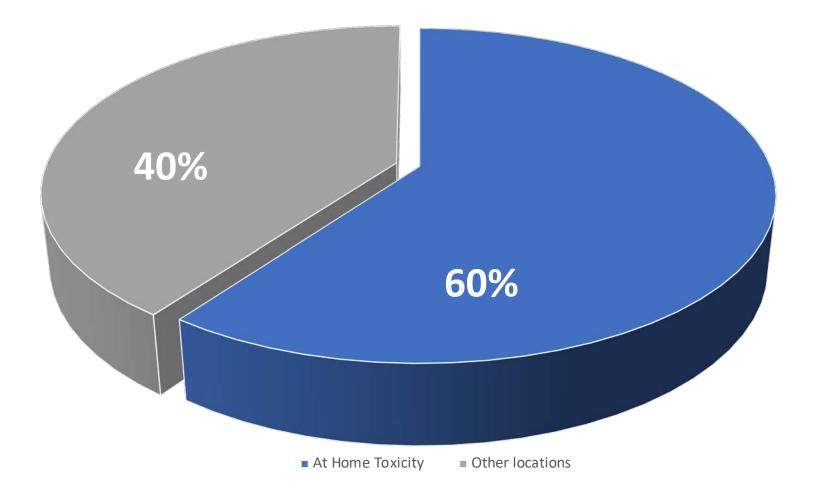
### NATIONAL OVERDOSE RESPONSE SERVICE



A Provider's Guide to the National Overdose Response Service (NORS) We acknowledge that this program is taking place on the unceded and traditional territories of thousands of First Nations, Metis, Inuit, and Indigenous First Peoples.

We also acknowledge that starting a 'national' phone line is fraught with political discrepancies and systemic racism beyond our ability to address at this moment. Our purpose is to provide a service to all who reside here so that no one needs to die from using drugs alone.

### **SOME BACKGROUND:**



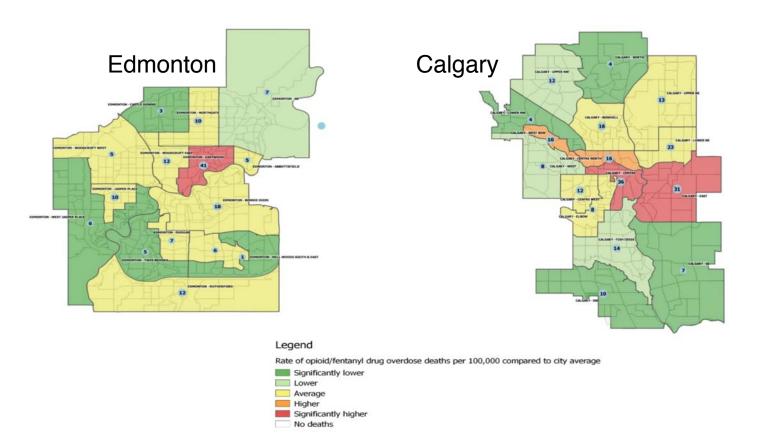
60% of Opioid Toxicities occur in someone's own home.

NATIONAL OVERDOSE RESPONSE SERVICE

N**P**RS

REFERENCE : Alberta Health. Opioids and Substances of Misuse. Alberta Report 2020 Q2.

Rural Communities and Suburban Communities are some of the hardest hit with the opioid crisis and make up the majority of overdoses



- Physical Supervised Consumption Sites are a primary tool to reduce mortality and overdoses in our communities, but they are only effective for 500 meters surrounding them
- The majority of overdoses occur outside of the red regions, with 80-90% of them occurring in suburban and rural communities

### **THE GOOD NEWS:**



### Opioid overdoses can be reversed using Naloxone



Supervised consumption services reduce mortality, but they have geographic limitations.

## **OUR SOLUTION:**



### NATIONAL OVERDOSE RESPONSE SERVICE (NORS)

This service is a toll free phone number you can provide to individuals who may be using substances alone.



