Jude Solano, MS, RN, ADS

Co-Founder/President/CEO

Southern Colorado Harm Reduction Association



SCHRA Opened it's doors in July of 2017

Services in the beginning:

Clean injection drug use supplies

Advertising, word of mouth

Snacks

Dedicated indoor site

Year One Added Services:

Overdose Prevention, Naloxone and Fentanyl Testing Strips

Acudetox

HIV/Hep C Testing

Peer Support Services

Medical Support and referrals to healthcare

Clothing Bank

Snacks

Year 2 and 3 additions:

Peer Support Specialists trained and paid staff.

Medication Assisted Treatment Onsite Provider partnership.

Wellness Programming

Life Skills for re-entering citizens from jail and underserved youth.

CRAFT, Community Reinforcement and Family Training.

Education and Referrals to Services.

Strengthening of local agencies, organizations and state partnerships.

Challenges along the way:

- FUNDING SOURCES.
- Full Integration as an accepted public health system that educates and makes greater availability to healthcare for our vulnerable and marginalized clients.
- Recognition of our progressive and innovative strategies for addressing this crisis.
- Prison pipeline for drug use.
- Housing, Food and Employment Opportunities.
- Legislation and advocacy for safe consumption sites.
- FACT: People are 5 times more inclined to engage healthcare when accessing a Harm Reduction Org. They are 10 times more likely to engage in healthcare when accessing a safe consumption site.

Southern Colorado Harm Reduction Association

invites you to join

CRAFT: Community Reinforcement and Family Training

Education and Support for Family and Friends of Someone who Struggles with Addiction

CRAFT is a skills-based program that impacts families in multiple areas of their lives, including self-care, problem solving, and goal setting. CRAFT teaches families behavioral and motivational strategies for interacting with their loved one, including addressing their loved one's resistance to change.

- Understanding a loved one's triggers to use substances
- Positive communication strategies
- Positive reinforcement strategies

- · Problem-solving
- Self-care
- Domestic violence precautions
- Encourage a loved one to accept help

To sign up, call: (719) 289-7149



SoCo Harm Reduction Association is a non-profit serving the underserved and those affected by substance use.

Our Mission:

To provide the underserved and those suffering from negative impacts of drug use, and their loved ones, an entry point and access to evidence based harm reduction practices. And to offer compassionate support and services with the goal of helping people obtain wellness, restoration and healing.

LIFE SKILLS
EDUCATION
FOR UNDERSERVED
YOUTH &
RE-ENTERING
CITIZENS

PEER
RECOVERY
SPECIALISTS
WHO HAVE
FOUGHT TO
RECOVER & WANT
TO HELP OTHERS

CRAFT
(COMMUNITY
REINFORCEMENT
AND FAMILY
TRAINING)
SUPPORT

COVID VACCINATION CLINICS (LOCATIONS VARY)

CLOTHING BANK REFERRALS &
EDUCATION
FOR TREATMENT,
HEALTHCARE &
COMMUNITY
SERVICES

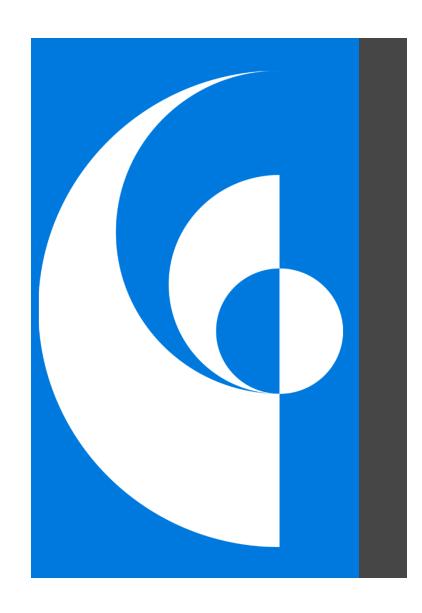
OVERDOSE PREVENTION SERVICES SYRINGE SERVICE PROGRAM ACUDETOX
(EAR ACUPUNCTURE
TO DECREASE
ANXIETY,
DEPRESSION,
INSOMNIA,
WITHDRAWALS,
CRAVINGS!

Questions?

Judy.Solano@socoharmreduction.org

(719) 289-7149

Thank you!



