



TO: GENERAL COMMITTEE

SUBJECT: USE OF CITY RESOURCES TO SUPPORT THE SIMCOE MUSKOKA OPIOID STRATEGY AND ADDRESS THE OVERDOSE CRISIS

PREPARED BY AND KEY CONTACT: D. MCALPINE, GENERAL MANAGER OF COMMUNITY AND CORPORATE SERVICES, EXT. 4421

SUBMITTED BY: D. MCALPINE, GENERAL MANAGER OF COMMUNITY AND CORPORATE SERVICES

GENERAL MANAGER APPROVAL: D. MCALPINE, GENERAL MANAGER OF COMMUNITY AND CORPORATE SERVICES

CHIEF ADMINISTRATIVE OFFICER APPROVAL: M. PROWSE, CHIEF ADMINISTRATIVE OFFICER

RECOMMENDED MOTION

1. That the following actions supporting the Prevention Pillar of the Simcoe Muskoka Opioid Strategy (SMOS) be undertaken:
 - a) Continue the Connected Core initiative undertaken through the Mayor's Office to coordinate outreach efforts in the community, as part of the Shift Government Project until the end of 2019 and evaluate the program for continued support and enhancements as part of the 2020 Business Plan and Budget;
 - b) Utilize the City's existing communication tools to promote the SMOS website and its information and resources, including the details regarding the health effects and harms associated with opioid and other illegal drug use and substance use disorder;
 - c) Provide information and resources to the City's manufacturing and construction industry sectors about opioid misuse and addictions/substance use disorder that may result from injuries often associated with these sectors;
 - d) Continue to support staff and Council participation in the Barrie Drug Awareness Partnership (BDAP);
 - e) Provide City staff with information regarding the Alberta Family Wellness Initiative, an educational initiative;
 - f) Complete the Community Safety and Well-being Plan to address the root causes of crime and complex social concerns no later than January 1, 2021 as legislated by the Province; and
 - g) Participate in anti-stigma events such as the Barrie CommUNITY Day baseball game organized through the BDAP members.
2. That the following actions supporting the Treatment/Clinical Practice Pillar of the SMOS be undertaken:
 - a) Utilize the City's existing communication tools to promote Rapid Access Addiction Medicine clinic and Withdrawal Management services at Royal Victoria Health Centre;
 - b) Partner with the Simcoe Muskoka District Health Unit to host a career fair specific to the field of mental health and addictions; and

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- c) Send correspondence to the Province of Ontario encouraging the provision of additional treatment and rehabilitation services and resources in Barrie.
 3. That the following actions supporting the Harm Reduction Pillar of the SMOS be undertaken:
 - a) Implement several needle exchange bins within City parks or parking lots on a pilot basis (in addition to containers already located within park washrooms), to be funded to a maximum of \$30,000 from the Strategic Priorities Reserve;
 - b) Install nasal spray Naloxone kits as part of a one year pilot inside City facilities in the area of publicly accessible Automated External Defibrillators (AEDs) for public use, where such AEDs are located in a manner that the temperature can be maintained between 15 and 30 degrees Celsius, with the cost of the pilot to be funded to a maximum of \$15,000 from the Strategic Priorities Reserve; and
 - c) Continue offering Naloxone training to downtown businesses and stakeholders, through the Connected Core pilot.
 4. That the following actions supporting the Enforcement Pillar of the SMOS be undertaken:
 - a) Send correspondence to the Ministry of the Solicitor General requesting enhanced funding to enforce laws surrounding illicit drug supply, production, and distribution; and
 - b) Send correspondence to Ministry of the Attorney General supporting the application of higher penalties for individuals convicted of manufacturing and distributing opioids and other illegal drugs.
 5. That the following actions supporting the Emergency Management pillar of the SMOS be undertaken:
 - a) Provide data from the Barrie Fire and Emergency Services' responses to assist in timely reporting of overdose outbreaks;
 - b) Participate in coordinated responses to complex events of opioid overdose outbreaks; and
 - c) Support the Simcoe Muskoka District Health Unit or other Health agencies through the City's existing communication tools with respect to dissemination of information concerning tainted drug supplies resulting in opioid overdose outbreaks.
 6. That correspondence be sent to the Province advising that the City of Barrie supports the recommendations identified in the Association of Municipalities of Ontario's September 4, 2019 paper entitled "Addressing the Opioid Overdose Emergency In Ontario: Municipal Recommendations for a Provincial Response" attached as Appendix "A" to Staff Report CCS005-19.

