



City of Hamilton
BOARD OF HEALTH
AGENDA

Meeting #: 23-002
Date: February 13, 2023
Time: 9:30 a.m.
Location: Council Chambers (BOH)
Hamilton City Hall
71 Main Street West

Matt Gauthier, Legislative Coordinator (905) 546-2424 ext. 6437

1. CEREMONIAL ACTIVITIES

2. APPROVAL OF AGENDA

(Added Items, if applicable, will be noted with *)

3. DECLARATIONS OF INTEREST

4. APPROVAL OF MINUTES OF PREVIOUS MEETING

4.1 January 16, 2023

5. COMMUNICATIONS

5.1 Correspondence from Loretta Ryan, Executive Director, Association of Local Public Health Agencies (aLPHa), respecting Program Update and Speaker Line-Up for the aLPHa Winter Symposium and Section Meetings

Recommendation: Be received.

6. DELEGATION REQUESTS

6.1 Steven Roman Soos, respecting Declaring a State of Emergency for Opioid Overdoses and Death in the City of Hamilton (for today's meeting)

- 6.2 Tim McClemon, The AIDS Network, respecting Support for the AIDS Network's Application to Operate a Proposed Consumption Treatment Services Program at 746 Barton Street East, Hamilton (for today's meeting)
- 6.3 Olivia Mancini, Canadian Drug Policy Coalition, respecting Safer Use Spaces in Shelters (for today's meeting)
- 6.4 Marcie McIlveen, Hamilton Social Medicine Response Team (HAMSMaRT), respecting Safe Use in Shelter and the Need for a Second Consumption and Treatment Services Site (for today's meeting)
- 6.5 Kim Ritchie, Canadian Drug Policy Coalition: Harm Reduction Working Group, respecting the Prevention of Overdose Related Deaths for those Experiencing Homelessness (for today's meeting)

7. DELEGATIONS

8. STAFF PRESENTATIONS

- 8.1 Board of Health Governance Education Session (to be distributed)
- 8.2 Respiratory Diseases Update

9. CONSENT ITEMS

- 9.1 Consumption and Treatment Services Site Application Process (BOH23007) (City Wide)
- 9.2 Opioid Emergency Response (BOH23008) (City Wide)

10. DISCUSSION ITEMS

- 10.1 Substance Use and Addiction Program Funding - Harm Reduction Outreach Project (BOH23006) (City Wide)

11. MOTIONS

- 11.1 Advancing a Whole-Community Harm Reduction Framework

12. NOTICES OF MOTION

13. GENERAL INFORMATION / OTHER BUSINESS

- 13.1 Amendments to the Outstanding Business List:
 - a. Items Requiring New Due Dates

- a. Municipal Actions to Reduce Harms Associated with Alcohol Use (BOH19032)

OBL Item: 2019-V

Current Due Date: On Hold Due to COVID-19

Proposed New Due Date: July 2023

- b. Child & Adolescent Services 2021-2022 Budget and Base Funding Increase of Five Percent (BOH21010) (City Wide)

OBL Item: 2021-G

Current Due Date: On Hold Due to COVID-19

Proposed New Due Date: April 2023

- b. Items Considered Complete and Needing to be Removed:

- a. Consumption and Treatment Services and Wesley Day Centre (Referred to the Board of Health from the Emergency and Community Services Committee on June 19, 2020)

OBL Item: 2020-I

Date Added: June 19, 2020 (E&CS 19-014 Item (h) (i))

Date Completed:

- b. Correspondence from Anita Dubeau, Board of Health Chair, Simcoe Muskoka District Health Unit, respecting a Response to the Opioid Crisis in Simcoe Muskoka and Ontario-wide

OBL Item: 2022-D

Date Added: April 4, 2022 (BOH 22-004 (Item 5.1))

A Letter of Endorsement was Sent

- c. Correspondence from the Timiskaming Health Unit respecting Decriminalization of Personal Possession of Illicit Drugs

OBL Item: 2022-F

Date Added: August 10, 2022 (BOH 22-008 (Item 5.2))

A Letter of Endorsement was Sent

d. Respiratory Diseases Update

OBL Item: 2022-G

Date Added: November 28, 2022 (BOH Report 22-010 - Item (f)(ii))

Date Completed: January 16, 2023 (BOH Report 23-001 - Item 2)

e. Opioid Emergency Response

OBL Item: 2023-A

Date Added: January 12, 2023 - Special GIC Report 23-002 (Item 1(a))

Date Completed: Addressed as Item 9.2 on Today's Board of Health Agenda

14. PRIVATE AND CONFIDENTIAL

15. ADJOURNMENT



BOARD OF HEALTH MINUTES 23-001

9:30 a.m.

Monday, January 16, 2023

Council Chambers, City Hall, 2nd Floor
71 Main Street West, Hamilton, Ontario

Present: Mayor A. Horwath (Chair)
Councillor M. Wilson (Vice-Chair)
Councillors J. Beattie, C. Cassar, B. Clark, J.P. Danko, M. Francis,
T. Hwang, T. Jackson, C. Kroetsch, N. Nann, T. McMeekin, E.
Pauls, M. Spadafora, M. Tadeson, A. Wilson

THE FOLLOWING ITEMS WERE REFERRED TO COUNCIL FOR CONSIDERATION:

1. Board of Health Orientation Part 2: Population Health Assessment and Public Health Priorities (BOH23002) (City Wide) (Item 8.1)

(Hwang/Nann)

That Report BOH23002, respecting the Board of Health Orientation Part 2: Population Health Assessment and Public Health Priorities, be received.

Result: Motion CARRIED by a vote of 14 to 0, as follows:

YES	-	Mayor Andrea Horwath	
YES	-	Beattie, Jeff	Ward 10
YES	-	Cassar, Craig	Ward 12
YES	-	Clark, Brad	Ward 9
YES	-	Danko, J.P.	Ward 8
YES	-	Francis, Matt	Ward 5
YES	-	Hwang, Tammy	Ward 4
YES	-	Kroetsch, Cameron	Ward 2
YES	-	Jackson, Tom	Ward 6
YES	-	Nann, Nrinder	Ward 3
YES	-	McMeekin, Ted	Ward 15
ABSENT	-	Pauls, Esther	Ward 7
ABSENT	-	Spadafora, Mike	Ward 14
YES	-	Tadeson, Mark	Ward 11
YES	-	Wilson, Alex	Ward 13
YES	-	Wilson, Maureen	Ward 1

2. Pharmacies and Spatial Mapping: Influenza and COVID-19 Vaccinations (BOH23004) (City Wide) (Item 9.1)

(A. Wilson/Tadeson)

That Report BOH23004, respecting Pharmacies and Spatial Mapping: Influenza and COVID-19 Vaccinations, be received.

Result: Motion CARRIED by a vote of 12 to 0, as follows:

YES	-	Mayor Andrea Horwath	
YES	-	Beattie, Jeff	Ward 10
YES	-	Cassar, Craig	Ward 12
YES	-	Clark, Brad	Ward 9
YES	-	Danko, J.P.	Ward 8
YES	-	Francis, Matt	Ward 5
ABSENT	-	Hwang, Tammy	Ward 4
YES	-	Kroetsch, Cameron	Ward 2
ABSENT	-	Jackson, Tom	Ward 6
YES	-	Nann, Nrinder	Ward 3
YES	-	McMeekin, Ted	Ward 15
ABSENT	-	Pauls, Esther	Ward 7
ABSENT	-	Spadafora, Mike	Ward 14
YES	-	Tadeson, Mark	Ward 11
YES	-	Wilson, Alex	Ward 13
YES	-	Wilson, Maureen	Ward 1

3. Cold Alert Thresholds and Response Process (BOH23005) (City Wide) (Item 9.2)

(Nann/A. Wilson)

That Report BOH23005, respecting Cold Alert Thresholds and Response Process, be received.

Result: Motion CARRIED by a vote of 12 to 0, as follows:

YES	-	Mayor Andrea Horwath	
YES	-	Beattie, Jeff	Ward 10
YES	-	Cassar, Craig	Ward 12
YES	-	Clark, Brad	Ward 9
YES	-	Danko, J.P.	Ward 8
YES	-	Francis, Matt	Ward 5
ABSENT	-	Hwang, Tammy	Ward 4
YES	-	Kroetsch, Cameron	Ward 2
ABSENT	-	Jackson, Tom	Ward 6
YES	-	Nann, Nrinder	Ward 3
YES	-	McMeekin, Ted	Ward 15
ABSENT	-	Pauls, Esther	Ward 7
ABSENT	-	Spadafora, Mike	Ward 14

YES - Tadeson, Mark Ward 11
YES - Wilson, Alex Ward 13
YES - Wilson, Maureen Ward 1

4. Ministry of Health Funding and Accountability Report: 2021 Annual Report and Attestation (BOH23001) (City Wide) (Item 10.1)

(Nann/Clark)

That the Board of Health authorize and direct the Medical Officer of Health to submit the 2021 Annual Report and Attestation to the Ministry of Health in keeping with the information outlined in Board of Health Report BOH23001.

Result: Motion CARRIED by a vote of 11 to 0, as follows:

YES - Mayor Andrea Horwath
YES - Beattie, Jeff Ward 10
YES - Cassar, Craig Ward 12
YES - Clark, Brad Ward 9
ABSENT - Danko, J.P. Ward 8
YES - Francis, Matt Ward 5
ABSENT - Hwang, Tammy Ward 4
YES - Kroetsch, Cameron Ward 2
ABSENT - Jackson, Tom Ward 6
YES - Nann, Nrinder Ward 3
YES - McMeekin, Ted Ward 15
ABSENT - Pauls, Esther Ward 7
ABSENT - Spadafora, Mike Ward 14
YES - Tadeson, Mark Ward 11
YES - Wilson, Alex Ward 13
YES - Wilson, Maureen Ward 1

5. Appointment of an Associate Medical Officer of Health (BOH23003) (City Wide) (Item 14.1)

(Clark/Nann)

- (a) That the direction to staff respecting Report BOH23003, Appointment of an Associate Medical Officer of Health, be approved; and,
- (b) That Report BOH23003, respecting the Appointment of an Associate Medical Officer of Health, remain confidential until approved by Council.

