

Responding to B.C.'s Overdose Emergency

Progress Update

November 2018 – February 2019



Ministry of
Mental Health
and Addictions

BACKGROUND

Despite escalated efforts across the province, B.C. continues to see record numbers of illicit drug overdose deaths. Data from the B.C. Coroners Service reports 1,486 people died from a preventable overdose death in 2017 and a further 1,510 people died in 2018. B.C.'s highly toxic illicit drug supply results in overdoses and overdose deaths in every corner of the province. With four people a day dying of a preventable overdose, B.C. is experiencing the worst public health crisis the province has seen in decades.

Overdose Statistics for November, December and Full-Year 2018

In November 2018, 125 people died from an illicit drug overdose. Deaths in November represent an 18% increase from November 2017 (106) and a 17% increase from October 2018 (117). In December 2018, 116 people died from an illicit drug overdose. Deaths in December 2018 represent a 13% increase from December 2017 (103) and an 8% decrease from November 2018 (125). From January 1 to December 31, 2018, at least 1,510 people died from an illicit drug overdose. This is a slight increase in the number of deaths from 2017 (1,486). However, the number of deaths in 2018 may increase as investigations conclude.

Fentanyl or its analogues were detected in approximately 87% of illicit drug overdose deaths in 2018. The majority (71%) of people who died in 2018 were between the ages of 30 and 59; the vast majority (91%) of overdose deaths overall occurred among those aged 19 to 59. Males continued to be disproportionately represented, with 80% of all overdose deaths in 2018 occurring in men. The majority (86%) of overdose deaths in 2018 occurred indoors. This suggests the trend of people using drugs alone or in the presence of someone who is unwilling or unable to call 9-1-1 is continuing.

There were 90 suspected drug overdose deaths in January 2019. Deaths in January represent a 31% decrease from January 2018 (130) and a 22% decrease over the number of deaths occurring December 2018 (116). For more information, please see [the BC Coroner's illicit drug overdose death report](#).

Report from the Representative for Children and Youth

In November 2018, B.C.'s Representative for Children and Youth (RCY) released *Time to Listen: Youth Voices on Substance Use*, which calls for youth-focused harm reduction as a key part of a comprehensive substance use service system. The report offers the first-hand perspectives of 100 young people across B.C. with lived experience, and also draws on lessons learned from an aggregate review of substance use-related injury and death reports received by the RCY in 2017.

The report's recommendations to the provincial government include:

- Developing and funding an array of substance use services that can meet the diverse needs of all youth, including culturally safe services for Indigenous youth.
- Embedding youth engagement into the Province's Mental Health and Addiction Strategy, including implementation.

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- Creating a single information source for publicly funded youth substance use services in B.C.
- Creating a full spectrum of youth-specific harm reduction services, including youth-specific spaces for supervised consumption.
- Implementing a comprehensive training program to help foster parents build skills for open dialogue with youth about substance use.

Escalating B.C.'s Response to the Overdose Emergency

In February 2019, the Ministry of Mental Health and Addictions released the report [*Escalating British Columbia's Response to the Overdose Emergency*](#). The report summarizes the provincial government's efforts over the last 18 months and highlights forthcoming actions. B.C.'s response to the overdose emergency is a collaborative effort between the Ministry of Mental Health and Addictions, the Ministry of Health, the Overdose Emergency Response Centre, and stakeholders from across the health system and civil society.

B.C.'s response focuses on six key areas:

- Saving lives
- Ending stigma
- Building an evidence-based network of treatment and recovery services
- Creating a supportive environment
- Advancing prevention
- Improving public safety

New Executive Director of the Overdose Emergency Response Centre

In January 2019, Justine Patterson was appointed Executive Director of the Overdose Emergency Response Centre (OERC). Ms. Patterson joins the OERC from Vancouver Coastal Health, where she was the Regional Lead for the Addictions Program. In addition to her work with Vancouver Coastal Health, Ms. Patterson has held leadership positions with the Elizabeth Fry Society of Greater Vancouver and in mental health and substance use services in Queensland, Australia. Ms. Patterson takes over from Miranda Compton, who returned to her role in Vancouver Coastal Health in December 2018 after a one-year secondment as the Executive Director of the OERC.

KEY AREAS OF FOCUS AND SUMMARY OF PROGRESS SINCE LAST REPORT

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

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Progress since last report:

- As of February 15, 2019, over 136,000 [Take Home Naloxone](#) kits have been distributed throughout the province, with over 36,000 kits being reported to reverse an overdose.

