

# Collaborative Action & the Overdose Crisis

# Presented by

Dianna Hurford, Senior Planner Social Policy & Projects

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#### **Presentation Overview**



- 1. Behind the Crises: Background
- 2. City of Vancouver Response to Overdose Crisis
- 3. Aligning with Partner Projects and Advocacy
- 4. Next Steps

# Background

#### **Evolution of Collaborative Action**



2017 onwards (HCS/Urban Health)

Shared priority goals, aligned strategies and targets, shared accountability, mobilized action, pre-emptive response to crisis

2014-2016 (Task Force & HCS) Independent agency goals, aligned and consultative strategies, collaborative action, rapid response to crisis

Prior to 2013 (Pre-Task Force)

Independent agency goals, misaligned strategies, disorganized collaboration, slow response to crisis

#### The Immediate Call To Action



#### Increasing Crisis Levels

- 43% increase in mental health visits at St. Paul's ER (2009-2013)
- 18% increase in VPD Mental Health Act apprehensions (2012-2013)

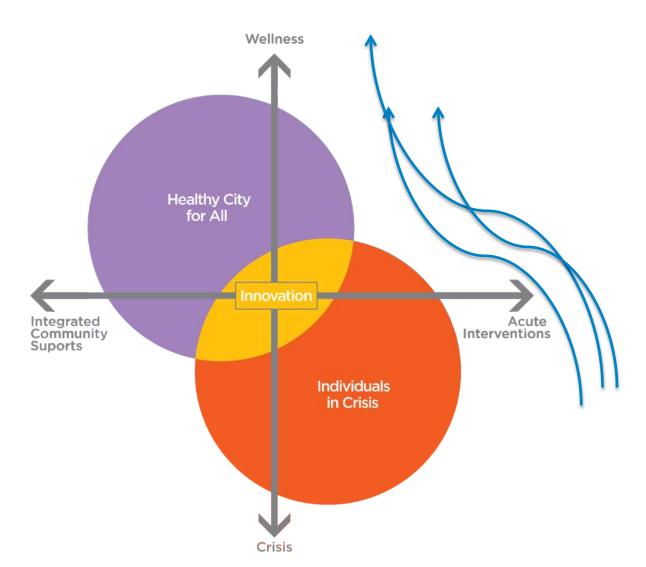
#### Inadequate Treatment

- 2,000 SRO tenants without adequate supports; higher rate of mortality (The Hotel Study, 2013)
- Increasing homelessness, 2/3 requiring support for mental health and addiction
- Additional evidence from At Home/Chez Soi, Inner City Youth Mental Health, BC Centre for Excellence in HIV/AIDS



### Moving Upstream toward a Healthy City for All





Partnerships, innovation and collective action are needed to move 'upstream' from crisis to wellness, from acute interventions to integrated community supports.

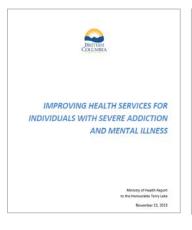
#### Summary of Phase 1: Provincial 120-Day Plan

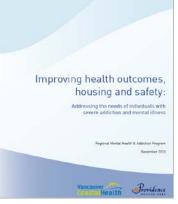


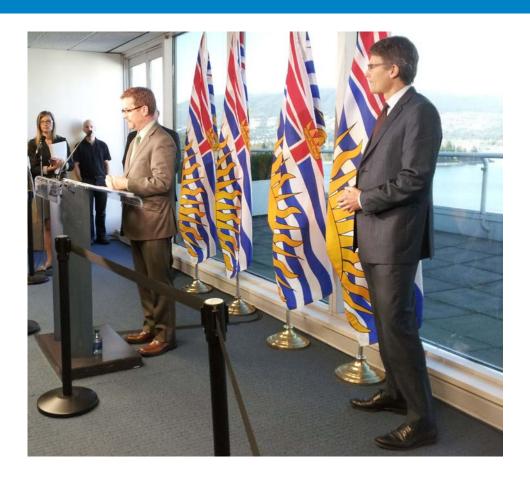
#### November 2013

Province responds 120-Day Plan.

Ministry of Health, VCH, Providence Health Care (PHC), BC Housing, Correction Services, and Vancouver Police Department meet to discuss priority actions.







