



LONDON POLICE SERVICE

REPORT TO THE LONDON POLICE SERVICE BOARD

RETURN TO AGENDA

BOARD MEETING DATE: February 19, 2026

BOARD REPORT #: 2602EA03

MEETING: Open

CSPA SECTION: N/A

TO: Chair and Members of the London Police Service Board

FROM: Scott Guilford, Deputy Chief

SUBJECT: Open Air Substance Use Strategy

PURPOSE: Update / Information Purposes Only

RECOMMENDATION:

THAT the London Police Service Board receive this report for its information.

SUMMARY:

In April 2025, the London Police Service (LPS) launched the Open-Air Substance Use Strategy to respond to persistent community concerns regarding open substance use in public spaces. The strategy prioritizes safety for all community members through a coordinated approach centred on engagement, referrals to supports, and targeted enforcement when necessary.

This report provides the third update to the Board, including operational statistics and community feedback for the reporting period of August 26, 2025, to January 19, 2026, as well as cumulative totals since April 8, 2025.

DISCUSSION:

Definitions (for clarity): "Calls for service" reflect police responses generated through 911, the foot patrol line, and proactive member-initiated activity. "Police reports filed" reflect occurrences requiring formal documentation. "Occurrences with a seizure" reflect events where drugs and/or paraphernalia were seized (an occurrence may include multiple items).

Open Air Substance Use Strategy Statistics

The Evidence-Based Policing Unit (EBPU) uses quantitative analysis to monitor recurring interactions, changing incident locations, and referral outcomes. A follow up to the baseline public survey was completed from November 2025 to early January 2026 to collect community feedback. The strategy moved into "Phase 2" on October 14, 2025, which involves targeted enforcement and coordinated service delivery for high acuity individuals.

Reporting Period Statistics (August 26, 2025 – January 19, 2026)

(numbers may change due to auditing, delays in clearance, quality assurance processes, etc.)

The following statistics reflect the progress during this reporting period of the Open-Air Substance Use Strategy and contain data for the 21-week period from August 26, 2025, to January 19, 2026.

- There were 2,090 calls for service and 594 police reports filed.
- 642 referrals were offered.
- 41 criminal charges were laid.
- There were 561 occurrences where a seizure took place.

Overall Statistics (April 8, 2025, to January 19, 2026)

These statistics represent the overall progress of the Open-Air Substance Use Strategy and provide a comprehensive overview of the efforts undertaken by the officers assigned to this initiative.

- There were 5,011 calls for service and 1,952 police reports filed.
- Most calls for service were classified as trespassing (54%) and drug-related activities in progress (39%). The remainder were proactive or informational interactions (7%). There has been a large increase in proactive calls as officers were re-engaging businesses to request participation in the survey.
- A large percentage of calls for service were initiated by an LPS member (70%), followed next by direct calls to the foot patrol line (19%). The remaining calls were received through 911 or other citizen generated channels.
- Over half of the calls for service were cleared through compliant interactions (55%), an additional 28% were offered referrals. Remaining calls were non-compliant (4%), no further action/cancelled/pending completion (13%).
- Over 1,027 individuals have been interacted with during these calls for service, more than half (57%) have had multiple interactions during this strategy. The five individuals with the highest frequency of interactions accounted for a combined total of 320 calls for service.

Referrals:

Of the approximately 1,406 referrals offered so far, the majority have been declined.

- 63% of referrals were not accepted.
- 18% were accepted.
- 13% had an unknown outcome.
- 1% were declined by the agency (e.g., at capacity, individual banned etc.,).

Of the referrals offered the largest referral agency was London Cares (51%) followed by Ark Aid Mission (37%). The most accepted referral was to Ark Aid Mission, with 36% of accepted referrals.