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

Progress since last report:

- The Province's [public awareness campaign](#) continues to encourage the public to consider that people who use drugs are their family, friends, coworkers and neighbours. Recently, the Ministry of Mental Health and Addictions began work to refresh the StopOverdoseBC campaign to reflect how the overdose emergency disproportionately affects males.

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

Progress since last report:

- The [PHS Community Services Society](#) launched a pilot project to provide hydromorphone tablets to up to 50 patients with opioid use disorder.
- St. Paul's Hospital launched a [pilot project](#) to provide patients who visit the Emergency Department for an overdose with a three-day supply of Suboxone® upon discharge.
- In [Budget 2019](#), the provincial government announced an additional \$30 million investment to continue BC's response to the overdose emergency. This will help expand access to life-saving naloxone kits and fund pilot programs to help meet increased demand for paramedics in rural and remote areas of B.C.
- The B.C. Centre for Excellence in HIV/AIDS launched the [Provincial BOOST Collaborative](#), which aims to improve outcomes for clients with opioid use disorder (OUD) through a quality improvement project that provides training and networking with other OUD care providers/teams around implementing, measuring, and sharing best practices in oral opioid agonist therapy.
- In November, the B.C. Pharmacy Association launched a new [opioid agonist treatment training program for community pharmacists](#).
- Fraser Health expanded the [Roshni Clinic](#) to better support people of the South Asian community experiencing problems associated with alcohol and other drug use.
- Interior Health expanded its [Opioid Agonist Treatment Clinic](#) to double the number of patients treated for opioid use disorder.

- Effective February 1, 2019, the [First Nations Health Authority](#) began reimbursing opioid agonist treatment clinic fees to private clinics serving people in B.C. with First Nations status.
 - The [University of British Columbia](#) appointed the first Canopy Growth professor of cannabis science to explore the role that cannabis can play in treatment opioid use disorder.
 - The B.C. Centre on Substance Use released its [quarterly report on provider education](#).
 - The B.C. Centre on Substance Use released two handbooks that aim to help families impacted by substance use: [Coping Kit: Dealing with Addiction in Your Family](#) and [Gone Too Soon: Navigating Grief and Loss as a Result of Substance Use](#).
- 4. Creating a supportive environment:** Activities and services that address social factors related to substance use such as housing, income, employment, intergenerational trauma and community development.

Progress since last report:

- Communities continue to utilize funding from the Community Overdose Crisis Innovation Fund to address the overdose emergency at the local level.

- 5. Advancing prevention:** Activities and services that help keep childhood trauma and other mental health issues from driving substance use disorders.

Progress since last report:

- In [Budget 2019](#), the provincial government allocated \$74 million to improve access to mental health care for children and youth.

- 6. Improving public safety:** Law enforcement activities that disrupt drug trafficking and the crime and violence that accompany it.

Progress since last report:

- The [Pill Press and Related Equipment Control Act](#) came into effect on January 15, 2019.

1. SAVING LIVES

TAKE HOME NALOXONE PROGRAM IN BC

SAVING LIVES SINCE AUGUST 2012



To find a site in BC visit: towardtheheart.com/site-finder



CALLING 911 IS THE FIRST & MOST CRITICAL STEP OF OVERDOSE RESPONSE

Naloxone is a medication that reverses the effects of an overdose from opioids (e.g. heroin, methadone, fentanyl, morphine, oxycodone)

Take Home Naloxone (THN) kits are free for people at risk of an opioid overdose and those most likely to witness and respond to an overdose

DISTRIBUTION OF KITS

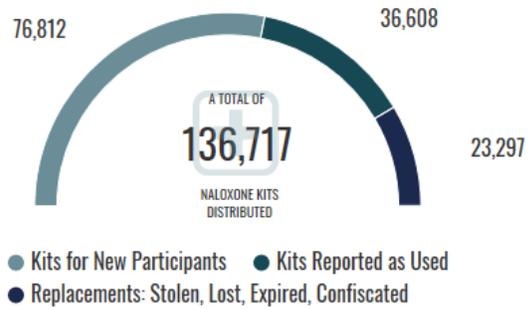


ACTIVE THN DISTRIBUTION LOCATIONS IN BC INCLUDING:



