



## **Evolving models of supervised consumption services and overdose prevention sites in Canada**

## **Évolution des modèles de services de consommation supervisée et de sites de prévention des surdoses au Canada**

### **Co-moderators / Co-modérateurs:**

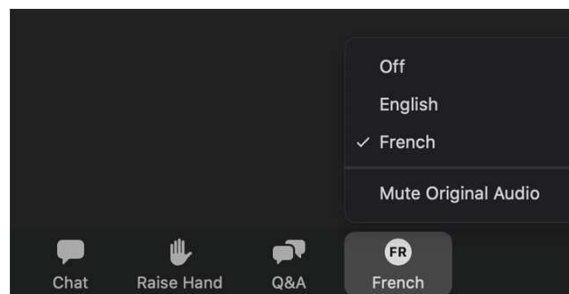
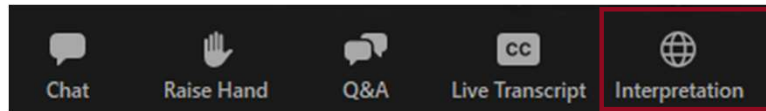
Magnus Nowell, CATIE  
Cassandra Smith, Dr. Peter Centre

December 4, 2023 / 4 décembre 2023

# Interpretation / Interprétation

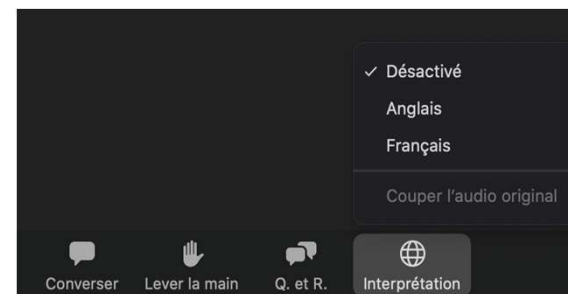
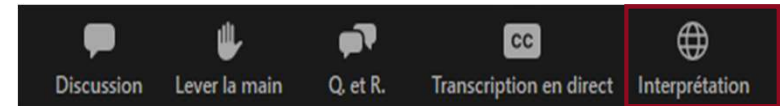
English-French simultaneous interpretation is available during the webinar.

Attendees should choose their preferred language from the **Interpretation** tab at the bottom of the screen.



Durant le webinaire, des services d'interprétation simultanée anglais-français sont disponibles.

Les participant·e·s au webinaire devront opter pour la langue de leur choix à partir de l'onglet **Interprétation** au bas de l'écran.



# Agenda

- i. Welcome and introduction (10 min)**
- ii. Overview of development of SCS and OPS in Canada (10 min)**
- iii. Panelist presentations of models of SCS and OPS (30 min)**
  - i. Blood Ties' inhalation model (5 min)
  - ii. Royal Alexandra's hospital-based model (5 min)
  - iii. L'Anonyme's mobile model (5 min)
  - iv. Atira's housing-based model (5 min)
  - v. NORS spotting model (5 min)
  - vi. Tweak Easy OPS model (5 min)
- iv. Panel discussion (20 min)**
- v. Question & answers, closing (15 min)**

# Ordre du jour

- i. Mot de bienvenue et présentations (10 minutes)**
- ii. Vue d'ensemble de l'évolution des SCS et des SPS au Canada (10 minutes)**
- iii. Présentation par les panélistes des modèles de SCS et de SPS (30 minutes)**
  - i. Modèle avec salle d'inhalation du Blood Ties Centre (5 minutes)
  - ii. Modèle en milieu hospitalier du Royal Alexandra (5 minutes)
  - iii. Modèle mobile de L'Anonyme (5 minutes)
  - iv. Modèle en logements supervisés d'Atira (5 minutes)
  - v. Modèle de surveillance ponctuelle du NORS (5 minutes)
  - vi. Modèle de SPS de Tweak Easy (5 minutes)
- iv. Table ronde (20 minutes)**
- v. Séance de questions et réponses, et mot de la fin (15 minutes)**

# Panelists / Panélistes

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- **Patrick McDougall**

Dr. Peter Centre

- **Jill Aalhus**

Blood Ties Four Directions Centre

- **Lee Zorniak**

Addiction Recovery and Community Health  
(ARCH) Team, Royal Alexandra Hospital

- **Félix-Antoine Guérin**

L'Anonyme

- **Abisola Olapeju**

Atira Women's Resource Society

- **Dr. Monty Ghosh & Lisa  
Morris-Miller**

National Overdose Response Service /  
Service national d'intervention en cas de surdose

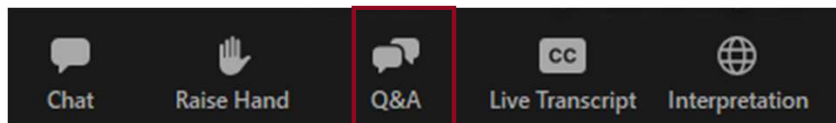
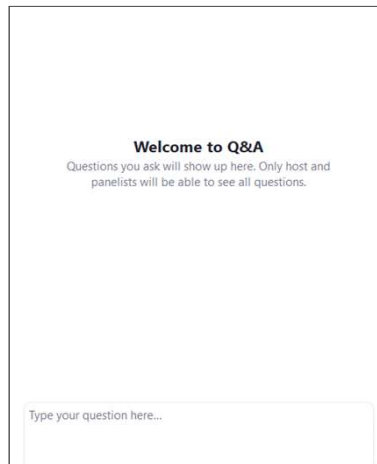
- **Ashley Smoke**

Tweak Easy Cobourg OPS /  
SPS Tweak Easy à Cobourg



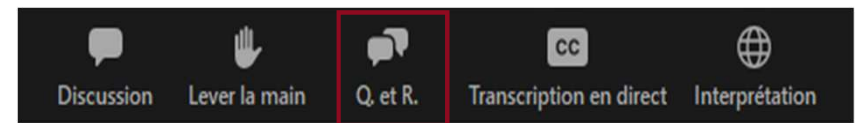
# Q&A / Q. et R.

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All attendees will be muted during the webinar.

Submit your questions in English or French through the **Q&A** tab at the bottom of the screen (not the Chat tab).



Tou·te·s les participant·e·s resteront en sourdine durant le webinaire.

Posez vos questions en français ou en anglais par l'intermédiaire de l'onglet **Q. et R.** au bas de l'écran (non celui de Converser).

## Research about supervised consumption services has found:

- Reduced overdoses and drug toxicity deaths
- Reduced unsafe substance use practices
- Improved trust and relationships between staff and service users
- Improved access to health and social services (e.g., OAT)
- No increase crime or public disorder
- Reduced costs for the health system

## Les études sur les services de consommation supervisée ont noté ce qui suit :

- Réduction des surdoses et des décès liés à la contamination des drogues
- Réduction des pratiques à risque d'usage de substances
- Confiance accrue et meilleures relations entre le personnel et les usager·ère·s des services
- Meilleur accès aux services de santé et sociaux (p. ex. TAO)
- Pas de hausse de la criminalité ou des troubles de l'ordre public
- Réduction des coûts pour le système de santé



# History and Context of Supervised Consumption and Overdose Prevention Services (SCS/OPS)

**Presenter: Patrick McDougall (he/him)**  
Director of Knowledge Translation & Evaluation  
Dr. Peter Centre

December 4, 2023



Dr. Peter  
Centre

# Territorial Acknowledgement

The Dr. Peter Centre is located on the traditional, ancestral, and unceded territory of the Coast Salish peoples – including the Sk̓wx̓wú7mesh (Squamish), Stó:lō and Səlílwətaʔ/Selilwitulh (Tseil-Waututh) and xʷməθkʷəy̓əm (Musqueam) Nations.









## Supervised Consumption / Overdose Prevention Services

- Dr. Peter Centre started SCS in 2002
- In Europe: Drug Consumption Rooms (DCRs)
- In Canada:
  - Supervised Consumption Sites (SCS)
  - Overdose Prevention Sites (OPS)
  - Consumption & Treatment Services (CTS)
  - Urgent Public Health Need Sites (UPHNS)
- New York: Overdose Prevention Centers (OPC)



Last updated July 2021

# The Basics



## of Supervised Consumption Services

# SCS

**Supervised Consumption Services** are federally approved services where people use drugs, are monitored for overdose, and receive medical assistance from trained staff in the event of an emergency.



**Reduce overdose deaths**

# 21,174

people died from opioid-related deaths in Canada between 2016 and 2020. These services help stop preventable deaths.



**Decrease public disorder**

This service allows people who typically use drugs in public to use indoors instead. This means less public drug use and publicly discarded needles in the community.



Source:

<https://www.whyscs.ca/>



### **Safer injection practices**

This service provides sterile drug use equipment to participants. This means less sharing or reusing of supplies, which helps prevent the spread of HIV and Hepatitis C.



### **Increase access to health and social services**

People who use drugs are often not well connected to other health care and social services. SCS play an important role in supporting access to these services.



### **Cost savings for health systems**

Economic analyses demonstrate SCS save money for health systems.