The HIV/Hep C Resource Center: Establishing a Rural Syringe Access Program in the Northeast

Ryan Fowler, HIV/HCV Resource Center Harm Reduction Coordinator Kira Gressman, Dartmouth MD Candidate Sarah Baranes, Dartmouth MD Candidate





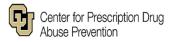


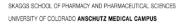
Who We Are











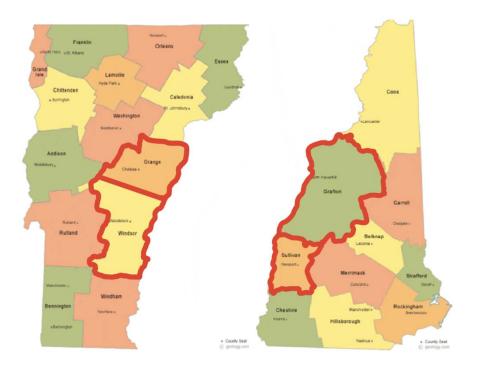




Where We Are









SKAGGS SCHOOL OF PHARMACY AND PHARMACEUTICAL SCIENCES UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS

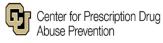




Where We Are

	2020 Total State Population	2020 Population Density (average population per square mile)	2019 Overdose Death Rate (per 100k)	2019 Overdose Deaths
NH	1.38 million	153.8	32	407
VT	~640,000	69.8	23.8	133
СО	5.77 million	55.7	18	1079

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SKAGGS SCHOOL OF PHARMACY AND PHARMACEUTICAL SCIENCES UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS





Starting a Program (2016-2019)

- Identify partners and stakeholders
- Build community buy-in
 - Community Advisory Board
- Decide site type
- Funding sources









Initial Challenges & Successes

- Challenges:
 - Politics and stigma
 - Representation in rural community
 - o Sustainability
 - Statutory Restrictions
- Successes:
 - Community advisory
 - Bringing stakeholders together
 - Established site



© 2008 Canadian HIV/AIDS Legal Network, International HIV/AIDS Alliance, Open Society Institute and International Network of People Who Use Drugs





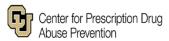




Brick & Mortar Operations (2019-2020)

- Services:
 - Syringe Access
 - Sterile Supplies
 - o Narcan
 - o HIV/HCV testing
 - Syringe disposal
- May 2019 March 2020:
 - o 143 clients (375 by secondary exchange)
 - o 240 Narcan kits distributed
 - ~48,000 syringes distributed



