



## HEALTH OFFICERS COUNCIL OF BRITISH COLUMBIA

*Dr. Marcus Lem, Chair*  
*c/o NI Medical Health Office*  
*355 11<sup>th</sup> St. Courtenay B.C. V9N 1S4*  
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March 9, 2017

Jessica Richardson  
Clerk of the Committee  
Senate Standing Committee on Legal and Constitutional Affairs  
The Senate of Canada  
Chambers Building, 40 Elgin Street, 10th Floor  
Ottawa, Ontario  
K1A 0A4

Re:

Letter of Support for Pivot Legal Society's submission on Bill C-37: An Act to Amend the Controlled Drugs and Substances Act and to make related amendments to other Acts

Dear Ms. Richardson,

On behalf of the Health Officers' Council of British Columbia, I am writing this letter to support the Pivot Legal Society's submission for amendments to the proposed Bill C-37.

The Health Officers' Council of British Columbia is a registered society of British Columbia Public Health physicians. Our membership includes all Medical Health Officers (MHOs) in the province, including the Chief MHOs and VPs Public Health for the Regional Health Authorities. In addition to our Public Health duties, some of our members continue to practice clinically as Family Medicine, Addictions, and Pain Medicine physicians. We advise and advocate for public policies and programs directed to improving the health of the BC population.

We fully support Pivot's recommendations regarding the following:

1. The inclusion of a provision that would empower Provincial Ministers to grant temporary exemptions to emergency Supervised Consumption Services (SCSs) if, in the opinion of the Provincial Minister, such measures are necessary to respond to a localized or regional event posing a significant risk to public health;
2. A second amendment to Bill C-37 that would make the application process far more realistic and reasonable for applicants. Pivot recommends reducing the number of criteria to be addressed in a section 56.1 application for an exemption from five to one, which will streamline the new application process while still including the necessary information for Health Canada to determine



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whether the s. 56 criteria are met. Pivot recommends that applicants be required to submit evidence of the local conditions indicating a need for the site;

3. That the two criteria: (i) the regulatory structure in place to support the site; (ii) the resources available to support the maintenance of the site; should be set out as factors that the government “may consider” when determining whether to grant an exemption. The onus to gather evidence for those criteria would shift from the applicant to the federal government, thereby allowing the federal government to determine the necessity of those factors to the determination of the application. Further, it is Pivot’s submission that the Government of Canada is well positioned to access that information if it is needed;
4. That the following two factors should not be set out in the legislation because they are not relevant to the public health objectives of SCSs: (i) the impact of the site on crime rates; (ii) expressions of community support or opposition.

Public Health physicians in BC have been at the forefront of Harm Reduction policies and services in Canada. We have advocated for and implemented these policies and services because they are necessary: we have seen the cost of stigma and barriers to service in human lives. Recognizing the needs of drug users and allowing them the dignity of our compassion and respect is the first step to reintegrating them into society. The amendments recommended by Pivot will help empower provinces, territories, communities and citizens to better address one of the major Public Health crises of our generation.

Yours sincerely,

Marcus Lem, MD, MHSc, FRCPC  
Chair, Health Officers Council of BC