

**MINUTES**

**EXECUTIVE COMMITTEE**

**COMMUNITY DRUG STRATEGY FOR THE CITY OF GREATER SUDBURY**

**DATE:** OCTOBER 3, 2024

**TIME:** 3 TO 4:30 P.M.

**FORMAT:** HYBRID MEETING (in-person at Public Health Sudbury & Districts) (remotely via Ms Teams)

**Co-Chairs:** Heidi Eisenhauer, Executive Director, Réseau Access Network  
Mustafa Hirji, Acting Medical Officer of Health and Chief Executive Officer, Public Health Sudbury & Districts

**Present: Canadian Mental Health Association Sudbury/Manitoulin:**

Patty MacDonald, Chief Executive Officer

**City of Greater Sudbury:**

Gail Spencer, Manager, Housing Stability and Homelessness *for Brendan Adair, Acting General Manager, Community Development*

**Health Sciences North:**

Shannon Knowlan, Administrative Director, Mental Health and Addictions Programs, Urgent & Acute Care *for David McNeil, Chief Executive Officer*

**Greater Sudbury Police Service (GSPS):**

Sara Cunningham, Chief of Police

**Réseau Access Network**

Amber Fritz, Manager of Outreach & Education

Heidi Eisenhauer, Executive Director

**Public Health Sudbury & Districts (PHSD):**

Mustafa Hirji, Acting Medical Officer of Health and Chief Executive Officer

Sherry Price, Program Manager, Mental Health and Substance Use

**Regrets:** Stacey Gilbeau, Director, Health Promotion and Vaccine Preventable Diseases, Public Health Sudbury & Districts

**Recorder:** Manon Tessier, Divisional Administrative Assistant, Public Health Sudbury & Districts

#	Item	Description of Outcome	Individual Responsible for Further Action and Deadline
1.0	<b>Call TO ORDER</b>	Dr. Hirji called the meeting to order at 3:03 p.m.	
2.0	<b>WELCOME AND INTRODUCTIONS</b>	Everyone was welcomed and introduced themselves.  H. Eisenhauer led a candle lighting ceremony in honor of those we have lost to mental health and unregulated toxic drug supply.	
3.0	<b>TERRITORIAL ACKNOWLEDGEMENT</b>	S. Price acknowledged the ancestral Indigenous territory upon which this meeting was occurring.	

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4.0	<b>REVIEW AND APPROVAL OF AGENDA</b>	<p>The agenda was reviewed and approved as presented.</p> <p>An additional item was added under item 7.4, titled "Homelessness and Addiction Recovery Treatment (HART) Hubs".</p>	
5.0	<b>REVIEW AND APPROVAL OF MINUTES – April 4, 2024</b>	The minutes from the previous meetings were shared for the membership's information/reference and previous members' approval.	
6.0	<b>DECLARATION OF CONFLICT OF INTEREST</b>	There were no conflicts of interest identified.	
7.0	<b>NEW BUSINESS</b>		
7.1	<b>Terms of Reference – Executive Committee</b>	<p>In January 2023, the Steering Committee, upon reviewing its Terms of Reference (ToR), determined that the document was outdated and contained stigmatizing language. As a result, a process was initiated to update the ToR; however, this process was temporarily paused due to summit preparations.</p> <p>In 2024, as part of the revitalization of the Community Drug Strategy and in preparation for the first meeting of the reinvigorated strategy, Public Health began updating the ToR. The revisions were intended to align the document with the newly agreed-upon committee structure and to address the previously stigmatizing language. The revised draft was reviewed, amended, and subsequently approved by the co-chairs of the Steering Committee. Following this, the ToR for the Executive Committee were amended to reflect the same changes.</p> <p>During the meeting, both the existing and proposed ToR were shared with the members for their reference. It was noted that the previous ToR had omitted representation of Indigenous peoples and People with Lived and Living Experience (PWLLE), which has now been incorporated into the revised version.</p>	

