
Executive Summary

The Waterloo Region Integrated Drugs Strategy (WRIDS) is a collaborative community response to addressing problematic substance use. Its vision is to make Waterloo Region safer and healthier through preventing, reducing or eliminating problematic substance use and its consequences.

In 2014, the WRIDS received a three year Ontario Trillium Grant to support its current phase, the implementation of 99 recommendations spanning the ‘four pillars’ of Prevention, Harm Reduction, Rehabilitation and Recovery, and Justice and Enforcement.

From 2015-2017 with the support of a coordinator, the WRIDS contributed to and led a number of initiatives and events across Waterloo Region including offering 12 education sessions for the community and service providers, developing 17 new community resources on substance use, creating an overdose monitoring and alert system, and synthesizing and summarizing 14 resources for youth, caregivers and teachers on preventing or delaying substance use. Through the Harm Reduction pillar work, Waterloo Region Public Health and Emergency Services implemented 5 new needle disposal units, expanded harm reduction outreach through a mobile van service, and received an endorsement from Municipal Government to explore the feasibility of supervised injection services for the community.

Since 2015, approximately 131 community partners and people with lived experience have participated in the Drugs Strategy through Committee or Work Group membership. Overall, approximately 1500 service providers and members of the general public were engaged in the Drugs Strategy through educational sessions, trainings and community forums.

The next phase of the Drugs Strategy will include working towards the piloting of a Rapid Access Addiction Clinic Service for Kitchener and Cambridge, working collaboratively with Public Health to create and implement the Region’s Opioid Response Plan, implementing a Collective Impact evaluation strategy through partnerships with Drugs Strategies across Ontario and the University of Toronto, coordinating with other organizations to help prepare the community for the legalization of marijuana in 2018, and to continue to reach out to additional partners, sectors and businesses to expand the capacity and scope of the Drugs Strategy work.
Introduction

The Waterloo Region Integrated Drugs Strategy (WRIDS) is a collaborative community response to addressing problematic substance use. Its vision is to make Waterloo Region safer and healthier through preventing, reducing or eliminating problematic substance use and its consequences. The original ‘strategy’ was developed over a three-year period through a 26-member task force, including consultations with over 300 citizens and stakeholders. This comprehensive document, making 99 recommendations for change across Waterloo Region, was released to the community in December 2011.

In 2014 a cross-sector Steering Committee was struck to oversee and guide the implementation of recommendations across the four pillars of 1) Prevention, 2) Justice and Enforcement, 3) Rehabilitation and Recovery, and 4) Harm Reduction. The purpose of the Steering Committee is to lead the collaborative in facilitating the implementation of the recommendations in the strategy, develop an overall implementation plan, and to establish Coordinating Committees for each pillar. The Steering Committee is a truly community-based group, i.e. not housed within an existing department or service provider in the region, therefore financial support for a coordinator is entirely dependent upon external sources.

In 2015, the WRIDS was successful in its application to the Ontario Trillium Foundation for funds to support the activation of the WRIDS. The collaborative was awarded a three year Seed Grant to hire a coordinator whose role would be to support and assist the Coordinating Committees and Working Group of the WRIDS to implement priority recommendations. The coordinator began work in March of 2015 and has continued to support the various committees and initiatives of the WRIDS.

As it stands today, the WRIDS is a collaborative of over 130 individuals across 50 different organizations, agencies and from the community. Through the work of the four Coordinating Committees and associated Working Groups and with the support of the coordinator, work on a number of priority recommendations has taken place over the past three years. What follows is a snapshot of yearly activities, initiatives and outputs to date through the WRIDS.
Yearly Snapshots

Year One: October 2014 - October 2015

The focus of year one was to build a strong foundation for the WRIDS through development of Coordinating Committees corresponding to the four pillars of the drug strategy. Direct service providers and community members (including individuals with lived experience) joined the coordinating committees and began to prioritize the recommendations of the Drugs Strategy. A total of 33 organizations were involved with Coordinating Committees in year one. In addition, the Steering Committee successfully hired a coordinator in 2015.