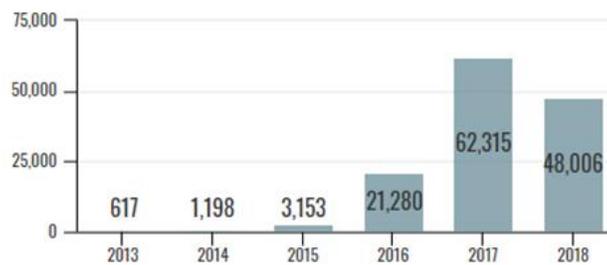
36,608

KITS REPORTED AS USED TO REVERSE AN OVERDOSE



NUMBER OF KITS DISTRIBUTED BY YEAR

Data is derived from a live environment and data from most recent two months is subject to change.



FOR MORE INFORMATION VISIT towardtheheart.com/naloxone/
WORKING TOGETHER | REDUCING HARM

2. ENDING THE STIGMA AROUND ADDICTIONS AND MENTAL ILLNESS

There is no one type of person who uses drugs, yet many people consider addiction and drug use as a solely street entrenched issue. However, the data tell us otherwise: overdose is a far reaching and escalating problem in B.C., with a wide range of people who are dying or experiencing non-fatal overdose events. In fact, the sheer number of people who are dying indoors alone suggests that a person is more likely to survive an overdose in areas such as the Downtown East Side of Vancouver than in a suburban dwelling.

People who do not feel comfortable coming forward to get help – whether that is to access drug checking services, to be monitored for overdose at an overdose prevention or supervised consumption service location, or to access treatment services – are at risk of overdose and overdose death. The onus is on all British Columbians to have courageous conversations about substance use, to shift perceptions of people who use drugs, and reduce the stigma that undermines efforts to save lives.

The Ministry of Mental Health and Addictions continues to expand content on StopOverdoseBC.ca, including a section called The Weekly. The Weekly provides a platform for people to hear from everyday change-makers who are working to stop overdose and to learn from those who are helping to put a human face on the overdose crisis in our province. Powerful stories can help others heal, provide hope and remind us of our humanity. Read more here: <https://www.stopoverdose.gov.bc.ca/theweekly>.

The Ministry began work to refresh StopOverdoseBC campaign elements to follow social marketing best practices. The refreshed creative will reflect how the overdose crisis disproportionately affects males, and will acknowledge public feedback on campaign language.

In addition, public consultation and engagement revealed the need to knock down language as a barrier and reach British Columbians in the South Asian and Chinese Canadian communities. Campaign concepts were developed by a specialized advertising firm, informed by advisory groups and were formally focus tested in-language. The Ministry of Mental Health and Addictions is proceeding with a revised concept that will showcase the strength of family and the power of listening.

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

Hydromorphone Tablet Pilot Project

On January 8, 2019, the PHS Community Services Society launched a pilot project to provide up to 50 patients with access to hydromorphone tablets for witnessed consumption. Patients have the option to ingest the tablets orally or crush and inject them, with both forms of consumption to be observed by staff. The pilot project is being led by PHS Medical Director Dr. Christy Sutherland.

St. Paul's Hospital Emergency Department Suboxone Pilot Project

A leading-edge pilot project in the St. Paul's Hospital Emergency Department (ED) will provide opioid overdose patients with take-away treatment upon leaving the hospital. The program is a first in Canada in terms of its low-barrier approach, with an emphasis on pre-prepared, to-go packs, easy-to-understand instructions, and a well-defined follow-up care plan.

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With this new practice, patients with opioid use disorder who are being treated for an opioid overdose in the ED will see a doctor, and then receive a three-day supply of Suboxone from a specially-trained addiction nurse. Detailed information on follow-up treatment and community resources will be provided as well.

Budget 2019 Investment in Provincial Overdose Response

On February 19, 2019, the provincial Finance Minister introduced the B.C. government's budget and fiscal plan for 2019. The budget includes a \$30 million investment to increase efforts to respond to the opioid overdose emergency. The funding will be directed to initiatives delivered by B.C. Emergency Health Services and the B.C. Centre for Disease Control. This investment will significantly expand programs to meet increased demand for paramedics in rural and remote areas and broaden distribution of life-saving naloxone kits.

This new investment is in addition to the total \$578 million provided since the Budget 2017 Update for the opioid overdose emergency response and initiatives to address mental health and substance use. These investments are guided by the Ministry of Mental Health and Addictions, and will be delivered by the Ministry of Health and the Ministry of Children and Family Development.

