

**SECTION 5  
OTHER POLICIES**

## **Section 5.1 HARM REDUCTION POLICY**

**Date Issued:** Amended March, 2006

**Distribution:** All Employees and Board Members

### **POLICY**

The Agency acknowledges that as human beings with the capacity to choose, we are exposed to risk on an ongoing basis.

Harm reduction is a set of non-judgmental approaches and strategies aimed at providing and enhancing the knowledge, skills, resources, and supports for individuals to be safer and healthier. The goal of harm reduction is to minimize negative outcomes resulting from risky behaviours.

The Agency acknowledges that risky behaviours occur along a continuum ranging from minimal to extreme and any change reducing the risk associated with the behaviour, no matter how small, is positive.

The Agency recognizes that harm reduction is integral to addressing the complex needs of the persons we serve, and that we have an organizational responsibility to promote the adoption of harm reduction practices in the general community. This responsibility includes an organizational obligation to act as a catalyst for the creation of services in the community when there is no existing service to adopt or offer the harm reduction practices needed by the persons we serve.

### **PROCEDURES**

#### **Non Prescription Needle Use**

HIV and other infections are transmitted via risky non-prescription needle use. Non prescription needle use includes any behaviour where needles are used for purposes other than the delivery of prescribed medication. This includes needles used for tattooing and piercing, as well as needles used for injecting non-prescription substances.

The purpose of this policy is to support the development and adoption of harm reduction with attention to non-prescription use for individuals, organizations, and society at large.

The Lethbridge HIV Connection will provide these supports to individuals by:

- Coordinating the needle exchange program in the Chinook Health Region;
- Promoting safer needle use practices;
- Ensuring that all staff is knowledgeable and skilled with harm reduction strategies related to non-prescription needle use;

- Working with provincial counterparts (Non-Prescription Needle Use Consortium) to increase their skills and abilities to include harm reduction strategies with their non-prescription needle use; and
- Maintaining a relevant and current, publicly accessible resource centre.

The Agency recognizes that abstaining from non-prescription needle use is only one of many harm reduction strategies, and is not appropriate for everyone.

The Agency will provide these supports to organizations by:

- Working in partnership with other community agencies and organizations to develop and implement appropriate harm reduction policies, strategies, and programs with attention to non-prescription needle use;
- Promoting the creation of agencies and organizations to develop and implement appropriate harm reduction policies, strategies, and programs when there are no existing agencies with which to partner; and
- Maintaining a relevant and current, publicly accessible resource centre.

The Agency will provide these supports to society at large by:

- Offering, supporting, promoting and advocating services, policies, and legislation which respect the dignity and rights of non prescription needle users;
- Minimizing the social barriers that non prescription needle users encounter in staying safe and healthy by promoting and supporting the creation of services, policies, and legislation espousing the general philosophy of harm reduction;
- Advocating for legislative and social policy changes, which eliminate drug violence and drug, related crime; and
- Recognizing that criminalizing non prescription needle use promotes reliance on costly, socially destructive and counter productive criminal justice measure of drug control.

## **Sexual Practices**

HIV and other infections are transmitted via sexual practices. Risky sexual practices include any behaviours of sexual expression associated with a risk of infection. This includes behaviours posing a theoretical risk of HIV infection such as wet kissing, behaviours posing a low risk of HIV infection such as unprotected oral sex as well as behaviours posing a high risk of HIV infections such as unprotected sexual intercourse.

The purpose of this policy is to create support to help individuals, organizations and a society to develop harm reduction practices with attention to risky sexual behaviours.

The Agency will provide these supports to individuals by:

- Maintaining baskets of free condoms and lubricant in public locations at the Agency's office that service users can readily access;
- Ensuring all staff are knowledgeable and skilled with harm reduction strategies related to safer sexual practices;
- Explaining safer sexual practices to individuals accessing our information lines;

- Maintaining a relevant and current, publicly accessible resource centre;
- encouraging people to practice non-penetrative sexual behaviours that are of lower risk;
- Encouraging people to limit the number of sexual partners and to know their sexual partner (i.e. limit or avoid opportunistic sexual behaviours);
- Recognizing abstinence and celibacy as viable alternatives and harm reduction approaches.

The Agency will provide these supports to organizations by:

- Working with organizations to make safer sexual supplies more readily available for their service users;
- Working in partnership with other community organizations and agencies to develop and implement appropriate harm reduction policies, strategies and programs with attention to sexual safety;
- Maintaining a relevant and current, publicly accessible recourse centre; and
- Providing professional in-service and community workshops, teaching and promoting sexual safety.