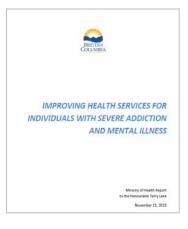
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#### SUMMARY OF STATUS TO DATE

- ✓ Two new ACT teams in Vancouver.
- ✓ Inner City Youth team expansion
- ✓ 9-bed stabilization unit at St. Paul's
- ✓ Psychiatric emergency care protocols to address intake surge
- ✓ Improved information sharing

#### PRIORITY GAPS

- 300 mental health treatment beds
- Sufficient, aligned ACT team support
- Adequate housing first options for people with mental health & addictions

### Summary of Phase 1 Work of the Task Force



#### December 10 – July 2013

 Task Force holds 11 meetings, including special workshops on stigma, addictions, Aboriginal people and youth

#### Phase 1 work has 2 components:

Actions identified through Task Force to improve system of care (including what City can do)

Supporting the Ministry of Health and Vancouver Coastal 120-Day Plan to address service gaps



#### Summary of Phase 1 Enhancing Access to Quality & Effectiveness of Service



01

Work Better Together and Address Service Gaps The Game Changer

Expedite Collective Impact and work with provincial partners

02

A Peer-Informed System
Right Faces in the Right Places,
Low-Barrier Services

Convene peer leadership table to inform continuum of care

03

**De-stigmatization**Feeling Safe
and Included

Increase awareness, inclusion & accessibility

04

Focus on Youth Better Transitions and Outcomes

Better support for youth transitioning out of care

05

Focus on Wellness for Aboriginal Peoples A City of Reconciliation Promote Aboriginal healing and wellness concepts across
Vancouver

06

Enhance Addictions Knowledge Training and Treatment Choices Support training and integration of addictions specialists

# **Background on Opioid Crisis: Impact in BC and Vancouver in 2016**



- Provincial Health Officer declared public health emergency on April 14, 2016
- Unprecedented total of 978 overdose deaths in 2016 in BC
- 231 OD deaths in Vancouver
- 4,709 Vancouver Fire and Rescue Calls
- Dec 2016 Mayor's Forum Held Traumatic impact on families, loved ones & communities

# 2017 Impacts (year-to-date)

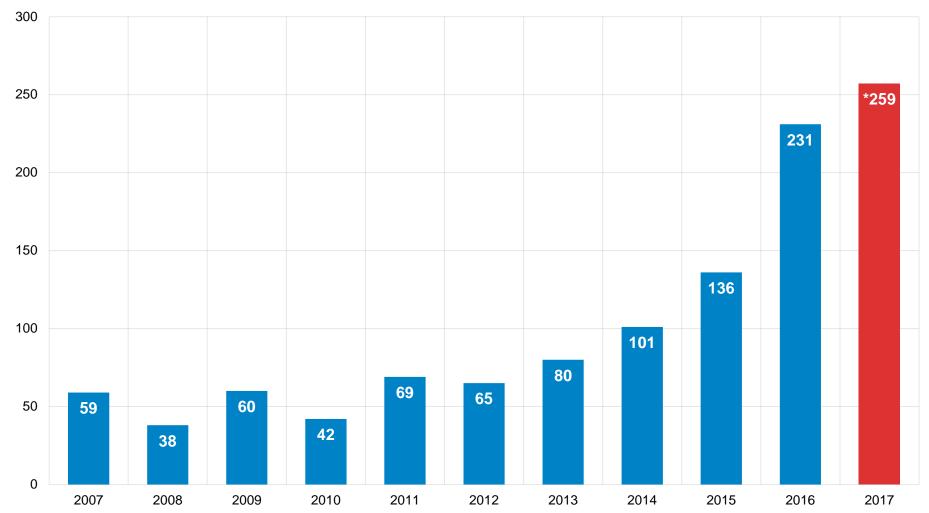


- 876 OD deaths in BC from Jan July
- 259 OD deaths in Vancouver between January 1 and September 24, 2017 (est)\*
  - 89% occurred inside
  - 82% male
- 5,062 VFRS OD calls so far this year, already surpassing 2016 total

