<u>Social Policy Engagement Workshop</u> <u>Topic: Opioid Overdose Response</u> <u>Date: Tuesday, January 30 from 3-5 pm</u> Location: Fraser Room –Maple Ridge Pubic Library

Questions & Answers Following the Presentations*:

- Q: What are your data points for establishing the static rate of users?
- A: No specific data exists, but there is no reason to believe there are more users in general there is no data on number of drug users.
 Can confirm national and provincial numbers, provincially there is mathematical modeling for people who inject drugs. These statistics are a best guess and are used mostly for harm reduction distribution.
- Q: Individuals who identify as First Nation are 3 times more likely to die of overdose, is there reason why? Do you feel First Nation seek out services as frequently as the rest of the population?
- A: Dr. Tyler not able to comment, the First Nations health authority is the expert and the connection will be provided. A link to the report is provided here: <u>http://www.fnha.ca/newsContent/Documents/FNHA_OverdoseDataAndFirstNationsInBC_Pr</u> <u>eliminaryFindings_FinalWeb.pdf</u>:
- Q: Men are more likely to use prescription opioids what is the requirement for physicians to be checking PharmaNet when prescribing opioids? How can a person receive prescription opioids from multiple doctors?
- A: Dr. Tyler stated that there have been a number of changes regarding prescribing opioids PharmaNet access is managed through Health Data Access Services at the Ministry of Health. The instructions are listed here: <u>https://www2.gov.bc.ca/gov/content/health/practitioner-professional-resources/system-access/medical-practice-access-to-pharmanet</u>
- Q. It appears it would be up to the individual community practitioner to request access. Of the 70% of overdoses occurring in private dwellings, does this include supportive housing and scattered site Housing First residences?
- A: This includes all private dwellings excludes shelters, hotels, support recovery, etc.
- Q: Can you give us an idea of how many people have been housed?
- A: Dawn Slykhuis stated that RainCity ICM team has housed 30 people; several other teams in the community have also housed individuals.
- Q: Do people who have moved into housing from the streets represent a large portion of the 70% and is it a danger point to move them into individual housing?

- A; Dawn Slykhuis responded that it can be a risk, however with weekly visits, support and checking in, reduced substance use is observed, no Rain City clients who have been housed have died in their homes.
- Q: Curious that First Nations overdoses represented almost equally between the genders?
- A: Dr. Tyler responded that FNHA did a data analysis in the summer and it is included in this report: <u>http://www.fnha.ca/newsContent/Documents/FNHA_OverdoseDataAndFirstNationsInBC_Pr</u> <u>eliminaryFindings_FinalWeb.pdf</u>
- Q: On the topic of prescription drugs leading to opioid misuse, do we have numbers for prescriptions being issued and resulting number of opioid addictions?
- A: Dr. Tyler responded that she was not aware of the existence of such numbers.
- Q: Is there an age limit on prescriptions such as Xanax?
- A: Dr. Tyler stated that doctors can make a clinical assessment and prescribe accordingly.
- Q: Is there any capacity for doctors to do a micro analysis of what prescriptions are being prescribed to what age groups?
- A: Dr. Tyler responded that this could happen at the provincial level.
- Q: Does RainCity have an indigenous liaison on your team that supports indigenous individuals in the community?
- A: Dawn Slykhuis responded that RainCity does have an indigenous specialist on the team who provides an aboriginal lens to the work of the team. Rain City has indigenous support workers in almost all their sites and programs, they gather regularly to ensure that cultural standards and practices are met. They also partner with Fraser River All Nations Aboriginal Society (FRANAS).
- Q: Does the ICM team support youth or just adults?
- A: Dawn responded that they work with clients over 19, they do support clients with families and the children could be under 19.
- Q: Our overdose numbers in the past had showed promise; we were the only community to have decreased in 2016. The rate is the higher now in Maple Ridge; can you help clarify how this happened?
- A: Dr. Tyler responded that since 2015 the numbers have stayed steady following the original jump. It has not increased severely, but it has definitely not decreased.
- Q: 2017 seems to be a large jump in overdose deaths from previous years- can you comment?

A: Dr. Tyler responded that 39 is an estimate and it is expected to be a bit lower. Maple Ridge is considered at a steady rate however per capita, the incidences of overdose events are very high.

*Q/A are not verbatim