

<b><u>POLICY</u></b> <b>POSSESSION OF EXEMPTED SUBSTANCES FOR PERSONAL USE - ADULT</b>		Page 1 of 4
<b><u>EXECUTIVE SPONSORSHIP</u></b> Vice President, Population Health and Chief Medical Health Officer	<b><u>INITIALLY RELEASED DATE</u></b> April 4, 2023	<b><u>VERSION DATE</u></b> October 24, 2023

## **PURPOSE**

To ensure alignment with the Health Canada exemption from application of the *Controlled Drugs and Substances Act* ([decriminalization exemption](#)), for adults (18 years and older) in British Columbia possessing small amounts of certain substances for personal use ([exempted substances](#))<sup>1</sup>, this policy supports [people we serve](#) and [essential care partners](#) who have brought exempted substances with them into a [health care setting](#) within Fraser Health.

This policy is intended to:

- Reduce [stigma](#) and harms related to substance use,
- Increase access and ongoing connection to health services for people who use drugs,
- Promote harm reduction principles as outlined in [Harm Reduction for Psychoactive Substance Use - Corporate Policy](#),
- Clarify the responsibility of [staff](#) to provide people who bring small amounts of exempted substances into a health care setting with equitable, non-judgmental care that is respectful of individual rights and dignity.

## **Guiding values**

Determining the appropriate parameters around supporting the people we serve and essential care partners who bring exempted substances with them into a Fraser Health setting is complicated and requires balancing a number of commitments. The interprofessional shared work team identified the guiding values below using a systematic ethical decision-making process<sup>2</sup>. Staff will use these guiding values when supporting people who bring exempted substances into a health care setting within Fraser Health. Refer to Appendix A - Guiding Values in the [Decision Support Tool](#) for a detailed description.

## **POLICY**

Except where noted, this policy applies to all staff supporting the people we serve, aged 18 years or older, who bring exempted substances into a health care setting within Fraser Health.

Fraser Health Authority:

- Encourages [culturally safe](#)<sup>3</sup> and effective communication between staff and the people we serve about the use of non-prescription medications including traditional medicines, supplements and substances.
- Recognizes the harms related to the criminalization and prohibition of substances that have been disproportionately experienced by [racialized](#) and marginalized (equity-deserving) groups.
- Respects the self-determination of the people we serve and their possession of substances for personal use, while supporting access to responsive care.
- Acknowledges that the people we serve may bring exempted substances into a health care setting and are not expected to disclose that they are in possession of substances and [substance use supplies](#).
  - The people we serve hold the right to share this information with staff as they deem safe and appropriate.

## **Executive responsibilities**

- Support the implementation of this policy.
- Ensure funding, availability, sustainability and accessibility of storage, disposal options, and harm reduction supplies for exempted substances.

## **Management responsibilities**

- Ensure staff are aware of this policy and related policies including:
  - [Possession of Exempted Substances for Personal Use - Adult - Decision Support Tool](#)

<b>POLICY</b>	<b>Page</b>
<b>POSSESSION OF EXEMPTED SUBSTANCES FOR PERSONAL USE - ADULT</b>	<b>2 of 4</b>

- [Essential Care Partner and Visitor - Corporate Policy](#)
- [Harm Reduction for Psychoactive Substance Use - Corporate Policy](#)
- [Respecting Diversity in Daily Interactions, Care Planning and System Design - Corporate Policy](#)
- [Smoke, Vapour and Tobacco Free Premises - Corporate Policy](#)
- [Workplace Health and Safety - Corporate Policy](#)
- [Naloxone - Dispensing Naloxone Kits - Decision Support Tool](#)
- [Naloxone - Administration - Suspected Opioid Overdose - Decision Support Tool](#)
- Plan and implement options for storage of the person we serve's substances where possible.
- Plan and implement options for disposal of person we serve's substances when needed.
- Support any staff reports about concerns arising from the person we serve's possession and use of exempted substances by involving the person we serve (and when appropriate, their essential care partner) in the resolution of these concerns.
- Consult with law enforcement regarding significant amounts of unknown substances.

