



BRITISH COLUMBIA
CENTRE ON
SUBSTANCE USE

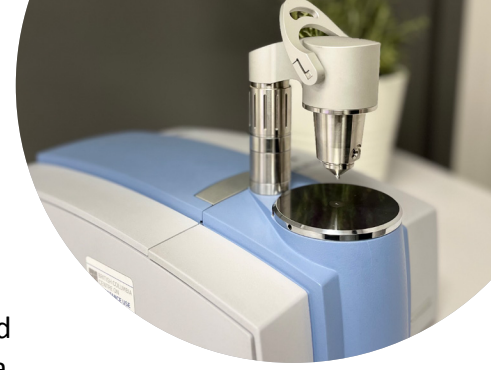
Networking researchers, educators & care providers

Drug checking service delivery series:

Satellite sites

IMPLEMENTING PORTABLE DRUG CHECKING

APR 2025



ABOUT THE BCCSU DRUG CHECKING PROGRAM

The BC Centre on Substance Use (BCCSU) is an academic centre housed within Providence Health Care (PHC) and Providence Research, and is a University of British Columbia (UBC) Faculty of Medicine-affiliated centre focused on substance use and addiction medicine. The BCCSU is supported by the Province of BC with a mission to “provide provincial leadership in substance use and addiction research, education and clinical care guidance and to seamlessly integrate these pillars to help shape a comprehensive, connected system of treatment and care that reaches all British Columbians.”

The BCCSU Drug Checking Program supports a network of drug checking services across BC through research, education, training, and practical guidance. In partnership with people who use drugs, service users and providers, health authorities, Indigenous communities, researchers, clinicians and harm reduction experts, we collaborate to share evidence generated from drug checking services across the province, build capacity among technicians and service providers, and develop resources to support service set up and delivery. The BCCSU Drug Checking Program achieves this through **three main focus areas**:

Research and Evaluation

Leading an innovative multidisciplinary program of research, monitoring, and evaluation of drug checking programs in community settings throughout BC. This includes weekly updates to the Drug Sense Dashboard, and the development of monthly reports, data reports, and bulletins to share findings from drugs brought for drug checking at partner sites, and to provide a glimpse into the current drug supply.

Education and Training

Strengthening the drug checking community through a provincial technician certification program designed to equip drug checking technicians with the necessary knowledge, skills, and hands-on experience to deliver high-quality and consistent drug checking services. A community of practice brings together technicians across the province to share expertise and access drug checking-related resources, supporting knowledge exchange and continued professional development beyond the training program.

Provincial Operational and Best Practices Guidelines

Developing technical materials, operational guidance, and tools to assist drug checking programs in planning, implementing, and delivering drug checking services. This growing suite of resources includes introductory guidance for communities considering establishing drug checking services, operational and best practice guidance to support service delivery elements, and standard operating procedures to ensure service quality and consistent and regulatory compliance.

This document falls under the Operational Guidance focus area. Our growing collection of [drug checking guidance and standard operating procedures](#) is available on our website.

Acknowledgements

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Special Thanks

This document would not be possible without the collaborative spirit and shared wisdom of Interior Health, ANKORS, ASK Wellness Society, Fraser Health Authority, and Mountainside Harm Reduction. These organizations generously shared their knowledge of and expertise with satellite drug checking, which was instrumental in shaping the guidance offered within this document. Thank you for your ongoing support to expand drug checking resources and knowledge.

The authors also express sincere appreciation to the individuals and organizational partners within the drug checking community who continue to enhance the ever-evolving landscape of drug checking practices. This includes people with lived and living experience of substance use, drug checking service providers, and members of the provincial drug checking working group. The insights and observations shared are immensely valuable, and serve as a catalyst to improve drug checking and harm reduction initiatives across British Columbia.

Feedback

We love to hear from you! If you have comments, suggestions, or to request drug checking training, please contact:
drugchecking@bccsu.ubc.ca

Suggested Citation

British Columbia Centre on Substance Use (BCCSU).
Drug Checking Service Delivery Models: [Satellite Services 2024](#)

Publisher

British Columbia Centre on Substance Use (BCCSU)
400-1045 Howe Street, Vancouver, BC, V6Z 2A9
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Publication Date

April, 2025

Land Acknowledgement

The British Columbia Centre on Substance Use would like to respectfully acknowledge that the land on which we work is the unceded territory of the Coast Salish Peoples, including the territories of the xʷməθkwəy̓əm (Musqueam), Sḵwxwú7mesh (Squamish), and sə́líp lwə́təʔ (Tsleil-Waututh) Nations.

We recognize that the ongoing criminalization, institutionalization, and discrimination experienced by people who use drugs disproportionately harms Indigenous peoples and that continuous efforts are needed to dismantle colonial systems of oppression. We are committed to the process of reconciliation with Indigenous peoples and recognize that it requires significant and ongoing changes to the health care system.

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TERMS

Collection site: a physical location where a drug sample is dropped off; drug checking usually does not occur at this location.

Distributed service models: drug checking services that are spread out across a geographic region; they offer drug checking services in ways that differ from a fixed site service model.

Drug checking service(s): a program that provides drug checking for service users; it can occur across various locations and sites depending on the service delivery model.

Drug checking technician: technician; any person who has received all applicable training required to perform drug checking services.

Harm reduction worker: Person dedicated to reducing the negative consequences associated with drug use. Drug checking technicians are a specialized type of harm reduction worker.

Host site: the physical location where the satellite drug checking service is provided; also referred to as the satellite site.

Point of care: point of service where the service user is accessing drug checking (i.e., in person).

Satellite drug checking: a portable service where drug checking service providers transport drug checking instruments to other sites or organizations to provide drug checking services.

Satellite site: the physical location(s) where satellite drug checking service is provided. Also referred to as the host site.

Service delivery model: method by which a certain service is provided.

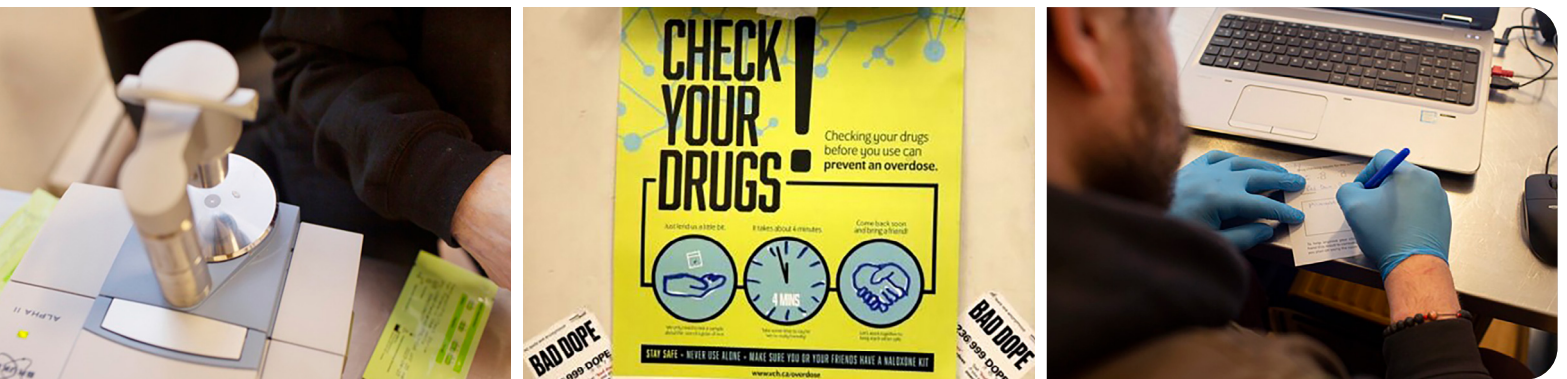
Service user(s): any person accessing services (i.e., drug checking, health, social).

UPHNS: Urgent Public Health Needs Site; federal designation that provides a location a special exemption from the Controlled Drugs and Substances Act (CDSA), allowing them to legally conduct certain activities that normally would be illegal under the CDSA such as collecting, storing and transporting controlled substances for the purposes of drug checking.

INTRODUCTION

Drug checking is an evidence-based harm reduction service that offers people the opportunity to learn what's in their drugs and make informed decisions about the substances they intend to use. It also provides public health information about the unregulated drug supply. Drug checking services can test for a range of substances including opioids, stimulants, benzodiazepines, and other psychoactive drugs, as well as identify previously unknown or new ingredients and compounds.

In the past, drug checking services were mainly offered in two settings: a fixed site—where service users can drop off samples and receive a fairly immediate result (i.e., at point of care)—and events (i.e., music festivals), where people can access a temporary drug checking service. However, in response to the increasing volatility of the unregulated drug supply and rapid adoption of drug checking technologies, drug checking programs have started implementing distributed service models to better meet the needs of service users. Like distributed



healthcare, distributed drug checking models disperse drug checking services across a region so they are available in more places to more people. Distributed service delivery methods come in several forms, but they all have the same aim: to ensure drug checking is equitably available, and that services are offered in ways that meet the diverse needs of the populations who use them.

Service Components

Every service delivery model is made up of the following components. Most models will mix and match how they operate, using several approaches to collect and analyze samples and delivery results.

