

# The Organizational Practice Evolution of Supervised Injection Services as a Health Care Strategy at the Dr. Peter Centre: A Practice Case Study

Authors: R. Baltzer Turje<sup>1</sup>, P. McDougall<sup>1</sup>, M. Payne<sup>1</sup>, M. Davis<sup>1</sup>  
<sup>1</sup>Dr. Peter AIDS Foundation, Vancouver, Canada.

## ISSUE

The importance of integrating health care and harm reduction services, including supervised injection services (SIS), for persons who use illicit drugs has been recognized for over 20 years in Europe and is becoming increasingly well recognized in Canada. Despite this, there are few documented accounts of the organizational practice evolution with SIS at integrated health care facilities.

## DESCRIPTION

Since 2002, the Dr. Peter Centre (DPC) has integrated SIS within a broad range of health care services for people living with HIV in Day Health Program and its 24-hour Licensed Care Residence. In that time, our organizational understanding of how to support this practice at an organizational level has evolved.

## PRACTICE EVOLUTION FROM 2002 TO 2017

- Drug and drug pattern use
- Reduction in overdose – death
- Harm reduction teaching

- Health teaching, including triggers
- Safer use – involvement of full clinical team and inclusion in centre community

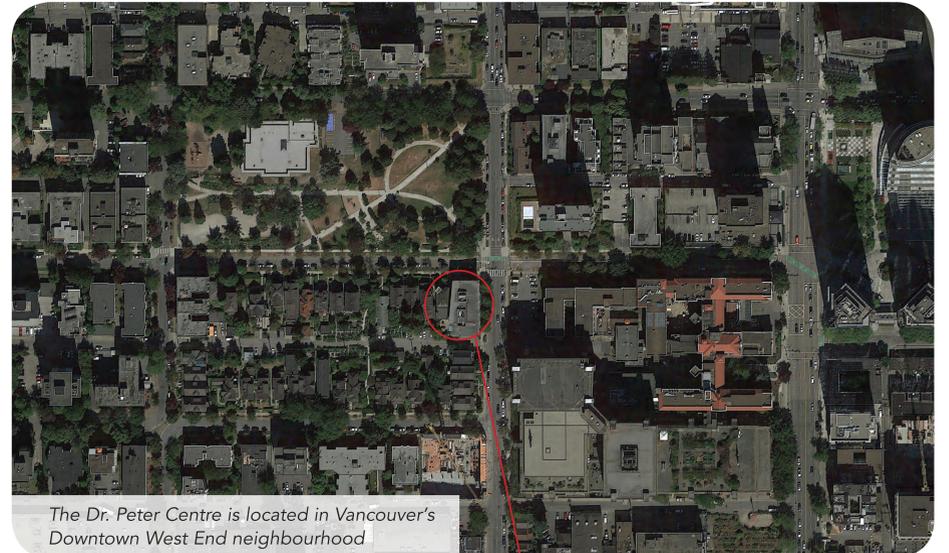
- Identification and focus on issues of drug use (e.g., pain management, diversion)
- Documented health care intervention
- Entry point for engagement in health care

## LESSONS LEARNED

Since 2002, our organization has learned that there are multiple challenges to providing safe and effective care to a population that is at various stages of addiction and active drug use which include: physiological factors, such as managing and monitoring effects of combinations of medications and street drugs, and understanding the incidence and implications of co-infections, as well as psychosocial factors such as grief, loss, poverty, and trauma. We have found that the organization's task is to foster an effective team that engages the client through acceptance and respect for self-determination. Our organization has found practice success by supporting the team by promoting self-awareness of personal values, providing opportunities for working through ethical and practice dilemmas, and acknowledging the team successes.

## RECOMMENDATION

Organizations that have integrated SIS within other health care services over multiple years should document their organizational practice evolution with SIS over time. Doing so will assist the practice development of organizations that are beginning to integrate SIS within their suite of health care services.



The Dr. Peter Centre is located in Vancouver's Downtown West End neighbourhood

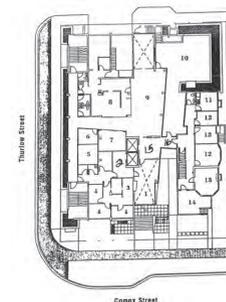
## NOTABLE LOCATIONS IN THE NEIGHBOURHOOD

- St. Paul's Hospital
- Nelson Park
- Elementary school
- Children's daycare
- High end condominiums
- Davie Street business district



The Dr. Peter Centre

## FLOOR PLANS OF THE DR. PETER CENTRE



### ADMINISTRATION/DAY HEALTH PROGRAM: MAIN FLOOR

#### NEW BUILDING

1. Main Entrance
2. Residence Lobby
3. Reception Desk
4. Offices
5. Quiet Room
6. Counselling Room
7. Participant Lockers
8. Kitchen
9. Café
10. Terrace

#### HERITAGE HOUSE

11. Staff/Volunteer Lounge
12. Offices
13. Boardroom
14. Front Porch
15. Entrance Day Program
16. Walkway to Main Floor of Heritage House



### DAY HEALTH PROGRAM: SECOND FLOOR

#### NEW BUILDING

1. Living Room
2. Participant Computers
3. Library
4. Showers/Bath
5. Music Studio
6. Fitness Room
7. Counselling
8. Therapies Office

#### HERITAGE HOUSE

9. Complementary Therapies
10. Group Meeting
11. Art Studio
12. Participant Laundry
13. TV Room
14. Nursing Clinic/SIS
15. Nap Rooms



The room in the day health program where injections are supervised.



### RESIDENCE: THIRD AND FOURTH FLOOR

1. Studio Suites (22)
2. Therapy Tub/Spa
3. Short Stay Room (2)
4. Nursing Office
5. Kitchen/Servery
6. Laundry
7. Library/Computer
8. Living/Dining
9. Balcony