



Darryl Ross <darrylondunlin@gmail.com>

Recap from Meeting

3 messages

Latouche, Krystle <Krystle.Latouche@casott.on.ca>

31 May 2019 at 13:58

To: Cynthia Holmes <cynthmholm@gmail.com>, Darryl Ross <darrylondunlin@gmail.com>

Meeting with Darryl and Cynthia.

Charlotte and Alice absent as they have head lice.

Purpose:

To discuss updates on visits, worries/concerns, safety plan, recommendations, and status of file.

Visits:

Visits have been going well. The girls have reported that they are happy and have been asking when they can have more visits with their dad.

It has been observed by all parties that the girls appear more comfortable and Cynthia informed that she sees that Darryl has been doing well since Jan being reliable and consistent.

Darryl would like to increase visits to have more times with the girls and wants to have sleepovers.

Cynthia informs that she never has an issue of how the girls are doing while with Darryl and praised him as being a great father of the girls but is worried about how he is dealing with other aspects of his life that would benefit in the care of the girls i.e. treatment, social life/family support, finances and consistency with routines.

Worries/Treatment/Recommendation:

Darryl informs he has been doing really good, he has not drank or had the urge to drink.

Cynthia would like to see Darryl healthy. She expressed she is concerned about treatment and Darryl not seeing an addictions counsellor.

Darryl informed that he has not seeing Julie as she is a crisis counsellor and deals with people who are in crisis. But they have come up together a plan on different strategies to help with keepin him on track. Darryl states that he were to have an urge to drink or relapse he would notify Dr. Willows and Julie right away and would check himself into a hospital.

Darryl informed that he has been getting regular blood work with Dr. Fraser to ensure his blood levels are where they are suppose be and free of alcohol. Darryl also informed he is not taking medication some of the medications he was taking before such as Gabapentin.

We discussed the concern of how serious WKS was when he was hospitalized and Cynthia expressed how scary that was to not know what was going on and what to tell the girls. We also discussed a more structured treatment program a highly recommending this avenue. However, Darryl believes these types of programs do not work for him and does not believe it is well suited for where he is at in his addictions. Darryl spoke about his addictions coming later in life for him and was not a result of past historical issues or trauma. We discussed the correlation to his alcohol use to life and environmental stressors (finances, depression, anxiety), but Darryl does believe it is not one things over another.

Darryl states that Dr. Fraser has referred him to a CBT program. He beleives this program fits with what he believes and will address everything in general in order to help change his thought process as well as help with developing skills and strategies to enhance his over well-being.

Cynthia expressed she would like to Darryl to contact Dr. Willows and inform her of this CBT program to get her perspective on it and to see if there would be somethings she feels would be more beneficial for him. Darryl agreed to call Dr. Willows to see if he can get an appointment with her to get her perspective and will update Cynthia about this as well as how he is doing and what he has been working on, on a regular basis.

Darryl expressed that in order for Cynthia to see improvements and gain her trusts is for both of them to communicate more with one another, have more conversations, pop in when the girls are there with him.

Social:

Cynthia expressed she needs to see Darryl be more social, to have positive people in his life that can offer support as well as hold him accountable for his actions.

Darryl informs that he is an introvert by nature but is working on being more social. Darryl states he has joined a cycling club, going for walks, other hobbies, and spending more time with his mom Holly, Kelly (who is met at the RO), work colleagues, Aunt Buddy, Jennifer. He is also working on resolving relationships with family members.

Darryl expressed wanting to be more involved with everything with the girls and their school. It was discussed and agreed by both parents that this could start to resume as of September.

Safety Plan:

Darryl indicated that although this would not happen but if he had a drink while the girls were with him, he would notify Cynthia or her mother right away and use the phrase "He is sick and cannot have the girls right now" which would be the code to he is not doing well or he has had a relapse.

Darryl offered using a child care person who live across the street who could also assistance if the girls needed to go to a safe place in case someone in the safety network was not available to come right away. Darry and Cynthia agreed they would work out something together to have an additional plan.

