

COMMUNICATION UPDATE

| TO: | Mayor and Members Board of Health |
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| DATE: | June 28, 2023 |
| SUBJECT: | Local Guidance for Consumption and Treatment Services (CTS) Applicants (City Wide) |
| WARD(S) AFFECTED: | City Wide |
| SUBMITTED BY: | Dr. Elizabeth Richardson, MD, MHSc, FRCPC Medical Officer of Health Public Health Services |
| SIGNATURE: | Richardsn |

Hamilton Public Health Services is pleased to share a newly developed resource to provide local guidance for Consumption and Treatment Services (CTS) applicants in Hamilton. It will be available on the City of Hamilton CTS Webpage for any future applicant to access. This guide has been developed to be a resource for any organization in Hamilton pursuing funding for supervised consumption sites through the provincial CTS program.

The Ontario CTS program provides one-time capital and annual operational funding to approved organizations to operate supervised consumption sites. Successful applicants must meet the provincial criteria, including: local conditions, capacity to provide services, proximity to other services, community support and engagement, and accessibility. CTS applicants are required to engage in community consultation and receive endorsement from local city council as part of the application process.

The goals of this guide are to:

- Provide recommendations to applicants for completing a provincial CTS application; and,
- Provide templates to applicants for submission to the Board of Health when seeking municipal endorsement for the proposed CTS.

Through creation of templates for applicants, the guide will provide consistency to members of the Board of Health when making decisions on site endorsement. Along with the guide, Public Health Services will continue to support applicants through on-

SUBJECT: Local Guidance for Consumption and Treatment Services (CTS) Applicants (City Wide) - Page 2 of 2

going dialogue and consultation throughout the CTS application process and review their findings as preparation for seeking municipal endorsement.

A further update on a community evaluation framework for supervised consumption services will be provided to Public Health Committee in August 2023.

If you have any questions regarding this new resource, please contact Melissa Biksa, Manager, Mental Well-Being and Substance Use Program at (905) 546-2424 Ext. 6709 or melissa.biksa@hamilton.ca.

APPENDICES AND SCHEDULES ATTACHED

Appendix "A" to Board of Health Communication Update 2023-06-28 – Hamilton Public Health Services Guidance for Consumption and Treatment Services Applicants



Hamilton Public Health Services Local Guidance for Consumption and Treatment Services (CTS) Applicants

Last Updated: June 2023

Page 2 of 19

HPHS Guidance for Local CTS Applicants Updated: June 2023



Contents

| Purpose | 3 |
|---|--------|
| Additional Hamilton Public Health Services Considerations for Approaching Council | 4 |
| Suggested Hamilton Public Health Services Strategies for Robust Community Consultat | tion 6 |
| Required Community Consultation | 6 |
| Community Consultation Objectives | 7 |
| CTS Stakeholders | 7 |
| Hamilton Public Health Services Recommended Stages for CTS Community Consultations Engagement | |
| General Community Consultation / Engagement | 8 |
| Site-Specific Community Consultation | 12 |
| Ongoing Community Engagement | 13 |
| Appendix A: CTS Application Checklist | 14 |
| Appendix B: Community Engagement Summary | 16 |
| Appendix C: Suggested Resources | 19 |
| Understanding and Defining Types of Community Engagement | 19 |
| Engagement with People Who Use Drugs (PWUDs) | 19 |
| Media Engagement | 19 |

Page 3 of 19

HPHS Guidance for Local CTS Applicants Updated: June 2023



Purpose

This document provides an overview of the Ontario Consumption and Treatment Services (CTS) funding program operated by the Ministry of Health, and the Hamilton Public Health Services recommendations for completing a provincial CTS application and seeking municipal endorsement in Hamilton. The recommendations provided are based upon the CTS program requirements, generally accepted best practices amongst communities that have engaged in the CTS application process, previous council motions regarding the consideration of applications, and additional local context. Note, this document is intended to be supplementary and used in tandem with the provincial application guide. The application guide is subject to change. Please contact the Ministry of Health at addictionandsubstances@ontario.ca for the most up to date information.

