Interior Health

AH5000 – HARM REDUCTION – PEOPLE WHO USE SUBSTANCES POLICY

1.0   PURPOSE

Ensuring the dignity and safety for people who use substances can be achieved by taking a harm reduction approach to care which ensures and upholds accessible, equitable, person-centered, stigma free, compassionate and evidence-based services that are respectful of individual rights and dignity.

The purpose of this policy is to:
- Provide organizational guidance regarding harm reduction as it relates to engaging with and caring for diverse people who use substances;
- Promote an understanding among Interior Health (IH) staff of the principles of harm reduction in service provision;
- Support the integration of these principles in all clinical policies, procedures, and guidelines in IH; and
- Guide care providers to support, educate and provide services to clients and families/partners-in-care using a harm reduction approach.

2.0   DEFINITIONS

TERM	DEFINITION
Client	Anyone receiving care or services from IH and includes patients and those who reside in the Interior region.
Families/Partners-In-Care	Refer to persons who are related in any way (biologically, legally, or emotionally), including immediate relatives and other individuals in the persons' support network. Families/partners-in-care include a person's extended family, partners, friends, advocates, guardians, and other individuals. The person defines the makeup of their family/partner-in-care, and has the right to include or not include family members/partners-in-care in their care, and redefine the makeup of their family over time.
Harm	Negative or adverse effects on the physical, mental, social, emotional or spiritual health and/or wellness of an individual, family or community. Harms may impact multiple levels: individual (e.g. health, social, legal and/or economic consequences), community (e.g. lack of community cohesiveness, safety and trust), and societal (e.g. crime, disorder, poverty, etc.).
Harm Reduction	Policies, programs and practices that seek to reduce the adverse health, social and economic harms associated with the use of substances. Harm reduction is a pragmatic response that focuses on keeping people safe and minimizing death, disease and injury associated with risky behaviours, while recognizing that the behaviour may continue despite the risks. Harm reduction is a public health framework that is grounded in justice and human rights – it focuses on positive change and on working with individuals without judgment, coercion, discrimination, or requiring that they abstain as a precondition of support.
People Who Use Substances (PWUS)	Any individual who uses a substance or a prescription medication for non-medical purposes.

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People with Lived and/or Living Experience (PWLLE)	Respectfully refers to individuals with previous and/or ongoing experience around substances.
Racism or Racist	The belief that a group of people are inferior based on the colour of their skin, their culture and/or their beliefs. It leads to discriminatory behaviours and policies that oppress, ignore or treat racialized groups as 'less than' non-racialized groups.
Safety	The absence of harm and/or threat to Staff or Client mental, spiritual, physical, or emotional well-being. Safety includes the experiences of psychological and Cultural Safety.
Staff	Staff, physicians, medical staff, volunteers, students, contractors and other persons working or acting on behalf of IH.
Stigma	Refers to negative attitudes (prejudice) and negative behaviour (discrimination) toward people with substance use and mental health problems.
Trauma Informed Practice	Recognition that people who face sexual health, mental health or substance use issues experience high rates of trauma and that effective health services must enact the core trauma-informed principles of: trauma awareness, safety and trustworthiness, choice, collaboration, connection, strengths-based approaches and skill building.

3.0   POLICY

IH is committed to ensuring that all people will be treated with dignity and respect in a non-judgmental and non-stigmatizing manner through the following principles:

3.1   CORE PRINCIPLES

- IH endorses harm reduction as an evidence-based approach for care of all individuals who access healthcare services provided by IH, and to treat clients and families/partners-in-care with dignity, compassion and in a non-judgemental manner.

- Recognition that among people who use substances (PWUS), abstinence may not always be the goal, that recovery should be self-defined and that the commitment to permanent or temporary (while in care) abstinence is not a requirement for receiving care or treatment. It is recognized that some clients may continue to use substances while accessing IH services. Services will not be limited as a result of ongoing substance use.

- Recognition that there exists an intersection between the social determinants of health, harm reduction, trauma-informed practice, Aboriginal Cultural Safety and Humility, Diversity, and Anti-racism and that these equity-oriented approaches should be incorporated into a harm reduction approach.

- Pragmatic, person-centred care for PWUS will be optimized to recognize and consider the underlying source of harm throughout the course of the individuals' interactions with IH.

- All IH staff and physicians will be aware of and avoid stigmatizing and stereotyping language, attitudes and behaviours.

