PHSA Collective Impact Network (CIN)

07 DEC 2023 / 1-4PM / ONLINE

# Attendees

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| Organization | Representative(s) |
| PHSA | Heather Pedersen, Blake Stitilis, Elaine Chan, Teddy Consolacion |
| FNHA | Jill Rusen |
| PAN | Simon Goff, Janak Bajgai |
| BCHN | Kate Fish |
| CINHS | Jennifer Hoy |
| CBRC | - |
| OPTIONS | Julia Morris, Flo Ranville |
| PIVOT | Eva Ureta |
| YOUTHCO | - |

# Agenda

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| Item | Description |
|  | **Territorial Acknowledgement** |
|  | **Welcome and Introductions** |
|  | **Check-in** |
|  | **CIN Business**   * Regrets received from Marc Seguin, Evin Jones, Jessy Dame, Deb Schmitz * Ratified September 2023 draft minutes. * Adopted December 2023 draft agenda. No other business. |
|  | **HEALTH AUTHORITY UPDATES** PHSA – RFP 2024 (Heather)  * At the last meeting there were talks of a contract extension by a year, or maybe to start fresh. Instead, we've ended up extending by 3 months and then starting our 3-year cycle and that's a result of staff turnover at all levels. But Carmen and I have been working on the contracts in the background the whole time so there's more continuity. Also, there is a large amount of the funds that are currently under-utilized and the BCCDC and our BC Women's partner really felt like we didn't want to wait another year. * Also, the budgets have not changed for 7 years but everything is more expensive now. So even though our total funding envelope has not changed, we wanted to take this opportunity to make the necessary adjustments to update the contract so that they're more reflective of the current kind of landscape and context. * Our goal is not to totally ‘flip the table’ - we really are looking at it as some necessary adjustments. * **We're still planning on posting the RFP in Mid-January (week of 12th ideally), and then the application deadline would be March 8th right now. The announcements would be in early to mid-April.** * Now we're finalizing the RFP, and we're needing to have it sent off to legal to review by the holidays for us to meet the deadline. * We've tried to simplify the proposal piece itself just to make it easier to follow and work with.  Harm Reduction at BCCDC (from Blake, delivered by Heather)  * BCCDC/BCCSU/FNHA Safer Supply Framework   + Policy work at the moment is focused on maintaining the current system of prescribed safer supply but opportunities to expand prescribed and non-prescribed safer supply will be considered in the future.   + We are actively exploring opportunities to submit the framework or a portion of the framework to government.   + The framework will remain internal to government. * WorkSafeBC/BCCDC/HA Steering Committee on Controlled Substance Exposure Concerns   + The purpose of this committee is to develop standardized provincial guidance on mitigation of risks associated with exposures to controlled substances in a variety of settings.   + The committee will start with revisions to existing outdoor inhalation OPS guidance.   + Other settings for review:     - Acute health care     - Overdose Prevention Services (OPS)     - Emergency Shelters and Supportive Housing     - Accidental/incidental exposures in community settings (e.g. quick-serve restaurant washrooms) * Decriminalization   + [Bill 34](https://can01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.leg.bc.ca%2Fcontent%2Fdata%2520-%2520ldp%2FPages%2F42nd4th%2F1st_read%2FPDF%2Fgov34-1.pdf&data=05%7C01%7Csimon%40paninbc.ca%7Cfbdc49c3b48d476b2ad608dbf78b6ca4%7Ccc51d79297c34d60b20f02107d7931ea%7C0%7C0%7C638375951179641995%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=xJ6zjTT%2FKAhHhJjyYGBF19a2CUD67FHV7LUeahTBPgU%3D&reserved=0), which is currently awaiting regulatory confirmation and may receive an injunction, would further criminalize public substance use (no matter how little you have) in parks, beaches, and sports fields as well as within 6 metres or 20 feet (the length of four park benches) from transit stops and entrances to buildings.  Law enforcement is meant to first ask people using non-prescribed substances in these spaces to move or stop using. If they do not, law enforcement may seize their substances or arrest them.   + BCCDC is working with Pivot on wallet cards and a one-pager once this new legislation has been finalized. * Decampment Evidence Review   + This evidence review will focus on the health impacts of decampment and has been guided by PEEP.  The review is being led by a medical graduate pursuing her MPH.  Will share when complete.  