DRUG CHECKING Service Delivery Components

SAMPLE COLLECTION

Where samples are collected:

- at point of service
- at collection site

Who collects the samples:

- Drug checking staff
- Non drug checking staff (e.g., outreach worker at collection site)

SAMPLE ANALYSIS

Where sample analysis occurs:

- same location as sample collection
- different than sample collection

Who completes sample analysis:

- Onsite technician
- Remote technician

When does sample analysis take place

- Immediate, at point of service
- Delayed, wait time between sample collection and analysis

RESULT ACCESS

When are results available:

- Immediately, at point of service
- Delayed, wait time of 45 min - several days

Method of delivery

- Directly via technician or other trained staff
- Indirectly via text, phone, email or third party

Where are results delivered

- In-person onsite
- In-person off-site (outreach)
- Remotely

Purpose and Scope

This document is part of the *Drug Checking Service Delivery Models series*: a set of resources that describe different drug checking service delivery models and some of the key implementation considerations for each. Each document in the series is dedicated to one drug checking service delivery model, and aims to address planning, operational, and financial considerations. Community wisdom from drug checking programs implementing some of these service models is also woven throughout to share practical knowledge and lessons learned. **This document is dedicated to the satellite service delivery model.**

THIS DOCUMENT IS INTENDED:

To offer guidance to planners, staff and managers seeking to establish new or improve existing drug checking services.

THIS DOCUMENT IS NOT INTENDED:

To replace or supersede any established organizational implementation protocols.

SATELLITE SERVICE DELIVERY MODEL

Overview

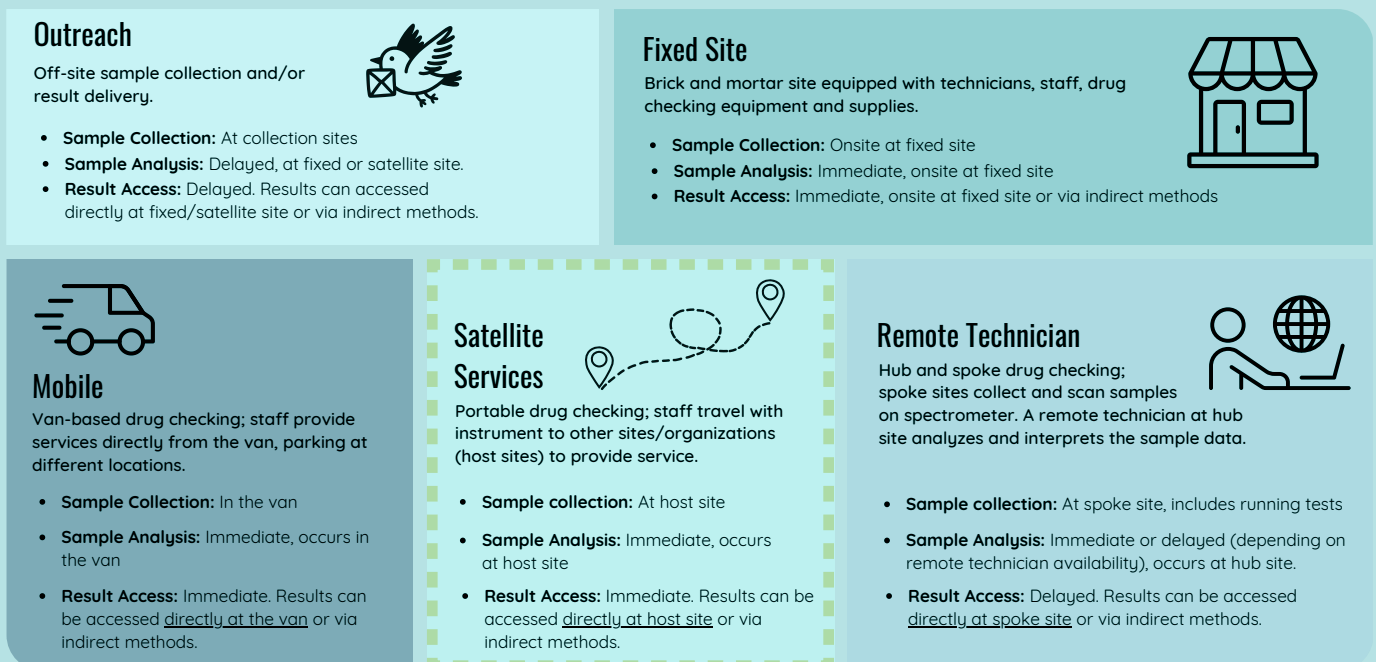
Satellite drug checking is when a drug checking service travels to partnered sites and sets up a service within these ‘satellite’ sites. The organization providing the service transports all the equipment and the trained technician to operate the service within the satellite partner’s location. The satellite partner provides the space, helps with service promotion, and may dedicate some staff time to supporting the service when it is operating onsite and during hours when it is not. Services are offered at satellite sites during scheduled times in the week and in some cases, drug samples may be dropped off in advance and tested when the technician arrives for their scheduled time. Satellites sites may include locations such as a public health unit, a community centre, a housing program or other sites where harm reduction services may be offered. Depending on the host site partnership and program capacity, service users may have the option to receive results in person or remotely (i.e., email, text).

Service Description

Satellite services are drug checking services that are delivered out of sites operated by different organizations, and sometimes in different communities. This model provides access to drug checking services in communities where it is not generally available, or in sites that target special populations (women-only services, for example). Specific locations chosen to host a satellite service generally host potential service users already, which removes any necessity to travel to other locations to get drugs tested. This also gives communities and organizations the opportunity to explore how a drug checking service might be received in their area (i.e., service uptake and local support) before investing in a permanent fixed service.¹

With satellite service models, the organization providing the service employs its own drug checking staff, funds the service, and travels to the satellite sites to deliver drug checking at scheduled times. The host site provides in-kind resources in terms of space and staff support, as well as helps with service promotion in the community. Samples may be collected at the satellite site at specific times or dropped off in advance of the scheduled service. All samples are analyzed at the satellite site, and results are available at the time of testing or via the method noted on the sample collection form (e.g., phone, email, text, or an online platform).

Figure 2. Drug checking service delivery model comparison chart.



Potential Service Settings

Satellite drug checking is well suited to communities that don't have established drug checking services or where people can't easily access nearby locations that do. Ideally, sites hosting satellite drug checking will be relatively close to the drug checking service organization, with a travel radius of up to one hour between locations. This is considered a reasonable travel distance for drug checking staff otherwise the commute can become too time consuming, costly and impractical. Rural and remote communities may find that longer travel distances are needed and be able to support a larger radius.

Organizations that can manage the initial cost of drug checking instruments and related equipment but may struggle to afford the ongoing operational costs, may also benefit from partnering with an existing drug checking service as a way to access staffing and expertise. Additionally, organizations that may face challenges with securing community buy-in or do not have enough demand to justify purchasing their own instrument may benefit from starting out with satellite site partnerships as they gain trust and demand within the community for drug checking.



Community Wisdom

Check'It! Mountainside Harm Reduction Society

Mountainside Harm Reduction Society is a peer-led organization that employs people with lived and living experience of substance use to deliver low barrier harm reduction services, including satellite drug checking. In this model, drug checking staff travel weekly to 10 sites across the Fraser Valley to provide drug checking services. They take an FTIR, immunoassay test strips, and other drug checking equipment and harm reduction supplies, and usually set up at one

location in the morning and move to a different one in the afternoon. Host sites vary from public health units, to overdose prevention sites, to an OAT clinic. Service users can drop by to have samples checked while they're at the host site, or samples can be dropped off in advance at selected collection sites—where samples are stored until the Check'It team returns. The satellite service schedule is the same each month (with occasional exceptions), and is posted on the Mountainside website. Offering drug checking at the same place, at the same time each week encourages service uptake. "Consistency is key", they say.

Satellite Service User Audience

Satellite drug checking services will likely work well for service users who:

- are geographically isolated from existing drug checking or other harm reduction services,
- do not have access to a drug checking service in their community,
- prefer to access drug checking in specialized service settings that cater to specific populations (e.g., women's only, youth only etc.) or
- do not typically need access to daily drug checking.

Host Site Attributes

A range of organizations can host satellite drug checking services. Host sites need to be appealing to, or able to connect with, potential service users, and need to be accessible to the target population. Being a host site for satellite services will likely work well for an organization that:

- ✓ regularly connects with or provides services to the local population of people who use drugs (e.g., community centre, shelter, public health unit, overdose prevention site).
- ✓ offers services to the public (i.e., permits public access to the site).
offers services to specific populations such as women-only facilities or youth shelters.
- ✓ has the physical space for a workstation, two staff, and at least one service user at a time.
- ✓ can offer privacy from other programs to promote service user confidentiality.
- ✓ can delegate a staff 'champion' as the point person to coordinate with drug checking staff and oversee the host site's responsibilities for drug checking service operation.
- ✓ is located close to public transit routes (where available).
- ✓ has access to a power source and internet (note this is only necessary if the drug checking service does not have portable internet).

REMINDER: In BC, any site that is collecting drug checking samples must be listed as an [Urgent Public Health Needs Site \(UPHNS\)](#) with an accompanying letter from their regional health authority. See the [legal and regulatory considerations](#) section for more information.

