

Anticipated service impacts for Toronto Public Health and emergency responders due to the closure of Supervised Consumption Sites in Toronto

Date: January 7, 2025

To: Board of Health

From: Acting Medical Officer of Health

Wards: All

SUMMARY

On December 4, 2024, the Government of Ontario passed the [Community Care and Recovery Act, 2024](#). This legislation introduces new requirements for operating supervised consumption service sites in Ontario and will lead to a reduction in supervised consumption services available in Toronto by March 31, 2025.

On [November 18, 2024](#), the Board of Health requested the Medical Officer of Health, in consultation with the Toronto Police Service, Toronto Fire Services, and Toronto Paramedic Services to provide a summary of likely service impacts related to the anticipated closure of supervised consumption sites in Toronto. This staff report provides an overview of anticipated service impacts to Toronto Public Health's clinical service and emergency services in the city as a result of this provincial policy change.

The Board of Health also requested the Medical Officer of Health, in consultation with the City Solicitor, to provide a summary of any legal issues related to the Provincial decision to close supervised consumption sites in Toronto. An overview of the legal implications and advice related to the closures of the supervised consumption sites is provided in the supplementary report from legal services.

Supervised consumption sites are healthcare facilities that allow people to bring their own drugs to use in the presence of trained healthcare professionals. These facilities save lives, connect people to social services and are pathways to treatment. The new legislation will reduce access to an evidence-based clinical healthcare service leading to an anticipated increase in preventable fatal and non-fatal overdoses.

Toronto Fire Services, Toronto Paramedic Services and Toronto Police Service were consulted in the development of this report.

RECOMMENDATIONS

The Acting Medical Officer of Health recommends that:

1. The Board of Health urge the Government of Ontario to:
 - a. Increase access to Supervised Consumption Services and Consumption and Treatment Services Sites consistent with the location requirements within the Community Care and Recovery Act, 2024 to prevent overdose deaths and facilitate pathways to substance use treatment; and
 - b. Permit needle exchange services within Homelessness and Addictions Recovery Treatment (HART) Hubs to reduce the transmission of communicable diseases.
 - c. Share provincial plans for mitigating healthcare system impacts due to the closures of Supervised Consumption Services and Consumption and Treatment Services Sites, as part of implementation planning for Homelessness and Addictions Recovery Treatment (HART) Hubs.

FINANCIAL IMPACT

There are no financial impacts associated with this report. The Chief Financial Officer and Treasurer has reviewed this report and agrees with the information as presented in the Financial Impact Section.

DECISION HISTORY

On December 19, 2024, the Board of Health requested the Medical Officer of Health or Acting Medical Officer of Health, to provide evidence in support of the Superior Court Application bearing Court File No. CV-24-00732861-0000 if requested by the Applicants and as determined appropriate by the Solicitor, and requested the City Solicitor to advise the applicants and the respondent of the Board of Health's potential intention to intervene by January 10, 2025.

<https://secure.toronto.ca/council/report.do?meeting=2024.HL20&type=decisions>

On December 9, 2024, the Board of Health directed the Medical Officer of Health and the Chair, Board of Health, to submit a letter to the Ministry of Health responding to the Safer Streets, Stronger Communities Act. <https://secure.toronto.ca/council/agenda-item.do?item=2024.HL19.2>

On November 18, 2024, the Board of Health requested the Medical Officer of Health, in consultation with the City Solicitor, to provide a summary for the January 2025 meeting of the Board of Health of any legal issues related to the Provincial decision to close Safe Consumption Facilities in Toronto; and in consultation with the Chief of Police, Toronto Police Service, the Fire Chief and General Manager, Fire Services, and the Chief,

Toronto Paramedic Services to provide a summary for the January 20, 2025, meeting of the Board of Health of likely service impacts related to the Provincial decision to close Safe Consumption Facilities in Toronto.

<https://secure.toronto.ca/council/agenda-item.do?item=2024.HL18.2>

COMMENTS

On December 4, 2024, the Government of Ontario passed the [Community Care and Recovery Act, 2024](#), which prohibits the establishment and operation of supervised consumption sites that are located within 200 metres of a school, licensed child-care centre, or EarlyON Child and Family Centre. Under the legislation, municipalities and local boards are also no longer able to apply for exemptions to the *Controlled Drugs and Substances Act* to operate new supervised consumption services or apply for Health Canada funding for safer supply programs without approval from the provincial Minister of Health. The Act also prevents municipalities and local boards from requesting an exemption to Health Canada to decriminalize the personal possession of controlled substances.