A summary of highlights from Year 1 are included below:

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<tr>
<th>Lead (Law Enforcement Assisted Diversion) Forum</th>
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<tr>
<td>- Over 100 people attending including 40 community organizations</td>
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<td>- Forum offered an overview of alternatives to incarceration for individuals using substances</td>
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<td>- Discussed potential piloting in Waterloo Region</td>
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<th>Complex Supportive Strategies Session for Service Providers</th>
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<td>- 7 partner agencies participated to share strategies for more complex behaviours exhibited by individuals in the community, including the intersection of methamphetamine and mental health</td>
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<th>Collaboration between the Recovery and Rehabilitation Pillar and the Canadian Mental Health Associations Geriatric Addiction Specialist</th>
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<td>- Discussion to identify areas of collaboration and work with seniors with addictions issues</td>
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<td>- Engaging with primary care physicians to potentially develop an existing model/pilot of addictions care/triage through the hospitals</td>
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<th>‘Clear out Your Medicine Cabinet’ Poster Campaign</th>
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<td>- Designed to create awareness and to get prescription medications that are around the house returned to pharmacists to assist in preventing accidental overdoses</td>
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<td>- Posters placed in over 150 pharmacies, doctors offices and other workplaces across Waterloo Region by the local Pharmacists Association</td>
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<td>- Supported by the Ontario Pharmacists Association and 9 other partner organizations</td>
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<td>- Developed with oversight from the Prevention Coordinating Committee</td>
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<th>WRIDS website</th>
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<td>- Worked with the steering committee to develop the website as part of the necessary</td>
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backbone information ecosystem
- Partnership with a web designer familiar with the Harm Reduction and the context of a Drugs Strategy

**Harm Reduction Community Partner Forum**
- A community forum was held to recruit members to Harm Reduction working groups to develop work plans. The forum was attended by 25 community partners representing over 20 local organizations
- Working groups were tasked to develop work plans to work on two specific recommendations: 1) Expand Harm Reduction Programs and Services and 2) Increase Public Awareness of Substance Use, Harm Reduction, and Low-Risk Drinking Guidelines.

**Year Two: October 2015 - October 2016**

In year two, the WRIDS prioritized a number of initiatives including: offering a number of community awareness and educational events; building a community overdose reporting mechanism; and strengthening our online presence. Much of our work in year two was directed towards the increased presence of opioids, including fentanyl, in our community and the increase in the number of overdose deaths (fatal and non-fatal). Also in year 2 and in partnership with a community-based consultant, the work of the Steering Committee focused on measuring impact by building a ‘Theory of Change’ and initiating a Collective Impact evaluation framework.

**Development and launch of a local overdose monitoring system (OMARS)**
- The Overdose Monitoring, Alert and Response System (OMARS) is a collaborative community effort across sectors to respond to overdoses and tainted drugs in Waterloo Region by sharing local data.
- In February 2016 OMARS issued its first overdose alert in response to a cluster of overdose deaths.
- Since July 2016, the committee reorganized to develop a community survey whereby individuals could anonymously report their overdose experience.
- Additional partners brought onboard include Waterloo Region Public Health and Emergency Services and Paramedic Services.

**Crystal Methamphetamine Education Forum (March 2016)**
- The WRIDS collaborated with the Human Services and Justice Coordinating Committee (HSJCC) and the Wellington Guelph Drug Strategy (WGDS) to offer a forum on supporting individuals who use crystal methamphetamine.
- The training was focused on supporting direct service providers and expanding capacity to work with people with very complex behaviours as a result of drug use and intersection with mental health.
- The session was widely attended by over 180 community partners.
Rapid Access Addiction Clinic (RAAC) Working Group

- The Recovery and Rehabilitation Pillar worked with the Addiction Services Group to look at the feasibility of piloting a Rapid Access Addiction Clinic (RAAC) service in Waterloo Region.
- RAAC includes engagement of primary care to develop addictions care pathways through the hospital and care clinics in the community (based on the Meta:Phi initiative).
- Over the summer, the Coordinator and the Pillar Chair re-engaged with a number of interested partners including Grand River Hospital, Sanguen Health Centre, and representatives from the Local Health Integration Network.
- The RAAC working group had its first meeting in October of 2016 and committed to working together for 6 months to plan a service for Waterloo Region.

Substance Use Prevention Resources for Youth (Grades 4-6)

- The Prevention Pillar researched ‘best practices’ in substance use prevention for youth with cooperation from the Public and Catholic School Boards.
- Online content for parents, youth and teachers was added to the WRIDS website in the Fall of 2016.

Development of WRIDS Website and Social Media

- The existing website was re-vamped to make it more accessible and user friendly.
- Prevention resources were added to the webpage in the fall.
- A twitter account was established in 2016.
- The WRIDS twitter account and the website are linked to streamline communication and ensure resources are easily accessible to the public.

1st time participation in the International Overdose Awareness Day (Aug. 31st)

- The Overdose Prevention Working Group of the Harm Reduction Pillar organized and sponsored this community event.
- Approximately 100 people attended the event at Kitchener City Hall. 20 naloxone kits (anti-opioid overdose medication) were distributed.

Evaluation Framework and Activities

- The Steering Committee hired a qualified consultant to design an evaluation framework.
- The consultant designed a Theory of Change based on a Collective Impact Framework in partnership with the Steering committee. This will be used to direct future evaluation activities, outcome expectations and measurement procedures to evaluate projects and impact across the four pillars and in the community.