Source:

<https://www.whyscs.ca/>

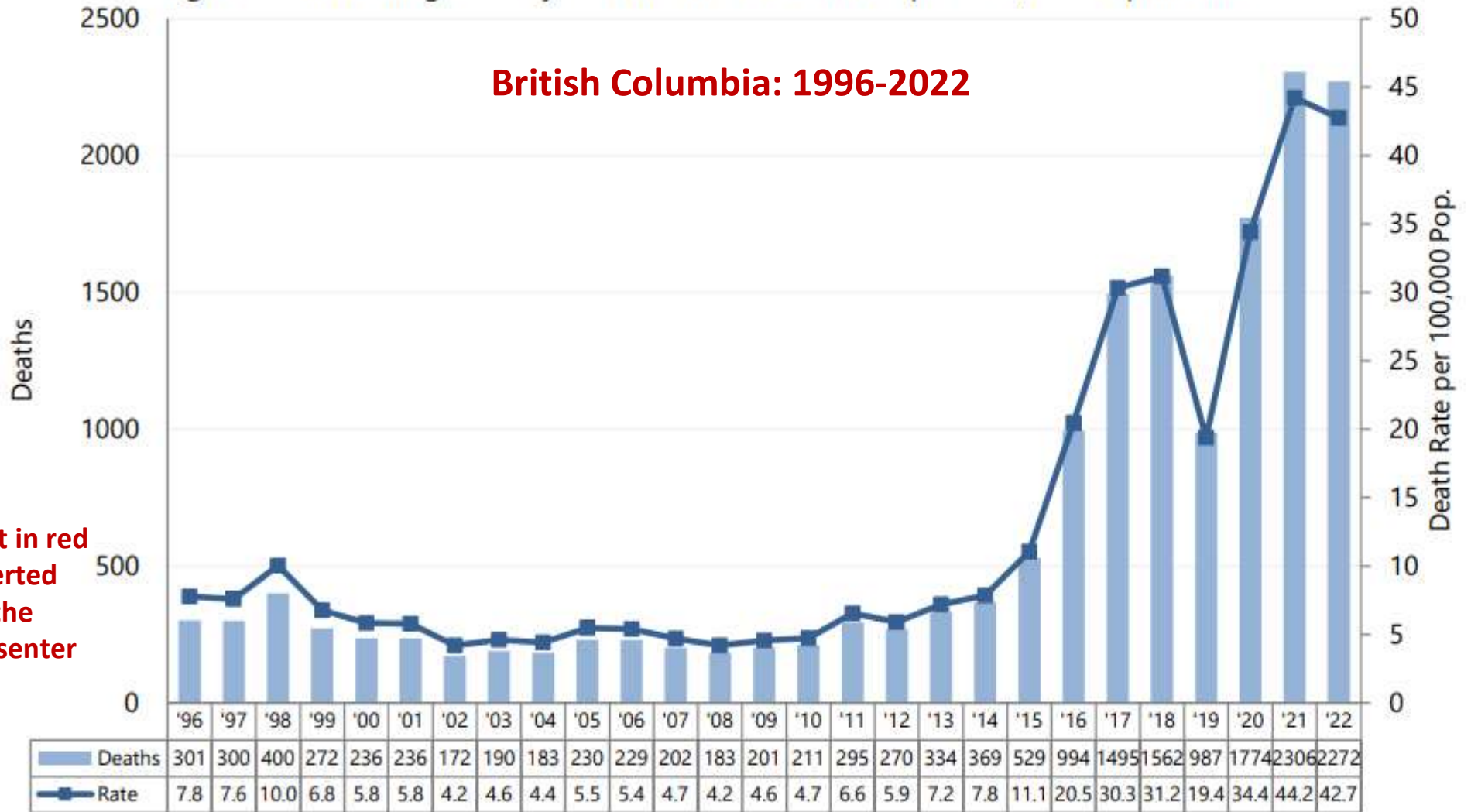




Figure 1: Illicit Drug Toxicity Deaths and Death Rate per 100,000 Population [2,4]

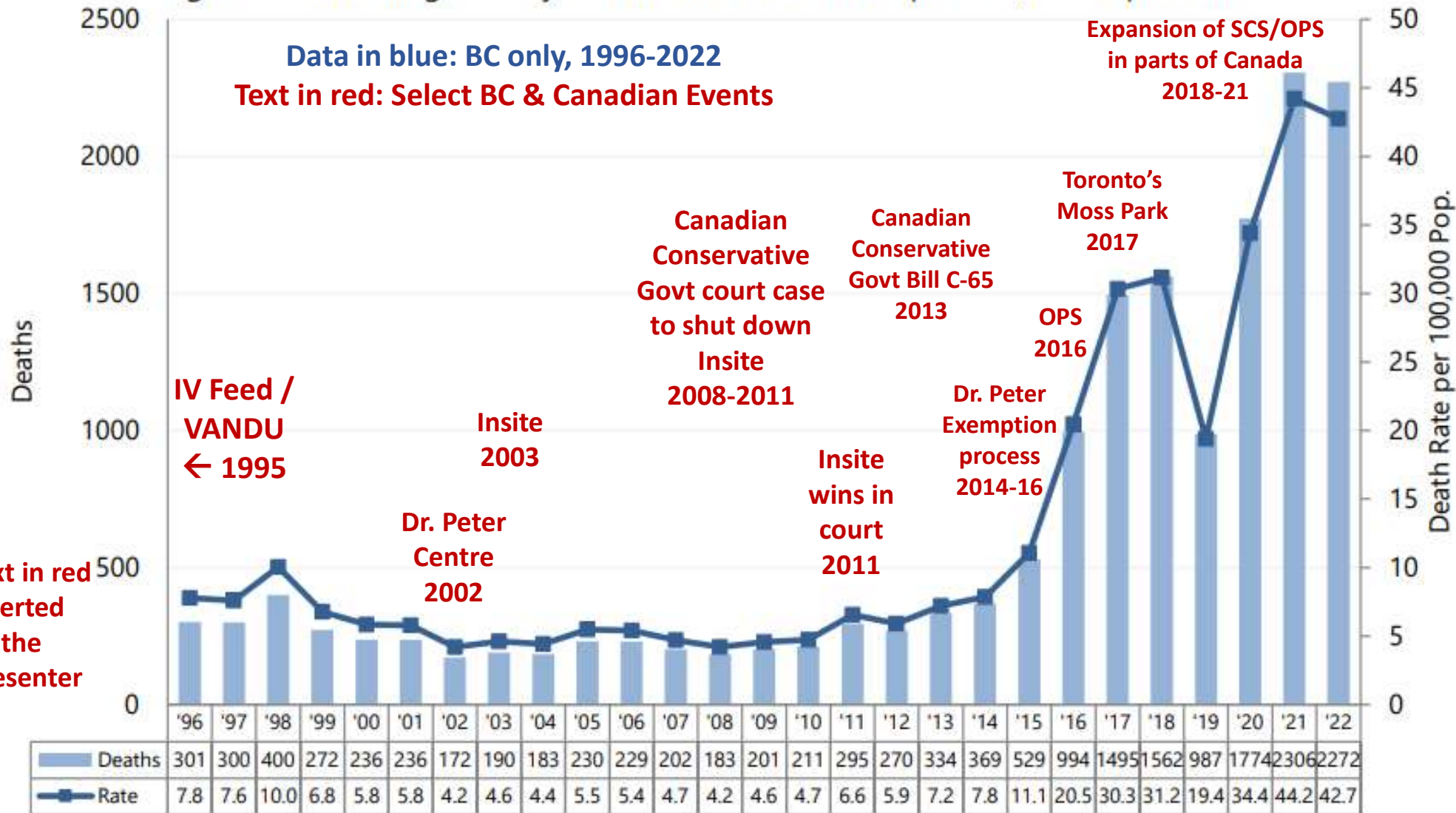
**British Columbia: 1996-2022**

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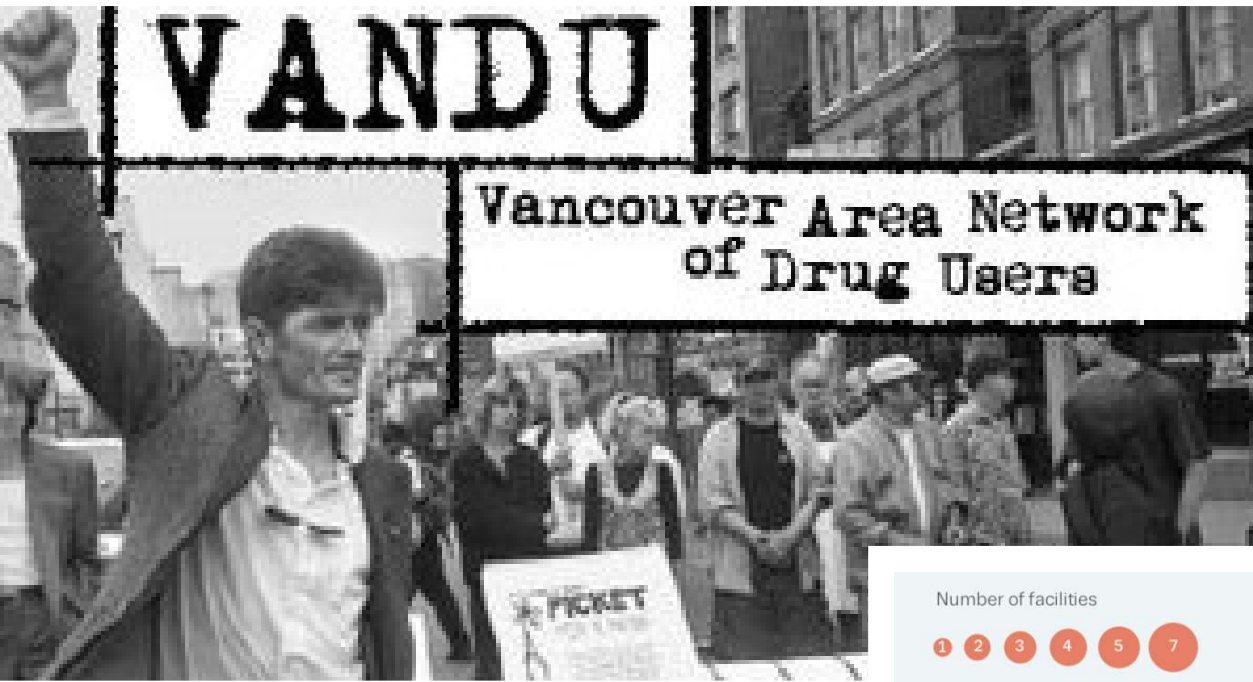


