

County of Santa Cruz

HEALTH SERVICES AGENCY

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SYRINGE SERVICES PROGRAM- PROGRESS REPORT DECEMBER 2013

INTRODUCTION

This progress report provides an update of the Syringe Services Program (SSP) which is the program providing syringe exchange services. This report outlines the distribution and receipt of syringes provided by this program but does not account for other sources of syringes (prescription or nonprescription) available in the County.

The data in this report also serves as a Health Services Agency (HSA) quality improvement tool for program and service enhancement for the SSP. Changes made in data collected reflect the program's quality assessment and improvement measures used to address program needs.

BACKGROUND

A) Program Implementation and Components

Effective April 30, 2013 HSA began administering the SSP. The goal of the SSP is to protect and promote the County of Santa Cruz resident's health and safety by preventing the spread of infectious diseases associated with injection drug use (IDU) and by decreasing the number of improperly disposed needles in the community. The goal is addressed through three major components of the program: syringe exchange/linkage and referral, syringe disposal and community cleanup, and community awareness and education.

Syringe exchange has been scientifically proven and documented to be a public health intervention that stops the transmission of blood-borne pathogens and also reduces the number of improperly discarded syringes in the community. HSA utilizes a harm reduction approach by providing people who inject drugs with new syringes and a place to safely dispose of used syringes. At the same time, referrals and linkage to substance abuse treatment programs, mental health services, and medical services are provided along with information on disease prevention. Syringe access programs provide an essential link to health services for uninsured and marginalized populations that do not have access to traditional health care.

In addition to the program's core component of exchanging syringes and providing education and referrals, several other aspects of the program were developed and enhanced since its inception. The SSP program continues to provide these additional services to lessen the impact of improperly discarded syringes of any kind. Self-service kiosks for disposal of prescription and non-prescription syringes are located outside each of the HSA clinics. The County has expanded cleanup efforts to alleviate the problem of improperly discarded syringes. The cleanup is a combined effort between HSA Environmental Health, the Department of Public Works, the Sheriff's Department and the City of Santa Cruz. Lastly, the SSP public webpage continues to be updated as changes are made to the program and new resources such as recent scientific research become available.

In an effort to continuously improve the SSP, staff has consulted regularly with the California Department of Public Health as well as other county operated syringe exchange programs. The SSP Advisory Group consisting of local stakeholders, law enforcement, city administrators and other content experts regarding syringe exchange, disease control and drug treatment continues to meet on a quarterly basis. This advisory group has served to provide insight and guidance to the SSP while mitigating potential negative impacts of the program. HSA executive staff continues to reach out to law enforcement in an effort to maintain an open dialogue regarding syringe exchange and other substance abuse issues.

December 19, 2013

Under the County of Santa Cruz Health Officer's authority, the SSP is operated at two fixed-sites and a home visit exchange service.

B) County Operated Fixed-Sites

- 1. Hours of Operation:
 - Santa Cruz Health Clinic at Emeline: M, W, Th, and F 8 am -12 pm, Tues 4:30 pm- 7 pm

Total hours of operation: 18.5 hours/week

Watsonville Health Clinic at Crestview: M-Th 9 am- 7 pm Fr 9am-4:30 pm (closed daily from 12-1 pm)

Total hours of operation: 42.5 hours/week

2. Highlights of Demographics and Utilization Data

During the period from August 1-October 31, 2013, there were 718 visits to the HSA fixed site, which is a 21% increase from the period from April 20-July 31, 2013 (594). 322 of those visits were unduplicated. The average SSP participant utilized the exchange service twice during this period. Utilization at the Emeline site was greater than utilization at the Watsonville site respectively at 688 visits and 30 visits. The data continues to support that Tuesday evening shifts at the Emeline clinic are utilized at a much greater rate than any of the other daytime shifts currently offered.

During the first 180-day period of the SSP, the average number of clients at the 1080 Emeline site per day and per hour was as follows:

	April 30-	July 31	August 1-0	October 31	
	of clients by day		of clients by day	Average # of clients per hour of clinic	
MON	9.8	2.45	11.3	2.8	
TUE	11.6	4.64	12.3	4.9	
WED	7.5	1.87	8.9	2.2	
THU	7.3	1.82	10.4	2.6	
FRI	10.2	2.55	11.0	2.8	

During the first 180-day period the average number of clients at the Watsonville Health Clinic site per day and per hour was as follows:

	April 30-	July 31	August 1-October 31		
	of clients by day	clients per hour	of clients by day	Average # of clients per hour of clinic	
MON	.42	.05	2.3	.25	
TUE	.77	.09	2.0	.22	
WED	.46	.05	1.0	.11	
THU	.31	.03	1.0	.11	
FRI	.33	.05	2.0	.31	

Below are the utilization data and basic demographics for both County fixed-site exchange services over the period of April 30-Octber 31, 2013.

