

Attachment 3

July 13, 2020 Report to Council
“Interdepartmental Working Group on the
Overdose Epidemic Update



REPORT

Development Services

To: Mayor Coté and Members of Council **Date:** 7/13/2020
From: Emilie K Adin, MCIP **File:** 13.2630.07
Director of Development Services
Item #: 257/2020

Subject: **Interdepartmental Working Group on the Overdose Epidemic: Update**

RECOMMENDATION

***THAT** Council direct the Interdepartmental Working Group on the Overdose Epidemic to develop a City Overdose Response Action Plan in collaboration with the New Westminister Overdose Community Action Team.*

***THAT** Council direct staff to work with Fraser Health to explore an Overdose Prevention Site in New Westminister.*

***THAT** Council direct staff to work with Fraser Health, with input from the New Westminister Overdose Community Action Team, to explore a Safe Supply Program in New Westminister.*

EXECUTIVE SUMMARY

On April 14, 2016, the Province of British Columbia declared a state of emergency related to the overdose crisis. In July 2018, the New Westminister Overdose Community Action Team (NWOCAT) was established after successfully obtaining funding through the Community Action Initiative. The NWOCAT, chaired by Fraser Health and the Lower Mainland Purpose Society, is a collaborative body with broad-based representation, including by several City Departments.

In December 2019, and in response to Council’s recent Strategic Plan, the City’s Interdepartmental Working Group on the Overdose Epidemic was established with a mandate to coordinate City actions to respond to the overdose epidemic including,

continuing to participate on the NWOCAT and developing a City Overdose Response Plan. Possible actions identified to date include: developing anti-stigma, cultural sensitivity and trauma-informed training for City staff; instituting Naloxone training for frontline City staff; participating in the NWOCAT Street Degree Program; and informing discussions related to a possible Overdose Prevention Site and a Safe Supply Program.

In March 2020, a second public health emergency was declared in British Columbia in response to the COVID-19 pandemic. The result of facing dual public health emergencies includes heightened risk of overdose due to border closures and an increasingly toxic drug supply, as well as risk and spread of infection among vulnerable populations, including those experiencing marginalization. Marginalized individuals face risks associated with withdrawal and other complex health conditions. They are typically unable to isolate due to lack of housing.

Given the increased risks for vulnerable individuals now facing dual public health emergencies, staff are seeking Council direction to work with Fraser Health, with input from the NWOCAT, to explore an Overdose Prevention Site and to work towards the implementation of a Safe Supply Program in New Westminster.

PURPOSE

The purpose of this report is threefold: (1) to seek Council direction to develop a City Overdose Response Action Plan; (2) to seek Council direction to work with Fraser Health to explore an Overdose Prevention Site in New Westminster; and, (3) to seek Council direction to work with Fraser Health and the New Westminster Overdose Community Action Team to explore a Safe Supply Program in New Westminster.

POLICY CONTEXT

For information on the policy context, please refer to attachment 1.

DISCUSSION

Overdose Deaths in New Westminster

Since 2014, there has been a significant increase in illicit drug overdose deaths in New Westminster (see Table #1). Between 2014 and 2019, New Westminster’s illicit drug death overdose rate was higher than the provincial average in five out of the six years.

The illicit drug overdose death rate in British Columbia has increased sharply in the first five months of 2020, with the highest monthly total of 170 deaths recorded in May 2020. Provincial medical experts have reported an increasingly toxic drug supply, a higher

propensity to use drugs alone, declining mental health and increased substance use during the COVID-19 pandemic. During the first five months of 2020, 12 illicit drug overdose deaths have occurred in New Westminster.

Table #1: Illicit Drug Overdose Deaths between 2014 and 2019

Jurisdiction	2014	2015	2016	2017	2018	2019	2014-19 % change	2020 Jan-May
New Westminster - deaths	9	12	10	24	36	18	100.0%	12
New Westminster - death rate	12.6	16.5	13.4	31.5	46.1	22.6		
British Columbia - deaths	369	529	991	1,495	1,546	979	165.3%	554
British Columbia - death rate	7.8	11.1	20.4	30.4	31.0	19.4		

*BC Government Coroners Service, published June 11, 2020 and BC Stats Population Estimates, 2019

If one compares the monthly average death rates in 2019 in New Westminster, to the average death rate per month in the first five months of 2020, the monthly death rate has increased from 1.5 to 2.4 deaths per month average. That represents an increase of about 63%.