Result: Motion CARRIED by a vote of 10 to 1, as follows:

YES - Mayor Andrea Horwath
YES - Beattie, Jeff Ward 10
YES - Cassar, Craig Ward 12
YES - Clark, Brad Ward 9

ABSENT	- Danko, J.P.	Ward 8
NO	- Francis, Matt	Ward 5
ABSENT	- Hwang, Tammy	Ward 4
YES	- Kroetsch, Cameron	Ward 2
ABSENT	- Jackson, Tom	Ward 6
YES	- Nann, Nrinder	Ward 3
YES	- McMeekin, Ted	Ward 15
ABSENT	- Pauls, Esther	Ward 7
ABSENT	- Spadafora, Mike	Ward 14
YES	- Tadeson, Mark	Ward 11
YES	- Wilson, Alex	Ward 13
YES	- Wilson, Maureen	Ward 1

FOR INFORMATION:

(a) CHANGES TO THE AGENDA (Item 2)

The Committee Clerk advised the Board of the following changes to the agenda:

5. COMMUNICATIONS

- 5.3 Correspondence from Loretta Ryan, Executive Director, Association of Local Public Health Agencies (alpha), respecting 2023 Budget Consultations

Recommendation: Be received.

6. DELEGATION REQUESTS

- 6.1 Delegations respecting Item 8.1 – Report BOH23002, Board of Health Orientation Part 2: Population Health Assessment and Public Health Priorities
- 6.1.a. Kojo Dampthey, Executive Director, Hamilton Centre for Civic Inclusion
- 6.1.b. Lyndon George, Hamilton Anti-Racism Resource Centre

(Tadeson/A. Wilson)

That the agenda for the January 16, 2023 Board of Health be approved, as amended.

Result: Motion CARRIED by a vote of 14 to 0, as follows:

YES	- Mayor Andrea Horwath	
YES	- Beattie, Jeff	Ward 10
YES	- Cassar, Craig	Ward 12
YES	- Clark, Brad	Ward 9
ABSENT	- Danko, J.P.	Ward 8

YES	- Francis, Matt	Ward 5
YES	- Hwang, Tammy	Ward 4
YES	- Kroetsch, Cameron	Ward 2
ABSENT	- Jackson, Tom	Ward 6
YES	- Nann, Nrinder	Ward 3
YES	- McMeekin, Ted	Ward 15
YES	- Pauls, Esther	Ward 7
YES	- Spadafora, Mike	Ward 14
YES	- Tadeson, Mark	Ward 11
YES	- Wilson, Alex	Ward 13
YES	- Wilson, Maureen	Ward 1

(b) DECLARATIONS OF INTEREST (Item 3)

There were no declarations of interest.

(c) APPROVAL OF MINUTES OF PREVIOUS MEETING (Item 4)

(i) November 28, 2022 (Item 4.1)

(Hwang/Cassar)

That the Minutes of November 28, 2022 meeting of the Board of Health be approved, as presented.

Result: Motion CARRIED by a vote of 14 to 0, as follows:

YES	- Mayor Andrea Horwath	
YES	- Beattie, Jeff	Ward 10
YES	- Cassar, Craig	Ward 12
YES	- Clark, Brad	Ward 9
ABSENT	- Danko, J.P.	Ward 8
YES	- Francis, Matt	Ward 5
YES	- Hwang, Tammy	Ward 4
YES	- Kroetsch, Cameron	Ward 2
ABSENT	- Jackson, Tom	Ward 6
YES	- Nann, Nrinder	Ward 3
YES	- McMeekin, Ted	Ward 15
YES	- Pauls, Esther	Ward 7
YES	- Spadafora, Mike	Ward 14
YES	- Tadeson, Mark	Ward 11
YES	- Wilson, Alex	Ward 13
YES	- Wilson, Maureen	Ward 1

(d) COMMUNICATIONS (Item 5)

(i) (Hwang/M. Wilson)

That the following items be approved, as presented:

- (a) Correspondence from Loretta Ryan, Executive Director, Association of Local Public Health Agencies (alPHa), respecting Governance Toolkit for Ontario Boards of Health (Item 5.1)

Recommendation: Be received

- (b) Correspondence from Dr. Penny Sutcliffe, Medical Officer of Health and Chief Executive Officer, Public Health Sudbury & Districts, respecting Physical Literacy for Healthy Active Children (Item 5.2)

Recommendation: Be received

- (c) Correspondence from Loretta Ryan, Executive Director, Association of Local Public Health Agencies (alPHa), respecting 2023 Budget Consultations (Item 5.3)

Recommendation: Be received

Result: Motion CARRIED by a vote of 16 to 0, as follows:

YES	-	Mayor Andrea Horwath	
YES	-	Beattie, Jeff	Ward 10
YES	-	Cassar, Craig	Ward 12
YES	-	Clark, Brad	Ward 9
YES	-	Danko, J.P.	Ward 8
YES	-	Francis, Matt	Ward 5
YES	-	Hwang, Tammy	Ward 4
YES	-	Kroetsch, Cameron	Ward 2
YES	-	Jackson, Tom	Ward 6
YES	-	Nann, Nrinder	Ward 3
YES	-	McMeekin, Ted	Ward 15
YES	-	Pauls, Esther	Ward 7
YES	-	Spadafora, Mike	Ward 14
YES	-	Tadeson, Mark	Ward 11
YES	-	Wilson, Alex	Ward 13
YES	-	Wilson, Maureen	Ward 1

(ii) (Clark/Cassar)

That Finance staff be directed to review the Daily School Route (DRS) proposal and provide direction on how to initiate that program, as per Item 5.2, Correspondence from Dr. Penny Sutcliffe, Medical Officer of Health and

Chief Executive Officer, Public Health Sudbury & Districts, respecting Physical Literacy for Healthy Active Children.

Result: Motion CARRIED by a vote of 16 to 0, as follows:

YES	-	Mayor Andrea Horwath	
YES	-	Beattie, Jeff	Ward 10
YES	-	Cassar, Craig	Ward 12
YES	-	Clark, Brad	Ward 9
YES	-	Danko, J.P.	Ward 8
YES	-	Francis, Matt	Ward 5
YES	-	Hwang, Tammy	Ward 4
YES	-	Kroetsch, Cameron	Ward 2
YES	-	Jackson, Tom	Ward 6
YES	-	Nann, Nrinder	Ward 3
YES	-	McMeekin, Ted	Ward 15
YES	-	Pauls, Esther	Ward 7
YES	-	Spadafora, Mike	Ward 14
YES	-	Tadeson, Mark	Ward 11
YES	-	Wilson, Alex	Ward 13
YES	-	Wilson, Maureen	Ward 1

(e) DELEGATION REQUESTS (Item 6)

(i) (A. Wilson/Hwang)

That the following delegation requests respecting Item 8.1, Report BOH32002, Board of Health Orientation Part 2: Population Health Assessment and Public Health Priorities, be approved for the January 16, 2023 Board of Health meeting:

- (i) Kojo Dampsey, Executive Director, Hamilton Centre for Civic Inclusion (Item 6.1 (a))
- (ii) Lyndon George, Hamilton Anti-Racism Resource Centre (Item 6.1 (b))

Result: Motion CARRIED by a vote of 16 to 0, as follows:

YES	-	Mayor Andrea Horwath	
YES	-	Beattie, Jeff	Ward 10
YES	-	Cassar, Craig	Ward 12
YES	-	Clark, Brad	Ward 9
YES	-	Danko, J.P.	Ward 8
YES	-	Francis, Matt	Ward 5
YES	-	Hwang, Tammy	Ward 4
YES	-	Kroetsch, Cameron	Ward 2
YES	-	Jackson, Tom	Ward 6

YES	- Nann, Nrinder	Ward 3
YES	- McMeekin, Ted	Ward 15
YES	- Pauls, Esther	Ward 7
YES	- Spadafora, Mike	Ward 14
YES	- Tadeson, Mark	Ward 11
YES	- Wilson, Alex	Ward 13
YES	- Wilson, Maureen	Ward 1

(f) DELEGATIONS (Item 7)

(i) Delegations respecting Board of Health Orientation Part 2: Population Health Assessment and Public Health Priorities (BOH23002) (City Wide) (Item 8.1)

The following Delegations addressed the Board:

- (i) Kojo Dampsey, Hamilton Centre for Civic Inclusion (Item 7.1)
- (ii) Lyndon George, Hamilton Anti-Racism Resource Centre (Item 7.2)

(Hwang/A. Wilson)

That the following delegations respecting Item 8.1, Report BOH32002, Board of Health Orientation Part 2: Population Health Assessment and Public Health Priorities, be received:

- (i) Kojo Dampsey, Executive Director, Hamilton Centre for Civic Inclusion (Item 7.1)
- (ii) Lyndon George, Hamilton Anti-Racism Resource Centre (Item 7.2)

Result: Motion CARRIED by a vote of 16 to 0, as follows:

YES	- Mayor Andrea Horwath	
YES	- Beattie, Jeff	Ward 10
YES	- Cassar, Craig	Ward 12
YES	- Clark, Brad	Ward 9
YES	- Danko, J.P.	Ward 8
YES	- Francis, Matt	Ward 5
YES	- Hwang, Tammy	Ward 4
YES	- Kroetsch, Cameron	Ward 2
YES	- Jackson, Tom	Ward 6
YES	- Nann, Nrinder	Ward 3
YES	- McMeekin, Ted	Ward 15
YES	- Pauls, Esther	Ward 7
YES	- Spadafora, Mike	Ward 14
YES	- Tadeson, Mark	Ward 11
YES	- Wilson, Alex	Ward 13

YES - Wilson, Maureen Ward 1

For disposition of this matter, please refer to Item 1.

(g) STAFF PRESENTATIONS (Item 8)

(i) Board of Health Orientation Part 2: Population Health Assessment and Public Health Priorities (BOH23002) (City Wide) (Item 8.1)

Dr. Richardson, Medical Officer of Health, Kevin McDonald, Director, Healthy Environments, Jen Vickers-Manzin, Director, Healthy Families, and Julie Prieto, Director, Epidemiology & Wellness, addressed the Board with a presentation respecting Board of Health Orientation Part 2: Population Health Assessment and Public Health Priorities.

(Danko/Beattie)

That the Presentation respecting Board of Health Orientation Part 2: Population Health Assessment and Public Health Priorities (BOH23002), be received.

Result: Motion CARRIED by a vote of 14 to 0, as follows:

YES	-	Mayor Andrea Horwath	
YES	-	Beattie, Jeff	Ward 10
YES	-	Cassar, Craig	Ward 12
YES	-	Clark, Brad	Ward 9
YES	-	Danko, J.P.	Ward 8
YES	-	Francis, Matt	Ward 5
YES	-	Hwang, Tammy	Ward 4
YES	-	Kroetsch, Cameron	Ward 2
YES	-	Jackson, Tom	Ward 6
YES	-	Nann, Nrinder	Ward 3
YES	-	McMeekin, Ted	Ward 15
ABSENT	-	Pauls, Esther	Ward 7
ABSENT	-	Spadafora, Mike	Ward 14
YES	-	Tadeson, Mark	Ward 11
YES	-	Wilson, Alex	Ward 13
YES	-	Wilson, Maureen	Ward 1

For disposition of this matter, please refer to Item 1.

