



February 27, 2009

ATTN: Medical Health Officers and Branch Offices
Public Health Nursing Administrators and Assistant Administrators
Holders of Communicable Disease Control Manuals

**Re: Revisions to the Communicable Disease Control Manual, Chapter 3-
Infection Control**

**Please note the following changes to the Communicable Disease Control
Manual, Chapter 3- Infection Control, Harm Reduction Strategies and Services
Policy and Guidelines**

**With approval from Communicable Disease Policy Committee the name has
changed from BC Harm Reduction Supply Services Policy and Guidelines to
BC Harm Reduction Strategies and Services Policy and Guidelines**

Throughout the document:

- Reference to '**exchange**' has been changed to '**distribution**'.
- '**Syringes**' encompasses **needles and/or syringes**; a footnote has been added to the document to clarify this.

Page 1, Section 1.0 "Harm Reduction Definition"

- Added "to make informed decisions" at the end of the definition.

Page 1, Section 2.0 "Scope"

- This new section was added. It states that "These guidelines support harm reduction strategies and services pertaining to problematic substance use and sexual health."

Administrative Circular 2009:05



Page 1, Section 3.0 “Policy Statement”

- “Harm reduction is an integral component of the prevention, treatment and care continuum” was added to the first paragraph of the policy statement.
- “Harm reduction supply and distribution programs (HRSDP) also increase engagement of vulnerable and marginalized populations into the health and social service system to reduce transmission of other communicable diseases such as sexually transmitted infections, Tuberculosis and Pneumococcal infections and support other concurrent mental health conditions and/or addictions such as alcohol dependency” was added to the last paragraph of the policy statement.

Page 2, Section 4.0 “Goals of BC Harm Reduction Strategies and Services (HRSS) Policy”

- Added step 4) “Improve access to HRSDPs for all British Columbians to empower them to reduce harms associated with problematic substance use and unsafe sex.”

Page 3, Section 5.0 “Monitoring Framework”

- The information in the table was updated.
- Added Goal 4: “Improve access to HRSDPs for all British Columbians to empower those to reduce harms associated with problematic substance use” to the table.



Goal 1: Reduce incidence of drug-related health and social harms, including transmission of blood-borne pathogens	
Indicators	Data Sources
<ul style="list-style-type: none"> ▪ Health Authorities report implementation of best practice strategies and services ▪ Number and rate of new cases of HIV and HCV among people who use drugs ▪ Persons prescribed methadone ▪ Number of illegal opioid/stimulant-induced deaths and PYLL from such deaths. 	<ul style="list-style-type: none"> ▪ Ministry of Health Services <ul style="list-style-type: none"> ○ Vital Stats; Medical Services Plan ▪ Health Authorities ▪ BC Centre for Disease Control ▪ Health Canada Enhanced Surveillance (BCCDC & Vancouver Coastal Health) ▪ Centre for Addictions Research BC ▪ Centre for Applied Research in Mental Health and Addictions ▪ BC Centre for Excellence HIV/AIDS ▪ BC Coroners office
Goal 2: Promote and facilitate referral to primary health care and addiction/mental health services	
Indicators	Data Sources
<ul style="list-style-type: none"> ▪ Harm reduction strategies and service agencies have in place referral mechanisms to treat primary health care and addiction/mental health ▪ Number of clients accessing HRSDPs that receive a health and social service referral 	<ul style="list-style-type: none"> ▪ Health Authorities
Goal 3: Increase public awareness of harm reduction principles, policies and programs	
Indicators	Data Sources
<ul style="list-style-type: none"> ▪ Health Authorities and community partners are aware of harm reduction philosophy as it pertains to illegal drugs and legal drugs such as alcohol ▪ Health Authorities have communications strategies developed and implemented to disseminate accurate information to the public. 	<ul style="list-style-type: none"> ▪ Health Authorities ▪ BC Centre for Disease Control ▪ Ministry of Health Services and Healthy Living and Sport
Goal 4: Improve access to HRSDPs for all British Columbians to empower those to reduce harms associated with problematic substance use	
Indicators	Data Sources
<ul style="list-style-type: none"> ▪ Supply distribution and recovery numbers by HSDA ▪ Number of HRSDP clients/encounters associated with primary and secondary distribution sites 	<ul style="list-style-type: none"> ▪ Health Authorities



Page 4, Section 6.0 “Objectives”

- The objectives were updated.
- Added Objective 6: Health Authorities, contracted agencies and community partners will consider a full range of harm reduction service delivery options including supervised injection sites and distribution of supplies such as plastic mouthpieces for crack pipes and condoms to reduce harms among those who use drugs, their families and communities.
- Added Objective 7: Dissemination of HRSS policy and best practices across and within health Authorities

Page 5, Section 7.0 “Exchange Procedures for Syringes and Other Supplies”

- Added “and educate the community about how to dispose of used syringes safely.” to the last paragraph.
- Recovery is replaced by disposal i.e. “The program should strive for 100% appropriate **disposal**.”
- Added “For a complete review of evidenced based harm reduction supply distribution and recovery programming please refer to the HRSS Best Practices document.”

Page 6, Section 10.0 “Education”

- Gender differences has been expanded to: Specific populations, special efforts should be made to counsel women, aboriginal two-spirited people and lesbian, gay, bisexual, transgendered and queer (LGBTQ) about unique vulnerabilities.

Page 7, Section 12.0 “Suggested Readings (available on BCCDC website)”

- The suggested readings were deleted and are now available on the BCCDC website.
- Added “Best Practices for British Columbia’s harm reduction supply distribution program. (2009)”.
- Added “Kerr T, Wood E. Evidence and best practice for the employment of harm reduction activities in programs aimed at controlling communicable diseases. (2006)”



Please remove and destroy the following from the Communicable Disease Control Manual, Chapter 3 – Infection Control- BC Harm Reduction Supply Services Policy and Guidelines

Table of Contents

Pages 1 to 10

October 2004

Please insert the following in the Communicable Disease Control Manual, Chapter 3: Infection Control- BC Harm Reduction Strategies and Services Policy and Guidelines:

Table of Contents

Pages 1 to 7

February 2009

If you have any questions or concerns, please contact Jane Buxton, Physician Epidemiologist at telephone (604) 660-6061, fax (604) 660-0197 or by email at jane.buxton@bccdc.ca.

Sincerely,

Dr. David Patrick,
Director, Epidemiology Services
BC Centre for Disease Control

pc: Dr Perry Kendall
Provincial Health Officer
Ministry of Health Services

Dr. Eric Young
Deputy Provincial Health Officer
Ministry of Health Services

Dr. Bob Fisk
Medical Consultant
Non-Communicable Disease
Ministry of Healthy Living and Sport

Craig Thompson
Manager, CD Prevention --Immunization
Ministry of Healthy Living and Sport

Warren O'Briain
Executive Director
Communicable Disease and Addiction Prevention
Ministry of Healthy Living and Sport