For up to date statistics collected by New Westminster Fire and Rescue Services (NWFRS) regarding incidents of overdose in the City of New Westminster, please refer to attachment 2.

Provincial State of Emergency

On April 14, 2016, the Province of British Columbia declared a state of emergency throughout the province related to the overdose crisis. On December 1, 2017, the BC Ministry of Mental Health and Addictions (MMHA) launched an Overdose Emergency Response Centre (OERC), with the goal of spearheading urgent action at the community level to prevent further deaths and to support people using substances and people struggling with addiction to access supports, treatment and recovery services.

In April 2018, the Community Action Initiative (CAI) in partnership with the MMHA and the OERC launched a funding program to set-up Community Action Teams (CATs). The purpose of CATs is to develop partnerships at the local level in order to facilitate action-oriented strategies tailored to local community needs to respond to the overdose crisis.

New Westminster Overdose Community Action Team

The New Westminster Overdose Community Action Team (NWOCAT) was established in May 2018 and is chaired by Fraser Health and the Lower Mainland Purpose Society (LMPS). This body was successful in obtaining a Community Action Team Grant, of which the LMPS is the lead financial agency. The NWOCAT is Co-Chaired by the Medical Health Officer, Fraser Health, and the CAT Coordinator, LMPS. It is a collaborative body that aims

to be inclusive, diverse and have representation from first responders, local community service providers, health authority, government staff and individuals with lived and living experience. Membership is open to anyone with a reasonable stake in the crisis.

The NWOCAT is currently has the following membership:

- Lower Mainland Purpose Society (lead agency)
- Fraser Health Mental Health and Substance Use Services
- Fraser Health Population and Public Health
- Fraser Northwest Division of Family Practice
- BC Emergency Health Services
- BC Yukon Association of Drug War Survivors
- Community Members
- People with Lived and Living Experience
- City of New Westminster (Police, Fire, Library, Planning, Parks and Recreation)
- Construction Industry Rehabilitation
- Douglas College
- Last Door Recovery Society
- Lookout Housing and Health Society
- Ministry of Social Development and Poverty Reduction
- Mobile Response Team
- Spirit of the Children Society
- Union Gospel Mission

One of the first actions of the NWOCAT was an asset and gap analysis, from which the following key objectives were identified:

- Peer Network and Mentorship – increase involvement of peer knowledge and experience in designing overdose response programs and increase diversity of peer involvement in leading and supporting project activities.
- Anti-Stigma Campaign – promote a compassionate response to drug use in the community, identify inaccurate and stigmatizing stereotypes of people who use drugs and work to disrupt them, and influence the way our community talks about drugs.
- Expansion and Coordination of Services – promote information sharing of services relating to overdose and response, develop mechanisms to disseminate information, identify opportunities and establish linkages for service coordination.
- Guiding Best Practices – increase knowledge around cultural safety and humility practices within and across organizations and increase knowledge around Adverse Childhood Experiences (ACES), Trauma-informed, and evidence-based practices within and across organizations.

The work of the NWOCAT over the past two years has been collaborative, diverse and impactful and has involved multiple partners, including people with lived and living experience. For an overview of NWOCAT project activities since 2018, please refer to attachment 3. The co-chairs will be invited to present to Council on the overdose crisis in New Westminster and on the work of the NWOCAT at a future Council Meeting or Workshop.

Interdepartmental Working Group on the Overdose Epidemic

Council, as part of its recent strategic planning, supported the following strategic direction and action:

- *Take a lead role in responding to the opioid epidemic, including coordinating actions with City partners.*
- *Continue to participate on the Overdose Community Action Team, including its working groups, and identify actions in which the City can take a lead or prominent role.*

In December 2019, the City of New Westminster Interdepartmental Working Group on the Overdose Epidemic was established with a mandate to coordinate City actions to respond to the overdose epidemic in New Westminster. This will include: examining actions currently underway; identifying opportunities for collaboration, including with the NWOCAT, other community partners and senior levels of government; updating related plans and policies; and developing a City Overdose Response Action Plan.

City membership on the working group includes representation from:

- Development Services (Integrated Services and Planning)
- Engineering Department (Engineering Operations)
- New Westminster Fire Services
- New Westminster Police Department
- New Westminster Public Library
- Parks and Recreation Department, including Youth Services

Recognizing the importance of close collaboration with the NWOCAT, non-city membership on the working group includes the Medical Health Officer (Co-Chair of NWOCAT) and NWOCAT Coordinator. A first task of the working group was to examine actions currently underway in the various City Departments. The below table illustrates how each department is currently responding to the overdose epidemic, noting that most Departments are also represented on the NWOCAT.