PURPOSE & BACKGROUND

Purpose

7. The purpose of this report is to provide recommendations regarding the most effective use of City resources to support the Simcoe Muskoka Opioid Strategy.
8. This report will not address the matter of a Supervised Consumption Site (SCS) in Barrie, as this matter has been deferred pending the Site Review being undertaken by the applicants.

Background

9. On March 25, 2019, City Council adopted motion 19-G-066 concerning the Implications of declaring a local emergency related to the opioid crisis

“19-G-066 IMPLICATIONS OF DECLARING A LOCAL EMERGENCY RELATED TO THE OPIOID CRISIS

That staff be directed to work with the Simcoe Muskoka Opioid Strategy members and the Barrie Drug Awareness Partnership to determine the most effective use of City resources to support the Strategy.”

Simcoe Muskoka Opioid Strategy (SMOS)

10. The Simcoe Muskoka Opioid Strategy identified two foundational pillars (Data and Evaluation and Lived Experience) and five action pillars (Prevention, Treatment/Clinical Practice, Harm Reduction, Enforcement and Emergency Management). Goals were developed for each of the action pillars. A number of specific activities were identified for each goal, and categorized as either short (2018) or long term (2019-2020), with many requiring ongoing maintenance.
11. The pillars and the goals for each are identified below:

Prevention

- To increase knowledge and skills in addressing the harms associated with misuse (including illicit and prescription use).
- Engage target population including at-risk groups in the development of educational resources and health promotion initiatives related to opioid misuse (at-risk youth, lived experience, seniors).
- Support the procurement/development and dissemination of patient resources that can be used by health care practitioners in the education of appropriate use of opioids, including alternatives to opioid therapy. Collaborate with Treatment/Clinical Pillar.
- Collaborate with other pillars on the development of a SMOS website, to facilitate sharing of information and resources with community partners.
- Collaborate on implementation of evidenced-based initiatives that address root causes of opioid misuse as they relate to: mental health and addictions, and early childhood development and parenting.
- Collaborate with other pillar groups around anti-stigma initiatives/campaigns.

Treatment/Clinical Practice

- Increase awareness of existing resources for treatment of opioid use disorder.
- Provide educational opportunities for primary care providers and pharmacists on the topics of treatment of opioid use disorder, tapering of prescription opioids, opioid agonist treatments and non-opioid pain management.

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- Offer to support to First Nations, Inuit, Métis (FNMI) communities in the implementation of the Indigenous Led Opioid Strategy.
 - Facilitate local mentorships between addiction medicine and primary care.
 - Improve timely access to addiction treatments throughout the North Simcoe Muskoka Local Health Integration Network.
 - Improve access to interdisciplinary chronic pain treatment.
 - Improve management of Neonatal Abstinence Syndrome.

Harm Reduction

- Increase awareness of harm reduction strategies for people who use illicit and prescription opioids.
- Increase Naloxone distribution by area pharmacies, community partner agencies serving at-risk populations and local emergency rooms.
- Increase access and availability of Needle Exchange Program (NEP) services including drug checking.
- Increase access to overdose prevention sites (OPS) and supervised consumption sites (SCS) in the region.
- Increase communication among SMOS community partners and the general public regarding the work of SMOS and status of the opioid-related harm in Simcoe Muskoka in collaboration with other pillars.
- Decrease stigma regarding people who use drugs in interactions with the general public, including health care practitioners and first responders.
- Decrease barriers in the 911 response to an opioid overdose for people who use drugs.

Enforcement

- Increase communication across law enforcement agencies in order to identify and target those individuals who manufacture and distribute opioids.
- Reduce the supply of illicit opioids in the Simcoe/Muskoka area through a cohesive enforcement strategy.

Emergency Management

- Foster ongoing, comprehensive situational awareness for the Simcoe and Muskoka Emergency Response Committee of current issues related to opioid abuse, misuse and addiction.
- Enable surveillance for timely alerting about, and response to, opioid overdose outbreaks.
- Ensure a constant state of readiness to respond to and to facilitate a coordinated response to complex events of opioid overdose outbreaks (multi-person or multi-site).
- Support timely coordinated communications among key stakeholders and to the public.

