



# **HARM REDUCTION PROGRAM**

## ***Policies & Procedures***

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## Section 1: Statement of Commitment to Harm Reduction

*Date Approved: January 26, 2017*

*Revised: May 29, 2019*

### 1.1 Statement of Commitment

Harm reduction is a set of values and practical strategies that aim to meet people “where they are at” to help them reduce harm that may result from risk taking behaviour, such as drug use. Harm reduction accepts the reality that people can and will use drugs and engage in other activities that can cause them harm and works to minimize the harmful effects of these behaviours rather than ignore, condemn, or focus on ending the behaviour. Harm reduction seeks to empower people by providing information and techniques to minimize potentially negative impacts of risk taking behaviours. Harm reduction-based programs have been critical to HIV prevention efforts since the 1980s and continue to play an important role in reducing new HIV infections and promoting the long term health and well-being of people living with HIV/AIDS. Harm reduction is a core value of CAYR COMMUNITY CONNECTIONS (CAYR) and we are dedicated to ensuring that harm reduction principles are integrated in all aspects of our programming.

Our role as service providers working from a harm reduction framework includes:

- Recognizing that drug use, sex and other activities that may cause harm are not inconsistent with seeking to improve one’s health or the health of drug sharing and sexual partners.
- Respecting the autonomy and choices of people we support and working with them to find the best strategies to improve their health.
- Providing services that are non-judgmental, non-coercive and based in the best available scientific evidence.
- Engaging all individuals who access our services with respect and empathy.

CAYR affirms people who engage in risk taking behaviour have as equal a right to our services and programs as people who do not. People engaging with CAYR will be treated with dignity and respect, and services will be offered in a non-judgmental, non-coercive and equitable manner. We recognize that substance use and other risk taking behaviour may, at times, be a barrier to a person benefiting fully from CAYR’s programs and services. CAYR’s response will remain person-centered and we will engage and involve individuals in these situations to deliver services that support their overall health and well-being.

CAYR recognizes that people who use drugs have been at the forefront of developing harm reduction practices and will continue to play a leading role developing effective programming to support people living with HIV/AIDS and to prevent new HIV infections. CAYR recognizes that

people who use drugs bring valuable experience to the agency and will do its best to support those who have used or do use drugs to be full participants within our agency as clients, staff, and board members.

CAYR will support ongoing training on harm reduction practices for all staff, volunteers and board members in order to ensure that harm reduction is consistently and effectively implemented within the agency. CAYR will create an environment where access to training programs and up to date information on harm reduction practices and HIV and STBBI prevention is easily accessible.

## 1.2 Context/Background

- Harm reduction is a broad term to define health interventions that acknowledge harm related to drug use and other activities and seek to empower people by giving them the tools to minimize the potentially negative impact of these activities. While harm reduction is defined and operationalized in a variety of ways, these definitions broadly include a willingness to work with people without requiring abstinence from drug use, a focus on person-centered care, and the provision of evidence-based information and practical solutions to reduce possible negative health outcomes related to drug use and other behaviour.<sup>1,2</sup>
- While practices that fit within the definition of harm reduction existed before the term was coined, it wasn't until the 1980s that harm reduction became a major focus of health promotion programs. The emergence of HIV and Hepatitis C highlighted the limitations of abstinence-based programs to engage active drug users and created a need for alternative strategies to support people who use drugs. Practical measures like avoiding sharing needles and providing needle exchange were initiated at the community level first before eventually being incorporated into agency and governmental responses to HIV. In Canada, the earliest harm reduction programming included needle exchange programs established in Toronto, Montreal and Vancouver in the late 1980s and the inclusion of harm reduction principles in the national drug strategy in 1987.<sup>3,4</sup> Harm reduction programming has since expanded to include a

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<sup>1</sup> CATIE. (2011). Hepatitis C: An In-Depth Guide: Harm Reduction. Retrieved May 9, 2016, from

<http://www.catie.ca/en/printpdf/practical-guides/hepc-in-depth/prevention-harm-reduction/harm-reduction>

<sup>2</sup> Centre for Addiction and Mental Health. (2002, May). CAMH and Harm Reduction: A Background Paper on its Meaning and Application for Substance Use Issues. Retrieved May 9, 2016, from

[http://www.camh.ca/en/hospital/about\\_camh/influencing\\_public\\_policy/public\\_policy\\_submissions/harm\\_reduction/Pages/harmreductionbackground.aspx](http://www.camh.ca/en/hospital/about_camh/influencing_public_policy/public_policy_submissions/harm_reduction/Pages/harmreductionbackground.aspx)

<sup>3</sup> Cavalieri, W., & Riley, D. (2012). Harm Reduction in Canada: The Many Faces of Regression. In R. Pates & D. Riley (Eds.), *Harm Reduction in Substance Use and High-risk Behaviour: International Policy and Practice*. London: Wiley-Blackwell.

<sup>4</sup> Canadian Nurses Association. (2011, March). *Harm Reduction and Currently Illegal Drugs: Implications for Nursing Policy, Practice, Education and Research*. Retrieved May 9, 2016, from [https://www.cna-aic.ca/~media/cna/page-content/pdf-en/harm\\_reduction\\_2011\\_e.pdf](https://www.cna-aic.ca/~media/cna/page-content/pdf-en/harm_reduction_2011_e.pdf)

variety of practices such as safer injection, smoking and snorting resources, supervised injection services, opioid replacement therapies and overdose prevention medications.<sup>3, 4</sup>

- In addition to informing programming related to drug use, harm reduction has also been at the core of sexual health promotion since the HIV epidemic began. Harm reduction in relation to sexual health, also referred to as risk reduction, has similarly been driven by those most affected by HIV. This can be seen in the activism of gay and bisexual men to promote condoms as a prevention tool in the 1980s and efforts to get access to Pre-Exposure Prophylaxis (PrEP) in the 2010s. A number of harm reduction based tools and strategies for preventing HIV transmission have emerged since the 1980s including multiple forms of barrier prevention, PrEP, Post-Exposure Prophylaxis (PEP), undetectable viral loads, and engaging in sex with lower probability of HIV transmission.<sup>5</sup>
- Harm reduction programs have often faced challenges despite their results. Cultural attitudes towards people who use drugs and towards sex have often framed harm reduction as encouraging negative behaviour rather than promoting health.<sup>3, 4, 6</sup> Ongoing criminalization of drug use and people who use drugs reinforces views of drug use as inappropriate. Regardless, harm reduction programs have been remarkably effective at maintaining individual health and preventing new HIV and Hepatitis C infections. A 2006 review of global research on the effectiveness and efficacy of harm reduction programs related to drug use found that individual harm reduction programs are effective at a community level, and harm reduction “provides an overarching framework for global drug policies.”<sup>6</sup> In the Canadian context, a review from the Canadian Nurses Association highlighted positive outcomes of harm reduction programs including reductions in transmissions of blood borne infections, overdoses, and overall use despite inconsistent funding and challenges from outside groups.<sup>4</sup>

### 1.3 Principles

CAYR upholds the following core principles as they apply to providing harm reduction-based services:

- Our role as an agency is to **raise awareness about HIV/AIDS and provide support and access to dignified care for people living with, affected by, and at risk of HIV/AIDS;**

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<sup>5</sup> Wilton, James. (2015). HIV prevention within serodiscordant couples: A changing paradigm. Retrieved May 9, 2016, from <http://www.catie.ca/en/pif/spring-2015/hiv-prevention-within-serodiscordant-couples-changing-paradigm>

<sup>6</sup> Ritter, A., & Cameron, J. (2006). A review of the efficacy and effectiveness of harm reduction strategies for alcohol, tobacco and illicit drugs. *Drug and Alcohol Review*, 25(6), 611-624.

- Harm reduction principles are congruent with our role because they emphasize **person-centered care and the dissemination of evidence based health information;**
- Harm reduction-based programs are **effective as a means of preventing HIV and supporting the health of people living with and at risk of HIV/AIDS;**
- As such, our agency is dedicated to **integrating harm reduction principles in all aspects of our programming.**
- We recognize that drug use, sex and other **activities that may cause harm are not inconsistent with seeking to improve one's health** or the health of drug sharing and sexual partners;
- We acknowledge that the **decisions that people make about their drug use, sex and other activities that may cause harm are complex**, and can be impacted by their experiences of poverty, classism, racism, homophobia, social isolation, past trauma, and other social inequities;
- Regardless of how and when these decisions are made, all people have a right **to make their own choices and to seek support when they need it;**
- We will **create a supportive environment for people who use drugs** to fully participate in our agency as service users, staff, board members and volunteers;
- We will continue to **provide non-judgmental services to people living with, affected by, and at risk of HIV/AIDS**, including people who use drugs.
- Where service users need support beyond our capacity, we will **make referrals and strengthen partnerships with** agencies that can meet service users' identified needs;
- People engaged with CAYR who currently use drugs or disclose past history of drug use will receive support **to achieve goals they identify for themselves;**
- We recognize that **people who use drugs have and continue to play a critical role** in developing and implementing harm reduction programming;
- **The Greater/Meaningful Involvement of People Living with HIV/AIDS (GIPA/MIPA)** will be reflected in our Harm Reduction policies, practices and programming.