FNHA (Jill) **Indigenous AIDS Awareness Week (IAAW):**   * FNHA has been Celebrating Indigenous AIDS awareness week- a national campaign aimed at fostering collaborative efforts to address HIV in Indigenous populations. Our team has been providing information and educational materials to all FNHA nurses this week, with the goal of not only raising awareness but also actively working to reduce the stigma surrounding HIV/AIDS within our communities.   **Syphilis updates:**   * We are also actively engaged in ongoing educational initiatives aimed at addressing syphilis clusters in FNHA communities. Additionally, we've collaborated with the BCCDC to support Cheemamuk in creating culturally safe and animated infographic promotional materials. These resources are designed to encourage testing within communities and are anticipated to be available in the spring.   **16 Days Against Gender-Based Violence:**   * The FNHA is commemorating the annual global campaign against gender-based violence that runs from November 25 (International Day for the Elimination of Violence against Women) to December 10 (International Human Rights Day). * This campaign is a designated time to call out and speak up on [gender-based violence](https://can01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwomen-gender-equality.canada.ca%2Fen%2Fgender-based-violence%2Fabout-gender-based-violence.html&data=05%7C02%7Csimon%40paninbc.ca%7Ca95ca2eb32e846ae10ac08dbf8ffe40a%7Ccc51d79297c34d60b20f02107d7931ea%7C0%7C0%7C638377550151864869%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=bttgOKv1kXic2azdUpmP5IY5CCBcUkh35J44XunSEkM%3D&reserved=0) and to renew our commitment to ending violence against women, girls, and 2SLGBTQ+ individuals. |
|  | **BCCDC Presentation - STIBBI Surveillance Update: Syphilis & HIV (see Presentation)**    **Syphilis Key Messages–2023Q3 (slide 19)**   1. The number of infectious syphilis cases reported in BC remains high    1. Projecting ~2,000 cases for 2023 -> projected annual incidence 37.0 per 100,000 population       1. In comparison, the 2022 annual incidence was 37.1 per 100,000    2. Males account for the majority (64%) of cases for 2023 YTD; however, the male-to-female case ratio continues to decrease 2. Spread of infectious syphilis into more rural/remote areas and regions outside of Greater Vancouver    1. NHA has the highest HA-specific rate of infectious syphilis in BC for 2023 YTD 3. Continued spread of infectious syphilis in the heterosexual population and decreasing number of infectious syphilis cases reporting as gbMSM    1. For 2023 YTD, of all infectious syphilis cases with information on gender of sexual partner(s): 66% were male or female cases reporting heterosexual partners only; 32% were gbMSM (male cases reporting either male partner(s) only or male and female and/or transgender partners)    2. For 2023 YTD, the number of male cases reporting as gbMSM was 40% lower than the same time period in 2022 4. Continued occurrence of cases of congenital syphilis and syphilitic stillbirth   **Discussion:**  Julia – re: the trend in the Northern health authority around having a higher level of heterosexual people with syphilis. Do you think there, there's an impact in terms of stigma there around heterosexual people who would be perhaps more likely to define or report their sexual orientation versus people who are reporting otherwise? Elaine – it is a potential factor.  Simon – are there interventions that have been directed at the heterosexual population that have been evaluated for their effectiveness? Elaine – not aware of any. Really haven’t had time – outbreak in gbMSM then COVID made it difficult.  Janak – is there more granularity in the geographic data? yes, and HAs get that in their report.  **NOTE: new updated resource:** [**http://www.bccdc.ca/health-professionals/data-reports/sti-reports**](http://www.bccdc.ca/health-professionals/data-reports/sti-reports) **-** The Q3 syphilis indicator report now posted will also include additional indicators (e.g., age group, time to initial treatment, stage of infection) not highlighted in this presentation.  Simon – is Indigenous data included? Teddy – yes, but we can’t report out. The governance of this data will be purely at the FNHA, and Metis Nation, under Dr. Behn Smith at Provincial Health Office (PHO), Indigenous Affairs.  Janak- what are the barriers to getting complete data? Teddy – safety? Feeling empowered and connected to community?  **NOTE: Clinical Prevention Services Interactive Dashboard (Coming in 2024)** |
