Community Impact of the Streetworks Supervised Consumption Service at George Spady Society

A report compiled for the Office of Controlled Substances, Health Canada George Spady Society July 21, 2018

Acknowledgments

This report was prepared with the assistance of Hannah L. Brooks (Data Coordinator), Kelsey Speed (Research Coordinator), Daniel O'Brien (Research Assistant) and Elaine Hyshka (Assistant Professor) from the University of Alberta School of Public Health. We would also like to acknowledge the efforts of staff at the City of Edmonton, Edmonton Police Service, and Alberta Health Services who either supplied or attempted to supply us with information for inclusion in this report.

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List of Abbreviations

AMSISE Access to Medically Supervised Injection Services in Edmonton

COE City of Edmonton

CLC City of Edmonton Supervised Consumption Services Community Liaison

Committee

EMS Emergency Medical Services
EPS Edmonton Police Service
GSS George Spady Society

SCS Supervised Consumption Services

Glossary

Community member A person who visited the George Spady Society

Supervised Consumption Service and was registered into

the NEO 360 computer database system

1. Executive Summary

This report responds to Health Canada's requirement for a special 90-day report, stated as follows in the federal exemption letters to Access to Medically Supervised Injection Services Edmonton in Other Terms and Conditions clause 18:

You must provide a report of the impacts of the supervised consumption services on the neighbourhood where the Site is located. These impacts could include, but are not limited to, general demographics of the clients served, public complaints, overdoses in the vicinity, drug-related crime, improperly discarded syringes, public disorder, ongoing community engagement and mitigation efforts, etc. The report should be sent to the OCS [Office of Controlled Substances, Controlled Substances Directorate, Health Canada] 90 days after the Site begins offering services to the public and will be made publicly available.

This 90-day report captures data from individuals who visited the George Spady Society supervised consumption services during the first 60 days of operations, as well as available data from external sources. The Boyle Street Community Services supervised consumption services report was sent to Health Canada on June 23, 2018. Additional data will be analyzed and reported 90 days after the opening of the supervised consumption service at the Boyle McCauley Health Centre.

The George Spady Society supervised consumption services opened on April 23, 2018 and the 60-day reporting period ended on June 21, 2018. Between April 23 and June 21, 2018, 357 unique individuals (henceforth known as community members) visited the site. Of these 357 community members, 252 (71%) were male, 188 (53%) identified as First Nations, Metis, or Inuit, and 323 (90%) identified as living in downtown or central Edmonton. These community members had a mean age of 39 with an age range of 18 to 69.

Community members made a total number of 4,243 visits to the George Spady Society supervised consumption services with an average number of 71 visits per day. Community members consumed drugs in 3,849 (91%) of the visits; in 2,725 (71%) consumption episodes, community members reported consuming opioids or opiates and in 1,139 (30%), they reported consuming crystal methamphetamine or amphetamines. Of the 357 community members who visited the site, 345 (97%) were provided at least one internal service, and 244 (68%) were provided at least one referral to an external service provider. A total of 43 overdose events were successfully reversed.

Some of the anticipated data from external sources for this report were not available at the time of writing but will be included in documentation as they become available, i.e. information on the frequency of overdose incidents in the vicinity of the Site from Alberta Health Services, the frequency of calls to the Edmonton Police Service and non-criminal and criminal incidents, and data on discarded syringes in the vicinity from the City of Edmonton.

2. Background

The Edmonton Drug Use and Health Survey conducted in 2014 examined the health service needs of people who use drugs in Edmonton's inner city. The study findings indicated high rates of problematic substance use, syringe sharing, public injecting, and overdose incidents amongst community members residing in Edmonton's inner-city¹. The authors of the study recommended the implementation of medically supervised consumption services (SCS) as one strategy to reduce morbidity and mortality-related to injection drug use. SCS provide people who inject drugs with access to sterile injection supplies, a supervised environment to inject pre-obtained drugs, emergency medical care, and wrap-around health and social supports.

Access to Medically Supervised Injection Services Edmonton (AMSISE) formed in 2012 as a coalition of representatives and organizations that support the establishment of SCS in Edmonton. AMSISE applied for and received exemptions pursuant to s. 56.1 of the *Controlled Drugs and Substance Act* to operate SCS at Boyle Street Community Services (BSCS), George Spady Society (GSS), and Boyle McCauley Health Centre. As per the terms and conditions set out in the letters of exemption (clause 18), AMSISE is required to provide a report to Health Canada 90 days after the three SCS sites begin offering services. The focus of these reports is to describe the short-term impacts of the SCS on the community. This report includes data from the first 60 days of operations at the GSS SCS.

An intake is completed the first time a community member visits the GSS SCS and data collection continues on each subsequent visit. This report includes data collected from community members who visited the GSS SCS from the opening date, April 23, 2018, through to June 21, 2018, the first 60 days of operations, as well as information gathered from GSS staff.

¹ Hyshka E, Anderson J, Wong Z-W, Wild TC. Risk behaviours and service needs of marginalized people who use drugs in Edmonton's inner city: Results from the Edmonton Drug Use and Health Survey. School of Public Health, University of Alberta. 7 Jan 2016. Available from: https://crismprairies.ca/wp-content/uploads/2017/02/Edmonton-Drug-Use-and-Health-Survey-Dr.-Elaine-Hyshka-January-2016.pdf.

3. Community member data

3.1 Number of community members who visited the GSS SCS during the first 60 days of operations

There were 357 unique community members who visited the GSS SCS between its opening on April 23 and June 21, 2018 (the first 60 days of operations)². Of these 357 community members, 353 (99%) reported that were staying in Edmonton at the time of their first visit, 4 (1%) reported they were staying out of town. The majority (68%; n=241) visited the GSS SCS more than once, with the total number of times for each community member ranging from 1 to 252. The number of unique community members who made first-time visits to the GSS SCS is displayed by week in Figure 1.