Year Three: October 2016 – December 31st 2017

In year three, the work of the WRIDS continued to evolve in order to respond as far as possible to the opioid crisis experienced nationally, provincially and locally. This included being nimble and leveraging local opportunities and partnerships to improve community awareness of risks
of overdose and the availability of an anti-opioid overdose medication naloxone. A number of important initiatives, resources and training were offered in Waterloo Region in an effort to meet needs at the local level. In addition, the WRIDS was invited by Region of Waterloo Public Health to collaborate in creating the community’s Opioid Response Plan.

### Steering Committees Responds to the Ontario Opioid Strategy
- In October 2016, the Government of Ontario announced a new Opioid Strategy as a response to the growing crisis of opioid use and overdose. In January 2017, the WRIDS Steering Committee responded to this strategy with a letter to Minister Hoskins and Premier Wynne.
- Members of the Steering Committee dialogued with representatives from the Minister’s and Premier’s offices to offer further feedback and suggestions for a comprehensive approach to the opioid crisis.

### Fentanyl Education Session
- In partnership with the local Human Services Justice Coordinating Committee, the WRIDS hosted a half day fentanyl education session on December 16th for service providers across Waterloo Region. Approximately 350 individuals attended from a variety of sectors (police, schools, frontline workers, social services).
- Presentations covered a range of topics and view points (naloxone, fentanyl from the police perspective and the paramedics’ experience).

### OMARS (Overdose Monitoring Alert and Response System)
- Through the summer and fall of 2016, committee members worked to bring additional data sources and partners on board, including Public Health and Paramedic Services.
- In January 2017, the committee launched a revised community survey to allow individuals who have experienced an overdose situation to report this event anonymously.
- During the spring of 2017 the committee created the first quarterly Waterloo Region Overdose Bulletin synthesizing local overdose data (including data from the community survey) as a community engagement and information tool.
- A number of communities and partners have invited us to share the OMARS work including, Safer Brantfort, Brant County Health Unit, Guelph/Wellington Paramedics and Police Services, the Grey-Bruce Task Force on Crystal Meth and other drugs, the London-Middlesex Drugs Strategy and the Simcoe Muskoka District Health Unit.
- A carfentanil alert issued through twitter for Waterloo Region in October 2017 received 90,000 views.

### Physician Education
- In February of 2017 the WRIDS partnered with Indivior (the makers of suboxone – a withdrawal medication) to host a certified medical education session for physicians and nurse practitioners on identifying and treating opioid use disorder in their practice.
- Sixteen physicians and nurse practitioners attended.

### Pharmacists Education
- Members of the WRIDS have been partnering with Region of Waterloo Public Health
and the local Pharmacists’ Association to support pharmacists in dispensing naloxone to members of the public. About 60 local pharmacists have received training on overdose, opioids and use of naloxone.

- Local experts providing this training have been invited across Ontario to replicate it in other communities as well as delivering opioid overdose and naloxone information at provincial and national conferences.

Parent/Caregiver/Teacher Information Initiatives

- Recognizing that overdose can affect anyone in our community, the Overdose Prevention Working Group of the WRIDS has focused on providing information and resources to families.

- In March 2017 the Working Group partnered with University of Waterloo School of Pharmacy to offer an educational event for parents, teachers and caregivers. One hundred and thirty individuals attended and 78 naloxone kits were distributed, along with a take-home opioid training package. Speakers provided overdose training and strategies for communicating with youth about substance use.

- In May 2017 the WRIDS partnered with a Cambridge High School to provide a Substance Use Information session to parents. Approximately 35 people attended. Speakers included the Waterloo Regional Police, a service provider from a local youth addiction agency, a parent who had lost their son to an overdose, and a public health nurse.

- Also in May, the WRIDS was invited to a Waterloo Region Police Open House to provide information and resources to families in attendance. The Chair of the WRIDS steering committee attended to offer information to those interested.

- In June, the WRIDS partnered with the Baden Optimists’ Club to offer an information session for this rural community on substance use. Topics discussed were how to recognize substance use in youth, the dangers of fentanyl and strategies for keeping lines of communication open. Approximately 45 people attended.

- Also in June, the Overdose Prevention Work Group authored a letter advising parents to have supportive conversations with their children over the summer given the rise in the number of overdoses and the presence of illicit opioids. Waterloo Regional Police and Waterloo Region Public Health partnered with our local school boards to sign and distribute this letter to parents in our community.

- In December 2017, a second letter was distributed through the school boards to parents in Waterloo Region warning that there are increasing reports of fentanyl being added to other substances.