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4.0 PROCEDURES

This policy applies to all IH staff and physicians.

4.1 ORGANIZATIONAL HARM REDUCTION APPROACH

4.1.1 IH will take steps to support health services to be provided using a harm reduction approach and in a manner that takes into consideration the needs of the client including:

- Supporting staff to participate in professional development opportunities that promote an understanding of harm reduction, including education, resources, and/or community engagement, based on availability and applicability.

- Consistently applying this policy across the organization, including using this policy as a guiding document to develop new IH Policies and procedures, and review and revise existing IH Policies and procedures.

- Reviewing all complaints about staff compliance with this policy as per its normal investigation process which may include other IH policies, medical staff bylaws and rules, or applicable legislation.

4.1.2 Staff are responsible for:

- Taking relevant education to enhance their understanding of harm reduction, the impact of stigma and the importance of their role when working with PWUS.

- Communicating opportunities to enhance the understanding of harm reduction within their team(s) to managers or supervisors.

- Modelling the behaviours and actions that are consistent with a harm reduction approach including, but not limited to, respect, inclusiveness, self-reflection and self-awareness, and non-judgemental behaviour.

- Reporting all work-related breaches of this policy to managers or supervisors as per AH0100 Abuse Free Environment for Clients policy.

4.2 PROVIDING HEALTH AND WELLNESS SERVICES USING A HARM REDUCTION APPROACH

4.2.1 Clients and families/partners-in-care receiving services from IH can expect staff to provide dignified, compassionate and non-judgmental care, regardless of substance use.

Staff are responsible for:

- Knowing what harm reduction service expectations are, including educational requirements.

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- Working with clients and families/partners in care without judgment, coercion, discrimination, or requiring that clients abstain as a precondition of support unless otherwise clinically indicated.

- Implementing and/or following policies and procedures related to harm reduction.

- Addressing personal knowledge and harm reduction gaps by attending ongoing education and learning opportunities that facilitate an applied knowledge of harm reduction in their work.

- Behaving or interacting with clients in respectful ways and, where safe to do so, challenging harmful practices and interactions of others, including such things as stigma, stereotyping, discrimination, or other demeaning and harmful commentary about PWUS.

IH Managers and those with direct reports are responsible for:

- Supporting direct reports to participate in professional development opportunities that promote understanding and use of harm reduction principles in client care.

- Providing clear guidelines to direct reports and access to resources that support learning and application of harm reduction principles in client care.

- Supporting a safe environment free of retaliation for staff to report breaches to this policy and being responsive to these reports as per AH0100 Abuse Free Environment for Clients Policy and other related policies.

4.2.2   IH will support its physical environments including, but not limited to, acute sites, community health centres, and long-term care sites to be accessible and meet the needs of PWUS by:

- Supporting all IH owned, operated and contracted facilities to create safe, stigma-free spaces that align with harm reduction principles.

- Providing access to tools, resources, and processes to support staff to implement continuous quality improvement with a goal of creating inclusive physical environments for all clients, including PWUS.

5.0   RESOURCES

- Interior Health Harm Reduction Toolkit (including Policy Implementation Resources)

6.0   REFERENCES

BC Harm Reduction Strategies and Services, "BC Harm Reduction Strategies and Services Policy and Guidelines," December 2014. [Online]. Available: http://www.bccdc.ca/resource-

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RELATED POLICIES

- AD0200 – Aboriginal Cultural Safety & Humility

- AH0100 – Abuse-Free Environment for Clients

- AU0100 – Standards of Conduct for Interior Health Employees

- AU0200 – Substance Use Disorder

- AU1000 – Workplace Environment

- AU2100 – Diversity

- AU2200 – Anti-Racism Policy

- LTCH0100 – Purchase, Service and Consumption of Liquor and Cannabis in Long-Term Care Facilities

- LTCH0110 – Residents' Own Alcohol or Non-Medical Cannabis: Storage, Service and Consumption of

- LTCL0700 – Resident's Bill of Rights

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- MHE0100 – Community Mental Health & Substance Use Documentation Standard

- MHL0100 – Caution Alert

- PHK0200 – High Alert Medications

- PHK0600 – Controlled Substances

- PHK0700 – Patient's Own Medication and Natural Health Products in Acute Care

- VB1000 – Volunteer Resignation and Dismissal Procedures