11, 2020.

It appears that an important opportunity was lost when Mr. Crowle was hospitalized September 12, 2016. No collateral contacts appear to have been consulted even though he had been hospitalized with significant injuries causing a severe brain injury. Expert evidence before the Inquiry is that hospital psychiatric staff dealing with patients like Mr. Crowle ought to consult third parties to secure the information, they need to properly treat such patients. It appears matters were simply left without referrals or recommendations simply because he did not wish to press charges against his grandson who had inflicted the September injuries for which he was hospitalized. The evidence before the Inquiry is that the brain injury suffered by Mr. Crowle commonly results in aggressive and even suicidal behavior and hospital records do not indicate whether follow-ups or referrals were either recommended or carried out.

Response

AHS does not accept this recommendation. The response as to whether a task force will be established to address gaps in the mental health system should be provided from the Government of Alberta as identified in the recommendation. Alberta Health Services is willing to participate in any task force that is established. There are a number of initiatives currently underway to improve the system that address some of the issues identified that AHS is able provide an update on. These are noted below.

Provincially there has been an increase of five Regional Police and Crisis Teams in 2022 with a sixth team planning to launch in the next few months. These teams are located in Wetaskiwin, Rocky Mountain House, Peace River, Cochrane, and Fort McMurray; the last team to launch will be located in St. Paul. Each of these specialized police and mental health clinician partnerships provide a mobile response to support individuals experiencing a mental health crisis. All these teams provide services to multiple communities outside of the detachment in which they are located as they are expected to service multiple communities. Within AHS Calgary Zone specifically, the partnership with the Calgary Police Service has continued to expand over the last several years. In October of 2018, AHS launched a dedicated phone line in Calgary to allow members of the Calgary Police Service (CPS) the opportunity to speak with a mental health professional on the Mobile Response Team (MRT) while responding to mental health calls for service in the community. The consult line is available to help CPS make the decision as to whether a Form 10 is appropriate and when possible, to create opportunities for mental health clinicians, police and the client, to collaborate around the best plan to address mental health concerns. The consult line was initially operational 12 hours per day 7 days a week. Due to its success and high demand, in September of 2021 it was expanded to be available 24/7. From April to June 2022 there were 1068 calls to the consult line. This is an increase of approximately 150% from the same three months in 2021. In addition to the consult line, the number of Police and Crisis Teams (PACT) in Calgary, made up of a police officer and mental health clinician, was increased in June 2021 from 6 teams to 12 teams. This increase has expanded the number of teams available to respond to complex mental health situations. The AHS Addiction and Mental Health program in the Calgary Zone continues to work collaboratively with the Calgary Police Service on additional ways to further our work together to provide care to those experiencing a mental health crisis in the community

AHS did not proceed with the recommendation from the David William McQueen Fatality Inquiry to carry out an independent study of gaps in the mental health system that contribute to police being first responders to people in crisis. However, an alternate solution was proposed, and work is continuing. This includes an initiative currently underway by the AHS Addiction and Mental Health Strategic Clinical Network which will include recommendations for improving care for patients as they transition between police, emergency departments and correctional services.

Additionally, in an effort to further support the sharing of information between law enforcement and health care staff, Alberta Health funded the HealthIM system. HealthIM is a digital application that began provincial rollout in July of 2022 to the Edmonton City Police and will be fully implemented across the province by September of 2023. HealthIM is composed of four main features: Pre-Response Safety Briefing, Mental Health Risk Screener, Interagency Communication and Reporting and Analytics. The intent of the application is to support law enforcement in identifying which individuals need to be brought to hospital for further mental health assessment and to send this information to AHS in advance of the conveyance of the individual to the AHS site. This allows the AHS site to plan for the arrival of the patient and make any necessary staffing decisions, for example increasing protective services requirements. HealthIM will provide another tool to support the sharing of information between law enforcement and health care providers.

A new Provincial Law Enforcement Mental Health Call Line was also initiated as a pilot on August 9, 2022. The call line will be expanded in phases to provide support to the entire province. Similar lines exist in the large urban centres, as identified above, and provide law enforcement the opportunity to triage mental health calls

for service with an AHS registered mental health professional.

Sincerely,

"Original Signed"

Dr. Francois Belanger
Vice President Quality and Chief Medical Officer
Alberta Health Services

"Original Signed"

Deb Gordon
Vice President & Chief Operating Officer, Clinical Operations
Alberta Health Services

cc: Mauro Chies, Interim Chief Executive Officer, Alberta Health Services