



# **OPS In Barrie**



Presentation to Council

## BACKGROUND



- Provincial Opioid Strategy announced in Fall 2016
- August 2017, Moss Park unsanctioned Overdose Prevention Site (OPS) opens
- Fall 2017 Ontario announced increase Supervised Injection Sites (SIS), and Needle Exchange (NEP)
- December 2017, OPS allowed in Ontario
- January 2018, OPS applications open

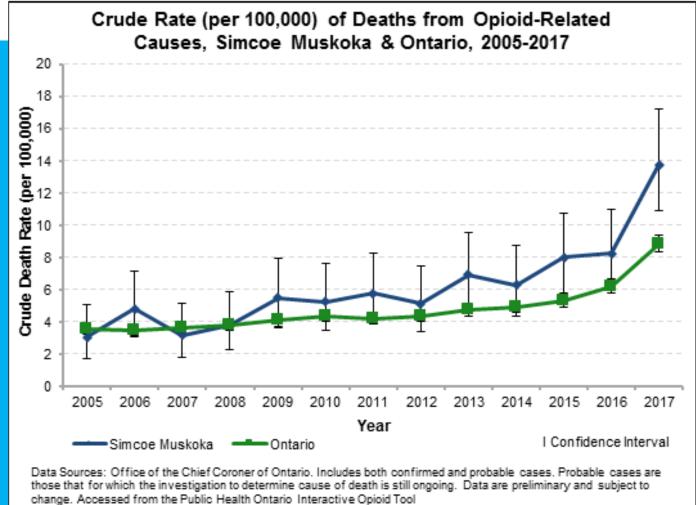
### **OPS IN BARRIE TIMELINE**



- January 22, 2018 Staff from Gilbert Centre, Barrie CHC, David Busby Centre, and SMDHU visit KeepSIX, and Moss Park OPS
- March 13 Gilbert Centre, David Busby Centre, SMDHU, CMHA, North Simcoe Muskoka LHIN, Barrie CHC, and CMHA meet. Gilbert Centre, and CMHA agree in principle to be applicant, and co-applicant
- March 13 Gilbert Centre Board of Directors approves of applying for OPS
- March 20 CMHA Board of Directors approves of applying for OPS
- April 10 OPS application submitted to province



## **OPIOID POISONING DEATH RATE**



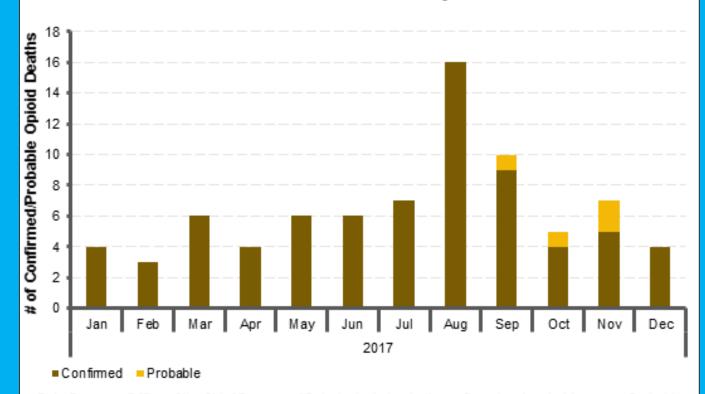
(https://www.publichealthontario.ca/en/dataandanalytics/pages/opioid.aspx) on May 23, 2018.

