



Ottawa, August 22, 2023

Dear Minister Jones,

A recent story in the Globe and Mail (Marcus Gee, August 19, 2023: [Make supervised drug-use sites safe for all](#)) informed readers of a “critical incident” review of Consumption and Treatment Sites (CTS) formerly referred to as Supervised Consumption Sites (SCS), that the Ministry of Health under your leadership has undertaken. This review follows the mid-day shooting of a bystander near such a site hosted in a Community Health Centre in Toronto, and the arrest of an employee of the site in conjunction with the incident. We have three CTS in our community located close to each other and clustered along similar services or shelters.

I am writing to you today to ask that your review include:

- the Sandy Hill Community Health Centre (SHCHC) Oasis Program in Ottawa, Ontario at 221 Nelson St. (700 m from the OPH CTS and 550 m from OICH)
- the Ottawa Public Health (OPH) CTS at 179 Clarence St.
- Ottawa Inner City Health (OICH) at 256 King Edward Ave. (550 m from SHCHC and 250 m from the OPH CTS)
- residents, businesses, and their associations, and clients who can provide their experience with the CTS,
- a comprehensive review of the CTS guidelines that is focused on ensuring that all four pillars of harm reduction are being observed in equal measure.
- A review of OPH's oversight of harm reduction services in Ottawa in general.

As Chair of Action Sandy Hill – the community association for the neighbourhood in which SHCHC operates, I will address the issues we have faced as a result of the SCS alongside other services in the area, the advent of COVID-19 and the devastation of the toxic drug supply in general.

The SHCHC was one of the first to obtain an exemption in Ottawa. Since the Consumption and Treatment Site opened its doors in 2018, there has been a significant increase in open drug dealing, open drug use, assaults (towards residents, businesses, other drug users, people suffering from homelessness, tourists and others), thefts (break-ins, robberies) and fires have been plaguing our once quiet urban neighbourhood. Its license has been renewed twice, with no consultation with the surrounding area and, in order to reduce the number of people using on the street, they are considering service expansion from injection drugs to inhalation drugs as well. The centre is located 300m from 2 elementary schools, 90m from a public library, and 257m from a day care centre and 400m from another daycare (which is now pausing service on August 31 as a result of their experiences in the area). It is 550 m from OICH, which is closer than the 600 m minimum distance in the provincial guidelines.



The Oasis program, its former Director (now Executive Director of OICH) and the former Executive Director (retiring this month) of SHCHC took no action to address concerns from residents, businesses or even the clients of the SHCHC. In fact, they hired security after their staff felt unsafe to ensure that drug dealers and drug users would not loiter on SHCHC's property. Instead, they were sent to loiter on our front porches, in our backyards, underground parking, buildings, in nearby businesses, etc. With a change in leadership, we are seeing reason to hope that SHCHC is at the very least open to engaging with the resident and business community to address the harms, problems and disruption we face daily, but after 5 years, the problems are well entrenched, and exacerbated by other services in the area.

This situation has and continues to lead to violent interactions between residents and the clients of the site or their entourage, generally when a resident asks for someone to move away from their property. In fact, only last night, an elderly resident was verbally assaulted and physically threatened when he asked a group of them to move out of his driveway to park his car. He called Ottawa Police who resolved the situation. This is not an anecdote but a daily occurrence for this person.

We insist that this review include interviews with residents, businesses, and their associations to hear first-hand the impact this CTS has had on our community. The CTS at the SHCHC is located at a busy intersection, serviced by 2 bus stops that are used by elementary school children and their parents, and is across from the only public library in the area. Children in the neighbourhood witness overdoses, deaths, drug dealing and drug consumption on a daily basis. They see their parents threatened with violence and their freedom to act as children is eroded.

The Ministry of Health is responsible for the health of all Ontarians, not just the health of those who use drugs. We urge you to broaden the scope of this review to include oversight mechanisms of physicians and pharmacists prescribing and dispensing hydromorphone (dilaudid) as a harm reduction approach, as well as other provincially regulated programs that do not consider the impact on residents (children, seniors, students, workers) and businesses who are experiencing a significant lack of safety as a result of these programs. Indeed, the loss of safety in a community has lasting consequences on those who live there. That loss of safety also extends to those who are in recovery from addiction, including those who are experiencing homelessness but not addicted, putting them at even greater risk.

Currently, there are no available recovery beds for the clients of the CTS at SHCHC. Once they have used, they are immediately released back into the community, high. This puts them at risk of assault if they use narcotics and are unconscious on the street. The new Director of the Oasis program is treatment focused; however, there are no treatment beds available to her



clients, either through the SHCHC or other treatment centres in Ottawa. The clients of the CTS deserve the dignity of a door, but there are no supportive housing units available to them.

As it is, the current approach de-incentivises treatment and normalizes drug use. The rise in opioid use amongst children and teens can be partly explained by an approach that frames prescription pills as “safe” and other drugs as tainted or toxic. Seeing people buy, sell and consume drugs openly on the sidewalks creates the false impression that it’s OK to do so. Children see this every day on our main street and federal and provincial policies are telling them that it’s ok to do drugs.

