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Our File: #18-900

December 7, 2018

City of London
Planning Services, Current Planning
206 Dundas Street
London, Ontario
N6A 1G7

Attention: Michelle Knieriem

Reference: Middlesex-London Health Unit and Regional HIV/AIDS Connection

Responses to Questions and Comments Received

Proposed Zoning By-law Amendment for 446 York Street

Monteith Brown Planning Consultants ("MBPC") on behalf of our clients, Middlesex-London Health Unit and Regional HIV/AIDS Connection, is pleased to present a comprehensive response to comments and questions received at the Community Information Meeting on November 26, 2018 regarding the proposed Zoning By-law Amendment to permit office uses, clinic uses in association with an office use, and medical/dental offices for the purposes of a supervised consumption facility at 446 York Street. We hope this information will assist Planning Staff and Council in evaluating the merits of the proposed Amendment.

If you have any questions regarding these materials, please do not hesitate to contact me directly.

Respectfully Submitted,

MONTEITH BROWN PLANNING CONSULTANTS

(digitally signed by author)

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HS/JMc

Responses to Comments and Questions Received at the November 26, 2018 Community Information Meeting

Table 1: Concerns and Challenges

	Number of	
Comments Received	Comments Received	Proponent Responses from MLHU, RHAC, and MBPC
Site Location		
Concern about proximity to schools, clients loitering and sleeping under benches at H.B. Beal	6	Due to the density of development and the variety of land uses within and around the downtown core, it is difficult to find a location that is completely separated from all sensitive land uses, including schools. However, 446 York Street is located at a reasonable distance from the entrances to Catholic Central High School and H.B. Beal Secondary School. There are many pedestrian and vehicle route options in the area, so students, teachers, and parents will not have to walk or drive past the Supervised Consumption Facility (SCF) when travelling to either high school. SCF staff will encourage clients to take the safest possible route to the facility and emphasize the importance of not being a nuisance to neighbours. The Code of Conduct will also address this issue. The on-site security team will also conduct daily neighbourhood patrols to prevent any SCF-related nuisances from affecting the neighbourhood.
		Catholic Central High School, and its associated fenced-in track and football field, is located approximately 300 metres directly north of the site ("as the crow flies"). The entrance to Catholic Central High School is about a 400 metre walk from 446 York Street.
		H.B. Beal Secondary School is located approximately 200 metres directly northeast of the site ("as the crow flies"), but the entrance to the school on King Street is about a 400 metre walk from the subject lands. The H.B. Beal fenced-in track and football field is located approximately 95 metres east of the site. The field may draw pedestrian traffic or crowds during sports events. However, the closest vehicle and pedestrian entrance to the field and spectator bleachers (as well as the surface parking lot associated with H.B. Beal) is an approximately 260 metre walk northeast of the site on King Street. The entire sports field (including the bleachers) are fenced in with a chain link fence, which means that SCF clients will not be able to take a shortcut through the field to access the SCF, nor loiter there at any time of day. The main entrance to the surface parking lot associated with H.B. Beal is an approximately 450-metre walk from the subject lands. The parking lot is fenced in along York Street, which will discourage pedestrians from walking through the parking lot to access the SCF.
Concerns about proximity to apartment buildings and residential areas	4	MLHU and RHAC will work with London Police, community partners, and property owners to mitigate and address potential negative impacts associated with the SCF at 446 York Street. RHAC and MLHU will meet at least once per year with property owners, residents, and business owners within 250 metres of the site to discuss and address issues as they arise. Concerns may also be brought to RHAC and MLHU's attention at any time.
Developers may pull out of plans in areas near SCFs. How will the SCF impact revitalization efforts in the neighbourhood?	4	The City of London will continue to work with community partners to support opportunities to revitalize the area. This use is being established in response to a public health emergency for actions and events that are already prevalent in this location and this neighbourhood.
York Street is busy (20,000+ cars per day), and the site is located mid- block, which may lead to jaywalking	3	There is a controlled intersection at York Street and Maitland Street, half a block from the site. Staff will discuss traffic safety with clients. Clients are also able to stay in the aftercare area after they consume drugs, during the height of their intoxication, which contributes to improved public order in adjacent areas. The site is also separated from public spaces that generate pedestrian traffic or draw large crowds.

Table 1: Concerns and Challenges, Continued

Number o Comment:	
Comments Received Received	
Site Location	
Overall concern with locating the SCF at 446 York Street	MU and RHAC have been working in conjunction with numerous other community partners, London Police Services, and various levels of government (including the City of London) in developing cideria to guide the Location of Supervised Consumption forcilities. 44 of Not Street was chosen as a optential location for an SCF fieth or a destination process that Despain in March 2013 of with the Other London SCF. SCF. 440 York Street is Located within a shart wild be of those two areas within a service provided information to Londoners about SCFs, and other locations are street in the case of Dundon & Adelaids and Downtown London source provided freatback process from November to December 2017 for provide information to Londoners about SCFs, and other locations are street in the case of Dundon & Adelaids and Downtown London. South of Londoners about SCFs, and other locations are street in the case of Dundon & Adelaids and Downtown London. South of Londoners about SCFs, and other locations are street in Londoners and trageted focus groups with service providers, Indigenous agencies and individuals, and people who inject drugs. The focus groups included after survey input from own 27,000 geophs; in person consultations suggested location suggested location in suggested locations are suggested locations of the suggested location in suggested locations and tragets the suggested location in suggested location in the suggested locati