## Section 2: Service Delivery Framework

*Date Approved: May 29, 2019*

*Revised:*

### 2.1 Purpose

CAYR's harm reduction program works with people who use drugs to reduce their risk of HIV, Hep C and other blood-borne infections and to improve their access to health and human services in York Region.

### 2.2 Goals

- To empower people who use drugs to make informed decisions about their health, including decisions regarding safer drug use and safer sex;
- To provide opportunities for people who use drugs to access stigma-free and non-judgemental support related to their self-determined health and wellness goals;
- To provide opportunities for people who use drugs to access harm reduction supplies, including new needles/syringes and other drug use equipment; and
- To ensure that our services are defined by the on-going participation, advice and expressed needs of people who use drugs.

### 2.3 Philosophy of Service Delivery

- People can achieve their aims by ensuring that they are directly involved in the decisions that affect their lives, and in the organizations that serve their needs.
- People must have accurate information and compassionate support that will enable them to make informed choices about their own health and wellness.
- Information and services must be provided in a stigma-free and non-judgemental manner that is respectful of human diversity.
- CAYR must be accountable to the communities in which it is rooted. We strive to include the full diversity of people who are living with and affected by HIV/AIDS, including those who use drugs.

All service users will be treated with respect and dignity at all times. Staff and volunteers will provide services in the least intrusive manner possible, respecting personal choices and the right to self-determination of those who access our services and programs.



## Section 3: Service User Policies

*Date Approved:* May 29, 2019

*Revised:*

### 3.1 Service User Rights and Responsibilities

#### Policy

CAYR strives to ensure that every service user is treated with dignity, respect, consideration, privacy and opportunities to participate. In order to achieve this, CAYR commits to upholding the following rights for our service users, and we expect service users to adhere to the following responsibilities.

#### Rights

Service users at CAYR have the right to:

- Have their **privacy respected** and **personal information kept confidential**
- **Be treated with consideration and respect** for their personal **dignity and autonomy**;
- **Receive services** for which they are eligible **without discrimination** based on race, ancestry, citizenship, creed, place of origin, ethnic origin, colour, religion, sex, sexual orientation, gender identity, gender expression, marital status, same sex partnership status, family status, age, record of offences, substance use, participation in sex work, and mental or physical disability;
- **Receive full and accurate information about services** that CAYR offers;
- **Receive communication** from CAYR in a way **that is accessible and understandable**;
- **File a complaint** about their relationship with CAYR without retribution, using a procedure that has been explained, is accessible, and that receives a response in writing in a timely manner;
- **Refuse or terminate services** without consequence or retribution.

#### Responsibilities

Service users at CAYR are expected to:

- **Support** the mission, values and strategic plan and philosophy of CAYR;
- **Comply** with applicable laws, regulations and organization policies and procedures;
- Foster an organizational environment rooted in **trust and respect, ethical conduct, and open communication**;
- Recognize that staff carry out work duties and conduct work relationships with **integrity, honesty and fairness**;
- **Be honest, cooperative, and courteous** in their interactions with staff, volunteers, and other service users;
- **Be accurate** in any reported information, including **timely reporting of any changes** that may impact their eligibility for services;
- **Take responsibility for their choices** and the results of any decisions they make;

- **Refrain from any abusive, threatening, discriminatory or violent language and behaviours;** and
- **Request assistance** when needed.

### **Purpose**

The purpose of this policy is to outline the rights and responsibilities of CAYR's service users.

### **Scope**

This policy applies to all service users of CAYR.

### **Responsibility**

It is the responsibility of support staff doing intake to ensure that service users have reviewed, understand, and agree to the Service User Rights and Responsibilities.

### **Definitions**

**Service User:** A person living with, affected by, or at risk of HIV/AIDS, who accesses services at CAYR.

### **References and Related Policy and Procedure**

Complaints Policy & Procedure

Code of Conduct Policy & Procedure

Anti-Harassment Policy & Procedure

### **Procedure**

During intake and registration, staff will explain to service users their rights and responsibilities, and will answer any questions posed by service users. By continuing to access services at CAYR, service users are indicating their agreement with this policy.

The *Service User Rights and Responsibilities Policy* will be posted in a public area of the organization, so that it is visible to service users and visitors on-site.

If a service user believes that their rights have been violated, they should proceed with filing a Complaint (see *Complaints Procedure*).

If a service user is believed to have violated this agreement, they will be informed that this violation has occurred. Depending on the severity of the violation, a service user may be subject to the corrective action, including any, or all, of the following:

- A verbal warning;
- A written warning; and
- Suspension or termination of services.

### **Attachments**

Complaint Form

## 3.2 Code of Conduct

### Policy

CAYR is committed to providing information and services to service users in a welcoming, comfortable and safe environment. This policy outlines expectations for behaviour from anyone on CAYR premises or at CAYR community events.

### Conduct Rules:

- Service users and visitors to CAYR will help maintain a safe, welcoming environment for themselves and others.
- Confidentiality of personal information shared must be maintained. Anything you see, hear or do at CAYR must stay here. All service users who participate in agency socials groups or gatherings will be required to sign a *Peer Confidentiality Agreement*.
- Offensive, threatening or otherwise unwanted behaviour is unacceptable.
- Smoking cigarettes, cannabis, e-cigarettes, or vaporizers is not permitted at any time on the premises.
- The consumption of alcohol, cannabis or other drugs is not permitted at any time on the premises.
- It is not acceptable to ask staff or volunteers (including Board members) for a loan or donation (except in the context of a specific fundraising drive or program where staff will ask you for your request, such as the Compassion Fund).
- No illegal activities will be tolerated on the premises, including the sale, or purchase of tobacco, alcohol, cannabis, or other drugs.
- Physical or verbal violence, discrimination, harassment or bullying including threatening gestures and actions, stalking and sexual harassment will not be tolerated, including unwanted touching, kissing, hugging, or cruising. This also includes abusive language and behaviours that are sexist, racist, homophobic, transphobic, ableist, HIV/AIDS-phobic, offensive to a person's religion, offensive to people who use drugs and/or participate in sex work, and/or threatening, including hurtful remarks of any kind, or excessive profanity directed towards anyone.
- CAYR is a sex-positive organization, and intends to create space for open and non-judgmental discussions about sex, sexuality and sexual health. At times, CAYR programming will involve sexually explicit content, with the aim of promoting and supporting sexual health and informed sexual decision-making. When not used for this purpose, sexually suggestive, explicit, derogatory or aggressive comments or behaviour is not acceptable.
- No weapons are allowed on the premises. The term weapon can be defined as any object that is intended to, wielded as, or suggested to be used to cause harm or injury to the body.
- No goods or services may be sold on the premises.

- The equipment and property within CAYR and the space it shares are for the mutual benefit of the staff members, volunteers and service users. All property and equipment must be treated with care, and remain on the premises at all times.
- CAYR cannot store any personal possessions or property.
- CAYR assumes no responsibility for any lost, stolen or damaged goods. Please take care of your own belongings and wherever possible do not bring items of value to CAYR.

**Inappropriate conduct and behaviour includes but is not limited to:**

- Using obscene, offensive, or abusive language
- Spreading malicious gossip, rumours, or maligning others
- Harassing, threatening, intimidating, or coercing any person at any time
- Horseplay or throwing objects
- Any behaviour that interferes with, or is disruptive to, programming or others in attendance
- Creating or contributing to unsanitary conditions

**Unacceptable conduct or behaviour includes but is not limited to:**

- Disclosing private information of others
- Possession of guns, weapons or explosives on CAYR premises or at CAYR events
- Possession or use of alcohol, non-medicinal cannabis, or illegal substances while on CAYR premises or at CAYR events
- Wilful violation of safety rules and procedures
- Theft
- Fighting
- Vandalism or intentional damage to CAYR property or facilities
- Assault

**Purpose**

Conduct Rules are in place to ensure safety for all individuals including: service users, staff, volunteers (including Board members), and visitors. CAYR is serious about maintaining safety and comfort for all those involved with CAYR.

**Scope**

This policy and procedure applies to all services users and visitors at CAYR.

**Procedure**

Breaking these Conduct rules may be grounds for any, or all, of the following:

- A verbal warning;
- A written warning;
- Request to leave;
- Calling the police;
- Suspension or termination of services.

When possible, and depending on the seriousness of the incident, staff who has reason to believe that a service user or visitor has violated the Code of Conduct will speak privately with the individual about the incident. Staff will explain why the conduct is not acceptable; indicate how the conduct needs the change or stop; and give the service user or visitor the opportunity to correct the behaviour.

Any service user or visitor who is disruptive and/or, who is reasonably believed to have broken one or more of the rules laid out in this policy, may be asked to leave. Staff members have ultimate discretion around whether it's possible to issue a warning before asking a person to leave the premises.

**Any person, having been asked by CAYR staff to leave the premises, shall leave immediately. If the person still does not leave, the police may be called under the *Trespass to Property Act, R.S.O. 1990, c. T.21*.**

Depending on the severity, breaking the conduct rules may also result in the person being banned from CAYR premises for a specific and limited time, or indefinitely.