PLANNING CONSIDERATIONS

Legal and Regulatory Considerations

In order to collect, store, and transport controlled substances for the purpose of drug checking, every site, both satellite sites and the site where drugs are tested are required to have provincial designation as an [Urgent Public Health Needs Site \(UPHNS\)](#). This class [exemption to Section 56](#) of the *Controlled Drugs and Substances Act* allows provincial governments to permit transportation and possession of unregulated substances for the purposes of drug checking.

All BC Health Authorities have an existing process for providing sites with a UPHNS designation. Information is available via each Health Authority's harm reduction program. In addition, BC drug checking sites have established protocols for sample collection and transport to ensure all sites follow the terms and conditions of the UPHNS designations.

Community Engagement and Partnerships

The first step in setting up a satellite drug checking service is engaging the community the services are intended for. This can help identify:

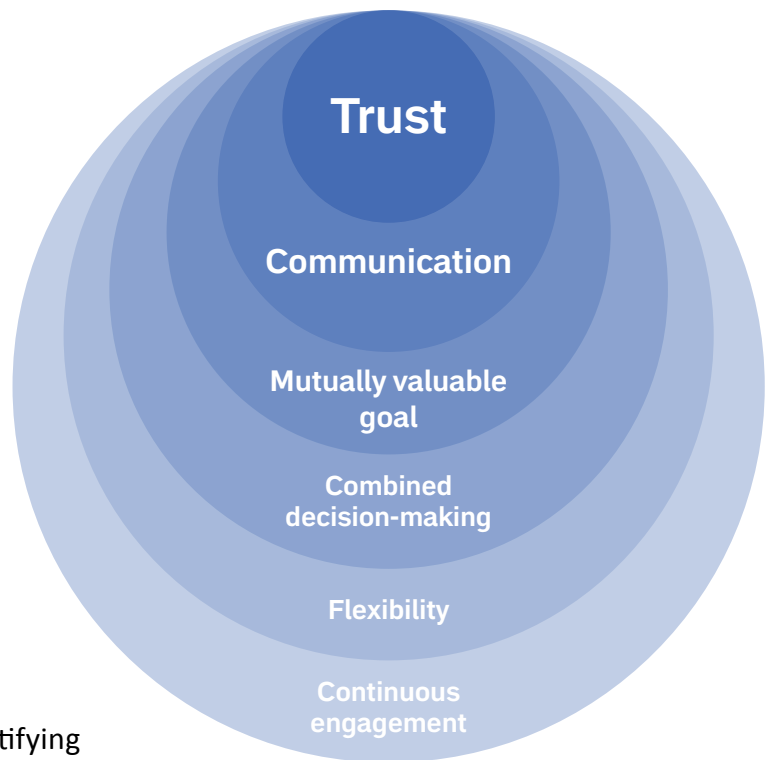
- suitable locations for a satellite site,
- anticipated program demand and uptake,
- characteristics and needs of the target population,
- local harm reduction culture and related perspectives, and
- dynamics between and within stakeholder groups.



Strong Partnerships = Strong Satellite Service

Satellite drug checking services rely heavily on strong community partnerships to run smoothly. Building strong partnerships takes time, particularly in communities that are hesitant or new to harm reduction and drug checking. Several core elements contribute to building a strong foundation including:

- 1. Trust.** Trust is the cornerstone of every partnership. Establishing trust between the drug checking program and host site allows for reliability, transparency, and a commitment towards shared goals.
- 2. Communication.** Maintaining open and honest communication between the drug checking program and host site ensures concerns, ideas, and feedback about the service are discussed on an ongoing basis.
- 3. Mutually valuable goals.** Identifying and aligning mutually beneficial goals and priorities will help ensure that both parties are working towards a shared purpose.
- 4. Combined decision-making.** Meaningful involvement and partnership with all stakeholders in development, implementation, and decision-making around the satellite service can promote a sense of ownership and investment in the service. This includes recognizing and drawing on the expertise of local stakeholders.
- 5. Flexibility.** Being flexible and adaptive to the evolving needs of the partnership means recognizing that local context and related priorities may change over time, meaning the service may also need to evolve.
- 6. Continuous engagement.** Regular communication and evaluation opportunities help sustain partnerships and ensure continued support for services beyond initial implementation.



How to Engage Community Members and Stakeholders

Each community is unique and tailoring an approach to engage community members can build trust and improve service delivery.² Community engagement plans help to outline:

- Who to engage
- Objectives for each group (e.g., expected contributions, use of their input)
- Level of engagement (see [IAP2 spectrum of engagement](#))
- Methods of engagement (e.g., meetings, focus group, surveys).

For more information, see the BCCSU [Drug Checking Engagement Plan Template](#).



Community Wisdom

Law Enforcement Engagement

It's critical to engage law enforcement before implementing a satellite drug checking site in a community with minimal or no prior harm reduction services. If local law enforcement is not positively engaged beforehand to endorse the program — particularly in communities with high law enforcement presence and law enforcement support—service users may be too fearful of criminalization, harassment, or discrimination to access the drug checking service. Individuals who do access the drug checking service may also be at increased risk of harmful interactions with law enforcement.¹

Engagement Tips

- **Use existing networks.** Build on existing networks of people who support harm reduction and substance use in the community to facilitate service exploration and promotion.
- **Identify local champions.** Engage with influential community members who are passionate about harm reduction and substance use and can advocate for the service.
- **Know the local community.** Decisions should reflect the unique needs and realities of the community where the service will be. This ensures the service is tailored to the people who will be using it.
- **Make decisions together.** Include diverse voices and perspectives from the potential satellite site's community when making decisions. This can help foster engagement and buy-in, as people who have a say in the service design are more likely to use it.
- **Anticipate potential challenges and community responsiveness.** It's important to prepare for potential resistance from some community members, particularly in areas with no previous drug checking or harm reduction services. A potential host organization may be able to anticipate community response to the service, which can facilitate early opportunities for hosting community engagement and education sessions to dispel misinformation (e.g., drug checking does not provide drugs) and help identify potential concerns that may need to be addressed prior to implementation.

Selecting Host Sites

It's important to choose a satellite drug checking location that is easy to get to, feels welcoming to a variety of people, and meets the needs of the target service user population. Careful consideration must be given to who the satellite service primarily intends to reach, and what kind of places would be most accessible to them. For example, if the service is intended to primarily reach people who recreationally use drugs, a “neutral” space such as a community centre or public health unit might be ideal. On the other hand, if the service is primarily intended for people who are dependent on drugs, the service might be more effective at a location this population regularly accesses (e.g., overdose prevention site or supervised consumption site).

Additionally, a location where the satellite organization has existing relationships with the population you are hoping to reach can help build trust in the service and encourage service engagement. These locations also often have facilities that can support drug checking service operations, such as a waiting area or “chill out” space, access to harm reduction supplies, and easy access to public transit.

Some additional things to keep in mind when considering a host site:

Reach

- How often people are likely to use the service. This can help indicate potential appeal and drug checking engagement.
- How well the site works with local partners and how these relationships could affect service engagement.
- Community support for harm reduction and how this might impact service engagement.

Accessibility

- The site's physical accessibility and safety (e.g., stairs or ramps, nearby services).
- Cultural inclusion and safety for all people.

Physical space

- Space to accommodate drug checking service: workstation, staff, service user, power, internet, privacy.

Capacity

- Staff workload and responsibilities in relation to managing additional duties related to drug checking service delivery.
- Staff knowledge and experience with harm reduction and drug checking, as well as any related education and training needs.
- Ability to safely collect and store samples (i.e., a locked box).
- Ability to provide a consistent and reliable drug checking service (i.e., funding, organizational support, time, commitment to harm reduction).

Partnership Agreements with Host Sites

Once an organization has agreed to host satellite drug checking services, it's recommended that the drug checking program and host site create and sign an agreement, such as a memorandum of understanding (MOU) that outlines the expectations and roles and responsibilities of each organization as they relate to delivering the drug checking service. This is an important tool to establish clear partnership guidelines, foster trust, and promote the success of the drug checking service. The agreement should clarify any fiscal responsibilities and in-kind resources provided to ensure any costs associated with the service are accounted for and agreed upon. If a health authority is supporting the drug checking service and providing designations, they should also be included in the agreement to ensure that their role is defined.

Ideally, regular check-ins such as monthly meetings or weekly check-in calls are built into the agreement to provide opportunities for ongoing communication and feedback that allow for partnership or service delivery adjustments, or to efficiently address any service delivery concerns. Consult your organization's leadership and/or local health authority to determine if existing MOU templates or other agreement forms are available. Additionally, key areas to cover in an agreement for satellite drug checking services are outlined in [Appendix A – Partnership Agreement Considerations](#).

STAFFING

Staffing for satellite service models involves staff from both the drug checking services and the host site. The staffing model for a satellite service will vary based on the level of involvement of the host site and local demand for the service. At minimum, a satellite drug checking service requires:

- **A trained drug checking technician:** to operate the drug checking instrument and interpret and share results. The technician may be dedicated to one or more satellite sites or shared with a fixed drug checking site.
- **A harm reduction worker or peer support worker:** to support service provision alongside the technician (e.g., providing harm reduction education, conducting immunoassay test strips, outreach etc.). This position may be filled by the drug checking program or the host site.



