



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: Tuesday, June 1, 2021
Time: 6:00pm – 7:30pm
LOCATION: Remote Meeting
PRESENT: Steve Plumb (*1st District*), Jim Hart (*2nd District*), Damon Bruder (*3rd District*), Eric Sturm (*4th District*), Sharon DeJong (*5th District*), Patty King (*At Large*),
EXCUSED: None
ABSENT: (*At Large*),
STAFF: Jennifer Herrera (*Chief of Public Health*), Rahshan Williams (*Program Coordinator*), Nicky Meza (*Administrative Aide*), Socorro Gutierrez (*Health Services Manager*), Gail Newel (*Health Officer*), Megan Holland (*Administrative Services Manager*), Sven Stafford (*Principal Administrative Analyst*)
GUESTS: 845 991 979# (Guest), Jane (Guest), DF (Guest), David J. Terrazas (Guest), Eric S. (Guest) Larry McCarty (Guest Presenter)

1. Call to Order/Roll Call/Introductions

Meeting convened at 6:00PM.

2. Review and Approve May 04, 2021 Meeting Minutes

- Motion to approve by Damon B.
- Seconded by Patty K.

Steve P. – Yay, Jim H. – Yay, Damon B. – Yay, Eric S. – Yay, Sharon D. – Yay

3. Program Updates-Rahshan William

- i. Question from Damon B. – Why was the Biennial Report delayed until June 8th?
 - Response from Rahshan: I think it was pulled by board member to have better informed questions during the board meeting.
- ii. Question from Damon B.- To get HIV and Hep C testing going again (which was stopped due to COVID), does there need to be retraining? Did we lose people due to COVID? Are there new protocols?
 - Response from Rahshan: Personnel who were trained were re-deployed due to the COVID response. Also, the actual testing and conditions to perform the tests had to be evaluated due to COVID/privacy protocols. Then, with losing staff, new staff needed to be trained.
- iii. Question from Patty K. – Does this mean that we have an actual start date for testing?

- Response from Rahshan: No. There are still two hurdles: staffing and location.

4. Review of Commission & Election of Officers

- Sharon D. proposed guidance from the county on the process of the election of officers and if that was not possible, then to move this to the next meeting.
- Motion to approve by Damon B.
- Seconded by Patty K.
 - i. Question from Patty K. – Why do we need to elect new officers?
 - Response from Megan: Megan explained once new members are appointed by the BOS the commission must vote on a new Chair and Vice Chair, to include the new members in the vote. Gave a brief definition on the roles and how to nominate members.
- Motion made by Patty K. to nominate Sharon DeJong as Chair and Damon B. to be Vice Chair.
- No seconds-All in favor-Patty K., Sharon DeJong, and Steve P.
- Declined: Damon B.-declining his nomination as Vice Chair but supporting the nomination for Sharon DeJong as Chair. He then made motion for Patty K. to be Vice Chair.
- Approved-Patty K, Damon B., Sharon D, and Steve P.

Presentations

- a) SSP 19-20 Biennial Report – Socorro Gutierrez
 - i. Copy of presentation to be forwarded.
 - Question/Comment from Damon B. – County population sizes could be noted on slides to show that Santa Cruz is distributing more syringes per capita which is concerning. Why do we have so much more of a need compared to other counties that are so much bigger and more populous than us?
 - Question from Patty K. –The contrast between Santa Cruz County and Santa Clara County is unnerving. They have so many more participants in their program and yet they have distributed fewer syringes than we have. We have 200 fewer participants, and we are still giving out a lot more syringes. How is that happening? What don't I understand about this?
 - ii. Response from Rahshan: I do not have the number in front of me but regarding the number of participants served, yes, Santa Clara has a much greater population than we have, but as far as the estimate of percent who use IV drugs no one's cases here are reaching the actual persons who are using IV drugs. Regarding the syringes distributed, the policies they have, while it is need based, and that "may provide 40 syringes without exchange" I am not the person implementing that policy. You will also note that there is not a collection number too. As far as how many syringes they are bringing in, that info was not provided. That may be accessible through the state because they must report those numbers. One thing we can say with confidence with our program is that

syringes that are going out we are collecting that number as well. We collected more, way more if you include the kiosks, as far as within the exchange, we are collecting more than we are distributing when it is all calculated at the end.

○ Comment from Damon B. – I would also like to point out that these numbers do not include what the HRC is doing in our county. We are giving out more than Santa Clara right now, according to these numbers, that does not count what the other syringe program is doing in this county, we could guess that we could be double that. So, just one of our programs is already doing more than a much larger population. When presented to the Board of Supervisors, the population disparity should be noted between all these examples and that our data does not include what the other syringe service program is doing in our county.

