



CITY OF HAMILTON
Hamilton Public Health Services
Clinical & Preventive Services Division

TO:	Mayor and Members Board of Health
COMMITTEE DATE:	October 17, 2016
SUBJECT/REPORT NO:	Collaborative Agreement with The AIDS Network (BOH16048) (City Wide)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	Linda Blake-Evans (905) 546-2424, Ext. 3286
SUBMITTED BY:	Glenda McArthur Director, Clinical & Preventive Services Public Health Services Department
SIGNATURE:	

RECOMMENDATION

- (a) That the collaborative agreement with The AIDS Network to provide harm reduction worker services for the Van mobile needle syringe distribution and Community Points Needle Retrieval program be renewed for the term of November 1, 2016 to December 31, 2021 to be funded within the existing Public Health Services cost shared operating budget;
- (b) That the collaborative agreement with The AIDS Network to provide injection drug use outreach worker services be renewed for the term of November 1, 2016 to December 31, 2021 to be funded within the existing Public Health Services operating budget (100% provincial);
- (c) That the Medical Officer of Health or delegate be authorized to execute an agreement between the City and The AIDS Network, in a form satisfactory to the City Solicitor, to implement the above recommendations.

EXECUTIVE SUMMARY

The Ontario Public Health Standards (2016) require that priority populations have access to harm reduction services to reduce the spread of sexually transmitted infections (e.g., chlamydia, gonorrhea, syphilis) and blood-borne infections (hepatitis B, hepatitis C, human immunodeficiency virus [HIV]). Hamilton Public Health Services (PHS) and many other health units in Ontario partner with their local AIDS service organization to deliver harm reduction services in their communities.

PHS has had a long standing collaborative agreement with The AIDS Network (TAN) for providing staffing and volunteers for the Van Needle Syringe Program (the Van) since the Van program started in 1992. The Van provides outreach and safe injection supplies to persons who use drugs Monday to Saturday, 8 pm to midnight. The Van is staffed by PHS public health nurses and TAN harm reduction workers and volunteers. TAN is a registered charitable organization that offers HIV prevention, support and education. TAN's mandate for HIV prevention and education makes TAN an excellent community partner with PHS for harm reduction program activities. The Van collaborative agreement also includes staffing to support the Community Points Needle Retrieval Program to clean up used needles in the community. The Van program funds 1.0 FTE harm reduction worker from a cost shared budget.

The second collaborative agreement with TAN provides a 1.0 FTE Injection Drug Use (IDU) Outreach Worker funded 100% by the AIDS Bureau, Ministry of Health and Long-term Care (MOHLTC). This IDU outreach worker provides harm reduction education and supplies, practical assistance (housing, medical appointments, bus tickets), referrals and outreach.

This report recommends that The AIDS Network collaborative agreements continue to provide harm reduction staffing for PHS programs in keeping with the Ontario Public Health Standards for harm reduction and AIDS Bureau IDU Outreach Program Guidelines.

Alternatives for Consideration – See Page 5

FINANCIAL – STAFFING – LEGAL IMPLICATIONS (for recommendation(s) only)

Financial: The current budget of \$86,114 for the Van Harm Reduction Worker provides the funds for 1.0 FTE harm reduction worker, relief staff, operational supplies. The budget is reviewed yearly by program manager with TAN for any changes in employee and operating costs. Any changes to the financial compensation are negotiated between the program manager and TAN and contingent on Ministry approval.

The current budget of \$65,847 for the IDU Outreach Worker provides the funds for 1.0 FTE harm reduction worker and operating supplies. This is a 100% provincially funded budget through the AIDS Bureau (MOHLTC). The budget is reviewed yearly by program

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manager with TAN for any changes in employee and operating costs. Any changes to the financial compensation are negotiated between the program manager and TAN and contingent on Ministry approval.

Staffing: The current budget for the Van Harm Reduction Worker funds 1.0 FTE harm reduction worker and relief staff. The current budget for the IDU Outreach Worker funds 1.0 FTE harm reduction worker.

Legal: The City's Legal Services Division has reviewed and no issues identified.

HISTORICAL BACKGROUND (Chronology of events)

- BOH07019 Van Needle Exchange and Street Health Program Update, 2007
- BOH11031 Harm Reduction Program - Street Health & Van Needle Exchange Situational Assessment, 2011
- BOH12008 Supporting Neighbourhoods in Managing Community Consequences of Addictions, 2012
- BOH12008(a) Update to Supporting Neighbourhoods in Managing Community Consequences of Addictions, 2013

The Van Program

PHS has had a long standing collaborative relationship with TAN to support the Van program since 1992. This relationship assists both agencies to provide effective outreach and services to those who use injection drugs. The AIDS Bureau's program guidelines only speak to injection drug use, but if a client also smokes or uses drugs in other ways the worker can also offer assistance.

The Van operates Monday to Saturday, 8 pm to midnight and is staffed by TAN staff, Public Health Nurses and volunteers. TAN has a robust and structured volunteer program which helps support the Van passenger role so that the staff member is not alone. The Van is the most popular request to TAN's volunteer program according to their executive director. These volunteers have been community members, persons with experience/lived with drug use and university students. Some volunteers have gone on to become physicians, nurses and social workers, and have taken valuable learning and knowledge from their work with the Van. A small portion of the budget supports volunteer training.