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		<p>Dr. Hirji invited members to review the updated ToR and asked whether they had sufficient time to consider the changes, whether additional time was required, and if there were any proposed amendments. Members were also asked whether the Executive Committee could proceed with accepting the revised ToR as presented.</p> <p>The revised ToR were approved by S. Cunningham. However, P. MacDonald requested additional time to review the document and provide feedback.</p> <p><b>Outcome:</b> The final approval of the revised ToR was deferred to the next meeting.</p>	<p>M. Tessier will include the ToR for approval on the next meeting agenda</p>
7.2	<b>Terms of Reference – Steering Committee</b>	<p>A. Fritz provided an overview of the revisions made to the Steering Committee terms of reference (ToR), highlighting the removal of stigmatizing language and alignment with the new structure established by the Executive Committee. The updated ToR was presented to the Steering Committee and accepted during their meeting on September 17, 2024.</p> <p>The revised terms reflect the new direction of the CDS and were submitted to the Executive Committee for approval.</p> <p><b>Outcome:</b> Approved.</p>	
7.3	Harm Reduction	<p>The committee discussed the recent decision by the provincial government to reject Réseau ACCESS Network's application for funding a supervised consumption site. Additionally, the government announced plans to block any future applications related to supervised consumption and decriminalization, and to end safer supply programs. While applications are being accepted for 19 Homelessness and Addiction Recovery Treatment (HART) Hubs, these hubs explicitly exclude harm reduction services.</p> <p>In response, the committee reaffirmed its commitment to harm reduction strategies despite</p>	

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		<p>the provincial government’s stance. Members acknowledged that future advocacy efforts with the current government are unlikely to succeed. Instead, the committee agreed to focus on strengthening partnerships with community organizations to bolster harm reduction services. It was noted that, if future funding applications are successful, harm reduction components could potentially be integrated into programs later.</p> <p>Members highlighted several challenges, including widespread misinformation about harm reduction, visible drug use, needle waste, and the shift from injection to inhalation methods, which are not currently supported by existing services. Discussions emphasized the need to counteract misinformation and stigma, both in the community and within organizations. Suggestions included implementing non-stigmatizing, inclusive awareness campaigns, such as community naloxone training, and educating the public on the critical role of harm reduction in addressing the opioid crisis.</p> <p>The committee also stressed the importance of addressing internal organizational stigma through training and assessments. This effort would involve reflecting on systemic biases and improving understanding of harm reduction among staff and stakeholders. Members discussed taking a multi-pronged approach, balancing internal training with external advocacy and community engagement.</p> <p>Looking ahead, the committee committed to identifying alternative funding sources to support harm reduction initiatives. Efforts will also focus on streamlining services to ensure individuals receive comprehensive care, including harm reduction, withdrawal management, and wraparound supports. Advocacy campaigns will aim to inform the public about the benefits of harm reduction while addressing the stigma surrounding substance use.</p>	



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		<p><b>Outcome:</b> Despite significant challenges, the committee remains dedicated to advancing harm reduction and fostering collaboration among community partners to improve outcomes for individuals affected by substance use.</p>	
7.4	People With Lived and Living Experience/Indigenous Representation	<p>During the review of the terms of reference, it was noted that several positions remain unfilled despite outreach efforts since July.</p> <p>Invitations were extended to several Indigenous organizations, but no responses were received. One organization indicated that they do not have the capacity to participate at this time.</p> <p>The committee was advised that the outreach efforts were appropriate and it was suggested that further requests to these organizations should not be pursued. A recommendation was made to consider a candidate from the Indigenous education sector, who has expressed interest in joining the Executive Committee. This nomination was reviewed and approved by the committee. Suggestions for additional candidates were encouraged.</p> <p>Efforts to include representation from People with Lived and Living Experience (PWLLE) continue. While there is representation within other areas of the initiative (i.e., streams), the committee has not yet identified a candidate for the leadership committees. One individual has however expressed interest, offering valuable insights into stigma and community issues. The committee discussed whether to extend an invitation to this individual, recognizing the valuable perspective they could bring.</p> <p>The committee also discussed the importance of providing mentorship and honorariums for PWLLE participants. A draft agreement with Réseau ACCESS Network for the honorarium is in progress and will be finalized before any invitations are extended. Additionally, there was a suggestion to</p>	