If a service user or visitor is denied service or banned from CAYR for any length of time, they will be advised as to what would be required for them to be allowed to return. Whenever possible, the service user will be provided with a referral to another appropriate service or resource.

Anyone who believes that the rules have been unfairly applied, or who objects to the rules themselves, has the right to complain under the *Complaints Policy* and must follow the *Complaints Procedure* included in this Manual.

### 3.3 Anti-Harassment

#### Policy

CAYR is fully committed to providing an environment free from discrimination and harassment for service users, staff, volunteers (including Board members) and visitors. Our commitment includes procedures designed to prevent and/or resolve discrimination and harassment on our premises or at any of our events. To further this goal, CAYR does not condone and will not tolerate acts of discrimination or harassment against or by any of its service users, staff members, volunteers, or other third parties.

Every service user has a right to freedom from:

- Harassment while visiting CAYR premises or events;
- Discrimination because of race, ancestry, citizenship, creed, place of origin, ethnic origin, colour, religion, sex, sexual orientation, marital status, gender identity or

expression, same sex partnership status, family status, age, record of offences, method of income, substance use experience, participation in sex work, and mental or physical disability;

- Harassment by a person who has a personal relationship with a service user, volunteer or staff - such as a spouse, a former spouse, current or former intimate partner, or family member;
- Harassment by other service users;
- Sexual solicitations or advances made by a person in a position to confer, grant or deny a service or benefit to the service user, where the person making the solicitation or advance knows or ought reasonably to know that it is unwelcome;
- A reprisal or a threat of reprisal for the rejection of a sexual solicitation or advance where the reprisal is made or threatened by a person in a position to confer, grant or deny a service or benefit to the service user;
- It is also a violation of CAYR's *Anti-Harassment Policy* for anyone to knowingly make a false complaint of harassment or to provide false information about a complaint. Individuals who violate this Policy are subject to corrective action, up to and including, termination of services.

### **Purpose**

The purpose of this policy is to eliminate and minimize the risk of discrimination and harassment that service users may experience or witness in the delivery of CAYR programs and services and/or at the CAYR premises and events.

### **Scope**

This policy applies to all services users and visitors at CAYR.

CAYR will not tolerate discrimination or harassment whether engaged in by service users, volunteers (including Board members), staff members, or visitors to the organization.

This commitment applies to wherever CAYR's business is conducted (whether or not this is at its physical location or not) and at all CAYR events.

### **Responsibility**

All CAYR service users, visitors, volunteers, and staff, are personally accountable and responsible for following this policy. CAYR is responsible for ensuring that the anti-harassment principles within this policy are developed, promoted, and implemented through training, the provision of information and other means. The management team is responsible for ensuring that the procedures within this policy are followed. The Communications & Operations Manager fills the role of the Workplace Coordinator (as per the Occupational Health and Safety Act, 70[2]) and is responsible for maintaining all documentation related to health and safety anti-harassment practices.

## Definitions

**Discrimination:** Discrimination is differential treatment on the basis of any of the following protected grounds: race, ancestry, citizenship, creed, place of origin, ethnic origin, colour, religion, sex, sexual orientation, marital status, gender identity or expression, same sex partnership status, family status, age, record of offences, method of income, substance use experience, participation in sex work, and mental or physical disability.

**Harassment:** A course of vexatious comments or conduct that is known or should reasonably be known to be unwelcome;

### **Harassment includes, but is not limited to the following:**

- Unwelcome remarks, jokes, gestures, innuendos, slurs or taunting about a person's race, ancestry, citizenship, creed, place of origin, ethnic origin, colour, religion, sex, sexual orientation, marital status, gender identity or expression, same sex partnership status, family status, age, record of offences, method of income, substance use experience, participation in sex work, and mental or physical disability;
- Unwelcome sexual remarks, invitations or requests, whether indirect or explicit (including persistent, unwanted contact after the end of a consensual relationship);
- Display of posters or literature which are racially charged, sexually inappropriate, or of an otherwise offensive nature;
- Refusal to provide services to or receive services from, or converse with a person because of race, ancestry, citizenship, creed, place of origin, ethnic origin, colour, religion, sex, sexual orientation, marital status, gender identity or expression, same sex partnership status, family status, age, record of offences, method of income, substance use experience, participation in sex work, and mental or physical disability;
- Imitation of a person's accent or mannerisms;
- Condescending, paternalistic or patronizing behaviour that undermines self-respect or dignity;
- Vandalism;
- Abuse of authority which undermines performance, threatens career or causes intimidation;
- Assault.

### **Harassment does not include:**

- Good-natured jesting and bantering which is mutually acceptable; or
- Appropriate direction, feedback, or correction by a staff member, volunteer, or third party delivering services.

## References and Related Policy and Procedure

Human Rights Code, R.S.O. 1990  
Anti-Racism Act, 2017, S.O. 2017

Ontarians with Disabilities Act, 2001, S.O. 2001  
Occupational Health and Safety Act, R.S.O. 1990

### **Procedure**

There are various steps to attempt to resolve complaints under this policy:

#### **Informal Resolution**

Wherever possible, individuals experiencing discrimination and/or harassment are to take the following actions: Inform the person (in writing, by e-mail, telephone, fax or in person) who is harassing or discriminating against them, that their behaviour and/or action is unwelcome and should stop. Often this will resolve the situation. Keep a record of the incident, including the time, location, people present, etc. At this stage, there is not technically a complaint so that there is not a formal record of the informal attempt at resolution. Staff will however, note the date time of the occurrence, the parties involved and the informal resolution arrived at or agreed upon.

#### **Formal Resolution**

Individuals should consult with an internal advisor (such as a staff member), if necessary, for assistance in resolving issues of harassment and discrimination. Advisors can assist all service users by outlining options for remedy, helping with the implementation of a remedy and helping with documentation of a complaint for investigation. Where attempts to achieve an informal resolution of the problem are unsuccessful, or where the individual feels unable to bring the matter directly to the attention of the alleged respondent, a formal complaint may be filed. If the complaint is about the conduct of a CAYR staff member, a Board Member, a student or a volunteer, the complainant shall promptly make a verbal or written complaint to the Executive Director. A written statement of complaint must follow an oral complaint.

CAYR will do its best to protect from unnecessary disclosure the details of the incident being investigated and the identities of the complaining party and that of the alleged respondent.

**If the complaint is first raised with a staff member, then the staff shall notify the Executive Director immediately.**

The Executive Director shall promptly interview the complainant to document the details of the complaint, what remedy the complainant is seeking and what process under this policy the complainant wishes to pursue. The Executive Director shall then interview the respondent to document their perspective of the events and ascertain what process under this policy the respondent wishes to pursue. The respondent shall be provided with a copy of the policy, the complaint and be given an opportunity to respond in writing.

#### **Formal Resolution through Mediation**

If the Executive Director and the parties consider that mediation is appropriate, the Executive Director, or designate, shall ascertain whether the parties prefer an internal or an external



mediation process. If they do not agree, then the mediation will be external. Mediation can be arranged prior to, or during an investigation.

### **Formal Resolution through Investigation**

If the Executive Director decides that mediation is not appropriate, or, if mediation did not result in a satisfactory resolution, then an investigation of the complaint may be conducted. The investigation may be conducted by the ED or by an external investigator.

If the Executive Director conducts the investigation, the Executive Director shall do so promptly and decide whether or not the complaint is upheld or dismissed, and shall implement what remedy or corrective action they deem appropriate in the circumstances.

A complaint made in bad faith is one that has absolutely no basis and is deliberately and maliciously filed. In the rare event that the mechanisms in this policy are abused, corrective action may be imposed.

### **Complaints against the Executive Director**

Where the complaint involves the conduct of the Executive Director, the concerned individual shall immediately report the incident to the Board. The Board of Directors shall assume the responsibilities of the Executive Director under this policy and have carriage of the complaint process. The procedures and timelines apply to complaints against the ED and the processes to be followed shall be the same as when the Executive Director has carriage of the complaint, with necessary changes.

### **Complaints against a Board Member**

Where the complaint involves the conduct of a Board member, the complainant shall immediately report the incident to the Executive Director. The Board member shall not participate in discussions relating to the complaint, except as a respondent under this policy. The Board of Directors (or the Executive Committee) shall assume the responsibilities of the Executive Director under this policy. The procedures and timelines apply to complaints against a member of the Board and the processes to be followed shall be the same as when the Executive Director has carriage of the complaint, with necessary changes.

### **Corrective Action**

In the case where harassment is determined to have taken place, corrective action shall be taken, including any, or all, of the following:

- A verbal warning;
- A written warning; and
- Suspension or termination of services.

### **Appeals**

If either the complainant or the person named in the complaint is not satisfied with the resolution of the complaint, the individual may appeal the decision, in writing, to the Executive

Director, or to the Board of Directors in the case of a complaint against the Executive Director. An appeal decision will be provided within 14 calendar days.

