



Co-Chairs:	Dr. Penny Sutcliffe, Medical Officer of Health and Chief Executive Officer, Public Health
	Sudbury & Districts
	Paul Pedersen, Chief of Police, Greater Sudbury Police Service
Present:	City of Greater Sudbury (CGS):
	Steve Jacques, General Manager, Community Development
	Tyler Campbell, Director, Social Services
	Public Health Sudbury & Districts (PHSD):
	Stacey Gilbeau, Director, Health Promotion Division
	Sherry Price, Program Manager, Mental Health and Substance Use
Resource:	Public Health Sudbury & Districts (PHSD):
	Angel Corneau, Public Health Nurse, Mental Health and Substance Use
	Angèle Bodson, Program Manager, Needle Exchange Program
Regrets :	Daniel Despatie, Inspector, Patrol Operations Division
	Sarah Cunningham, Deputy Chief of Police
	Sandra Laclé, Program Director, Harm ReductionSupervised Consumption and
	Treatment Site
	Imran Adrian Khan, Associate Medical Officer of Health
Recorder:	Julie Labelle for Manon Tessier, Public Health Sudbury & Districts

#	ltem	Description of Outcome	Individual Responsible for Further Action and Deadline
1.0	Call TO ORDER/ROLL CALL	Dr. Sutcliffe called the meeting to order at 10:35 a.m.	
		Introduction of new committee members.	
2.0	TERRITORIAL	Dr. Sutcliffe acknowledged the ancestral Indigenous	
	ACKNOWLEDGEMENT	territory upon which this meeting was occurring.	
		National day of Truth and Reconciliation is	
		September 30, 2022.	
3.0	REVIEW AND APPROVAL OF AGENDA	The agenda was reviewed and approved.	
4.0	REVIEW AND APPROVAL OF	The minutes from the previous meetings were	
	MINUTES – April 4, 2022	approved as submitted.	
5.0	APPROVAL/DISCUSSION ITEMS		
5.1	Supervised Consumption	Réseau ACCESS Network, Public Health Sudbury &	
	Services (SCS)	Districts and the City of Greater Sudbury have been	
	 Update on applications SCS Federal 	working diligently to establish a Supervised Consumption and Treatment Services (SCTS) site in	
	exemption	Greater Sudbury.	





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	 SCT (Treatment) Provincial application Stakeholder Committee Access and Security Policy Security Plan Next Steps 	On May 17, 2022, the Community Drug Strategy (CDS) announced that Health Canada had granted a federal exemption under the Controlled Drugs and Substances Act to operate a new Supervised Consumption Site (SCS) at the Réseau ACCESS Network- 24 Energy Court site in Greater Sudbury. The federal exemption was the final element required to complete the provincial application for a funded Supervised Consumption and Treatment Services (SCTS) site. In order to receive provincial funding for SCTS, applicants must demonstrate that their proposed service meets federal requirements, as well as additional requirements under Ontario's Consumption and Treatment Services program. The provincial application for funding was submitted in August 2021, and approval is pending. The Réseau ACCESS Network- 24 Energy Court site hosted a Ribbon Cutting Ceremony for the SCS on July 21. This event included a site tour and speech from Dr. Penny Sutcliffe amongst other dignitaries. Réseau ACCESS Network is working with the Centre for Addiction and Mental Health (CAMH) Canadian Research Initiative in Substance Misuse (CRISM) to collaborate on an evaluation of the SCS. They have provided Réseau ACCESS Network with an evaluation proposal looking for feedback on data collection plans and interview questions to ensure they are relevant and appropriate. Currently, the site is set to open the week of September 19, 2022. Security:	





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		 The SCS will have a minimum of one security guard on site between the hours of 0900 and 2100. The SCS will be equipped with locked doors that are assigned and accessible only to specific CTS staff. The SCS will be equipped with a security system that shall be activated whenever the site is left unoccupied. 	
		 Cameras: The SCS will have limited camera coverage in order to promote a feeling of safety and welcome to the facilty. The CTS will however have a minimum of four cameras on site with the option to expand as required in the future. The cameras will be located outside the main entrance and exits, near the server room, and overlooking the safes for petty cash and lost or discarded drug storage. The City of Greater Sudbury will have cameras located on the exterior of the building as part of their agreements with the local businesses and community members in the area immediately surrounding the CTS. Internal cameras will be accessible on site by the Manager of Consumption and Treatment Services and their designate only. The CTS has emergency preparedness plans, policies and procedures. All staff are to be orientated to the contents of the plans. 	
		 Activation of Allied Agencies (Police, Fire, and/or EMS): SCS staff will ultimately be responsible for activating and executing all emergency codes as per their training and clinical judgement 	





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		The SCS recently had a Ministry of Labour and City of Greater Sudbury inspection completed and are working on outstanding items prior to their opening. Réseau Access Network is still recruiting for a part time healthcare provider, one case manager and a part time peer worker. They are optimistic that these positions will be filled shortly and anticipate the SCS will be opened by the end of September. The Mayor's office continues to advocate for provincial funding.	
5.2	Harm Reduction Expansion Program	 Public Health Sudbury & Districts (PHSD) works with the Ministry and partners to provide support to those who use substances. Public Health has an opportunity to provide needle kiosk bins to communities in the districts, as well as harm reduction supplies. PHSD will be purchasing the third-generation Sharps Kiosk 3.0 Needle Drop Box for distribution in 2022. These bins are ideal for sharps waste (needles) in public areas, drop-off centers, parks, and recreational areas. These needle kiosks can be used to dispose of needles, syringes, and lancets and can be securely mounted in place both indoors and outdoors. It is important to note that while these bins are free of charge to communities interested in participating, the responsibility for maintenance and disposal remains with the community themselves. PHSD is working with organizations to determine if they are interested in distributing harm reduction supplies. Equipment is often distributed in multiple ways, including from fixed sites, during outreach and through secondary or user-to-user distribution. 	