(ii) Respiratory Diseases Update (Item 8.2)

Kevin McDonald, Director, Communicable Disease Control, addressed the Board with a presentation respecting a Respiratory Diseases Update.

(Kroetsch/A. Wilson)

That the Respiratory Diseases Update, be received.

Result: Motion CARRIED by a vote of 11 to 0, as follows:

YES	-	Mayor Andrea Horwath	
YES	-	Beattie, Jeff	Ward 10
ABSENT	-	Cassar, Craig	Ward 12
YES	-	Clark, Brad	Ward 9
YES	-	Danko, J.P.	Ward 8
YES	-	Francis, Matt	Ward 5
ABSENT	-	Hwang, Tammy	Ward 4
YES	-	Kroetsch, Cameron	Ward 2
ABSENT	-	Jackson, Tom	Ward 6
YES	-	Nann, Nrinder	Ward 3
YES	-	McMeekin, Ted	Ward 15
ABSENT	-	Pauls, Esther	Ward 7
ABSENT	-	Spadafora, Mike	Ward 14
YES	-	Tadeson, Mark	Ward 11
YES	-	Wilson, Alex	Ward 13
YES	-	Wilson, Maureen	Ward 1

(h) PRIVATE AND CONFIDENTIAL (Item 14)

**(i) Appointment of an Associate Medical Officer of Health (BOH23003)
(City Wide) (Item 14.1)**

The Board determined that discussion of Item 14.1 was not required in Closed Session.

For disposition of this matter, please refer to Item 5.

(i) ADJOURNMENT (Item 15)

(Clark/Tadeson)

That, there being no further business, the Board of Health be adjourned at 1:03 p.m.

Result: Motion CARRIED by a vote of 11 to 0, as follows:

YES	-	Mayor Andrea Horwath	
YES	-	Beattie, Jeff	Ward 10
YES	-	Cassar, Craig	Ward 12
YES	-	Clark, Brad	Ward 9
ABSENT	-	Danko, J.P.	Ward 8

YES	- Francis, Matt	Ward 5
ABSENT	- Hwang, Tammy	Ward 4
YES	- Kroetsch, Cameron	Ward 2
ABSENT	- Jackson, Tom	Ward 6
YES	- Nann, Nrinder	Ward 3
YES	- McMeekin, Ted	Ward 15
ABSENT	- Pauls, Esther	Ward 7
ABSENT	- Spadafora, Mike	Ward 14
YES	- Tadeson, Mark	Ward 11
YES	- Wilson, Alex	Ward 13
YES	- Wilson, Maureen	Ward 1

Respectfully submitted,

Mayor Andrea Horwath,
Chair, Board of Health

Matt Gauthier
Legislative Coordinator
Office of the City Clerk

From: [allhealthunits](#) on behalf of [Loretta Ryan](#)
To: ["All Health Units"](#)
Cc: [Board](#)
Subject: [allhealthunits] Program Update and Speaker Line-Up for the alPHa Winter Symposium and Section Meetings
Date: Friday, January 27, 2023 11:25:13 AM

PLEASE ROUTE TO:

All Board of Health Members
All Members of Regional Health & Social Service Committees
All Senior Public Health Managers

Dear alPHa Members,

Have you registered yet for the [Association of Local Public Health Agencies \(alPHa\) Winter Symposium and Section Meetings](#) that are taking place on February 24th? All alPHa members are encouraged to participate.

The Winter Symposium will continue the important conversation on the role of local public health in the province's Public Health System. Highlights include greetings from the Hon. Doug Ford, Premier of Ontario; Dr. Theresa Tam, Chief Public Health Officer of Canada; Colin Best, President, Association of Municipalities of Ontario; Allan O'Dette, President & CEO, Ontario Medical Association; and Steini Brown, Dean, Dalla Lana School of Public Health.

Plenary Sessions also have an exciting line-up of speakers who will be discussing key issues related to public health. Speakers include: Dr. Christopher Simpson, Executive Vice-President, Medical, Ontario Health; Provincial Constable Wendi Hughes, Ontario Provincial Police - East Region Liaison; Michael Sherar, President and CEO, Public Health Ontario; Brendan Smith, Scientist, Public Health Ontario; Roman Pabayo, Associate Professor, University of Alberta; Naomi Schwartz, Epidemiologist Lead, Public Health Ontario; Hon. Stephen Lecce, Minister of Education; and Dr. Kieran Moore, Chief Medical Officer of Health.

Throughout the day we will also be featuring alPHa Board members: Trudy Sachowski, President; Carmen McGregor, Chair, Boards of Health Section; Dr. Eileen de Villa, Chair, Council of Ontario Medical Officers of Health; Paul Sharma, Affiliate Representative; Dr. Hsiu-Li Wang, Vice-Chair, Council of Ontario Medical Officers of Health; Dr. Charles Gardner, Vice-President; and Dr. Paul Roumeliotis, Past-President.

Registration information, the draft Symposium program, the draft agenda for the BOH Section meeting, and the event flyer can be accessed by going to the [alPHa website](#) and clicking on the Symposium Banner or by going to the [event page](#). This webpage is also where any updates will be posted. The closing date to register has been revised to Tuesday, February 21st at 5 pm to take into account Family Day. Please note that you must be an alPHa member to participate in the Symposium or Section meetings. All registrants will receive login information prior to the event.

If you are a BOH Section or Affiliate member and are registered for the Symposium, you may also attend the [Pre-Symposium Workshop: Road 2 Mental Readiness \(R2MR\)](#) on February 23, 2023. The

workshop was developed in collaboration with the Canadian Armed Forces for public health leaders and is based on a cycle that entails preparation, performance, and recovery. Please note, if you are a BOH or Affiliate attendee, you do not need to separately register for this workshop. (COMOH members, this is the R2MR workshop you participated in on November 18, 2022. If you are a COMOH member, missed the original session, and want to participate, you can contact Melanie Dziengo at communications@alphaweb.org.)

Thank you to the Eastern Ontario Health Unit for co-hosting the event and to the University of Toronto's Dalla Lana School of Public Health for their generous support.

We hope to see you online on Friday, February 24th!

Take Care,

Loretta

Loretta Ryan, CAE, RPP

Executive Director

Association of Local Public Health Agencies (ALPHA)

480 University Avenue, Suite 300

Toronto, ON M5G 1V2

Tel: 416-595-0006 ext. 222

Cell: 647-325-9594

loretta@alphaweb.org

www.alphaweb.org



From: City of Hamilton <hello@hamilton.ca>

Sent: January 26, 2023 4:55 PM

To: clerk@hamilton.ca

Subject: Webform submission from: Request to Speak to a Committee of Council

Submitted on Thu, 01/26/2023 - 16:54

Submitted by: Anonymous

Submitted values are:

Committee Requested

Committee

Emergency & Community Services Committee

Will you be delegating in-person or virtually?

In-person

Will you be delegating via a pre-recorded video?

No

Requestor Information

Requestor Information

Steven Roman Soos



Preferred Pronoun

he/him

Reason(s) for delegation request

In support of Hamilton Mayor, Andrea Horwath declaring a state of emergency for opioid overdoses and deaths for the City of Hamilton

I have been advocating for a state of emergency on mental health, homelessness and addiction for four years, since 2019.

My entire extended family lives in the City of Hamilton.

I have the support of the PC Caucus and the ONDP caucus for declaring the emergency in Niagara.

I would like to walk City of Hamilton through the process, the benefits of the state of emergency, and what it would look like and how it would all come together.

Will you be requesting funds from the City?

No

Will you be submitting a formal presentation?

No

From: City of Hamilton <hello@hamilton.ca>

Sent: February 1, 2023 4:01 PM

To: clerk@hamilton.ca

Subject: Webform submission from: Request to Speak to a Committee of Council

Submitted on Wed, 02/01/2023 - 16:00

Submitted by: Anonymous

Submitted values are:

Committee Requested

Committee
Board of Health

Will you be delegating in-person or virtually?
In-person

Will you be delegating via a pre-recorded video?
No

Requestor Information

Requestor Information
Tim McClemont
The AIDS Network
140 King Street East
Suite 101
Hamilton, ON. L8P 1V4
ed@aidsnetwork.ca
905 528-0854 ext. 229

Preferred Pronoun
he/him

Reason(s) for delegation request
To seek Board of Health resolution that supports The AIDS Network's application to the Ministry of Health to operate a proposed Consumption Treatment Services program located at 746 Barton Street East in the City of Hamilton.

Will you be requesting funds from the City?
No

Will you be submitting a formal presentation?
Yes

The AIDS Network

Consumption Treatment Services (CTS)

Community Engagement Summary

Proposed site 746 Barton Street East

March/April 2021

Consultation with surrounding organizations that have undergone CTS application process and currently operate sites.

June 2021

Initial consultation with the Ministry of Health and Long Term Care regarding possible location and next steps.

August 2021

Meeting with Councillor Nrinder Nann to discuss proposed CTS in Ward 3.

Launched communication tools for people to engage with us directly (cts@aidsnetwork.ca)

Launched online survey for people with history of substance use and an online survey for Ward 3 community members.

September 2021 and ongoing

Social media campaign – Frequently Asked Questions about Consumption and Treatment Sites
Community outreach with mailbox drops in residences and visits with local businesses near 746 Barton Street East.

October 2021

Live community discussion <https://www.youtube.com/watch?v=9shxtCtXMTg>

Board of Health meeting to discuss municipal support.

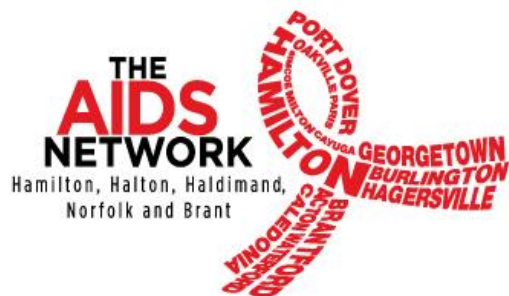
In-person community discussions with local groups and organizations.

November/December 2021

Launch of online survey for ongoing community engagement

April 2022

Follow up with the Ministry of Health and Long-Term Care. Application continues to be under review.



Community **Mitigation Strategies** and **Ongoing Engagement** for a Consumption and Treatment Services Site at 746 Barton Street East

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- 6. Program Evaluation and Report Back**

INTRODUCTION

This report is an expansion of our *Community Consultation and Engagement Report for a Consumption and Treatment Services Site in Hamilton's Ward 3 – November 2021*.

Some of the information contained within this expanded report also appears in our more comprehensive community engagement report, however some strategies have been expanded to include additional planning processes, proactive actionable strategies, and existing methods currently being implemented throughout our existing programming.