The legislation will result in the closure of at least five Supervised Consumption Sites (SCS) or Consumption and Treatment Services (CTS) in Toronto no later than March 31, 2025. SCS and CTS sites are clinical spaces for people to bring their own drugs to use in the presence of trained health professionals. All supervised consumption sites require an exemption from Health Canada to operate. CTS sites are supervised consumption sites that adhere to additional provincial requirements and are regulated and funded by the province. The province introduced the opportunity for closing sites to apply to become a Homelessness and Addictions Recovery Treatment (HART) Hub. The HART Hub model does not permit supervised consumption, safer supply, or needle exchange services. Toronto Public Health (TPH) applied to establish a HART Hub and on January 2, 2025, received notification that the application has been approved in principle. TPH will begin implementation planning in collaboration with the province and hub partners. The HART Hub is expected to begin providing services in the spring of 2025.

On [November 18, 2024](#), the Board of Health requested the Medical Officer of Health, in consultation with the Chief of Police, Toronto Police Service, the Fire Chief and General Manager, Fire Services, and the Chief, Toronto Paramedic Services to provide a summary for the January 20, 2025 meeting of the Board of Health of likely service impacts related to the Provincial decision to close supervised consumption sites in Toronto. This report provides an overview of the anticipated service impacts for Toronto Public Health and emergency services in the city.

The Board of Health also requested the Medical Officer of Health, in consultation with the City Solicitor, to provide a summary for the January 2025 meeting of the Board of Health of any legal issues related to the Provincial decision to close supervised consumption sites in Toronto. An overview of the legal implications and advice related to the closures of the supervised consumption sites is provided in a supplementary report.

The Drug Toxicity Epidemic

As directed by the Board of Health, on December 31, 2024, the Medical Officer of Health and the Chair, Board of Health, submitted a letter to the Minister of Health regarding the drug toxicity epidemic in Toronto and concerns about the impacts of the Community Care and Recovery Act, 2024.

The drug toxicity epidemic has significantly impacted Toronto for the past decade. Overdoses escalated after 2015 and during the COVID-19 pandemic. The drug toxicity epidemic is largely due to the toxic unregulated drug supply. The supply contains varying concentrations of fentanyl, combined with unexpected drugs such as other high-potency opioids, or other central nervous system or respiratory depressants, like xylazine or benzodiazepine-related drugs.

Between 2015 and 2023, approximately 3,400 people have died of opioid-related toxicity in the city.¹ Since 2020, the annual number of opioid toxicity deaths has remained high compared to pre-pandemic levels. The Office of the Chief Coroner for Ontario has reported over 500 deaths due to opioid toxicity per year for the last four years in Toronto (528 deaths in 2023, 511 deaths in 2022, 592 deaths in 2021, 552 deaths in 2020).² In 2023, Toronto Paramedic Services attended 4,802 calls for suspected opioid overdoses. Additionally, there were 2,941 emergency department visits and 456 hospitalizations due to opioid poisoning at Toronto hospitals in 2023. People who use drugs are at an increased risk of accidental overdose and death due to the toxic unregulated drug supply. They are also at an increased risk of contracting HIV, or hepatitis C, skin and soft tissue infections.

Without additional investment and increased access to a full continuum of evidence-based prevention, harm reduction, and treatment options, the number of opioid toxicity deaths in Toronto could continue to remain high compared to pre-pandemic levels.

Supervised consumption sites have trained individuals to respond to overdoses, administer naloxone and attend to an individual's safety after an overdose has occurred. Supervised consumption sites are currently located in neighbourhoods with a high number of paramedics calls for suspected opioid overdose calls. With the anticipated reduction in supervised consumption services, there is a significant risk of increased overdose deaths. This is because the alternative to supervised consumption is for people to use drugs alone, in non-healthcare settings, and in potentially unsafe environments. Additionally, due to reduced access to clean supplies, there could be potential increases in HIV, hepatitis C, skin and soft tissue infections, that can increase use of the healthcare system.

