

Community and Social Services Committee (CSSC) Report: March 2024

1. Update from March 11, 2024, CSSC meeting: Position Statements on ASH Priorities

Meeting Notes are in Appendix A.

The focus of the meeting on March 11 was to discuss the division of responsibilities for developing these position statements.

Three committee members have volunteered to take on the research and writing for the CTS and Treatment position statement, a new committee member is supporting the CSSC Chair in safer supply research, and one person is doing some work on Housing. The CSSC Chair is taking on the City of Ottawa responsibilities as well.

Outstanding is work on Overconcentration of Social Services and Waste/Garbage management.

The committee dove deeper into what a Community Wellness position would look like and determined that a Community Wellness mission would be more effective in guiding our work. Details on this are in the meeting notes (Appendix A).

The next committee meeting will take place on April 9, 2024, from 6:30 p.m. to 8:30 p.m. at 140 Mann Ave. in the common room.

2. Delegations at the City of Ottawa

The CSSC Chair and the ASH Secretary delegated at the Emergency Preparedness and Protective Services Committee in support Councillor Plante's motion to look into a website to combine information on problematic properties (Appendix B). The ASH Secretary's prepared remarks are included below (Appendix C). The CSSC Chair prepared brief remarks; however, she delegated last and some information was provided by other delegates that convinced her to make significant adjustments. Councillor Troster, who is not a member of the EPPSC joined the meeting to ask questions. This led to a very positive exchange about coordinating between City Committees and Boards, and between City Departments. An overview of the delegations can be found in the email sent by Councillor Plant's office (Appendix D). Ultimately, the motion passed unanimously and will be presented to City Council on April 3, 2024.

The link to the meeting is here: [Emergency Preparedness and Protective Services Committee - Thursday, March 21, 2024 \(youtube.com\)](#)

The motion is presented at 1h 36m 43s

The delegations begin at 1h 38m 08s with the ASH Secretary

The delegation from the CSSC Chair begins at 2h 18m 17s

The other delegates are from the Vanier and Hintonburg Community Associations, as well as the Eastern Ontario Landlord Organization.

2.1 Upcoming City of Ottawa Meetings

[eSCRIBE Published Meetings \(escribemeetings.com\)](#)

- Emergency Preparedness and Protective Services Committee (Bylaw, EMS oversight) Apr. 18, 9:30 a.m.
- Police Services Board (Police Oversight) Mar. 25 4 p.m.; Apr. 22, 2024
- City Council Apr. 3, 10 a.m.; Apr. 17, 10 a.m.
- Board of Health (OPH Oversight) – Apr. 15, 5 p.m.
- Community Services Committee ~~Mar. 26 9:30 a.m.~~ (cancelled); Apr. 23, 9:30 a.m.
- Environment and Climate Change Committee Apr. 16, 9:30 a.m.
- Community Safety and Well-Being Advisory Committee *no meeting*

Agendas for some of these meetings are online. Unavailable agendas are usually available online the week prior to their occurrence. Based on the agendas, the CSSC Chair determines whether a delegation is needed in the context of the CSSC or not. Committee members are then informed of her assessment, invited to challenge that assessment and/or delegate as they see fit.

The Community Safety and Well-Being Advisory Committee is new to the list. The ASH Chair attended that meeting as the CSSC Chair was unavailable. Her update will be provided at the ASH Board meeting.

3. Community Liaison Committee Updates

This month, the CSSC Chair has attended 1 Community Liaison Committee meetings in person. The next meeting will be Tuesday April 16, 2024.

3.1 Administration

- Wendy and Calla reached out to potential new members of the committee; however, they have yet to respond.
- The Co-Chairs invited committee members to send potential items for the agenda moving forward.

3.2 Actions

- SHCLC has not yet heard from Health Canada with regard to the application for federal SUAP funding for the proposed CORE Team.
- The CSSC Chair provided an update for ASH and let the committee know about the upcoming AGM and that there were open positions on the Board of Directors.

The CSSC Chair also addressed a new issue. The Block Captains program at OICH received new funding. It appears that the new Byward Market District Authority (BMDA), a City of Ottawa committee that has taken on the role of the Byward BIA, may have funded the project. Additionally, the Executive Director of OICH appears to have requested Block Captains enter Sandy Hill to help with community outreach without consulting any of the service providers in the area. While the gesture is appreciated, the lack of familiarity with the program was unsettling for some of the committee members. As such, the CLC determined that they would invite the program manager to present about the program at the next meeting of the CLC and that they would write a letter to the BMDA with their questions about the program, how it is funding and what oversight

mechanisms are in place. The CSSC Chair volunteered to draft the letter and include any questions that that CLC members have.

- OPH, SHCHC and Belong Ottawa provided some information about how they were managing the temporary closure of the injection room.

Wendy explained that the reason some of the sites were able to stay open while the others closed is because they have vents over the injection booths. As a result, there were no fumes. The engineers are to provide a quote for installing sufficient ventilation in the bathrooms and in the injection room and it will be sent to the funder for approval.

Wendy was quite clear that the new ventilation would not be sufficient for a safe inhalation site and that an entirely different set of standards would be required. She also reconfirmed that any decisions related to opening a safe inhalation site would be brought to the liaison committee for discussion.

Once funding is confirmed and timelines for installation are clear, next steps will be determined. SHCHC is considering using the gazebo area as an outdoor injection space; however, if everyone goes smoothly, that will not be necessary. If it takes a long time, they will bring the option back to the CLC with more information.

OPH has doing weekly surveillance of the situation, and collecting responses from community members, community associations, service providers, clients, businesses and other impacted parties. They are releasing a surveillance report each week (from Monday to Suda. The ones that are available are in Appendices E, F and G. Kira committed to sending out the feedback form to SHCLC committee members.

- Service provider representative agreed to share information about how they function and their data with the committee prior to the new year. Wendy Stewart from the Sandy Hill Community Health Centre and Paul Stam from the Ottawa Police Service presented at this meeting.

SHCHC shared information about the various services that are offered through the Oasis Program, including primary and complex health care, safe injection supplies, naloxone, mental health supports, drop-in services, peer support, community outreach and clean-up, and so much more. The budget that includes the CTS is \$1.6 million/year and mostly funds staff, including peer and community workers. There is additional funding for Oasis, but it is specific to different programs and does no impact the CTS itself.

OPS shared an overview of crime in the area. The area has been identified as an area of concern by OPS. They are changing their approach to policing in the area. They have identified specific spots where an increase in uniformed officers may be a deterrent and plan to increase police presence on foot in those identified areas as the new program rolls out. OPS will continue to address violent crime through the enforcement model. However, they will be addressing smaller crime through a different model.

OPS, along with the City of Ottawa (Kent) and SHCHC (Wendy) and other partners have created a situation table wherein representatives from different areas of from line work – police, harm reduction, medicine, nursing, public health, paramedics, etc. – come together to create wrap-around care plans for people who are street-involved, suffering from homelessness and/or use drugs who may commit nonviolent crimes, but who are ultimately re-traumatized by the justice system. The first meeting of this group was scheduled for the following day.

- Synapcity, Civics Booth Camp [Civics Boot Camp - Synapcity](#)

Through consensus building via email with the SHCLC, two proposed case studies were submitted to the Board of Synapcity for consideration:

- Good Neighbour Commitment (submitted by Oasis with SHCLC support)
- Strategic Priorities (submitted by SHCLC)

Each of the case studies were selected and working groups were created to oversee the work of the students, if they requested consultation.

The Strategic Priorities working group did not receive any consultation requests over the period of time. They have submitted a report and a finished product, which has been provided to the Working Group. That group will go through what the students have provided and make recommendations to the CLC via email, to be discussed at the next CLC meeting. One of the students from that group would like to stay involved, though he does not live in Ottawa. He will be added to the Communications Network moving forward (once it is up and running).

