

# Waterloo Region Opioid Response: Update - November 21, 2018



## What is the Opioid Crisis?

Problematic substance use interferes with physical or mental health, schooling or employment, relationships, financial stability, personal safety, and the safety of others. The causes of problematic substance use are complex and fit within the broader context of the social determinants of health; nobody chooses to develop an addiction.

Opioids are a family of drugs which are typically used to treat acute and chronic pain. Examples of prescription opioids include, but are not limited to: fentanyl, hydromorphone, methadone, and oxycodone. In a joint statement issued on November 19, 2017, the Federal Minister of Health and Ontario Minister of Health and Long-Term Care reported that Canada was **facing a serious and growing opioid crisis marked by rising numbers of addiction, overdoses, and deaths**. The following points chronicle key aspects of the opioid issue:

- Over the past several years there has been increasing concern regarding the misuse of prescription opioids, including overprescribing, and the appearance of these medications in the illicit drug market
- Fentanyl is a potent opioid and largely responsible for an increase in overdose deaths. Fentanyl enters the drug market through either diversion of pharmaceutical fentanyl products or through importation or smuggling of pharmaceutical grade fentanyl from abroad. It is then used to create illicit products or is added to other substances as such as cocaine and heroin
- Individuals may use fentanyl intentionally or may use it unknowingly as a result of contamination, or it being added to another substance
- Even in small doses, fentanyl can lead to a fatal overdose
- There has been an increased presence of carfentanil (significantly more toxic than fentanyl) in our local drug supply in the last two years

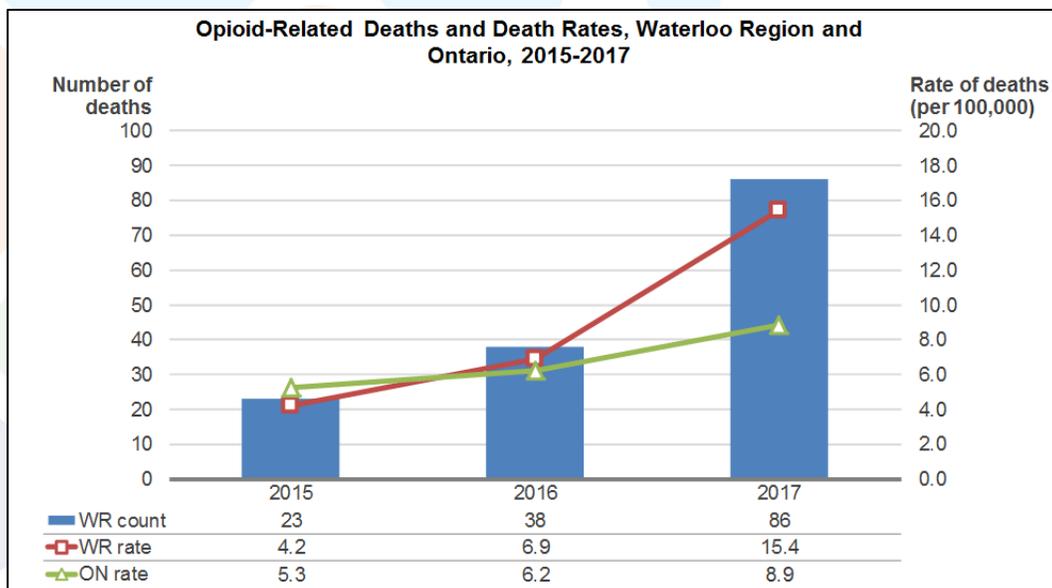
Federal and past Provincial governments' action plans on opioids have been bolstered and include focus on prescribing practices, access to naloxone, enabling supervised consumption and treatment services, promotion of the Good Samaritan Drug Overdose Act, and guiding evidence based care.

The burden of opioid use is felt throughout Waterloo Region by community members, first responders and service providers, including those who use substances or have friends or family members struggling with addiction.

## Impact of the Opioid Crisis on Waterloo Region

Local statistics on opioid overdose continue to highlight the severity of the issue (Waterloo Region Overdose Bulletin and Police Services data):