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- Collaborate on activities related to opioid overdose outbreaks which may include prevention, harm reduction, treatment and enforcement.
 - Facilitate timely after-action review following a coordinated response for the purposes of continuous improvement.
12. In March of 2019, a 2018 Status Update Report was prepared by SMOS regarding the Strategy. A copy of the Update is available at:
http://preventod.ca/Shared%20Documents/SMOS%20Status%20Update_Final2.pdf.

13. The following is a small sampling of the accomplishments of the SMOS Team identified in the Status Update Report:

Prevention

- 84 opioid-related media stories in print/online, TV and radio promoting key messages to the general public on health effects and harms associated with opioid use.
- 19 videos to reduce stigma at YouTube SMDHU site with 79,961 views from October to December 2018.
- Dissemination of opioid resources, i.e. fact sheets for schools/parents/students resources.
- Determined the demographics of high-risk population (young adult, at-risk and/or lived experience) to tailor education and awareness initiatives.

Treatment/Clinical Practice

- 132 Health professionals trained in treatment of opioid use disorders.
- The creation of the SMOS website as a central web link for all opioid use disorder treatment resource information.
- A formal liaison was established between Indigenous Led Opioid Strategy and SMOS for ongoing collaboration.
- Implemented a regional Rapid Access Addiction Medicine program delivered over multiple sites.
- Increased the number of community addiction counsellors throughout North Simcoe Muskoka Local Health Integration Network.

Harm Reduction

- 3 New Needle Exchange Sites implemented to increase access to safe supplies.
- 7,187 Naloxone Kits distributed (5,567 by pharmacies and 1,620 by health agencies).
- Explored the feasibility of creating a Supervised Consumption Site.

Enforcement

- Provision of targeted enforcement based on timely intelligence.
- Increased the sharing of timely intelligence across all law enforcement through the development of an intelligence working group to identify opioid traffickers in the Simcoe Muskoka region.

Emergency Management

- Developed the Simcoe Muskoka Vulnerable Populations Notification Protocol for opioid-related emergencies.

Barrie Drug Awareness Partnership (BDAP)

14. The Barrie Drug Awareness Partnership's purpose is to collaboratively address community concerns regarding substance use issues. The Partnership membership includes participation from Mental Health and Addictions Service Providers, Health Care Providers and Administrators, Emergency Responders (Law Enforcement, Emergency Medical Services and Fire and Emergency Services), Public Health, School Boards, Post-Secondary Institutions, Peer Advocates, Municipal Officials, and Social Services.
15. BDAP's objectives are as follows:
 - To share drug related data and resources
 - To identify educational opportunities and appropriate stakeholders to address them
 - To respond to community requests for drug awareness resources
 - To identify gaps in drug knowledge on trending substance issues across the city of Barrie
 - To identify gaps in services and response to substance use in Barrie
16. BDAP is currently meeting on a monthly basis.

Shift Government Project

17. As part of the City of Barrie's 2019 Budget, City Council approved the three-year Shift Government Project. The project which is being led by the Mayor's Office aims to bring short-term and long-term results to complex problems, by addressing root causes as well as by fostering innovative collaborations and partnerships across various sectors.
18. Shift Government is currently working with organizations to pilot a number of initiatives directly related to the root causes of the opioid crisis (poverty, food security, access to affordable housing and health care, mental health and addictions and/or substance use disorder) as well as its impacts. The following are a few examples of the many initiatives undertaken through Shift Government, with a focus on initiatives directly related to the opioid crisis and its root causes:

Health Innovation Week – (MaRS/RVH/LifeLabs - Design Challenge)

Building on the Simcoe Muskoka Opioid Strategy, a design thinking session was held in Spring, 2019 with community stakeholders. The session aimed at working with diverse members of the community to co-design new approaches to addressing the opioid crisis as well as addictions/substance use disorder prevention in Barrie.

Connected Core – (RVH/Barrie Police/City)

The goal of the Connected Core program is to coordinate existing outreach efforts in the community. The Connected Core Coordinator has been holding de-escalation training as well as Naloxone training for downtown businesses and stakeholders. The Coordinator is also working with the Georgian Employment Centre to develop a job bank of casual part time jobs for marginalized people. This Job Bank provides meaningful work for people who are farthest away from job market and helps facilitate relationship building between business owners and marginalized people. A number of downtown businesses have signed up to date including the City of Barrie and the Barrie Public Library.

Chalmers Bot, developed in partnership with AmpleLabs.