The Good Neighbour Commitment working group has received a literature review about the creation of a good neighbour commitment; however, there has been no additional information provided. Wendy will follow up with Synapcity when possible.

4. Meetings with Dr. Vera Etches

The next meeting is scheduled for March 27, 2024. The agenda includes re-designed health services and information about prevention initiatives from OPH, while the community associations met to discuss priorities in the neighbourhood to bring up to OPH, including the increase in improperly discarded safe inhalation supplies, lack of health services in Lowertown, CLC updates and gratitude for the oversight that OPH is providing related to the closure of the injection sites.

5. Meeting with Councillors Plante and Carr

No follow-up information yet.

6. Housing

6.1 Discussions with Housing Services at the City of Ottawa

The conversation with Kale Brown is still outstanding. The Chair of the CSSC has yet to reach out since his return from holidays. She will do so in the coming weeks.

7. Solid Waste Management

Reports from the residents of Daly Ave. indicate that the garbage clean up strategy that Belong Ottawa and SHCHC are working well. A more sustainable solution to the issue is needed.

8. Other Issues

8.1 Media Presence

The CSSC Chair and the ASH Chair were cited in two CBC articles related to safe supply.

Feb. 28 2024: [As drugs overwhelm this downtown block, is safer supply the problem or the solution? | CBC News](#)

Mar. 1, 2024: [A bitter pill: Safer supply program flawed but vital, patient says | CBC News](#)

8.2 Temporary CTS Closures

In late February, peer workers CTSs located in community health centres reported negative health impacts from what they believe to be the fumes of the toxic drug supply when it is being prepared for injection. Upon reaching out to the Ministry of Labour and the Ministry of Health and Long-Term Care, the CHCs were instructed to cease services in the injection rooms, and in the washrooms at SHCHC until such a time as all measures could be implemented to keep staff safe.

Somerset West Community Health Centre has received an emergency, temporary exemption from Health Canada to operate a safe injection site in an outdoor space as they address the issues indoors.

Sandy Hill Community Health Centre has ceased injection room services, though all other harm reduction programming is ongoing (see the update provided by Wendy Steward in the SHCLC section of this report). There is no intention to open an injection space outside at this time; however, should it become necessary, all discussions around doing so would be brought to the Community Liaison Committee, where the CSSC Chair and the ASH Chair are present.

OPH has been taking weekly surveillance reports from service providers, businesses, etc., combining the information and sharing it back out to the different community stakeholders. Those reports are not definitive in anyway, but they are helping to keep lines of communication open and to ensure that coordination between services, businesses, residents, pwllle, etc. can occur. The most recent report covers the week of March 11 to 17 2024. All of the reports are in the Appendices below (E, F and G).

ASH Chair Louise Lapointe is the point of contact for OPH, so all observations from residents should be provided to her via email at llapointeash@gmail.com.

Appendix A: CSSC Meeting Notes from March 11, 2024

Meeting began at 6:45 p.m. at 140 Mann Ave., Ottawa, ON

Attendees: Calla Barnett (Chair), Susan Kazhaeli, Bruce Levine, Margaret Grouin, Anya Fraser, Brad Cline

Chair's Update

New members were introduced and welcomed to the committee.

The CSSC Chair provided an overview of her knowledge related to the temporary closure of the safe consumption site at SHCHC. The Executive Director of the SHCHC, Robin McAndrew, has been communicating openly with ASH and members of the SHCLC. Additionally, Ottawa Public Health has been providing oversight and collecting, combining and sharing data related to the impact of the closure on weekly basis. Community members have been reaching out to offer support. Most importantly, SHCHC has redeployed the peer workers and some nursing and social work staff as community outreach. They are patrolling, cleaning up discarded paraphernalia, helping folks with nowhere to go find a safe place, and intervening in ODs as needed. As the situation progresses, more updates will be provided.

The CSSC Chair also provided brief updates on Public Works – they are coming to the next ASH Board meeting to present, and the upcoming meeting with Dr. Etches. Finally, she provided an overview of her interviews with CBC on safe supply and explained that the impact was less than expected as a result of the temporary closure of the injection sites.

Community Liaison Committee Update

A CLC meeting was held on February 20, 2024. That update was provided verbally to the committee. Details available in the February 2024 Report to the ASH Board of Directors. The next CLC meeting will occur on Tuesday March 19.

Upcoming City of Ottawa Boards and Committees

The Committee discussed the upcoming meetings at the City of Ottawa.

While the agendas for upcoming meetings of interest were not yet available, Councillor Plante had let the ASH Board know that she would be putting forward a motion to look into the creation of a problematic properties website at the Emergency Preparedness and Protective Services Committee on March 21. The CSSC Chair will delegate in support and another committee member indicated that she will make a written submission.

In addition, the CSSC Chair will keep an eye on the focus of upcoming meetings and let committee members know if there is a reason or opportunity to delegate. The list of City of Ottawa relevant City of Ottawa meetings until April 30, 2024 is available in the report to the Board.

[eSCRIBE Published Meetings \(escribemeetings.com\)](https://www.escribemeetings.com)

CSSC Priorities, Research and Position Statements

The CSSC Chair sent out the information she had already gathered related to the different Priorities approved by the ASH Board of Directors.

Three committee members have volunteered to take on the research and writing for the CTS and Treatment position statement, one committee member is supporting the CSSC Chair in safer supply research, and one person is doing some research on Housing. The CSSC Chair is taking on the City of Ottawa responsibilities as well.

Outstanding areas of work are Overconcentration of Social Services and Waste/Garbage management.

During the discussion, the Community Wellness position statement was addressed in detail. Ultimately, we determined that wellness is a state of being that is actively pursued. It is not a static state of being, though it is not in itself an activity. In that spirit, instead of a position statement, we are looking into developing a statement of community wellness for Sandy Hill that will frame the direction of the position statements. Two of the committee members volunteered to take this on.

Next Meeting: The next meeting of the CSSC will take place on April 9, 2024, from 6:30 p.m. to 8:30 p.m. at 140 Mann Ave.

Adjournment

The meeting ended at 8:45 p.m

Appendix B: Councilor Plante's Motion on Problematic Properties Website

Members' Motion submitted to Emergency Preparedness and Protective Services Committee

Meeting date: 21 March 2024

Moved by: Councillor Stéphanie Plante

Motion Title: Motion – Councillor S. Plante - Problematic Properties Webpage

ACS File No.: ACS2024-OCC-CCS-0024

Ward: Citywide

Motion d'un membre soumise au Comité des services de protection et de préparation aux situations d'urgence

Date de la réunion : le 21 mars 2024 Motion de : Conseillère Stéphanie Plante

Titre de la motion : Motion – S. Plante, Conseillère – Page Web sur les propriétés problématiques

Dossier n° (ACS) : ACS2024-OCC-CCS-0024

Quartier : À l'échelle de la ville

MOTION

WHEREAS there has been an increase in the number of problematic occupied and unoccupied properties in Ottawa; and

WHEREAS these properties generate frequent complaints and safety concerns which negatively impact the surrounding communities such as vacant properties, property standards and property maintenance violations, waste and debris, pests, and other nuisances; and

WHEREAS the City of Edmonton developed a Problematic Properties webpage to help residents navigate these types of complaints or concerns and Ottawa residents could also benefit from access to similar information;

THEREFORE BE IT RESOLVED THAT staff explore the feasibility of creating a Problematic Property page on the City of Ottawa website which includes the definition of what is and what isn't a problematic property, a link to 311 and other resources, a flowchart to assist communities, and a list of departments involved in a problematic property.