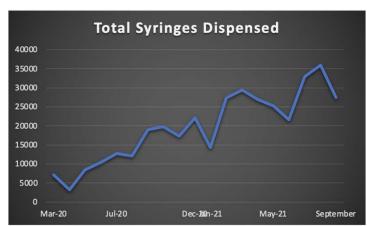


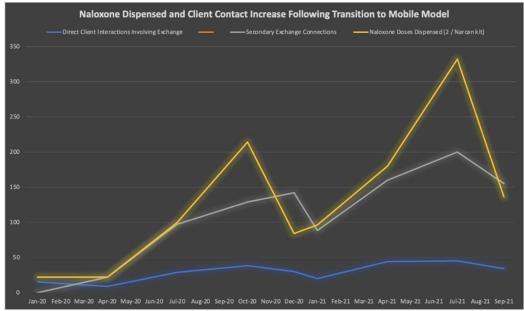


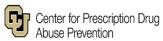


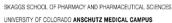
COVID-19 and Transition to Mobile

- Discretion
- Safety
- Cultural responsiveness







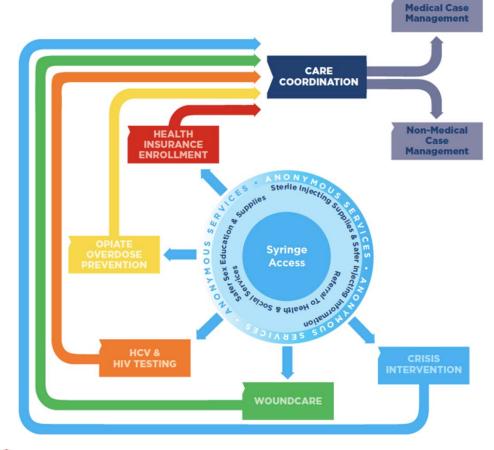






The Access Point

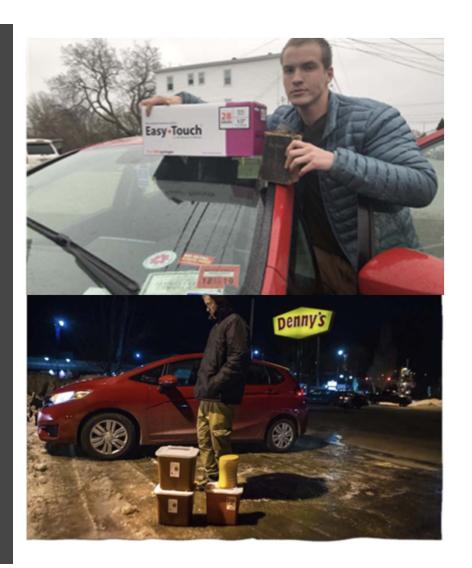
The syringe is the engagement tool to invite PWID into improved selfcare and needed care services.











SSP Models of Delivery

- Brick & Mortar
- •Temporary Structure
- Mobile
- •Home Delivery
- Street Outreach
- Mail Order
- •Peer to Peer Secondary Distribution



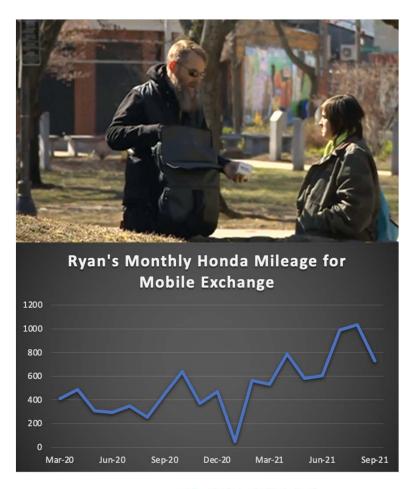
Peer to Peer Model

- Enhance Existing Support Systems
 - Secondary Distribution of supplies-Uses an existing distribution system
 - Needs-based training for participants
 - Incentivize engagement (\$)
 - Education as currency
- Is there a trusted group or person that could be educated and developed as trainers?







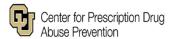


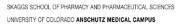


Supplies & Services

- Syringes
- Sharps
- Tourniquets
- Cookers
- Cottons
- Smoking supplies
- Fentanyl test strips
- Hand Sanitizer
- Naloxone
- Harm reduction education
- Referrals





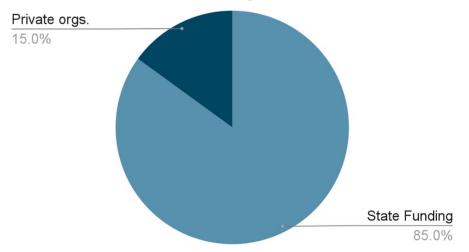






Budget & Funding: Braided Funding

HIV/HCV Resource Center Funding Sources



Materials	\$47,000 (93%)	 Sharps, syringes, tourniquets, cookers, cottons, smoking supplies, Fentanyl test strips
Transportation	\$3,500 (7%)	 7 days/week, on- demand
Syringe Disposal	0%	Through connection with Dartmouth
Donated Supplies	0%	HIV/HCV test kitsNaloxone (from state)Masks, clothing
Salaries	Varies	Based on grantUp to program









Rural Site Takeaways

- Community buy-in crucial
 - Consider creating Community Advisory Board
- Include voices of population served in all stages of planning/execution
- Secondary exchange is crucial, especially in rural area
- Creativity in budget gaps using local resources (local banks, private foundations, etc)







TxhvwlrqvB





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R xwhdfk#Surwrfrc

Outreach workers are polite and respectful of all individuals. ·

Outreach workers have a good awareness of their personal triggers, and manage their triggers, emotions, and personal values when providing services to clients.

Outreach workers maintain excellent client-centered service skills and meet clients where they are at providing the services the client wants and needs.

Outreach workers are aware that they are guests in a community/neighborhood that is considered home to the people who live there and are respectful and considerate of the site, personal/public property, and making sure not to alter the site in any way.

Outreach workers are honest, authentic, and forthright with clients, conveying information that is accurate and promising services that are deliverable within the scope of the program.

