

CONSUMPTION & TREATMENT SERVICES IN ONTARIO – OPERATIONAL & EVALUATIVE INFORMATION

Consumption & Treatment Services in Ontario – Operational & Evaluative Information

Introduction

According to the Ontario Ministry of Health's website (January, 2023), there are currently 17 Consumption & Treatment Services (CTS) programs operating across the province of Ontario. These sites have received approval and funding from the Ontario Ministry of Health to operate on-site CTS services (as well as exemptions to Section 56.1 of the Controlled Drugs & Substances Act from Health Canada), and are currently operating in the following regions:¹

- 1. Guelph Community Health Centre 176 Wyndham Street North, Guelph
- 2. Hamilton Urban Core Community Health Centre 70 James Street South, Hamilton
- 3. <u>Kingston Community Health Centre</u> 661 Montreal Street, **Kingston**
- 4. <u>Sanguen Health Centre & Region of Waterloo Public Health & Emergency Services</u> 150 Duke Street West, **Kitchener**
- 5. Regional HIV/AIDS Connection & Middlesex-London Public Health Unit 446 York Street, London
- 6. Ottawa Inner City Health Inc. 256 King Edward Avenue, Ottawa
- 7. Sandy Hill Community Health Centre 221 Nelson Street, Ottawa
- 8. Somerset West Community Health Centre 55 Eccles Street, Ottawa
- 9. Four Counties Addiction Services Team 220 Simcoe Street, Peterborough
- 10. Positive Living Niagara 105 Queenston Street, St. Catharines
- 11. NorWest Community Health Centre 525 Simpson Street, Thunder Bay
- 12. Fred Victor Centre 145 Queen Street East, Toronto
- 13. Parkdale Queen West Community Health Centre 1229 Queen Street West, Toronto
- 14. Parkdale Queen West Community Health Centre 168 Bathurst Street, Toronto
- 15. Regent Park Community Health Centre 465 Dundas Street East, Toronto
- 16. South Riverdale Community Health Centre (Moss Park) 134 Sherbourne Street, Toronto
- 17. South Riverdale Community Health Centre (keepSix) 955 Queen Street East, Toronto

This document reviews the operations that are currently in place at the CTS programs/services listed above. A summary of key evaluative data as it relates to CTS operations across Ontario is also included.

Disclosure:

Please note that the information contained within this document derives solely from the existing information that is available via the CTS operators' websites or other web-based materials. All information contained within this document was extracted on January 27th of 2023. As a result, some of the information represented within this document may be out of date. For ongoing updates and information, please visit the CTS websites linked above.

¹ Please note that this list is only inclusive of existing CTS sites in Ontario that are currently operational. It does not include authorized sites that are not currently offering services (e.g., not opened yet, closed temporarily) or sites that currently have open applications to the provincial and/or federal governments to become operational.

	Table 1 Consumption 2 Treatment Services in Ontario		
Type of Operation	Table 1 – Consumption & Treatment Services in Ontario Summary of Operations in Ontario		
Location	• In terms of distribution, most of the CTS sites operating in Ontario are located in Toronto (6) or Ottawa (3).		
CTS Operators	 Most of the CTS sites in Ontario are operated primarily by local community health centres, while some are operated by local community health centres in partnership with a public health agency, an HIV/AIDS or harm reduction agency, a family health/care team, and/or a paramedic agency. In a few cases, primary CTS operators include local HIV/AIDS/harm reduction agencies, health or addiction services teams, or social service/charitable organizations. 		
Days & Hours of Operation	 Summary: Most of the CTS sites in Ontario operate 7 days per week (11). Five of the CTS sites in Ontario operate 5 days per week. Of these five sites, 4 operate from Monday to Friday and 1 operates from Tuesday to Saturday. Only one CTS site in Ontario operates 24/7 (Ottawa Inner City Health Inc.). Of the CTS sites that do not operate 24/7 (15), 9 offer consistent hours of operation for each day that the CTS is open to the public (i.e., same hours each day), and 6 offer staggered hours of operation that vary by day of the week. Of the 9 CTS sites that offer consistent hours of operation, 4 operate for 7 to 8.5 hours per day during day-time hours (day time hours ranges between 9:00 a.m. – 7:00 p.m.) and 4 operate for 11 to 12 hours per day during day-time and mid-evening hours (hours range from 8:00 a.m. – 10:00 p.m.) One of these sites operates for 10 hours per day, starting in the afternoon and ending in the evening (Moss Park, Toronto). Of the CTS sites that offer non-consistent hours of operation, times of service availability vary per day. Of the CTS sites that do not operate 24/7, 8 sites provided a "last call" for consumption time on their website. Five of these sites take last calls for consumption 1 hour before closing time, and three of these sites take last calls for consumption 30 minutes before closing time. Hours of Operation for CTS Sites: Guelph CHC CTS: Monday to Sunday from 9:00 a.m. – 5:00 p.m. (4:00 p.m. – last entry) Hamilton Urban Core CHC CTS – Monday, Tuesday, Thursday, & Friday (10:30 a.m. – 10:30 p.m.), Wednesday (12:30 p.m. – 10:30 p.m.), Saturday & Sunday (4:00 p.m. – 10:30 p.m.) 		