Department	Actions Underway
Development Services – Integrated Services	<ul style="list-style-type: none"> • Participate in committees regarding homelessness (which often intersects with addictions). • Actively engage with homeless individuals to offer services in the city and connect them to outreach workers.
Development Services – Planning	<ul style="list-style-type: none"> • Participate in NWOCAT and related committees. • Chair Interdepartmental Working Group on the Overdose Epidemic.
Engineering Operations	<ul style="list-style-type: none"> • Implemented staff training to identify risks and learn proper collection techniques to minimize those risks (needles, sharps and other hazardous wastes). • Implemented a new needle disposal system where a company picks up the full containers from our yard rather than returning each individual container to Fraser Health’s Office in the Royal Centre Mall.
New Westminster Fire Services	<ul style="list-style-type: none"> • Actively carrying and deploying Naloxone. • Additional resources and training for first responders. • Participate in NWOCAT and related committees. • Participate in Project Allies (NWOCAT). • Potential participation in Street Degree (NWOCAT).
New Westminster Police	<ul style="list-style-type: none"> • Actively carrying and deploying Naloxone. • Offer community education, including for youth. • Participate in NWOCAT and related committees. • Participate in Project Allies (NWOCAT). • Potential participation in Street Degree (NWOCAT).

Parks and Recreation, including Youth	<ul style="list-style-type: none"> • Report critical or active findings to New Westminster Police and Integrated Services. • Liaise with School District to provide a continuum of support for youth. • Offer counselling services for youth. • Provide referrals to community resources. • Participate in NWOCAT and related committees.
---------------------------------------	--

The next step identified by the working group includes developing a City Overdose Response Action Plan that expands on current actions and identifies new actions in collaboration with the NWOCAT, other community partners and the senior levels of government. Possible actions identified to date include: anti-stigma, cultural sensitivity and trauma-informed training for City staff; Naloxone training for frontline City staff; participating in the NWOCAT Street Degree Program; and informing discussions related to a possible Overdose Prevention Site and a Safe Supply Program.

Overdose Prevention Site and Safe Supply Program

There is evidence that overdose prevention and supervised consumption sites save lives and reduce the rate and spread of infectious diseases. They also facilitate enhanced access to drug treatment, rehabilitation and recovery services. Overdose prevention sites typically provide clean supplies and allow for the safe disposal of needles; facilitate education and information sharing; enable individuals to consume substances under the supervision of someone who can respond in the event of an overdose; and serve clients and the larger community.

In March 2020, a second public health emergency was declared in British Columbia in response to the COVID-19 pandemic. The result of facing dual public health emergencies includes heightened risk of overdose due to border closures, and an increasingly toxic drug supply, as well as risk and spread of infection among vulnerable populations, including those experiencing marginalization, who face risks associated with withdrawal and other complex health conditions, and who are unable to isolate due to lack of housing.

Public health advocates recommend the implementation of safe supply programs as a key intervention to respond to increasing overdose and overdose deaths. Safe supply is defined as “a legal and regulated supply of drugs with mind/body altering properties that traditionally have been accessible only through the illicit drug market.” Anticipated benefits of safe supply programs include: fewer people experiencing withdrawal symptoms; fewer people at

risk for drug overdoses; and more people able to self-isolate, reducing the spread of infection and demand on an overtaxed health care system. For information on safe supply programs, please refer to attachment 4.

Given the increased risks for vulnerable individuals now facing dual public health emergencies, staff are seeking Council direction to work with Fraser Health, with input from the NWOCAT, to explore an Overdose Prevention Site and implementation of a Safe Supply Program in New Westminster.

INTER-DEPARTMENTAL LIAISON

The Interdepartmental Working Group on the Overdose Epidemic is comprised of staff from multiple City Departments, including: Development Services, Engineering Operations, Fire Services, Parks and Recreation, Police, Public Library.

OPTIONS

There are four options for Council's consideration:

1. That Council direct the Interdepartmental Working Group on the Overdose Epidemic to develop a City Overdose Response Action Plan in collaboration with the New Westminster Overdose Community Action Team.
2. That Council direct staff to work with Fraser Health to explore an Overdose Prevention Site in New Westminster.
3. That Council direct staff to work with Fraser Health, with input from the New Westminster Community Action Team, to explore a Safe Supply Program in New Westminster.
4. That Council provide staff with other direction.

Staff recommends option 1, 2 and 3.