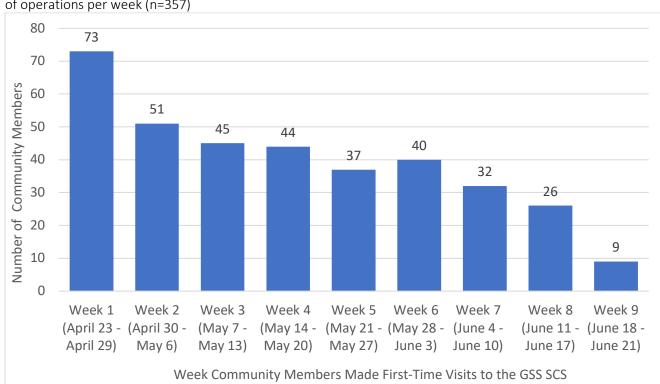


Figure 1: Number of unique community members who made first-time visits the GSS SCS during the first 60 days of operations per week (n=357)

NB: The dates where the GSS SCS was closed all day have been excluded. The dates where the GSS SCS was partially closed have been included. The GSS SCS was open 24 hours on some weekends.

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² The BSCS SCS opened on March 23, 2018 and is located adjacent to the GSS SCS, although the operating hours are different. From April 23, 2018 to June 21, 2018, the reporting period for the GSS SCS, BSCS SCS had 294 unique clients. Of these 294 unique clients, 181 (62%) also visited the GSS SCS at least once.

3.2 Gender of community members who visited the GSS SCS during the first 60 days of operations

The observed gender of each community member was recorded upon intake. For the purposes of this report, a community member's gender was assumed to not change during the reporting period.

Of the 357 unique community members who visited the GSS SCS, 252 (71%) were male and 105 (29%) were female. The gender of community members is displayed in Table 1.

Table 1: Gender of community members who visited the GSS SCS during the first 60 days of operations (n=357)

Gender	Frequency	Percent
Male	252	71%
Female	105	29%

3.3 Age of community members who visited the GSS SCS during the first 60 days of operations

The birthdate of each community member was recorded once. For the purposes of this report we provide community members' age on first visit to the SCS.

The 357 community members who visited the GSS SCS had a mean age of 39 years and an age range of 18 to 69. The age of each community member is displayed in Figure 2.

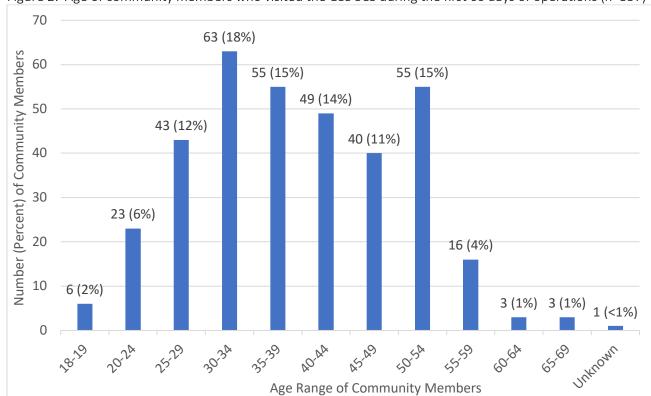


Figure 2: Age of community members who visited the GSS SCS during the first 60 days of operations (n=357)

3.4 Ethnicity of community members who visited the GSS SCS during the first 60 days of operations

The observed ethnicity of each community member was recorded at intake. For the purposes of this report, a community member's ethnicity was assumed to not change.

Of the 357 community members that visited the GSS SCS, 188 (53%) were identified as First Nations, Metis, or Inuit, 159 (45%) as Caucasian, 2 (1%) as African or Caribbean, 1 (<1%) as Middle Eastern, 1 (<1%) as Latino, and 6 (2%) as Other. The ethnicity of each community member is displayed in Figure 3.

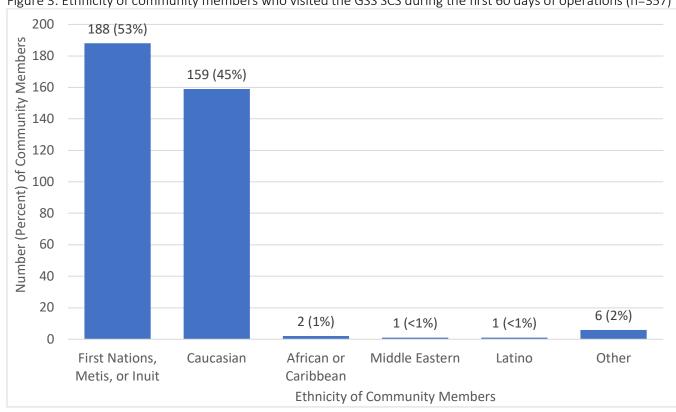


Figure 3: Ethnicity of community members who visited the GSS SCS during the first 60 days of operations (n=357)

4. Data on visits to the GSS SCS during the first 60 days of operations

4.1 Hours of GSS SCS operations

The GSS SCS opened on April 23, 2018. From April 23 to April 27, 2018, the GSS SCS was open seven days a week from 18:00 h to 8:00 h. From April 28 to June 21, 2018, the GSS SCS was open Monday through Friday from 16:00 h to 8:00 h and 24-hours a day on Saturdays and Sundays. At times the GSS SCS was closed during usual business hours for internal or other reasons. The dates, times, and reasons for closure are displayed in Table 2.

Table 2: Service disruptions at the GSS SCS during the first 60 days of operations

Date SCS was closed	Time closed	Reason for closure
June 12, 2018	1:00 h - 8:00 h	Staff not available due to illness
June 13, 2018	00:00 h – 8:00 h	Staff not available due to illness
June 15, 2018	2:00 h - 8:00 h	Staff not available due to illness

4.2 Number of visits per day to the GSS SCS during the first 60 days of operations

Community members made a total number of 4243 visits to the GSS SCS during the first 60 days of operations. The average number of visits per day was 71. The minimum number of visits was 11 and the maximum number of visits per day was 151. The number of visits per day is displayed in Figure 5.

