

HSA, Public Health



Public Health

# County of Santa Cruz Syringe Services Program (SSP) Advisory Commission Program Updates

February 14th, 2023

# Current Activities

Goals: Prevent disease, link to treatment and services, improve public safety

- 1) CHRI Activities Update
- 2) Biennial Report Preparation

# California Harm Reduction Initiative

- **Watsonville In-Depth Syringe Litter Interviews  
Collaboration With Community Action Board**

-We have completed our 40 interviews with Watsonville community members who use drugs in collaboration with Community Action Board (CAB) and will report on those findings at the March 14<sup>th</sup> 2023 SSP Commission Meeting.

-We are continuing to work with (CAB) promotores to education the community of persons who use drugs on overdose prevention and syringe disposal.

- **Point in Time Survey #4**

-Survey focused on participant fentanyl use and change in modality or use.

-25 of 30 surveys have been completed and a majority have been completed by our Watsonville exchange participants thanks to the efforts of Health Program Specialist Eddie Valenzuela and Sr. Health Educator Julia Anderson who have continued to build relationships with partners and participants.

# Biennial Report Preparation

- **Reports (2019 for years 2017-2018) and (2021 for years 2019-2020) have been added to the SSP webpage**

**Data, Reports & Updates**

Select Report ▼

[Click here to send comments about these reports](#)

- [City of Santa Cruz Syringe Collection Dashboard](#)
- [Needles Found per County Departments](#)
- 2015-16 Reports: [Needles In/Needles Out](#) [Visits by Site and Month](#)
- Biennial Reports: [2021](#) [2019](#) [2017](#) [2015](#)

- [Syringe Services Program \(santacruzhealth.org\)](http://santacruzhealth.org)

# **Board of Supervisors Direction for SSP Advisory Commission**

August 23, 2022

- **Direct the Syringe Services Advisory Commission to look at the possibility of moving the North County Syringe Services Program out of Emeline and look at other physical sites at HPHP at Coral Street or mobile vans to operate the program**

# County SSP Operational Directives

## Fixed Locations:

Emeline campus in Santa Cruz  
Freedom campus in Watsonville

## Fixed Hours:

Emeline: 12hrs/week  
Freedom: 7hrs/week

## Distribution:

One-for-One exchange  
Max 100 syringes for primary  
exchange  
Allowed to exchange on behalf of 2  
people (secondary exchange)

## Collection:

Coordinate with other jurisdictions  
to install public syringe kiosks and  
pay for ongoing servicing  
Contract for enhanced syringe  
collection in “hot spot” areas

## Oversight:

Santa Cruz County  
SSP Advisory Commission

# Service Delivery Models used in Santa Cruz County

- Fixed Sites (Santa Cruz County SSP “S.C.C. SSP”)
- Mobile/Street Based Programs (Harm Reduction Coalition of Santa Cruz County “HRCofSCC”)
- Secondary or Peer-Delivery Models (S.C.C. SSP and HRCofSCC)
- Delivery Model (HRCofSCC)
- Pharmacy Distribution Model (CVS and some other pharmacies, but there are participant reports of inconsistency at point of sale)

# Mobile/Street Based Delivery Model

- Potential cost of Cargo Vans for supply and staff transport: \$17,000–\$50,000
- Retro-fitting/conversion prices: \$10,000 +
- Insurance (pending information)
- Gas (pending information)
- Maintenance (pending information)



# Mobile/Street Based Delivery Model

Mobile/street-based programs are conducted on foot, bicycle or by vehicle (e.g., van, bus or recreational vehicle). This model is also referred to as outreach.

## Some strengths:

- **Flexible if the drug scene or neighborhood changes**
- **Van potentially allows for expanded services**
- **May encounter less resistance from the local community**
- **The informal and easily accessible location may help put participants at ease**

## Some Weaknesses:

- **Need off-site storage**
- **Difficulty parking during operations and when not operating**
- **Van involves high overhead because of insurance, fuel, upkeep, driver, etc.**
- **Participants will be seen out in the open which may create privacy concerns**
- **Inclement weather can dissuade participants from coming**

**At this point SSP staff would advise that we not move all days and hours of service from Emeline and replace them with a mobile/street-based model. Some of the reasoning:**

- Evidence from closure of a fixed site and replacing services with a mobile van had an adverse effect on already vulnerable clients and reduced access to comprehensive harm reduction services.
- The HRCofSCC operates a Mobile/Street Based Program and delivery Model 4 day a week which would risk redundancy of service models if we were to switch to a completely Mobile/Street Based model
- Our participants who utilize the Emeline exchange constitute a majority of our program participation and have expressed a desire for continued services at the fixed-site location

# Alternate Fixed-Site

An alternate fixed-site clinic-based setting offers shelter and the opportunity for integrated syringe access with services offered on site.

## Some Strengths:

- **May allow for expansion of services integration of MAT, abscess and wound care**
- **If Exchange moved from Emeline it may satisfy some of the Emeline neighborhood resident concerns about persons accessing services on the Emeline campus**
- **Concerns about stigma could be reduced because visiting a clinic is not associated specifically with drug users**

## Some Weaknesses:

- **The community may not support the site's location**
- **Parking may be more difficult**
- **The environment may be too clinical and non-participant centered**

**At this point staff would advise that we not move our fixed site from the Emeline campus to an alternate location (e.g., HPHP). Some reasoning:**

- Moving exchange fixed site locations from Emeline to HPHP presents would not eliminate transportation barrier for many of our participants
- Supply storage and staff space is a concern
- Dedicated space for our participants (remaining participant centered) would be reduced if services were moved entirely to the HPHP clinic setting

# Hybrid Service Delivery Model with Emeline/Watsonville fixed sites and Syringe access offered while performing outreach with HPHP Street Medicine

Incorporating multiple models may be the most effective way for programs to expand syringe coverage and reach the greatest number and diversity of IDUs within a given health jurisdiction.

Combining models literally works to “meet IDUs where they’re at”

## **Some strengths:**

- Co-location of services increases IDUs’ access to services
- Street Medicine in the north and south county paired with syringe exchange brings syringe collection and access to IDUs who have difficulty reaching our fixed sites
- May expand program’s reach by attracting new groups of IDUs

## **Some weaknesses:**

- Does not eliminate need to identify another vehicle to bring along to transport supplies and staff
- Partnering at no use policy shelter sites do not make sense to provide syringe access services
- Program success may be hampered if SSP services are not prioritized

# Hybrid Service Delivery Model with Emeline/Watsonville fixed sites and Syringe access offered while performing outreach with HPHP Street Medicine

At this point staff we move the County SSP exchange to a Hybrid Model which maintains exchange services through our current brick and mortar sites at 1430 Freedom Blvd, Ste. B in Watsonville and 1060 Emeline Ave. while expanding exchange services at outreach when paired with Homeless Persons Health Project Street Medicine providers. Some reasoning:

- SSP staff are currently working with HPHP Street Medicine staff and report with their team and participants served
- HPPH would continue to operate their outreach van with health care services offered to SSP participants who could also access syringes at locations closer to their residences
- Flexibility of service locations to move with IDU population
- The potential to replace service day at Emeline exchange with an outreach exchange day may be a beneficial in expanding services on a lower Emeline participant traffic day and reduce Emeline neighborhood resident concerns

**Questions?**

Thank You

