

TO: Chair and Members of the Board of Health  
FROM: Christopher Mackie, Medical Officer of Health / CEO  
DATE: 2018 February 15

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## TEMPORARY OVERDOSE PREVENTION SITE UPDATE

### **Recommendation**

*It is recommended that the Board of Health receive Report No. 007-18 re: “Update-Temporary Overdose Prevention Site” for information.*

### **Key Points**

- As of January 19, 2018, the Middlesex-London Health Unit received the first approval for a Temporary Overdose Prevention Site (TOPS) in Ontario.
- At the time of writing this report, site preparations are underway to support provision of TOPS services at 186 King Street.
- Reallocation of approximately \$20,000 in funding already allocated by MLHU to the Regional HIV/AIDS Connection (RHAC) will cover the difference between site modification costs and the amount of Ministry support for capital upgrades.

### **Background**

Under new federal policy, provinces experiencing a public health emergency may request an exemption from federal law (the Controlled Drugs and Substances Act) to provide for the establishment of temporary overdose prevention sites. These sites provide necessary health services that are both accessible and free from stigma for clients to help reduce the growing number of overdose deaths affecting some of Ontario’s most vulnerable and marginalized populations. Establishing overdose prevention sites under a federal exemption protects front-line workers at these sites from criminal prosecution for providing these services.

The Middlesex-London Health Unit and its partners submitted the first application in Ontario for a Temporary Overdose Prevention Site (TOPS) on January 12, 2018. While work continues to prepare an application for a full Supervised Consumption Facility (SCF), the TOPS will allow for immediate intervention to support access to harm reduction programming and to prevent overdose deaths. On January 19, 2018, in response to the application by MLHU and its partners, the Ontario government approved one-time funding in the amount of \$130,700 to establish Ontario’s first sanctioned Temporary Overdose Prevention Site. The TOPS will be located at the Regional HIV/AIDS Connection (RHAC) at 186 King Street.

Initial data from recent public consultations in London to identify attitudes concerning SCFs indicated the importance of having integrated services present at consumption facilities to link up to wraparound support, treatment, and rehabilitation. Support from partner agencies for the TOPS program has been strong. Organizations that have committed to providing additional services within the TOPS include: the Southwestern Ontario Aboriginal Health Access Centre; the Regional HIV/AIDS Connection (RHAC); London CARES; Addictions Services of Thames Valley; the London Intercommunity Health Centre; and the Canadian Mental Health Association.

### **Site Location and Planning**

The TOPS service will be embedded with the Counterpoint Needle and Syringe Program at RHAC, which provides free harm reduction materials and information to more than eighty clients per day. Counterpoint Harm Reduction Services works with injection drug users to reduce the risk of HIV and other blood-borne

infections, and to improve access to health and social services in the London area. RHAC currently is a referral provider to other social services and healthcare agencies, such as drug and alcohol treatment centres, doctors, hospitals, social workers, legal aid, and housing and welfare support agencies. The TOPS hours of operation are Monday to Friday, 10 a.m.–4 p.m., and Saturday and Sunday, 11 a.m.–4 p.m. These hours align with the preferences stated by people who use drugs in focus groups as part of the MLHU-led consultation process conducted in November, 2017 for supervised consumption. These hours also facilitate community partners being present on site to engage clients and assist in referrals and linkages with other services.

MLHU staff worked with City of London planning staff to help identify criteria to be considered in the site-selection process for TOPS/SCF facilities. These criteria were proposed to members of London's Planning and Environment Committee and Planning Department. On the Committee's recommendation, City Council voted unanimously to adopt a policy establishing criteria and associated zoning regulations to govern planning for TOPS or SCF locations.

In order to ensure that operational and site-safety issues are appropriately addressed at the King Street location, London Police Services carried out a Crime Prevention Through Environmental Design (CPTED) review. RHAC has implemented various site modifications as a result. Middlesex-London Paramedic Services and the London Fire Department have also provided an assessment, with suggestions for enhance client safety, and assisted in developing fire and other response plans. Additionally, the Division Manager, City of London Corporate Security and Emergency Management, has reviewed the temporary site and provided recommendations from a security/emergency standpoint.

Ministry funding will provide some minimal capital start-up costs (e.g., furniture), which will be required to launch services at the site. A request has been made for approximately \$5,000 to support construction costs and to procure certain additional items, including a lockbox, tables, chairs, and mirrors (see [Appendix A](#)). Construction costs for preparing the TOPS site (to ensure that physical safety and security measures are in place for clients, staff, and the community) amount to \$25,000. Funding provided to RHAC by MLHU to support needle supply, disposal, and associated overhead is currently in a surplus position. As such, funds are available from the cost-shared pool that are being redeployed to offset \$20,000 out of the construction costs.

### **Conclusion / Next Steps**

An evaluation framework is currently being developed that will address compliance with Ministry of Health and Long-Term Care reporting requirements and track referrals to other services. The evaluation will also likely include conducting client satisfaction surveys, key informant interviews, and community and business stakeholder surveys, as well as identifying any impact on area crime rates.

This report was submitted by the Sexual Health Team, Environmental Health and Infectious Disease Division.



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