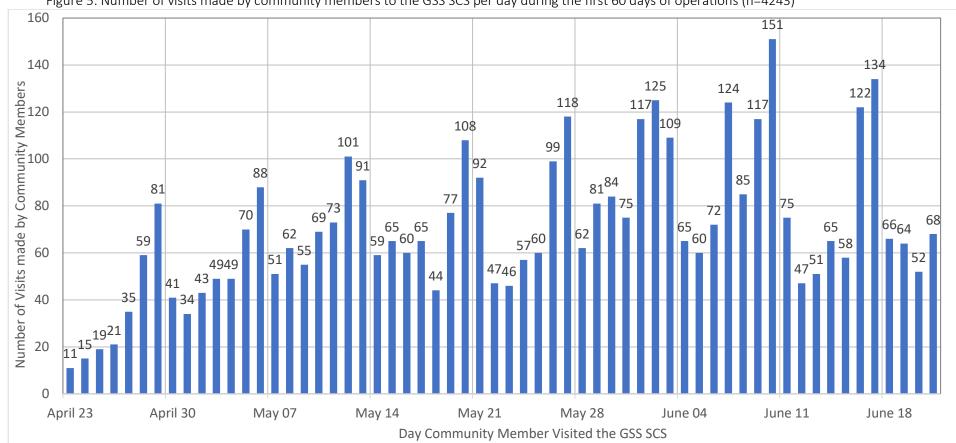


Figure 5: Number of visits made by community members to the GSS SCS per day during the first 60 days of operations (n=4243)

NB: The dates where the GSS SCS was closed all day have been excluded. The dates where the GSS SCS was partially closed have been included. The GSS SCS was open 24 hours on some weekends.

4.3 Number of visits per week to the GSS SCS during the first 60 days of operations

The 60-day reporting period was divided into weekly increments. The average number of visits per week was 471 with a minimum of 241 and a maximum of 674. The number of visits per week is displayed in Figure 6.

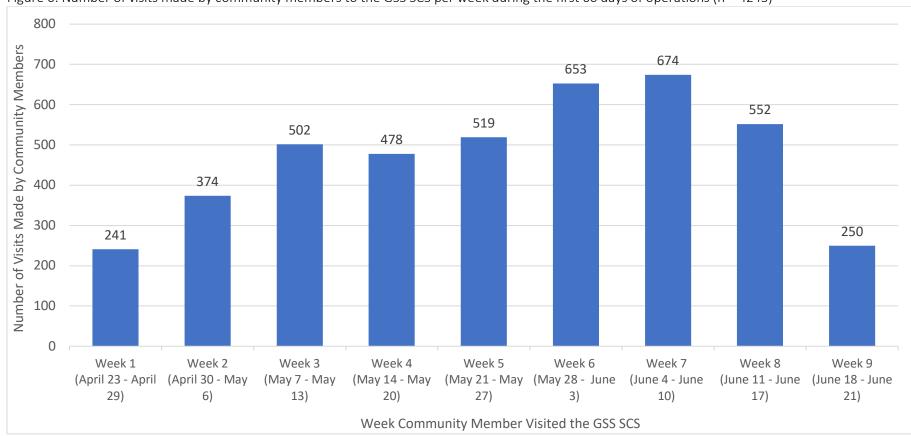


Figure 6: Number of visits made by community members to the GSS SCS per week during the first 60 days of operations (n = 4243)

NB: The dates where the GSS SCS was closed all day have been excluded. The dates where the GSS SCS was partially closed have been included. The GSS SCS was open 24 hours on some weekends. Week 1 through Week 8 include seven days of data and Week 9 includes four days of data.

4.4 Number of visits per month to the GSS SCS during the first 60 days of operations

The 60-day reporting period was divided into 30-day increments. The average number of visits to the GSS SCS per 30-day increment was 2122 with a minimum of 1734 and a maximum of 2509. The number of visits per month is displayed in Table 3.

Table 3: Number of visits made by community members to the GSS SCS per month during the first 60 days of operations (n=4243)

Month	Frequency
Month 1:	1734
April 23 – May 22	1/34
Month 2:	3500
May 23 – June 21	2509

NB: The dates where the GSS SCS was closed all day have been excluded. The dates where the GSS SCS was partially closed have been included. The GSS SCS was open 24 hours on some weekends.

4.5 Time of visits to the GSS SCS during the first 60 days of operations

From April 23 to April 27, 2018, the GSS SCS was open seven days a week from 18:00 h to 8:00 h. During this time period, community members made 101 visits to the GSS SCS. The most popular time to visit was 22:00 h - 22:59 h (n=14). The time of visits to the GSS SCS from April 23 to April 27, 2018 is displayed in Figure 7.

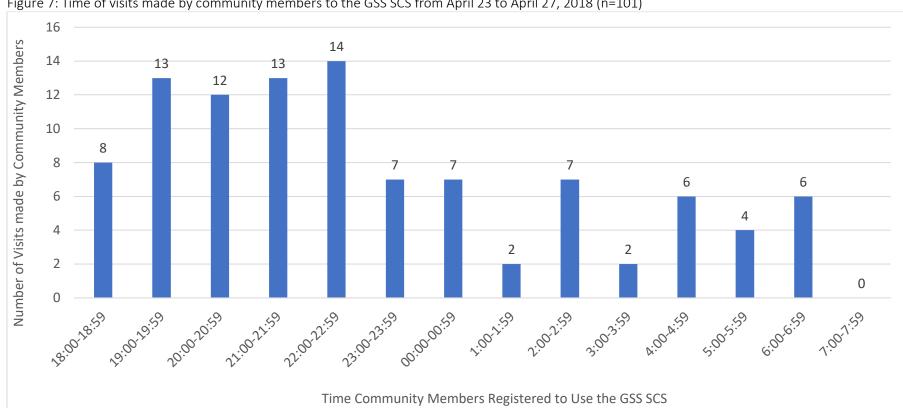
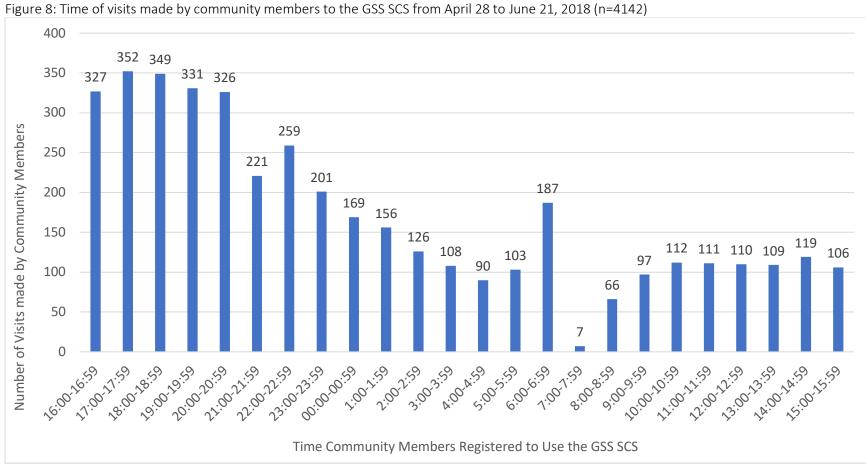


