

**SIMCOE MUSKOKA OPIOID STRATEGY SCORECARD**

CY 2020/21

CY = Calendar Year (Jan to Dec)

Indicator	Reporting Frequency	Trending	Most Recent 6 Periods of Reported Data						Latest Available Data	Provincial Performance	Year Three Narrative	Year Two Narrative	Year One Narrative	
Rate of Opioid Related Deaths (per 100,000 population)	Annual		6.3	8.0	8.3	14.3	13.2	15.0	22.6	CY 2020	16.3	Opioid poisoning deaths in Simcoe Muskoka were more than 50% higher in 2020 when compared with the average from the previous three years. Between 2017 and 2020, the crude rate of opioid-related deaths varied across Simcoe Muskoka. All areas in Simcoe Muskoka, other than South Simcoe, had opioid mortality rates significantly higher than the comparable provincial average. In 2020, Barrie accounted for nearly half of all opioid deaths in Simcoe County, while having 28.5% of the population. Orillia, Midland and Wasaga Beach also had a disproportionate number of opioid deaths relative to their population size. In 2020, there were 133 opioid poisoning deaths among Simcoe Muskoka residents, including 119 that were related to fentanyl. This means that 90% of all opioid poisoning deaths in Simcoe Muskoka in 2020 involved fentanyl. Opioid poisoning deaths in Simcoe Muskoka are highest among adult males between 25 and 44 years of age.	These numbers are from the Interactive Opioid Tool produced by Public Health Ontario. The data indicates that the number of deaths was lower in 2018 (76) vs. 2019 (87); however, the opioid related mortality rates have not change significantly over the past three years. Of note, the rate of deaths for Simcoe Muskoka continues to be higher than the rate of death for the province. Furthermore, Simcoe Muskoka accounts for 5.7% of opioid deaths in the province while having only 4% of the population.	These numbers are from the Interactive Opioid Tool produced by Public Health Ontario. At this time, data for calendar year 2017 is complete but there is only monthly data for calendar year 2018 and data reporting ends September 2018. Preliminary data for 2018 (January through September) indicates that the number of deaths was lower in 2018 (56 probable or confirmed) when compared with the 66 deaths observed from January through September in 2017.
# of Opioid Related Deaths (crude number)	Annual		34	44	46	81	76	87	134	CY 2020	2422			
Opioid Related Emergency Department (ED) Visit Rate (per 100,000 population)	Annual		31.7	37.5	48.6	77.2	104.5	104.3	110.5	CY 2020	84.5	Opioid related ED visits continued to climb in 2020 and the rate of visits in Simcoe Muskoka continued to be higher than the provincial rate. While the increase in rate was not as sharp as in previous years, it must be noted that in 2020 overall ED visits as a total declined substantially as a result of the pandemic. This was not true for opioid related visits that in fact increased.	These numbers are from the Interactive Opioid Tool produced by Public Health Ontario. The data indicates that the rate of ED visits for overdoses was significantly higher than the provincial rate. Furthermore, between 2017 and 2019, the rate of ED visits had increased significantly in Simcoe Muskoka (77.2/100,000 to 104.3/100,000).	These numbers are from the Interactive Opioid Tool produced by Public Health Ontario. At this time, data for calendar year 2017 is complete but there is only monthly data for calendar year 2018 and data reporting ends at September 2018. Prior to 2017, there were different reporting practices for opioid overdoses so numbers prior to 2017 should be used with caution. Preliminary data for 2018 (full year) indicates that the number of emergency department visits was higher (by about one-third) in 2018 when compared with 2017.
# of Primary Care Prescribers for Suboxone (includes prescriber of suboxone only and prescribers of both suboxone and methadone)	Annual		144	164	249	275	332	393	425	CY 2020	4290	Overall prescribers, including primary care, emergency department and addiction medicine physicians as well as nurse practitioners, increased from 393 to 425 in 2020.	Overall prescribers of suboxone and methadone increased from 332 in 2018 to 393 in 2019 with an additional 145 methadone only prescribers. This is also reflected in an increase in OAT users (from 3273 in 2018 to 3461 in 2019).	While this number has been trending upward, in Simcoe Muskoka District Health Unit, 70.7% of Opioid Agonist prescribers, prescribe suboxone only or both suboxone and methadone as compared to 85.4% of OAT prescribers provincially.
# of New Participants in the Ontario Naloxone Program (pharmacies and community partners)	Annual					23*	11	8		CY 2020/21	NA	This includes community partner sites as data is not available for new pharmacies participating. On average 85 pharmacies were actively participating in the Ontario Naloxone Program for Pharmacies on a monthly basis.	Includes community partner sites as no data is available for new pharmacies participating. There were a total of 200 pharmacies participating in the program in Simcoe Muskoka in 2019.	Number is for community partner agencies only. Pharmacy numbers are not yet available.
% of Students (Gr 7-12) That Reported Using Pain Medication For Non-medical or Recreational Use in Past Year	Annual					8.3%	NA	10.4%	N/A	CY2019	11.0%	This data comes from a school based survey which may have been disrupted by virtual learning models and at home learning in 2020.	The 2019 data for Simcoe Muskoka students indicates a non-significant increase from 2015.	This source for this information is the Ontario Student Drug Use and Health Survey. Due to sampling size, this number reflects both North Simcoe Muskoka and Central East. The OSDUHS report indicates that non-medical use of opioid medications by students in Ontario has seen an overall decline in the past decade but has remained stable in recent years. OSDUHS also reports that while there are some variations between regions in Ontario, these differences are not statistically significant.
Repeat Unscheduled Emergency Department Visits within 30 Days for Substance Abuse Conditions Other Than Alcohol*	Quarterly		18.6%	19.9%	22.1%	16.9%	28.9%	21.1%	N/A	Q2 FY 2019/20	29.8%	This data is no longer available from the Ministry of Health.	Repeat ED visits for substance use other than alcohol remains better than the province; however, it had been slowly trending upward as have overall ED visits for substance abuse other than alcohol. This data is reported quarterly by the Ministry of Health and includes repeat visits to any emergency room within 30 days. Annual numbers are not provided.	This is determined by the LHIN for the patient, not the ED location. This indicator measures the percentage of people when having visited the emergency room for a substance abuse condition (other than alcohol), visit an emergency room again for any substance abuse related condition within 30 days. Relative to the province, North Simcoe Muskoka performs well on this indicator. It is postulated that this indicator may be positively effected by the availability of community treatment resources relative to the province.
Median Wait Time in Days for Next Available Treatment Slot for Addictions Treatment in Community (days from intake to treatment)	Quarterly		0	N/A	N/A	9	12	12	14	Q4 FY 2021/22	14	Due to the pandemic, quarterly reporting of Mental Health Community waitlists and times was suspended for the first two quarters of 2020/21. As with all other metrics, the pandemic is noted to have had adverse effects on all other aspects of the healthcare system and the effect of lockdown orders on accessing treatment would make interpreting this data difficult.	This number includes only North Simcoe and Muskoka (excluding South Simcoe) and is provided by Connex Ontario via Health Analytics and Insights Branch. There continues to be variability between the subregions of the area with Barrie having longer waits than other areas. Wait times for treatment spaces have been increasing in Barrie and Area while they have been holding steady or decreasing in the rest of North Simcoe Muskoka. Furthermore, Barrie and area now has a longer median wait time for a treatment space than the province, while the rest of North Simcoe Muskoka has a lower wait time. Wait times include the number of days from intake to initiation of treatment for any addiction related issue at LHIN funded community based programs. These wait times and waitlist management apply to FY 2019/20. It is noted that COVID-19 has had significant effects upon health service delivery that will be addressed in the next scorecard.	This number includes both North Simcoe and Muskoka and is provided by Connex Ontario via Health Analytics and Insights Branch. It is noted that there is variability between the subregions of the area with Barrie having longer waits than other areas. The range of wait times for North Simcoe Muskoka is 0 - 36 days. The wait time range provincially is 0 - 729 days. While there has been a slight increase in wait times, North Simcoe Muskoka performs well in this area relative to the province. It is postulated that availability of community based treatment resources, may have a positive effect on Emergency room visits.