This report demonstrates our thoughtful commitment to the ongoing engagement of the community and the ways in which we will mitigate community concerns. We have developed these strategies and considerations based on our own consultation processes, as well as through the on-going consultations with other CTS sites including Urban Core – Hamilton, Positive Living Niagara – St. Catharines, the Regional HIV/AIDS Connection – London, as well as general consultation with the Ontario Harm Reduction Network (OHRN).

MITIGATION STRATEGIES

1. Community Safety

Safety considerations have been made in the best interest of the general community around the proposed location as well as people accessing services at the space. The proposed model of staffing includes peer engagement roles that will be responsible for engaging with people in and out of the space to help navigate group dynamics among service users and other community members. These roles will also be an integral part in planning for ongoing community engagement, education and awareness activities, and program evaluation to ensure that the voice of people with lived experiences is central to service delivery and implementation.

Practical safety considerations are also reflected in the proposed budget with the installation of security cameras and third-party security staffing. This will ensure that the site is accountable to community and being proactive to mitigate any safety concerns and concerns about increased police presence in the area.

As part of the daily work at the CTS, regular community walk-arounds will be conducted outside of the building and in the surrounding areas. These combined approaches will ensure that any safety concerns that may arise are monitored and addressed in a timely manner with the best interests of our service users and the broader community as paramount.

We understand through our community consultation that fear of safety issues is central within the opposition to a CTS. We will continue to work with the community to understand the stigma that is often at the root of these fears, and through modelling and engagement, we will demonstrate the ability to increase access to safety for all members of our community.

2. Access to Wraparound Services

The vision for this site is to create a centre with life saving overdose response and daily on-site services with organizations and groups that work from a harm reduction framework. To date, we have confirmed commitment from groups and organizations that will provide a variety of weekly on-site supports ranging from peer activities, clinical services including primary care and addiction medicine, Indigenous-based services, mental health supports, and substance use and mental health services for youth. We strongly believe that this model of service is a benefit to the community and will address existing concerns that are present in Ward 3.

3. Ongoing Community Engagement

As part of the community consultation process, The AIDS Network has created mechanisms for community to reach us including a dedicated email address, social media channels, and online surveys.

These will continue and be expanded on as part of an ongoing community engagement plan.

Our initial surveys will be closed at the time of this report, and we will open a second round of surveys that will act as an ongoing engagement tool for people to provide

feedback to inform program implementation and ongoing improvement. These surveys will remain.

Our existing and ongoing community engagement centres around increasing access points for both receiving and sharing the most relevant and timely information available at all times. Our education and community engagement work is directly informed by the community to ensure that community needs are being met and gaps are being addressed in a meaningful way.

We have continued to build upon existing outreach opportunities across Hamilton and Ward 3 specifically, drawing upon our current models of practice, we will have the capacity to increase our education and capacity building work with local businesses, community members, groups, organizations and People Who Use Drugs (PWUD)

Currently The AIDS Network has a Harm Reduction Outreach Worker who provides Harm Reduction education and support across Hamilton, as well as at locations within Ward 3 such as the Hamilton Public Library at 571 Barton Street East and The Sex Workers Action Project (SWAP), now located at 771 Barton St East. The existing relationships and initiatives within these spaces and other outreach locations will support to expand the access points available to collect and disseminate information specific to the proposed CTS for the purposes of reporting and coordination of these engagement strategies

We will build in mechanisms to continue to collect feedback from people accessing services to not only improve their overall experiences, but so that we may understand what they are experiencing in the community and the area surrounding the proposed CTS site which we will work to address. We will do this through the development of a service user advisory committee, as well as client surveys, and questionnaires made available on-site for service users accessing the space. This information will also be shared with community partners to ensure that they understand and may adapt to unique needs of people accessing supports within a CTS and within Ward 3

We believe that using our existing resources to provide key messaging around trends that we are seeing as they impact specific communities is also important to identify target populations who may be disproportionately impacted, such as within our existing ACB, WHAI, Harm Reduction, and GBMSM programming.

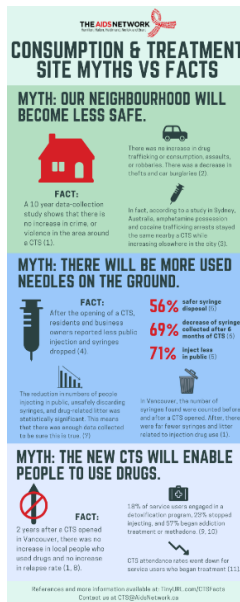
We will host quarterly open houses for the public to provide opportunities for community members, potential service users, businesses, and service providers to better understand Community and Treatment Services and our direct models of service. This will include opportunities for all community partners and peer representatives

involved within the space to provide information about the services that they are offering and insights into the populations that they serve and work alongside and to continue to build trust within the community.

4. Education and Awareness

With our organization’s history in harm reduction programming, it is within our existing funding mandate to provide community capacity building and education related to harm reduction. In collaboration with community partners, there are plans being made to host an online panel discussion with representatives from the medical community, Disability Justice Network Ontario, and people with lived experiences as speakers.

Further to that we will continue to develop educational materials and resource materials by print and for digital sharing.



Understanding that there can be a digital divide, there have been some great suggestions made through engaging with residents in Ward 3 including flyer mail outs and engagement at community events. We have connected with a resident who helps plan activities at Lucy Day Park which is approximately 300 meters from our proposed

location. This resident was very receptive to inviting us to activities at the park to share information and build relationships.

Similar to our aforementioned community engagement strategies, Education and Awareness is a key component to our existing outreach and community development work. Our current Harm Reduction staff frequently provide education and training to service providers, community members, business, colleges, and universities across all of the regions that we serve (Hamilton, Halton, Haldimand, Norfolk, and Brant).

We will have the opportunity to hold regular meetings with both TAN staff and CTS staff to share information about what is happening both inside and outside of the CTS, Ward 3, and across the broader Hamilton Community. This collaborative approach provides a unique opportunity to enhance the knowledge of the community, as well the staff who engage in this work.

Existing TAN Directors, Management, and Staff sit on various coordinating committees, community drug strategies, planning committees, and various tables across the regions which allows us to increase awareness of what is happening within the communities, what issues or challenges may be present, and work with other community organizations, peers, community members, to work collaboratively to identify areas for increased education and awareness. We continue to build these activities into our Ministry work planning and prioritize events that increase awareness and education such as International Overdose Awareness Day, community forums, panel discussions, webinars, presentations, outreach activities, and other community events as they are identified.

When we were conducting our community consultations, one organizations we met with, the Afro-Canadian Caribbean Association of Hamilton (ACCA), expressed concern regarding the lack of specific consideration for the potential impact on ACCA members and the Black community members who may experience increased surveillance and policing in the immediate area of the CTS.

We will continue to work with our existing partners and look to develop new partnerships with organizations such ACCA, to increase education and support for ACB and BIPOC within the Hamilton community. We will work together to address the complex needs of BIPOC people who use drugs, including issues related to racism, colonization, criminalization, surveillance, and trauma. Partners include, but are not limited to, the and Caribbean Council of HIV/AIDS of Ontario (ACCHO), The Hamilton Centre for Civic Inclusion (HCCI), Hamilton Community Urban Core's Black Health Team, and De dwe da nye>s Aboriginal Health Centre.

5. Program Evaluation and Report Back

Using surveys and discussion groups, ongoing feedback will be received for program evaluation and program planning. This will align with our current priorities of ensuring effectiveness and quality programming to inform ongoing service delivery.

To create space for a diversity of interests and voices, an advisory committee will be established to meet on a regular basis. This will represent key stakeholders of the CTS including on-site wraparound service providers, local resident and business representatives, people with lived experiences with substance use, and people who may be misrepresented in the provision of harm reduction services.

Report back to community will include monthly data sharing and semi-annual community reports including both qualitative and quantitative information.

As mentioned, we sit on multiple committees and regular community meetings each month. In Hamilton and Brantford, we are actively involved in Drug Strategy committees and chairing working groups, which include members of local government and police services. We attend monthly Community Partnership Meetings with Hamilton Urban Core's CTS site, which is attended by a number of community service providers, church members, neighbours, peers, social navigators, emergency services, and public health service providers. We believe that these existing mechanisms for disseminating information will be invaluable as we undertake this new CTS.

In some of our initial community consultation meetings, we had proposed the opportunity of developing advisory committees, which would include concerned member of the community. The feedback that we received at that time was that the concerned members of the community did not feel that their time should be sent on such efforts. Still, we believe that providing such spaces wherein people may engage in the development and processes of evaluation, reporting, providing timely feedback, and addressing concerns should they arise are extremely important and continues to be a priority within our ongoing engagement plan

We will develop a weekly newsletter, which will be available through our website and existing social media accounts (including website, Facebook, Instagram, twitter) and in print, which will provide regular updates, report on trends identified within the community, provide information on community events, and opportunities for increased engagement.

Our existing relationships with the community and community stakeholders, as well as with those who are eager to support our proposed CTS will allow us to ensure a consistent and ongoing flow of information and reporting directly back into the community, as well as add increased accountability to funders, stakeholders, and all members of the community.

The AIDS Network

Application to Ministry of Health Operation of Consumption Treatment Services (CTS)

746 Barton Street East, Hamilton, ON

Letters of Support

1. Hamilton Health Sciences
2. St Joseph's Healthcare Hamilton – Mental Health and Addiction Program
3. Women and HIV/AIDS Initiative
4. Hamilton Public Library
5. Hamilton Urban Core Community Health Centre
6. Hamilton Trans Health Coalition
7. Vintage Coffee Roasters
8. Good Shepherd Centres
9. Hamilton Centre for Civic Inclusion
10. John Howard Society of Hamilton, Burlington, and Area
11. Grenfell Ministries
12. Dr. Bob Kemp Hospice
13. De dwa da dehs nye>s Aboriginal Health Centre
14. Dr. Shawn Mondoux, Quality and Safety Lead, St Joseph's Healthcare Hamilton
15. Dr. Greg Rutledge, Chief of Emergency Medicine, St Joseph's Healthcare Hamilton
16. Dr. Jill Wiwcharuk
17. Canadian Mental Health Association, Hamilton
18. Shelter Health Network
19. Keeping Six
20. Hamilton Social Medicine Response Team (HAMSMaRT)
21. Hamilton Community Legal Clinic
22. Alternatives for Youth
23. Greater Hamilton Health Network
24. The Move Room
25. Mikey's Cream Pies
26. Hamilton Police Services
27. Barton Village Business Improvement Area
28. Rhineland Web Development
29. Fischerwool / Peppler Sock Co.
30. The Generator – Social Media Marketing
31. Helping Hands Street Mission
32. Maipai
33. Over 40 letters of support from Ward 3 residents

Address Locator 0300B
Ottawa ON K1A 0K9

2023-02-01

HC6-53-139-87

Karyn Cooper
Director, Programs and Services
The AIDS Network
140 King St E
Hamilton ON L8N 1B2

Karyn Cooper:

This letter is to acknowledge the receipt of The AIDS Network CTS application for a section 56.1 exemption for medical purposes under the *Controlled Drugs and Substances Act* (CDSA) regarding activities at a supervised consumption site.

