



# **Hastings Prince Edward Public Health Board of Health Meeting**

Information Items

Wednesday, December 2, 2020

**Listing of Information Items  
Board of Health Meeting – December 2, 2020**

1. Sudbury Public Health – Letter to Prime Minister Trudeau re Guaranteed Basic Income dated October 13, 2020
2. Simcoe Muskoka District Health Unit – Letter to Patty Hajdu re COVID-19 and Long-Term Care Reform dated September 18, 2020
3. Grey Bruce Health Unit – Letter to Patty Hajdu re: Support of the Municipal Drug Strategy Coordinators Network of Ontario, Safe Supply dated October 29, 2020

*The above information items can be found on the Hastings Prince Edward Public Health's website through the link in the Agenda Package or by going to our website at [hpePublicHealth.ca](http://hpePublicHealth.ca).*



**Public Health**  
**Santé publique**  
SUDBURY & DISTRICTS

October 13, 2020

VIA ELECTRONIC MAIL

The Right Honourable Justin Trudeau, P.C., MP  
Prime Minister of Canada  
Office of the Prime Minister  
80 Wellington Street  
Ottawa, ON K1A 0A2

The Honourable Chrystia Freeland, P.C., MP  
Deputy Prime Minister and  
Minister of Finance  
Privy Council Office  
Room 1000  
80 Sparks Street  
Ottawa, ON K1A 0A3

Dear Prime Minister Trudeau and Deputy Minister and Minister of Finance:

**Re: Basic Income for Income Security during the COVID-19 Pandemic and Beyond**

At its meeting on September 17, 2020, the Board of Health carried the following resolution #20-20:

*THAT the Board of Health for Public Health Sudbury & Districts endorse correspondence from Ontario boards of health recommending the evolution of the Canada Emergency Response Benefit (CERB) into a basic income for all Canadians during the COVID-19 pandemic and beyond.*

*AND FURTHER THAT relevant individuals and organizations be apprised of this motion and supporting materials.*

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[phsd.ca](http://phsd.ca)



Letter

Re: Basic Income for Income Security during the COVID-19 Pandemic and Beyond

October 13, 2020

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Income alone is the single strongest predictor of health, and health improves at every step up the income ladder.<sup>i</sup><sup>ii</sup> Populations living in low income are disproportionately affected by virtually all physical and mental health problems and challenges. The COVID-19 pandemic has amplified income inequities that already exist and has increased the level and depth of poverty across the country.

Public Health Sudbury & Districts has a long-standing commitment to health equity and poverty reduction efforts including previous advocacy in support of a basic income guarantee. Given the devastating financial impacts of COVID-19 on priority populations, Public Health Sudbury & Districts is reconfirming its support for basic income as a long-term policy option for poverty reduction for all Canadians, during the pandemic and beyond. Therefore, we urge your government explore the implementation of a basic income as the Canadian Emergency Response Benefit comes to an end as a viable option for reducing poverty and improving health.

Sincerely,



Penny Sutcliffe, MD, MHSc, FRCPC  
Medical Officer of Health and Chief Executive Officer

cc: Honourable Doug Ford, Premier of Ontario  
Honourable C. Elliott, Deputy Premier and Minister of Health  
Dr. D. Williams, Chief Medical Officer of Health, Ministry of Health  
All Ontario Boards of Health

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<sup>i</sup> Public Health Sudbury & Districts. (2019, July 16). *Health equity*. Retrieved from <https://www.phsd.ca/health-topics-programs/health-equity>

<sup>ii</sup> Mikkonen, J., Raphael, D. (2010). *Social determinants of health: The Canadian facts*. Toronto. York University School of Health Policy and Management. Retrieved from [https://thecanadianfacts.org/The\\_Canadian\\_Facts.pdf](https://thecanadianfacts.org/The_Canadian_Facts.pdf)

September 18, 2020

The Honourable Patty Hajdu  
Minister of Health  
House of Commons  
Ottawa, Ontario, K1A 0A6  
Email: [Patty.Hajdu@parl.gc.ca](mailto:Patty.Hajdu@parl.gc.ca)

The Honourable Marilee Fullerton  
Minister of Long-Term Care  
Ministry of Health and Long-Term Care  
400 University Ave., 6<sup>th</sup> Floor  
Toronto, ON M7A 1T7  
Email: [merrilee.fullerton@pc.ola.org](mailto:merrilee.fullerton@pc.ola.org)

