

**Report to
Rapport au:**

**Ottawa Board of Health
Conseil de santé d'Ottawa
2 November 2020 / 2 novembre 2020**

**Submitted on October 22, 2020
Soumis le 22 octobre 2020**

**Submitted by
Soumis par:**

Dr. / D^{re} Vera Etches, Medical Officer of Health / Médecin chef en santé publique

**Contact Person
Personne ressource:**

**Esther Moghadam, Director, Health Promotion, Ottawa Public Health / Directeur,
Promotion de santé, Santé publique Ottawa
613-580-2424, x. 23789, Esther.Moghadam@Ottawa.ca**

Ward: CITY WIDE / À L'ÉCHELLE DE LA VILLE File Number: ACS2020-OPH-HPP-0007

**SUBJECT: OTTAWA PUBLIC HEALTH SUBMISSION TO HEALTH CANADA ON
PROPOSED NEW REGULATIONS FOR SUPERVISED CONSUMPTION
SITES AND SERVICES**

**OBJET: SOUMISSION DE SANTÉ PUBLIQUE OTTAWA À SANTÉ CANADA
QUANT À LA PROPOSITION D'UNE NOUVELLE RÉGLEMENTATION
RELATIVE AUX LIEUX ET SERVICES SUPERVISÉS POUR LA
CONSOMMATION DE DROGUES**

REPORT RECOMMENDATION

That the Board of Health for the City of Ottawa Health Unit receive the Medical Officer of Health's submission to Health Canada on proposed new regulations for supervised consumption sites and services, as outlined in Document 1, and approve the recommendations contained therein.

RECOMMANDATION DU RAPPORT

Que le Conseil de santé de la circonscription sanitaire de la ville d'Ottawa prenne connaissance de la soumission présentée à Santé Canada par la médecin-chef en santé publique quant à la proposition d'une nouvelle réglementation relative aux lieux et services supervisés pour la consommation de drogues, comme le précise le document 1, et approuve les recommandations qui y figurent.

BACKGROUND

Since 2017, Ottawa Public Health (OPH) has intensified its work with various partners to prevent, prepare for and respond to substance use and opioids in the community. This work aligns with the Ottawa Board of Health's 2016 [adoption](#) of a guiding principle with respect to enhancing harm reduction services, as well as with the more recently approved strategic directions of promoting mental health and reducing health and social harms of substance use, and of driving prevention across the health care system.

Given OPH's long-standing role in coordinating harm reduction activities across the City of Ottawa, OPH's harm reduction program is a key contributor to advancing the recommended actions identified in the [Ottawa Community Action Plan: Comprehensive Mental Health and Substance Use Strategy – Focus on Opioids](#). These actions, which are based on inputs from community partners, people with lived and living experience and local health care experts, are being used as a framework to guide the next steps of OPH's harm reduction program.

On November 4, 2019, the Board of Health received the report [Next Steps in Harm Reduction and Overdose Prevention](#), which provides further information OPH's Supervised Consumption Service (SCS) and the following harm reduction next steps:

- Integrate harm reduction approach and practices across allied service partners
- Explore expansion of programs and services to address the toxic drug supply
- Increase harm reduction reach to those not accessing existing services

On August 15, 2020, Health Canada launched a [consultation](#) on the proposal to develop new regulations under the *Controlled Drugs and Substances Act* (CDSA) for [supervised consumption sites](#) and services with the submission deadline of October 14, 2020. The intent of Health Canada is to:

- establish supervised consumption sites and services within Canada's overall harm-reduction framework, consistent with the public health objectives of the CDSA;

- establish clear federal regulatory controls, consistent with the public safety objectives of the CDSA;
- reduce the overall regulatory burden on SCS applicants and operators; and,
- provide greater certainty and permanence for SCS operators, better ensuring the continuity of SCS and services in Canada.

The submission by OPH was made in collaboration with the three other SCS in Ottawa, namely Ottawa Inner City Health, Somerset West Community Health Centre and Sandy Hill Community Health Centre.

DISCUSSION

As noted in Health Canada's [notice of intent](#), the opioid overdose crisis continues to be one of the most devastating public health crises in recent history. Between January 2016 and December 2019, there were at least 15,393 apparent opioid-related deaths in Canada. Addressing this crisis requires a comprehensive response that recognizes the complex health and social issues involved in problematic substance use. In recent years, Health Canada has taken steps to integrate harm reduction into the federal response to problematic substance use and the opioid crisis. Harm reduction measures aim to support people who use drugs to live safer and healthier lives and reduce the negative health, social, and economic impacts associated with problematic substance use.

In addition to the feedback provided through the Office of Controlled Substances' meeting with SCS/Overdose Prevention Site (OPS) Operators in June 2020, OPH, Ottawa Inner City Health, Somerset West Community Health Centre and Sandy Hill Community Health Centre provided responses to the consultation questions. The full submission is attached at Document 1. The following provides a summary.