### 3.4 Trans-Inclusion Policy

CAYR aims to promote a climate that affirms, nurtures and includes trans people in all aspects of the organization. CAYR is committed to creating a social and physical environment that is welcoming, comfortable, affirming and safe for trans people by increasing the range of social and physical resources available for trans and non-trans service users, staff members and volunteers. CAYR will ensure that all service user orientations will include content regarding trans people.

#### Policy

People have an internal sense of gender that may or may not conform to their physical sex and they also have a sense of how they wish to express it. This policy honours the choices of individuals in both these areas. While there are many different identity terms that people may choose to use, for ease of use, this document will use the term 'trans' throughout.

#### Scope

This policy applies to all service users, visitors, staff, and volunteers (including Board members).

#### Responsibility

All service users, staff, volunteers and visitors are responsible for following this policy. Staff is responsible for ensuring that the procedures laid out in this document are followed.

#### Definitions

Definitions and identities used here are evolving and describe evolving concepts. People scribed by these terms may or may not accept them:

- **Gender identity:** Gender identity is the self-defined sense of oneself as woman or man, feminine or masculine, both or neither.
- **Gender expression:** Gender expression is the way one expresses one's self-defined gender identity
- **Two Spirit:** Prior to colonization, various First Nations communities viewed gender as a continuum between masculine and feminine. This continuum is reflected in the person's intellectual, emotional, physical and spiritual self place within themselves and their community. Today some Indigenous people identify with Two Spirit as meaning gay, lesbian, bi, trans, intersex, seeking and questioning individuals. Overall, this term brings together people who walk with a balance of male and female energy and honours the gift that that brings.

#### References and Related Policy and Procedure

Complaints Policy & Procedure

Code of Conduct Policy & Procedure

## Anti-Harassment Policy & Procedure

### Procedure

#### **Eligibility for services and participation in the organization**

Being trans is not in any way related to an individual's eligibility for services, volunteering, or employment. CAYR will provide trans service users with the same access to services as all other service users in accordance with their gender identity / expression. In the case of gender-specific/segregated programming, trans people will be granted access to the program that fits most closely with their identity. For people with non-binary gender identities, they will be granted access to the program that feels most appropriate and comfortable for them.

#### **Social Environment**

CAYR expects all its service users to refer to trans people by the name and gender pronoun they identify with. In the case where someone's pronoun is unknown, gender pronouns are to be avoided until there is an opportunity to discretely ask for clarification. Gender-neutral or non-traditional pronouns (such as they/them or ze/zir) shall also be respected. Misgendering someone by refusing to use the correct name and/or pronoun is a form of harassment, and shall be addressed through the procedure laid out in the *Anti-Harassment Policy and Procedure* contained in this manual. CAYR encourages service users to increase their knowledge and understanding of trans issues, and endeavours to create opportunities for this learning, when possible.

#### **Education, Outreach & Support Services**

CAYR is committed to a trans inclusive and trans positive approach in all its public education and outreach programs in addition to linking with partners and advocating for community-wide education on trans issues through its current and future association with all organizations appropriate to our mandate. CAYR will initiate and maintain a trans inclusive, accessible and trans positive approach in all its support services programming.

### 3.5 Boundaries

#### **Policy**

CAYR encourages friendly relations between service users and staff members, volunteers, and Board members. However, due to the nature of the service delivery relationship, staff and volunteers delivering services are in a position of power over service users. CAYR staff and volunteers are therefore responsible for establishing and maintaining appropriate professional boundaries in order to maintain a safe environment for service users and themselves.

CAYR prohibits romantic and/or sexual relationships between staff and service users, as well as between volunteers and service users (including Board members). Other examples of professional boundaries include:

**Physical:** For some people, a hug may be a familiar greeting or welcome comfort and others may not be comfortable with it. It's important to ask for consent before engaging in physical touch – physical contact without confirmation that it is welcome is not permitted. CAYR encourages staff, volunteers and service users to practice asking before any type of physical touch, saying 'no' when touch is not wanted, and accepting a 'no' without hurt feelings. Staff and volunteers should not initiate any physical contact with service users and are responsible for limiting any physical contact.

**Sex:** Sexually charged comments, sexual jokes, and physical touch in a way that could be interpreted as flirtatious, discriminatory or harassing are prohibited. Questions about sexual history and experiences must be limited to HIV risk assessment or sexual health education contexts, and no questions shall be asked that are beyond what is required to provide adequate sexual health information.

**Gifts:** Staff and volunteers cannot accept gifts from service users. This includes money, gift cards, holiday gifts, or any other gifts of any value. Giving gifts creates opportunities for inequality between service users. Staff and volunteers may also not offer gifts to service users. The gifting of tobacco is seen as an established Indigenous cultural practice and therefore is not restricted by this policy.

**Hospitality/Property:** Staff and volunteers are only to visit the homes of service users as part of a CAYR-sanctioned service or program, such as the case management home visits or the Drive to Care program. Staff and volunteers are not able to accept or offer sleeping arrangements for service users. Staff and volunteers may not borrow, hold, or use personal property belonging to a service user.

**Personal Information:** Staff and volunteers may not provide personal information, such as phone number, email and home address, to service users.

**Social Media:** Staff and volunteers are not able to add service users on personal social media accounts. In cases where staff or volunteers and service users are already connected on social media, or in cases where interaction on social media is part of the role or program, the sharing of personal information or opinions on those pages is to be limited.

**Gossip:** Gossip is divisive and unkind. It is not appropriate for staff or volunteers and service users to participate in any gossiping, whether it is related to CAYR's programs and other services users, or not.

**Outside Ventures:** Staff and volunteers may not enter into any business ventures with service users. Staff and volunteers may not hire service users for any work or service, and they may not perform any service outside of their role at CAYR, whether for financial remuneration or not.

**Favouritism:** The relationship between staff or volunteers and service users is one of service delivery. Everyone receiving services at CAYR deserves fair and equitable treatment. Acts, gestures or words that suggest favouritism are not permitted.

**Transportation:** Staff and volunteers are unable to transport service users or visitors in their personal vehicles. If transportation support is needed, service users are to be referred to the CAYR Transportation Support policy.

**Self-Disclosure:** Self-disclosure can be a useful tool in supporting someone with a shared experience. This has proven to be particularly useful when it comes to self-disclosure of HIV status and experiences with substance use and addictions. Appropriate self-disclosure may include personal statements about a staff or volunteer, which are intended to build trust, demonstrate understanding, model, educate, and encourage autonomy. Personal information that is not shared for the purpose of developing a stronger professional relationship is not permitted. Any time there is uncertainty about what is appropriate, it is better to err on the side of caution and not disclose.

**Decision-Making:** Staff and volunteers are not in a position to be giving advice. When it is related to their role, staff and volunteers may offer information and support service users in making decisions, but are never permitted to make a decision for a service user, or try to sway their decision. This includes decisions around HIV-related care.

**Contact Outside of CAYR:** In order to maintain the confidentiality of our service users, staff and volunteers will not approach or greet service users in public settings or outside CAYR premises and events unless the service user approaches them first. An exception to this is if there is an existing friendship prior to the professional relationship. Staff and volunteers are not able to join service users when they see each other in shared social settings, such as at a bar or event.

### **Purpose**

The policy provides guidance on establishing and maintaining appropriate professional and personal boundaries between service users, and staff and volunteers, in order to maintain a safe service delivery environment.

### **Scope**

This policy applies to all service users, visitors, staff, and volunteers (including Board members).

### **Responsibility**

Staff and volunteers are responsible for maintaining appropriate boundaries in the CAYR environment and in any personal/professional relationship that originates in the CAYR environment. The Executive Director is responsible for receiving, evaluating, and investigating boundary issues, crossings and violations.

## **Definitions**

**Personal boundaries** are guidelines, rules or limits that a person creates to identify for themselves what are reasonable, safe and permissible ways for other people to behave around them, and how they will respond when someone steps outside those limits.

**Professional boundaries** are the implicit or explicit rules that separate a professional relationship and a personal one.

**Boundary issues** exist when boundaries are unclear and require resolving.

**Boundary crossings** are a definite slip in behaviour or action identified by one or more people considered a minor to moderate infringement. A boundary is crossed when a service provider initiates a behaviour or allows a behaviour to persist in a service user/staff relationship that compromises or sets a future course that compromises the service delivery relationship. The potential for boundary crossings relates directly to the service user's position of vulnerability in the relationship and when they occur, the relationship can become unbalanced and destabilized in favour of the service provider.

**Boundary violations** are the crossing of a personal/professional boundary in a professional context that is deemed serious i.e. can cause serious harm and must be aggressively managed or responded to. A boundary violation occurs when the nature of the service delivery relationship moves from being a professional relationship to also being a personal one.

## **References and Related Policies and Procedures**

Anti-Harassment Policy & Procedure

Code of Conduct

Code of Conduct Policy & Procedure

## **Procedure**

If any relationship develops that makes it difficult for a staff member or volunteer to remain objective and fulfill obligations as a service provider, they will immediately discuss the matter with their supervisor or the Executive Director. Depending on the severity, boundary crossings and violations may be cause for investigation and/or discipline.

If a service user believes that a professional boundary may have been crossed or violated, they shall report it directly to the Executive Director.