- The number of overdose related calls to Paramedic Services continues to increase; as of November 17, 2018, Paramedic Services had responded to 740 overdose related calls, a 7% increase from the same point in time in 2017
- Paramedic Services naloxone administrations are lower as of November 17, 2018, a 35% decrease from the same time point in 2017; likely due to the increased availability of naloxone in the community and the increased use of oxygen by paramedic services as a strategy to reduce the effects of overdose
- For 2018 year-to-date, most opioid overdose related Paramedics Service calls and naloxone administrations were for patients aged 20 to 34 years
- Recent data from the Office of the Chief Coroner for Ontario reveals a 274% increase in opioid overdose related deaths from 2015 to 2017. Preliminary data from the Coroner shows that 86 Waterloo Region residents died from an opioid overdose in 2017. (This is higher than the previously reported 71 deaths, based on the number of suspected deaths as reported by Police. There is a time lag to obtaining coroner death data, which only recently became available.)
- Waterloo Region Police Service has reported 39 suspected total overdose deaths for 2018 (up to November 5th)
- A 147% increase in opioid-related emergency department visits was seen between 2015 (149 visits) to 2017 (368 visits). From 2015-2018, rates of emergency department visits in Waterloo Region have been higher than provincial rates. From January to June 2018 there were 189 emergency department visits in Waterloo Region, a rate of 33.6 per 100,000 and higher than the provincial rate of 25.6



## How are we responding?

### a) The Special Committee on Opioid Response

Since 2012, the Waterloo Region Integrated Drugs Strategy has been working to address issues of substance use and addiction, including opioid addiction and overdose, through a four pillared approach that includes Prevention, Harm Reduction, Recovery and Rehabilitation, Enforcement and Justice, with an underlying principle of Integration.



In 2017, the Ministry of Health and Long-Term Care in 2017 directed public health units to support development of opioid response plans. Given the existing partnerships and collective approach in the region, creating the plan through the Waterloo Region Integrated Drugs Strategy was both practical and appropriate. Problematic substance use is a complex community issue requiring comprehensive social determinants of health solutions, partnership across multiple sectors, integration of services, and the involvement of people directly impacted by substance use and their communities. Recognizing this, and building on the existing work of the Waterloo Region Integrated Drugs Strategy, a Special Committee on Opioid Response was struck in February 2018. An offshoot of the Waterloo Region Integrated Drugs Strategy Steering Committee in partnership with Public Health, the Special Committee brings together community leaders to build on existing work and further advance strategies to address the complex nature of the opioid situation through a Community Opioid Response Plan.

Membership on the Special Committee includes:

- CAO representation from Waterloo Region cities and townships
- Waterloo Regional Police Service
- Region of Waterloo Paramedic Services
- Waterloo Wellington Local Health Integration Network
- Waterloo Region Crime Prevention Council
- Public and Catholic School Boards
- Region of Waterloo Community Services
- Region of Waterloo Public Health
- Chairs of the four WRIDS Coordinating Committees

The Special Committee is co-chaired by Stephen Gross, who also serves as co-chair of the WRIDS, and Dr. Hsiu-Li Wang, Medical Officer of Health (Acting) for Region of Waterloo Public Health and Emergency Services.

#### b) Waterloo Region Opioid Response Plan

The Waterloo Region Opioid Response Plan builds on the existing work of community partners and details the community's comprehensive and integrated response to opioid issues, the full plan is available at [www.regionofwaterloo.ca/opioidresponse](http://www.regionofwaterloo.ca/opioidresponse).

The plan provides federal, provincial, and local context, and describes strategies that are currently happening in Waterloo Region to address the opioid crisis and strategies that are needed. Through stakeholder consultation, strategic priorities to address opioid-related issues in Waterloo Region were identified and included in the plan, which is organized by the pillars of the Waterloo Region Integrated Drugs Strategy.

Examples of existing strategies within the pillars of the Waterloo Region Opioid Response Plan:

<b>Pillar</b>	<b>Strategy</b>
<b>Prevention</b>	<b>Waterloo Region - Youth Engagement Strategy</b>
<b>Harm Reduction</b>	<b>Exploring Supervised Consumption Services</b>
<b>Recovery &amp; Rehabilitation</b>	<b>Rapid Access Addiction Medicine Clinics</b>
<b>Enforcement &amp; Justice</b>	<b>Good Samaritan Drug Overdose Act Implementation Strategy</b>
<b>Integration &amp; Communication</b>	<b>Integrated Opioid Response Communications Strategy</b>

The Special Committee has reviewed the identified priorities to move forward and will continue to guide strategy implementation and reporting. Aligned with these priorities, stakeholder working groups are being formed to develop action plans, along with timelines and indicators of success.

The Waterloo Region Opioid Response Plan has been submitted to the Ministry of Health and Long-Term Care. The plan will be updated based on the needs of the community and the changing opioid situation. Progress will be measured on identified strategies and progress reports will be provided to Regional Council. Long term outcomes will be monitored as part of the ongoing work of the Waterloo Region Integrated Drugs Strategy.

