

HIV OUTBREAK COMMUNITY FORUM

Summary of Recommendations and Status

The status of each recommendation has been identified as follows:

- Engaging: Consulting with stakeholders
- Planning: Scope of work and timelines under development
- In Progress: Activities underway
- Complete: Complete and implemented

System Pathways:

Recommendation 1

Leverage existing resources to support clients to treatment.

Status: Complete

- Community Health and Harm Reduction Team (RHAC, LIHC, MLHU)

Recommendation 2

Development of specific order pathways when a PWID client enters hospital.

Status: In Progress

- PWID Pathways discussions at LHSC

Recommendation 3

Increase Outreach nursing

Status: Complete

- LIHC has requested funds from the LHIN for 2.0 FTE nursing to support MyCare Team
- MLHU has completed a proposal to increase outreach nursing within the London community (4 FTE)
- MLHU added 1.0 FTE Nursing to Outreach Team (Total of 2.0 FTE Nurses and 2.0 FTE Outreach Workers).
- Over 100 clients working with the Outreach Team
- SJHC has drafted an MOU with LIHC to provide IDCP nursing support to MyCare clinics

Recommendation 4

Discharge planning from hospital and EMDC

Status: Engaging/In Progress

- MLHU has been engaging with front line guards and social work staff at EMDC to be better notified of when discharge is happening.
- MLHU in discussion with client's lawyers/probation officer so we are aware of when a client could be released directly from the courthouse.

- Partnership between MLHU and IDCP ensuring to be at discharge planning meetings

Recommendation 5

Harm reduction services as a part of emergency clinic services within the hospitals emergency departments and medicine floors.

Status: Engaging

- Naloxone being distributed in LHSC hospitals through pharmacy to any clients.

Harm Reduction:

*Capacity Development

Recommendation 1

Development of a health care provider training module on cultural sensitivity towards Harm Reduction, stigma, barriers to accessing care and spiritual/holistic care.

Status: Engaging

Recommendation 2

Develop a role for the academic flex medical centres to provide access to primary care for the PWID population.

Status: Engaging

*Clinical Services

Recommendation 1

Continued work around Safe Consumption Facilities

Status: Complete / Ongoing

- Opioid Working Group
- IMS Working Group
- City Counsel presentation and support
- Exemption application process (Complete by January 2018)

Recommendation 2

Identify opportunities for harm reduction distribution in hospital

Status: Engaging

- Naloxone being distributed in LHSC hospitals through pharmacy to any clients.

Recommendation 3

Suboxone support in hospitals

Status: In progress

Recommendation 4

Expansion of harm reduction supplies to include other services (Pharmacies, SOAHAC, etc.)

Status: In progress

- Increased distribution of Naloxone
- Use of strategic partners to assist in distribution of kits
- Pharmacies beginning distribution of harm reduction supplies

Recommendation 5

Adopt the assertive engagement model as an important/valid option to support clients and develop a common understanding of what that means.

Status: Complete

- MLHU Outreach Team
- Community Huddle

Testing

Recommendation 1

Increase testing within hospital and EMDC

Status: Engaging / In Progress

- MLHU in discussions with LHSC and SJHC around process and feasibility of testing within the emergency department and at Parkwood Hospital
- MLHU in discussions with EMDC around feasibility for Rapid Point of Care (POC) testing to be offered within EMDC.

Recommendation 2

Explore alternatives to current HIV testing models

Status: In Progress

- Options Clinic is coordinating POC testing within multiple settings in London