

# Responding to BC's Overdose Epidemic

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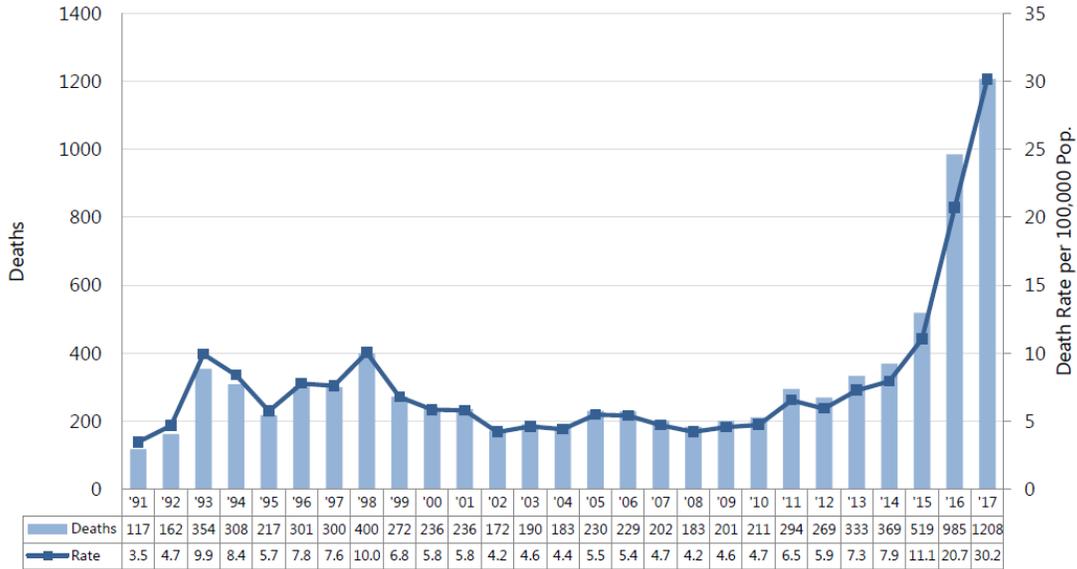
Progress Update  
November/December 2017

**Ministry of Mental Health and Addictions**



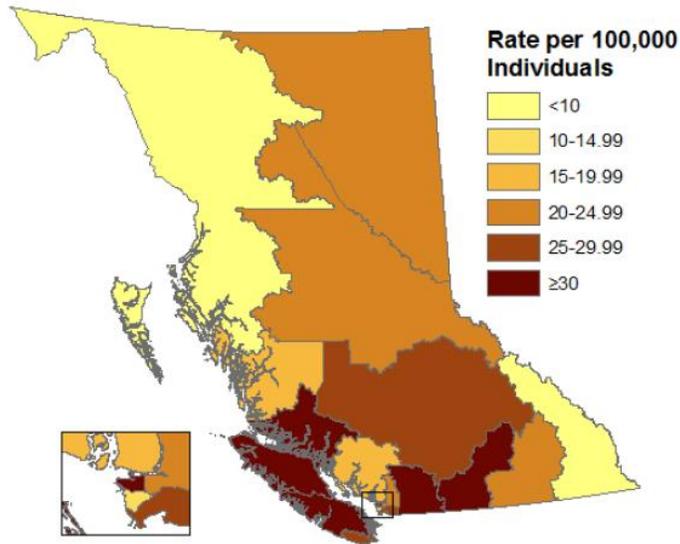
## BACKGROUND

Since BC’s Public Health Emergency was declared in 2016, people across the province have mobilized to immediately respond to and prevent overdoses and overdose deaths. Despite these efforts, an unprecedented number of people continue to die. As of October 31, 2017, 1,208 people have lost their lives in 2017 (see Figure 1).



**Figure 1: Illegal Drug Overdose Deaths in BC  
(BC Coroners Service, January 1, 2007 – October 31, 2017)**

BC continues to experience record rates of overdose death in all areas of the province. As of October 31, 2017, BC’s overall rate of illegal overdose deaths is 30.2 per 100,000 people, with peaks in Vancouver (53.1), Okanagan (41.2), Fraser East (35.8), and Central Vancouver Island (34.4) Health Service Delivery Areas (see Figure 2).