ATTACHMENTS

Attachment 1: Policy Context

Attachment 2: Incidents of Overdose in the City of New Westminster - July 1, 2020 Update

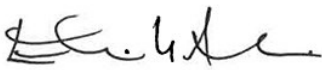
Attachment 3: New Westminster Overdose Community Action Team: Project Activities

Attachment 4: Dual Public Health Emergencies: A Brief for Safe Supply

This report has been prepared by:
Claudia Freire, Housing/Social Planner

This report was reviewed by:
John Stark, Supervisor of Community Planning
Jackie Teed, Senior Manager of Development Services

Approved for Presentation to Council



Emilie K Adin, MCIP
Director of Development Services



Lisa Spitale
Chief Administrative Officer



Attachment 1
Policy Context

POLICY CONTEXT

Official Community Plan

The *Our City Official Community Plan* (2017) includes the following policy:

- *Foster a community that proactively addresses health issues and facilitates healthy built environments.*

Council Strategic Plan

Council, as part of its recent strategic planning, supported the following strategic direction and action:

- *Take a lead role in responding to the opioid epidemic, including coordinating actions with City partners.*
- *Continue to participate on the Overdose Community Action Team, including its working groups, and identify actions in which the City can take a lead or prominent role.*



Attachment 2

Incidents of Overdose in the City of New Westminister – July 1, 2020 Update



MEMORANDUM
New Westminster Fire & Rescue Services

To: Mayor Coté and Members of Council **Date:** July 13, 2020

From: Tim Armstrong **File:**

Fire Chief

Item #:

Subject: Incidents of Overdose in the City of New Westminster – July 1, 2020 Update

PURPOSE

To provide up to date statistics collected by NWFRS regarding incidents of overdose in the City of New Westminster.

BACKGROUND

The program was implemented in February 2016 in Vancouver and Surrey fire departments as a result of a collaboration between the Ministry of Health, Provincial Health Services Authority (PHSA), BC Emergency Health Services (BCEHS), BC Centre of Disease Control (BCCDC), Fraser Health and municipal authorities to respond to the rising number of drug overdose cases in BC. The Naloxone Program was implemented within NWFRS in November 2016.

ANALYSIS / DISCUSSION

NWFRS has administered Naloxone to 253 patients since November 2016 with 90% of these patients regaining consciousness. The frequency of bystander administered Naloxone continues to increase. Since July 2018 45% of opioid overdose incidents that the NWFRS responded to, bystanders had administered naloxone prior to the arrival of the fire department.

The availability of Naloxone kits and public awareness campaigns appear successful in treating an overdose. The total number of Overdose/Poisoning remains relatively consistent, however the incident of an opioid overdose has increased by 50%. A noticeable change in the consumption of an opioid is the increase in consumption by females reporting a 50% increase in that demographic.

**Total Number of Overdose/Poisoning incidents received from dispatch
New Westminster January 2016 – 30 June, 2020**

Year	Total	Glenbrook	West End	Queensborough
2016	218	64	134	20
2017	247	111	124	12
2018	218	122	84	12
2019	174	88	76	10
2020*	61	25	34	2

*Partial year

**Actual Number of Opioid Overdose incidents attended*
New Westminster November 2016 – 30 June, 2020**

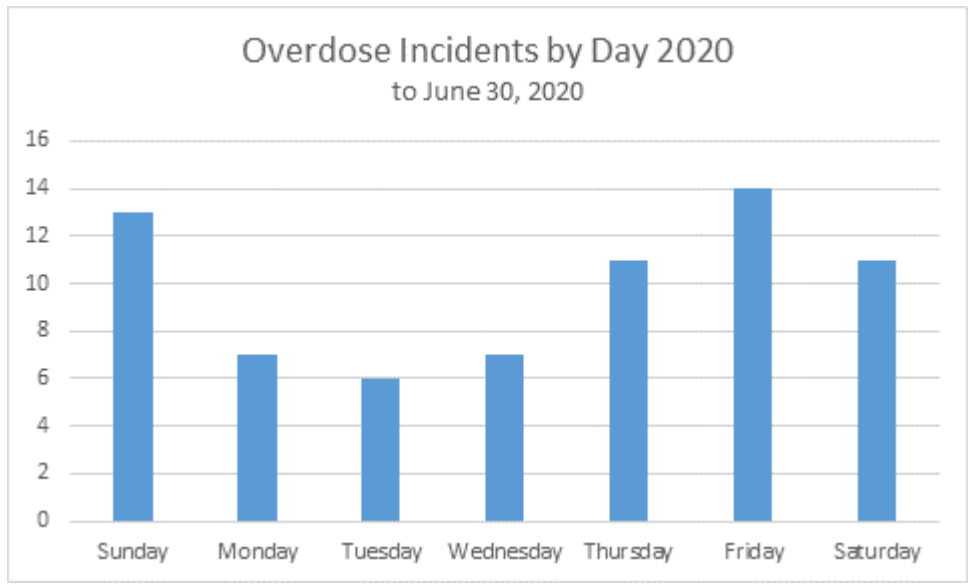
Year	Total	Gender		Doses Administered	Outcome		
		Male	Female		Responsive	Un-responsive	Deceased
2016**	8	7	1	13	7	0	1
2017	30	25	5	45	28	0	2
2018	48	39	9	82	41	0	7
2019	106	67	41	104	30	3	1
2020**	65	51	13	69	32	3	0***

