

Sandy Hill Community Liaison Committee Summary Notes from Meeting on Nov 21, 2023

# of Members Present: 17 # of Members Absent and who: 11 Notes taken by: Wendy Stewart Circulated for approval on: December 5 th , 2023			
Agenda	Issues raised	Decision/Recommendations	Next Steps
Check In/Updates from Members	We have an opportunity through <i>Snapcity</i> – https://synapcity.ca/ “A local Civic Engagement organization that connects people and institutions to share and collaborate on initiatives that aim to make Ottawa better, healthier, and more resilient.” – to receive assistance through their Boot Camp program involving students – to assist the committee with some of its priorities.	We have been permitted by the committee to explore this further for consideration of the committee	We will be exploring two or both of the possible projects: <ol style="list-style-type: none"> 1) Assisting the SHCLC in deciding on its priorities and determining the pathways in achieving them; 2) Assisting the committee in the development of a “good neighbour commitment/policy” as one of those priorities. With intent of bringing this back to the Committee for consensus to proceed.
Review of Mindfulness	What are you grateful for as part of this Committee?	Coming together to create some change. There is something moving, making things better for everyone, grateful for dialogue, know and understand different perspectives –	None

<p>SUAP Grant Application</p>	<p>Members of SUAP grant working group came together and worked on some ideas for outreach services/supports that would fall within the confines of the grant priorities.</p> <p>WG members: Wendy, Calla, Louise, Dave M., Rachel</p> <p>Full grant drafted by: Wendy and doctors at SHCHC, Calla, Rachel. Opportunity to provide input was available to all WG members.</p>	<p>Committee reviewed the draft grant overview and consensus was reached to support the proposal submission. Sandy Hill Community Overdose Response and Engagement Team (Sandy Hill C.O.R.E. Program)</p>	<p>Grant application will be submitted on Nov 22, 2023, to Health Canada. Please see Appendix A for a summary of the grant details. Results are pending.</p>
<p>Terms of Reference</p>	<p>Committee has reviewed them and no further edits were made</p>	<p>Consensus was reached on the Terms of Reference for SHCLC.</p>	<p>Once Co-Chairs are established, the ToR will need to be reviewed on an ongoing basis.</p> <p>Please see approved ToR in Appendix B.</p>
<p>Committee Website</p>	<p>Lorna Lemay is in the process of developing a website interface for the SHCLC to post their minutes and any significant documents/updates to facilitate transparency.</p>	<p>Still in development with intent of posting: all the agendas, guiding documents, terms of reference, names and stakeholder group of committee members, and organization names (when relevant)</p>	<p>Lorna Lemay - to have complete by January 16th, 2024, and transfer updates and maintenance to SHCLC.</p>
<p>Establishing Committee Co-Chairs</p>	<p>Lorna Lemay and Norm Desjardins – the current facilitators will be ending their services in January 2024 – passing over facilitation to Committee Co-Chairs</p>	<p>Please indicate your interest in Co-Chairing the SHCLC to Lorna and Norm. There should be 2 Co-Chairs who will take over facilitation of the group. They will continue to be</p>	<p>Any interested parties should put forward their names to Lorna, who will then send those names to committee members for deliberation and consensus.</p>

		supported by the coordination co-leads (Wendy, Calla, Kent, Gerald).	
Strategic Planning	Committee members were asked to rank their top 5 priorities from the entire list of priorities.	<p>From that list the top 2 were looked at further by group members: 1) a Safe Community Place without open drug use and 2) Safe Inhalation Space.</p> <p>In two groups, committee members discussed possible goals and actions to achieve those goals.</p>	We did not have sufficient time to complete this exercise. At the January meeting, we will complete this exercise and discuss the ideas to find consensus (the ideas from the November meeting are attached as <u>Appendix C & D</u>).
Next Meeting	January 16, 2023 – 5:30pm-730PM	<p>Location: Sandy Hill Community Health Centre;</p> <p>Pls respond to invite from kent.hugh@ottawa.ca</p>	

Appendix A: Grant Submission in response to Health Canada – Substance Use and Addictions Program (SUAP) call for proposals due November 22, 2023.