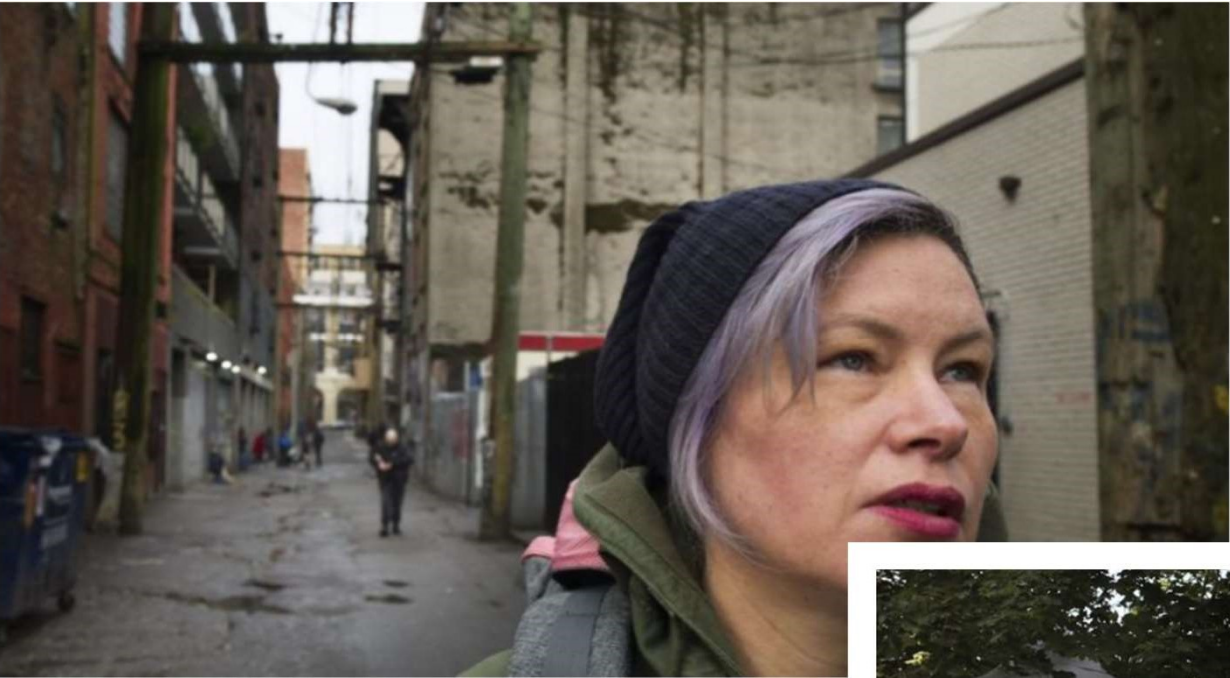
Source BC Coroners Service Posting Date January 31, 2023 : <https://www2.gov.bc.ca/assets/gov/birth-adoption-death-marriage-and-divorce/deaths/coroners-service/statistical/illicit-drug.pdf>

Figure 1: Illicit Drug Toxicity Deaths and Death Rate per 100,000 Population [2,4]









by Travis Lupick on December 8th, 2016 at 11:30 AM



Ottawa approves 3 supervised injection sites for B.C., 1 in Montreal



An employee prepares injection equipment at Insite, the legal supervised drug injection site, in Vancouver.

ANDREA WOOD  
VANCOUVER  
PUBLISHED MAY 26, 2017

TRENDING

- 1 Nearly two-thirds of Canadians oppose provincial governments spending taxpayers' dollars to battle federal carbon tax, poll says
- 2 OPINION Game of Thrones Episode 5 review: A cheap twist ruins Mother's Day for the Mother of Dragons  
BARRY HERTZ
- 3 Onex shakes up Canada's airline industry with all-cash deal to buy WestJet
- 4 My friend has had too much plastic surgery and it's hard to look at her. Should I say something?  
DAVID EDDIE
- 5 What you need to know about Onex- and why investors are buying its



In response to an epidemic of overdose deaths, a group of harm-reduction workers opened a pop-up, safe-injection site





Government  
of Canada

Gouvernement  
du Canada



### 4.3 million visits

- Canadian SCS saw around 4.3 million visits between 2017 and June 2023.
- Currently (September 2023), with 39 sites operating, it is estimated that around 2,700 visits take place every day. The busiest SCS in Canada see upwards of 400 visits each day.



### 49,000 overdoses and medical emergencies

- Canadian SCS attended to around 49,000 overdoses and drug-related medical emergencies between 2017 and June 2023, with no reported fatalities on-site.
- SCS staff also provide on-site harm reduction counselling to clients.



### **At least 361,000 unique clients**

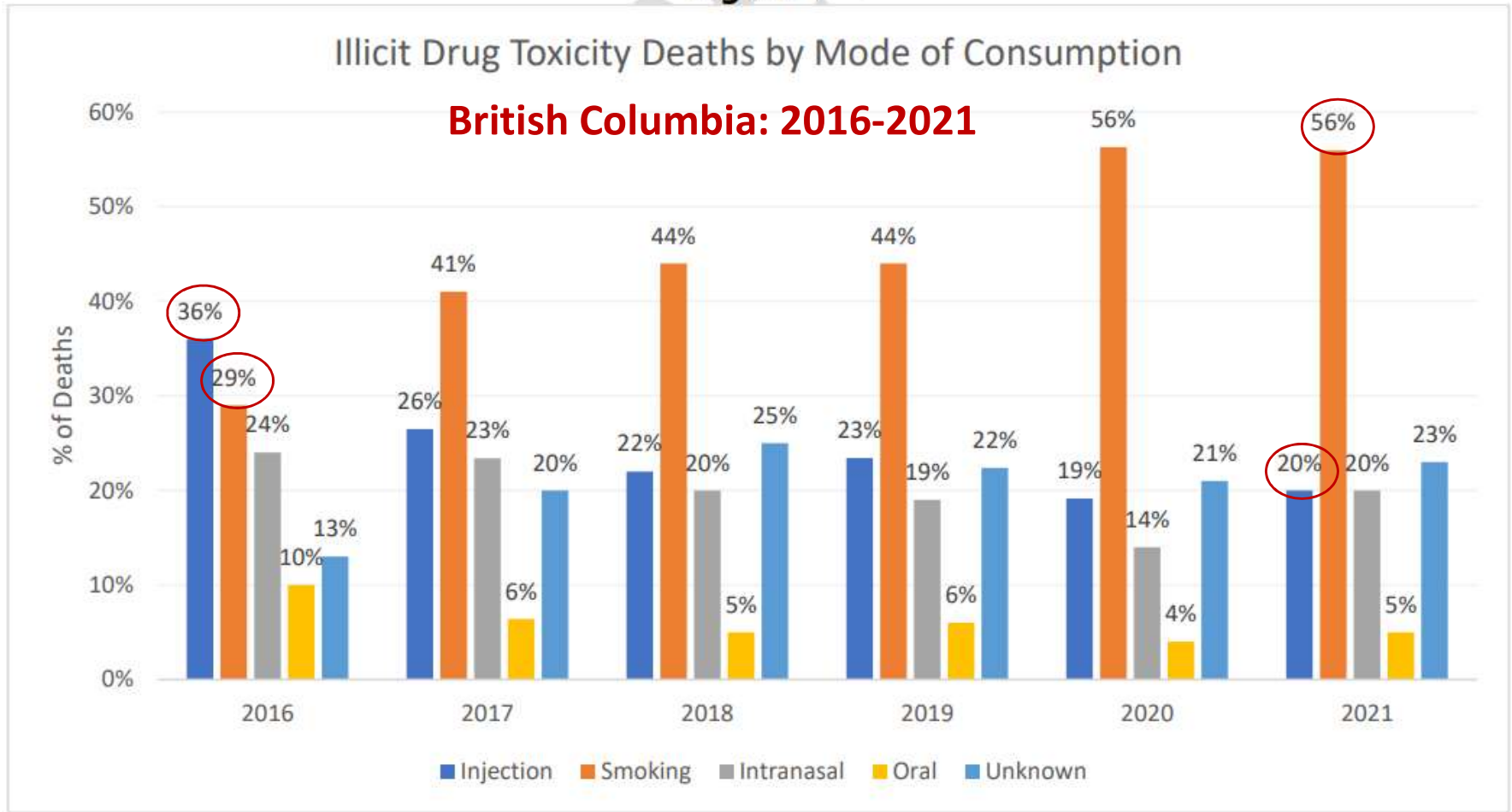
- Based on the data available, it is estimated that at least 361,000 Canadians had sought services provided by SCS between 2017 and June 2023.