MOTION

ATTENDU QUE l'on constate une augmentation du nombre de propriétés, occupées ou inoccupées, qui sont problématiques à Ottawa; et

ATTENDU QUE ces propriétés donnent lieu à des plaintes fréquentes ou à des préoccupations en matière de sécurité, ce qui engendre des répercussions négatives sur les communautés avoisinantes (par exemple, propriétés vacantes, infractions aux normes foncières et aux mesures d'entretien des biens-fonds, déchets et débris, ravageurs et autres parasites); et

ATTENDU QUE la Ville d'Edmonton a élaboré une page Web sur les propriétés problématiques afin d'aider les résidents inquiets ou qui souhaitent déposer une plainte à s'y retrouver, et que les résidents d'Ottawa pourraient tirer avantage d'un accès à de l'information similaire;

PAR CONSÉQUENT, IL EST RÉSOLU QUE le personnel explore la possibilité de créer une page consacrée aux propriétés problématiques sur le site Web de la Ville d'Ottawa, qui comprendrait une définition de ce qui constitue ou non une propriété problématique, un lien au 3-1-1 et à d'autres ressources, un organigramme afin d'aider les résidents et une liste des services concernés par les propriétés problématiques.

OPERATIONAL STAFF COMMENTS

Staff will be available at the Emergency Preparedness and Protective Services Committee meeting of Thursday, 21 March 2024 to respond to questions, as may be required.

FINANCIAL IMPLICATIONS

Staff will be available at the Emergency Preparedness and Protective Services Committee meeting of Thursday, 21 March 2024 to respond to questions, as may be required.

LEGAL IMPLICATIONS

Staff will be available at the Emergency Preparedness and Protective Services Committee meeting of Thursday, 21 March 2024 to respond to questions, as may be required.

Disposition:

If carried at Committee, this motion will be submitted to City Council for consideration on 3 April 2024.

Staff will implement the recommendations in this motion, as appropriate.

Appendix C: Delegation of ASH Secretary to EPPSC March 21, 2024

Thank you for having me.

My name is Jerry Sabin and I am representing Action Sandy Hill.

Today, I am speaking in support of Councillor Plante's motion asking City staff to consider the development a definition for Problematic Properties and creating a toolkit to educate residents and property owners.

I'd like to leave you with three key points to consider.

1. This motion is an important first step towards adopting a *proactive* approach to problematic properties;
2. This motion provides the opportunity to educate residents and property owners about their responsibilities and what resources or consequences exist when those responsibilities are neglected; and,
3. This motion says something important about the care that residents and the City demonstrate towards our urban communities.

Before continuing, I'd like to tell you a little bit about the properties on my slide. These are 302-306 Besserer Street.

They sit at the corner of Besserer and Nelson, which is an important pedestrian gateway into Sandy Hill and is visible from Rideau Street.

This property has been unoccupied since at least 2022 and has had several fires. It has also been the site of continual calls to bylaw, fire, police, and ambulance services.

It took over a year for the property owner to take adequate measures to protect this property and a herculean push by residents, the City, and our councillor to get a fence installed.

To me, looking at this property and the length of time it has remained in this state is an excellent illustration of the need for this motion.

Adopting this motion is also an important step towards *proactive* engagement with existing or potential problematic properties.

By identifying problematic properties, the City can intervene before major incidents.

A fire last month in Sandy Hill saw at least two firefighters fall through the floor while responding to a fire caused by arson.

In the case of 302-306 Besserer, each time individuals have gained access to the property and set fires, first responders have had to enter and search these premises.

This is their duty.

But as a City, we have a responsibility to them to prevent, where possible, the need for our first responders to put themselves in harm's way.

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In other parts of Sandy Hill, we can also see large institutions making changes in our neighbourhood that may lead to a rise in problematic properties.

The University of Ottawa will not be renewing the leases of two co-operatives on Henderson Avenue. By 2028, three city blocks from Laurier to Templeton will be largely unoccupied.

A proactive approach by the City in this case is essential.

The investment environment can change – as we've seen with interest rates in the recent past – and it can take a long time to line up funding agreements or permits to begin construction on new projects.

If we know that properties – and whole city blocks – will be sitting empty for extended periods of time, we can intervene early and prevent another situation like we see on Besserer.

This is important, because such properties give the impression that people do not care about our neighbourhood.

Sandy Hill is a dynamic urban community, home to important educational institutions, families, businesses, and many young people starting off their adult lives in Ottawa.

By failing to address properties like this one of Besserer, we leave visitors and residents in other parts of Ottawa with the idea that Sandy Hill is unsafe, unloved, and a dumping ground for the City's problems.

Let's shift the burden of problematic properties from nearby residents, businesses, and first responders and onto those who are responsible for them: **property owners who fail to secure and maintain their properties.**

This motion is one step towards showing the pride we all share in our urban neighbourhoods and what they contribute to the fabric of our City. Thank you.

Appendix D: Email Text from Councilor Plante's Office re: Problematic Properties Motion Approval and Next Steps

Colleagues (feel free to share),

On behalf of Councillor Plante, Cameron and myself, thank you all for your amazing delegations today. All of you were able to present very cogently and convincingly to committee members to support this motion as a first, and not a final step. Secondly, Councillor Plante and myself would be remised if we did not thank Cameron for doing a lot of the heavy lifting on this one. Thank you Cameron!

Jerald – your answer to Clr Desroches' question about the privacy considerations was amazing. Clr Plante did emphasize that we are not publishing addresses, but your intervention to state that we need to agree on a definition as a starting point before we start posting on a web page was exceptional as it quelled the potential concerns around confidentiality and privacy.

Chris and Bruce – as always your interventions on behalf of Vanier were solid, to the point and resonant.

Cheryl – your perspective on the legislative timelines ad showing this is not as ward specific, but a city wide issue was invaluable in convincing Councillors not to think of this as just a Ward 12 issue.

Calla – and then the hammer comes in who always provides incredible interventions, captures the sentiments of the residents, but also able to show that this not about stigmatizing our most vulnerable but providing them the same respect and protection that our housed residents deserve.

X- because I did not seek their concurrence to share their email, I have put them in BCC if they choose to engage, but thank you so much for expressing support and for us to provide their support to their Ward Councillor.

I will be quite honest. The Councillor, Cameron and I did not expect unanimous consent at committee. Some Councillors are wild cards, but a combination of your interventions, the Councillor's follow-up questions to you, her questions to staff, and staff being accepting of the content of the motion got us to unanimous consent. Councillor Troster's questions to Calla at the end were really great because we have been calling for a whole of city response for a while so the fact that she mentioned a general cmtee of issues as part of the mid-term governance review (have to get the exact timing from the Clerk's office) was very helpful and one we would definitely support.

With that said and as echoed by all of you, this is just a start. You heard the Councillor's question and staff receptivity to participate in a consultation session on implementing this motion. So Cameron and I have started to think about this and given that this would be city wide, we will probably issue a notice on Engage Ottawa, but also spread it through our newsletters and other CA and BIA newsletters and **aim for May**. Below is a STRAW DOG agenda that Cameron and myself have started to brainstorm on and socialize the different departments and agencies of the city on participating in this session.

Pls do NOT take this as final or us seeking your input at this point. We will do that shortly. While problematic addresses is the focus, it is also a good jump off point to discuss the collective issues. Bylaw, OPS, OCH and Emergency Services have all agreed to participate. We are also thinking of having some security companies, condo boards who have employed them, and Ottawa U security, to come and present at the session on their data collection, incident reporting and the gap in what they report vs what is officially reported in Bylaw, OPS and OPH data and how we can close those gaps. Others that we do think are important to be part of this session is Housing services and OPH.

We will be in touch when we have some more clarity on timing and substance, and a more fulsome agenda to formally provide for your comment and input.

