

City of Kingston Report to Council Report Number 21-032

To: Mayor and Members of Council

From: Lanie Hurdle, Chief Administrative Officer

Resource Staff: Ruth Noordegraaf, Director, Housing & Social Services

Craig Desjardins, Director, Strategy, Innovation & Partnerships

Date of Meeting: December 15, 2020

Subject: Partnership with Kingston Community Health Centres

Council Strategic Plan Alignment:

Theme: 5. Foster healthy citizens and vibrant spaces

Goal: 4.3 Create and facilitate innovation hubs

Executive Summary:

In many regions across Canada, the COVID-19 pandemic is compounding the ongoing opioid overdose crisis and exacerbating substance use-related harms. The Kingston region has seen a recent spike in opioid overdoses. Community partners are working collaboratively to address the impacts of the opioid overdose crisis and emerging community and health system issues related to substance use more broadly.

Kingston Community Health Centres-Street Health (KCHC) who operates the Consumption Treatment Service (CTS) has recently entered into a memorandum of understanding (MOU) with a local start-up company, Spectra Plasmonics, which has developed an in-field drug identification technology. The MOU signed by both parties would support a pilot project for the use of the technology at the CTS which is located with the Integrated Care Hub (ICH) at 661 Montreal Street.

The pilot project will use a portable, state of the art drug analyzing technology. Using this patentpending technology, Spectra can help to measure, monitor, and manage drug consumption in the community.

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The pilot project would start in January 2021 and last for 15 months with an anticipated cost of \$269,000. The implementation of the pilot project is time sensitive as a report from Spectra Plasmonics, in partnership with KCHC, will be submitted to Health Canada in January 2021. In order to support this initiative, staff are recommending that the City utilize the remaining provincial funds for the implementation of cannabis legalization as well as an upset limit of operating funds. City staff will continue to look for additional grant and contribution opportunities to reduce the municipal contribution.

An evaluation report would be submitted to Council at the end of the pilot project. The metrics for this evaluation would be developed in partnership with key stakeholders.

Recommendation:

That the Mayor and Clerk be authorized to execute an agreement with Kingston Community Health Centres for the implementation of a pilot project of 15 months with Spectra Plasmonics to operate a drug detection program at the Consumption Treatment Service in a form satisfactory to the Director of Legal Services; and

That Council approve a total contribution of up to \$269,000 with funding of \$127,000 from the unused cannabis legalization funds and \$142,000 of funds from either the 2020 or 2021 Social Services operating budget; and

That Council direct City staff to continue to identify grant and contribution opportunities in order to reduce the municipal contribution.

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Authorizing Signatures:

ORIGINAL SIGNED BY CHIEF ADMINISTRATIVE OFFICER

Lanie Hurdle, Chief Administrative Officer

Consultation with the following Members of the Corporate Management Team:

Paige Agnew, Commissioner, Community Services Not required

Peter Huigenbos, Commissioner, Business, Environment & Projects Not required

Brad Joyce, Commissioner, Corporate Services

Not required

Jim Keech, President & CEO, Utilities Kingston Not required

Desirée Kennedy, Chief Financial Officer & City Treasurer

Sheila Kidd, Commissioner, Transportation & Public Works

Not required

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Options/Discussion:

Opioid Crisis

Four community alerts have been issued by KFL&A Public Health thus far in 2020 (March, May, September and December) to warn residents and service providers of an increased risk of overdose from toxic drugs circulating the community. The COVID-19 pandemic is compounding the ongoing opioid overdose crisis. On December 2, 2020, KFL&A Public Health issued the fourth alert to the KFL&A community warning of a recent spike in overdoses in the region. Several factors are contributing to an increased risk of overdose during the COVID-19 pandemic:

- the drug supply has become increasingly toxic, unpredictable and unregulated;
- many community services and programs have been forced to close, operate at reduced capacity or modify service delivery, making it more difficult for people who use substances to access harm reduction and treatment services;
- travel restrictions or supply chain disruptions, including drug seizures by law enforcement, may limit access to substances, which can increase risk of withdrawal, reduce tolerance and/or increase use of other, riskier drugs;
- people may be experiencing stress, fear, job loss and isolation, which can impact substance use; and
- people may be more likely to use alone in response to pandemic messaging that generally encourages staying home and physically distancing from others.

KFL&A Public Health has provided the following data related to opioid overdoses in the region.

Opioid-related Mortality

Due to pending Coroner investigations, there is a delay in mortality data. Note the data provided below does not capture opioid-related deaths that have occurred since May 1, 2020.

- From January 1 to April 30, 2020, there were 12 confirmed or probable deaths from opioid-related causes in the KFL&A region.
- Over the same time period in 2019, there were 14 confirmed or probable deaths from opioid-related causes in the KFL&A region.
- For all of 2019, i.e., January 1 to December 31, 2019, there were 31 cases of opioid-related death in KFL&A.
- Unofficially, there were 4 suspected overdose deaths in a one-week period at the end of August 2020.

