

Santa Cruz County Syringe Services Program Advisory Commission

1060 Emeline Ave Santa Cruz, CA 95060 831-454-4623 Fax 831-454-4488 TTY/TDD: 711 hsaphadmin@santacruzcounty.us

Meeting Minutes

Date: Time:	Tuesday, July 13, 2021 6:00pm – 7:30pm
LOCATION:	Remote Meeting
PRESENT:	Damon Bruder (<i>3rd District</i>), Sharon DeJong (5 th District), Patty King (At Large), Eric Sturm (4 th District)
EXCUSED:	None
ABSENT:	Nicky Meza (Administrative Aide), (At Large), , Steve Plumb (1st District), Jim Hart (2 nd District), Sven Stafford (Principal Administrative Analyst)
STAFF:	Rahshan Williams (Program Coordinator), Lisa Ledwith (Administrative Aide), Socorro Gutierrez (Health Services Manager), Gail Newel (Health Officer), Megan Holland (Administrative Services Manager),
GUESTS:	Tim G (Guest Presenter), Jane (Guest), DF (Guest), David J. Terrazas (Guest),

o Call to Order/Roll Call/Introductions

Meeting convened at 6:00PM.

• Review and Approve June 01, 2021 Meeting Minutes

- Motion to approve by Eric S.
- Seconded by Patty K.

Sharon D. – Yay, Damon B. – Yay, Patty K. – Yay

o Board of Supervisors (BOS) Update for the SSP Commission

- a. Recorded presentation by Jen Herrera
- b. Presentation to be forwarded to the Commission

o Program Updates-Sharon De Jong/Rahshan William

- a. Sharon De Jong retiring August 2nd.
 - i. Will attend august 3rd meeting
 - ii. Notified Supervisor McPherson to appoint replacement.
- b. Updates from Rahshan: Watsonville Exchange has moved
 - i. 1430 Freedom Blvd, from Suite D to Suite A -temporarily, as "permanent" location is constructed at suite B.
 - Exchanges continue to happen outside.
 - \circ Anticipating permanent site should be done end of July/early Aug.
 - \circ $\,$ Once construction is complete, exchanges can be done inside.
 - ii. HIV/Hep C testing update:

- Working closely with Teen Health Staff to relaunch testing of SSP participants.
- Finalizing spaces to provide counseling and testing in Santa Cruz and Watsonville.
- SSP staff and volunteers have completed counseling portion of training.
- Setting-up remote certification of finger prick portion of test.
- Working on Linkages to care, for those who test positive.
 - a. Need to have staff trained on how to address the potential of a positive test and linking the participant to care team if they receive a preliminary (+) test.
 - b. Making sure we have these links established before we roll out HIV/Hep C testing.
- We have CARe team staff who have experience in case management of those living with HIV, and we're able to cross train them to work in the exchange.
 - a. Determining how to use this staff to help deliver care and navigate care for participants.
- iii. Litter Abatement:
 - Downtown Streets Team continues to work in designated hotspot areas.
 - a. Working with city of Santa Cruz to install sharps containers (not kiosk) in benchlands near San Lorenzo Park. Requested by campers to have containers staff could maintain.
 - Working with city of Watsonville
 - a. Met with representatives on kiosks locations; waiting to hear final thoughts.
- iv. 120 reports of OD reversals using Narcan.
- v. Comment from Socorro: On HIV/Hep C Testing: <u>CARe</u> wants to address Hep C cascade from testing to treatment. Hep C is curable. CARe Case managers will work to support participants who need the support in Hep C tests and treatment.
- Question from Patty K.: Should I assume that there is a preliminary result when participant is tested?
- vi. Response from Socorro/Rahshan: Yes. It's an Antibody test. For HIV test, there will be a confirmatory test to link them with. With hep c positive antibody, it does not mean they are living with the virus. A certain percent will clear it. In both instances, we will need to link the person to a 2nd test if there is a positive, but it is a great 1st step. It is ready in 30 minutes. So, test, counsel, and test ready in 20-30 minutes.
- vii. Comment from Patty K.: Immediate linkage is great.
- viii. Response from Rahshan: After linkage, (after a positive test) the real hurdle is to get people to get a confirmatory test and link to care.

