то:	CHAIR AND MEMBERS COMMUNITY AND PROTECTIVE SERVICES COMMITTEE MEETING ON FEBRUARY 20, 2019
FROM:	LYNNE LIVINGSTONE MANAGING DIRECTOR, NEIGHBOURHOOD, CHILDREN AND FIRE SERVICES AND SCOTT STAFFORD MANAGING DIRECTOR, PARKS & RECREATION
SUBJECT:	MAKING NASAL NALOXONE KITS AVAILABLE FOR PUBLIC USE IN SOME CITY OF LONDON FACILITIES

RECOMMENDATION

That, on the recommendation of the Managing Director of Neighbourhood, Children and Fire Services and the Managing Director of Parks & Recreation, in response to council resolution of June 13, 2018, the following policy direction and implementation plan to install nasal Naloxone Kits for public use at some City of London facilities BE APPROVED:

- a) place up to two nasal Naloxone kits for public use with each publicly accessible Automated External Defibrillator (AED) at those City facilities that operate year-round;
- b) install appropriate signage to assist the public to locate and access the nasal Naloxone kits:
- c) the program will operate as a pilot program for one year commencing in June of 2019 and Civic Administration will report to Council on the usage of the nasal Naloxone kits at the end of the pilot program; and
- d) Civic Administration will assist the Middlesex-London Health Unit in the scheduling of at least one public education session, in which Middlesex-London Health Unit will provide information and education to the public regarding nasal Naloxone kits.

It being noted that the Middlesex-London Health Unit's Medical Officer of Health supports this plan.

PREVIOUS REPORTS PERTINENT TO THIS MATTER None

BACKGROUND

Council Resolution

Council made the following resolution on June 13, 2018:

That the following actions be taken with respect to incorporation of Naloxone Kits at Automated External Defibrillator (AED) machine locations in the City of London:

- a) the delegation and attached presentation from T. Nault and R. Barnfield of the Schulich Political Advocacy Committee BE RECEIVED, with thanks, with respect to the above-noted matter; and,
- b) the Civic Administration BE DIRECTED to report back by the Fall of 2018, with a proposed implementation plan and associated costs related to:
 - i) installation of two naloxone kits at every Automated External Defibrillator (AED) location in City-owned and operated facilities:
 - ii) training of staff with respect to the naloxone kits;
 - iii) placement of appropriate signage at the locations;
 - iv) outreach with community partners for the provision of the collection of data related to the usage of the kits; and,
 - v) undertaking the necessary arrangements and the holding of public "town hall" meetings to inform and educate regarding the proposed initiative;

it being noted that a communication from Councillor P. Squire was received, with respect to this matter.(3.3/9/CPSC)

Recommended Implementation Approach

Civic Administration consulted with the Middlesex-London Health Unit (MLHU) in developing a proposed plan to make nasal Naloxone kits available for public use in some City of London facilities.

If Council approves the plan, the City would purchase and place up to two nasal Naloxone kits, for public use, with each publicly accessible AED at those City facilities that operate year-round (currently 29 locations). The nasal Naloxone kits would be routinely inspected, and missing or expired medication would be replaced.

It is proposed that the program operate as a pilot program for one year, starting in June of 2019, during which time the City will collect data on the usage of the nasal Naloxone kits. The program will be assessed during that year, and Civic Administration will provide a further report to Council with an evaluation of the pilot program including the number of kits used or lost as well as the frequency of AED use as a comparator.

Appropriate signage to assist the public to locate the nasal Naloxone kits would be installed at each location where nasal Naloxone kits are to be located. The signage would indicate that nasal Naloxone kits are available for use by the public, and to call 911 in the event of an emergency. Further, each nasal Naloxone kit would contain the manufacturer's instructions and information for any member of the public that chooses to use the kit.

Civic Administration would assist MLHU in scheduling at least one public education session, in which MLHU would provide information and education to the public regarding nasal Naloxone kits.

As this program is intended to make nasal Naloxone kits available for public use, City staff will not be required as part of their job duties to administer nasal Naloxone. City staff who regularly work at facilities where nasal Naloxone kits would be installed, would be provided with awareness training related to the intended purpose, location, and use of the kits, as well as any additional health and safety training deemed appropriate to ensure they are aware of the steps to be taken in the event of an emergency, including how to address any risks associated with the public's use of the nasal Naloxone kits.

A June start for the pilot program allows time to finalize the health and safety training package, order the kits, install signage and train staff.

Background Assessment Work

Civic Administration has reviewed risks and implications of installing Naloxone kits for public use at certain City facilities. In addition, Civic Administration gathered information from medical professionals, representatives from MLHU, Regional HIV/AIDS Connections, as well as the civic administration from the City of Kingston.

Health and Safety Considerations

The use of Naloxone to treat opioid overdoses at City of London facilities could result in potential health and safety hazards, including possible confused or violent episodes after the individual is given Naloxone. These hazards can be reduced through routine operational controls, including Corporate Health and Safety Procedures and related training of applicable staff as outlined above.

It should be noted that, to date, there have been no reported incidents of opioid overdoses at City of London facilities.

Legal and Other Considerations

A corporation that makes medication available for use by the public could be subject to civil lawsuits in negligence, including vicarious liability for acts of its employees. The City could be exposed to civil liability in the event it operationally does not comply with its policy, for instance failing to maintain unexpired medication.