|  | **CAP 3** **- Guiding principles, policies and practices for employers to engage PWLLE in community-based organizations (see Presentation)**     * PROJECT UPDATE   + Including the recent work on the Annotated Bibliography – how this will be organized as a stand-alone resource. This blog describes the process used for the AB. <https://paninbc.ca/2023/11/29/rigor-and-relevance-in-literature-reviews/?utm_source=rss&utm_medium=rss&utm_campaign=rigor-and-relevance-in-literature-reviews>     - Online resource - There will be an executive summary, ToC, keywords, 1-2 sentence summary and link to full review.     - ACTION: Janak to connect with Julia about 3 tier systems – ways to prioritize search results etc.   + Thanks to all the PWLLE who have been part of consultations and the survey   + Jenn Cusick is now working on the first draft of the CBO resource. * ACTION Next steps for CIN   + Commitment from CIN table and PWLLE to review draft of resource   + Finalize resource   + Knowledge mobilization     - Action-oriented Ideas from the PWLLE consultations added to slides     - See categories in slides   Jen – what happens if the funding finishes for this?  Simon - There will be a commitment from PAN to roll-out this project even after year-end, but possible extra funding may increase scope. |
|  | **Break** |
|  | **CAP (Collective Action Plan) 1** – **PIVOT-led opportunities**  **DRUG POLICY**  Bill 34: BC’s recently-passed law, bans drug consumption in a range of public places, including parks, beaches, workplaces, and building entrances. Bill 34:   * promotes hidden or isolated drug use. * drives the displacement of people who use drugs, especially those who are unhoused. * relies on services that do not exist:   + Most communities do not have safe consumption services, meaning that the law will force people into alleyways, public washrooms, and other unsupervised spaces, rather than connect them with supports.   Know Your Rights Cards (KYR) and community follow-up, consultation, and train the trainer program protecting people against Bill 34.  Pursued a court case in which Caitlin Shane, Staff Lawyer for Drug Policy, along with Sarah Runyon of Marion and Company, sought to challenge the constitutionality of Canada’s drug possession laws.  ACTION: Contact Eva if you would like cards.  Julia – is there a Rights card in the work for those in the healthcare system?  Eva – definitely on our list.  **ANTI-STIGMA**  The Anti-Stigma Campaigner will work to identify key municipal bylaws that discriminate against people based on their social condition, namely, those which routinely criminalize people who use drugs, people who do sex work, and people who rely on public space for shelter and work. The goals of this project are to:     1. Demonstrate the power that municipalities have in controlling and criminalizing marginalized communities through their bylaws. 2. Demonstrate why social condition should be added to the BC Human Rights Code by providing concrete examples of rights violations through the enforcement of municipal bylaws. 3. Develop a tool that communities across BC can use to audit their own municipal bylaws and practices for stigma. |
|  | **CAP 2 - Impactful provincial policy change work and advocacy re: drug poisoning crisis (SUBMITTED IN WRITING AFTER THE MEETING)** SURR Project update:<https://paninbc.ca/surr/>  * The SURR HR project has been meeting for about a year to set research and advocacy priorities for harm reduction in small communities in BC. The SURR met with The Minister of Mental Health and Addictions, Minister Whiteside September 25th to share what SURR team has determined as key priorities. * This month a huge amount of work went into submitting a CIHR Team Grant under the “Strengthening the Health Workforce for System Transformation” call with the purpose being to move the first priority forward – and evaluate the implementation of peer-led health services in Small Urban, Rural, and Remote locations in BC. * Darryl Sturtevant, Assistant Deputy of the MMHA who was at the September meeting provided a letter of support for this application. * The next meeting is happening later this December, and we will determine the next steps in terms of follow-up with the MMHA regarding: advocacy priorities, and if/how we want to move other research priorities forward while we await the CIHR grant decision. |
