



CITY OF HAMILTON
PUBLIC HEALTH SERVICES
Epidemiology and Wellness Division

TO:	Mayor and Members Public Health Committee
COMMITTEE DATE:	June 12, 2023
SUBJECT/REPORT NO:	Hamilton Opioid Action Plan (BOH23021) (City Wide)
WARD(S) AFFECTED:	City Wide
PREPARED BY:	Melissa Biksa (905) 546-2424 Ext. 6709 Dr. Mark A. Cachia (905) 546-2424 Ext. 1391
SUBMITTED BY:	Dr. Elizabeth Richardson, MD, MHSc, FRCPC Medical Officer of Health Public Health Services
SIGNATURE:	

RECOMMENDATION

- (a) That the Hamilton Opioid Action Plan, attached as Appendix “A” to Report BOH23021, be approved;
- (b) That the Public Health Services budgeted complement be increased by 1.0 FTE Health Strategy Specialist, with funding for the 2023 costs of \$39,048 to come first from any Public Health Services levy funded surplus, then from the Public Health Services Reserve (112219), and that the 2024 operating cost of \$116,760 be included in the 2024 Tax Operating Budget;
- (c) That a one-year drug checking and surveillance system pilot be implemented at a cost of \$118,000 to be funded in 2023, first from any Public Health Services levy funded surplus, then from Public Health Services Reserve (112219), and that the 2024 operating costs of \$60,000 be included in the 2024 Tax Operating Budget.
- (d) That an 18 month pilot be implemented to provide a supervised consumption site in a men’s shelter by Housing Services through a Call for Applicants, for a total cost of \$667,000 and that the cost of \$120,000 for 2023 be funded from first from any Healthy and Safe Communities departmental levy funded surplus, then from Public Health Services Reserve (112219), and that the costs of \$547,000 be included in the 2024 and 2025 Tax Operating Budget.
- (e) That Public Health Services conduct an evaluation of the pilot men’s shelter supervised consumption site and report back in Q4 2024.

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- (f) That the General Manager, Healthy and Safe Communities Department or delegate be authorized and directed, on behalf of the City of Hamilton, to enter into, execute and administer all agreements and documents necessary to implement the Call for Applicants for a shelter based supervised consumption space, including but not limited to spending caps, benefit frequency limits, or other controls necessary to ensure costs are contained within the approved budget.

EXECUTIVE SUMMARY

Problematic opioid use and an increasingly toxic drug supply continues to be an area of public health concern in Hamilton. Local data continues to highlight an increasing trend of opioid-attributed overdoses in the community. In the first four months of 2023, Hamilton received 336 opioid-related paramedic calls, which was higher than the same four-month period in both 2021 and 2022. In addition, from January to April 2023, there were 62 suspected opioid-related deaths. A total of 42 of these suspect deaths occurred in private residences.

As Hamilton continues to address this public health concern, several local actions have been initiated by the municipality. On February 22, 2023 Council directed staff to engage with a diverse group of community partners to create an evidence-based harm reduction plan including addressing how safer use spaces and other evidence-based harm reduction strategies can be actioned in Hamilton and the homeless serving sector. This Council direction aligned with the February 2023 Hamilton Drug Strategy (HDS) prioritization of the update of an opioid specific action plan as part of the Hamilton Drug Strategy renewal.

In addition to the Council direction in February 2023, the City of Hamilton has continued to advocate for a comprehensive approach to address the harms associated with problematic opioid use. On April 12, 2023 Council directed the Mayor to declare an emergency in the areas of opioids, mental health, and homelessness in Hamilton. This declaration continues to underscore and advocate the need for action at all levels of government.