- Question from Patty K.: How do we know if ppl we try to link, follow through?
- ix. Response from Rahshan: Something we need to improve, and we are in the process of finding that out. When one agrees to a test you leave anonymity of exchange. Those are some nuances that we are setting up before the actual launching.
- Comment Damon B.: The linkages that we are trying to reestablish, say, when someone gets a positive initial test: before COVID hit, we had that stuff in place, am I correct?
- x. Response from Rahshan: unsure of link success and processes previously inplace. We're hoping for improved process in relaunch.
- Question from Damon B: Are we re-inventing the wheel or replacing the flat?
- ix. Response from Rahshan: the testing program was relatively new pre-covid, the kinks/system improvements never got rolling. So, we are working to relaunch and address those pieces.
- Comment from Socorro: To add, yes there were linkages to care. The improvement here is that we also want to build capacity to care. To ensure linkages are met and that case management is available.
- Question from Damon B.: if you had more funding to give you two more staff, would that help this situation and speed up the process?
- xi. Response from Socorro: We have a Hep C grant that was awarded to us by the state, and this is the first fiscal year that we can make progress on this. It includes a lot of metrics and outcomes and seems continuous, and we should make some headway. We must provide 50% of funding to community partners one of which is JANUS.
- Question from Eric S.: Thank you. Rashan, how many Watsonville collection kiosks?
- xii. Response from Rahshan: Last discussion we were speaking of one, but we let them know we have two identified. Really, it is about where is the first location that you want to place it and we have another one ready to go, if desired.
- Question from Eric S.: If one or two of those are placed out would the city maintain them, or would we?
- xiii. Response from Rahshan: We would maintain them.
- Question from Eric S.: So, if the [City of Santa Cruz] is not servicing it and is not paying for it, did you get the sense that they are supportive of the kiosks?
- xiv. Response from Rahshan: Yes, I get the sense that they are.
- Question from Eric S.: You had mentioned earlier that there were 120 reversals with Narcan?
- xv. Response from Rahshan: Yes. We collected that data from this calendar year from our participants as part of our questions we ask.
- Question from Patty K.: I would like to read the grant proposal and see how SSP impacted by grant funding. Is that possible?

- xvi. Response from Megan: Yes, that is public information. An easy link will be sent to the commission.
- Question from Damon B.: Rahshan, when you speak to the City of Watsonville, who did you speak to?
- xvii. Rahshan/Socorro: It is the Department of Public Works of the City of Watsonville. We reached out to them.

o **Presentations**

a) Med Project Review from County Department of Public Works (DPW)

i. Tim Goncharoff, Zero Waste Program Coordinator

- Background on why things are run from DPW:
- Because we are in the business of recycling and solid waste we approached from this angle and there are a host of things you can't put in trash or recycling.
- It became apparent that in that category, there were things such as left-over medicines and sharps that spurred a need to address.
- We went to local pharmacies and pharmacists were, of course, interested. We received a grant from the state to install bins in participating pharmacies.
- The concern on sharps litter grew and the Board of Supervisor (BOS) asked us what we were doing and what more we could do.
- Most of local, independent pharmacies were participating, but the big chains were not.
- The BOS did not agree with this and in 2014, passed the first ordinance of its kind to implement that if you sell a sharp you must collect it.
- Approaching syringe litter problem from Extender Producer Responsibility (EPR) began to catch hold.
 - EPR: Companies that produce products that become waste disposal problem, should be part of the solution to clean it up.
- Santa Cruz County was the third county to implement this ordinance, but we went farther and were the first to include sharps.
- Corporate Pharmacies sued us lost, appealed, and lost again. They appealed to Supreme court and lost again. So, this became the law.
- The pharmaceutical industry created med-project, to collect sharps.
- When we wrote the ordinance, med-project did not exist. We were speculating what might exist, how it will work.
- IN Mar is a second company, running in 23 states, funded by the pharmaceutical industry. They have shown interest in working in Santa Cruz County but are not doing that yet.
- Med project (our stewardship organization) needs to submit plan to county of how they will meet our needs
- County reviews the plan, ask for changes, it is approved and that is how it is run.