Prevention Pillar Dashboard

Strategy Goal	Objective/Change Idea	Indicator/Measure/ Deliverable	Reporting Frequency	Year 1 2018	Year 2 2019	Year 3 2020/21	Year Three Narrative	Year Two Narrative	Year One Narrative
#1. Increase knowledge and skills in addressing the harms associated with opioid misuse (including illicit and prescription use) Note: significant focus on collaborating with schools and parents	Increase knowledge among the general public of the harms of opioid use	# of community education events	Annual	18 presentations and numerous media coverage	23 formal presentations and multiple media interviews/coverage	2020-4 presentations 2021-2 presentations	Presentations in 2020 and 2021 were impacted by the declaration of the global pandemic. In March of 2021, two major educational events were provided, both delivered through a web-based platform with over 200 registrants for each; recordings remain available on the City of Barrie website ( <a href="http://www.barrie.ca/Living/Inclusive-Community/Pages/Opioid-Strategy">www.barrie.ca/Living/Inclusive-Community/Pages/Opioid-Strategy</a> ).	Prevention messaging was integrated in broader messaging around the opioid crisis as well as root causes as they pertained to early childhood experiences. Provided responses to community requests and larger municipal forums e.g. Orillia Opioid and Other Drug Forums. Worked with community, including municipal partners, in providing information to key stakeholders and community through COVID-19 specific opioid related messages and planned future educational forums.	Community partnerships developed include the County of Simcoe and District of Muskoka. Presentations addressed the full strategy including prevention. Other partnerships included: Simcoe County District School Board (SCDSB), Simcoe Muskoka Catholic District School Board (SMCDSB), Georgian College, Barrie Community Health Centre, Orillia Youth Centre, Youth Justice Services, Families Affected by Opioids and Action First Aid. Information focused on awareness raising regarding the opioid issue in our region including how we got here and root causes with a lens to further engage in evidenced-based programs that provide early identification of at risk youth through facilitator training in Prevention Program in 2019. Also provided information to stakeholders around the Alberta Family Wellness Initiative (AFWI) which addresses the impact of early childhood experiences on brain development i.e. how experiences early in life and at other sensitive periods of development change our brains in ways that make us more or less vulnerable to health problems across the lifespan including addictions. Planning is underway for 2019 for a community workshop scheduled for May 8, 2019. Much of the education and awareness raising around the opioid issue was also integrated into various venues that partners at the table were involved in through their respective work and community coalitions. Reach also occurred outside of our region through presentation to Municipal Law Enforcement Officers throughout Ontario via a provincial conference held in our region.
	Increase knowledge among students/youth of the harms of opioid use	Development of partnerships with schools	Annual	Ongoing	Ongoing	Ongoing	Partnerships have been developed for ongoing participation in educational events with, Georgian College, SCDSB and SMCDSB. Exploration into the implementation of the Prevention Program by school boards was interrupted by the COVID 19 pandemic; SMCDSB continues to explore opportunities to implement this program in the coming school years.	New initiative for school boards this fall is the Prevention Program which is a learning opportunity for general coping skills and resiliency. Simcoe Muskoka Catholic District School Board (SMCDSB) Psychologists trained as facilitators for the Prevention Program plan to roll out (pilot) workshops for Grade 9 students throughout the school year. The program provides information about harnessing individual personality traits involving styles of thinking to build healthy coping skills and well-being. Simcoe County District School Board (SCDSB) continue to work on the prevention pillar in disseminating information related to opioid use within their schools. SCDSB are currently implementing the Prevention Program in six secondary schools.	Fact sheets on Opioids and youth were created in partnership/feedback from the school boards (SCDSB, SMCDSB, Tillam Lakehead District School Board (TLDSDS)). Resources from Mental Health Assist for students, teachers and parents also promoted. Involved with SCDSB in their addictions committee as well as link with Addictions Awareness Week activities to address the risk of addictions in addition to Harm Reduction and Anti-Stigma. Presented to Grade 8 teachers in Spring of 2018 at the SMCDSB on the opioid issue locally including overall strategy as well as discussion of how we got here, root causes, our SMOS 5 pillar approach to addressing the issue as well as school/student resources.
#2. Engage target populations including at-risk groups in the development of educational resources and health promotion initiatives related to opioid misuse (at-risk youth, lived experience, seniors)	Engage at-risk youth in the development of educational resources	Development of a Youth Advisory Council	Annual	Complete	Ongoing	NA	The declaration of the pandemic and transition to virtual learning in the fall of 2020 impacted completion of this objective.	Information provided to Georgian College students related to opioids in class and through peer-to-peer interactions. Youth centres continue to work with youth and schools in providing information. While this work continues, a formal Youth Advisory Council has not yet been created. Current barriers to its formation are a lack of funding or other incentives for youth to participate on an ongoing basis.	Winter 2018, had a class of Georgian College students complete an assignment on promoting awareness around substance use and addictions. The group created posters which were shared and strategies discussed. The group presented to their class and a panel of people from the Prevention Pillar for further discussion. In fall of 2018, Georgian College student began a Student Advisory Committee to plan out implementation of a photo voice project whereby students take pictures of the risks associated with substance use including opioids. A wrap up event is planned for Spring of 2019. Student survey of youth with lived experience also completed. To determine key reasons youth choose to use substances including opioids, what they would like to tell their younger self who began using and thoughts around what they would suggest would support their colleagues not to use. Small sampling of youth surveys were done by Georgian College student and by a Youth Probation Officer to obtain a cross section of information.
	Explore and choose initiatives to raise awareness of opioid issues	Explore existing tools to disseminate education to patients	Annual	Complete	Ongoing	NA	The declaration of the pandemic and transition to virtual learning in the fall of 2020 impacted completion of this objective.	Spring 2019, Georgian College Social Service worker students presented their opioid education project to a panel consisting of pillar members and two moms from local opioid advocacy group. One project was selected based on merits of the project and student's interest. Instructor at Georgian College supportive in pursuing one student's opioid campaign presentation which involved a writing journal workshop incorporating the effects of problematic opioid use. Incorporating student placements within health and social service organization needs further exploration. This issue to be explored further based on community organizational capacity and/or youth funding.	Photo voice to be implemented in 2019 and looking to expand youth advisory committees to other Georgian College locations as feasible. Lakehead University also brought on board to explore feasibility of this type of initiative in 2019. New Partnership with the Mental Health Lead at Georgian College being explored with lens to address root causes of substance use i.e. promotion of positive mental health and well-being within the school community. Looking at feasibility of implementation of Mindfulness without Borders and other programs.
