

DOPE RESPONSE TEAM
COMMUNITY WORKER MANUAL
SOMERSET WEST COMMUNITY HEALTH CENTRE

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WELCOME TO SOMERSET WEST COMMUNITY HEALTH CENTRE:

Welcome and congratulations on your role as Community Worker with the Harm Reduction Team at Somerset West Community Health Centre! This manual gives an overview of Somerset West Community Health Centre and the programs offered in the Harm Reduction department; explains the role and responsibilities of Community Workers and an outline of key pieces of the job. This manual is only a starting point and overview to the work you will be doing. There will be lots of opportunities to ask questions and clarify if you do not understand something. Remember: it can take time to get the lay of the land when starting a new job. We are excited to welcome you!!

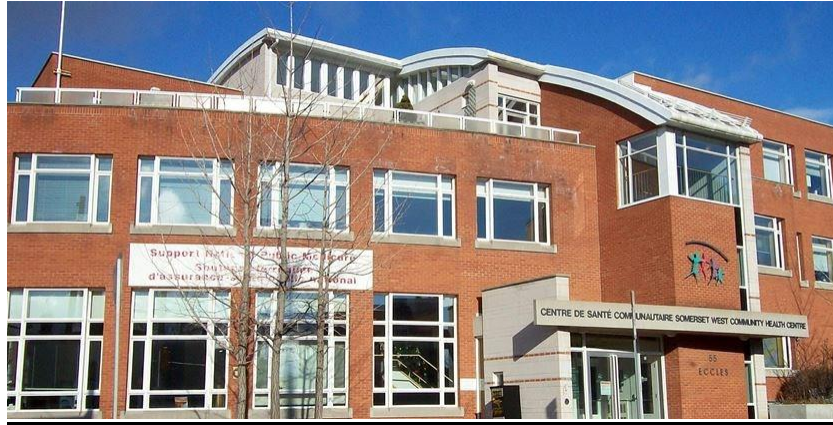
DOPE RESPONSE TEAM'S MISSION:

DOPE Response Team stands for Drug Overdose Prevention and Education and was founded in 2019 with term funding from the Federal Government.

The DOPE outreach program's goal is to connect with the street population in three community health centre catchment areas (Somerset West; Centretown and Carlington). Community Workers provide this population with harm reduction gear, provide emergency care in cases of suspected overdoses or other medical scenarios, and call appropriate emergency services, staying with intoxicated individuals and ensuring transfer of care if required and going to hotspots where people use a lot.

Community Workers connect with businesses in the area and offer Naloxone training as well as giving them an alternative to calling the police when dealing with challenging situations. Community Workers act as stewards to the community by safely picking up and collecting any harm reduction gear found in streets, alleyways, parks and around businesses. Most importantly, the goal of the DOPE Response Team is to form relationships with our street population by having them feel seen and heard with dignity and compassion.

ABOUT SOMERSET WEST COMMUNITY HEALTH CENTRE:



Somerset West Community Health Centre (SWCHC) is a non-profit organization that provides many different services to its residents within its catchment area. This includes primary health care, health promotion and community development services. These teams include physicians, nurses, social workers, dietitians, early childhood educators, harm reduction workers, and many others.

SWCHC MISSION:

“We support people and communities to enjoy the best possible health and well-being.”

We do this by providing primary health care and social services while promoting access to the social conditions that influence health, such as housing, food security, employment and civic engagement.

We remove barriers to accessing services for people who are vulnerable because of their age, income, abilities, sexual orientation or gender identity, and language or culture.

- Diversity makes our community stronger.
- We are all connected, and everyone matters.
- Health is a state of physical, mental, social, and spiritual well-being.
- Health equity is key to inclusive, healthy communities.

- Working in partnerships makes our impact more powerful.
- The essence of community is the ability to care and share with everyone.