Table 1: Concerns and Challenges, Continued

	Number of			
Comments Received	Comments Received	Comments Received		
Site Location				
Overall concern with locating the Supervised Consumption Site (SCF) at 446 York Street, continued	2	1. Locations that meet the needs of those who they are designed to service i. Within close proximity to, or near, communities where drug consumption is prevalent iii. Well serviced by transit iii. Discrete, allowing for reasonable privacy for those using the facility iv. Separated from busy pedestrian-oriented commercial areas v. Separated from public spaces that generate pedestrian traffic or may generate large crowds from time to time vi. Close to an area with other drug addiction related support services (continued) 2. Locations that avoid land use conflicts i. Separated from busy commercial areas or active public spaces that could generate conflicts between the general public and those leaving supervised consumption facilities after consuming ii. Separated from parks iii. Separated from key pedestrian corridors within the Core Area iv. Separated from public elementary or secondary school properties v. Separated from municipal pools, arenas and community centres and the Western Fairgrounds vi. Not within the interior of a residential neighbourhood		
		Supervised consumption facilities should be designed to: • Incorporate Crime Prevention Through Environmental Design (CPTED) principles • Meet provincial regulations, the policies of this plan, and municipal by-laws relating to accessibility • Orient building entrances to allow for reasonably discrete entry and exit • Ensure that building waiting areas and vestibules are adequately sized to avoid line-ups or waiting outside of the building • Allow for easy visual surveillance of the facility and its surrounding site from the street • Avoid opportunities for loitering, such as the installation of seating areas or landscape features that can be used for seating The partners who are leading the work on establishing a Supervised Consumption Facility are committed to respecting neighbourhood needs and concerns. Not only was this respect a key recommendation from the public consultation process for the SCF application process, but it is also a basic principle of good public service to consider the expressed values of the community when planning new services. To this end, the public		
The nearby rail crossing is a potential safety threat	2	consultation input to date and the Council policies on siting of Supervised Consumption Facilities have been top of mind throughout the site selection process. Staff will discuss safety around the rail crossing with clients. Clients are also able to stay in the aftercare area after they consume drugs, during the height of their intoxication, which contributes to improved public order in adjacent areas and reduces the risk of clients walking on or across the rail tracks immediately after consuming drugs.		
Site Location				
The site may become congested when/if emergency medical and fire services have to visit the site.	1	The current TOPS site is a much smaller space than 446 York Street and EMS, Police, and Fire Services have efficiently accessed the site without challenges and/or barriers. Since opening in February 2018, there have been 14 EMS visits to TOPS (just over one visit per month, on average), and they have been able provide their services without concern at the site.		
LCBO and marijuana stores are not allowed that close to schools, so why is the SCF permitted?	1	Due to the density of development and the variety of land uses within and around the downtown core, it is difficult to find a location that is completely separated from all sensitive land uses, including schools. The City has not recommended that SCFs be located a specific distance away from schools. However, 446 York Street is located at a reasonable distance from the entrances to Catholic Central High School and H.B. Beal Secondary School. There are many pedestrian and vehicle route options in the area, so students, teachers, and parents will not have to walk or drive past the SCF when travelling to either high school. SCF staff will encourage clients to take the safest possible route to the facility and emphasize the importance of not being a nuisance to neighbours. The client Code of Conduct will also address this issue. The on-site security team will also conduct daily neighbourhood patrols to prevent any SCF-related nuisances from affecting the neighbourhood.		