**Staff responsibilities**

- Complete recommended education and training as outlined in [Possession of Exempted Substance for Personal Use - Adult - Decision Support Tool](#) in order to provide care that is culturally safe, equitable, non-judgmental and respectful of individual rights and dignity.
- Actively participate in promoting and fostering cultural safety by exhibiting non-judgmental and respectful behaviors to support people we serve.
- Provide education to people we serve about their responsibilities related to possession and use of exempted substances as per Possession of Exempted Substances for Personal Use - Adult - Decision Support Tool.
- Meet the expectations outlined in Possession of Exempted Substances for Personal Use - Adult - Decision Support Tool.

**STANDARDS**

**Substance management**

- When staff believe a person we serve is in possession of exempted substances:
  - They are not responsible for determining what the substances are, the amount, or if it is an exempted substance.
  - They should not dispose of substances and unpackage or unused substance use supplies without the person we serve's consent.
    - Such actions are against the principles of decriminalization and may cause increased harm to the Person we serve (e.g., compromised trust and rapport, disengagement from health care services, increased stigmatization, engagement in the toxic drug supply, and re-use of substance use supplies).

**Handling substances safely**

- Staff should avoid coming into contact with, or possession of, exempted substances. If, in the course of performing their employment duties and with no intention of personally benefitting from such exempted substances, staff come into possession of exempted substances, which cannot be returned to the person, they must follow procedures found in the Possession of Exempted Substances for Personal Use - Adult - Decision Support Tool.
- If handling person we serve's personal substances and used substance use supplies in a health care setting, staff must:
  - Follow procedures and processes found in the Possession of Exempted Substances for Personal Use - Adult - Decision Support Tool.
  - If exposed to blood or other bodily fluids, refer to [Management of Occupational Exposure to Blood Borne Pathogens - Clinical Protocol](#).

<b>POLICY</b>	<b>Page</b>
<b>POSSESSION OF EXEMPTED SUBSTANCES FOR PERSONAL USE - ADULT</b>	<b>3 of 4</b>

### Storage of substances and substance use supplies

- If the substance can be safely carried, or stored on a person or within their belongings, then it should be treated as a personal effect.
- If requested, and where available in a health care setting, staff will offer access to a [secure storage area](#).
- In care contexts where the person we serve has personal belongings that are temporarily removed, exempted substances should be treated as part of these belongings (e.g., stored and returned to them as soon as clinically appropriate, or when they leave the health care setting).
- Staff will provide [harm reduction supplies](#) to people we serve upon request

### Exempted substance use by people we serve

- Staff should not directly assist people we serve with substance use (e.g., prepping their substances for consumption), unless the person we serve is in the care of a program where staff are responsible for helping with substance use as part of their service (e.g., designated [Overdose Prevention Sites](#)).
- All persons we serve, visitors, and staff must follow the [Smoke, Vapour and tobacco Free Premises - Corporate Policy](#)

### Disposal of substances

- Staff may dispose of substances that are abandoned, and cannot be returned to the person we serve.
- Staff must follow disposal procedures outlined in Possession of Exempted Substances for Personal Use - Adult - Decision Support Tool.
- Staff should **not** contact law enforcement to dispose of small amounts of exempted substances. Further to the decriminalization exemption, law enforcement partners will no longer respond to requests from a health care setting to remove and dispose of small amounts of exempted substances for personal use.

### Approach to care

- All persons we serve will be supported to discuss their goals of care related to substance use.
- All persons we serve will be offered harm reduction options to keep them safe while accessing our services (e.g., addressing pain and [withdrawal](#) symptoms)<sup>4</sup>.
- Staff will provide care using:
  - [Person family centred care](#) and [trauma-informed practice](#) to meet the physical, emotional, mental, social, psychological, and spiritual health care needs of the people we serve.
  - Appendix A - Guiding Values in the [Decision Support Tool](#) to inform their practice.