#### Overdose Deaths in Vancouver: 2007 – 2017 to date 😤



# Overdose Deaths in Vancouver Jan 1, 2007 - September 24, 2017

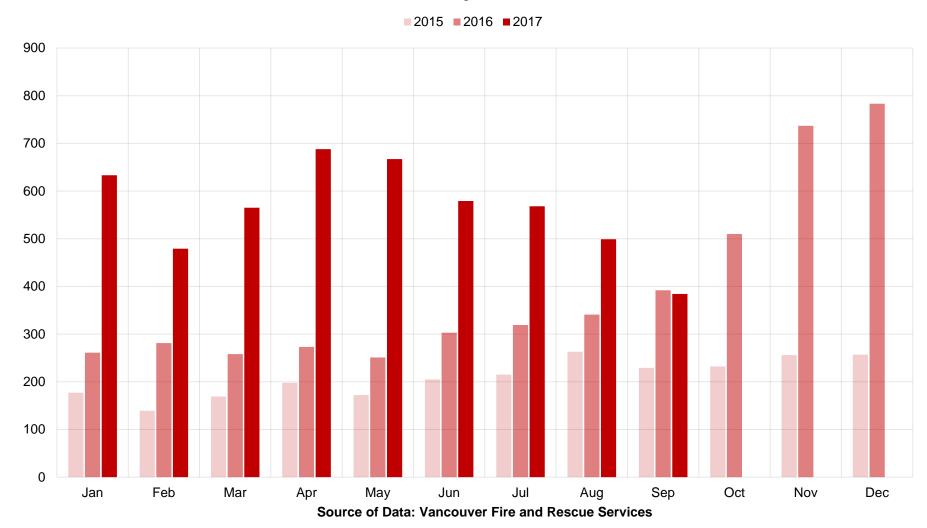


Source of Data: BC Coroner Service and VPD
\*\*\*Deaths in 2017 have yet to be confirmed by BC Coroner Service

#### 2017 Fire & Rescue Overdose Responses = 5,602 YTD



#### VFRS Monthly Overdose Calls Jan 1, 2015 - September 24, 2017



#### April 12, 2017 – Coordinated Response to Council



Update on City
 Response to the
 Overdose Crisis

Paul Mochrie

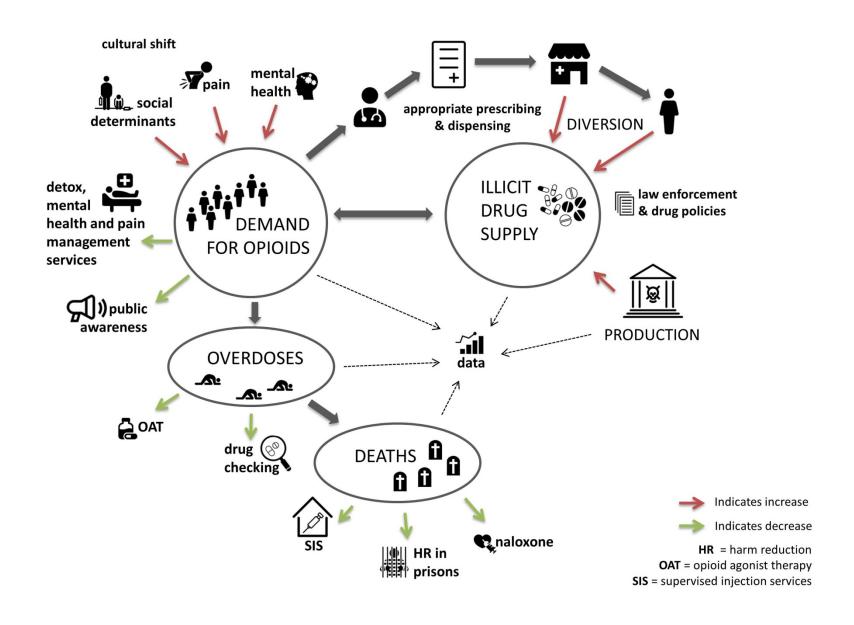
**Deputy City Manger** 

Overview of Opioid Public Health Emergency in BC Dr. Perry Kendall Provincial Health Officer for British Columbia

3. Update on VCH response to Opioid Public Health Emergency

Dr. Patricia
Daly

Chief Medical
Health Officer and
Vice President,
Public Health at
Vancouver Coastal
Health



# **Key Provincial Focus Areas**



cultural shift

- 1. More accessible prescription, prescription options and resources, build a system
- 2. Discourse around stigma & drug policies
- 3. Regulatory Framework (Portugal) / Difficult discussions, decriminalization
- 4. Focus on upstream, Early Childhood Education, Supportive Housing
- National Pain Strategy



naloxone

**HR** = harm reduction **OAT** = opioid agonist therapy SIS = supervised injection services 17

#### Vancouver Coastal Health Response



- Naloxone distribution
- Mobile Medical Unit
- 3. Overdose Prevention Sites
- 4. New clinics (Connections, RAAC at St. Paul's)
- Applications pending: New Supervised Consumption Sites







#### 2017 Priorities



- 1. Supportive housing
  - Train staff, naloxone available
- Expand opioid agonist therapy
  - Oral and injectable
- 3. Address stigma
- 4. Vulnerable youth
  - Identify, engage, support
- 5. Early childhood development