Anticipated Clinical Service Impacts

Supervised Consumption Services

In Toronto, supervised consumption sites have provided life-saving medical care to clients across the city since 2017. This care includes overdose reversals, health care interventions, needle exchange programs, and referrals to a range of health and social supports including evidence-based treatment options.

Canadian and international evidence has shown the effectiveness of supervised consumption services in: ³

- Reducing overdose morbidity and mortality;
- Reducing unsafe injecting behaviours (i.e., needle sharing, disposal of injecting equipment, and awareness of hygienic practices);
- Reducing the risk of transmission of injection-related infections, such as HIV, hepatitis C, and bacterial infections;
- Reducing public injection and discarded injection-related litter in public places;
- Promoting access through referrals to health and social services, including substance use treatment options; and,
- Being cost-effective and reducing overall burden on emergency services and the health care system.

Between March 2020 and May 2024, across the ten supervised consumption sites currently operating in Toronto, there were 390,986 visits, 10,959 non-fatal overdose responses, and no overdose-related deaths.⁴

Staff at Toronto Public Health's The Works have medically intervened in hundreds of overdoses each year. Since opening its supervised consumption site in 2017, there have been 159,254 visits and 4,060 overdose responses, including 2,436 overdoses requiring naloxone at The Works.⁵

Due to the *Community Care and Recovery Act, 2024*, Toronto will go from ten supervised consumption sites to five remaining sites located in the downtown core. The closing sites may be unable to relocate to a new site, because the Government of Ontario has indicated they will not be approving any new sites in the province. The following supervised consumption service sites will no longer be permitted to operate at their current location no later than March 31, 2025:

- Parkdale Queen West Community Health Centre, Queen West CTS (168 Bathurst St.)
- Regent Park Community Health Centre, Bevel Up CTS (465 Dundas St. E.)
- South Riverdale Community Health Centre, Keep Six CTS (955 Queen St. E.)
- The Neighbourhood Group, Kensington Market SCS (260 Augusta St.)
- Toronto Public Health, The Works SCS (277 Victoria St.)

This report recommends that the Board of Health urge the Government of Ontario to increase access to Supervised Consumption Services and Consumption and Treatment Services Sites consistent with the location requirements within the *Community Care and Recovery Act, 2024* to prevent overdose deaths and facilitate connection to substance use treatment.

Drug Checking Services & Drug Alerts

Toronto Public Health monitors available data and publicly releases drug alerts to notify partners about potentially toxic drugs in circulation or increases in suspected opioid overdoses. This prevention measure relies in part, on information from [Toronto's Drug Checking Service](#). Toronto Public Health works in close collaboration with the drug

checking service, and many of the samples are collected at currently operating supervised consumption service sites.

The closures of supervised consumption sites could reduce access to drug checking services. This may limit the ability of people who use drugs to make informed decisions about their substance use, reduce pathways to services and treatment, and hinder evidence-informed policy and emergency responses by community health workers, clinicians, first responders, policy makers, public health units, community members, and researchers.⁶

Needle Exchange Programs

Needle Exchange Programs (NEPs) aim to prevent and reduce the spread of communicable diseases such as HIV and Hepatitis C by providing people who use drugs with access to sterile equipment (e.g., needles, pipes, syringes, etc.) to reduce sharing of contaminated equipment. The first needle exchange program in Ontario was established in Toronto in 1989 by Toronto Public Health, The Works.

Decades of research show NEPs are safe and effective in reducing the spread of blood-borne diseases, preventing high-risk injection behaviours, and facilitating safe disposal of used needles.⁷⁸ In addition to providing sterile equipment supplies, NEPs also offer other services such as safe disposal of used needles, education and counselling on safer drug use, and referrals to health and social services including drug treatment and housing. The Works supports over 60 agencies across Toronto to offer harm reduction supplies and services at over 100 locations and access points.

Homelessness and Addiction Recovery Treatment (HART) Hubs

On January 2, 2025, the Government of Ontario announced nine supervised consumption sites in Ontario have been approved in principle to transition into Homelessness and Addiction Recovery Treatment (HART) Hubs, including Toronto Public Health's The Works. Information on funding is pending, which will determine which services will be available, within the pre-established parameters of the provincial program.