#3. Support the procurement, development and dissemination of patient resources that can be used by health care practitioners in the education of appropriate use of opioids, including alternatives to opioid therapy. Collaborate with Treatment/Clinical Pillar.	Increase education by health providers to clients on opioids	Explore existing tools to disseminate education to patients	Annual	Complete	Moved to treatment pillar	NA	Moved to treatment pillar.	The work related to this indicator is being addressed in the treatment pillar.	Had several discussions with lead for the Treatment pillar regarding current resources available and what health care providers may be interested in using. A number of resources available explored. The Ministry of Health and Long-term Care (MOHLTC) is providing patient information to pharmacies but does not provide it to health care providers or other community agencies. In October 2018 Health Canada identified the need for patients to receive clear information about the safe use of opioids and the risks associated with their use. As such, requirements had been added, under the Food and Drug Regulations, for a warning sticker and patient information handout to be provided with all prescription opioids that appear in Part A of the "List of Opioids", at the time of dispensing. Guidance to help pharmacists and practitioners comply with the opioid sticker and handout regulatory requirement are posted on their website.
#4. Collaborate with other pillars on the development of a SMOS website to facilitate sharing of information and resources with community partners.		Deliverable: Website	Annual	Complete	Complete	Complete	PreventOO.ca has been established and is being updated as necessary.	PreventOO.ca has been established and is being updated as necessary.	Worked with the County of Simcoe and pillar leads and communications to complete the development of the PreventOO.ca website. Each pillar lead was responsible for ensuring that their section was completed by mid March. Site was launched in April 2018.
#5. Collaborate on implementation of evidence-based initiatives that address root causes of opioid misuse as they relate to mental health and addictions and early childhood development and parenting.	Focus on Healthy Communities and Social Determinants of Health	Explore initiatives and present to Steering Committee for implementation in year two of the strategy	Annual	Complete	Ongoing	Complete	Promotion of Alberta Family Wellness Initiative continued with a focus on adverse childhood experiences and the role they can play as one of the root causes of substance use. A virtual event was presented in March 2021 by Dr. Nicole Sherman to provide an overview of this relationship. There were 229 registrants for the event. As of October 1, 2021, 683 people have registered for the Brain Story Certification from Simcoe Muskoka. Future planning of new initiatives will ensure alignment between the goals of the Prevention Pillar and the Community Safety and Wellbeing Plan.	Partnership work was established regarding Community Safety and Wellbeing (CSWB) plan legislation and development. Initial orientation and planning with various key stakeholders including Simcoe County and drug strategy coordinators from across Simcoe Muskoka occurred. SMOS recognizes CSWB plans have potential relevance to several SMOS pillars and will continue to participate in local decision making and planning with respect to preventing, reducing harms, treatment and promoting public safety where substance use is a contributing factor. Updates to be provided by County representative to the Prevention Pillar with respect to prevention pieces, and to whole Simcoe County.	Promotion of Alberta Family Wellness Initiative (AFWI) was presented throughout numerous community presentations as well as brought forward to the SMOS Steering Committee for endorsement in 2018. The group discussed feasibility of all SMOS members to be trained but later it was determined that each organization would need to determine what was an appropriate commitment within their organization. SMOS Steering Committee agreed to review modules 4 and 18 and Resilience. Several members of SMOS attending a AFWI Brain Builders workshop in March. A regional work shop hosted on May 8, 2019 at the Simcoe County District School Board (SCDSB) office. Further promotion of program including certification to be discussed as well as further collaborations to address key concepts presented.
#6. Collaborate with other pillar groups around anti-stigma initiatives/campaigns.	Develop and incorporate anti-stigma messaging in all SMOS presentations/materials.	Deliverable: Anti-stigma messaging	Annual	Complete	Ongoing	Ongoing	Over the course of 2020-21, 13 presentations were provided to community members/agencies incorporating content related to the impact of stigma on people who use substances.	Phase 2 of the anti-stigma campaign was developed and launched. The purpose of this phase is to increase awareness among the general public of the experience of stigma from the perspectives of health and social service providers and people with lived experience. These videos were promoted at the Orillia Opioid forum as well as at an anti-stigma workshop at Weyburn during Addictions Awareness Week. The campaign is being incorporated through social and traditional media as well as through community presentations. The new tag line being promoted is #Compassion Starts with Us to align with other provincial national advocacy groups.	The Anti-Stigma working group in collaboration with Prevention and Harm Reduction Pillars of SMOS are now preparing for Phase 2 implementation of the anti-stigma work. Phase 1 saw the implementation of a social marketing campaign adapted from British Columbia's Ministry of Mental Health and Addictions as well as preparations to provide education to health and social support services locally. The assets created during Phase 1 will continue to be used in the community into Phase 2.  Phase 2 will focus on featured video vignettes of professionals in the community who are connected to the opioid crisis. We are looking to the SMOS committee and pillar members as professionals that could contribute to these videos.  Communication goal: Reduce stigmatizing beliefs and promote attitudes of inclusion regarding people who use drugs (prescription and illicit opioids).  Target audience: Health care professionals and enforcement Objectives: - Improve public understanding of the multiple factors affecting substance use - Create awareness that stigmatized individuals have multiple identities - Create an understanding that this is an important societal problem - Humanize people who use substances - Recognize that stigma is a deterrent to seeking treatment.
	Collaborate on implementation of evidenced based initiatives that address root causes of opioid use as relates to mental health and addictions through early childhood development.	Provide educational opportunities to health and social service providers	Annual	Ongoing	Ongoing	Complete	In the Spring of 2021, Dr. Nicole Sherman presented a webinar providing an overview of the root causes of substance use and the role of adverse childhood experiences related to this. The focus audience of this workshop was health and social service providers. There were 229 registrants for this event. As of October 1, 2021, 683 people have registered for the Brain Story Certification from Simcoe Muskoka. The Mental Health and Well-being Team at Georgian College supported a number of employees to complete the Brain Story in a virtual book club format. During this same time period, Georgian College developed a Mental Health Literacy module that is mandatory for all students in their first semester. This module includes information about the impact of positive, tolerable and toxic stress on brain development and links students to the Brain Story Certification. Over the past 3 years, 1,125 individuals attended events/workshops with a focus on AFWI.	Provided a regional workshop on early life experiences and link to addictions at Georgian College. Event had over 200 people registered from across the region. Dr. Nicole Sherman, Scientific Director, Alberta Family Wellness Initiative (AFWI) with a PhD in Neuroscience was the keynote speaker at the event. Overwhelmingly positive response to the day. While many have registered for the online Brain Story Certification (i.e. 300) others have identified barriers to completion from a time perspective. A number of community discussions occurred to explore how to incorporate key elements from AFWI into organizational training/professional development e.g. trauma, toxic stress, ACES, building resilience. This planning continues to determine collaboratively how do we look at breaking the cycle of addictions through addressing protective factors and building resilience at the individual, family, school, community and societal level.	

