

CORRECTED LETTER

May 2, 2012

J. M. Fleming
Director, Land Use Planning and City Planner

hereby certify that the Municipal Council, at its session held on March 20 and 21, 2012 resolved:

22. That, on the recommendation of the Director of Land Use Planning and City Planner, the following actions be taken with respect to methadone clinics and methadone pharmacies in the City of London:

- a) the attached by-law **BE INTRODUCED** at the Municipal Council meeting to be held on March 20, 2012, to amend the Official Plan to establish new policies to plan for methadone clinic and methadone pharmacy land uses;
- b) the attached by-law **BE INTRODUCED** at the Municipal Council meeting to be held on March 20, 2012, to amend Zoning By-law No. Z.-1, (in conformity with the Official Plan, as amended in part a), above), to:
 - i) add new, and amend existing, definitions in Section 2 to define methadone clinics and methadone pharmacies;
 - ii) add a new Section "4.36 Clinic, Methadone and Pharmacy, Methadone Uses to stipulate that these uses shall be permitted through amendment to the zoning by-law; that these uses shall not be permitted within 300 metres (984.3 ft.) of an elementary or secondary school; a municipal pool, a municipal arena, a municipal library or the Western Fairgrounds; and, methadone clinics shall require a waiting room area of no less than 15% of the total gross floor area;
 - iii) add new parking regulations to Section 4.19 to provide for "Clinic, Methadone" and "Pharmacy, Methadone" uses; and,
 - iv) add the Boys and Girls Club to Section 4.36, "Clinic, Methadone and Pharmacy, Methadone", to include a 300 metre separation distance from the Boys and Girls Club, recognizing that this facility attracts large numbers of children much like schools, libraries, pools and arenas;
- c) the final "Planning for Methadone Clinics and Methadone Pharmacies" background study date February, 2012, Appendix C, and the associated Methadone Research Compendium (Volumes 1, 2 and 3) that have been posted on the City's website at www.london.ca/methadonestudy **BE RECEIVED**;
- d) recognizing that the commercial corridor along Horton Street, between Wellington Street and Colborne Street, is to become a pedestrian-oriented main street, consistent with the SOHO Community Improvement Plan and the proposed road allowance improvements approved by Council, the Civic Administration **BE DIRECTED** to initiate an Official Plan amendment to re-designate these lands from Auto-oriented Commercial Corridor to Main Street Commercial Corridor;
- e) the Mayor **BE REQUESTED** to write a letter, on behalf of Municipal Council, to the Minister of Health and Long-Term Care encouraging the Minister to put in place legislation to regulate community consultation practices, maximum patient volumes, minimum facility standards and management and operational requirements of methadone clinics and dispensaries so as to ensure that clients are served effectively and with dignity and that the potential for neighbourhood impacts are minimized; and,

- f) a special meeting of the Planning and Environment Committee BE HELD on Tuesday, March 20, 2012 at 3:00 p.m., to receive a report from the City Solicitor with respect to whether or not the proposed amendments restrict human rights and to receive a report from the Manager, By-law Enforcement with respect to the enforceability of the proposed by-law;

it being noted that Interim Control By-law No. 1476-298 is in force and effect until May 15, 2012, after which time the By-law that "holds the status quo" for methadone clinics and methadone pharmacies will lapse;

it being also noted that the Planning and Environment Committee received the following communications with respect to this matter:

- a communication, dated February 24, 2012, from B. Hall, Chief Commissioner, Ontario Human Rights Commission;
- a communication from M. Woodward, SoHo Executive, SoHo London Community Association;
- a communication, dated February 22, 2012, from G. Thompson, President, Urban League of London;
- a communication, dated February 23, 2012, from S. Merritt, Manager, Old East Village BIA;
- a communication, dated February 24, 2012, from H. Blackwell, Director, Corporate Affairs, Western Fair District;
- a communication, dated C. Harvey, Director of Operations, Boys and Girls Club of London; and,
- a communication from W. Dickinson, Planning Chair, The Woodfield Community Association;

it being pointed out that at the public participation meeting associated with this matter, the following individuals made oral submissions in connection therewith:

- B. Kussner, Weirfoulds, on behalf of Shoppers Drug Mart - advising that there are 24 Shoppers Drug Mart stores in London; expressing appreciation for the Civic Administration's efforts in this matter; expressing concern with a number of the proposals; advising that a major concern is the definition of methadone pharmacy; indicating that the previous definition was overly broad and that this definition is still too broad; advising that the Shoppers Drug Mart, in the Wharnccliffe Plaza, dispenses methadone to over 30 patients; advising that that pharmacy fills over 170,000 prescriptions a year, which is 465 prescriptions a day; noting that methadone is only 7% of the prescriptions that are filled; advising that there is no differential land use impact; advising that you would be unable to tell the difference between this pharmacy and a pharmacy that does not dispense methadone; advising that the Ontario Municipal Board concluded that a clinic is a distinct land use; advising that the definition in the Interim Control By-law is more restrictive; indicating that it is an arbitrary decision; advising that all pharmacies are tarred with the same brush; indicating that this exceeds the City's jurisdiction in health care matters; advising that other concerns flow from the definition under the Planning Act; indicating that there is a reference to the public site plan process which provides an opportunity for a public forum, such as this one; advising that the proposed minimum distance separation between methadone pharmacies and schools is unwarranted and excessive; advising that currently 12 Shoppers Drug Marts are located within 300 metres of public or secondary schools; advising that there is no due regard for intent to continue operating in the future; expressing appreciation for the concerns expressed by the City; indicating that care and concern is paid to public concerns; indicating that the recommendations cast too far a net; and advising that it is unsupported from the land use planning perspective.
- A. R. Patton, Patton Cormier & Associates, on behalf of the Ontario Addiction Treatment Centres (OATC) - advising that the OATC operates 42 methadone clinics throughout Ontario; expressing support for many of Mr. Kussner's comments; advising that the OATC is the largest methadone provider and have not been consulted by Planning Staff; indicating that in 1991, the ARP, acting as the AIDS Committee of London, operated the hospice on Dufferin Avenue, which was strongly opposed by the community association; it being noted that the community association expressed opposition to the presence of death in the neighbourhood; advising that the hospice has now moved to a larger facility on Central Avenue; indicating that people fear the unknown; advising that for a year and a half, staff have been studying methadone clinics on the understanding that there were five in the City; indicating that an Interim Control By-law has been proposed and that 80% of the clinics were not even known; indicating that the clinic at 528 Dundas Street moved to that location after operating for many years at another location in the City; indicating that the clinic on Dundas Street is a problem; advising that there are new restrictions being placed on methadone clinics; advising that the Ontario Human Rights Commissioner has provided remarks and a warning on the Planning and Environment Committee Added Agenda; advising that his client has two concerns with the documents that have been put forward for approval; advising that methadone clinics are operating unobtrusively in the city; advising that there does not need to be a site plan public participation meeting on this matter; expressing concern with the maximum of 30 clients per

day; indicating that the City has a major oxycontin problem; advising that there is a new drug called oxyneo that is causing problems; indicating that if this true, there is more need for methadone clinics; expressing opposition to the public site plan process; advising that last year, in a small town, his client opened a methadone clinic; noting that when it became known that it was a methadone clinic, there was great concern; advising that when the municipality realized that it could not stop the methadone clinic, it used the licensing by-law to try to stop the opening of the clinic; advising that the municipality was advised that it was illegal to do this but went ahead anyway; noting that the municipality is now looking at lowering the fee for the clinic to \$500 or less; questioning the ability of enforcement as the patient log would identify the patient by name, number or anything else and would be a breach of client confidentiality; and expressing concern with the legality of the by-law to control a federally regulated drug.

