Views expressed in the attached document do not necessarily represent those of the Ministry of Health and Long Term Care or those of Kingston Community Health Centres. If you have any questions related to the document, you are encouraged to contact the source.
OVERVIEW

- Introduction
- Harm Reduction in Ontario
- Needle Exchange Data
- SIS Policy Framework
- SIS Program Funding Process
- SIS Program monitoring and evaluation activities
- Next Steps
The MOHLTC is establishing a provincial funding program for Supervised Injection Services (SIS) that aims to reduce the harms associated with injection drug use in Ontario.

The program will use a phased-in approach to support three locations for SIS in Toronto and one in Ottawa, pending their required exemption from federal legislation under section 56.1 of the *Controlled Drugs and Substances Act*, and will use evidence and comprehensive surveillance data to consider future applications for SIS on a case-by-case basis.

SIS operators are responsible for overall SIS project execution. This includes monitoring, tracking, and reporting to the MOHLTC on ongoing SIS activities on an annual basis including impacts to public health and community safety.

Priority for provincial funding will be given to proposals that demonstrate the ability and the capacity to offer SIS in an integrated service environment, one in which a variety of other onsite harm reduction, health, and/or social services exist that can be offered to users of the SIS.

Proposals for funding will be assessed to ensure that:

- Key elements of the program’s funding criteria are met including demonstrated community need, local engagement, capacity, integration, and accessibility, and
- Proposed costs are valid and reasonable as described through a breakdown of costs and detailed financial and design plans for renovations and retrofits.
Needle Exchange Data, 2015

Needles/Syringes Distributed by PHU, 2015*

* January 1 - December 31, 2015. Preliminary data reported by Public Health Units.

Legend

- Under 250,000
- 250,000 - 500,000
- 500,000 - 750,000
- 750,000 - 1,000,000
- 1,000,000 +
- Incomplete Data*

* Health Unit Border
Needle Exchange Data, 2016

Needles/Syringes Distributed by PHU, 2016*

Legend

- Under 250,000
- 250,000 - 500,000
- 500,000 - 750,000
- 750,000 - 1,000,000
- 1,000,000 -
- Incomplete Data *

* January 1 - December 31, 2016. Preliminary data reported by Public Health Units.
Enhancing addiction supports and harm reduction is a key component of Ontario’s Opioid Strategy.

Harm reduction is: an evidence-based public health strategy aimed at reducing the individual and societal harms associated with drug use; is based in choice; and recognizes that abstaining from drug use may not be realistic or desirable for all individuals.

Ontario has a long-standing and strong commitment to harm reduction programs that have proven successful at preventing the transmission of HIV and HCV.

Current harm reduction programs in Ontario are limited to needle exchange, provision of naloxone to PHUs, pharmacies and prisons, providing harm reduction supplies, and connecting clients to other health and social services, but do not include SIS.

SISs are part of the continuum of harm reduction services where people who inject drugs can inject pre-obtained drugs under the supervision of clinical staff.

SISs provide an immediate response to an overdose, can increase access to other health and social services for an otherwise highly marginalized population, and can reduce other problems associated with the public consumption of drugs.
**SIS POLICY FRAMEWORK**

The policy framework outlines the policy goal and objectives, key elements of focus, and anticipated outcomes guiding the development and implementation of the provincial SIS program:

**Goal:** To reduce the harms associated with injection drug use in Ontario

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Key Elements</th>
<th>Key Indicators</th>
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<tbody>
<tr>
<td>• Reduce the rates of infectious diseases associated with injection drug use</td>
<td>1. <strong>Need and Community Engagement</strong>&lt;br&gt;Local health organizations that operate SIS have the capacity to provide supervised injection services effectively and efficiently</td>
<td>Safer injecting behaviours</td>
</tr>
<tr>
<td>• Reduce the risk of overdose morbidity and mortality associated with injection drug use</td>
<td>2. <strong>Capacity</strong>&lt;br&gt;Supervised Injection Services are integrated with other harm reduction and health services</td>
<td>Increased number of injection drug users connected to integrated services</td>
</tr>
<tr>
<td>• Expand access to provincial harm reduction programs</td>
<td>3. <strong>Integration</strong>&lt;br&gt;SIS are accessible to those who need them based on prevalence of injection drug use, and accessible to those with disabilities.</td>
<td>Increased number of injection drug users entering treatment</td>
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<tr>
<td>• Link vulnerable populations to other health and social services as appropriate</td>
<td></td>
<td>Decreased incidents of injection drug related overdose</td>
</tr>
<tr>
<td>• Decrease public consumption of illicit drug use</td>
<td></td>
<td>Decreased burden on health care system</td>
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</tbody>
</table>

**Outcomes**
- Safer injecting behaviours
- Increased number of injection drug users connected to integrated services
- Increased number of injection drug users entering treatment
- Decreased incidents of injection drug related overdose
- Decreased burden on health care system
- Reduced drug-related transmission of infectious disease

**Key Indicators**
- **Drug use and crime data**
  - Public illicit use
  - Crime rates in vicinity of SIS
- **SIS service usage**
  - Frequency of use
  - Services offered
  - Reasons for using services
- **Service referrals**
  - Health services
  - Social services
- **EMS callouts**
  - For injection drug overdoses
- **Overdose data**
  - Cases treated
  - Fatal incidents
- **Hospital data**
  - Overdose related ER visits
  - Overdose related hospital admissions
- **Infectious Disease**
  - Risky injecting practices
  - Sexual transmission
The SIS program process guides the assessment, implementation, and ongoing evaluation of every eligible application to establish SIS through the proposed SIS Program.