HARM REDUCTION SERVICES AT SWCHC:

Harm Reduction is an ever-growing and changing department at Somerset West Community Health Centre. A lot of the clients we support often use multiple harm reduction services and we will often collaborate and communicate with the teams (especially the ones that operate in the evening time) to make sure we are all on the same page. This is why it is important to have a general understanding of the harm reduction programs at SWCHC. These programs include:

NESI – Needle Exchange & Safer Inhalation (Gear & Outreach)

NESI offers harm reduction services for people who use drugs, including safer inhalation and injection supplies, collection and disposal of used equipment, and peer support in a non-judgmental environment. This program operates during the daytime, Monday-Friday.

NESI Van:

NESI van operates from 5-11:30pm every night besides Sunday, and provides safer inhalation and injection supplies to people and communities anonymously all across the Ottawa region. The DOPE team and the NESI van try to communicate regularly with one another to support each other in their similar work.

Supervised Consumption & Treatment Service/ Supervised Consumption Site

The Consumption & Treatment Site (CTS) provides a safe and hygienic environment where people bringing pre-obtained drugs can pop, snort, or inject drugs under the supervision of medical staff. Staff do not supply drugs. This program is currently operating 9am-4pm every day.

African, Caribbean, and Black (ACB) HIV Prevention

Outreach and capacity building around HIV prevention in African, Caribbean, and Black communities in Ottawa. Community developers provide prevention resources and educational materials and lead workshops, seminars, and advocacy initiatives to increase HIV awareness in the community.

Anonymous HIV Testing

Anonymous HIV Testing Appointments, available Monday - Fridays. Call 613-295-9574 to make an appointment. You will be asked some screening questions for COVID-19 and HIV transmission risk factors over the phone before the appointment is confirmed.

HIV testing for anyone 14 years of age or older at risk of contracting or believes they may have contracted HIV/AIDS. Results are available the same day.

MAIN RESPONSIBILITIES OF COMMUNITY WORKERS:

Here is a list of your main responsibilities as a Community Worker on the DOPE Response team:

- Build relationships with folks who use drugs and are not necessarily connected to supports already.
- Hand out harm reduction gear (crack kits, meth pipes, injection kits) by responding to phone requests or by meeting people on the street.
- Getting as much used drug injection equipment off the streets as possible.
- Provide harm reduction education, materials, and information.
- Train & hand out naloxone with an emphasis on overdose identification and prevention
- Engage with businesses and train them on signs of overdose and naloxone use.
- Respond to requests to supervise drug consumptions & respond to overdoses accordingly (especially after Supervised Consumption Services are closed onsite).
- Refer clients to healthcare and social services (accompany if possible).
- Collaborate with Emergency Response Services - including Police and Emergency Medical Services
- Keep our folks safe!

No using on shift; you are working as a team and you need to be able to have your teammate's back. Please do not buy any drugs or alcohol while on shift, you are representing Somerset West Community Health Centre.

WHAT A TYPICAL EVENING OUTREACH SHIFT MAY LOOK LIKE:

4:00pm

- Arrive on site, text Program Coordinator or Practice Facilitator you have arrived using DOPE phone.
- Sign into email, read emails and the debrief end of shift report from the night prior to see flags, things you should know or help in planning where to go.

- Head into the Supervised Consumption Site to check in with them about their day. Questions to ask them: “Are there any clients we should follow up with/keep an eye out for? Were there any overdoses? If so, what did they look like? Are there any specific drug warnings we should pass along in the community?”
- Communicate with your partner - check in with how you are both feeling and doing. Check in about packing your bags for the night- go over check list; ensuring you have enough gear; food, naloxone, etc.
- Make a plan with your partner and the other team(s) about your route and checking specific hot spots.

5:00pm - 10:30pm

- Hit the road! Respond to calls, check hot spots for needles, visit trap houses and rooming houses, provide gear to people in the community, promote DOPE program by meeting new people on the street and handing out cards, and respond to any potential overdoses, medical situations or crisis as needed.
- Report every interaction in NEO data system to best capture how we are engaging with the community.
- At some point in the evening, coordinate with your partner to take an hour break (making this plan as early as possible is best and text your PF or Coordinator you are on break).

