

Clause 14 in Report No. 13 of Committee of the Whole was adopted, without amendment, by the Council of The Regional Municipality of York at its meeting held on October 19, 2017.

14

Harm Reduction Program Enhancement Agreement

Committee of the Whole recommends adoption of the following recommendations contained in the report dated September 20, 2017 from the Commissioner of Community and Health Services and the Medical Officer of Health:

1. Council authorize Public Health to expand the Harm Reduction program to support local opioid response initiatives, including distribution of naloxone kits to eligible community organizations and service providers, as well as a development of a system for early warning and surveillance of opioid overdoses in York Region.
2. Council authorize an amendment to the 2017 budget to add gross expenditure of \$250,000 and the associated Provincial funding, with no impact to Tax Levy.
3. Council authorize the hiring of two permanent full-time staff to support the planning, preparation, and deployment activities for the Harm Reduction Program Enhancement in 2017.

Report dated September 20, 2017 from the Commissioner of Community and Health Services and Medical Officer of Health now follows:

1. Recommendations

It is recommended that:

1. Council authorize Public Health to expand the Harm Reduction program to support local opioid response initiatives, including distribution of naloxone kits to eligible community organizations and service providers, as well as a development of a system for early warning and surveillance of opioid overdoses in York Region.
2. Council authorize an amendment to the 2017 budget to add gross expenditure of \$250,000 and the associated Provincial funding, with no impact to Tax Levy.

3. Council authorize the hiring of two permanent full-time staff to support the planning, preparation, and deployment activities for the Harm Reduction Program Enhancement in 2017.

2. Purpose

This report is prepared for Council to carry out its legislative duties and responsibilities as the Board of Health under the *Health Protection and Promotion Act* to reduce the incidence and severity of substance misuse including hospitalizations and deaths. The Ministry of Health and Long-Term Care (MOHLTC) funding will establish the Board of Health as a naloxone distribution and training lead for eligible community organizations. These organizations will then distribute the kits to their clients most at risk of opioid overdose. The funding is available to Boards of Health in Ontario based on acceptance of the scope of work under the MOHLTC Accountability Agreement.

3. Background

The Ministry of Health and Long-Term Care's (MOHLTC) 2008 Ontario Public Health Standards mandate public health units to use harm reduction policies, programs and practices which focus on reducing harms from drug use. Harm reduction is a public health approach that helps mitigate the negative consequences of drug use on individuals and communities.

Opioid misuse is the third leading cause of accidental death in Ontario

Opioids are prescribed to treat pain, opioid addiction and as cough suppressants. When opioids are misused they can cause addiction, overdose and death. Fentanyl, morphine, methadone, and oxycodone are examples of opioids prescribed by physicians. Illegal opioids include both pharmaceutical and counterfeit synthetic drugs that have been diverted or created for illicit use. These counterfeit opioids are often crafted to look like prescription medications. Illicit fentanyl has been found mixed in with heroin, crack, cocaine, counterfeit pills and other drugs. This makes the risk of unintended overdose very high.