In March 2023, Public Health Services contracted MASS LBP to support the development of the Hamilton Opioid Action Plan. As part of this process, the Hamilton Drug Strategy steering committee met on March 28, 2023 to review and provide input into the Hamilton Opioid Action Plan development plan. In April 2023, MASS LBP facilitated one-to-one, and group conversations with community members and members of the Hamilton Drug Strategy steering committee. The Hamilton Drug Strategy steering committee then met twice in May to review and finalize recommendations for the plan. The Hamilton Opioid Action Plan in its entirety is attached as Appendix "A" to Report BOH23021.

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The recommendations put forward in the Hamilton Opioid Action Plan present a community-driven approach to respond to the toxic drug supply for the municipality. The goals established for the Hamilton Opioid Action Plan are to:

1. Reduce the number of deaths associated with opioid use;
2. Reduce the harms associated with opioid use; and,
3. Increase the access to a spectrum of treatment options.

The Hamilton Opioid Action Plan aims to achieve these actions through:

1. Providing a mix of short and long-term actions;
2. Ensuring actions are tangible and achievable;
3. Improving data collection and evaluation; and,
4. Enhancing collaboration.

Throughout the consultation period participants clearly articulated the need for the Hamilton Opioid Action Plan to be bold and to present recommendations for immediate action. The plan presents 13 recommendations that are evidence-informed, feasible, and will help to achieve the established goals in Hamilton. As the Hamilton Opioid Action Plan is initiated, three recommendations have come forward with requests for funding to the City. This includes project support for the implementation of the plan, scaling up provision of safer consumption spaces in a shelter space through a proposed call for applications, and funding to support the pilot of a drug checking service in Hamilton.

Alternatives for Consideration – See Page 12

FINANCIAL – STAFFING – LEGAL IMPLICATIONS

Financial: Recommendation (b) is requesting approval for a 1.0 FTE Health Strategy Specialist to support the planning and implementation of the Hamilton Opioid Action Plan, at a cost of \$39,048 in 2023, and for the cost of \$116,760 to be included in the 2024 Tax Operation Budget. In 2023, the position would be funded first from any Public Health Services levy funded surplus, then from Public Health Services reserve (112219).

Recommendation (c) is requesting the authorization of \$118,000 on a one-time basis to implement a drug checking service and surveillance system in Hamilton, to be funded in 2023 first from the Public Health Services levy surplus, if any, then from Public Health Services Reserve (112219). These expenditures include \$100,000 in one-time capital expenses to purchase necessary equipment to create a drug checking surveillance system, as well as \$18,000 in operational expenditures. Public Health Services will explore the possibility of private donation to support this initiative to

decrease the one time financial requirements. In 2024, \$60,000 in operational expenditures will be added to the 2024 Tax Operating Budget.

Recommendation (d) requests the authorization of \$667,000 for Housing Services to initiate a call for applications to agencies to operate a men's shelter-based supervised consumption site for 18 months. For this recommendation \$120,000 would be requested in 2023 to be funded first from any Healthy and Safe Communities levy surplus, then from Public Health Services Reserve (112219), and that the costs of \$547,000 be included in the 2024 and 2025 Tax Operating Budget.

Staffing: To support the planning and coordination of the Hamilton Opioid Action Plan, a 1.0 FTE Health Strategy Specialist is required.

Legal: Not Applicable.

HISTORICAL BACKGROUND

Historical reports that outline the Board of Health's approach to a community-response to opioids include:

- Report BOH16035 (September 19, 2016) – “A Comprehensive Public Health Approach to Drug and Substance Misuse”;
- Report BOH17006 (March 20, 2017) – “Opioid Response Summit”;
- Report BOH17013 (April 20, 2017) – “Hamilton Opioid Response Provincial and Federal Funding Request”;
- Report BOH17004(a) (December 4, 2017) – “Hamilton Supervised Injection Site Needs Assessment & Feasibility Study”;
- Report BOH18015 (December 10, 2018) – “Hamilton Drug Strategy”;
- Report BOH19017 (March 18, 2019) – “Consumption and Treatment Services in Hamilton”;
- Report BOH20006 (February 21, 2020) – “Hamilton Drug Strategy Year End Report”;
- Report BOH21002 (February 19, 2021) – “Hamilton Drug Strategy 2020 Year End Report”;
- Report BOH21009 (October 18, 2021) – “Comprehensive Opioid Response”;