**Figure 2: Illegal Drug Overdose Death Rate by Health Service Delivery Area  
(BC Coroners Service, January 1, 2017 - October 31, 2017)**

# BC'S ESCALATED RESPONSE TO THE PUBLIC HEALTH EMERGENCY

BC's overdose epidemic remains complex and dynamic, where the ground is prone to frequent shifts. The situation is complex because there is a wide range of people using illegal drugs for a variety of reasons in different contexts, locations, combinations, and routes of administration. It is dynamic because of the introduction of new substances into the illegal drug supply, which is driven by the enormous financial incentive to manufacture increasingly potent drugs.

Although considerable work has been done since the declaration of BC's public health emergency, urgent and targeted action still needs to be taken to reduce overdose risk and overdose deaths. To facilitate this, the Minister of Mental Health and Addictions announced the establishment of the Overdose Emergency Response Centre on December 1, 2017.

Based on emergency management best practices and in consultation with Health Emergency Management BC, a core team of experts is bringing together provincial, health authority, municipal, Indigenous and law enforcement resources to tackle the overdose crisis at a community level. To maximize local impact, the centre will work closely with five new regional response teams to coordinate and strengthen addiction and overdose prevention programs on the ground with community action teams.

As announced in September 2017, the provincial government is investing \$322 million in new funding to address the overdose crisis. The emergency response centre will ensure those resources support effective strategies where they are most urgently needed. As part of this funding, the regional response teams and community action teams will have access to a Community Crisis Innovation Fund – which includes \$3 million for the remainder of 2017/18, and \$6 million each year in 2018-19 and 2019-20.

To learn more about the Overdose Emergency Response Centre, read the [backgrounder](#) and [Terms of Reference](#).

## KEY AREAS OF FOCUS AND SUMMARY OF PROGRESS SINCE OCTOBER 2017

1. **Saving lives:** Services for people who use drugs that help reduce the risk of overdose, reduce the severity of overdose, or provide immediate lifesaving interventions when an overdose has happened.

**Progress:**

- Drug checking services have been expanded to all overdose prevention and supervised consumption service locations in the province and the City of Vancouver purchased a Fourier-Transform Infrared Spectrometer to rapidly test drug samples at supervised consumption sites at Insite and Powell Street Getaway
- A large-scale investigation concluded with the seizure of a significant amount of illegal street drugs
- \$14 million in funding announced for the Anti-Trafficking Task Force at CFSEU-BC to target mid-level drug traffickers and \$5 million in funding to Provincial Tactical Enforcement Priority projects to increase enforcement against high-level organized crime
- Continued expansion of no-cost naloxone kits and increased usage of overdose prevention services

- 2. Ending the stigma around addictions and mental illness:** Activities that reduce negative attitudes about people who use drugs that may keep people from seeking and receiving help for problematic substance use.

**Progress:**

- Resources to help friends and families who have been affected by overdose or problematic substance use have been developed by people with lived experience
- Fraser Health launched a guide to start a conversation with someone who might be struggling with substance use to help to reduce stigma
- Health Canada announced that it will work in partnership with BC and Nova Scotia to pilot a campaign to raise awareness of the stigma associated with substance use, and has announced funding to develop peer support programs for people with lived experience

- 3. Building a network of mental health and addiction treatment services:** Services that support treatment of and recovery from addiction.

**Progress:**

- Ground was broken for construction of a new mental health and addiction centre on the Riverview lands in Coquitlam
- A new Foundry centre was opened in Prince George to provide mental health and substance use supports to young people, and a future Foundry centre was announced for Victoria to open in the new year
- Health Authorities have submitted plans to scale up access to injectable opioid agonist treatment
- Nearly 4,700 individuals have enrolled in online training on substance use problems provided by the BC Centre for Substance Use and over 400 individuals have completed training
- The number of providers that can prescribe opioid agonist treatment, the number of patients on opioid agonist treatment, and pharmacies that dispense opioid agonist treatment have all increased

- 4. Addressing the full range of supports and social factors:** Activities and services that address social factors related to substance use such as housing, income, employment, intergenerational trauma and community development.