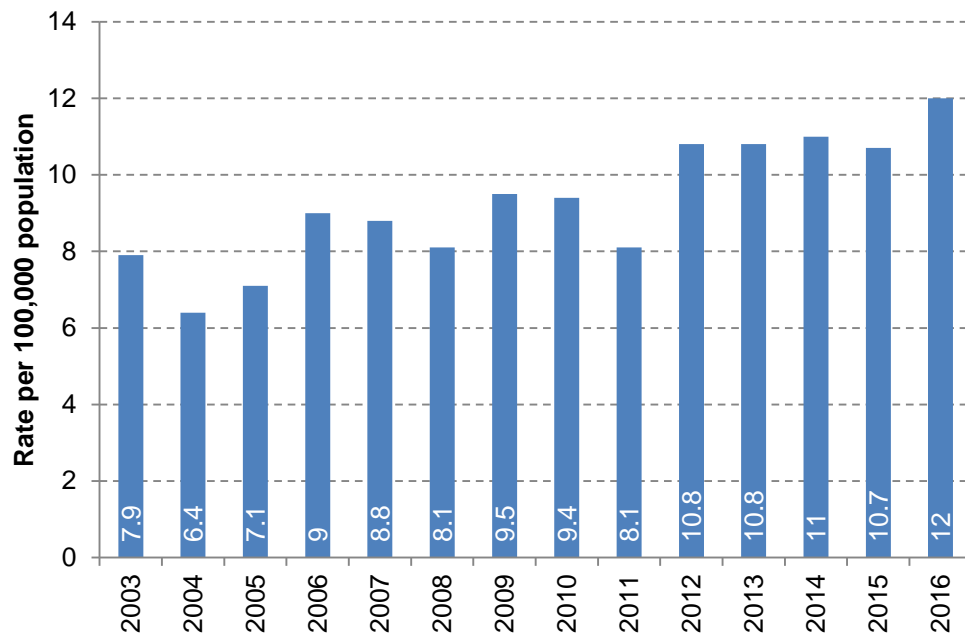
In 2015, 34,733 York Region residents were prescribed and dispensed an opioid for pain and 870 residents were prescribed and dispensed an opioid for opioid maintenance therapy (for example, methadone).

In 2015 there were 30 opioid-related deaths in York Region

Opioid misuse is an important public health issue nationally, provincially, and in York Region:

- Ten percent of York Region students reported using prescription pain relievers for non-medical reasons in the past year (Ontario Student Drug Use and Health Survey, 2015).
- In 2016, there were 139 emergency department visits for opioid overdoses in York Region. The rate of emergency department visits for opioid overdoses has increased from 7.9 to 12 opioid overdoses per 100,000 residents since 2003 (National Ambulatory Care Reporting System, 2016) (see Figure 1).
- In 2016, there were 62 hospitalizations for opioid overdoses in York Region. The rate of hospitalizations for opioid overdoses has risen from 3.1 to 5.3 opioid overdoses per 100,000 residents since 2003 (NACRS, 2016). (see Figure 1).
- The York Region rate of 5.3 per 100,000 residents seems small, in comparison to other areas, however, based on the York Region trend, and that of other communities, York Region should not overlook this growing issue. For example, in the Niagara Region, the rate of opioid overdoses rose from 18.9 to 65.3 overdoses per 100,000 residents since 2003. Toronto and London's rates of opioid overdoses rose from approximately 10 to over 25 overdoses per 100,000 residents since 2003, and it is forecasted to increase in the future. The collection of this data is still relatively new, and so trends in the data are being explored and thresholds for public health action are still being determined (see Figure 1).

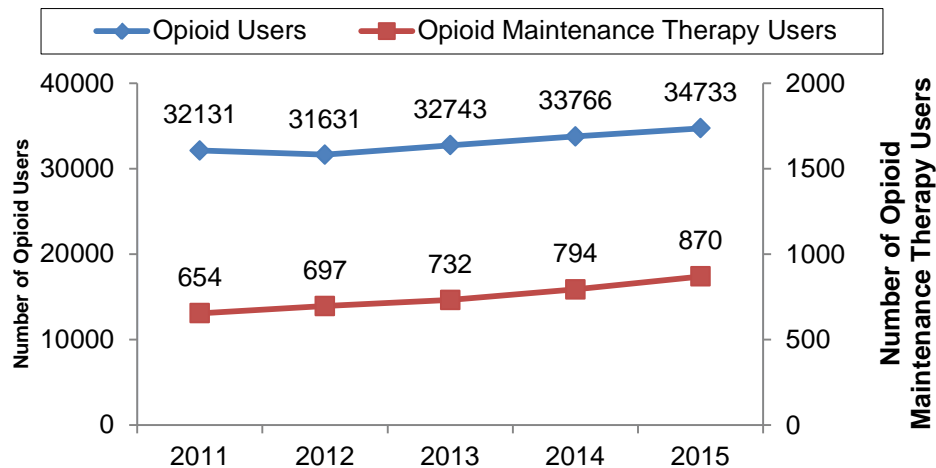
Figure 1
Rate of emergency department visits for opioid overdoses in York Region, 2003 to 2016



