

MIDDLESEX-LONDON BOARD OF HEALTH

REPORT NO. 37-24

TO: Chair and Members of the Board of Health
FROM: Dr. Alexander Summers, Medical Officer of Health
Emily Williams, Chief Executive Officer
DATE: 2024 May 16

**HARM REDUCTION, PROGRAM ENHANCEMENT, AND NEEDLE SYRINGE
PROGRAM ACTIVITY REPORT**

Recommendation

It is recommended that the Board of Health receive Report No. 37-24 re: "Harm Reduction, Program Enhancement and Needle Syringe Program Activity Report" for information.

Report Highlights

- The Ministry of Health provides funding to each local board of health to deliver the Harm Reduction Program Enhancement (HRPE) and the Needle Syringe Program (NSP).
- Annual Activity Reports are submitted every year, and require information about staffing resources, local opioid or overdose response plans, naloxone distribution, early warning system and surveillance, statistics. Gaps are also identified.
- Harm reduction and surveillance activities described in this report will continue through 2024, given the community's acute ongoing need.

Background

The Ministry of Health provides funding to the Middlesex-London Health Unit (MLHU) for the Harm Reduction Program Enhancement (HRPE) and the Needle Syringe Program (NSP). Activity reports are submitted annually.

HRPE funding is intended to support the MLHU to:

- implement, maintain and/or expand local opioid-related response initiatives,
- act as naloxone distribution leads for eligible community organizations, and,
- support the implementation and/or enhancement of early warning systems to ensure the timely identification of, and response to, a surge in opioid overdoses.

NSP funding is intended to support the MLHU to:

- make available sterile needles and syringes, as well as safer drug use supplies that are funded and provided through the Ontario Harm Reduction Distribution Program to individuals who use drugs in the public health unit's region,
- provide or ensure the availability of practices related to the disposal of used harm reduction supplies,
- provide education on how to reduce harms associated with drug use to clients of the Ontario Needle Exchange/Syringe Program (including fixed satellite and outreach locations) and individuals who use drugs, and,
- provide referrals to addiction treatment, other harm reduction services, and health and social services such as testing and treatment for HIV, Hepatitis C, and other sexually transmitted or blood-borne infections.

Key Report Highlights

Initiatives identified in the HRPE and NSP Activity Report are part of the local opioid overdose response plan and the Community Drug and Alcohol Strategy.

The HRPE funds the naloxone distribution program, which is led directly by the MLHU, distributing naloxone to eligible community organizations who in turn distribute naloxone kits to clients who are at risk for overdose. There were 10,837 naloxone kits distributed in 2023 and 5 new eligible community organizations became part of the program.

The annual activity report for the HRPE also includes reporting on surveillance activities, including early warning systems and local drug alerts in response to surges in opioid overdoses. A variety of partners work together to communicate changes in trends observed and to distribute communications. Staff at MLHU will continue to monitor weekly emergency department opioid overdose reports, and the local and provincial monthly drug alerts, which increase awareness of the toxic drugs circulating in our community. This assists in ensuring preparedness in the event of a large drug toxicity event.

In 2023, one local drug alert was issued. Chippewas of the Thames First Nation Health Centre, Munsee-Delaware Nation Health Services, and Oneida Nation of the Thames Health Services along with the Strathroy Middlesex General Hospital identified the increase in overdoses. Analysis identified that many of the patients were from the identified communities and support was offered at the request and direction of First Nations' partners. The local drug alert information is also distributed through the Ministry of Health provincial monthly drug alert.

The Needle Syringe Program (NSP) currently has the main core site at Regional HIV/AIDS Connection (RHAC)'s Carepoint, with 11 public access satellite locations, 16 client-only satellite sites, and 1 mobile outreach van. There are 23 needle disposal bins located throughout the City of London. In 2023, there were 37,537 visits to NSP sites, 1,719,589 needles distributed and 828,215 returned with an estimated 48% return rate. There is decreased access to needle syringe program and outreach services in county areas and neighboring Indigenous communities due to limited locations and hours. Attention is required to ensure adequate access to services in these areas.

Other Harm Reduction Activities

Harm reduction is one pillar of Middlesex-London's Community Drug and Alcohol Strategy (CDAS), launched in 2018. The HRPE and NSP both contribute to recommendations within the CDAS. However, the MLHU and community partners engage in many other harm reduction activities.

The MLHU employs three outreach workers who support clients who are HIV positive, difficult to reach, and require an active engagement approach. The team supports clients to ensure successful attendance to medical appointments, and provides information, education, referral, and supplies. The outreach workers collaborate with community partners to support the clients and enable wrap-around care.

The consumption and treatment services (CTS) available at the RHAC location provides safe injection, education, access to clean harm reduction supplies, and wrap-around supports. In 2023, there were over 16,000 visits to the site, 173 overdoses and 16,154 referrals.

Next steps

Harm reduction and surveillance activities described in this report will continue, given the community's acute ongoing need. Expansion or adjustments of these services will be informed by the work of the Middlesex-London Community Drug and Alcohol Committee.

This report was prepared by the Sexual Health team in the Environmental Health, Infectious Disease and Clinical Services Division.



Alexander Summers, MD, MPH, CCFP, FRCPC
Medical Officer of Health



Emily Williams, BScN, RN, MBA, CHE
Chief Executive Officer

This report refers to the following principle(s) set out in Policy G-490, Appendix A:

- The Substance Use and Injury Prevention, Chronic Disease Prevention and Well-being, and Health Equity standard as outlined in the [Ontario Public Health Standards: Requirements for Programs, Services and Accountability](#).
- The following goal or direction from the [Middlesex-London Health Unit's Strategic Plan](#):
 - Goal: Our public health programs are effective, grounded in evidence and equity

This topic has been reviewed to be in alignment with goals under the Middlesex-London Health Unit's [Anti-Black Racism Plan](#) and [Taking Action for Reconciliation](#), specifically recommendations:

Anti-Black Racism Plan: Engage in Healthy Public Policy (collection of race-based data, initiatives that mitigate or address, at an upstream level, negative and inequitable impacts of the social determinants of health and ensure the policy approaches take an anti-Black racism lens)

Taking Action for Reconciliation: Relationships (Incorporate strategies and recommendations from the Relationship with Indigenous Communities Guideline, 2018 (Population and Public Health Division, Ministry of & Long-Term Care), as appropriate to MLHU context).