Community Outreach in Cambridge

- Cambridge, like other urban areas in Waterloo Region, has experienced a rise in overdose deaths.

- The WRIDS partnered with a local downtown church congregation to offer an information session on substance use, addiction, naloxone and local supports. Approximately 75 people attended.

- In November 2017, the WRIDS partnered with the Trinity Community Table to offer an information session on substance use, addiction and overdose. Approximately 200
people attended this session.

**Expansion of support and resources for Crystal Methamphetamine**
- For a number of years, crystal methamphetamine use has been prevalent in Waterloo Region and in neighbouring areas.
- In March 2016, in partnership with the Regional Human Services Justice Coordinating Committee, a new crystal meth users harm reduction guide was launched in the community.
- Following up on its launch, the WRIDS coordinators for both Waterloo Region and Guelph Wellington have met with the HSJCC to explore a partnership to offer additional training for service providers and frontline staff to help support individuals exhibiting challenging behaviours due to meth use and associated psychosis. Three additional forums are being planned for January/February 2018 for service providers (at Bingeman’s) and with physicians at St. Mary’s Hospital, Grand River Hospital, and Homewood Health Centre.

**Marking International Overdose Awareness Day**
- For the second year in a row, the Overdose Prevention Working Group organized community events across the Region (Cambridge and Kitchener) to recognize International Overdose Awareness Day (August 31st). In 2017, the events reached 300 people (100 in Cambridge and 200 in Kitchener) who attended a free barbecue, accessed a naloxone kit and harm reduction information (n=145) and participated in a prayer flag activity to remember a loved one lost to overdose.

**Invitation to collaborate in creating Waterloo Region’s Opioid Response Plan**
- In order to build on existing work and further advance strategies to address the complex nature of the opioid situation, the WRIDS in partnership with Public Health, has struck a Special Committee on Opioid Response.
- The Special Committee on Opioid Response will be an extension of the WRIDS Steering Committee dedicated to leading Waterloo Region’s Opioid Response Strategy and will oversee the development of the Opioid Response Plan for Waterloo Region.
- Work will take place on developing the plan starting in February 2018.

**Role of the Coordinator**

In 2014, the WRIDS Steering Committee submitted an application to the Ontario Trillium Foundation to fund a Coordinator position. Given the number of partners involved in the WRIDS, it was identified that a coordinator role was necessary to create a ‘backbone’ for the collaborative by supporting continuous communication and mutually reinforcing activities. The Coordinator was also to act as a champion for the WRIDS by developing and maintaining its strategic vision and inviting new key players to the table.

Over the past three years, the Coordinator has taken on a number of tasks, including:
• Helping to plan and coordinate Coordinating Committee meetings
• Participating on numerous working groups with the aim of ‘quick starting’ and completing time-limited projects, including community events
• Creating and maintaining the WRIDS website (www.waterlooregiondrugstrategy.ca)
• Maintaining and expanding the WRIDS twitter account (@DrugStrategyWR)
• Co-chairing the Overdose Monitoring Alert and Response System (OMARS) Committee
• Co-creating and editing resources developed through the committees and working groups
• Liaising with other Drugs Strategies across Ontario to share resources, updates and challenges through the Municipal Drugs Strategy Coordinators’ Network of Ontario (MDSCNO)
• Collaborating with the Strategy Design and Evaluation Initiative at University of Toronto and the MDSCNO to implement evaluation activities to assess the impact of the WRIDS locally
• Facilitating communication between 1) WRIDS committees and working groups and between 2) external committees to ensure the community’s understanding of WRIDS priorities and work plans and to prevent overlap and duplication
• Providing regular updates to Regional Council on WRIDS activities and initiatives
• Exploring future potential funding opportunities for the WRIDS
• Helping to create and disseminate messages to the media on the work of the WRIDS

The Coordinator is guided by the Steering Committee and hosted and supervised by the Kitchener Downtown Community Health Centre. As the only paid staff of the WRIDS, the strength of the Coordinator is having the ability to dedicate time to priority and emerging issues as they arise in the community. This includes the ability to be nimble and move quickly on accomplishing tasks that are identified as being necessary and urgent. For example, the Coordinator was able to dedicate a significant amount of time to help coordinate a region-wide fentanyl symposium following the rise in the number of overdose-related deaths and requests for training/information at the end of 2016. The Coordinator can also dedicate significant time to doing the groundwork on projects and initiatives in order to help move projects forward more quickly.

Overall Accomplishments

The efforts, projects and activities of the WRIDS have grown exponentially over the past three years. The following section provides a high level overview of accomplishments to date by the
WRIDS collaborative including Coordinating Committees, Working Groups and the Steering Committee.

