



Office of the  
Chief Coroner  
Bureau du  
coroner en chef

## Verdict of Inquest Jury Verdict de l'enquête

The Coroners Act – Province of Ontario  
Loi sur les coroners – Province de l'Ontario

We the undersigned / Nous soussignés,

[Redacted] of / de Kitchener, ON  
[Redacted] of / de Kitchener, ON  
[Redacted] of / de Kitchener, ON  
[Redacted] of / de Elmira, ON  
[Redacted] of / de Cambridge, ON

the jury serving on the inquest into the death(s) of / membres dûment assermentés du jury à l'enquête sur le décès de:

Surname / Nom de famille

Baker

Given Names / Prénoms

Beau Aaron

aged 20 years held at virtually from Toronto, Ontario  
à l'âge de \_\_\_\_\_ tenue à \_\_\_\_\_

from the 20th of March to the 31<sup>st</sup> of March 20 23  
du \_\_\_\_\_ au \_\_\_\_\_

By Dr. / D<sup>r</sup> David Eden Presiding Officer for Ontario  
Par \_\_\_\_\_ président pour l'Ontario

having been duly sworn/affirmed, have inquired into and determined the following:

avons fait enquête dans l'affaire et avons conclu ce qui suit :

Name of Deceased / Nom du défunt

Beau Aaron Baker

Date and Time of Death / Date et heure du décès

April 2, 2015 at 10:10pm

Place of Death / Lieu du décès

St. Mary's General Hospital, Kitchener ON

Cause of Death / Cause du décès

Gunshot wound of the torso

By what means / Circonstances du décès

Suicide

Original confirmed by: Foreperson / Original confirmé par: Président du jury

\_\_\_\_\_  
\_\_\_\_\_

Original confirmed by jurors / Original confirmé par les jurés

The verdict was received on the 31<sup>st</sup> day of March 20 23  
Ce verdict a été reçu le \_\_\_\_\_ (Day / Jour) \_\_\_\_\_ (Month / Mois)

Presiding Officer's Name (Please print) / Nom du président (en lettres  
moulées)

Dr. David Eden

Date Signed (yyyy/mm/dd) / Date de la signature (aaaa/mm/dd)

2023/03/31

Presiding Officer's Signature / Signature du président

We, the jury, wish to make the following recommendations: (see page 2)

Nous, membres du jury, formulons les recommandations suivantes : (voir page 2)



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## Verdict of Inquest Jury Verdict de l'enquête

The *Coroners Act* – Province of Ontario  
*Loi sur les coroners* – Province de l'Ontario

Inquest into the death of:  
L'enquête sur le décès de:

**Beau Aaron Baker**

### JURY RECOMMENDATIONS RECOMMANDATIONS DU JURY

#### **We the jury recommend to The Regional Municipality of Waterloo:**

1. Coordinate and lead all necessary local stakeholders in submitting an Application with an evidence-based Business Plan to the Province of Ontario for the funding of one or more Youth Wellness Hubs to be established in Waterloo Region.

#### **We the jury recommend to The Province of Ontario:**

2. Provide base funding for, and facilitate the creation of, Youth Wellness Hubs across the Province as introduced under the Ontario's 2020 Road to Wellness Strategy, using the following eight (8) guidelines:
  - a. operate with extended hours and in transit-friendly locations, appropriate for transition-aged youth (aged 16-24);
  - b. be housed in youth-friendly, non-clinical settings to support trust and comfort amongst youth;
  - c. be connected to a 24-hour crisis line with sufficient funding and staffing to ensure callers encounter no wait times;
  - d. provide developmentally appropriate primary care, peer supports, mental health and addiction services;
  - e. ensure that the voice of transition-aged youth is included in the design and delivery of the design of the sites and the delivery of services;
  - f. conduct outreach through methods appropriate for transition-aged youth to ensure that youth are aware of the services provided;
  - g. be subject to continuous research and evaluation to ensure that they operate in a manner that is evidenced-based, and
  - h. promote/communicate awareness of the program within the community.
3. Provide full funding to Children's Aid Societies for youth aged 18 to 23 in the care of a Children's Aid Society through the Ready Set Go Program. To achieve the Government's stated goals of the Ready Set Go initiative, full funding needs to be permanent and guaranteed for the duration of the program.
4. Adequately fund community mental health and addiction services (evidenced by no wait lists) for assessment, treatment and relapse prevention services. The Province of Ontario should increase system capacity to provide adequate levels of in-home and live-in intensive treatment services across the Province.
5. Adopt a commitment to move away from licensing traditional group home settings and toward licensing and fully funding smaller, family model care settings, with access to multi-disciplinary care teams that wrap around a youth and respond to their individual needs effectively, to improve outcomes and support youth health and wellness.

