Developing Syringe Services Programs



Syringe Services Programs (SSPs) provide comprehensive harm reduction services. Services include providing free sterile syringes and other injection equipment, safe disposal of used syringes, HIV and hepatitis C testing and linkage to prevention and treatment services, overdose prevention and education, and referrals to substance use disorder treatment.

SSPs are legal in Tennessee and were signed into law in 2017 and amended in 2018.

Learn more about Tennessee's SSP legislation and requirements

The purpose of this document is to provide guidance and resources for agencies interested in developing a SSP in the state of Tennessee.

<u>Learn how to become a SSP in Tennessee</u>

	Tennessee Requirements
Tennessee Department of Health Approval	Tennessee Department of Health <u>approval is required</u> to operate an SSP. Approval starts with a simple online application.
	Learn more and apply at: https://redcap.health.tn.gov/redcap/surveys/?s=8RRFJMDJYK
	 Application requirements include: Proposed location(s) Intent to implement rapid HIV and hepatitis C testing Naloxone distribution plan Security plan
	For questions about or assistance with the application, email SSP.Health@tn.gov .
Zoning Restrictions	SSPs must be located at least 2,000 feet from any school or park or 1,000 feet from any school or park in Shelby, Davidson, Knox, and Hamilton counties.
	For assistance with measuring or mapping your proposed location, email SSP.health@tn.gov

Required Services

SSPs are required to provide the following services:

- Distribution of unused needles/syringes and other injection drug equipment (e.g., cookers)
- Collection and safe disposal of used needles/syringes and other injection drug equipment
- Education on prevention of overdoses, bloodborne pathogens, substance use disorder, and treatment for mental illness
- Referral to mental health and substance use disorder treatment to individuals who request it
- Referral to or direct provision of naloxone
- Referral to or direct provision of HIV and hepatitis C testing

Public Funding Restrictions

Public funds (including federal and state dollars) **cannot** be used for the purchase of needles, syringes, and cookers.

Public funds **are allowed to support** the following:

- Staff & supplies (e.g., alcohol pads, sterile water, cotton)
- Syringe disposal containers and services
- Referral to medical care and social services
- Communication, outreach, and educational materials
- Naloxone (Exception: CDC funds cannot be used)
- Potential in-kind resources from TDH & TDMHSAS:
 - HIV & hepatitis C test kits & condoms: contact <u>SSP.health@tn.gov</u>
 - Naloxone: contact <u>cate.faulkner@tn.gov</u>

Learn more about the use of federal funds at: https://www.cdc.gov/ssp/ssp-funding.html

SSP Models Allowed In Tennessee

SSPs can operate as a **building site** and/or as a **fixed mobile site**.

Building site: an SSP located in a physical building, such as a storefront, office, or other space.

Fixed mobile site: an SSP operating from a van, bus, or other mobile unit to deliver services.

- *Important note:* if operating as a fixed mobile site, the program must have pre-determined stops/locations where services will be delivered. Each location must be included in the SSP application and be approved in alignment with the zoning requirements (see above). If a program decides to add additional locations after application approval, they must submit the additional site(s) for approval before services can be offered at the proposed additional sites.

Reporting Requirements After TDH Approval

TDH approved SSPs are required to report program outcomes annually. The annual reporting form can be found <u>here</u>.

Resources for Developing SSP Programs and Requesting Technical Assistance

National Alliance of State	
and Territorial AIDS	
Directors (NASTAD)	

NASTAD produces resources, provides technical assistance to members and community-based harm reduction programs, and advocates for an effective science-based public health approach to address the needs of people who inject drugs.

Learn about Harm Reduction TA Center & request assistance at:

https://www.nastad.org/domestic/hepatitis/drug-user-health

<u>Centers for Disease Control</u> <u>and Prevention (CDC) SSP</u> Best Practices

The **CDC** developed a technical package of effective strategies and approaches for planning, designing, and implementing SSPs.

Download the CDC Technical Package at:

https://www.cdc.gov/ssp/docs/SSP-Technical-Package.pdf

National Harm Reduction Coalition

The **National Harm Reduction Coalition** developed a *Guide to Developing and Managing Syringe Access Programs* that outlines the process of developing and starting a Syringe Access Program (SAP). It offers practice suggestions and considerations rooted in harm reduction.

Download the Guide to Developing and Managing SAP at:

https://harmreduction.org/wp-content/uploads/2020/08/Resource-SyringeAccess-

GuidetoDevelopingandManagingSyringeAccessPrograms.pdf

Comer Family Foundation

Comer Family Foundation developed a guidebook that provides information to individuals seeking to establish SSP programs in rural, at-risk areas. Drawing on current research, the guidebook contains practical information to help communities develop an evidence-based program.

Download the Guide to Establishing SSPs in Rural Areas at:

https://www.comerfamilyfoundation.org/img/A-Guide-to-Establishing-Syringe-Services-Programs-in-Rural-At-Risk-Areas-6.19.pdf

Additional Considerations & Resources

Data Collection Software

SSPs need to collect data on trends, needs, and overall program effectiveness. Data collection should be sufficient to meet needs while not creating a barrier to service delivery.

Explore SSP & Harm Reduction Software options at:

https://www.naccho.org/blog/articles/frequently-asked-questions-ssp-m-e-software

Disposal Options

Contact the local Health Department or hospital about possible partnerships to manage drop-off/collection of regulated medical waste.

Partnership will likely include a letter of agreement (i.e., MOU) outlining the terms of the partnership and any requirements such as sealing syringes in containers for the explicit purpose of syringe disposal (i.e., bio-hazard sharps containers).

You may consider reserving funds in the budget to hire a private waste management service that will pick up and dispose of used syringes and sharps. In most cases, these services include any necessary supplies to properly package medical waste for disposal. Hiring a service is also useful to document proper disposal of equipment.

Health Departments

Building strong relationships with local/regional health departments is a great way to address required and additional services such as healthcare referrals, disposal options, prevention supplies (e.g., condoms), medical supplies, and more.

Find your local or regional health department at:

https://www.tn.gov/health/health-programareas/localdepartments.html

Obtaining Condoms

Providing onsite HIV/STD prevention supplies (such as condoms) and education are essential elements of running a SSP.

Visit Tennessee Department of Health HIV Prevention webpage to find a condom distribution partner that can provide free condoms to SSPs: https://www.tn.gov/health/health-program-areas/std/std/hiv-prevention/local.html

Fentanyl Testing Strips (FTS)

FTS can identify the presence of fentanyl in unregulated drugs. They can be used to test injectable drugs, powders, and pills. Being aware if fentanyl is present allows people to implement appropriate harm reduction strategies to reduce overdose risk. Note, FTS identifies the presence, but not the amount of fentanyl in drugs.

NASEN Buyers Club sells FTS: https://nasen.org/buyers-club-app

Learn more about FTS at: https://americanhealth.jhu.edu/fentanyl

Example purchase options:

https://dosetest.com/product/fentanyl-test-strip/ https://dancesafe.org/shop/ https://www.btnx.com/HarmReduction