Progress Update on B.C.'s Response to the Opioid Overdose Public Health Emergency

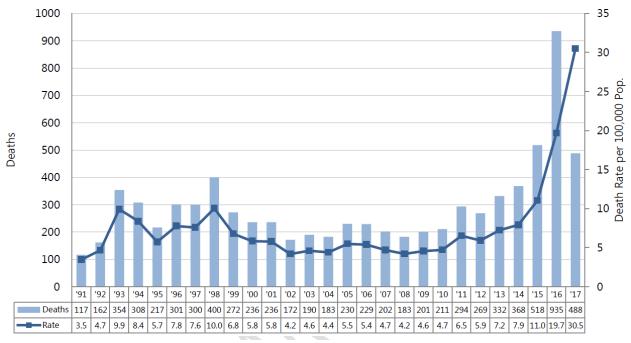
Joint Task Force on Overdose Prevention and Response Fifth Progress Update

May 2017

Background

In April 2016, the provincial health officer declared a <u>public health emergency</u> under B.C.'s *Public Health Act* in response to a significant increase in the number of opioid overdose deaths across the province. In July 2016, the <u>Joint Task Force on Overdose Prevention and Response</u> was established to lead an integrated response to the emergency across public health, health care and public safety sectors, supported by a comprehensive seven-point plan. This report provides a detailed update on the work completed since the release of the <u>fourth progress report</u> in March 2017.

April 14, 2017, marked the one-year anniversary of the declaration of the public health emergency. The provincial health officer <u>released a statement</u> on the anniversary noting that, unfortunately, despite continued efforts across the province, an unprecedented number of overdoses and overdose deaths continue to occur. The most recent report by the BC Coroners Service shows that 935 people died from an apparent illegal drug overdose in 2016. In the first four months of 2017, 488 people have died and the number of people who die from overdoses each month continues to be much higher than in previous years.



Illicit Drug Overdose Deaths and Death Rate, BC, 1990 - April 30, 2017; BC Coroners Services

In 2016, 90% of illegal drug overdose deaths were among people who were found indoors. This trend continues in 2017 with 89% of overdose deaths occurring indoors. Consuming drugs alone is a significant risk factor for overdose death as no one is present to intervene in the event of an overdose.

Location	2016	2017
Inside – private residence	570	264
Inside – other residence	228	146
Inside – other	42	27
Outside	86	47
Unknown	9	4
Total	935	488

Illicit Drug Overdose Deaths by Place of Injury, BC, 2016- April 30, 2017

A staggering 85% of overdose fatalities in 2016 and 2017 did not have an associated 9-1-1 call. There is a renewed urgency felt by the Joint Task Force to reach and engage those who are using drugs alone at home.

While an unacceptably high number of overdose deaths are occurring without a call for help, if someone does call for help, chances of surviving an overdose are extremely good, as less than 1% of ambulance attended overdoses are fatal, and this outcome has improved over the last year. Actions to encourage people to call 9-1-1 for help when witnessing an overdose are being rolled out. For example, the RCMP and municipal police departments do not attend 9-1-1 calls for medical assistance unless there is a public safety reason to do so or law enforcement are more likely to arrive before other first responders. In addition, in May 2017, the amendments to the federal *Controlled Drugs and Substances Act*, known as the *Good Samaritan Drug Overdose Act* became law, providing some legal protection for people who experience or witness an overdose and call 9-1-1 for help.

Federal Government Engagement

The federal government remains an integral partner in addressing the public health emergency. In February 2017, the federal Minister of Health announced \$10 million in funding to support provincial efforts in responding to the emergency. Funding has since been allocated to support priority actions identified by the Joint Task Force, including expanded access to opioid agonist treatment, support for the anticipated operation of expanded supervised consumption services, and improvements to the capacity of provincial toxicology laboratory services.

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On May 18, 2017, <u>Bill C-37 received royal assent</u>. This bill amends the *Controlled Drugs and Substances Act* and other federal acts to streamline the application process for expanding supervised consumption services, regulate drug manufacturing equipment and newly identified chemical precursors, and support health and public safety officials to reduce harms associated with problematic substance use in Canada.

