

## **Toronto Overdose Action Plan: Prevention & Response**

**Date:** March 10, 2017

**To:** Board of Health

**From:** Acting Medical Officer of Health

**Wards:** All

### **SUMMARY**

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At its meeting of December 5, 2016, the Board of Health asked the Acting Medical Officer of Health to develop a Toronto Overdose Action Plan in response to the drug overdose crisis in Toronto. This report responds to that request.

Toronto Public Health (TPH) consulted with the Toronto Drug Strategy Implementation Panel and its Overdose Coordinating Committee in the development of a draft Action Plan that was taken out for consultation in January and February 2017. Diverse community input was gathered through an online survey and four open-invitation sessions that were held in downtown Toronto, North York, Etobicoke and Scarborough. Overall, there was broad community support for the actions proposed in the draft Action Plan, as well as additional ideas for consideration.

The final report entitled, *Toronto Overdose Action Plan: Prevention & Response*, provides a comprehensive set of actions to prevent and respond to overdoses, building on the work that is already taking place in the community, and by governments and other institutions. The Plan combines the knowledge and expertise of people who use drugs, their family and friends, and people working in the field with best practices and international research. The Plan is meant to be flexible to address new and emerging issues or situations going forward.

Implementation of the Action Plan will be aligned with implementation of the Toronto Drug Strategy as the drug strategy has complementary and overlapping actions, and structures in place to support this work. The TPH Drug Strategy Secretariat will lead coordination and implementation of the Action Plan. In order to do so within existing resources, implementation of other drug strategy recommendations and other epidemiological work will be delayed. A funding request for additional resources to support this work will be included in the TPH 2018 Operating Budget Request for consideration as part of the City's 2018 Budget process.

The community service sector also needs additional resources to respond to the overdose crisis. The Action Plan recommends targeted provincial funding to community-based health, treatment and harm reduction services. The Action Plan also includes a

commitment from the TPH Toronto Urban Health Fund to prioritize funding and support for community services for overdose prevention and response, and other harm reduction initiatives. The purpose of this funding will be to increase the number of trained peers and to sustain community capacity to assist in overdose prevention and response.

## RECOMMENDATIONS

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The Acting Medical Officer of Health recommends that:

1. The Board of Health endorse the report entitled *Toronto Overdose Action Plan: Prevention & Response*;
2. The Board of Health request the Ontario Ministry of Health and Long-Term Care to:
  - a) Develop a provincial overdose strategy urgently, in consultation with multi-sector provincial, municipal, public health, and community stakeholders, and people who use drugs and their family/friends.
  - b) Dedicate a coordinator and funding to support implementation of the provincial overdose strategy across ministries, municipalities, and sectors (e.g. hospitals, prisons), and to align it with implementation of the Ontario Opioid Strategy.
  - c) Work with an Indigenous facilitator to develop and undertake a dedicated process to engage Indigenous communities to identify overdose prevention and response strategies specific to Indigenous communities across Ontario.
  - d) Provide free naloxone to community services for distribution to clients, including agencies distributing harm reduction supplies.
  - e) Provide free naloxone to community service providers (e.g. housing programs, shelter providers, drop-in services) to include in their onsite first aid kits.
  - f) Provide nasal naloxone to community service providers, first responders and correctional facilities.
  - g) Expand funding to harm reduction programs to increase their capacity to respond to the current overdose crisis and future program needs.
  - h) Increase funding for full-time, appropriately paid positions for workers with lived experience to assist with overdose prevention and response and other harm reduction initiatives.
  - i) Direct the Local Health Integration Networks to develop overdose policies and protocols, including the availability of naloxone, in provincially-funded health care services, as appropriate, with an initial focus on the substance use treatment sector.
  - j) Work with the Local Health Integration Networks to ensure naloxone kits are provided to people in opioid substitution treatment, and people with a history of opioid use at discharge from mental health and substance use treatment services, and hospital emergency departments.
  - k) Consult with people who have been impacted by overdose to determine what supports and services are needed to help them cope with the trauma of these experiences. Groups to consult include people who have experienced a non-fatal overdose and their family and friends, and people working in health and social services sectors.
  - l) Confirm adequate funding for Toronto Public Health/The Works, Queen West-Central Toronto Community Health Centre and South Riverdale Community Health Centre to facilitate opening of the supervised injection services as soon as possible.