Figure 7: Time of visits made by community members to the GSS SCS from April 23 to April 27, 2018 (n=101)

NB: The dates where the GSS SCS was closed all day have been excluded. The dates where the GSS SCS was partially closed have been included. The GSS SCS was open 24 hours on some weekends. The GSS SCS typically stops accepting community members during the last hour.

From April 28 to June 21, 2018, the GSS SCS was open Monday through Friday 16:00 h to 8:00 h and 24 hours on Saturdays and Sundays. During this time period, community members made 4142 visits to the GSS SCS. The most popular time to visit was 17:00 h to 17:59 h (n=352). The time of visits to the GSS SCS from April 28 to June 21, 2018 is displayed in Figure 8.

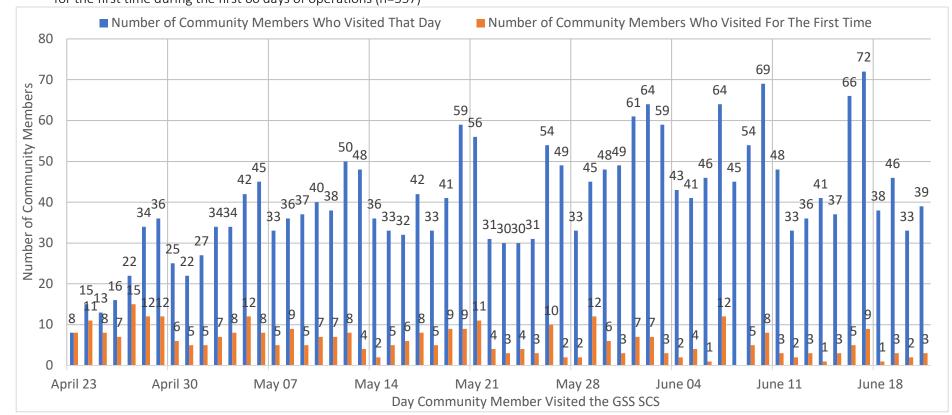


NB: The dates where the GSS SCS was closed all day have been excluded. The dates where the GSS SCS was partially closed have been included. The GSS SCS was open 24 hours on some weekends. The GSS SCS typically stops accepting community members during the last hour.

4.6 Number of unique community members that visited the GSS SCS per day during the first 60 days of operations

The average number of unique community members who visited the GSS SCS per day was 40, with a minimum number of 8 unique community members and a maximum number of 72. The number of unique community members who visited the GSS SCS per day and the number of unique community members who visited the GSS SCS for the first time are displayed in Figure 9.

Figure 9: Number of unique community members who visited the GSS SCS per day and number of unique community members who visited the GSS SCS for the first time during the first 60 days of operations (n=357)

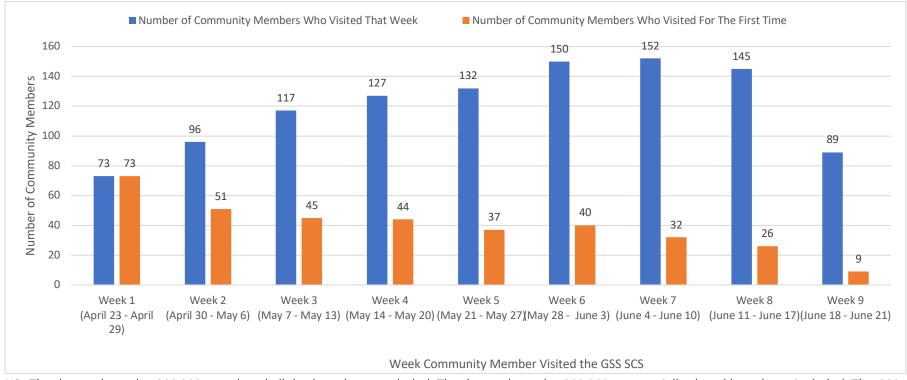


NB: The dates where the GSS SCS was closed all day have been excluded. The dates where the GSS SCS was partially closed have been included. The GSS SCS was open 24 hours on some weekends. Some unique community members made multiple visits on the same day.

4.7 Number of unique community members that visited the GSS SCS per week during the first 60 days of operations

The 60-day reporting period was divided into week-long increments. The average number of unique community members who visited the GSS SCS per week was 120, with a minimum number of 73 unique community members and a maximum number of 152. The number of unique community members who visited the GSS SCS per week and the number of unique community members who visited the GSS SCS for the first time are displayed in Figure 10.

Figure 10: Number of unique community members who visited the GSS SCS per week and number of unique community members who visited the GSS SCS for the first time during the first 60 days of operations (n=357)



NB: The dates where the GSS SCS was closed all day have been excluded. The dates where the GSS SCS was partially closed have been included. The GSS SCS was open 24 hours on some weekends. Some unique community members made multiple visits on the same day. Week 1 through Week 8 include seven days of data and Week 9 includes four days of data.

4.8 Number of unique community members that visited the GSS SCS per month during the first 60 days of operations

The 60-day reporting period was divided into month-long increments. The average number of community members who visited the GSS SCS per month was 253 with a minimum of 228 and a maximum of 277. The number of unique community members who visited the GSS SCS per month and the number of unique community members who visited the GSS SCS for the first time are displayed in Table 3.