*Number may vary from overdose/poisoning incidents as dispatch call may have been coded to a different medical category
 **Partial year
 ***Patient outcome unknown

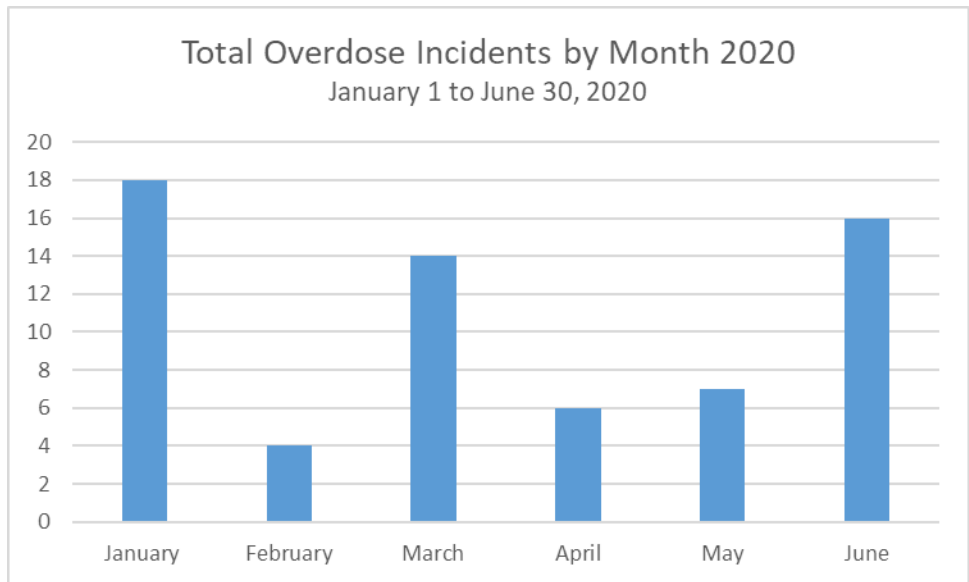
Demographics of Overdose Patients

Year	Gender	Male	%of total	Largest Demographic Group by Gender
2018	Male	39	81%	63% of Male patients under age of 45
	Female	9	19%	73% of Female patients under age 45
2019	Male	67	70%	90% between ages 26-55
	Female	41	30%	75% between ages 36-65
2020	Male	51	81%	51% between ages 36-45
	Female	13	19%	25% between ages 26-35

Incident of Opioid Overdose by Day of the Week



The chart above identifies Thursdays to Sundays as peak periods during the week for opioid overdoses.



NALOXONE PROGRAM FROM THE NWFRS PERSPECTIVE

NWFRS continues to experience an increase in emergency response to incidents of overdose associated to the use of an Opioid. In 2019 we have experienced a 50% increase in opioid related incidents. In 2020 we are trending to record a 20% increase on 2019. Refinement to the collection of data may be a factor in this increase but would not account for the entire increase in opioid overdose incidents.



Attachment 3

New Westminster Overdose Community Action Team: Project Activities

NEW WESTMINSTER OVERDOSE COMMUNITY ACTION TEAM: PROJECT ACTIVITIES

Prepared by New Westminster Overdose Community Action Team

COVID-19 UPDATE

Currently, the work of the New Westminster Overdose Community Action Team (NWOCAT) is proceeding on a modified basis due to challenges that have been presented in the face of the COVID19 pandemic. Projects designed to bring people together have been placed on hold in order to reduce risk of infection of the coronavirus. The NWOCAT has also experienced challenges with respect to capacity, as members of the have been redeployed to address the ongoing pandemic. Strategies to continue moving projects forward continue to be explored.