**Progress:**

- The City of Surrey, Statistics Canada and other partners announced a project to better understand the circumstances of those who overdose in that jurisdiction
- 195 agencies and 1,849 people have received psychosocial supports from the Mobile Response Team and more members will be hired to meet demands for support among front-line workers
- A call was issued for communities to request funding to hold dialogues on opioids and other drugs through the Canadian Institute for Substance Use Research (formerly CARBC)
- A guide has been released to support development and implementation of community-level overdose response plans
- Fraser Health has expanded intensive case management to Langley to better support people with severe substance use disorders.

# 1. SAVING LIVES

## *Expanding Drug Checking Services*

On November 10, 2017, the Minister of Mental Health and Addictions announced that drug checking services, previously piloted at Insite in Vancouver, were being expanded to all supervised consumption and overdose prevention service locations in the province at a cost of \$3 million over the next three years. Drug checking at Insite has been bolstered through the City of Vancouver's purchase of a Fourier-Transform Infrared Spectrometer, a machine that has the ability to rapidly test for multiple substances.

In addition to providing people who use drugs with information to guide a decision on if or how the substance will be used, information gathered from the anonymous drug samples will help to inform what is present in BC's illegal drug supply. The BC Centre on Substance Use will evaluate how drug checking services are used in BC, and whether offering this service reduces the risk of overdose and links people who use them to supports for problematic substance use.

## *Broader Access to No-Cost Naloxone*

Since 2013, more than 56,000 Take Home Naloxone kits have been distributed free of charge (nearly 30,000 kits in 2017 alone), with 616 locations currently distributing kits. Over 11,800 kits have been reported as used to reverse an overdose.

Vancouver Coastal Health has launched a new online course for staff on how to distribute naloxone kits to clients. St. John Ambulance, which developed naloxone training for provincial government staff, foster parents and other interested groups here in BC, is now taking its opioid overdose management course across Canada.

## *Overdose Prevention Services*



From December 2016 to November 30, 2017, there have been 532,102 visits to 26 overdose prevention sites with 2,426 overdoses reversed and zero deaths.

## *Enforcement Activities to Protect Public Safety*

Public safety officials continue efforts to intercept illegal street drugs and protect the public. On November 8, 2017, Vernon North Okanagan RCMP completed an investigation targeting a drug trafficking group that were supplying the Vernon area with illicit drugs including cocaine, methamphetamine and heroin/fentanyl mixed opioid. Two arrests were made after the North Cowichan/Duncan Street Crimes Unit executed a search warrant that resulted in the seizure of significant quantities of drugs and cash, including suspected opioids.

RCMP and municipal police continue to contribute to province-wide efforts to keep people alive. To date, RCMP and municipal police have recorded 265 successful overdose reversals by administering naloxone and almost 7,530 members (sworn and civilian) have received naloxone training.

On November 27, 2017, the Ministry of Public Safety and Solicitor General announced the provision of \$14 million for the creation of a dedicated Anti-Trafficking Task Force at CFSEU-BC that will target mid-level drug traffickers and \$5 million to Provincial Tactical Enforcement Priority projects to increase enforcement against high-level organized crime, fentanyl importers and illegal drug traffickers, including the trafficking of illegal firearms.

## 2. ENDING THE STIGMA AROUND ADDICTIONS AND MENTAL ILLNESS

### *Resources from People with Lived Experience*

From Grief to Action, a network of families and friends who have been affected by problematic substance use, have developed two resources:

- **The Coping Kit**, which helps families who are coping with mental health and addiction problems
- **Parents in Action**, a manual that has advice on setting up community-based peer support groups for family members

For more information, visit [www.fgta.ca](http://www.fgta.ca).

### *Starting the Conversation*

Fraser Health has launched a guide, *When Words Matter*, to help people start a conversation with someone they think is struggling with substance use. A short companion video is available at <https://youtu.be/T3W6Xx4-gD4> For more information, visit [Fraser Health](#).

### *Federal Initiatives*

On November 15, 2017, the federal government announced a group of actions to address opioid overdoses in the country. One of these actions is to work in partnership with people with lived experience, BC's Ministry of Mental Health and Addictions, and Nova Scotia's Department of Health and Wellness to pilot a project to raise public awareness of the stigma associated with problematic substance use. The federal government also announced that it will provide funding through the Substance Use and Addictions Program to develop peer support programs for those with lived and living experience.