There are a number of medications approved as treatments opioid use disorder in other countries that are not approved in Canada (e.g., extended release naltrexone). On April 22, 2017, Health Canada announced its intention to amend regulations to allow for the bulk importation of drugs that are not approved in Canada but approved elsewhere (i.e., in the United States, Switzerland and the European Union). This proposed amendment would allow for a regulatory pathway to import these drugs for the benefit of patients who have not responded to other treatment options. This regulatory change is intended to provide a mechanism to support a rapid population-based response to an urgent public health need, such as the public health emergency. For more information, see the Canada Gazette.

A Federal-Provincial-Territorial Assistant Deputy Ministers Committee on Problematic Substance Use and Harms was established in May 2017 as a forum for Canadian jurisdictions to share information, enhance capacity, support national collaboration, and provide advice on addressing problematic substance use in Canada. B.C.'s Assistant Deputy Minister of Population and Public Health co-chairs the committee.

Ongoing Reporting

The Joint Task Force remains focused on stemming the increase in opioid overdose deaths while addressing other challenges related to problematic substance use. The Joint Task Force continues to focus on seven key areas of action:

- 1. **Immediate response to an overdose** by expanding naloxone availability and the reach of supervised consumption services in the province.
- 2. **Preventing overdoses before they happen** by improving treatment options for people with opioid use disorder, exploring drug checking services, and improving health professional education and guidance.
- 3. **Public education and awareness about overdose prevention and response** through public awareness campaigns.
- 4. **Monitoring, surveillance, and applied research** by improving timely data collection, reporting and analysis to inform action, evaluating implementation, and applied research.
- 5. Improving the scheduling of substances and equipment under the *Controlled Drugs and Substances Act* and the Precursor Control Regulations by regulating drug manufacturing equipment such as pill presses, and regulating precursors.
- 6. **Improving federal enforcement and interdiction strategies** by working with the Canada Border Services Agency to increase enforcement activities to interdict the importation of illicit drugs.
- 7. Enhancing the capacity of police to support harm reduction efforts related to street drugs by providing training to police and other first responders to support safe fentanyl identification and handling practices.

1. Immediate Response to an Overdose

Naloxone, the antidote that reverses an opioid overdose, remains a key component in preventing overdose-related deaths. Both the federal and provincial governments have made regulatory and legislative changes to allow anyone to administer naloxone to reverse an opioid overdose in any setting.

For those who are not eligible for <u>publicly-funded response kits</u>, naloxone can be purchased without a prescription at community pharmacies throughout the province. The rapid expansion of the number of people who can access and administer naloxone throughout the province has strengthened the capacity of communities to respond to overdose events immediately. Continued expansion of naloxone will increase the number of people prepared to respond to opioid overdoses, which will save lives.

Naloxone Risk Assessment Tool

Over the course of the public health emergency, various organizations have asked for guidance as they assess whether or not they should be acquiring naloxone and training staff to administer it in the event of an opioid overdose. A <u>naloxone risk assessment tool</u> has been developed to guide organizations through this decision-making process; information on how to procure naloxone is also provided. The risk assessment tool has been widely distributed throughout the province and across the country.

Ministerial Order to Support Paramedics to Treat Patients at the Scene

On March 29, 2017, the B.C. Health Minister signed an order to amend regulations under the *Emergency Health Services Act*. The ministerial order allows paramedics to treat people at the scene for minor or uncomplicated concerns without having to transport them afterwards by ambulance to the hospital. Under the previous policy, paramedics were required to transport patients to a hospital after responding to a call regardless of whether follow-up treatment at a hospital was required.

The order also allows BC Emergency Health Services dispatch staff to provide non-emergency health information and referrals to other services as appropriate to the nature of the call, including a family doctor, walk-in clinic or HealthLink BC's 8-1-1 information service.

In addition, the order enables paramedics to transport patients to a location other than a hospital emergency department – such as a doctor's office or specialized community resource (e.g., Connections Clinic in Vancouver's Downtown Eastside). This provides a new mechanism for paramedics to bring patients who are suspected of having overdosed, but are stable and don't require emergency care, to other appropriate resources for treatment.

Psychosocial Support for Families, Community Staff, Volunteers, and others on the Front Lines

The weight of the public health emergency continues to be felt deeply by family members, volunteers and front-line staff. Anyone affected by the opioid overdose emergency can access supportive services by calling HealthLink BC's 8-1-1 or visiting the provincial government's website on Mental Health and Substance Use Supports.