- K. Wilkinson, Thames Valley District School Board - requesting that the uses be planned to avoid potential impact; indicating that a communication was provided to the previous Mayor on November 1, 2005, with respect to the clinic at 528 Dundas Street; indicating that a communication was provided to the Built and Natural Environment Committee expressing concern with the placement of methadone clinics in close proximity to schools; advising that the Thames Valley District School Board was represented at a public meeting with respect to this matter; advising that under Section 4.3.3., with the requirement to have methadone clinics a minimum distance of 300 metres from schools, it would solve the issues at 528 Dundas Street; advising that having a waiting room would also be of assistance; it being noted that the Thames Valley District School Board encompasses a large geographic area; and commending the City and staff for this undertaking.
- D. MacPherson, Principal, H.B. Beal Public School - (see attached presentation).
- C. Harvey, Boys and Girls Club - advising that 50,000 children and youth visit the Boys and Girls Club; indicating that their Board of Directors is generally supportive of the recommendations; expressing concern that the buffer does not include the Boys and Girls Club; expressing concerns about the proposed clinic to be built near the Club; expressing concern about the safety of visitors to the Club; and requesting that the Boys and Girls Club be added to the buffer.
- W. Pol, on behalf of Dr. Sidhu, 502 Oxford Street East - advising that Dr. Sidhu has been operating at this location for 18 months and has 350 patients; advising that Dr. Sidhu has had no problems or complaints and there are no off-site impacts; advising that 528 Dundas Street continues to operate as a clinic; advising that reducing existing sites may cause problems; advising that we are talking about one drug - methadone; advising that suboxol is an alternative to methadone; advising that in one year's time, the staff will be preparing a study on this new drug; recommending that an analysis be prepared on the number of proposed sites to determine which ones are zoned for medical-dental uses; advising that the issues of drug addiction, HIV, etc., are multi-dimensional; and warning that the City should not reduce opportunities and risk discrimination.
- B. Sexsmith, 120-1231 Sandford Street - expressing frustration; advising that he has been working with the City on this matter; advising that people are talking about legal niceties; advising that people have been working on this for four years; indicating that he knows that there are a lot of problems on the streets; suggesting that people be given a chance; advising that this is a NIMBY problem; advising that it is confusing having drug stores looking after methadone; noting that he is not as concerned with drug stores; advising that the City felt, with all the time and effort, it is important to the residents in the City; advising that it is about time that other Londoners are paid attention to; and this is the first attempt to address citizen concerns.
- K. Wheeley - advising that she is recovering; indicating that she hears discrimination; advising that she no longer sticks needles in her arms; enquiring as to what kind of message the City is sending; advising that this is a human rights issue and should not be put aside for any reason; and indicating that they have the same rights as everyone else.
- Dr. Sidhu, 502 Oxford Street East - acknowledging that Mr. W. Pol is representing him; indicating that there is a drop-in centre next to 528 Dundas Street; indicating that 528 Dundas Street is not a problem by itself, but that the patients have nowhere else to go; advising that to say that methadone clinics should be in one area is discrimination; and suggesting that a fee be applied to all doctor's offices, not just methadone clinics.
- A. Ford - advising that this is a large problem; indicating that this is more of a problem in certain areas; advising that this is only part of a bigger issue and advising that there are substitutes for methadone.
- S. Lawrence, 30 Redwood Lane - advising that he has been listening to the discussion for a long time; advising that he has nothing against the clinics; requesting the Planning and Environment Committee to vote for the amendments; advising that he lost his brother to an overdose; recommending that clinics not be opened anywhere; advising that drug dealing is done for profit; and indicating that some clinic owners own 6 or 7 clinics and don't live in London. (2012-C06-00/D11-00) (22/6/PEC)

