



End The Syndemic Tennessee
Harm Reduction Hub

APPLICATION CHECKLIST

New Agency, New County

SCAN HERE

to access the application



redcap.link/TNSSPApp

Applicant & SSP Contact Information

- Name of organization or agency applying
- Primary applicant contact information: name, phone number, email address
- Secondary applicant contact information (optional)
- SSP contact information: name of SSP (if different from organization/agency name), phone number or email address for clients to contact

Programmatic Details - Services

- How the program is accessing sterile syringes
- How the program is disposing of returned syringes
↳ Guidance linked [here](#).
- Written Verification of Participation
↳ Guidance linked [here](#).
- Services table which documents which services will be offered at the program, whether directly or by referral

Proposed SSP Location Details

- Location Table
- Zoning Requirement Maps
↳ Guidance linked [here](#).

Programmatic Details - Organizational Capacity

- Community engagement process
- Health and behavioral health services currently provided by the organization
- Data collection plan or current data collection experience
- Safety & Security Plan
↳ Guidance linked [here](#).
- Documentation of safety and security plan submission to local law enforcement (e.g., original email with confirmation of read receipt).
↳ If you need assistance with this, please contact SSP.Health@tn.gov or review the guidance in the Safety & Security Plan document linked above.
- Letters of support (optional)
↳ Letters of support from community partners, county health department, local law enforcement, and/or governing body are strongly encouraged to demonstrate and ensure community cohesion.

Want to learn more about harm reduction in Tennessee?



Scan or click the QR code to visit the Tennessee Harm Reduction Hub for more resources!



**Questions?
Contact**
SSP.Health@tn.gov