

Interior Health Criteria for Overdose Prevention Sites and Services

Overdose Prevention Services are a key component of Interior Health's overdose response strategy, which also includes overdose prevention education, naloxone distribution, linkages to Mental Health & Substance use services (counselling, day treatment, etc.), opioid agonist treatment (OAT), harm reduction supplies and services and supervised consumption services (SCS).

Opportunity for enhanced overdose prevention services was initiated by the BC Minister of Health in Dec. 2016 due to increasing mortality from illicit drug overdoses. Within the [ministerial order](#), these services are defined as, *"for the purpose of monitoring persons who are at risk of overdose, and providing rapid intervention as and when necessary, as ancillary health services, in any place there is a need for these services, as determined by the level of overdose related morbidity and mortality."* Specifically, locations which provide a space for monitored use of substances are referred to as Overdose Prevention Sites (OPS).

This document provides criteria for potential OPS located within the Interior Health region. You are encouraged to connect regularly with your local Harm Reduction Program leads and/or Mental Health and Substance Use staff.

Core Services

All agencies providing service to people who use substances (PWUS) are encouraged and supported to provide basic overdose prevention services that are delivered through *welcoming, safe and supportive* environments.). They embrace a harm reduction philosophy and should be providing, at minimum, the following core services:

- Overdose prevention education
- Take Home Naloxone training and distribution for people who are likely to experience or witness an overdose
- Capacity to respond to overdose where necessary, including proper staff training, policies and procedures, including registration with the [BCCDC Facility Overdose Response Box Program](#)
- Distribution of all harm reduction supplies
- Safe disposal of harm reduction supplies, and recovery of any inappropriately discarded supplies
- Referrals to substance use and other health and social services

Additionally, and specific to the Ministerial Order, there may be a need for more advanced overdose prevention services such as drug checking or an OPS service.



In order to have your agency provide either consumption or drug checking there is an expectation that the local operator work with Interior Health to develop best practices and ensure the safety of people using the service and staff.

When to consider an OPS?

There are three types of service delivery models for OPS which agencies can consider:

Fixed Site Locations: these services are regularly staffed and accessible by PWUS to provide monitoring of use substances and for intervening in the event of an overdose. They typically have dedicated staff on-site at all times for the operations of the OPS.

Episodic OPS Services (eOPS): In communities where human resource and space constraints may not be sufficient to offer continuous, fixed-site overdose prevention services with dedicated staff, eOPS can be a unique alternative. Easily facilitated in a number of community based and outreach settings this protocol offers witnessed consumption as part of the continuum of services offered by that agency. It is dependent on staff, not on location.

Housing OPS: Many supportive housing and shelter locations facilitate the option for OPS within their buildings. This provides a monitored space in which residents of the housing facility are able to access to ensure a timely response in the event of an overdose.

Data Collection

Interior Health is required to submit monthly reports to the Ministry of Mental Health & Addictions in relation to the ongoing overdose response.

To facilitate this, sites designated as an OPS for drug checking and/or witnessed consumption must participate in enhanced data collection and submit related forms to Interior Health on a weekly basis. Data tracking forms will be provided to these locations as needed.

How to Become an Overdose Prevention Site

Agencies interested in becoming an Overdose Prevention Site should connect with Interior Health local Mental Health & Substance use staff or Harm Reduction Program and provide the following:

- History of providing harm reduction based services
- Current involvement in overdose response work
- How many overdoses your agency has responded to, if any
- What overdose recognition and response policies and procedures your agency has in place
- What training and education your agency has in place to support the related skills and knowledge needed for staff working in an OPS, including consideration for staff resiliency and debriefing

All sites interested in becoming Overdose Prevention Sites should review the available resources listed below in preparation:

Interior Health Guide to Overdose Prevention Services

[BC Overdose Prevention Services Guide Jan2019 .pdf \(bccdc.ca\)](#)

[Episodic Overdose Prevention Service Protocol](#)

[Interior Health Overdose Prevention Sites Manual](#)

[BCCDC Opioid Overdose Response Toolkit \(2020\)](#)

[Provincial Overdose Response, Government of BC](#)

[Housing Overdose Prevention Site Manual 2018, VCH](#)

[Facility Overdose Response Box \(FORB\) Program](#)