OTTAWA COMMUNITY ACTION PLAN

Comprehensive Mental Health and Substance Use Strategy - Focus on Opioids

September 12, 2019
Introduction

Substance use exists across a spectrum, ranging from abstinence to beneficial or nonproblematic use, to potentially harmful use, to the development of dependence or substance use disorders. It is common for people to experience co-occurring mental health problems and problematic substance use. Positive mental health, which is associated with better overall health, resilience and the ability to cope with life’s challenges, is an important protective factor in preventing the onset or worsening of mental health disorders and problematic substance use. The concurrent treatment of both substance use and mental health disorders leads to better outcomes (See Appendix A for Supporting Epidemiology).

The Ottawa Community Action Plan is an opt-in, collaborative, network-based strategy with an overarching goal of achieving deep and durable impact. Our objectives are to make tangible improvements in mental health and reduce the harms from substance use, with a focus on opioids, across the lifespan. Ottawa Public Health (OPH) will continue to work with partners to develop and implement this plan to promote mental wellness, prevent problematic substance use, mental illness and stigma, support emerging harm reduction initiatives, and promote collaboration and integration across the system. The Ottawa Community Action Plan complements OPH’s mental health and substance use strategic direction and the work of OPH’s community partners.

A number of guiding principles¹ create the foundation for the partnerships and the plan:

- Design and implement initiatives using best practices;
- Ensure people with lived experience are involved in all phases of the strategy;
- Leverage the expertise and experience of all partners in the co-design;
- Adopt an evidence-based approach to continuously learn and improve;
- Plan for sustainability from the start;
- Ensure that all aspects of the Ottawa Community Action Plan are carried out.
Building the Plan

Phase 1: Assess Readiness

OPH started building the Comprehensive Mental Health and Substance Use Strategy - Focus on Opioids by assessing the readiness of the community to address such a complex and interconnected problem, as well as the readiness of leaders and people with lived experience in the community. Co-leadership between OPH, The Royal, the Community Addictions Peer Support Association (CAPSA) and the Canadian Centre on Substance Use and Addiction (CCSA) will continue to bring people with lived experience, as well as partners and stakeholders with varying perspectives and expertise, together through a series of events to discuss issues and ideas for action, including the spectrum of substance use and mental health.

Three key goals and actions have been identified in 2019:

Preventing stigma and problematic substance use

- Create a collaborative table across systems to advance a mental health and substance use strategy across sectors and lifespan that is designed with vulnerable populations and people with lived experience;
- Implement broad public and stakeholder education on mental health and substance use that addresses stigma and language to shift public and professional opinion; and
- Develop a stigma and prevention strategy that includes social engagement and acknowledges and addresses the effects of trauma, housing, and adverse childhood experiences.

Emerging harm reduction initiatives that can reduce harms associated with opioid use

- Increase access and funding to opioid addiction treatment and managed opioid programs;
- Establish a call to action for allied system-level partners to integrate harm reduction practices and philosophies into their services; and
- Expand accessibility and diversity of harm reduction services (i.e. 24-hour access to harm reduction services, fewer dosing restrictions).

Collaborating and integrating across the system to centralize access to comprehensive mental health, substance use and social services leading to increased access and uptake of services

- Create a funding model that encourages comprehensive, collaborative, integrated and client-focused care (one-stop shop);
• Integrate people with lived experience, including their family, into the design and delivery of all services; and
• Collaborate across the system, requiring providers and services to address stigma, using existing evidence-informed models.

## Phase 2: Initiate Action

The goals of Phase 2 to be achieved in 2019 include:

- Confirm the commitment to work together;
- Focus on building relationships and trust;
- Establish a common partnership agreement that describes commitments, roles and responsibilities as the foundation for collaboration across the community;
- Validate key activities of the Ottawa Community Action Plan across the continuum of care and experience;
- Emphasize co-design and shared accountability using priorities for action.

A clear communication process is an essential component of the strategy. As there continues to be a collective understanding, commitment and accountability to the Ottawa Community Action Plan, further communication channels will be established. In addition, indicators of success and quantitative and qualitative data sharing opportunities will be identified.

## Phase 3: Organize for Impact

The Ottawa Community Action Plan will be collaboratively led by the community sponsors: OPH, The Royal, CAPSA and CCSA. OPH will be the backbone organization to support the success of Ottawa’s plan. To ensure a collective and impactful approach the community sponsors will work closely with the Ottawa Overdose Prevention and Response Task Force, advisory groups, stakeholder groups and partners.

The plan is intended to be inclusive and include engagement with a broad range of individuals, agencies and existing networks representing people with lived experience, Indigenous Peoples, newcomers, visible minorities, women, LGBTQ++ and vulnerable populations.

## Phase 4: Begin Implementation

The following goals with recommended actions have been identified to be achieved within 18 months, some of which are already being implemented. This work will
continue to be in parallel with OPH’s ongoing mental health promotion and prevention work. This first stage of action has been developed based on The Ottawa Summit findings and will require reassessment at the end of 2020 to determine the next stage of actions in the long-term plan.

The following tables outline the recommended actions and suggested lead agencies who are committed to engaging community agencies to achieve the outlined goals.