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- Report BOH22016 (August 10, 2022) – “Decriminalization of Personal Possession of Illicit Drugs”;
- Report BOH23002 (January 16, 2023) – “Board of Health Orientation Part 2: Population Health Assessment and Public Health Priorities”;
- Report BOH23007 (February 13, 2023) – “Consumption and Treatment Services Site Application”; and,
- Report BOH23008 (February 13, 2023) – “Opioid Emergency Response”.

POLICY IMPLICATIONS AND LEGISLATED REQUIREMENTS

The Hamilton Opioid Action Plan aligns with mandated work for Public Health Services as outlined in the Ontario Public Health Standards’ “Substance Use and Injury Prevention” program standard. The goal of the standard is to reduce the burden of preventable injury and substance use, and requires health units to develop and implement public health interventions that reduce the burden of substance use through:

- Assessment of population health data;
- Collaboration with community partners, policy-makers, and priority populations; and,
- Persons with lived experienced and the public.¹

RELEVANT CONSULTATION

MASS LBP was contracted to lead the development of the Hamilton Opioid Action Plan with the Hamilton Drug Strategy Steering Committee. All Hamilton Drug Strategy steering committee members were offered an interview and encouraged to recommend other community members, persons with lived experiences, equity-deserving groups, and health and social services leaders to consult. In total 33 interviews and focus groups were completed during the four-week consultation.

The Hamilton Drug Strategy steering committee met on May 1, 2023 to review initial themes and emerging recommendations. The draft recommendations were circulated to the Hamilton Drug Strategy steering committee and individuals who participated in interviews. Steering committee members were also invited to share with other community members for feedback. Thirty-seven individuals responded to the survey.

¹ Ministry of Health. Ontario Public Health Standards: Requirements for Programs, Services and Accountability. Toronto, ON: Queen’s Printer for Ontario; 2021 Jun [cited 2023 May 18]. Available from: https://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/docs/protocols_guidelines/Ontario_Public_Health_Standards_2021.pdf

The recommendations were finalized by the steering committee at a meeting on May 18, 2023. The final report was completed by MASS LBP and sent to the Hamilton Drug Strategy steering committee members for final comment and endorsement on May 26, 2023.

ANALYSIS AND RATIONALE FOR RECOMMENDATION

Problematic opioid use and an increasingly toxic drug supply continues to be an area of significant public health concern in Hamilton. To date in 2023, reports from the Public Health Services weekly surveillance system continue to highlight that there is a highly toxic and unpredictable drug supply in Hamilton that leads to unusual or irregular drug poisoning presentations. Recently, there has been an increased presence of toxic substances such as benzodiazepines and xylazine, which are not responsive to naloxone.

Opioid-Related Paramedic Calls

Opioid-related paramedic calls are defined as calls for which the responding paramedic notes a suspected opioid poisoning. From January to April 2023, there have been 336 opioid-related paramedic calls. This represents more than 19 calls per week or 2.75 calls per day. The number of opioid-related calls in this period was higher than for the same period in 2022 and 2021 (n=239 and n=245), and higher than the previous four-month period of September to December 2022 (n=300). In March 2023, there were 96 opioid-related calls, the highest number recorded since September 2021 (n=103).

While opioid-related calls have been attributed to all wards across Hamilton, most calls have been concentrated in Wards 2 and 3. From January to April 2023, over half of all opioid-related calls came from Ward 2 (56%, n=189) and 20% (n=68) from Ward 3. The Wards with the next highest percentages of total opioid-related calls were Ward 5 (4%, n=15) and Ward 4 (4%, n=13).