Treatment Pillar Dashboard

Strategy Goal		Objective/Change Idea	Indicator/Measure/ Deliverable	Reporting Frequency	Year 1 2018	Year 2 2019	Year 3 2020/21	Year Three Narrative	Year Two Narrative	Year One Narrative
#1.	Increase awareness of existing resources for treatment of opioid use disorder.	Increase clinician awareness of resources for treatment.	Deliverable: Develop and conduct a survey of needs of primary care providers	Annual	Complete	Complete	Complete	This has been completed as a one time survey.	This has been completed as a one time survey.	
			# of surveys completed		47			This has been completed as a one time survey.	See directly above	
			Deliverable: Information package	Annual	Complete	Complete	Complete	This is available on PreventOD.ca	This is available on PreventOD.ca	This is available on PreventOD.ca
			Deliverable: Create an NSM resource guide for clinicians	Annual	Complete	Complete	Complete	This is available on PreventOD.ca	This is available on PreventOD.ca	This is available on PreventOD.ca
			Deliverable: Create a central web link for resources	Annual	Complete	Complete	Complete	This is available on PreventOD.ca	This is available on PreventOD.ca	This is available on PreventOD.ca
			Explore feasibility of creating an educational webinar for clinicians	Annual	Complete	Complete	Complete	An environmental scan had indicated that webinars are currently available to clinicians. The utility and need will be monitored but this will likely be removed.	An environmental scan had indicated that webinars are currently available to clinicians. The utility and need will be monitored but this will likely be removed.	Creation of webinar is deferred until next 2019.
#2.	Provide educational opportunities for primary care and pharmacists.		# of educational events delivered	Annual	4	0	See narrative	Feedback was that primary care and ED staff would prefer online training instead of in-person educational events.	Feedback was that primary care and ED staff would prefer online training instead of in-person educational events.	Thus far there have been four events in total. Two were held in Orillia and two in Collingwood. Events targeted primary care providers as well as surgeons and anesthesiologists.
			# of participants in educational events	Annual	132	Complete	See narrative	Feedback was that primary care and ED staff would prefer on-line training instead of educational events	See above.	Orillia - 75 total (between two events), Collingwood 57 total (between two events).
#3.	Offer to support First Nations, Metis and Inuit (FNMI) communities in the implementation of the Indigenous Led Opioid Strategy.				Ongoing	Ongoing	Ongoing	Strategy has been developed by FNMI community.	Strategy has been developed by FNMI community.	Strategy has been developed by FNMI community.
#4.	Facilitate local mentorships between addiction and primary care.		Deliverable: Develop and conduct survey of primary care providers awareness of MMAP	Annual	Complete	Complete	Complete	Consultations and exploration into a package was used to generate the decision to promote the national platform rather than delivering a local platform.	Pamphlet was completed and distributed, promoting OCFP program .	Was included in the primary care needs survey.
			Deliverable: Develop information package on MMAP network	Annual	In exploration phase	Complete	Complete	Consultations and exploration into a package was used to generate the decision to promote the national platform rather than delivering a local platform.	Consultations and exploration into a package was used to generate the decision to promote the national platform rather than delivering a local platform.	This will be carried forward to 2019.
#5.	Improve timely access to addictions treatment throughout the NSM LHIN.	Increase access to treatment.	# of new RAAM clinics	Annual	3	1 (total of 4 clinics)	See narrative	There are a total of six RAAM Clinics operating in Simcoe Muskoka - Barrie, Midland, Orillia, Wasaga Beach, Aliston and Muskoka.	Clinic opened in Wasaga Beach.	Three new clinics have been opened. They are located in Barrie, Orillia, and Midland.
			# of clients served	Annual	338		See narrative	The global pandemic had a profound impact on the manner in which services were provided and the access of individuals to these services.		
			Increase # of community addictions counsellors	Annual	5.6 FTE	NA	See narrative	CMHA SC in partnership with Mamaway Wiidokdaadwin and CMHA MPS have developed a new Mobile Withdrawal Management Program to serve North Simcoe Muskoka region. This is an increase of five additional addiction counsellors and three peer positions. Additionally CMHA SC has added one new position of Addiction Outreach Counsellor. In addition to this a new Addiction Day/Evening program is part of this partnership and staffed by the Withdrawal Management Program workers.		5.6 FTE of additional addiction counsellors were hired by CMHA and 1FTE by Enaahitg
#6.	Improve access to interdisciplinary chronic pain treatment.	Increase access to pain management.	Investigate effects of expansion of APC at Couchiching Family Health Team	Annual	Long-term	Ongoing	Ongoing	Rapid Access Clinics (RAC) clinics for chronic pain are up and running. Advanced Practice Providers hired for every sub-region and rheumatologist and practice lead is hired.  The program's most recent survey results show 83 per cent of patients strongly agreed that the time between making the appointment and being seen was acceptable. A total of 93 per cent had confidence and trust in the practitioner examining them, and 97 per cent said they felt they were treated with dignity and respect during their appointment.	RAC clinics for chronic pain up and running. Advanced Practice Providers hired for every sub-region and rheumatologist and practice lead is hired.  The program's most recent survey results show 83 per cent of patients strongly agreed that the time between making the appointment and being seen was acceptable. A total of 93 per cent had confidence and trust in the practitioner examining them, and 97 per cent said they felt they were treated with dignity and respect during their appointment.	The Couchiching Family Health Team (CFHT) has been awarded the Low Back Pain Rapid Access Clinic. This program will be offered for all patients suffering low back pain to improve access to assessment and for the 10 per cent who require it, access to a spine surgeon. CFHT will ensure that an advanced practice clinician is available in each of the five sub-regions for low back pain assessments. There will also be a practice lead overseeing the group and liaising with the affiliated neurosurgeon for the NSM LHIN.
#7	Improve Management of Neonatal Abstinence Syndrome.		Establish team based obstetrical and neonatal care pathways for expectant mothers who are using opioids or opioid agonist therapy	Annual	Long-term	Ongoing	Complete	OSMH and RVH took the lead to strengthen policies, provide education and create evidence based clinical pathways for expectant mothers.	OSMH and RVH took lead to strengthen policies, provide education and create evidence based clinical pathways for expectant mothers.	