### DEFINITIONS

**Abstinence:** is used in addiction treatment to describe the process of abstaining (meaning not to engage in, or avoid) from addictive substances and/or behaviors.

**Culturally safe:** an outcome based on respectful engagement that recognizes and strives to address power imbalances inherent in the health care system. It results in an environment free of racism and [discrimination](#), where people feel safe when receiving health care.

**Decriminalization exemption:** Health Canada exemption under s. 56 (1) of the *Controlled Drugs and Substances Act* (CDSA). Under this exemption, from January 31, 2023 to January 31, 2026, application of the CDSA will not apply to adults (18 and over) in British Columbia for possession for personal use of a cumulative total of up to 2.5 grams of certain controlled substances (cocaine, methamphetamine, MDMA (ecstasy), opioids).

**Exempted substances:** small amounts of substances presumed to be one of the substances (cocaine, methamphetamine, MDMA (ecstasy), opioids) in the decriminalization exemption.

<b>POLICY</b>	<b>Page</b>
<b>POSSESSION OF EXEMPTED SUBSTANCES FOR PERSONAL USE - ADULT</b>	<b>4 of 4</b>

**Health care setting:** all sites where Fraser Health staff provide care to people we serve.

**Secure storage area:** placing an item so it is not visible to others. This includes any place that both protects the contents from tampering and prevents exposure or risk. Locked storage is not necessary, as long as substances are kept out of sight and prevents risk to others (e.g., bedside drawer or individual closet; in personal purse or satchel).

**Racialized group:** is a term used to identify non-white groups that have historically been or are currently treated differently based on perceived racial and/or ethnic differences. This term is currently use as a preferred term over “visible minority” as it acknowledges that race is a social construct that can lead to negative impacts.

**Stigma:** refers to negative attitudes (prejudice) and negative behavior (discrimination). These attitudes and judgments can affect how we think about, behave and provide care to people. Stigma can also include structural stigma, which is defined as societal-level conditions, cultural norms, and institutional policies that constrain the opportunities, resources, and wellbeing of stigmatized individuals.

**Substance use supplies:** any device used in consumption of controlled substances (e.g., pipes, syringes, cookers).

**Withdrawal:** is the combination of physical and mental effects a person experiences after they stop using or reduce their intake of a substance such as alcohol and prescription or recreational drugs. The intensity and duration of these withdrawal symptoms can vary widely, depending on the type of drug and the person’s biology. Withdrawal can be very uncomfortable and distressing, and potentially dangerous in some cases.

## **REFERENCES**

1. Health Canada. Exemption from *Controlled Drugs and Substances Act*: Personal possession of small amounts of certain illegal drugs in British Columbia (January 31, 2023 to January 31, 2026). [Internet]. 2022 May. [cited 2023 Feb 23]. Available from: <https://www.canada.ca/en/health-canada/services/health-concerns/controlled-substances-precursor-chemicals/policy-regulations/policy-documents/exemption-personal-possession-small-amounts-certain-illegal-drugs-british-columbia.html>
2. Jiwani, B. Good Organizational Decisions: Ethical Decision-Making Toolkit for Leaders and Policy Makers. Switzerland: Springer Cham; 2021.
3. First Nations Health Authority, Cultural Safety and Humility. Retrieved from: <https://www.fnha.ca/wellness/wellness-and-the-first-nations-health-authority/cultural-safety-and-humility>.
4. Fletcher, S. Symptoms of Withdrawal from Drugs. March 22, 2023. Available from: <https://canadiancentreforaddictions.org/drug-addiction-withdrawal-signs/>

## **DATE(S) REVISED / REVIEWED SUMMARY**

<b>Version</b>	<b>Date</b>	<b>Comments / Changes</b>
1.0	April 2023	Initial policy released
2.0	October 24, 2023	Revisions