About the funder: SUAP provides time-limited funding for a wide range of innovative and evidence-informed projects including substance use prevention, harm reduction and treatment initiatives across the country. Projects target a range of substances, including opioids, stimulants, cannabis, alcohol, nicotine and tobacco, at the community, regional and national levels.

Budget 2023 committed \$359.2M over five years, starting in 2023-24, to support a renewed Canadian Drugs and Substances Strategy (CDSS). The CDSS guides the federal government's work in an effort to save lives and minimize substance-related harms for people who use drugs and alcohol, their families, and communities. Building on previous efforts to develop innovative, community-led approaches, Budget 2023 includes \$144M for SUAP to fund community-based supports, and evidence-based health interventions.

Recipients of contribution funding are expected to provide certain deliverables and work towards specific outcomes. Recipients are also required to report regularly (minimum of two reports per annum) to Health Canada.

In discussion with the Sandy Hill Community Liaison Committee, it was agreed that Sandy Hill Community CHC would submit a grant for an outreach team to support the broader community and provide greater treatment options – making the community's priorities fit within the following grant priorities:

SUAP Funding priority(ies)

1) Supporting and enhancing the role of People with Lived and Living Experience (PWLLE) within organizations that address substance use across the comprehensive continuum of care

Projects that provide support or resources for PWLLE, including peers, to enhance their role within an organization.

This includes:

- training or building skills among PWLLE to support prevention, harm reduction, and treatment and recovery initiatives;
- supporting peer frontline workforce, providing resources and support for burn out, grief and self-care.

Priority will be placed on projects that:

- position PWLLE roles as leadership-based, significant and equitable across the organization;
- include the goal of changing culture within the organization to be more inclusive of PWLLE.

2) Services and programs that target post treatment aftercare and transition back into the community

Projects that develop, implement and evaluate support or services targeting the transition of individuals back into the community - either reintegration after accessing health services (e.g., hospital stays, treatment services or waitlist), or institutional or correctional services (e.g., prison, jail, probation or parole).

3) Addressing alcohol use disorder

Projects that develop and deliver new or innovative programs or tools for Alcohol Use Disorder (AUD), including for screening, brief intervention and referral to services (SBIR).

4) Addressing adult tobacco cessation

Projects that contribute to innovative cessation supports, including those going beyond the individual and promote a systematic approach that will sustain change.

Project Title: Sandy Hill Community Overdose Response and Engagement Team (Sandy Hill C.O.R.E. Program)

Duration of Project: 48 months/4 years – June 1, 2024-March 31, 2028

Total ask: \$5,000,000 – 11 staff and programming materials to directly deliver and oversee all deliverables in the project, including a data collection/coordinator and employment/engagement opportunities for people with lived and living experience (PWLE) using drugs and or alcohol to be part of shifting the community's (people who are using drugs and alcohol – PWUDA) culture and directly support the broader community in various activities (i.e. clean up, outreach, focus groups, etc).

Project Overview

This project comes from the collective voices of a community committee - Sandy Hill Community Liaison Committee (SHCLC) - where Housed residents, People with Lived and Living Experience (PWLE), Businesses and Service Providers in Ottawa's Sandy Hill community have come together to address the community-wide trauma related to the impact of the increasingly toxic drug supply and opiate crisis, including a significant rise in accidental overdoses – some leading to untimely deaths. With Sandy Hill Community Health Centre (SHCHC) endorsed as the grant lead on behalf of the liaison committee, this project takes a trauma-informed approach to finding solutions that work for everyone and has collectively identified this project, as responding to community needs, while empowering and centering PWLE, and including the wider community in sharing and finding solutions to ensure the community is safe and welcoming for all. This opportunity will enhance this collective community response and to understand the knowledge gaps and needs through a multi-pillared harm reduction approach to the entire community within the context of the services and approaches that are funded or run by the City of Ottawa, the Government of Ontario and/or the Government of Canada.