	April 30-July 31		August 1-October 31	
Age (most common group)	Emeline	WHC	Emeline	WHC
	Clinic		Clinic	
18-24		12(60%)		
25-44	405(71%)		433(63%)	20(67%)
Gender				
Male	380(66%)	10(50%)	455(66%)	19(63%)
Female	181(32%)	10(50%)	227(33%)	10(33%)
Area of Residence				
North County	303(53%)	1(5%)	501(73%)	0(0%)
Mid County	133(23%)	1(5%)	102(15%)	2(7%)
South County	19(3%)	18(90%)	19(3%)	26(87%)
Homelessness	57(10%)	0(0%)	357(52%)	9(30%)
Syringes Collected	29,442	553	35,202	1,220
Syringes Dispensed	29,756	553	35,469	1,224
Difference	304	0	267	4

C) SOS Home Visit Exchange

Street Outreach Supporters (SOS), a community-based organization whose volunteers have been vetted through the County Volunteer Initiative Program (VIP), operates the home visit component of the SSP.

Emily Ager, long time harm reduction advocate and provider of needle exchange services, passed away suddenly during this report period. Emily was one of the primary leaders of SOS. Due to the untimely death of Ms. Ager, this progress report does not have complete data from SOS. HSA would like to express sincere condolences and our deepest sympathy to Ms. Ager's family and friends due to her passing.

SOS has notified HSA that effective 12/31/13 they will no longer be providing home visit syringe exchange services in the County. The County Public Health officer will discontinue authorization of syringe exchange services by SOS on 12/31/13. Therefore, home delivery services will no longer be an authorized service provided in the County of Santa Cruz. In the next quarter HSA will continue monitor utilization of services and respond to any needs identified through program improvement if possible.

During the period of August 1-October 31, 2013, SOS reported the following:

- 172 visits, which is a 34% decrease from the April30-July 31 period.
- Narcan/Suboxone was provided to clients 7 times.

As a requirement of HSA, SOS adheres to the same policies and procedures including data collection and reporting, which is consistent with HSA's policies and procedures. SOS services are available countywide by appointment.

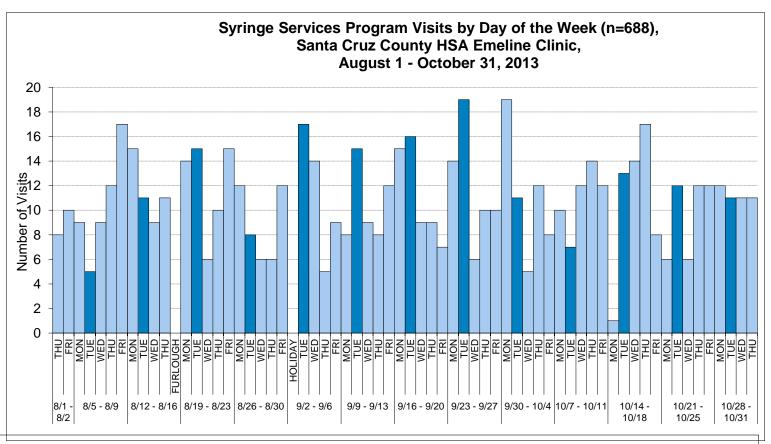
	April 30- July 31	August 1- October 31
Age (most common group)		
25-44	156(60%)	86(50%)
Gender		
Male	135(52%)	74(43%)
Female	123(47%)	72(42%)
Area of Residence		
North County	N/A	118(69%)
Mid County	N/A	10(6%)
South County	N/A	27(16%)
Homelessness	N/A	19(11%)
Syringes Collected	26,351	19,880
Syringes Dispensed	25,331	18,204
Difference	-706	-1,676