Question 1: What are the impacts of supervised consumption sites or services on people who use drugs, the communities in which these services are located, and the provinces and territories?

- SCS offer lifesaving interventions for people who use drugs by reducing the health risks associated with drug use, including accidental overdose and the transmission of infectious diseases like HIV and Hepatitis C. SCS offer a wide range of services including distribution of single use supplies, education, naloxone distribution, supervised consumption, clinical services, crisis intervention, onsite treatment and linkages to additional health, social and

treatment services in the community. Notably, SCS have proven effective at reaching some of the most marginalized people who use drugs, whose social, physical and mental health related needs are rarely met.¹

- On a less clinical note, SCS provide a sense of community and a sense of safety for those who use drugs. During the COVID-19 pandemic, this support has been essential for many in the Ottawa community.
- The opioid crisis continues to cause significant harm at a population level and has been further impacted by the increasingly toxic illicit drug supply. The COVID-19 pandemic has further exacerbated many of the issues faced by members of our community who use drugs.
- Opioid related emergency department visits at Ottawa hospitals have increased in 2020, exceeding those seen in 2019.² While this cannot be directly attributed to COVID-19, the changes to underlying supports may be contributing. Further, OPH and partners continue to closely monitor trends and changes related to service use and overdose data across the city. Ottawa's 4 local SCS, shelter/housing partners, police and paramedic services have reported an increase in overdose activity over the last several months, largely linked to reported illicit fentanyl use.

Question 2: What are the main federal regulatory barriers faced by those who are applying to operate or are operating an SCS in Canada? Are there any aspects of either the initial or subsequent process to apply for an exemption under the CDSA that are more burdensome than others?

- Streamlined application process: The application process for an exemption under the CDSA is long and arduous. While progress has recently been made, there are aspects that remain burdensome and outdated given the current national context. As previously noted, the COVID-19 pandemic has heightened the urgency for communities to provide services in a rapidly changing environment with increasing client risks, the current process creates unnecessary barriers for those in need of support now.
- Broaden approval authority: The status of SCS and Overdose Prevention Site (OPS) has been dependent on political climates, and in some cases vulnerable to political changes. Efforts should be made to expand authority for provincial, territorial and local authorities to provide equitable access and to ensure the continuity of services in Canada.

Question 3: What types of supervised consumption services (e.g. drug checking, peer assistance, medication-assisted treatment and safer-supply treatment options) should be included under the proposed new regulations? What evidence exists to support the effectiveness of such services?

- A continuum of SCS are required, from low threshold overdose prevention models to comprehensive integrated health services models offering primary care, mental health care, treatment and/or social services.
- In June 2019, the Chief Medical Officer of Health of Ontario and the Chief Coroner of Ontario reported that recent toxicology data showed an increase in carfentanil presence and carfentanil-related deaths in Ontario.³ Locally, drug checking data from Sandy Hill's Consumption and Treatment Service indicates that 96.7% of drugs bought as opioids and 42.2% of drugs bought as stimulants contain illicit fentanyl, fentanyl analogues or other synthetic opioids⁴.
- Due to the increasing toxicity of the illegal drug supply, people who use drugs in Ottawa are at heightened risk of overdose and overdose fatalities. Expanding access to interventions like drug checking, a range of treatment options and safer supply are urgently needed to save lives.

Due to the timelines associated with the public consultation process, these recommendations were circulated to Members of the Board of Health for their review and feedback on October 13, 2020 and were then submitted to Health Canada on the October 14, 2020 deadline.

RURAL IMPLICATIONS

There are no rural implications associated with this report.

CONSULTATION

The submission by OPH was made in collaboration with the three other SCS in Ottawa, namely Ottawa Inner City Health, Somerset West Community Health Centre and Sandy Hill Community Health Centre.

LEGAL IMPLICATIONS

There are no legal impediments to the Board of Health approving this report's recommendation.

RISK MANAGEMENT IMPLICATIONS

There are no risk management implications associated with this report.

FINANCIAL IMPLICATIONS

There are no financial implications associated with this report.

ACCESSIBILITY IMPACTS

There are no accessibility impacts associated with this report.

SUPPORTING DOCUMENTATION

Document 1 - Medical Officer of Health's submission to Health Canada on proposed new regulations for supervised consumption sites and services.

DISPOSITION

This report is presented to the Board for approval of the recommendations outlined in the supporting document. OPH will continue to monitor any proposed legislation, regulations and emerging evidence related to supervised consumption sites and services and report to the Board of Health as needed.

¹ D. Hedrich, European report on drug consumption rooms, European Monitoring Centre for Drugs and Drug Addiction (EMCDDA), 2004.

² National Ambulatory Care Reporting System (NACRS), Canadian Institute for Health (CIHI)

³ Williams, David C. (2019). Carfentanil Memo. Ministry of Health, Office of the Chief Medical Officer of Health, Public Health.

⁴ Sandy Hill Community Health Centre. Drug Checking program data (2019).