



Implementation of Supervised Injection Services in Toronto

Dr. David McKeown Medical Officer of Health

> Board of Health July 4, 2016



Background

- Toronto & Ottawa Supervised Consumption Assessment (TOSCA) Study (2012)
 - Toronto would benefit from multiple SISs
 - model integrated into existing health services for people who inject drugs
- Board of Health supported:
 - implementation of integrated SIS model in Toronto (2013).
 - community consultation process for 3 integrated SISs in Toronto (March 2016)





Implementing SIS in Toronto

- Three agencies propose to add small-scale SIS to existing health services for people who inject drugs:
 - Toronto Public Health, The Works
 - Queen West-Central Toronto Community Health Centre
 - South Riverdale Community Health Centre
- Agencies are coordinating program and policy development.



Current harm reduction services:

- Sterile injecting supplies distribution and return
- Community and mobile outreach/distribution
- Safer drug use education
- Overdose prevention (naloxone)
- HIV point-of-care testing + hepatitis C testing/treatment
- Primary care (e.g., immunization, wound care)
- Counselling and group programming
- Referrals to drug treatment, social services, housing, etc.

Additional services with SIS:

- Supervision of injection by nurse
- Monitoring for adverse drug reactions
- Medical intervention, if necessary





Need for SIS in Toronto

- Harm reduction client service profile
 - 61% hepatitis C positive
 - 5% HIV positive
- High demand for harm reduction services
 - over 100,000 client visits (2015)
 - almost 1.9 needles distributed (2015)
- Rising numbers of overdose deaths

Drug-induced deaths in Toronto 2004-2014



DI TORONTO

Public Health

Source: Office of the Chief Coroner of Ontario, compilation and analysis by Toronto Public Health

Image: Toronto Public HealthAccidental deaths in Toronto caused by mostPublic Healthfrequently lethal drug types, alone or in combination



Source: Office of the Chief Coroner of Ontario, compilation and analysis by Toronto Public Health



Accidental deaths in Toronto caused by heroin or morphine (may include heroin), and/or by fentanyl, alone or in toxic combinations



Source: Office of the Chief Coroner of Ontario, compilation and analysis by Toronto Public Health



- To gather and analyze input from the community about SIS related to:
 - benefits
 - concerns
- To provide information to the community about SIS to help inform their input on the issue.
- Document suggestions from stakeholders to address their concerns.



Consultation Process



The Works





Queen West Central Toronto Community Health Centre

168 Bathurst Street Toronto ON M5V 2R4

- The 3 organizations worked together to develop the consultation plan.
- Plan had common and agency-specific activities to address needs of each community.
- External vendor conducted some activities + organizations engaged with additional local stakeholders.



Consultation Activities





- Online Survey
- Town Halls and Open Houses
- Focus Groups and
 Information Sessions



"Do you think small scale SIS would be beneficial?"

Location	Number of Respondents	% Reporting Benefits
Toronto in general	1285	96%
Queen West – Central Toronto CHC	205	84%
South Riverdale CHC	213	86%
Toronto Public Health – The Works	143	86%

Respondents could report benefits and concerns



Key Themes: Benefits of SIS

Perceived benefits included:

- Reduction in risk of infectious diseases such as HIV/AIDS and hepatitis C
- Reduction in fatal and non-fatal overdose
- Reduction in public injection in alleyways, public washrooms and stairwells
- Reduction in discarded injection drug use equipment
- Increase use of other health, social and treatment services



"Do you have any concerns about the addition of smallscale supervised injection services at (insert location)?"

Location	Number of Respondents	% Reporting Concerns
Toronto in General	1285	14%
Queen West – Central Toronto CHC	205	35%
South Riverdale CHC	213	33%
Toronto Public Health – The Works	143	36%

Respondents could report benefits and concerns



Concerns included:

- Increase in crime, including drug use and trafficking
- Disruptive client behaviours following injection
- Community and personal safety, especially for children
- Decrease in business profits and property values
- Negative impact on neighbourhood reputation
- Diverse opinions on the role of police
- Adequacy of service hours



Design of the SIS

- Adequate waiting space inside and monitoring to prevent loitering outside.
- Encourage people to stay after injection to monitor for signs of overdose.
- Ongoing monitoring of operational hours.
- Safe needle disposal.



Role of Police

Adequate and appropriate police presence through:

- Develop protocols with Toronto Police Service to determine how close police would be to services in order to address crime, but not deter access by clients.
- Community policing approach.



Community Advisory Committee

- Identify concerns and strategies to address them.
- Involve BIA, local schools, residents' associations, clients, and police.





Strategies to Address Concerns

Evaluation & Monitoring

- Collect baseline data before service initiation.
- Regular monitoring after implementation, including patterns of service use.
- Share results with community advisory committee and make publically available.



Legal requirements

Section 56.1 (2) of the *Controlled Drugs* & *Substances Act* - criteria for federal exemption applications:

- Supporting data
- Detailed site plans, program policies/protocols
- Financial plan
- Links with drug treatment services
- Results of community consultation
- Letters of opinion and strategies to address
 concerns



Recommendations to BOH

- Support implementation of small-scale SIS at the three health organizations.
- Submit Section 56 exemption application to Health Canada to operate SIS at TPH/The Works.
- Forward report to City Council and request letter for exemption application for the three organizations.
- Request letters from Ministers of Health & Long-Term Care and Community Safety and Correctional Services, and the Chief Medical Officer of Health.



Recommendations for BOH

- Request 100% capital and operating funding from Ministry of Health & Long-Term Care for three services.
- Direct MOH to submit proposal to Ministry of Health & Long-Term Care and requesting funding for SIS at TPH/The Works.
- Urge Ministry of Health & Long-Term Care to increase capacity to enable on-demand access to drug treatment.



Implementation of Supervised Injection Services in Toronto

Dr. David McKeown Medical Officer of Health

> Board of Health July 4, 2016