Health Canada is committed to working collaboratively with you during all stages of the supervised consumption site application process. In order to help understand the process, guidance can be found on the Government of Canada's website: <https://www.canada.ca/en/health-canada/services/substance-use/supervised-consumption-sites/apply.html>. During the course of the stages of screening, reviewing, and taking a decision on your application, Health Canada may contact you to request clarification or additional information where needed.

It is possible for Health Canada to issue an exemption before the site is fully retrofitted. However, in such circumstances, the exemption would contain terms and conditions requiring that the site be visited in order to confirm that the site has been constructed according to the plans reviewed and approved by Health Canada.

Following our Office's initial screening, we are pleased to inform you that the application contains sufficient information for our Office to begin its review.

There is a very large body of literature on supervised consumption sites. Based on these reviews, properly established and maintained supervised consumption sites save lives. We are committed to reviewing supervised consumption site applications as quickly and efficiently as possible.

Should you have any questions regarding this letter or regarding any of the requirements, our Office is always available to assist you. Please do not hesitate to contact us at exemption@hc-sc.gc.ca.

Sincerely,



Bergevin, Viviane
I am approving this document
your signing location here
2023.01.30 09:28:46-05'00'

Viviane Bergevin
Manager
Exemptions Section
Authorizations Division
Office of Controlled Substances

From: City of Hamilton <hello@hamilton.ca>

Sent: February 1, 2023 10:23 PM

To: clerk@hamilton.ca

Subject: Webform submission from: Request to Speak to a Committee of Council

Submitted on Wed, 02/01/2023 - 22:23

Submitted by: Anonymous

Submitted values are:

Committee Requested

Committee
Board of Health

Will you be delegating in-person or virtually?
Virtually

Will you be delegating via a pre-recorded video?
No

Requestor Information

Requestor Information
Olivia Mancini
Canadian Drug Policy Coalition

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Preferred Pronoun
she/her

Reason(s) for delegation request
Councillor Wilson will be submitting a motion for safer use spaces in shelters. I plan to delegate on the dire need for safer use spaces in shelter given 5 suspected drug poisoning deaths at Salvation Army Booth Centre from October 2022 to December 2022. Thank you.

Will you be requesting funds from the City?
No

Will you be submitting a formal presentation?
No

From: clerk@hamilton.ca
To: [Kolar, Loren](#); [Vernem, Christine](#)
Subject: ECS Delegation MCLIVEEN Hamsart safe use in shelter and cts
Date: Monday, January 16, 2023 3:43:30 PM

From: City of Hamilton <hello@hamilton.ca>
Sent: January 16, 2023 3:36 PM
To: clerk@hamilton.ca
Subject: Webform submission from: Request to Speak to a Committee of Council

Unsubscribe

It appears that you have subscribed to commercial messages from this sender. To stop receiving such messages from this sender, please [unsubscribe](#)

Submitted on Mon, 01/16/2023 - 15:36

Submitted by: Anonymous

Submitted values are:

Committee Requested

Committee
Emergency & Community Services Committee

Will you be delegating in-person or virtually?
Virtually

Will you be delegating via a pre-recorded video?
No

Requestor Information

Requestor Information
Marcie McIlveen
Hamsmart

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Preferred Pronoun

she/her

Reason(s) for delegation request

Talk about safe use in shelter and need for second cts

Will you be requesting funds from the City?

No

Will you be submitting a formal presentation?

No

The sender designated this message as non-commercial mandatory content with the following note:

[Change communication preferences](#)

71 Main Street West
Hamilton, L8P 4Y5, ON
Canada

From: City of Hamilton <hello@hamilton.ca>

Sent: February 7, 2023 12:24 PM

To: clerk@hamilton.ca

Subject: Webform submission from: Request to Speak to a Committee of Council

Submitted on Tue, 02/07/2023 - 12:23

Submitted by: Anonymous

Submitted values are:

Committee Requested

Committee

Board of Health

Will you be delegating in-person or virtually?

Virtually

Will you be delegating via a pre-recorded video?

No

Requestor Information

Requestor Information

Kim Ritchie

Canadian Drug Policy Coalition: Harm Reduction Working Group

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Preferred Pronoun

she/her

Reason(s) for delegation request

The rationale for the delegation request is simplistic, to prevent death from overdose for those already experiencing the hardships of homelessness. We are collectively navigating housing, drug poisoning, and the pandemic. Our most vulnerable communities have suffered some of the most abhorrent forms of dehumanization over the last few years. Especially those experiencing a lack of housing and struggling with substance dependency. As we see COVID funding being slowly eroded from our public health and social service sector, we're witnessing an unprecedented number of overdoses within the Hamilton shelter system. All these deaths are preventable as substance dependency needs to be met with pragmatic and coordinated solutions, which are available. As an advocate of harm reduction, I hope to delegate to the Board of Health regarding these challenges.

Will you be requesting funds from the City?

No

Will you be submitting a formal presentation?

No



Hamilton

Respiratory Diseases Update

Jordan Walker, Director

Communicable Disease Control Division

Board of Health

February 13, 2023

Overview

1. Respiratory Season - Situation Report
2. Vaccine Program Update
3. Key Messages

Local Respiratory Virus Transmission Status

As of February 7, 2023:

Local COVID-19 Activity: Moderate & **Stable**

Local Influenza Activity: Low & **Stable**

Key Messages:

- COVID-19 reported cases, hospitalizations, and Intensive Care Unit (ICU) admissions are stable, while test positivity and the number of active outbreaks are decreasing and wastewater signal is increasing.
- Influenza reported cases and test positivity are stable.

Access to Respiratory Virus Monitoring Information

Updated Resource – Week of February 13, 2023

- [Influenza & Respiratory Syncytial Virus \(RSV\) Dashboard](#) (updated Tuesdays)
 - ✓ Will now include influenza A, influenza B and Respiratory Syncytial Virus (RSV) wastewater signal

Ongoing Resources

- [Respiratory Virus Transmission Status](#) (updated Wednesdays):
- [COVID-19 Status of Cases Dashboard](#) (updated Tuesdays and Fridays):
- [COVID-19 Vaccine Dashboard](#) (updated on Tuesdays and Fridays)
- [Active Outbreaks posted on Open Data](#) (updated Monday – Friday)

Health System Capacity: Admissions/Funded Beds

	Hospital	Jan 2, 2023	Jan 9, 2023	Jan 16, 2023	Jan 23, 2023	Jan 30, 2023	Feb 6, 2023
Acute Care Occupancy	SJHH	107% 370/346	99% 350/354	97% 343/354	97% 343/354	97% 343/354	89% 315/354
	HHS	104% 688/662	107% 708/662	108% 715/662	109% 721/662	110% 728/662	110% 728/662
	MCH	97% 72/74	100% 74/74	104% 77/74	109% 81/74	93% 69/74	103% 76/74
Intensive Care Unit Occupancy	SJHH	82% 23/28	79% 22/28	71% 20/28	79% 22/28	68% 19/28	61% 17/28
	HHS	80% 69/86	74% 64/86	76% 65/86	84% 72/86	77% 66/86	84% 72/86
	MCH	100% 12/12	117% 14/12	50% 6/12	67% 8/12	75% 9/12	67% 8/12

Key Messages:

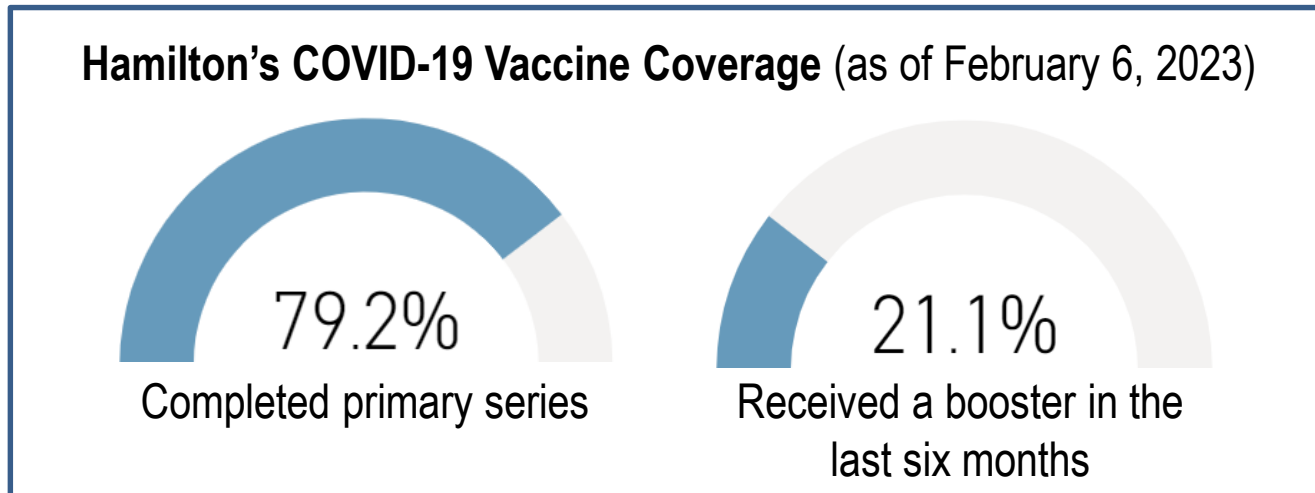
- Patient volumes/acuity and staffing challenges continue to create capacity pressures in areas of Hamilton's hospitals.
- Acute care occupancy has been near or above 100%, with SJHH seeing some decreases since January 2023. Intensive care unit capacity has improved overall.