### **Needle Exchange Program Procedures**

Harm Reduction is the attempt to keep people as safe and healthy as possible in their given practices and lifestyles realities. By providing and enhancing knowledge, skills, resources and support, we hope to reduce the harm done to those engaging in high risk behaviors involving drug use as well as the overall community.

Harm Reduction is a community approach. We value partnerships with:

- The Community Harm Reduction Network. The purpose of the Community “Harm Reduction” Network is to provide coordinated, collaborative population health approaches to the delivery of Harm Reduction services within the Chinook Health Region.
- The Community Substance Abuse Response Team: The CSART is an overarching collaborative community group focused on developing a community voice, community awareness and engagement. The purpose of CSART is to coordinate initiatives and resources to reduce the harm caused by substance abuse and addictions in Lethbridge and in coordination with South West Alberta.
- The Chinook Health Region
- The City of Lethbridge
- The pharmacies participating in the needle exchange program
- Other community agencies

The Lethbridge HIV Connection is involved in the following harm reduction / prevention initiatives:

- Increasing community awareness through workshops on harm reduction with professionals, students and community groups;

- Increasing knowledge and skills of groups at risk for HIV/Hepatitis C: at the Lethbridge Correctional Centre, at Kainai Correctional Services, at the Southern Alcare Manor, by participating in health fairs, youth events...
- Distribution of condoms to individuals and community organizations requesting them (MUST, GALA/LA, TRAC Youth Outreach, Women's Centre at UoL...)
- Managing the needle Exchange Program, run currently through two pharmacies (Draffins Pharmasave and Norbridge) and at the Resource Centre once a week. The Chinook Health Region provides the needles, alcohol swabs, filters & ties, and sharp containers and disposes of the sharps collected through the program. The Lethbridge HIV Connection provides condoms, paper bags, information, and monitors the program.
- Installation of 6 needle drop boxes

In addition to continuing with existing services, the Lethbridge HIV Connection is planning to start in-house needle exchange services and direct staff contact with people who inject drugs and other related target population in April/May 2006, in our new office building. This will improve the provision of care and support to populations at risk for HIV, HCV and other health problems related to drug use. This will also allow for a greater involvement of people who inject drugs and related target populations in harm reduction program development, delivery and evaluation.

The in-house needle exchange program will run during office hours, between 1 and 4:30 from Monday to Thursday. There will be a designated area for needle exchange in the LHC office. Employees running the program will abide by policy 2.3 – Health and Safety. Should there be only one staff member, practicum student or volunteer in the building, the office doors shall remain locked and the needle exchange will be temporarily closed.

The in-house needle exchange will continue providing clean needles, alcohol swabs, condoms, lubricants, ties, filters. Information and support will be provided as needed and appropriate. Information gathered from needle exchange clients will be kept in their personal file, and shall include but will not be limited to their name (alias if desired), sex, list and number of supplies given out, whether or not supplies were dropped of or returned, and whether or not there was an opportunity for support or referrals. A note shall be made if a referral is made to the agency outside the Lethbridge HIV Connection.

The needle exchange will be monitored and evaluated as per the overall evaluation plan for the Society.

## **Section 5.2 SPECIAL NEEDS FUND POLICY**

**Date Issued:** October 1995, Revised June 2001, Revised September 26, 2005, Revised October 22, 2007

**Distribution:** All employees, volunteers, clients

### **MANDATE**

The Special Needs Fund is maintained to assist persons who are HIV positive and/or Hepatitis C positive in times of financial crisis occurring as a direct result of the illness. This fund facilitates access to medicine and related special needs; services and support in larger urban centers that are unavailable in Lethbridge. The fund is intended for use when other avenues of financial assistance are not available.

### **GUIDELINES**

Since the Special Needs Fund is supported by community donations and grants, Agency is committed to ensuring that these funds go directly to persons affected by HIV and/or Hepatitis C.

#### **Application Guidelines**

Clients applying to the fund will make an appointment with the Client Services Coordinator to determine their eligibility.

- First time applicants will be required to validate their HIV and/or Hepatitis C status (i.e. lab results or permission to discuss with physician);
- Clients must demonstrate a genuine need for financial assistance that is directly related to the HIV and/or Hepatitis C infection;
- A copy of the bill or proof of need (receipt) is required.

Any demonstrated evidence of fraudulent use of the fund will disqualify the applicant from further financial assistance for a period of one year.

Access to this fund is a privilege and not a right. Application for assistance in no way guarantees approval. The Agency has the right to verify that money granted was spent as requested.