The activities of this project will be shared with all stakeholders in the community. We will actively engage with the community through media, community forums, public awareness campaigns to promote understanding, advocacy and support. Accountability ensures that we all remain responsive to the needs of all in the community we serve. This innovative approach builds on these collective voices who all wish to work together on a collective solution for a community, where all can thrive.

To this end, the C.O.R.E. Project will:

- 1) **Engage a C.O.R.E. Team: Inreach/Outreach Service** with PWLLE at the Centre. C.O.R.E is an interdisciplinary team led and/or supported by PWLLE within the target area will provide 7 days/week, 8hr/day from 12 noon-8pm delivering regular and concierge service to respond to People who use drugs and alcohol (PWUDA) and residents when a police or paramedic response is unnecessary and proactive engagement strategies with all stakeholders;
- 2) **Improve Overdose Response:** Through outreach and primary care support, this project is dedicated to saving lives, supporting transitions from overdose to aftercare through the C.O.R.E. team and community partners. This team will be equipped to respond swiftly during active overdoses, help connect individuals to medical services, including rapid access to addiction medicine, and access to social/housing services;
- 3) **Ensure and Expand Peer Led Initiatives and Employment:** The C.O.R.E Team will employ and empower PWLLE as essential stakeholders and in recognition of their diverse skills and abilities. Full time, part time and casual employment opportunities for PWLLE will include peer harm reduction workers, outreach workers, research consultants, advisory/committee/governance positions, community clean up, facilitators of an OAT contingency management program as a social enterprise, etc.;
- 4) **Ensure evaluation Approaches:** This project seeks to make valuable contributions by sharing on the learning from this localized project that is building on the collective voices of many community stakeholders from various perspectives;
- 5) **Opioid agonist treatment (OAT)** has been shown to reduce overdose mortality and to reduce rates of injection-related infection. However, access to OAT remains limited, and treatment retention rates are low and may be declining. Contingency Management (CM) is a powerful tool in the treatment of patients with substance use disorders. It is a well-established intervention with stimulant use disorder with a robust evidence base. Within this project, we propose to create a defined intervention in which participants are enrolled who wish to reach a stable dose of OAT, and apply it to adherence to doses of OAT, to facilitate participants reaching a therapeutic dose of OAT where cravings and withdrawal symptoms are sufficiently relieved. Greater retention in OAT will allow participants to reap the known benefits: reduced fatal and non-fatal overdoses, less criminal activity, less transmission or blood-borne infections, increased engagement in health care, and improved psychosocial functioning.
- 6) **Accountability to all community stakeholders:** To that end, building a strong community is central to this project's mission. The activities of this project will be shared with all stakeholders in the community. We will actively engage with the community through media, community

forums, public awareness campaigns to promote understanding, advocacy and support. Accountability ensures that we all remain responsive to the needs of all in the community we serve.

Also included in our submission were letters of support from: Offices of Rideau-Vanier representatives: Ward 12 Councillor, MP & MPP; Public Health; ASH; City of Ottawa Community and Social Services Dept; BIA, Ottawa Police; Belong Ottawa; The Mission;

Appendix B – Terms Of Reference

Name **Sandy Hill Community Liaison Committee (SHCLC)**

Mission The SHCLC will provide insights, make connections, put forward recommendations, exchange information and offer suggestions to support the safety and wellbeing of all members of and services in the community. Specific goals will be agreed upon by the SHCLC in its strategic planning for the short, mid and long term.

Structure and Operations

Invitations

Individuals will be chosen based on the stakeholder group they represent and invited via email or otherwise as appropriate to participate in virtual or in-person meetings to address the goals noted above. Co-chairs and stakeholders may suggest additional individuals for the Committee, not to exceed 25 in total.