- <u>Kingston CHC CTS</u> Monday Sunday from 11:00 a.m. 7:00 p.m.
- Region of Waterloo Public Health & Emergency Services & Sanguen Health Centre CTS Monday Sunday from 9:00 a.m. 9:00 p.m.
- Regional HIV/AIDS Connection & Middlesex London Public Health Unit CTS –
 Monday Sunday from 9:30 a.m. 9:00 p.m. (last intake is 8:00 p.m.)
- Ottawa Inner City Health Inc. CTS 24/7
- Sandy Hill CHC CTS Monday Friday from 8:00 a.m. 5:00 p.m.
- Somerset West CHC CTS Monday Sunday from 9:00 a.m. 4:00 p.m. (last call at 3:30 p.m.)
- <u>Positive Living Niagara CTS</u> Monday Sunday from 9:30 a.m. 8:30 p.m. (last intake at 7:30 p.m.)
- NorWest CHC CTS Monday Saturday from 10:00 a.m. 6:00 p.m.
- Fred Victor Centre CTS Monday (8:00 a.m. 10:00 p.m.), Tuesday Sunday (7:30 a.m. 7:00 p.m.)
- Parkdale Queen West CHC CTS (Queen Street) Monday, Tuesday, & Thursday (10:00 a.m. 6:00 p.m.), Wednesday (1:00 p.m. 6:00 p.m.), Friday (9:30 a.m. 4:30 p.m.), Saturday & Sunday (10:00 a.m. 6:00 p.m.) (last call for service is 30 minutes before closing)
- Parkdale Queen West CHC CTS (Bathurst Street) Monday, Tuesday, & Thursday (10:00 a.m. 6:00 p.m.), Wednesday (1:00 p.m. 6:00 p.m.), Friday (9:30 a.m. 4:30 p.m.) (last call for service is 30 minutes before closing)
- Regent Park CHC CTS Monday, Wednesday, Thursday, Friday (9:00 a.m. –
 4:30 p.m.) & Tuesday (12:00 p.m. 4:30 p.m.)
- <u>South Riverdale CHC CTS (Moss Park)</u>: Tuesday Saturday from 12:00 p.m. –
 10:00 p.m. (last call is typically 1 hour before close)
- South Riverdale CHC CTS (keepSix): Monday (11:00 a.m. 5:00 p.m.; last call is 4:00 p.m.) & Tuesday Friday (9:00a.m. 5:00 p.m.; last call is 4:00 p.m.)

Supervised Consumption Services

- All of the CTS sites operating in Ontario offer supervised consumption services via injection, intranasal, and oral consumption, as per the Ontario Ministry of Health (2018) application requirements.
- Number of booths/stations available within the consumption rooms at CTS sites (if indicated via the organization's web materials):
 - o Guelph & Waterloo/Kitchener 2 consumption booths
 - o London (4 stations) & St. Catharines (4 consumption booths)
 - o Ottawa Sandy Hill 5-6 private injection stations
 - o Ottawa Inner City Health 13 consumption booths
- Supervision of consumption and overdose response/monitoring is most frequently provided by registered nurses or other regulated healthcare professionals (e.g., paramedics), and/or is often supported by trained harm reduction workers or other trained staff.

Services Provided

 Staff at the CTS will connect clients to community resources (if desired/required), such as mental health, substance use treatment, primary health care, housing, income support, food support, and/or other health and social services.