Best

Alan and Cameron

PS – the model that Councillor Plante supports
[Problem Properties In Edmonton | City of Edmonton](#)

1. Welcome/Opening (Clr Plante)
2. Setting the context for the day (Clr's Office)
 - The agenda for the day, logistics, bathrooms, online and in person protocols for Q and As, etc.
3. Problematic Addresses (Bylaw)
 - Discussion and support materials would center on defining what a problematic address is and working toward a consensus definition of it
4. The legislative landscape
 - Cameron is going to start a research review of all the provincial statutes (eg. the Residential Tenancies Act) and all the regs under each legislative authority (eg .building codes, property standards, etc.) for which there are timelines that impose obligations on the owners, tenants, bylaw and property stds to act, with a discussion on what we would like to see as timelines
 - Councilor Plante mentioned MPP Lucille Collard but we can also look at other provincial MPPs across the city who may be interested in a private members bill or government bill if there are government MPPs that are supportive, on looking to make legislative changes where the city can decide on its compliance timelines since the cities should be able to make their own timelines
 - John Dickie from the Eastern ON Landlord's Association could present under this subject
 - Cheryl, I know that this issue is close to your heart as well.

- Jerald – maybe you and/or Kyle can provide some support to Cameron in his research.

4. OPS has agreed to participate and they stated that they can provide a presentation on:

- The heat maps and crime stats
- Paul Stam would present on evidence base policing
- Superintendent Kevin Maloney would present on the OPS new service district model and the new Ops Centre and what it means for Ward 12. He is also overseeing Paul Stam's work on evidence based-policing
- CPOs and NRTs can present what they see on the ground

5. OCH

Should the definition be broad enough to include social service providers and non-private residential and commercial sites:

- OCH is willing to speak that they are experiencing problematic addresses in their units and that their model was never based on taking tenants in who could not live without supports.
- They are willing to present on how they are adjusting their model to deal with complex care
- This would promote a good discussion as to whether non-private entities should be included
- (NB – we want the definition to be expansive enough to allow such additions, but we start small on private residences)

6. (ASH) Good Neighbour Policy

- Sandy Hill liaison cmtee (Calla)
- A goal here would be having a policy that would set out the rights, obligations and standards for a set perimeter outside a social service provider. We already have a voluntary standards for shelters. Here we can discuss the possibility of what it would be to codify standards on a set perimeter and standards within a shelter into a combined bylaw on being a Good Neighbour.

Appendix E: OPH Surveillance Snapshot Feb 26 to Mar. 3, 2024

Dear valued partners,

As part of Ottawa Public Health’s enhanced surveillance due to service reductions at two of Ottawa’s Consumption and Treatment Service (CTS) sites, please find this week’s snapshot of indicators and inputs.

The purpose of this weekly report is to share with you a summary of what diverse partners – from first responders to residents, businesses, and those with lived and living experience – are seeing and experiencing on the ground.

In particular, this report aims to track any significant changes related to overdose and drug-use trends for as long as there is reduced access to supervised consumption services. The goal is to provide timely information for providers of harm-reduction and health services to adapt accordingly.

If you have any questions about this report, or would like to provide input, please contact OPHPartnerRelations@ottawa.ca.

OPH’s Enhanced Surveillance Snapshot - February 26 to March 3, 2024

<p>What are the data about health harms telling us?</p>	<p>Harm data will be influenced by aspects of the overdoses crises, such as changes in toxic supply.</p> <ul style="list-style-type: none"> • For the week beginning February 26, the number of suspected drug overdose ED visits is similar to the previous week. • For the week beginning February 19, the number of suspected drug overdose deaths is lower than the previous week. • For more details and additional data visit StopOverdoseOttawa.ca
<p>What are we hearing from health and social service partners?</p>	<p>Observations by service partners may be influenced by aspects of the overdose crises or seasonal changes such as increased outdoor gathering due to warmer weather.</p> <p>For the week of February 26, six respondents have reported the following observations:</p> <ul style="list-style-type: none"> • Increase in clients accessing available supervised consumption services; • Increase in substance use in public spaces due to difficulty accessing safer consumption spaces; • Increase in overdoses mostly from inhalation; • Increase in requests for inhalation gear; • No significant social disorder noted, with many community services present and providing street outreach services. <p>Concerns from partners:</p> <ul style="list-style-type: none"> • Increased risk of harms, including overdose and deaths, for people who use drugs due to the lack of safer spaces to use,

	<p>prompting them to either use alone, at home, or farther away from services that could help them;</p> <ul style="list-style-type: none"> • Increased burden on available service providers; • Community safety concerns due to increased substance use in public spaces; • Staff fatigue or psychological injury due to increased service use; • Escalating frustration among people who use drugs due to lack of safe consumption spaces. <p>Recommendations from partners:</p> <ul style="list-style-type: none"> • Continue community outreach activities; • Refer clients to available supervised consumption services and ensure adequate staffing at service locations; • Increase community engagement services in the downtown core, Centretown, Chinatown, and Little Italy; • Consider temporary redeployment from other areas where community engagement services are offered; • Re-open the Somerset West Community Health Centre’s supervised consumption services as soon as possible and explore interim solutions, such as outdoor spaces.
<p>What are we hearing from local businesses, business improvement areas and community associations?</p>	<p>Observations in the community may be influenced by aspects of the overdose crises or seasonal changes such as increased outdoor gathering due to warmer weather.</p> <ul style="list-style-type: none"> • For the week of February 26, respondents from a small survey sample have observed quieter-than-usual activity, with some individuals congregating and sleeping rough in Sandy Hill, and increased open drug use in and around transit stops in the ByWard Market.

Data notes:

- This report depends on many sources outside of Ottawa Public Health, so not all information may be available at the time this snapshot is distributed.
- New sources for community feedback are added regularly and may not yet be featured in the latest snapshot.
- Sources may appear to conflict because experiences vary between individuals. For example, not all people experiencing an overdose may seek care so emergency department data may not mirror provider or community experiences.
- Not all measures are available for the previous week. This snapshot may not represent an up-to-the moment description of the situation in Ottawa.
- Additional data are available on [StopOverdoseOttawa.ca](https://stopoverdoseottawa.ca) and [Open Data](#).

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Chers partenaires,

Dans le cadre de la surveillance accrue de Santé publique Ottawa en raison de la réduction des services dans deux des centres de consommation supervisée et de traitement d'Ottawa, veuillez trouver l'aperçu des indicateurs et des données de cette semaine.

L'objectif de ce rapport hebdomadaire est de partager avec vous un résumé de ce que divers partenaires – des premiers intervenants aux résidents, en passant par les entreprises et les personnes ayant une expérience vécue et actuelle – voient et vivent sur le terrain.

En particulier, le présent rapport vise à suivre tout changement important lié aux tendances en matière de surdoses et de consommation de drogues tant que l'accès aux services de consommation supervisée sera réduit. L'objectif est de fournir de l'information en temps opportun aux fournisseurs de services de réduction des méfaits et de santé afin qu'ils puissent s'adapter en conséquence.

Si vous avez des questions au sujet de ce rapport ou si vous souhaitez nous faire part de vos commentaires, merci de vous adresser à OPHPartnerRelations@ottawa.ca.