Stakeholders

SHCLC will be made up of 20-25 stakeholders, up to 5 from each stakeholder group, ensuring a balance based on representation, gender and ethnicity from the following groups:

- service providers
- business owners (including property managers)
- residents – housed (short & long term)
- residents - unhoused (short & long term)
- other (not covered by other groups)

Term of Appointment

- Stakeholders will be appointed for a 2-3 year term on a volunteer basis, that may be extended for 1 additional year upon agreement of committee members.

Forfeiture

- Stakeholders who are absent from two consecutive meetings without valid reason, communicated prior to the meeting in writing or verbally to the co-chairs, will be considered to have forfeited membership.

Confidentiality

- Unless otherwise advised, the SHCLC will assume its work is non-confidential.

Co-Chairs

- The Committee will be co-chaired by two members of the SHCLC to be chosen by the members.
- SHCHC will provide administrative and logistical support as necessary.

Duties of Members

- Participate as a volunteer in accordance with the Terms of Reference
- Solicit and bring forward input from the organizations they represent in an appropriate manner (back and forth)
- Actively and positively engage in dialogues
- Openly share views, opinions, and ideas on topics
- Support the recommendations of the SHCLC

Meetings

- Meetings will be held either in-person or virtually as appropriate
- Announcements of meetings will be sent to all stakeholders via email or otherwise if agreed upon
- An agenda will be produced and shared 1 week prior to each meeting (allowing time to add/remove/reframe topics) based on suggestions from other stakeholders.
- Minutes will not be taken, however a summary of key outputs will be captured and provided for consideration.
- Chairs will host a welcoming and comfortable space for the stakeholders.

Decision-making

- All actions of the SHCLC will be undertaken by consensus, defined as: following dialogue, achieving general acceptance of the members, **not** to be mistaken for 100% agreement, **nor** a majority vote.

Conflicts of Interest

- All members will disclose any personal monetary or influential interests, whether perceived or actual, that might concern or affect the work of the SHCLC so that they can be dealt with fairly and reasonably.

Dispute Resolution

- All disputes will be referred to a small committee chosen by the SHCLC for review. A third-party neutral mediator may be used to support a resolution process.

Appendix C – Safe Community Zones Action Planning

SANDY HILL COMMUNITY LIAISON COMMITTEE

ACTION PLAN

Safe Community Zones with Zero Tolerance Approach

Action

move people into
SHCHC parking lot
lighting

enforcement via
patrols & bylaw
(smoking)

Location -

Goals

safe for people in
recovery

no unsupervised
safe supply

no loss of service
zero tolerance off
zone & to drug
dealers

Safe Zones:

Parks w/ kids

Library, schools,
daycares

Residential areas

Risk -High, Med,
Low

Timeframe

Evaluation

ACTION PLANS based on smart goals - specific, measurable, achievable, relevant, and time-based

Appendix D – Safe Use Space

SANDY HILL COMMUNITY LIAISON COMMITTEE

ACTION PLAN

Safe Inhalation/smoking space with bathrooms, showers & laundry

Action	Goals	Risk -High, Med, Low	Timeframe	Evaluation
<p>OPH is advocating for change in provincial regulations</p>	<p>Change provincial regulations on inhalation</p>	<p>High - deaths if not</p>	<p>ST</p>	
<p>Community do not want an expansion of services</p> <ul style="list-style-type: none"> - Knowledge sharing with the community on Program components (who does what, how services work, etc.) - Outreach be mandatory 	<p>Saving lives</p> <p>Decreasing the use on the streets</p> <p>Somewhere to use safely</p> <p>Move the services to be dispersed in the city</p>	<p>High - community does not want more services</p>	<p>ST</p> <p>ST/LT</p> <p>ST/LT</p> <p>LT</p>	

ACTION PLANS based on smart goals - specific, measurable, achievable, relevant, and time-based