



City of Hamilton Report for Information

To: Chair and Members
Public Health Sub-Committee

Date: February 24, 2025

Report No: BOH25003

Subject/Title: Public Health Services Opioid Update – February 2025

Ward(s) Affected: (City Wide)

Recommendations

- 1) That Report BOH25003 respecting Public Health Services Opioid Update – February 2025 **BE RECEIVED** for information.

Key Facts

- The purpose of this report is to provide an update on the current situation related to opioids including recent legislative changes and Public Health Services' response to the opioid crisis in Hamilton;
- Recent legislative changes, the Chief Medical Officer of Health 2023 Annual Report, and the Ontario Public Health Standards provide the provincial context informing Public Health Services' response to the opioid situation;
- Available data and substance use trends in Hamilton provide information about the local context and informs Public Health Services' response to substance use in Hamilton; and,
- Updates related to the Hamilton Drug Strategy Opioid Working Group, Public Health Services' response to safe consumption site closures, and the status of decriminalization of illegal substances in Hamilton provide further information on the status of the local response to Opioids.

Financial Considerations

Not Applicable.

Background

Public Health Services provides regular updates to the Public Health Sub-Committee and Council as the Board of Health on the opioid crisis, relevant work going on through Public Health Services, and updates from the Hamilton Drug Strategy, including the Hamilton Opioid Action Plan, and the provincial and federal levels as appropriate. This report is intended to provide contextual information and support future strategic decision making.

Analysis

This report provides information on Hamilton Public Health Services' response to the ongoing opioid crisis, including provincial and local context influencing this response. Relevant provincial context includes guidance from the Chief Medical Officer of Health 2023 Annual Report addressing substance use and harms, recent legislative changes impacting people who use drugs, and the Ontario Public Health Standards. The local context provides insights into recent trends in opioid health outcomes and the local opioid response update including the transition of the Hamilton Opioid Action Table to an Opioid Working Group of the Hamilton Drug Strategy, Public Health Services' response and a status update on the decriminalization of illegal substances.

Provincial Context

- **Chief Medical Officer of Health Annual Report**

The Chief Medical Officer of Health is required to produce an annual report on the state of public health in Ontario and deliver it to the Speaker of the Legislative Assembly, in fulfilment of role requirements indicated in Section 81.(4) of the *Health Protection and Promotion Act*. In April 2024, the Chief Medical Officer of Health released the Chief Medical Officer of Health 2023 Annual Report titled "Balancing Act: An All-of-Society Approach to Substance Use and Harms".¹

The Chief Medical Officer of Health 2023 Annual Report promotes a comprehensive, health-centred approach involving all sectors of society to mitigate the harms of substance use. It calls on community stakeholders to collaborate and implement a variety of strategies to address the upstream and downstream factors impacting substance use and health. It also emphasizes that an effective public health approach requires interventions throughout the entire spectrum of substance use, from prevention to harm reduction to treatment.

¹ Chief Medical Officer of Health of Ontario. (2023). Balancing act: An all-of-society approach to substance use and harms. King's Printer for Ontario.
(<https://www.ontario.ca/page/chief-medical-officer-health-2023-annual-report>)

Additionally, the Chief Medical Officer of Health 2023 Annual Report outlines current trends and health risks associated with tobacco and vaping, cannabis, alcohol, and opioids, offering evidence-based and substance-specific strategies to combat these risks. This includes opioid-specific recommendations addressing health promotion, regulatory measures, harm reduction, treatment, services for families, and monitoring and reporting. The Chief Medical Officer of Health 2023 Annual Report concludes that the public health sector cannot address substance use harms without support from communities, governments and social services, and people with lived and/or living experience of substance use.

The Chief Medical Officer of Health 2023 Annual Report provides valuable guidance for the public health sector in implementing evidence-based, collaborative strategies to address the harms associated with substance use and the toxic drug crisis. This report serves as one key resource for Public Health Services in adapting and implementing interventions to support individuals and communities affected by these ongoing challenges.