Note: SJHH: St. Joseph's Healthcare Hamilton, HHS: Hamilton Health Sciences, MCH: McMaster Children's Hospital

Vaccine Program Update – Data

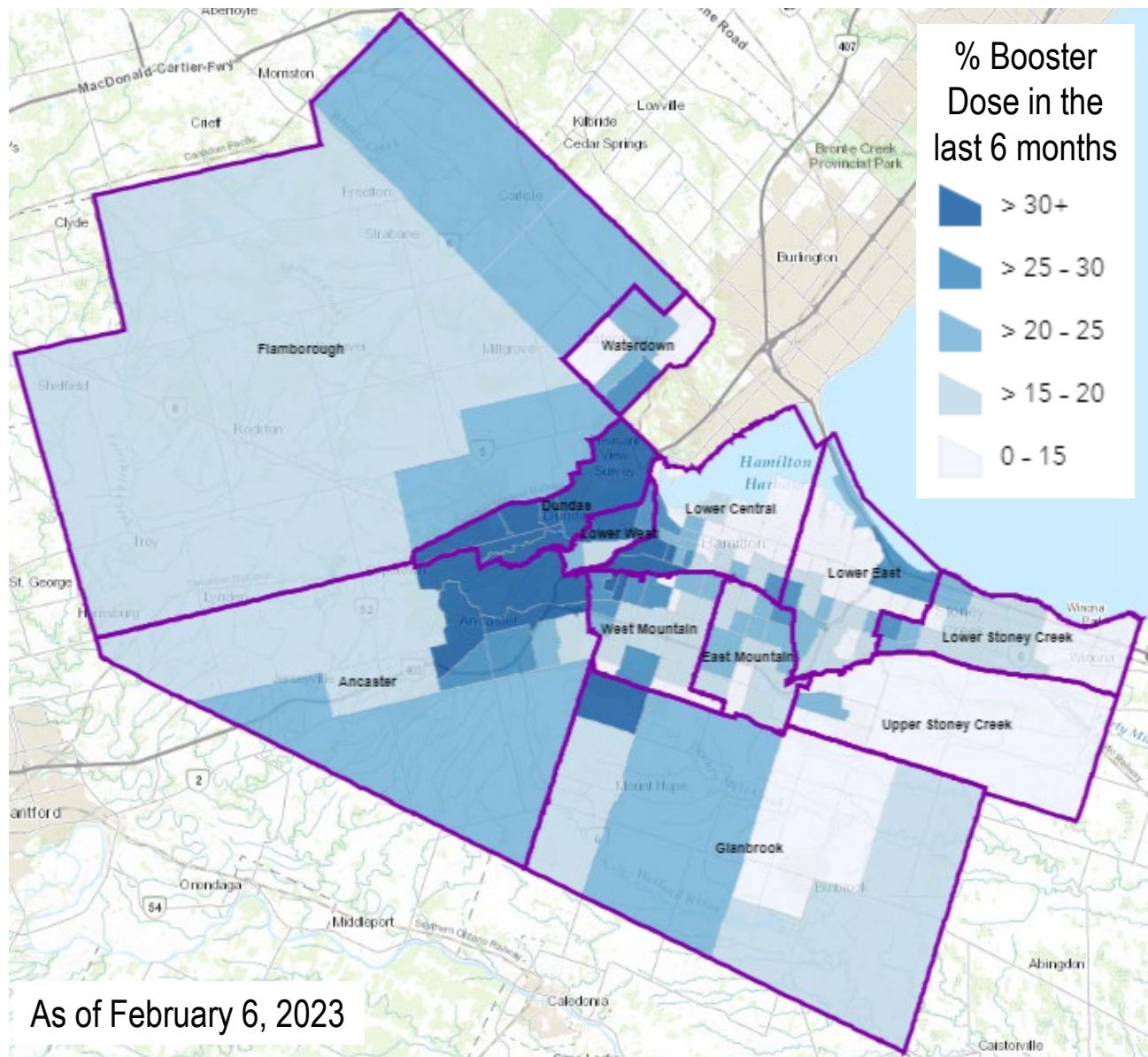
COVID-19 Vaccine Administered in Hamilton

- Administration has slowed in recent months, with approximately **1,200** doses administered in a recent week (January 31, 2023 to February 6, 2023):
 - Most doses continue to be bivalent booster doses (**90%**)
 - Majority administered in pharmacy (**56%**)



Note: Population aged 6+ months eligible for primary series, 5+ years for a booster

COVID-19 Vaccine Coverage by Geography



Vaccine Program Update - Operations

- Two mobile clinics continue to focus on Forward Sortation Areas (FSAs) at highest risk due to lower vaccine coverage, higher concentration of racialized population and high material deprivation
- Ceasing influenza vaccine administration at COVID-19 vaccine clinics February 17, 2022
- Continue:
 - Promotion of COVID-19 and Flu vaccine access via pharmacy and primary care sources
 - Vaccine Ambassador work to promote COVID-19 vaccine and promotion of COVID-19 catch-up of routine vaccinations in high school settings

Key Messages

- Hamiltonians are recommended to take a multilayered approach to prevent spread and reduce serious health consequences this respiratory virus season:
 - Stay up-to-date with your vaccinations including COVID-19 & flu
 - Strongly recommend wearing a mask when in crowded indoor settings and/or when unable to physically distance
 - Screen for respiratory symptoms daily, practice good hand and respiratory hygiene, and stay home when you are ill
 - Speak to your healthcare provider, know in advance if you're eligible for treatment for COVID-19, flu and Respiratory Syncytial Virus (RSV) and where to access
 - Visit www.Hamilton.ca/ProtectYourself for more information



Hamilton

QUESTIONS?



Hamilton

INFORMATION REPORT

TO:	Mayor and Members Board of Health
COMMITTEE DATE:	February 13, 2023
SUBJECT/REPORT NO:	Consumption and Treatment Services Site Application Process (BOH23007) (City Wide)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	Melissa Biksa (905) 546-2424 Ext. 6709
SUBMITTED BY:	Julie Prieto Director, Epidemiology and Wellness Division Public Health Services
SIGNATURE:	

COUNCIL DIRECTION

Not Applicable.

INFORMATION

This information report provides an overview of supervised consumption sites, the application process and the current status of supervised consumption sites within Hamilton.

Supervised Consumption Sites

Supervised Consumption Sites provide a place for people to use substances while in the presence of trained staff. Using substances in a supervised setting reduces the risk of overdose and death from substance use and reduces the spread of blood-borne infections as individuals are provided with new harm reduction supplies each time. In addition to providing a space to use substances, supervised consumption sites offer other wrap-around services, such as connections to health and social services. Evidence has demonstrated that supervised consumption sites are an effective and important intervention to address the harms associated with the current drug poisoning crisis to prevent overdose and death and link people to vital health and social services.

OUR Vision: To be the best place to raise a child and age successfully.

OUR Mission: To provide high quality cost conscious public services that contribute to a healthy, safe and prosperous community, in a sustainable manner.

OUR Culture: Collective Ownership, Steadfast Integrity, Courageous Change, Sensational Service, Engaged Empowered Employees.

Locally, supervised consumption sites were studied by Hamilton Public Health Services in 2017.¹ The recommendations from the report stated that Hamilton would benefit from one or more supervised consumption sites. Since the study was completed, the harms associated with the drug poisoning crisis have continued to significantly worsen. From January to October 2022, there were 139 confirmed or probable opioid-related deaths in Hamilton². Hamilton's opioid-related yearly death rate has consistently been higher than the provincial rate since opioid crisis began to exponentially increase in 2016. Most recently, rates in Hamilton were 45% higher than in Ontario in 2021,³ but have ranged from 110% higher in 2018 to 30% higher in 2020. Males, aged 25-44 years old, continue to be predominately impacted, and the gap is widening. For example, in 2021 men aged 25-44 years old accounted for 46% of the overdoses compared to 24% in 2012.⁴

Supervised consumption sites permit use of substances via injection, snorting, or orally. Amongst people who use drugs, there has recently been a shift in substance use, with more individuals choosing to inhale substances. Inhalation of substances in a supervised consumption space has not been permitted historically, however, this practice is being explored further due to the change in substance use. The first supervised consumption site for inhalation opened in Toronto at Casey House on November 16, 2022. For any site to allow consumption of substance within their facility they require an exemption to Section 56.1 of the *Controlled Drugs and Substances Act* from Health Canada.

Supervised Consumption Services in Ontario

For organizations wishing to open a supervised consumption site, there are three different streams available currently:

1. Consumption and Treatment Service Sites (CTS)

A CTS site is a provincially-approved supervised consumption site.

Organizations who pursue this option require approval from both the Ontario Ministry of Health and Health Canada. This model was introduced in 2018 and is meant to provide integrated, wrap-around services to primary care, treatment and other health and social services. To operate a site under this

¹ Hamilton Public Health Services (2017). Hamilton Supervised Injection Site: Needs Assessment and Feasibility Study. Retrieved from: <https://pub-hamilton.escribemeetings.com/filestream.ashx?DocumentId=138141>

² Office of the Chief Coroner of Ontario, received January 20, 2023.

³ Office of the Chief Coroner of Ontario, extracted from the Public Health Ontario Interactive Opioid Tool, January 24, 2023. Retrieved from: <https://www.publichealthontario.ca/en/data-and-analysis/substance-use/interactive-opioid-tool#/maps>

⁴ Ambulatory Visits, Ministry of Health, IntelliHealth Ontario, extracted January 2023

model a consumption space must have a defined pathway to addictions treatment services, offer harm reduction services and remove inappropriately discarded harm reduction supplies surrounding the CTS area.⁵ A CTS application is assessed based upon five criteria:

- a) **Local conditions:**
Applicant to demonstrate need for consumption services based upon local health data;
- b) **Capacity to provide treatment and consumption services:**
Applicant to demonstrate the ability to provide the full range of required wrap-around services;
- c) **Proximity:**
Applicant to address the proximity of the proposed site to other supervised consumption services, and to services such as child care centres, parks and schools. If proposed site is within close proximity (100-200m), the applicant must specify how the community concerns will be addressed through consultation and ongoing community engagement;
- d) **Community support and ongoing community engagement:**
Applicant to engage community to inform on CTS, potential impacts to people who use drugs and community and how any concerns will be mitigated; and,
- e) **Accessibility:**
All sites must be compliant with Accessibility for Ontarians with Disabilities Act (AODA), and must be easily accessible by public transit, and services must be offered in a way that is culturally, demographically and gender appropriate.

As part of the application through the community support section, applicants must obtain support and endorsement from local municipal council.⁶

⁵ Ministry of Health (2023). Consumption and Treatment Services application.

Retrieved from:

https://health.gov.on.ca/en/pro/programs/opioids/docs/CTS_application_guide_en.pdf

⁶ Ministry of Health (2023): Consumption and Treatment Services Application.

Retrieved from:

https://health.gov.on.ca/en/pro/programs/opioids/docs/CTS_application_guide_en.pdf

If approved, CTS sites receive both capital and operational funding from the province. The province currently has a cap of a maximum of 21 CTS sites in operation within Ontario. There are 17 approved sites currently operating in Ontario. Locations include Toronto, Ottawa, Hamilton, Peterborough, St. Catherine's, Thunder Bay, Guelph, London, Kingston, and Kitchener.

Hamilton has one approved CTS site, which is operated by Hamilton Urban Core Community Health Services. It is temporarily located at 70 James St. South, and will be re-located to 430 Cannon St. East upon completion of their new building.

2. Supervised Consumption Sites

An organization can also open a supervised consumption site with only Health Canada approval, if they do not require operating or capital funding.

Organizations can apply to Health Canada to receive an exemption to section 56.1 of the *Controlled Drugs and Substances Act*, which is required to operate a supervised consumption site in Canada. The federal application requires evidence of community consultation, how the applicant plans to address any concerns raised by the community and a letter of opinion from the provincial or territorial health minister.