Table 3: Number of unique community members who visited the GSS SCS per month and number of unique community members who visited the GSS SCS for the first time during the first 60 days of operations (n=357)

Month	Number of Community Members Who Visited that Month	Number of Community Members Who Visited for the First Time
Month 1: April 23 – May 22	228	228
Month 2: May 23 – June 21	277	129

NB: The dates where the GSS SCS was closed all day have been excluded. The dates where the GSS SCS was partially closed have been included. The GSS SCS was open 24 hours on some weekends. Some unique community members made multiple visits on the same day.

5. Supervised consumption episodes

5.1 Number of community members who consumed drugs at the GSS SCS during the first 60 days of operations

Of the 357 unique community members who visited the GSS SCS during the first 60 days of operations, 333 (93%) consumed drugs at least once. Twenty-four community members were registered into the GSS SCS database system during 26 visits, but never used the consumption space.

5.2 Reasons why community members left prior to consuming drugs at the GSS SCS during the first 60 days of operations

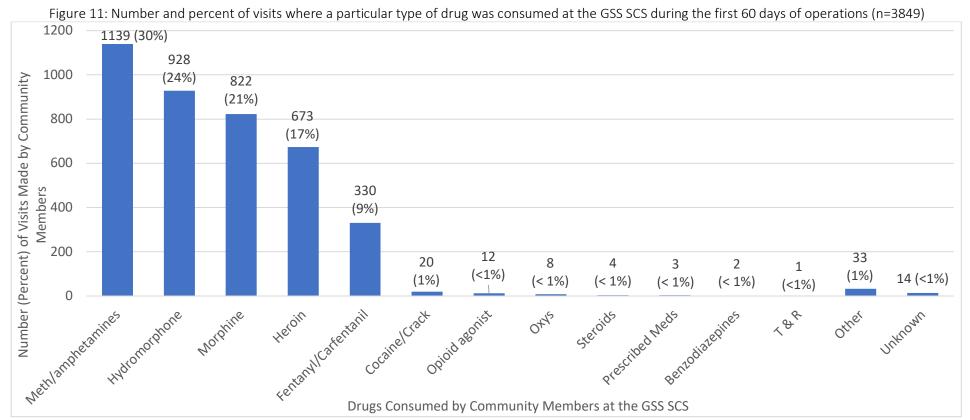
During these 26 visits, one community member stated the waiting time was too long. Reasons were unavailable for the other 25 visits.

During 368 visits, 126 other community members left before consuming drugs but these community members eventually returned to consume drugs at another time. During these 368 visits, 50 stated the waiting time was too long, 16 stated they felt confined because the space was too small, 2 did not want to be near another community member that was there at the time, and 1 had somewhere else to be. For the other 299 visits, a reason was not provided.

Four other people entered the GSS SCS but left before injecting and did not complete an intake. Their reasons for leaving were manually recorded on paper. Three left because the wait times were too long and one did not provide a reason.

5.3 Type of drug consumed at the GSS SCS per visit during the first 60 days of operations

Community members made a total number of 4243 visits to the GSS SCS during the first 60 days of operations. Community members consumed drugs in a total of 3849 (91%) of these visits. The self-reported drugs most commonly consumed during these 3849 visits were as follows: in 1139 visits (30%) community members consumed methamphetamines or amphetamines, in 928 visits (24%) community members consumed hydromorphone, in 822 visits (21%) community members consumed morphine, and in 673 visits (17%) community members consumed heroin. In 2725 (71%) of the 3849 visits, a community member consumed an opioid or opiate. The number and percent of visits where a particular type of drug was consumed at the GSS SCS is displayed in Figure 11.

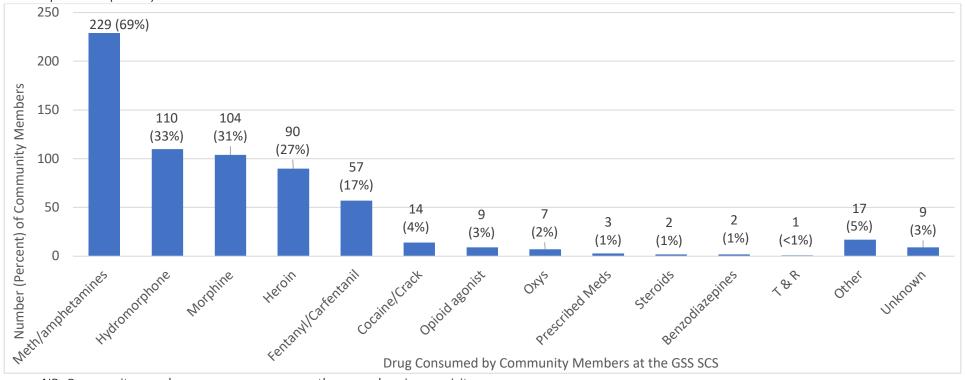


NB: Community members can consume more than one drug in one visit.

5.4 Type of drug consumed at the GSS SCS per unique community member during the first 60 days of operations

Of the 357 unique community members who visited the GSS SCS during the first 60 days of operations, 333 (93%) consumed drugs at least once. The most commonly self-reported drugs consumed by the 333 community members during at least one visit at the GSS SCS are as follows: 229 (69%) consumed crystal methamphetamine or amphetamines during at least one visit, 110 (33%) consumed hydromorphone, 104 (31%) consumed morphine, and 90 (27%) consumed heroin. Of the 333 community members, 63% (n=209) consumed an opioid or opiate during at least one visit. The number and percent of community members who consumed a type of drug during at least one visit at the GSS SCS is displayed in Figure 12.

Figure 12: Number and percent of community members who consumed a type of drug during at least one visit at the GSS SCS during the first 60 days of operations (n=333)



NB: Community members may consume more than one drug in one visit.