10:30pm - 10:45pm

- Try to be back to the Centre by around 10:45pm to give yourself time to write up debrief end of shift report, unpack your bags, finish any NEO reporting, clean up surrounding area and attend to any clients onsite around the property.

11:30pm

- Try to be out between 11pm-11:30pm unless you are responding to an emergency (and if you are, try to let your PF/Coordinator know!)
- THE ALARM SYSTEM MAY GO OFF IF YOU ARE NOT OUT OF THE BUILDING BY 11:45PM.

SAFETY WHILE DOING OUTREACH:

-No matter what is happening while you are on outreach, your safety is the most important. Do not enter areas or approach clients that feel or look unsafe.

-Remember that each staff is going to have a different understanding or feeling of what is safe/unsafe. Things that make you feel unsafe may not make others feel unsafe and vice versa. The important thing is that we make sure each staff is supported and if someone needs to tap out of a situation or step out, you step out with them. It is helpful to communicate with your partner on the road if you are feeling unsafe for whatever reason and to make a plan.

-Staff work in pairs to support one another. No one does outreach alone so we can keep one another safe. There is usually another team out on the road so should someone on a team encounter a situation where they feel unsafe or require more support, they are encouraged to reach out to that team. Practice Facilitators and the Program Coordinator are also available by phone to help you navigate some situations that may be unclear or hard to navigate.

-Always have the outreach cell phone charged and with you in case of emergency. This is how you will get a hold of the Practice Facilitator or any emergency services while on shift.

-Please always wear closed toe shoes.

-Outreach continues if it is raining (or snowing!). Staff can take more breaks inside. If there is thunder, staff will go inside and wait for the thunder to end. A decision can be made by the Practice Facilitator or the Program Coordinator to send the staff team home if necessary.

INCIDENT REPORTS:

If there is an incident (overdose, calling 911, or any other emergency, accident etc including near misses), you are to complete writing up an incident report form. This form is a tool to track incidents that we encounter in the community and gives us a better way we can improve our services to keep our staff and clients safe! We will talk you through how to write up an incident report-just call your program coordinator or practice facilitator.

CONFIDENTIALITY:

People have a legal right to privacy in their healthcare. Respecting their confidentiality is extremely important.

Confidentiality is a key component of our services; it is paramount that our client's confidentiality be preserved. This means that anything that happens or is said concerning the clients we come across cannot be repeated to anyone. This includes any other services that may demand reporting on their clients (like treatment centers or the Ottawa Police) or other Somerset West Community Health Centre services such as the Supervised Consumption Site. Confidentiality is of utmost importance to maintain the respect of our clients and if broken, carries disciplinary actions. If you have pre-existing relationships with clients, it is imperative that you keep an aura of professionalism while at work. Please keep working boundaries up while at work and remember that confidentiality is one of our cornerstones and that you should not mention to any of their friends or family that you saw one of the clients we serve.

HOW TO LOG YOUR WORK:

NEO:

A responsibility for staff members is to document interactions you have with clients, businesses, and clean-ups with a database you can access on your phone and on the computer called NEO. This is to better capture and understand the statistics of the amazing work DOPE staff do in the community. If you do not document an interaction in NEO, then it will not be added to our statistics. This can sometimes seem tedious but is really important!

Debrief:

At the end of every shift, you and your partner are to collaborate in writing a debrief report of the shift. This is documentation of what you did for the night and an opportunity to reflect how things went. There are four questions to answer in the debrief. They are:

1. **What went well?**
 - a. In point form, summarize where you went, who you saw and what that exchange looked like. For example - "Checked in with BRAR at 901 - 415 McClaren after he called us asking for gear".
 - b. Write down anything that you felt went really well. A good interaction? Running into someone you have not seen in a while?
2. **What didn't go so well?**
 - a. Here you are to reflect on what did not go so well, or something you felt you could have done differently.
3. **What would you like to see happen differently in the future?**
 - a. Include any suggestions you may have moving forward.
4. **What do you think the team should know?**
 - a. Record any suggestions of what the team should do the following day - especially if you did not get to a place you meant to, etc.