1. Review & Validation Process
   - Applicant submits proposal to establish SIS to the Ministry
   - Ministers & CMOH submit letters of opinion for applicant's proposal to the federal Minister of Health
   - Ministry reviews application against funding criteria

2. Funding Agreement
   - Funding approval granted by province pending federal exemption
   - Funding agreement signed between applicant and province
   - MOHLTC monitoring, surveillance, and oversight of SIS Program

3. Monitoring & Evaluation
   - SIS financial reporting & evaluation of impacts & outcomes of SIS Program

MOHLTC decision made
Federal exemption granted
Implementation by applicant of SIS
The provincial funding program review process seeks to ensure that the key elements of the program's funding criteria are met and that the distribution of SIS receiving provincial funding across the province is as equitable and sustainable as possible.

Eligibility to operate SIS through federal exemption does not guarantee that applicants will be granted provincial funding support. Letters of opinion do not guarantee provincial financial support.

An inter-ministerial review panel, including MCSCS and Municipal Affairs will be established for future applications.

Eligible operational and capital costs are those that relate directly to the safe, effective, and efficient service delivery of SIS.

### Operational Review
- Led by Population and Public Health Division
- The operational review is guided by the SIS funding program's operational cost principles

### Capital Review
- Led by Health Capital
- The Community Health Capital Policy and Program (CHCP) represents a unified approach for the review, approval and funding of community health care capital projects
- The CHCP process utilizes an excel “toolkit” to assist applicants in developing design plans that adhere to consistent ministry cost share and space eligibility guidelines
## SIS FUNDING PROGRAM: OPERATIONAL COST PRINCIPLES

<table>
<thead>
<tr>
<th>Principle</th>
<th>Description</th>
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<tr>
<td>Scalable</td>
<td>Applicant’s ability to use a phased-in approach to scale-up (or scale-back) the SIS over time to safely and effectively expand/contract the SIS in response to demand that would be monitored consistently.</td>
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<tr>
<td>Strategically Aligned</td>
<td>Applicant’s existing, or proposed, organizational structure and resources (including other sources of funding and/or support to be received) are aligned with the stated objectives of the SIS and appear reasonable in the pursuit of the efficient use of funds and minimization of surplus and repetition.</td>
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<tr>
<td>Demonstrated Evidence-Informed Need</td>
<td>A clear rationale, explanation of the role and function, and supporting evidence are provided that demonstrates the necessity of each staffing and operational cost item requested.</td>
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<td>Leveraging Existing Funds</td>
<td>For integrated SIS models, evidence of how existing operational funds, equipment, and personnel will be leveraged within the applicant’s current budget allocation to help meet the demands of operating SIS.</td>
</tr>
<tr>
<td>Complementarity</td>
<td>For integrated SIS models, information on other funding that the applicant receives from the ministry or LHIN for programs that serve the SIS target client population and how this funding connects to the operational costs in the applicant’s SIS proposal.</td>
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The province will request that successful SIS applicants evaluate and report back on their services to the province on a monthly and annual basis.

The reporting and evaluation requirements will be outlined in the Transfer Payment agreements signed with each applicant.

To ensure that the SIS Program is successful in achieving its objectives, an evaluation framework has been developed to monitor and measure the impacts on the population and ensure appropriate provincial oversight of the SIS Program and accountability for public funds.

There are two frameworks for evaluation:

1) Implementation evaluation – an internal evaluation of individual SIS based on their monitoring, tracking, and reporting to the MOHLTC on ongoing SIS activities; and

2) Impact evaluation – a robust evaluation system to measure and assess the impacts of the SIS Program based on reporting and surveillance activities.
Other Program Considerations

- How will the implementation of SIS impact the distribution of needles, syringes and other harm reduction equipment.
- How to ensure the data required for the Ministry’s evaluation purposes is aligned with the applicants.
- How to implement the provincial harm reduction database to include a SIS module.
- How to ensure ongoing and meaningful community and engagement in support of a SIS.
An application guidance document is currently being developed by the MOHLTC to facilitate this process.

The MOHLTC is currently working with the three locations in Toronto and one in Ottawa, utilizing the application review process under development to reach final costing figures.

The MOHLTC will continue to review new applications for SIS on a case-by-case basis. To date, six applications have been received for provincial funding.