

## OVERDOSE PREVENTION & RESPONSE IN WASHROOMS: RECOMMENDATIONS FOR SERVICE PROVIDERS

### PURPOSE

To give guidance for service providers to develop safer washroom policies & protocols with a focus on overdose prevention. This checklist helps determine the **level of effort & cost per intervention**.

### BACKGROUND

Many agencies do not condone substance use in their washrooms. However, washrooms are frequently used for substance consumption, often by injection. Some of the reasons people use these spaces are cited by [Canadian Institute for Substance Use, "Research in Every Washroom \(2016\)"](#): safety, privacy, access or availability. The perceived sense of safety however is often unfounded; if an agency does not have predictable washroom checks when the washroom is in use, a client who has overdosed in a washroom might not be found until the next time someone enters. Winnipeg Manitoba has the first [published evaluation](#) on Safer Washrooms which can help explain many of the interventions described in these recommendations.

### PHYSICAL SPACE

**There are two uniquely different types of washrooms to consider:**

1) **Single use** - Designed for a single occupant

Advantages:

- Offers privacy, which allows for people to take care of personal & medical needs
- More space for emergency responders
- More space for someone to be accompanied in toilet if assistance is needed

Disadvantages:

- Specifically for people who are using substances, using alone can prove fatal when an overdose occurs if there is no one there to respond
- Often one side is only 18 inches from wall which is a dangerous gap between wall & toilet to fall & get stuck in

2) **Multi-stall** - Designed for multiple occupants. Rows of toilets are separated by partitions that may have shorter walls & gaps at the bottom

Advantages:

- They accommodate a larger number of people. A higher rate of use can prove beneficial for noticing an emergency

Disadvantages:

- Lack of privacy
- Distance between stall wall & toilet **ON EITHER SIDE** needs to minimally be 18 inches, which is a dangerous gap between wall & toilet to fall & get stuck in

### CURRENT WASHROOM OPERATIONS

There are many ways to run safer washroom services. Housing, clinic, drop-in, shelter & clinic settings will have uniquely different staffing abilities to manage washrooms. For example, clinic settings might have more staffing in an area proximate to a washroom. Housing settings will likely have less staff & limited ability to monitor communal or 24-hour washrooms. Below are some ideas to create a safety action plan for your agency.

## SAFER WASHROOM PROTOCOL SUGGESTIONS

Even though a service setting may not allow substance use on site, having a protocol will help with both worker & client safety.

Staff will play a key role in educating clients about the agency services, & should also consider visible signage. Announcing that, 'substance use is not allowed in the washroom,' may be part of an agency's internal policy; however, this can deter people from using the washroom space & using somewhere even more isolated & dangerous. Consider including other safety messages in the agency protocol:

- Exact timing** of washroom checks
- Maximum allowed time** in the washroom
- Open hours** of the washroom
- Nearest** Overdose Prevention Sites (OPS) &/or Supervised Consumption Sites (SCS)
- Information** about the nearest public washroom
- Information** that explains the benefits of using an OPS/SCS
- Post-overdose intervention duties** (e.g. restocking supplies, supervisor notification, staff care plan & roles)
- A [guide to promote staff resiliency & prevent distress after an overdose reversal](#)
- Client input** for your agency's washroom services: If plans are created without the input of the clients, the service setting will likely not meet the needs of the clients. A variety of options can be used in combination such as:
  - Have accessible venues to solicit client feedback.** A variety of options can be used in combination e.g. Regular client meetings; annual anonymous surveys &; suggestion/complaint box
  - Have paid client positions** to work in your agency's washroom safety program
  - Request that clients** put needles in the sharps container (if provided) & not leave them in the garbage, toilet or any other place that could put staff at risk of a needle stick injury, or clog toilets
  - Debrief with staff & clients** following an overdose. Is leadership aware of the [PHSA Mobile Response Team](#) resource?
  - Address stigma** – Is stigma around substance use preventing clients from accessing the washrooms? Are there uniform safety practices for all people who use the washroom (e.g. shelf for belongings, sharps containers, sufficient lighting)?

