



End The Syndemic Tennessee Harm Reduction Hub

BECOMING AN SSP IN TENNESSEE

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to access the application



This checklist is for health departments seeking to establish and operate a Syringe Services Program (SSP) in Tennessee. An SSP and any operating location(s) must be approved by the Tennessee Department of Health (TDH) before starting operations. There are specific requirements for health departments prior to starting the TDH application process.



Per TN Code Ann. § 68-1-136(i), a health department **must first receive a petition by their county legislative body** to start the TDH SSP application process.



Per TN Code Ann. § 68-1-136(j), the **county legislative body must fully fund the local health department's syringe services program.**

Pre-Application Steps:

- Reach out to TDH SSP Team at SSP.Health@tn.gov
- Review TN SSP Legislation: [TN Code Ann. § 68-1-136](#)
- Review SSP Application process and checklist (see back page)
- Location meeting zoning requirement
Email TDH SSP team for zoning eligibility.
- Identify county funded staff and volunteers to run SSP
- Obtain county legislative petition indicating their support and funding for an SSP
↳ Download a template petition [here](#).

Key Program Planning Considerations:

- Where will you purchase sterile syringes and needles
- How will you dispose of returned syringes/needles
- Develop SSP Participant Verification
↳ Guidance linked [here](#).
- Develop SSP Safety & Security plan
↳ Guidance linked [here](#).
- Operational days and time
Operational flow
- Build support among community partners and community resources
- Participant engagement process

Want to learn more about harm reduction in Tennessee?



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



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APPLICATION CHECKLIST

Local Health Department

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redcap.link/TNHDSSPApp

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
- Documentation of the petition by the county legislative body to the county or district health department

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, local law enforcement, etc., are strongly encouraged to demonstrate and ensure community cohesion.

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