

# Addictions, Mental Health, & Homelessness:

## Supporting an Urgent Response in Kenora, Ontario

August 12, 2019

Prepared by  
Kenora's All Nations Health Partners



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### & Local First Nations

Niisaachewan  
Naotkamegwaning  
Iskatewizaagegan  
Animakee Wa Zhing #37

Asubpeechoseewagong  
Wauzhushk Onigum  
Obashkaandagaang

Wabeseemoong  
Shoal Lake 40  
Northwest Angle 33

# Brief

The City of Kenora is facing a crisis of inter-related methamphetamine addiction, mental health, and homelessness. Police, emergency services, and other front line services are overwhelmed in the absence of focused outreach, treatment, and housing services. Resources are urgently needed to support a response to the crisis and to develop a longer-term strategy for addiction and mental health supports.

The Kenora All Nations Health Partners (ANHP) are requesting resources from the Provincial and Federal governments to support the following immediate response measures and planning for longer-term solutions.

## IMMEDIATE ACTIONS

- 1) Enhance Outreach Services (Harm Reduction) and create a Rapid Access Addictions Medicine (RAAM) Clinic
- 2) Establish a Community Paramedicine Program
- 3) Reinstate the Four Directions Community Pathways Partnership

## COORDINATION & PLANNING

- 1) Develop a Community Mental Health and Addictions Service Coordinator position
- 2) Initiate the planning process to create a safe room in LWDH & a medically-supervised drug detox centre

# The All Nations Health Partners

The All Nations Health Partners (ANHP) are a coalition of leaders in Indigenous and mainstream health services in the Kenora Region. We are working to develop a health system for all people – one that is person-centered, inclusive, and culturally appropriate. Our approach is collaborative and holistic, rooted in both traditional Indigenous healing practices and the best aspects of the modern health care system.

The Ontario Ministry of Health has identified the ANHP for full development as an Ontario Health Team, promoting connected and coordinated healthcare in the Kenora Region.

As a coalition of local governments and service providers, the ANHP are well positioned to coordinate a response to the current crisis.

## Background

The City of Kenora is experiencing a growing trend in substance addiction, homelessness, mental health issues, and unsustainable first responder call volumes. An unprecedented number of community members are currently in crisis.

The Ontario Provincial Police (OPP) have reported a steady increase in the amount of crystal meth that has been seized over the past decade, from 15 occurrences in 2010, to 453 occurrences in 2015, which then doubled in three years to 890 in 2018. The OPP have stated that the impacts of methamphetamine use in Kenora have dramatically increased over the past 12-18 months.

In addition, recent fires have destroyed several low-income apartment buildings, leaving many people homeless and pushing drug use into public spaces. The result has been a drastic increase in the homeless population, a shift from alcohol use to methamphetamine and complex addictions, and increased concern over public safety.