Ontario's Long-Term Care COVID-19 Commission  
700 Bay Street, 24<sup>th</sup> Floor  
Toronto, ON M5G 1Z6  
Email: [Info@LTCcommission-CommissionSLD.ca](mailto:Info@LTCcommission-CommissionSLD.ca)

Dear Ministers:

**RE: COVID-19 and Long-Term Care Reform**

COVID-19 has shone a glaring light on what many knew to be a crisis with the Long-Term Care (LTC) system in Canada in need of reform and redesign, with 81% of COVID-19 related deaths in Canada occurring in LTC Homes (LTCHs) which is far higher than other comparable countries.<sup>i</sup> Urgent reform and redesign of Canada's LTC system is critical in order to address infection prevention and control (IPAC) issues (including COVID-19) and to improve all standards, quality of care and quality of life. Those who require services within a LTCH setting deserve those assurances.

A [report](#) released following deployment of the Canadian Armed Forces (CAF) to five LTCHs in Quebec and Ontario struggling in their response to COVID-19 indicates highly concerning living conditions and serious lapses in standards and quality of medical and personal care. The list of deficiencies identified by the CAF as requiring immediate attention is lengthy and includes inadequate infection and control practices, inadequate supplies and lack of training, knowledge, oversight and accountability of LTCH staff and management.<sup>ii</sup>

The Royal Society of Canada (RSC) Working Group on LTC has since released a [policy briefing](#) highlighting the pre-pandemic issues with LTCHs that contributed to the heightened crisis in the face of COVID-19, a global pandemic. Namely, addressing the changing demographics and complexities of older adults entering homes, the inadequate workforce and staffing mix to meet their needs, and the inadequate physical environments to accommodate the complex needs of residents, are critical issues that must be addressed moving forward with LTC reform and redesign.

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The Working Group policy briefing outlines nine steps requiring strong federal/provincial/territorial and municipal leadership to address necessary improvements in IPAC and provision of quality care for LTC residents with increasingly complex needs:

1. Implement best practice national standards for the necessary staffing and staffing mix to deliver quality care in LTCHs and attach federal funding to the standards;
2. Implement national standards for training and resources for infectious disease control and for outbreak management;
3. Provide appropriate pay and benefits including sick leave for the large unregulated segment of the LTC workforce (i.e. care aides and personal support workers);
4. Provide full time employment and benefits for regulated and unregulated nursing staff and assess impact of “one workplace” policies implemented during COVID-19;
5. Establish minimum education standards for unregulated direct care staff, ongoing education for both regulated and unregulated direct care staff, and proper training and orientation for all external agency staff assigned to a LTCH;
6. Support educational reforms for specialization in LTC for all providers of direct care (i.e. care aides, health and social service providers, managers and directors);
7. Provide mental health supports for LTCH staff;
8. Implement reporting requirements and data collection needed to effectively manage and ensure resident quality of care and quality of life, resident and family experiences and quality of work life for staff; and
9. Take an evidence based approach to mandatory accreditation as well as to regulation and inspection of Long-Term Care Facilities (LTCFs).<sup>iii</sup>

The Simcoe Muskoka District Health Unit’s (SMDHU) Board of Health at its September 16, 2020 meeting endorsed these recommendations and is writing to advocate for their adoption through your collective efforts to create necessary system reform and redesign for Ontarians living in LTCHs.

As of September 8, 2020, of the 21 outbreaks within institutional, workplace and congregate settings in Simcoe Muskoka, LTCHs and Retirement Homes accounted for 76% (16) of the outbreaks. As of August 25, 2020, there have been 24 resident deaths attributed to these LTC and Retirement outbreaks and an additional 2 Simcoe Muskoka resident deaths in facilities outside of the region for a total of 26. The median age of all cases who have recovered is 46 years compared to the median age of 85 years among all deceased cases.<sup>iv</sup>

SMDHU’s mandate under the Ontario Public Health Standards (OPHS, 2018)<sup>v</sup> regarding LTC and Retirement Homes is substantial. As a vulnerable population, SMDHU supports these facilities with food safety, and infectious and communicable disease prevention and control (including outbreak management). There are currently 29 LTC and 53 Retirement Homes within SMDHU. Since March 1, 2020, the Infectious Disease team has supported over 1700 IPAC consults or COVID-19 questions for LTC and Retirement Homes.