Community Wisdom

Technician Knowledge

Experienced FTIR technicians have stressed that just knowing the skills to operate drug checking instruments isn't enough: drug checking staff also need to understand drugs and the cultures around them.³

- **Program leadership:** to provide program-level administrative support to both the drug checking program and host site. This is particularly important for larger satellite service models that operate multiple satellite sites across a region.

The technician and harm reduction worker positions are ideal for people with lived and living experience of substance use. This allows for drug checking staff who can maximize their unique ability to connect on a personal level with service users, develop trusting relationships, and provide relevant drug use and harm reduction information. For a list of key activities and responsibilities related to each position, see [Appendix B – Satellite Service Staff Roles and Responsibilities](#).

Staff Training

Since both drug checking and host site staff are all involved in satellite service provision to varying degrees, they will all require different levels of training based on their specific roles in service provision.

Training for Host Site Staff

Other staff at the host site, such as program staff, front desk staff, leadership, and administrative staff may support the satellite drug checking service by handling sample intake when the service is not operating, promoting the service, or offering referrals. Therefore, they need to be familiar with what drug checking is, and when the service operates. This is crucial because potential service users may lose interest



Community Wisdom

Host Site STAFF Training

In some cases, host site staff may not be familiar with harm reduction or substance use and may benefit from additional training on:

- Principles and core values of harm reduction
- Harm reduction supplies
- Safer substance use practices
- Creating safer spaces for PWUD
- Drug poisoning recognition and response

The following resources offer comprehensive guidance and practical tools to support the above training items:

- [Toward the Heart](#)
- [CATIE Harm Reduction Toolkit](#)
- [Drug Education and Resource Project – Chapter 1](#)

in drug checking if host site staff can't answer their questions or give accurate information about the service. Host site staff collecting samples outside service hours will also need training on how to safely handle, package, and store samples.



Community Wisdom

Harm Reduction Workers Supporting Satellite Sites

At satellite sites, the Harm Reduction Worker plays a crucial role in spreading awareness and building trust in the service. They can tell people about the service, debunk myths, and answer questions about how it works. They may also assist with testing by preparing samples for testing and conducting immunoassay test strips. Ideally, the Harm Reduction Worker (HRW) is a person with lived or living experience of substance use, with knowledge that can help the technician better understand the local drug scene and supply. This role may be filled by either the drug checking service or by a staff at the host site. If a HRW from the host site will be working with the technician, consider:

- If the existing position meets the required competencies for an HRW in drug checking service provision (see [BCCSU Implementation Guide](#)); if not, additional training may be required.
- Whether the position can take on drug checking duties in addition to their existing workload.
- Whether the host site will cover the staff person's time or share costs; this should be detailed in a financial agreement between the organizations.
- If training or additional education can be offered to the staff person.
- The expected duration of the role; longer terms are better to ensure job proficiency, support relationship building, and minimize re-training.
- Potential confidentiality concerns; while beneficial to have a known and trusted person in the role, it may sometimes deter service users.

Training for Drug Checking Staff

Ensuring technicians have adequate training is crucial to support capacity building and program sustainability.³ The BCCSU offers a comprehensive [training program](#) to support individuals intending to work as a drug checking technician at BCCSU-partnered sites. In addition to the core drug checking training, drug checking staff involved in delivering satellite services will need training on proper transportation of drug checking instruments, safe travel policies and procedures, and the safety protocols for each host site. Additionally, it can be helpful for drug checking staff to receive training about the local community context surrounding each host site, including local community resources. If drug checking staff will be picking up samples from local collection sites for analysis at the satellite site, they will also need training on sample transportation procedures.

For a detailed list of training items for both host sites and drug checking staff supporting satellite services, see [Appendix C](#).

FINANCIAL CONSIDERATIONS

There are two categories of costs for satellite service delivery: direct costs and indirect costs. Direct costs are associated with the actual operation of a satellite service, such as vehicle mileage and maintenance, drug checking equipment, supplies, and labour. Indirect costs are associated with activities such as stakeholder engagement, data management, reporting systems, knowledge translation, and evaluation.

Direct Costs

Mileage + Vehicle Maintenance

Satellite service delivery requires significant travel, especially if operating across large geographic areas. Most drug checking programs provide a mileage allowance and pay for travel time to and from satellite sites, allowing staff to use their own vehicles. Additional insurance (i.e., loss or damage) for transporting drug checking instruments (e.g., the spectrometer) and work-related vehicle use, as well as costs for vehicle maintenance, such as winter tires and regular servicing, should also be considered.

Equipment

Equipment expenses for satellite services will vary depending on whether the service shares equipment with a fixed site or operates independently. Independent satellite services need to acquire their own drug checking instruments and related equipment. All programs will need a sturdy, padded, and shock-resistant case to protect the FTIR during transport (see the BCCSU [Preventative Care for FTIR Spectrometers](#) standard operating procedure for recommendations). Host sites that collecting samples during off-hours will also need a secure lockbox (or similar) to store samples. For more information on required equipment, see the [BCCSU Implementation Guide](#) and [Appendix D – Satellite Service Equipment and Supplies](#).

Supplies

Satellite services use the same supplies as fixed site services, including PPE (gloves and masks), and immunoassay test strips (e.g., fentanyl, benzodiazepine). Programs will need containers for transporting and storing supplies. Depending on the host site's services, the drug checking team may also need to provide harm reduction supplies, which are available free of charge at designated drug checking sites in BC. For a comprehensive list of supplies see the [BCCSU Implementation Guide \(pg. 102\)](#).

Staffing

Staffing costs associated with operating a satellite service depend on the satellite drug checking staffing model and partnership agreements. For example, staffing costs will differ if the host organization shares a harm reduction worker with the drug checking program as opposed to the drug checking program using their own dedicated staff. Staffing costs will also vary depending on whether a leadership position already exists within the drug checking program, or if a new position is required.

With this in mind, program planner will need to consider costs associated with a mix of staff that includes some combination of the following roles: volunteers, harm reduction workers, technicians, and leadership. When consulting or employing peers, BCCDC frameworks on equitable compensation for [community-based work](#) and [short-term engagements](#) should be referenced.

Other

Providing a satellite service will also accrue administrative costs, such as the cost of printing sample collection forms, chain of custody forms, labels for packaged samples, UPHNS designation letters, educational materials, and training guides.

Indirect Costs

Service Promotion

Drug checking programs are encouraged to develop a communications plan before implementing satellite services. This may include a social media strategy or creating knowledge products that promote the service (e.g., posters, FAQs). This plan should also include strategies for communicating potential future changes to the satellite service, such as schedule changes or expansions to other communities or locations.

Knowledge Mobilization

Development of knowledge products and dissemination strategies to share information generated from the satellite drug checking service are the basis of these costs. These may include a website, weekly/monthly reports or social media strategies to distribute information related to the service such as number of samples checked, types for samples, or community reporting.

Community and Stakeholder Engagement

Whether through in-person or virtual meetings, community engagement may involve discussions with prospective satellite sites, organizational partners, Indigenous partners, networks of people who use drugs, public health professionals, law enforcement personnel, or local government officials. These meetings may require supplies, food and beverages, printing, stipends for participants^a, or culturally appropriate gifts. Travel expenses may also be necessary, especially for meetings with satellite sites and community collaborators.

Staff Training

All host site staff involved in drug checking service delivery require training, especially if they are collecting samples during off hours or assist with testing. The [BCCSU Drug Checking Introductory course](#) covers essential topics such as spectrometer operations, test strip procedures, and safe sample handling and storage. Additional hands-on training from the drug checking team is recommended to familiarize local staff with their roles and safety protocols. If the host site is new to harm reduction services, harm reduction training may be necessary. Additionally,

a When engaging with people with lived/living experience of substance use, it's best practice to offer stipends for their time and expertise. See BCCDC peer payment standards.