## Consumption and Treatment Services (previously Supervised Consumption Services)

Within the Harm Reduction pillar of the Waterloo Region Opioid Response Plan, one of the strategies being pursued is Consumption and Treatment Services (previously called Supervised Consumption Services). Consumption and Treatment Services are one service within a continuum of evidence-based services that support people living with problematic substance use. They provide a place where people can use drugs in a monitored, hygienic environment to prevent fatal overdose and other harms from substance use, while also providing a gateway to additional services such as counselling, primary care, and treatment.

Consumption and Treatment Services have been shown to save lives, reduce needle litter in communities where public drug use is prevalent, reduce transmission of infection and disease, connect clients with health and social services, and improve community safety by reducing public drug use.

The need for Consumption and Treatment Services in Waterloo Region was established through Phase 1 of the Supervised Injection Services Feasibility study reported to Regional Council in February 2018. Findings from the study can be found at [www.regionofwaterloo.ca/scs](http://www.regionofwaterloo.ca/scs). The following table provides a timeline of key work completed and decisions to date made by Regional Council (Board of Health) related to Consumption and Treatment Services.

Date	Key Decisions by Regional Council (Board of Health) and Related Reports
June 2017	Endorsement to move ahead with Supervised Injection Services Feasibility Study <a href="#">PHE-IDS-17-04 Enhancing Harm Reduction Services In Waterloo Region</a>
October 2017	Endorsement of methodology for Supervised Injection Services Feasibility Study: <ul style="list-style-type: none"><li>• In-person interviews with people who inject drugs</li><li>• Key informant interviews with harm reduction service providers</li><li>• Information and consultation sessions with interest groups</li><li>• Online public survey</li></ul> <a href="#">PHE-IDS-17-09 Waterloo Region Supervised Injection Services Feasibility Study</a>
February 2018	Endorsement of: <ul style="list-style-type: none"><li>• Receipt of Supervised Injection Services Feasibility Study Phase 1 report for information</li><li>• Scheduling special council meetings for public input on recommendations from Phase 1</li><li>• Arrangement of Supervised Injection Services tours for Regional Councillors</li></ul> <a href="#">PHE-IDS-18-04 Waterloo Region Supervised Injection Services Feasibility Study - Findings from Phase 1</a>
April 2018	Endorsement to move forward with Phase 2a of the Supervised Consumption Services Feasibility Study – identification of candidate locations <a href="#">PHE-IDS-18-06 Waterloo Region Supervised Injection Services Feasibility Study Recommendations</a>

Date	Key Decisions by Regional Council (Board of Health) and Related Reports
June 2018	<p>Endorsement of the following identified candidate locations:</p> <ul style="list-style-type: none"> <li>• 150 Main St. Cambridge</li> <li>• 149 Ainslie St. N Cambridge</li> <li>• 115 Water St. N Kitchener</li> </ul> <p>Endorsement to move forward with Phase 2b of the Supervised Consumption Services Feasibility Study</p> <p>Decision to direct staff to provide community members the opportunity to suggest additional candidate location options for consideration</p> <p><a href="#">PHE-IDS-18-07 Waterloo Region Supervised Consumption Services Phase 2a Results</a></p>
August 2018	<p>Endorsement of additional candidate locations:</p> <ul style="list-style-type: none"> <li>• 150 Duke St. W Kitchener</li> <li>• Property at Weber and Victoria</li> </ul> <p>Decision to put community consultations for candidate locations of Supervised Consumption Services (Phase 2b of the study) on hold until further direction is received from provincial government</p> <p><a href="#">PHE-IDS-18-09 Update on Candidate Locations for Supervised Consumption Services</a></p>

In late October 2018, the Ministry of Health and Long-Term Care announced the funding and support of Consumption and Treatment Services, and applications for funding are now available. The province shared that there will be a cap of 21 sites for the province. There are currently 11 Supervised Injection Services and 10 Overdose Prevention Sites approved in Ontario. All 21 of these sites have been notified to apply for the new Provincial Consumption and Treatment Services program; however, Ministry staff has indicated that others may also apply. Information regarding the new Consumption and Treatment Services program is still in the process of being provided and Public Health will continue to work with partners to identify local implications. With this information, anticipated next steps include:

- Review of work completed over the summer and fall (development of service model and site-specific cost break down summaries)
- Obtaining information from the Province regarding eligibility and funding for the new Consumption and Treatment Services
- Consideration by the Board of Health on staff recommended next steps, including potential public consultations on candidate sites
- If approved, conduct public consultations and develop mitigation plans to address concerns raised. Finalize site-based operating models and associated cost plans
- Consideration by the Board of Health to proceed with a provincial application for funding for one or two sites in Waterloo Region