MAIN DUTIES OF THE PRACTICE FACILITATOR:

There are Practice Facilitators to support Community Workers during outreach. These workers support onsite with outreach, provide clinical supervision with community workers and co-facilitate community of practice sessions with the team to discuss and debrief relevant topics.

When Community Workers are encountering a situation they haven't encountered before, they can check in with their Practice Facilitator to talk them through it. If you get triggered/upset or are generally unsure during your shift, please call the Practice Facilitator to make a plan and receive support.

MEETINGS:

Community of Practice Meetings:

Community of Practice Meetings are organized by the Practice Facilitator for Community Workers to discuss themes of practice (boundaries, confidentiality, self-care, etc.); to debrief particularly challenging scenarios and to reflect with fellow community workers about the work - addressing challenges and opportunities for growth. You will be invited to these meetings through your email and reminded by text. If there is a topic you would either like to discuss or even lead in a Community of Practice, let your Practice Facilitator know.

DOPE Team meetings:

DOPE Response Team meetings are hosted weekly by the Coordinator to address administrative tasks; go over recent health and safety issues; program performance and to check in with the staff regarding any flags.

Community Workers are paid for attending all work related meetings.

Additional Trainings and Meetings :

While there are many training sessions that occur during Community of Practice meetings and DOPE team meetings, there are also additional training sessions and meetings that are hosted outside of these meetings. These other meetings are a great opportunity for Community Workers to get a sense about other programs.

Harm Reduction Meetings: The Harm Reduction department has a meeting every month where all programs get together to talk about bigger themes in our work and check in as a larger team.

Evening Team Meetings: The Evening Team Meetings are for the harm reduction programs that run in the evening through the centre. We usually bring up communication pieces and check in on challenges and opportunities in the work.

If you ever feel you want more information on a particular topic or you would like to review something, please let us know.

SCHEDULING:

Before you start working, the Coordinator will discuss with you what works for you in terms of a weekly work schedule. Your needs and responsibilities outside of work may change, so keep in touch with the Coordinator as adjustments can always be made. Check your schedule regularly!

Checking your schedule:

Your schedule will be posted through google calendars. We will support you in showing how you can look this up outside of work if you have a computer and/or phone with internet access.

Timesheets:

Timesheets are used to log your hours so you can get paid. There are physical copies you are to fill out after each shift. You can also log your hours on an internet program called Dayforce. We will show you how to use these two systems.

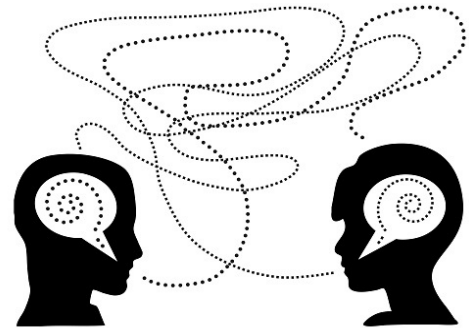
What to do if you cannot come to work?

We recognize that there may be many reasons it can sometimes be challenging to make it into work. If you are feeling sick or something else is going on, please just get in touch with the Coordinator or Practice Facilitator to share that you are unable to make it.

Picking up shifts:

If someone calls in sick or cannot make it into work, the Coordinator or Practice Facilitator may get in touch (sometimes right when the shift starts) to see if you are interested in picking up a shift. This is completely optional and you do not need to feel pressure to accept. Many people do pick up shifts if they want to pick up extra hours, but this is not obligatory.

APPENDIX A: LET'S GET COMMUNICATING:
LET'S GET COMMUNICATING!