Source: http://www.simcoemuskokahealthstats.org/topics/alcohol-drugs/drugs/opioids/opioid-deaths#Time

## **OPIOID DEATHS BY MONTH**



Deaths from Opioid-Related Causes, by Month, Simcoe Muskoka Residents, January - December, 2017

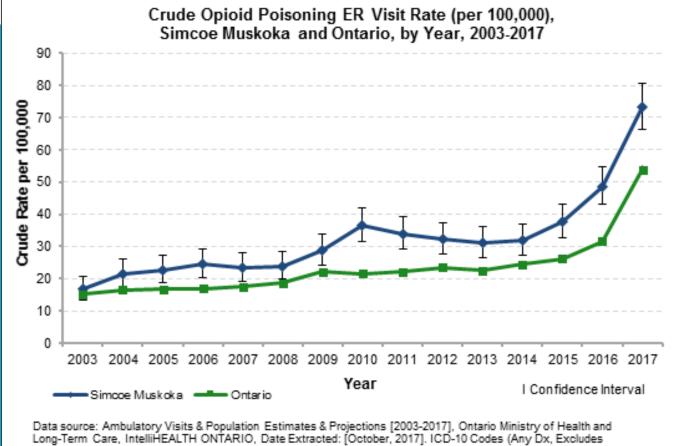


Data Sources: Office of the Chief Coroner of Ontario. Includes both confirmed and probable cases. Probable cases are those that for which the investigation to determine cause of death is still ongoing. Data are preliminary and subject to change. Accessed from the Public Health Ontario Interactive Opioid Tool (https://www.publichealthontario.ca/en/dataandanalytics/pages/opioid.aspx) on May 23, 2018.

Source: http://www.simcoemuskokahealthstats.org/topics/alcohol-drugs/drugs/opioids/opioid-deaths#Month

## **OPIOID POISONING ER VISIT RATE**





Suspect/Query Dx): T400-T404;T406;

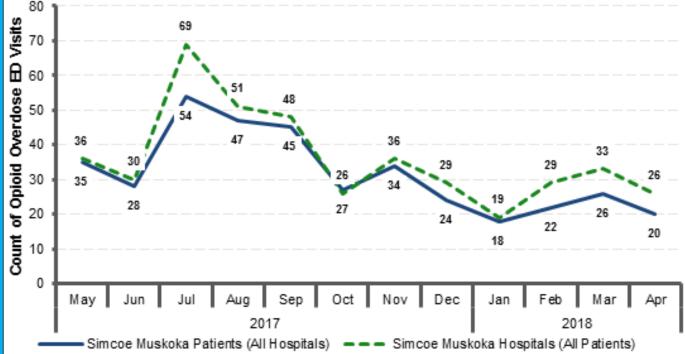
"October - December data for 2017 were taken from the Ontario Ministry of Health and Long-Term Care Weekly emergency department visits for opioid overdose report for week 44: Jan 29 to Feb 4, 2018.

#### Source: <a href="http://www.simcoemuskokahealthstats.org/topics/alcohol-drugs/drugs/opioids/opioid-er-visits#ByYear">http://www.simcoemuskokahealthstats.org/topics/alcohol-drugs/drugs/opioids/opioid-er-visits#ByYear</a>

## **OPIOID OVERDOSE VISITS TO ER**



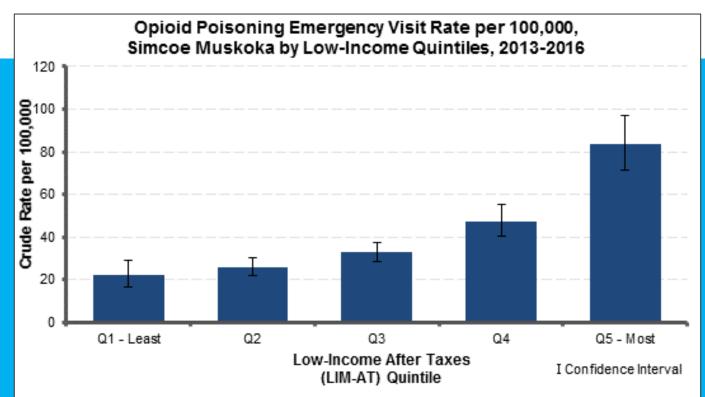
Count of Emergency Department (ED) Visits for Opioid Overdose, by Month, Simcoe Muskoka Patients & Hospitals, May, 2017 - April, 2018



Data Sources: National Ambulatory Care Reporting System (NACRS), Canadian Institute for Health (CIHI), distributed by the Ontario Ministry of Health and Long-Term Care through weekly reports (FY2018/19). Data extracted from the week 5 report: (April 30 - May 6, 2018). Data are preliminary and subject to change. ICD-10 Codes (Any Dx, Excludes Suspect/Query Dx): T40.0-T40.4, T40.6.