Table 1: Concerns and Challenges, Continued

	Number of	
Comments Described	Comments	
Crime & Safety	Received	Proponent Responses from MLHU, RHAC, and MBPC
Concerns about	9	London Police will patrol the area on a regular basis, and there will be a private security team on site during opening hours.
neighbourhood safety and increases in crime		There are currently effective policies and procedures in place to improve safety at the Temporary Overdose Prevention Site, including a client code of conduct (which addresses loitering, trafficking or purchasing of drugs, and behaviour in/around the site), washroom provision, critical incident policy, psychosis management, de-escalation training, management of escalating aggressive behaviour, and prohibition from accessing the SCF, based on behaviour. These policies and procedures will be implemented at 446 York Street. The Code of Conduct, which outlines the client's rights and responsibilities including the responsibilities to create and maintain a safe place; to respect property and privacy of others in the site and to follow the reasonable direction of staff, will be in effect at 446 York Street. Staff will generally deal with client issues that may arise using de-escalation strategies, according to established policies and procedures. Staff will contact police should a situation become unmanageable.
		Clients who attend the Supervised Consumption Facility wait approximately 10-15 minutes in the waiting room prior to entering the supervised consumption room. The average amount of time spent in the consumption area is 15-20 minutes prior to the client then moving to the aftercare room. Clients spend approximately 15-20 minutes in the aftercare room in order to ensure that help is available during the period of greatest risk for overdose. With a typical visit averaging 40-50 minutes, clients remain in the facility during the height of their intoxication, which contributes to improved public order in adjacent areas.
		A Crime Prevention Through Environmental Design (CPTED) analysis has been completed for the site area, which includes a review of the external site, site illumination, signage, emergency response, and the interior site design. The CPTED report noted that the site location has very strong natural surveillance, meaning that members of the public can easily observe activity in and around the site, and call emergency services if an incident arises. In accordance with the CPTED report, enhanced fencing, upgraded exterior lighting, security cameras, and bollards will be installed to address safety and security issues. Additional security measures will include security cameras, alarm door entry, and keys fobs for controlled entry. Security Concepts, a private security service, will be on site during opening hours, 7 days a week, while the site is open (the site will be open to public from 9:30 am to 8 pm, with staff huddles from 9 – 9:30 am and last injection at 8 pm).
		MLHU and RHAC will also partner with the City's NeighbourGood London program to conduct community-led Neighbourhood Safety Audits around the SCF. Neighbourhood Safety Audits are designed to support residents to identify the safety concerns in their neighbourhood and develop a plan of action to increase safety for all.
The SCF will increase drug use in the neighbourhood, people who use drugs will come from other cities	3	Most individuals who use SCFs are marginalized, underhoused, and living in poverty so they cannot travel long distances to access a SCF. Research has found that PWID will only travel a few blocks to use health services, including SCFs. The SCF will be located in an area where PWID are known to frequent, as shown by evidence from the London Cares map of discarded needle hot spots, evidence of drug use depicted in the CPTED Report (including litter on site from injection drug use and huffing), and community consultations. Evidence demonstrates that this area is already a hotspot for drug use. The SCF will provide a place for PWID to consume drugs indoors, rather than in public.
Regular meetings and/or a support group should be established for the neighbourhood, so people can share concerns	3	MLHU and RHAC will work with London Police, community partners, and property owners to mitigate and address potential negative impacts associated with the SCF at 446 York Street. As part of the re-zoning application, RHAC, MLHU, and MBPC prepared a Public Consultation Plan that outlined MLHU and RHAC's commitment to regular consultation with people living and working near the SCF. RHAC and MLHU will meet at least once per year with property owners, residents, and business owners within 250 metres of the site to discuss and address issues as they arise. Concerns may also be brought to RHAC and MLHU's attention at any time. Brian Lester, the RHAC Executive Director, will be the Primary Contact for the community. His contact information will be listed on the RHAC and MLHU websites, and will be posted at 446 York Street.
		It should be noted that MLHU and RHAC have already gone above and beyond the once-a-year consultation requirement for TOPS in downtown London. Within the first six months of TOPS opening, RHAC and MLHU hosted two Community Liaison Meetings to proactively address community concerns.
The SCF will increase drug dealing in the neighbourhood and Downtown	2	At the Temporary Overdose Prevention Site on King Street, there are effective policies and procedures in place to address potentially problematic client behaviour, including loitering, trafficking or purchasing of drugs, and behaviour in/around the site. London Police have not reported increased drug trafficking service calls to the area since TOPS opened. There is zero tolerance for drug dealing at TOPS or the proposed SCF, and London Police will patrol the area around 446 York Street on a regular basis.
Property values will decline	2	There is no evidence that SCFs decrease property values. Property owners can challenge property value assessments with the Municipal Property Assessment Corporation (MPAC).
Businesses in the area will lose clients	1	MLHU and RHAC will work with London Police, community partners, and property owners to mitigate and address potential negative impacts associated with the SCF at 446 York Street. RHAC and MLHU will meet at least once per year with property owners, residents, and business owners within 250 metres of the site to discuss and address issues as they arise. Concerns may also be brought to RHAC and MLHU's attention at any time. It should be noted that TOPS staff have fostered friendly and productive relationships with business owners in close proximity to the Temporary Overdose Prevention Site in order to minimize the negative impacts on nearby businesses.
There is a high concentration of social services in the area	1	446 York Street was selected as a location for a SCF because it is within a twenty-five-minute walk of many social services that can provide additional support to PWID in London, including: the Men's Mission & Rehabilitation Centre, the Salvation Army Centre of Hope, Regional HIV/AIDS Connection, Addiction Services Thames Valley, London Cares, Middlesex-London Health Unit, Southwest Ontario Aboriginal Health Access Centre, Atlosha Indigenous Shelter, and London Intercommunity Health Centre.
		(Continued)