Harm Reduction Pillar Dashboard

Strategy Goal		Objective/Change Idea	Indicator/Measure/ Deliverable	Reporting Frequency	Year 1 2018	Year 2 2019	Year 3 2020/21	Year Three Narrative	Year Two Narrative	Year One Narrative
#1	Increase awareness of harm reduction strategies for people who use illicit and prescription opioids.	Distribute resources to partner agencies.	# of Naloxone kits distributed.	Annual	1620	2595	2411	The number of Naloxone Kits distributed was impacted in the months of March to June 2020 because of the declaration of the global pandemic and reduced access to partner agencies. Outreach workers accounted for approximately 70 per cent of the total distribution (1684 kits). In total, SMDHU offices distributed 399 kits, community partners 1987 kits and hospital emergency departments 25 kits in 2020.	In 2019, 2595 naloxone kits were distributed by all community partner and SMDHU sites. Based on quarterly reports.	In 2018, 363 naloxone kits were distributed by SMDHU PHNs to the general public. Community partner distribution totalled 1257 kits from April to December 2018, based on quarterly reports.
			# of posters distributed.	Annual	138	169		No posters were distributed in 2020 because of restrictions in place to mitigate the COVID-19 pandemic.	169 posters were distributed in 2019.	138 posters were distributed in 2018.
		Use SMOS website to share information.	# of hits on SMDHU Harm Reduction Website.	Annual	326	-	7358	There were a total of 7,358 visits to the harm reduction pages of www.smdhu.org, with 4,433 of these visits associated with the SCS home page.	There were 671* Harm Reduction webpage views on PreventOo.ca	There were 326 page views for the Harm Reduction webpages at SMDHU in 2018. (See analysis attached. PreventOo.ca webpages from April to December 2018, had 8,676 page views).
			# of hits on PreventOo.ca website.	Annual	8676	671*		see directly above		
#2	Increase naloxone distribution by area pharmacies, community partner agencies serving at-risk populations and local emergency rooms.	Conduct outreach to pharmacies to expand participation in the Ontario Naloxone Program.	% of pharmacies participating in the Ontario Naloxone Program.	Annual	NA	NA	NA	Access to pharmacies was impacted by the declaration of the global pandemic and the creation of capacity restrictions and a strict process for access; on average 85 pharmacies per month participated in the ONPP during 2020 with the number increasing as the year wore on.	There are 200 pharmacies participating in the SM region in 2019. <a href="https://odgm.ca/research/publications/naloxonedistributioninontario/">https://odgm.ca/research/publications/naloxonedistributioninontario/</a>	Still waiting for this data from the Ministry's ONP for pharmacies.
			# of naloxone kits distributed by pharmacies.	Annual	6001	8,422	5,553	Access to pharmacies was impacted by the declaration of the global pandemic with capacity restrictions and strict process for access; on average 85 pharmacies per month participated in the ONPP during 2020 with the number increasing as the year wore on; a total of 5,553 naloxone kits were distributed by pharmacies in 2020.	According to data from the ODPN Ontario Prescription Opioid Tool the total number of naloxone kits dispensed by pharmacies in SMDHU region was 8,422 in 2019, which was a 40 per cent over what was distributed in 2018.	According to data from the ODPN Ontario Prescription Opioid Tool the total number of naloxone kits dispensed by pharmacies in SMDHU region was 6,003 in 2018.
		Roll out next phase of Ontario Naloxone Program to community partner agencies (target = 25).	# of community partner agencies added.	Annual	12	9	8	Enrollment of new community partners to meet the need of the substance using population continued through 2020 and 2021 despite the declaration of the global pandemic with eight new partners being enrolled.	In 2019, nine new community partners signed contracts for naloxone distribution. One new fire partnership onboarded in 2019.	In 2018, 12 new community partners signed contracts for naloxone distribution. Eight fire departments and three police services signed contracts to access naloxone.
		# of police departments added.	Annual	3	0	0	OPP Central Division, Barrie Police Service and South Simcoe Police enrolled in the Naloxone Program in previous years.			
		# of fire departments added.	Annual	8	3	1	In 2020, New Tecumseth Fire was added to the fire departments carrying Naloxone in response vehicles.			
Expand opportunities for hospitals to send patients home with naloxone following ED visit.	# of hospitals onboarding to ONP.	Annual	Ongoing	2	3	Across Simcoe Muskoka, there are now five hospitals actively distributing naloxone through the emergency department.	SMDHU continued outreach and engagement of hospital emergency departments in 2019 but barriers to enrollment were encountered. Ongoing engagement with local hospital emergency departments at regional and local level continues in 2020 with progress being made.	Contracts were sent to a number of local hospital ED departments in 2018, one was signed by the Muskoka Algonquin Health Centre by the end of 2018.		
#3	Increase access and availability of Needle Exchange program.	Improve equitable access to sites and supplies.	# of needles dispensed.	Annual	734,158	511,908	458,105			
			# of needles disposed.	Annual	145,900	246,567	158,821			
		# of NEP Kits provided.	Annual	51,434	35,833	46,289	Needle kits - 20,009; Stem kits -18441; Bowl kits - 7839. In 2020 a total of 458,105 needles were distributed; requests for bowl and needle kits continue to increase; ultrafine needle kits continue to be the most frequently requested type of injection kit.	In 2019, a total of 511,908 needles were distributed. Numbers disposed of in SMDHU funded disposal units- 246,567. Numbers are much lower than expected due to lack of consistent data collection from one of the main distributing Needle Exchange Program (NEP) sites. 1ml of NEP kits distributed- needle kits - SACS, Ultra Fine Kits -16,301, 3ml needle kits- 2071, Steroid kits -381, Crack Kit- 20,424 Bowl Kits -5300.	In 2018, a total of 734,518 needles were distributed. Numbers disposed of in SMDHU funded disposal units - 145,900. Numbers are much lower than expected due to lack of consistent data collection from one of the main distributing NEP sites. 1ml NEP kits distributed- needle kits -8955; Ultra Fine Kits -16,301, 3ml needle kits- 2071, Steroid kits -381, Crack Kit- 20,424 Bowl Kits -5302. Number of supplies distributed- see attached.	
		# of new sites providing NEP.	Annual	3	2	5*	*No new sites were enrolled in 2020; however, in the first quarter of 2021, five new partner agencies were added increasing access throughout Simcoe Muskoka .	There was a total of two new NEP sites onboarded in 2019.	There was a total of three new NEP sites brought on board for 2018. One in Orillia and two in Barrie.	
Explore Partnerships to endorse and provide drug testing strips for drug use.			NA	NA	NA					
Support member agencies in pursuing drug testing at NEP sites.			NA	NA	NA					
								Not explored. Federal exemption required, only inside SCSs and OPSs.		
#4	Increase access to overdose prevention sites (OPS) and supervised consumption sites (SCS).	Apply for OPS Break out steps - check SMDHU website.	Complete application for one Overdose Prevention Site.	Annual	Ongoing	Ongoing	Complete	Applications were submitted to Health Canada and the Ministry of Health for a Consumption Treatment Services Site (CTS) at 11 Innisfil St. Barrie on October 7, 2021.	HR Pillar involvement in application for a CTS/SCS in Barrie at 80 Mucater St, co-located with CMHA and David Busby Centre. For full history of the chronological application process in 2019 see <a href="http://www.smdhu.org/cts">www.smdhu.org/cts</a> . As a result of the Barrie City Council motion, a SCS Site Selection Advisory was formed in September 2019 with meetings two weeks into 2020.	Application for an OPS was submitted in April 2018. With change in government in June, application was no longer valid. New guidelines created by the Ministry in October 2018 for a new version to replace the OPS/SCS in Ontario known as Consumption and Treatment Services. HR Pillar to apply for CTS/SCS in 2019.
#5	Increase communication among SMOS partners and public.	SMDHU website for Consumption Treatment Services	Creation of website part of which supplies local stats.	Annual	Ongoing	Ongoing	Ongoing	Webpages continue to be reviewed and updated as trends related to substance use change; content continues to be updated to maintain currency in the efforts to bring a CTS to the City of Barrie; social media platforms were used as needed to push out messages about the toxic nature of supply including a campaign addressing the addition of benzodiazepines in the supply in 2021.	Webpages related to SMOS were created on the SMDHU website- <a href="https://www.simcoemuskokahealth.org/Topics/Drugs/opioids/Opioid-Strategy">https://www.simcoemuskokahealth.org/Topics/Drugs/opioids/Opioid-Strategy</a> . As well, webpages were created specifically for the SCS Site Selection Advisory working group. <a href="https://www.simcoemuskokahealth.org/Topics/Drugs/opioids/Supervised-consumption-sites">https://www.simcoemuskokahealth.org/Topics/Drugs/opioids/Supervised-consumption-sites</a> . Meeting minutes, key messages and progress of the Barrie SCS site application are updated on these webpages.	SMDHU webpages to be created in early 2019 to provide information on Supervised Consumption Sites as well as key messaging and FAQs for the public. The webpages will also share progress of MOHLTC and Health Canada application status updates.
#6	Decrease stigma.		Deliverable: Develop key messages	Annual	Ongoing	Ongoing	Ongoing	SMDHU webpages were used to communicate anti-stigma messages including the "People Who Use Drugs" pages, which received 470 visits during 2020. The YouTube videos associated with this campaign continue to be viewed. For the "Compassion Starts with Us" campaign (videos hosted on YouTube) the playlist received 299 views.	smdhu.org was updated with a section specific to stigma, "People Who Use Drugs are Real People", including videos of local people sharing their stories; general information; and information specific to language. This campaign was also promoted through social media, digital ads and print/display resources. In the Fall of 2019, "Compassion Starts with Us" campaign was launched. A series of videos were created (five in total) of community service providers talking about the impact of stigma. The videos are available at: <a href="https://youtube.com/playlist?list=PLZFV9L5L2aql08X9EKW_Q7TZWmlYk">https://youtube.com/playlist?list=PLZFV9L5L2aql08X9EKW_Q7TZWmlYk</a> . The campaign was promoted during National Addictions Awareness Week.	FAQs, press releases and promos on social media to go live in January to March 2019.
#7	Decrease barriers in 911 response.	Distribute information on Good Samaritan Drug Overdose Act to community partners that distribute naloxone kits.	Refer to Enforcement Pillar Dashboard		Ongoing	Ongoing	NA	Moved to Enforcement Pillar.	Moved to Enforcement Pillar for year 2.	Posters and education provided on the Good Samaritan Act with all new community partners during naloxone training in 2018.
		Add fact sheet/card on Good Samaritan Drug Overdose Act to Needle Exchange Program kits.	Provide posters describing the Good Samaritan Act to partners distributing Naloxone kits. Tear-offs distributed to partners.	Annual	Ongoing	Ongoing	NA	Moved to Enforcement Pillar.	Not implemented, instead Good Samaritan posters and tear-offs were distributed to community partners distributing naloxone.	Not implemented, instead Good Samaritan posters were distributed to community partners distributing naloxone.

