

**Needle Exchange Task Force
Report to the
Board of Supervisors**



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I. Introduction

This is a report to the Board of Supervisors by the Needle Exchange Task Force, established in 2001 by the Board to develop a plan for needle exchange in response to the dual epidemics of HIV/AIDS and Hepatitis C related to injection drug use in the county. This report reviews the work that has been done on the recommendations by the Task Force since 2002 and its recommendations related to SB 1159 which allows local pharmacies to sell up to 10 syringes without a prescription. For the purposes of this report the term “needle exchange” is used as generically and includes syringe exchange.

This report is divided into five sections: 1) Background; 2) May 2002 Task Force Recommendations and Progress; 3) Review of Senate Bill 1159; 4) Task Force Discussion Regarding SB 1159; and 5) Task Force Recommendation and Next Steps.

II. Background

In the fall of 2001, in response to the Hepatitis C Virus (HCV) Study and Report, the San Mateo County Board of Supervisors approved two important actions to reduce the spread of HIV, HCV, and other blood-borne pathogens in our community. The Board approved that 1) *Harm Reduction*—a public health model that aims to protect drug users and the community from drug related harm by implementing practical strategies for safer use, managed use, and abstinence—should be an operating principle as a way to confront the negative consequences of substance use and the HIV/HCV endemic in San Mateo County; and 2) a Task Force should be formed to review and make recommendations on the current status of, and the long-term plan for, needle exchange as one method of harm reduction in the county.

The Needle Exchange Task Force began meeting in Fall 2001 to:

- Review the operations of needle exchange programs, including government supported needle exchange programs in San Francisco and Santa Clara counties;
- Study the effectiveness of needle exchange programs. It found that these programs can reduce HIV infections by at least one-third, reduce needle sharing by as much as 80%, improve admission into substance abuse treatment, and do not increase drug use;
- Document the cost effectiveness of needle exchange. It found that these programs can save \$12-25 in related treatment costs for every \$1 spent on the program;
- Detail the legal status of needle exchange. It found that the County and its agents are protected from criminal prosecution because the Board approved “a declaration of a local emergency due to the existence of a critical local public health crisis”; and,
- Report on the strong public support for needle and syringe exchange programs.

Based on review of the scientific literature and the experience of other programs, the Task Force developed four operating principles to guide current and future efforts:

- Minimize barriers to accessing clean needles and syringes
- Maximize access to clean needles and syringes both by geographic location and time of day
- Maximize the collection of used needles
- Use needle exchange as a conduit to support services and ultimately to recovery

III. May 2002 Task Force Recommendations and Progress

The Task Force's operating principles are the foundation for expanding needle exchange activities in San Mateo County. The Task Force determined that needle exchange programs should attempt to furnish needles on a one-to-one basis, give out information on the risks of needle-using behavior, and, to the extent possible, give individuals information about treatment alternatives. One-to-one exchange should be encouraged, but clean needles could be furnished without exchange at the discretion of staff, mostly as a means to encourage ongoing participation in the program. Following are specific Task Force recommendations, which were approved by the Board in May 2002, and their current status.

1. Integration of needle exchange into County programs

2002 Recommendation: Needle exchange should be integrated into the activities of County functions that deal with the control of blood-borne diseases and/or substance abuse, particularly those dealing with injection drug use. Programs that have access to, deal with, and for the most part have strong working relationships with the highest risk populations include: the Mobile Clinic, the AIDS Program's prevention and testing activities, the community clinic network, and the County Alcohol & Other Drug (AOD) Program's contracted treatment providers.

Current Status: The Mobile Clinic and AIDS program have integrated needle exchange into their programs. There has not yet been an attempt to integrate needle exchange into the county's outpatient clinic network. Little progress has been made in integrating needle exchange into treatment providers' scope of work, other than the one provider mentioned below. More work in this area is needed.

2. Contract with needle exchange programs

2002 Recommendation: Community based agencies will provide syringes, needles, and other related items (cotton, etc.), as well as information about substance abuse treatment, education and awareness about HIV/AIDS and HCV prevention, referrals to HIV/HCV testing and counseling, treatment services and other resources.