- Expansion of Harm Reduction Work, including Overdose Awareness Initiatives

Harm Reduction Coordinating Committee (HRCC)

The Region of Waterloo Public Health and Emergency Services provides leadership for our HRCC and associated working groups, including the Overdose Prevention Working Group and the Disposal Working Group. Over the past several years, the HRCC has prioritized expanding harm reduction programming, increasing public awareness of substance use, harm reduction and the availability of naloxone, and increasing the availability of disposal units for substance use materials in the community.

Through the HRCC, a new needle syringe program was introduced at Sanguen Health Centre in Waterloo to facilitate disposal of used equipment and distribution of clean drug paraphernalia. In addition, the Disposal Working Group worked to highlight disposal options for the community in addition to creating five new disposal boxes throughout Waterloo Region. This work was carried out in consultation with clients who use harm reduction services and with input from individuals with lived experience who participate in the HRCC and Working Groups.

In 2016, naloxone (an anti-opioid overdose medication) became available at select pharmacies to individuals at risk of overdose or family members supporting individuals who use substances. To support our local pharmacists, the HRCC partnered with the School of Pharmacy and the Regional Pharmacists’ association to survey local pharmacists as to whether they were dispensing naloxone and what supports were required in order for them to do so. Almost two-thirds of the respondents indicated they needed training to dispense it. As a result, the School of Pharmacy and Region of Waterloo Public Health partnered to provide training to over 60 pharmacists across the Region to increase the comfort/capacity of local pharmacists and hence the availability of naloxone in our community. The School of Pharmacy also provided training to pharmacists, physicians, and nurses at Provincial and National conferences.

In 2016 the HRCC prioritised updating local data around substance use patterns, trends and the needs of people using substances in Waterloo Region. The result was a Substance Use Study conducted with almost 400 individuals across our Region. The findings indicate that the use of methamphetamines, opioids and fentanyl has increased since 2008 and that injection drug use has become more common with a trend towards people who use substances moving to injection as a method for substance use more quickly. These findings when combined with overdose related data showing that rates of overdose have doubled between 2009 and 2015
have made a strong case for exploring the feasibility of a supervised injection service (SIS) for Waterloo region. These findings, along with the recommendation of expanding harm reduction programming (including SIS), were presented to Regional Council in June of 2017. It was unanimously approved to move forward with the next stage of planning for SIS, namely stakeholder and community consultations which will take place in Fall 2017.

**Overdose Prevention Work Group**

In Waterloo Region, rates of overdose have increased two-fold since 2009 and continue to increase. Recognizing the changing landscape of substance use including the elevated risks to people using substances, the focus of the Overdose Prevention Work group has been to expand community awareness of the issue of overdose, including the message that overdose can happen to anyone, and overdose deaths are preventable. This work has been done through engaging the public at high schools, churches, and other community settings.

The Overdose Prevention Work Group partnered with the University of Waterloo, School of Pharmacy to offer a community event in March 2017 for parents and teachers. Overdose prevention training was provided along with information about opioids. At numerous events we have offered training and naloxone kits for those individuals who were using opioids or had a family member or friend who used opioids. The strength of these events has been offering information from multiples perspectives, including from the policing perspective, the paramedic perspective, the addiction service provider’s perspective and from the perspective of a person who has lived experience of losing a loved one to overdose. We have also provided overdose awareness/naloxone training in Huron County (Mitchell, ON) and Guelph.

In total over 885 community members have attended local substance use/overdose awareness events since 2015. In 2017, two events were organized to recognize International Overdose Awareness Day on August 31\(^\text{15}\). These free community events were offered in two locations (Cambridge and Kitchener) for individuals and families who have been affected by overdose and substance use in our locality. In total, 300 people attend the events, and over 130 naloxone kits were distributed. Community members were offered a free barbecue, harm reduction information and resources and could partake in a ‘prayer flag’ activity to remember someone they had lost to overdose.

Over the past year, it has come to the attention of the WRIDS coordinator that Waterloo Region has been looked to as an example of how to effectively engage the community through partnerships. For instance, our Overdose Prevention Work Group includes the local police service, addictions services, people with lived experience, public health staff, youth services, and student representation from a local college. With the support of these key stakeholders,
the Work Group has been able to offer timely information using a variety of resources and perspectives and to reach a far greater audience than any one agency working alone. An example of this was a letter asking parents to talk to their children about the risks of substance use over the summer. This letter was drafted by the Overdose Prevention Work Group, signed by the Chief of Police and Chief Medical Officer and administrators of the Catholic and Public School Boards. It was circulated to all parents/guardians during the last week of school (June 2017). A second letter, with similar content, was distributed before winter holidays in 2017.

