Item #: BN172

Supplementary Budget - Briefing Note

2022 Budget

CKHA Residential Withdrawal Management Program Capital Funding Request

Briefing Note required for:

- -items +/- \$50,000 or more
- -changes in FTE
- -Council Priority requests

Dept	Division	Item	Base Supp	Amount	FTE Impact
Non	Council Directed	Chatham-Kent Health Alliance (CKHA) one-time capital costs for a 10-bed residential withdrawal management program	S	\$500,000	
Non	Council Directed	Funded from Employment and Social Services Corporate Initiatives Reserve – 17261	S	(\$250,000)	
Non	Council Directed	Funded from CHS Health Reserve - 17291	S	(\$250,000)	
		Total:		\$0	

Background:

Over the last several years Council has voiced concerns regarding addictions, specifically regarding the opioid crisis and the impact this crisis is having on the entire community. The war on drugs requires support and participation from the entire community. No one single organization or program will be able to eradicate the misuse of drugs and alcohol and the many consequences of this misuse. Community groups, including individuals with lived/living experience; and public, private, and non-profit organizations, all have a role to play. The drug crisis has impacted multiple municipal divisions including public health, employment and social services, housing services, housing assets, libraries, facilities and open spaces, fire and emergency services, and police. This municipal involvement impacts each division's resources, including the ability to provide other required programs and services.

From 2016 to 2020, the local rate of opioid-related emergency department visits increased more than 280% and the local rate of opioid poisoning deaths increased more than 400%. During the first year of the pandemic alone, the death rate nearly doubled compared to the year before. In Chatham-Kent, suspect drug-related deaths have been 3-4 per month for the latter half of 2021. Over three quarters of the people who have died since 2019 have been male and the majority are in the 25 to 44 age group. Some form of fentanyl directly contributed to nearly 80% of all opioid-related deaths and at least 50% of people died alone, with no one else present to intervene.

In response to a call for proposals for expanded residential addiction treatment beds across the province, Chatham-Kent Health Alliance (CKHA) submitted a proposal for funding approval to the Ontario Health Centre of Excellence in Mental Health and Addictions for the development of a 10 bed Residential Withdrawal Management Program (RWMP) to be operated on the main campus of CKHA's Chatham Site. This proposal aligned to CKHA's 2021-

Background:

2024 Strategic Plan objective to "develop innovative ways to expand and deliver Mental Health and Addictions services", more specifically, the plan identified the need for local withdrawal management services.

Council's 2018-2022 Term Priorities have four main pillars: Economic Prosperity, People & Culture, Healthy & Safe Community, and Environmental Sustainability. The foundational standards of Financial Sustainability, Open & Transparent Government, and Resiliency support the four pillars. Within the Health & Safe Community Pillar one of the goals is to "support an increase in access to mental health and addiction services". The capital funding request for the residential withdrawal management program supports Council's 2018-2022 term priorities.

Chatham-Kent is the only community of similar size in Southwestern Ontario that does not have a Residential Withdrawal Management Program. Without a RWMP in our community, Chatham-Kent residents seeking assistance to safely go through substance withdrawal need to leave their home community to do so. This creates significant barriers to treatment for an already vulnerable population.

CKHA's proposal to the province includes a request for \$1.3 million in annual operating costs as well as \$100,000 in one time start up costs, the maximum allowed for one-time costs as per this funding call for proposals, noting that any request exceeding that threshold would be disqualified. CKHA will have one-time capital costs for renovations to an existing space known as "Zone F". The estimated capital costs are \$1.2 million. A design plan has been developed to convert Zone F, and the space has been vacated to prepare to initiate the work as soon as ongoing funding is approved.

CKHA is fully committed to implementing this program, they are confident that the operating funding requested will be supported by the province and they are pursing capital funding support, both through fundraising and the \$500,000 one-time request to the Municipality to achieve the total goal of \$1.2 million for renovations.

Administration is supportive of the one-time \$500,000 request and recommends the use of two reserves: Community Human Services Health Reserve (\$250,000) and Employment and Social Services Corporate Initiatives Reserve (\$250,000).

The CHS Health Reserve is an assigned reserve. These dollars are available for any health-related initiates that will improve the overall public health of our community. This is the only 2022 request from this reserve. If approved the reserve will have a \$301,069.76 balance remaining.

The Corporate Initiative Reserve is also an assigned reserve with the intention that these dollars are to be used for initiatives that will improve the lives of vulnerable and marginalized individuals and families. The 2022 requests from this reserve include the Diversity, Equity, and Inclusion Initiative, CK Renovates Project, and the Residential Withdrawal Management Program. If approved the reserve will have a \$1,626,138.65 balance remaining.

Additional information on the Residential Withdrawal Management Program

The CKHA 10 bed Residential Withdrawal Management Program will operate 24 hours/day 365 days year. The residential program will be co-located and share staff resources with CKHA's RAAM (Rapid Access to Addictions Medicine) Program. This co-location will facilitate client/patient transitions from withdrawal management to ongoing treatment and aftercare (RAAM).

CKHA Residential Withdrawal Management will operate in adherence to the Addictions, Mental Health Ontario (AMHO), and Canadian Research Initiative in Substance Misuse [CRISM] standards and guidelines.

The operating dollars requested from the province will provide routine medical consultation through access to the medical staff from CKHA's multi-disciplinary team, specific functions are outlined below:

• Addictions medicine/psychiatry: available on a consultative basis through CKHA's RAAM clinic, services include assessment, treatment/prescribing, monitoring, education and consultation to clients/patients and staff.

Background:

- Primary care and additional addictions medicine treatment during daytime operating hours will be provided by a Nurse Practitioner dedicated .5 FTE to Residential Withdrawal Management.
- After-hours access to medical care will be provided by CKHA Emergency Department, located on the Chatham-Kent campus of CKHA, approximately 100 meters from the RWM site.
- After-hours access to mental health and addictions assessment will be provided by the CKHA Psychiatric Assessment Nurse (PAN) accessible directly by on site Withdrawal Management Workers and Registered Practical Nurses (RPNs).
- Psychosocial supports will be provided by on-site Withdrawal Management Workers and Registered Practical Nurses; these supports will also be available to support in-home withdrawal management clients/patients.

In addition, psychosocial supports will be provided by Canadian Mental Health Association Lambton Kent Addictions and Harm Reductions Workers and RAAM multi-disciplinary staff as required. Withdrawal Management clients/patients will also have access to Virtual Day Treatment Programing offered by Westover Residential Treatment Centre