(Sources: National Ambulatory Care Reporting System (NACRS), 2003–2016, Ontario Ministry of Health and Long-Term Care, IntelliHealth Ontario. Population Estimates, 2003–2015, Ontario Ministry of Health and Long-Term Care, IntelliHealth Ontario. Projections, 2016–2017, Ontario Ministry of Health and Long-Term Care, IntelliHealth Ontario.)

The rate of opioid users in York Region has been steadily increasing since 2011 and is expected to continue to increase, as illustrated in Figure 2.

Figure 2
Number of Opioid Users and Maintenance Therapy Users in York Region, 2011 to 2015



(Source: Ontario Drug Policy Research Network, Opioid Use and Related Adverse Events in Ontario. Toronto: Ontario Drug Policy Research Network; 2016.)

In 2016, 9.1% of York Region residents were dispensed an opioid for pain. People using opioid for pain are at increased risk of addiction. If their dependency increases or availability of the drug decreases, there is an increased risk they could turn to the illicit market.

4. Analysis and Implications

The additional funding will increase access to harm reduction programs and services by community service providers and drug users, contributing to improved health outcomes

As the number of hospital overdoses, hospitalizations, and deaths is slowly increasing, the MOHLTC has offered funding to public health units to address the problem. For 2017, York Region Public Health has been allocated \$250,000 additional base funding, which is anticipated to continue.

If approved by York Region Council, the funding will be used to add a permanent full time Public Health Nurse and a permanent full time Statistical Data Analyst to the Healthy Living Division of Public Health. Hiring these positions permanently in 2017 will allow the program to both recruit and train staff so that community outreach work and surveillance will commence without delay.

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The associated scope of work includes three key components:

- Local Opioid Response;
- Naloxone Distribution and Training; and
- Opioid Overdose Early Warning and Surveillance

The MOHLTC funding will assist to prevent an opioid crisis in York Region

York Region has the option of refusing to accept the funding. However, the risk of the Region not accepting this funding would be to impair the Region's ability to respond to the issue. The new mechanisms that would be implemented with the funding will help offset the increases that might otherwise have occurred, and potentially help reduce the likelihood of overdoses and deaths at levels being experienced in other jurisdictions.

York Region Public Health will develop a drug strategy to respond to local opioid challenges

The Ministry's Harm Reduction Program Enhancement is meant to support Public Health in building a sustainable community outreach and response capacity to address opioid and drug-related challenges in York region. Working with a broad base of community partners, York Region Public Health will develop a local opioid response that is coordinated and integrated, with systems and structures in place to adapt and enhance the service delivery model to meet evolving needs of the community.

Public Health's local response plan will include harm reduction and education/prevention initiatives. It will provide increased access to programs and services with the goal of improved health outcomes. To meet the Ministry's expectations of the Harm Reduction Program Enhancement, the following activities will be implemented:

- Build and maintain an opioid use and overdose surveillance system including timely data entry into the Ontario Harm Reduction Database
- Lead/support the development, implementation and evaluation of a local overdose response plan and strategy
- Work with partners on the Regional Opioid Education and Response Workgroup to broaden and strengthen the development of York Region's opioids response strategy

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Public Health will become the distribution lead/hub for Naloxone for eligible community agencies

When someone overdoses on opioids, their breathing can either slow or stop completely. The purpose of the community distributed naloxone kits is for non-health professionals such as other opioid users as well as friends and families of users to be able to immediately resuscitate an individual who has overdosed. If used right away, Naloxone can help an overdosing individual survive until first responder assistance is available.