|  | **PAN Updates - SPARTA Project; Self-testing**  **(SUBMITTED IN WRITING AFTER THE MEETING)** HIV self-testing Updates: **Distribution data:**  HIV self test kits distribution through the [Community Link program](https://www.i-am.health/).   * 187,000 kits ordered from Biolytical/REACHNexus for distribution * 340 organizations participating across the country. * More than 44,000 kits distributed across Canada.   **It’s Cold Outside, Test Inside! -** Winter is coming! HIV self-test kits need to be stored between 2-30°C and avoid extreme cold temperatures. That means, store them indoors, or if distributing at events, keep them inside! Tests can be kept and used safely at home at room temperature. Remember to never leave your kits outside or leave them behind in a vehicle! Always wait until the kit reaches room temperature before using it! Finally, check each kit before use to make sure it hasn’t been damaged or gone past its expiry date!  **If you are organizing an outdoor event:** Help keep your HIV self-test kits safe by using our cold warning label stickers. Order label stickers [here](https://docs.google.com/forms/d/e/1FAIpQLSfjq9TAyvpUJjIouZJtycHDDDIXO0mcxzjckpmY8zGTGRdSMQ/viewform)  **Care pathways** by Health Authority for self-testing are finalized, and currently under translation in French.  **HIVST brochures** in [Spanish](https://can01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fhealth.us13.list-manage.com%2Ftrack%2Fclick%3Fu%3Dfcf8991f8fd2016f28c4295a0%26id%3D6ef1cf8b69%26e%3D7c3b7fc0d8&data=05%7C01%7Cjanak%40paninbc.ca%7C518a5fa5b7724329ca2b08dbf5c67044%7Ccc51d79297c34d60b20f02107d7931ea%7C0%7C0%7C638374004903151191%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=RVQYSNnAQeUG%2BJziXokeacMoZd0rqW4atXGCgQ81E%2FY%3D&reserved=0)  ***Follow up from last M&A meeting* - Grinder initiative**: The Grinder initiative (pop-up advertisement for ordering HIV self-test kits) was launched marking the World AIDS Day – December 1st. This notification will invite users to order HIV self-test kits, directing them to a landing page that will also provide local information on STBBI and other related resources.  **HIV self-test distribution data:** Coordinating agencies (REACH, CATIE, Get a Kit program, CAAN, CBRC) are currently having discussions to tease out the data-sharing process for all CBOs. Once they outline the process, we should be able to get a complete picture of HIV self-test kit distribution (with their demographics) for the province.  **Unintended consequences of HIV self-tests:** Remind folks that as of now the nondisclosure of HIV transmission is still the reality, even though we have not heard about any criminalization lately, but there are real chances for people to step on that legal entity to trouble people who might be getting self-testing. You can do a couple of things – train people who are involved in the distribution including volunteers so that they have a good idea of HIV testing, relevant resources, legal implications, and other information. Here are some of the resources: SPARTA project update<https://paninbc.ca/sparta-project/> The SPARTA Project aims to create a draft engagement framework for STIBBI public health data through the engagement of patients, people with lived and living experiences (PWLLE), and community.  The project is currently in Phase 3,   * Community Leadership Council has contributed to the co-development of a Data Request form and User Guide while establishing the pilot data request process. * The SPARTA team has conducted Discussion Circles and administered surveys to engage community members for additional feedback surrounding the proposed Community Engagement framework and Data Request process. * BCCDC and SPARTA is currently working to finalize an interactive STBBI dashboard. * We have submitted pilot data request, we have not yet received the data. I will update the group on the data analysis and visualization, would love to get some feedback from you at that point. |
|  | **Collective Impact – Shared Measurement and Evaluation (see Presentation)**    **Highlights:**   * What is Collective Impact in 2023? How does it differ from collaboration. * Conditions for CI * Equity Practices, needed for success * Importance of shared measurement, within CI evaluation * CIN Survey 2024   **ACTION: Question for CIN members -** Please share your perspectives on one or two critical indicators from your organization’s work that could contribute to a shared understanding of our collective impact. |
|  | **Any Other Business** |
|  | **Next meetings**   * Changed to Feb 29 as there was a clash with HIV CIC Testing Working Group on March 14. Presentation on Hep C and Test Now * We will check on June 13 again at the next meeting. |
|  | **Check Out** |
|  | **Adjourn** |

<https://ottawacitizen.com/opinion/opinion-this-world-aids-day-we-need-to-stop-criminalizing-people-with-hiv>