○ Question from Patty K. – Is the number of participants lower this last year than the previous year, the number is 482?

iii. Response from Rahshan- It is not lower. We had a slight increase than last year. It was almost insignificant. From 468 to 482.

○ Question from Patty K.- But overall, in the bigger picture, why do we have 482 now when in previous years we have had 600-700 [approx.]? Do you attribute any of that to any harm reduction program?

iv. Response from Rahshan- I hesitate to give a direct attribution to the other program. We do not have their numbers. One could speculate but I would be hard pressed to say yes, this is the reason.

○ Question from Sharon D.-Just to clarify for the My Santa Cruz County mobile application, when people report that they found a syringe on that app, there should be an understanding for the user of that app that there is not going to be someone that will go pick up that syringe, correct?

v. Socorro confirmed.

○ Question from Patty K. – According to a new piece of legislation that came out it said that the Health Department does not have an extreme responsibility to collect syringe litter. Is that a correct review of that legislation?

vi. Response from Socorro- I am not aware of that legislation.

Response from Rahshan- That is not how I read the legislation. It may be the conclusion one comes to. This is not verbatim as I do not have the legislation in front of me but said, an “exchange wouldn’t be subject to an environmental impact review”. I did not gather that they were not responsible for cleaning up syringes but more that the environmental impact review would not be required.

○ Question from Patty K.-How would we need to change our program to comport with the changes from that legislation? Is there something different that we need to do?

vii. Response from Rahshan- My take is that it will not affect our program. It had more to do with programs not needing to do the impact reports.

- Comment from Patty K.- I think it is in our best interest we do research about this, and we are confident that this program will not be adversely affected by that.

- Question from Steve P.- Can we get an opinion from the county attorney about the impact of this legislation on our program?

viii. Response from Socorro- we could try. if it did impact our program, I think we would have heard from the CDPH in terms of the impact, but we will make sure to follow through.

- Question from Patty K. – I would like to know more about the impact of this legislation on the activities on the Harm Reduction Coalition. Can we learn about that?

ix. Response from Rahshan- They are going to be their own organization so I cannot speak to the impact this might have. I know they do report their numbers to the state. Forgive me, I do not know when those numbers are published but as far as numbers of syringes dispensed, collected, number of clients served, naloxone distributed and their hours and locations, those are reported to the state.

Overview of Sharp Solutions by Larry McCarty

- Question from Damon B. – What kind of bags do you use? Are they clear or dark? Are you able to see what is in them? How much does a half full water bottle count for syringes? I know there is litter and debris that gets put into there that is not syringe related. What is the percentage of weights? How do you tabulate all of that? Is it possible to have one or more of us Commissioners to ride along with someone to see the process to see what is going on with the numbers? How can we find the transparency on how your program picks things up and quantifies things?

i. Response from Larry M. – You will never have that answer and I will tell you why. Larry M. details the process of kiosk collection. Drivers/techs do not see contents. We only know part of the weight captured are not needles. Sometimes bio-hazard waste. So, no one really sees what is inside of it. The only time you might be able to see something is if a bag breaks or something comes open. And candidly, the number of pharmaceuticals and such in there, should not be in there. There are items that are being autoclaved and ended up in a permitted medical waste landfill that should not be there. Larry M. details how non-conforming waste is treated. Larry M. explains that inside pharmacies, because it is a controlled environment, there is no non-conforming waste that goes inside the sharp's containers while outside of such locations such as parks, etc., there is not that same guarantee.

- Question from Damon B. – Thank you. That helps. We will never know. The kiosks that are outside, are those kept and is the weight kept separate? Emeline, San Lorenzo Park, etc.?

