

### Supporting Transition: WDGPH's Role in the Guelph CTS Closure

**To:** Chair and Members of the Board of Health

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#### Recommendations

It is recommended that the Board of Health receive this report for information.

## **Key Points**

- On March 31, 2025, the Consumption and Treatment Site (CTS) located at the Guelph Community Health Centre (GCHC) closed and the Homeless and Addiction Recovery Treatment Hubs (HART) opened.
- Wellington Dufferin Guelph Public Health (WDGPH) worked closely with multiple community partners to help with the navigation of these difficult changes and mitigate potential risks.
- Understanding the individuals who utilized the CTS and how this change impacts them
  and can aid in all members of the community to moving forward positively.



## **Background**

In April 2019 the CTS at the GCHC opened and began providing health services and support to individuals who use substances. This low barrier care was initiated in response to the opioid crisis facing our community.

The various services provided at the CTS included:

- Distribution of harm reduction supplies and Naloxone.
- Supervised injection services.
- Medical assessments, foot and wound care, HIV, Hepatitis C and STI screening and care and health education.
- Support for and referrals to addiction treatment, primary care, mental health care and other community resources.
- Quiet spaces to rest and connect with other members of the community.

In October 2024 the Ministry of Health announced that multiple CTS sites across the province would close March 31, 2025, and be replaced by Homelessness and Addiction Recovery Treatment (HART) Hubs. The HART Hubs, another low barrier model of care that addresses the complex needs of individuals experiencing homelessness, substance use disorders and mental health challenges, focuses on long-term wellness that addresses the root causes of homelessness and substance use. A total of 18 new HART Hubs will be opening across Ontario with various models. Many of the models focus on connecting individuals with primary care, housing and treatment.

GCHC HART Hub opened on April 1, 2025, and began to provide some of the comprehensive services that will, in time, include:

- Support and referrals for mental health care, addictions treatment, primary care and social services.
- Referrals for housing.
- Mental health and addiction crisis services, crisis stabilization beds and supported withdrawal management beds.

The GCHC model has a greater focus on crisis services rather than primary care. The Dufferin HART Hub, led by Services and Housing in the Province, will begin to provide services in Dufferin County later in 2025.



#### **Discussion**

WDGPH, aware that our community would require considerable support during this transition, worked with multiple community partners to help those partners and their clients navigate this change successfully.

When the announcement came that the CTS would be closing, the Wellington Guelph Drug Strategy (WGDS), concerned about the impact this closure would have on our community began developing the Consumption and Treatment Services Closure Risk Mitigation Plan. WDGPH worked very closely with the WGDS in creating and finalizing this plan. The mitigation plan outlines the potential risks associated with the CTS closure and the various initiatives implemented by multiple community partners to mitigate these potential risks. The Consumption and Treatment Services Closure Risk Mitigation Plan was distributed throughout the Wellington Guelph region and helped educate our community on how to access services and care that were previously offered by the CTS.

One of the potential risks that the Consumption and Treatment Services Closure Risk Mitigation Plan identified, was access to harm reduction supplies and medical care. WDGPH has offered sexual health testing (STI) and immunization clinics bi-monthly at the Royal City Mission (RCM) for several years. Knowing that there would be a decrease in access to care, WDGPH increased the clinic hours at our RCM clinic from bi-monthly to weekly and increased the number of services provided to the community. At present the WDGPH clinic at RCM offers the following services:

- Harm reduction supplies.
- Naloxone distribution.
- Drug testing strips.
- Wound care support including dry dressing changes and education and referrals for wound care.
- HIV, Hepatitis C and STI screening.
- Immunization.

Another significant risk that was identified by the mitigation plan was a potential increase in the improper disposal of needles and other drug paraphernalia in the City of Guelph.



WDGPH collaborated with the City of Guelph to identify areas within the city where waste management employees had identified as high-risk areas for improperly disposed sharps.

Working with the City of Guelph, WDGPH purchased and installed 10 new needle drop kiosks in the identified high-risk locations in Guelph and another kiosk in the town of Arthur, in Wellington County. This installation more than doubled the number of kiosks available to the community in the City of Guelph. The locations of all needle drop kiosks within the Wellington Dufferin Guelph region can be found on the WDGPH website.