Only the second of its kind in Ontario, the Chalmers Bot is connecting the community to services as well as supports available in the City of Barrie. As part of the pilot, phase one launch focuses on hot meals, clothing, crisis supports and other urgent services needed in the community. The Bot aims to connect individuals in need with the right resources, at the right time through a user friendly mobile interface.

Shift Government will provide a memorandum to Council on Nov 4th, 2019 with updates on all initiatives and pilots.

ANALYSIS

Barrie Drug Awareness Partnership (BDAP) Suggestions

19. In response to Council's direction, the General Manager of Community and Corporate Services and/or the Fire Chief have been attending the regular meetings of BDAP.
20. Staff requested feedback from the organizations represented at BDAP with respect to the most effective use of City resources to support the SMOS. At the June 25, 2019 BDAP meeting a number of community actions broadly related to the opioid crisis were received, as follows:
 - Street Outreach worker(s) that would work evenings past 9 pm and on weekends to support the current outreach that is being offered by some organizations within the City.
 - Liaison at Royal Victoria Health Centre (RVH) emergency department to link patients to the Rapid Access Addiction Medicine Clinic and Withdrawal Management services at RVH.
 - Provide Barrie Transit operators Naloxone training and kits on each bus.
 - Increase access to Naloxone in the community by making it available alongside AEDs in the community recreation centres and other municipal properties.
 - Promotion of the Alberta Family Wellness Initiative and Brain Story Certification (free online education/modules) to address root causes of addiction. <https://www.albertafamilywellness.org/>
 - Preventure program-<https://positivechoices.org.au/teachers/preventure> being explored by the Simcoe County District School Board identifies risk traits in youth and how to work with the youth that have these traits.
 - There is a local group of individuals who are in various stages of recovery (who have a baseball team formed known as the "fellowship") who play in tournaments and fundraisers in the area. It was suggested that a friendly or fundraising match could be made between the "Fellowship" team and a team from City of Barrie staff or Barrie Police or Barrie Fire as an anti-stigma initiative.

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21. The timing of these suggestions was aligned with the initiation of a number of the Shift Government Project initiatives. In particular, the Connected Core initiative was started at approximately the same time as the BDAP feedback was received. As a number of organizations have been providing outreach services; the Connected Core initiative is attempting to align existing resources in order to avoid duplication as well as fill voids and identify potential gaps. It has developed various printed and online resources for all Community Partners to increase awareness of existing services as well as proper and timely referrals. As a result, the RAAM clinic has seen a tremendous increase in patient referrals since the pilot commenced.
 22. Several of the actions identified by BDAP would be delivered by organizations/agencies other than the City of Barrie. Examples include providing a liaison at RVH and the Preventure program. It is not immediately clear how the City could directly support those initiatives. As attendance at BDAP continues and additional information becomes available, should there be a role for the City, staff will report back on these matters.
 23. The Alberta Family Wellness Initiative is an educational initiative that takes a science based approach to addressing early childhood development and preventing harmful substance use, through promoting positive brain development. Brain Story Certification is a free in-depth course for anyone who wants to learn more about the science of brain development. There are 19 self-paced modules representing an approximately 20 hour commitment for interested individuals. Additional details are available at <https://www.albertafamilywellness.org>. Information will be made available to City staff about the Alberta Family Wellness Initiative and Brain Story Certification.
 24. For the past several months, BDAP meetings have focused on the coordination of an anti-stigma event, the Barrie CommUNITY Day baseball game. The idea for the baseball game came from a Peer Advocate member of BDAP who felt that the division in this community could be alleviated by a friendly game or event between those in recovery/the Downtown Core Community and First Responders.
 25. Barrie's first CommUNITY Day baseball game between the Downtown Core Community and First Responders as well as members of Council was held on Sunday, September 29th. The event was very successful, and has formed a positive basis for future anti-stigma events.
 26. In addition to the staff representation on BDAP, a member of Council was invited to join the Partnership. On September 30, 2019, Councillor Jim Harris was appointed by Council as its representative on BDAP.

Naloxone Kit Availability and Administration

27. The Simcoe Muskoka District Health Unit website states, "Naloxone is a medication that can temporarily reverse the effects of an opioid overdose. It actually 'kicks' the opioid off of the receptor in the brain, temporarily blocking its harmful effects and helping the person breathe again. It starts to work in 1 – 5 minutes and works for about 30 -90 minutes. Once Naloxone wears off, the opioids will return back to the opioid receptors in the brain and the overdose symptoms can return. It is important to call 911 in each and every opioid overdose.
28. Naloxone only works with opiates. It does not prevent overdoses with Alcohol, Cocaine, Ecstasy, LSD etc. but it would not cause any harm if it was given in circumstances where opioids were not used."