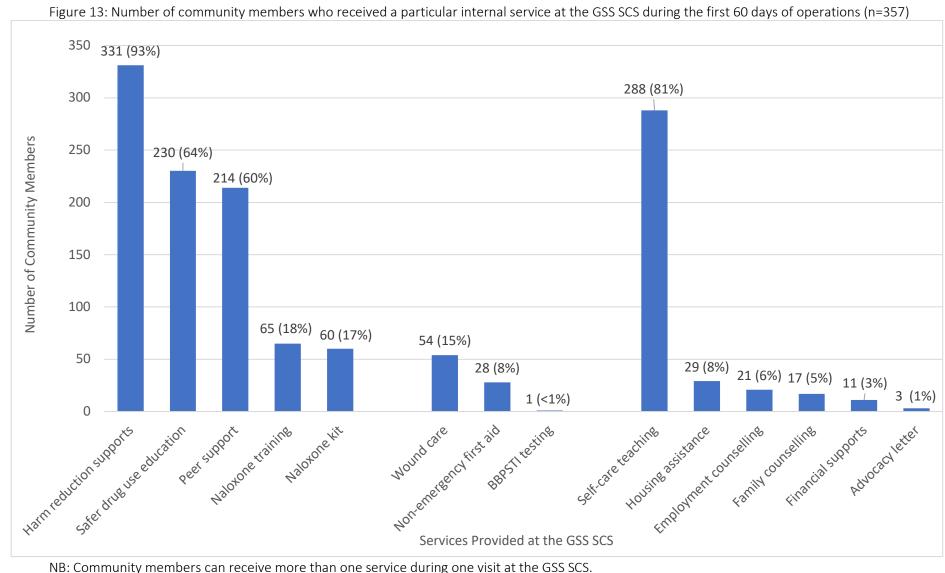
6. Services and Referrals Data

6.1 Community Members who Received Services and Referrals

Of the 357 unique community members who visited the GSS SCS during the first 60 days of operations, 333 (93%) consumed drugs at least once. It was assumed that all 357 community members, even the 24 that did not consume drugs, were eligible to receive an internal service or external referral.

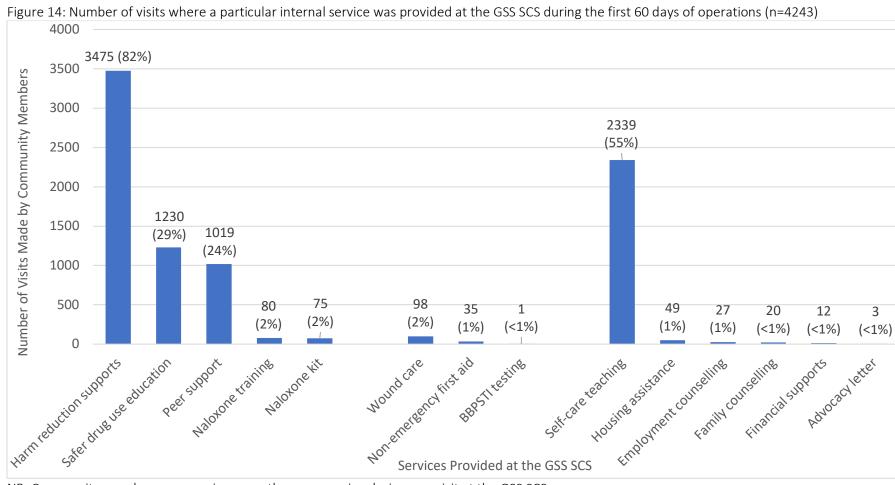
6.2 Service Data

Of the 357 community members who visited the GSS SCS, 345 (97%) were provided at least one internal service. Of the 12 community members who were not recorded as receiving an internal service, 8 (67%) visited the GSS SCS only once. The number of community members who received a particular type of internal service is displayed in Figure 13.



NB: Community members can receive more than one service during one visit at the GSS SCS.

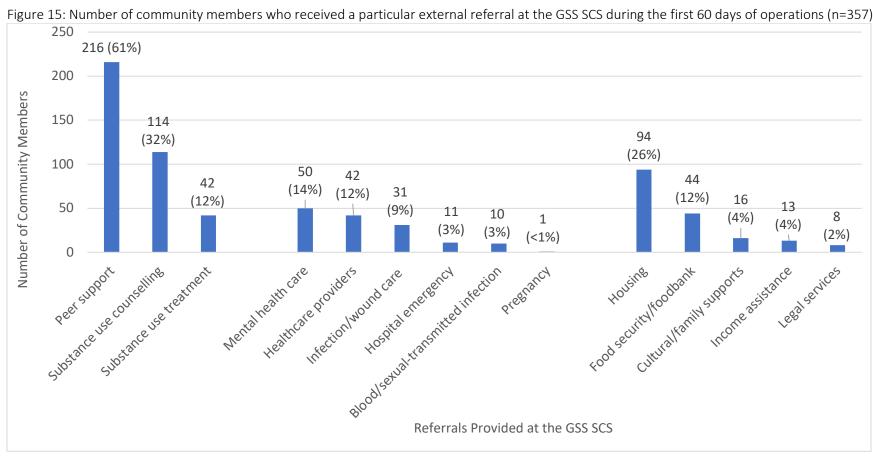
Community members made a total number of 4243 visits to the GSS SCS from during the first 60 days of operations. During these visits, 8463 internal services were provided. The number of visits where a particular type of internal service was provided is displayed in Figure 14.



NB: Community members can receive more than one service during one visit at the GSS SCS.

6.3 Referral Data

Of the 357 community members who visited the GSS SCS, 244 (68%) were provided at least one referral to an external service provider. Of the 113 community members who were not recorded as receiving a referral to an external service provider, 72 (64%) visited the SCS only once. The number of community members who received a particular type of external referral is displayed in Figure 15.



NB: Community members can receive more than one referral during one visit at the GSS SCS.

Community members made a total number of 4243 visits to the GSS SCS during the first 60 days of operations. During these visits, 2021 external referrals were provided. The number of visits where a particular type of external referral was provided is displayed in Figure 16.