### **257,000 referrals**

- SCS connect receptive clients to substance use treatment and other health and social services that include medical care, mental health support, and/or housing services.
- Canadian SCS made around 257,000 referrals to such services between 2017 and June 2023.

Figure 1



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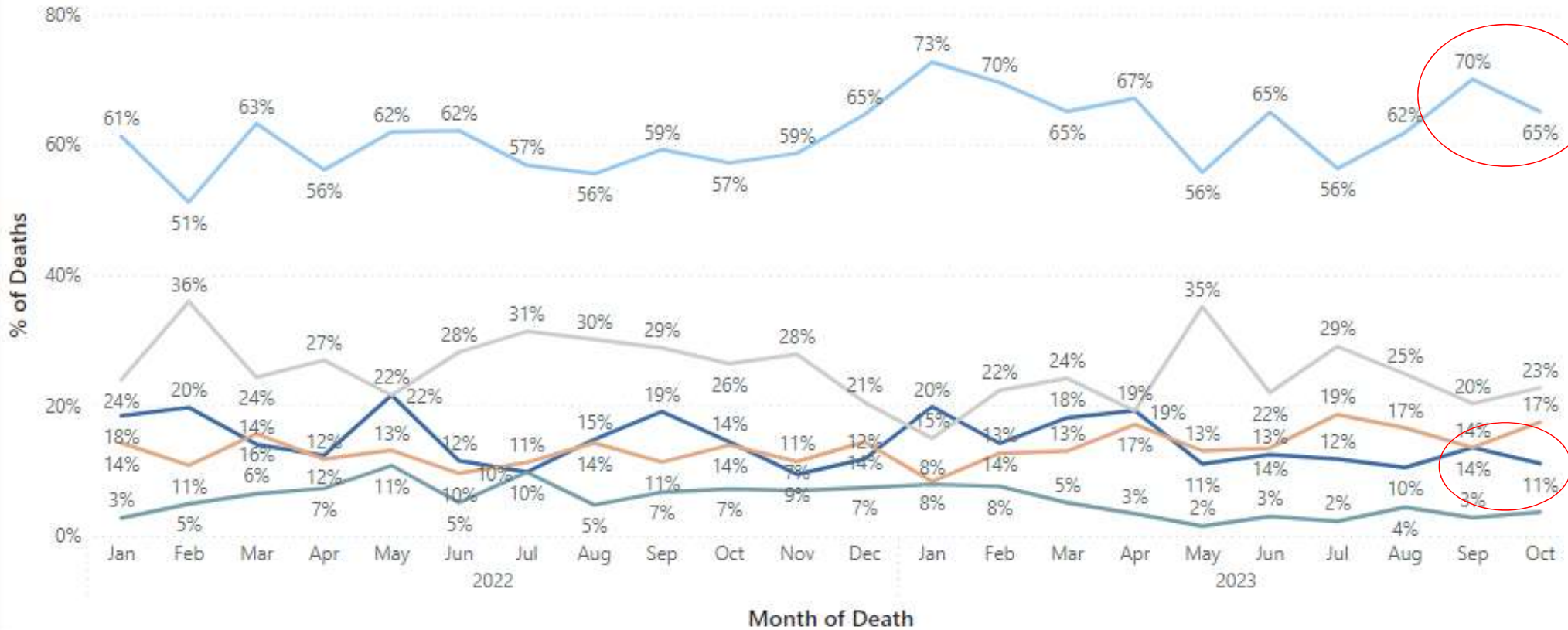
\*Data is preliminary and subject to change as investigations are completed. In some cases, more than one mode of consumption was identified; therefore, percentages add up to more than 100%.

Source: BC Coroner Posting Date October 11, 2022: Illicit Drug Toxicity Deaths in BC Knowledge Update: Mode of Consumption [https://www2.gov.bc.ca/assets/gov/birth-adoption-death-marriage-and-divorce/deaths/coroners-service/statistical/bccs\\_illicit\\_drug\\_mode\\_of\\_consumption\\_2016-2021.pdf](https://www2.gov.bc.ca/assets/gov/birth-adoption-death-marriage-and-divorce/deaths/coroners-service/statistical/bccs_illicit_drug_mode_of_consumption_2016-2021.pdf)



## Mode of Consumption Among Unregulated Drug Deaths

Mode of Consumption ● Injection ● Nasal insufflation/snorting ● Oral ● Smoking ● Unknown/Unavailable



### Notes:

Percentages can add up to more than 100% as individuals could have had multiple modes of consumption. Data is based on information gathered by the coroner which may include scene investigation, witness interviews, or a review of circumstances. Data is preliminary and subject to change.