As of May 31, 2017, Health Emergency Management B.C. established a new Mobile Response Team to provide psychosocial support for frontline workers, emergency responders, volunteers and staff from community-based organizations impacted by the overdose crisis. The team will be deployed to areas of the province experiencing high numbers of overdoses.

Also, the BC Coroners Service increased its capacity to support families and loved ones of people who have suffered a fatal overdose. A new Affected Persons Liaison and Community Outreach position will be in place in June 2017.

Overdose Prevention Services

More than twenty overdose prevention service locations continue to operate throughout the province. Since Dec. 8, 2016, these locations have seen over 107,000 visits and have reversed more than 1,200 overdoses with zero deaths. Since March 17, 2017, the following overdose prevention services have opened:

- ✓ On April 26, 2017, Interior Health opened the province's first mobile overdose prevention site in Kelowna.
- ✓ On May 9, 2017, the Port Alberni Shelter Society and Island Health <u>opened an additional</u> <u>location</u> in Port Alberni.
- ✓ On May 16, 2017, a women-only overdose prevention service location opened in Vancouver's Downtown Eastside.
- ✓ On May 23, 2017, AIDS Vancouver Island and Island Health opened overdose prevention services in Campbell River.

Expanding Naloxone Availability in B.C

Accomplishments since March 17, 2017, progress update:

- ✓ As of May 15, 2017, 43,516 no-charge naloxone kits have been distributed through the Take Home Naloxone program approximately 22,000 of them in 2016 and more than 15,000 so far in 2017. Kits are now available at 522 locations throughout the province, including 58 emergency departments, 13 corrections facilities and 77 sites serving 97 First Nations communities.
- ✓ Additional information on the Take Home Naloxone program and online training for naloxone administration is available at http://towardtheheart.com/naloxone/.
- ✓ A <u>naloxone risk assessment tool</u> to help organizations to determine whether or not to acquire naloxone and train staff to administer it has been developed and widely disseminated in the province and across Canada.
- ✓ The BC Centre for Disease Control has developed an online learning module for educators outlining what to do in the event of a witnessed or suspected overdose. The module is available at http://towardtheheart.com/naloxone-course/.

Next steps:

☐ The Take Home Naloxone program will continue dispensing no-charge naloxone kits to eligible individuals, and will continue to distribute <u>facility-based overdose response</u> boxes to community organizations that work with clients at high risk of overdose (e.g., emergency shelters, supportive housing providers, friendship centres).

Expanding Reach of Supervised Consumption Services and Exploring Drug Checking Services

Accomplishments since March 17, 2017, progress update:

- ✓ On May 26, 2017, Health Canada approved two supervised consumption services in Surrey and one in Vancouver.
- ✓ Interior Health has submitted two applications for the operation of mobile supervised consumption services in Kamloops and Kelowna.
- ✓ On May 15, 2017, Vancouver Coastal Health released the <u>findings</u> of their drug checking pilot project at Insite. The results show that when people know their drugs contain fentanyl, they are more likely to reduce their dose and less likely to have an overdose.

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✓ Federal Bill C-37 received royal assent on May 18, 2017. The new law amends relevant federal legislation to streamline and accelerate approval of applications for supervised consumption services under the *Controlled Drugs and Substances Act*.

Next steps:

Health authorities await federal approval of four supervised consumption services. Planning for service opening continues, including renovations at some locations.
Health authorities continue to develop and submit applications to Health Canada to expand supervised consumption services in the province.
The Joint Task Force continues to work with local governments, communities, and the public safety sector to provide education on evidence-based health interventions to address problematic substance use.
Recommendations on fentanyl detection dipstick testing from the Insite project will be reviewed to determine where and how drug testing could be used most effectively to reduce overdose risks.

2. Preventing Overdoses Before They Happen

People who are prescribed appropriate and effective treatment for opioid use disorder are less likely to seek out and use illegal opioids. Therefore, expanding the reach and improving upon the range of existing treatment modalities for people with opioid use disorder is a key component of preventing overdoses. Regional health authorities have developed new treatment services and approaches to respond quickly to when people request treatment, and better retain people in care.