Aperçu de la surveillance accrue de SPO – du 26 février au 3 mars 2024

Que nous disent les données sur les méfaits pour la santé?	Les données sur les méfaits pour la santé seront influencées par les types de crise de surdose, par exemple les changements relatifs à l'approvisionnement toxique. <ul style="list-style-type: none">• Au cours de la semaine du 26 février, le nombre de visites aux services d'urgence pour surdose de drogue présumée est similaire à celui de la semaine précédente.• Au cours de la semaine du 19 février, le nombre de décès présumés par surdose de drogue est inférieur à celui de la semaine précédente.• Pour plus de détails et des données supplémentaires, veuillez consulter le site arretoverdoseottawa.ca
Qu'entendons-nous de la part des partenaires de services sociaux et de santé?	Les observations des partenaires de service peuvent être influencées par les types de crise de surdose et les changements saisonniers tels que l'augmentation des rassemblements en extérieur en raison des températures plus élevées. Au cours de la semaine du 26 février, six répondants ont fait les observations suivantes : <ul style="list-style-type: none">• Augmentation du nombre de clients ayant recours aux services de consommation supervisée disponibles;• Augmentation de la consommation de substances dans les espaces publics en raison de la difficulté d'accès aux espaces de consommation plus sécuritaire;• Augmentation des surdoses principalement dues à l'inhalation;• Augmentation des demandes de matériel d'inhalation;

	<ul style="list-style-type: none"> • Aucun désordre social significatif n’a été constaté, de nombreux services communautaires étant présents en offrant des services d’approche dans la rue. <p>Préoccupations des partenaires :</p> <ul style="list-style-type: none"> • Risque accru de méfaits, y compris de surdose et de décès, pour les personnes qui consomment des drogues en raison du manque d’espaces sécuritaires pour consommer, ce qui les incite à consommer seules, à la maison ou plus loin des services qui pourraient les aider; • Fardeau accru pour les fournisseurs de services disponibles; • Préoccupations en matière de sécurité communautaire en raison de l’augmentation de la consommation de substances dans les espaces publics; • Fatigue du personnel ou blessures psychologiques en raison de l’utilisation accrue des services; • Augmentation de la frustration parmi les personnes qui consomment des drogues en raison du manque d’espaces de consommation sécuritaire. <p>Recommandations des partenaires :</p> <ul style="list-style-type: none"> • Poursuivre les activités de sensibilisation communautaire; • Orienter les clients vers les services de consommation supervisée disponibles et s’assurer qu’il y a suffisamment de personnel dans les points de service; • Augmenter les services d’engagement communautaire dans le centre-ville, le quartier chinois et la Petite Italie; • Envisager une réaffectation temporaire d’autres secteurs où des services d’engagement communautaire sont offerts; • Ouvrir à nouveau les services de consommation supervisée du Centre de santé communautaire Somerset Ouest dès que possible et explorer des solutions provisoires, comme des espaces extérieurs.
<p>Qu’entendons-nous de la part des entreprises locales, des zones d’amélioration commerciale et des associations communautaires?</p>	<p>Les observations dans la communauté peuvent être influencées par les types de crise de surdose et les changements saisonniers tels que l’augmentation des rassemblements en extérieur en raison des températures plus élevées.</p> <ul style="list-style-type: none"> • Au cours de la semaine du 26 février, les répondants d’un petit échantillon ont observé une activité plus calme qu’à l’habitude, avec certaines personnes se rassemblant et dormant dans la rue dans la Côte-de-Sable, ainsi qu’une augmentation de la consommation de drogues à la vue de tous aux arrêts de transport en commun du marché By et à proximité.

Notes de données :

- Ce rapport dépend de nombreuses sources externes à Santé publique Ottawa, de sorte que toute l'information n'est pas toujours disponible au moment où cet aperçu est distribué.
- De nouvelles sources de commentaires de la communauté sont ajoutées régulièrement et ne pourraient pas encore figurer dans l'aperçu le plus récent.
- Les sources peuvent sembler contradictoires parce que les expériences varient d'une personne à l'autre. Par exemple, ce ne sont pas toutes les personnes qui subissent une surdose qui demanderaient des soins, de sorte que les données des services d'urgence ne reflètent pas les expériences des fournisseurs ou de la communauté.
- Toutes les mesures ne sont pas disponibles pour la semaine précédente. Il est possible que cet aperçu ne représente pas une description à jour de la situation à Ottawa.
- Des données supplémentaires sont disponibles sur les sites arretoverdoseottawa.ca et [Ottawa ouverte](#).

Appendix F: OPH Surveillance Snapshot Mar. 4 to March 10, 2024

Dear valued partners,

As part of Ottawa Public Health’s enhanced surveillance due to service reductions at two of Ottawa’s Consumption and Treatment Service (CTS) sites, please find this week’s snapshot of indicators and inputs.

The purpose of this weekly report is to share with you a summary of what diverse partners – from first responders to residents, businesses, and those with lived and living experience – are seeing and experiencing on the ground.

In particular, this report aims to track any significant changes related to overdose and drug-use trends for as long as there is reduced access to supervised consumption services. The goal is to provide timely information for providers of harm-reduction and health services to adapt accordingly.

If you have any questions about this report, or would like to provide input, please contact OPHPartnerRelations@ottawa.ca.

OPH’s Enhanced Surveillance Snapshot - March 4 to 10, 2024

<p>What are the data about health harms telling us?</p>	<p>Harm data will be influenced by aspects of the overdose crises, such as changes in toxic supply.</p> <ul style="list-style-type: none"> • For the week beginning March 4th, the number of suspected drug overdose ED visits is lower than the previous week and is within normal limits based on historical data. • For the week beginning February 26th, the number of suspected drug overdose deaths is unchanged from the previous week and is within normal limits based on historical data. • For more details and additional data visit StopOverdoseOttawa.ca • For the week beginning March 4th, the number of people seen with a suspected overdose by the Ottawa Police Service is higher than the previous week and is within normal limits based on historical data.
<p>What are we hearing from health and social service partners?</p>	<p>Observations by service partners may be influenced by aspects of the overdose crises or seasonal changes such as increased outdoor gathering due to warmer weather.</p> <p>For the week of March 4, nine respondents have reported the following observations:</p> <ul style="list-style-type: none"> • Increase in social disorder, with many clients reporting injuries from physical altercations. Clients have expressed fear for personal and public safety when using in public or alone. • Increase in substance use and overdoses in public spaces, most notably in public washrooms, outdoor public spaces and near storefronts. This is due to limited access to services and available services operating at capacity, resulting in long waitlists. Clients feel like they have no other choice.

- Increase in unsafe practices and discarded paraphernalia in public spaces.
 - Clients report forgetting or misplacing clean gear and cannot properly dispose of sharps.
 - Some partners noticing increases in discarded needles, although Needle Hunters have not reported anything out of the ordinary.
- Greater presence of emergency services in the downtown core.
- Ottawa Public Library reached out for support regarding overdoses.
- Inhalation equipment remains the predominate item sought by clients.

Concerns from partners:

- Increased overdoses, deaths, and risks to client and public safety due to lack of sanitary conditions, equipment and safe spaces with supervision.
- Lack of supervised consumption services that allow inhalation, given the increase in use of inhalants.
- How will supervised consumption services continue to function safely if Fentanyl continues to be a strong part of the drug supply?
- Ever-present risk of new drugs hitting the streets.
- Lack of staff to attend to emergencies.
- Difficulty for first responders to respond to all overdoses.
- Moral and compassion fatigue of staff.
- Increase in discarded paraphernalia.
- As weather improves, situation may worsen exponentially.

Recommendations from partners:

- More street outreach:
 - Sustain ongoing outreach efforts aimed at delivering services to clients in outdoor settings;
 - Increase social services in priority areas;
 - Maintain access to harm reduction products, such as clean drug-consumption gear and naloxone.
- Extend the hours for supervised consumption at the other sites that remain operational:
 - Expand or unpaue trailer services;
 - Extend hours at the site run by Ottawa Public Health;
 - Extend drop-in hours at the Sandy Hill Community Health Centre;
 - Obtain a federal exemption for the Somerset West Community Health Centre to provide an outdoor space for supervised consumption.
- Increase communication among agencies:

	<ul style="list-style-type: none"> ○ Consider including certain Ottawa Public Library branches and local businesses in the ongoing response. • Establish a clear action plan to re-open the closed supervised consumption sites. Start with prescribed, untampered alternatives to safer supply so staff know exactly what is being consumed.
What are we hearing from local businesses, business improvement areas and community associations?	<p>Observations in the community may be influenced by aspects of the overdose crises or seasonal changes such as increased outdoor gathering due to warmer weather.</p> <ul style="list-style-type: none"> • For the week of March 4, respondents in Centretown have observed: an increase in discarded needles, crack pipes and other paraphernalia; an increase in open substance use in public areas; and an increase in signs of people sleeping rough.