- All of the CTS sites operating in Ontario must offer on-site harm reduction services (Ontario Ministry of Health, 2018). These include:
 - o Overdose prevention and harm reduction education
 - Harm reduction supplies and disposal (e.g., safer injection kits and biohazard disposal bins)
 - Provision of naloxone and oxygen
 - Removal of inappropriately discarded harm reduction supplies (e.g., potentially contaminated needles and other drug use equipment surrounding the CTS).
- Most of the CTS sites in Ontario also offer drug checking services.
- All of the CTS sites operating in Ontario are required to offer wrap around services, including on-site and/or defined pathways to substance use treatment services, mental health services, primary care services, and other health/social services. The models adopted to provide these supports varies across sites, but may include:
 - Case managers (e.g., client cases, case management, referrals to organizations)
 - Peer outreach workers (e.g., organize client involvement in the CTS' operations, such as kit-making and neighbourhood pick-ups, supports referrals to on-site or off-site services)
 - Community partner rooms for substance use treatment, mental health, primary care, and/or other health/social service delivery
 - Most CTS sites have regular onsite services, but in a few cases, partner agencies offer their services nearby or on-site a few days per week.
 - Social/System Navigators connect clients with substance use treatment, mental health, primary care, and other health/social supports
 - Drop-in centres (e.g., food access and nutrition education, harm reduction supply distribution and education, service referrals) and rest zone services (rest and sleep)
 - Additional supports, such as telephone and computer access, health card replacements, and other supports (e.g., basic needs, dental hygiene, navigating the legal system, mental health system, and the medical system)

Staffing or Service Providers On Site

- All CTS sites are required to be staffed by a designated health professional (Ontario Ministry of Health, 2018) and at most sites, this role is assumed by a registered nurse, a paramedic, and/or another primary care professional.
- Peers/persons with lived experience take on a variety of roles that range from supporting with harm reduction supply distribution, connecting clients to wrap around services or accompanying to referral appointments, and supporting with neighbourhood pick-ups and security-related tasks (among other roles).

Harm reduction workers often staff the sites and also take on a variety of roles including harm reduction education, needle syringe program service provision, and supporting with supervised consumption.

Staff may also be present to prevent and manage security incidents.

(Physical) Safety and Security

All CTS sites must have a variety of safety measures in place for site operation and to ensure safety for staff, clients, and the surrounding community (Ontario Ministry of Health, 2018). Operating sites must meet building codes, have fire plans, meet occupational health and safety requirements, and ensure infection prevention and control requirements. The specifics of how these measures are implemented vary across sites, but include:

- Working closely with local police services, EMS, and staff trained on instances when police should be contacted
- Peers support some security roles, and/or other CTS sites have security staff employed at the site's entrance
- Walkie talkies and Crisis Prevention Training provided for staff
- Clear plans for EMS, first responders, and fire services to have access to and within the site

Community Engagement & Liaison Efforts

Each CTS has developed a *community engagement and liaison plan* to identify how the community will be engaged on an ongoing basis (Ontario Ministry of Health, 2018). Engaging with the local community and providing opportunities to raise any issues or concerns supports the operations of each CTS. CTS sites take an individual approach to community engagement based on identified community needs, but sites tend to offer one or a combination of the following:

- Scheduled open house events, or in-person or virtual tours of the site
- Information flyers about the site and its services
- Answers to Frequently Asked Questions (FAQs) about the CTS
- Drug equipment that has been discarded in public spaces or other community concerns can be reported to CTS operators using a defined communication channel
- Feedback surveys regarding the site
- A direct contact person or Community Advisory Committee that meets to discuss issues as they arise

Accountability Requirements: Reporting & Evaluation

Each CTS must report monthly on a specific set of indicators, as part of its monitoring and reporting requirements (Ontario Ministry of Health, 2018). In addition, each CTS provider is required to complete an annual report on its operations.

Please see Table 2 for a summary of types of evaluation data collected by CTS sites in Ontario and Tables 3-5 for a summary of available data on these indicators across the province.

Table 2– Summary of Types of Evaluation Data Collected by CTS Sites in Ontario (CTS Application Guide, Ontario Ministry of Health, 2018)				
Types of Indicators Tracked	Summary of Indicators			
Visits and Clients	Collection of this data can support decisions made about hours of operation and staffing complements required for effective operations. • Visits by month • Visits by time of day • Visits by consumption method/or substance used • Unique visits per month			
Overdoses & EMS Service Calls	Reversed overdoses are one of the most critical indicators of the benefits of a CTS site. A reversed overdose is a life that has been saved. • Overdose events and overdose treatments:			
Onsite Services	The following data is collected and can also be used to demonstrate if these sites increase harm reduction and safer consumption practices (e.g., sharing drug equipment less frequently), reduce the spread of infectious disease, and increase access to other health and social services.			