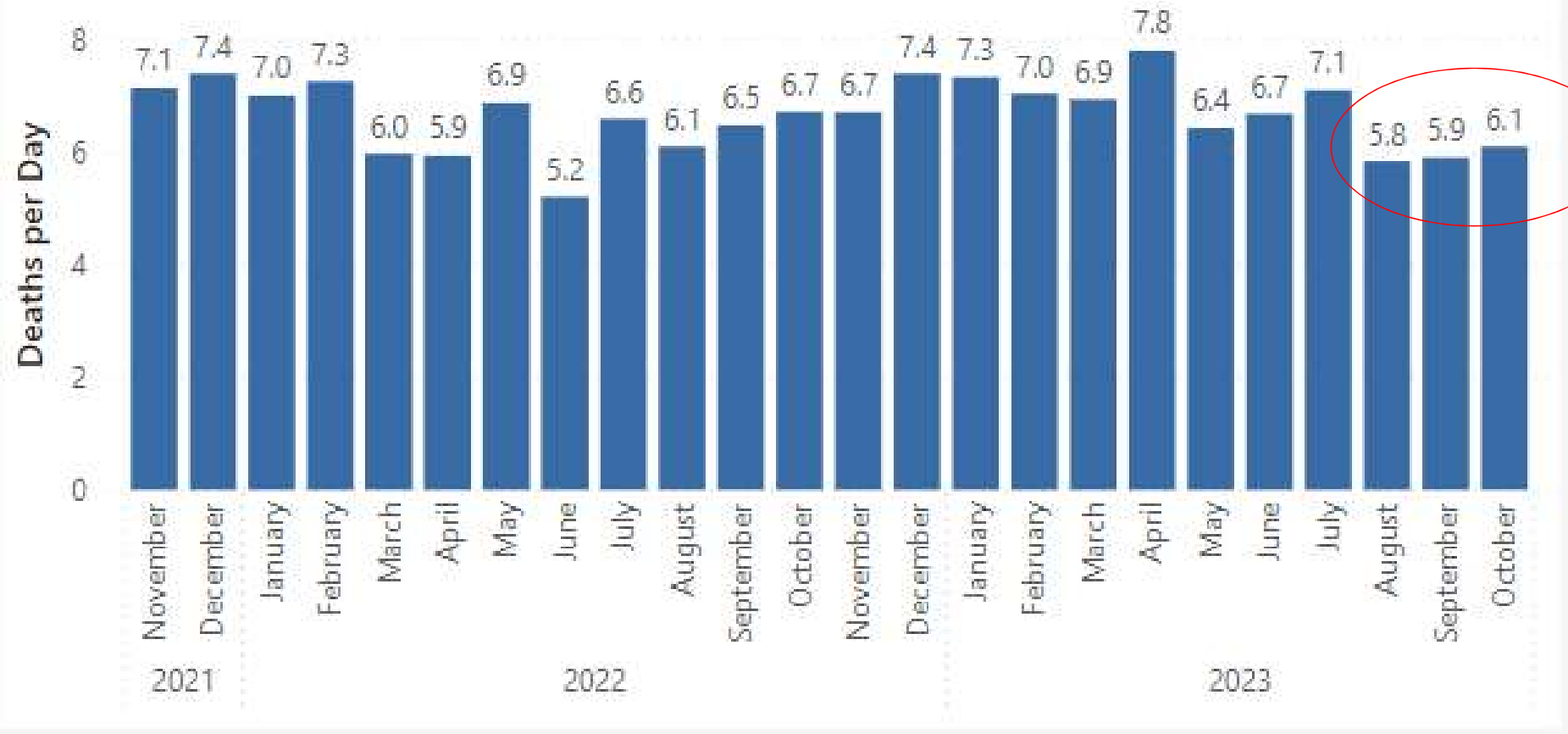
# Appendix

### Unregulated Drug Deaths and Death Rate per 100,000 Population, 2013-2023



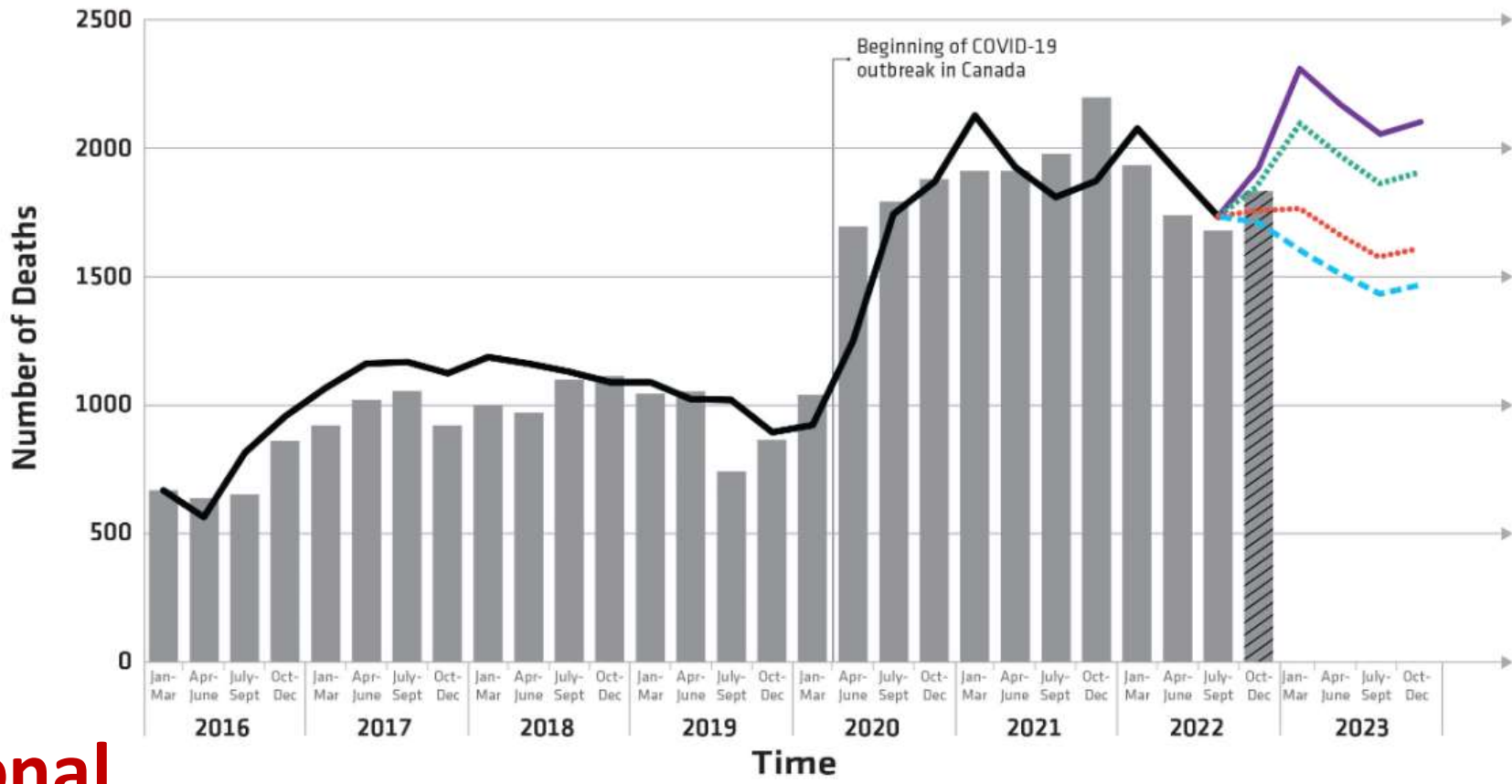
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## Unregulated Drug Deaths per Day by Month



Source: <https://app.powerbi.com/view?r=eyJrIjoieY2ZkZTgxODAtMmE5Mi00MzNjLTlkNDYtMjRlRmU4Nzk2NGZmliwidCI6IjZmZGI1MjAwLTNkMGQtNGE4YS1iMDM2LWQzNjg1ZTM1OWFkYyJ9>

Figure 1: Observed and projected opioid-related deaths, Canada, January 2016 to December 2023



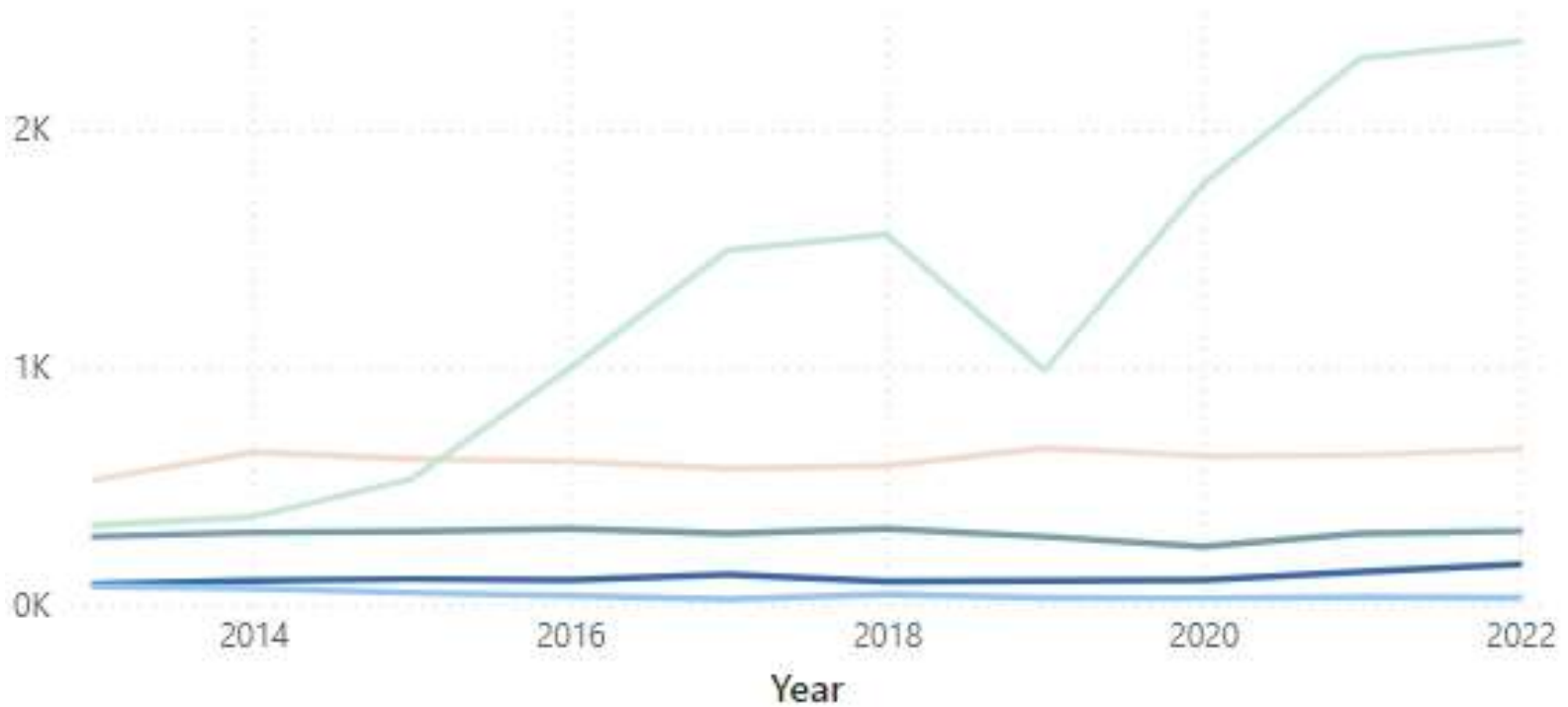
- Observed – March 2023 release
- ▨ Observed – June 2023 release
- Number of deaths estimated by model
- Scenario 1: Health interventions prevent the same proportion of deaths; level of fentanyl increases
- Scenario 2: Health interventions prevent the same proportion of deaths; level of fentanyl stays the same
- Scenario 3: Health interventions prevent more deaths; level of fentanyl increases
- Scenario 4: Health interventions prevent more deaths; level of fentanyl stays the same

Source: Public Health Agency of Canada. Modelling opioid-related deaths during the overdose crisis. Ottawa: Public Health Agency of Canada; June 26, 2023. <https://www.canada.ca/en/health-canada/services/opioids/data-surveillance-research/modelling.html>

**National  
Data**

## Causes of Unnatural Deaths in BC

Type of Death ● Homicide ● MVI ● Prescription drug ● Suicide ● Unregulated drug



Note: Numbers are preliminary and subject to change as investigations are completed.