- **Recent Provincial Legislation**

In December 2024, Bill 223 or the *Community Care and Recovery Act* was passed, which bans the operation of supervised consumption sites, including Consumption and Treatment Services, within 200 metres of certain schools, childcare centres, and EarlyON child services. As a result, any site that does not meet the 200 metre distance is required to close by March 31, 2025. This is expected to lead to the closure of the only two supervised consumption sites in Hamilton and at least nine other sites across the province.

The *Community Care and Recovery Act* restricts municipalities from seeking to decriminalize the personal possession of illicit substances under the federal *Controlled Drugs and Substances Act*, unless they receive explicit approval from the Province. It also restricts municipalities from applying for funding or exemptions under the *Controlled Drugs and Substances Act* to establish new supervised consumption sites. Additionally, municipalities are limited in their ability to apply for or support applications for safer supply programs funded through Health Canada. Safer supply programs provide prescribed alternatives to unregulated drugs, along with additional health and social supports, to individuals at high risk of drug poisoning or related harm. Importantly, this legislation does not affect the availability of medication-assisted treatment for opioid use disorder.

In December 2024, the Province also introduced the *Safer Municipalities Act*, which would have prohibited the use of illegal substances in public spaces, with limited exemptions. It would also have allowed police officers and other provincial offences officers, if prescribed, to direct individuals to stop using illegal drugs or to leave the public space, with non-compliance charges resulting in up to six months of incarceration and/or a fine of up to \$10,000. With the dissolution of the legislature in advance of the provincial election, the legislative process for this bill came to an end. While the bill was not passed, its contents provide insight into

the current provincial government's approach towards addressing illegal substances. This bill could be reintroduced after provincial parliament resumes following the election to restart the legislative process.

- **Homelessness and Addiction Recovery Treatment Hubs**

With the announcement of Bill 223, the province also announced its' intention to invest \$375 M to support the creation of 19 Homelessness and Addiction Recovery Treatment Hubs across Ontario. Homelessness and Addiction Recovery Treatment Hubs are intended to provide low-barrier access to a range of supports, tailored to each community, to meet the needs of individuals experiencing complex health and social issues. Some services that may be offered through a Hub include primary care, addiction treatment, social services, and/or connection to supportive housing or treatment beds.

Community agencies in Ontario were able to apply for Homelessness and Addiction Recovery Treatment Hub funding through a Call for Proposals, where they outlined a proposed Hub model and intended community partners. In January 2025, the Ministry of Health announced that nine of the Consumption and Treatment Services sites scheduled for closure in March 2025 will be converted into Homelessness and Addiction Recovery Treatment Hub services, including the site in Hamilton operated by Hamilton Urban Core Community Health Centre. An additional 26 Homelessness and Addiction Recovery Treatment Hub services will be established across the province, under three streams. This includes mainstream hubs, Indigenous-led hubs, and hubs that will transition from Consumption and Treatment Services locations.

- **Ontario Public Health Standards**

Public Health Services is mandated through the Ontario Public Health Standards and associated guidance to prevent and address harms associated with substance use in the community. As a result, the Mental Well-Being and Substance Use program provides key projects and services, including harm reduction supply distribution, needle disposal, naloxone distribution, community education on substance use and risk mitigation, surveillance and monitoring, and secretariat support for the Hamilton Drug Strategy.

Through ongoing changes in the policy landscape, Public Health Services remains committed to working closely with local stakeholders to continue providing evidence-driven services for those who use drugs as well as those affected by related health and social challenges within the community.

Local Context

Hamilton has experienced a significant public health burden related to the ongoing toxic and unpredictable drug supply. To measure and monitor opioid-related health harms in Hamilton, Public Health Services uses data collected by other organizations, often for alternate purposes. Data sources include opioid-related death investigations from the Office of the Chief Coroner of Ontario, and emergency department visits and hospitalizations recorded in hospital administrative databases. At times, proxy

measures such as opioid-related paramedic calls are used as a limited real-time indicator of opioid-related activity in the Hamilton community. While these opioid-related health harm indicators often trend in similar directions, there are also times when no clear pattern emerges. It is important to consider that relationships between indicators can be influenced by differences in what they measure, inherent data variability, and the broader community context.