3. Urgent Public Health Needs Sites

The newest stream available to organizations are Urgent Public Health Needs Sites. These sites are similar to Supervised Consumption Sites, but are set up in an expedited manner on a temporary basis in order to respond to urgent needs in a community. Each province and territory in Canada have been issued a 56.1 class exemption from the *Controlled Drugs and Substance Act* in relation to urgent public health needs and it is the provincial Minister of Health's discretion if they wish to implement the class exemption or not. Currently, Ontario does not have a class exemption in place, and is not overseeing the operation of any Urgent Public Health Needs Sites in Ontario. Therefore, any local organization interested in opening an Urgent Public Health Needs Site must apply directly to Health Canada.⁷

Hamilton has one Urgent Public Health Needs Site, currently operated by the Young Women's Christian Association (YWCA) at Carol Anne's Place.

⁷ Health Canada (2022): Supervised consumption explained: types of sites and services. Retrieved January 25 2023 from: Supervised consumption explained: types of sites and services - Canada.ca

Supervised Consumption Services in Ontario

As noted above, there is currently two approved supervised consumption spaces in Hamilton. As the drug poisoning crisis continues to worsen, there is continued need for additional supervised consumption spaces within the community. The AIDS Network (TAN) is currently applying for a second CTS site in Hamilton at 746 Barton St. East. In 2021 the Board of Health, via a motion, supported The AIDS Network to open a CTS site in Ward 3.⁸ The Ministry of Health has advised that the strongest form of support a CTS applicant can provide is a local municipal council resolution that is address specific. Additional letters of support from individual councillors are also welcomed. Given the existing motion is not address specific, the Ministry has encouraged The AIDS Network as the applicant to obtain municipal council support with the full address of the proposed CTS. As part of this CTS application, The AIDS Network will be required to submit an application to Health Canada to receive CTS approval from the province, and the Ministry has outlined other outstanding requirements to the applicant for their application. When considering providing municipal support for a CTS site, council should consider the five requirements for a CTS application as part of their decision-making.

In closing, supervised consumption is a key intervention to provide safe options for those who use substances. As overdoses and deaths continue to increase in Hamilton, additional supervised consumption spaces, Consumption and Treatment Service Sites and Urgent Public Health Needs Sites are needed to provide a safe place to consume substances. However, supervised consumption is just one intervention to reduce harms for people who use drugs. A comprehensive approach supported by funding and action at all levels of government is required to address the significant harms associated with the drug poisoning crisis.

APPENDICES AND SCHEDULES ATTACHED

Not Applicable.

⁸ City of Hamilton (2021). Board of Health Minutes 21-010. Retrieved January 27 2023 from: <https://pub-hamilton.escribemeetings.com/FileStream.ashx?DocumentId=299170>



Hamilton

INFORMATION REPORT

TO:	Mayor and Members Board of Health
COMMITTEE DATE:	February 13, 2023
SUBJECT/REPORT NO:	Opioid Emergency Response (BOH23008) (City Wide) (Outstanding Business List Item)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	Robin Dozet (905) 546-2424 Ext. 3726 Kris Nagel (905) 546-2424 Ext. 7102
SUBMITTED BY:	Julie Prieto Director, Epidemiology and Wellness Division Public Health Services
SIGNATURE:	

COUNCIL DIRECTION

This report is in response to the following direction from Council on January 25, 2023:

- i) That the Medical Officer of Health or designate be directed to investigate the thresholds of opioid deaths and overdoses that would enable the declaration of a state of emergency and report back to the Board of Health; and,
- ii) That staff be directed to include in their report the response required to address such an emergency; and available sources of funding to enable an effective response by the City of Hamilton.

INFORMATION

Hamilton, like the rest of the province, continues to experience a public health crisis associated with the harms from opioids. Between 2016 and 2021 Hamilton experienced a 245% increase in opioid-related overdoses and a 229% increase in opioid-related deaths. From January to October 2022, there were 139 confirmed or probable opioid-related deaths in Hamilton.¹ Hamilton’s opioid death rate has been consistently higher than the provincial rate.²

¹ Office of the Chief Coroner of Ontario received January 20, 2023.

² Office of the Chief Coroner of Ontario, extracted from the Public Health Ontario Interactive Opioid Tool, January 24, 2023. Retrieved from:

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As this crisis continues to prevail, additional strategies to address the harms from opioids have been considered, including formal declaration of an opioid emergency. This report provides information on the process for declaring an emergency in Ontario, as well as an overview of mental health and addictions interventions to address the public health crisis associated with the harms from opioids in Hamilton.

Declaring an Emergency in Ontario

In November of 2019, Council declared an opioid crisis in the City of Hamilton. This local declaration raised awareness of the increase in overdoses in Hamilton and requested action from the Provincial and Federal governments. The declaration did not constitute an official emergency declaration, as legislated in Ontario through the *Emergency Management and Civil Protection Act, R.S.O 1990, c. E.9* (EMCPA). EMCPA defines an emergency as “a situation or an impending situation that constitutes a danger of major proportions that could result in serious harm to persons or substantial damage to property and that is caused by the forces of nature, a disease or other health risk, an accident or an act whether intentional or otherwise.” The intent of a declaration under the EMCPA is to respond to an acute emergency requiring a coordinated response that exceeds current capacities, and not necessarily for responding to systemic health issues.

While Hamilton would benefit from additional funds to further respond to the opioid crisis, an official declaration would not lead to the provision of funds. In Ontario, financial assistance for emergencies to cover extraordinary costs after a disaster is administered through the Municipal Disaster Recovery Assistance (MDRA) program. The funding is conditional on municipal costs totalling at least three per cent of the municipality’s tax levy. The eligibility language in the program is very specific to natural disasters that are “caused by forces of nature. Examples of natural events that have the potential to cause disasters include but are not limited to floods, tornados, earthquakes, landslides and wildfires affecting populated areas.” As such, the current opioid crisis would not be eligible under the MDRA.

Currently there are some funding sources available for organizations to access to implement interventions to address the opioid crisis. This includes Health Canada’s Substance Use and Addictions Program (SUAP), where funding is available to government agencies and community-led and not-for-profit organizations in Canada for a wide range of initiatives aimed at addressing problematic substance use prevention, harm reduction and treatment initiatives for various psychoactive substances, including opioids. Since program inception in 2016, SUAP has issued three national calls for proposals in 2017, 2019, and 2021.

<https://www.publichealthontario.ca/en/data-and-analysis/substance-use/interactive-opioid-tool#/maps>

The Province of Ontario provides funding for consumption and treatment services sites (CTS) in Ontario. They have also provided investments in mental health and opioid treatment, with recent announcements in treatment funding in 2022.³

Additionally, some agencies rely heavily on private donations to charitable organizations to fund their mental health and addiction initiatives. Examples of such programs include a new safer inhalation room at Prairie Harm Reduction's safe consumption site in Saskatoon which operates entirely on donations and revenue generated from selling of merchandise.

Thresholds for Action

In emergency management, thresholds for an elevated response can be quantitative, but are often situational and based on contextual factors and the capacities of responding agencies. Opioid-related escalation thresholds were exceeded before 2019, prompting the local crisis declaration. Since that time, extensive work across Hamilton has been done to minimize impacts of opioids and is detailed in subsequent sections of this report. Currently, thresholds are in place as part of the opioid early warning system maintained by Public Health Services to monitor local activity and issue alerts to the community. The system provides a weekly report to community partners about paramedic response activity, flags suspected elevated overdose periods, and includes qualitative information collected from partners based on their experiences in the community. In addition to the early warning system, Public Health Services collaborates with Hamilton Paramedic Services, Hamilton Health Sciences, St. Joseph's Healthcare Hamilton and community partners to provide timely opioid-related surveillance information to the public online via the Hamilton Opioid Information System (HOIS). The system provides data related to paramedic calls for opioid overdoses, naloxone distribution, hospital visits for opioid overdoses, emergency department visits for drug use and suspected overdoses, and mortality data.

Opioid Crisis Response in Hamilton

As communicated at the December 2022 (BOH22018) and January 2023 Board of Health (BOH23002) meetings, Public Health Services is focused on upstream population health, working within an integrated system of health and social services to collectively address complex health issues alongside community partners. Given the substantial public health burden, Public Health Services and the broader community of health and social service providers have a shared responsibility to respond to the opioid crisis and to reduce harms to people who use drugs.

As such, the Hamilton community has been actively responding to the opioid crisis with innovative and evidence-informed interventions since the crisis rapidly began to grow in

³ Ministry of Health. (2023). Ontario launches new addiction recovery fund. Retrieved: <https://news.ontario.ca/en/release/1001596/ontario-launches-new-addictions-recovery-fund>

2016. A 2017, an Opioid Response Summit that was convened by the Mayor to address concerns regarding increases in overdose deaths led to the creation of an opioid response plan and the establishment of the Hamilton Drug Strategy (HDS). Physicians and hospital partners continue to provide access to treatment services and have established a Rapid Access Addiction Medicine (RAAM) Clinic. Safe consumption sites have been established at Hamilton Urban Core Community Health Centre and Carole Anne's Place, with plans for another community site under way. Keeping Six - a grassroots organization - provides advocacy, support and an organized voice for people with living/lived experience. Through its Harm Reduction Committee, the Greater Hamilton Health Network is focused on expansion of supervised consumption and safe supply programs. There are also four active SUAP projects in Hamilton, including by the Canadian Mental Health Association (CMHA), Hamilton Branch's Reducing Harms of Substance Use and Advancing Recovery through Peer Support program; Grenfell Ministries' Community Outreach Action Collaborative Hamilton and National Overdose Response Service programs; and, the AIDS Network's Support and Safer Supply program. Finally, as outlined at the January 2023 Board of Health (BOH23002) report, mental health and addictions continues to be a departmental priority for Public Health Services, with focused attention in 2023 on: trauma and violence-informed care, municipal policies to address substance use, community health promotion, and harm reduction.

These interventions, combined with the efforts of many other health and social service agencies not listed above, continue to be essential in enhancing the quality of life and reducing harms for people who use drugs in Hamilton. However, the opioid crisis is a complex issue that has been exacerbated by the COVID-19 pandemic, an increasingly toxic and unregulated drug supply and inadequate policies that fail to recognize drug use as a health issue. Addressing the opioid crisis requires a comprehensive and coordinated public health approach across multiple agencies and all levels of government and must include solutions that focus on the determinants of health, public health and the human rights of people who use drugs.⁴ While this coordinated approach continues to be advocated to provincial and federal governments, there is a need for a more coordinated response to enhance local efforts and strengthen the local opioid response.