# Spotting, Satellite Sites, Drug Service Providers

Research | [Open Access](#) | [Published: 05 August 2021](#)

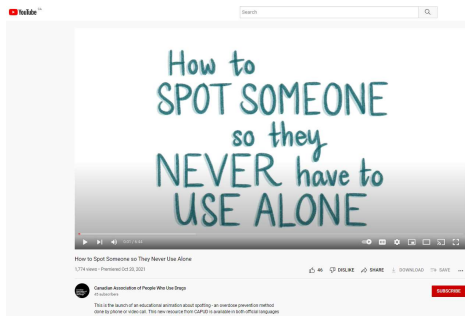
## A qualitative study on overdose response in the era of COVID-19 and beyond: how to spot someone so they never have to use alone

[Melissa Perri](#), [Natalie Kaminski](#), [Matthew Bonn](#), [Gillian Kolla](#), [Adrian Guta](#), [Ahmed M. Bayoumi](#), [Laurel Challacombe](#), [Marilou Gagnon](#), [Natasha Touesnard](#), [Patrick McDougall](#) & [Carol Strike](#) 

[Harm Reduction Journal](#) **18**, Article number: 85 (2021) | [Cite this article](#)

**2492** Accesses | **6** Citations | **33** Altmetric | [Metrics](#)

Source: <https://blog.catie.ca/2021/12/08/spotting-for-people-who-use-drugs-what-when-and-how/>  
Source: <https://harmreductionjournal.biomedcentral.com/articles/10.1186/s12954-021-00530-3>



Source: <https://youtu.be/KbUwb-pszW4>



Source: [https://drive.google.com/file/d/1VYrQWworT\\_idixePi6h6ogVJOTRo5He/view](https://drive.google.com/file/d/1VYrQWworT_idixePi6h6ogVJOTRo5He/view)

Observational Study > [Harm Reduct J. 2020 May 7;17\(1\):27. doi: 10.1186/s12954-020-00372-5.](#)

## Practices of care among people who buy, use, and sell drugs in community settings

[Gillian Kolla](#) <sup>1</sup>, [Carol Strike](#) <sup>2</sup>

Affiliations + expand

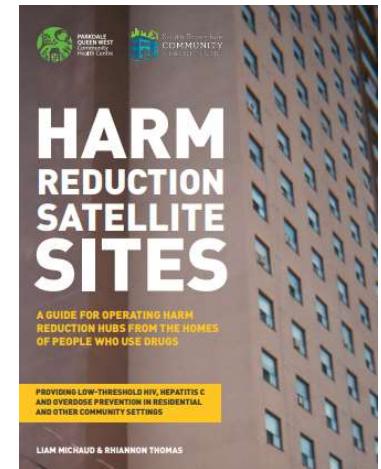
PMID: 32381011 PMID: PMC7206732 DOI: 10.1186/s12954-020-00372-5

[Free PMC article](#)

### Abstract

**Background:** Popular perception of people who sell drugs is negative, with drug selling framed as predatory and morally reprehensible. In contrast, people who use drugs (PWUD) often describe positive perceptions of the people who sell them drugs. The "Satellite Sites" program in Toronto,

Source: <https://pubmed.ncbi.nlm.nih.gov/32381011/>



Source: <https://pawchc.org/wp-content/uploads/Harm-Reduction-Satellite-Program-Guide.pdf>



## Overdose Prevention Centers, Crime, and Disorder in New York City

Aaron Chalfin, PhD; Brandon del Pozo, PhD, MPA, MA; David Mitre-Becerril, PhD

- **Question** What trends in crime and disorder were associated with the opening of 2 overdose prevention centers (OPCs) in New York City (NYC) in November 2021?
- **Findings** This cohort study of 2 OPCs and 17 syringe service programs found no significant increases in crimes recorded by the police or calls for emergency service in NYC neighborhoods where 2 OPCs were located. Consistent with the city's commitment to ensuring clients could use the centers free from law enforcement interference, large, statistically significant declines in police narcotics enforcement around the OPCs were observed.
- **Meaning** These findings suggest that concerns about crime and disorder remain substantial barriers to the expansion of OPCs in US cities, and initial data from NYC do not support these concerns.





# Blood Ties Supervised Consumption Site



Jill Aalhus (she/her)  
Executive Director  
867-335-8265  
[executivedirector@bloodties.ca](mailto:executivedirector@bloodties.ca)



## Intro to Blood Ties

Blood Ties Four Directions Centre is a harm reduction organization that has been operating on the traditional territories of the Kwanlin Dun and Ta'an Kwach'an Council in Whitehorse and throughout the Yukon since 1993.

- **Outreach Van**
- **Harm Reduction education**
- **Safe equipment distribution**
- **Overdose prevention and response education**
- **Systems Navigation**
- **Drop-in Services, wellness programs, and support groups**
- **Housing Supports**
- **Education about HIV, Hep C and other STBBIs**



# Supervised Consumption Site Model

- In the same building as other agency services (HR supplies, drop-in centre, meal program, wellness groups, case management, housing services, education programs)
- Downtown Whitehorse
- Monday to Friday 10:30AM to 9:30 PM (will be extending to 7 day service in Jan 2024)
- Partnership Mental Wellness and Substance Use Services with the Yukon Government
- Folks can consume their drugs by injection, snorting, swallowing or smoking



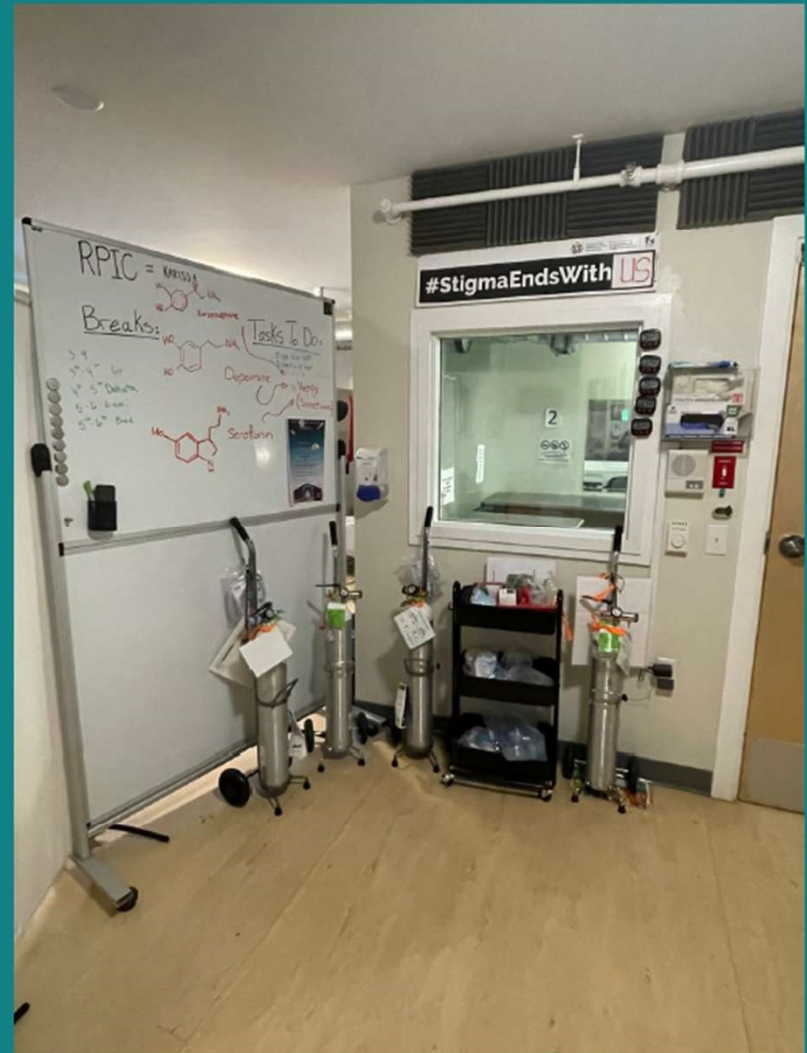


## Supervised Consumption Site Model



- Open concept design
- 1 full-time Team Lead, 3 full-time Support Workers, 1 part-time Peer Support Worker (will be increasing staff team with expansion to 7 day service)
- No health care providers onsite because of labour shortages
  - All Support Workers are trained in Basic Life Support and Airway Management so can administer oxygen
- Drug checking - FTIR spectrometer and strip tests







# Smoking Room



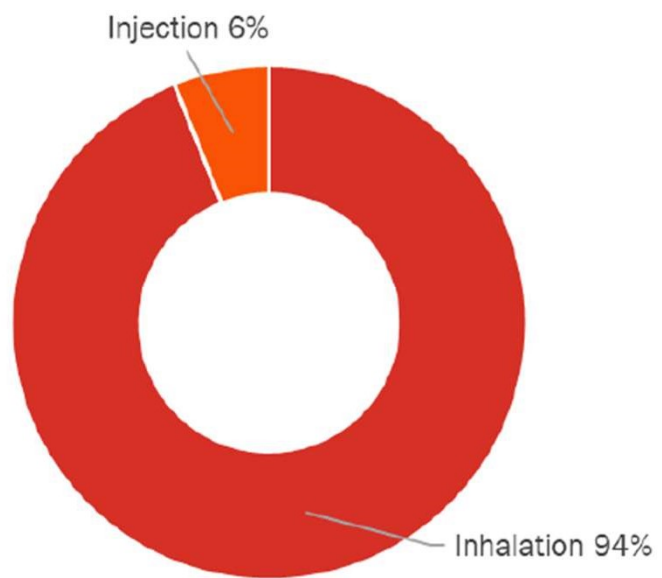
- 3 people max.
- 10 minute time limit
- Ventilation system: on-going fresh, filtered air circulation
- Glass window for monitoring
- Intercom system
- Emergency air evacuation switch (clears air in 30 seconds)
- No legal substances (nicotine or cannabis)
- We knew through our kit distribution statistics and feedback that smoking most common method of use