Next steps for the Overdose Prevention Work Group will be to expand components of a secondary school overdose training program offered by Public Health nurse and a mother who lost her son to overdose in Elmira High School to additional high schools across the Region. An evaluation of this program is currently underway with the hope of replicating portions of it in both secondary school boards (Public and Catholic). The Group is also exploring how to outreach to local university and college campuses and to music festivals in order to provide overdose prevention information and training.

• **Engaging the Community Online and through Social Media**

Since 2015 the WRIDS has worked to create an online presence through the website (www.waterlooregiondrugstrategy.ca) and twitter account (@DrugStrategyWR). In the fall of 2016, the WRIDS coordinator worked closely with a volunteer web developer to revise the website to make it more user-friendly and accessible. The homepage of the website is used to provide news and updates and to post new materials and resources. A section of the website has been designed specifically to engage youth, parents and teachers looking for prevention materials for youth, along with an invitation to submit feedback on the resources. The OMARS overdose reporting survey is included on our webpage, as is paramedic and police services data related to overdose and quarterly overdose bulletins. For individuals seeking local supports, a list of addiction services and agencies are included, as are videos and resources regarding overdose prevention and use of naloxone developed locally by a pharmacy professor at the University of Waterloo and our Public Health Department.

A twitter account was launched in September 2015. The twitter account is used to disseminate and highlight local information, upcoming events and updates in the Waterloo Region. OMARS bulletins and alerts are also circulated via twitter. Currently the WRIDS twitter account has 298 followers and has tweeted over 450 times. In many cases, ‘tweets’ direct individuals back to the WRIDS website to access more fulsome information regarding overdose, substance use and availability of local supports.

• **Strengthening Local Monitoring of Overdose Events**
Region of Waterloo is now one of a few communities in Ontario to have an Overdose Monitoring System. The OMARS Committee (Overdose Monitoring Alert and Response System) has worked to expand its membership and data sources by bringing on additional partners. In the fall of 2016, Region of Waterloo Public Health and Paramedic Services joined the committee. Over the next few months, the committee finalized a framework for monitoring overdoses, and alerting the community, including protocols for communication and alerting criteria.

In December of 2016, the committee issued its first public ‘Alert’ of the year after carfentanil was detected in the local drugs supply. This alert was circulated among service providers, people who use drugs and through the media. In January 2017, the committee launched a community reporting survey whereby individuals could report an overdose for themselves or someone they know following the event. Newly developed wallet cards and posters point individuals to www.omars.ca to complete the confidential survey.

The purpose of OMARS was to fill a gap in knowledge regarding the prevalence of overdose (fatal and non-fatal) in the absence of recent standardized local data. Using a triangulation of data (including the community reporting survey, paramedic service calls, police calls where the issue identified was ‘overdose’, hospital data related to opioid overdose related admissions and naloxone kit distribution numbers by methadone clinics, Public Health and Sanguen Health Centre) the OMARS committee has worked to provide a larger picture of the issue of overdose in our community.

Our newly revised framework was presented to Regional Council on April 25th, 2017. In May 2017, OMARS released its first quarterly bulletin to the community which included Paramedic Service calls for opioid related overdose, naloxone administrations, naloxone distribution, and information from the community survey. This bulletin (and others to follow) directs the public to the WRIDS website for more information and support. The WRIDS website houses paramedic services data (updated biweekly), suspected overdose fatality numbers from Police Services (updated monthly), the bulletins and other overdose related data, including alerts. The Committee continues to work to provide ‘real-time data’ and to plan for how we can draw upon the data to support the expansion of harm reduction and treatment services in our community. We have been invited to share our framework with Hamilton, Haliburton, Kawartha Lakes and Northumberland, and Guelph/Wellington Drug Strategies who are likewise exploring the potential of a community-based reporting system.

- Increased collaboration between Prevention and Harm Reduction for local youth
In the past year, there has been increasing collaboration between the Prevention Coordinating Committee and the Overdose Prevention Working Group. This can be attributed to the changing landscape of drug use in Waterloo Region and both groups’ efforts to be nimble at providing information and tools to parents, youth and teachers in our community. In particular, the Prevention Committee moved quickly to create a resource on opioid use and naloxone to be used at community events organized by the Overdose Prevention Work Group. In addition, both groups collaborated on letters distributed through the Waterloo Regional Police Force and Waterloo Region Public Health asking parents to speak to their children about the risks in using substances and the potential for overdose due to fentanyl (June and December 2017).

The extent of the collaboration happening between committees and committee members of the Drugs Strategy is a testament to the dedication of members to eradicating the harms due to substance use and the value of many hands working together towards a common solution. Currently, the Prevention Coordinating Committee is exploring how it might partner with a Substance Use Planning Group at the Region of Waterloo Public Health to combine efforts to make recommendations regarding future programming, supports and education for youth across the Region.