Source: http://www.simcoemuskokahealthstats.org/topics/alcohol-drugs/drugs/opioids/opioid-er-visits#MoSurv

## **OPIOID POISONING BY INCOME QUINTILE**



Data Sources: 2011 and 2016 Census Population Counts by Disseminatin Area, Statistics Canada. Ambulatory Visits [2013-2016]. Ontario Ministry of Health and Long-Term Care, IntelliHEALTH Ontario. Extracted September, 2017. ICD-10 Code: (T40.0-T40.4; T40.6) Any diagnoses. Excludes query/suspect diagnoses.LIM-AT Quintiles are based on the percent of the population that fall below the low-income cut-off after taxes. Q1 represents areas with fewest people living in low-income and Q5 represents areas with the most people living in low-income - downloaded from the Social Determinants of Health Map produced by Public Health Ontario - https://www.publichealthontario.ca/en/DataAndAnalytics/Maps/Pages/Social-Determinants-of-Health.aspx.



Source: <u>http://www.simcoemuskokahealthstats.org/topics/alcohol-drugs/drugs/opioids/opioid-er-visits#ByIncome</u>

## **OPIOID OVERDOSE NUMBERS BY CITY**

Opioid Overdose Emergency Department Visits, Simcoe Muskoka Residents Visiting Any Ontario Hospital, 2017 (January - December)

Geographic Area	Count of Opioid Overdose Visits	Crude Rate (per 100,000)	Significantly Different SMDHU	Significantly Different Ontario
Ontario	7,804	55.8	Lower	N/A
Simcoe Muskoka	438	78.6	N/A	Higher
Muskoka	24	38.4	Lower	
Simcoe County	414	83.7		Higher
Simcoe Muskoka Municipalities				
BARRIE	204	136.3	Higher	Higher
ORILLIA	42	121.8	Higher	Higher
MIDLAND	22	117.7		Higher
INNISFIL	19	52.7		
BRADFORD W GWILLIM.	15	48.5		
NEW TECUMSETH	14	41.8	Lower	
COLLINGWOOD	13	59.9		
PENETANGUISHENE	13	126.9		Higher
WASAGA BEACH	13	65.0		
ORO-MEDONTE	12	54.0		
HUNTSVILLE	10	50.3		
SEVERN	10	72.3		
ESSA	9	44.5		
BRACEBRIDGE	7	NR		
GRAVENHURST	7	NR		
RAMARA	6	NR		
SPRINGWATER	6	NR	Lower	
TAY	5	NR		

SIMCOE MUSKOKA OPIOID STRATEGY

Source: Ambulatory Visits [2017] & Population Estimates [2016], IntelliHealth Ontario, Ministry of Health and Long-Term Care, extracted on March 26, 2018. These figures are considered preliminary and are subject to change. Analyzed by the Simcoe Muskoka District Health Unit Epidemiologist