Provincial BOOST Collaborative

On January 17, 2019, the B.C. Centre for Excellence in HIV/AIDS launched the Provincial BOOST (Best Practices in Oral Opioid agonist Therapy) Collaborative. The Collaborative is an organized effort to achieve shared learning by a network of teams from across B.C. over the next year. The Collaborative will allow team participants to maintain contact with each other, BOOST faculty members, and the Project Lead throughout the initiative. This will create a community of learning in which teams collaborate with each other to discuss common issues and spread best practices.

Opioid Agonist Treatment Training for Community Pharmacists

The B.C. Pharmacy Association launched a new opioid agonist treatment training program for community pharmacists, who are often on the front line of addressing the opioid crisis. The program is aimed at reducing stigma and expanding pharmacists' knowledge about methadone, buprenorphine/naloxone and slow-release oral morphine. The program will also improve the experience and engagement of people receiving treatment.

The training includes in-person workshops and an online self-study component. One pharmacist from every pharmacy in the province will be trained by summer 2019. As well, as part of the phased-in training, the Ministry of Health and the College of Pharmacists of B.C. will require all pharmacists dispensing opioid agonist treatment medications to complete the training by March 31, 2021.

Roshni Clinic Expansion

Fraser Health has expanded the hours and services provided by the Roshni Clinic to better support people in South Asian communities who are struggling with substance use. The first of its kind in the province when it opened in 2017, the clinic, which recently relocated to Surrey Substance Use Services at Quibble Creek, will now have the ability to connect people to first-line treatment for opioid use disorder using medications such as Suboxone and methadone.

The South Asian communities are one of the largest ethno-cultural groups in Fraser Health, and tend to access mental health and substance use services less often than the general population. The Roshni Clinic

is Fraser Health's culturally-tailored, evidence-based response to this need. All services are provided in Punjabi, Hindi, and English.

Interior Health Opioid Agonist Treatment Clinic Expansion

Access to medical treatment for opioid use disorder has been increased following the expansion of Interior Health's Opioid Agonist Treatment Clinic. The addition of three new physicians and two nurse practitioners this winter has allowed the clinic to offer evening and weekend appointments. The number of people receiving treatment is expected to double.

The Central Okanagan has been significantly impacted by the overdose emergency and responding is a high priority for Interior Health. In 2018, there were a total of 232 illicit drug overdose deaths within Interior Health.

First Nations Health Authority Opioid Agonist Treatment Clinic Fee Reimbursement

First Nations people in B.C. can now choose to receive opioid agonist treatment at both public and private clinics at no cost. When opioid agonist treatment services are provided by a public clinic, the cost of the treatment is covered by the Medical Services Plan. Opioid agonist treatment services that are provided through private clinics, however, typically charge a monthly fee for their programs. These fees are not covered by the Medical Services Plan and must be paid by the client.

As of February 1, 2019, the First Nations Health Authority began reimbursing opioid agonist treatment clinic fees to private clinics serving First Nations clients. Reimbursement of opioid agonist treatment clinic fees up to a maximum of \$70/month per client will be provided until March 31, 2020. Service providers must complete a subsidy application form with First Nations clients and submit the paperwork to the First Nations Health Authority. Clients must have First Nations status to be eligible.

Professor of Cannabis Science

Examining the potential of cannabis in addressing the opioid overdose emergency and other substance use disorders is a top priority for Dr. M-J Milloy, a recognized leader in the field of epidemiology and the first Canopy Growth professor of cannabis science at the University of British Columbia. Initially, this professorship will lead clinical trials to explore the role cannabis can play in helping people with opioid use disorder stay on their treatment plan.

Dr. Milloy is a research scientist at the B.C. Centre on Substance Use. As a substance use epidemiologist, his research has focused on the inter-relationships between illicit drugs and HIV, as well as the public health impact of cannabis regulation and the medical application of cannabis and cannabinoids, especially for people living with HIV or substance-use disorders.

B.C. Centre on Substance Use Continues to Provide Education and Clinical Guidance for Providers

In November 2018, the B.C. Centre on Substance Use released its quarterly report on provider education, noting that all of the educational programs are well-received.

- As of February 1, 2019, 2,555 clinicians have been reached through 69 Provincial Opioid Use Disorder Guideline Seminars across B.C.
- Over 13,000 people have registered in the program and 2,321 have received their diploma (865 from B.C.) since the Online Addiction Medicine Diploma Program was launched in May 2017.