**Goal 1: Preventing stigma and problematic substance use**

<table>
<thead>
<tr>
<th>Recommended Actions</th>
<th>Suggested Leads</th>
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<tbody>
<tr>
<td>Anti-stigma knowledge for the general population and media</td>
<td>CCSA, CAPSA, Canadian Mental Health Association (CMHA), OPH</td>
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<tr>
<td>Anti-stigma training to stakeholders, including health care providers, first responders, community leaders and decision-makers</td>
<td>CCSA, CAPSA, OPH</td>
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<tr>
<td>Anti-stigma knowledge for school age youth, parents, caregivers, teachers and educators using a youth engagement approach</td>
<td>OPH, CAPSA, school boards</td>
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<tr>
<td>Anti-stigma knowledge for post-secondary education</td>
<td>CCSA, CAPSA, OPH</td>
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<tr>
<td>Stigma and prevention strategy for perinatal women and families</td>
<td>Champlain Maternal Newborn Regional Program, OPH</td>
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<tr>
<td>Seek opportunities to influence federal and provincial healthy public policy to contribute to destigmatizing substance use disorder, including for those who are in the criminal justice system</td>
<td>CCSA, CAPSA, OPH</td>
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<tr>
<td>Capacity building with intermediaries and public education on overdose prevention and awareness (Party Safe)</td>
<td>OPH</td>
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<tr>
<td>General Public Education on Overdose Prevention and Awareness through StopOverdoseOttawa.ca (SOO)</td>
<td>OPH</td>
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**Goal 2: Emerging harm reduction initiatives that can reduce harms associated with opioid use**

<table>
<thead>
<tr>
<th>Recommended Actions</th>
<th>Suggested Leads</th>
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<tbody>
<tr>
<td>Facilitate integration of harm reduction philosophy and practice across allied service partners (i.e. primary</td>
<td>OPH</td>
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<tr>
<td>Recommended Actions</td>
<td>Suggested Leads</td>
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<tr>
<td>Establish peer navigator roles</td>
<td>The Royal, CAPSA, CMHA</td>
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<tr>
<td>Increase public awareness of available treatment services</td>
<td>OPH</td>
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<tr>
<td>Integration and access</td>
<td>OPH, The Royal, Ontario Health Teams (OHTs)</td>
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<td>Increase inter-agency communication and knowledge exchange of services</td>
<td>OPH</td>
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<tr>
<td>Increase system capacity for rapid access</td>
<td>The Royal, OHTs</td>
</tr>
<tr>
<td>Advocate for a funding model that encourages comprehensive, collaborative, integrated, and client-focused care (one-stop shop)</td>
<td>CCSA, CAPSA, The Royal, OPH, OHTs</td>
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**Goal 3: Collaborating and integrating across the system to centralize access to comprehensive mental health, substance use and social services leading to increased access and uptake of services**

**Phase 5: Sustain Action and Impact**

The community sponsors, in collaboration with our partners, will ensure the Ottawa Community Action Plan will continue to build momentum to make sustainable and measurable improvements to mental health and reduce the harms from substance use, with a focus on opioids, across the lifespan.

Following actions will be undertaken in the continued development of the plan:
• Develop an evaluation plan (indicators of success, data collection methods, approaches to disseminate) to measure outcomes and impact and to guide future decision making;
• Review and renew commitments to the Ottawa Community Action Plan and processes supporting the plan;
• Communicate ongoing progress on the plan with the community;
• Advance policy/advocacy agenda for sustainable long-term action.
Appendix A
Supporting Epidemiology

Prevalence of Use:
• An estimated 3% of the Ottawa population aged 19 and over reported using an illicit drug in the past year.\textsuperscript{2} This is likely an under-estimate of use in Ottawa.
• In 2017, in Ottawa 1 in 10 residents had an opioid pain prescription and 4,390 people received high daily dose opioid therapy for pain.\textsuperscript{3}
• Eleven percent of Grade 7 to 12 students in Ottawa reported using opioids non-medically in the past year and 60% felt that using opioids non-medically has a medium to great risk of harm.\textsuperscript{4}

Deaths:
• Opioids make up the majority of drug overdose related deaths (82% in 2016)\textsuperscript{5} and opioid related deaths increased by 60% from 40 in 2016 to 64 in 2017.\textsuperscript{6}
• Fentanyl and fentanyl analogues directly contribute to 71% of accidental opioid overdose deaths and almost half of those who died from an accidental opioid overdose from May 2017 to June 2018 were between 25 and 45 years old.\textsuperscript{7}

Emergency Department (ED) Visits:
• In Ottawa, drug overdose ED visits more than doubled between 2011 and 2017 with most of this increase due to opioids.\textsuperscript{8} Those aged 30-34 years old are at highest risk of an opioid overdose ED visit. In 2017, 16% of unintentional opioid ED visits were someone who had an opioid ED visit in the past year.

Hospitalization:
• Unintentional opioid drug overdose hospitalizations exceed overdoses from all other drugs combined.\textsuperscript{9}
• People 65 and older are most at risk for an opioid-related hospitalization.\textsuperscript{5}

Access of Services:
• In 2017, 10,421 naloxone kits were distributed through pharmacies in Ottawa.\textsuperscript{3}
• Between July and December 2018, there were 36,146 supervised consumption site visits (21% of OPH SCS visits during this period were among clients who reported being on opioid agonist therapy).\textsuperscript{10}
• Between July 2017 and December 2018, 3,641 referrals for addiction services (12% opioid specific) were made by Service Access to Recovery.\textsuperscript{11}
10 SCS encounter data: Inner City Health, Ottawa Public Health, Sandy Hill Community Health Centre, Somerset West Community Health Centre: July –December 2018.