A key accomplishment of the Prevention Coordinating Committee was securing a $10,000 grant from the Kitchener-Waterloo Community Foundation. This grant will be used to collate and create cannabis prevention content that focuses on delaying onset of use, is Regional, and includes not just teachers, but parents and the broader community. The funds will be used to hire a University of Waterloo Pharmacy co-op student in 2018 to finalize and implement the program.

There is potential for even more collaboration between the Prevention Committee and the Overdose Work Group in that there is a desire by all committees to see the expansion of components of the Overdose Prevention Training program (currently only offered in Elmira High School) in secondary schools across the Region. The program is delivered by a Harm Reduction Public Health Nurse and a mother who lost her son to an accidental overdose – both members of the Overdose Prevention Work Group. Currently, an evaluation of this program is taking place with the hope to replicate it in other schools.

- **Increasing Access to Addiction Medicine**

The Rehabilitation and Recovery Pillar of the WRIDS has focused on piloting a Rapid Access Addiction Medicine Clinic (RAAC) in Waterloo Region, recognizing that many individuals with substance use disorders encounter stigma and prejudice when seeking medical attention for their addiction. In October 2016, a dedicated group of addiction service providers committed
to working on this project for six months. A RAAC provides timely access to individuals who require medical stabilization and psycho-social support due to a substance use issue. The goal of the service is to stabilize the patient, provide referrals and then facilitate a coordinated handoff back to the family physician. Care pathways are established in the community between addiction services, emergency departments, family doctors and RAAC clinics to ensure that individuals with addictions issue face as few barriers as possible when accessing care. The RAAC is a project of METAPHI through Women’s College Hospital and has been piloted in seven communities across Ontario.

The RAAC working group has outlined the scope of the service, the needs of the location as well as staffing requirements. Over the summer of 2017, individuals with lived experience were invited to tour possible locations for the RAAC and to provide feedback on these locations to guide the working group in their decision regarding a ‘hospital’ versus ‘community’ setting. The goal of the working group is to choose a site where the clinic could have a leveraging impact, in that it would build the capacity and knowledge of the staff already in the setting. With additional funding from the province announced in the Fall of 2017, work is underway to pilot two locations (Kitchener and Cambridge) in Spring 2018.

- **Advocacy and Collaboration from Justice and Enforcement Coordinating Committee**

The Justice and Enforcement Pillar (JE) has been interested in the RAAC model, and in particular how this model may help to fill a gap perceived in this sector, namely immediate support for a person possibly facing arrest. Members of our JE Committee have emphasised that they wish to have alternative options to arrest, including options to refer individuals to a medical service in order to divert their charges. The JE Chair and the WRIDS coordinator have been providing updates to the Committee on the progress taking place regarding RAAC.

Much work has been done in the justice sector - some in relation to the WRIDS, and some which has developed independently outside of the scope of the WRIDS (due to pressures/changes from the provincial and ministerial levels). During 2016-2017, the JE Coordinating Committee explored a number of project options, including a diversion program for low-level offenders (see above). While a tangible project has not materialized for JE, this group plays a crucial role in advocating for the Region. For instance, members of the Rehabilitation and Recovery Coordinating Committee have reiterated the necessity of having the JE members updated and engaged in the strategy, in that they have a crucial role and important voice in advocating for individuals using substances who are encountering the justice system. A next step for 2018 will be to identify the best way for bringing together the JE members to ensure their continued participation in the WRIDS.
Steering Committee Highlights

Over the past number of years, the Steering Committee has evolved to transition the WRIDS from a sub-committee of the Waterloo Region Crime Prevention Council to a stand alone community-based model. This has included important discussions about our evolving model of communications, representation of issues with the media and organisational accountability across the collaborative. The Steering Committee continues to guide and support the work of Coordinating Committees and the Coordinator, while working to engage additional key partners who have an interest in reducing problematic substance use across the Region. In early 2017, the Terms of Reference were re-visited to explore which additional skills, perspectives and expertise would compliment the Steering Committee. Outreach to potential future members has also been planned for the coming months.

A large piece of work of the Steering Committee has been to advocate at the regional and provincial level for increased support to deal with the opioid crisis in Ontario. In October 2016, the Ontario government launched its Opioid Strategy. While the Steering Committee welcomed this as a first step, they also felt there was room to provide feedback on gaps in the strategy. In the winter of 2017, the Steering Committee was invited to speak with the offices of Premier Wynne and Minister Eric Hoskins after submitting a letter to both parties highlighting the gaps in the Ontario Strategy. Several members of the Steering Committee shared the potential of the ‘four pillar approach’ used in Waterloo Region and in other jurisdictions in Ontario to effect change regarding problematic substance use. They also highlighted the need for flexible and timely addiction supports for individuals facing long wait lists, as well as the need for standardized overdose monitoring to get a true sense of the scope of the problem.