Table 1: Concerns and Challenges, Continued

	Number of	
Comments Received	Comments Received	Proponent Responses from MLHU, RHAC, and MBPC
Site Selection and Rezoning Pr	rocess	
The site selection and application process were rushed	1	The events that prompted MLHU and RHAC to begin the SCF application process started in 2012, as it became evident that opioid abuse was becoming a growing public health concern in Middlesex-London. According to the MLHU, Middlesex-London has been disproportionately affected by the nation-wide opioid crisis, compared to the Province of Ontario as a whole, over the past decade. From 2008 to 2012, the MLHU reported that opioid abuse led to higher rates of overdoses, emergency department visits, hospitalizations, and admissions to substance misuse and addictions programs in Middlesex-London than the Province of Ontario as a whole. In 2013, Middlesex-London EMS responded to 602 drug overdose-related calls, or almost two per day. In 2016, MLHU declared a public health emergency due to an increase of HIV cases among PWIDs. A Supervised Injection Services Feasibility Study was conducted in 2016, and the results were released in February 2017. The study found that the creation of a Supervised Injection Service in London had a high potential to improve public order, reduce infectious disease transmission and overdose, and promote access to
		addictions treatment and other services. PWID who participated in the feasibility study identified the areas of Dundas & Adelaide and Downtown London as preferred locations for a SCF. By May 2017, the MLHU reported that there was an HIV epidemic among PWIDs in London. The PWID population accounted for two-thirds of new HIV diagnoses in London-Middlesex, compared to less than ten percent province-wide. Dr. Chris Mackie, the MLHU Medical Officer of Health, activated the Health Unit's Incident Management System to provide an orderly and efficient response to this emergency. In October 2017, MLHU and RHAC began searching for potential SCF locations.
		The Centre for Organizational Effectiveness facilitated a community consultation process from November to December 2017 to provide information to Londoners about SCFs, and obtain feedback on benefits, concerns, and site location suggestions. Community members also provided feedback regarding what a SCF should include in order to be effective and acceptable to the community. These consultations included online survey responses from over 2,000 people, in-person consultations with over 300 participants, and targeted focus groups with service providers, Indigenous agencies and individuals, and people who inject drugs. The focus groups included specific consultations in some of the affected neighbourhoods, including downtown London, South of Horton (SoHo), Old East Village (OEV), and Hamilton Road. Fourteen to twenty-six people who participated in the Centre For Organizational Effectiveness consultation suggested locating a SCF within a block of the subject lands.
		Key recommendations from these public consultations included: 1. Ensure site location is accessible and welcoming to potential clients and respects the immediate neighbourhood context, 2. Implement and operate from a base of evidence and best practices, and commit to ongoing evaluation, 3. Be equipped to serve diverse group of clients with varying needs, 4. Respect neighbourhood needs and concerns, 5. Communicate, educate, and train, 6. Develop strong partnerships and commit to system shift, 7. Continue to work with the "bigger picture" in mind, and 8. Develop and implement a comprehensive implementation strategy.
		MLHU and RHAC collaborated with numerous other community partners, London Police Services, and various levels of government (including the City of London) in developing criteria to guide the location of SCFs. MLHU and RHAC considered recommendations from all these parties when they collaborated with several other agencies to open the first provincially-sanctioned Temporary Overdose Prevention Site (TOPS) at 186 King Street in February 2018 in order to help address public health concerns about injection drug use.
		These recommendations were also used to guide the development of the SCF model and location selection for permanent SCF sites in London. 446 York Street was selected after an extensive review of several properties. MLHU and RHAC identified 120 York Street and 372 York Street as potential sites for a SCF, but those locations were abandoned when lease negotiations failed. MLHU and RHAC ultimately determined that 446 York Street was the most feasible location for a SCF, based on the building's characteristics, proximity to the downtown core and Old East Village, proximity to addictions support services, and minimal conflicts associated with surrounding land uses.
		In April 2018, MLHU and RHAC submitted an application to permit a SCF at 446 York Street to the Provincial and Federal Governments, and hosted a Neighbourhood Information Meeting regarding the proposed SCF at 446 York Street to inform members of the public about the application and discuss measures that could be taken to mitigate community concerns about negative impacts from the SCF. In July, MLHU, RHAC, and MBPC hosted a Community Information Meeting with local residents, businesses, and property owners to describe the planning proposal, planning approvals process, and operational management plans for the proposed site. In October 2018, the Zoning By-law Amendment application was submitted to the City of London. The City of London hosted another Community Information Meeting in November 2018 to inform members of the public about the application.
		(Continued)

Table 1: Concerns and Challenges, Continued

	Number of Comments			
Comments Received		Proponent Responses from MLHU, RHAC, and MBPC		
Site Selection and Rezoning Pr	Site Selection and Rezoning Process			
Service providers were not consulted	1	Service providers were consulted during the Centre for Organizational Effectiveness (CFOE) community consultation process in November and December 2017. The CFOE facilitated community consultations provide information to Londoners about SCFs, and obtain feedback on benefits, concerns, and site location suggestions. In January 2018, the CFOE released the Supervised Consumption Facilities report with consultation and survey results. The public consultation process included nine community consultations in neighbourhoods throughout the City of London, an online survey, four focus groups with specific populations (PWIDs, urban Indigenous voices, the Chippewas of the Thames First Nation Reserve, and service providers), and an MLHU website that provided information on opioids. 2,145 people completed the online survey, 334 people participated in community consultations, and 56 people participated in focus groups. The top three survey participant groups were: community citizens (49%), health practitioners (11%), and high school, college, or university students (10%).		
Consider temporary zoning	1	The proposed SCF at 446 York Street is intended to operate as a permanent site, and therefore a temporary zoning change is not appropriate. The proposed zoning preserves a wide range of permitted uses for the site, in addition to the proposed office uses, a clinic in association with an office use, and medical/dental offices.		
Is the proposed use consistent with Official Plan	1	The proposed use is consistent with the 1989 City of London Official Plan, as offices with clinics as a secondary use are permitted in 'Office/Residential' areas in the Official Plan.		
policies?		The site meets the City of London's criteria for appropriately locating SCFs in locations that meet the needs of those who they are designed to serve and locations that avoid land use conflicts. These criteria were approved by City Council in May 2018 for inclusion in the 1989 Official Plan and the London Plan. The SCF policies in the 1989 Official Plan are currently under appeal, but the SCF policies in the London Plan are in force and effect. MLHU and RHAC used these policies to guide their comprehensive site evaluation process when choosing a suitable location for a SCF in London. MLHU and RHAC also used these policies to shape the interior and exterior design of the facility.		
The site selection process should include an evaluation matrix of consequences for locals	1	MLHU and RHAC considered the impact that an SCF would have on the surrounding community throughout the site selection process, and chose a location that would meet the needs of those the SCF was designed to serve, while minimizing potential land-use conflicts. During the Centre For Organizational Effectiveness consultation process, MLHU and RHAC asked community members to identify specific concerns about locating an SCF in or near Downtown London. MLHU and RHAC established site operation policies and procedures at TOPS to address and mitigate these concerns. These policies and procedures will also be employed at 446 York Street.		
		It should also be noted that according to the Supervised Injection Services Feasibility Study Report for London, prepared by the Ontario HIV Treatment Network, "rigorous evaluation of SIS [supervised injection services] have shown that negative impacts of this kind [public disorder, crime, exacerbating community drug use patterns] have not occurred" in neighbourhoods where supervised injection services are located.		
Site Design				
There is not enough space on the property to properly accommodate the SCF. A larger facility is needed, as success depends on the provision of wrap-around services and breaking the cycle.	4	The proposed site at 446 York Street has an area of 352.6 square metres, much larger than the current TOPS facility at 186 King Street (which only has an area of 46.45 square metres). The site meets the Province's criteria for minimum amounts of floor space dedicated to intake, consumption, and post-consumption areas. The site also has enough space to accommodate wrap-around supports.		
There are not enough exits. 3 exits are needed, but there is no back exit.	3	The front doors will serve as the main exit and entrance out of the building. There is an also exit on the west side, towards the rear of the building. Two exits are sufficient for the building.		
To address concerns about possible future expansions on site, the SCF should be limited to the existing building, and there should be a public Site Plan review process for the proposed changes	2	In the proposed Zoning By-law Amendment, the office and clinic uses are restricted to the existing building. No extensive changes to the exterior of the building are proposed, and changes to the interior layout of a building are not subject to site plan review.		