NWOCAT meetings continue to be held on a monthly basis, with one cancelation in April to provide time for adjustment to COVID19 protocols.

The Peer Network and New West Street Degree is currently on hold due to COVID19 restrictions. Strategies to hold peer network meetings virtually have been piloted, and plans to bring small groups together are in development. This will ensure Peer Network members are able to complete the Street Degree program, while also adhering to safe physical distancing protocols.

The Anti-Stigma Campaign - Trades and Business Engagement Initiatives have also been placed on hold as a result of physical distancing protocols. At this time, virtual or digital alternatives are being explored. This may include the development of an online platform to share information tailored to specific target groups, and promote specific programs, including the NWOCAT Peer Mentorship program.

PROJECT ACTIVITIES

Community Action Initiative (CAI) Stream 1 Funding (November 2018- October 2019)

Asset and Gap Analysis and Strategic Action Plan

An asset and gap analysis was conducted in the first year after the establishment of the NWOCAT in May 2018. Findings from the asset and gap analysis were used to inform the committee's strategy for reducing the incidence of overdose locally. Through this process, four strategic priorities were identified:

- a) **Anti-stigma campaign;** The *Messages of Hope Campaign* was developed in the first year of the project. This included the development and coordination of an exhibitor booth. The committee attended local events throughout the summer to provide information about the impact of the overdose crisis in New Westminster, and invited members of the community to write Messages of Hope on hearts that were later developed into a mural and unveiled on International Overdose Awareness Day. Naloxone training was also provided to community residents. The objective was to promote compassion and a compassionate response to drug use in our community.
- b) **Peer network and mentorship;** In the first year of the project, structures and engagement strategies for connecting with people who have been directly impacted by the overdose crisis, either through personal drug use or loss of a loved one, were established. This included weekly group meetings, and a formal membership process. Meetings were used as an opportunity to assess group priorities. The objective is to increase the involvement of peer knowledge and experience in designing overdose response programs and activities, to enhance the capacity of peers interested in leading overdose prevention work, and to reduce internalized stigma relating to drug use.
- c) **Expansion and coordination of services;** In the first year of the project, a comprehensive list of overdose response services were identified in New Westminster, and a proposal was put in place to develop a centralized list of supports through the Division of Family Practice Pathways website. Regular updates are circulated through the NWOCAT distribution list, and opportunities to promote service coordination were proposed as part of the peer mentorship program - including the establishment of formal partners with Fraser Health's Mental Health and Substance Use Services, and the local Fire and Police Department.
- d) **Guiding best practices;** A need to enhance knowledge, and practical strategies for promoting cultural safety and trauma-informed practice was identified across the NWOCAT committee. Opportunities for capacity building, particularly within the realm of cultural safety was explored in year one. A local program director with varied expertise in substance use and Indigenous practices was invited to develop a training on Cultural Safety as part of a peer capacity building program. Opportunities to bring this training to other community partners continues to be explored. Additionally, formal partners within Fraser Health and the Metis Association provide ongoing recommendations to enhance cultural safety and trauma informed practice across initiatives developed by the committee.

Community Action Initiative (CAI) Stream 2 Funding (November 2019 - October 2020)

Anti-Stigma Workshop, Trades

[Data reports](#) on the incidence of overdose in BC indicate that men in trades may be at high risk for overdose. A workshop was developed by two overdose public health nurses at Fraser Health, and a person who identified as having lived experience with personal drug use and the trades. Workshop content included relevant statistics on the impact of the overdose crisis; a discussion on language and stigma; a presentation on someone's personal experiences with overdose; understanding how to recognize and respond to overdose; and information on where to access harm reduction and recovery-oriented services. The objective is to reduce fatal and non-fatal drug related overdose through targeted contact-based workshops designed to address stigma within the trades.

Anti-Stigma Campaign, Businesses

Findings from the NWOCAT asset and gap analysis indicated a need, and some willingness to participate in overdose prevention strategies across the local business community. Local businesses were also identified as a key target group for the anti-stigma campaign given their reach in the community. In year two of the committee, a survey was developed to gain a more comprehensive understanding of the impact of the overdose crisis across the business community, and to identify strategies that will be most effective for engaging this target group. A web platform is currently in the process of being developed that will include relevant training, a list of local resources, as well as promote the peer mentorship program as a potential resource for connecting folks to services. The objective of this initiative is to enhance overdose response capacity and coordination across New Westminster, and reduce stigma at the social level.