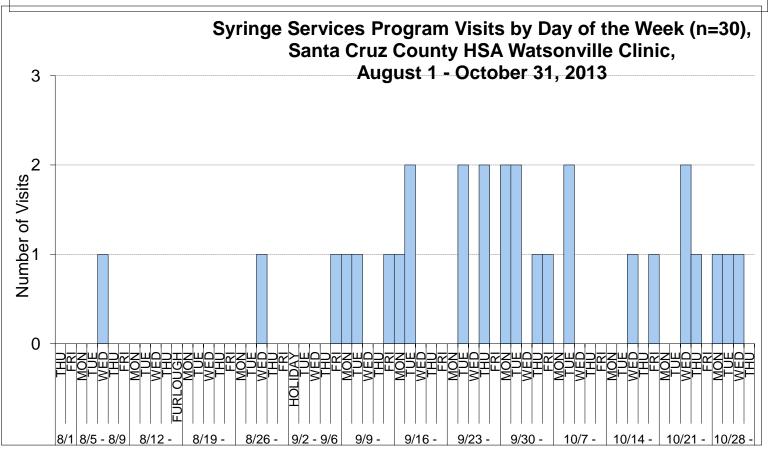
Note - SOS data collection systems were officially aligned with HSA forms beginning mid-June, so some data are not available (N/A).

Exchange Summary

Combined (fixed site and home delivery) exchange data indicated that during the period of August 1-October 31 <u>the SSP collected 1,405 more syringes than were distributed</u>. It is important to note that there are other legal sources of syringes in the community. Senate Bill 41 authorizes physicians and pharmacies to sell up to thirty syringes per transaction without a prescription.

Please go to the HSA SSP website (http://www.santacruzhealth.org/phealth/2ssp.htm) for detailed information regarding the syringe services program such as policies and procedures and frequently asked questions.





	HSA Emeline Clinic		HS Watso Clir	nville	SOS F Deliv		To: Aug 1 -		Total Apr 31 - Jul 31	
		% of		% of		% of		% of		% of
	Count	Visits	Count	Visits	Count	Visits	Count	Visits	Count	Visits
Visits	688	100%	30	100%	172	100%	890	100%	855	100%
Unique ID's 2	306	44%	16	53%	79	46%	401	45%	N/A	N/A
Age Group										
18-24	85	12%	2	7%	10	6%	97	11%	73	9%
25-44	433	63%	20	67%	86	50%	539	61%	569	67%
45 and over	167	24%	8	27%	50	29%	225	25%	199	23%
Missing / Refused	3	< 1%	0	0%	26	15%	29	3%	14	2%
Gender										
Male	455	66%	19	63%	74	43%	548	62%	525	61%
Female	227	33%	10	33%	72	42%	309	35%	314	37%
Transgender	0	0%	0	0%	0	0%	0	0%	3	< 1%
Missing / Refused	6	1%	1	3%	26	15%	33	4%	13	2%
Ethnicity										
Caucasian	522	76%	15	50%	132	77%	669	75%	670	78%
Latino	110	16%	14	47%	29	17%	153	17%	137	16%
Other / Mixed	47	7%	0	0%	7	4%	54	6%	46	5%
Missing / Refused	9	1%	1	3%	4	2%	14	2%	2	< 1%
Area of Residence										
North County	501	73%	0	0%	118	69%	619	70%	N/A	N/A
Mid County	102	15%	2	7%	10	6%	114	13%	N/A	N/A
South County	19	3%	26	87%	27	16%	72	8%	N/A	N/A
San Lorenzo Valley	41	6%	0	0%	6	3%	47	5%	N/A	N/A
Out of S. Cruz County	20	3%	2	7%	5	3%	27	3%	N/A	N/A
Missing / Refused	5	1%	0	0%	6	3%	11	1%	N/A	N/A
Homeless ³	357	52%	9	30%	19	11%	385	43%	N/A	N/A
		Avg. #/		Avg. #/		Avg. #/		Avg. #/		Avg. #/
	Count	Visits	Count	Visits	Count	Visits	Count	Visits	Count	Visits
Syringes Collected	35,202	51	1,220	41	19,880	116	56,302	63	56,346	66
Syringes Dispensed	35,469	52	1,224	41	18,204	106	54,897	62	55,640	65
1:1 or less	34,510	50	1,209	40	18,149	106	53,868	61	N/A	N/A
Extra	959	1	15	1	55	< 1	1,029	1	N/A	N/A
# Dispensed minus										
Collected	267	< 1	4	< 1	-1,676	-10	-1,405	-2	-706	-1
Narcan Provided	0	0%	0	0%	7	4%	7	1%	N/A	N/A
Any Referral	147	21%	5	17%	41	24%	193	22%	N/A	N/A
Drug Treatment	11	2%	1	3%	5	3%	17	2%	N/A	N/A
Home Delivery / SOS	10	1%	1	3%	1	1%	12	1%	N/A	N/A
Narcan / Suboxone	7	1%	0	0%	0	0%	7	1%	N/A	N/A
HIV / Hep C Testing	71	10%	0	0%	4	2%	75	8%	N/A	N/A
Nurse line / Medical	43	6%	0	0%	4	2%	47	5%	N/A	N/A
Edu. / Harm Reduction	31	5%	4	13%	21	12%	56	6%	N/A	N/A