The CTS guidelines do not require that the host organization set up a good neighbour policy to ensure that loitering, open drug use, drug dealing, vandalism, theft and other problems from users of the CTS or their entourage are addressed quickly and efficiently.

Such policies exist in other jurisdiction, for example, Alberta: [Alberta Health Services \(AHS\) Red Deer Overdose Prevention Site \(OPS\) Good Neighbour Commitment](#)

A requirement to set up such a policy, and report on the number of interventions needed to address problems would provide the required information to assess the impact of the SCS on the community, and the effectiveness of the response. The current provincial and federal guidelines are lacking important elements to ensure that the safety of all of us who have been impacted by the toxic drug supply. A comprehensive review of the provincial guidelines should include:

- Mechanisms to ensure the Consideration of the neighbourhood in which the SCS is located.
- Increased distance from schools and daycare and their service points (eg transit stops, libraries)
- Distance between CTS should be increased to at least 1km
- Distance from recovery programs should be included and be at a minimum 1 km from harm reduction services like CTS and safe supply.
- Regulations related to pharmacies dispensing hydromorphone (dilaudid) as a harm reduction method, and their interactions with CTS, should be added.
- Regulations related to the federally funded safer supply programs and their interactions with CTS should be added.
- Regulations related to concentrating services in specific areas of an urban centre should be added (specifically, regulations related to shelters, harm reduction pharmacies, CTS, and their interactions).
- A Good Neighbour Policy within at least 250 m of any CTS, or hydromorphone (dilaudid) dispensing pharmacy should be added in order to ensure that these services take responsibility for the impact they have on the neighbourhoods where they are located.



The Ministry of Health should also include in its review the role that municipal public health boards have in ensuring compliance, and the role they can play in mitigating impacts on the broader community. The Ottawa Public Health Board, for example, does not have a complaint mechanism for residents to report harms from CTS clients, nor do they acknowledge that harms from CTS such as gang activity, drug dealing, thefts, exist. OPH has not and does not engage with residents, businesses and their associations on these issues.

Finally, the provincial government (as well as federal) should ensure greater oversight of the management of these programs and recourse for clients and residents who experience adverse effects from these services. We would appreciate it if exemption renewal processes were also included in this review.

Until very recently, the Sandy Hill Community Health Centre's "community engagement" process has not included members of the neighbouring community, but only their clients and partners. Specifically, they defined the "community" as their clients. In doing so, the former Director and former Executive Director were willfully ignorant of the impact that their services had on the surrounding community in which they were located, while hiring security for their own safety. The lack of diverse and differing opinions provides a distorted view and deliberately hides the impact on the health, safety and well-being of residents and businesses. Furthermore, it breeds distrust in these services and their commitment to the community, their clients and overall health. The provincial government (as well as the federal government) should require an assessment of the impacts of these services on residents and businesses in the area. All assessments should be independent.

To help you understand the area and the crisis that the presence of the SCS has created in our community, I am including a map to show how concentrated the services are. We hope you will consider this request.

Sincerely,

Louise Lapointe
Chair, Action Sandy Hill/Action Côte-de-Sable
250 Somerset St.
Ottawa, Ontario
llapointeash@gmail.com



Action

SANDY HILL • CÔTE-DE-SABLE

Area of concern

The area inside the dotted lines is the area that we surveyed our residents on.

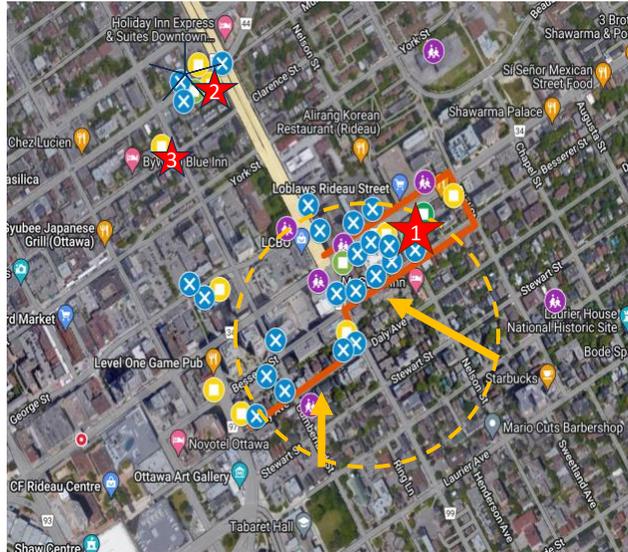
The yellow and green square identify a service for drug users. The red stars an injection sites

1. SHCHC – Oasis
2. OICH trailer
3. OPH

The blue X area where drug dealers, open drug use is frequently occurring (daily, multiple times a day)

The purple people identify schools, daycares, student residences, and services for children, including the public library.

The red line are the streets where activity is concentrated the most. It includes a commercial street, with the local grocery store, cinema, pharmacy, music store, and public library. The 2 streets where the arrows point are residential streets where seniors, families, diplomats, students, live.



cc: Lucille Collard, MPP Ottawa-Vanier