Improving Treatment Options for People with Opioid Dependence

Accomplishments since March 17, 2017, progress update:

- ✓ Since Oct. 1, 2016, the BC Centre on Substance Use has hosted 33 training sessions in 26 locations throughout the province, with 1,268 health-care providers on how best to treat patients with opioid use disorder in particular how to safely and appropriately prescribe buprenorphine/naloxone (SuboxoneTM).
- ✓ The Office of the Provincial Health Officer released a <u>report</u> on key components of the provincial opioid substitution treatment system with performance measures for 2014/15 and 2015/16.

- ✓ In the past three years, health authorities opened 500 new substance use beds, including 285 beds opened between September 2016 and March 2017. In addition, 65 additional residential treatment beds started opening in April 2017. As of May 19, 2017, 30 adult beds have been opened by the Provincial Health Services Authority and four by Northern Health, with the remainder to come on line later this year, as well as 50 intensive outpatient spaces.
- ✓ The Ministry of Health posted provincial <u>Biopsychosocialspiritual Withdrawal Management</u> <u>Guidelines</u> for youth and adults.
- ✓ A new <u>Rapid Access Addiction Clinic</u>, to support individuals with opioid use disorder by starting and maintaining clients on opioid agonist treatment opened in Victoria on May 16, 2017.

Next steps:

- The ministry will continue to support expanded access to opioid use disorder treatment by increasing the number of primary care providers who are familiar with and able to prescribe evidence-based medications to treat opioid use disorder.
 The ministry will continue to increase the capacity and effectiveness of the treatment system
- ☐ The Ministry of Health and the College of Physicians and Surgeons of British Columbia will continue to work together to enhance prescription monitoring to ensure more appropriate use

by working to expand access to the full spectrum of treatments for opioid use disorder.

of prescription opioids and other controlled medications.

3. Public Education and Awareness

Spreading the word that you can never be sure what an illegal substance contains and that use can lead to significant harms remains a crucial component of preventing overdoses. As some people will continue to use illegal substances regardless of risks, it is also imperative to educate people on how to recognize and respond to an opioid overdose when it occurs.

Since the launch of the provincial public awareness campaign on August 31, 2016 to coincide with International Overdose Awareness Day, more comprehensive resources continue to be made available for teachers, parents, friends, family, those who may witness an overdose, and anyone wanting more information on the public health emergency. Visit www.gov.bc.ca/overdose for more information.

Accomplishments since March 17, 2017, progress update:

- ✓ To support broad reach of information, the provincial government continues to release paid public service announcements through digital media, radio, and television.
- ✓ Additional outreach using targeted materials to reach desired audiences continues through handout materials, videos in clinics and other public venues, and a poster campaign in restaurants, bars, and transit shelters across the province.
- ✓ With input from family members and people with lived experience, the Public Engagement Task Group partners continue to share and adjust messages using social media to ensure there is a credible channel for open dialogue on this critical public safety issue.
- ✓ Northern Health launched a "Stop Stigma. Save Lives." campaign at https://northernhealth.ca/YourHealth/Stigma.aspx.

Next steps:

- The Public Engagement Task Group will continue to work with partners, including people with lived experience of addiction, to develop new communications tools to enhance public engagement.
 The Public Engagement Task Group will continue to build on lessons learned from the first phases of the public awareness campaigns, and refine the approach to public education and awareness using data from the BC Coroners Service, health authorities, and BC Centre for Disease Control. Areas of focus for the next phase of the public awareness campaign are to challenge stigma, communicate the high risk of using drugs alone, and address those who continue to use but may be in a position to move towards treatment options.
- ☐ A brief facilitation guide to assist communities with organizing and conducting ad-hoc forums related to overdose prevention and response is in development.

4. Monitoring, Surveillance, and Applied Research

A key component of responding to the public health emergency is the real-time collection and analysis of more robust drug overdose information across the province. Enhanced population health surveillance activities are now providing more detailed information about overdoses and risk factors to enable targeted interventions and evaluation.