- ii. Response from Larry M. –Every single site is considered an origin site by the CDPH and DTSC. Each one has an electronic chain of custody manifested from the time of pick up to the time it is destroyed.
 - Question from Damon B. – I understand that. When we are looking at the total weight from kiosks, are those weights kept separate? Do you include the kiosk in Walgreens and the Felker Street and other place’s weights?
- iii. Response from Larry M. – No. When we provide the statistics to them at the end of each month it will say this is the date it was picked up, this is the manifest number it was picked up on and give the weight of that manifest.
 - Question from Damon B. – The other question is, you had mentioned that people put needles into sharp’s containers and then the sharp’s containers go into the kiosks. So, at the exchange where someone goes to Mr. Williams, and they hand him a certain size sharps container and it is full. The weight, when it goes into a kiosk, does not get separated from the weight of a needle. So, there is a possibility that sharps containers themselves are being counted as “weight” which is translated into needles. Probably the same way if someone threw their hamburger in there.
- iv. Response from Larry M. – Correct. Because we are reporting content weight. I can show you 3 different 2-gallon sharps containers that are decidedly different in weight just what they are made of, and the types of lids used. One thing to remember with a community program like yours is that many participants put them into things like coffee cans, Clorox bottles, big coca cola bottles. People who use more needles (such as diabetics) are less likely to be able to afford to purchase sharps containers, because they cost more than the needles themselves.
 - Comment from Steve P. – I appreciate Commissioner Bruder’s concerns regarding the validity of the data. If we are going to be counting syringes that come back, we are going to really need to trust the data that we are reporting. It seems to me that there should be a more accurate way to measure what you are collecting than just putting it on a scale. Can you x-ray the containers? Or use some magnetic device to demonstrate that the data that we are presenting is meaningful?
- v. Discussion on why x-rays can/cannot be used in this situation.
- vi. Response from Larry M. – Right, but [x-rays] have trace amounts [of radiation] ... to boil it down no one is going to put their hands in and start separating debris. In the last 9 years, I have had 5 needle stick injuries.
 - Comment from Steve P.- I am not suggesting anyone put their hands in the needle containers. I think there are strategies to improve the accuracy of our counting method. And, if we cannot look at them, there is technology to figure out what is in there. They can take it offsite if you are concerned about radiation. ...has it been decided [in the business] that weighing is the best we can do?

vii. Response from Larry M. – Yes.

- Question from Patty K.- Let us assume that x percentage of all litter that ends up in a kiosk has nothing to do with syringes. Is it a large or small percent? Does it significantly skew the data, and does it matter? How do we win or lose from that? My experience with Santa Cruz County is that the litter is showing in real critical places not to include the kiosks at beaches and rivers. Second question: It frightened me to think that we have collection sites that are biohazard problems. Do you have any suggestion on improvement for that?

viii. Response from Larry P. – In answer to your 1st question: Kiosks that are inside and have oversight for example, Horsnyders: you get pure product. When you go outside, to HSA sites or parks, those are not observed, and you have no idea what is going into them. I do not think there is any way you can control them unless you bring them inside. As far as the biohazard waste cleanup sites. We have dealt with numerous different kinds of kiosks. They are all about the same. It just depends on what is put inside of them.

- Comment from Damon B. -To Commissioner King regarding does the data matter, having improper numbers being reported to the Board of Supervisors, unquantified guess work makes the Board of Supervisors think a “good enough job” is being done and there is no need to push for better cleanup. That is what we get when we do not keep pushing to improve.
- Comment from Larry M.- Discussed Epi Pens and how heavy they are as well and their prevalence in Sharp’s containers.
- Question from Steve P.- How do you know there are Epi pens in there [sharp’s container’s]?

ix. Response from Larry M. – Because when we pull out the container, our people visually see what is on top. If they see any non-conforming waste, they must designate based on what they see and they pull it out.

- Question from Steve P. – Do you think there are more than 2% of these syringes that are Epi pens?

x. Response from Larry M. – By the total weight? Yes.

- Question from Steve P. – Are you probably getting Epi pens then on the inside - pharmacies and Horsnyders ones, too?

xi. Response from Larry M. – Yes, but those go into pharmaceuticals though. They will not put those into the sharp’s containers.

- Comment from Patty K. – I just want to follow up on all of this. We have a massive amount of information. What do we do with this all? Is this SSP’s problem? The County’s problem? Public Work’s problem? What do we do about this? Damon, this is not the first time I have heard you talk about this...what do we do about this?

xii. Response from Damon B. – Mr. McCarty has validated what I have been trying to get across for 5 years. The starting point of our data is wrong so therefore,

everything past that is wrong. We need to figure out how to start with better data from the very beginning. We need harm reduction for all, and it needs to be done properly. What is not being done properly is the collection data of needles and how it is being reported to the higher ups. We need to invest to do better. We need proper data to get proper help. Mr. Williams has said many times in past meetings that he wants to do more. We are only going to be able to do that if we can force funding to up his hours, up his manpower and up the information.

- Comment from Larry M.- Larry M. comments on Med Projects willingness to install more kiosks inside pharmacies to help improve data collection.
- Question from Patty K. – Can we add this to the agenda to next time to continue this conversation?

Public Comment:

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

- None

A. New Business/Action Items

- a) Socorro/Rahshan to check with County Counsel on how the new legislation regarding health departments and syringe collection will affect the SSP program.
- b) Follow up on conversation about Med Project and potentially adding more kiosks.

1. Topics for Future Meetings & Action Items

- a. Safe injection sites: How that might look in Santa Cruz County? What role will SSP play in that? Who might run that?

B. Adjournment

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

- a) **Motion to adjourn passed.**
- b) Meeting was adjourned at 8:00PM