### 3.6 Record Keeping

#### **Policy**

Personal information about service users is collected to ensure consistent service delivery, to monitor and evaluate services and programs, and to report on our work to our funders. Service user records are stored confidentially in OCASE, the provincial database used to record and manage service user interactions at all HIV organizations in Ontario. Service users have a right to know what personal information has been collected about them, and view those records as requested, except in some circumstances.

#### **Purpose**

This policy outlines the procedures by which service user information and records are collected, stored, and shared with service users.

#### **Scope**

This policy applies to all documentation containing private and personal service user information.

#### **Responsibility**

It is the responsibility of all staff to ensure the secure and confidential collection and maintenance of service user records.

#### **Procedure**

For the purposes of the Harm Reduction Program, non-identifiable basic demographic information will be reported to the funder(s).

CAYR may collect additional information from an unregistered service user: to enable CAYR to communicate with the service user; to determine the service user's health status and basic needs requirements; offer holistic support; offer and provide personal wellness and life skills development opportunities; and develop and improve innovative and relevant programs and services. This information will be kept in a secured location only accessible by designated personnel on a need-to-know basis. CAYR retains service user information for seven years. After this time, records will be shredded and disposed of.

Each registered service user has an OCASE file. Any time services are accessed, information about that interaction is recorded. Service users have the option of using a pseudonym in their file rather than their real name.

OCASE files are password protected, and staff is prohibited from giving their username and password to anyone, including other staff members and volunteers.

Service users have the right to access their records. In the event that a service user requests to see their records, it is best practice to for staff to review the information with the service user,

to allow for explanation or interpretation of documents. If requested, copies of the documents within the record may be released to the service user. If this is done, the staff will create an entry in the service user's OCASE file saying that the information was released.

CAYR may restrict a service user's access to any documents within their record that include confidential information about another service user or in the event that the information was received from a third party on the condition that the information not be released to the service user.

### 3.7 Confidentiality

#### Policy

CAYR is committed to protecting the privacy and confidential information of service users. Because of the sensitive nature of CAYR services, it is important to protect our service users by ensuring confidential information is not disclosed to anyone outside the organization, whether or not that person could benefit directly or indirectly from having that information. Confidential information includes identifiable information, HIV status, mental health or addictions history, other medical information, etc.

#### Purpose

This policy outlines CAYR's commitment to confidentiality and the procedures that are in place to ensure confidentiality is maintained.

#### Scope

This policy applies to all staff, volunteers, contractors, subcontractors of CAYR or anyone else who is granted access to personal, privileged and/or confidential information.

#### Responsibility

Support services staff is responsible for ensuring all service users are familiar with CAYR's confidentiality policies and have signed a *Privacy of Information Agreement – Detailed Consent* document and the *Peer Confidentiality Agreement*. All staff and volunteers are responsible for maintaining confidentiality of service user information.

#### Definitions

**Personal information** is any information about an identifiable individual and includes race, ethnic origin, colour, age, marital status, family status, religion, education, medical history, HIV status, criminal record, employment history, financial status, address, telephone number, and any numerical identification, such as Social Insurance Number. This also includes an individual's status as a service user at CAYR.

**Personal health information** is information about an identifiable individual that relates to the physical or mental health of the individual, the provision of health care to the individual, the



individual's entitlement to payment for health care, the individual's health card number, the identity of providers of health care to the individual or the identity of substitute decision-makers on behalf of the individual.

### **Procedure**

Depending on the type of service to be provided, CAYR may collect the following information about a service user:

- Basic information, such as name, address, phone number, gender, and immigration status;
- Health care information, medical history, and contact information for specialists;
- Income-related information, employment status, and OW or ODSP information.

Service user information may be collected in order to:

- Enable CAYR to communicate with the service user;
- Allow CAYR to determine the service user's health status and basic needs requirements;
- Offer holistic support;
- Offer and provide personal wellness and life skills development opportunities; and
- Develop and improve innovative and relevant programs and services.

### **Disclosure**

CAYR may share service users' personal information to other community organizations for referral and collaboration purposes, in order for the service user to receive the most appropriate services. Before sharing any personal information with other community organizations, CAYR will always obtain written consent from service users, using the *Consent to Release and Obtain Confidential Information* form.

### **Withdrawal of Consent**

Service users may refuse to consent to the collection, use or disclosure of personal information. Service users may also withdraw previously given consent at any time. However, depending on the type of service being provided, refusal to provide consent or the withdrawal of consent may prevent CAYR from providing some services.

### **Accuracy**

Services users must provide CAYR with accurate and up-to-date personal information. Failure to do so may inhibit or prevent CAYR from provided appropriate and effective services. To ensure continued services, service users must immediately inform CAYR of any new or changed information.

### **Retention**

CAYR retains service user information for seven years. After this time, records will be shredded and disposed of.

### **OCASE Database**

OCASE (the Ontario Community-Based AIDS Service and Evaluation database) is a project of the Ontario Ministry of Health – AIDS Bureau. It is a database that all HIV organizations in Ontario, including CAYR, use for case management, data collection, and reporting to our funders. Only registered service user information is stored securely on a password-protected server in full compliance with privacy legislation.

### **Agreements**

All service users are required to agree to CAYR's confidentiality policy and limits to confidentiality listed in the *Privacy of Information Agreement – Detailed Consent* document. In addition, all service users will be required to read and sign a *Peer Confidentiality Agreement* prior to the commencement of their engagement with other clients at social groups and gatherings offered by CAYR.

### **Complaints**

Concerns or complaints related to privacy issues must be made, in writing, to the Executive Director, setting out the details of the concern or complaint. The Executive Director shall investigate the matter forthwith and make a determination related to the resolution of the concern(s) or complaint(s).

### **Peer Confidentiality**

During the course of accessing services at CAYR, service users may come to know information about others that is personal and confidential. This information may concern individuals who may be receiving support from CAYR regarding their medical condition and treatment, substance use, finances, living arrangements, sexual orientation, relationships with family members, HIV status, etc. Service users are required to keep this information private and confidential. Any information learned about other service users during the course of accessing services at CAYR must be kept confidential. During events where family, friends and guests of service users are invited, no private or confidential information shall be discussed or referred to.

### **Emergency Services**

If there is a need to call emergency services because of an incident on-site, care must be taken to not disclose any personal information about any service users involved in the incident, including their status as a service user. All people involved will be referred to as a 'visitor at CAYR' when describing the incident to emergency personnel.

### **Attachments**

Consent to Release and Obtain Confidential Information Form  
Privacy of Information Agreement – Detailed Consent  
Peer Confidentiality Agreement

### 3.8 Limits of Confidentiality

#### Policy

CAYR prioritizes confidentiality and generally restricts the release of service user information to situations where service users have authorized their release. However, there are limited circumstances where service user information can be released in the absence of consent.

#### Purpose

This policy outlines the circumstances in which service user personal information may be shared without the service user's consent.

#### Scope

This policy applies to all staff responsible for maintaining personal and confidential information about service users.

#### Responsibility

Each staff member is responsible for ensuring that they are following this policy and procedure. The Executive Director is responsible to address any situation where service user information is released without their consent.

Staff members who are members of professional associations are responsible for knowing the conditions under which their Association may require them to breach confidentiality, and inform their supervisor of these conditions.

#### References and Related Policies and Procedures

Confidentiality Policy & Procedure

Child, Youth and Family Services Act, 2017, S.O. 2017

Client Confidentiality and Record-Keeping, "HIV Disclosure and the Law: A Resource Kit for Service Providers." Canadian HIV/AIDS Legal Network, 2012.

Protecting Canada's Seniors Act R.S., C.C-46 CRIMINAL CODE

#### Procedure

The Executive Director or their designate must be notified of any release of service user information or records outlined within this policy, prior to that information being released.

The following are situations that require immediate action, where service user information may be shared without their consent:

#### Immediate Risk of Harm to Self or Others

The law is clear about when it is acceptable to break confidentiality in order to prevent harm to another person. **All** of the following criteria must be met:

- There is a clear risk of harm to an identifiable person or group of people;
- There is a significant risk of serious bodily harm or death; **and**

- The danger is imminent.

If any of the above criteria are not met, there is no need to breach confidentiality. If all of the above criteria are met, the Executive Director will be consulted to determine next steps. In all cases where a breach of confidentiality is required, extreme care is to be exercised to limit the amount of confidential information shared, and the impact on the service user.

### **HIV Non-Disclosure**

In cases where there is a concern about a service user putting an identifiable person at risk for HIV infection without that person being aware of the risk, the same criteria apply. Staff members must consult with their supervisor or the Executive Director if they believe that as a result of a service user not disclosing their HIV status:

- There is a clear risk of harm to an identifiable person or group of people;
- There is a significant risk of serious bodily harm or death; **and**
- The danger is imminent.

When determining if these criteria are met, staff must consider all factors that may increase or decrease the risk of HIV transmission, including the type of sexual activity, and the client's viral load and/or treatment.

If any of the above criteria are not met, there is no need to breach confidentiality. If all of the above criteria are met, the Executive Director will be consulted, and the *Disclosure to Prevent Harm – Decision-Making Tree* will be used to determine if confidentiality is to be breached.