Table 1: Concerns and Challenges, Continued

Comments Received	Number of Comments Received	Comments Received
Facility Operations	RECEIVED	Commens Received
Concern about queuing lines out front	1	The site design will follow the City of London's Design Guidelines for SCFs and incorporate CPTED principles. The design of the site will discourage loitering. No benches, shade, or other amenities will be provided in the surface parking lot at the front of the building. Access will be provided through an entry and exit lobby at the front of the building, with sufficient space to avoid queuing lines out front. No extensive exterior modifications to the building or site are proposed, other than necessary security additions (security cameras, enhanced fencing, upgraded exterior lighting, and bollards in front of the building). There are effective policies and procedures in place at the Temporary Overdose Prevention Site, including a client code of conduct (which addresses loitering, trafficking or purchasing of drugs, and behaviour in/around the site), which would be implemented at the SCF site.
Site appears wide-open, not discrete or private	1	The site is not located near any high-traffic pedestrian areas or areas which may draw in a large number of people. The windows at the front of the building will be tinted for privacy, and the interior lobby is designed to accommodate internal queueing, to avoid the need for clients to line up outside of the building. The openness of the site provides clear lines of sight and promotes safety and security.
The facility is not open long enough	1	The <u>Temporary</u> Overdose Prevention Site is open to the public from 10 AM - 4 PM from Monday to Friday and 11 AM to 4 PM on weekends. These hours were based on local context and consultation with persons with lived experience. There is also limited funding associated with a Temporary Overdose Prevention Site and therefore MLHU and RHAC were unable to increase the hours of operation. The <u>SCF site</u> at 446 York Street will be open to public for consistent hours Monday to Sunday from 9:30 am to 8 pm (with staff huddles from 9 – 9:30 am and last injection at 8 pm). If there is demand for the facility to be open more than 12 hours per day, MLHU and RHAC will keep the funder apprised of service growth and apply for funding to increase the hours of operation, after consultation with community stakeholders, local community groups, and persons with lived experience.
Concerns about clients taking needles to go	1	RHAC and the MLHU provide sterile injection supplies (including needles) to clients to reduce the significant health risks associated with sharing or re-using needles (including the transmission of HIV, Hepatitis C, and iGAS). About 60% of the distributed needles are directly recovered by RHAC. RHAC also provides small sharps containers for clients so they can dispose of their needles in a safe manner. MLHU's Community Emergency Response volunteers do needle sweeps in different zones within the City of London three times per week. The City of London Parks and Recreation Department collects needles regularly on public property. They can be contacted for needle recovery on public property twenty-four hours a day, seven days a week.
		It is important to note that SCFs provide people with a safe and clean place to use drugs. In places where SCFs have been established, there has been a marked decrease in the number of used and discarded needles found.
Client Behaviour		
Are clients operating vehicles or scooters after?	1	Research has found that PWID tend to walk or use transit to get to an SCF. Based on experience from TOPS, clients are highly unlikely to drive to the site. Most individuals who access TOPS are marginalized, underhoused, and living in poverty so they do not have access to vehicles. London Police will continue to enforce impaired driving laws in the neighbourhood.
Clients may loiter between the Mission and the proposed SCF	1	The client Code of Conduct discourages loitering around the site, and the security team will also address loitering.
Where do clients go when they're not on site?	1	The design of the site will discourage loitering. No benches, shade, or other amenities will be provided in the surface parking lot at the front of the building. There are effective policies and procedures in place at the Temporary Overdose Prevention Site, including a client code of conduct, which also addresses loitering. A security guard will be present to address behaviours on site. In addition, the operators are willing to offer a partnership through a memorandum of understanding that would allow the security service to operate on surrounding properties if the owner/operator is interested in this. The health service being provided here does not change the fact that individuals are responsible for their own behaviour, nor does it change the fact that the police have the duty and authority to address public disorder if necessary.
The SCF should include a place for clients to sleep, so they do not sit and sleep on neighbouring properties	1	The site cannot accommodate space for clients to sleep, but there is an after-care room where clients can stay for an extended period of time after consuming drugs.