Strategy Goal	Objective/Change Idea	Indicator/Measure/ Deliverable	Reporting Frequency	Outcome	Year Three Narrative 2020/21	Year Two Narrative 2019	Year One Narrative 2018
#1. Increase communication across law enforcement agencies in order to identify and target those individuals who manufacture and distribute opioids.	Develop consistent approach to investigating overdoses.		Annual	Complete	<p>The SMOS Enforcement Pillar in collaboration with the Ontario Chiefs of Police Substance Advisory Committee are working together to share the following policies/best practices with other police services across Ontario to further ensure consistency in law enforcement's approach to investigating overdoses:</p> <p><b>Overdose Investigations Fatal/Non-Fatal</b></p> <ul style="list-style-type: none"> <li>Thorough investigations are required in overdose occurrences to ensure critical intelligence is gathered. Intelligence provides the opportunity to identify harmful/mixed drugs, traffickers, and those at acute elevated risk who can be referred to situational tables and community resources for support. It also provides the opportunity to make linkages between occurrences.</li> <li>Law Enforcement has laid the framework for thorough drug overdose investigations, with one element focused on holding drug traffickers responsible by way of criminal charges.</li> </ul> <p><b>Good Samaritan Drug Overdose Act Training/Awareness</b></p> <ul style="list-style-type: none"> <li>The purpose of the act is to encourage people to call 911 and stay with the victim until emergency medical assistance arrives, without fear of arrest.</li> </ul>	<p>Some law enforcement agencies within Simcoe and Muskoka have enacted the following policy changes and training initiatives surrounding Opioids:</p> <p><b>Overdose Investigations Fatal/Non-Fatal.</b></p> <ul style="list-style-type: none"> <li>Thorough investigations are required in overdose occurrences to ensure critical intelligence is gathered. Intelligence provides the opportunity to identify harmful/mixed drugs, traffickers, and those at acute elevated risk who can be referred to situational tables and community resources for support. It also provides the opportunity to make linkages between occurrences.</li> <li>Law Enforcement has laid the framework for thorough drug overdose investigations, with one element focused on holding drug traffickers responsible by way of criminal charges.</li> </ul> <p><b>Good Samaritan Drug Overdose Act Training/Awareness.</b></p> <ul style="list-style-type: none"> <li>The purpose of the act is to encourage people to call 911 and stay with the victim until emergency medical assistance arrives, without fear of arrest.</li> </ul>	<p>Law Enforcement agencies within Simcoe and Muskoka, now have access to:</p> <p><b>Naloxone Intranasal Spray:</b></p> <ul style="list-style-type: none"> <li>Health Canada has approved the use of nasal naloxone spray (NARCAN) as an emergency public health measure.</li> </ul> <p><b>Opioid Investigative Aid:</b></p> <ul style="list-style-type: none"> <li>The Office of the Chief Coroner of Ontario (OCCO) has changed their approach to the investigation of drug-related deaths and in May 2017, implemented an Opioid Investigative Aid for coroners' use during drug-related death investigations. In May 2018, the OCCO issued an All Chiefs Memorandum in relation to the seizure and handling of medications, non-pharmaceutical drugs and substances from death scenes.</li> </ul> <p>Some law Enforcement agencies within Simcoe and Muskoka have enacted the following policy changes and training initiatives surrounding Opioids:</p> <p><b>Overdose Investigations Fatal/Non-Fatal:</b></p> <ul style="list-style-type: none"> <li>Thorough investigations are required in overdose occurrences to ensure critical intelligence is gathered. Intelligence provides the opportunity to identify harmful/mixed drugs, traffickers, and those at acute elevated risk who can be referred to situational tables and community resources for support. It also provides the opportunity to make linkages between occurrences.</li> </ul> <p><b>Good Samaritan Drug Overdose Act Training/Awareness:</b></p> <ul style="list-style-type: none"> <li>The purpose of the act is to encourage people to call 911 and stay with the victim until emergency medical assistance arrives, without fear of arrest.</li> </ul> <p><b>Opioid Presentations:</b></p> <ul style="list-style-type: none"> <li>Presentations have been developed by the agencies with consideration to engage with community health agencies or other subject matter experts on the effects of opioids, treatment, etc.</li> </ul> <p><b>Safe Handling of Suspected Drug Exhibits:</b></p> <ul style="list-style-type: none"> <li>The Standard Operating Procedures (SOP) have been produced to inform members of the risks posed by Fentanyl and other synthetic opioids and the methods to protect against these risks. Personal protective equipment (PPE) has been enhanced to protect members while conducting drug-specific searches, or sampling seized drug exhibits, the OPP has made the wearing of PPE mandatory.</li> <li>Opioid Classification and Reporting in the Law Enforcement agency's Records Management Systems.</li> <li>Enhanced reporting requirements were identified to assist in tracking the type, quantities, and impact of these opioid related occurrences.</li> </ul>
	Increase timely sharing of intelligence.	Deliverable: Intelligence working group.	Annual	Complete	<p>Law Enforcement agencies within Simcoe and Muskoka meet formally on a regular basis as part of intelligence working group.</p> <p>Law Enforcement agencies within Simcoe and Muskoka recognize that cooperation among law enforcement agencies and jurisdictions is paramount to the success of opioid investigations. Collaboration with Partners - Often, ion scanners are utilized within sudden death occurrences where an overdose may be suspected. Investigators can utilize the presumptive drug testing devices on items found in the proximity of the deceased. These results can provide investigators with indicators of what substance was involved if an overdose is suspected. This information can be communicated with community partners in the prevention, treatment, harm reduction and emergency management pillars to take a proactive approach to preventing further overdoses in the respective community.</p>	<p>Law Enforcement agencies within Simcoe and Muskoka meet formally on a regular basis as part of intelligence working group.</p> <p>Law Enforcement agencies within Simcoe and Muskoka recognize that cooperation among law enforcement agencies and jurisdictions is paramount to the success of opioid investigations. Collaboration with Partners - Often, ion scanners are utilized within sudden death occurrences where an overdose may be suspected. Investigators can utilize the presumptive drug testing devices on items found in the proximity of the deceased. These results can provide investigators with indicators of what substance was involved if an overdose is suspected. This information can be communicated with community partners in the prevention, treatment, harm reduction and emergency management pillars to take a proactive approach to preventing further overdoses in the respective community.</p>	<p>Law Enforcement agencies within Simcoe and Muskoka meet formally on a regular basis as part of intelligence working group.</p> <p>Law Enforcement agencies within Simcoe and Muskoka recognize that cooperation among law enforcement agencies and jurisdictions is paramount to the success of opioid investigations.</p>
	Develop and implement a Simcoe Muskoka law enforcement opioid education seminar.	Deliverable: Education seminar.	Annual	Complete	<p>The Nottawasaga Detachment of the Ontario Provincial Police (OPP) is determined to take every step possible to help our citizens, our communities and our partners, who are impacted by these deadly substances. A public awareness campaign was launched on Monday, July 20, and ran until Friday, July 31, 2020, in order to better inform our community members about the issue and the resources available to them. In an effort to encourage people to seek life-saving assistance, the opioid public awareness campaign, covered a number of topics, including: opioids, stigma, signs, risk factors and response to overdose:</p> <ul style="list-style-type: none"> <li>Good Samaritan Drug Overdose Act (GSDOA)</li> <li>What to do in the case of a suspected overdose</li> <li>Overview of the Nottawasaga Opioid Advisory Working Group</li> <li>Safe disposal, including local disposal sites</li> <li>Harm reduction strategies, such as Naloxone kits</li> <li>Stigma reduction</li> <li>Local services and resources for those who are using, or are affected, by opioids.</li> </ul> <p>The Nottawasaga OPP is upholding its commitment to the Ontario Mobilization and Engagement Model of Community Policing by using a collaborative approach to disseminate the public awareness campaign. Partnering with community organizations will help reach those directly impacted by opioids. Our aim is to provide local resources to our community members, in the hopes of increasing awareness of the use, and misuse, of opioids. For more information, visit opp.ca/opioids.</p>	<p>Through 2019 there have been a number of opioid community engagement opportunities available to all law enforcement across Ontario. The Enforcement Pillar recognizes the benefit in collaborative education seminars that include other stakeholders. The Enforcement Pillar will continue to seek opportunities to participate in education seminars with members from the other Pillars in SMOS.</p>	
	Share educational opportunities for law enforcement and first responder partners.		Annual	Complete	<p>In 2020 and into 2021, the Enforcement pillar promoted the Canadian Police Knowledge Network Drug Stigma Awareness for law enforcement designed for the law enforcement community and provides an opportunity to learn about substance use disorder and the impacts of stigma on those who suffer from this medical condition. Tips and examples from Canadian communities demonstrate how small changes can make a difference and how policing practices are changing in response to new knowledge.</p> <p><b>Learning Objectives:</b></p> <ul style="list-style-type: none"> <li>Describe substance use disorder as a health issue and understand its link with exposure to trauma.</li> <li>Recognize the different types of stigma and understand the impact of stigma on people with substance use disorder.</li> <li>Adopt skills and approaches to reduce substance use stigma within the enforcement community.</li> </ul> <p>The Enforcement Pillar further sought out opportunities to make the training accessible to the Georgian College Police Foundations course so that future law enforcement officers have this valuable training opportunity.</p>	<p>In June 2019, the SMOS Enforcement Pillar, in collaboration with the Ontario Chiefs of Police Substance Advisory Committee, organized a presentation from Surrey Fire Chief, Len Garris, the project leader for the Surrey Opioid Project. Chief Garris believed that understanding the factors that lead individuals to opioid use and overdose is critical to developing effective interventions. In December 2017, Statistics Canada, the City of Surrey, Surrey Fire Services, Surrey RCMP, Fraser Health Authority, BC Coroners Service, Provincial Health Authority and others joined together in a research partnership. This partnership was formed to bring together data on the individuals who have experienced overdose events and fatalities and examine their case histories in terms of justice and health care involvement and employment status and other factors. The data generated by the project will be critical to identify the primary risks and characteristics of those individuals most at risk of opioid use or overdose. Now that the initial data analysis is completed, it is timely to address the key policy questions that arise from this analysis and begin to design new responses to reduce the risk of overdose and death in their community. This was the impetus to the formation of the SMOS/Stats Canada Data Project.</p>	<p>Representatives from the SMOS (police, health, mental health) attended the "Ontario Chiefs of Police 2018: Starting a Collaborative Discussion Around the Opioid Challenge Seminar". This was a forum for keynote presenters and interactive panel and participant discussions about the challenges and opportunities we are facing locally, provincially and nationally. It is important for all of us to understand the challenges we are facing, what we are doing in our respective fields, what innovative opportunities we have to offer, and what can we do collectively to address the opioid issue as this crisis demands an "all hands on deck" response.</p> <p>Representatives from SMOS (police, health) attended the 2018 Law Enforcement Public Health Conference. This forum recognizes that law enforcement and health are intimately related and necessary partners in issues like the current opioid crisis and that organizations from both fields should work together closely to increase the health and safety of citizens.</p>