Accomplishments since March 17, 2017, progress update:

- ✓ The BC Centre for Disease Control continues to publicly report detailed surveillance data on the emergency, including where overdoses are occurring, the characteristics of those who are overdosing, and the severity of reported overdoses. The report also provides resources (including where to access naloxone, and information and resources by region) for the public to access. The reports are updated every two months and are accessible by visiting: www.bccdc.ca/health-professionals/clinical-resources/harm-reduction/overdose-data-reports.
- ✓ The BC Coroners Service's recently established Drug Death Investigation Team is investigating or re-investigating each accidental illicit drug death since Jan. 1, 2016, according to an enhanced investigative protocol. This will include a comprehensive review of medical and mental health history, housing status, prescription drug history, income, previous overdose history, previous treatment history and an enhanced scene of death investigation. The analysis will provide an unprecedented summary of trends and patterns to support meaningful, evidence-based overdose prevention efforts. Initial results from the team's work are expected in the fall.
- ✓ Initial findings from a review of how other jurisdictions have responded to opioid overdose deaths were presented to the Joint Task Force and other experts on May 1, 2017. A final report with detailed findings will inform both the ongoing provincial response to the current public health emergency and the design of an evaluation of the provincial government's opioid crisis response strategy.
- ✓ LifeLabs continues to provide the provincial government with weekly reports on the presence of fentanyl and fentanyl analogues circulating in street drugs. Both carfentanil and furanylfentanyl have been detected in the street drug supply in Vancouver Coastal Health, Fraser Health, Island Health, and Interior Health regions.

Next steps:

☐ Continue to build on overdose-related data sharing across the health and public safety sectors to help support real-time responses to provincial, regional and local data inquiries.

5. Improving the Scheduling of Substances and Equipment under the Controlled Drugs and Substances Act and the Precursor Control Regulations

A foundational component of addressing the public health emergency includes improving how substances and equipment used to manufacture illegal substances are controlled. However, the illegal drug market does not abide by provincial or territorial boundaries. Therefore, strengthening the public safety response to the production and trafficking of existing controlled substances and newly identified substances has to be a co-ordinated, national effort.

Accomplishments since March 17, 2017, progress update:

- ✓ Bill C-37 received royal assent on May 18, 2017. The new law amends the *Controlled Drugs* and *Substances Act* and related acts. Bill C-37 contains several amendments of critical interest to enhancing public safety. These include:
 - Prohibiting unlawful ownership and use of pill presses used to produce or traffic for any illegal substance, not just methamphetamine.
 - o Improve ease of scheduling of precursors used in the manufacture of illicit substances.
 - Streamlining processes for the safe destruction of substances seized by police in drug investigations.
 - o Enhancing the capacity of Canada Border Services Agency to interdict packages under 30 grams.

Next steps:

□ The provincial government continues to monitor the implementation of Bill C-37 and will engage with the federal government as needed to ensure there is a full understanding of the sense of urgency on regulating illegal drug manufacturing equipment and controlling chemical components of synthetic opioids.

6. Improving Federal Enforcement and Interdiction Strategies

Responding to the manufacturing and trafficking of illegal fentanyl requires increased federal enforcement and interdiction strategies seeking stricter and escalating penalties and fines. Efforts at addressing these activities are underway with justice and public safety partners.

Accomplishments since March 17, 2017, progress update:

- ✓ The Joint Task Force continues to work with police and the Canada Border Services Agency to support the measurable expansion of interdiction efforts including the co-ordination of efforts to intercept, detect, and investigate illegally imported fentanyl and precursors.
- ✓ The provincial government has provided additional funding to police for drug detection scanners in strategic public safety locations in the province to improve the interdiction of fentanyl and related compounds.
- ✓ The Canada Border Services Agency continues to report successes in intercepting fentanyl entering Canada, and the RCMP and some municipal police departments have reported seizures of fentanyl and detection of other substances, including:
 - May 8, 2017: Members of the Penticton Targeted Enforcement Unit charged a 37 year old man with <u>possession of a controlled substance for the purpose of trafficking and possession of stolen property.</u>
 - May 5, 2017: Surrey RCMP advises that multiple <u>search warrants executed</u> in mid-April at properties alleged to be involved in the street level drug trade. A number of weapons were seized including multiple handguns and crossbows, along with varying amounts of drugs, including 1,100 doses of crystal methamphetamine, 400 doses of heroin/suspected fentanyl, and 9 kilograms of cannabis marijuana.
 - April 27, 2017: The Nanaimo RCMP Detachment Projects Team with assistance from Victoria Police Department and West Shore RCMP has <u>arrested a Victoria man</u> found to be in possession of 3 ounces of suspected crystal methamphetamine, 2 ounces of suspected heroin/fentanyl and an imitation BB handgun.
 - On April 28, 2017, members of the Campbell River RCMP Street Crime Unit arrested two suspected drug dealers in Campbell River. As a result of the investigation, two men were arrested for possession for the purpose of trafficking. Additionally, cash, a vehicle, and suspected opioids were seized.
 - On April 25, 2017, Penticton RCMP arrested a man found to be in possession of heroin and other illegal drugs. He was charged with three counts of possession for the purpose of trafficking.