Current Status: AIDS Prevention Action Network and Free At Last are contracted to provide these services in East Palo Alto, East Menlo Park and the North Fair Oaks areas. Approximately 10,600 syringes are exchanged per

month and 25 referrals for AOD treatment are made. In addition, over 300 referrals per month are made for other services including HIV/HCV testing and medical and mental health services. Free At Last reports that it has removed 26,000 needles from circulation since the program began. Anecdotally, law enforcement also noted that they are finding fewer needles either on the ground or on detained individuals, which may be an indicator that the exchange program is working well. The Board approved funding in May 2002 for the Alcohol and Other Drug Program to contract with Free At Last and the AIDS Prevention Action Network for these services. The Free At Last contract started in March 2003 and the AIDS Prevention Action Network contract started in July 2003. These contracts were moved to the Health Department in the approved FY 2005-06 budget.

3. Law enforcement participation:

2002 Recommendation: Law enforcement personnel should give out information about needle exchange to appropriate contacts, to every extent possible.

Current Status: Law enforcement personnel can request information from the contracted agencies, AIDS Prevention Action Network and Free At Last. However, it is not clear how many law enforcement personnel avail themselves of this opportunity.

4. Law enforcement policy development

2002 Recommendation: All San Mateo County law enforcement jurisdictions adopt the law enforcement statement of intent as written by the San Jose Police Department. This statement said that Law Enforcement members will not take enforcement action against any program staff volunteers found to be in possession of hypodermic needles for the sole purpose of participating in needle exchange programs or arrest individuals solely for possession of needles.

Current Status: Adoption by law enforcement jurisdictions occurred in 2002. The statement was re-promulgated in 2005. AIDS Prevention Action Network and Free At Last report very low numbers of arrests occurring but they will continue to educate officers about this. However, more research into incidents in the Daly City area needs to occur.

5. Syringe collection sites

2002 Recommendation: Syringe disposal sites should be placed in appropriate selected public areas taking into account safety and other community concerns.

Current Status: The placement of syringe disposal sites in appropriate selected public areas did not occur.

6. Increased Treatment Capacity

2002 Recommendation: Drug treatment capacity needs to be expanded, in anticipation of an increase in education and referrals resulting from needle exchange.

Current Status: An increase in dedicated treatment capacity has not occurred. Alcohol and Other Drug Services remains engaged in finding ways to increase treatment capacity for injection drug using clients. Injection drug users are considered a higher priority.

IV. Review of Senate Bill 1159

In September, 2004 Governor Schwarzenegger signed into law Senate Bill (SB) 1159 as a harm reduction strategy that prevents the spread of HIV, HCV, and other blood-borne diseases among injection drug users, their sexual partners, and their children. SB 1159:

- Authorizes pharmacists, who have registered with their local health department, to sell ten or fewer hypodermic needles or syringes for human use without a prescription. This provision sunsets on December 31, 2010.
- Requires pharmacies sell syringes to offer safe syringe disposal programs to ensure that these hypodermic needles and syringes are disposed of in an appropriate manner. It also requires the pharmacies to provide written information or verbal counseling about accessing drug treatment and testing and treatment of HIV and HCV.
- Allows a person to possess up to ten hypodermic needles or syringes if acquired through an authorized source and eliminates both the requirement to show identification and for a pharmacist to keep detailed records of nonprescription sales of hypodermic needles or syringes.
- Requires that the California Department of Health Services (DHS) evaluate the effects of allowing the sale hypodermic needles or syringes without a prescription, and submit a report to the Governor and Legislature by January 15, 2010.

In December 2004, the San Mateo County Health Officer, as part of a larger presentation on harm reduction, provided a short presentation to the Board of Supervisors on SB 1159. As a next step, the Board requested that the Needle Exchange Task Force be re-convened to make a recommendation on this legislation.

V. Task Force Discussion Regarding SB 1159

In response to the board's request, the Task Force held two meetings to discuss SB 1159. There was discussion on the following items:

1. Bay Area Implementation. Both San Francisco and Alameda have implemented SB 1159 and are working with several Walgreens pharmacies to implement the program. To date, no counties are known to have rejected the law. Some members noted that if the legislation were rejected, San Mateo County would no

longer align with needle exchange practices in other Bay Area counties and this could cause complicated legal issues.