**Resources continue to be made available for teachers, parents, friends, family, those who may witness an overdose, and anyone wanting more information on the overdose epidemic. Visit [www.gov.bc.ca/overdose](http://www.gov.bc.ca/overdose) for more information.**

## 3. BUILDING A NETWORK OF MENTAL HEALTH AND ADDICTION TREATMENT SERVICES

### *Mental Health and Substance Use Services for Youth*

The Foundry Prince George centre celebrated its official opening, and Victoria was announced as the latest location for the establishment of Foundry centres. The Foundry model provides young people aged 12-24 with enhanced access to primary care, mental health and substance use services, social services and family and youth peer supports. For more information, visit the [Children's Health Foundation of Vancouver Island](#).

## Expanding Access to Opioid Agonist Treatment

People who receive 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 options for people with opioid use disorder is a key component of preventing overdoses.

In the October 2017 progress report, it was noted that the Minister of Mental Health and Addictions approved a BC Centre for Substance Use guidance document for providers on how to prescribe injectable opioid agonist treatment for patients who have not responded to traditional treatment methods. In response, regional health authorities have submitted implementation plans to scale up access to injectable opioid agonist treatment to ensure this treatment option is made available to those who might benefit from it.

Health Canada has proposed regulatory changes that would allow the administration of injectable diacetylmorphine to patients outside a hospital setting. Health Canada is also funding a pilot project that will provide safer alternatives to illegal opioids to reduce overdose risk. These initiatives form an important component of a comprehensive approach to treating opioid use disorder.

## Building Provider Capacity

Delivering an accelerated response to British Columbia's opioid overdose emergency requires an integrated approach to building system capacity, which includes ensuring there are enough prepared professionals to meet public demand—getting help fast means ensuring people are trained and ready to provide it.

The BC Centre on Substance Use delivers integrated professional training initiatives to a wide range of health professionals, and many others who are employed or volunteer in a wide range of roles across health and social service systems. Initiatives include:

- intensive training for physicians, nurses, pharmacists and social workers wishing to dedicate much or most of their work to patients with substance use problems
- training and support for these and other primary care providers who see patients with substance use problems as one part of their overall responsibilities

The results are beginning to show. Since launch of these initiatives in the summer nearly 4,700 individuals have enrolled in online certificate training (with over 400 graduates already) while fellowships and other intensive training opportunities are at capacity and future placements are proving highly competitive.

Early results are showing rapid growth among the number of physicians able to prescribe opioid agonist treatment (1,161 as of October 31, 2017) and dispensing pharmacies across the province (1,061 as of October 31, 2017) alongside increasing numbers of patients beginning treatment for opioid use disorder (over 24,000 patients are on opioid agonist treatment as of October 31, 2017).

Ultimately, ensuring there is a large pool of care providers trained in evidence based approaches to treatment and support will improve both quality and timeliness of care—the capacity to provide help fast when people ask.



### *New Mental Health and Addiction Centre*

On November 17, 2017, the Ministry of Mental Health and Addictions, the Ministry of Municipal Affairs and Housing, and the Provincial Health Services Authority broke ground for construction of a new 105 bed mental health and addiction centre expected to open in late 2019 on the Riverview Lands in Coquitlam. The centre will care for the most severe and complex patients from throughout BC. As a provincial service, it will use telehealth technology to support team-based approaches to care and create improved communication between health-care providers wherever they are in the province, to better care for each patient.

## 4. ADDRESSING THE FULL RANGE OF SUPPORTS AND SOCIAL FACTORS

### *Engagement with Indigenous Communities and Organizations*

In July 2017, the First Nations Health Authority released preliminary findings on overdose data among Indigenous and First Nations people in BC. In the report, troubling trends showed that although First Nations people comprise 3.4% of the population of BC, both non-fatal overdoses and overdose deaths were higher than other BC residents. In addition, the overdose epidemic has equally affected both Indigenous men and women, although in the general population, men are primarily affected, and the risk of overdose is higher across all ages of Indigenous people compared to other BC residents.