- Periodically, they must submit an updated plan. When they are due for one, DPW will share it with HSA. We will address any need for improvement.
- SSP housed in DPW is an accident of history. No reason it must be here. Most county programs are in HSA. Been talking with HSA management regarding this.
- ii. Question from Damon B.: Was this the program that our last speaker Larry McCarty was speaking about?
- Response from Tim: I was not there but I am sure it was. Larry's company was the contractor.
- iii. Question from Damon B.: This is a county project, but it is not county funded though?
- Response from Tim: It is supposed to be entirely funded by pharmaceutical industry. The county's ordinance doesn't cover the cities, but we run it on behalf of the city so there is a single source of oversight for efficiency. The point of contention between the County and Med Project is public Sharps Kiosks. They said they would not pay for that piece. The ordinance is clear that it is their responsibility. It was decided that the County will pay for public sharps kiosks because it was not very expensive.
- iv. Question from Damon B.: Would other med project bins be the same size? Could we have a mini one at Farmers lot DT? Placed in discrete areas for more access?
- Response from Tim: The short answer is yes. Kiosks come in all sizes. There are in fact boxes going up in the city of Santa Cruz, they have approved three or four locations and should be going up soon. One was also added to San Lorenzo Park.
- v. Question from Damon B.: Bass Pro Shop has a stainless-steel sharps container, if they can have one, why can't we have ten in downtown?
- Response from Tim: Local business owners have taken that on, like Pizza My Heart.
- vi. Question from Patty K.: If a business wants to install a sharps container, Med Project must collect it?
- Response from Tim: That is in dispute. That's how I read our ordinance, but Med Project does not agree and at this point the County is not willing to dispute with them about this.
- vii. Question from Patty K.: So, then who is doing it?
- Response from Tim: For the most part, the county is paying for it. In the case of those few private businesses, they are paying for it.
- viii. Question from Patty K.: Who gets to decide where to put them?
- Response from Tim: When it is in the public areas it is the various agencies, with board approval. In the city, DPW issues with city council approval.
- ix. Question from Patty K.: How accurate are the kiosk readings of sharps, and feedback on that? Larry thought there was a decent amount of garbage.
- Response from Tim: The Ordinance says that we will, "periodically check the bins." State passed laws, once it goes in, no one can access it. There is a

standard conversion number for pounds per syringe. But syringes come in different sizes, and some come pre-loaded. The best is estimate by weight because the state will not let us do more than that.

- Comment from Sharon D regarding future topic from last meeting: Safe injection sites- I know that I read that it was put on pause, but should that come back, what role will SSP play in that, or if anyone has spoken about it?
- x. Response from Dr. Newel: Response from Dr. Gail Newel, Health Officer: If that does pass, there are already four designated sites identified and none of them are in Santa Cruz County.

Public Comment:

3 minutes per speaker: raise hand or speak up or use chat function.

o None

A. <u>New Business/Action Items</u>

1. Topics for Future Meetings & Action Items

a. Damon B: How do we as commission get to give our report of findings to the BOS Megan? How do we as a Commission ask for what we want to report to the BOS, give recommendations, etc.? Do we have to have a sit-down session and hammer out words and vote and agree on?

• Megan will follow-up with Katie McGrew to see if she is available to answer in next meeting or send us her guidance on how to bring recommendation forward. The second might require a special meeting.

<u>Adjournment</u>

Motioned to adjourn by Patty K., seconded by Damon B.

- a) Motion to adjourn passed.
- b) Meeting was adjourned at 7:18PM