Community Points Needle Retrieval Program

As per the June 2012 Board of Health report (BOH12008), a new "Community Points" needle pick up program was developed in partnership with The AIDS Network. Since early 2013, the Community Points program has been developed and has responded to needle complaints on private property. Working within current operational constraints, response time is scheduled, Monday to Friday from 9 am to 11 am. In addition to

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responding to complaint calls, staff also check and pick up used needles from areas of the City known to have reports of discarded needles. A call out algorithm for the Customer Contact Centre has been developed so that members of the public may call 905-546-CITY (2489) to report a found needle and ask for assistance. The Contact Centre will assign the needle complaint to the appropriate department in the City depending on location (ie. roads, parks, private property). The Van collaborative agreement includes Community Points staffing for the harm reduction worker.

Injection Drug Use Outreach Program

The IDU Outreach Program is provincially funded by the AIDS Bureau, MOHLTC. In Ontario, the IDU Outreach Program consists of fifteen IDU outreach workers strategically placed throughout the province, whose work with people who inject drugs and community partners would complement existing services. The locations of the fifteen outreach workers were determined as a result of 'hot spots' that were identified through epidemiologic research about the HIV epidemic among people who inject drugs in Ontario. In approximately 1997, Hamilton was designated to receive funding for an IDU Outreach Worker through this program. The long-term goal of the IDU Outreach Program is to reduce the transmission of HIV and other blood-borne pathogens among people who use injection drugs. In the short-term, the activities of the IDU Outreach Program lead to the following outcomes in people who use injection drugs:

- Increased knowledge and awareness of harm reduction practices to decrease the risk of transmission and acquisition of HIV and other blood-borne pathogens; and
- Increased access to community services.

The IDU outreach worker helps those who use injection drugs with practical assistance (ie. housing, income, referrals) and harm reduction education. The IDU worker position was previously staffed through a long-term collaboration with Wesley Urban Ministries. When the position became vacant in 2015, PHS program manager reviewed the needs of the position and recruited the new IDU outreach worker from TAN as the work complemented the existing Van and harm reduction work well. The IDU outreach worker also provides staffing on the Van in addition to work with individual clients.

POLICY IMPLICATIONS AND LEGISLATED REQUIREMENTS

The Ontario Public Health Standards (2016) require that priority populations have access to harm reduction services to reduce the transmission of sexually transmitted infections and blood-borne infections.

Effective public health programs and services consider the impact of the determinants of health on the achievement of intended health outcomes. Effective public health programs and services take into account communities' needs, which are influenced by the determinants of health. As well, an understanding of local public health capacity and the resources required, including collaboration with partners to achieve outcomes,

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is essential for effective management of programs and services. Further information can be found at the below website:

http://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/docs/ophs_2008.pdf

RELEVANT CONSULTATION

Tim McClelland, Executive Director of The AIDS Network supports these collaborative agreements.

ANALYSIS AND RATIONALE FOR RECOMMENDATION

(Include Performance Measurement/Benchmarking Data if applicable)

The AIDS Bureau recommends outreach and community development as an effective strategy to provide harm reduction services. PHS has had a long standing collaborative relationship with TAN since 1992. This relationship assists both agencies to provide effective outreach and services to those who use injection drugs. By establishing relationships with other service providers, the program increases access to services for people who use injection drugs, and also increases opportunities for a coordinated approach to harm reduction work within the community.

ALTERNATIVES FOR CONSIDERATION

(Include Financial, Staffing, Legal and Policy Implications and Pros and Cons for each alternative)

Council could decide not to approve this report.

Financial: Funding would continue from the province and net levy,

Staffing: PHS would lose the ability to contract staff from TAN. PHS would need to hire internal staff to complete this work. The harm reduction outreach worker role does not require a Public Health Nurse's skills so a new job classification would need to be developed.

Legal: No agreement required.

Pros: All work would be managed within PHS program and an agreement with TAN would not be necessary.

Cons: This would reduce PHS' and TAN's ability to provide effective and collaborative outreach for harm reduction services. TAN is more accessible to those who use injection drugs.

ALIGNMENT TO THE 2016 – 2025 STRATEGIC PLAN

Strategic Priority #1

A Prosperous & Healthy Community

WE enhance our image, economy and well-being by demonstrating that Hamilton is a great place to live, work, play and learn.

Strategic Objective

- 1.5 Support the development and implementation of neighbourhood and City wide strategies that will improve the health and well-being of residents.
- 1.6 Enhance Overall Sustainability (financial, economic, social and environmental).

Strategic Priority #2

Valued & Sustainable Services

WE deliver high quality services that meet citizen needs and expectations, in a cost effective and responsible manner.

Strategic Objective

- 2.1 Implement processes to improve services, leverage technology and validate cost effectiveness and efficiencies across the Corporation.
- 2.3 Enhance customer service satisfaction.

Strategic Priority #3

Leadership & Governance

WE work together to ensure we are a government that is respectful towards each other and that the community has confidence and trust in.

Strategic Objective

- 3.4 Enhance opportunities for administrative and operational efficiencies.

APPENDICES AND SCHEDULES ATTACHED

Not Applicable

REFERENCES

Injection Drug Use Outreach Program Guidelines 2013, AIDS Bureau, Ministry of Health and Long-Term Care