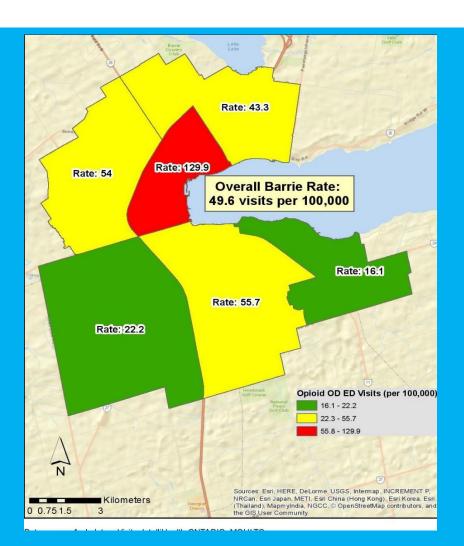
## **GIS DATA 2011-2016**



5 years of data collected

Ontario 17.4 per 100.000

Barrie 49.6 per 100,000



## **GIS DATA 2017**

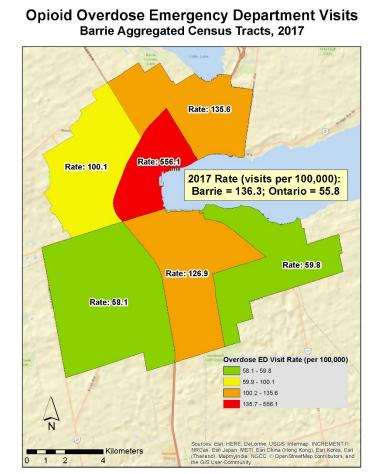


 The central north area of Barrie had tentimes the rate of Opioid Overdose ED visits in 2017 compared with the provincial average.

 $\succ$  This includes 34 visits among the homeless.

 The north west, north east and south central areas of Barrie all had significantly higher rates of Opioid Overdose ED visits in 2017 when compared to the province as a whole.

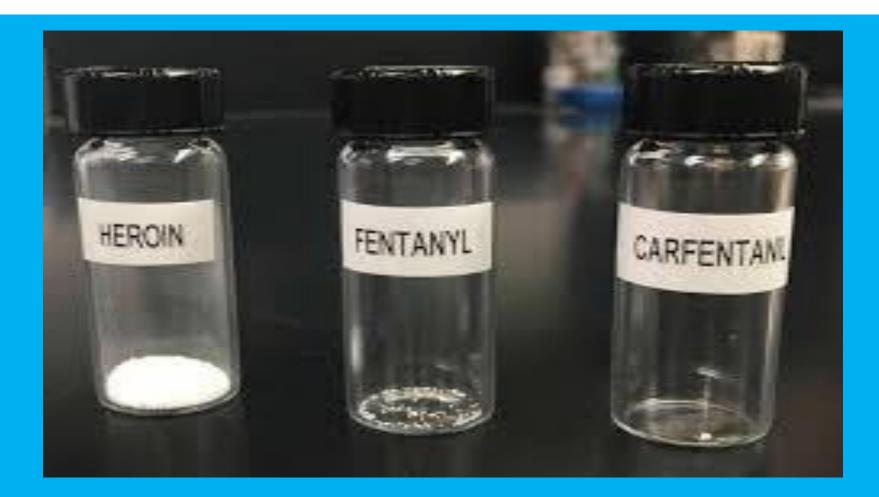
Source: Ambulatory Visits [2017] & Population Estimates [2016], IntelliHealth Ontario, Ministry of Health and Long-Term Care, extracted on March 26, 2018. These figures are considered preliminary and are subject to change. Analyzed by the Simcoe Muskoka District Health Unit Epidemiologist



Data source: Ambulatory Visits [2017], IntelliHealth ONTARIO, MOHLTC; Canadian Census 2016, Statistics Canada. NB: Emergency visits by those identified as homeless in Barrie were assigned to the downtown zone There were 34 such visits included in this map.

#### **CAUSES OF OVERDOSES**





## **OPS OVERVIEW**



Low barrier, time-limited (3 – 6 months) service providing the following:

- Supervised Injection
- Naloxone, and new harm reduction supplies
- (Optional) fentanyl drug-checking stripes
- (Optional) peer-to-peer assisted injection
- (Optional) supervised oral or intra-nasal use

#### **RESEARCH**



Consistent, high-quality evidence suggests SCFs effectively meet public health & public order objectives with lack of adverse impacts:

- ☑ Reduce overdose-related harms
- ☑ Reduce risk of infectious disease transmission
- ☑ No impact on community drug use patterns
- ☑ Increased uptake of addiction treatment & other health and social services
- ☑ Improvements in public order & safety
- ☑ No impact on crime
- ☑ Cost effective