Table 2: Questions Received

	Number of	
Questions Received	Questions	Proponent Responses from MLHU, RHAC, and MBPC
The Process	Received	Troponent Responses from METO, REAC, and MDFC
What reports have been	1	446 York Street was selected after an extensive public consultation process to identify the areas of greatest need and a review of numerous properties.
relied on to look at different sites?		Before the site selection process began, MLHU and RHAC relied on public health data on drug overdoses, emergency response statistics, and findings from the Supervised Injection Services Feasibility Study to understand the scope and severity of problems relating to injection drug use in London. The City faces a severe drug crisis. Four hundred lives have been lost to overdose in the past decade. January 2018 saw 10 overdose deaths in London – more than any previous month in history. The number of Emergency Department visits for overdoses has generally been higher than the provincial average since 2004, and has been increasing since 2014. There were 188 overdose-related Emergency Department visits in 2016. The crisis has had a substantial impact on emergency responders. In 2013, Middlesex-London EMS responded to 602 drug overdoses-related calls, averaging more than one per day. Between 2008 and 2012, London Police Services responded to an average of 730 incidents per year related to drug possession. Historically, there has been a high prevalence of people who use drugs in London's public spaces. Of 199 people surveyed in the Supervised Injection Services Feasibility Study for London, 72% reported injecting drugs in public spaces. Public drug use also presents potential harm to people who use drugs. It often results in unsafe consumption practices, which can increase the risk of overdose death and the spread of diseases such as HIV.
		MLHU and RHAC began to identify potential locations for SCFs in October 2017, and wider public consultations with the Centre for Organizational Effectiveness began in November 2017. 446 York Street is located in an area where drug use is already prevalent (as shown by evidence of drug use and community input, including input from PWID). MLHU and RHAC ultimately determined that 446 York Street was the most feasible location for a SCF, based on the building's characteristics, proximity to the downtown core and Old East Village, proximity to addictions support services, minimal conflicts associated with surrounding land uses, and the building's availability to be used as a SCF.
Why aren't residents being respected?	1	MLHU and RHAC are committed to an ongoing community consultation process with residents, property owners, and business owners near SCFs. The City of London requires at least one community meeting per year for residents, property owners, and business owners within 120 metres of a SCF or TOPS, but MLHU and RHAC have already gone above and beyond this requirement for the TOPS site in Downtown London. Within the first six months of TOPS opening, RHAC and MLHU have hosted two Community Liaison meetings with business owners, property owners, and residents to proactively address community concerns. A Consultation Plan is included in the Planning Application for 446 York Street, which includes the designation of a community contact person and a commitment to meet at least once per year with residents, property owners, and business owners in the neighbourhood.
Why hasn't the public been informed?	1	The Centre for Organizational Effectiveness facilitated a community consultation process from November to December 2017 to provide information to Londoners about SCFs, and obtain feedback on benefits, concerns, and site location suggestions. Community members also provided feedback regarding what a SCF should include in order to be effective and acceptable to the community. These consultations included online survey input from over 2,000 people, in-person consultations with over 300 participants, and targeted focus groups with service providers, Indigenous agencies and individuals, and people who inject drugs. The focus groups included specific consultations in some of the affected neighbourhoods, including downtown London, South of Horton (SoHo), Old East Village (OEV), and Hamilton Road. Fourteen to twenty-six people who participated in the Centre For Organizational Effectiveness consultation suggested locating a SCF within a block of the subject lands.
		MLHU and RHAC hosted a Neighbourhood Information Meeting on April 26, 2018 for residents, property owners, and business owners within 120 metres of 446 York Street. Attendees at this meeting were provided with study findings demonstrating that SCFs help save lives, prevent the spread of disease, reduce health care expenditures, and can help improve neighbourhoods. Attendees were also given an update on the success of the TOPS, the role of community partners, a review of the site-specific public consultation feedback, and a floor plan of the proposed site. The meeting also provided an overview of the facility's proposed operational model, as well as an opportunity to hear community concerns, discuss measure that could be taken to mitigate those concerns, and establish a system for ongoing communication with the community.
		MLHU, RHAC, and MBPC hosted a community open house on July 25, 2018 with local property owners, business owners, and residents to describe the planning proposal, planning process, and operational management plans for the proposed Supervised Consumption Facility at 446 York Street. MLHU and RHAC mailed notices to property owners, business owners, and residents within 250 metres of the proposed site two weeks before the meeting.
		The City of London hosted a Community Information Meeting on November 26, 2018 with local property owners, business owners, and residents to provide an opportunity for the public to learn more about the application and provide feedback. Members of the public are also able to provide feedback on the application and the proposed use at the statutory public meeting on December 10, 2018.
Concerned that the application is being supported in advance of consultation	1	MLHU and RHAC have engaged in extensive consultations with service providers, PWIDs, and community members throughout the site selection and application process.

