

Nov. 25, 2024

Hon. Sylvia Jones
Minister of Health
College Park, 5th Floor, 777 Bay St
Toronto, Ontario M7A 2J3

Dear Minister Jones,

Re: Collaborative Efforts on Addiction Treatment and the Development of HART Hubs

We, the undersigned individuals and organizations, are writing to express our collective support for the government's investment in treatment and support for individuals experiencing addiction and homelessness across Ontario. As you know, the need for robust, evidence-based addiction care is more critical than ever, and we are committed to working together with the government to ensure that our patients and communities benefit from these essential services. A comprehensive and effective response to substance use requires treatment, housing and harm reduction.

Physicians across the province are taking part in developing proposals for Homelessness and Addiction Recovery Treatment (HART) Hubs. We believe in the potential of these HART Hubs to significantly improve patient outcomes and reduce the strain on emergency services and recommend the following to further drive their success.

We believe that HART Hubs should be equipped to offer a full range of addiction treatments, including withdrawal management services and Opioid Agonist Treatment (OAT) services and be integrated with existing addiction treatment infrastructure such as Rapid Action Addiction Medicine (RAAM) clinics or other community-based clinics. Studies have demonstrated that these services can reduce emergency department visits and increase the retention rates for ongoing substance use treatment, supporting individuals on their journey to recovery.

Additionally, we advocate for HART Hubs to incorporate evidence-based harm reduction strategies, such as those outlined by the Canadian Research Initiative in Substance Matters (CRISM).¹ One example in their recently updated *2024 Guideline for the Clinical Management of Opioid Use Disorder* includes providing sterile consumption kits through needle and syringe programs (NSPs). NSPs ensure the safe disposal of used needles and reduce the spread of infections such as HIV and Hepatitis C. Research shows that every new HIV infection incurs \$500,000 in lifetime healthcare costs, emphasizing the economic importance of maintaining these services for public health. According to the CDC, safe needle exchange programs are associated with an estimated 50% reduction in HIV and Hepatitis C cases.² The paper by CRISM found that when NSPs are combined with OAT, the risk of Hepatitis C infection could be reduced by 74%.³

Increased access to harm reduction supports not only reduces the spread of infectious diseases but also contributes to safer communities. A report by Public Health Ontario found that these programs have improved the safe disposal of used needles, reducing public hazards such as discarded syringes in parks and schoolyards. NSPs are widely regarded as one of the most cost-effective public health interventions available, offering a preventive solution that ultimately saves health-care dollars. Harm reduction and treatment work best in tandem

¹ <https://www.cmaj.ca/content/cmaj/196/38/E1280.full.pdf>

² <https://www.cdc.gov/hiv/effective-interventions/prevent/syringe-services-programs/index.html>

³ <https://www.cmaj.ca/content/cmaj/196/38/E1280.full.pdf>

by creating environments where people feel safe to access the services they need and connections to treatment for those who are ready to move along the continuum of care.

Moreover, we recommend that the current Supervised Consumption Sites remain open until HART hubs at the same location or within a reasonable distance are functional. As we are sure you would agree, the closure of these sites should not result in a gap where neither harm reduction nor treatment services are available.

Physicians, as experts in addiction treatment, must be actively involved in the development and operation of HART Hubs. Their expertise is critical to ensuring that these hubs provide high-quality, evidence-based care that supports both the individual and the broader community.

The undersigned individuals and organizations are committed to working closely with your Ministry to provide expert advice and assistance as you further develop your addiction treatment policy. We believe that together, we can create a comprehensive and compassionate addiction treatment framework that addresses the urgent needs of individuals experiencing homelessness and addiction.

Thank you for investing in this critical issue. We look forward to continuing our collaboration with you to improve addiction treatment and public health across Ontario.

Sincerely,

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Association

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President, Ontario Medical Association

Sarah Downey
Chief Executive Officer, CAMH

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