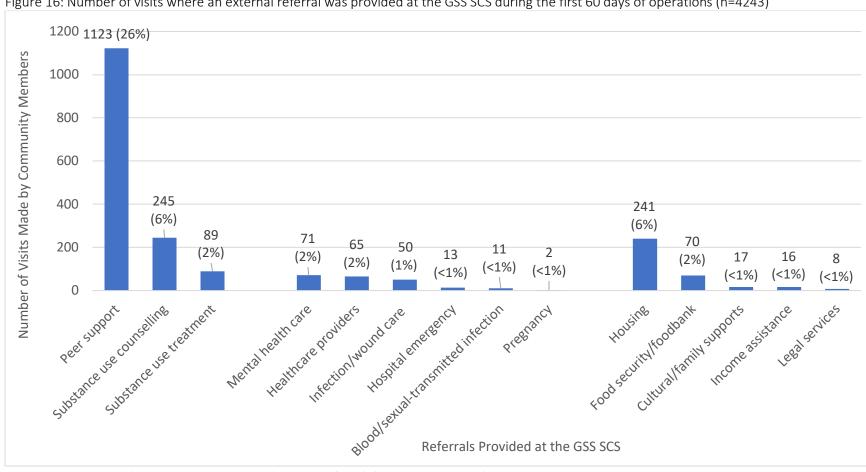


Figure 16: Number of visits where an external referral was provided at the GSS SCS during the first 60 days of operations (n=4243)

NB: Community members can receive more than one referral during one visit at the GSS SCS.

7. Overdoses occurring at the GSS SCS

During the first 60 days of operations a total of 43 overdose events occurred at the GSS SCS. All overdoses were successfully reversed. The details regarding all overdose events that occurred at the GSS SCS during the first 60 days of operations are described in Table 4.

Table 4: Overdose events managed at the GSS SCS during the first 60 days of operations, including self-reported intoxicant and interventions provided

Date	Drug used (self-report)	Interventions used
April 26, 2018	Fentanyl	O2
April 26, 2018	Fentanyl	Patient observed
April 28, 2018	Fentanyl	Naloxone x1, 02
April 28, 2018	Dilaudid	Naloxone x1
April 29, 2018	Heroin	Naloxone x1, O2
April 29, 2018	Heroin	Naloxone x1, O2
April 29, 2018	Unknown	Naloxone x1, O2
April 29, 2018	Heroin	O2
May 4, 2018	Heroin	Patient observed
May 7, 2018	Fentanyl	911 called
May 10, 2018	Heroin	O2
May 10, 2018	Heroin	O2
May 11, 2018	Heroin, Benzos	Naloxone x1
May 13, 2018	Heroin	O2
May 13, 2018	Heroin	Unknown
May 14, 2018	Heroin	Naloxone x1
May 15, 2018	Heroin	Naloxone x2, O2
May 19, 2018	Heroin	O2
May 19, 2018	Heroin	Naloxone x1, O2
May 20, 2018	Heroin	O2, naloxone x1
May 21, 2018	Heroin	Naloxonex1, O2
May 21, 2018	Heroin	O2
May 23, 2018	Fentanyl	EMS (Emergency Medical Services)
May 27, 2018	Fentanyl	O2
May 28, 2018	Heroin	Naloxone x3, 02
May 29, 2018	Heroin	02
May 30, 2018	Heroin	Naloxone x3, O2
June 1, 2018	Heroin	Naloxone x1, O2
June 3, 2018	Heroin	02
June 3, 2018	Heroin	02
June 3, 2018	Heroin	Naloxone x2, O2

June 4, 2018	Heroin	02
June 6, 2018	Fentanyl	Naloxone x1, O2
June 8, 2018	Fentanyl	02
June 9, 2018	"Morphine"	Naloxone x2, O2
June 10, 2018	Fentanyl	O2
June 10, 2018	Fentanyl	Naloxone x2, O2
June 10, 2018	Fentanyl	Naloxone x2, O2
June 15, 2018	Heroin, Carfentanil	O2
June 15, 2018	Heroin, Carfentanil	Naloxone x4, 02
June 16, 2018	"Heroin"	Naloxone x5, O2
June 16, 2018	Unknown	Naloxone x1, 02
June 19, 2018	"Heroin"	Naloxone x2, O2

NB: O2 = oxygen administered.

8. Feedback from community members and the public

8.1 Feedback from community members regarding the GSS SCS

Staff at the GSS SCS collected both written and verbal feedback from community members who visited the site. Community members had the opportunity to leave anonymous written feedback on pieces of paper that could be placed into a box near the inside entrance of the SCS. Some community members preferred to leave verbal feedback. In these instances, comments were recorded on paper by SCS staff and placed into the same box or emailed to the GSS SCS program director. Written and verbal feedback provided by community members who visited the GSS SCS during the first 60 days of operations are listed in Table 5.

Table 5: Feedback left by community members who visited the GSS SCS during the first 60 days of operations

Thank-you for being there...you likely saved my life:)

More booths! =)

Freezies, ice cubes, juice ???, fresh fruit, donations box, stay hydrated, curtains for privacy, thanks

I suggest that people take the time to show more appreciation and say "Thank-you" for the time and patience the staff give us at "SCS"

Please be respectful of other peoples surroundings and sexes, thanks xx

Least: no washrooms Most: Feels safe in here

People that are using the service's here take to long and the nurse's should not talk about what is going on here meaning keep it low, discrete, know what I mean? Thank you for your services

I'm impressed with the staff. Wish you could let the nurses help us who are having trouble fixing. I for one don't want infections!

