EndHepCMA Coalition

Harm Reduction Sub-Committee Meeting

July 10, 2017 Meeting Notes

Attendees: Martha Akstin, AIDS Project Worcester; Lexi Schneider, Boston Health Care for the Homeless (Co-Chair); Richard Baker, Victory Programs, Coalition Coordinator; Laura Freeman, Institute for Health and Recovery; Connie Peters, Association for Behavioral Healthcare (Co-Chair)

Guest Speaker: Kevin Cranston, DPH Assistant Commissioner

<u>Update</u>

Information regarding the *National Strategy for the Elimination of Hep B and C Phase Two Report* from National Academies of Sciences, Engineering and Medicine was shared with the Committee. A link to this lengthy report will be sent out along with the minutes.

Needle Exchange Programs, Kevin Cranston, Assistant Commissioner

Assistant Commissioner Cranston provided an overview on state-funded Needle Exchange Programs. In particular, the Committee wanted to know about the following four questions:

1. How is the Massachusetts Needle Exchange Program funded? How much money is currently allocated, how it is distributed, and what DPH line-item(s) fund this initiative?

Response: Needle Exchange Programs are also known as SSPs - Syringe Services Programs.

SSPs are funded through the DPH HIV/AIDS line-item 4512-0103. For FY 18, that line item is funded at about \$30 million dollars. Funding for these needle exchange programs however are not specifically identified in the line-item so the amount of funding available for Needle Exchange depends on state appropriated funding for that line-item. Currently, about \$3 million HIV/AIDs funding is dedicated to this initiative.

Massachusetts does not seek or receive any federal funding for these programs as they do not allow for payment of the needles and require a Determination of Need review.

2. What is the need/demand for more needle exchange programs in the state?

Response: It all depends on the communities and their willingness to site such a program. The legislature passed language in 1991 to allow SSPs. In 1993, they limited the number of SSPs to 10 in the state. As of 2016 (FY17 budget) they lifted the cap and defined local control as a vote of the Boards of Health in each Community. It is a very political process, but now there are 19 SSPs operating in the state, as follows:

- 1. Boston
- 2. Taunton
- 3. Brockton

- 4. Wareham
- 5. Falmouth
- 6. Dartmouth
- 7. Fairhaven
- 8. North Adams
- 9. Pittsfield
- 10. Greenfield,
- 11. Holyoke
- 12. Northampton
- 13. Worcester
- 14. Lawrence
- 15. Gloucester
- 16. Lynn
- 17. Cambridge

18. MISSING TWO MORE

The Sub-Committee also discuss an action plan to reach out to target communities in need of SSPs. The aim being to determine what our Coalition can do to facilitate the requisite local approvals. The communities identified were: Springfield, Fitchburg, Leominster, Gardner, Athol, and Southbridge.

3. What is the cost to operate a needle exchange program?

Response: There are between 200,000 and 300,000 people with Hep C in the state. Funding for SSP programs vary based on the location in the state (urban, suburban, rural) and the size of their service area – which guides the size of the program and funding needed to operate. For example, in Boston an SSP program may cost about \$800,000 per year but in more rural areas of the state a program might cost just \$15,000 to \$16,000 per year.

4. What are the Best practices for needle exchange programs?

Response:

- Sterile needles must be available for prevention
- Injection equipment
- Vein and wound care
- Avoid Fatal Overdose Provide OEND Opioid Education and NARCAN Distribution
- STD, HIV and Hep C testing
- Linkage to primary health care/integration
- Linkage to substance use treatment

SIF-MA Update

Committee member Sarah Casey could not attend today's meeting to give a presentation of SIF-MA, but she sent along several documents to inform the sub-committee about this coalition's initiative and their efforts to promote legislation to institute Safe Injection Sites in Massachusetts. The materials she provided are attached and include the following:

• The Case for SIF - a short document outlining what a supervised injection facility is, their benefits, and the need Massachusetts has for one

- SIF One Pager briefly outlines the benefits and aims of a SIF and explores the movement advocating for SIFs across the U.S. (please note that the info may not be totally current, there's a lot happening!)
- SD1775 this is a copy of the bill introduced in Massachusetts (currently S 1081) which would allow for SIFs in the Commonwealth (NOTE: it did not pass)
- Cost benefit Montreal this is an article similar to the cost benefit analysis in San Francisco but focuses more on the cost of blood borne illness transmission.

The Sub-Committee reviewed the materials and will invite Sarah to give a formal presentation at our next meeting (to be scheduled sometime in October).

Future Subcommittee Meeting Agenda Items:

- 1. Need for advocacy to override Governor's FY 18 veto of HIV/AIDs Line Item will this veto result in cuts to SSPs this year?
- 2. SIF-MA Update by Sarah Casey
- 3. Needs Assessment of Community Health Centers
- 4. What is the role of the DPH CHNAs in addressing Hep C?