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- In April 2017, Surrey RCMP and New Westminster Police Department executed warrants throughout Surrey and New Westminster, resulting in seizures of large amounts of drugs, including heroin containing lethal amounts of fentanyl, with a street value estimated at \$300,000. Numerous people were arrested.
- On April 9, 2017, Vernon-North Okanagan RCMP investigators arrested a person in possession of a large quantity of heroin and other drug trafficking paraphernalia.
- On April 7, 2017, following a vehicle stop, an Alberta man faces charges of trafficking in opiates as he was found in possession of 27,500 suspected opioid tablets.
- After a four-month long investigation lead by Ridge Meadows RCMP, five people were charged with selling fentanyl. All were arrested in the Maple Ridge area.

Next steps:

The provincial government will continue to engage with RCMP and the Canada Border Services Agency to ensure continued dialogue on the public health emergency.
The provincial government will continue to advocate that the federal government increase federal RCMP drug enforcement resources and increase Canada Border Services Agency resources to better interdict the importation and trafficking of illegal drugs.

7. Enhancing Capacity of Police to Support Harm Reduction Efforts Related to Street Drugs

First responders are broadly exposed to activities related to illegal drug acquisition and use. In this capacity, there are opportunities for first responders to educate the public on the risks and harms associated with fentanyl and other dangerous substances.

Accomplishments since March 17, 2017, progress update:

- ✓ The Ministry of Public Safety and Solicitor General continues to work with the RCMP and municipal police departments to ensure that appropriate information is available to police services to formulate local operational policy and ensure that they have the supports to work with community partners to decrease opioid overdose deaths.
- ✓ All police departments and the RCMP are training members and many civilian staff how to administer naloxone safely in the case of an opioid emergency. To date, nearly 7,300 members and civilian staff have been trained. The RCMP and Vancouver Police Department have made their training materials available to other departments.
- ✓ All police departments have now acquired or are in the process of acquiring naloxone for use by their members where they come upon someone who has overdosed. Since the beginning of the program, members of RCMP and municipal departments have administered over 160 doses of naloxone which resulted in overdose reversal.
- ✓ During the month of May, the Justice Institute of British Columbia hosted four workshops for first responders to assist them with dealing with fentanyl and other opioids. The workshops were held in New Westminster, Nanaimo, Prince George and Kelowna.

Next steps:

☐ The Ministry of Public Safety and Solicitor General will continue partnering with RCMP and municipal police departments on the overdose response.

Conclusion

Organizations, communities, and individuals across the province continue to work together to save lives every day – including BC Emergency Health Services staff, firefighters, regional health authorities, municipal police, RCMP, housing providers, contracted agencies, the Canada Border Services Agency, and other community staff and volunteers, peers, friends and loved ones. Just over a year after the public health emergency was declared under the *Public Health Act*, the tragic overdose death toll continues despite the thousands of overdoses that have been reversed through the heroic efforts of those working on the frontline.

In 2016, British Columbia recorded over 900 deaths from illegal drug overdose, the highest number in a single year ever recorded in the province. Unfortunately, the trend of increasing illegal drug overdoses continues to be seen in 2017. The public health emergency continues to impact families and communities right across the province.

However, there is reason for hope. The demand for training and access to naloxone continues to grow, as individuals and communities look for ways to engage and be prepared. Existing non-profit organizations are partnering with health authorities and local governments to strengthen action on the ground. New community groups involving people who use drugs, their families and their loved ones have become powerful voices for change, and for informed public discourse that can reduce stigma and other barriers to effective action. A dynamic treatment system is finding new ways to expand the reach and improve access to care that is informed by the latest evidence. The public safety sector continues to expand interdiction efforts and to work closely with the Canada Border Services Agency to stem the flow of fentanyl and its analogues at the border. Continued engagement with the federal government remains a crucial partnership in addressing challenges related to problematic substance use throughout the province and across the country.

British Columbia remains committed to taking continued action on all fronts to stem the tide of this emergency.