## Washroom Safety action plan checklist & overdose prevention

Minimal Effort/Cost	Moderate Effort/Cost	Maximum Effort &/or Cost (can have high impact)
<p><input type="checkbox"/> <b>Ensure all staff have access</b> to key, fob &amp;/or device to open all washroom locks. Note: type of washroom door &amp; it's emergency procedure of access – may vary across the building</p> <p><input type="checkbox"/> <b>Have clients involved</b> in planning of these services (e.g. regular client meetings, annual anonymous surveys, suggestion/complaint box)</p> <p><input type="checkbox"/> <b>Develop agency protocol</b> for washroom overdose prevention</p> <p><input type="checkbox"/> <b>Provide overdose prevention, recognition &amp; response training</b> for all staff</p> <p><input type="checkbox"/> <b>Display signage</b> for safer spaces (e.g. agency protocol, how to access treatment services, nearest supervised consumption space &amp; the services offered there). Signs in washrooms are exposed to moisture &amp; vandalism; consider using a hard clear plastic sleeve for protection</p> <p><input type="checkbox"/> <b>Provide overdose recognition &amp; response drills</b> with staff</p> <p><input type="checkbox"/> <b>Provide emergency naloxone on site</b> – Accessible to staff &amp; clients/guests</p> <p><input type="checkbox"/> <b>Offer harm reduction training</b></p> <p><input type="checkbox"/> <b>Offer anti-stigma training</b></p> <p><input type="checkbox"/> <b>Identify areas where sharps get hidden</b> (e.g. ceiling tiles, toilet cisterns, garbage, lighting) &amp; address those</p>	<p><input type="checkbox"/> <b>Install washroom/stall external facing washroom doors that swing outward.</b> However, this may create other safety issues for people outside the washroom door. Each site is unique so assess accordingly</p> <p><input type="checkbox"/> <b>Ensure door can be unlocked from outside</b></p> <p><input type="checkbox"/> <b>Door length</b> – Consider a space from floor to bottom of stall door (1 ft recommend) so others can tell if the washroom is occupied or someone has fallen. Do not compromise client privacy with door length or height</p> <p><input type="checkbox"/> <b>Lighting</b> – Ensure that there is even lighting &amp; that stalls are well lit. As well, <u>blue lighting is strongly discouraged owing to the potential harms</u></p> <p><input type="checkbox"/> <b>First Aid training</b></p> <p><input type="checkbox"/> <b>Providing ongoing train-the-trainer support</b> for new &amp; casual staff (including refresher training)</p> <p><input type="checkbox"/> <b>Manual timer</b> – Begins when staff sees a client enter the washroom or gives client a key &amp; they remember to set a manual timer (e.g. a cell phone or egg timer)</p> <p><input type="checkbox"/> <b>Shelf/table</b> – Provide a flat space in the washroom stall for all people to place personal belongings &amp; for medical needs preparation</p> <p><input type="checkbox"/> <b>Chair somewhere in washroom</b> (best in single-use washrooms where door opens outward &amp; if the shelf/table is outside of the washroom stall <b>*this prevents falls*</b> for someone who could be standing &amp; medicating)</p> <p><input type="checkbox"/> <b>Secure, tamper resistant sharps containers</b> – Sharps disposed of anywhere other than a sharps container can pose risk to others for getting a needle stick injury. When a sharps container is provided (especially in the stall), agencies might find their toilets are less clogged with substance use supplies (and other debris), which will decrease frequency of out-of-order toilets. Tamper proof bins prevent access to previously used sharps</p> <p><input type="checkbox"/> <b>Provide disinfectant wipes in washroom</b> so people can clean surfaces on their own</p> <p><input type="checkbox"/> <b>Consider alarmed wall mounted emergency naloxone box in washroom</b></p> <p><input type="checkbox"/> <b>Provide washroom users &amp; staff with intercom-system (baby monitor or walkie-talkie)</b></p>	<p><input type="checkbox"/> <b>Space between wall &amp; toilet</b>—Can clients get stuck if they fall? What can be done to prevent this?</p> <p><input type="checkbox"/> <b>Timer locking mechanism</b> - Begins once a button is pushed or automatically when the door locks. A countdown timer should be displayed for both staff, outside the washroom, &amp; for the client in the washroom to show when the time has expired</p> <p><input type="checkbox"/> <b>Intercom</b> –This feature can be used to check on clients after the washroom time has expired, in order to minimize staff time for getting up &amp; knocking on the door</p> <p><input type="checkbox"/> <b>Have paid client positions</b> hired to work in a washroom safety &amp; harm reduction role</p> <p><input type="checkbox"/> <b>Motion detector</b> - Frosted glass on outer door &amp; timed lighting. Some agencies have timed lighting so that if client stops moving the light will turn off. It is then up to staff to notice that the light is off (through the frosted glass), the door is locked &amp; then check on client. The motion detector could also be set to an alarm</p> <p><input type="checkbox"/> <b>Emergency call bell</b> – Ideally this bell is attached to a string &amp; is not placed in an area where clients can trigger it accidentally. The string will ensure that people who have fallen on the ground will be able to reach the string</p>