# City Response

#### 2017 Actions – VFRS, Safety, Community Resources



- 3.9% property tax increase in Dec 2016
- 0.5% or \$3.5M allocated for crisis
- Roughly \$2.5M invested in building VFRS capacity and improving community safety



# Collaboration in Crisis – Shared Objectives



# Common Goals & Strong Relationship -Allowed for rapid responses and resource alignment

- MOU with VCH enabled quick coordination
- Overdose prevention site implementation
- Leveraged funding with VCH to support nonprofits in life-saving work
- Coordination with Metro Vancouver Aboriginal Executive Council

### **2017 Actions – Community Investments**



 In February 2017, Council approved funding for grants to community non-profits to address the crisis

Initiative	Funds	
Peer-based initiatives into SROs	\$220,000	
De-stigmatization programs	\$100,000	
Ray-Cam "Circle of the Child" Prevention program	\$60,000	
Peer capacity building and support	\$30,000	
Total	\$410,000	

# **2017 Actions – Community Consultation**



- Community consultation and data monitoring
  - Healthy City for All Leadership Table
  - People with Lived Experience Advisory
  - Metro Vancouver Aboriginal Executive Council
  - Partners in community and health
- Identified Five Priority Needs:
  - 1. Innovative anti-stigma programs
  - Building capacity with Urban Aboriginal communities
  - Addressing social isolation of drug users, especially men
  - 4. Expanding beyond the DTES
  - 5. Addressing the toxic drug supply

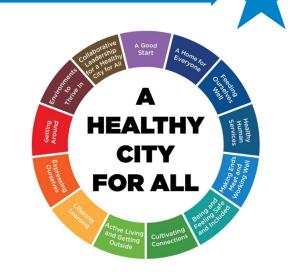
#### **2017 Actions – Call for EOI and Overdose Grants**



April	May	June	July	August	September - December
Developed Call for Expression of Interest (EOI)	Distributed Call for EOI to community stakeholders and non-profits	25 proposals received  EOI evaluation  Staff liaised 16 organizations for full proposals	Finalized proposals  Council approved \$601,800 in grants on July 26	Grants paid out to community organizations	Early implementation and monitoring

### Projects align with:

- Healthy City Strategy
- City of Reconciliation commitments
- Downtown Eastside Plan
- Community Economic Development Strategy



# **2017 Actions – Community Investments**



 In July 2017, Council approved funding for 16 grants to community non-profits

Initiative	Funds	
Innovative Anti-Stigma Programs	\$117,000	
Building capacity with Urban Aboriginal Communities	\$264,670	
Addressing social isolation of drug users, especially men	\$68,200	
Expanding interventions beyond the DTES	\$23,000	
Addressing the illicit toxic drug supply	\$128,930	
Total	\$601,800	

# 2017 Actions - Community Investments Cont.



- In total, \$1.02M invested in over 23 community projects
- Over \$600K invested in employing and building capacity with peers
- Alignment with VCH core theme areas for grant funding
- Early implementation stages, preliminary outcome reports expected in December
- Early 2018 Report back to Council

# Aligned Projects and Advocacy

### **Needle Management**



- 1,445 discarded needle reports from Jan – Aug 2017
- Extra patrols in Andy Livingstone Park
- Collaborating with VCH to distribute needle disposal information



- Spikes on Bikes: 105,000 collected
- Micro-cleaning grants: 56,000 collected

# **DTES Lane Management**



 Difficult to pin-point OD locations in DTES, impacting response times

 Group of VPD, VFRS, BC EHS, and City Engineering installed 50 reference signs in the DTES

 Next step: Evaluate impacts of signage



#### St. Paul's Mental Health HUB



- \$1M City investment
- State of the art, modular design
- Rapid access addictions clinic
- 8 mental health beds, 12 transitional beds
- Referrals to ongoing supports
- Construction underway



### **National Leadership & Advocacy**



- City presented to Senate Committee on Bill C-37 (safe injection sites) in April 2017
- Big City Mayor's Task Force
  - Launched in Jan 2017
  - Chaired by Mayor Robertson
  - Issued recommendations to Federal government in May 2017



# Collaborative Action, Collaborative Leadership – Next Steps

#### **Urban Health Leaders Action Council**



- Council approved transition of Mayor's Task Force on Mental Health and Addictions in Feb 2017
- Transitioning to Urban Health Leaders Action Council
- Focus on shared goals, targets, and resources to develop 5 year Action Plan
- Focus on alignment with Poverty Reduction Strategy, CED Strategy





# Thank You & Questions?