The number of opioid-related deaths in Hamilton decreased in 2023 and 2024 after reaching a high of 166 deaths in 2022, and remains significantly higher than the numbers seen each year before 2017. Trends over time for the rates of opioid-related deaths in Hamilton are similar to Ontario although rates are consistently higher than the province. Rates provide a way to look at trends in death over time while considering Hamilton's growing population and allows for comparison to Ontario overall.

Between Q2 2022 and Q2 2024, 95% of opioid toxicity-related deaths in Hamilton involved multiple substances, with a median of four substances identified per case. Stimulants were present in 79% of toxicology reports, and benzodiazepines were present in 41% of toxicology reports. Fentanyl was the most frequently detected substance. The data reflects an increase in polysubstance use, which can contribute to drug poisoning risk. Of note, some polysubstance use can occur unknowingly when individuals consume an expected substance, usually an opioid like fentanyl, with an undesired or unexpected substance present (e.g., xylazine, benzodiazepine, etc.)

Encounters with the health system for opioid-related harms such as emergency department visits and hospitalizations have fluctuated in recent years, however, the numbers have remained below peaks observed in 2021. Calls to Hamilton Paramedic Services for opioid-related incidents increased significantly since 2017, reaching a peak of 982 calls in 2023, before declining to 770 calls in 2024.

Public Health Services continues to inform our operations by using many sources of evidence, including data, to better understand health inequities in Hamilton. Data sources may not consistently include sociodemographic information or enough data to conduct robust equity analysis. For example, housing status and racial identity may be determined post-mortem by the investigating coroner and this information is not complete for all deaths. Most opioid-related deaths are occurring among males aged 25 to 64 years. Similarly, since 2017, 75% of paramedic calls for opioid-related incidents involved males, with an average age of 38 years. As reported in Hamilton's Community Health Status Report 2024, there were substantially higher rates of opioid-related deaths among people whose living arrangement was identified as homeless (1,024.9 deaths per 100,000) compared to those identified as residing in a private dwelling (16.1 deaths per 100,000). The rate of opioid-related deaths was greater among people who identified as white (22.4 deaths per 100,000) and Black (13.4 deaths per 100,000) when compared to people who identified as East or Southeast Asian, South Asian, Latin American or Middle Eastern (4.0 deaths per 100,000). These racial identities were grouped together for privacy considerations, as the number of deaths in each of these populations is low.

Opioid Response Updates

- **Hamilton Opioid Action Plan Update**

The Hamilton Opioid Action Plan (Public Health Committee Report BOH23021) was established in Spring 2023 in response to the ongoing crisis of harmful opioid use and the toxic, unpredictable drug supply affecting the Hamilton community. This plan was created by subcontractor MASS LBP through consultation with the Hamilton Drug Strategy Steering Committee, community members, persons with lived and/or living experience, equity-deserving groups, and health and social services leaders. This plan included immediate, medium and long-term actions to impact the opioid situation in Hamilton and was approved by Council on June 21, 2023. Public Health Services' role in the Hamilton Opioid Action Plan includes secretariat and evaluation support, in addition to leading specified actions within the plan. A detailed update on the progress of the plan was provided at the June 3, 2024 Public Health Committee Meeting (Report BOH24015). Since this time, there are relevant updates on select actions, provided below:

- **Immediate and Medium-Term Action Update:**

- The Embedded Harm Reduction Pilot in Men's Emergency Shelters was initiated in October 2024 to expand dedicated harm reduction resources (staff) within the men's emergency shelter system in Hamilton. This program is a one-year pilot in partnership with Mission Services, The Good Shepherd and Salvation Army. Evaluation conducted by Public Health Services is currently underway and will be shared in Q4 2025;
- Funding to support the YWCA Hamilton's Safer Use Space is being provided for the continuation of existing services until March 31, 2025. It is anticipated that this site will close after March 31, 2025, as a result of the legislation outlined in the Community Care and Recovery Act. Evaluation conducted by Public Health Services is currently underway and will be shared in Q4 2025;
- The Peer Support Workers Initiative is set to begin, implemented by Housing Services in the first quarter of 2025. Evaluation conducted by Public Health Services will begin once the program is initiated;
- The Drug Checking Test Strip Distribution Pilot commenced in May 2024. Public Health Services currently provides drug test strip kits for distribution through five agency partners. Additionally, kits are available through several Public Health programs including The Van, Sexual Health Clinics, Street Health Clinics, and the Mental Health and Street Outreach Team. As of December 2, 2024, 429 fentanyl test strip kits and 440 xylazine test strips kits have been distributed through public health programs and by community partners. Evaluation of this pilot project is currently underway. To