Data notes:

- This report depends on many sources outside of Ottawa Public Health, so not all information may be available at the time this snapshot is distributed.
- New sources for community feedback are added regularly and may not yet be featured in the latest snapshot.
- Sources may appear to conflict because experiences vary between individuals. For example, not all people experiencing an overdose may seek care so emergency department data may not mirror provider or community experiences.
- Not all measures are available for the previous week. This snapshot may not represent an up-to-the moment description of the situation in Ottawa.
- Additional data are available on StopOverdoseOttawa.ca and [Open Data](#).

Chers partenaires,

Dans le cadre de la surveillance accrue de Santé publique Ottawa en raison de la réduction des services dans deux des centres de consommation supervisée et de traitement d’Ottawa, veuillez trouver l’aperçu des indicateurs et des données de cette semaine.

L’objectif de ce rapport hebdomadaire est de partager avec vous un résumé de ce que divers partenaires – des premiers intervenants aux résidents, en passant par les entreprises et les personnes ayant une expérience vécue et actuelle – voient et vivent sur le terrain.

En particulier, le présent rapport vise à suivre tout changement important lié aux tendances en matière de surdoses et de consommation de drogues tant que l’accès aux services de consommation supervisée sera réduit. L’objectif est de fournir de l’information en temps opportun aux fournisseurs de services de réduction des méfaits et de santé afin qu’ils puissent s’adapter en conséquence.

Si vous avez des questions au sujet de ce rapport ou si vous souhaitez nous faire part de vos commentaires, merci de vous adresser à OPHPartnerRelations@ottawa.ca.

Aperçu de la surveillance accrue de SPO – du 4 au 10 mars 2024

Que nous disent les données sur les méfaits pour la santé?	<p>Les données sur les méfaits pour la santé seront influencées par les types de crise de surdose, par exemple les changements relatifs à l’approvisionnement toxique.</p> <ul style="list-style-type: none">• Au cours de la semaine du 4 mars, le nombre de visites aux services d’urgence pour surdose de drogue présumée est inférieur à celui de la semaine précédente et se situe dans les limites normales d’après les données historiques.• Au cours de la semaine du 26 février, le nombre de décès présumés par surdose de drogue demeure le même que celui de la semaine précédente et se situe dans les limites normales d’après les données historiques.• Pour plus de détails et des données supplémentaires, veuillez consulter le site arretoverdoseottawa.ca• Au cours de la semaine du 4 mars, le nombre de personnes soupçonnées d’avoir subi une surdose par le Service de police d’Ottawa est plus élevé que la semaine précédente et se situe dans les limites normales d’après les données historiques
Qu’entendons-nous de la part des partenaires de services sociaux et de santé?	<p>Les observations des partenaires de service peuvent être influencées par les types de crise de surdose et les changements saisonniers tels que l’augmentation des rassemblements en extérieur en raison des températures plus élevées.</p> <p>Au cours de la semaine du 4 mars, neuf répondants ont fait des observations suivantes :</p> <ul style="list-style-type: none">• L’augmentation des désordres sociaux, avec de nombreux clients qui ont signalé des blessures causées par des altercations physiques. Les clients ont exprimé des craintes pour leur sécurité personnelle et publique lorsqu’ils consomment en public ou seuls.• L’augmentation de la consommation de substances et des surdoses dans les espaces publics, en particulier dans les toilettes publiques, les espaces publics extérieurs et les extérieurs à proximité des magasins. Cela est dû à l’accès limité aux services et aux services disponibles fonctionnant au maximum de ses capacités, ce qui entraîne de longues listes d’attente. Les clients ont l’impression qu’ils n’ont pas d’autre choix.• L’augmentation des pratiques dangereuses et des accessoires jetés dans les espaces publics.<ul style="list-style-type: none">• Les clients signalent avoir oublié ou égaré de l’équipement propre et ne peuvent pas se débarrasser correctement des objets tranchants.• Certains partenaires ont connu une augmentation du nombre d’accessoires de toxicomanie jetés, bien que le

Programme de ramassage des aiguilles n'ait rien signalé d'anormal.

- Une plus grande présence des services d'urgence au centre-ville.
- La Bibliothèque publique d'Ottawa a demandé de l'aide en raison des surdoses.
- Le matériel d'inhalation reste l'article prédominant recherché par les clients.

Préoccupations des partenaires :

- L'augmentation des surdoses, des décès et des risques pour la sécurité des clients et du public en raison du manque de conditions sanitaires, d'équipement et d'espaces sécuritaires supervisés.
- Manque de services de consommation supervisée qui permettent l'inhalation, compte tenu l'augmentation de l'utilisation des inhalants.
- Comment les services de consommation supervisée fonctionneront-ils en toute sécurité si le Fentanyl continue d'être une partie importante de l'approvisionnement en drogues?
- Le risque toujours présent que de nouvelles drogues se retrouvent dans les rues.
- Manque de personnel pour répondre aux urgences.
- Difficulté pour les premiers intervenants d'intervenir face à toutes les surdoses.
- Fatigue morale et de compassion du personnel.
- L'augmentation des accessoires de toxicomanie jetés.
- À mesure que le temps s'améliore, la situation pourrait se détériorer de façon exponentielle.

Recommandations des partenaires :

- Plus de travailleurs de rue :
 - Soutenir les efforts continus d'engagement visant à fournir des services aux clients en milieu extérieur;
 - Accroître la présence des organismes de services sociaux dans les domaines prioritaires;
 - Maintenir l'accès à d'autres produits de réduction des méfaits, comme du matériel propre de consommation de drogues et de la naloxone.
- Prolonger les heures d'ouverture de la consommation supervisée aux autres sites qui restent opérationnels :
 - Étendre ou réactiver les services de la remorque;
 - Prolonger les heures d'ouverture du site géré par Santé publique Ottawa;

	<ul style="list-style-type: none"> • Prolonger les heures d’ouverture de service de rendez-vous au Centre de santé communautaire de la Côte-de-Sable; • Obtenir une exemption fédérale pour que le Centre de santé communautaire Somerset Ouest fournisse un espace extérieur pour la consommation supervisée. • Améliorer la communication parmi les organismes : <ul style="list-style-type: none"> • Envisager d’inclure certaines succursales de la Bibliothèque publique d’Ottawa et des entreprises locales dans l’intervention continue. • Établir un plan d’action clair pour la réouverture des sites de consommation supervisée fermés. Commencer par des solutions de rechange prescrites et non altérées à un approvisionnement plus sûr afin que le personnel sache exactement ce qui est consommé.
<p>Qu’entendons-nous de la part des entreprises locales, des zones d’amélioration commerciale et des associations communautaires?</p>	<p>Les observations dans la communauté peuvent être influencées par les types de crise de surdose et les changements saisonniers tels que l’augmentation des rassemblements en extérieur en raison des températures plus élevées.</p> <ul style="list-style-type: none"> • Au cours de la semaine du 4 mars, les répondants du quartier du centre-ville ont observé : une augmentation du nombre d’aiguilles, de pipes à crack et d’autres accessoires de consommations jetés; une augmentation de la consommation de substances en plein air dans les lieux publics; et une augmentation des signes qui indiquent que les gens dorment dans la rue.