Therefore, Public Health Services has proposed a renewed local opioid response plan with leadership from health and social service agencies to coordinate, develop and implement a comprehensive and integrated plan. The Hamilton Drug Strategy has

⁴ Health Canada Expert Task Force on Substance use. (2021). Report #2, Recommendations on the Federal Government's Drug Policy as Articulated in a Draft Canadian Drugs and Substances Strategy (CDSS). Retrieved February 2 from: <https://www.canada.ca/en/health-canada/corporate/about-health-canada/public-engagement/external-advisory-bodies/expert-task-force-substance-use/reports/report-2-2021.html>

SUBJECT: Opioid Emergency Response (BOH23008) (City Wide) - Page 5 of 5

approved this as a priority area for action in 2023, and will initiate the renewal of the plan in March 2023. This action-oriented plan will be developed over a series of facilitated sessions and will be presented at the June 2023 Board of Health meeting. As the Hamilton Drug Strategy secretariat, Public Health Services will assist with planning and monitoring of the plan.

APPENDICES AND SCHEDULES ATTACHED

Not Applicable.



CITY OF HAMILTON
PUBLIC HEALTH SERVICES
Epidemiology and Wellness Division

TO:	Mayor and Members Board of Health
COMMITTEE DATE:	February 13, 2023
SUBJECT/REPORT NO:	Substance Use and Addiction Program Funding – Harm Reduction Outreach Project 2022-2025 (BOH23006) (City Wide)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	Susan Boyd (905) 546-2424 Ext. 2888
SUBMITTED BY:	Julie Prieto Director, Epidemiology and Wellness Division Public Health Services
SIGNATURE:	

RECOMMENDATION

That the Board of Health authorize and direct the Medical Officer of Health to:

- (i) Receive, utilize and report on funding from Health Canada’s Substance Use and Addictions Program to fund a collaborative Harm Reduction Outreach Project between Public Health Services’ Mental Health and Street Outreach Program and The AIDS Network;
- (ii) Enter into an agreement between the City of Hamilton, Public Health Services, and Health Canada to receive the funding for the Harm Reduction Outreach Project, satisfactory in form to the City Solicitor; and,
- (iii) Enter into a collaborative agreement with The AIDS Network to provide Harm Reduction Outreach staff to implement services in the Harm Reduction Outreach Project, satisfactory in form to the City Solicitor.

EXECUTIVE SUMMARY

Public Health Services’ Mental Health and Street Outreach Program provides outreach services to individuals experiencing homelessness, and individuals often also experience addiction and/or mental health issues. The team receives requests to provide assertive outreach to areas in the community where individuals using substances are staying or spending time. Assertive outreach involves outreach staff approaching individuals on the street with the aim of engaging with individuals to offer

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SUBJECT: Substance Use and Addiction Program Funding – Harm Reduction Outreach Project 2022-2025 (BOH23006) (City Wide) - Page 2 of 5

instrumental supports such as hygiene supplies, heat and cold supplies, harm reduction supplies, and connections to other services as needed.

To effectively meet the above needs it was identified that additional staffing positions were required. A proposal was submitted in 2021 to Health Canada for a Harm Reduction Outreach Project. The initial proposal in 2021 was not approved, however an opportunity to reapply became available in September 2022. In December 2022 notification from Health Canada was received that the project was successful for full funding until March 31, 2025.

The project will involve two new full-time Harm Reduction Outreach Worker roles and one new part-time Peer Outreach Worker role to work with the Mental Health and Street Outreach Program providing specific harm reduction outreach services to individuals who use drugs and are experiencing economic insecurity, issues related to housing/homelessness, and lack of connection to health and social services.

This report is to seek approval to receive the funds and enter into the appropriate agreements to be able to move forward with implementing the Harm Reduction Outreach Project.

Alternatives for Consideration – Not Applicable

FINANCIAL – STAFFING – LEGAL IMPLICATIONS

Financial: The Health Canada Substance Use and Addiction Program funding will flow to the City of Hamilton Public Health Services and fully cover the project costs. The funding is for three years, with a pro-rated first year 2022-2023, and will end March 31, 2025. Public Health Services will utilize the funding to reimburse salary and benefits of The AIDS Network staff to provide the services within the project.

Staffing: 2.0 FTE Harm Reduction Outreach Staff and one part-time Peer Outreach Staff will join the Mental Health and Street Outreach Program to provide specific harm reduction outreach services. The staffing will be provided by The AIDS Network.

Legal: A contribution agreement will need to be signed between the City of Hamilton, Public Health Services, and Health Canada to receive the funds, announce the project, and report on outcomes for the project. A collaborative agreement will be negotiated between Public Health Services and The AIDS Network for staffing services.

HISTORICAL BACKGROUND

Public Health Services' Mental Health and Street Outreach Program has seen an increase in individuals being referred who have substance use concerns and are not engaging with site based services which is leading to an increased need to bring services to where individuals are in the community.

Individuals within the City of Hamilton continue to be significantly impacted by the ongoing opioid crisis compounded by a high concentration of urban poverty and local health inequities. Currently many individuals using drugs are experiencing economic insecurity, issues related to housing/homelessness, and lack of connection to health and social services.

The Mental Health and Street Outreach Program has been working to increase the capacity of harm reduction services. An Alcohol, Drug & Gambling Services social work staff provides addiction consultation and the Mental Health and Street Outreach Program Outreach staff have been joining the VAN program, with the Public Health Mental Health and Harm Reduction program, for one shift a week. These have been helpful however cannot meet the needs of individuals being referred and the need for consistent outreach services.

A call for proposals from Health Canada's Substance Use and Addiction Program came in 2021 and appeared to align with the priorities of the funding and the needs of the population serviced by the Mental Health and Street Outreach Program. The AIDS Network was approached due to their experience in providing harm reduction services and peer work to be a partner in the proposal. The initial proposal was not approved, however, with an opportunity in September 2022 to resubmit the proposal the Harm Reduction Outreach Project was approved by Health Canada.

In collaboration with The AIDS Network the Substance Use and Addiction Project will add two Harm Reduction Outreach Workers and one Peer Support Worker to meet the increasing need for services. Harm reduction outreach services, focusing on needs related to substance related harms, will include: connecting with clients; provision of safe supplies; providing information on how to access safe supplies and Consumption Treatment Services in the community; providing information on safer use; and, providing practical support, supportive counselling, education, crisis management, and referrals to other services. The project will also conduct assertive outreach at various locations in the City of Hamilton in a partner model to improve capacity building.

POLICY IMPLICATIONS AND LEGISLATED REQUIREMENTS

Not Applicable.

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RELEVANT CONSULTATION

In developing the proposal, The AIDS Network was consulted as a project partner. Finance and Administration reviewed the budget submitted in the proposal.

ANALYSIS AND RATIONALE FOR RECOMMENDATION

The Mental Health Outreach Program has a longstanding history of providing specialized services to individuals experiencing homelessness, income insecurity and who also experience issues with substance use and mental health. The City of Hamilton continues to be challenged by the ongoing opioid crisis compounded by a high concentration of urban poverty and local health inequities.

This Health Canada Substance Use and Addiction Program project would offer a new opportunity to reach individuals through a mobile service that would specifically offer harm reduction outreach services. Outreach has been identified as a promising evidence-based strategy to engage, collaboratively build motivation, retain people in treatment ^{1,2} and increase engagement with social services.³

The AIDS Network has experience in providing harm reduction services and has been a longstanding partner with Public Health Services and the Mental Health and Harm Reduction Program. This new partnership with Mental Health and Street Outreach Program will lead to increased capacity in the area of harm reduction, build on existing services and will take a person directed, harm reduction approach with individuals at the centre of their care.

ALTERNATIVES FOR CONSIDERATION

Not Applicable.

ALIGNMENT TO THE 2016 – 2025 STRATEGIC PLAN

Healthy and Safe Communities

Hamilton is a safe and supportive City where people are active, healthy, and have a high quality of life.

¹ Langabeer J et al, Outreach to people who survive opioid overdose: Linkage and retention in treatment, Journal of Substance Abuse Treatment Volume 111 2020.

² Christy K. et al, A community outreach intervention to link individuals with opioid use disorders to medication-assisted treatment, Journal of Substance Abuse Treatment Volume 108 2020.

³ Scott W. et al, Post opioid overdose outreach by public health and public safety agencies: Exploration of emerging programs in Massachusetts International Journal of Drug Policy Volume 54 2018.

APPENDICES AND SCHEDULES ATTACHED

Not Applicable.

CITY OF HAMILTON

MOTION

Board of Health: February 13, 2023

MOVED BY COUNCILLOR A. Wilson

SECONDED BY COUNCILLOR N. Nann

Advancing a Whole-Community Harm Reduction Framework

WHEREAS, [The geographic analysis of opioid-related deaths across Ontario](#) shows that larger urban centres, including Hamilton, exhibited the largest increase in both rates and in the absolute number of cases of opioid-related deaths during the pandemic;

WHEREAS, [Between 2005 and 2021, Hamilton had a higher rate of opioid-related deaths than the provincial average;](#)

WHEREAS, [Opioid-related deaths continue to rise year-after-year in Hamilton.](#) In 2019, 106 Hamilton deaths are probable or confirmed to be opioid-related. In 2020, those numbers increased to 128 and in 2021, those numbers increased to 170;

WHEREAS, [From June 2021 to May 2022, 29 deaths in the Hamilton homeless population were reported.](#) 16 of those deaths were reported to be overdose-related and 30% died while accessing shelter;

WHEREAS, There is a need for sustained funding to maintain harm reduction services including safer use spaces;

WHEREAS, Adequately funded harm reduction services would create cost-savings to other municipal and frontline services;

WHEREAS, The YWCA Hamilton has been operating a safer use space since late April 2022 to present. As of January 19, 2023, the program has served 176 unique guests and successfully reversed 34 drug poisonings. There have been zero calls made to police and one call made to EMS that did not require transfer to hospital;

WHEREAS, The meaningful engagement and involvement of people with lived and living experience of drug use and homelessness is vital;

WHEREAS, The City of Hamilton has a responsibility to implement policies and programs designed to urgently address the increase in opioid-related mortality, including providing access to evidence-based harm reduction services across the City, including in the houseless serving sector; and,

THEREFORE, BE IT RESOLVED:

- (a) That City staff be directed to track and document all deaths related to toxic drugs and report back annually to the Board of Health in the fourth quarter of every calendar year, beginning in 2023; and
- (b) That City staff be directed to:
 - i) Convene with local stakeholders, including people with lived and living experience, health, and drug policy experts, to develop an evidence-based harm reduction action plan for the purpose of addressing high rates of opioid-related deaths with a completion and report back to the Board of Health on June 12, 2023; and
 - ii) That these consultations and action plan specifically consider how to implement safer use spaces and other evidence-based harm reduction strategies both in the City and in the Houseless serving sector.