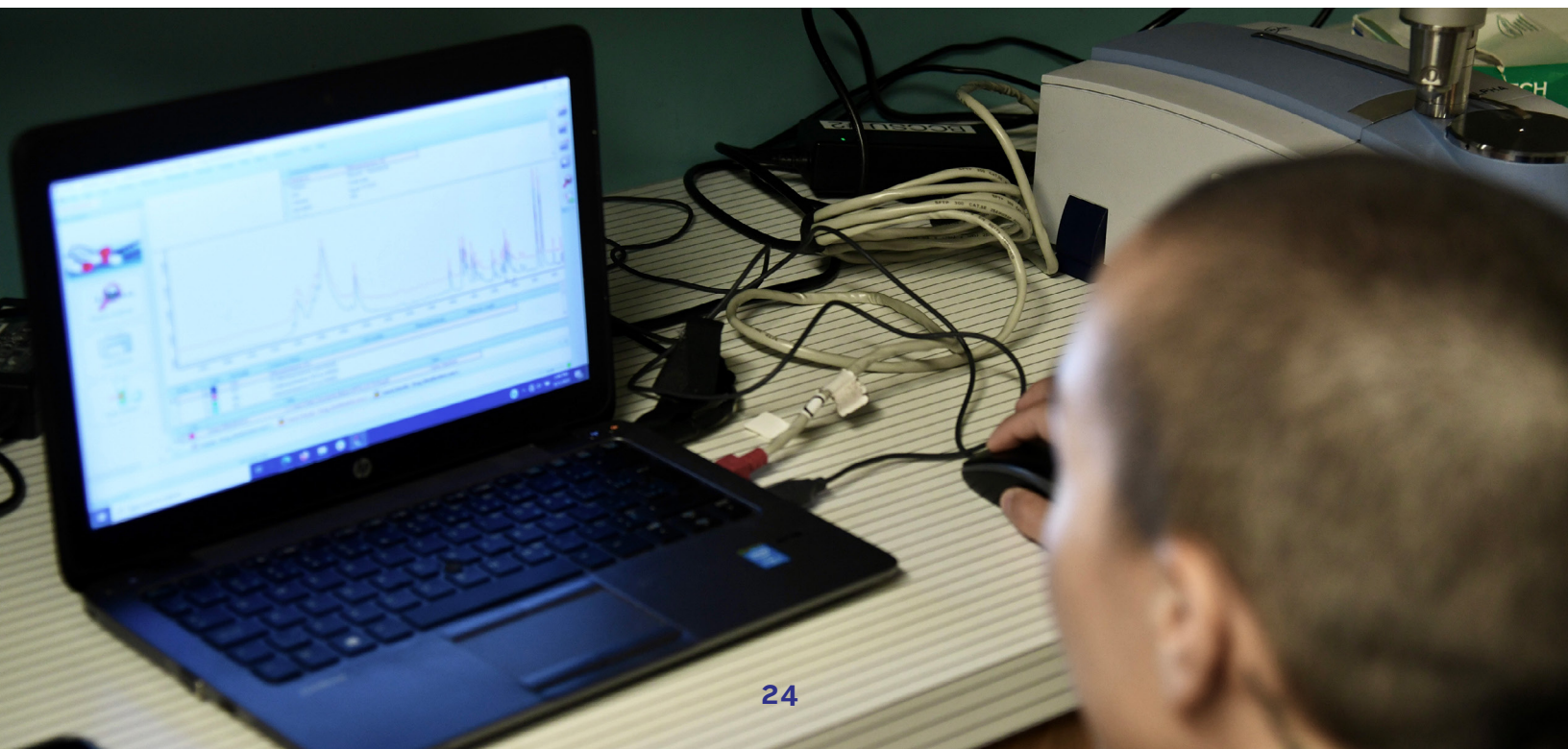
travel to and from the host site to deliver training sessions should be accounted for.

Drug checking staff will also need training on satellite service operations, including safety procedures, instrument transportation protocols, and information about each of the host sites and the surrounding community context. **It is important to consider staff training as a recurring cost to account for staff turnover and the need for ongoing education.**

Evaluation

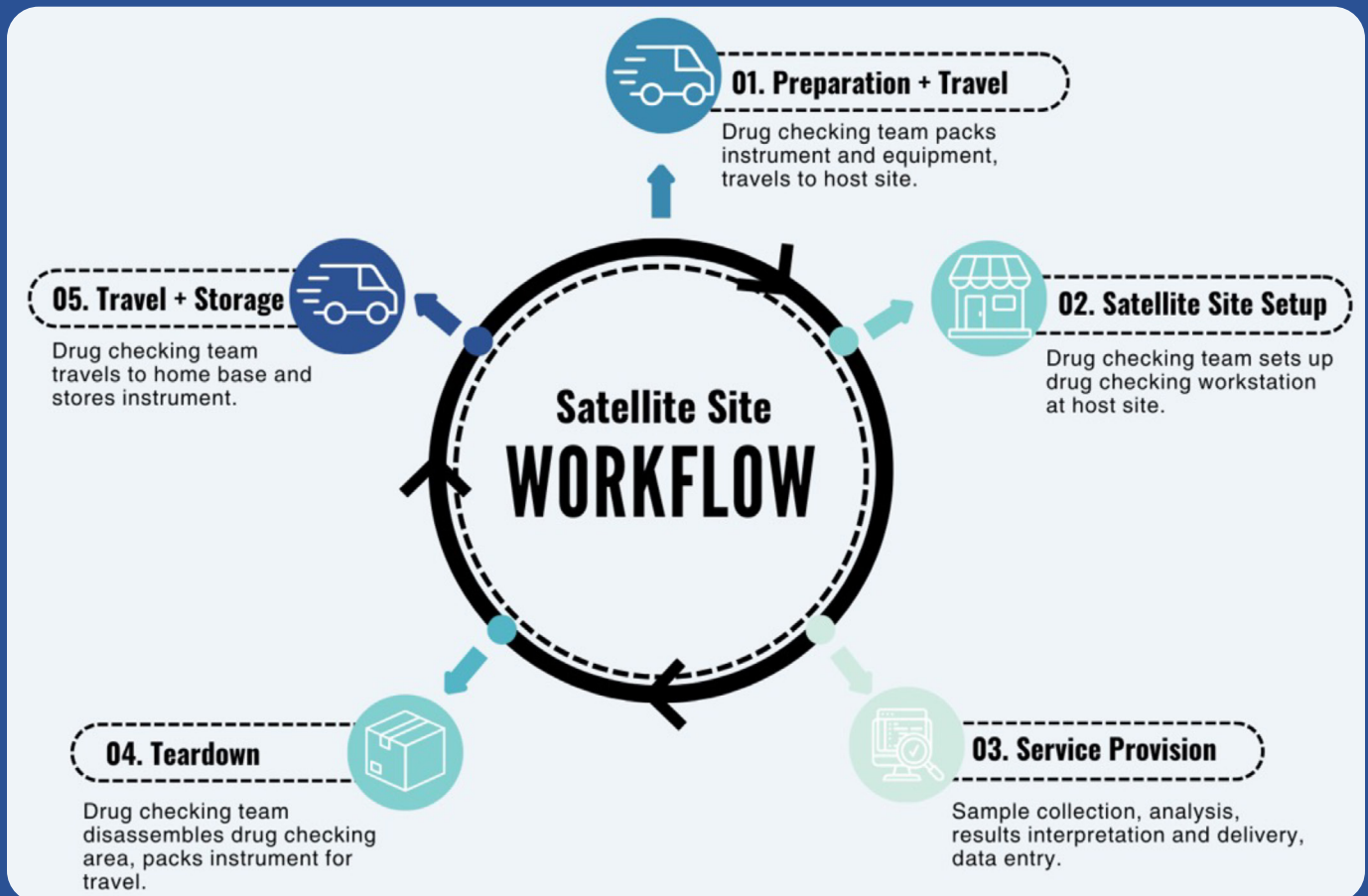
A smaller in-house evaluation of satellite services may be helpful to support ongoing service delivery or when considering expansion into new communities. This may involve tracking and reporting on key performance indicators that reflect the reach and impact of the service such as number of samples collected, service user demographics, or general categories of samples being analyzed (e.g., down/opioids, stimulants, benzos etc.). Impact can be assessed by changes in knowledge or behaviour. They are also a good tool to identify areas for quality improvement. See [Program Evaluation Guidance](#) and Considerations.

The cost of the evaluation will be influenced by its scope and choice of either informal or systematic approaches. Some organizations may choose to conduct the evaluation in-house, while others may prefer to partner with a research institute or hire a third-party evaluation group to conduct a more comprehensive assessment. If partnering with an outside organization, it is advised to establish a financial agreement, especially if services are being provided in-kind.



OPERATIONAL CONSIDERATIONS

Figure 3. Example Satellite Service Delivery Workflow



Preparation & Travel

Before travelling to the satellite site, the drug checking team should review their organization’s travel safety guidance to make sure it’s safe to travel (e.g., weather). See the [Safety Considerations](#) section for information on assessing safety. Once it’s deemed safe to travel, the drug checking team transports the instrument (e.g., spectrometer) from its designated storage site to the host site.

Depending on the host site and partnership agreement, drug checking staff may need to bring additional equipment and supplies, such as harm reduction equipment, a folding table, chairs, and educational resources for display. See [Appendix D](#) for satellite service equipment and supplies. All other drug checking supplies can be found in the [BCCSU Drug Checking Implementation Guide](#).



Sharing Setup Duties

It may be helpful to discuss the drug checking set up and tear down procedures with the host site in advance. Discussion should include guidance on storing unused supplies, returning furniture to its original position, and sanitizing the space. It's also important to clearly identify who is responsible for each task. These discussions and any resulting agreements can help maintain consistency and organization, enhance safety, streamline set up and tear down, and promote a sense of shared ownership and responsibility.



Confidentiality

Service user confidentiality is essential to successful drug checking services. Special care is required to protect the privacy and confidentiality of individuals accessing co-located services. The drug checking service and host site should work together to select a suitable location within the host site for drug checking that safeguards service users' privacy and confidentiality from other service users as well as from host site staff.

Satellite Site Setup

Setup should follow the same procedures as fixed drug checking sites (see the [Drug Checking Operational Technician Manual](#) for details) and the drug checking work areas must meet guidelines detailed in the [Operational Guidance to Reduce Exposure and Contamination Risk](#). Refer to BCCSU [FTIR Preventative Care](#) standard operating procedure.

