



For Information Only

Harm Reduction Shelter

Presented To: Community Services
Committee

Presented: Monday, Feb 03, 2014

Report Date Monday, Jan 27, 2014

Type: Managers' Reports

Recommendation

For Information Only.

Finance Implications

There are no financial implications at this time.

Background

At the January 20th, 2014 meeting of the City of Greater Sudbury's Community Services Committee, a request to provide options for a potential "harm reduction" shelter was made. As a first step in developing a program, this report will provide background information regarding harm reduction (or wet) shelters and will report on some of the current research and literature, an update of what has happened to date in the community regarding this project, and the next steps.

Addressing the needs of the homeless in our community has been identified within the civic engagement/social capital pillar of the City of Greater Sudbury's Healthy Community Charter.

The Philosophy

Harm reduction shelters (also referred to as wet shelters) have recently been piloted in urban centres as an alternative to treatment programs and shelters that require abstinence from alcohol. The shelters provide specific, prescribed amounts of alcohol in an effort to provide a safe shelter for individuals that are unable to abstain from drinking and therefore have difficulties gaining access to other shelters. By controlling the alcohol intake, harm reduction shelters can decrease the consequences of substance abuse, that participants do not become dangerously impaired, and that they are in a safe environment during impairment. The research in the field has indicated that although the best option from a health perspective is a program that offers detoxification (through abstinence), the likelihood of rehabilitation among homeless people that are also alcoholics, is low. Harm reduction is a policy to decrease the adverse consequences of substance use without requiring abstinence.

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There are reported societal benefits of harm reduction shelters as well. People who are homeless and chronically alcoholic have increased health problems, use of emergency services and police contact, and are less likely to experience rehabilitation. The ability to provide shelter and a more controlled use of alcohol can decrease the above noted issues.

Existing Programs

Some urban centres in Ontario have initiated harm reduction programs to help address the homelessness issue in their communities. Thunder Bay, Toronto, Hamilton and Ottawa have shelters that utilize a management of alcohol approach.

Ottawa Inner City Health

The City of Ottawa currently offers a harm reduction shelter operated by Ottawa Inner City Health, Inc. The program offers 28 beds and provides staff to manage the program. Participants in the Management of Alcohol program live at the shelter and are served their meals in the program. A client care worker from the Ottawa Inner City Health is available each day to assist clients with nutrition, hygiene, health needs and medications. Nurses and doctors visit periodically to assess and treat participants. Participants are encouraged to seek health care from family doctors, specialists and the hospitals, as their health problems would indicate.

Participation is contingent on participants consenting to:

- Comply with the "house rules" which are set in partnership by staff and the other clients in the program,
- Participating in health care provided by a team of health care professionals,
- Contributing \$100 of their \$118 personal needs allowance (Ontario Works benefit) toward the cost of alcohol.

To date, formal evaluation of the program has demonstrated positive health outcomes for participants and significant cost savings to taxpayers.

Seaton House - Toronto

Since 1997, the City of Toronto has operated the Seaton House Annex Harm Reduction Program; a "wet shelter" operated in cooperation with St. Michael's Hospital using harm reduction principles. The facility has 150 beds reserved for the chronically homeless with alcohol use issues. Under the "managed alcohol" policy, measured amounts of alcohol are provided at regular intervals during the day and early evening. Clients have been found to gradually reduce their intake of alcohol (up to 400% reduction) and many have quit entirely. Additional positive outcomes have included: decreased police/legal system interactions and emergency room visits for the participants have decreased (reportedly an 85% drop in days spent in prison overall and an 84% drop in ER visits among problem drinkers in the program) (Toronto Star, March 8, 2013).

Claremont House Special Care Unit - Hamilton

Operated by Wesley Urban Ministries in Hamilton, the Claremont House Special Care Unit provides 16 beds offering a program with coordinated health care and managed alcohol treatment. The program was initiated in March 2006 and leverages the services of community health care providers and social service agencies to deliver "clinical evidence based care". A comprehensive treatment model offered through a multi-disciplined team approach is utilized to deliver:

APPENDIX “A” – HARM REDUCTION SHELTER UPDATE – AUGUST 11, 2014

Managed Alcohol Treatment
Harm Reduction Strategies
24/7 Nursing Care
Physician Care
Psychiatric Care
24/7 Social Services
Counseling
Housing
Health Assessment & Monitoring
Stage Based Motivational Strategies

Shelter House - Thunder Bay

Kwae Kii Win opened its 15-bed centre for both men and women in March 2012.

The Kwae Kii Win Centre Managed Alcohol Centre provides supportive living for 15 people who have experienced long term homelessness and addiction to alcohol. By providing supportive housing, combined with accessible health care, nutritious food and psycho-social supports, residents at the Kwae Kii Win Centre reduce dangerous drinking levels and rely less on emergency services to meet their health and social needs.

Kwae Kii Win Centre offers a harm reduction approach to alcohol use, by allowing clients to consume managed doses of alcohol on site.

The program provides access to primary care and community supports to assist each client in improving his or her wellness and health overall, leading to more positive outcomes for both the individual and the community.

Progress To Date

In August 2013 City Social Services' staff was contacted by staff from the North East Local Health Integrated Network (NELHIN) to discuss possible partnership opportunities for providing service to persons who have active addictions and are homeless or at risk of homeless. The NELHIN reported that these service groups are extremely high users of the emergency department at the hospital, and they were exploring more effective and efficient ways to provide health care services to this population.

In the City of Greater Sudbury's Housing and Homelessness Plan presented to Council in November 2013, the following priority was identified:

There is a need to strengthen approaches to preventing homelessness, increase the diversity of emergency shelter options and support individuals with multiple barriers in obtaining and maintaining their housing.

Over the past few months, the NELHIN, hospital, community partners and City staff have continued to work together to explore community resources and best practices from other communities for meeting the needs of this vulnerable population.

Next Steps

The following are the next steps to move this project forward:

A Value Mapping Session, organized by the NELHIN, is being planned to be held for the third week of March 2014. This two day session will include front line staff from homelessness and health care service providers and will explore ways to create safe and appropriate care for individuals with chronic substance abuse and who are currently homeless or at risk of homelessness.

Continuous research of best practices across communities.

A progress report to be brought forward to the Community Services Committee in June 2014.