

HL13.2 Implementing Supervised Injection Services in Toronto Board of Health consideration on July 4 2016

Deputation on behalf of the community of
The Cathedral Church of St James
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Shalom,
Greetings from the community of the Cathedral Church of St James.
I am Lanadee Lampman, parish nurse at St James since 2013. I am here to speak as persuasively as I am able in support of the Medical Officer of Health's recommendations to implement small scale supervised injection services in Toronto.

The proposed site nearest to our community is 277 Victoria St, The Works. We are already working with staff from The Works to improve our ability to meet the needs of our population so, for us, this site is ideal. You have before you today a strong report. Appendix E lays out a detailed Service Program Proposal for Supervised Injection Service at The Works. The 9 recommendations by the Medical Officer of Health comprise the steps needed to make this good thing happen. But, you know all that. I am sure that you have already read the report.

I want to tell you about us, our story, and why we favor adding supervised injection services to the robust set of harm reduction services already available at The Works. St James Cathedral sits at King and Church. It is open to the public every day and has several worship services daily. The Cathedral is visited by tourists, school groups, anyone wishing a bit of quiet. Surely you have seen on TV the visits of the Queen, or the state funerals held at St James. You have probably not seen on TV the homeless who huddle beside the walls at night and use it as a place of respite during the day. Adjacent to the Cathedral to its north sits the glass 3 storey Cathedral Centre. This light bright space has audiovisual equipped meeting rooms so it is heavily used for corporate events, wedding receptions, or film shoots. There are offices for the large staff and even apartments to house some of the clergy. So, we have babies, toddlers and dogs living on site. Tuesday afternoons we welcome one to two hundred guests to the St James Drop-In. They gather for food, music and hospitality as well as Bible study, toiletries, free haircuts, skilled foot care and access to nurses from Street Health. On the east side of the Cathedral St James Park runs all the way to Jarvis St. Occupy Toronto happened here. St James Park is near St Lawrence Market, condos, co-ops, Fred Victor and the Salvation Army. This place is heavily used. If you live downtown, this is where you walk your dog.

Our place could be a poster child to illustrate the need for supervised injection services in Toronto. Those who are marginally employed or housed, those challenged by mental illness are our neighbours and friends. They tend to cluster in public places like ours. Our staff pick up about a dozen discarded syringes a week. Lately that number

has grown to as much as 9- 14 syringes a day. No longer are the discarded sharps in the nooks and crannies at the base of the Cathedral. They are found out where you walk your toddler, where your dog runs.

The Ontario Nurses Association has produced a needlestick handbook. It talks of “downstream” exposures, that is, the gardener, or the dog walker who receives a needlestick injury. The same handbook says that there are 33 blood borne pathogens transmissible by needlestick. The biggest worries are Hep B...which lasts for days on a discarded needle, HIV and Hep C. You all have surely heard that we had rats in our park last summer. The Vancouver Rat Project trapped and tested rats finding a number of pathogens transmissible to people eg Bartonella, Clostridium difficile, Leptospira, MRSA. If you are inadvertently stuck by a random sharp you have no idea what it might be carrying. Clinical investigation and management of such an exposure is complex and expensive. St Michael’s Hospital has a pocket handbook of the required algorithms.

On the grounds of St James people dependent upon injectable drugs self- medicate outside, even sometimes Inside buildings. There are negative health impacts now and sooner or later a fatal overdose is likely.

Were these individuals able to access a SIS at The Works they would be using sterile equipment under the supervision of a nurse and they could benefit from the all other Works services. The TOSCA report concluded that conditions in Toronto warranted implementation of SIS. That is certainly true for the St James community I serve. Let’s do this!

Lanadee Lampman RN

REFERENCES

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