Knowing that uncomplicated access to Naloxone can be lifesaving to individuals who use substances, WDGPH seeks on an ongoing basis additional community partners to assist with the distribution of Naloxone throughout the WDG region. The Guelph Public Library (GPL) has long been a strong supporter of individuals who use substances, providing various resources and a welcoming space. Because of their close connection with this community, WDGPH had been working with the GPL and the Ministry of Health to bring GPL onboard as a distributor of Naloxone. In early 2025, GPL was approved by the Ministry to become a distributor of Naloxone and just prior to the CTS closure the GPL began distributing Naloxone in the Guelph community. Given the close and supportive relationship that the GPL has had with the community impacted by the CTS closure, being able to distribute Naloxone to these individuals made that relationship even more impactful. GPL is only the second library in Ontario that has been approved by the Ministry to distribute Naloxone.

WDGPH is working with community partners to identify how the CTS closure is impacting all members of our community. WDGPH supports the Wellington-Guelph-Drug Strategy (WGDS) with data surveillance of CTS closure impacts. In partnership with WGDS, WDGPH has created and distributed a qualitative survey that has been shared with multiple community partners. The results of this survey will assist in understanding the lived experience the CTS closure is having on individuals. Additionally, WDGPH now has access to more timely hospital-level data from Acute Care Enhanced Surveillance (ACES) regarding the opioid burden in the WDG community. WDGPH is sharing this data, as well as other data from various sources, including the Flexible, Scalable, Accessible, and Timely (FAST) Alert system with our community partners. This sound qualitative and quantitative data will help inform the community of the CTS closures impact and influence decisions moving forward.



At the time of this report, the FAST Alert system has not noted an increase in notifications for overdoses in our community and the ACES system has not noted an increase in emergency room admissions for substance use. There has been good use observed in the new needle drop kiosks indicating that the locations chosen were appropriate.

#### **Health Equity Implications**

Stigma is one of the most consequential and damaging factors identified within the social determinates of health.<sup>2</sup> Stigma includes discrimination, prejudice, judgment and stereotypes.<sup>3</sup> Individuals who use substances frequently experience significant stigma and it often presents as the persistent and pervasive belief that addiction is a personal choice reflecting a lack of willpower and a moral failing.<sup>3</sup> This stigma dramatically affects individuals with a substance use disorder in a variety of ways including the following.<sup>2</sup>

- Mental health challenges.
- Loss of self-worth.
- Avoid seeking support.
- Social isolation.
- Work and school challenges.
- Self-stigma.

By being aware of our own innate biases, we can make it easier for individuals to get support by letting them know they are not alone, and that substance use does not define who they are.

Addiction is a treatable medical condition, not a choice.<sup>2</sup>

## Conclusion

Substance use may be casual or chronic, may be for spiritual or social reasons and may involve one substance or several. Regardless, substance use is an experience that is very individual and very prevalent.

The CTS at the GCHC provided much more than a site for accessing harm reduction supplies or for seeking medical care or for the injection of substances. The CTS was a meeting place that provided support and kindness to some of the most marginalized individuals in our community. With the closure of the CTS, there is a feeling of significant loss by the individuals who accessed services and care at the CTS



Although the HART Hub will, in time, replace some of the services the CTS offered, and expand other important services, at present there is a reduction in services and supports for individuals who use substances. Understanding that the closure is a significant loss for the many individuals of our community who accessed care and compassion at the CTS will help us better understand each other and help the community move forward in a positive manner.

# **Ontario Public Health Standards**

Foundational Standards
Population Health Assessment
⊠ Health Equity
Effective Public Health Practice
☐ Emergency Management
Program Standards
☑ Chronic Disease Prevention and Well-Being
☐ Food Safety
Healthy Environments
Healthy Growth and Development
☐ Immunization
☐ Infectious and Communicable Diseases Prevention and Control
Safe Water
School Health
⊠ Substance Use and Injury Prevention
2024-2028 WDGPH Strategic Goals
More details about these strategic goals can be found in <u>WDGPH's 2024-2028 Strategic Plan</u> .
☐ Improve health outcomes
☐ Focus on children's health
□ Build strong partnerships
☐ Innovate our programs and services
Lead the way toward a sustainable Public Health system



#### References

- 1. Homeless and Addiction Recovery Treatment Hubs (HART Hubs): Reference Document, January 2025 <a href="https://www.ontario.ca/page/homeless-and-addiction-recovery-treatment-hubs-hart-hubs-reference-document-january-2025">https://www.ontario.ca/page/homeless-and-addiction-recovery-treatment-hubs-hart-hubs-reference-document-january-2025</a>
- 2. Social determinants of health and health inequalities. Government of Canada. 2024-07-18 <a href="https://www.canada.ca/en/public-health/services/health-promotion/population-health/what-determines-health.html">https://www.canada.ca/en/public-health/services/health-promotion/population-health/what-determines-health.html</a>
- 3. Stigma around drug use. Government of Canada. 2024-04-22 https://www.canada.ca/en/health-canada/services/opioids/stigma.html