Request for funds must be made in advance. In most cases, it will take 3 business days to process an application.

#### **The following expenses may be covered:**

- Travel to Calgary for medical appointments/treatment related to HIV and/or Hepatitis C status if no other source of funding is available (such as transportation fund for First Nations clients), and if such medical services are not available in Lethbridge.
  - When traveling by vehicle:
    - \$75 for gas & parking and \$20 for local transportation and lunch.
  - When traveling by bus:
    - Return bus ticket.
    - \$20 for local transportation and lunch.
    - When an overnight stay is absolutely necessary, hostel rates will be covered.

- Transportation by bus for medical appointments in Lethbridge if no other source of funding is available. (Maximum of 4 bus tickets/month/client.)
- Emergency Dental Care (if no alternative coverage available).
- Complementary / alternative therapies when recommended by a physician.

**The following expenses will not be covered:**

- Medication used to treat Hepatitis C (interferon, Ribavirin, Peginterferon and combination therapies).
- Routine dental care.
- Cosmetic procedures.
- Prescription eye glasses (unless a change of prescription is required due to HIV condition).
- Payment of any housing related expenses (damage deposits, rent, utilities, etc.).

**For requests other than those listed above:**

- Applications will be reviewed by the Client Services Coordinator. He/she will make a recommendation to the Executive Director and/or Client Services Committee about the appropriateness of the request.
- Clients will be able to access the fund for requests other than medical appointments no more than three times a year and up to a maximum of \$200 per year.

**Management of the Special Needs Fund**

The Executive Director is responsible for managing the Special Needs Account. He/she is assisted by the Client Services Committee whose members, including but not limited to one family member and/or friends of HIV and/or Hepatitis C positive clients, and at least one Board Member of the Agency, are appointed by the Board.

The Executive Director will present a proposed budget for the fund to the Board at the beginning of each fiscal year. The budgeted amount will be ratified by the Board of the Agency.

The Client Services Coordinator will act as advocate when presenting a request for funds to the Executive Director. The Executive Director will review the request and then provide a decision.

All requests exceeding \$200 must be reviewed by the Client Services Committee.

Decisions by the Executive Director may be appealed to the Executive of the Agency Board. The appeal will involve the individual making the request, the Client Services Coordinator as the advocate, the Executive Director and the Executive of the Board. The appeal process may be done over the phone. All decisions made by the Board are final.

## **Section 5.3**

### **VOLUNTEER POLICY**

**Date Issued:** September 3, 2003

**Distribution:** All Volunteers

#### **POLICY**

The Agency is committed to offer meaningful volunteer opportunities in our community. Volunteers will be treated with dignity and respect and receive recognition for their work.

#### **PROCEDURE**

- Volunteer opportunities
  - Volunteer opportunities identified by the Board or staff members will be posted at various locations, such as education institutions, with Volunteer Lethbridge, through the media
  - Volunteer opportunities will be tailored to meet the particular skills and expertise of volunteers
- Application procedure
  - Volunteer applicants will fill out an application form (found in Section 6).
  - Applicants interested in joining the Board of Directors will complete an additional application form (see Section 6)
  - Volunteer application forms will be reviewed by the Resource Coordinator and the Executive Director to determine whether the qualifications, skills and expertise of the applicant meets the requirements to fill a volunteer opportunity. Volunteer applicants will be informed within one week as to the status of their application.
  - Applications to join the Board will be reviewed by the Chair and/or Vice-Chair of the Board.
  - Interviews and Reference checks may be conducted as part of the application process.
- Orientation
  - All new volunteers will receive an orientation which includes at least:
    - Basic information about HIV/AIDS, Hepatitis C and Harm Reduction
    - Review of the Vision, Mission of the Agency and services provided;
    - Review of the TB and Other Communicable Diseases Policy
  - All new volunteers will sign an oath of confidentiality
- Job descriptions
  - Volunteers and their supervisors will agree on a job description.
  - For every volunteer position requiring more than 10 hours of work, or extending over a period longer than one week, the job description will be in writing and will be signed by both the volunteer and his/her direct supervisor.
- Tracking volunteer hours
  - The Agency is monitoring the number of volunteers involved in the agency and the number of volunteer hours.

- Volunteers are encouraged to record their volunteer hours and the tasks accomplished on a daily basis in the binder provided by the agency.
- Volunteer recognition
  - The work of volunteers will be recognised by the Agency in its newsletter, annual report and other relevant ways.
  - The Agency may occasionally organize volunteer appreciation events.