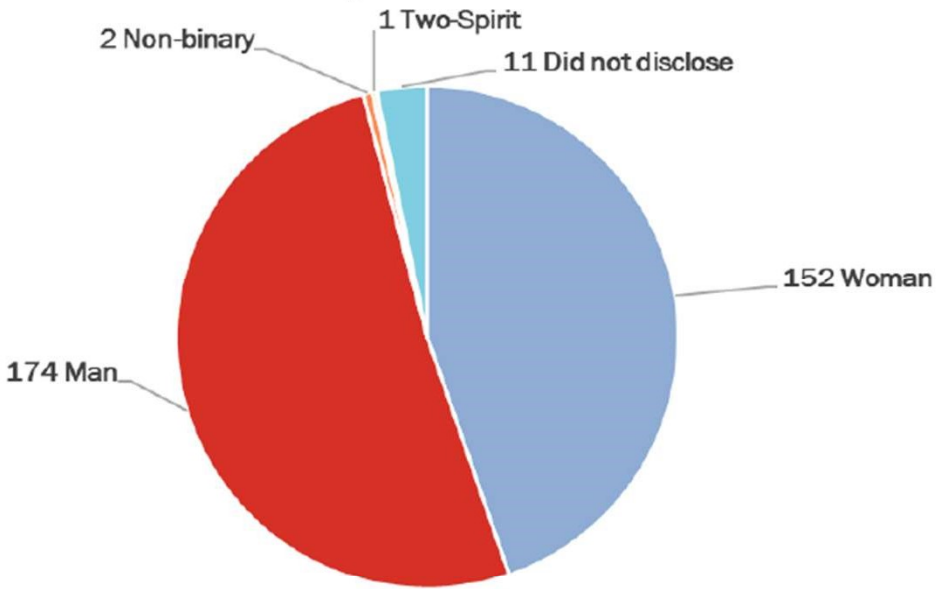
Smoking is the most common mode of use at the SCS



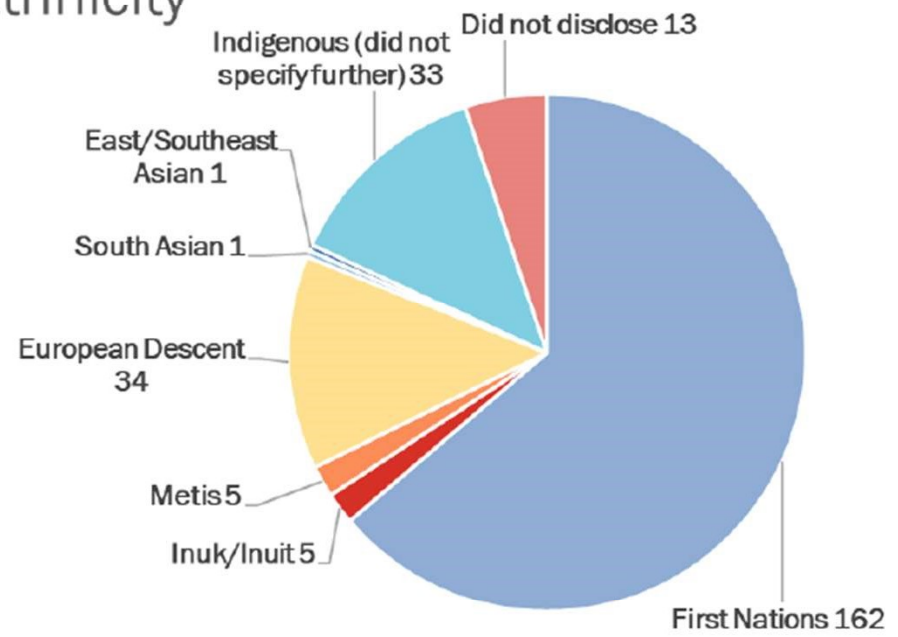




# Gender Identity



# Ethnicity



# Hospital Based Supervised Consumption Services (SCS) at the Royal Alexandra Hospital

**DECEMBER 2023**

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LEE ZORNIAK, CLINICAL NURSE EDUCATOR

ROYAL ALEXANDRA HOSPITAL

ADDICTION RECOVERY AND COMMUNITY HEALTH TEAM

ADDICTION & MENTAL HEALTH ACUTE SERVICES EDMONTON ZONE



# Royal Alexandra Hospital

- Located in Edmonton's inner city
- 882 total beds
- 75,000 + Emergency Department visits per year
- 44,000 + inpatient discharges per year

AHS. Royal Alexandra Hospital: Fiscal year 2017/2018



- Addiction Recovery Community Health (ARCH) team providing specialty addiction medicine consult service since 2014

**Table 9:** Top 10 ED facilities utilized for emergency visits related to opioid use and other substances of misuse, Jan. 1, 2014 to Dec. 31, 2017

Rank	Facility	Count	Percent of all visits*	Rank	Facility	Count	Percent of all visits*
1	Royal Alexandra Hospital	3,912	12%	6	Red Deer Regional Hospital	1,513	5%
2	Peter Lougheed Centre	3,288	10%	7	South Health Campus	1,372	4%
3	Foothills Medical Centre	2,603	8%	8	Grey Nuns Community Hospital	1,361	4%
4	Rockyview General Hospital	2,461	7%	9	Chinook Regional Hospital	1,193	4%
5	University Of Alberta Hospital	2,086	6%	10	Queen Elizabeth II Hospital	1,086	3%

\*Percentage of the total 33,122 ED visits related to opioids and other substances of misuse that occurred at the specified facility.



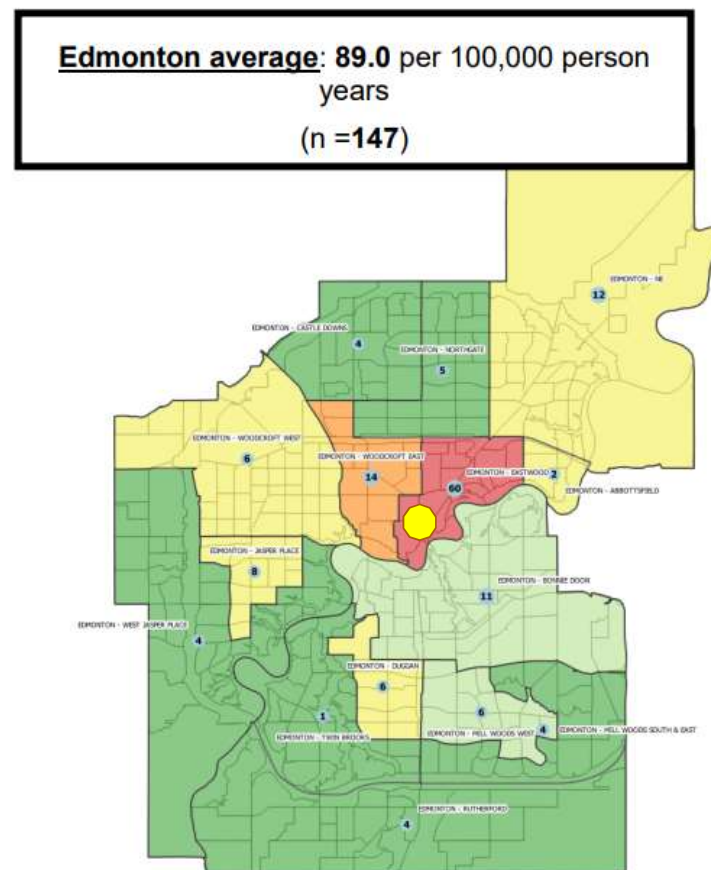
# Alberta Substance Use Surveillance Data Opioids and Substances of Misuse January 2018 to February 28, 2018

Emergency Medical Services Data response to opioid related events

## Legend

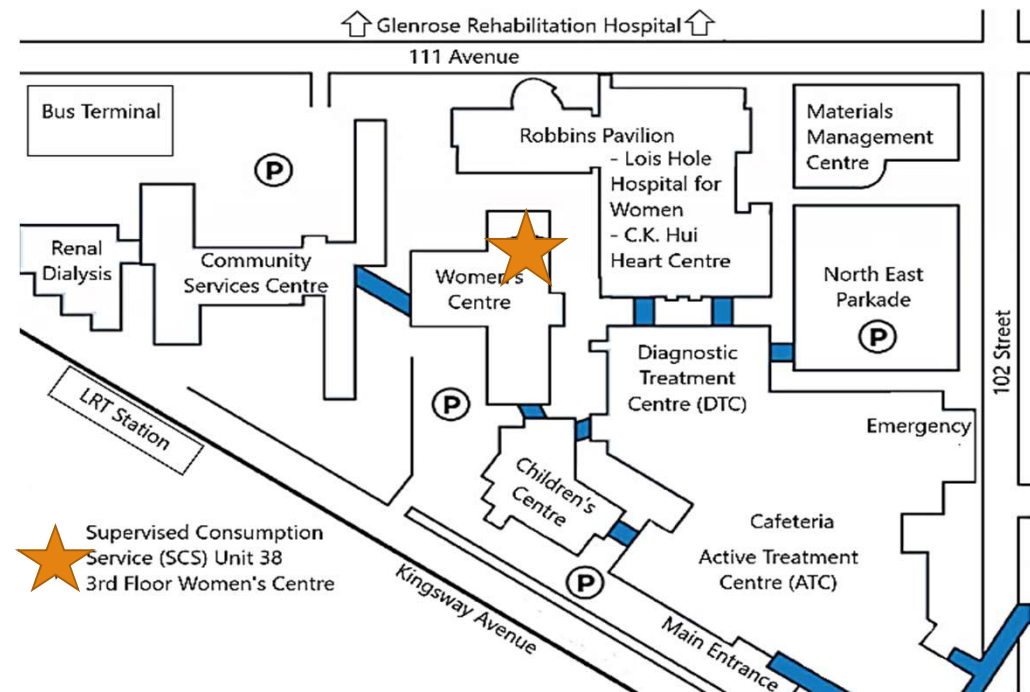
Rate of EMS opioid related responses per 100,000 compared to city average