In response to the data, the First Nations Health Authority identified four key areas of focus going forward to address overdose risk and overdose death among Indigenous and First Nations people in BC. Health authorities are working closely with the First Nations Health Authority to ensure actions are aligned with these action areas and that their overdose response strategies support the Indigenous population more broadly, including urban populations and Métis people.



**Figure 3: System-Wide Opioid Public Health Response for First Nations in BC (First Nations Health Authority, 2017)**

### *Community-Level Overdose Response Plans*

Differences in and across communities in BC mean a range of strategies are required to prevent overdoses. In October 2017, the Canadian Institute for Substance Use Research (formerly known as the Centre for Addictions Research of BC - CARBC) and Island Health published a guide to support the development and implementation of community-level overdose response plans. [A Public Health Guide to Developing a Community Overdose Response Plan](#) is a 16-page document that focuses on four key elements of overdose prevention:

1. System resilience and community capacity
2. Addressing social and personal stigma and discrimination
3. Health promotion and harm reduction interventions
4. Pathways to substance use services and supports

### ***Psychosocial Support for Front-Line Providers***

Since the announcement of the Mobile Response Team in May 2017, there have been 195 front-line agencies contacted to provide psychosocial support for over 1,800 helpers, peers, volunteers and staff. Services have been spread across all regions in the province, and include formal and drop-in sessions, assessments, psychosocial education and training, information on how to deal with grief and loss, outreach and referrals, team building, and trauma responses.

### ***Scaling Up Wrap Around Services***

Fraser Health introduced a new social services and mental health care team in Langley to better support people with severe substance use disorders. This complements their existing team in Maple Ridge.

### ***Community Dialogues on Opioids and Other Drugs***

The Ministry of Public Safety and Solicitor General has provided a second phase of funding (\$650,000) to the University of Victoria's Canadian Institute for Substance Use Research (formerly CARBC) to support community dialogues in response to the opioid overdose crisis in British Columbia. Coalitions from First Nations and other communities in every region of the province are invited to submit a letter of interest in engaging their community in dialogue about opioid and other drug use. The Institute will provide selected communities with grants ranging from \$2,000 to \$15,000 to assist with costs associated with hosting community dialogues. See <https://www.uvic.ca/research/centres/carbc/assets/docs/call-opioid-dialogues-phase-2.pdf>

### ***Understanding Circumstances of Those Who Overdose in Surrey***

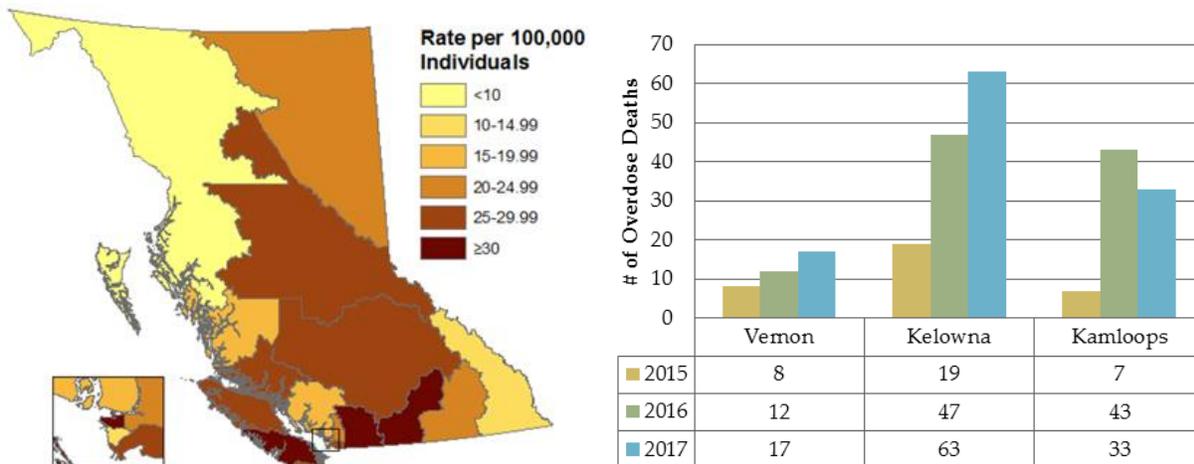
The City of Surrey has announced a pilot project to better understand people who overdose in Surrey to develop more effective supports. This project brings together the City of Surrey, Fraser Health, BC Ambulance Service, BC Coroners Service, Surrey RCMP, Surrey Fire Services and Statistics Canada to identify risk factors and groups at highest risk of overdose. To learn more, read the [media release](#) by the City of Surrey.