When setting up the satellite drug checking work area, make sure:

- To check the surrounding area regularly for any safety hazards (see the [BCCSU Drug Checking Workspace Safety Guidance \(pg. 13\)](#) for more information).
- There is enough space for the instrument and related equipment, including a hard surface like a table to place the instrument, and seating for staff and at least one service user.



Summer Service

Some programs might choose to offer drug checking services outside during the summer. If they do, it's necessary to plan for how to keep everyone safe in the heat. This includes determining whether any additional equipment may be needed, and how being outdoors may impact service delivery (e.g., electricity). Programs that have tried this before found that bad weather like rain and wind can be challenging when set up for outdoor operation in the summer. This can potentially damage the equipment, be physically uncomfortable for staff and service users, and can make it harder for people to access the service—especially if there's no cool and comfortable place to wait outside for results.

- The workspace is clean and avoid operating the instrument in dusty environments (e.g., outdoors near dirt roads, poorly ventilated areas).
- The workspace is not located directly next to an open window or air vent.
- To consider the flow of traffic into and out of the space and ensure the table is not going to get bumped. Limit the flow of people walking by the table with the spectrometer or other drug checking instruments.⁴
- The drug checking instrument can be kept secure (e.g., locked door).
- The space meets service user privacy needs.
- There's a clear path to safely get in and out of the space. Drug checking staff need to have a way to safely remove themselves or easily ask for help from others if there is a potentially threatening situation or other emergency.
- There's a sink close by for handwashing.⁴
- There's an accessible waiting area for service users (at minimum, a chair) or options nearby where people can wait¹ (e.g., a park).
- Drug checking staff have a place to securely store personal items during service delivery.



Transporting Instruments

Many drug checking instruments are sensitive (and expensive). Although portable, they are not typically meant to move around a lot. Bumps and drops can impact the internal components (like mirror alignment), which requires more frequent and expensive repairs. To keep drug checking instruments in good working condition for a longer time:

- Only transport the instrument in the manufacturer's hard case. Some sites double encase the spectrometer, using an extra case to provide an additional layer of protection. Always carry the cased spectrometer flat.
- Do not wheel or roll the instrument, even if the case has wheels. This will avoid bumping.
- Securely store the hard case during transport (to avoid sliding, bumping), such as wedging it underneath a seat. The instrument should never be transported loosely in a trunk, passenger seat, or truck bed. Keep all relevant cords and materials together during transport.
- Do not leave the instrument unattended in a vehicle or host site because it might get stolen. It's okay to momentarily leave it in a locked vehicle or room to use the washroom or get food if it is hidden from view.
- Keep the instrument in a warm place to avoid condensation issues.
- If a drug checking service has multiple instruments, rotate the spectrometers being transported.
- Schedule additional servicing of frequently transported spectrometers.
- Perform and record performance qualification score each time the instrument is set up in a host site to ensure it is performing and no damage has occurred during transport.

Information Area

Aside from the workstation, the drug checking service is encouraged to work with host organizations to set up an area with information on the drug checking service, substances and substance use, harm reduction resources, and scheduling.⁵ This can promote awareness and service uptake and gives people the opportunity to ask questions and initiate conversations about drug checking and substance use.

Sample Collection

There are two ways that samples can be collected in the satellite service delivery model: during scheduled service hours or during off hours through collection sites.

During scheduled drug checking service hours

The drug checking team or partnering harm reduction worker from the host site can collect samples directly from service users during scheduled drug checking service hours. This is also referred to as point-of-care and closely mirrors samples collection at fixed sites. All sample collection procedures must meet the criteria detailed in the [Drug Checking Operational Technician Manual](#).

Service users can choose to wait to receive their results directly from the technician, return later or access their results remotely (see the [Delivering Drug Checking Results](#) Section). If they choose to stay, they should be offered a safe and private space to wait.

During off hours

Some host sites and community partners may collect samples outside of the scheduled drug checking service hours, storing them until the next scheduled service. This allows service users to drop off samples with a trained, designated staff member at the host site until the satellite service is available to test the samples. **All sites collecting samples must have a UPHNS designation.**



Community Wisdom

Outreach Sample Collection

A UPHNS designation only covers staff transporting samples from designated collection sites directly to the drug checking service. If you collect samples from locations that are not indicated on the designation (e.g., street outreach), you are not covered under the UPHNS protections!

Staff that handle samples during collection outside service hours must have completed safety training on reducing exposure and contamination risks in drug checking. This includes proper drug handling, cleaning procedures, PPE use, safe disposal, exposure response. The drug checking team is responsible for ensuring the host site has the necessary safety training to handle, collect, and store samples.

Additionally, staff collecting samples during off-hours must document specifics about the sample (e.g., expected contents, whether it has been used) and log it on a sample collection form. They must also complete the required chain of custody forms to track the sample from collection to disposal. These documents must be always stored with the sample. See the [Outreach Supported Drug Checking](#) document and the [Sample Collection, Storage, and Transportation](#) standard operating procedure.



Community Wisdom

Sample Collection from Third Party Service Users

Some people may choose to have their samples delivered to the satellite site by a third party, such as another service user or a service provider (e.g., outreach worker). This is called third-party drug checking. These situations can be tricky to navigate especially if you're unsure if consent has been provided by the owner of the sample to have their drugs tested or if the third party has multiple samples from different people. In these situations, drug checking staff should:

- Follow the BCBSU guidance on [Third-Party Drug Checking Without Consent](#).
- Request the same information from the third party to complete the sample collection form. If possible, ask for the end user's contact information so that the results can be delivered to them directly.
- If the end user's contact information cannot be shared, have the third party service users create a code name for the end user at sample collection. Document this on the sample collection form so that the code name is associated with the sample and results. This will help keep the end user's identity confidential when the results are given back to the third party or if the end user picks their results up at a later date. See the [Managing Personal Data and Privacy](#) section for more information.

Delivering Drug Checking Results

There are several ways that service users can receive their results:

- **In-person at point of service:** Results are provided immediately during the drug checking visit
- **In-person at a later time/date:** Service users return another time or day to get their results.
- **Remotely:** Results can be communicated via phone call, text, email or an online platform (if available).
- **Via a designated third party:** The service user can appoint another person to receive the results on their behalf (e.g., outreach worker). This individual must be indicated on the sample collection form.

In some cases, personal information (e.g., phone number, email, birth date) must be collected to get the results back to the service user. Drug checking service providers should clearly outline the policies and procedures around how they will manage, store, and destroy this personal identifying information. See the Managing Data Collection and Privacy guidance document for more information.



Community Wisdom

Delivering Results through Third Parties

Some people may choose to have someone receive their results on their behalf. This is common with satellite sites where service users will appoint a host site staff member to deliver their results (e.g., outreach worker). There is a lot of nuance in how results are delivered that cannot always be adequately conveyed through writing. Additionally, the follow up discussion with service users about the results is key to delivering effective messaging and relevant harm reduction information. If the third party is a consistent person, it's a good idea to provide additional training on how to deliver results to ensure results are communicated accurately.

Teardown

Teardown procedures must follow the BCCSU [Reducing Exposure and Contamination Risks](#) operational guidance and the BCCSU [Sample Disposal](#) standard operating procedure. Any host staff involved in the tear down step must also be trained in proper cleaning and disposal procedures.

Tear down procedures should include:

- proper cleaning for equipment and surfaces,
- handwashing,
- sample and drug checking waste disposal processes,
- packing the spectrometer in its hard case,
- storing of unused supplies,
- returning furniture to its original position, and
- wrap-up communications with host site.

Travel & Storage

Once the spectrometer has been packed up, it must be transported back to its designated storage site until the next service use. Before travelling, ensure that the instrument is securely stored in the vehicle for transport and cannot move around in transit.

The spectrometer should not be stored at the host site, in a vehicle, or in anyone's home unless there is an agreement in place detailing liability conditions. The spectrometer should have a designated, secure storage location with access limited to authorized staff only.

Additional Logistics

Storing Samples

Host site staff may collect samples during off hours until the next drug checking service date. All samples must be stored in a safe or lockbox with the UPHNS designation and chain of custody form. See the BCCSU [Sample collection, storage and transportation](#) standard operating procedure for details.

Safety

To ensure staff safety at the host site and during travel, it is strongly recommended that the drug checking team co-develop a safety plan with the host organization. This will prepare both the drug checking and host site staff to respond to situations such as adverse weather conditions, altercations with service users, or a toxic drug poisoning. The safety plan should be regularly reviewed and updated to cover:

Travel

- Safety plans should address travel risks, such as accidents, vehicle breakdowns, or weather events that prevent safe travel. Existing organizational policies for work travel may be adapted for satellite drug checking.
- Protocols should guide staff on assessing travel conditions, actions if weather prevents travel, and rescheduling services. If drug checking staff are at the host site and it is not possible to return to the home organization, there should be a plan for meals and accommodation or alternate routes home.
- Travel safety plans should also cover safe travel practices, vehicle safety checks, driving in hazardous conditions, scheduled maintenance, and emergency procedures in case of accidents or breakdowns.