- date, in one situation, test strips were used to inform a community drug alert;
- Public Health Services has been working with local and external partners to explore expanded drug checking models. Drug checking is a harm reduction service that analyses unregulated drugs to identify their contents. Drug checking services can help to reduce risk of overdose and can support monitoring of the unregulated drug market. Staff are actively participating in the provincial Drug Checking Community of Practice to stay informed on the latest evidence and best practices in drug checking services; and,
 - To increase access and support to shelters and drop ins, Mission Services staff participated in Community Walk Abouts to learn more about local resources by visiting other shelters, food banks, Consumption and Treatment Services, and the Hamilton Public Library.
- **Long-Term Action Update:**
Following recent provincial legislative changes and the announcement of the new Homelessness and Addiction Recovery Treatment Hubs, the ability to implement the long-term actions has been impacted, specifically regarding safer supply and Supervised Consumption Sites. Actions related to the availability of stabilization services and access to rapid detox and residential treatment programs are on hold while the new provincial treatment model rolls out and promised funding streams become available.
 - **Transition to the Opioid Working Group:**
The Hamilton Opioid Action Table initiated the transition to an Opioid Working Group of the Hamilton Drug Strategy in the fall of 2024 based on two main considerations: (1) the Government of Ontario's announcement of the *Community Care and Recovery Act* which would impact the ability of the Action Table to initiate the long-term actions within the Hamilton Opioid Action Plan, and (2) a desire from table members to be able to address new and emerging issues beyond the scope of the Hamilton Opioid Action Plan.

An important step in the transition to an Opioid Working Group included the opening of membership to a broader audience of local health and social services agencies to enhance the capacity of the group to address opioid-related harms. The newly expanded working group is in the process of developing a community response plan for the upcoming changes impacting people who use drugs. This is a collaborative effort on behalf of the Opioid Working Group members (see Appendix "A" to Report BOH25003). This response will prioritize actions that will support equity deserving populations and those that will be disproportionately impacted

by the upcoming changes. This response will be grounded by the Chief Medical Officer of Health 2023 Annual Report which emphasizes the need to support the entire spectrum of substance use, and the notion that this work requires deep support and widespread collaboration to impact opioid-related harms. The Opioid Working Group has identified the following risks associated with the Safe Consumption Site closures:

- Increase in drug poisoning deaths;
- Increased substance-use related infections;
- Reduced access to general health and wound care;
- Reduced referrals and connection to other services;
- Lost relationships, community, and trust;
- Reduced access to care outside of “regular” business hours;
- Increase burden on emergency services and hospitals;
- Increased demand on harm reduction supply distributors;
- Increased trauma for frontline workers;
- Increased needle debris in community;
- Reduced understanding of what is circulating in the current drug supply;
- Loss of low-barrier spaces where all services can be received;
- Increase fear among people who use drugs; and,
- Disproportionate impacts to vulnerable populations: those who access Supervised Consumption Sites, pregnant women, gender diverse folks, indigenous community, and those experiencing homelessness.

○ **Public Health Services Response**

Public Health Services plays an ongoing role in supporting the community in the face of the opioid crisis by executing both mandated and discretionary programming that supports people who use drugs. Public Health services fulfils its Ontario Public Health Standards mandate for Harm Reduction and Substance Use through collaboration with agencies to assist in expansion of harm reduction policies and programs in Hamilton, and through collaboration with health and social services partners and community leaders on the Hamilton Drug Strategy and associated working groups, including the Opioid Working Group.