Notes de données :

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- Les sources peuvent sembler contradictoires parce que les expériences varient d’une personne à l’autre. Par exemple, ce ne sont pas toutes les personnes qui subissent une surdose qui demanderaient des soins, de sorte que les données des services d’urgence ne reflètent pas les expériences des fournisseurs ou de la communauté.
- Toutes les mesures ne sont pas disponibles pour la semaine précédente. Il est possible que cet aperçu ne représente pas une description à jour de la situation à Ottawa.
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Appendix G: OPH Surveillance Snapshot Mar. 11 to March 17, 2024

Dear valued partners,

As part of Ottawa Public Health’s enhanced surveillance due to service reductions at two of Ottawa’s Consumption and Treatment Service (CTS) sites, please find this week’s snapshot of indicators and inputs.

The purpose of this weekly report is to share with you a summary of what diverse partners – from first responders to residents, businesses, and those with lived and living experience – are seeing and experiencing on the ground.

In particular, this report aims to track any significant changes related to overdose and drug-use trends for as long as there is reduced access to supervised consumption services. The goal is to provide timely information for providers of harm-reduction and health services to adapt accordingly.

If you have any questions about this report, or would like to provide input, please contact OPHPartnerRelations@ottawa.ca.

As of March 15, Somerset West Community Health Centre has received an exemption from Health Canada to operate an outdoor supervised consumption site on its premises.

OPH’s Enhanced Surveillance Snapshot - March 11 to 17, 2024

<p>What are the data about health harms telling us?</p>	<p>Harm data will be influenced by aspects of the overdose crises, such as changes in toxic supply.</p> <ul style="list-style-type: none"> • For the week beginning March 11, the number of suspected drug overdose ED visits is lower than the previous week and is within normal limits based on historical data. • For the week beginning March 4, the number of suspected drug overdose deaths is higher than the previous week and is within normal limits based on historical data. • For more details and additional data visit StopOverdoseOttawa.ca • For the week beginning March 11, the number of people seen with a suspected overdose by the Ottawa Police Service is lower than the previous week and is within normal limits based on historical data.
<p>What are we hearing from health and social service partners?</p>	<p>Observations by service partners may be influenced by aspects of the overdose crises or seasonal changes such as increased outdoor gathering due to warmer weather.</p> <p>For the week of March 11, seven respondents have reported the following observations:</p> <ul style="list-style-type: none"> • Continued increase in the use of inhalants. A shortage of mephedrone (bubble) is being reported as well. • Increased visits to available services, including street outreach.

- Increased substance use in public spaces, particularly in late mornings and afternoons.
- Increased vandalism, property damage, littering, public defecation, and unsafe disposal of sharps and drug-use paraphernalia in public spaces and around sites where service providers are located.
- Clients are noticing a lack of access to washrooms.
- Steep increase in reports of human feces in outdoor spaces, such as sidewalks, driveways and front lawns, particularly near sites where service providers are located.
- Increased client reports of incontinence, gassiness, and severe diarrhea.
- Increasingly violent and unsafe conditions for clients, staff, and neighbourhood residents, as clients' frustrations continue to increase.
- Compassion fatigue and moral injury among staff.

Concerns from partners:

- Increased substance use and overdoses in public spaces.
- Neighbourhood residents concerned about safety, damage to property, and increased public intoxication. Complaints are being made to the municipality and police services.
- Hearing concerns from clients about the lack of access to public washrooms. The situation could worsen due to incontinence suspected to be a result of an increasingly toxic drug supply.
- Unsafe and unhygienic conditions for substance use, increasing the risk of overdose deaths as well as sexually transmitted and blood-borne infections.
- Risks of clients being exposed to worsening violence.
- Increased burden on shelters since they are the only safe place for clients on weekends. Not all clients feel safe at shelters and some have been banned from them.
- Staff burnout and unsafe work environment due to escalating client frustrations and violent behaviours.
- Risk of clients disengaging permanently from supervised consumption sites due to increasing frustrations. Clients feel frustrated with staff asking them to stop undesired behaviours.
- Potential impact on client safety if they are using in an area outside of their own community.

Recommendations from partners:

- Continue to work collaboratively with partners in a collective response to:
 - Increase social and emergency services in affected areas;
 - Connect with shelters to ensure they are not overwhelmed and develop a plan to manage increased visits from clients;

	<ul style="list-style-type: none"> ○ Increase the provision of services in outdoor spaces, including street outreach. ● Increase capacity in supervised consumption services that remain open by: <ul style="list-style-type: none"> ○ Exploring the use of hybrid indoor and outdoor supervised consumption services and providing emergency exemptions to use outdoor spaces for supervised consumption, while working on the reopening of the two sites that are closed; ○ Experimenting with flexible staffing models among different sites to offer services on weekends and/or extended hours during weekdays. ● Continue to redeploy staff to street outreach to ensure clients have access to naloxone, are receiving appropriate service referrals, and have access to a general wellness check. <ul style="list-style-type: none"> ○ Ensure outreach teams have the appropriate training in trauma-informed care, crisis intervention, and strength-based approaches to de-escalate potentially violent interactions with frustrated clients. ● Install portable toilets with increased ventilation in parking lots adjacent to one of the supervised consumption site that remains closed. The toilets could be locked at night and regularly checked during daytime hours. ● Continue to advocate for safer inhalation services to prevent fatal overdoses.
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<p>What are we hearing from local businesses, business improvement areas and community associations?</p>	<p>Observations in the community may be influenced by aspects of the overdose crises or seasonal changes such as increased outdoor gathering due to warmer weather.</p> <p>For the week of March 11:</p> <ul style="list-style-type: none"> ● Respondents in Centretown observed: open substance use in public areas and visibly intoxicated individuals; discarded needles; damage and theft of private property; and tents in public spaces. ● Respondents in the ByWard Market observed: an individual who was experiencing homelessness and who appeared to have been involved a physical altercation; individuals who appeared intoxicated in public settings; and open substance use in public areas. ● Respondents in Chinatown observed fewer people congregating and fewer signs of social disorder around the Somerset West Community Health Centre with the closure of its supervised consumption site. Following the opening of its outdoor supervised consumption site last weekend, respondents observed individuals who appeared intoxicated in public spaces and an increase in social disorder around the centre.
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- New sources for community feedback are added regularly and may not yet be featured in the latest snapshot.
- Sources may appear to conflict because experiences vary between individuals. For example, not all people experiencing an overdose may seek care so emergency department data may not mirror provider or community experiences.
- Not all measures are available for the previous week. This snapshot may not represent an up-to-the moment description of the situation in Ottawa.
- Additional data are available on StopOverdoseOttawa.ca and [Open Data](#).

Chers partenaires,

Dans le cadre de la surveillance accrue de Santé publique Ottawa en raison de la réduction des services dans deux des centres de consommation supervisée et de traitement d'Ottawa, veuillez trouver l'aperçu des indicateurs et des données de cette semaine.

L'objectif de ce rapport hebdomadaire est de partager avec vous un résumé de ce que divers partenaires – des premiers intervenants aux résidents, en passant par les entreprises et les personnes ayant une expérience vécue et actuelle – voient et vivent sur le terrain.

En particulier, le présent rapport vise à suivre tout changement important lié aux tendances en matière de surdoses et de consommation de drogues tant que l'accès aux services de consommation supervisée sera réduit. L'objectif est de fournir de l'information en temps opportun aux fournisseurs de services de réduction des méfaits et de santé afin qu'ils puissent s'adapter en conséquence.

Si vous avez des questions au sujet de ce rapport ou si vous souhaitez nous faire part de vos commentaires, merci de vous adresser à OPHPartnerRelations@ottawa.ca.

Dès que 15 mars, le Centre de santé communautaire Somerset Ouest a reçu une exemption de Santé Canada pour exploiter un site de consommation supervisée en plein air sur sa propriété.