In addition to the mandate in LTCF’s, SMDHU is required to develop and implement a program of public health interventions using a comprehensive health promotion approach that addresses risk and protective factors to reduce the burden of preventable injuries and

substance use in the health unit population. <sup>iv</sup> SMDHU supports community dwelling seniors and promotes healthy aging at home for those that are able, and for as long as they are able. The SMDHU supports these seniors through;

- active participation on the Ontario Fall Prevention Collaborative, the Simcoe County and other community based Age-Friendly Community Coalitions, The Muskoka Seniors Planning Table, Age-Friendly and the Central LHIN Fall Strategy;
- best practice healthy aging policy advocacy; and
- a wide variety of community awareness and engagement strategies to promote healthy aging key messages.

SMDHU remains committed to supporting local LTC and Retirement Homes to improve IPAC practices and to advocate for improvement to standards and quality of care and quality of life for residents, their families and staff, and implore municipal, provincial and federal leaders to make the necessary investments to create safe supportive care to ensure the health and safety for residents of LTCHs.

Sincerely,

**ORIGINAL Signed By:**

Anita Dubeau, Chair  
Simcoe Muskoka District Health Unit Board of Health

AD:JC:cm

cc: Ontario Boards of Health  
Matthew Anderson, President and CEO, Ontario Health  
Loretta Ryan, Executive Director, Association of Local Public Health Agencies  
Mayor and Council of Simcoe and Muskoka  
Members of Provincial Parliament for Simcoe and Muskoka

**References:**

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<sup>i</sup> Canadian Institute for Health Information. "New analysis paints international picture of COVID-19's long-term care impacts": CIHI; June 25, 2020. Available from: <https://www.cihi.ca/en/new-analysis-paints-international-picture-of-covid-19s-long-term-care-impacts>

<sup>ii</sup> Headquarters 4<sup>th</sup> Canadian Division Joint Task Force (Central). (2020). [OP LASER - JTFC Observations in Long Term Care Facilities in Ontario](#)

<sup>iii</sup> Estabrooks CA, Straus S, Flood, CM, Keefe J, Armstrong P, Donner G, Boscart V, Ducharme F, Silviu J, Wolfson M. *Restoring trust: COVID-19 and the future of long-term care*. Royal Society of Canada. 2020 retrieved on Aug. 28 at [https://rsc-src.ca/sites/default/files/LTC%20PB%20%2B%20ES\\_EN.pdf](https://rsc-src.ca/sites/default/files/LTC%20PB%20%2B%20ES_EN.pdf)

<sup>iv</sup> Retrieved on Aug. 25, 2020 <https://www.simcoemuskokahealthstats.org/topics/infectious-diseases/a-h/covid-19>

<sup>v</sup> Ministry of Health and Long-Term Care. (2018). [OPHS](#)

October 29, 2020

The Honourable Patty Hajdu  
Federal Minister of Health  
House of Commons  
Ottawa ON K1A 0A6  
Via e-mail [patty.hajdu@parl.gc.ca](mailto:patty.hajdu@parl.gc.ca)



The Honourable Christine Elliott  
Provincial Minister of Health  
5<sup>th</sup> Floor  
777 Bay Street  
Toronto ON M7A 2J3  
Via e-mail [christine.elliott@pc.ola.org](mailto:christine.elliott@pc.ola.org)

Dear Ministers Hajdu and Elliott:

**Re: Municipal Drug Strategy Coordinators Network of Ontario, Safe Supply**

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On September 25, 2020 at a regular meeting of the Board of Health for the Grey Bruce Health Unit, the Board considered the attached letters from the Municipal Drug Strategy Coordinators Network of Ontario regarding safer supply initiatives. The following motion was passed:

GBHU BOH Motion 2020-65

Moved by: Anne Eadie

Seconded by: Brian O'Leary

"THAT, the Board of Health endorse the Municipal Drug Strategy Coordinators Network of Ontario call on the provincial government to fund implementation of safer supply initiatives in a coordinated approach with the federal government; and support the implementation of safer supply initiatives by adding the required formulations to the Ontario Drug Benefit Formulary to enable injectable safer supply initiatives to operate."