Check-in with YOURSELF

Take 2 minutes & ask yourself:

1. How do I feel (emotionally/physically/mentally?)
2. What do I need or have to give to myself?
3. What could make my shift better for me?

Check-in with YOUR TEAM STOP what you are doing, and ask each other:

1. How are you doing? Are there any particular needs or desires for the shift?
2. If you are not doing well, this may be a good time to share with your partner and explain what you may need (Note: you do not need to go into details - simply telling your partner you are tired or feeling off and what you need will help them support you and create a better shift)

Create a GAME-PLAN Make a plan for your shift:

1. Review past debrief logs
2. Connect with other teams & evening programs
3. Choose: routes, breaks, unaddressed hotspots
4. It's OK to make needed adjustments

On-going CONNECTION Call/text other teams (& your PF) when:

1. You are on and off break
2. You may need extra support
3. Something big happens (like an OD or other hard situation) you need extra time or need to debrief
4. You have new info that could be valuable to other teams

Take time to DEBRIEF

TAKE time and MAKE time after an intense moment (like an OD) to check in.

1. Ask yourself: How am I? Any safety needs?
2. Ask your partner: How are you feeling?

Questions: ***What happened from your perspective? *What was hard about that situation? *What was easy or maybe just okay about it? *What would you have done differently? *Do you need anything? *Do I need anything?**

This is best when dedicated intention is given to the conversation.
This part of the job and it is just as important as doing your NEO!

APPENDIX B:BEGINNING OF SHIFT CHECKLIST

DOPE TEAM BEGINNING OF SHIFT CHECKLIST:

1.	<u>Let PF or Hana know you arrived from DOPE phone!</u>	
2.	Read End of Shift Debrief & Check Emails & Schedule	
3.	Attend Supervised Consumption Site Huddle & check in with NESI Van staff	
4.	Check in with team partner, other DOPE team and make evening plan	

WHAT TO PACK:

Cellphone (check it is charged-charge it if you need to!)	
SAT monitor & Thermometer(check it is working-get new batteries if needed)	
Honoraria bag (count and sign out money, bus tickets and taxi chits)	
PPE:	
Extra Masks, Visor/Goggle per staff, Disposable Gowns & Gloves, Hand Sanitizer	
GEAR:	
Safer Injection - Short tip kits AND Long tip kits	

Safer Inhalation - Stem Kits & Bowl Pipes	
Safer Inhalation - Foil & chapstick	
SAFER DISPOSAL:	
Tongs, Bio Bins & puncture resistant gloves	
EMERGENCY RESPONSE:	
Naloxone - IM and Nasal kit & refill, Clipboard Simple Stages for Overdose	
Band-aids & personal protective masks for CPR	
OUTREACH STUFF:	
Fentanyl Test Strips & Instruction sheet	
Period Packs, Socks, Underwear, Condoms and Lubricant	
Snacks & Liquids, and Extra meals from NESI fridge with disposable cutlery	
DOPE Response Cards and Posters & Community Worker Applications	

END OF SHIFT CHECKLIST:

	EMPTY BAGS AND RETURN ALL ITEMS	
1.	Cell Phone-Delete all texts and phone call logs-put back in safe and connect phones to chargers! Remember to sanitize phones!!	
2.	Sign back in - Honorarium \$, Receipt(filled in) back in safe.	
3.	Unused Taxi Chits returned-noted in end of shift debrief if given to client	
4.	NEO EVERYTHING! (if you haven't already)	
5.	Write End of Shift Debrief <u>with your partner</u> and share with doperesponseteam@swchc.on.ca email	
6.	GO HOME! :)	

PLEASE WRITE MISSING OR DAMAGED ITEMS IN YOUR END OF SHIFT DEBRIEF!

APPENDIX C: D.O.P.E Response Team Sign Out & In Log

	D.O.P.E Response Team Sign Out & In Log					
	CATCHMENT:					
Date	Sign In/Out	Bus Tickets	Taxi Chits	\$	SAT	Staff Name
	OUT					
	IN					
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