Suspect Drug-Related Deaths

Suspect drug-related deaths are deaths where the investigating coroner's preliminary investigation indicates potential drug involvement.² Suspect drug-related deaths in Hamilton are defined by the location of incident, and do not necessarily describe all deaths among Hamilton residents. Of note, these data are preliminary and provided to Public Health Services from the Office of the Chief Coroner of Ontario. Data are subject to change and counts for the most recent two to three months are often underestimates.

From January to April 2023, the preliminary data identified that 62 suspect drug-related deaths occurred in Hamilton. This is an average of one death every two days, or 3.6 deaths per week. The number of suspect drug-related deaths presented is lower than in the previous four-month period of September to December 2022 (n=80). This is also

² Office of the Chief Coroner of Ontario. Death Investigation System [Data file]. Toronto, ON; 2023 May 11.

lower than the January to April period in 2022 (n=78) and 2021 (n=68). At the provincial level, counts of suspect drug-related deaths in Ontario from January to April have also decreased for consecutive years (n=1,086 in 2023; n=1,205 in 2022; n=1,346 in 2021).

From a geographic perspective, the highest percentage of suspect drug-related deaths in Hamilton has consistently occurred in the forward sortation area (FSA) L8L. The boundaries of this FSA predominantly overlap with Ward 3, and to a lesser extent with Ward 2. More than one in five (23%, n=14) incidents of suspect drug-related deaths from January to April 2023 in Hamilton occurred in L8L. The FSA with the second-highest percentage of the total suspect drug-related deaths in the same period is L8H. Just over one in ten (11%, n=7) suspect drug-related deaths occurred in L8H, an FSA which predominantly overlaps with Ward 4 and to a lesser extent with Ward 5.

Notably, data reports that most suspect drug-related deaths occur in private residences. From January to April 2023, 68% (n=42) of suspect drug-related deaths occurred in private residences, followed by 10% (n=6) in congregate living spaces and 10% (n=6) outdoors.

Further demographic data is available in Appendix “B” to Report BOH23021. The information above provides the Public Health Committee with a quarterly update on opioid-related paramedic calls and opioid-related deaths. The next quarterly update to Public Health Committee will occur in September 2023. Data will continue to guide the actions of the Hamilton Opioid Action Plan and underscores the need for continued action to address the harms associated with opioid use in Hamilton.

Hamilton Opioid Action Plan

To address the on-going harms associated with opioids, the Hamilton Drug Strategy initiated an update of the Hamilton Opioid Action Plan as part of its strategy renewal in 2023. The Hamilton Drug Strategy is a community collaborative of health and social service leaders, persons with lived experience and members of the community that was established following Mayor Eisenberger’s Opioid Summit in 2017. The goal of the Hamilton Drug Strategy is to ensure that residents of Hamilton are free of harm due to substance use and can enjoy the best quality of life. Public Health Services is a partner in this community driven strategy and provides administrative and community engagement support through a Senior Project Manager.

The administrative coordination of the Hamilton Drug Strategy was placed on hold during the COVID-19 pandemic due to the required resources to support the public health response. The Hamilton Drug Strategy steering committee met twice during the pandemic, and the harm reduction working group continued to meet quarterly as a community of practice. In late 2022, the Hamilton Drug Strategy initiated a renewal of the strategy. In February 2023, the Hamilton Drug Strategy approved the update of Hamilton Opioid Action Plan as one of its strategic priorities for 2023 - 2024.

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The Hamilton Opioid Action Plan presents immediate, medium, and long-term recommendations to coordinate local action. Through consultation with the community, MASS LBP sought to understand the impact of the drug toxicity crisis and gather input on how to respond. To assist the Hamilton Drug Strategy steering committee members understand the current evidence-base, the Hamilton Drug Strategy Secretariat completed an environmental scan of current drug strategies across the province, and a review of evidence-based strategies to address the harms associated with opioid use. Hamilton Drug Strategy Steering committee members were invited to share information to contribute to the evidence base and were asked to consider the information when completing their interview.

