

Stewart, April

From: Leah Genge [REDACTED]
Sent: January-14-20 12:38 PM
To: Office, Clerks
Subject: [External Email] Request for presentation at Police Board of Commissioners Meeting Jan 20th, 2020

[This email has been received from an external person or system]

Good morning,

I am writing to request the opportunity to give a presentation at the upcoming Board of Police Commissioners meeting on January 20th, 2020.

I am a Family Physician with expertise and certification in Addiction Medicine. I primarily serve homeless and vulnerably housed people in the HRM through Mobile Outreach Street Health (MOSH), Direction 180, and the Spryfield Medical Centre. The patients I serve have frequent contact with HRP and I believe, following the tragic death of Corey Rogers, this is an opportunity to work together to deliver the best possible care for people who use substances or live with Substance Use Disorders. I would be grateful for your time and openness to collaboration.

I have recently learned the Chief of Police for HRP has requested a budgetary increase, in part so as to hire four new sergeants to supervise the prisoner care facility at headquarters on Gottingen Street. Though I do not dispute the HRP suffers from under-staffing and would benefit from this, I believe there is an opportunity to rethink how we provide service to these individuals in a cost-effective, evidence-based way that maintains public safety and reduces annual "drunk tank" placements.

Though some situations of public intoxication may require an initial response from the police or other first responders, the "drunk tank" need not be the only option for how to ultimately manage these cases. Furthermore, the needs of people with alcohol use disorders (particularly those with chronic, severe illness and/or chronic homelessness) are grossly different from those who use or abuse alcohol recreationally. Contact with first responders, including the HRP, can be an opportunity to connect people to appropriate support and resources in these circumstances.

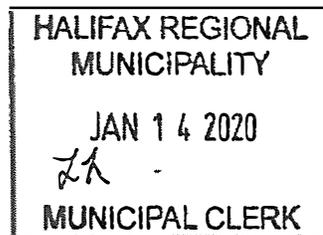
To this effect, I would like to present on Managed Alcohol Programs (MAPs) which are evidence-based, harm reduction, housing first initiatives to improve the care of people living with chronic alcohol use disorder and chronic homelessness. There are currently 23 MAPs across the country which demonstrate effectiveness in reducing contact with police, emergency room visits, and hospital admissions, in addition to improvements in quality of life and reduced alcohol-related harms. I would like to provide an overview of MAP models and argue for their feasibility of implementation in Halifax.

My desired outcome is that the Board of Police Commissioners put forward a motion requesting that a feasibility study be conducted regarding the implementation of a Managed Alcohol Program as an alternative to providing increased funding for police staffing in the prisoner care facility at HRP headquarters.

Many thanks,

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