### **Preventing Harm to a Minor**

Where a staff member believes that a child of 16 years or younger is being abused, neglected or exposed to family violence, that staff member is legally required to report this to a Children's Aid Society (CAS), as outlined in the Child and Family Services Act.

### **Preventing Harm to an Elder**

Where a staff member believes that an elder is being abused or neglected, that staff member is required by law to report this either by calling the Seniors Safety Line at 1-866-299-1011, or 911.

### **Subpoena or Search Warrant**

If presented with a subpoena or search warrant for service user records, a copy of the subpoena or search warrant must be received and reviewed. The Executive Director is to be called in immediately, and must contact a lawyer for legal advice as soon as possible. Copies of requested documents must be made and retained by CAYR. No additional information is to be shared beyond what is required in the search subpoena/search warrant. All requested documents are to be placed into a box or envelope and sealed. The materials are to be marked with "PRIVILEGE ASSERTED – DO NOT OPEN," and the police must be informed that the agency is asserting that the documents are confidential, and that privilege is being asserted. A court

will then decide whether and how the information can be used in the legal proceedings. The service user must be informed immediately that their records were seized.

### **Attachments**

Privacy of Information Agreement – Detailed Consent

Disclosure to Prevent Harm – A Decision-Making Tree, “HIV Disclosure and the Law: A Resource Kit for Service Providers.” Canadian HIV/AIDS Legal Network, 2012.

[http://www.thehealthline.ca/pdfs/Elder\\_Abuse\\_Ontario\\_Fact\\_Sheet.pdf](http://www.thehealthline.ca/pdfs/Elder_Abuse_Ontario_Fact_Sheet.pdf)

## **3.9 Complaints**

### **Policy**

Service users, donors and other community members have the right to express their concerns and complaints about any aspect of the physical space, services and programs offered by CAYR. CAYR shall provide and make accessible a process to encourage the resolution of complaints relating to the rights of service users and community members. All complainants will receive a respectful and timely response in keeping with the procedure outlined below. When possible, the response will indicate any changes that will occur or reason(s) why changes cannot occur following the complaint process. The complaints process is confidential and no complainants shall be penalized or have their access to services affected.

### **Purpose**

This policy describes the process through which service users and other community members may file a complaint about any aspect of the services and programs offered by CAYR, as well as the resolution process.

### **Scope**

All service users and community members may file a complaint through the process laid out in this policy.

### **Responsibility**

The Executive Director is responsible for hearing, responding to, and addressing any complaints regarding issues with staff or volunteers, as well as receiving any complaints about members of the Board. The CAYR Board is responsible for hearing, responding to, and addressing any complaints regarding issues with the Executive Director or members of the Board.

### **Procedure**

We encourage a complainant to first attempt to address and settle any issue(s) through discussion with the CAYR staff person/volunteer whom you have grievance with. If you do not prefer to discuss the issue with the concerned staff/volunteer or are not satisfied with the response, please lodge a formal complaint.

### **Complaints about Staff or Volunteers**

1. Please direct your formal complaint to the Executive Director (in writing, by phone/email, or in person).

**Mail:** Attn: Executive Director (marked "confidential" on the envelope)

CAYR COMMUNITY CONNECTIONS, 17665 Leslie Street, Unit 12. Newmarket ON L3Y 3E3

**Phone:** 647-381-0295

**Email:** [edirector@cayrcc.org](mailto:edirector@cayrcc.org)

2. The Executive Director will review the complaint, complete an investigation, and provide written response to the complainant within eight weeks. If more than eight weeks are required to complete the investigation, the Executive Director will provide the complainant with a written explanation about the delay.
3. The Executive Director will assess the gravity of the complaint and may consider putting any staff member named in the complaint on a paid leave until the review is completed. If the complaint is about a volunteer, they may be asked to not be active within the agency until the review is completed.
4. A response to a complaint deemed unsatisfactory should then be directed to the Executive Committee of the Board of Directors within four weeks of receiving the Executive Director's written response.
5. The Executive Committee will call for a meeting to review the complaint and provide a written response to the complainant within six weeks of the meeting.
6. The decision of the Executive Committee of the Board of Directors shall be final.

### **Complaints about the Executive Director**

1. Please direct your formal complaint (in writing or by email) to the Executive Committee of the Board of Directors.

**Mail:** Attn: Executive Committee/Board of Directors (marked "confidential" on the envelope)

CAYR COMMUNITY CONNECTIONS, 17665 Leslie Street, Unit 12. Newmarket ON L3Y 3E3

**Email:** [boardexec@cayrcc.org](mailto:boardexec@cayrcc.org)

2. The Executive Committee will call for a meeting to review the complaint and provide a written response to the complainant within six weeks of the meeting.
3. The Executive Committee will assess the gravity of the complaint and may consider putting the Executive Director on a paid leave until the review is completed.
4. The decision of the Executive Committee of the Board of Directors shall be final.

### **Complaint about Board Member(s)**

1. Please direct your formal complaint (in writing or by email) to the Executive Committee of the Board of Directors.

**Mail:** Attn: Executive Committee/Board of Directors (marked "confidential" on the envelope)  
CAYR COMMUNITY CONNECTIONS, 17665 Leslie Street, Unit 12. Newmarket ON L3Y 3E3  
**Email:** [boardexec@cayrcc.org](mailto:boardexec@cayrcc.org)

2. The Executive Committee of the Board of Directors will call for a meeting to review the complaint and provide a written response to the complainant within six weeks of the meeting.
3. If the complaint concerns a member of the Executive Committee, that member shall remove themselves from the Committee while an investigation and response is pending.
4. The decision of the Executive Committee of the Board of Directors shall be final.

**Please Note:**

- All complaints are required to be documented and formalized in writing with a signature using the Complaint Form found in this Manual before the review process is initiated. A CAYR representative hearing the complaint will assist the complainant with filling out the form if desired or necessary.
- The staff person/volunteer about whom the complaint is being made will receive a copy of the signed Complaint Form.
- Complaints should be formalized in a timely manner and ideally within a maximum of three months from the reason to lodge a complaint. This will allow for a careful review of the facts. Complaints made about an event that occurred over three months preceding the initial report will still be reviewed but may not lead to as thorough a review due to the passage of time.
- Any CAYR representative responding to a formal complaint will do so in writing.
- Information about this policy and copies of the complaint forms will be widely accessible through CAYR staff and made available for download on the CAYR website.
- All information concerning a complaint is confidential. Only parties involved in resolving the complaint should have information about the complaint. Documentation will be filed in the Executive Director's office, not in Complainants files. If a complaint involves the Executive Director or a Board member, then the Board of Directors will hold the documentation.
- No complainants shall be penalized or have their access to services affected. If a service user prefers to not access services at CAYR after lodging a complaint, the agency will help provide a referral to another organization or program that meets the service user's needs.

**Attachments**

Complaint Form

### **3.10 Safe Washroom Use Procedure**

- CAYR staff is required explain to all service users that any of their bags/personal belongings and coats/jackets must be left outside the washroom under the supervision of a staff
- CAYR will have signage on washroom door to stating this
- Staff will monitor the length of time a service user is in the restrooms (max 3-5 minutes) and knock on the washroom door to check-in with the service user after this duration to ensure their safety
- If staff suspects that a service user is using the washrooms inappropriately, they will inform a Program Manager on site.



## Section 4: Principles, Policies and Procedures of Needle Exchange/Syringe Program

*Date Approved: May 29, 2019*

*Revised:*

### 4.1 Principles of Needle Syringe/Exchange Program

- CAYR recognizes that a needle exchange program offers an opportunity to reach a population that often has difficulty or is reluctant to access the health and human services they need. In addition to contributing to reducing the spread of HIV, Hep C and other blood-borne infections, a needle exchange program allows service providers to develop relationships with people who use drugs through which other health and human services can be accessed.
- CAYR recognizes that education about HIV, Hep C and the other health risks associated with drug use happens slowly as service users repeatedly access the needle exchange and learn to trust the needle exchange personnel. New service users should be made aware of the services of the needle exchange and the information available to them but must be allowed to determine what services or information they wish to access.
- The objectives of CAYR harm reduction services is to educate service users about the ways to reduce harms associated with drug use and encourage behaviour change that leads to harm reduction. Our long-term goal is to develop the knowledge and skills of individuals who use substances so that they are able and willing to make informed decisions about their own health, including accessing other health and human services and/or the materials necessary to practice safer needle use.
- CAYR recognizes that access to new needles/syringes, other harm reduction materials and information about safer drug use is an important aspect of the prevention of HIV, Hep C and other blood-borne infections in that it reduces the risk of transmission of all blood-borne infections among people who use drugs.
- In order to facilitate the practice of safer drug use in the community, CAYR will discuss substance use and promote safer drug use, including demonstrating safer injection practices in the appropriate setting.
- Distribution of new needles/syringes and harm reduction materials should be done in conjunction with distribution of written materials and/or

discussion about the general principles of transmission of HIV, Hep C and other blood-borne infections and safer drug use.