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Opioid-related Emergency Department Visits

- From January 1 to July 31 2020, there were 128 cases1 of opioid-related emergency department visits in the KFL&A region.
- Over the same time period in 2019, there were 154 cases¹ of opioid-related emergency department visits in the KFL&A region.
- For all of 2019, i.e., January 1 to December 31, 2019, there was a total of 238 cases¹ of opioid-related emergency department visits in the KFL&A region.

Drug Analysis Pilot Program

On August 20, 2020, the Consumption Treatment Service (CTS) relocated its operations to the Integrated Care Hub (ICH) from its original location on Barrack Street (as part of KCHC-Street Health). The CTS provides a safe and supportive place for people to consume substances under the supervision of people who are trained to recognize and respond to adverse reactions, including overdoses. In the 2 week period after re-locating to the ICH, the CTS saw: 102 unique clients/ 294 total visits/ 29 new clients accessing CTS due to co-location/ 206 onsite/off-site referrals, over 300 naloxone kits distributed and 30% increase in needle exchange. CTS has responded to multiple overdoses negating the need for Police, Fire and hospital interventions, saving multiple individuals' lives and thousands of dollars to the healthcare system.

KFL&A Public Health and community partners are working collaboratively to address the impacts of the opioid overdose crisis and emerging community and health system issues related to substance use more broadly. KCHC which oversees the CTS operations has been engaged in identifying solutions to help alleviate some of the issues related to the drug crisis.

KCHC and Spectra Plasmonics (Spectra), a local Queen's University spin-off company, are partnering to pilot a portable, state of the art drug analysis technology. Using this patent-pending technology, Spectra can help to measure, monitor, and manage drug consumption in the community.

Spectra was selected as 1 of 3 organizations in Health Canada's Drug Checking Technology to pilot novel drug checking solutions to help combat the country's drug overdose crisis. Their handheld, portable drug checking device, allows for lab-grade quality results to determine the specific components of any drug-based sample. Drug checking as a harm reduction measure, can identify toxic substances or potent drugs like fentanyl. The rapid warning system can avert

¹ Note: the data provided above may underrepresent the number of opioid-related emergency department visits. Emergency department visits may or may not be coded to reflect opioid consumption. For example, if a patient presents to the emergency department following consumption of opioid-contaminated cocaine, the data may not capture this is an opioid-related visit, especially if a toxicology screen is not done.

Existing Policy/By-Law:

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disasters when substances such as carfentanil (100x more toxic than fentanyl) and etizolam (10x stronger than valium; blocks naloxone) are discovered.

Spectra has designed its product to be used by public organizations in front line environments to provide rapid, high quality results. Tests can be completed in ten minutes or less, with data then rapidly uploaded to a central dashboard. The combination of speed, ease of use, and detailed results also enables preventative measures to be taken with regional drug strategy groups by offering a timely set of data of substances in the community. For example, the data collected can be matched with other user reactions to identify matching drug composition, allowing for a better understanding of the effects of different mixtures toxicities and adverse reactions. As the system gets deployed in more and more communities, it will increase the ability to monitor trends and usage across the province and/or country.

KCHC and Spectra have entered into a memorandum of understanding (MOU) to run a pilot project by utilizing the drug detection technology at the CTS. Based on information submitted to the City by both KCHC and Spectra, the pilot project would be for a period of 15 months starting in January 2021. Spectra is proposing to cover expenses related to the first 14 weeks of the pilot project. The remaining of the pilot is estimated at a cost of \$269,000 which includes the technology supply for one (1) year, Spectra's support and data analysis as well as some additional staffing support for the CTS. The timing for the implementation of this pilot project is time sensitive as Spectra will be submitting an update report to Health Canada for January 8, 2021. It is important that a commitment be secured by that time. KFL&A Public Health, Kingston Police and Frontenac Paramedic Services will also be partners in this pilot project.

City staff are recommending that the City enters into a partnership with KCHC to support the implementation of the pilot project at the CTS with a commitment of up to \$269,000. It is proposed that \$127,000 of unused provincial funding from the implementation of the legalization of cannabis and up to \$142,000 from either the 2020 or 2021 Social Services operating budget be used to fund the contribution. City staff will continue to work with partners to identify other sources of funding including grants, in order to reduce the municipal contribution.

None	
Notice Provisions:	
None	
Accessibility Considerations:	
None	

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Financial Considerations:

The cost of the 15 month pilot is \$269,000 to cover the cost of technology, use of the Spectra Plasmonics database, as well as CTS additional staffing resources. Staff are proposing to utilize \$127,000 from the unused cannabis legalization funds and \$142,000 from either the 2020 or 2021 Social Services operating budget, to be determined based on confirmation of pandemic-related funding and year end financial results. City staff will work with partners to identify other potential sources of funding to reduce the municipal contribution.

Contacts:

Lanie Hurdle, Chief Administrative Officer 613-546-4291 extension 1231

Other City of Kingston Staff Consulted:

None

Exhibits Attached:

None