The Steering Committee has also had a role in advocating regionally for the needs of individuals affected by substance use and the related services and supports in our community. The Steering Committee and Coordinator have been invited to Regional Council three times since the beginning of 2017 to present the work of the Strategy, the overdose monitoring system (OMARS), and to express support for expansion of harm reduction services including Supervised Injection Services.

As the Ontario Trillium funding draws to a close, the focus of the Steering Committee will be to begin evaluating the impact of the collaborative in our local community through an evaluation project. In particular, the Steering Committee will be interested in characteristics that define the collaborative as a collective impact initiative, including relationships between partners, mutually reinforcing activities, systems level leadership and the impact of having backbone support. (see below)
Growing and Strengthening the WRIDS Evaluation

In Year Two the WRIDS partnered with the O’Halloran Consultant Group to construct a Theory of Change and an evaluation framework to begin to measure the impact of the collaborative. The approach chosen was that of ‘Collective Impact’ recognising that reducing substance use was a complex issue, requiring partners from multiple sectors, leadership at the systems level, and a dedicated backbone structure to support work and initiatives. With the support of the O’Halloran Group, a framework was developed including determining potential outcomes at the systems, services and individual levels and a number of evaluation questions to be implemented with the collaborative. The O’Halloran group also conducted interviews regarding strengths, challenges and opportunities of the collaborative with key stakeholders and implemented a survey which was completed by one-third of the WRIDS membership.

Part of the work of the Steering Committee is to determine the next phases of work required to ensure the sustainable life and necessary evolution of the strategy and its impact. In the summer of 2017, the WRIDS is partnering with drugs strategies across Ontario in a provincial evaluation project guided by the University of Toronto’s Strategy Design and Evaluation Initiative (SDEI). The purpose of this project is to outline common outcomes, activities and inputs across drugs strategies and to potentially use evaluation findings to advocate for additional support/recognition of the work of drugs strategies provincially. The WRIDS has dedicated funds to partner with the SDEI to build an evaluation framework and set of tools to be used by drugs strategies at various stages of implementation. In additional, the WRIDS has signed on to be a pilot site to test the suggested evaluation tools and activities and to receive personalized coaching from the evaluation specialists. The coaching and trial of some evaluation tools will take place over the fall and winter of 2017. In particular, evaluation activities will help to answer where and how the collaborative is making progress, and in what ways and to what extent does the collaborative foster change at the systems and service levels? These evaluation activities will be used to report back to the Ontario Trillium Foundation, to identify areas of future collaboration and relationship building and to help create a plan for sustaining the collaborative past year three.

Future Challenges and Opportunities

In addition to strengthening the WRIDS evaluation and seeking out sustainable funding opportunities, the steering committee has identified a number of additional challenges and opportunities in the coming years:

- Expansion of the collaborative – the WRIDS hopes to engage additional sectors and partners in the Drugs Strategy by working to add partners from the business/private
sector, industry partners and to re-engage with key community players who have been absent from the collaborative.

- **Staying nimble to the ever-changing landscape of substance use** – partners at the WRIDS recognize that substance use and addiction is changing rapidly across our Region and Canada. This presents an opportunity to the WRIDS to stay nimble to issues that emerge in our community and flexible enough to provide a timely response. One emerging challenge is the increase of use of crystal methamphetamine in our region and the associated harms from its use (including challenging behaviours and meth-induced psychosis).

- **Working towards health equity** – the WRIDS recognizes that substance use is stigmatized and often leads to inequity in health and social care in addition to marginalization by our society. The work of improving education around addiction, substance use and recovery is ongoing, both with the general public and with service providers/health care professionals. This means continuously working against stigmatizing messages about substance use and people who use drugs and providing alternative messaging that recognizes the complexity of substance use, substance use as a chronic complex medical issue, and the relationships between trauma and substance use.

- **Creating and implementing Region of Waterloo’s Opioid Response Plan** - In the coming months, the WRIDS Steering Committee will collaborate with Public Health to co-create an opioid response plan for our community. The draft Opioid Response Plan will acknowledge and build upon existing work in the community, enhancing integration, and reflecting strategies to further prevent and respond to overdoses in our community.

- **Leveraging the legalization of cannabis** – the upcoming legalization of cannabis will provide increased opportunities for the WRIDS to create new partnerships in order to expand substance use prevention and ‘delaying use’ messages. The WRIDS will seek to strengthen relationships with school boards and parents’ groups in order to identify what knowledge/tools are needed and how best to deliver them.