When an organization is applying for provincial CTS, Hamilton Public Health Services should be engaged at the initiation and throughout the process to provide feedback and support. For any applicants seeking municipal endorsement from the Board of Health, Hamilton Public Health Services will be required to review the application in order to provide feedback and comment at the meeting. **Municipal endorsement does not guarantee approval of provincial CTS funding. The Ministry of Health is the decision-maker on the CTS funding application.** Successful applicants must meet the provincial criteria outlined in the application guide, including local conditions, capacity to provide services, proximity to other services, community support and engagement, and accessibility.

These requirements are for CTS sites only, and not for Urgent Public Health Needs Sites (UPHNS) or the federal Supervised Consumption Services (SCS) application processes. However, the best practices outlined below may be helpful for organizations applying to either of these programs. CTS applicants must also complete a <u>separate SCS application with Health Canada</u> for an exemption under section 56.1 of the *Controlled Drugs and Substances Act*. Note, a service provider may choose to apply for a federal exemption but are not required to apply for provincial CTS funding if they have other sources of funding.

Appendix A and B of this document should be completed by applicants and provided to the Hamilton Public Health Services as part of an informational package for the Board of Health when seeking municipal endorsement for the proposed CTS.



Additional Hamilton Public Health Services Considerations for Approaching Council

The following is a summary of additional Hamilton Public Health Services considerations to be provided prior to approaching Board of Health for CTS endorsement. Of note, the corresponding checklist in Appendix A should be completed in advance of requesting Board of Health endorsement for a proposed CTS site.

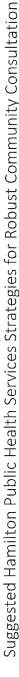
Table 1: Hamilton Public Health Services Considerations

For the most up to date provincial CTS program criteria, please refer to the CTS application guide.

| Application Item | Additional Hamilton Public Health Services Considerations |
|----------------------------------|--|
| (1) Local Conditions/ Need | Public Health Services Consultation: Collaborate with Hamilton Public Health Services for the provision of relevant local data in support the proposed CTS location (ex. ward/ neighborhood specific data). |
| (2.1) Capacity to Provide CTS | Wrap-Around Services: Demonstrate that the services that will be offered in conjunction with supervised consumption at the CTS site (e.g. housing support, counselling) will be provided utilizing best practice and local partnerships. Reference best practice model(s)/ tool(s) that will be used to inform service provision, referrals or service navigation. Examples: Drug Checking Implementation Guide (BC Centre on Substance Use) Best Practices across the Continuum of Care for the Treatment of Opioid Use Disorder (Canadian Centre on Substance Use and Addiction) Best Practice Recommendations for Canadian Harm Reduction Programs (CATIE) Best Practice Recommendations for Canadian is well-positioned to offer the proposed wrap-around services, or why/how a referral will be provided to a more appropriate service. |
| (2.2) Service Delivery Model | Service Users: Provide evidence of anticipated service users of the proposed CTS location (e.g. demographics). Evaluation: Provide an evaluation plan or framework, including confirmation of data sources/ means of data collection, along with any anticipated external evaluation support. Ensure that there is a plan for open data/ public sharing of evaluation results. Operating Model Consultations: Provide evidence of consultation with neighboring regions operating successful CTS services (ex. Kitchener, Niagara) to inform the service delivery model of the proposed CTS site. Responsible Person in Charge (RPIC) and Training: As indicated in the <u>Federal Application for Supervised Consumption</u> Services, provide information on the intended RPIC. If the RPIC is not a regulated health professional (ex. nurse, doctor, paramedic etc.), provide evidence for how that individual (and other staff) will be trained appropriately. |