Table 2: Questions Received, Continued

Questions Received	Number of Questions Received	Proponent Responses from MLHU, RHAC, and MBPC
Location		
Who will be responsible for clients under the influence off the property prior to and after use?	3	A security guard will be present to address behaviours on site. In addition, the operators are willing to offer a partnership through a memorandum of understanding that would allow the security service to operate on surrounding properties if the owner/operator is interested in this. The health service being provided here does not change the fact that individuals are responsible for their own behaviour, nor does it change the fact that the police have the duty and authority to address public disorder.
Why not keep the site at 186 King?	2	RHAC is moving out of their location at 186 King Street. Furthermore, 186 King Street is not an adequate long-term location for an SCF.
Why can't the SCF be located in a hospital?	2	Many clients have had difficulty navigating the health care system for many reasons (i.e. no health card, mistreatment by a health care provider or organization, stigma, mistrust). Clients have provided feedback on the health care system, with many stating that they have had negative experiences in a hospital and therefore refuse to go to a hospital unless taken by ambulance. A SCF in a hospital would not be a place that is accessible, comfortable or "feels safe" for a client to attend. Hospitals are also not located in close proximity to clients, and cannot accommodate wrap-around services provided by an SCF. It is also less expensive to operate outside of a hospital.
Why is a location being considered that's proximate to residential uses?	1	Due to the density of development and the variety of land uses within and around the downtown core, it is difficult to find a location that is completely separated from all sensitive land uses, including residential areas. Design considerations have been proposed to ensure the active frontage of the use is limited only to York Street, well removed from the active frontage of the apartment buildings to the north. MLHU and RHAC will work with London Police, community partners, and property owners to mitigate and address potential negative impacts associated with the SCF at 446 York Street. RHAC and MLHU will meet at least once per year with property owners, residents, and business owners within 250 metres of the site to discuss and address issues as they arise. Concerns may also be brought to RHAC and MLHU's attention at any time.
Is 446 York Street a good solution for the long-term?	1	446 York Street was chosen after an extensive site selection process. The location meets the City's comprehensive site-selection criteria for SCFs included in the London Plan, and the building is able to accommodate SCF services, the needle exchange program, and wrap-around supports.
Why Downtown?	1	The site is in a location that meet the needs of those the service is designed to serve at a location that avoids land use conflicts. Data on improperly disposed needles collected by London Cares Homelessness Response Services, RHAC, and MLHU show that the downtown core, South of Horton, Old East Village, and Hamilton Road neighbourhoods are currently experiencing high degrees of injection drug use. 446 York Street is situated amongst these communities where drug use is prevalent and the CPTED investigation revealed evidence of this activity already occurring both on and around this site. The site is separated from busy pedestrian-oriented commercial areas and public spaces and located within a fifteen-minute walk of seven different social services. Due to the density of development and the variety of land uses within and around the downtown core, it is difficult to find a location that is completely separated from all sensitive land uses. However, 446 York Street is located at a reasonable distance from schools, parks, key pedestrian corridors, and community centres.
Site Design		
Where is the fence going to go if there is no room between the proposed site and neighbouring properties? What will the fencing do?	1	The fence will be located along the property line. The fencing between the front of the building and York Street will be metallic, and designed to look like wrought iron. It will step down in front of adjacent land uses to prevent casual cut-throughs through adjacent properties but provide an openness and comfortable aesthetic along the streetscape and pedestrian environment. The fence will step up at the rear of the site to prevent access to and from the site from neighbouring properties. The fence design will allow for natural surveillance from neighbouring locations that face in to the parking lot. Access to the alley on the west side of the building will be restricted with industrial-grade fencing and a gate. The fencing will deter and direct pedestrian traffic from accessing neighboring properties forcing all pedestrian use of the property to utilize the active frontage along York Street.
Why are not all buildings shown on the plan?	1	The site plan shows the building at 446 York Street, as well as the parking lot in front. The surrounding buildings and land use context are discussed in the re-zoning application.
Site Operations		
What percentage of clients use crystal meth?	2	Approximately 28% of clients use crystal meth at TOPS.
Are you going to test substances for fentanyl?	2	Yes, clients have the option of testing their drugs before using.
What kind of security will be provided?	1	A private security services will be on site 7 days a week while the site is open. The security team will focus on de-escalating and deterring undesirable behaviour in and around the site.
Are SCFs working?	1	Yes. Supervised Consumption Facilities have been identified as playing a key role in reducing the public health risks of injection drug use among PWID and the general public. According to the Supervised Injection Services Feasibility Study Report, "SIS [Supervised Injection Sites] in London have high potential to improve public order, reduce infectious disease transmission and overdose, and promote access to addiction treatment and other services [] rigorous evaluation of SIS have shown that negative impacts of this kind [public disorder, crime, exacerbating community drug use patterns] have not occurred" (Ontario HIV Treatment Network, 2017). In London, the number of HIV infections and hospitalizations for endocarditis declined after TOPS opened. RHAC and MLHU are committed to taking best practices from 186 King Street to 446 York Street to offer effective treatment and support for clients.