6. Identify and implement critical linkages between its Child Welfare Redesign strategy (Ministry of Children, Community and Social Services) and its Roadmap to Wellness strategy (Ministry of Health) to streamline access and facilitate early intervention and wraparound services for children and families. The Province of Ontario should adequately fund and implement community-based prevention services to avoid intrusive Child Welfare involvement. This should include addiction and mental health services for parents.
7. Provide sufficient and sustained funding for programs like IMPACT (i.e., Mobile Crisis Intervention Teams) and Crisis Call Diversion Programs and specifically, those initiatives in the Waterloo Region for the Canadian Mental Health Association Waterloo Wellington.
8. Support and implement Waterloo Regional Police Service's submitted 2021 Ontario Association of Chiefs of Police resolution, as endorsed and passed, as it relates to Response to Mental Health (Non-Public Safety) Calls and Authorities under the Mental Health Act.
9. Ensure that Community-based non-police crisis response teams are available 24/7 across the Province and are sufficiently funded to provide effective response times.
10. Create or amend legislation, and provide supporting funding, that would allow for "Situation Tables" or "Connectivity Tables" within all communities to be mandated. Consideration should be given to authorizing the sharing of information to allow for the efficient identification of persons in crisis for referrals and support. The mandate of such Tables should be the identification and support of those that may be receiving treatment while in crisis but not accessing or offered support in between those crises.
11. Use the model adopted by the Gerstein Crisis Centre to roll out similar programs across Ontario and continue support of the existing centre in the City of Toronto.

**We the jury recommend to The Province of Ontario and Municipal Governments:**

12. Adopt a Housing First commitment for youth 16 and over in the care of a Children's Aid Society and receiving extended support from a Society under the Ready Set Go program, by ensuring there is adequate funding and supply for affordable, supportive transitional housing up to and including young adults aged 23.

**We the jury recommend to all police agencies, Children's Aid Societies, and healthcare clinics or healthcare professionals who are supporting a transition-aged (16-24) young person with complex needs:**

13. Be empowered to initiate case conferencing and case management if such a process would be helpful in coordinating supports for the young person. Any case conference process should be strengths-based and place the young person and his or her family at the centre.

**We the jury recommend to Children's Aid Societies:**

14. Ensure youth are being connected with a worker in the community in which they reside in order to maximize knowledge of, and referrals to, local resources and supports. In the case of interjurisdictional case management, information about available local services should flow regularly and freely between the collaborating agencies.

**We the jury recommend to Police services that employ Mobile Crisis Intervention Teams:**

15. Ensure that such teams are promptly advised of any calls involving persons in crisis for which they are not part of the initial response by police, subject to applicable privacy laws and other statutory restrictions. This will ensure that the MCIT is available to engage in any follow-up with the person after the immediate crisis is resolved.

**We the jury recommend to The Ministry of the Solicitor General:**

16. Support initiatives (including amendments to any adequacy standards or legislation) that would allow for the transfer of first response to mental health calls not involving safety concerns (such as a threat of violence to others or the person in crisis) to other, community-based non-police agencies.
17. Consult with mental health experts, people with lived experience, and the police, to create, maintain and mandate integrated Use of Force, mental health and de-escalation training for all police officers (after recruitment training). This training should also be made available to crisis response workers who work with police to respond to persons in crisis.

**We the jury recommend to the Waterloo Regional Police Service (WRPS):**

18. Until such time as there is provincially mandated curriculum as set out in recommendation 17 above, undertake to have their in-service training with respect to use of force and de-escalation reviewed by peer-run advocacy groups and other community-based crisis and mental health service providers prior to the training being delivered. The Ministry of the Solicitor General should provide sufficient and consistent funding to allow the WRPS to engage in this type of training review and to allow for members from the same peer-run advocacy groups and other community-based crisis and mental health service providers to assist with the delivery of de-escalation training.
19. Ensure that any officer involved in a situation in which they are required to draw their firearm as a result of threat of serious bodily harm or death shall receive a documented debrief with a supervisor prior to their next shift.

**We the jury recommend to The Province of Ontario and Medical Schools in Ontario:**

20. Take necessary measures to ensure that patients have timely access to Child and Adolescent Psychiatrists, including but not limited to funding for additional Residency positions dedicated to Child and Adolescent Psychiatry.
21. Take necessary measures (i.e. raising caps) to allow for training of additional primary care physicians and Child and Adolescent Psychiatrists.

**We the jury recommend to The College of Physicians and Surgeons of Ontario:**

22. Encourage physicians to remain up-to-date with evidence-based treatment plans and drugs related to mental health cases.

**We the jury recommend to The Ontario Ministry of Education:**

23. Provide information on mental health supports available in the community through schools and incorporate age-appropriate curriculum regarding mental health.

**We the jury recommend to ALL recipients:**

24. Secure adequate funding and resources to implement these recommendations.

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