Enforcement:

Current statistics indicate that the strategy remains centred on engagement and referrals to community resources. Since Phase 2 began on October 14, 2025, the proportion of calls for service resulting in charges has increased slightly compared to the pre-Phase 2 period (from approximately 0.6% to 1.1%). *(Percentages are calculated as charges laid divided by calls for service in the respective periods.)*

- Since the start of the strategy there have been 75 charges laid stemming from 37 occurrences.
- The most frequent charge was possession of a Schedule I Substance under Section 4(1) of the *Controlled Drugs and Substances Act* (33 charges, 44% of total).

- The second most common charge was fail to comply with a release order under Section 145(5)(a) of the *Criminal Code of Canada* (9 charges, 12% of total).

Seizures:

Since the beginning of the strategy until the end of this reporting period, there have been 1,851 occurrences in which a seizure took place, which may include multiple items per occurrence (e.g., a piece of paraphernalia and trace amounts of drugs, multiple pieces of paraphernalia, or multiple drugs).

- Officers have seized over 3,700 items of drug paraphernalia in more than 1,800 occurrences. Most commonly seized items were pipes (over 2,100) and tin foil (more than 1,100).
- There have been over 1,600 occurrences where drugs have been seized. Seizures are most often (>85% of the time), trace residue of a substance.
- Suspected fentanyl is the most frequently seized substance, comprising nearly 90% of all reported seizures. Of these suspected fentanyl seizures, more than 85% involve trace residue of the substance.

Community Impact

After six months of implementing the strategy, open surveys were conducted to solicit community feedback regarding this project. An examination of the results indicated the following findings:

- Survey participation increased in wave 2 (2,253 responses) compared to wave 1 (519 responses). The proportion of business owners, employees, residents, and visitors remained consistent across both waves.
- Around 9% of respondents in both waves were business owners. All business-focused questions showed more favourable responses when comparing wave 1 to wave 2, indicating a more positive outlook among business owners. For example:
 - Using a scale from 1 (strongly disagree) to 5 (strongly agree), the average agreement with the statement “I am concerned about my business due to its location” decreased significantly from 4.40 in wave 1 to 3.51 in wave 2.
 - On the same scale, the average level of agreement with the statement, “My employees have expressed safety concerns relating to the location of the business,” decreased significantly from 4.40 in wave 1 to 3.37 in wave 2.
- For questions asked to all respondents, most survey results were consistent between the two waves, but two positive changes were observed:
 - Using a scale from 1 (strongly disagree) to 5 (strongly agree), the mean level of agreement with the statement “I am concerned with vandalism in the Downtown, Midtown, and Old East Village areas.” significantly decreased from 4.47 in wave 1 to 4.31 in wave 2.
 - On a scale from 1 (very dissatisfied) to 5 (very satisfied), average satisfaction with the London Police presence in the Downtown, Midtown and Old East Village area significantly increased from 2.44 in wave 1 to 2.60 in wave 2.

- Responses regarding the most significant issue affecting downtown remained generally consistent across survey waves, with the exception of “people experiencing homelessness” Notably, Wave 2 participants were significantly more likely to identify people experiencing homelessness as the primary concern.
- More in-depth analysis has revealed that wave 2 respondents differ significantly on many questions based on if they are business owners, employees, residents, or visitors of the area, with visitors reporting more negative perceptions and business owners having the most positive.
- Respondents, who answered that they were business owners and are aware of the open-air substance use strategy, rated their satisfaction higher than employees, residents, or visitors.

CONCLUSION:

These statistics reflect a sustained and proactive police presence, marked by measurable actions that respond directly to community concerns. Although enforcement resources remain accessible, the data consistently show that such measures are infrequently employed, with primary emphasis placed on support and community engagement initiatives.