| (3.1) Proximity to Similar Services | □ Proximit location g | Proximity Rationale: If the proposed site is within 600m distance from a related service, please provide rationale for the proposed location given this proximity. |
|--|---|--|
| (3.2) Proximity to Parks, Schools and Child Care Centres | Distance are identi Commun the site lo | Distance Measurements: Indicate how distance measurements between the CTS and other services/ organizations/ residences are identified (e.g. GIS, Google Maps). Community Consultation / Engagement Methodology: Indicate how residents and business owners within "close proximity" of the site location (e.g. 100-200 m) were consulted and engaged, and the method(s) used for engagement (as part of community consultation / engagement indicated in section 4, see below). |
| (4) Community Support and Ongoing Engagement | Commun distribute stakehold stakehold Partners! Ward Cod developin Commun Communit let submit let Communic concerns Communic concerns Mitigatin needle pi radius wh | Community Consultation / Engagement Methodology: Indicate all methods of community engagement used (ex. survey, flyers distributed, local meetings etc.) and the number of people/ stakeholders reached using each method (where possible). Indicate, by Ratcheholder group, (ex. business owners, potential CTS site users etc.) the number of stakeholders consulted / engage. Partnerships for Engagement Process: Identify how Hamilton Public Health Services and any additional stakeholders (ex. Local Ward Councillor) provided support or consultation for any process within the community engagement process, both when developing the methodology and conducting community engagement activities. Community Engagement Results: Summarize key results from all engagement activities for councilly partner consideration. Letters of Support: Summarize the number/ sources of letters of support received for the proposed CTS location. Prepare to submit letters of support or contact information to confirm letters (if needed), with consultation documents. Letters of Opposition: Summarize the number/ sources of letters of opposition received for the proposed CTS location. Prepare to submit letters of support or contact information to confirm letters (if needed), with consultation documents. Community Advisory Model: Demonstrate development of, or a proposed plan for, a CTS community advisory group and/or a concerns or operational considerations for the proposed CTS site. Mitigating Strategies: Provide a brief plan for additional CTS services or supports designed to address community energle pick-up programs. Provide plans relating to anticipated frequency of the service provided, staff providing the service, general radius where the service will be provided etc. |

HPHS Guidance for Local CTS Applicants Updated: June 2023



This section outlines Hamilton Public Health Services recommendations for completion of the community consultation portion of the CTS application. These strategies are aligned with guidance indicated in the CTS Application Guide and include examples of consultation activities completed by other communities in Ontario. Prior to seeking municipal endorsement of a proposed CTS site, these recommendations should be considered to inform the community consultation process. Please complete the template in Appendix B in order to provide an overview of completed consultation activities when preparing to seek municipal approval As this is a plan for community consultation for an application; applicants should also be aware that a plan for ongoing community engagement post-site implementation should also be completed.

Required Community Consultation

In alignment with the provincial Consumption and Treatment Services (CTS) program, the following are required for the community consultation:

Applicants must submit a consultation report that provides:

- Who was consulted;
- A summary of feedback from each stakeholder group;
 - Concerns raised by stakeholder groups, if any; and
- How concerns will be addressed (aka. mitigating strategies).

Applicants must obtain and submit local municipal council support (i.e. council resolution) endorsing the proposed CTS site.

Applicants should submit other evidence of support for the proposed CTS site. This can include, but is not limited to:

- Letters of support (with the proposed CTS site address) from partnering organizations, local businesses and/or other stakeholders; and
 - Board of health resolution.

Applicants must also submit a community engagement and liaison plan which outlines how the community will be engaged on an ongoing basis (ex. If the site is approved / once the site is opened). The plan may include:

- Follow-up(s) after initial consultations
 - Public education about CTS
- Engagement mechanisms to identify and address community concerns on an ongoing basis (ex. engagement post-site implementation to address new or emerging concerns)

HPHS Guidance for Local CTS Applicants Updated: June 2023

Community Consultation Objectives

Prior to the initiation of a community consultation process it is recommended that clear objectives are established. These objectives should be developed in collaboration with the co-applicant (if relevant) and reviewed by key stakeholders or decision makers in advance of consultation activities. Hamilton Public Health Services should be engaged when initiating the CTS application, for consultation when setting engagement objectives and ongoing support for the engagement process. It is recommended that the type or degree of community consultation used (ex. inform, consult, collaborate) is considered and clearly indicated within the objectives (see Appendix C for relevant guidelines).

Examples of CTS Community consultation Process objectives:

- To inform the local population of the proposed CTS application; including the planned community consultation process regarding site selection, timelines, and the decision-making framework.
 - To educate the community on the evidence surrounding supervised consumption and harm reduction, using plain language and best practices in public communications. 7
 - To consult local stakeholders regarding establishment and operation of the proposed CTS site. 3)
- To involve local stakeholders in decision making regarding aspects of the CTS site model and operations.