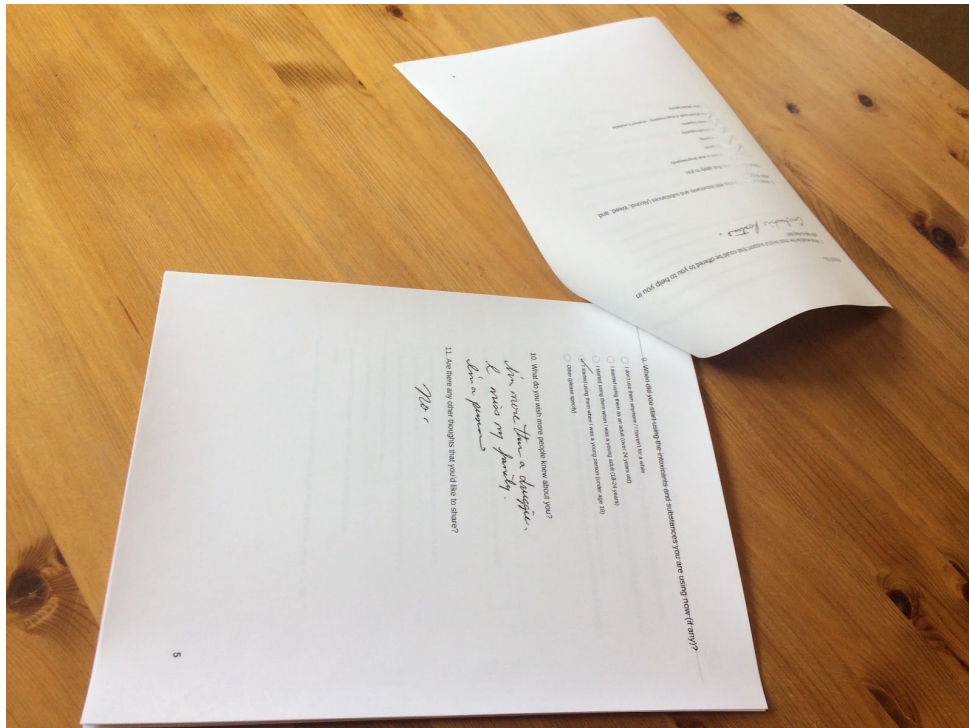
Existing support services (outreach workers, police, shelter, ambulance and hospital services) are overtaxed and failing to meet the needs of vulnerable community members – particularly with respect to the unique needs associated with methamphetamine addiction.

*“The City of Kenora needs to have an addiction and treatment centre and clinic that will support those with substance addiction issues and will provide rapid access to care. The current emergency shelter nor emergency department are designed to be treatment centres for individuals suffering from addictions to drugs such as methamphetamines. The status quo is not going to work and is resulting in tremendous pressure being put on health, community, social, and emergency services. The community needs all levels of government working together to help address the challenges facing Kenora.”*

- All Nations Health Partners

# Gaps and Needs Assessment

The ANHP have conducted an overview of services, gaps, and needs with respect to local mental health and addiction services. Engagement has included the Ontario Provincial Police, the City of Kenora, service provider organizations, primary physicians, and outreach workers. As well, 32 service recipients have provided input based on their own needs and lived experiences.



A full report on the Gaps and Needs Assessment is attached.

Significant gaps were identified in services provided in the five core areas of Prevention, Treatment, Harm Reduction, Enforcement, and Housing.

Some of the identified short term and long-term opportunities and actions have also been outlined to initiate a coordinated response by local organizations. Though this process was expedited and a more fulsome study is required to understand the full range of longer-term needs, a table of the initially identified short and longer-term actions is included in the Gaps and Needs Analysis.

# Resources Required from Federal and Provincial Governments

The All Nations Health Partners require immediate funding from the provincial and federal governments to support the following immediate response measures:

**1) Community Mental Health & Addictions Services Coordinator  
\$130,000**

A Community Mental Health and Addictions Services Coordinator will be hired to facilitate ongoing coordination amongst service providers with the aim of establishing more interconnected, collaborative, co-located, and wrap-around services and identifying redundancies in service delivery. The Coordinator will collect data, monitor activities, and evaluate outcomes. They will liaise with the existing Rapid Intervention Services Kenora (RISK) Table and support public communication about the response to mental health and addictions challenges in Kenora.

**2) Enhanced NWHU Outreach Services and development of RAAM Clinic  
\$1,083,160**

The Northwestern Health Unit (NWHU) Mobile Outreach services extend access to harm reduction services for a difficult to reach population. The clients served by Mobile Outreach Services face significant barriers in accessing formal healthcare in fixed existing locations including: lack of transportation, inability to make or keep appointments, no health card of identification, fear of discrimination, and severe mental health and addictions issues.

The Outreach Van visits various locations in the community including public buildings such as the Fellowship Centre and shelter, private dwellings, and outdoor locations where clients who are not housed typically gather. Services include: Sexual Health clinical services; Needle Exchange/Sharps pickup; Overdose Prevention/Naloxone Kits; STI/BBI Testing and Treatment; Infectious Disease Follow Up; Immunizations; and Education, Counselling and Referrals.