- Significantly lower
- Lower
- Average
- Higher
- Significantly higher



# RAH Supervised Consumption Service

- Opened April 2, 2018
- Open 24 hours a day
- Available to all inpatients and emergency department (ED) inpatients (2018-2019)
  - Expanded to include all ED patients in October 2019
- Staffed by nursing only (2-4 nurses per shift)
- **Data collected from ARCH patient charts**
  - July 11, 2016 to April 2, 2017
  - ARCH team members dispensed 905 syringes and needles



# Who can access the SCS?



## Eligibility criteria:

- Inpatient or registered emergency patient at the RAH only
- Routes of use: **orally, intranasal/snorting, or self-injection**
  - **No smoking/inhalation permitted**
- Able to independently consume substance
- Provide informed consent to access SCS
  - Review potential emergency interventions within hospital
- Alberta *Mental Health Act* certificate issued:
  - Must be granted with an off-unit privilege
  - Must remain competent to make own decisions

## Exclusion:

- remains in corrections custody while in hospital







*Photos by K. Dalton (2018)*

- Will review with patient before entering booth:
  - Alberta Health Services & SCS consent to access services
  - SCS patient agreement
  - Review rules and expectations of unit, and complete chart review for safety factors
- Typical 2 patient to 1 nurse ratio, but can increase number of patients per nurse

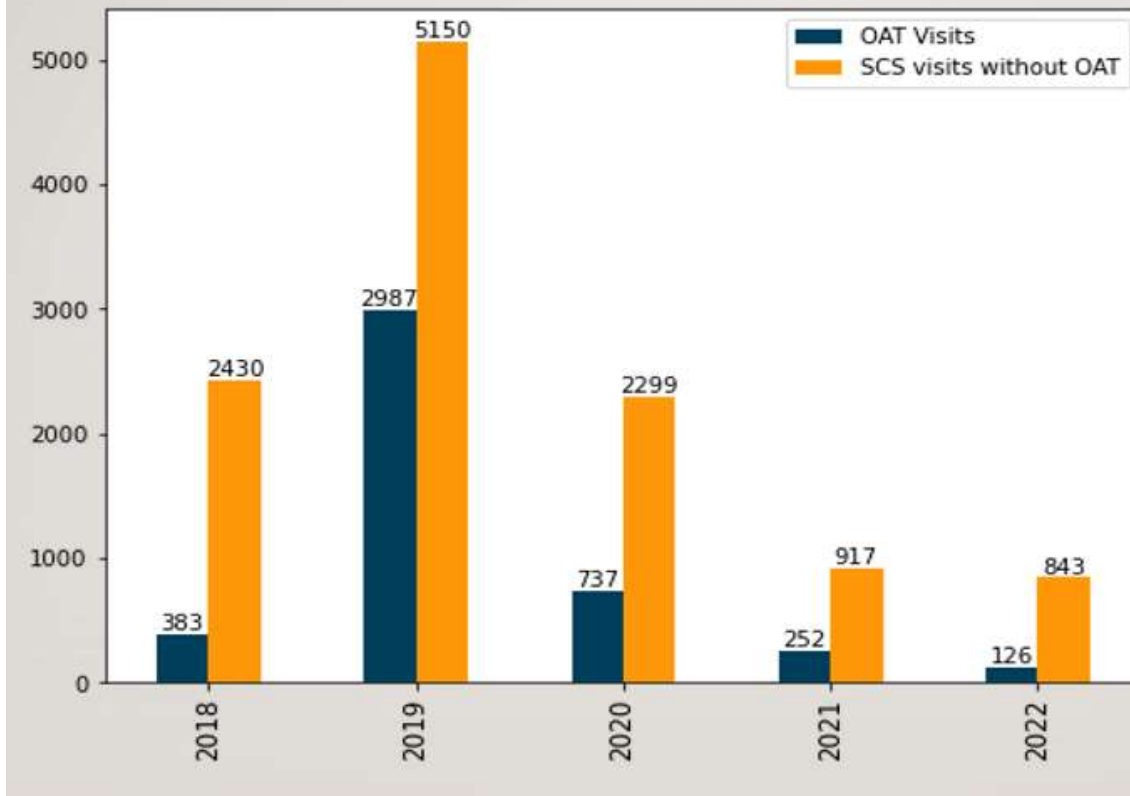
## Safety within the hospital: personal safe usage

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- personal safes installed at bedside across the hospital
- Health Canada requirement for a secure storage location for patient's substances
- patients only to know the code
- staff are not to handle substances
- substances to be stored in personal safe at all times, except:
  - Patient going to SCS
  - Patient at SCS
  - Patient returning to unit from SCS

**SCS and OAT Number of Visits By Year**



**RAH SCS visits:  
April 2018 to  
November 17, 2022**

OAT visits = injectable opioid  
agonist treatment (iOAT)

(only for patients already part of  
the iOAT community program in  
Edmonton)

# RAH SCS Contacts

Thank you!

Lee Zorniak

([lee.zorniak@ahs.ca](mailto:lee.zorniak@ahs.ca))

Clinical Nurse Educator

Royal Alexandra Hospital

Addiction Recovery and Community Health (ARCH) team





# HOUSING OPS

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ABISOLA OLAPEJU  
MANAGER, STRATEGIC HEALTH INITIATIVES  
AWRS





# Introduction

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Atira Women's Resource Society is a non-profit social housing organization dedicated to supporting women and children affected by violence by offering safe and supportive housing and related advocacy programs.

- Operates 3,150 housing units for women, children, and all gender individuals in the Lower Mainland and mostly Downtown Eastside of Vancouver.
- Organizational values are Inclusiveness, Harm Reduction, Women-Centeredness and Innovation
- Diverse and Representative Staff: 75% with lived expertise i.e. share the same experiences as clients.

# OPS IN RESIDENTIAL SETTINGS

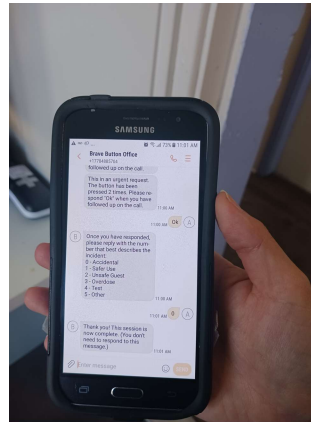
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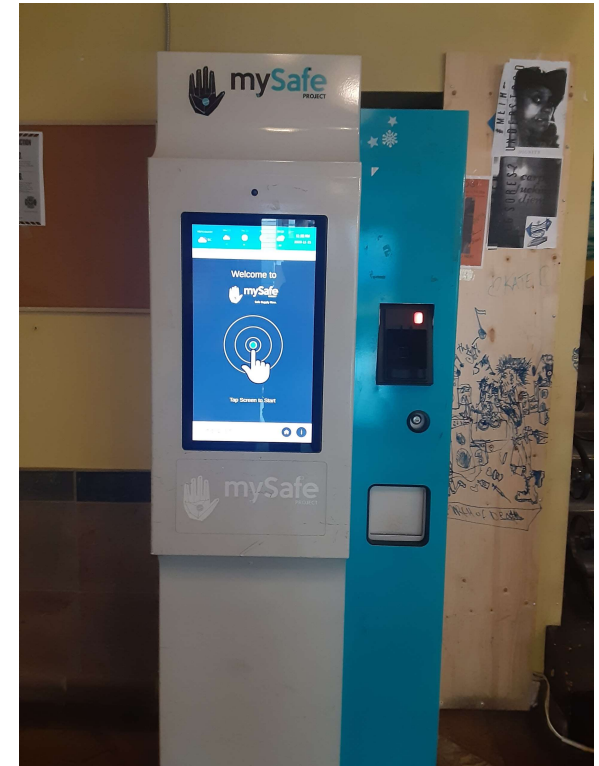
**Consumption Methods:** Oral Ingestion, Injection and Inhalation

# Leverage on Technology

Due to resident's desire to use substances privately and not utilize the communal safe using space for several reasons, we also leverage on technology at Atira to prevent overdose and provide a safe supply.



Overdose Detection Devices  
and Phone Applications



Safe Supply Program



# Questions?

Please enter any questions for our panelists into the question box.

# Des questions?

Si vous avez des questions pour nos panélistes, veuillez les saisir dans la boîte à cet effet.





# Thank you!

Please complete the webinar evaluation that will be provided following this webinar.

# Merci!

Veillez nous faire part de vos commentaires en répondant à l'évaluation qui vous sera envoyée après le webinaire.