

REGIONAL MUNICIPALITY OF OTTAWA CARLETON
 MUNICIPALITÉ RÉGIONALE D'OTTAWA CARLETON

REPORT
 RAPPORT

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DATE 21 August 1996

TO/DEST. Co-ordinator, Community Services Committee

FROM/EXP. Acting Medical Officer of Health

SUBJECT/OBJET **RMOC ROLE IN THE GOVERNANCE OF SUBSTANCE ABUSE PROGRAMS**

DEPARTMENTAL RECOMMENDATION

That the Community Services Committee recommend Council authorize staff to explore options for the Health Department to be the sponsor of a Governance Body to oversee substance abuse programs in this region.

PURPOSE

The purpose of this report is to provide the Community Services Committee with information about current developments within the substance abuse sector. After an extensive community consultation which involved both key service providers and funders, the Governance Working Group has identified the possibility of an important role for the RMOC.

BACKGROUND

In November 1995, the Substance Abuse Steering Committee of the Ottawa-Carleton Regional District Health Council (OCDHHC) and the Addictions Services Planning Committee (ASPC) of the Regional Municipality of Ottawa-Carleton, recommended that a joint working group be established to develop models for a Governance Body to oversee publicly funded substance use/abuse programs and initiatives in Ottawa-Carleton. The working group (the Governance Working Group) was also charged with obtaining public input, and recommending to the OCDHHC a model of governance that reflected a best match of philosophy and will within the community.

Equal representation was chosen from the Substance Abuse Steering Committee, the Addictions Services Planning Committee (residential and non-residential treatment), Funders and Survivors of substance abuse. Members represented the community and not any individual agency or group.

Funders of substance abuse programs in Ottawa-Carleton established guidelines for the Governance Work Group. These include:

- To strive for equity of access within the substance abuse network;
- To plan for a better service for people by determining local needs, incorporating local planning and through streamlining service delivery;
- To provide effective management and service in the system;
- To advance the realignment of the current funding envelope with one funder; and
- To develop a governance body that will assume responsibility for maximizing the effectiveness and efficiency of the system.

The Health Department is involved in the substance abuse service system through its Substance Abuse Prevention Program and the SITE needle exchange program. A staff member of the Health Department chairs the Substance Abuse Steering Committee of the District Health Council and was a member of the Governance Working Group. The Social Services Department has historically cost shared with the Ministry of Community and Social Services the cost of certain residential treatment beds. The Department also played a leadership and funding role in the Substance Abuse Redesign Initiative which gave the Governance Work Group its mandate. In April 1996, the Minister of Finance announced that all funding for the Substance Abuse system would flow through the Substance Abuse Bureau of the Ministry of Health. This effectively terminated the role of the Social Services Department in the substance abuse service system and in the Substance Abuse Redesign Initiative.

DISCUSSION

The Governance Working group has now produced its final report to the District Health Council A Proposed Model of Governance for the Substance Community of Ottawa-Carleton.(Annex A). The report will be presented to the District Health Council for approval in September. The report identifies the need for sponsorship of the Governance Body by an existing agency. Given the current funding arrangements, this agency will need to be a transfer agency for the Ministry of Health. The report identifies two options for the sponsoring agency of which the preferred option is the Health Department of the RMOC.

Staff is of the opinion that it is worth exploring this option with the Ministry of Health and the Substance Community to see if a satisfactory sponsorship arrangement can be negotiated. There is a need for a better coordinated and planned substance abuse service system in Ottawa-Carleton. RMOC would seem to be an appropriate sponsor with a regional mandate and a strong interest in substance use issues without being a direct service provider. From the public health point of view, there is an opportunity to advocate for an increased emphasis on health promotion and harm reduction within the spectrum of substance abuse services.

There are clearly many details of the sponsorship arrangement which remain to be negotiated. Given the current fiscal climate, the assumption of this new role by the RMOC would need to be carefully costed and fully funded by the Ministry of Health. There also needs to be clarity on the accountability and liability for the fiscal management and policy decisions of the Governance Body and the role, if any, of Committee and Council in participating as members of the Governance Body and/or approving the decisions of the Governance Body.

PUBLIC CONSULTATION

Planning for substance abuse prevention and treatment services has been done in collaboration with service providers. Consumers have been involved in the planning process. Details of the planning process are included in Annex A.

FINANCIAL IMPLICATIONS

No additional financial resources are being requested at this time.

CONCLUSION

This report has outlined the current status of planning for substance abuse prevention and treatment services in Ottawa-Carleton. The Health Department has a strong interest in prevention of substance abuse and harm reduction for substance abusers. The planning process has identified the Health Department as a potential sponsor of the Governance Body for a regional substance abuse system. Staff requests authorisation to explore with the community the option of sponsorship of a governance body for substance abuse prevention and treatment services in Ottawa-Carleton.

*Approved by
Geoff Dunkley
Acting Medical Officer of Health*

Attach. (1)