- m) As part of the provincial overdose plan, identify and fund overdose prevention and response measures for the community, such as overdose prevention services and mobile medical facilities, as may be required in an emergency.
- n) Fund community drug checking programs and research.
- o) Work with Local Health Integration Networks to increase funding to expand the capacity of the substance use treatment system, and to expand the models of treatment, from harm reduction to abstinence, to ensure people can access appropriate services when they need them.
- p) Work with the Local Health Integration Networks on improving the integration of substance use treatment services with primary and mental health services, including harm reduction services.
- q) Work with relevant professional associations, Local Health Integration Networks, hospitals and community health centres to expand the availability of on-demand opioid substitution treatment options, including:
  - i) Expanding access to Suboxone™ in emergency departments, community health centres, and physician offices.
  - ii) Enabling Nurse Practitioners to prescribe and administer OST.
  - iii) Providing more low-threshold opioid substitution treatment options.
  - iv) Supporting the provision of injectable diacetylmorphine (prescription heroin) and/or hydromorphone, according to best practice, at appropriate health settings.
  - v) Expanding the provision of comprehensive and integrated supports for people receiving OST, including counselling and access to primary and mental health services.
  - vi) Address medical regulatory and practice issues so that opioid substitution treatment is provided on a barrier-free, non-stigmatizing basis.
- r) Ensure that no one is refused entry into a provincially-funded substance use treatment program because they have an opioid substitution treatment or any other prescription.
- s) Consult with people who use drugs and other experts before changes are made to the availability of pharmaceutical drugs, such as delisting opioids from provincial drug plans, to ensure new regulations do not force people into illicit markets.
- t) In consultation with people who use drugs, create protocols for health care providers for prescribing and tapering patients off of opioids that allow for a range of patient needs (e.g. develop individual transition plans).
- u) The Chief Medical Officer of Health should expedite development of the provincial overdose surveillance and monitoring system, and align it with national and municipal efforts.
- v) Resource and mandate institutions with key roles in generating data related to overdose to compile and share data in a timely manner, as close to 'real time' as possible, including:
- w) Provide resources to the Office of the Chief Coroner for Ontario and the Centre of Forensic Sciences to enable them to report quickly on the early results of toxicology tests.
- x) Require hospital emergency departments to record data in a consistent and accurate way to provide systematic reporting on overdose incidents.
- y) Share weekly hospital overdose data reported to the Canadian Institute for Health Information with Public Health units as soon as possible to inform local surveillance efforts.

3. The Board of Health request the Ministry of Community Safety and Correctional Services to:
  - a) Expedite the provision of naloxone kits to people at risk of overdose upon discharge from correctional institutions, and expand the criteria to include anyone with a history of opioid use.
  - b) Ensure people inside the correctional institutions who are known to be using opioids have access to overdose prevention and response measures, including naloxone.
  - c) Ensure all staff on the ranges in correctional facilities have access to and are trained in overdose prevention and response, including administering naloxone.
  - d) Provide overdose prevention and response training, including administering naloxone, to staff at probation and parole offices.
  
4. The Board of Health request the Province of Ontario to:
  - a) Maintain existing and expand the supply of affordable and supportive housing, including harm reduction housing, and ensure that people are not evicted from their housing because of substance use.
  - b) Expedite the implementation of poverty reduction measures, including implementing a basic income for all low-income persons, regardless of employment status, and increasing social assistance benefits and employment opportunities.
  
5. The Board of Health request Health Canada to:
  - a) Develop a federal overdose strategy urgently, in consultation with multi-sector provincial, territorial, municipal, public health and community stakeholders, and people who use drugs and their family/friends.
  - b) Dedicate a coordinator and funding to support implementation of the federal overdose strategy across ministries and sectors, and to align with the Action on Opioid Misuse Plan and provincial and territorial plans.
  - c) Work with an Indigenous facilitator to develop and undertake a dedicated process to engage Indigenous communities to identify overdose prevention and response strategies specific to Indigenous communities across Canada.
  - d) Approve the supervised injection service exemption applications for Toronto Public Health/The Works, Queen West-Central Toronto Community Health Centre, and South Riverdale Community Health Centre as soon as possible to enable these services to open.
  - e) Work with communities across Canada, including Toronto, to facilitate approval of Controlled Drugs and Substances Act Section 56 exemptions required to implement drug checking programs.
  - f) Clarify requirements for the use of reagent testing programs in community settings (i.e. are Section 56 exemptions necessary).
  - g) Facilitate rapid access to injectable diacetylmorphine (prescription heroin) and/or hydromorphone as an opioid substitution treatment option.
  - h) Consult with people who use drugs and other experts before changes are made to the availability of pharmaceutical drugs, such as delisting opioids from federal drug plans, to ensure new regulations do not force people into illicit markets.
  - i) Restrict pharmaceutical advertising to health care providers to help reduce overprescribing.
  - j) Require pharmaceutical manufacturers to contribute funding to overdose prevention and response initiatives.