C. Saunders
City Clerk
/jb

cc: B. Hall, Chief Commissioner, Ontario Human Rights Commission, 180 Dundas Street West,
9th Floor, Toronto ON M7A 2R9
M. Woodward, SoHo Executive, 142 Waterloo Street, London ON N6B 2M8
G. Thompson, Urban League of London, Grosvenor Lodge, 1017 Western Road, London ON
N6G 1G5
S. Merritt, Old East Village BIA, 316 Rectory Street, London ON N5Y 5P8
H. Blackwell, Director of Corporate Affairs, Western Fair District, 316 Rectory Street, London
ON N5W 3V9
C. Harvey, Director of Operations, Boys and Girls Club of London, 184 Horton Street East,
London ON N6B 1K8
W. Dickinson, Planning Chair, The Woodfield Community Association, 522 Princess Avenue,
London, ON N6B 2B7
B. Kussner, Weir Foulds, The Exchange Tower, Suite 1600, P.O. Box 480, 130 King Street W,
Toronto ON M5X 1J5
A. R. Patton, Patton, Cormier & Associates, 1512 – 140 Fullarton Street, London ON N6A 5P2
K. Wilkinson, Thames Valley District School Board, 1250 Dundas, London, ON, N5W 5P2
D. MacPherson, Principal, H.B. Beal Secondary School, 525 Dundas, London, ON, N6B 1W5
W. Pol, 94 Rollingwood Circle, London ON N6G 1P7
B. Sexsmith, 120-1231 Sandford Street, London ON N5V 2J8
Dr. Sidhu, 502 Oxford Street East, London ON N5Y 3H7
S. Lawrence, 30 Redwood Lane, London ON N5V 4C4
F. Filice, Old East Village Community Association, 900 King, London, ON, N5Y 5P8
London Homeless Coalition, 388 Dundas, London, ON, N6B 1V7
D. Leonardes, 601 Consortium Court, London, ON N6E 2S8
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London
CANADA

Office of the Mayor

September 13, 2012

Honourable Deborah Matthews, MPP
Minister of Health and Long-Term Care
Ministry of Health and Long-Term Care
10th Floor, Hepburn Block
80 Grosvenor Street
Toronto ON M7A 2C4

Dear Minister:

The Council of the Corporation of the City of London notes your recent comments of July 23rd, 2012 to the Standing Committee on Estimates wherein the Minister outlined the Government's three key priorities underlying its action plan to realize real and measurable improvements across Ontario's health care system. Highlighting the growing issue of prescription drug abuse in Ontario, and noting the Government's commitment to ensuring safe access to drugs, the Minister announced expanded treatment programs, information resources and monitoring for people who were misusing Oxycontin.

The Council of the Corporation of the City of London recognizes the alarming increase in addictions to opioid-based prescription painkillers and applauds the efforts of the Minister to keep Ontario healthy. These efforts align with London's social programming initiatives including the London Community Addiction Response Strategy (CAREs).

Recently the City amended our Official Plan and Zoning By-law to provide a land use framework for the establishment of methadone clinics and methadone dispensing pharmacies in our community. This framework is based on the notion that it is necessary to plan for these uses in locations that best meet the needs of the client and the community.

The City is also reviewing licensing opportunities that would facilitate processes to allow service providers, clients and the community to discuss the issues that have, at times, been associated with clinics and/or pharmacies that offer Methadone Maintenance Treatment (MMT) services to a large number of clients including loitering outside the facility, pedestrian congestion, garbage and littering in the area, spill over parking, drug dealing and prostitution. These issues can be compounded when a service provider locates in the vicinity of vulnerable populations and/or pedestrian-oriented business districts.

The social programming, land use and licensing initiatives of the City of London are the major components of a comprehensive local strategy to address the issue of addiction, and the delivery of MMT services in our community. That being said, the Council of the Corporation of the City of London is of the opinion that there is more to be done by the Province of Ontario.

... over

Honourable Deb Matthews, MPP
September 13, 2012
Methadone Clinics

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From our extensive consultation with the South West LHIN, public and private sector MMT service providers, other associated support services, community and business associations, law enforcement agencies and MMT clients, we believe that the volume of patients served by a methadone clinic and/or a methadone pharmacy has a major influence on the impact it may have on surrounding communities. It also, we have learned, has a large impact on the quality of experience of MMT patients.

