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Overdose Prevention Policy

I. Purpose of Policy

As a City department that serves people who use drugs through our leadership of the Healthy Streets Operation Center (HSOC), Department of Emergency Management (DEM) has a responsibility to respond to the overdose crisis in San Francisco.

Our response must account for the fact that the overdose crisis has disproportionately impacted minority groups – for example, Black and African American people had an overdose rate 6.32 times higher than other racial groups in 2019. It is imperative that we develop comprehensive policies for our system of care that will equitably provide interventions.

HSOC, through DEM, has committed to a collective and collaborative approach to overdose prevention with the Department of Public Health (DPH), the Department of Homelessness and Supportive Housing (HSH), and the Human Services Administration (HSA). The shared commitment is that all City departments who interact with persons who use drugs have an equal responsibility to respond to the rise in overdoses in a universal way that will have the most impact.

II. Policy Application

DEM, in partnership with HSOC partner departments, is responsible for ensuring HSOC has structures in place to support staff who respond to overdoses. HSOC's Overdose Prevention Policy empowers City and community partners to prevent and effectively respond to drug overdoses through the following approaches:

- Through DEM, HSOC fosters collaborative partnerships with other City departments, including HSH, HSA, DPH, and SFFD, to advance the Overdose Prevention Policy and to share lessons learned and best practices.
- DEM's HSOC staff and staff from HSOC partner departments (referred to as "HSOC team members") will be held responsible for delivering harm reduction and overdose interventions.
- Overdose prevention training will meet the needs of people HSOC works with:
 - All HSH, SFFD, and DPH HSOC team members will be trained on: the philosophy behind harm reduction and how to reverse an overdose, both of which are essential to empower all appropriate HSOC team members to deliver life-saving interventions. To be effective, drug treatment, harm reduction and overdose prevention services must be culturally competent, creative, and non-judgmental.

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- It is important to offer a range of treatment options to clients, including harm reduction for those who are not yet ready for abstinence from drugs and alcohol but must find ways to lessen the harm of their behavior.
- DEM will continue to work with our HSOC partners HSH and DPH to seek input from community stakeholders, including drug users, people with lived experience, and HSH and DPH contracted provider partners, for needed direction and to develop effective policies and protocols.

III. Policy:

To reduce drug overdose and comply with the requirements laid out in Sec. 15.17 of the Administrative Code (Departmental Overdose Prevention Policies), DEM will implement the policies outlined below.

- A. During HSOC operations, HSOC team members will provide referrals to drug treatment programs, harm reduction services, and harm reduction programs.
- B. Overdose prevention training will be required for all City and provider staff who interact directly with clients. These same trainings will also be provided for all HSOC staff including Public Works, MTA Parking Control Officers, and San Francisco Police Department members who participate in operations or activities.
- C. HSOC team members will follow an onsite overdose reversal and response protocol. Naloxone must be easily accessible at all HSOC-managed operations or activities.

IV. Procedures:

A. Drug Treatment and Harm Reduction Programs and Services

- a. Drug Treatment DEM will work with DPH to deepen and explore further partnerships through HSOC to provide access to drug treatment through work in encampments and with partner agencies.
- b. Harm Reduction DEM will provide and refer clients to harm reduction services and programs by:
 - 1. Reviewing HSOC protocols regularly to identify opportunities to continue and expand harm reduction services and referrals in HSOC-managed or coordinated operations or activities.
 - 2. Actively encouraging DEM agency partners, and requiring as appropriate, to provide harm reduction services and referrals during operations and in their programs and locations.

B. Posting Information about Naloxone, Syringes, and Overdose Prevention Services

DEM will require that all staff assigned to HSOC by partner departments that interact with/make referrals for people who use drugs to be trained in up-to-date information and have easily accessible materials for clients regarding:

1. The location and schedule of syringe access and disposal services.

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- 2. Referral information about naloxone access.
- 3. The schedule of overdose prevention and naloxone distribution services.

C. <u>Training</u>

Overdose prevention training will be required for all City and provider staff who interact directly with clients and provided for all HSOC staff. Training must include:

- 1. The philosophy and principles of overdose prevention and harm reduction.
- 2. How to respond to and reverse overdoses.
- 3. How to debrief and support other staff and guests as they deal with the trauma accompanying this experience.

Training must be conducted, at minimum, annually and should be given upon hire of new employees.

City Employees - the online overdose recognition and response training is found in each employee's Employee Portal.

Contractors and/or Grantees - the online overdose recognition and response training is available through the SFDPH Center for Learning and Innovation, Overdose Prevention Training Series (https://learnsfdph.org/programs/sfdph-overdose-prevention/).

D. Onsite Overdose Reversal and Response Protocol

HSOC staff will take steps outlined below if an individual overdoses on HSOC-managed operation or activity or in the presence HSOC personnel, or in the presence or provider staff.

- 1. Follow medical protocols as outlined in the overdose trainings.
- 2. Report overdose to HSOC dispatch and director. Document use of naloxone, if applicable, and indicate if the overdose was reversed.
 - a) Additional documentation requirements may be added if necessary, to assess and report on Drug Overdose Prevention.