Aperçu de la surveillance accrue de SPO – du 11 au 17 mars 2024

Que nous disent les données sur les méfaits pour la santé?	Les données sur les méfaits pour la santé seront influencées par les types de crise de surdose, par exemple les changements relatifs à l'approvisionnement toxique. <ul style="list-style-type: none">• Au cours de la semaine du 11 mars, le nombre de visites aux services d'urgence pour surdose de drogue présumée est inférieur à celui de la semaine précédente et se situe dans les limites normales d'après les données historiques.• Au cours de la semaine du 4 mars, le nombre de décès présumés par surdose de drogue est plus élevé que celui
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	<p>de la semaine précédente et se situe dans les limites normales d'après les données historiques.</p> <ul style="list-style-type: none"> • Pour plus de détails et des données supplémentaires, veuillez consulter le site arretoverdoseottawa.ca • Au cours de la semaine du 11 mars, le nombre de personnes soupçonnées d'avoir subi une surdose par le Service de police d'Ottawa est inférieur à celui de la semaine précédente et se situe dans les limites normales d'après les données historiques.
<p>Qu'entendons-nous de la part des partenaires de services sociaux et de santé?</p>	<p>Les observations des partenaires de service peuvent être influencées par les types de crise de surdose et les changements saisonniers tels que l'augmentation des rassemblements en extérieur en raison des températures plus élevées.</p> <p>Au cours de la semaine du 11 mars, sept répondants ont fait des observations suivantes :</p> <ul style="list-style-type: none"> • L'augmentation continue de l'utilisation de substances inhalées. Une pénurie de méphédronne (bulle) est également signalée. • L'augmentation du nombre de visites aux services disponibles, y compris les services d'engagement dans la rue. • L'augmentation de la consommation de substances dans les espaces publics, en particulier en fin de matinée et dans l'après-midi. • L'augmentation du vandalisme, des dommages matériels, des débris, de la défécation publique et de l'élimination non sécuritaire des objets tranchants et des accessoires liés à la consommation de drogues dans les espaces publics et autour des sites où se trouvent les fournisseurs de services. • Les clients remarquent un manque d'accès aux toilettes. • La forte augmentation des signalements d'excréments humains dans les espaces extérieurs, comme les trottoirs, les allées et les pelouses, en particulier près des sites où se trouvent les fournisseurs de services. • L'augmentation des rapports des clientes concernant l'incontinence, les gaz et la diarrhée sévère. • Des conditions de plus en plus violentes et dangereuses pour les clients, le personnel et les résidents du quartier, alors que les frustrations des clients ne cessent d'augmenter. • La fatigue de compassion et le préjudice moral chez le personnel. <p>Préoccupations des partenaires :</p> <ul style="list-style-type: none"> • L'augmentation de la consommation de substances et des surdoses dans les espaces publics. • Les résidents du quartier s'inquiètent de la sécurité, des dommages matériels et de l'augmentation de l'ivresse publique.

Des plaintes sont déposées auprès de la municipalité et des services de police.

- Entendre les préoccupations des clients au sujet du manque d'accès aux toilettes publiques. La situation pourrait s'aggraver en raison de l'incontinence soupçonnée d'être le résultat d'un approvisionnement en médicaments de plus en plus toxiques.
- Des conditions dangereuses et insalubres pour la consommation de substances, ce qui augmente le risque de décès par surdose ainsi que d'infections transmissibles sexuellement et par le sang.
- Les risques d'exposition des clients à une aggravation de la violence.
- L'augmentation du fardeau des refuges, car ils sont le seul endroit sûr pour les clients pendant les fins de semaine. Ce n'est pas tous les clients qui se sentent en sécurité dans les refuges et certains en ont été interdits.
- L'épuisement professionnel du personnel et l'environnement de travail dangereux en raison de l'escalade des frustrations et des comportements violents des clients.
- La risque que les clients se désengagent définitivement des sites de consommation supervisée en raison de frustrations croissantes. Les clients se sentent frustrés lorsque le personnel leur demande de mettre fin à leurs comportements indésirables.
- L'impact potentiel sur la sécurité des clients s'ils consomment dans une zone à l'extérieur de leur propre communauté.

Recommandations des partenaires :

- Continuer à travailler en collaboration avec les partenaires dans le cadre d'une réponse collective afin de:
 - Renforcer les services sociaux et d'urgence dans les zones touchées;
 - Établir des liens avec les refuges pour s'assurer qu'ils ne sont pas débordés et élaborer un plan pour gérer l'augmentation des visites des clients;
 - Accroître l'offre de services dans les espaces extérieurs, y compris les services d'engagement dans la rue.
- Augmenter la capacité des services de consommation supervisée qui demeurent ouverts en:
 - Explorer l'utilisation de services hybrides de consommation supervisée à l'intérieur et à l'extérieur et accorder des exemptions d'urgence pour l'utilisation des espaces extérieurs à des fins de consommation supervisée, tout en travaillant à la réouverture des deux sites fermés;
 - Expérimenter des modèles de dotation en personnel flexibles parmi les différents sites afin d'offrir des services le weekend et/ou des heures prolongées en semaine.

	<ul style="list-style-type: none"> ○ Continuer de redéployer le personnel dans les services d’engagement dans la rue pour s’assurer que les clients ont accès à la naloxone, qu’ils ont aiguillés vers les services appropriés et qu’ils ont accès à une vérification du bien être. ○ Veiller à ce que les équipes d’intervention aient reçu la formation appropriée en matière de soins tenant compte des traumatismes, d’intervention en cas de crise et d’approches fondées sur les forces pour désamorcer les interactions potentiellement violentes avec les clients frustrés. • Installer des toilettes portatives avec une ventilation accrue dans les stationnements adjacents à l’un des sites de consommation supervisée qui demeure fermé. Les toilettes pouvaient être fermées à clé la nuit et vérifiées régulièrement pendant la journée. • Continuer de plaider en faveur de services d’inhalation plus sécuritaires afin de prévenir les surdoses mortelles.
<p>Qu’entendons-nous de la part des entreprises locales, des zones d’amélioration commerciale et des associations communautaires?</p>	<p>Les observations dans la communauté peuvent être influencées par les types de crise de surdose et les changements saisonniers tels que l’augmentation des rassemblements en extérieur en raison des températures plus élevées.</p> <p>Au cours de la semaine du 11 mars :</p> <ul style="list-style-type: none"> • Les répondants de Centretown ont observé: la consommation de substances en plein air dans les lieux publics et les personnes visiblement en état d’ébriété; aiguilles jetées; les dommages et le vol de biens privés; et des tentes dans les espaces publics. • Les répondants du Marché By ont observé: une personne en situation d’itinérance qui semblait avoir été impliquée dans une altercation physique; les personnes qui semblaient en état d’ébriété dans des lieux publics; et la consommation de substances en plein air dans les lieux publics. • Les répondants du quartier chinois ont observé moins de rassemblements et moins de signes de désordre social autour du Centre de santé communautaire Somerset Ouest avec la fermeture de son site de consommation supervisée. À la suite de l’ouverture de son site de consommation supervisée en plein air la fin de semaine dernière, les répondants ont observé des personnes qui semblaient en état d’ébriété dans les espaces publics et une augmentation du désordre social autour du centre.

Notes de données :

- Ce rapport dépend de nombreuses sources externes à Santé publique Ottawa, de sorte que toute l’information n’est pas toujours disponible au moment où cet aperçu est distribué.

- De nouvelles sources de commentaires de la communauté sont ajoutées régulièrement et ne pourraient pas encore figurer dans l'aperçu le plus récent.
- Les sources peuvent sembler contradictoires parce que les expériences varient d'une personne à l'autre. Par exemple, ce ne sont pas toutes les personnes qui subissent une surdose qui demanderaient des soins, de sorte que les données des services d'urgence ne reflètent pas les expériences des fournisseurs ou de la communauté.
- Toutes les mesures ne sont pas disponibles pour la semaine précédente. Il est possible que cet aperçu ne représente pas une description à jour de la situation à Ottawa.
- Des données supplémentaires sont disponibles sur les sites arretoverdoseottawa.ca et [Ottawa ouverte](#).