Accordingly, the City requests that the Province establish regulations that would limit the number of MMT clients served by clinics and/or pharmacies as this matter is beyond local control and authority through either land use regulations or municipal licensing authority. We would also request that the Minister put in place legislation to regulate community consultation practices, maximum patient volumes, minimum facility standards and management and operational requirements of methadone clinics and dispensaries so as to ensure that MMT clients are served effectively and with dignity and that the potential for neighbourhood impacts are minimized.

We believe these regulatory controls, exercised by the Province, would allow MMT service providers to successfully integrate within communities, gain better acceptance from the public, and avoid the types of impacts that we have witnessed locally.

Sincerely,



Honourable Joe Fontana
Mayor

cc: The Honourable Chris Bentley – MPP London West
Teresa Armstrong – MPP London-Fanshawe
Jeff Yurek – MPP Elgin-Middlesex-London
London City Council
City Clerk, Cathy Saunders
Director, Intergovernmental & Community Liaison, Grant Hopcroft
City Planner, John Fleming
City Solicitor, Jim Barber

attach Municipal Council Resolution

Ministry of Health
and Long-Term Care

Ministère de la Santé
et des Soins de longue durée

Office of the Minister

Bureau du ministre

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JAN 17 2013

HLTC2966MC-2012-9675

His Worship Joe Fontana
Mayor
City of London
300 Dufferin Avenue
P.O. Box 5035
London ON N6A 4L9

OFFICE OF THE
MAYOR

RECEIVED JAN 24 2013

Referred to
Subsequent Referrals
 For Action
 For Information

City Council
Hopcroft, Fleming
Barber

Dear Mayor Fontana: Joe

Thank you for your letter of September 13, 2012, regarding methadone treatment in London.

The ministry is committed to providing treatment to people who are addicted to prescription narcotics such as OxyContin and morphine, heroin and other opioids. The positive value of methadone treatment for people with opioid addictions and society as a whole cannot be underestimated. Methadone Maintenance Treatment (MMT) is considered very effective treatment for opioid addiction.

The location of clinics and methadone pharmacies fall under the jurisdiction of the municipalities. The Ministry of Health and Long-Term Care does not interfere with the development of municipal bylaws.

Municipalities are required to follow the *Planning Act* with regards to the development of municipal bylaws. Municipalities can also make more generic bylaws under the *Municipal Act*, which sets out broader powers, powers which are outside the *Planning Act*. Notwithstanding this, bylaws must comply with other provincial legislation, including the *Ontario Human Rights Code*.

The Ministry of Health and Long-Term Care will not be establishing regulations under the *Planning Act* limiting the number of clients seeking treatment for MMT at physician clinics or pharmacies. Clinics and pharmacies are already regulated under the *Planning Act*, and further regulations beyond those required for other health services may have an adverse impact on people with narcotic addictions.

Many communities have been able to integrate MMT clinics and pharmacies into neighbourhoods without disruption to or interference with other local services.

In 2008, the ministry commissioned the Centre for Addiction and Mental Health (CAMH) to develop a resource guide to assist with the introduction of MMT clinics into local communities. This guide is available on the CAMH website at http://knowledgex.camh.net/policy_health/substance_use/mmt_community_guide/Pages/default.aspx.



His Worship Joe Fontana

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Methadone is prescribed by about 350 physicians to over 37,000 people across the province. The majority of methadone is currently provided by physicians in group or solo practices, and physicians bill OHIP for their services.

Methadone is a narcotic and as such it is strictly regulated under Health Canada's *Controlled Drugs and Substances Act*. Physicians on the recommendation of the College of Physicians and Surgeons of Ontario (CPSO) are licensed specifically by Health Canada through an exemption to the Act to prescribe methadone. In order to become licensed, a physician must first complete a training program and a clinical internship to the satisfaction of the CPSO. Once licensed physicians must participate in the CPSO's quality assurance program for methadone prescribers that include periodic practice audits.

Thank you again for writing about this important matter.

Sincerely,

Deb Matthews
Minister