Peer Network

As noted above, a peer network was established in order to promote empowerment-based peer-led overdose prevention initiatives that fit the needs of the people who may be at risk for overdose in New Westminster. One of the key outcomes of the CAT Peer Network is to support standalone peer-led initiatives. In the second year after the establishment of the peer network, the following projects were developed:

- **Digital Inclusion:** Through ongoing peer group meetings, a need to increase access to communications and technology was identified. This will allow peers to better communicate with one another, as well as access information online. This gap in digital connectivity became further apparent after the onset of the COVID19 pandemic. The objective of the digital inclusion initiative is to reduce barriers to technology, and increase access to information and resources among marginalized and/or vulnerably-housed individuals by establishing a low barrier tech cafe.

- **Overdose Memorial:** Peers attending the weekly peer group showed interest in leading a public art project in order to raise awareness about the local impact of the overdose crisis across New Westminister, and in doing so, contribute to ongoing stigma reduction efforts relating to substance use. It is also a strategy for honouring the many lives that have been lost to a contaminated drug supply, and where memorials may not always be held.
- **Street Degree:** Peers attending the weekly peer group showed interest in receiving ongoing overdose response training. Referrals were frequently made to the Street Degree program located in Vancouver. A request for training with fewer transportation barriers led to a proposal for a Street Degree program in New Westminister to promote ongoing capacity building and peer-based overdose response.
- **Community Advocacy:** Weekly peer group meetings serve as a platform for ongoing advocacy. Members of the group are encouraged to identify gaps in the community with respect to overdose response, and social determinants of health - and are supported to bring these concerns to the attention of the larger CAT committee, as well as to City Council.

Vancouver Foundation, Three Year Test Grant (January 2020 - December 2022)

Peer Mentorship Program (Project ALLIES)

The Overdose Emergency Response Centre has identified peer empowerment and employment as one of eight essential services for overdose prevention in BC. The main objective of the peer mentorship program is to reduce fatal and non-fatal accidental overdose by creating avenues for social connection, linking to essential services, building partnerships in the community, and addressing stigma at the self, social, and structural levels. To date, structures and processes have been developed to support the development of the peer mentorship program. Four peers were recruited on a part-time basis to conduct an environmental scan. Information collected through this process will be used to inform the peer mentorship program moving forward. Ongoing strategies to build relationships with local partners, and the business community will be developed for the purpose of ongoing coordination of services, and stigma reduction.

Policy Toolkit

Based on key learnings obtained through the establishment of the peer mentorship program, structures and recommendations will be developed to support the implementation of policies that promote best practices and enhance quality of care to service recipients. A toolkit will be developed and made accessible to local organizations, and across communities as part of a commitment to enhancing trauma informed and cultural safe peer-based programming.



Attachment 4

Dual Public Health Emergencies: A Brief for Safe Supply

DUAL PUBLIC HEALTH EMERGENCIES: A BRIEF FOR SAFE SUPPLY
Prepared by New Westminster Overdose Community Action Team

Rationale

In April 2016, a public health emergency was declared in response to increasing overdose and overdose deaths across British Columbia. Between 2016 and 2019, 5,010 British Columbians have died to an accidental drug overdose¹. Contributing factors include criminalization of drugs and people who use drugs, a contaminated drug supply, and ongoing stigma relating to drug use. To address these factors, public health advocates recommend the implementation of safe supply programs². Safe supply is defined as “a legal and regulated supply of drugs with mind/body altering properties that traditionally have been accessible only through the illicit drug market”.³ A number of pilot projects, and research studies have demonstrated the success of regulated heroin programs, including NAOMI⁴, SALOME^{5,6}, and MySafe Project⁷. Benefits include improved treatment adherence, less involvement in illegal activities, and fewer opioid overdose deaths, among participants receiving heroin assisted compared to methadone therapies. A clinic based in London, Ontario has been running a safe supply program for the past four and a half years. Following patient outcomes across 120 participants, the program has experienced a 90% retention rate and zero accidental drug overdose deaths. Additional benefits include fewer visits to hospital, fewer incidents of transmissible infectious disease, and a decline in homelessness and survival sex work.

In March 2020, a second public health emergency was declared in British Columbia in response to the COVID19 pandemic. The result of facing dual public health emergencies includes heightened risk of overdose due to border closures, and an increasingly toxic drug supply, as well as risk and spread of infection among vulnerable populations, including those experiencing marginalization, who face risks associated withdrawal and other complex health conditions, and who are unable to isolate due to lack of housing⁸.