Enforcement Pillar Dashboard - page 2 of 2

Strategy Goal	Objective/Change Idea	Indicator/Measure/ Deliverable	Reporting Frequency	Outcome	Year Three Narrative 2020/21	Year Two Narrative 2019	Year One Narrative 2018
#2. Reduce the supply of illicit opioids in the Simcoe Muskoka area through a cohesive enforcement strategy.	Provide targeted enforcement based on timely intelligence.		Annual	Complete	<p>The Enforcement Pillar continues to explore opportunities with other Provincial and Federal stakeholders to ensure timely intelligence, as it relates to opioids, is conveyed to all partners. Project GARFIELD has been a collaborative and cooperative effort led by the Ontario Provincial Police (OPP) Central Region Community Street Crime Units (CSCU), with assistance from Barrie Police Service (BPS) and Toronto Police Service (TPS). The investigation began in December 2020 when police became aware of a network of individuals from the Greater Toronto Area (GTA), with ties to GTA-based street gangs, responsible for trafficking fentanyl and crack cocaine in Simcoe County and the District of Muskoka.</p> <p>The network of individuals has operated as a criminal organization, with multiple individuals involved in facilitating drug transactions. Through analysis, this network has been linked to both fatal and non-fatal overdose occurrences between January 2020 and February 2021 in Simcoe County, including the City of Barrie, as well as the District of Muskoka.</p> <p>On May 20, 2021, police executed a total of nine (9) warrants in Barrie (1), Toronto (4), Oshawa (2), Markham (1) and Ajax (1). The amount of fentanyl seized in this investigation represents approximately 4,144 street level doses. Eleven people are facing 148 CDSA and Criminal Code charges including trafficking cocaine and fentanyl, possession of property obtained by crime, theft and participation in a criminal organization.</p> <p>South Simcoe Police Service (SSPS) report a slight increase in drug investigations for 2021 and a slight decrease in actual possession and trafficking offences. SSPS reports four significant opioid related investigations over the past year from response to front line calls for service and pro-active trafficking investigations which includes an initiative from grant funding. The results include the seizure of fentanyl and oxycodone pills often with corresponding seizures of cocaine.</p>	<p>The Enforcement Pillar continues to explore opportunities with other Provincial and Federal stakeholders to ensure timely intelligence, as it relates to opioids is conveyed to all partners.</p> <p>R vs Walker South simcoe Police Service investigation into an overdose death resulted in conviction of criminal negligence causing death. Sentenced to 5 years (total, minus time served etc).</p> <p>Project Shoreham The Barrie Police Service, assisted by the Ontario Provincial Police Central Region Community Street Crime Units and Organized Crime Enforcement Bureau concluded an investigation into a drug trafficking network spanning throughout Simcoe County and the District of Muskoka. Known as Project Shoreham, this investigation resulted in 29 people arrested and charged with 279 Criminal Code of Canada and Controlled Drugs and Substances Act (CDSA) offences. In addition to these arrests, the investigation led to the seizure of:  <ul style="list-style-type: none"> <li>• 648.5 grams of fentanyl.</li> <li>• 11,378 grams of methamphetamine.</li> <li>• 3,704 grams of cocaine.</li> <li>• Seized 3 handguns, 2 rifles and 1 shotgun.</li> <li>• Nearly \$24,000 in Canadian currency.</li> <li>• Six high-end motor vehicles.</li> </ul>                     Approximately \$20,000 in stolen property from a recent break and enter.                      The amount of fentanyl seized in this investigation could have been conservatively 6,500 street level doses of fentanyl – fentanyl is lethal in quantities as small as two milligrams.</p>	<p>The Enforcement Pillar is exploring opportunities with other Provincial and Federal stakeholders to ensure timely intelligence, as it relates to opioids is conveyed to all partners.</p> <p>Examples of recent successful investigations:                      Barrie Police Service                      R vs Mastromatteo                      Justice Jonathan Bliss described in great detail, the circumstances surrounding the fentanyl overdoses of five users in downtown Barrie Oct. 2, 2016, and how they led to the arrest of a 21-year-old Barrie man, who received a seven year prison sentence in 2018, for importing fentanyl. "He was essentially an illicit pharmacy dispensing drugs like bullets for the buyers to play Russian roulette with."                      R vs McPhail                      A 24-year-old Barrie man has pled guilty to trafficking and criminal negligence causing bodily harm for his involvement in the above noted incident. He will be sentenced in early 2019.                      South Simcoe Police Service                      R vs Walker                      A 25-year-old Barrie man has pled guilty to criminal negligence causing death for his involvement in a fatal opioid overdose. He will be sentenced in early 2019.</p>
	Develop a process to communicate timely opioid information to the community.	Deliverable: Communication process	Annual	Complete	<p>Through 2020 the Enforcement Pillar continued to lead the f the SMOS/Stats Canada Data Project and on July 15, 2021, Statistics Canada released an article titled <a href="#">Understanding opioid overdoses in Simcoe Muskoka, Ontario, 2018-2019</a> which indicates that "overdoses have played a larger role in contributing to excess mortality among those in younger age groups" as well as "provides a profile of those who experiences an overdose, as well as a baseline for examining harms related to opioid use before the COVID-19 pandemic." The Public Health Agency of Canada has also <a href="#">published data</a> indicating that opioid deaths have increased during the COVID-19 pandemic.</p>	<p>Law Enforcement agencies within Simcoe and Muskoka continue exploring opportunities on enhancing the communication process to the community on opioid related messages. When valuable information needs to be released to the community, each service has issued Public Advisories and they get posted to the Alert banner on PreventOD.ca website.</p>	
	Collaborate to raise public awareness on dangers of recreational opioid use.		Annual	Complete	<p>see directly above.</p>	<p>The Barrie Police Service (BPS) participates in the Supervised Consumption Site Selection Committee. It is chaired by the Health Unit and is looking at possible sites for a Supervised Consumption Site in Barrie. The BPS attends this committee to act as a resource for the committee and assist with providing information when requested but is not participating in the actual identification or evaluation of potential sites.</p> <p>Law Enforcement agencies within Simcoe and Muskoka continue to deliver opioid awareness presentations to their communities on a regular basis.</p>	<p>Law Enforcement agencies within Simcoe and Muskoka are delivering opioid awareness presentations to their communities on a regular basis.</p>
	Promote Drug Take Back day as way to raise awareness of returning unused prescription opioids.		Annual	Complete	<p>Law Enforcement agencies within Simcoe and Muskoka regularly promote the returning of unused prescriptions to pharmacies through public awareness campaigns.</p>		
	Continue to engage Crimestoppers on initiatives.		Annual	Complete	<p>Crime Stoppers is a partnership between the public, police and media. Crime Stoppers of Simcoe/Dufferin/Muskoka provides the counties of Simcoe, Dufferin and Muskoka a way to anonymously report tips to help solves crimes, ensuring the safety and future of our thriving communities. They are committed to helping crimes get solved, and they have little tolerance for drug trafficking and all the lives that are put at risk or lost due to it.</p> <p>Crime Stoppers continues to raise awareness to opioid related crimes and will continue to support with the message of: "Please report drug traffickers, you never know when you may be saving a life."</p>		

For Deliverables - report % complete

Emergency Management Pillar Dashboard

Strategy Goal		Objective/Change Idea	Indicator/Measure/ Deliverable	Reporting Frequency	Year One 2018	Year Two* 2019	Year Three 2020/21	Year Three Narrative	Year One Narrative
#1.	Foster ongoing, comprehensive situational awareness for the Simcoe and Muskoka Emergency Response Committee of current issues related to opioid abuse, misuse and addiction.	Lead the development of a shared Simcoe Muskoka Opioid Strategy website.	Deliverable: Website.	Annual	Complete	Complete	Complete	The PreventOD.ca site was launched at the beginning of April 2018. Information is updated by Emergency Management Simcoe County as appropriate. The total number of page views of preventod.ca was 23,742 with 17, 330 unique views.	The PreventOD.ca site was launched at the beginning of April 2018. Information is updated by Emergency Management Simcoe County as appropriate.
		Adapt the Simcoe Muskoka Vulnerable Populations Plan to add an opioid specific protocol.	Deliverable: Inclusion of an opioid specific protocol.	Annual	It was determined that a distinct opioid-specific protocol is not required.	NA	NA	The Pillar team determined that the existing Vulnerable Populations Emergency Notification Protocol is fully applicable to opioid-related emergencies and did not require any adaptation.	
		Utilize the Simcoe County Daily Emergency Situation Centre (DESC) as an information repository and portal.	Deliverable: Establish a secure folder for SMOS.	Annual	Complete	Complete	Complete	A secure folder on the County of Simcoe's emergency management portal was established in June 2018. It is a repository for County of Simcoe and District of Muskoka data.	
#2.	Enable surveillance for timely alerting and response to, opioid overdose outbreaks.	Develop/document an emergency management plan for opioid overdose outbreak events.	Deliverable: A documented emergency management plan.	Annual	Complete	Complete	Complete	The Simcoe Muskoka Emergency Management Plan for Opioid Overdose Outbreaks was completed in May 2018. It is a living document and will be reviewed annually (between May-August) for appropriate amendments.	
		Collaborate with Data and Evaluation, and Enforcement Pillars to determine appropriate and realistic triggers based on real-time data, as well as key indicators.	Deliverable: Identify triggers that will result in the escalation of surveillance/response activities .	Annual	Complete	Complete	Complete	The Simcoe Muskoka Emergency Management Plan for Opioid Overdose Outbreaks identifies triggers related to opioid overdoses, with or without deaths, that will result in the escalation of regional surveillance and response activities. These triggers are based on the provincial mass casualty incident triggers for pre-hospital paramedicine.	
		Collaborate with other pillars to develop an early-warning system, based on Ontario's Opioid Overdose Early Warning Framework.	Deliverable: Reliable Early Warning System that is both anecdotal and evidence-based.	Annual	On-going	Complete	Complete	County of Simcoe Emergency Management has worked with the IT department to pull information from Paramedics dispatch data to create an alerting tool, which provides data from the past 24 hours. The thresholds were discussed at an EM pillar meeting, with meaningful input from SMDHU epidemiologist, and subsequently adopted. As previously mentioned, this data may require some further analysis; however, we believe the filters and call data to be very accurate.	The Pillar team has developed a framework for an Early Warning System, but meaningful real-time data is not currently available. Consequently, we must rely on stale data from the ACES hospital emergency department reporting system, and significantly lagging data from NACRS and the Coroner's Office. To a large degree, our most reliable early warning information is currently derived from real-time anecdotal reporting by Paramedic Services Supervisors. In 2019, the County of Simcoe will implement a real-time CACC dispatch data mining project. This data will always require further analysis as it will reflect the chief complaint expressed by 9-1-1 callers.
#3.	Ensure a constant state of readiness to respond to and to facilitate a coordinated response to complex events of opioid overdose outbreaks (multi-person or multi-site).	Explore a phased response.	Deliverable: Adapt traditional emergency management monitoring framework.	Annual	Complete	Complete	Complete	The Simcoe Muskoka Emergency Management Plan for Opioid Overdose Outbreaks has incorporated a trigger-based escalation system that mirrors contemporary emergency monitoring and situational awareness practices. There are three levels of surveillance: green (normal operations); yellow (escalating or impending situation requiring enhanced monitoring); and, red (emergency response required).	