Carried

Sincerely,

A handwritten signature in black ink, appearing to read "Mitch Twolan". The signature is fluid and cursive.

Mitch Twolan  
Chair, Board of Health  
Grey Bruce Health Unit

Encl.

Cc: Municipal Drug Strategy Coordinators Network of Ontario, Adrienne Crowder, Alex Ruff, MP Bruce-Grey-Owen Sound, Terry Dowdall, MP Simcoe-Grey, Ben Lobb, MP Huron-Bruce Association of Local Public Health Agencies, Ontario Health Units

*Working together for a healthier future for all.*

101 17<sup>th</sup> Street East, Owen Sound, Ontario N4K 0A5 [www.publichealthgreybruce.on.ca](http://www.publichealthgreybruce.on.ca)



Municipal Drug Strategy Coordinators Network of Ontario  
c/o Adrienne Crowder  
Manager, Wellington Guelph Drug Strategy  
176 Wyndham St. N.  
Guelph ON, N1H 898

August 21, 2020

Honourable Patty Hajdu  
Minister of Health  
Government of Canada  
House of Commons  
Ottawa ON, K1A 0A6

Dear Honourable Minister of Health Hajdu,

We would like to commend your government for addressing the drug poisoning crisis by funding and facilitating access to safer supply initiatives, and other health interventions. As you know, safer supply initiatives provide pharmaceutical-grade drugs, such as hydromorphone or diacetylmorphine, to people who use substances within a health care context. However, additional safer supply initiatives are needed in Ontario and across Canada. Therefore, on behalf of the Municipal Drug Strategy Coordinators Network of Ontario (MDSCNO), we urge the Government of Canada to immediately increase funding to safer supply initiatives to save lives, and improve the health, safety and well-being of people who use drugs in our province.

Safer supply initiatives significantly improve individual health by transitioning people from the toxic, unregulated market to pharmaceutical-grade substances within a health care context. Substance use is addressed as a health issue rather than a criminal justice issue. Safer supply initiatives can also offer participants case management and other supports to address a spectrum of health and social concerns. These health initiatives have demonstrated exceptionally high client retention rates and significant reductions in overdose fatalities while simultaneously creating a pathway to health care services for their clients.<sup>1</sup> Beyond the health sector, safer supply initiatives provide significant benefits, including improved community safety and well-being, and reduced

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<sup>1</sup> Canadian Centre on Substance Use and Addiction. "Exploring Expanded Response Options to Opioid Harms: Case Studies from Four Canadian Clinics", June 2020. Available at: <https://www.ccsa.ca/sites/default/files/2020-06/CCSA-Expanded-Response-Options-Opioid-Harms-Case-Studies-2020-en.pdf>.

enforcement- and criminal justice-related costs.<sup>2</sup> For these reasons, they have strong support in many Ontario communities.

In 2019, Ontario recorded the highest number of opioid-related overdose deaths in Canada, with 1,535 people dying from opioid-related poisoning, surpassing the province of British Columbia for the first time.<sup>3,4</sup> Since the year 2000, when 111 opioid-related fatalities were recorded, the number of preventable deaths has increased every year, resulting in declining life expectancy in Ontario.<sup>5</sup> While several factors contribute to the drug poisoning crisis, exposure to toxic drugs from an unregulated market is the primary driver of deaths in Ontario and the rest of Canada.

The drug poisoning crisis has been intensified by the COVID-19 pandemic, resulting in two concurrent public health crises. Services have temporarily closed or reduced their hours and capacity. In addition, the unregulated drug market has become increasingly toxic. Stress, isolation, and other pandemic-related factors have increased the risks associated with substance use. Preliminary data from the Office of the Chief Coroner for Ontario shows a 35% increase in suspected drug-related deaths in Ontario in March, April and May 2020 compared to the monthly average in 2019, with approximately 60 suspected-drug related deaths occurring each week.<sup>6</sup> It is now more evident than ever that urgent action is needed to address the opioid poisoning crisis that is co-occurring with the COVID-19 pandemic.

In late 2019 and early 2020, most community proposals submitted to the Substance Use and Addictions Program (SUAP) for safer supply initiatives were denied simply because of inadequate funding. The MDSCNO calls on the federal government to urgently increase SUAP funding available for existing proposals, and to issue a second call for new SUAP safer supply proposals to support a full spectrum of safer supply initiatives across Canada.