We discussed that the Society no longer has any protection concerns because it has been a period of almost 6 months and things have been going well. We discussed using the safety network of support when needed (Cynthia, her mother, his mom). We discussed that the visits no longer had to be supervised and sleepovers can start to be implemented. Cynthia and Darryl were directed to work these schedules out on there own.

We also discussed doing a check in before the girls get dropped off to ensure Darryl is in a good state and sober. Informed that it was their responsibility as parents to act protectively of their children if they feel that the children at any given time would be at risks by either parent.

Status of file:

Informed parents as there are currently no protection concerns the file will close. Both parents agreed with this plan. We will close the file the end of July 2019.

Let me know if I have missed or need clarification on anything.

Kind regards,

Krystle Latouche, B.S.W

Child Protection Worker

Ongoing Services

The Children's Aid Society of Ottawa

150 Katimavik Rd

Kanata, ON K2L 2N2

Telephone: (613) 747-7800 ext. 3133

Email: krystle.latouche@casott.on.ca

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Darryl Ross <darrylondunlin@gmail.com>
To: Darryl Ross <darrylondunlin@gmail.com>

20 August 2019 at 19:07

Begin forwarded message:

[Quoted text hidden]

Darryl Ross <darrylondunlin@gmail.com>
To: lawyerjane@sympatico.ca

28 August 2019 at 13:15

Begin forwarded message:

[Quoted text hidden]



Sandy Hill
Community Health Centre
Centre de santé
communautaire Côte-de-Sable
Every One Matters.
Chaque personne compte.



Date: 12/11/2019
RE: Darryl Ross
DOB: 05/02/1979
Our File Number: 10148

To: Darryl Ross

This letter is to confirm that Darryl Ross has attended Addictions and Mental Health Services provided by the Sandy Hill Community Health Centre.

Darryl attended a total of 10 individual counselling sessions. His first appointment was on March 20th, 2018 and his final appointment was on January 9th 2019. Darryl sought counselling services to make changes to his substance use.

He reported that his substance use began after losing access to his children. He reported no previous history of misusing substances. Throughout our involvement, he participated in the addiction support unit at the Royal Ottawa Hospital and received stabilization services through the Queensway Carleton Hospital.

After this time, he was adamant that his perspective around substance use had shifted and felt that this was no longer an option for him. He reported feeling confident in his ability to maintain the changes he had made. He did not identify any further substance use goals.

Termination was mutually agreed upon.

Julie Gingras

Julie Gingras, MSW, RSW
Addictions and Mental Health Therapist
Sandy Hill Community Health Centre
221 Nelson St.
Ottawa, ON K1N 1C7
Tel: 613-789-8941 ext. 2218
Fax: 613-789-3964
www.shchc.ca

Administration:

221 rue Nelson Street, Ottawa, Ontario K1N 1C7
Tel/Tél: (613) 789-1500 • Fax/Télé: (613) 789-7962 • info@sandyhillchc.on.ca • www.shchc.ca

Dr Nancy Fraser
Arbour Family Medicine
201-770 Broadview Ave
Ottawa ON K2A 3Z3

Phone 613-680-1065
Fax 613-695-1870

Dec 4, 2019

To Whom It May Concern:

Re: Darryl Ross Feb 5, 1979 Age: 40 yr
613-762-2067 (M)

Mr Ross has been a patient of my family medicine practice since 2011. Since his hospitalization in November 2018 for Wernicke's encephalopathy complicating severe alcohol use disorder I have seen him at my office 12 times on an as needed basis. He has also had counselling and has been followed by Dr Willows of the Substance Use and Concurrent Disorders program. Since his hospital discharge in the past year he states he has not had any alcohol and has no cravings for it. He has never shown any indication of acute alcohol use or withdrawal at office visits. He has returned to his usual work as of January 2019.

Yours truly,



Nancy Fraser, MD CCFP (#021967)