

Welcome to the fourth annual META:PHI conference

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Kate Hardy, Network Director

September 24, 2021



Alcohol, opioids, and the pandemic

- We are in the midst of the gravest substance-related public health crisis in modern history
- Harms from both alcohol and opioids were increasing in the years preceding the pandemic
- The pandemic has greatly accelerated these trends

Opioid-related morbidity, Ontario

	Jan 2003	Jan 2016	May 2020
ED visits	99	357	1242
Hospitalizations	76	147	179
Deaths	23	77	246

Opioid-related harms (2)

- Estimated 2271 opioid-related deaths in Ontario in 2020, a 50% increase from 2019 (ODPRN 2020)

Alcohol harms are also increasing

- Between 2003 and 2016, age standardized rates of alcohol-related ED visits increased by 86.5% for women, and 53.2% for men (Myran 2019)
- One-year mortality rate of 5.4% for people who visited the ED two or more times in one year for alcohol-related reasons (Hulme 2020)
- Mental Health Commission of Canada (2021);
- 24% of Canadians reported increased alcohol consumption vs pre-pandemic
- 8% reported greatly increased consumption

COVID and substance use

- COVID has made things far worse:
 - Social isolation
 - Depression, anxiety, quarantine, loss of income, housing
 - Attendance at addiction and general health care services has declined
 - Weekly ED visits for mental health aged 0-29:
 - 7 days in Feb 2020: 2000 visits
 - 7 days in Feb 2021: 1500 visits

The drug cartels

- Drug supply is increasingly toxic
- Composition of the drugs sold is a business decision made by fentanyl manufacturers
- They are responding to, and creating, a demand for potent opioids

Other drugs

- Crystal meth
 - Not as lethal as fentanyl
 - But a uniquely ferocious drug in its ability to destroy minds and lives
- Cannabis
- Benzodiazepines

Impact of the crisis on people working in the field

- Factors increasing our own frustration, anxiety, anger, sadness:
 - Patients more likely to drop out – treatments aren't working as well as they used to
 - Lack of resources needed to deal with the complexity and urgency of patients' problems
 - Patients dying - suddenly or slowly
 - Disruptions in service and staffing
 - Complacency of government and health care institutions

Reasons for hope...

- Governments are funding new and existing programs
 - Not enough but a start
 - RAAM clinics
 - Addiction clinical consult services
 - Withdrawal management services
 - Residential programs

Resilience and change

- New OAT protocols for COVID
- New prescribing protocols for methadone, buprenorphine, SROM
- Greater integration and coordination:
 - Medication-assisted treatment integrated into WMS and residential programs
 - Teams of NPs/MDs and addiction counsellors working together in RAAM clinics and consult services

Resilience and change (2)

- Innovations to provide low barrier access to treatment
 - Virtual care
 - Patient navigators in hospitals
- Building communities within and between regions and professions
 - Eg this conference, the listserv, NP communities of practice
- New people entering the field
- Addiction counsellors, hospital administrators, emergency physicians, psychiatrists, NPs

META:PHI's response

Prescribing Guidelines

COVID carry guidelines
Methadone guidelines for
people who use fentanyl
SROM guidelines ('22)

Residential Treatment Standards

ED
OUD Toolkit &
Implementation pilot
AUD Toolkit ('22)

WMS

Standards
NP clinical toolkit('22)

