Medically Supervised Injecting Room

Local Reference Group – Meeting 1

3 May 2018
Overview

• Background
• Recap of legislation
• Regulations
• Construction
• Community safety
• Stakeholder engagement
• The months ahead
What is a medically supervised injecting room?

- A place where adults can inject drugs under medical supervision
- People are connected to treatment and support
- More than 100 worldwide – in Europe, Canada and Sydney
Why is the medically supervised injecting room being trialled in North Richmond?

- In 2016, 190 people died from overdoses involving heroin in Victoria.
- This is an increase of 71 per cent since 2012.
- Significant drug dealing and use in North Richmond, with 35 deaths linked to heroin in 2015.
- Parliamentary report found drug use in North Richmond had reached “crisis level”.
- High volume of discarded needles.
Legislation

- Passed Parliament in December 2017
- Allows the Secretary, DHHS to issue a licence for two year trial
- Single permitted site – North Richmond Community Health (23 Lennox Street, Richmond)
- Criminal and civil liability exemptions for clients and staff
- Supporting regulations, licence conditions and operational safeguards
- Independent review to be tabled in Parliament
- Potential extension for three years if it would support the objectives of the trial – no further extension, alternative or addition.
How will this improve the community?

- Reduce overdose deaths and overdose harm
- Reduce ambulance attendances and emergency department presentations attributable to overdose
- Reduce the number of discarded needles and syringes in neighbouring public places
- Improve neighbourhood amenity for local residents and businesses
- Assist in reducing the spread of blood-borne diseases including HIV and hepatitis C
- Provide gateway to health and social services for injecting drug users
Based on expert advice, recently released regulations will allow all drugs of dependence to be used inside the MSIR.

This is consistent with Sydney’s MSIC and other facilities around the world which are open to all injecting drug users, regardless of drug type.

Heroin is the most common drug in the City of Yarra, but people who inject drugs tend to use many substances (not just heroin).

Around 20 per cent of visits to the Sydney MSIC involve methamphetamine (1000 injections each month), though only three incidences of aggression were recorded in six months (to June 2017).

MSIR staff will be trained to manage any agitated clients, and security will be onsite at all times.
Creating a medically supervised injecting room

**Stage 1 – Transitional facility**
- To be operating by mid 2018
- Works commenced April 2018
- Repurposing of internal space within NRCH

**Stage 2 – Purpose built facility**
- Recommended by Expert Advisory Group
- To be operating by mid 2019
- Design underway
- Works commencing later in 2018
- On NRCH site

**Stage 3 – Refitting**
- Refit the transitional facility
- Finished in 2019
Transitional facility – Injecting room

Stage 1 – Transitional facility
Design considerations

The design is being informed by issues that matter to the community:

- Landscape design to direct client foot traffic
- MSIR exits face clients north away from the school
- Lighting and CCTV upgrades in the car park bordering the school
- Exploring options to upgrade school gate and perimeter security as required
- Privacy treatments on service windows to avoid looking in
- Retaining mature trees and increasing mid height planting to provide additional screening
- Purpose built facility to be single storey and no closer to the school than the existing NRCH building, with client entry and exits located away from school.
Community engagement to date

Over 70 community briefing sessions have been held

**Organisation engagement**
- Sessions with Victoria Police, City of Yarra, public housing, community groups, first responders, schools, traders
- Meetings with sector organisations and peak bodies

**Local resident engagement**
- Information sessions and door knocking for local residents
- Translated flyers, posters and frequently asked questions

**Consumer engagement**
- Workshop with NRCH clients
Local Reference Group

**Purpose**

- Avenue for community engagement on establishment of the MSIR
- Ensure local feedback is provided on the ongoing operation of the room (once established)
- Provide a forum for working collaboratively to identify, discuss and address the impacts of the MSIR on the local community
Purpose

• Develop networks and linkages between service providers to assist in facilitating clear and timely referral pathways for clients

• Identify opportunities to increase client access to and engagement with local services

• Identify opportunities to improve service coordination for clients

• Provide advice on the MSIR’s service model, including opportunities to integrate and link to gateway services.
Keeping the community safe