The MDSCNO's members are among Ontario's leading experts in drug policy and program development. We represent comprehensive drug strategies in many municipalities throughout Ontario who share a collective interest in making our province safer and healthier for present and future generations.

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<sup>2</sup> Ontario Agency for Health Protection and Promotion (Public Health Ontario), Leece P, Tenenbaum M. *Evidence Brief: Effectiveness of supervised injectable opioid agonist treatment (siOAT) for opioid use disorder*. Toronto, ON; 2017.

<sup>3</sup> Public Health Ontario. Personal Communication, May 2020.

<sup>4</sup> Preliminary data from the Office of the Chief Coroner for Ontario shows that there were 1,535 probable and confirmed opioid overdose deaths in Ontario in 2019. This number may increase as coroner's complete investigations.

<sup>5</sup> Statistics Canada. (2020). *The Daily: Life Tables*. Retrieved from <https://www150.statcan.gc.ca/n1/daily-quotidien/200128/dq200128a-eng.htm>

<sup>6</sup> Office of the Chief Coroner for Ontario. Personal Communication, August 2020

Sincerely,



Adrienne Crowder  
Manager, Guelph Wellington Drug Strategy  
On behalf of the Municipal Drug Strategy  
Coordinators Network of Ontario



Susan Shepherd  
Manager, Toronto Drug Strategy Secretariat  
On behalf of the Municipal Drug Strategy  
Coordinators Network of Ontario

CC:

Prime Minister Trudeau  
Alliance for Healthier Communities  
Association of Municipalities of Ontario  
Canadian Alliance to End Homelessness  
Canadian Drug Policy Coalition  
Canadian Mental Health Association  
Canadian Nurses Association  
Canadian Public Health Association  
Chiefs of Ontario  
College of Nurses of Ontario  
College of Physicians and Surgeons of Ontario  
Council of Medical Officers of Health  
Federation of Canadian Municipalities  
Ontario Association of Chiefs of Police  
Ontario College of Pharmacists  
Ontario Pharmacists Association  
Ontario Public Health Association  
Public Health Ontario

**About the Municipal Drug Strategy Coordinators Network of Ontario**

Our 65+ members work in diverse health settings across the province, including public health units, community health centres and not-for-profit organizations. Members coordinate multi-sectoral initiatives that aim to prevent and/or reduce the harms of substance use through regionally tailored strategies incorporating prevention, harm reduction, treatment and enforcement-justice initiatives. Learn more at: [www.drugstrategy.ca](http://www.drugstrategy.ca).

Municipal Drug Strategy Coordinators Network of Ontario  
c/o Adrienne Crowder  
Manager, Wellington Guelph Drug Strategy  
176 Wyndham St. N.  
Guelph ON, N1H 898

August 21, 2020

Honourable Christine Elliott  
Minister of Health  
Government of Ontario  
777 Bay Street, 5<sup>th</sup> Floor  
Toronto, ON M7A 2J3

Dear Minister Elliott,

On behalf of the Municipal Drug Strategy Coordinators Network of Ontario (MDSCNO), we urge the Province of Ontario to immediately fund and scale up implementation of safer supply initiatives to save lives, and improve the health, safety and well-being of people who use drugs in our province.

Safer supply initiatives significantly improve individual health by transitioning people from the toxic, unregulated market to pharmaceutical-grade substances within a health care context. Substance use is addressed as a health issue rather than a criminal justice issue. Safer supply initiatives can also offer participants case management and other supports to address a spectrum of health and social concerns. These health initiatives have demonstrated exceptionally high client retention rates, and significant reductions in overdose fatalities while simultaneously creating a pathway to health care services for their clients.<sup>1</sup>

In 2019, Ontario recorded the highest number of opioid-related overdose deaths in Canada, with 1,535 people dying from opioid-related poisoning, surpassing the province of British Columbia for the first time.<sup>2,3</sup> Since the year 2000, when 111 opioid-related fatalities were recorded, the number of preventable deaths has increased every year,

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<sup>1</sup> Canadian Centre on Substance Use and Addiction. "Exploring Expanded Response Options to Opioid Harms: Case Studies from Four Canadian Clinics", June 2020. Available at: <https://www.ccsa.ca/sites/default/files/2020-06/CCSA-Expanded-Response-Options-Opioid-Harms-Case-Studies-2020-en.pdf>.