CTS Stakeholders

The following stakeholder groups should be considered for consultation (see the CTS Application Guide for the minimum required groups):

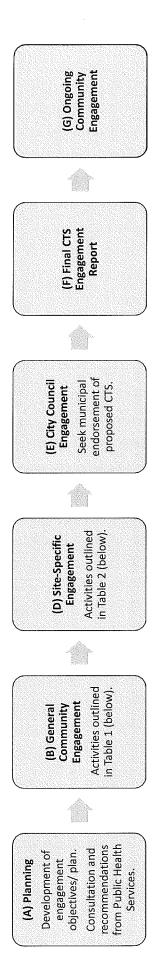
- People who use drugs (PWUDs);
- Local advocates for people who use drugs;
- Residents (those who live locally, neighborhood associations etc.);
- Local service providers (harm reduction service providers, ED/hospital services, emergency responders, library services, outreach services, shelter services, public health services, local drug strategy etc.);
- **Local Ward Councillor;**
- Public Health Committee and Board of Health;
- Students and representatives from post-secondary institutions (student unions, university administration, relevant departments etc.);
 - Local business owners (connect with local BIA or Chamber of Commerce);
 - Local media (newspapers, social media news outlets, TV news outlets); and
- Those within close proximity (ex. 200m) of the proposed CTS location (ex. residents, service providers, agencies, schools and/or businesses).

General community consultation / engagement should be made clearly distinct from engagement with any stakeholders located within proximity of the proposed CTS location(s). Therefore, there should be separate or specific consultation with parties near the proposed site location(s).

HPHS Guidance for Local CTS Applicants Updated: June 2023 Hamilton Public Health Services Recommended Stages for CTS Community Consultation / Engagement

Councillor (relevant to the proposed CTS location) is engaged at several stages of the CTS community engagement process. Ongoing consultation with Public Health Services will also allow for adjustments to be made to the community engagement process based on community feedback and emerging concerns. Note that The process indicated below provides a high-level overview of a robust community consultation / engagement. For transparency, it is recommended that the ward City there should be record/ documentation of all engagement activities that are conducted throughout this process.

The stages of engagement indicated below may change based on the status of the CTS location search (ex. if a site is already selected in advance of engagement) and the capacity of the applicant organization.



General Community Consultation / Engagement

General community consultation / engagement can include any local stakeholder groups that may or may not live or work within proximity (i.e. 200m) to the proposed



Table 2: General Community Engagement Activities

| Example(s) n/a | Windsor-Essex Community Opioid and Substance Strategy: CTS Webpage | Region of Waterloo (CTS Community Advisory Group) |
|---|--|--|
| Outputs • Final Community Consultation Report | Completed Webpage (with ongoing updates) Final Community Consultation Report | Meeting Minutes Final Community Consultation Report |
| Prior to community engagement, a CTS community engagement plan should be completed with feedback from Public Health Services on the proposed engagement process. Consultation with Public Health Services should be ongoing and the ward City Councillor should also be engaged early in the process. | The CTS webpage should include, at minimum: • Local data demonstrating community need for a CTS • A CTS description including plans for operation/ wraparound services • A breakdown of the CTS application and timeline • A clear avenue for feedback (ex. CTS email account) • Evidence (in plain-language) for safe-consumption • FAQs and responses • Links to reports including completed public consultations | An advisory group can be formed to provide insight on the CTS application, community engagement, operations, etc. The advisory should be formed with focus on engaging people who use drugs (See Appendix C), and other groups disproportionally impacted by the criminalization of people who use drugs (ex. local Indigenous communities, Black, African, Caribbean communities, 2SLGBTQ+ communities etc). |
| Target Audience City Councillor Public Health Services | • All stakeholders | People who use drugsService providersResidents |
| Objective Inform and Consult | Inform and Educate | Consult and Involve |
| Engagement Method Public Health Services and City Councillor Engagement* | Webpage | Community Advisory* |