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		Equipment distribution programs also collect used equipment for safe disposal. If agencies are interested in sharps kiosk/harm reduction supplies or staff need support/training, Public Health and community partners such as Réseau ACCESS Network can assist.	
6.0 6.1	CONSENT AGENDA	The dashboard was highlighted	
6.1	 Opioid Surveillance, Drug Alerts and Warnings <u>Dashboard</u> <u>Drug Warning</u> (April 28, 2022) 	 The dashboard was highlighted. On April 28, 2022, a drug warning was released as community partners informed us that there were reports of unexpected reactions to substances circulating in our community, as well as an increase in overdoses involving stimulants. Public Health Sudbury & Districts' opioid surveillance system continues to be monitored and updated based on information from the Office of the Chief Coroner. The dashboard is updated monthly or as new data becomes available. It remains a go to source for information for our partners and the community. Based on preliminary data for 2021: From January - December 2021, Sudbury and districts were found to be the third highest in the province as it relates to opioid-related deaths (49.6 per 100,000 population), significantly higher than the comparable rate in Ontario overall, 19.3 deaths per 100,000 population per year. Northern communities continued to have the five highest opioid-related mortality rates in the province in 2021, (Thunder Bay, Algoma, PHSD, Porcupine, North Bay) 	





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		 According to preliminary stats for 2022, Sudbury and districts was found to have the highest death rate associated with opioid overdose from January to March 2022 (a rate of 18 deaths per 100,000 population during the 3 month time period). 	
		Contributors to the elevated death rates in the north are understood to include having less access to emergency services due to geography; trauma; mental health; history of collonization in residential schools; access to housing; social determinants of health; violence; crime; isolation; etc.	
		Discussion took place regarding having services via video to be able to supervise from a distance for people living with addiction at home. Housing is a priority; it was noted that some are not accepting services that are being offered. Outreach and front line support reaches out almost daily to encourage participation in acute care assistance, services and housing. Once these services are accepted, individuals are housed and given a cellular phone for emergencies and connection, the results are successful.	
		 Public Health approach in prevention includes: Sudbury through Compass and community partners is planning to set up a Youth Wellness Hub in 2023 to create a place for people aged 12 to 25 to receive support for such things as mental health, substance use, primary care, education, employment, training and housing. 	





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6.2	Northern Health Units - Community of Practice	 Working with adult influencers and community partners to find strategies to protect youth. Protective factors for mental health and mental illness. Working with communities and neighborhoods to make connections and relationships. Resources for prevention for children to thrive and flourish. This Community of Practice (CoP) continues to meet and share information with each other. However, 	
	Community of Practice	and share information with each other. However, due to the pandemic, the last meeting was held on April 5, 2022. Committee members worked to submit an application to become an EENET (Evidence Exchange Network) community of practice. Results of the application will be shared in September. If approved, EENet will connect the CoP to larger networks, ensuring that the work is shared with stakeholders across Ontario. They will also provide in-kind supports from an EENET knowledge broker, who will dedicate up to half a day per week to the group's activities and can help with a variety of activities like developing knowledge mobilization plans, completing needs assessments for defined group, developing resources, coordinating webinars or other interactive events and more.	
6.3	Naloxone Distribution	As for naloxone distribution in April, PHSD and community partners in our region: - distributed a total of 763 naloxone doses (347 kits) - trained 424 individuals - called 911 sixteen (16) times	





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		 During the same time period last year for April 2021, there were 854 doses distributed. For naloxone distribution in May, PHSD and community partners: distributed a total of 1,117 doses (990 kits) trained 134 people called 911 fifteen (15) times During the same time last year for May 2021, there were 1,111 doses distributed. For naloxone distribution in June, PHSD and community partners: distributed a total of 967 doses (942 kits) trained 124 people called 911 twice During the same time last year for June 2021, there were 1,412 doses distributed. For naloxone distribution in July, PHSD and community partners: distributed a total of 1,298 doses (1,042 kits) trained 117 people called 911 sixteen (16) times During the same time last year for July 2021, there were 1,380 doses distributed. 	
6.4	Needle Disposal Bins	Support advocacy for funding continues at Federal level.	
	Community Drug Strategy Steering Committee Minutes – June 21, 2022	The minutes were shared for information purposes.	
7.0	NEXT MEETING DATE	To be determined.	
8.0	ADJOURNMENT	The meeting was adjourned at 3:16 p.m.	



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 MINUTES

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