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Engaging in Overdose Prevention Conversations

Patient/client discharge (planned or patient decision) or scheduled leaves from a program are opportunities to support people in taking *measures to prevent overdose*. This is of particular concern within the context of the public health emergency relating to opioid overdose. Like most conversations supporting wellness, there is no one-size-fits-all formula; however there are elements that support *good engagement* and effective prevention rooted in evidence and existing practice frameworks.

In general, pay *mindful attention* to avoiding language that can come across as directive, parental, shaming, disqualifying or denigrating. For example:

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- "You should..." - "You need to..." - "If you don't listen..." - "The problem with addicts is that..." - "I really need you to listen..."
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Here are some **examples** of key points and questions that can be effectively explored:

- 1. Start the conversation by *asking for permission* to explore plans to stay safe. *Imposing* or *forcing* the conversation risks alienating the person or having them to feel threatened or shamed.
 - a. "Before you head out, is it ok if I speak with you a bit about your plans to stay safe?"
- 2. Ask the person to help you understand *their level of concern* about the risk of overdose (for themselves, and for their family and friends).
 - a. "What are *your thoughts or feelings* about the chance of overdose (for you, and for your family and friends)?"
 - b. "Have you personally experienced an overdose?"
 - c. "What concerns might you have about someone you know overdosing?"
- 3. *Listen without judgement*. The objective is to provide an opportunity for the person to *safely explore* their experience and any concerns.
- 4. Continue to explore these themes with a view to reaching a *shared understanding* of any risks (for the person, or for their family or friends).
- 5. If indeed there is some level of concern, *invite the person to describe* what steps they have taken, in the past, to help keep themselves or others safe.
 - a. "What are some of the things you do to keep yourself or others safe?"
- 6. Gently invite the person to describe, based on their lived experience, what steps they will take to protect their safety (or the safety of others around them) once back in the community.
 - a. "Based on what *you know*, what are some of things you will do or pay attention to, when you leave here, to help stay safe (or help others around you stay safe)?"
- 7. Invite the person to describe what else may be of benefit.
 - a. "What else would be helpful?"

- 8. Ask the person if they are open to additional ideas or resources.
 - a. "I wonder if you'd be open to hearing about Take Home Naloxone and how to use it?"
 - b. "I wonder if I could show you one of these kits."
- 9. Summarize any discussed plans and resources.
 - a. "How about we go over some of the ideas and resources we talked about so far?"
- 10. Invite a concluding conversation.
 - a. "What else do you need (or would you welcome) to help you (or others) stay safe?"
 - b. "Please *feel free to reach out* to _____ if you ever need any support. Here is the number..."
 - c. "How was this discussion for you?"
 - d. "I'm really glad that I had a chance to talk with you about this. Thank you."

Feel free to explore the following key messages:

- Try not to mix substances, including prescription medications and alcohol
- Use less than you normally would
- Do a tester; try a little before your regular amount
- Try not to use alone and, if you do, have someone check on you
- Stagger use with friends so someone can respond if needed
- Carry naloxone
- Know the signs of an overdose (early signs may include unusual snoring, or taking less than 1 breath every 5 seconds)
- Call 9-1-1 quickly when you notice something isn't right (the *Good Samaritan Drug Overdose Act* provides immunity from simple possession charges for those who call 9-1-1 in the case of an overdose)
- Provide breaths every 5 seconds until the person regains consciousness or help arrives
- Other ways people keep themselves and each other safe

For your organization, we recommend:

- Having conversations with clients, and letting them know they can ask for help in the event of an overdose without getting into trouble
- Obtaining naloxone to be used by staff in the event of an overdose at the organization, and to be provided to patients/clients and their families and friends
- Reviewing your organization's overdose response plan, and checking first aid supplies including CPR masks
- Frequently checking areas where overdoses might occur, including washrooms, stairwells and quiet spaces
- Ensuring washrooms are easily accessible in the event of an emergency
- Ensuring staff know how to respond to an overdose, including calling 9-1-1, providing breaths and administering naloxone
- Displaying your organization's address publically (so it can be provided to the 9-1-1 operator)
- For more information and videos:
 - http://towardtheheart.com/naloxone/
 - http://www.fraserhealth.ca/health-info/health-topics/harm-reduction/overdose-prevention-and-response/overdose-planning-organization/
 - http://www2.gov.bc.ca/gov/content/overdose

For more information, please email: overdose@fraserhealth.ca