- Safer drug use should be promoted in the context of general harm reduction and health promotion, to include the continuum of ways to reduce the harms of injection drug use.
- Information about safer drug use should take into account the latest research and informed opinion on effectiveness and proper use.

#### 4.2 Service Users Needle Syringe/Exchange Program Guidelines

- Harm reduction supplies will be given to any person who is at risk for HIV, Hep C or other blood-borne infections under appropriate circumstances with:
  - education and 'just listening' counselling around use, including a discussion about safer drug use;
  - information regarding safe disposal of used supplies; and
  - explanatory materials (e.g., pamphlet, fact sheet) suitable for the service user.
- Harm reduction supplies are given out without any limitations on quantity except where budget restrictions require CAYR to limit the availability of specific items.
- Service users will be encouraged to bring their used syringes back to CAYR to be exchanged. The rationale can be used that we are funded, and evaluated, as a needle exchange, not as a distribution point for new, free syringes. Continued receipt of government funding, and therefore continued operation of the service, depends on syringes being returned to CAYR.
- No one will be refused new syringes because they do not have a used one to return.
- Service users will be informed of other locations where syringes can be safely disposed of and informed of the pickup and drop off services of the harm reduction staff
- Service users will be asked to dispose of their used needles/syringes directly into the sharps disposal containers. CAYR staff should not touch or accept in hand used syringes from service users. Staff/volunteers will conduct a visual check of the returned syringes and record the number on the Tracking Sheet. If

service users bring their needles in a container or package, staff/volunteers will rely on the service user's self-reporting of the numbers returned and service users will dispose of the package directly into the sharps container.

- Members of the general public (including service users) are not to help or assist in any way with the handling, storage or disposal of new or used needles/syringes. Only CAYR staff and/or trained volunteers are to handle program supplies.
- When CAYR staff is working as a liaison in another community agency, they may give out sample(s) syringes and/or other materials, providing agency management has agreed.
- CAYR will assist identified agencies which deal with people at risk to educate their service users around safer drug use and encourage them to develop their own policies.

#### 4.3 Universal Precautions

- All workers who engage in needle exchange must always practice universal precautions.
- Universal precautions is an infection control technique that protects workers and service users of CAYR from blood-borne infections using barrier methods (eg., hand-washing, use of gloves).
- Universal precautions assume all materials/service users are infected since it is not possible to reliably identify those which/who are infected and those which/who are not.
- Gloves are to be kept on site and used whenever there is (or is likely to be) contact with blood and body fluids, mucous membranes, or non-intact skin of any service user, and whenever handling syringes, or other items or surfaces soiled with blood or body fluids.
- When gloves are used, they should be changed after contact with each person and hands should be washed after gloves are taken off.
- Hands and other skin surfaces should be washed as soon as possible if there is any contact with blood or other body fluids.
- All workers should take precautions to prevent injuries caused by syringes, needles, and other sharp instruments. To prevent needle stick injuries, needles

should not be recapped, purposely bent or broken by hand, removed from disposable syringes, or otherwise manipulated by hand. Syringes, needles and/or other sharp items should be placed by the service user, not the worker, into puncture-resistant containers for disposal; the puncture-resistant containers should be located as close as is practical to the use area.

- All workers should follow universal precautions when handling spills involving urine, vomit, feces and blood. Spills should be cleaned as soon as possible, gloves must be worn, protection for clothing and/or eyes should be used if necessary and the Clean Up Kit should be utilized.

#### 4.4 Sharps Handling and Disposal

##### Policy

CAYR provides harm reduction services to individuals living with and at risk of contracting HIV, Hep C and other blood-borne infections. We operate a needle syringe program (NSP) (fixed site, street outreach and partner sites) informed by current best practice recommendations. We provide needles/syringes, sharps containers and associated injection drug use equipment to service users upon request, without limit. We encourage safe return and disposal of distributed equipment. We strive to maintain a handling and disposal standard that achieves a negligible risk of injury. CAYR's safe handling and disposal policy and procedure is reviewed once a year (January) with all staff who provide services in the NSP. Additionally, as part of their agency orientation, all new staff assigned to work in the NSP will receive one-on-one safe syringe handling and disposal training from the Harm Reduction Program Manager. This will be completed prior to providing services within the NSP. Each staff will sign the *Sharps Handling and Disposal Training form* indicating they have been trained and will comply with the defined handling and disposal standards. Volunteers and students do not handle or dispose of sharps. Only designated staff will be trained for and required to box, secure and safely store returned used equipment for drop off to bio-hazardous disposal services.

##### Purpose

To ensure the proper disposal of syringes and drug use equipment while maintaining employee, service user, and general public safety.

##### Procedure

Designated CAYR staff working in the NSP program will observe the following practices:

- **Fixed Site - Designated staff/volunteers/students will**
  - not physically handle return used equipment
  - indicate to the service user the appropriate container for disposal

- encourage each service user to take sharps container
- remind service users of the importance of safe storage and disposal of used equipment
- advise service users of available designated sharps disposal kiosks in York Region of other safe return sites
- **Community Syringe Recovery - Designated staff will**
  - Use universal precautions when disposing of syringes
  - Utilize approved sharps containers either industry produced or acceptable/approved substitute (pop bottle, plastic detergent container)
  - Place approved sharps container near syringe or other item and open lid.
  - Utilize gloves and tongs when retrieving discarded sharps and placing into approved container.
  - Close or place cap on the sharps container
  - Bring sharps container back to agency and deposit in NSP for proper storage
- **Preparation for Drop-off to Bio-hazardous Waste Disposal Services – Designated Staff will**
  - Gather all required approved equipment (gloves, boxes, mallet, pails, industrial tape, plastic bags, transportation cart);
  - Use only, properly designated sharps containers that are sealed will be placed in the boxes
  - Ensure that other used equipment (sharps containers with open lids, equipment sticking out of containers, bottles, boxes, bags of used equipment, loose needles) are placed in the yellow buckets.
  - Before sealing the boxes, remove all sharps containers with tongs and check that they are sealed. If they are open, with no needles sticking out, close lid with other end of tongs, if there are containers that are not sharps containers ( even if they are sealed) they must go into the bucket. Place all properly sealed sharps containers back into the box
  - Seal the box, by closing the lid, then, tape securely using the tape gun.
  - Use yellow buckets for all used equipment (other than sealed sharps containers).
  - Ensure that when the bucket is nearly full, place a white lid on to the opening, use the rubber mallet, bang this all around the outside edge of the yellow bucket until the lid is sealed securely.

- Place the yellow bucket in the box
- Two staff would carry out the process attached (See CAYR Process: Sharps Disposal)

**Guidelines for Safe Disposal of Used Needles**






**Equipment:** Gloves (latex, vinyl, garden), tongs, plastic container or sharps container



Universal Precautions are the foundation of safe syringe/needle retrieval and disposal. When disposal is done correctly there is no risk of transmission of HIV, Hep C or any blood borne illnesses.

**If you find a needle:**

<p><b>Step 1:</b></p>	<p>Scan the environment for any possible dangers (traffic, tripping hazards etc.). Put on gloves (if possible). Gloves do not prevent injury, but form a clean barrier between the hands and the needle.</p>	
<p><b>Step 2:</b></p>	<p>Bring a puncture resistant, sealable container to the site of the needle. Sharps containers work best but are not necessary. A plastic pop bottle (various sizes), a coffee can or laundry jug will also work</p>	
<p><b>Step 3:</b></p>	<p>Place the container on as flat of a surface as possible beside the needle. Be mindful of your footing. Never hold the container and retrieve a needle at the same time.</p> <p><i>Picture shown:</i> Drug use equipment (clockwise): sharps container, 3cc syringe, 1cc syringe, cooker/spoon, individual water packs, tie/tourniquet.</p> <p><i>NOTE:</i> Syringes are to be disposed of in the sharps container. Any other injection equipment</p>	

	(cookers/spoons, ties, water) can be disposed if either in the trash or in the container.	
<b>Step 4:</b>	<p>It is best to use kitchen or BBQ tongs to retrieve the needle. Gloves do not prevent injury, but form a clean barrier between the hands and the needle.</p> <p><i>NOTE:</i> Tongs can be disposed if later in the trash. If using tongs for syringe recovery on a regular basis, store in a secure place away from accidental exposure to food (garages, locket cupboard where cleaning supplies are stored etc.)</p>	
<b>Step 5:</b>	Pick up the needle with tongs by the middle of the barrel (the plastic tube) with sharp end facing down. If there are multiple needles, pick them up one at a time.	
<b>Step 6:</b>	Place the needle in the container sharp end first. NEVER attempt to recap the needle or break the tip off.	
<b>Step 7:</b>	Securely place the lid on the container. If using a Sharps container (like shown), one push on the oval lid will secure the lid but allow reopening. A second push will close the lid entirely and it cannot be reopened. It is recommended that Sharps containers are filled to ¾ full before disposing of them.	
<b>Step 8:</b>	Remove gloves and wash your hands with warm water and soap.	

## Sharps Containers

*NOTE:* Sharps containers are **not** puncture proof.