### **HOW THE LINE WORKS:**

- Individual calls 1-888-688- NORS
- The caller is connected to a volunteer safe consumption supervisor who will stay on the line with the caller for 15-30 minutes as they use their substance.
- The volunteer supervisor will check on the client every 2-5 minutes
- The caller offers additional support should the caller require it.
- If the caller is unresponsive, 911 is called and dispatched to the clients home.

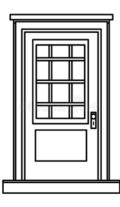
# THINGS WE TELL CLIENTS TO DO WHEN THEY USE THE LINE:



Keep your porch light on



Keep your pets away



Keep your front door unlocked



Hide your paraphernalia



### NORS' MISSION:

#### **Mission Statement:**

• To keep those who are using substances safe from overdose, while upholding the substance users right to dignity, respect and confidentiality while providing access to supportive resources.

#### **Primary Objective:**

Create a national overdose response service to support all Canadians and Indigenous Community members that use substances alone.

- This service will support clients as they use substances alone to mitigate the risk of overdose fatalities.
- Provide a stigma free safe space for clients to use substances.
- Dispatch emergency resources to support the client where required.
- Reduce the impact of the opioid crisis on individuals who use alone.
- Provide linkage to additional care, services, and resources as required by the client.

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## **BARRIERS THIS SERVICE REMOVES**

- Geographic Distance barriers for clients to reach a supervised consumption service.
- Stigma and fear of being seen concerns for individuals worried about going to supervised consumption services.
- Time barriers as this service provides additional options for clients near SCS sites with limited hours of operations



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# **OUR TARGET POPULATIONS**

- ✓ Individuals who use Substances alone.
- English and French speaking individuals (although we will accommodate all languages if we can).
- ✓ Urban, Suburban, Rural communities.
- ✓ Blue Collar Workers
- ✓ Indigenous Communities

#### Others who may indirectly benefit:

- Front line service providers working with individuals who use substances.
- Community based agencies who support individuals who use substances.
- Families of individuals who use substances.



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# WHERE WILL WE PROVIDE THE SERVICE?



The service is provided across all 10 provinces and 3 territories in Canada





### WILL PEOPLE USE THE LINE?

- One study (N=30) demonstrated that 68% of substance users who have a personal cell phone or landline would be willing to use virtual service provision during their consumption.
- 43% preferred to use alone and over 80% reported using alone over the last 7 days.
- 20% of individuals stated they feel safer using alone than with others.
- 53% reported that convenience was a significant reason as to why they used alone.

Tsang VWL, Papamihali K, Crabtree A, Buxton JA. Acceptability of technological solutions for overdose monitoring: Perspectives of people who use drugs. Subst Abus. 2019 Oct 28:1-10. doi: 10.1080/08897077.2019.1680479. Epub ahead of print. PMID: 31657675.

# **OUR VOLUNTEERS AND OPERATORS**

- Our organization operates from a Trauma Informed Framework.
- Our phoneline operators are well versed in:
  - Mental Health First Aid and Trauma informed care.
  - Mindfulness Training
- What we provide our operators:
  - Emotional Support and Overdose Debrief through our Virtual Staff Room.
  - Mindfulness Support

NVRS

# **KEY PIECES TO THE PROGRAM**

#### 911 Dispatch Services

- Canada has one of the best interconnected 911 dispatch services in the world.
- Accommodations are made to support individuals in rural communities when EMS call response times are not conducive to saving someone from overdose fatalities.

#### Liability

- The National Overdose Response Service is protected by each province's variation of the Good Samaritan Act as well as the Federal Good Samaritan Act.
- Legal review was conducted by Grenfell's legal team to ensure liability protection.
- Insurance was obtained to protect the agency and volunteers.