- k) Mandate and fund institutions with data related to substance use and overdose to compile and share data in a timely manner, ideally on a real-time basis. For example, Health Canada Drug Analysis Service laboratories should conduct and report out on drug analysis tests for the community as well as for police.
6. The Board of Health request the Public Health Agency of Canada to:
- a) Create a national overdose surveillance and monitoring system, in conjunction with the Canadian Institute for Health Information, Drug Analysis Service laboratories, the Canadian Association of Poison Control Centres, and provincial health and local communities, to ensure monitoring and sharing of information related to overdose.
7. The Board of Health request the Ministry of Justice to:
- a) Develop a clear, broad-based awareness campaign about the Good Samaritan Drug Overdose Act for promotion with police departments and the general public, pending passage of the bill.
8. The Board of Health request the Government of Canada to:
- a) Urgently pass Bill C-224, the Good Samaritan Drug Overdose Act.
  - b) Maintain existing and expand the supply of affordable and supportive housing, including harm reduction housing, and ensure that people are not evicted from their housing because of substance use.
  - c) Expedite the implementation of poverty reduction measures, including implementing a basic income for all low-income persons, regardless of employment status, and increasing social assistance benefits and employment opportunities.
  - d) Develop and implement evidence-based strategies to address stigma and discrimination against people who use drugs, in consultation with people with lived experience.
  - e) Implement a range of options for people who come into conflict with the law because of substance use with a main goal of avoiding arrest and prosecution. Options should include restorative justice and community and court-based alternative diversion programs.

## **FINANCIAL IMPACT**

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There are no direct financial implications for 2017 arising from this report.

## **DECISION HISTORY**

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On September 22, 2015, the Board of Health approved a report from the Medical Officer of Health on trends, prevention and response for overdose in Toronto.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2015.HL6.4>

In July 2016, the Board of Health and City Council approved a report from the Medical Officer of Health supporting implementation of small scale supervised injection services at Toronto Public Health (The Works), Queen West-Central Toronto Community Health Centre and South Riverdale Community Health Centre.

<http://app.toronto.ca/tmmis/viewPublishedReport.do?function=getCouncilDecisionDocumentReport&meetingId=9693>

On December 5, 2016, the Board of Health approved a motion requesting the Acting Medical Officer of Health, in coordination with the Toronto Drug Strategy Implementation Panel, to develop a Toronto Overdose Action Plan, and to report back to the January 23, 2017 Board of Health meeting on its status and next steps.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2016.HL16.2>

On January 23, 2017, the Board of Health approved a report from the Acting Medical Officer of Health providing an update on the development of the Toronto Overdose Action Plan, and committing to report to the March 2017 Board of Health with a final plan.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2017.HL17.4>

## COMMENTS

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### Background

People dying from drug overdoses is an urgent public health crisis across Canada. People are losing their children, siblings, spouses, parents, friends and coworkers. The impact of these losses is devastating for the individuals involved and for the community, not least because these deaths are preventable. In British Columbia, the situation has become critical with unprecedented numbers of overdose deaths. There has also been a dramatic rise in overdose deaths in Toronto. Between 2004 and 2015, there was a 73% increase in the reported number of overall drug toxicity (overdose) deaths in Toronto (from 146 in 2004 to 253 in 2015). These data were provided by the Officer of the Chief Coroner for Ontario, and compiled and analyzed by Toronto Public Health. (The 2015 data is preliminary and subject to change.)

At its December 5, 2016 meeting, the Board of Health (BOH) approved a motion from Councillor Joe Cressy, in his role as Chair of the Toronto Drug Strategy Implementation Panel, asking the Acting Medical Officer of Health to develop a Toronto Overdose Action Plan, in consultation with the Panel. This report responds to that request. The Panel is a multi-sectoral group that provides strategic leadership and oversight for implementation of the City's drug strategy, which is based on the integrated components of prevention, harm reduction, treatment and enforcement.