¹ <https://www2.gov.bc.ca/assets/gov/birth-adoption-death-marriage-and-divorce/deaths/coroners-service/statistical/illicit-drug.pdf>

² <https://healthydebate.ca/opinions/safer-supply-opioids>

³ <https://vancouver.ca/files/cov/capud-safe-supply-concept-document.pdf>

⁴ Meldon, K., Srivastava, A., and Conway, B. (2011) Is There a Need for Heroin Substitution Treatment in Vancouver’s Downtown Eastside? Canadian Journal of Public Health, Vol.102(2), pp.84-86

⁵ Boyd, S., Murray, D., SNAP, and Macpherson, D. (2017). Telling our stories: heroin-assisted treatment and SNAP activism in the Downtown Eastside of Vancouver. Harm Reduction Journal, Vol.14(1), pp.1-14

⁶ <http://www.providencehealthcare.org/salome/about-us.html>

⁷ <https://www.medscape.com/viewarticle/926231>

⁸ British Columbia Centre on Substance Use (2020). Risk Mitigation in the Context of Dual Public Health Emergencies. Retrieved from: www.bccsu.ca/covid-19

An interim clinical guidance document has been developed by the BC Centre of Substance Use (BCCSU) to provide health care providers with direction on how to support individuals with substance use disorders self-isolate and reduce harm to themselves and others. Currently, it is at the discretion of physicians to follow the clinical guidelines that have been proposed, in response to the COVID19 pandemic.

With implementation of the BCCSU clinical guidelines, the following benefits are anticipated: fewer people experiencing withdrawal symptoms; fewer people at risk for drug overdose; and more people able to self isolate, reducing the spread of infection and demand on an overtaxed health care system.

New Westminster

New Westminister has been identified as a priority community with respect to the overdose crisis⁹. Between 2016 and 2019, approximately 90 people have died from an accidental drug overdose¹⁰. New Westminister is a densely populated community that has historically provided many social support services, specifically for mental health and substance use. With service closures across Metro Vancouver, folks from neighbouring communities are likely to travel to New Westminister for safety and access to essential services. Proactive measures to protect the community against the spread of COVID19 is critical. Access to safe supply may be one precautionary measure to protect the city from the spread of infection, and keep residents safe from experiencing fatal and non-fatal drug overdose.

Recommendations

The BCCSU has developed clinical guidelines, and hosted a number of webinars, to provide direction to physicians and pharmacists on how to support individuals with substance use disorders during the COVID19 pandemic. BC Yukon Drug War Survivors (BCYDWS)¹¹ have also set up an advocacy line, and are able to provide telephone support to both patients and physicians as they navigate this process.

To support implementation of the BCCSU clinical guidelines in New Westminister, the identification of physicians willing to champion this work is essential. Possible strategies include:

- Encouraging eligible patients to approach their family physician with the support from community advocates (BCYDWS, Project ALLIES),

⁹ <https://www2.gov.bc.ca/gov/content/overdose/how-the-province-is-responding>

¹⁰ <https://www2.gov.bc.ca/assets/gov/birth-adoption-death-marriage-and-divorce/deaths/coroners-service/statistical/illicit-drug.pdf>

¹¹ <http://www.bccdc.ca/resource-gallery/Documents/Statistics%20and%20Research/Statistics%20and%20Reports/Epid/Other/BCYADWSPrioritiesCommunityReport.pdf>

- Approaching the Division of Family Practice to organize a network of interested physicians, and establish a local community of practice with structured supports,
- Referring eligible patients to prescribing clinics in neighbouring communities (e.g., Rapid Access and Addictions Centres)

Physicians already prescribing Opioid Agonist Therapies may be more familiar and willing to adopt BCCSU's interim clinical guidelines (e.g., Lower Mainland Drug Freedom Clinic). Throughout the duration of the pandemic, BCCSU recommends that doctors prescribe carries, where daily witnessing is not possible. The City of New Westminster may want to approach local pharmacies currently delivering methadone carries (e.g., Health Care Pharmacy), as well as agencies who may be willing to receive patient medications to aid in the delivery process, and reduce physical contact (e.g., Lookout Health and Housing Society for tenants, Lower Mainland Purpose Society for folks experiencing homelessness).

Access to housing, in addition to safe supply, will likely enhance efforts to reduce spread of infection, and the incidence of accidental drug overdose deaths, among at-risk and vulnerable populations. Lastly, the implementation and evaluation of safe supply initiatives should include the meaningful involvement of people who use drugs to ensure program relevance and success.