

Minister's Opioid Emergency Response Commission

Record of Discussion: September 11–12, 2017

1. Welcome and Personal Reflections

The Commission started their meeting by reflecting on members' experiences with the opioid crisis.

2. Review of Agenda and Conflict of Interest Declarations

The Commission reviewed the agenda and purpose for the two day meeting.

Members had an opportunity to update their conflict of interest declarations.

3. Co-Chair Updates

Dr. Klein updated the Commission on grants in process and anticipated to support the opioid response.

Dr. Hyshka updated the Commission on her tour of the Ottawa inner city health program.

Overdose Awareness Day events across Alberta and Canada were noted and discussed.

4. Response Update - Ministry and Commission Round Table

Alberta Health presented updates on the opioid response including cross jurisdictional work with Health Canada, Public Health Agency of Canada, Canadian Institutes of Health Research, Treaty 8, and the City of Edmonton.

Commission members provided updates on their work related to the opioid response.

5. Options to Support the Indigenous Opioid Response

Members heard a presentation from Alberta Health regarding opportunities to support Indigenous people and communities affected by the opioid crisis.

The Commission formulated the following collaboration-related **recommendation**, for consideration by the Minister:

- Make a specific funding opportunity available to Indigenous Communities and organizations who serve Indigenous people for initiatives that address the urgent opioid crisis. The Commission recommends this be achieved through an open call for proposals for interventions that support a specific Indigenous Community or Indigenous people on a broader scale. The funding opportunity should be available for all Indigenous Communities (that is on and off Reserve or Settlement Communities).

Decisions and Next Steps:

As appropriate, the Commission suggests that the Indigenous Opioids Advisory Sub-Committee Action Plan could act as a guide for the Community and organization proposals and response. The Commission respectfully suggests that people with lived experience are engaged in the development and implementation of these proposals.

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6. Communication and Knowledge Translation

The Commission heard a presentation from Alberta Health regarding communication and knowledge translation activities for the future. The Commission provided feedback on strategic approach, target audiences, and key community partners to engage.

The Commission requested the presenters return to provide an update on planned activities at a future meeting.

7. AHS Harm Reduction and Enhancement of the Take Home Naloxone Program

The Commission heard a presentation from AHS regarding opportunities to enhance the Take Home Naloxone (THN) Program, by supporting appropriate kit distribution and education to decrease opioid related deaths.

The Commission formulated the following **recommendation**, for consideration by the Minister:

- Support the proposal and funding request from AHS for enhancements to the THN Program, including quality assurance and a risk assessment framework.

Decisions and Next Steps:

The Commission also supports the rebranding of the Take Home Naloxone program to decrease stigma and increase accessibility.

The Commission suggested Alberta Health work with AHS on the human resource requirements necessary to operationalize the proposal, as well as explore a longer-term plan for the program.

8. Opportunities in Primary Care

The Commission heard a presentation from members of the Primary Care Network Evolution Implementation Committee and Alberta Medical Association regarding opportunities for primary care to support the opioid response.

The Commission formulated the following **recommendations**, for consideration by the Minister:

- Support the proposal and funding request from Primary Care Networks and their partners to increase and accelerate the participation of primary care in the urgent opioid response.

Decisions and Next Steps:

The Commission suggested Alberta Health work to ensure that the following elements are identified in the final proposal:

- urgent initiatives are prioritized
- support for harm reduction education
- meaningful engagement with people with lived experience

The Commission requested the presenters return to update on details of their planned work as an information item at a future Commission meeting.

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9. Access to Opioid Dependency Treatment

Members heard a presentation from AHS regarding access to opioid dependency treatment (ODT) across the province.

While the accessibility of treatment is a value, the proposal was deemed out of scope for the mandate of the Commission. The Commission suggested Alberta Health work with AHS to further explore opportunities to expand access to ODT.

10. Injectable Opioid Agonist Therapy in AHS Opioid Dependency Treatment (ODT) and Community

Members heard a presentation from AHS regarding the phased implementation of a supervised injectable opioid agonist therapy program in Edmonton and Calgary.

The Commission formulated the following **recommendation**, for consideration by the Minister:

- Support the proposal and funding request from Alberta Health Services for a phased implementation of a supervised injectable opioid agonist therapy (siOAT) program in Edmonton and Calgary.

Decision and Next Steps:

The Commission suggests engagement with Community Health providers, relevant professional Colleges, and people with lived experiences in the design and delivery of this program.

Recommendation and next steps: The Commission approved allocating \$5M to a sustainable supervised injectable Opioid Agonist Therapy (siOAT) phased implementation program.

11. MOERC Planning

Commission members were asked to provide input on agenda items for the remaining meetings in 2017, based on the strategic areas of the commission's focus including prevention, surveillance and analytics, enforcement and supply control, harm reduction, and treatment.

Additional agenda items identified included intervention to support ethnocultural communities as well as a provincial conference or network to support knowledge sharing and peer support for those working on the opioid response.

12. Conclusions and Next steps

The next Commission meeting will be held the first week of October, 2017.