North Dakota Department of Health
Syringe Service Program
Reauthorization Requirements

September 2018

North Dakota Department of Health
HIV • STD • TB
VIRAL HEPATITIS PROGRAM

NORTH DAKOTA
DEPARTMENT *of* HEALTH

For more information and questions on the content of this document, please contact:

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Introduction

Syringe service programs (SSP), also known as syringe access (SAP), syringe exchange program (SEP) or needle exchange (NEP) programs, are a harm reduction intervention that have been in existence since the late 1980s and have been scientifically proven to reduce transmission of human immunodeficiency virus (HIV), hepatitis B and C, and other blood-borne pathogens in people who inject (PWI). The primary objectives of SSPs are to:

- Provide a clean syringe for each injection instance to reduce the potential for transmission of HIV, hepatitis B and C, and other blood-borne pathogens.
- Provide an entry point for substance abuse treatment and care and other resources as appropriate to the individual.

This document provides the requirements to renew authorization for an existing SSP program in North Dakota to continue operation.

North Dakota Legislation

Syringe Access Programs became legal in the state of North Dakota for communities who are deemed at risk for increases of HIV and viral hepatitis infections due to people in that community who inject and are sharing injection equipment with the passage of Senate Bill (SB) 2320 during the 2017 Legislative Session.

SB 2320 created and enacted a new subsection to section 19-03.4-02 and a new section to chapter 23-01-44 of the North Dakota Century Code (NDCC), relating to drug paraphernalia guidelines and a syringe exchange program. This new subsection created and enacted an addition that provides clarification to the court and law enforcement about determining whether an object is drug paraphernalia. The subsection adds "whether the object is a needle or syringe collected during the operation of a needle exchange program under chapter 23–01-44 to aid in the prevention of bloodborne diseases" to the list of considerations. This addition grants the consideration to law enforcement on whether or not to subject needles collected under an exchange as drug paraphernalia. By working with local law enforcement, SSPs can legally collect injection equipment without the risk of penalty of possessing drug paraphernalia.

The second addition to the NDCC adds a new section to chapter 23-01-44 that authorizes or legitimizes SSPs in North Dakota given appropriate authorization as a qualified entity. The addition also clarifies that the North Dakota Department of Health (NDDoH) will be the final authorizing agency to request or deny a local entity or organization the authority to operate an SSP and will perform ongoing assessment of the programs for adherence to requirements of the statue. NDCC also states that programs must "register the program annually in the manner prescribed by the state department of health." This document describes the processes that authorized agencies must follow to obtain ongoing authorization.

The full text version of SB 2320 can be found here: http://www.legis.nd.gov/assembly/65-2017/documents/17-0986-03000.pdf

Reauthorization Requirements

The legislation passed that allows for legal SSPs to occur in North Dakota set out key requirements that are required for entities to comply with prior to operationalizing their exchanges. One of those requirements is that SSPs must be authorized to operate by the NDDoH. Annually, SSPs must update or attest that the information that was submitted to NDDoH as part of the authorization process remains valid as part of reauthorization.

Reauthorization

Each entity must submit an annual summary describing the successes and challenges that were encountered in the previous year of operation. Examples could include: new partnerships and points of referral for participants, program design changes, changes in community or partner support (positive or negative), participation feedback or lessons learned or resources that could be shared to other agencies. An epidemiologic update to the status of HIV, HCV, drug related crime/use, needlestick injury to law enforcement/first responders and other factors must be submitted within your annual summary. Describe any impact your SSP may have had to on the epidemiology of the epidemic within your jurisdiction. Include updates or revisions to the agency's evaluation plan that identifies **three** objectives both in short and long-term periods in SMART (short, measurable, achievable, realistic and time-based) format. This document should be no more than 5 typed pages (1 in. margins, 12 pt. font, single spaced).

In addition to the annual summary, agencies should submit all components of their current standard operating procedures, policies or documents to the NDDoH, Division of Disease Control. These documents should also include a response to any action items that were identified as part of any previous authorization/reauthorization process that were to be produced prior to the next attestation period. Failure to comply with required reporting could result in the termination of the authorization by NDDoH.

Reauthorization applications can be emailed to NDDOH, Division of Disease Control, HIV Prevention Program at disease@nd.gov. NDDoH will confirm the receipt of the documents within 24 hours of receiving it. If a receipt confirmation is not received, please call 701.328.2378 to follow-up. Agencies will receive the final determination of reauthorization or need for more information within 10 business days. The NDDoH will provide each entity with a letter of certification that includes additional details on required reporting deadlines and the timeline for recertification.

Submission for reauthorization should be submitted 10-30 business days prior to the end of the authorization period. Submissions after the 10-day window may cause for a disruption in the authorization of the program.

Review Checklist

The following checklist describes the process that the review panel at NDDoH will utilize to determine if an SSP has complied with the NDCC requirements in the previous 12-month period and that the agency has complied with any action items that were described in the previous review.

Name of Agency: _____ Date of Review: _____

☐ Has the agency complied with the submission of the semi-annual reports according to the specified due dates?

☐ Was the agency able to submit all required fields within the semi-annual report according to NDDoH requirements?

☐ Do the submitted documents thoroughly describe how the program is operationalized?

☐ Did the agency submit an annual summary that describes the successes and challenges experienced during the authorization period?

☐ Did the agency submit an epidemiologic update within their annual summary and describe the potential impact of the SSP to their community?

☐ Did the plan include a local evaluation plan that identifies **three** objectives in short and long-term periods in SMART (short, measurable, achievable, realistic and time-based) format?

☐ Is the agency continuing to serve PWID within their community through the provision of SSP services? (Is participation growing or consistent over time.)

Overall Comments and Recommendations

This section provides some overall comments and recommendations for improvement and the status of authorization based on the review of the panel.

Status of application:

☐ Reauthorized ☐ Revisions Required ☐ Denied

Action Items:

Reviewed by:

_____ _____

Lindsey VanderBusch, HIV.STD.TB.Viral Hepatitis Program Manager Date

_____ _____

Sarah Weninger, HIV.STD.Viral Hepatitis Prevention Coordinator Date

_____ _____

Shari Renton, HIV.STD.Viral Hepatitis Surveillance Coordinator Date