PREPARED BY: Katherine Dann, Inspector, Corporate Support and Continuous Improvement

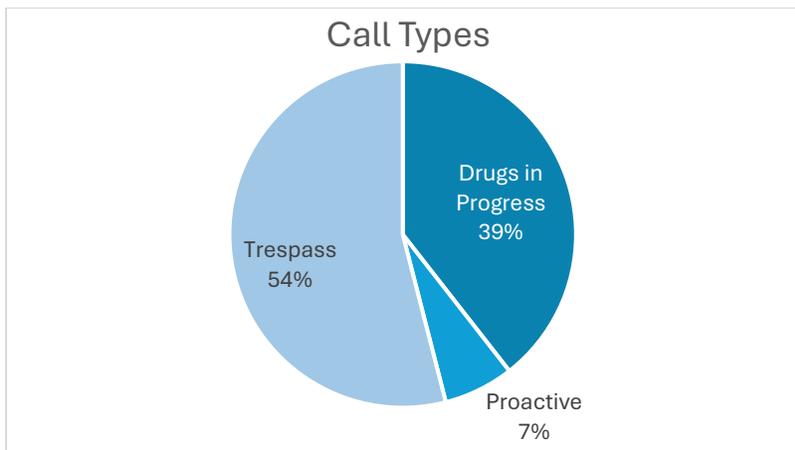
Attachment(s): Appendix A - Statistic Charts

Appendix A:

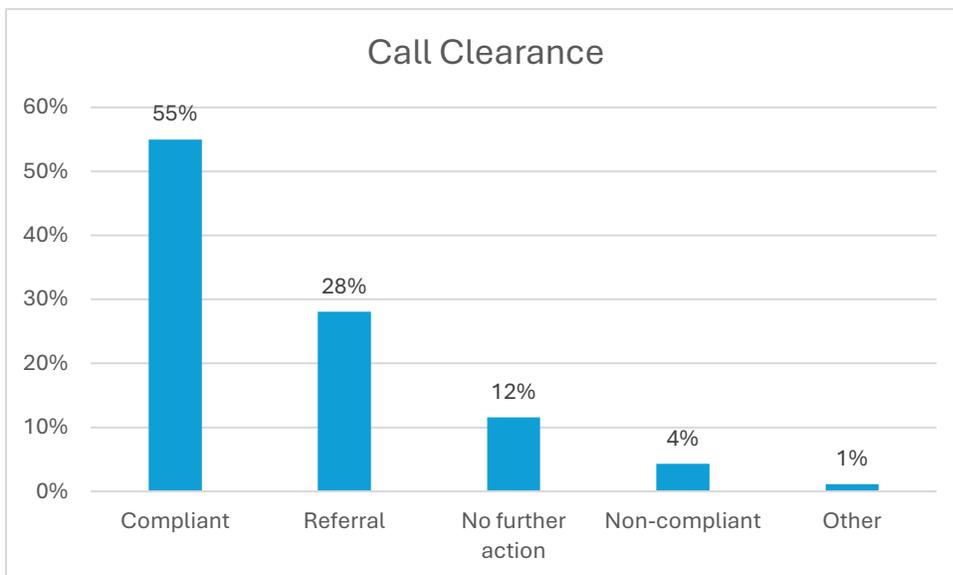
Summary of overall statistics (April 8, 2025 to January 19, 2026)