RAAMs

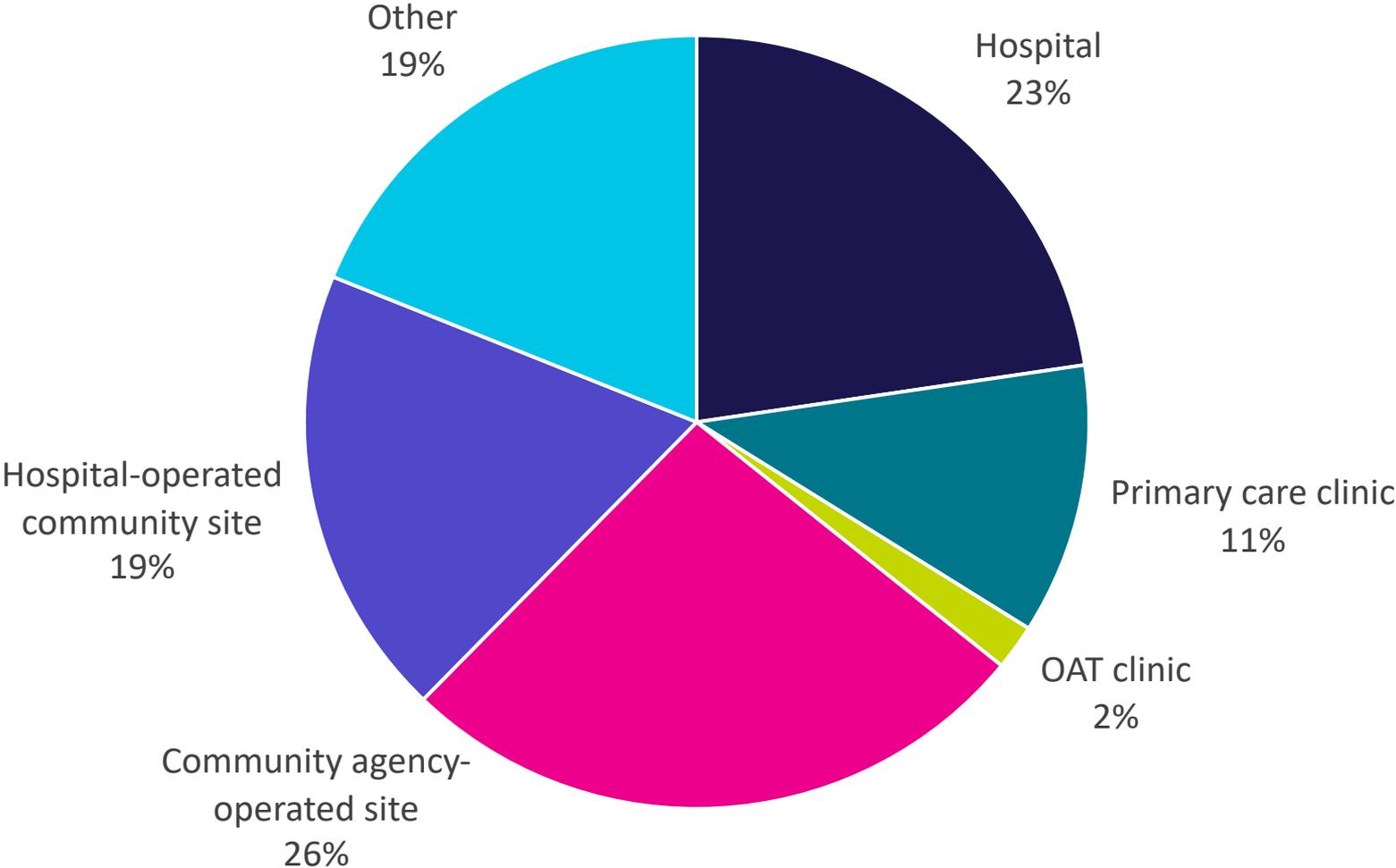
4 monthly CoPs
Environ. scan
Evaluation
Standards ('22)

Primary Care
Clinical Handbook

RAAM environmental scan

- 2020 – META:PHI tasked by the MOH to provide oversight to the province’s 74 funded RAAM clinics
- Summer 2021 – META:PHI conducted the first Ontario-wide environmental scan of all sites
 - Maintain a provincial directory of RAAM services
 - Better understand services being offered
 - Determine strengths and gaps
- 53/74 (72%) funded RAAM clinics have participated to date