The HART Hub model does not permit supervised consumption services, or needle exchange services. This report recommends the Board of Health urge the Government of Ontario to share provincial plans for mitigating healthcare system impacts due to the closures of Supervised Consumption Services and Consumption and Treatment Services Sites, as part of implementation planning for HART Hubs.

Access to needle exchange programs is necessary to continue to reduce the spread of communicable diseases and improve overall population health. This report also recommends the Board of Health request the Ministry of Health permit needle exchange services within HART Hubs to reduce the transmission of communicable diseases.

Anticipated Emergency Service Impacts

Toronto Fire Services

Since 2017, All Toronto Fire Services (TFS) operations personnel have received training in the use of Naloxone, as well as certified to a medical directive related to suspected opioid toxicity as part of their Basic Life Support. Staff are able to recognize the signs and symptoms of an opioid overdose and apply appropriate assessments.

Toronto Fire Services responds to suspected overdoses alongside Toronto Paramedic Services. Due to the high degree of overlap in call data, TFS defers to the reported Toronto Paramedic Services data. Since TFS is not the primary attending division for this call type, an estimated impact to changes in call volume cannot be determined with certainty.

Toronto Paramedic Services

Since 2017, Toronto Paramedic Services has shared information on calls for suspected opioid overdoses attended by Paramedics in Toronto with Toronto Public Health. This data is part of the Toronto Overdose Information System and allows trends to be closely monitored to inform decisions in close to real-time.

The closure of Supervised Consumption Sites is anticipated to have implications for Toronto Paramedics Services. Without SCS, individuals who use substances may be more likely to do so in unsupervised locations and/or alone. This may increase the frequency and severity of overdoses. Since 2019, Toronto Paramedic Services has experienced a 54 percent increase in calls related to drug toxicity, driven primarily by opioid overdoses.

Toronto Paramedic Services expects an increase in overdose-related calls, greater demand for naloxone administration, and more frequent hospital transports. Additionally, it is possible that Toronto Paramedic Services may see an increased demand for non-emergent community-based healthcare, naloxone distribution, and public education due to the reduced availability of safe consumption services and supplies. Toronto Paramedic Services will continue to monitor its data closely and will adjust responses as required.

Toronto Police Service

In 2018, in response to the escalating drug toxicity crisis, Toronto Police Service (TPS) began providing select uniformed officers with Naloxone to assist with life-saving efforts until other medical assistance became available. Now all uniformed frontline officers are equipped with Naloxone, and TPS members continue to respond to suspected overdose calls.

The impact to TPS from the provincial decision to close supervised consumption sites remains unclear and difficult to predict. However, TPS will continue to monitor and track overdose rates, the number of calls for service, and rates of drug related crimes. TPS will also continue to work alongside city partners, including Toronto Public Health, Toronto Paramedic Services and Toronto Fire Services to respond to the ongoing drug toxicity crisis.

TPS' Analytics & Innovations team conducted an analysis of Supervised Consumption Sites, and the data can be summarized as follows:

- Calls for service have generally decreased in the areas around Supervised Consumption Sites compared to pre-pandemic levels.
- In 2023, TPS received 4,558 calls for service to attend to a suspected overdose. Roughly half of those calls for suspected overdoses were recorded as validated overdose events.
- The area surrounding The Works, and Moss Park, are in the top five sites for overdose Calls For Service Attended (CFSA). Both of these sites are anticipated to close in early 2025.
- Toronto Police Service members administered naloxone approximately 91 times in 2024.

At this time, it is unclear what impact the SCS closures will have on future policing resource demands. The TPS will continue to prioritize collaborative, evidence-based solutions that are geared towards improving community safety and wellbeing, including focusing on the following:

Naloxone training and distribution

Continue to support the TPS' Naloxone program, ensuring all frontline officers are trained in overdose response and carry naloxone kits to prevent fatalities.

Downtown CORE Team

TPS and TPH have collaborated to establish the Downtown Community Outreach Response and Engagement (CORE) Team, a one-year pilot program that will support vulnerable people, other residents, visitors and businesses in the Yonge and Dundas area which is an area highly impacted by calls for overdoses. Led by a specialized team of public health nurses and police officers, the program will provide short-term case management, health and social service referrals, as well as overdose and substance use responses.

