Guidance for Supportive Housing Providers, Homeless Shelter Providers and Regional Health Authorities on Overdose Prevention and Response

February 15, 2017

Purpose

This document provides general guidance to providers of supportive housing and homeless shelters to support working with regional health authorities on measures they may implement to reduce the risk of overdoses and deaths in these premises.

Context

On April 14, 2016, the Provincial Health Officer of British Columbia declared a public health emergency as BC was experiencing an unprecedented number of drug overdoses and deaths, particularly linked to illegally produced fentanyl and similar products. Since then much has been done to address this situation, and more is being planned and implemented.

Types of Overdose Prevention and Response Activities

1. Overdose prevention and response measures in supportive housing and homeless shelters

   Overdose prevention and response measures for tenants in supportive housing and clients of homeless shelters prevent overdose-related deaths by increasing the likelihood that overdoses are recognized and responded to, and may involve:

   • having naloxone kits readily available, with staff and tenants/clients trained to use them and provide other life-saving aid, including calling 911;

   • establishing overdose prevention and response protocols which include such measures as
     o checking on tenants/clients who may be at risk of a drug overdose
     o supporting tenants/clients who are willing to be trained and equipped in overdose recognition and response and potentially identified (e.g. having a sign on their door); and
     o allocating a space which may be monitored where tenants/clients could use drugs.
2. **Overdose Prevention Services**

On December 9, 2016, the Minister of Health issued an Order under the *Emergency Health Services Act* and the *Health Authorities Act* directing that British Columbia Emergency Health Services and the regional health authorities provide Overdose Prevention Services as ancillary health services in locations of high risk and on the advice of the Provincial Health Officer (see Appendix). This Order is to support and supplement existing emergency health services e.g. overdose recognition, naloxone administration, and 911 response, by providing outreach emergency health services in areas where people are dying from, or suffering significant adverse effects from drug overdoses. These services increase the likelihood that people who suffer from a drug overdose will be recognized, treated, and 911 will be called to prevent death or serious injury; and that they will be connected to support services.

The Order requires BC Emergency Health Services and regional health authorities to provide Overdose Prevention Services. It is the responsibility of each health authority to assess the need for the services in their region. These services may be provided directly by the health authorities, or by other agencies in collaboration with the health authorities.

The Minister’s Order does not apply to measures put in place in supportive housing and homeless shelters to reduce the risk of death and disability of tenants/clients in those settings, unless those measures are operated by or in partnership with a regional health authority.

Any person or organization offering services to the public related to reducing overdose related death or disability, who are not doing so in collaboration with a health authority, are advised to consult with their health authority for advice with respect to the provision of the services.

**Overdose Prevention Services – What They Are**

- Overdose Prevention Services are ancillary health services provided in response to the public health emergency. These services are provided in selected locations for the purpose of monitoring people who have used illegal drugs for signs of an overdose, intervening to maintain consciousness, and providing rapid intervention to prevent catastrophic brain injury and death.
- The benefits of this approach are three-fold: 1) immediate intervention decreases the risk of brain injury and death; 2) relationship building is encouraged, isolation reduced; and connections to support services may be made and 3) putting these services in places where they are most needed relieves the pressure on ambulance services, emergency departments and first responders.
**Overdose Prevention Services – What They Are Not**

- Overdose Prevention Services are not Supervised Consumption Sites. Overdose Prevention Services make limited but appropriate services available where they are needed by having trained individuals on hand to intervene with naloxone and breathing support when an overdose occurs.

3. **Supervised Consumption Sites**

Supervised Consumption Sites are locations specified in the terms and conditions of an exemption, granted by the federal Minister of Health under the *Controlled Drugs and Substances Act* that allow people to engage in certain activities in relation to illegal substances within a supervised and controlled environment. The exemption allows any person or class of person described in the exemption to possess controlled substances, which would normally be illegal, within the site.

Attached are guidelines and resources for supportive housing and homeless shelter providers with respect to overdose prevention, recognition and response.

Thank you for your attention and assistance in helping deal with this emergency.

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