Onsite Social Services # of clients accessing onsite social services Onsite Primary care # of clients accessing onsite primary care services # of times first aid or basic care (i.e. abscess, foot, wound) was provided Onsite addiction services and harm reduction services # of clients initiating onsite addictions treatment services Opioid agonist treatment (e.g. methadone, suboxone) Other (e.g. detox, residential or community treatment) # of visits where needle exchange/syringe services were provided for non-CTS use Onsite mental health services # of clients accessing onsite mental health services # of visits where clients received counselling services in CTS o # of visits where client received harm reduction education or information Referrals These sites provide a low-barrier way to access the healthcare system. The following data is collected and can also be used to demonstrate if these sites increase access to health and social services. Social Services referrals o # of clients referred to social services: Housing Other Primary care referrals Addiction services referrals # of clients referred to addictions treatment services Mental health services referrals # of clients referred to mental health services Safety & Security The following data that is collected can demonstrate that a CTS site adds stability

to the community by improving public order and reducing the number of injections taking place in public.

Sites are required to report on:

- Needles picked up around the CTS
 - o Frequency of needle pick-ups in the surrounding area of the CTS
 - o # of needles removed (i.e. picked up) in the surrounding area of the CTS
- Security
 - o # of times security staff assisted with an incident in the CTS
 - # of times security staff addressed a security event in the immediate perimeter of the CTS
 - # of times police were called to the CTS

	Fentanyl testing strips and drug checking (if applicable)
Community Engagement & Liaison	Regular, collaborative problem solving among safety and security partners and other stakeholders has demonstrated to be helpful in proactively addressing issues at CTS sites.
	Sites are required to report on: O Description of community engagement and liaison efforts, including issues raised and how they have been mitigated.

Table 3 – Consumption & Treatment Services in Ontario – Data on Client Interactions								
Region & Source	Number of Client Visits	Visits by Time of Day	Supervised Consumption Method	Type of Substances Consumed	Number of Overdoses	Number of Overdoses Reversed	Number of Deaths	Number of Referrals & On- Site Services
Region of Waterloo Public Health & Emergency Services – Consumption & Treatment Services Data Dashboard (October, 2019 – November, 2021) Accessed January 27th, 2023	23,502	Most frequent time of visit was during the afternoon hours (12:00 p.m. – 4:59 p.m.)	Most clients consumed their substances via injection.	Most common types of substances consumed were fentanyl and crystal methamphetamine.	842	842 Overdoses were most often treated solely with oxygen/ rescue breathing and stimulation.	0	See <u>Dashboard</u> .
Middlesex-London Public Health – Summary Report Findings from an Evaluation of London's Temporary Overdose Prevention Site (now Carepoint CTS) (February – August, 2018)	7,152	70% of total visits occurred during the afternoon hours.	N/A	Most common types of drugs consumed were hydromorphone (38.3%) and crystal methamphetamine (26.4%). Approximately 60% of drugs consumed were opioids.	N/A	19 overdoses treated with oxygen and 7 overdoses treated with naloxone.	0	89% of client respondents to a Customer Satisfaction Survey agreed that staff have talked to them and helped them access other health and social services.
Toronto Overdose Information System – Supervised Consumption Services (August, 2017 – November 30 th , 2021) Accessed January 27 th , 2023	128,729	N/A	N/A	N/A	3,267 overdoses. 1,930 overdoses required naloxone.	N/A	N/A	N/A

Wellington-Dufferin- Guelph Public Health – Overdose Prevention Site (now a CTS) Evaluation (2018-2019)	4,085	N/A	N/A	N/A	45	100% reversed - 33% treated with naloxone.	0	N/A
Ottawa Board of Health – Interim OPH SIS Evaluation Results (September 26 th , 2017 – January 22 nd , 2018)	2700+ encounters and 174 unique clients served.	Client volume was highest during the first hour of operation and between noon and 7:00 p.m.	N/A	N/A	N/A	Enhanced monitoring was required during 19 (0.7%) of encounters involving injection, 4 of which required oxygen administration and 1 of which required oxygen and naloxone administration.	N/A	71 referrals to healthcare, mental health, housing, opioid substitution therapy, and other services. 85% of clients were provided on-site health services (counselling, harm reduction education, health teaching).
Summary of Ottawa Consumption & Treatment Services Data for July – September of 2019 (combined for Ottawa Inner City Health, Somerset West CHC, Sandy Hill CHC, and Ottawa Public Health)	33,588	N/A	Top drugs reported were opioids (including fentanyl, heroin, and other unspecified) and stimulants (including speed, crystal methamphetamine, and crack cocaine).	N/A	N/A	166 overdoses treated solely with oxygen or rescue breathing and stimulation and 126 overdoses treated with naloxone.	N/A	247* referrals to addiction, counselling, detox, opioid withdrawal, and/or treatment. *Does not include Ottawa Inner City Health data.