Eligible community organizations, servicing those most at risk of opioid overdose, will receive naloxone kits through Public Health. These organizations will include community health centres (including Aboriginal Health Access Centres), Acquired Immune Deficiency Syndrome (AIDS) services organizations, outreach organizations, shelters and withdrawal management programs. Public Health will train community organization staff on how to recognize the signs of overdose, ways to reduce the risk of overdose, how to administer naloxone in cases of opioid overdose, how to provide training to end-users (people who use opioids, their friends and family). Naloxone kits will also be available for distribution at select Public Health administered Sexual Health Clinics in York Region.

Public Health will order, coordinate and supervise Naloxone inventory

Each Naloxone kit will consist of:

- 1 hard case
- 2 doses of Narcan® Nasal Spray (4 mg/0.1ml). While Naloxone can either be injected or given as a nasal spray, York Region Public Health will only be distributing nasal spray naloxone kits as it is easier for community members to use
- 1 pair of non-latex gloves
- 1 card that identifies the person trained to give the naloxone
- 1 insert with instructions 1 insert with additional information on the medication (English and French)

Legal Services and Risk will be involved in the development of protocols prior to distributing the Naloxone Kits.

Public Health is not allowed by the MOHLTC to provide naloxone to paramedics, hospitals and other healthcare providers, police and fire services; these services will access Narcan through Ontario Medical Supply.

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Supporting community organizations with the development of policies and procedures is paramount to the success of the Harm Reduction Program

Public Health staff will consult with community organizations on the development of such policies and procedures, specifically as they relate to naloxone distribution and administration. Staff will also promote naloxone availability and engage in community organization outreach to encourage their participation in a public health response to the dangers of opioid misuse in York Region.

An early warning system will alert York Region to trends in opioid misuse and health impacts

A system for tracking risk and a real-time opioid overdose early warning and surveillance system will be developed to identify dangerous trends and clusters in the community and guide response to these trends.

Public Health will assume a leadership role in establishing systems to identify and track risks posed by illicit synthetic opioids within York Region, including the sudden availability of illicit synthetic opioids and resulting opioid overdoses. The surveillance system will include real-time qualitative and quantitative indicators, and complementary information on local illicit synthetic opioid risk. Partnerships with local emergency departments, first responders (police, fire and ambulance) and harm reduction service providers will be established to collect and share data. Risk based information about opioids use and misuse will be shared with community partners to keep them informed about what is happening and support service planning.

An early warning system will allow for sharing of information with community agencies to inform community response and programs. The MOHLTC and Public Health Units, including York Region, are currently developing this early warning system that York Region will use.

5. Financial Considerations

The provincial allocation of \$250,000 in 100% funding will support the addition of 2 full-time equivalents (FTEs) to implement enhancement of the harm reduction program in 2017. The amended 2017 budget will include 2 permanent FTEs and associated program expenditures offset by \$250,000 in provincial funding to enhance the Harm Reduction program, with no tax levy impact in 2018.

6. Local Municipal Impact

A public health initiative to strengthen harm reduction program resources and response will optimize the health and well-being of the York region community at large. Capacity will be built among community organizations to distribute naloxone and participate in reducing opioid harms in municipalities. This will mean increased access points for services for those who use opioids, their friends, family and service providers who support them.

7. Conclusion

Opioid misuse is the third leading cause of accidental death in Ontario; two people die of an opioid related cause every day. The rate of opioid overdoses has slowly been increasing in York region since 2003. The number of York region residents who are dispensed opioids has been increasing as has the incidence of the health impacts of opioid use including overdoses, emergency room visits, hospitalizations and deaths. Through the Harm Reduction program Enhancement, Public Health will have the necessary resources and framework to enhance the healthy living program in order to better respond to misuse of opioids in York Region.

For more information on this report, please contact Cathy Jaynes, Director, Healthy Living at 1-877-464-9675 ext.74141.

The Senior Management Group has reviewed this report.

September 20, 2017

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Accessible formats or communication supports are available upon request