The Hamilton Opioid Action Plan, as appended in Appendix “A” to Report BOH23021, presents 13 actions broken into short, medium, and long-term recommendations with proposed leads. These include:

- **Immediate (0-6 months)**
 1. Establish an Opioid Action Table (Proposed Lead: Public Health Services);
 2. Scale up Supervised Consumption Sites across Hamilton (Proposed Lead: Public Health Services);
 3. Develop “Safer Use” policies in hospitals and care settings (Proposed Leads: St. Joseph’s Healthcare Hamilton and Hamilton Health Sciences);
 4. Increase the availability of drug-checking services and resources (Proposed Lead: Public Health Services); and,
 5. Engage and support primary care providers (Proposed Lead: Greater Hamilton Health Network).

- **Medium-Term (6 months)**
 6. Clarify service pathways and options for individuals who use substances, care providers, and first responders (Proposed Lead: Opioid Action Table);
 7. Develop and implement new youth prevention programs (Proposed Leads: City of Hamilton, Community Safety & Well-Being Plan, and Hamilton Youth Strategy);
 8. Expand supports available to families (Proposed Lead: Opioid Action Table); and,
 9. Increase access and support to shelters and drop-ins (Proposed Leads: City of Hamilton – Housing Division, Shelter Partners).

- **Long-Term (12 months)**
 10. Increase the number of physicians able to prescribe opioid agonist therapy (OAT) and safer supply programs (Proposed Leads: Greater Hamilton Health Network, and the Primary Care Sector);

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11. Expand the availability of stabilization services (Proposed Leads: St. Joseph's Healthcare Hamilton and Hamilton Health Sciences);
12. Increase access to rapid detox and residential treatment programs (Proposed Leads: Wayside House of Hamilton, Womankind Addiction Service, and St. Joseph's Healthcare Hamilton); and,
13. Develop additional Supervised Consumption Sites throughout Hamilton (Proposed Lead: Opioid Action Table).

To action three of the immediate initiatives outlined above, investment is recommended at the municipal level.

Opioid Action Table

The Hamilton Opioid Action Plan recommends the formation of an Opioid Action Table to drive the implementation of the plan. This action table will include persons with lived experience, health and social service leaders, and other key partners who will be accountable to the Hamilton Drug Strategy Steering Committee. The action table will strike task-oriented working groups to bring together the necessary representatives to implement the respective action item. These working groups will be responsible for establishing goals, monitoring progress, and reporting back to the action table. A key conversation emerging from the Hamilton Opioid Action Plan development was the desire to work collaboratively in a more cohesive and supportive manner. This includes reducing competition for funding and holding the Opioid Action Table accountable for the actions endorsed in this plan. Program support, via a Health Strategy Specialist, is recommended to support the planning, coordination and implementation of the plan.

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 and reduces the spread of blood-borne infections through the provision of sterile harm reduction supplies.

Expansion of supervised consumption sites in Hamilton will increase the availability of safe options for substance use in the community. Expansion of supervised consumption sites in a variety of settings including shelter-based, hospitals and mobile settings was a clear recommendation that emerged from Hamilton Opioid Action Plan consultations, and aligns with the direction from Council in February 2023 to "consider how to implement safer use spaces and other evidence-based harm reduction strategies both in the City and in the Houseless serving sector".

As outlined in Report BOH23007, there are currently three different streams available to operate supervised consumption services in Ontario. Two of the streams, Urgent Public Health Needs sites and Supervised Consumption Sites require only Health Canada approval but do not provide any operational funding for the applicant. The third stream is a Consumption and Treatment Services site (CTS). CTS sites are provincially approved and provide operational and capital funding to the applicant. There is

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currently one Urgent Public Health Needs site in Hamilton; currently operated by the YWCA at Carol Anne's Place. In the first year of operation, this site has reported zero deaths.³ There is one additional supervised consumption space in Hamilton, a provincially funded CTS, which is operated by Hamilton Urban Core Community Health Centre.