Staff Safety

- A minimum of two staff members should operate the satellite drug checking service to ensure assistance is available during emergencies, crisis, or potentially dangerous situations. This can consist of one staff member from drug checking and one from the host site.
- Implement regular check-in procedures at the start and end of shifts to keep everyone informed about events or incidents impacting safety.
- Drug checking staff should be familiar with the host organization's safety policies and agree on protocols for managing critical situations, including identifying who to approach for assistance during emergencies (e.g. Responsible Person In Charge (RPIC), site supervisor or other site staff).

Training and Emergencies

- Staff handling samples must be trained on potential exposure routes, safe handling, PPE use, cleaning procedures, and response to exposures. All training and procedures must conform to [BCCSU Operational Guidance for Reducing Exposure and Contamination Risk](#).
- Drug checking staff should receive site-specific emergency procedure training and be included in the development and updates of emergency protocols at the host site that account for their presence (e.g., identifying the number of drug checking staff to be accounted for during emergency evacuation).
- Both drug checking and host site staff involved in satellite services should be trained in naloxone administration, recognizing drug poisoning events, trauma-informed care, and de-escalation techniques to manage conflicts or challenging situations.¹

Service Schedule

A consistent satellite service schedule helps build trust in the service and promote uptake. Many factors can impact satellite service provision, such as weather that prevents travel to the host site (e.g., snow), staff illness, vacation, or changes in key staff, instrument and vehicle maintenance (e.g., breakdown), and special events (e.g., at the host site). Programs offering satellite services are strongly encouraged to:

- Create a contingency plan for when drug checking staff cannot attend on a scheduled service date or time.
- Create a contingency plan for when the host site cannot accommodate the drug checking service (e.g., special events).
- Maintain regular and frequent communication with the host site around service provision hours and any potential or impending changes to service delivery times. This includes communicating about special events that may impact the service schedule.
- Convey changes in schedules to service users, using tools such as flyers or notifications on social media. Ensure host site staff are prepared with information to convey to service users about the changes in scheduling along with access to other harm reduction services they can use in the meantime.

PROMOTING THE DRUG CHECKING SERVICE AT HOST SITES

Since satellite drug checking operates on a rotating schedule, it's important to implement effective communication strategies to ensure all staff and service users are informed about the schedule, locations and any changes or updates. The specific strategies employed will depend on local attitudes towards substance use and harm reduction. For example, in areas with anticipated resistance to harm reduction, a low-key approach may avoid drawing unwanted attention or scrutiny, whereas other communities with existing harm reduction services may benefit from broad promotion.

Strategies for Communities with Anticipated Resistance to Harm Reduction

When developing a communication strategy for communities that may be hesitant about harm reduction, organizations are encouraged to:

- **Identify discreet channels.** Work with the host organization to create a joint plan to align strategies and goals. Discuss appropriate promotional efforts and use multiple, discreet communication channels to promote the service and strengthen partnerships. Some examples include offering printed materials with limited distribution, attending local meetings, conducting outreach, and integrating information about the service into other existing educational sessions such as naloxone training.
- **Respect local culture.** Address stigma in an open and non-judgmental way to build trust and acceptance. Engage in community-led conversations, offer harm reduction and substance use education tailored to meet community needs, and respect local histories, traditions, and perspectives.
- **Lean on word-of-mouth.** Collaborate with local organizations, especially those with peers or outreach workers, to spread the word about satellite drug checking services through trusted channels. Potential partners include social service organizations, supportive housing providers, shelters, and public health units.



Community Wisdom

Service Engagement

To encourage widespread participation and continued engagement, consistency in service delivery is crucial: drug checking staff need to show up on the planned days as much as possible, and clearly communicate any necessary schedule changes well in advance.

Broad Communication Strategies for Communities

When developing a communication strategy for communities that are likely more accepting of harm reduction, organizations are encouraged to:

- **Collaborate.** Work with the host organization and other community partners to identify effective communication channels and develop promotional materials. Engage a diverse collection of voices to help expand the reach of the service such as drug user advocacy groups, grassroots organizations, social services, treatment providers, public health units, and post-secondary institutions.
- **Participate in local events.** Raise awareness of the service by organizing information sessions, setting up booths at local events, or conducting outreach.
- **Posters and flyers in public spaces.** Place posters and flyers in high traffic public spaces such as libraries, community centers, clinics, and coffee shops to inform people about the service and schedule.

It is important to implement these communication strategies continuously to maintain a consistent presence, ensure ongoing awareness, and provide service users with the most up-to-date information about the service.

In both settings, it is important to maintain a regular schedule regardless of the frequency of the service and to communicate any schedule changes well in advance through relevant channels. This will help build trust and ensure consistent engagement with the service. If you are not seeing changes in the uptake of the service, it can be helpful to review your promotional strategies. Adjust communications strategies based on community needs and feedback to keep community members involved. Use surveys, suggestion boxes, direct in-person engagement, and online platforms to gather input.

DATA COLLECTION AND PRIVACY

In BC, drug checking data is collected in a data repository without any personal information ensuring all results are anonymous and can't be traced back to the service user. In satellite service delivery, service users may drop off samples during off-hours and receive results later or appoint a host site staff member to receive their results on their behalf.

To link results to users in these cases, a system must be developed. Some sites collect personal information (e.g., phone number or email) or create a codename linked to the service user's sample and results. Satellite service providers must develop policies and procedures for managing, storing, and destroying this information after result delivery. For details, see the [Managing Privacy and Personal Information](#) guidance document.

SOURCES OF INFORMATION

The information in this document was collected through:

1. Consultations with drug checking service providers to gather insights and expertise related to each document series. Examples of shared knowledge include topics on safety, confidentiality, and satellite site attributes.
2. Consultations with drug checking service stakeholders (e.g., social service organizations, public health units, people who use drugs) for other relevant information. Examples of information shared includes motivation for participating in drug checking services, confidentiality and anonymity, and benefits and challenges to drug checking service.
3. A literature search of academic databases for international and national articles published in English, within the last 10 years, on drug checking and other methods of harm reduction delivery (e.g., mobile, outreach). Relevant articles were reviewed in full. Associated relevant references were also reviewed and included where appropriate.
4. A grey literature search on drug checking and other methods of harm reduction delivery (e.g., mobile, outreach) was conducted using google. Articles were reviewed for relevance and included where appropriate.

ADDITIONAL RESOURCES

You can access more drug checking resources, including best practices, operational guidance, standard operating procedures, and technician tools, at our website [drugcheckingbc.ca]. Program planners and staff looking to develop or expand satellite drug checking services in their community are encouraged to explore the related resources.

REFERENCES

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APPENDIX A - CONSIDERATIONS FOR PARTNERSHIP AGREEMENTS

Agreements can take different forms and your organization may have a template that they typically use for these kinds of agreements. Some documents may be more formal than others, but regardless any sort of agreement should clearly lay out roles and responsibilities so all parties understand what they are agreeing to. You may wish to seek legal advice before signing any sort of partnership agreement. Below are some items to consider including in your agreement.

Considerations for Roles and Responsibilities

Host Organization

- Designate a host site that provides physical space for satellite drug checking service, including access to additional facilities (e.g., washrooms) and utilities (e.g., power, internet).
- Designate a 'point person' from the host site to liaise with the drug checking organization, oversee satellite site operations, ensures host site staff are aware of and complete training related to drug checking services, and communicate with the local community about the drug checking service.
- Ensure the safety and security of the drug checking organization staff and drug checking service users when at the host site.
- Ensure timely communication of drug checking schedule changes to local community members and partner organizations.
- Ensure continuity of drug checking services in the event of host site staff turnover (i.e., designating a new 'point person').

Drug Checking Organization

- Conduct drug checking services at the designated host site according to a pre-determined schedule, following protocols and procedures jointly created by the drug checking and host organization, as well as those of the drug checking organization.
- Provide the necessary equipment and resources for drug checking activities.
- Train host site staff on relevant aspects of drug checking operations and safety procedures to ensure proper handling, storage and disposal of samples.

- Adhere to safety protocols and procedures to reduce exposure and contamination risks in drug checking services.
- Ensure timely communication with the host site 'point person' regarding schedule or program changes.

Communication

- Delineate the schedule for regular check-in meetings and their frequency to assess the performance and effectiveness of the satellite drug checking service. These check-ins provide an opportunity to address any concerns or issues that may arise and ensure that the needs of both organizations are being met.

Monitoring and Evaluation

- Where necessary, both parties should collaborate in monitoring and evaluating the local and regional community impact of the satellite drug checking service. This may involve gathering feedback from staff and service users, assessing service utilization rates, and identifying areas for improvement.

Conflict Resolution

- In the event of disputes or conflicts arising from this partnership, the MOU should describe how both parties will resolve issues promptly and amicably.

Termination of Agreement

- The agreement should include conditions of terminating the partnership. It is recommended that advanced written notice is provided and that a minimum time frame is defined.
- If the host organization is no longer able to offer satellite drug checking services, the drug checking organization should be given as much notice as possible to source alternative satellite service locations to minimize service disruption for community members.

APPENDIX B – SATELLITE SERVICES STAFFING AND ROLES

Host Site Staff

The role of host site staff will depend on their level of involvement in service delivery. Regardless, all host site staff should be familiar with drug checking and harm reduction, when and how the service operates, and where service users can access additional information.