- Since the free CME-accredited Provincial Opioid Addiction Treatment Support Program was launched in July 2017, there have been 2,469 registrants and 214 new authorizations to prescribe opioid agonist treatment have been processed.
- The Interdisciplinary Addiction Fellowship Program is training 27 new clinicians that will help to lead the treatment of substance use disorders in their communities upon completion of the program.

A multitude of health care professionals from various disciplines have benefited from each of the above educational programs, including family physicians, nurses, pharmacists, social workers, and other allied health care professionals.

Support Handbooks for Families

Two new handbooks written in collaboration with people who have first-hand experience with substance use and loss aim to help British Columbian families manage the day-to-day challenges of having a child or loved one with a substance use disorder.

Coping Kit: Dealing with Addiction in Your Family, developed by From Grief to Action, a volunteer-based, not-for-profit association that provides a support network for families and friends affected by drug use, was updated in collaboration with the Canadian Mental Health Association – B.C. Division, B.C. Centre on Substance Use, and Pivot Legal Society.

The kit focuses on questions, issues, and practical problems faced by parents, guardians, and loved ones of people who use drugs. It provides valuable information about substances and how to minimize risks, how to communicate with loved ones, dealing with the criminal justice system, and accessing treatment and recovery services.

A grief handbook, *Gone Too Soon: Navigating grief and loss as a result of substance use*, was developed by the B.C. Centre on Substance Use in collaboration with the B.C. Bereavement Helpline and the Affected Persons Liaison with the B.C. Coroners Service. The handbook helps people identify and manage emotions and responses they may experience with their grief, and provides advice for self-care and practical considerations in the wake of loss. The handbook was created with the guidance of Leslie McBain and Jennifer Woodside, who both lost children to drug-related harms.

4. ADDRESSING THE FULL RANGE OF SUPPORTS AND SOCIAL FACTORS

Funding for Community Overdose Response Efforts

The province's Community Overdose Crisis Innovation program capitalizes on proven and effective strategies that form B.C.'s comprehensive response to the overdose emergency. In October 2018, 27 communities received \$1.7 million in provincial funding to support local action to save lives, address stigma, and connect more people to treatment and recovery.

The Community Overdose Crisis Innovation Fund has a budget of \$6 million per year for fiscal years 2018/19 and 2019/20, and is part of the Province's three-year, \$322-million investment to address the overdose crisis.

5. ADVANCING PREVENTION

Budget 2019 Investments in Child and Youth Mental Health

On February 19, 2019, the provincial Finance Minister introduced the B.C. government's budget and fiscal plan for 2019. The budget includes a \$74 million investment in improving mental health care for British Columbians, with funds going toward new initiatives focused on prevention and early intervention for children, youth and young adults. These initiatives will aim to stabilize children and youth experiencing mental health issues, which could potentially reduce the likelihood of developing a concurrent substance use disorder.

6. IMPROVING PUBLIC SAFETY

Pill Press Regulations

New legislation is now in place to support B.C.'s actions to prevent the illegal production of illicit opioids, bolstering police efforts to disrupt the supply chain and helping to get counterfeit pills off the streets.

The *Pill Press and Related Equipment Control Act* and the associated Pill Press and Related Equipment Control Regulation came into force on January 15, 2019. The Act is comprehensive legislation that will limit the ownership, possession and use of manufacturing equipment for pills and capsules to those with a legitimate business or professional purpose.

The regulation sets out the information that authorized owners, including registered sellers, must provide in events such as the acquisition, sale, loss or theft of controlled equipment and will update a database of equipment possessed by legitimate owners and businesses. This will enable tracing and random inspections. It also will provide a process that authorized owners must follow if their licence to manufacture drugs or natural health products is suspended or cancelled by Health Canada.

CONCLUSION

British Columbians continue to experience an unprecedented rates of overdose-related harms due to an unregulated drug supply that is unpredictable and highly-toxic affecting all parts of the province. With significant new investments in accelerated cross-sector actions, the Ministry of Mental Health and Addictions is working closely with the federal government, local governments, the Provincial Health Officer, other provincial government ministries, health authorities, the First Nations Health Council, First Nations Health Authority and other Indigenous organizations such as Métis Nation B.C., and community partners in taking action to ensure a comprehensive and robust response to B.C.'s overdose emergency.