2. Additional Benefits. Some members questioned the legislation's added value since needle exchange programs are currently working well, and new AIDS cases among San Mateo County drug users were decreased dramatically. While this decrease is not solely related to needle exchange, it is a measure of success. The Task Force ultimately determined that SB 1159 could further benefit County residents and enhance the effectiveness of current needle exchange activities. Although the population segment impacted by authorization is not thought to be large, it will provide another access point and will expand the harm reduction model. It was also noted that some regions of the county, in particular the North County, are not covered by the current system.
3. Problems Identifying Needle Source. Concern was raised about the ability of law enforcement officials to determine if needles were purchased/received from authorized pharmacies and contractors. The Task Force discussed the systems set in place in New York City which was able to do a tagged color study to track where the needles are coming from and see if policy is actually followed. However, this approach will not likely happen in San Mateo County due to the cost involved.
4. Participation of Pharmacies. It is likely that corporate pharmacies, such as Rite Aid, Longs, Walgreens, etc, will participate since they have already expressed interest in participating in other counties.
5. Legal Concerns. The Task Force did not raise any legal issues. The only concern was related to monitoring the exchange of needles to assume that all steps were being followed. The Task Force noted that it will be important to continue to re-educate law enforcement on this issue and to have materials readily available.
6. Methamphetamine Use and Treatment Services. There is widespread concern about the rise in rates of methamphetamine use. It was discussed that the County needs to work on making sure that treatment options are provided.

VI. Task Force Recommendation and Next Steps

Based on the review of the scientific literature and the experience of other programs, the Task Force developed these recommendations.

1. Support Authorization of SB 1159: The Task Force recommends that the San Mateo County Board of Supervisors authorize SB 1159.
2. Establish Implementation Committee: The Task Force recommends the establishment of a committee to organize the implementation of SB 1159. The Implementation Committee would include representatives from the Health

Department, Human Services Agency's Alcohol and Other Drug Program, pharmacists and current contractors of needle exchange programs. Law enforcement agencies will be kept informed of the Implementation Committee's progress. The Implementation Committee, led by the Health Department, will focus on:

- Identifying participating pharmacies
 - Creating educational materials
 - Providing training and facilities for pharmacists to dispose of needles
 - Creating syringe disposal sites in appropriate and selected public areas
 - Developing a registration system for participating pharmacies
 - Determining steps to keep law enforcement involved (i.e. knowledge updates)
 - Re-educating law enforcement on this legislation and needle exchange programs
3. Cover all areas of the County: It was strongly supported by the 2002 Task Force and the current Task Force that needle exchange be available countywide. It was noted, with a great deal of concern, that North County residents do not have the same access as in other areas of the county. It was recommended that this be addressed by re-distribution of current funds. If that strategy is not successful, increased funding is recommended.

Needle Exchange Task Force Membership

The Task Force included:

- John Conley, Deputy Director of Public Health;
- Catherine Hodgdon, representing AIDS Prevention Action Network;
- Horace Hurst, Deputy Sheriff, a representative from the Sheriff's office;
- Dennis Israelski, MD, representing San Mateo Medical Center;
- Michael Leach, Supervising Epidemiologist in the Disease Control and Prevention Unit, representing the Health Department;
- Don Mattei, Police Chief from Belmont, representing the Police Chiefs Association;
- Pat Morrissey representative from the Human Services Agency's Alcohol and Drug Program;
- Scott Morrow, MD, County Health Officer;
- Paula Nannizzi, representative from the Human Services Agency's Alcohol and Drug Program;
- Patti Perkins, representative from the Human Services Agency's Alcohol and Drug Program;
- Ken Pessa, a representative from Probation;
- Ellen Sweetin, AIDS Program Director;
- Desi Tafoya, representative from the Human Services Agency's Alcohol and Drug Program;
- Steve Wagstaffe, Deputy District Attorney