In addition to providing secretariat support and facilitating the development of the Opioid Working Group’s community response plan, Public Health Services is actively developing a response to the upcoming Safe Consumption Site closures and potential increased repercussions for people found using drugs in public settings. Specific to Public Health Services’ role, the Mental Wellbeing and Substance Use program’s response includes a range of enhancements and expedited timelines to current programming, as well as exploring new opportunities prioritized for the first quarter of 2025. This includes:

- Implementing improvements to the Early-Warning Drug Alert System;
- Increasing distribution of drug test strips through the Drug Test Strip Distribution Pilot;
- Exploring increased naloxone distribution through the Ontario Naloxone Program;
- Development of the Mass Drug Poisoning Response Plan.
- Exploring the expansion of drug checking services available in Hamilton;
- Revamped campaigns promoting safety and harm reduction messaging;
- Exploring innovative approaches that aim to enhance the community's ability to respond to drug poisonings where they are most commonly and/or likely to happen; and,
- Supporting Hamilton Urban Core with implementation of the new Homelessness and Addiction Recovery Treatment Hub.

Though not mandated or funded within the Ontario Public Health Standards, this response extends to the Alcohol, Drug & Gambling Services and Mental Health and Street Outreach programs. This includes:

- Improving access to harm reduction information, supplies and programming through outreach services and clinic site;
- Ensuring program staff are well positioned to provide information and harm reduction referrals to individuals accessing services; and,
- Connect within existing community partnerships to understand needs individuals are presenting with and collaborate on direct service provision and participate in targeted planning to ensure program activities and interventions are coordinated with the broader system response.

○ **Decriminalization of Illegal Substances**

In August 2022, the City of Hamilton's Board of Health directed the Medical Officer of Health to request that the Federal Government include Hamilton in the Health Canada pilot project, granting an exemption under subsection 56(1) of the *Controlled Drugs and Substance Use Act* to remove criminal penalties for people who possess a small amount of certain illegal substances for personal use. Since then, Public Health Services has engaged in discussion with other municipalities and the federal government to inform the approach, explored different models of decriminalization, and consulted local partners to assess the impact of recent federal legislative changes related to the criminalization of illegal substances. To ensure Hamilton's approach to alternatives to criminalization is evidenced-based, Public Health Services has also been monitoring the experiences and outcomes of the three-year decriminalization pilot project in British Columbia and Toronto Public Health's exemption request to allow for the possession of drugs for

personal use in Toronto.

However, the new provincial legislation under the *Community Care and Recovery Act*, limits municipalities and local boards from applying to Health Canada for an exemption under subsection 56(1) *Controlled Drugs and Substance Use Act* for the purpose of decriminalizing the personal possession of an illegal substance, without approval from the province. As a result, Public Health Services will no longer be pursuing an exemption request from Health Canada.

Alternatives

Not Applicable.

Relationship to Council Strategic Priorities

The recommendations in this report support the following 2022-2026 Council Priorities, Outcomes, and Measures of Success:

2. Safe & Thriving Neighbourhoods
 - 2.1. Increase the supply of affordable and supportive housing and reduce chronic homelessness
3. Responsiveness & Transparency
 - 3.2. Get more people involved in decision making and problem solving

The opioid crisis disproportionately impacts individuals experiencing homelessness. This information report provides context on the opioid situation, the Opioid Working Group, and Public Health Services' role and capacity to support those who will be impacted by the closure of Safe Consumption Sites and other legislative changes impacting people who use drugs, including those experiencing homelessness.

Previous Reports Submitted

- [BOH23021](#) – Hamilton Opioid Action Plan
Report in response to February 2023 Council direction to engage with a diverse group of community partners to create an evidence-based harm reduction plan, in alignment with the Hamilton Drug Strategy.
- [BOH24015](#) – Update on the Hamilton Opioid Action Plan – June 2024
Public Health Committee update on the Hamilton Opioid Action Plan
- [BOH24024](#) – Hamilton Community Health Status Report 2024
Public Health Services' 2024 report providing meaningful health status information, including social determinants of health and health inequities to guide health planning and service delivery.

Consultation

Not Applicable.

Appendices and Schedules Attached

Appendix A: Hamilton Drug Strategy Opioid Working Group – Membership by Agency

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Submitted and recommended by: Julie Prieto, Director
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