To further expand safer consumption services in shelter-based settings, it is recommended that Housing Services initiate a Call for Applicants to provide an onsite safe consumption site located in a men's shelter. The requested funding of \$667,000 is an estimate for an 18-month pilot that would provide operational and one-time capital funding to implement a shelter-based service for an 18-month period. This pilot period would allow for the operational site to be set up, an evaluation to be completed, and a report back to the Public Health Committee on its outcomes. Public Health Services would support the successful applicant with an application to Health Canada for approval of an Urgent Public Health Needs site and program evaluation.

Provision of supervised consumption services at a men's shelter site will continue to support people who use substances, reduce harms associated from using in unsupervised settings and further work to connect individuals to services.

In addition to scaling up Urgent Public Health Needs sites within shelters, the Hamilton Opioid Action Plan outlines actions to increase supervised consumption sites both within local hospitals and the addition of a mobile site in Hamilton. To move forward with a mobile option, further planning and consultation will be led by the Opioid Action Table and any subsequent funding request will come forward as part of the 2024 municipal budget process. Hospital led sites will be coordinated by the hospital leads with report back to the Opioid Action Plan. An additional report back on a community evaluation for Supervised Consumption sites in Hamilton will be coming back to Public Health Committee in August 2023.

Drug-Checking

Drug-checking is an emerging harm reduction approach as the drug toxicity crisis worsens. Drug-checking allows for the analysis of the composition of a substance, indicating the presence of particular drugs (e.g. fentanyl or benzodiazepines), depending on the testing method.

A 2021 systematic review on the influence of drug checking on behavioural change found that drug-checking may influence both intended behaviour and, although less researched, enacted behaviour. Intended behaviour included using less, seeking more information about the substance, using with others, and doing a test shot. Using a drug-checking strip was facilitated by individuals having concerns about drug content and

³ Beattie S. Not 1 person has died at Hamilton YWCA's unique safer use drug space since it opened a year ago [Internet]. CBC; 2023 Apr 22 [cited 2023 May 18]. Available from: <https://www.cbc.ca/news/canada/hamilton/ywca-safer-use-drug-space-1.6818362>

associated risk of drug poisoning, drug market changes, perceived negative health consequences, central location of services, testing accuracy, and comprehensiveness of results. Reported barriers to using included a lack of concern over drug contents, high trust in sellers, inaccessible location of services, limitations with results, and legal risk of criminalization.⁴

Within Ontario, a drug-checking service has been offered in Toronto since October 2019. This drug-checking service uses laboratory-based testing methods, with a one to two business day turnaround time. The service provides detailed information on drug composition to service users and enables monitoring of substances circulating in the community and broad information sharing to help inform care for people who use substances, advocacy, policy, and research.⁵ Other jurisdictions, such as the Region of Waterloo utilize testing strips at their CTS site.⁶ Expansion of drug-checking services has also been implemented in British Columbia, and the British Columbia Centre on Substance Use has published implementation guidance to aid organizations in scaling up these initiatives in local communities.⁷

Expanding access to drug-checking services and supplies is recommended to support reducing the harms associated with unregulated substances to individual users and to generate local surveillance data to increase knowledge of the circulating drug supply in Hamilton. Ongoing evaluation of the drug checking service will provide real-time data to further understand the substances circulating in Hamilton and help enable proactive responses by communicating results to the broader community. Finally, offering drug-checking services will provide Hamilton the opportunity to contribute to the developing Canadian evidence-base as the systematic review notes, echoed by the corresponding Public Health Ontario synopsis,⁸ that most of the current studies originate from Europe in party settings.

⁴ Maghsoudi N, Tanguay J, Scarfone K, Rammohan I, Ziegler C, Werb D, Scheim AI. Drug checking services for people who use drugs: a systematic review. *Addiction*. 2022 Mar;117(3):532-544.