Appendix "A" to Board of Health Communication Update 2023-06-28
Page 10 of 10

| Community Survey* | Consult | All stakeholders | A c disc | Survey Summary (Public Report) Final Community Consultation Report | Windsor-Essex Community Opioid and Substance Strategy: CTS Consultation Report Durham Region: Survey Report CTS Community |
|--|---------|----------------------|---|---|---|
| Media Event and/or Press Release | Inform | Local media | Engagement with local media should be considered at key stages of the CTS application process (ex. community survey launch). See <u>Appendix C</u> for guidance regarding media engagement. | Publicized Press Release or Event Final Community Consultation Report | Consultation Windsor-Essex Community Opioid and Substance Strategy: CTS Media Event |
| Survey or Focus Groups for PWUDs* | Consult | People who use drugs | A survey or focus group(s) for people who use drugs should be conducted mainly in-person, and should discern the following info, at minimum: • Whether there is an interest in utilizing a CTS • Perceived benefits of the proposed CTS • Questions/ concerns regarding the CTS • Suggested mitigating strategies to address concerns • Suggestions on services to be offered at the CTS site (ex. counselling, safer supply) • Preferences for safe and comfortable access of the CTS site (ex. location, hours) | Survey or Focus Group Summary (Public Report) Final Community Consultation Report | Peterborough Drug Strategy: CTS Community Engagement Survey Report |

HPHS Guidance for Local CTS Applicants Updated: June 2023

| Service Consult | Service | It is recommended that community services that interface | Final Community Peterborough Drug Strategy: |
|-----------------|-----------|--|---|
| Provider Key | providers | with people who use drugs in the community are engaged to | Consultation CTS Community Consultation |
| Informant | | assist with CTS planning. The following information may be | |
| Interviews | | collected: | |
| *(KIIS) | | Recommendations for CTS site operations | |
| | | Recommendations for CTS wrap-around services and/or | |
| | | service connections | |
| | | Perceived benefits of the proposed CTS | |
| | | Questions/ concerns regarding the CTS | |
| | | Suggested mitigating strategies to address concerns (ex. | |
| | | staffing) | |

*Note: Depending on the status of site selection, any of the indicated stages of community engagement can be used to help locate a feasible site. Stakeholders may be able to provide feedback on where the site would be best suited. Acquiring stakeholder support is typically strengthened by consulting stakeholders in the site selection process which also builds evidence for why a particular site was chosen.

Recommendations for Additional Engagement Methods: Requests for letters of support from stakeholders (site specific), a publicly accessible email contact (for general inquiries about the proposed CTS and feedback), a mailing list or newsletter (parties looking for ongoing CTS application updates can register).



Site-Specific Community Consultation

It is recommended that consultation regarding site location options focus on stakeholders located in close proximity to the proposed sites. The applicant should work with stakeholders to identify what is considered to be "close proximity". Consultation with the relevant ward City Councillor(s) and Neighborhood Association(s) can inform the catchment area for engagement of stakeholders. Please complete the template in Appendix C to provide an overview of consultation activities.

Table 3: Site-Specific Community Consultation Activities

| Engagement Method | Objective | Target Audience | Description | Example |
|---|-----------|--|--|---|
| Informational Resources | Inform | ResidentsBusinessOwnersOtherServices | Several methods should be used to inform stakeholders within proximity of the CTS site of the proposed location, including: • Informational flyers and posters (door-to-door delivery, posting in public areas) • Social media engagement, with support from relevant neighborhood associations/ ward Councillor • Updated resources (ex. webpage) with information on the proposed location It is recommended that any method used also provides stakeholders with a clear avenue to give site-specific feedback. | n n |
| Stakeholder Specific Focus Groups/ Townhalls | Consult | Residents Business Owners Schools Other Services | Several stakeholder focus groups or townhalls should be conducted to inform site-selection and obtain key information. Common questions/concerns about the proposed CTS site(s) Common questions/concerns about the proposed CTS site operations Common questions/concerns about the CTS site operations Perceived benefits of the proposed CTS location What mitigating strategies may help to address concerns How stakeholders in close-proximity to the site would prefer to receive CTS-related information These groups/events should be spaced-out and occur at different times of day to allow many people to participate. A low-barrier avenue for consultation (i.e. email) should be considered for residents unable to actively participate in a group or event. | or <u>Peterborough</u> <u>Drug</u> <u>Strategy:</u> n <u>Site-Specific</u> <u>Focus</u> <u>Groups</u> |

