

COVID-19: Sample Language for SSP Essential Services Designation

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Background

"Essential services" designations are used to identify systems, businesses, and service providers considered critical to public health and safety during extraordinary circumstances, including the COVID-19 global pandemic. Such designations are important at systems levels to facilitate coordination and accountability during emergency response, but also at an individual level so participants and staff can feel secure being in public to access services. People who use drugs are at particular risk of COVID-19 infection and other health conditions, including overdose, made riskier by social isolation and overburdened healthcare providers. This makes syringe services programs (SSPs) especially vital sources of supplies and information as participants may have reduced access to peer networks or other community resources necessary for survival. In turn, SSP staff and volunteers have responsibility to take reasonable precautions to protect the health of participants who engage in services during the pandemic. Community partners are also reporting significant disruptions to the illicit drug market that may affect drug strength, additives or cuts, cost, and associated infection risks.

SSPs face a particularly difficult time as they work to address two simultaneous and evolving health crises with outsized impacts on already vulnerable people. NASTAD encourages states and member jurisdictions to designate SSPs as essential services to ensure continuity of operation during the COVID-19 pandemic. Template language from three jurisdictional declarations is included below.

Please contact DrugUserHealthTA@NASTAD.org with any questions.



Sample 1:

To Department of Health Syringe Service Program and Overdose Education & Naloxone Distribution Partners:

The **State** Department of Health has designated syringe service programs (SSPs) and overdose education and naloxone distribution (OEND) programs as essential services. Interpretation that SSP and OEND personnel are essential is

based on **state emergency response declaration**. In that **declaration**, all businesses were ordered closed except those providing essential critical infrastructure "to help state, local, tribal, and industry partners as they work to protect communities, while ensuring continuity of functions critical to public health and safety, as well as economic and national security." The essential workforce (**hyperlink**) includes:

- Public health / community health workers, including those who compile, model, analyze and communicate public health information.
- Behavioral health workers (including mental and substance use disorder) responsible for coordination, outreach, engagement, and treatment to individuals in need of mental health and/or substance use disorder services.
- Workers who conduct community-based public health functions, conducting epidemiologic surveillance, compiling, analyzing and communicating public health information, who cannot practically work remotely.
- Workers who provide support to vulnerable populations to ensure their health and well-being including family care providers.
- Workers who support food, shelter, and social services, and other necessities of life for economically disadvantaged or otherwise needy individuals, such as those residing in shelters.

SSPs and OEND programs fit these categories. It is in the interest of public health for SSP and OEND program personnel to continue to provide sterile syringes to SSP participants and naloxone to those most at risk for witnessing and responding to opioid overdose. Shared and re-used syringes carry with them a risk of COVID-19 transmission, and they

are also potential vectors for new HIV and hepatitis infections. Naloxone is a lifesaving medication that immediately reverses opioid overdose.

The **State** Department of Health is aware that most agencies have made necessary adaptations in response to COVID-19. In response to COVID-19, alterations to services may include:

- Recognition of fast-changing circumstances.
- Modify or eliminate less essential and non-essential services (e.g., support groups, testing, in-person educational sessions).
- Reduce/modify usual full-staffing quotient during any given shift to reduce density of staff interactions within confined spaces (vans and/or offices); it may be preferable to have clients order supplies via phone and have staff fill orders without clients entering the van or office.
- Provide more supplies than usual to reduce frequency of participants coming to the program. In the case of programs providing naloxone via the statewide standing order (*hyperlink*), programs may dispense the initial naloxone kit and one refill kit on the spot.
- Rotate scheduling of onsite personnel as a way to share responsibility for work yet reduce exposure risk at the job such that some are home packaging harm reduction kits while others are at the job site.
- Assign known immunocompromised staff and older vulnerable personnel to work that limits exposure to other staff or program participants, or make other arrangements to ensure they are protected.

If you have any questions please do not hesitate to contact **SSP oversight office**. We are grateful for all of the work that

you and your teams are doing to serve people who use drugs.

Sample 2:

State DOH has designated syringe exchange as an essential service. Interpretation that Syringe Exchange Program staff are essential is based on Executive Orders (EO) ### (hyperlink) and ### (hyperlink). Syringe exchange program (SEP) personnel need to continue their work during the COVID-19 emergency under a reasonable interpretation of EO ### issued on date. In that EO, certain businesses and notfor-profits are exempted from broad inperson restrictions outlined within the EO. The in-person restrictions were further expanded in EO ### issued on date, however the exempted categories did not change. The exempted entities include essential health care operations and providers of basic necessities to economically disadvantaged populations. SEPs fit these categories.

It is in the interest of public health for SEP personnel to continue to provide sterile syringes to SEP participants. Shared and re-used syringes carry with them a risk of COVID-19 transmission, and they are also potential vectors for new HIV and hepatitis infections.

Sample 3:

This letter (*distributed on state letterhead*) serves to inform interested parties that the *State* Division of Public Health considers <u>syringe services</u> <u>programs</u> an "Essential Business and Operation" under Executive Order ###.

State General Statute ### requires syringe services programs to provide participants with "needles, hypodermic syringes, and other injection supplies at no cost and in quantities sufficient to ensure [they] are not shared or reused," in addition to disposal of injection supplies, educational materials, and access to naloxone. These services are provided in order to reduce the spread of HIV, viral hepatitis, and other bloodborne diseases and to reduce the number of drug overdoses in the state. Syringe services programs function under several categories of Essential Businesses and Operations listed in Executive Order ###, including "Public Health Operations," "Human Services Operations," and "Organizations that provide charitable and social services." Furthermore, their participants perform Essential Activities under the categories of "For health and safety," For necessary supplies and services," and "To receive goods and services" when they travel outside the home to obtain or exchange supplies with a syringe services program.

All syringe services programs operating in the state are required to register with the *State* Division of Public Health. Registered programs are listed on the *State* DHHS website (*hyperlink*). In this time of urgent response to the COVID--19 outbreak, the *State* Division of Public Health thanks you for your continued support of our state's syringe services programs and the work they do to halt the spread of lifethreatening infectious diseases in the *state*.