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29. In terms of increasing the availability of Naloxone kits, the Ontario government covers the cost of Naloxone for all residents. Individuals who don't have a health card or don't want to share their information can still obtain Naloxone under the Province's program. Each nasal spray Naloxone kit includes a hard case, 2 doses of Narcan® Nasal Spray, a one-way breathing barrier, a pair of non-latex gloves, a card that identifies the person trained to give the Naloxone and an insert with instructions. Prior to receiving the kit, individuals are required to be provided training on overdose prevention, recognizing an overdose and how to respond.
 30. Naloxone kits can be picked up at many pharmacies, needle-exchange programs and community health programs by someone currently using opioids, a past opioid user at risk of returning to opioid use, a family member or friend of someone who is at risk of an opioid overdose. Prior to receiving the kit, individuals are required to be trained by the pharmacy on overdose prevention, recognizing an overdose and how to respond. Organizations and businesses are not eligible to access these free kits.
 31. The Ministry of Health and Long-Term Care only authorizes Health Units to provide kits to Community Health Centres, Hospitals with emergency departments and urgent care centres, St. John Ambulance branches, Police Services, Fire Services, AIDS Service Organizations, Outreach Organizations, Shelters and Withdrawal Management Programs. As such, the City of Barrie and other businesses are not eligible for free Naloxone kits from the Health Unit either.
 32. Naloxone kits and training are also available through scheduled sessions as part of the Connected Core initiative. It is available to all downtown businesses and other stakeholders.
 33. In 2017, the Barrie Fire and Emergency Service was the first fire service in Ontario to provide and train all of its Fire fighters in the administration of Naloxone, under the oversight of the Department's Medical Director. The kits utilized by Barrie Fire and Emergency Service are accessed through the Ontario Naloxone Program administered by the Health Unit. Trained emergency responders are available within proximity to City owned/operated facilities located within Barrie such as community centres.
 34. To supplement response by emergency responders, publicly accessible Naloxone kits are recommended to be located next to Automated External Defibrillators (AEDs) in City facilities, where such AEDs are located in a manner that the temperature can be maintained between 15 and 30 degrees Celsius. The potency of the Naloxone can be diminished if it is allowed to get too hot or freeze. There are approximately 30 indoor locations where these kits could be placed for public use. This action is recommended as a one year pilot to allow the project to be evaluated.
 35. Should General Committee and Council support the recommendation to pilot Naloxone kits at indoor City facilities for public use, staff would document the decision and establish procedures related to operational matters. The 5 Steps to Respond to an Opioid Overdose (http://www.health.gov.on.ca/en/pro/programs/drugs/opdp_eo/notices/insert_exec_office_201803_21.pdf) would be posted with the kits. Staff would be responsible for checking the content of the kits on a regular basis to ensure that the Naloxone dose is unexpired and still in the kit as well as replacing the Naloxone dosage or other kit components if used. Staff would also be responsible for proper disposal of any expired medicine.