### Community Consultation Process

Toronto Public Health worked with the Toronto Drug Strategy Implementation Panel and its Overdose Coordinating Committee (OCC) to prepare a draft Toronto Overdose Action Plan based on best practices and international research. The OCC also developed a community consultation plan to gather input on the draft Action Plan as well as ideas for additional actions. Open-invitation consultation sessions were held in Downtown Toronto, North York, Etobicoke and Scarborough in January and February 2017. In total, approximately 160 people participated in these sessions. Toronto Public Health also hosted an online survey, which was promoted broadly throughout the community. Paper copies of the survey were available at all community sessions. A total of 283 surveys were completed. A wide variety of stakeholders participated in the consultations, including people who use drugs, their friends and family members, and community service providers from diverse sectors.

Overall, there was broad community support for the actions proposed in the draft Action Plan as well as additional ideas for consideration. The main themes that emerged in the consultation were as follows:

- This is an urgent issue and action is needed now;
- Naloxone needs to be more widely available;
- The meaningful involvement of people with lived experience in policy, planning and programming is necessary;
- More funding is needed for harm reduction and treatment services;
- Police should generally not attend 911 overdose calls;
- More treatment services are needed;
- Addressing social determinants of health is key;
- Stigma is contributing to overdose; and,
- The legal status of drugs has a significant role in overdose.

Feedback and ideas from the community were integrated into the final Action Plan, which is discussed in more detail in the next sections of this report.

### **Toronto Overdose Action Plan: Prevention & Response**

The Action Plan provides a comprehensive set of actions to prevent and respond to overdoses, organized under ten key strategies as follows:

- 1. Comprehensive overdose plans:** All governments should develop and implement a comprehensive, evidence-based overdose prevention and response plan. The plan should address overdoses resulting from all drugs, with an initial focus on opioids (non-pharmaceutical and pharmaceutical).
- 2. Overdose protocols and naloxone:** Services in the community should have an overdose prevention and response plan as part of their emergency first aid protocols, where appropriate.
- 3. Emergency medical care:** Address barriers to calling 911 for medical assistance during an overdose.
- 4. Supervised injection services:** Supervised injection services should be available to provide a safe and hygienic place to inject drugs with onsite medical intervention in case of overdose.
- 5. Drug checking programs:** Drug checking programs should be available to allow people to test illicit drugs for the presence of toxic contaminants, adulterants or unexpected drugs (e.g. bootleg fentanyl).
- 6. Treatment on-demand:** Substance use treatment options should be available on-demand, and include a range of options to suit individual needs.
- 7. Pharmaceutical drug access:** Governments should identify and prevent potential adverse health consequences such as overdose before changing access to pharmaceutical drugs.

8. **Information about overdose incidents:** All governments should have “real-time” overdose surveillance and monitoring systems in place.
9. **Social factors:** All governments should address systemic social factors that can lead to overdose and other health harms related to substance use.
10. **A public health approach to drug policy:** Community dialogue is needed to determine what a public health approach to drug policy in Canada would look like.

Under each strategy specific actions are recommended for each order of government, where applicable (See Attachment). Recommended actions for the City of Toronto are outlined below. Recommended actions for the provincial and federal governments are reflected in the recommendations section of this report.

### **Actions for the City of Toronto**

The *Toronto Overdose Action Plan* builds on the work that is already happening in the community, and by governments and other institutions. Toronto Public Health has been implementing overdose prevention and response strategies for many years as part of its harm reduction programming, and other City divisions and agencies are also taking action on this issue. The Action Plan identifies additional actions that TPH will take, as outlined below:

#### **1. Comprehensive overdose plans**

*Toronto Public Health will:*

- Coordinate implementation of the Toronto Overdose Action Plan through the Toronto Drug Strategy Secretariat.
- Work with the Toronto Drug Strategy Implementation Panel and multi-sector partners, including people using drugs and their family/friends, to implement the Toronto Overdose Action Plan.
- Work with an Indigenous facilitator to develop and undertake a dedicated process to engage Indigenous communities in identifying overdose prevention and response strategies specific to Indigenous communities, in accordance with the operating principles of the Toronto Indigenous Health Strategy created by the Toronto Indigenous Health Advisory Circle.

#### **2. Overdose protocols and naloxone**

*Toronto Public Health will:*

- Provide overdose prevention and response training for staff in City of Toronto agencies, boards and commissions, appropriate to mandate and staff role.
- Provide overdose prevention and response training for staff in community services.
- Work with City of Toronto divisions, agencies, boards and commissions, and community service providers to develop organizational overdose policies and protocols, as appropriate.
- Continue to distribute naloxone to people who use drugs, and their friends and family, through the Preventing Overdose in Toronto (POINT) program delivered by The Works.
- Through the Toronto Urban Health Fund, prioritize funding and support for community services working on evidence-based, peer-led programming for



overdose prevention and response, and other harm reduction initiatives. Funding will aim to increase the number of trained peers and sustain community capacity to assist in overdose prevention and response.