Table 4 – Consumption & Treatment Services in Ontario – Data on Client Experiences					
Region & Source	Measure	Summary of Findings			
Middlesex-London Public Health – Summary Report Findings from an Evaluation of London's Temporary Overdose Prevention Site (now Carepoint CTS) (February – August, 2018)	Customer Satisfaction Survey for Clients (N=105)	 96% rated the quality of service and care received as good or excellent. 89% reported that they would be likely or extremely likely to recommend the site to other people who use drugs 91% indicated that the rules and regulations rarely or never get in their way of using the site 74% agreed that they learned tips at the site to use drugs more safely 89% agreed that staff have talked to them and helped them access other health and social services 95% indicated that they felt accepted at the site 76% reported injecting less in public spaces 53% reported disposing of their gear less in public spaces 			
Wellington-Dufferin-Guelph Public Health – Overdose Prevention Site (now a CTS) Evaluation (2018 – 2019)	51 client interviews	 85% said that the OPS is important in their overall health 88% said that the OPS is important to their overall safety 			
Ottawa Board of Health – Interim OPH SIS Evaluation Results (September 26 th , 2017 – January 22 nd , 2018)	Client survey	 93% felt safer when they use drugs at the site 87% injected in public less often 60% thought more about reducing or stopping their drug use 77% injected alone (by themselves) less often 77% felt that their drug use was more stable/less chaotic 97% reported a strong likelihood of recommending the service to other people who inject drugs 97% believed that staff provided good support 70% felt that staff have talked/helped them to access other services 			

Table 5	 Consumption & Treatment Services in 	Ontario – Data on Safety/Security & Comm	unity Impacts
Region & Source	Emergency Services Responses	Safety & Security	Community Impacts
Region of Waterloo Public Health & Emergency Services — Consumption & Treatment Services Data Dashboard (October, 2019 — November, 2021; Accessed January 14 th , 2022) & Consumption & Treatment Services Review (January — December, 2020)	 16 non-overdose related 9-1-1 calls 12 overdose-related 9-1-1 calls 5 overdose-related transports to the emergency department 12 non-overdose-related transports to the emergency department Region of Waterloo CTS Dashboard (October, 2019 – November, 2021) 	 654 needles picked up around the CTS (pick-ups/sweeps are conducted three times per day) 8 incidents where security addressed an event within the perimeter of the CTS 2 police calls made by CTS staff 30 incidents where security assisted with an incident inside the CTS Region of Waterloo CTS Dashboard (October, 2019 – November, 2021) 	 Developed a Community Advisory Group comprised of neighbours in close proximity to the site (City of Kitchener, Downtown Kitchener BIA, Kitchener Public Library, Wilfred Laurier University, schools, childcare centres, neighbourhood associations, nearby neighbours, faith organizations). A survey of Community Advisory Group members found that 80% strongly agreed or agreed that the CTS felt like a part of the community. 90% strongly agreed or agreed that the CTS and its partners were responsive to addressing concerns with the CTS. 70% strongly disagreed or disagreed that the CTS has negatively impacted the community. Region of Waterloo Public Health & Emergency Services – CTS Review (January – December, 2020)
Middlesex-London Public Health — Summary Report Findings from an Evaluation of London's Temporary Overdose Prevention Site (now Carepoint CTS) (February – August, 2018)	 5 calls to EMS related to an overdose 2 transfers to an emergency department related to an overdose 	spaces	on Survey reported injecting less in public on Survey reported disposing of their gear

Wellington-Dufferin-Guelph Public Health – Overdose Prevention Site (now a CTS) Evaluation	7% of overdoses (N=45) transferred to the emergency department	N/A
Ottawa Board of Health – Interim OPH SIS Evaluation Results (September 26 th , 2017 – January 22 nd , 2018)	Enhanced monitoring was required during 19 (0.7%) of encounters involving injection, 4 of which required oxygen administration and 1 of which required oxygen and naloxone administration. 9-1-1 was called for a drug overdose during two of these encounters.	N/A
Summary of Ottawa Consumption & Treatment Services Data for July - September of 2019 (combined for Ottawa Inner City Health, Somerset West CHC, Sandy Hill CHC, and Ottawa Public Health)	5 clients transported to an emergency department related to an overdose	N/A

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