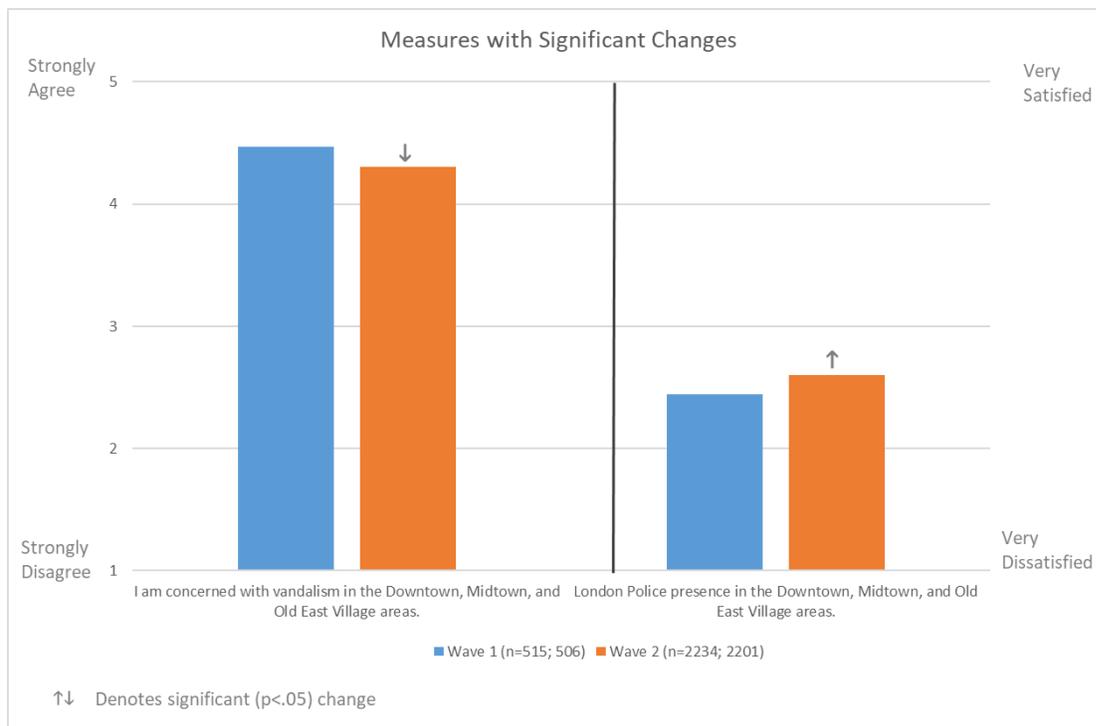
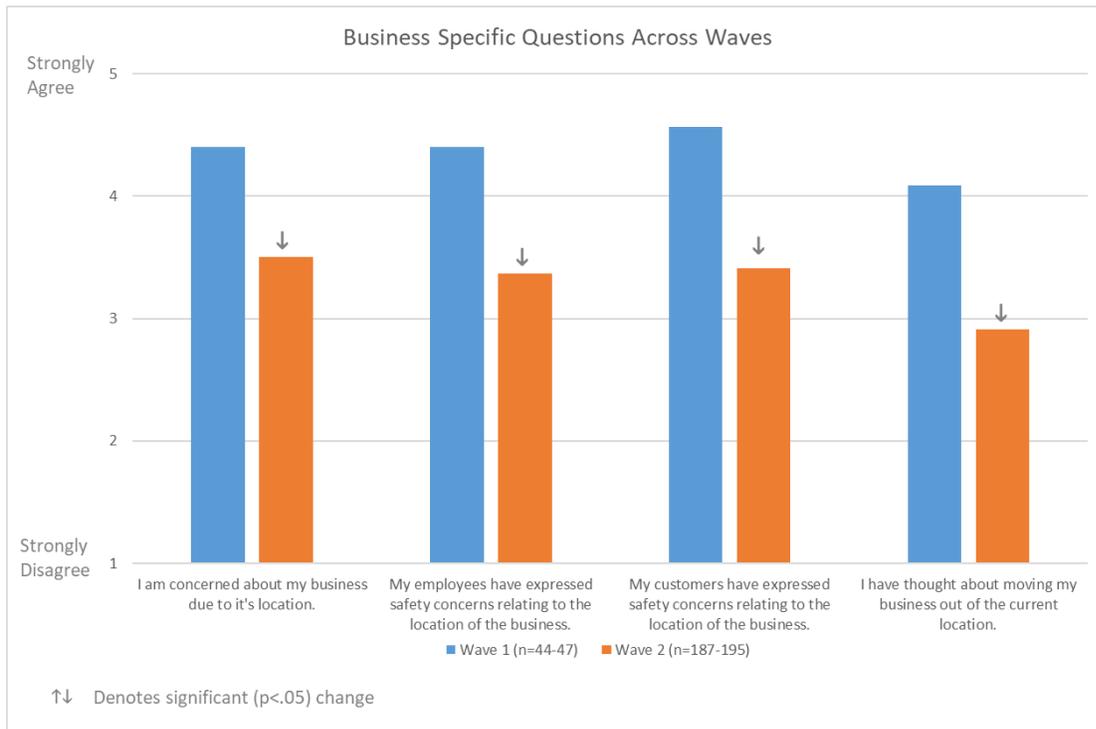
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