Collaborate with service providers and community stakeholders

Through the Downtown CORE Team and Neighbourhood Community Officers in the downtown core, TPS will continue to work with organizations that provide harm reduction services, and outreach programs.

Focus enforcement efforts

TPS will focus on reducing the supply of illegal, toxic drugs by continuing to dismantle and disrupt networks of people who profit off the sale and distribution of harmful substances.

Encourage diversion programs

TPS members will continue to refer individuals to treatment programs or social services, including recommending drug treatment court as an alternative to criminal court when the circumstances permit.

Monitor and analyze data

TPS will continue to track overdose rates and drug-related crime to identify emerging trends and adapt strategies accordingly.

The Toronto Police Service will aim to respond to any challenges that might occur following the closure of SCS/CTS sites by focusing on harm reduction, collaboration, and community safety. The TPS will continue its collaborative partnership with City and community partners to support the wellbeing of Torontonians. TPS is committed to ensuring that mental health and substance use related issues continue to be addressed as health issues, while enforcement efforts focus on reducing the supply of toxic drugs.

Toronto Public Health Strategic Impact

This report provides an update on critical services related to the drug toxicity epidemic and advances the following priorities of the Toronto Public Health Strategic Plan 2024-2028:

1. Strengthen health protection, disease prevention and emergency preparedness, including meeting the objective of effectively communicating with the public about how they can protect their health.
2. Promote health and well-being across the lifespan, including meeting the objective to reduce the burden of chronic and infectious diseases across the lifespan.
3. Promote the conditions to support positive mental health and reduce the harms of substance use, including meeting the objectives to deliver public health interventions that respond to the drug toxicity epidemic, reduce harms associated with the use of alcohol, cannabis, tobacco and vapour products, strengthen public health services that are trauma-informed and reduce stigma, and deliver public health interventions that promote mental health.
4. Advocate to advance health equity, including meeting the objective to assess and report on health inequities and population health needs, collaborate with partners.

CONTACT

Vanessa Fletcher, Acting Director, Public Health, Toronto Public Health
416-338-8098, Vanessa.Fletcher@toronto.ca

Sana Imran, Acting Director, Public Health, Toronto Public Health
416-396-7741 Sana.Imran@toronto.ca

SIGNATURE

Dr. Na-Koshie Lamptey
Acting Medical Officer of Health

1 Toronto Overdose Information System. Number of deaths from opioid toxicity'.
https://public.tableau.com/app/profile/tphseu/viz/TOISDashboard_Final/ParamedicResponse

2 Toronto Overdose Information System. Number of deaths from opioid toxicity'.
https://public.tableau.com/app/profile/tphseu/viz/TOISDashboard_Final/ParamedicResponse

3 Centre on Drug Policy Evaluation. Supervised Consumption Services in Toronto: Evidence and Recommendations (Toronto, November 2024).
<https://cdpe.org/wp-content/uploads/2024/11/CDPE-SCS-Toronto-Nov-2024-.pdf>

4 Centre on Drug Policy Evaluation. Supervised Consumption Services in Toronto: Evidence and Recommendations (Toronto, November 2024).
<https://cdpe.org/wp-content/uploads/2024/11/CDPE-SCS-Toronto-Nov-2024-.pdf>

5 Toronto Overdose Information System. TPH Supervised Consumption Services.
https://public.tableau.com/app/profile/tphseu/viz/TOISDashboard_Final/ParamedicResponse

6 McDonald K, Thompson H, Werb D. 10 key findings related to the impact of Toronto's Drug Checking Service. Toronto: Centre on Drug Policy Evaluation. May 31, 2023. https://drugchecking.community/wp-content/uploads/dlm_uploads/2024/10/TDCS-key-findings-related-to-impact-v4.pdf

7 Kerr et al. (2010) "Syringe sharing and HIV incidence among injection drug users and increased access to sterile syringes."
<https://pmc.ncbi.nlm.nih.gov/articles/PMC2901279/>

8 Levine H, Bartholomew TS, Rea-Wilson V, Onugha J, Arriola DJ, Cardenas G, Forrest DW, Kral AH, Metsch LR, Spencer E, Tookes H. Syringe disposal among people who inject drugs before and after the implementation of a syringe services program. Drug Alcohol Depend. <https://pubmed.ncbi.nlm.nih.gov/31280002/>