Outreach treats all clients equally in terms of access to services and support and does not favor individuals, accept bribes, or make any other agreements that ensure better access to services for one individual over another.

Outreach workers show care and compassion for all clients and maintain professional relationships with all clients at all times.







Outreach workers **respect diversity** and strive to provide culturally competent services to all clients, regardless of race, ethnicity, social/economic standing, profession, sexual orientation or gender identity.

Outreach workers respect the confidentiality and privacy of clients and communicate that to participants, only sharing information to outside entities with participants' permission.

Sites are maintained as a welcoming and safe place for all clients and staff. Outreach workers address all conflict in a professional and respectful manner and/or follow protocol for getting help dealing with a conflict in a professional manner.

Outreach workers never carry weapons, drugs, or money in excess of \$20.00 during outreach activities.

There is no buying, selling, or exchanging goods or services at an outreach site. ·

There is no drug use at or around the sites or office. ·

Outreach workers respect the laws of the city and state in which they work.

Outreach workers function as a team, supporting one another in meeting the standards of conduct and providing the best services to clients, as well as holding each other accountable and working to improve field performance to better serve clients. Support includes listening to one another's' concerns and ideas, and responding appropriately and respectfully.

Outreach workers are available for ongoing training, skill development, and supervision to maintain professional conduct and improve performance.







Establishing Syringe Service Programs

October 28, 2021



Overview

State Laws.

Funding.

Technical Assistance.



What approval is needed?

(CRS 25-1-508, 25-1-520)

No local board approval needed for:

- A nonprofit organization with <u>experience</u> operating a syringe service program
- A health facility licensed or certified by the state

To note:

A local public health agency *may request* approval from its local board of health for a syringe service program operated by the agency; not required



What reporting is required?

(CRS 25-1-520)

Every program is required to report to the Colorado Department of Public Health and Environment on an annual basis:

- # of syringe access episodes
- # of syringes distributed
- # of syringes collected



What protections exist for persons?

(CRS 18-18-430.5)

Any person associated with an approved syringe service program who identifies as an:

- Employee
- Volunteer
- Participant

is exempt from drug paraphernalia laws.



What is considered drug paraphernalia?

(CRS 18-18-425 to 18-18-430)

"...all equipment, products, and materials of any kind that are used, intended for use, or designed for use in planting, propagating, cultivating, growing, harvesting, manufacturing, compounding, converting, producing, processing, preparing, packaging, repackaging, storing, containing, concealing, injecting, ingesting, inhaling, or otherwise introducing into the human body a controlled substance in violation of the laws of this state."



What is NOT considered drug paraphernalia?

(CRS 18-18-426)

- Any marijuana accessories as defined in section 16 (2)(g) of article XVIII of the state constitution
- Drug testing equipment used, intended for use, or designed for use in identifying or in analyzing the strength, effectiveness, or purity of controlled substances.
 - Fentanyl test strips





Where is the money for programs?

CDHS

- Community Mental Health
 Services Block Grant **
- State Opioid Response **
- Substance Abuse Prevention and Treatment Block Grant **

CDPHE

- Biomedical HIV Prevention **
- Colorado HIV/AIDS Prevention Program (CHAPP)
 - Syringe Distribution ^^
- Harm Reduction Grant Program
- Naloxone Bulk Fund Program ^^
- Overdose Data to Action **
- Sharps Mail-Back Program ^^

^^ supplies ** federal restrictions



Where is potential money for programs?

AIDS United

- Syringe Access Fund
 - LOI due 11/5
 - \$10,000 \$50,000

Comer Family Foundation

- Syringe Services Program
 - Applications due 5/1, 11/1
 - \$2,500 \$20,000

Direct Relief: Limited supplies

NASEN: Program Support Packages

Federal COVID relief dollars

Opioid Settlement dollars - \$400M

Upcoming CDPHE PWID Regional Services RFA - \$200,000



Who is available for help?

Consortium
Corxconsortium.org/grant-assista
nce/

National Harm Reduction Technical Assistance Center: NASTAD.org/druguserhealth

- Basics & Getting Started
- Development, Planning,
 Sustainability
- Data & Evaluation
- Anything!

CDC: SSP Technical Package

CO-SAP (email me)

CDPHE!



Thank you!

Megan Canon megan.canon@state.co.us