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36. Staff have been advised that the cost of two doses of Naloxone are \$145. As this does not represent the full kit contents, it is estimated that the cost to implement signage and Naloxone kits at the 30 locations, plus additional dosages for usage or theft in the first year would be \$10,000-\$15,000. There would be operational costs associated with replacement of the Naloxone based on usage and expiry. It is estimated that \$2,500 - \$5,000 annually would be required to replace the Naloxone dosages, based on the medication's shelf life only. This amount would need to be incorporated into annual operating budgets in future years if the pilot was extended.
 37. The *Chase McEachern Act (Heart Defibrillator Civil Liability)*, 2007 protects owners and occupiers of premises on which an AED is installed from liability for any harm that may occur in relation to the use of the AED, provided that the owner or occupier made the AED available for use in good faith without gross negligence and properly maintained the defibrillator. There is no similar protection for Naloxone kits to date. It is the Legal Services Department's view that the City could be held liable for day to day operational matters such as failing to keep track of expired doses and refilling empty kits, but not for a policy decision to install Naloxone kits in City owned facilities.
 38. It is important to note that the Naloxone kits would be available for use by the public. City staff would not be required as part of their job duties to administer Naloxone. City staff who regularly work at facilities where nasal Naloxone kits would be installed, would be provided with awareness training related to the intended purpose, location, and use of the kits, as well as any additional health and safety training deemed appropriate to ensure they are aware of the steps to be taken in the event of an emergency, including how to address any risks associated with the public's use of the nasal Naloxone kits. The Simcoe Muskoka District Health Unit has advised that it would be able to provide a training session related to the administration of Naloxone for individuals who may be interested in responding. Should a member of City staff respond, they would be acting outside of their role as a City employee, which would provide them and the Corporation with better protection from liability under the *Good Samaritan's Act*.
 39. In terms of the suggestion that Barrie Transit buses be equipped with kits and the drivers trained to administer Naloxone the following details are provided. Staff consulted with other transit agencies and the City's contractor with respect to the suggestion to provide Barrie Transit operators Naloxone training and kits on each bus. Staff were unable to find other transit agencies who have their operators carry Naloxone kits. Some agencies allow their Transit Police to carry them. As an example, the TTC has indicated that there needs to be more consultation done before they make the decision to expand the kits to all operators. The City's transit contractor has indicated it is unwilling to train its operators on the administration of Naloxone at this time until there is further work done in the industry to ensure the proper and safe application can occur.
 40. Additional suggestions were subsequently received as part of a concept to become a "Naloxone ready community". One of the actions identified was to ensure that the City's contracted security personnel have ready access to Naloxone kits and are trained on its use. The City's contracted service provider has indicated that requiring the security guards to be carry and/or be trained on the use of Naloxone could be considered but it would be at an additional cost to the municipality. The additional cost would reflect not only the acquisition of the kits for their staff and training but would also covered the required insurance to assist in protecting the security company from liability. Given the recommendation to make the kits publicly accessible, amending the security contract is not recommended at this time. This will be reviewed when the contract expires.
 41. It was also suggested that the holders of municipal special event permits have ready access to kits and individuals trained on the administration of Naloxone. While this could be added as a requirement to any special event permit, the City does not have the resources to check throughout the duration of each event to ensure compliance with this condition.

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42. Other suggestions received included requiring any hotel or motel within the City boundaries to have ready access to kits and appropriate signage and any facility licensed by the Alcohol and Gaming Commission of Ontario (AGCO) to have access to kits. The City of Barrie does not require hotels or motels operating within the community to have a business licence. A business licence would be the mechanism to implement such operating criteria. Another option would be to pass a by-law to make this a requirement within the community.
 43. The City does require facilities licensed by the AGCO to have a business licence. As such, this could be added as operating criteria to the licence. Similar to the special event permit process, the City does not have the enforcement resources to check that the hotels and motels or AGCO licensed businesses are maintaining the kits and the requirement training.
 44. The inability to ensure compliance with an imposed condition or by-law of the City puts the municipality at risk of liability and as such is not recommended. However, staff can encourage special event permit holders and business owners to have access to kits.

Additional Recommendations

45. In support of the ideas received from BDAP as well as a review of the Strategy itself, the following additional recommendations are provided:

Prevention Pillar

- The Shift Government Project and in particular, the Connected Core initiative to coordinate outreach efforts in the community is recommended to be continued throughout 2019. The Project would be evaluated for continued support and/or enhancements as part of the 2020 Business Plan and Budget.
- The City has a number of existing communication tools that could be utilized to further promote the SMOS website and its information and resources. The City's website, social media, etc. could provide additional support to communicate the health effects and harms associated with opioid and illegal drug use and substance use disorder.
- Based on research undertaken in Surrey, British Columbia, the manufacturing and construction industry sectors have been impacted more heavily than other sectors by opioid misuse and addictions/substance use disorder. In Surrey, the incidence of injuries in these sectors appears to be higher than other sectors, and may be influencing the impact on opioid misuse and substance use disorder. The City could utilize its communications expertise to ensure that businesses in these sectors are advised of the correlation, the harms associated with opioid and illegal drug use and the services available to support individuals.
- As noted earlier in the report, both staff and a member of Council have been invited to participate as part of BDAP. This involvement in BDAP is recommended to continue.
- Completion of the Community Safety and Well-being Plan as legislated by the Province will identify actions that could be taken to address the root causes of crime and complex social concerns. A Community Safety and Well-being Advisory Committee has been struck and will be undertaking community consultation to inform the development of the required Community Safety and Well-being Plan. The Committee has developed a work plan to allow it to deliver the Plan no later than January 1, 2021 as legislated by the Province.