Host site staff involved in sample collection during off-hours will also play a role in:

- Documenting specifics about collected samples from service users
- Properly handling and storing samples until the next service date, including packaging, labelling, and completing all relevant forms.
- Providing education and harm reduction information to service users accessing the service off-hours
- Reducing exposure and contamination risks during sample collection and storage
- Working with satellite site staff and community members to build strong partnerships and respond to evolving needs and priorities

Ideally, each host site designates a “point person” who is responsible for:

- Coordinating the satellite service with the drug checking team
- Responding to staff and service users’ questions about the program
- Overseeing host site’s responsibility for drug checking service operation as per the MOU
- Ensuring host site staff adhere to all procedures for safe handling, storage and transport of samples
- Ensuring host site staff adhere to sample collection procedures and completing required documentation
- Supporting community outreach and engagement activities to build rapport and spread awareness about the drug checking service to potential service users.

Drug Checking Staff

Satellite services can be demanding and may require drug checking staff to work in diverse environments such as shelters, community centres, public health units, or post-secondary schools. Each setting comes with its own unique facilitators and challenges. Therefore, technicians and support staff must be adaptable and resourceful to effectively address the needs of different communities.

In addition to the roles described in the [DRED Drug Checking Implementation of Services Manual](#), and the [BCCSU Drug Checking Implementation Guide](#), key activities include:

- Working with satellite site staff and community members to build strong partnerships and respond to evolving needs and priorities
- Teaching host organization staff and community members about drug checking
- Facilitating education and training of host site to properly collect and store samples during off-hours
- Facilitating proper storage and transport of samples for confirmatory testing (if applicable)
- Setting up and tearing down the satellite site(s)
- Supporting community outreach and engagement activities to build rapport and spread awareness about the drug checking service to potential service users
- Supporting sample collection from other designated collection sites
- Managing instrument transportation and travel
- Communicating program updates or schedule changes to host site(s)
- Checking in with host sites pre and post service shifts to ensure smooth operations

To ensure satellite services are delivered in a safe and consistent way, drug checking technicians and support staff should be knowledgeable about:

- Safe handling, storage and transportation of samples
- Safe transportation of drug checking instruments
- Program safety procedures including protocols for safe travel to and from satellite site(s)
- Host site safety procedures
- Workplace set up and tear down procedures
- Community engagement strategies
- Outreach safety procedures
- Non-violent crisis intervention and de-escalation

Management of Satellite Service

This role may be filled by a program supervisor, manager, coordinator, or other organizational leader responsible for providing program-level and administrative support to drug checking services. A dedicated position is recommended for a larger satellite service model that operates multiple satellite sites across a region.

Relationship-building is key to this position as it involves coordinating service delivery within the drug checking program and potentially between multiple satellite sites or in conjunction with a fixed drug checking site.

Key activities related to this position include:

- Managing relationships across multiple organizations to ensure safe and consistent service delivery within a community or region.
- Collaborating with satellite site leadership to ensure safe and consistent service provision.
- Facilitating education and training of host site to properly collect and store samples during off-hours.
- Updating UPHNS designations to include all new and existing satellite service locations and collection sites.
- Developing training materials for host sites such as off-hour sample collection and storage manuals and other reference documents.
- Developing safety and operating procedures for drug checking staff including protocols for safe travel.
- Determining and updating service schedules.
- Informing stakeholders of service operations.
- Collecting and disseminating drug checking data.
- Supporting evaluation of the satellite service including defining and reporting on performance measurement indicators related to the reach and impact of the service.
- Proactively addressing potential community concerns.
- Providing day-to-day support for satellite drug checking service staff.

To ensure drug checking services are consistent and high-quality, especially if a program runs multiple satellite sites in a region, leaders should be knowledgeable about⁵:

- How the service is delivered.
- What supplies and equipment are required, and where they're stored (e.g., at the satellite site or transported with the staff).
- How to communicate and build relationships with the satellite site(s) (e.g., if a scheduled service is cancelled).
- Safety and emergency protocols (e.g., crisis de-escalation).
- Safe handling, storage, and disposal of samples.
- Service user confidentiality and privacy (e.g., where the service is located within the satellite site).
- Methods to share results with individual service users and community level messaging (e.g., drug alerts, weekly/monthly reports).

APPENDIX C – STAFF TRAINING CHECKLISTS

Host Site Staff Training Items

Staff Role	Training Items	Recommended Trainer(s)
<p>A. Interacts with service users at the host site but does not handle samples</p>	<ul style="list-style-type: none"> • How to talk about drugs and drug checking with a harm reduction lens • Who the point person is at their site to refer service users to for in-depth questions • The service delivery schedule and where service users can access this information and any schedule updates 	<p>Drug Checking Program (Technician)</p>
<p>B. Involved in sample collection at the host site during off-hours</p>	<p>Tasks outlined in row A and:</p> <ul style="list-style-type: none"> • How to safely handle, collect, and store samples • How to complete sample collection forms and relevant documentation including managing personal information • Standard Operating Procedures for drug crushing • How to reduce exposure and contamination risks in accordance with the BCCSU Operational Guidance • The type(s) of drug checking technologies the satellite service uses, and technology limitations (broadly) • Harm reduction messaging and tips 	<p>Drug Checking Program (Technician)</p> <p>BCCSU Drug Checking Introductory Training</p>
<p>C. Harm Reduction Worker involved in day-of service delivery; Host site point person</p>	<p>Tasks outlined in row B and:</p> <ul style="list-style-type: none"> • How to use immunoassay test strips (e.g., fentanyl, benzodiazepine, LSD) • Understanding cuts and buffs • Standard Operating Procedures for drug crushing • Safe transportation of samples from collection sites to the satellite site in accordance with UPHNS requirements 	<p>Drug Checking Program (Technician)</p> <p>BCCSU Drug Checking Introductory Training</p>

Drug Checking Staff Training

Staff Role	Training Items	Trainer
<p>Drug checking technician, Harm Reduction Worker</p>	<p>How to safely handle, package, and transport samples according to provincial standards</p> <p>Procedures for transporting samples from collection sites to the drug checking site</p> <p>How to complete sample collection forms and chain of custody documentation</p> <p>Safety and emergency protocols</p> <p>Policies and procedures for collecting samples and/or delivering drug checking results off-site</p> <p>Outreach safety training including situational awareness, risk assessment and management, personal safety, crisis intervention and de-escalation, and cultural competency</p> <p>Legal and ethical considerations related to outreach drug checking and possession</p> <p>Community engagement strategies to build rapport with diverse populations of service users</p>	<p>Drug Checking Program Leadership</p>

APPENDIX D – SATELLITE SERVICE EQUIPMENT AND SUPPLIES

In addition to the equipment and supplies required to operate a fixed service (see [BCCSU Implementation Guide](#)), satellite drug checking services may also need:

General Operations

- Work designated cell phone (with data plan)
- Vehicle to transport staff, instrument(s), and equipment
- Hard travel case to store and transport the instrument
- Storage bins for supplies
- Locking portable file box or folder (for sample collection forms and result slips)
- Printed copy of UPHNS designation letter
- Extension cord
- Stable power source such as a battery power supply (if power is not available)

Depending on the infrastructure and access at the host site, you may also need:

- Portable internet
- Folding table
- Folding chairs (minimum 3)

Travel Supply Box Checklist

- Gloves
- Goggles/safety glasses
- Medical masks
- Isopropyl alcohol wipes
- Task wipes (KimWipes)
- Metal spatula
- Wash bottle
- Paper cups
- Activated charcoal (Deterra pouches) or kitty litter
- Immunoassay test strips (fentanyl, benzodiazepine)
- Vortexer (optional but recommended)
- Drug crushing equipment (see Drug Crushing SoP)
- Biohazards container
- Cleaning and sanitizing agents
- Disposable rags or paper towel
- Spill kit
- Printed sample collection forms
- Printed result slips
- Printed educational resources
- Harm reduction supplies
- Permanent small point marker or pens

If the service will be transporting samples for confirmatory testing, you will also need:

- Medium-sized zipper bags (for samples and sample collection forms)
- Small zipper seal plastic baggies (2"x2") or centrifuge tubes (1.5-2mL)
- Manila envelopes (9"x12") with enclosed UPHNS Designation letter
- Safe storage for samples (i.e., a device that locks such as a safe or lockbox)

Supplies for Off-Hour Sample Collection

Host sites that will be collecting samples outside of drug checking service hours must be equipped with the following materials. See BCCSU Sample Collection and Storage SOP for additional information.

- Nitrile gloves
- Metal lab spatula
- Small zipper seal plastic baggies (2"x2") and/or centrifuge tubes (1.5-2mL)
- Alcohol wipes
- Kimtech task wipes
- Printed Chain of Custody forms
- Printed sample collection forms
- Medium-sized zipper bags for samples and sample collection forms
- Manila envelopes (9"x12") with enclosed UPHNS designation letter
- Safe storage (i.e., a device that locks such as a safe or lockbox)
- Pens
- Permanent marker
- Labels
- Printed posters about the drug checking service
- Printed educational resources



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If you would like more information about drug checking services in BC, please visit:

www.drugcheckingbc.ca

or email drugchecking@bccsu.ubc.ca