^{1:} SOS Home Delivery October data are incomplete and not recoverable due to the death of lead staff person, Emily Ager.

^{2:} Some of the individuals utilized more than one location, so the total column does not equal the sum of the locations.

^{3:} Homeless status started being asked consistently in September, before then it was volunteered information when asked primary area of residence, so these tallies are likely an underestimate. Of note, the 357 count at HSA Emeline Clinic represents 112 individuals, some having made as many as 16 visits in the past 3 months (with an average of 3 visits per person).

HIV/AIDS and Hepatitis C Surveillance

The table below summarizes newly reported cases of Hepatitis C, HIV, and AIDS among Santa Cruz County residents from 2009 to present. The incidence of HIV acquired due to injection drug use (IDU) accounts for 5% of new cases of HIV from 2009-2012. Of note, the combined 2002-2012 proportion is 24 HIV cases related to IDU transmission among 186 new HIV cases (12.9%).

Conditions by	2009	2010	<u>2011</u>	2012	<u>2013¹</u>			Annual	
Year of Diagnosis	Total	Total	Total	Total	Q1	Q2	Q3	YTD	Average '09 -'12
Hepatitis C, Chronic	393	377	351	318	81	93	41	215	360
HIV ²	19	10	25	23	1	1	1	3	19
HIV with IDU Risk Factor	1	1	2	1	0	0	0	0	1
AIDS	9	6	12	10	1	0	0	1	9
AIDS with IDU Risk Factor	1	0	5	0	0	0	0	0	2

^{1: 2013} is a partial year and current through September 30, 2013.

Of note, all HIV data is subject to change as more complete information is collected; cases take an average of six months to be reported.

Disposal

Self-serve kiosks for disposal of prescription and non-prescription syringes are located outside of HSA's Emeline and Watsonville clinics. The County has obtained two more kiosks and is in the process of investigating additional placement locations in the unincorporated areas of the County.

The tables below summarize monthly utilization of self-serve kiosks during the 180-day report period. Utilization is measured in pounds of sharps waste.

Kiosk Location	April	May	June	July
Emeline	0 lbs.	20 lbs.	10 lbs.	0 lbs.
Watsonville	0 lbs.	15 lbs.	6 lbs.	32 lbs.

Kiosk Location	August	September	October
Emeline	35 lbs.	298 lbs.	42 lbs.
Watsonville	30 lbs.	0 lbs.	43 lbs.

^{*}September utilization for the Emeline kiosk is unusually high, the value has been verified. There is no known reason for this increased value

Syringe Services Program Advisory Group

In an effort to enhance Syringe Services in the County while mitigating any negative impacts of the program, an advisory body was formed of local stakeholders, law enforcement and content experts. The membership includes representatives from the City of Santa Cruz Police Department, City of Santa Cruz Administration, City of Watsonville Administration, Janus, Santa Cruz AIDS Project, the Harm Reduction Coalition, Westside Pharmacy, University of California, Santa Cruz, United Way of Santa Cruz County, Santa Cruz County Probation Department, Street Outreach Supporters, and many other local agencies. The advisory group meets four times per year, on a quarterly basis.

^{2:} HIV cases include persons without AIDS, concurrently diagnosed with AIDS, and those later diagnosed with AIDS.

NEW DEVELOPMENTS

HSA leadership was present at the City of Santa Cruz City Council meeting on 12/03/13 where the Council convened a special study session to discuss the Public Safety Task Force Report. In this Report, there is a recommendation regarding the SSP. HSA is working collaboratively with the County Administrative Office (CAO) and other County departments to review the Task Force Report and provide input/feedback/recommendation to the CAO and the Board of Supervisors in January 2014.