RAAM locations

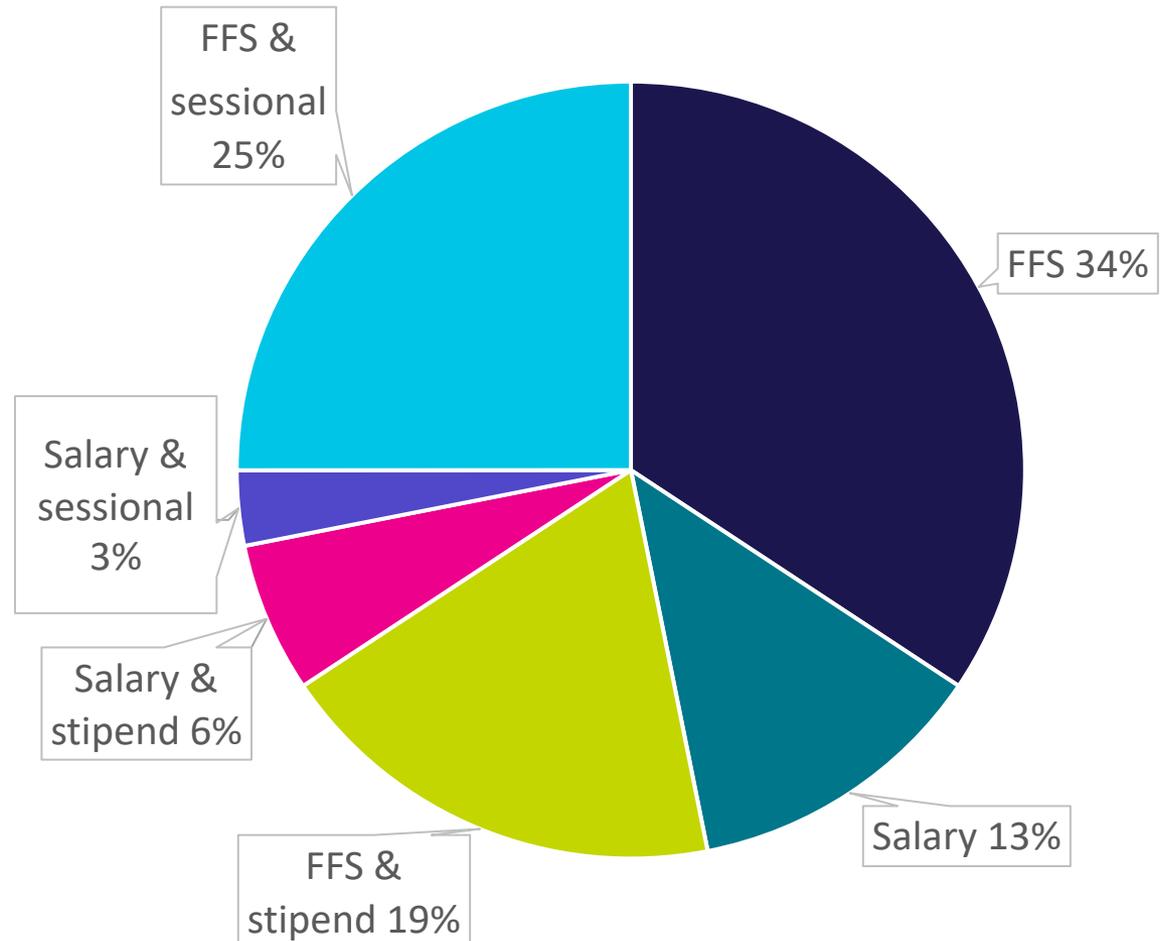


Additional funding supports

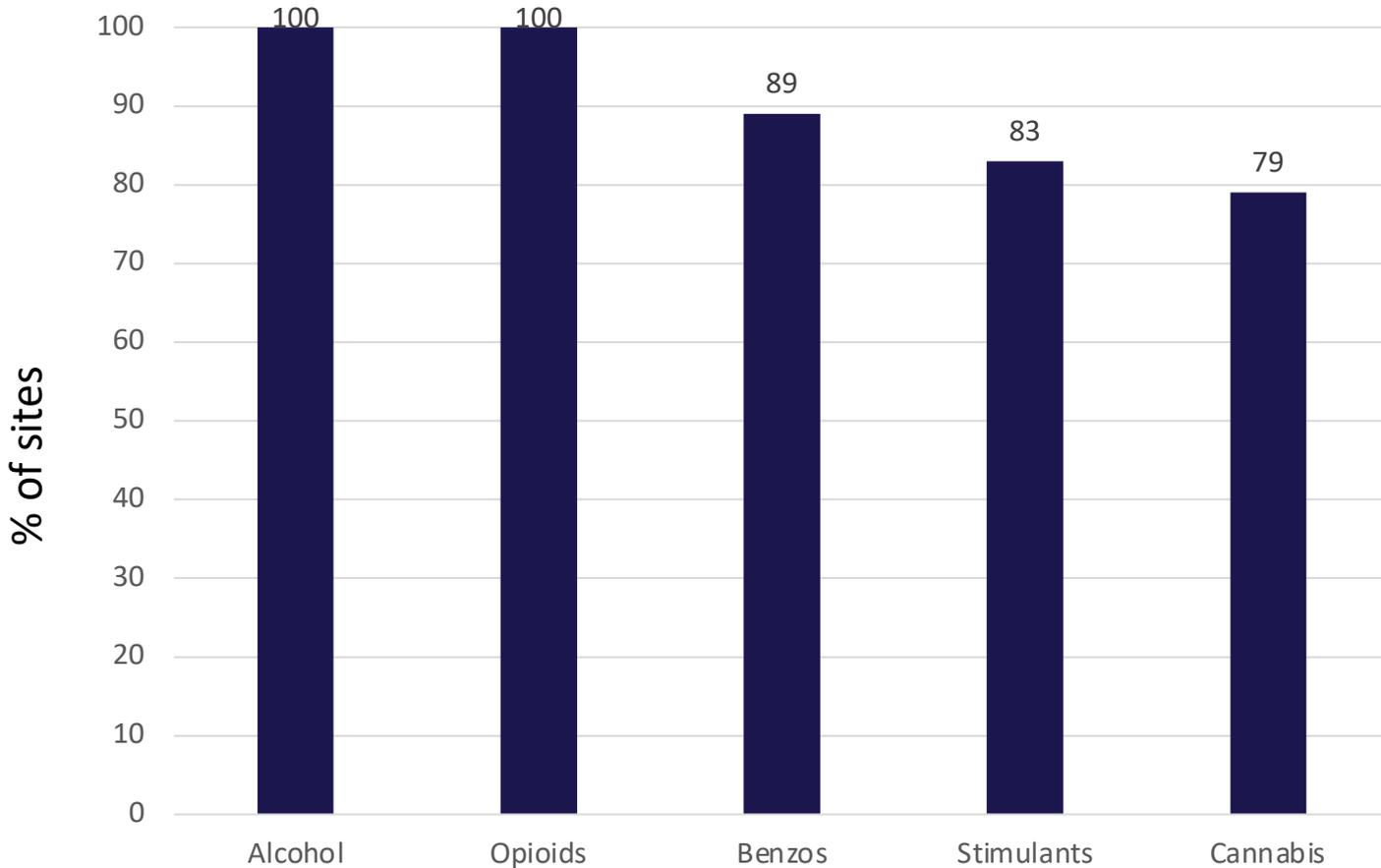
Source	Percentage of sites
No other sources	37.74%
Host agency	32.08%
Partner agency	15.09%
Other	15.09%