- Evidence suggests no increase in drug use or crime will occur
- 13 CCTV cameras recently installed
- Additional on-site security
- Safety design features
- Significant boost to Victoria Police – 13 new police on the frontline from 1 July 2018 within Yarra LAC
- Developing local outreach model in coordination with City of Yarra, Victoria Police and outreach service providers
- Working with City of Yarra on safety information for the community
- Ongoing engagement with Victoria Police and Richmond West Primary School, including through the Local Reference Group
Operational planning

- Medical Director to be announced
- Recruitment activity underway for other MSIR staff
- Expert Advisory Group is providing advice on operational matters
- Operational procedures and safeguards are being finalised
- Operating hours are being considered
- **Trial will start in mid-2018**
Other planned activity

• Ongoing briefings with local community groups and other organisations
• Capital works continue on transitional facility
• Capital design to be developed for purpose built facility
• First meetings of Local Reference Group and Gateway Services Reference Group
• Announcement of all MSIR Review Panel members
Medically Supervised Injecting Room
Local Reference Group
Terms of Reference

Role of the Local Reference Group

The Victorian Government is trialling a medically supervised injecting room at the North Richmond Community Health site in North Richmond, Melbourne.

The trial will take place for an initial two year period with the option to extend the trial for a further three years. It is proposed that the trial will commence in mid-2018.

The Local Reference Group has been established to ensure that key local stakeholders are regularly updated on issues relating to the operation of the medically supervised injecting room. The group will also provide advice on local matters relevant to the trial. Key functions of the group are to:

- ensure local feedback is provided on the ongoing operation of the medically supervised injecting room (once established), including the identification of issues
- provide a forum for working collaboratively to identify, discuss and address the impacts of the medically supervised injecting room on the local community.

Membership

The Local Reference Group shall comprise:

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<thead>
<tr>
<th>Name</th>
<th>Role</th>
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<tbody>
<tr>
<td>Gabrielle Williams MP</td>
<td>Parliamentary Secretary for Health (Chair)</td>
</tr>
<tr>
<td>Steve Ballard</td>
<td>Health Director, North Division</td>
</tr>
<tr>
<td>Demos Krouskos</td>
<td>CEO, North Richmond Community Health</td>
</tr>
<tr>
<td>TBC</td>
<td>Medical Director, Medically Supervised Injecting Room</td>
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Meeting procedures

Frequency of Meetings

1. The Local Reference Group shall meet approximately monthly during the early establishment phase of the medically supervised injecting room (until October 2018), and quarterly thereafter, or as determined by the Chair.

Invitations

2. Individuals invited to the Local Reference Group will be acting as representatives of their organisation or local group/association.
3. If a member wishes to delegate a meeting invitation, permission must be sought from the relevant departmental officer from the Drug Policy and Reform unit.
4. Other persons may be invited to attend Local Reference Group meetings as required for specific purposes.

Quorum

5. If less than ten members are attending, the meeting can be rescheduled.

Chairing

6. Should the Chair be unable to attend a meeting, they may request that their proxy chair the meeting, or the meeting may be postponed.

Agenda items

7. Items can be submitted by members for inclusion on the Local Reference Group agenda, in consultation with the responsible manager from the Drug Policy and Reform unit at the department.
8. The broader community will be invited to provide feedback on the trial by emailing aod.enquiries@dhhs.vic.gov.au. There will be a standing item at each meeting for the Local Reference Group to discuss this feedback.
9. Any urgent item that cannot wait until the next meeting, or is for information only, can be circulated out of session.

Meeting records

10. The outcomes of each Local Reference Group meeting will be prepared by the responsible departmental officer from the Drug Policy and Reform unit.
11. Meeting outcomes will be provided to all Local Reference Group members approximately five working days after each meeting.

12. Meeting outcomes may be circulated to relevant executive officers within the department, unless the Chair determines a particular item to be confidential in which case the minutes will be circulated excluding confidential items.

**Secretariat**

13. Secretariat support will be provided by the relevant departmental officer from the Drug Policy and Reform unit.

**Duration**

14. The Local Reference Group will be established to advise on local issues identified during the early months of operation of the medically supervised injecting room. In October 2018, the group will be reviewed to determine whether it should be adapted in purpose or membership (including chairing responsibilities), or dissolved.

15. A local reference group will continue to operate throughout the two year trial period.

**Membership conditions**

**Resignation**

16. A member may resign from the Local Reference Group in writing addressed to the Department.

**Removal from group**

17. The department may remove a member from the Local Reference Group at any time, without cause, by providing that member with notice in writing, which shall have immediate effect.