#### Peer Run and Driven

• Its **KEY** to have peer knowledge and experience centered in supporting people who use drugs.



### **KEY GOALS FOR NORS:**

#### Improve patients' & families' experiences

Patients have an alternative option using technology.

#### Improve patient & population health outcomes

Reduce morality due to opioid use disorder in hard to access communities

### Equitable financial health & value for money

Estimated cost of proposed intervention is proportional to the cost of physical supervised consumption services but services a different demographic.

#### Improve provider experience

Allows another opportunity for engagement in addiction counselling and added resources for care providers

# INFORMATION WE COLLECT DURING THE CALL

We collect the Following Information on the Clients, many of which are deleted post call.

- First two initials of first name, first two initials of last name, and date of birth.
- Address of the client.
- Substance used and route
- Safety plans if a client does not want 911 dispatched



IONAL OVERDOSE RESPONSE SEE

### HOW TO USE THIS SERVICE FOR YOUR CLIENTS

- Much like a naloxone kit, provide our NUMBER and WEBSITE to all your clients who may be using substances ALONE.
- 2. Tell them about how to use the service and how it works.
- 3. Encourage them to not to use alone where at all possible.



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## WHERE TO PROVIDE THIS NUMBER?

- 1. Any Addiction Clinic, Opioid Agonist Treatment Program
- 2. Intravenous hydromorphone or safe supply programs.
- 3. Supervised Consumption Sites
- 4. Harm reduction outreach programs.
- 5. Residential Treatment Programs or Detox Programs post discharge.
- 6. Individuals leaving corrections with a history of substance use.
- 7. Acute Care Centres, Emergency Departments and EMS Services.





## WHO CAN PROVIDE THIS NUMBER?

### ANYONE



Family and Friends



Physicians



**Outreach Workers** 



Pharmacists



Police and Corrections Services



Nurses



Counsellors & Social Workers



# LIMITATIONS OF THE SERVICE



• Individuals who may be drowsy but not overdosing may have emergency services dispatched for them if they do not respond to prompts.



 For some jurisdictions in the country, police may come to the call out. This may be problematic if a client has a warrant for their arrest or children.



• Paraphernalia may be confiscated by police services if they come.



Some people can overdose quite quickly and emergency services may not arrive in time.



# WHAT NORS DOES WELL:

- 1. Support our volunteers
- 2. Prove online training modules for onboarding our volunteers
- 3. Provide continuous education around substance use
- 4. Connect with our community
- 5. See the big picture of each unique individual we work with



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# WAY'S TO SUPPORT US

- We're looking for volunteers who are harm reduction educated and trauma informed
- As a not for profit organization, we always accept donations to keep the service going.
- Spread the word about our service with your partners and community providers through word of mouth, social media, or other streams.



### A BIT MORE INFORMATION ABOUT US...

### NORS is a collaboration between:









Grenfell Ministries Hamilton, Ontario BRAVE Technologies Co-Op Vancouver, British Columbia. Dr. Monty Ghosh Assistant Clinical Professor Calgary and Edmonton. Alberta

### **QUESTIONS:**

For More Info or General Inquiries Email: weloveyou@nors.ca WEBSITE: <u>WWW.NORS.CA</u>

For Questions Regarding BRAVE Technologies Co-Op Email: Gordon Casey: gordon@brave.coop

Oona Krieg: <u>oona@brave.coop</u>

For Questions Regarding Grenfell Ministries:

Rebecca Morris Miller: rebeccamm@grenfellministries.org

Kim Ritchie: kim.ritchie@grenfellministries.org

For Clinical Questions or Evaluation/Research Questions email:

Dr. Monty Ghosh: smghosh@gmail.com

NATIONAL OVERDOSE RESPONSE SERVICE

NO JUDGEMENT. JUST LOVE.

### 888 688 NORS (6677)





Canada's First Remote Safe Consumption Line Available 24 Hours



For more information visit www.nors.ca