Physician compensation across sites

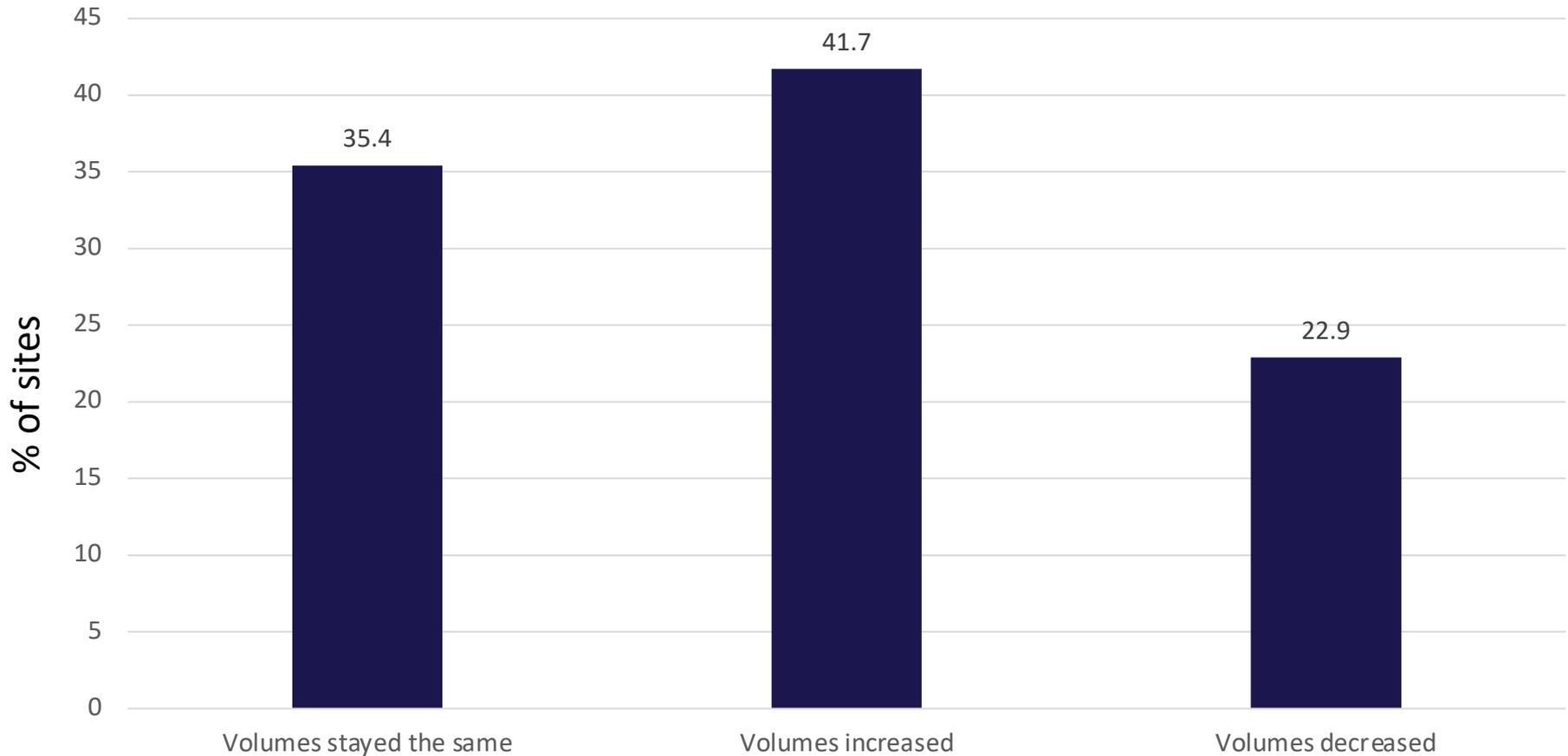
- 20% of clinics report not having physician-prescribers
- Call for standardization of physician payment models