<sup>2</sup> Public Health Ontario. Personal Communication, May 2020.

<sup>3</sup> Preliminary data from the Office of the Chief Coroner for Ontario shows that there were 1,535 probable and confirmed opioid overdose deaths in Ontario in 2019. This number may increase as coroner's complete investigations.

resulting in declining life expectancy in Ontario.<sup>4</sup> While several factors are contributing to the opioid poisoning crisis, exposure to increasingly toxic drugs from an unregulated market is the primary driver of deaths in Ontario and the rest of Canada.

The drug poisoning crisis has been intensified by the COVID-19 pandemic, resulting in two concurrent public health crises. Services have temporarily closed or reduced their hours and capacity. In addition, the unregulated drug market has become increasingly toxic. Stress, isolation, and other pandemic-related factors have increased the risks associated with substance use. Preliminary data from the Office of the Chief Coroner for Ontario shows a 35% increase in suspected drug-related deaths in Ontario in March, April and May 2020 compared to the monthly average in 2019, with approximately 60 suspected-drug related deaths occurring each week.<sup>5</sup> It is now more evident than ever that urgent action is needed to address the opioid poisoning crisis that is co-occurring with the COVID-19 pandemic.

The patient- and system-level benefits of safer supply initiatives directly support the government's commitment to end hallway health care, reduce wait times, and improve patient interactions within the health care system. Beyond the health sector, safer supply initiatives provide significant benefits, including improved community safety and well-being, and reduced enforcement- and criminal justice-related costs.<sup>6</sup> For these reasons, they have strong support in many Ontario communities.

Therefore, the MDSCNO calls on the provincial government to:

- fund implementation of safer supply initiatives in a coordinated approach with the federal government; and
- support the implementation of safer supply initiatives by adding the required formulations, such as hydromorphone (i.e., 50 milligrams/millilitres and 100 milligrams/millilitres hydromorphone) and diacetylmorphine, to the Ontario Drug Benefit Formulary to enable injectable safer supply initiatives to operate.

The MDSCNO's members are among Ontario's leading experts in drug policy and program development. We represent comprehensive drug strategies in many municipalities throughout Ontario who share a collective interest in making our province safer and healthier for present and future generations.

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<sup>4</sup> Statistics Canada. (2020). *The Daily: Life Tables*. Retrieved from <https://www150.statcan.gc.ca/n1/daily-quotidien/200128/dq200128a-eng.htm>

<sup>5</sup> Office of the Chief Coroner for Ontario. Personal Communication, August 2020

<sup>6</sup> Ontario Agency for Health Protection and Promotion (Public Health Ontario), Leece P, Tenenbaum M. *Evidence Brief: Effectiveness of supervised injectable opioid agonist treatment (siOAT) for opioid use disorder*. Toronto, ON; 2017.

Sincerely,



Adrienne Crowder  
Manager, Guelph Wellington Drug Strategy  
On behalf of the Municipal Drug Strategy  
Coordinators Network of Ontario



Susan Shepherd  
Manager, Toronto Drug Strategy Secretariat  
On behalf of the Municipal Drug Strategy  
Coordinators Network of Ontario

CC:

Premier Doug Ford  
Michael A. Tibollo, Associate Minister of Mental Health and Addictions  
Alliance for Healthier Communities  
Association of Municipalities of Ontario  
Canadian Alliance to End Homelessness  
Canadian Drug Policy Coalition  
Canadian Mental Health Association  
Canadian Nurses Association  
Canadian Public Health Association  
Chiefs of Ontario  
College of Nurses of Ontario  
College of Physicians and Surgeons of Ontario  
Council of Medical Officers of Health  
Federation of Canadian Municipalities  
Ontario Association of Chiefs of Police  
Ontario College of Pharmacists  
Ontario Pharmacists Association  
Ontario Public Health Association  
Public Health Ontario

**About the Municipal Drug Strategy Coordinators Network of Ontario**

Our 65+ members work in diverse health settings across the province, including public health units, community health centres and not-for-profit organizations. Members coordinate multi-sectoral initiatives that aim to prevent and/or reduce the harms of substance use through regionally tailored strategies incorporating prevention, harm reduction, treatment and enforcement-justice initiatives. Learn more at: [www.drugstrategy.ca](http://www.drugstrategy.ca).