\* There is no narrative that corresponds with year two.

People with Lived/Living Experience Pillar Dashboard

Strategy Goal	Objective/Change Idea	Year Three Narrative 2020/21	Year One and Two Narrative 2018/19
To incorporate the expertise of the people with lived/living experience of substance use throughout the work of SMOS as a foundational pillar.	Development of the Network of Service Providers and integration of People with Lived/Living experience into the Pillar work.	In 2021, people with lived/living experience were invited to complete a survey to facilitate the site selection for a CTS site in Barrie. Fifty hard copy surveys were received through our partner agencies in Barrie. Also in 2021 virtual consultation sessions for a CTS in Barrie were held, 11 of 104 attendees self-identified as being people with lived/living experience of substance use.	<p>A network of services that provide support to people with lived/living experience of substance use was created. Partnering agencies included representation from regions across Simcoe County: Patient/Client and Family Council - Waypoint Centre; Caring and Supporting Participating, Mental Health and Addiction Peer Support - Collingwood; The Lighthouse - Orillia; The Krasman Centre - South Simcoe; The Loft - Bradford; Youth Haven - Barrie; David Busby Street Centre - Barrie; Gilbert Centre - Barrie.</p> <p>The network of service providers was operationalized to support the work of the Harm Reduction Pillar to bring a Consumption and Treatment Services (CTS) site to the City of Barrie. In 2019 these partnerships facilitated the completion of People with Lived Experience Survey resulting in 47 responses. Pillar leads were also encouraged at this time to incorporate people with lived/living experience into planning. The Harm Reduction Pillar had regular participation from a variety of different individuals.</p>
To incorporate the expertise of the people with lived/living experience of substance use throughout the work of SMOS as a foundational pillar.	Getting to Tomorrow Project: Ending the Overdose Crisis.	Getting to Tomorrow: Ending the Overdose Crisis, a national Health Canada funded public health initiative aimed at surfacing solutions to the overdose crisis by bringing diverse communities together to build consensus and a shared understanding for change. John Howard Simcoe Muskoka (JHSM) partnered with Gilbert Centre (GC) and Indigenous Harm Reduction Network (IHRN) to bring the topics of harm reduction and decriminalization from a policy perspective to the surface in Barrie. Through this initiative, various social service and health focused agencies met with local politicians, the media, and over 20 people with lived and living experience, on October 19, 2021, and October 21, 2021. They discussed local issues and ways forward when it comes to dealing with the toxic opioid poisoning crisis which has resulted from poor drug policy in Canada. As preparation for this event, JHSM and GC worked with local people who use drugs to centre and prioritize their voices, in tandem with initiatives stemming from the SMOS People with Lived/Living Experience (PWLLE) Pillar, which is detailed below. This initiative began in April 2021, with the dialogues taking place in October, and work continuing in terms of the empowerment and community building among those who are actively using drugs, and larger organizing bodies, such as the Canadian Drug Policy Coalition (CDPC) and Canadian Association of People Who Use Drugs (CAPUD).	NA
To incorporate the expertise of the people with lived/living experience of substance use throughout the work of SMOS as a foundational pillar.	People with Lived/Living Experience of Substance Use Dinners	The Gilbert Centre partnered with both Georgian College and John Howard Simcoe Muskoka/The Getting to Tomorrow project to host several dinners for people who self-identify as using drugs in the Barrie community. As part of these dinners we have been able to provide cash honoraria to participants for providing their knowledge and input into different issues facing the drug using community, as well as in preparation for the engagement in the Getting to Tomorrow Dialogues. The first dinner was held August 18, 2021, and had six participants. The second dinner was held on September 22, 2021, and had close to 40 participants. The third dinner was held October 13, 2021, as preparation for the dialogues taking place the following week, and had 11 participants attend. Much of the funding for the dinners, both in terms of the food, as well as the honoraria, has come from external sources, including Georgian College and the Getting to Tomorrow project, specifically through Simon Fraser University and the Canadian Drug Policy Coalition. We are hoping to access more sustainable funding for these honoraria in order to continue to centre the voices of people with living experience with drug use in programming and initiatives that directly impact them. The ability to provide this financial resource to those who use drugs has also allowed us to meaningfully demonstrate the value that their knowledge has on the work that we do.	NA



Communication and Coordination Dashboard

Strategy Goal	Objective/Change Idea	Reporting Frequency	Year 1* 2018	Year 2 2019	Year 3 2020/21	Year Three Narrative	Year Two Narrative
Enhanced Communication with Community.	SMOS Quarterly Newsletter.	Annual	NA	Ongoing	Complete	Newsletters were released in January 2020 and November 2020 and were posted on the PreventOD.ca website.	In 2019 SMOS Steering Committee decided to initiate a quarterly newsletter and prepared the first issue, which was released in January 2020.
Enhanced Coordination with Community Resources.	Strengthen Linkages with Local Drug Strategy Committees.	Annual	NA	Ongoing	NA	NA	Strengthened communications and collaboration with the four local drug strategy committees in Simcoe Muskoka: Barrie, Orillia, Nottawasaga and Muskoka.
	Opportunities For Municipal Action.	Annual	NA	Initiated and Completed	NA	The Health Promotion and Communications Team took on a lead role in the development and implementation of communication activities as they related to the application for a Consumption and Treatment Services Site for the City of Barrie. Communication activities that provides opportunity for municipal action included: In 2019 facilitated two public open houses with 245 participants, posted 11 tweets between January 31 and March 20, resulting in 7,754 views; posted 19 times on Facebook resulting in 64,500 unique user views; there were a total of 80 radio advertisements, 10 press releases one Medical Officer of Health column and one RogersTV interview. In 2020/21 there were six press releases with 489 views; 102 radio advertisements, five Facebook/Instagram posts with 43,236 unique views.	Through 2018 and 2019, awareness of the impacts of the opioid crisis amongst communities in Simcoe and Muskoka has grown considerably. Several municipal councils have expressed interest in taking action to help address this urgent situation. As a support to municipalities, the Steering Committee of SMOS developed and shared a document of suggested opportunities for action within the realm of municipal jurisdiction. These ideas are relevant to Simcoe and Muskoka broadly speaking, but should be tailored to the needs of each municipality as some items may be more relevant than others, and additional items may be important.
	Liaison with other community-based groups.	Annual	NA	Ongoing	NA	NA	Continued collaboration and communication with the locally led Indigenous Opioid Strategy, and family advocacy groups.
Enhanced Data Collaboration.	SMOS-Statistics Canada Data Project.	Annual	NA	Ongoing	Complete	The Public Health Assessment, Surveillance and Evaluation (PHASE) Team at SMDHU worked closely with the Enforcement Pillar on the SMOS/Stats Canada Data Project and on July 15, 2021, Statistics Canada released an article titled <a href="#">Understanding opioid overdoses in Simcoe Muskoka, Ontario, 2018-2019</a> . The information was disseminated to partner agencies and the public, with a Healthstats page being developed for public access Characteristics of People Who Use Drugs <a href="https://www.simcoemuskokahealthstats.org/topics/alcohol-drugs/drugs/opioids/characteristics-of-individuals-experiencing-an-opioid-overdose">https://www.simcoemuskokahealthstats.org/topics/alcohol-drugs/drugs/opioids/characteristics-of-individuals-experiencing-an-opioid-overdose</a> .	The SMOS/Statistics Canada Data Project is seeking to bring together existing federal, provincial and municipal data from Simcoe Muskoka area similar to a pilot project in Surrey, B.C. Combining Statistics Canada's statistical expertise and robust data sets, with the data already collected by SMOS, this proposed data project may help shape approaches for intervention and support to people at elevated risk for overdose. The benefit that a SMOS/Statistics Canada Data Project could bring to SMOS is that it could provide a more in-depth analysis of the social and economic circumstances of confirmed illicit drug overdose deaths in the Simcoe Muskoka area and contribute to the following outcomes: <ul style="list-style-type: none"> <li>• Establishment of a model framework for ongoing data sharing and collaboration between agencies on opioids and other issues of broad interest.</li> <li>• Identification of non-random characteristics of those most at-risk of opioid overdose, and greater understanding of the roots of the crisis and primary risk factors.</li> <li>• Development of evidence-based counter measures intended to reduce overdoses and deaths, augmenting existing mitigation activities taking place at the local, regional, provincial and national level.</li> <li>• Development of targeted policy and programming addressing the root causes of the opioid overdose crisis.</li> </ul>