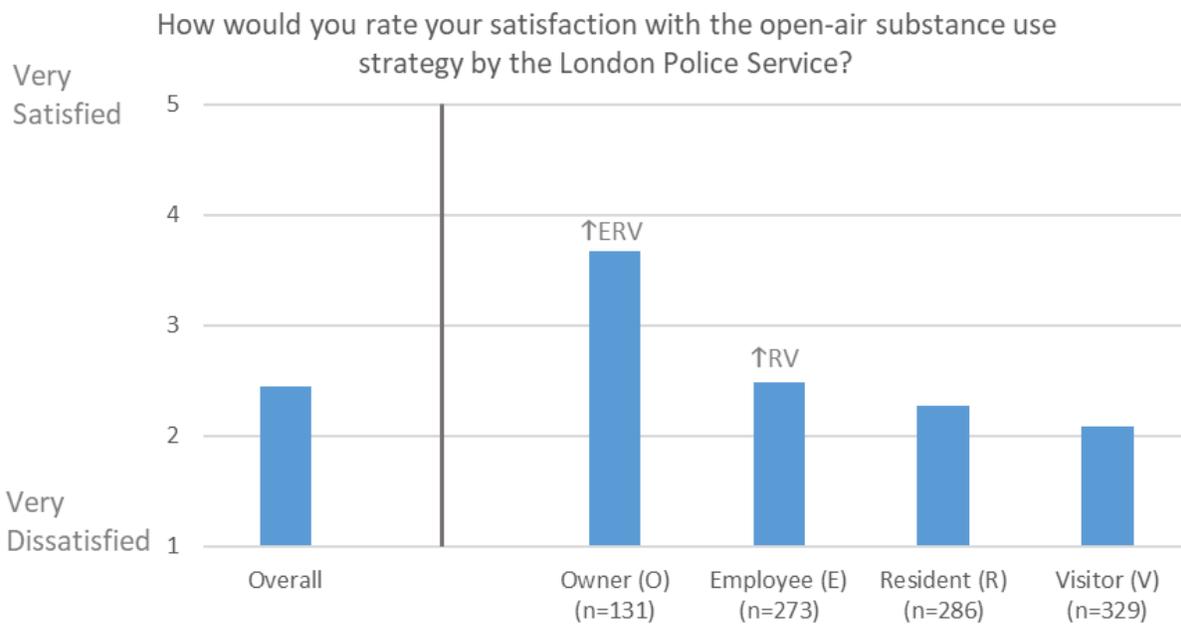
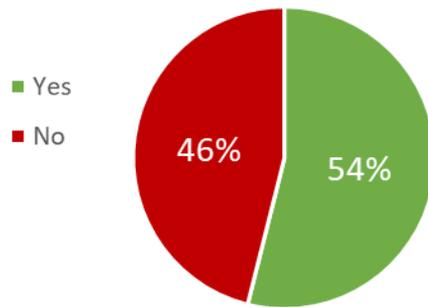
Call Clearance:



Statistically significant survey results:



Are you aware of London Police Services' open-air substance use strategy? (Wave 2 only; n=1,979)



↑ Denotes significant (p<.05) pairwise difference and letter denotes comparison group.



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BOARD MEETING DATE: February 19, 2026

BOARD REPORT #: 2602EA04

MEETING: Open

CSPA SECTION: N/A

TO: Chair and Members of the London Police Service Board

FROM: Scott Guilford, Deputy Chief

SUBJECT: Nurse Police Response Teams

PURPOSE: Update / Information Purposes Only

RECOMMENDATION:

THAT the London Police Service Board receive this report for its information.

FINANCIAL IMPLICATIONS:

There is no additional financial impact for this initiative at this time. London Health Sciences Centre (LHSC) is funding the nursing component until March 31, 2026. Future funding and/or continuation beyond March 31, 2026 will be assessed and reported to the Board as required.

SUMMARY:

The London Police Service (LPS), in collaboration with London Health Sciences Centre (LHSC), established the Nurse Police Response Team (NPRT). Registered nurses assigned to the NPRT provide medical assessment and support within their scope of practice, aligned with the clinical circumstances encountered during engagements with individuals in the community.

DISCUSSION:

Deployment:

Launched in July 2025, this initiative pairs registered nurses with officers from the Community Foot Patrol Section (CFPS). Teams patrol primarily in the Downtown, Midtown, and Old East Village areas. As of August 15, 2025, NPRTs operate seven days per week from 11:00 a.m. to 11:00 p.m.

Data to date: (July 18, 2025, to January 19, 2026)

During this time period data was analyzed from 110 shifts that were worked. The NPRTs attended 455 distinct calls¹. The majority of calls were member generated (69%), followed by calls to 911 (19%), the CFPS hotline (11%) and switchboard/non-emergency line (1%).

Just under half of the calls (197 or 43%) were associated with the Open-Air Substance Use Strategy.

¹ Calls refer to NPRT – attended events documented in police records management system/ computer automated dispatch.

- 75 calls were related to open-air substance use
- 121 calls were related to trespassing
- 1 call involved proactive information sharing

Of the Open-Air Substance Use Strategy calls (n=197), 50% (n=98) were resolved through compliant interactions with no referral offered. Referrals were not accepted in 22% (n=43) of calls and were accepted in 6% (n=12). A total of 7% (n=13) resulted in non-compliant interactions, and 5% (n=9) had referrals offered with an unknown outcome. The remaining calls were cleared as no further action or cancelled.

The next most common call type was "medical assist", accounting for 115 calls (25% of total). This category was used when nurses provided medical assistance.

- Member-generated calls comprised 83% (n=96) of medical assists, meaning that the teams proactively came upon these individuals in need and offered medical assistance; 911 dispatches accounted for 16% (n=18), and only one call came via CFPS hotline (1%).
- Support offered during medical assists was often accepted, with 89% (n=102) resulting in accepted referrals. Nine calls (8%) declined referrals, and four instances where medical assistance was offered were cleared as no further action where the nurse did not provide medical assistance, potentially transferring the individual to paramedics.
- Wound care remains the predominant medical assistance provided (65%; n=75), with an acceptance rate of 99% (n=74).

Seventeen calls (4%) fell under "assist public," used when nurses gave general advice rather than medical care. 94% of these calls were cleared as accepted referrals. The remaining one case involved online reporting advice, for which acceptance was undetermined.

Assistance included nurse guidance, bus tickets, hand warmers, and referrals to agencies such as London Cares and Ark Aid Mission.

NPRTs also responded to several other call types, such as wanted offenders, thefts, weapon investigations, and check welfare complaints.

CONCLUSION:

The data to date indicates the NPRT initiative is meeting community needs through proactive engagement and supportive interventions. A significant proportion of calls were resolved through compliant interactions and/or accepted referrals for medical care and community supports, facilitating connections to appropriate resources. This initiative supports immediate health and safety needs while contributing to longer-term community well-being through coordinated, compassionate service delivery.

PREPARED BY: Katherine Dann, Inspector - Corporate Support and Continuous Improvement