## **GENERATING INTELLIGENCE**

The complex nature and causes of BC's overdose epidemic require generating and gathering together multiple data sources to monitor, analyze, and understand the emergency and its underlying issues. These data provide the best available evidence for implementation and evaluation of effective actions. Enhanced population health monitoring activities are now providing more detailed information about overdoses and risk factors to enable targeted interventions and evaluation. Feeding data back into the health and social system supports staff to better understand and serve their varied populations.

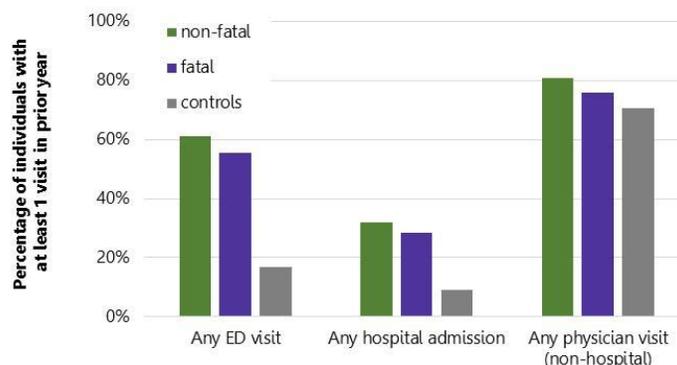
BC Stats and the Integrated Data Office are working in collaboration with the BC Centre for Disease Control on an integrated data analysis approach. This partnership is helping accelerate work with existing health system data sets, and bringing together data sets from other sectors. This is helping to better understand the trajectories of individuals and groups at risk of an overdose event, and supporting more fulsome analysis at the local level in partnership with regional health authorities and other local organizations.

While reports by the BC Centre for Disease Control have emphasized the generalized nature of the overdose epidemic (that is, high rates of overdose death are seen in all parts of BC, unlike other jurisdictions where overdose death occurs primarily in high need, urban neighbourhoods), we now have more detailed data at the community level. For example, while Vernon and Kelowna are separated by just 50 kilometres, there are vast differences in the numbers of overdose deaths reported in these cities, as shown below in Figure 3.



**Figure 4: Overall Rate of Overdose Death in BC by Health Service Delivery Area and Comparison of Overdose Deaths in Vernon, Kelowna, and Kamloops (BC Coroners Service, January 1, 2015 – September 30, 2017)**

In related analysis, the team at the BC Centre for Disease Control has found that those who overdose at home alone and have no record of treatment for problematic substance use have histories of frequent engagement with the health system for other health issues and at a higher rate than a control group that did not experience an overdose (see Figure 5). Regional health authority staff are using this new information to explore innovative ways to reach people who may be experiencing substance use problems when they access the health system, regardless of the reason for visit.



**Figure 5: Percentage of people who accessed the health care system within 12 months prior to overdose; fatal and non-fatal overdose compared to control group (BC Centre for Disease Control, cohort analysis 2015-2016)**

### ***Overdose Emergency Response Centre Data Monitoring***

The provincial emergency centre will closely track emerging trends and risk factors in the overdose crisis, with centralized data monitoring and analysis. From this information – and information on the ground – the centre will work with the regional teams and new community action teams in hard-hit communities to intervene quickly with life-saving responses, early intervention and proactive treatment and support. New community action teams will be in place by January 2018, in communities identified by overdose data as having most urgent need.

## CONCLUSION

BC continues to grapple with an overdose epidemic that has complex and dynamic underpinnings, with the rapid introduction of new substances and consistently high rates of unintentional illegal drug overdose deaths affecting all parts of the province. With significant new investments in accelerated cross sector action, the Ministry of Mental Health and Addictions is taking action to ensure a comprehensive and robust response to BC's opioid overdose emergency.