Mobile Outreach services have been operating two afternoons per week, but are not able to meet demand. The proposed funding is to increase Outreach Services, to ensure funding for physician participation, and establish a fixed location for additional service provision.

**3) Community Paramedicine Program  
\$485,350**

A Community Paramedicine Program would provide frontline services in the community and connect clients with services that could support them. By bringing preventative care to

homeless shelters, social housing and seniors through Paramedic driven home style visits; long term hospital visits and re-admissions are reduced. The program would assist with chronic disease management, medication compliance and understanding, mental health assessments and referrals, wound care, falls assessments, and other health care services.

Community Paramedicine Program Service Delivery activities would include:

Community Referrals by EMS program (CREMS) - Paramedics refer eligible patients to community-based care options after a brief assessment while responding to an emergency call.

Assessment and on-site treatments - The KDSB is a central figure in assisting local vulnerable population and is a perfect fit for programs such as Community Health Assessment Program (CHAP) EMS where Paramedics bring assessment, care, social and health care continuity to those in need.

#### 4) Planning Process for Safe Room & Medically-supervised Drug Detox Centre \$100,000

A need had been identified for specific supports for medical supervision designed specifically for individuals who are under the influence of methamphetamines and/or experiencing psychosis. This includes a safe room connected to the Emergency Department at the hospital to address the unique needs of people who are experiencing methamphetamine-induced symptoms and psychosis. It also includes a medically-supervised drug detox facility, potentially also located within the hospital.

#### 5) Four Directions Community Pathways Partnership \$75,000

This community-based framework uses culturally competent student support navigators to coordinate health and social services for at-risk students, particularly indigenous students transitioning from other communities or who have moved from northern communities to attend secondary school. Support extends beyond the school setting to also address the complex social and physical home and community dynamics that contribute to low graduation rates, mental health issues, substance misuse, and other poor health related outcomes.

TOTAL BUDGET

\$ 1,873,510

ADDICTIONS, MENTAL HEALTH and HOMELESSNESS:  
Supporting an Urgent Response in Kenora, Ontario

## Budget

	Salary/Benefits	Expenses	Capital	Total
<b>IMMEDIATE ACTIONS</b>				
<b>1 Community Mental Health &amp; Addictions Services Coordinator Position</b>				
Coordinator	\$120,000			
Equipment and Supplies		10,000		
Subtotal	\$120,000	\$10,000		\$130,000
<b>2 Enhanced Outreach Services (Harm Reduction) and RAAM Clinic</b>				
Physician or Nurse Practitioner - 4 afternoons/week (\$150/hr)	\$156,000			
Administration staff - 25 hours/week	\$43,000			
2 Registered Practical Nurses	\$140,000			
Social Worker	\$90,860			
Cultural Coordinator	\$73,300			
2 Peer Support Workers	\$140,000			
Operating Costs (medication, needles and disposal)		\$95,000		
Professional Development		\$20,000		
Mobile vehicle (refurbished ambulance)			\$150,000	
Fixed site for programming and service provision			\$175,000	
Subtotal	\$643,160	\$115,000	\$325,000	\$1,083,160
<b>3 Community Paramedic Program</b>				
3 Paramedics - Full-time wages and benefits	\$312,000			
Ancillary Services (Blood Work analysis)		\$25,000		
CP Training and Professional Development		\$24,000		
Vehicle for CP Duties			\$80,000	
Equipment and supplies			\$44,350	
Subtotal	\$312,000	\$49,000	\$124,350	\$485,350
<b>4 Planning process for creation of safe room at LWDH &amp; medically-supervised drug detox centre</b>				
Professional fees		\$100,000		
Subtotal		\$100,000		\$100,000
<b>5 Four Directions Community Pathways Partnership</b>				
Student Support Navigator - Beaver Brae Secondary		\$75,000		
Subtotal		\$75,000		\$75,000
<b>TOTAL BUDGET</b>				<b>\$ 1,873,510</b>