

One Off Event(s) – Ordering Safer Sex Products

The British Columbia Centre for Disease Control (BCCDC), with oversight of the Harm Reduction Strategies and Services (HRSS) committee provides condoms and lubricant without charge to an authorized community or public health organization in BC. New sites may request regular or temporary approval for condom and lubricant distribution.

Sites seeking temporary approval e.g. festivals and other events, must request approval through the Health Authority (HA) Primary Distribution Site Manager or HA HRSS Representative. In some cases, sponsorship decisions are made in collaboration with the BCCDC Harm Reduction Lead. The temporary site will receive supplies through existing primary and secondary sites where possible; the HA contact will facilitate connections between existing and temporary sites.

Sponsorship

Events where < 100 boxes of male condoms **OR** < 50 bags of female condoms in total are requested; decisions to sponsor and provide supplies are made by:

• Primary distribution site manager and/or HA HRSS Representative

Events where > 100 boxes of male condoms **OR** > 50 bags of female condoms in total are requested; decisions to sponsor and provide supplies are made by:

HA HRSS Representative and BCCDC Harm Reduction Lead

Duties of one-off event organizers

- Comply with HRSS policies and aligns strategy with primary site
- Informs provider site of supply needs at least 8 weeks before the event
- Store supplies appropriately, manages inventory
- Have supply quality assurance process in place (i.e., to check condition and expiration date of supplies)
- Accurately forecasts usage and need
- Return surplus quantity to same provider site, report exact # supplies distributed

Duties of sponsoring site

Performs due diligence before sponsoring. Assess:

- Ability of event staff to comply with HRSS policies and best practices
- Forecasted usage/need
- Forwards contact information of one-off event to BCCDC with the replenishment requisition, checks "one-off event"
- Assess true need for supplies and if necessary controls usage during event (if quantity being distributed is significant above forecasted amount)
- Ensures that surplus supplies from event are returned to provider site
- Documents usage, successes and challenges for future events and reports learning's to HA Harm Reduction contact

Order form for one-off events

The "One-off event Request Form" (see over) must be completed and faxed to the Health Authority contact for approval. Once site/event approved supplies will shipped either directly to the requesting agency or picked up from the primary site with no delivery charge as agreed.

To ensure timely delivery, this request must be completed 8 weeks prior to the event.

One-off Event Harm Reduction Supply Request Form (To be completed by non-governmental agency requesting one off supplies from a health authority)

Sponsoring Health-Unit/Primary distribution site name:	
Contact person:	Email:
Tel# : Fax#	! :
Note: Where your site is not the event organizer, please include a letter authorizing your agency to distribute condoms and lubricant at the event described below. This letter must be received prior to shipping of supplies.	
Event Details	
Name and type of event :	· · · · · · · · · · · · · · · · · · ·
Contact person:	Email:
Position:	Phone:
Address:	Fax:
Sponsoring agency and partners:	
Location of the event:	
Date of Event:/ Length of event: day(s)	
Will the event include overnight camping ? (Y/N)	
Expected number of event attendees:	
Please describe event attendees (age	groups, etc.):
Non-profit event For profit event	
How do you plan to distribute education messages on proper condom and lubricant use and disposal?	
How do you plan to distribute condoms and	d lubricant?
condoms; 1,000 (10 bags @ 100/bag) rece	
How will you ensure condom and lubricant materials are removed from the area around the event site:	
	ealth Authority contact of any undistributed supplies and return them to any supplies were distributed and returned to the primary site will
Name of HA Approver:	
Signature of HA Approver:	
Please fax or email this form to your health authority harm reduction contact	