The Chase McEachern Act (Heart Defibrillator Civil Liability), 2007 protects owners and occupiers of premises on which an AED is installed from liability for any harm that may occur in relation to the use of the AED, provided that the owner or occupier made the AED available for use in good faith without gross negligence and properly maintained the defibrillator. There is no similar legislation that protects a corporation from such exposure to liability with respect to installing publicly-accessible Naloxone kits.

^{1.} Despite the Occupiers' Liability Act and the rules of common law, any person who owns or occupies premises where a defibrillator is made available for use and who acts in good faith with respect to the availability or use of the defibrillator is exempt from civil liability for any harm or damage that may occur from the use of the defibrillator.

There is protection against municipal liability under s. 450 of the *Municipal Act*, 2001 where the action/inaction results from a policy decision of the municipality. However there is no similar legislative protection against municipal liability if the policy is not properly implemented at the operational level.

Next Steps

Pending Council's approval of the recommended implementation approach, Civic Administration will move immediately to:

- On a one year, pilot basis, starting in June 2019, purchase and install two nasal Naloxone kits at City facilities that are operated year round where the AED is publicly accessible (currently 29 locations).
- Collect data on the number of kits used or lost at City Facilities.
- Create and conduct awareness training for staff which includes where the nasal Naloxone kits are located as well as the intended purpose and usage of nasal Naloxone. City staff will not be required as part of their job duties to administer nasal Naloxone.
- Install educational signage at each year round publicly available AED to indicate that nasal Naloxone kits are available for public use.
- Assist staff from the Middlesex London Health Unit in the scheduling of at least one public education session, in which Middlesex-London Health Unit will provide information and education to the public regarding nasal Naloxone kits.
- Evaluate the pilot after the one year period and provide a further report to Council.

FINANCIAL IMPACT

The City is not eligible to receive free nasal Naloxone kits under a program administered by MLHU, therefore the City must purchase the kits through a third party. The cost of an individual nasal Naloxone kit (which contains 2 Naloxone nasal sprays, instruction pamphlet, ID card, Nitrile gloves and an optional breathing mask) is currently \$160/kit.

The cost of purchasing kits for 29 locations is currently $160/kit \times 29$ locations $\times 2 kits/location = 99,280$. It is possible that some will need to be replaced due to usage or loss, so it is proposed to purchase 10 spare kits at a cost of 1,600. The cost of signage is estimated to be 1,500. The cost of the public education session is estimated to be 1,500. The cost of marketing materials.

The cost to train staff is estimated to be in the range of \$5,000 to \$10,000 which will be dependent on the number of staff trained.

The total cost of the one year pilot program is approximately \$18,000 to \$23,000 (excluding HST) which will be covered through existing Neighbourhood, Children & Fire Services and Parks & Recreation budgets.

It should also be noted that to the extent the installation of nasal Naloxone kits at City facilities for public use results in significant changes to the jobs of staff working at the facilities, a review of those jobs for wage rate purposes may be triggered which could result in increased wages for those employees whose jobs are impacted.

CONCLUSION

This report sets out a proposed implementation plan, based on the Council resolution of June 13, 2018, to make nasal Naloxone kits available for public use at some City facilities. The City would purchase and place up to two nasal Naloxone kits, for public use, with each publicly accessible AED at those City facilities that operate year-round. The program is proposed to operate as a pilot program for one year, commencing June 2019.

Appropriate signage outlining the intended purpose of the nasal Naloxone kits and to assist the public to locate them would be installed at each location. Civic Administration would collect data on the usage of the nasal Naloxone kits throughout the pilot program, and provide a further report to Council with an evaluation of the pilot program upon its conclusion.

Civic Administration will assist MLHU in the scheduling of at least one public education session in which MLHU will provide information and education to the public regarding nasal Naloxone kits.

Civic Administration acknowledges that information was collected for research purposes only from the following: Dr Michael Lewell, Medical Director, Middlesex London Paramedic Service; Shaya Dhinsa, Manager of Sexual Health, Middlesex London Health Unit; Cheryl Hitchen, Social Policy & Strategic Community Development Manager, City of Kingston.

PREPARED BY:	PREPARED BY:
MELISSA COSTELLA MANAGER II, COMMUNITY & SENIORS' CENTRES NEIGHBOURHOOD OPERATIONS NEIGHBOURHOOD, CHILDREN & FIRE SERVICES	LYNN LOUBERT DIVISION MANAGER, AQUATICS & ARENAS PARKS & RECREATION
RECOMMENDED BY:	RECOMMENDED BY:
LYNNE LIVINGSTONE MANAGING DIRECTOR NEIGHBOURHOOD, CHILDREN & FIRE SERVICES	SCOTT STAFFORD MANAGING DIRECTOR PARKS & RECREATION

c. Dr. Christopher Mackie, Medical Officer of Health and Chief Executive Officer, MLHU Lynn Marshall, Solicitor II, Legal and Corporate Services
Jason Wills, Manager III, Risk Management
Dave O'Brien, Division Manager, Corporate Security and Emergency Management
Gary Bridge, Manager, Human Resources & Corporate Services
Kelly Dawtrey, Solicitor II, Legal and Corporate Services
Adriana Hagan, Manager, Labour Relations
Kyle Murray, Director, Financial Planning & Business Support