- Anti-stigma events such as Barrie's first CommUNITY Day can assist in reducing barriers within the community, particularly for those who may be hesitant to utilize 9-1-1 when they need assistance. It is recommended that the City continue to participate in these types of events.

Treatment/Clinical Practice Pillar

- Similar to the recommendation under the Prevention Pillar, the City's existing communication tools could be utilized to promote the Rapid Access Addiction Medicine (RAAM) clinic and Withdrawal Management services at Royal Victoria Health Centre to ensure that individuals requiring these services are aware of their availability. Based on details provided during BDAP meetings, there appears to be a lack of awareness of the RAAM clinic and under what circumstances its services can be accessed. These communications would be done in partnership with the Royal Victoria Health Centre communications department.
- There is a lack of affordable treatment and rehabilitation services in the Barrie Area, particularly residential treatment facilities. It is recommended that a letter be sent to the Ministry of Health requesting that more funding be provided to support, enhance and expand treatment and rehabilitation services, as well as addiction/substance use disorder prevention and education, and harm reduction measures in the City.

Harm Reduction Pillar

- The City has located needle exchange bins within the washrooms of many of its parks. Additional larger outdoor needle exchange bins within selected parks/parking lots would provide access when the washrooms are locked or otherwise unavailable. If the recommendation is accepted, staff would further discussions that have already occurred with the Health Unit and possible collection service providers to determine the most appropriate locations and collection schedule, on a pilot basis. Staff recommend that funding to a maximum of \$30,000 from the Strategic Priorities Reserve be provided for this pilot.
- The City's existing communication tools could be used to further promote the harm reduction work of SMOS.

Enforcement Pillar

- There is insufficient funding available to enforce laws surrounding illicit drug supply, production, and distribution. It is recommended that correspondence be sent to the Ministry of the Solicitor General requesting enhanced funding.
- In addition, the Ministry of the Attorney General should be encouraged to continue and expand its application of higher penalties for individuals convicted of manufacturing and distributing opioids and other illegal drugs.

Emergency Management Pillar

- Barrie Fire and Emergency Service is collecting data concerning calls for service and response related to suspected drug overdoses. Should patterns regarding the number and nature of these calls change, this information can be made available to BDAP members to provide timely information about suspected tainted supplies resulting overdose outbreaks. This information could be utilized to warn members of the community regarding changes to the supply and its impact.
- Barrie Fire and Emergency Service's participation on BDAP is part of its collaboration activities related to opioid overdose outbreaks. Barrie Fire and Emergency Service is

willing to participate in coordinated responses to complex events of opioid overdose outbreaks.

- The City's communication tools could be utilized to support the messaging developed by the Simcoe Muskoka District Health to warn the community about tainted drug supplies or significant overdose outbreaks. The City would rely on the Health Unit as the lead in this matter.

Association of Municipalities of Ontario Paper "Addressing the Opioid Overdose Emergency In Ontario: Municipal Recommendations for a Provincial Response"

46. Earlier this year, the Association of Municipalities of Ontario (AMO) recognized that municipal services, including public health, social services, police, fire and paramedics across Ontario, were under great pressure to keep up and combat rising opioid-related harms and death rates and that local responses to the opioid overdose emergency needed provincial leadership and support. An Expert Municipal Working Group on Opioids was formed to provide a broad range of recommendations to inform a provincial response.
47. The Working Group was comprised of members of public health, paramedic, social services, law enforcement and other municipal sector representatives. A staff member from the City of Barrie and one of the co-chairs of the SMOS participated as members of the Working Group.
48. On September 4, 2019 AMO's Board of Directors (based on the advice of AMO's Health Task Force, aided by an Expert Municipal Working Group on Opioids) adopted the recommendations included in the paper entitled "Addressing the Opioid Overdose Emergency In Ontario: Municipal Recommendations for a Provincial Response". A copy of the paper is available at <https://www.amo.on.ca/AMO-PDFs/Reports/2019/Addressing-the-Opioid-Overdose-Emergency-in-Ontari.aspx> and attached as Appendix "A" to Staff Report CCS005-19.
49. The initial recommendations for action in 2019 included the following:
 - That the Province publicly affirms the seriousness of the opioid overdose emergency and commit to take all necessary measures to save lives and prevent harm, including the provision of long-term funding for existing programs as well as new funding streams, where necessary.
 - That the Province undertakes an 'all of government' effort to develop a comprehensive provincial drug strategy that addresses the opioid overdose emergency, based on a public health approach that addresses the social determinants of health, and that takes a non-discriminatory approach to overdose prevention and harm reduction. This strategy should cascade down to guide local drug strategy development and implementation with accompanying resources so that municipalities in Ontario have comprehensive, multi-faceted, funded drug strategies in place led by dedicated local coordinators. Further, progress toward implementation should be measured with performance indicators and be evaluated for outcomes achieved.
 - That the Ministry of Health appoint a dedicated coordinator focused solely on the provincial response to the emergency, and tasked with building partnerships between various sectors and act as a liaison between the government and the sectors.
 - That the provincial coordinator establishes formal means to engage with all relevant stakeholders, including municipal governments, public health units, and people with lived experience in order to hear advice and feedback on new and ongoing initiatives.