- "Sharps" containers that are rigid, puncture resistant and leak proof will be kept at all exchange sites. Openings on these containers act as a one-way valve.
- Containers should sit on a desk or on the floor. Do not hold it in your hand while a service user is putting used needles/syringes into the container (in case of puncture).
- The ENTIRE needle and syringe is put through the opening of the container.
- Needles and syringes are not to be bent or clipped in any way.
- Containers should only be filled 3/4 full. Staff/volunteers will not force, or allow a service user to force, needles/syringes into the container.
- The full containers will then be packaged and disposed of according to Biohazardous Waste Disposal Procedures.
- In the event that a service user arrives with their own sharps container over-filled, the container and surplus are to be put into a large on-site sharps container without handling by staff/volunteers.
- Needles/syringes are never to be discarded in waste paper baskets or other general garbage cans.

### 4.5 Needle Stick Injuries

*NOTE:* Staff must remain vigilant in all situations when handling sharps containers or when approached by service users exchanging syringes. There have been instances at other needle exchanges where service users have forced syringes into sharps containers thereby forcing needles through the container. There have also been instances where service users have approached staff with one arm extended, as though wishing to shake hands, when in fact they wished to exchange. In at least one such case, the syringe had a needle exposed.



- Any injury - scrape, puncture, etc - involving a needle, regardless of the degree of injury, must immediately be reported to the Executive Director on an Incident Reporting Form.
- If an injury occurs, the individual should go immediately to an outpatient department of a local hospital for assessment and treatment.
- All employees are required to document any injury and forward the report to the Executive Director within 48 hours of the occurrence using an Incident Reporting Form.

#### 4.6 Inventory and Ordering of Supplies

##### **When receiving new supplies:**

- Use the needle syringe program tracking system to update inventory.
- Rotate stock so the newest supplies are at the back of the shelf and oldest supplies are at the front

##### **Inventory Management and Ordering Supplies:**

- Harm reduction program staff will update supply inventory every Monday on the tracking system.
- Harm Program Manager will order supplies according the process attached (CAYR Process: NEP Supply Ordering and Picking-up Supplies) at the end of each month based on the needs.
- Harm Reduction program staff will pick up the supplies according the process attached (CAYR Process: NEP Supply Ordering and Picking-up Supplies)

##### **Attachment**

Sharps Handling and Disposal Training Form  
Incident Reporting Form

## Section 5: Policies and Procedures of Naloxone Distribution

*Date Approved: May 29, 2019*

*Revised:*

### 5.1 Naloxone Training and Distribution

#### Policy

CAYR will offer Naloxone training during all harm reduction outreach activities. This policy applies to all Naloxone trained staff and volunteers who are providing training and/or distribution of naloxone and are recording information on required forms.

#### Purpose

CAYR in partnership with York Region Public Health (YRPH) distributes Naloxone Kits. All CAYR staff and trained volunteers are able to distribute naloxone after receiving training from CAYR's harm reduction program staff and following outlined procedures. The purpose of this procedure is to guide the trained staff and volunteer, on expected naloxone distribution procedures and expectations.

#### Procedure

- Trained staff and volunteer will use the York Region Overdose Prevention Training Manual as a guide to train individuals. The training will cover the following topics:
  - Periods of increased risk for overdose and overdose prevention techniques;
  - Recognizing signs and symptoms of an overdose;
  - Steps in managing opioid overdose including:
    - Stimulation - shake and shout;
    - Calling 911 and interacting with paramedic, police and fire services;
    - Care and storage of Naloxone
- Trained staff and volunteer will provide the individual with at least (intranasal or injectable) one kit which contains two doses of naloxone.

*NOTE:* Should the individual have a health condition that undermines the receipt of medication via the intranasal route, promote, train and distribute injectable naloxone kit to the individual.

However, if an individual wants multiple kits, staff or volunteers in consultation with staff may use professional judgment about a maximum number of kits/refills distributed to one client based on available stock.

- Individuals may be provided with more than one kit especially if they:
  - Engage in a high opioid use environment (e.g. live in a community or amongst people where frequent opioid use occurs)
  - Have responded to or have experienced multiple overdoses in the previous 3 months
  - Might use or have friends or relatives that use known, or suspected high potency opioids (e.g. fentanyl, altered heroin or other substances at high risk of being cut with high potency opioids like carfentanil)
  - Report barriers to accessing refills in a timely manner
  - Have a history of frequent naloxone refills
  - Request multiple kits based on any of the reasons above
- Trained staff/volunteer will fill out “Naloxone identifier Card “ and place it on the kit.
- *For first time visitors:* Encourage individuals to complete and return to CAYR an evaluation if naloxone is used or given.
- *For returning individuals:* Try to complete an evaluation if naloxone is used or given by them.
- The feedback will be used to improve York Region’s NSP program to reflect the needs of the community. The individual choosing not to answer questions about receiving or giving naloxone will not be denied a refill. All client forms will be kept in a locked space where no one but appropriate harm reduction program staff can review them.
- Fill out the *Knowledge Checklist and Dispensing Record* form.

#### **Attachment**

Knowledge Checklist and Dispensing Record form  
York Region Overdose Prevention Training Manual

## **5.2 Naloxone Data Collection**

### **Purpose**

CAYR in partnership with York Region Public Health (YRPH) are distributing Naloxone kits. All CAYR staff and trained volunteers are able to distribute naloxone after receiving training from harm reduction program staff and following outlined procedures in Section 5.1. The purpose of this procedure is to ensure that CAYR’s Naloxone distribution has a process to collect and store data that is compliant with the legislation and consistent with best practices.

### **Scope**

This procedure applies to the trained staff and volunteer who are providing training and/or distribution of naloxone and are recording information on required forms.

### **Procedure**

- When a new eligible service user receives training and/or naloxone their personal health information will be gathered on both the “Overdose History” and the “Naloxone Knowledge Checklist and Order to Dispense” Forms.
- CAYR will securely store paper records for individuals who receive Naloxone training and kits in the locked cabinet in the Harm Reduction Program Manager’s office.
- By the 26<sup>th</sup> of each month all filled Naloxone Knowledge Checklist and Order to Dispense forms for the month will be provided to the Harm Reduction Program Manager to collate and report the York Region Public Health Unit.

## **5.3 Naloxone Storage**

### **Purpose**

CAYR in partnership with York Region Public Health (YRPH) are distributing Naloxone kits. All CAYR staff and trained volunteers are able to distribute naloxone after receiving training from harm reduction program staff and following outlined procedures in Section 5.1. The purpose of this procedure is to ensure the integrity and stability of naloxone is maintained and to ensure naloxone is secured in accordance with laws, regulations, and organizational policies.

### **Scope**

This procedure applies to the harm reduction program staff who are providing training and/or distribution of naloxone and are recording information on required forms.

### **Procedure**

- Naloxone is to be safely stored under appropriate conditions. Store nasal naloxone between 15-25 degrees Celsius and injectable naloxone between 15-30 degrees Celsius. Ensure naloxone is protected from light.
- Naloxone must be appropriately secured. The door to the room and file cabinet must be closed and locked when not in use or physically occupied by authorized staff. Keys to the room and file cabinets are held by appropriate CAYR employees.

## **5.4 Inventory and Ordering of Naloxone**

### **When receiving new supplies:**

- Use the needle syringe program tracking system to update inventory.

### **Inventory Management and Ordering Supplies:**

- Harm reduction program staff will update supply inventory every Monday on the tracking system.
- Harm Program Manager will order supplies as needed.

## Section 6: Principles and Guidelines of Condom Distribution

*Date Approved:* May 29, 2019

*Revised:*

### 6.1 Principles of Condom Distribution

CAYR recognizes that access to condoms and information about safer sex is an important aspect of the prevention of HIV, Hep C and other sexually transmitted and blood-borne infections (STBBIs). We recognize that condoms reduce the risk of transmission of HIV and other STBBIs among people who have the potential of becoming infected through their sexual activity. CAYR's condom distribution system provides the means for practicing safer sex.

- The objective of CAYR's condom distribution is to raise awareness of condoms and facilitate their use. CAYR supplies condoms and other educational materials to individuals and agencies in limited quantities for promotional use.
- In order to facilitate the use of condoms in the community, CAYR will discuss, promote and demonstrate condom use in the appropriate settings.
- Discussion about condom use will be done in conjunction with information about different levels of risk in sexual practices.
- Information about condoms should take into account the latest research and informed opinion on effectiveness and proper use, including such topics as spermicides, latex vs natural materials, "double bagging", oral sex, etc.
- Condoms should be promoted in a positive way to encourage acceptance and compliance.
- Effective promotion of condoms includes explanation and demonstration of correct use and accompanying written material appropriate for the service user.

### 6.2 Condom Distribution Guidelines

- Condom(s) may be given to any person who asks for them.
- CAYR staff and volunteers may distribute condoms with education and 'just listening' counselling around use, including a discussion about the principles of safer sex; and
- With explanatory materials (e.g., pamphlet, fact sheet) suitable for the service user.
- When CAYR staff is working as a liaison in another community agency, they may give out sample(s) condoms, providing agency management has agreed.
- Packages of water-based lubricant should be made available/distributed with all condoms given out.