- Work with City of Toronto and community service providers, and people with lived experience, to develop and promote evidence-based public education resources about overdose prevention and response, for a wide range of audiences and settings.

*Shelter, Support & Housing Administration Division will:*

- Continue to work with City and community partners to implement the division's Harm Reduction Framework across shelters, social housing providers and agencies that provide homeless services and supports, which includes overdose prevention and response measures.

### **3. Emergency medical care**

*Toronto Public Health will:*

- Work with the Toronto Police Service and the Toronto Paramedic Service to develop options that would increase the likelihood that bystanders will call 911 in the event of a drug overdose.

### **4. Supervised injection services**

*Toronto Public Health will:*

- Open the planned supervised injection service at Toronto Public Health/The Works as soon as possible after receiving provincial funding and federal approval.
- Explore options to improve access to withdrawal management services (detox) and other treatment services for people using the supervised injection service.

### **5. Drug checking programs**

*Toronto Public Health will:*

- Continue to work with community partners to develop and implement drug checking programs and research at supervised injection services and with harm reduction programs working at music events.

### **6. Treatment on-demand**

*Toronto Public Health will:*

- Explore the feasibility of providing injectable diacetylmorphine (prescription heroin) and/or hydromorphone as opioid substitution treatment options through the Methadone Works program, and according to federal requirements.

### **7. Pharmaceutical drug access**

Note: Actions for this strategy fall under the jurisdiction of the provincial government.

### **8. Information about overdose incidents**

*Toronto Public Health will:*

- Provide leadership to the Toronto Overdose Early Warning and Alert Partnership to develop an overdose information and reporting system.

- Dedicate epidemiology resources to develop and maintain appropriate public health surveillance mechanisms that will support the work of the Toronto Overdose Early Warning and Alert Partnership.
- Provide clear and practical messages and alerts about toxins or contaminants found in the illicit drug supply for people who use drugs and the agencies working with them.

## 9. Social factors

*Actions for all governments:*

- Expand the supply of affordable and supportive housing, including harm reduction housing, and ensure that people are not evicted from their housing because of substance use.
- Expedite the implementation of poverty reduction measures, including implementing a basic income for all low-income persons, regardless of employment status, and increasing social assistance benefits and employment opportunities.

## 10. A public health approach to drug policy

*Toronto Public Health will:*

- Undertake a community dialogue in Toronto on what a public health approach to drug policy should look like for Canada. (The Medical Officer of Health will report back to the BOH on a proposed community consultation plan).

### Implementing the Toronto Overdose Action Plan

Toronto Public Health is committed to taking urgent action to address the overdose crisis, as outlined in the *Toronto Overdose Action Plan*, and will provide ongoing leadership, in collaboration with City and community partners, to identify and respond to any new issues that emerge.

Implementation of the Action Plan will be aligned with that of the Toronto Drug Strategy (TDS) recommendations as the drug strategy includes complementary and overlapping actions, and has structures in place to support this work. The Toronto Drug Strategy Secretariat is a team within TPH that provides dedicated policy, project management and administrative support for implementation of the drug strategy. This team is well placed to provide a strategic coordination role to implement the *Toronto Overdose Action Plan*, in collaboration with relevant TPH and City divisions, and the TDS Implementation Panel and its related groups and committees, and relationships with community agencies and other governments.

In order to do this work within existing resources, the implementation of other drug strategy recommendations and other epidemiological work will be delayed. A funding request for additional resources required for the implementation of the Action Plan will be included in the TPH 2018 Operating Budget request for consideration during the City's 2018 budget process.

The community service sector also needs additional resources to respond to the overdose crisis in Toronto. The Action Plan includes recommendations for targeted provincial funding for community health, drug treatment and harm reduction services. Toronto Public Health also provides funding to the community-based service sector, and

the Action Plan includes a commitment from TPH that the Toronto Urban Health Fund will prioritize funding and support for community services working on evidence-based, peer-led programming for overdose prevention and response, and other harm reduction initiatives. The purpose of this funding will be to increase the number of trained peers and to sustain community capacity to assist in overdose prevention and response.

## **CONTACT**

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## **SIGNATURE**

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Attachment: Toronto Overdose Action Plan: Prevention & Response