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Registered Nurses' Association of Ontario
L'Association des infirmières et infirmiers
autorisés de l'Ontario

November 4, 2025

Dear Minister Jones:

cc: Premier Ford

Associate Minister of Mental Health and Addictions, Vijay Thanigasalam
Dr. Kieran Moore, Chief Medical Officer of Health Ontario
Medical Officers of Health, Ontario
Public Health Ontario
Ontario Public Health Association
Public Health Agency of Canada
Association of Local Public Health Agencies

We are writing to demand that the Government of Ontario reverse its decision to force the closure of the Consumption and Treatment Services (CTS) site at the Parkdale Queen West Community Health Centre, and to fully fund its operation.

The Parkdale CTS is a pillar of support in the west end Toronto community. Between March 2020 and May 2025, the CTS saw 18,454 visits, made over 12,000 referrals to outside community services, and reversed 962 overdoses that could have cost someone's life.

While you have indicated that funding pulled from the Parkdale CTS will be redirected to Homelessness and Addiction Recovery Treatment (HART) Hubs — where supervised consumption services as well as needle and syringe programs are both prohibited — the Parkdale CTS provides essential, lifesaving services that cannot be replaced by HART Hubs. Since the government's forced closure of six supervised consumption sites in Toronto under the *Community Care and Recovery Act* (CCRA) and the harmful prohibitions on harm reduction services imposed on HART Hubs, the Parkdale CTS has experienced a 63% increase in individuals accessing its supervised consumption services. The surge in demand for services has, in turn, contributed to the very community safety concerns that the Government of Ontario cites as the justification for terminating the site's funding.

More than 1250 suspected drug-related deaths have been recorded in Ontario since April 2025, when HART Hubs were launched and supervised consumption services were closed.

The Government of Ontario's decision to brutally defund the Parkdale CTS and its broader plan to dismantle evidence-based supervised consumption services across the province will inevitably lead to preventable injuries and deaths. The government's own experts warned that the passage of the CCRA would result in increased emergency department visits, overdoses,

overdose deaths, and other serious health and social harms, including public drug use, while disproportionately harming Indigenous, Black, and low-income people in Ontario. The law, which is currently being challenged in court, has already led to an injunction to prevent further serious health risks and deaths.

In an email to media, the Ontario government claimed that, “Since HART Hubs opened on April 1st, 2025, data from the Chief Coroner has shown a 41 per cent decrease in opioid-related deaths. Calls for overdoses to the Central Ambulance Communication Centre have also decreased by 50 per cent, compared to the same period last year.” It is misleading to suggest HART Hubs have led to a decrease in opioid-related deaths and emergency calls for overdoses. Data shows drug-related deaths started to decrease in Ontario well before HART Hubs were established. For example, in Toronto, overdose deaths peaked in June 2024, followed by almost a full year of steady decline in suspected drug-related deaths before HART Hubs were ever introduced. Additionally, calls to Toronto paramedic services for non-fatal overdoses started to decline more than 18 months before the HART Hubs program. **Importantly, since supervised consumption services have closed, paramedics calls have again increased.**

In August 2025, the Canadian Public Health Association criticized the Government of Ontario for misleading the public about crime rates near Ottawa’s Somerset West supervised consumption site to justify its closure. According to recent reports, nearly half of Ontario’s HART Hubs, including those in northeastern Ontario, have not even opened and those that are operational mostly offer pre-existing services with the exception of supervised consumption services or needle and syringe programs.

Policy decisions based on deceptive data are unacceptable. The people of Ontario have a right to accurate information — not a series of misleading statements that minimize the value of lifesaving care.

A decrease in overdose-related deaths cannot be attributed to one single intervention given the unpredictability of the unregulated drug supply. However, the evidence is clear that, since March 2020, Ontario’s supervised consumption services have reversed 22,000 overdoses that could have been fatal. Supervised consumption services are one vital component of a comprehensive response to the unregulated toxic drug crisis. They cannot be abandoned for political expediency.

Minister Jones, we urge you to listen to your own experts on the need and value of supervised consumption services. Rather than dismantling access to supervised consumption services, and harm reduction more broadly, this government should follow the 2024 recommendations made by its Chief Medical Officer of Health calling for the expansion of CTS in Ontario. We not only demand that the Parkdale Queen West Community Health Centre’s CTS remain open, and that the *Community Care and Recovery Act* be repealed, but also that supervised consumption

services across the province are properly funded and supported to reflect the enormous scale of need.

Sincerely,

Canadian Public Health Association

HIV Legal Network

Registered Nurses Association of Ontario