HPHS Guidance for Local CTS Applicants Updated: June 2023

| Board of Health Consult | Consult | • | Public | Members of Public Health Committee and Board of Health should • Meeting Minutes n/a | /a |
|-------------------------|---------|---|-----------|---|----|
| Presentation(s) | | | Health | be engaged following community engagement activities. Prior to | |
| | | | Committee | approaching the board, applicants should engage Public Health | |
| | | • | Board of | Services for consultation regarding the delegation process. | |
| | | | Health | | |
| | | | | Applicants should be prepared to provide Public Health | |
| | | | | Committee and Board of Health with the provincial CTS | |
| | | ~ | | application, engagement report(s), along with additional | |
| | | | | documentation indicated in Appendix A and Appendix B . | |
| | | | | | |
| | | | | At this point, the committee and Board should be given enough | |
| | | | | information on community perceptions of the CTS site to decide | |
| | | | | on whether to endorse the proposed location. | |

Ongoing Community Engagement

community will be engaged on an ongoing basis (ex. If approved / once the site is opened). The plan may include: follow-up(s) after initial consultations, public education about CTS, and engagement mechanisms to identify and address community concerns on an ongoing basis (ex. engagement post-site implementation to address new As previously indicated, CTS applicants must also submit a community engagement and liaison plan with the provincial CTS application, which outlines how the concerns).

The following strategies are recommended for ongoing community engagement:

- Webpage/ Informational Resources: ongoing updates and information sharing on the dedicated CTS webpage, through the applicant organization's social media, etc.
 - Email: a CTS specific email account for public inquiries regarding the CTS site, which is clearly listed on the CTS webpage and additional resources.
- Data/ Evaluation Sharing: public distribution/ record of key evaluation data related to the CTS site operation, shared with support of the City of Hamilton Public Health Services.
- Community Advisory: the CTS Community Advisory (See General Community Engagement) should continue operation post-site implementation and should be available to address ongoing community inquiries or concerns.
 - CTS Site Tours and Public Events



Appendix A: CTS Application Checklist

completed in the "Description" column. This checklist will be provided as part of an informational package for the Board of Health for consideration regarding CTS endorsement. Additional documents or reports (ex. completed CTS application) should be included to accompany this checklist and to provide more detail regarding Please provide an overview of completed CTS application activities using the checklist below. Please include additional detail on activities completed/ to be the application activities completed.

| Application Item | Checklist | Description |
|----------------------------------|--|-------------|
| (1) Local Conditions/ | Have you demonstrated local need for the proposed CTS based upon the CTS Application requirements/ additional considerations? Yes/ No/ In Progress | |
| Need | Have you obtained local data from Hamilton Public Health Services to support this process? Yes/ No/ In Progress | |
| (2.1) Capacity to Provide CTS | Have you demonstrated organizational/ local capacity for operation of the proposed CTS based upon the CTS Application requirements/ additional considerations? Yes/ No/ In Progress | |
| (2.2) Service Delivery Model | Have you outlined a clear service delivery model for the proposed CTS based upon the CTS Application requirements/ additional considerations? Yes/ No/ In Progress | |
| | Is there a completed evaluation plan or overview for the proposed CTS? Yes/ No/ In Progress | |
| (2.3) Site | Will the proposed CTS meet the following CTS site requirements: local/ bylaw accessibility standards, ministry design standards? Yes/ No | |
| Requirements | Is there a completed floorplan for the proposed CTS? Yes/ No | |