50. A further 18 recommendations are also included in the paper for consultation with stakeholders. It is recommended that a letter be sent to the Province indicating the City of Barrie's support for the recommendations and requesting the Province to implement the recommendations.

SMOS Opportunities for Municipal Action

51. On October 10, 2019, the SMOS provided a number of items identified as opportunities for additional municipal action (for any of the municipalities in Simcoe-Muskoka area). While many of the items were similar to the suggestions from BDAP, there were a number of additional suggestions. The following is a summary of the additional suggestions and staff's comments regarding the suggestions that have not been discussed earlier in this report:

Opportunity identified by SMOS for Municipal Action	Response
Contribute funding for a drug strategy coordinator at the County, District or Municipal Level	Should the Simcoe Muskoka District Health Unit include in its annual budget request, funding for it to hire a drug strategy coordinator, the City would consider this request. Staff are not proposing the creation of a stand-alone City of Barrie drug strategy coordinator position.
Continue to work on implementing your municipal affordable housing strategy using a Housing First Approach	The City of Barrie approved its 10-year Affordable Housing Strategy in 2015. It continues to implement the strategy. On September 23, 2019 a Public Meeting was held to review a proposed Community Improvement Plan to replace the existing Built Boundary and Georgian College Neighbourhood Community Improvement Plans and offer financial incentives for affordable housing projects and mixed use developments within the Urban Growth Centre and Strategic Growth Areas within the Built Boundary. The Housing First Approach will be considered in the report to General Committee regarding this matter.
Support the number of local residents seeking training for careers in mental health and addictions.	Staff are recommending that the City partner with the Simcoe Muskoka District Health Unit to host a career fair specific to the field of mental health and addictions.
Support supervised consumption site models in the community	As noted earlier, this report will not address the matter of a Supervised Consumption Site (SCS) in Barrie, as this matter has been deferred pending the Site Review being undertaken by the applicants

ENVIRONMENTAL MATTERS

52. There are no environmental matters directly related to the recommendation.

ALTERNATIVES

53. The following alternatives are available for consideration by General Committee:

Alternative #1

General Committee could receive this report for information purposes only and take no further action.

Although this alternative is available, it is not recommended. A number of actions have been identified that the City of Barrie could undertake to support the SMOS.

Alternative #2

General Committee could recommend additional actions that the City could undertake utilizing existing resources.

This alternative is available. Staff believe that they have identified key actions that could support the SMOS.

FINANCIAL

54. Most of the recommendations identified in this report, would utilize existing resources. The pilot initiative to add larger needle exchange bins to the City parks would require funding. It is recommended that a maximum of \$30,000 be provided from the Strategic Priorities Reserve to fund this pilot.
55. An additional \$15,000 is recommended to be provided from the Strategic Priorities Reserve for the initial provision of signage and Naloxone kits in approximately 30 City facilities.
56. The Connected Core Project is jointly funded from several organizations, including the City of Barrie. The Project would be evaluated as part of the 2020 Business Plan and Budget for continuation/expansion.

LINKAGE TO 2018-2022 STRATEGIC PLAN

57. The recommendations included in this Staff Report are related to the following goal contained in 2018-2022 Strategic Plan:
- ✓ Fostering a safe and healthy community
58. The recommendations identified would enhance the efforts to date to collaborate to address social issues, especially the opioid crisis.