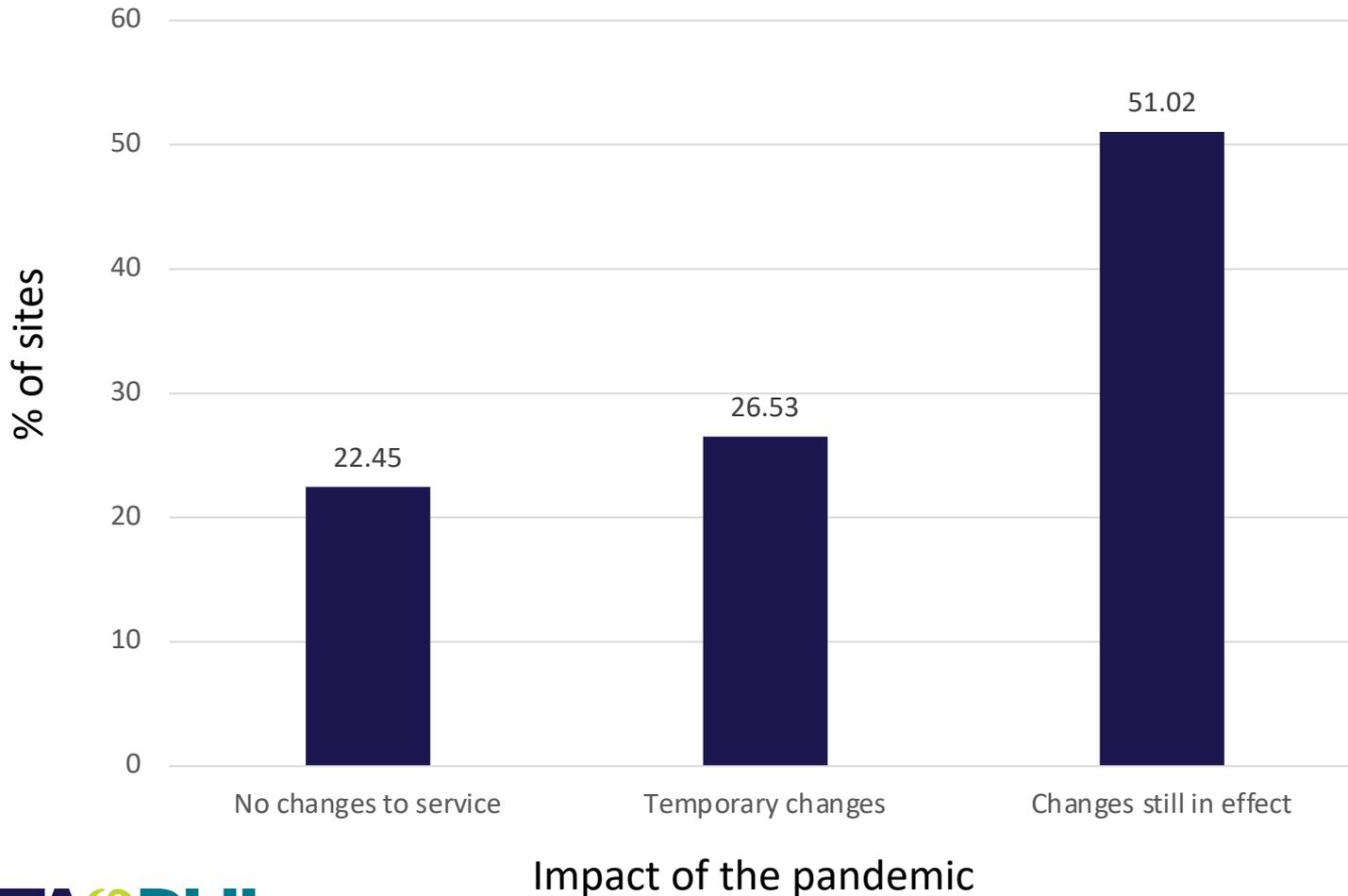
Substances RAAMs offer support for



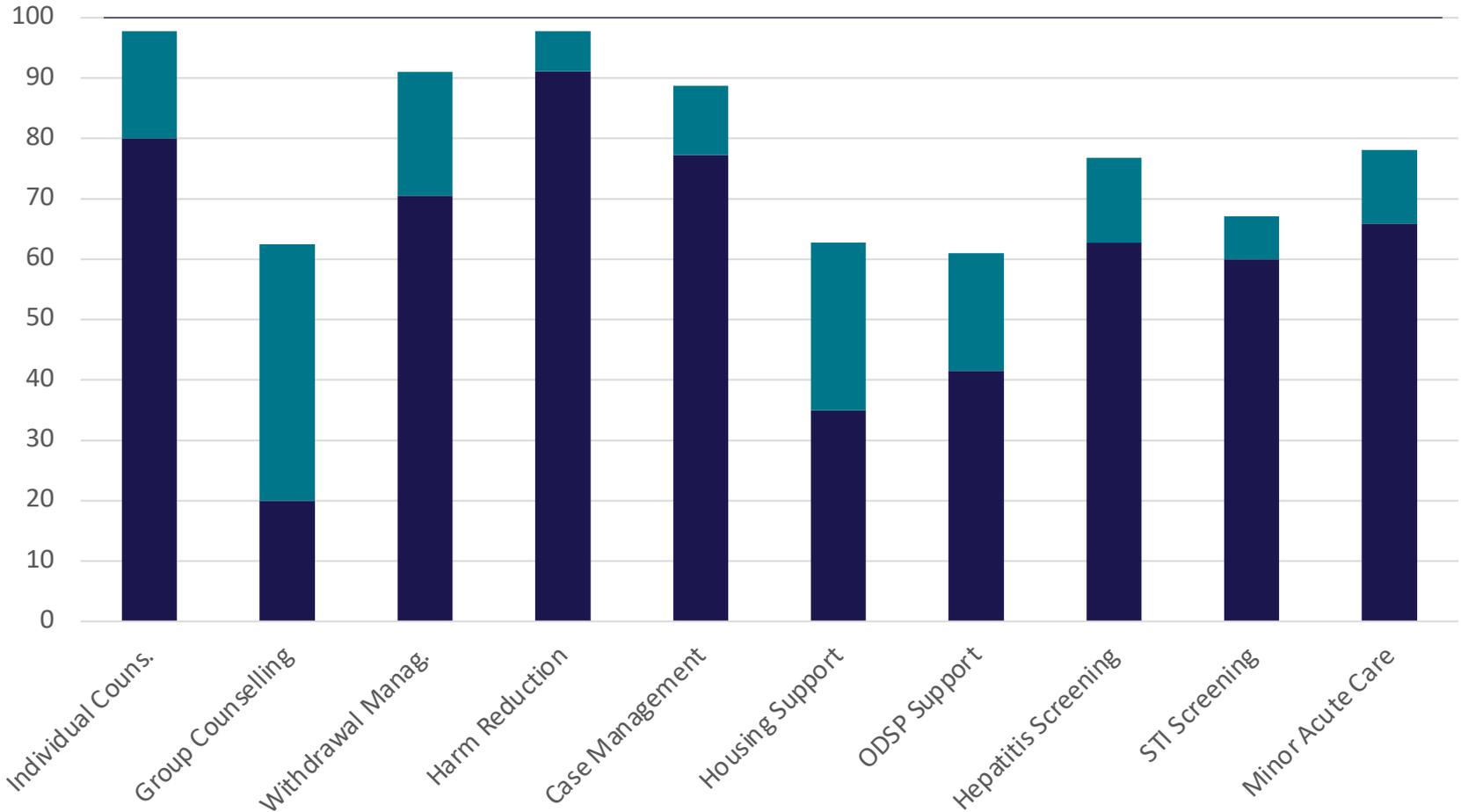
Impact of pandemic on pt volumes



Impact of the pandemic on service delivery



Top 10 wraparound services



Summarizing comments

- Overall reported increase in service demand since start of pandemic
- Number one challenge (cited by 13% of clinics): limited hours of operation – with increases in funding, RAAMs could be open longer and provide more care to their communities
- Many adaptations made throughout pandemic to provide care - offering virtual care, reorganizing clinic space, etc.
- Many comments expressing pride in the exceptional quality of care being provided

Our thanks

- Jennifer Wyman, Conference Chair, META:PHI Medical Educator
- Sarah Clarke, META:PHI Knowledge Broker
- Laurie Smith, META:PHI Administrative Assistant
- Conference Scientific Planning Committee
- University of Toronto CPD team
- The 60+ speakers, panelists, poster presenters, networking session leads, and everyone who contributed photos of their incredible work
- The 300+ learners joining us live today
 - Representation across Canada, from Vancouver to Moncton

And next

Keynote Address:
Supporting First
Nations right to
health: What is the
critical path?

A circular portrait of Carol Hopkins, a woman with dark hair pulled back, smiling broadly. She is wearing a colorful, patterned top with a floral design. The portrait is set against a light background and is partially overlaid by a teal circle containing her name and title.

Carol Hopkins,
O.C., MSW, LL.D (hons)
Chief Executive Officer,
Thunderbird Partnership
Foundation