



Health Justice Clinic in Mental Health and Addictions

A collaboration between the Empowerment Council and the University of Windsor, Faculty of Law, funded by The Law Foundation of Ontario.

WE CAN HELP YOUR CLIENT WITH:

- **Housing Law** (e.g., evictions, rental increases, harassment, maintenance issues)
- **Immigration & Refugee Law** (e.g., permanent residence cards/applications, work/study permits, status regularization (H&Cs, TRPs), citizenship)
- **Family Law** (e.g., child custody, family support)

ELIGIBILITY

A client is eligible if they are a current **inpatient** or **outpatient** of CAMH.

*Self-referrals are not currently available. This means referrals must come from staff members.

VISIT US

Every Friday, 12 - 3 pm by appointment (other days/times available on request, phone/video only).

Empowerment Council Offices - Room 1322,
McCain Complex Care & Recovery Building
1025 Queen St W, Toronto, ON

WHAT WE DO

- Free, Confidential Legal Service
- Legal Education, Know Your Rights trainings
- Law Reform



healthjusticeclinic@uwindsor.ca

1-866-747-0882

ADDITIONAL INFORMATION / FAQs

- We **do not practice** in: Criminal Law, Wills & Estates, Consent & Capacity, or Social Assistance law (ODSP/OW). We can connect clients with trusted practitioners in these areas.
- Services are delivered by **law students under lawyer supervision**.
- **Capacity is limited**. Wait times may occur in April and December due to exams.
- We know staff know clients well, but ethical rules require us to **speak directly with the client** before opening a file.
- We must conduct a **conflict-of-interest check**, meaning we must confirm whether any opposing party has a file with the Clinic.

HOW TO MAKE A REFERRAL

When you reach out, please provide your **name and organization**, the **client's name and a safe contact method** (no MRN needed), and a **short description of the issue** (no confidential details)

If convenient, please use this template:

- **Client Name** (Full Legal Name, including middle name, no MRN needed):
- **Client Contact Information** (safe phone/email address, if any):
- **Area of Legal Issues:**
- **Urgency** (any pressing deadlines):
- **Interpreter Needed** (yes/no and language):
- **Staff Name and Contact** (if not already provided/in signature):

After this, we will:

- Schedule a **direct intake call** with the client.
- Confirm **consent, eligibility**, and complete the **conflict check**.
- Book a **follow-up appointment** (phone, virtual, or in person at CAMH on Fridays).

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