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| (3.1) Proximity to | Is the proposed site less than 600m from another CTS/ comparable service? Yes/ No |
| Similar Services | If yes, is there indicated rationale provided for this proximity? Yes/ No |
| | Are there any parks, schools, and/or childcare centres within close proximity (e.g. 100-200m) of the proposed CTS? Yes/ No |
| (3.2) Proximity to Parks, Schools and Child Care Centres | If Yes, have consultation plans been outlined with the services located in proximity to the proposed CTS? Yes/ No/ In Progress |
| | Has community/ stakeholder support to the proposed site location been documented? Yes/ No/ In Progress |
| | Has a CTS consultation report been completed based upon the CTS Application requirements/ additional considerations? Yes/ No/ In Progress |
| (4) Community Support and Ongoing Engagement | If Yes, have all required stakeholders according to the CTS Application Guide been consulted? Yes/ No |
| | Has Public Health Services been consulted regarding the community engagement process? Yes/ No |
| (4) Community Support and Ongoing Engagement (Continued) | Have plans for ongoing community engagement been outlined according to the CTS Application Guide? Yes/ No/ In Progress |
| (5) Accessibility | Will the site meet the following accessibility criteria: compliance with AODA, equity considerations, and strategic location (ex. near transit)? Yes/No |

HPHS Guidance for Local CTS Applicants Updated: June 2023

Appendix B: Community Engagement Summary

Please provide an overview of completed CTS community engagement activities using the prompts below. This summary will be provided as part of an informational pac inc.

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| backage for the Board of Health regarding the proposed CTS, prior to delegation. Additional documents or reports (ex. community consultation report) should be included to accompany this summary and to provide more detail regarding the engagement activities completed. | |
|---|--|
| 1. Please indicate the following: | |
| Name of CTS applicant organization: | |
| Name of partners for the proposed CTS (if applicable) and their roles: | |
| Planned date for local council delegation regarding the proposed CTS: | |
| | |

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- Please provide a summary of CTS community engagement activities that have been completed and include the following information:
 Which stakeholders have been engaged as part of the CTS application process (ex. residents in proximity to the site, people who use drugs, healthcare providers,
- The number of individuals that have been engaged within each CTS stakeholder group.
- The strategies/ methods that have been utilized for engagement with each stakeholder/ group (ex. interviews, focus groups, surveys, meetings).
- The date/ timeline when key engagement activities occurred. © ⊕ ⊕ ⊕
- The engagement objectives addressed through each engagement activity.

| ults of the CTS community co | qualitative findings (ex. survey results, focus group/ key informant interview findings or themes). Please include the following detail: |
|------------------------------|--|
|------------------------------|--|

- a) The date(s)/ timeframe of each engagement activity.
 b) The number of participants/ respondents and the relevant stakeholder(s) represented in the results.
 c) Consultation activities undertaken to support site selection
 d) Which results were specific to the proposed CTS site location (with address indicated).

4. Please indicate the key concerns relevant to the CTS location identified by stakeholders, and a summary of mitigating strategies to address each of the indicated concerns.

5. Please provide a summary of plans for ongoing community engagement (prior to and after implementation of the proposed CTS). Please be specific about the strategies that will be used to continuously collect feedback from key stakeholders beyond the engagement activities already completed.

Please list any additional documents or reports that will be submitted with this summary to provide detail around completed CTS engagement activities for Board of Health consideration. Ö,

Page 19 of 19

Hamilton

HPHS Guidance for Local CTS Applicants Updated: June 2023

Appendix C: Suggested Resources

The below resources may be of use throughout the CTS community engagement process.

Understanding and Defining Types of Community Engagement

• The Handbook on Citizen Engagement (from the Canadian Policy Research Networks) provides an overview of types of community engagement that can be applied and benefits for each.

Engagement with People Who Use Drugs (PWUDs)

- Guidelines for Partnering with People with Lived and Living Experience of Substance Use and Their Families and Friends (Canadian Centre on Substance Use and Addiction)
- Peer Engagement Principles and Best Practices (BC Centre for Disease Control)
- Hear Us, See Us, Respect Us: Respecting the Expertise of People Who Use Drugs (Canadian Association of People Who Use Drugs, Canadian Drug Policy Coalition)

Media Engagement

- Engaging with the Media (University of Waterloo)
- Sample Press Release (Oregon Association of Hospitals and Health Systems)