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		<p>consider having two representatives from PWLLE on the CDS Executive Committee to ensure consistent representation, with flexibility to accommodate absence if needed.</p> <p>The committee highlighted the need to balance relationship-building with productivity in meetings. It was proposed that meetings begin with a dedicated time to share successes and lessons learned, to create a positive and reflective space at the start of each session. This approach was well-received and will be implemented in future meetings.</p>	
7.4	Homelessness and Addiction Recovery Treatment (HART) Hub	<p>The committee discussed the endorsement of the Health Sciences North (HSN) to submit a letter of intent for the Homelessness and Addiction Recovery Treatment (HART) Hub initiative, supported by leadership from Monarch and Shakagamik-kwe. A representative from the City of Greater Sudbury (CGS) is leading the application process, with a tight government timeline aiming for partial operation by the end of the fiscal year. The committee sought input on how best to move forward with the application based on the summit's outcomes and existing partnerships.</p> <p>It was highlighted that while the HART Hubs will focus on homelessness and transitional housing, there are currently no services available for individuals actively struggling with substance use. The importance of building community connections to create pathways to treatment was emphasized, and the committee discussed the CDS EC's role in connecting people to the necessary services. The need for a standardized, consistent approach to managing services, particularly around overdose response was stressed, ensuring spaces are truly safe and welcoming to those who need them.</p> <p><b>Outcome:</b> In response to the discussion, the committee agreed that the CDS EC would provide a letter of support for the HART Hub application. The letter would add strength to the application,</p>	

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		<p>complementing the existing letters of support from the Safestspot.ca initiative. The committee also acknowledged that while the HART Hub model may not be ideal, it represents where funding is currently being allocated, and thus it is important to support the initiative moving forward.</p>	
<b>8.0</b>	<b>CONSENT AGENDA</b>		
8.1	<a href="#">Drug Warnings and Alerts</a>	<p>Since the last Executive Committee meeting, several warnings and alerts were issued concerning an increase in suspected drug poisonings (overdoses). The following drug warnings and alerts were issued:</p> <ul style="list-style-type: none"> <li>• April 25, 2024 – Drug Warning</li> <li>• May 23, 2024 – Drug Warning</li> <li>• June 17, 2024 – Drug Warning, including a new suspected substance, pink cocaine</li> <li>• July 17, 2024 – Drug Warning</li> <li>• August 1, 2024 – Drug Alert for the confirmed presence of carfentanil</li> <li>• August 28, 2024 – Drug Warning</li> </ul> <p>It was shared that the process for issuing these warnings and alerts is currently under review. The PHSD team is working to refine this process to ensure that the communication of these warnings is as impactful as possible.</p>	
9.0	<b>ANNOUNCEMENTS/UPDATES</b>	<p>It was suggested that minutes from the other streams be shared.</p> <p><b>Outcome:</b> It was confirmed that reports from the streams could be provided at the Steering Committee level, and all members agreed that this would be helpful.</p>	
10.0	<b>NEXT MEETING</b>	<p>The Executive Committee typically meets four times per year, preferably during the first week of the scheduled month, from 10:30 a.m. to 12:00 p.m., and/or at the call of the Chair.</p> <p>The next meeting will be held early in 2025, and meeting dates for the remainder of 2025 will be established and followed by calendar invitations.</p>	M. Tessier



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<b>11.0</b>	<b>ADJOURNMENT</b>	The meeting was adjourned at 4:34 p.m.	