Table 2: Questions Received, Continued

Questions Received	Number of Questions Received	Proponent Responses from MLHU, RHAC, and MBPC
Site Operations		
What is the strategy to move people into treatment? Will there be enough room at 446 York Street for the Vancouver Model?	1	The positive and effective referral linkages for clients at the Temporary Overdose Prevention Site to various forms of treatment will be replicated and enhanced at the permanent facility. Active offers of access to treatment have been incorporated into everyday language and service delivery at the Temporary Overdose Prevention Site. "Active offer" means that staff routinely and universally talk about options for change, access to treatment planning and referrals. Active offers are based on Motivational Interviewing principles and Stage-based paradigms. The permanent site at 446 York will have pathways developed for screening, assessment and treatment planning. The pathways to Addiction Services of Thames Valley (ADSTV) are the gateway to the entire addiction treatment
		continuum, including Withdrawal Management (both residential and community-based), Rapid Access to Addiction Medicine (RAAM) Clinics and other Substitution Therapies, and referrals to Outpatient and residential treatment. A Community Opiate Addiction Program staff will routinely be scheduled to drop in at the site on a rotating basis to engage, explain, assist with navigation to ADSTV's offices on Queen's Avenue and /or the RAAM Clinics. ADSTV can provide training and the materials to run a brief "Exploring Change / Treatment Group" that provides information to assist with decision-making. All of the above programs and services are provided within the harm reduction and abstinence continuum of addictions treatment. There will be signage throughout the physical space about how to get help, as well as videos and posters from the Possible Campaign (run by Addictions Services of Thames Valley). Staff will use the Ontario Telemedicine Network (OTN) to facilitation consultations between clients, staff, and Addictions Services of Thames Valley. Options of warm transfers and system navigation will be actively offered. Services are also offered in French. The wraparound support elements of the SCF will ensure that individuals get the supports they need. The facility at 446 York Street will offer a comprehensive range of services, but London is NOT replicating the physical structure of Vancouver's Insite program.
How is this different from enabling?	1	Harm reduction is a pillar of the Canadian Drugs and Substances Strategy. The federal government recognizes that not everyone is willing or able to enter treatment at all times. As a result, harm reduction programs have been implemented to reduce risks of drug use, improve the health of drug users, and connect people with other key health and social services. Harm reduction policies and programs are implemented in collaboration with prevention, treatment, and enforcement initiatives.
What implementation strategies are there to help people before injection?	1	The SCF is part of a wider Community Drug and Alcohol Strategy that focuses on the four pillars of prevention, harm reduction, treatment, and enforcement.
What other services are provided at the SCF?	1	The proposed SCF will provide healthcare services for PWID, some of the most vulnerable people in London. MLHU and RHAC will provide wraparound supports on site to address addictions, mental health, housing, primary care, testing, wound care, and Indigenous supports, as well as references to outside services.
Is there going to be a mobile unit?	1	The request for a mobile unit has been submitted, but a permanent site needs to be established first.
Is there any way to get additional funding for a 24-hour facility?	1	If demand for a 24-hour facility is there, RHAC and MLHU will have an obligation to respond. If there is demand for the facility to be open more than 12 hours per day, MLHU and RHAC will keep the funder appraised of service growth and apply for funding to increase the hours of operation, after consultation with community stakeholders, local community groups, and persons with lived experience.
What is being consumed at the SCF?	1	The majority of clients at TOPS consume opioid drugs.
The use is tied to funding - what happens if funding is cut off?	1	All organizations approved to establish a SCF will enter into a SCF-specific transfer payment agreement with the Ministry of Health and Long-Term Care. The Ministry recognizes that each application is unique. As such, each application will be assessed on a case-by-case basis while considering SCF criteria as well as local conditions.
Does a doctor need to be present?	1	A doctor does not need to be present. Medically-trained staff and nurses will be on site.
Are children allowed in the facility?	1	Restricting access is consistent with the principles of the Child, Family and Community Service Act, which identifies the need for parents to address the safety needs of their children by making appropriate alternative care arrangements. RHAC staff do not have much experience in seeing children come in to TOPS.

Table 2: Questions Received, Continued

	Number of	
Questions Received	Questions Received	Proponent Responses from MLHU, RHAC, and MBPC
Site Safety	110001,00	
What is the block radius of police exemptions for drug possession? Will there be issues with drug dealing at the periphery?	3	The exemption from the Controlled Drugs and Substances Act to permit drug possession only applies to the site itself, and only for small amounts for personal use. There is a zero-tolerance policy for drug dealing in the area and on the site.
How many people will be using lighters? Is this a fire safety risk?	1	There will be six booths where clients can consume drugs. There are lighters available at each booth. Clients are supervised by staff when using lighters. There is a fire plan in place in conjunction with the Fire Department at the Temporary Overdose Prevention Site and the same process will be in place at 446 York Street.
What is the staff-to-client ratio?	1	In the consumption room there will be up to 6 clients who can inject at one time, and there will be a minimum of 2 staff in the consumption room. There are other staff throughout the facility in the intake, aftercare room and wrap-around supports.
Will there be people waiting outside? Will they get impatient and use outside anyways?	1	The site plan includes an interior lobby where people can queue if necessary, as well as a waiting area inside. There has not been an issue with clients using drugs directly outside of TOPS on King Street.
What is the role of security on site?	1	Security will be there to improve safety in the area, prevent loitering, and deter and deescalate behaviour (rather than charging people). They will mainly patrol outside the facility.
Has there been an increase in illegal dealing of drugs around TOPS, similar to the methadone clinics?	1	An increase in drug dealing around TOPS has not happened to a significant extent. At the Temporary Overdose Prevention Site on King Street, there are effective policies and procedures in place to address potentially problematic client behaviour, including loitering, trafficking or purchasing of drugs, and behaviour in/around the site. There is zero tolerance for drug dealing on site, and London Police will patrol the area on a regular basis.
Is there a potential plan for dealing with crystal meth users?	1	There are policies and staff training procedures (such as de-escalation techniques) in place if there is any difficulty with any client. Currently, clients who use crystal meth access the Temporary Overdose Prevention Site and they are managed within the site.
Can neighbours call in concerns/complaints from SCF clients?	1	Yes. Neighbours may speak to on-site security or call the SCF. Brian Lester, the Executive Director of RHAC, will be the designated contact person for the proposed SCF.
How will London Police be integrated into the service?	1	MLHU and RHAC are working closely with the London Police Service and community partners to address and mitigate any safety concerns that may arise from SCF operations. London Police will patrol the area on a regular basis, and there will be private security on site during operating hours. There is a zero-tolerance policy for drug dealing in the area and on the site.