Ambulance costs should be billed to SCS

Longer hours, 24/7 if possible

This here injection site at the Spadys is more better meaning the nurses here are more alert. The B.S.C.S injection site they talk a lot and I don't like it cause when I'm doing my thing they throw me off so that is all I have to say thank you for reading my input. Later

Police ??? picking clients as they leave the service is NOT appreciated

In the winter there should be more people allowed to wait in the service. People coming in and dumping their belongings all over the booth, using the booths to just chat, specifically

There should be a list of rules for everyone to see and follow that way people are aware of them and know that they apply to everyone the same so people know that they are not special and try to push their limit. Example not taking their time. This place should be considered a privilege as well as a health benefit

Wants service to be over night

OK to the point since this place was open people that work here are very polite, the reason why I'm writing this letter is the nurses should keep their voices low because this here place is very safe however the nurses should and please lower their voices please and thank you. Or when you laugh please not so loud ok my friends

Please don't watch people inject directly, throws people off causes misses

MUCH LOVE <3

Surround sound stereo

8.2 Feedback from the public regarding the GSS SCS

No members of the public directly contacted the GSS SCS or Streetworks to provide feedback between April 23 to June 21, 2018. Also, no feedback was provided through 311 services operated by the City of Edmonton (COE) during this time period³.

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³ Email communication to Elaine Hyshka (University of Alberta), AMSISE member, from Grant Kay, Manager, Inside Information, Inside Solutions, Temac, Corporate IDs, Customer IDs; Engagement; Communications & Engagement on July 18, 2018.

9. Overdoses in the vicinity

We had intended to provide information on the frequency of overdose incidents in the vicinity of the GSS SCS. AMSISE has been working with Alberta Health Services' Population Health Surveillance since first receiving the GSS SCS exemption to ensure information on ambulance call-outs for overdose in the vicinity of the service. AHS agreed to provide this information and had been working to set parameters for the data retrieval and analysis. However, the provincial EMS data tracking system is currently experiencing a multi-month outage⁴ that includes the entire 60-day analysis period. As a result, at the time of writing, no information regarding overdoses in the vicinity of the GSS SCS was available to AHS. As such, EMS data are not included in the present report.

10. Public disorder and crime

An AMSISE member met with officials from Edmonton Police Service (EPS), the COE, and other stakeholders to discuss SCS-related data sharing on April 11th 2018. At this meeting, the EPS agreed to share police data from around the vicinity of the GSS SCS with the COE. The COE indicated they would conduct an analysis examining any changes in police activity and crime in the area following the opening of the SCS.

Data were received on June 19, 2018. Analysis is ongoing and could not be included in this report. When complete data is expected to be presented to the City of Edmonton Supervised Consumption Services Community Liaison Committee (CLC).

11. Improperly discarded syringes

The frequency of improperly discarded syringes in the vicinity of the GSS SCS is a suggested component of the Report. AMSISE members met with representatives from the COE and requested information on the number of discarded syringes in the vicinity of the GSS SCS. The COE agreed to provide AMSISE with this information. Specific data on syringes are still being analyzed by the COE, and the findings were not provided to AMSISE in time for inclusion in this report. When complete data is expected to be presented to the CLC.

⁴ Page 23 of the Alberta Government's Quarter 1 Opioids and Substances of Misuse report corroborates this database outage (EMS data for March 2018 were unavailable and not provided in the quarter 1 update): https://open.alberta.ca/dataset/1cfed7da-2690-42e7-97e9-da175d36f3d5/resource/dcb5da36-7511-4cb9-ba11-1a0f065b4d8c/download/opioids-substances-misuse-report-2018-q1.pdf.

12. Ongoing community engagement and mitigated efforts

12.1 Public relations and media background

Considering the significant attention given to the announcement of the AMSISE SCS exemptions in Edmonton and some misinformation circulating in the community about SCS, we implemented a comprehensive public and media relations plan. AMSISE implemented this plan through the support of communications staff at Streetworks.

The communications plan had three main goals:

- 1. Ensure that all levels of government were notified ahead of the opening of the SCS.
- 2. Allow for media to film the SCS outside service hours, report on the client-flow of the program, and ask questions directly of SCS staff.
- 3. Provide ample opportunity for public engagement with community leaders by providing public tours of the SCS. Engage with partners at the CLC by providing members an advanced opportunity to view the new site and to learn about how the SCS operates.

12.2 Media reports

Below are the media that were present and reported on the opening of the SCS including followup stories that were done over the weekend and into the following week.

March 22, 2018:

CTV:

https://edmonton.ctvnews.ca/edmonton-s-first-supervised-injection-site-opens-friday-1.3854640

Edmonton Journal:

http://edmontonjournal.com/news/local-news/edmontons-first-supervised-drug-consumption-site-unveiled

Global:

https://globalnews.ca/news/4098961/edmonton-first-safe-injection-location-set-to-open/

Metro:

http://www.metronews.ca/news/edmonton/2018/03/22/first-supervised-consumption-site-to-open-in-edmonton-friday.html

April 23, 2018:

Global at Noon:

https://globalnews.ca/video/4102271/edmontons-first-safe-consumption-site-opens

Jespersen Show:

https://omny.fm/shows/ryan-jespersen-show/mar-26-jespersen-9-first-safe-injection-site-opens

March 24 – March 25, 2018:

CTV:

https://edmonton.ctvnews.ca/mobile/video?clipId=1356753

Global:

https://globalnews.ca/news/4106685/edmonton-safe-injection-site-opioid-drugs-overdose/

12.3 Public and community engagement

No official tours of the GSS SCS were provided, although tours were given upon request three times to the EPS and one time to the Edmonton Fire Rescue Services.

12.4 GSS participation on the City of Edmonton Supervised Consumption Services Liaison Committee

Executive Directors from each of the SCS host agencies have been active participants in the CLC, which has met twice (March 12th and June 4th, 2018). The CLC is composed of various stakeholders including representatives from AHS, COE, EPS, and residents of the neighbourhoods surrounding each SCS. The purpose of the CLC is to provide a venue for members to share information regarding the SCS sites and discuss their benefits and impacts on the local communities.

At both meetings, Executive Directors from each of the SCS host agencies have updated the committee on the operations of the sites and addressed concerns and questions from the committee participants. This committee meets quarterly and the next anticipated meeting is scheduled for September 10th, 2018.

13 Conclusion

This report has provided a comprehensive overview of available data pertaining to the first 60 days of operations of the GSS SCS. Questions about the information contained in this report or the GSS SCS more generally should be directed to: Marliss Taylor, RN; Program Manager; Streetworks Edmonton, MTaylor@boylestreet.org.