⁵ Toronto's Drug Checking Service. About [Internet]. Centre on Drug Policy Evaluation; [cited 2023 May 19]. Available from: <https://drugchecking.cdpe.org/about/>

⁶ Region of Waterloo. Consumption Treatment and Services – CTS Data Dashboard [Internet]. Kitchener, ON: Region of Waterloo; [cited 2023 May 19]. Available from: <https://www.regionofwaterloo.ca/en/health-and-wellness/consumption-and-treatment-services.aspx#CTS-Data-Dashboard>

⁷ British Columbia Centre on Substance Use. Drug Checking Implementation Guide: Lessons learned from a British Columbia drug checking project [Internet]. Vancouver, BC: British Columbia Centre on Substance Use; 2022 Jun [cited 2023 May 24]. Available from: https://drugcheckingbc.ca/wp-content/uploads/sites/2/2022/07/BCCSU_Implementation_Guide_2022.pdf

⁸ Ontario Agency for Health Protection and Promotion (Public Health Ontario). Review of “Drug checking services for people who use drugs: a systematic review.” Toronto, ON: Queen's Printer for Ontario; 2022 Jun [cited 2023 May 19]. Available from:

The projected cost to implement drug checking strips for individual use and to create a surveillance system in Hamilton for a one-year period is \$200,000 and cost sharing opportunities will be explored through private donation to reduce the cost to the levy and reserve. This amount will cover the costs of strips to be distributed to the individual user, and the cost of two point-of-care analysis systems to be located in the community. The point-of-care testing system would allow users to test their substance and enable broader information sharing to the community. Additional analysis through mass spectrometry, which can provide extremely detailed information as compared to testing strips or point-of-care devices, will continue to be investigated with local partners. Further planning and design of this initiative will be done in collaboration with people who use substances to ensure the pilot supports harm reduction practices and the needs of the community.

Investment in these initiatives will support the implementation of these initiatives in 2023. For the other two immediate actions, hospital and primary care-based interventions outlined above, each hospital will take a lead within their organization and report back on progress to the Opioid Action Table. The engagement and support of primary care providers is work currently underway through the Greater Hamilton Health Network.

Next Steps

Progress on the Hamilton Opioid Action Plan will be reported back to the Public Health Committee with established performance indicators and progress in Q1 2024. In addition, the Hamilton Drug Strategy will continue its renewal with the Hamilton Drug Strategy Steering Committee identifying priority areas of actions over the coming months to support the other four substances of concern (alcohol, cannabis, methamphetamines, and cocaine).

ALTERNATIVES FOR CONSIDERATION

If the Public Health Committee does not support Recommendation (b) for the funding a Health Strategy Specialist position, the implementation of the Hamilton Opioid Action Plan will be delayed due to a lack of resources to support planning and coordination of the initiatives, development and monitoring of indicators, and to maintain momentum. Current partners have identified dedicated resources as a key factor to move these initiatives forward.

If the Public Health Committee does not support Recommendations (c) and (d) for funding implementation of the two immediate priority areas of action; safer use spaces

https://www.publichealthontario.ca/-/media/Documents/nCoV/Research/2022/06/synopsis-review-drug-checking-services-people-systematic.pdf?sc_lang=en&rev=f101cadb52704c91bc0810cf98c692b7&hash=EB635089F085E834EDEC5BB13C5BBC77

and drug checking will be delayed, and external funding sought by the Opioid Action Table, from other provincial government or charitable sources.

ALIGNMENT TO THE 2016 – 2025 STRATEGIC PLAN

Community Engagement and Participation

Hamilton has an open, transparent and accessible approach to City government that engages with and empowers all citizens to be involved in their community

Healthy and Safe Communities

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

Our People and Performance

Hamiltonians have a high level of trust and confidence in their City government.

APPENDICES AND SCHEDULES ATTACHED

Appendix “A” to Report BOH23021	Hamilton Opioid Action Plan Report
Appendix “B” to Report BOH23021	Hamilton Quarterly Opioid-Related Impact Update