



AGENDA

St. Clair County Board of Commissioners Human Services Committee

**Board of Commissioners' Room
County Administrative Office Building, 2nd Floor
200 Grand River Avenue
Port Huron, MI 48060**

December 1, 2022 at 6:00 PM

-
- 1. Roll Call/Opening/Pledge of Allegiance**
 - 2. Additions/Deletions/Changes to the Agenda**
 - 3. Citizens to be Heard**
 - 4. Updates**
 - 5. Conceptual Initiatives**
 - 6. Old Business**
 - 7. New Business**
 - A. 2023 Memorandum of Agreement: MSU Extension Services in St. Clair County
 - B. Michigan State University Extension (MSUE) - Office Closure Request 12/27/22 - 12/29/22
 - 8. Other Human Services Matters**
 - 9. Information Only**
 - A. Health Department Points of Interest - November 2022
 - 10. Receive and File Packets**
 - 11. Adjournment**

Committee Chair: Lisa Beedon

Note: The County complies with the "Americans with Disabilities Act" and if auxiliary aids or services are required at the meeting for individuals with disabilities, please contact Administrator/Controller's Office, Suite

203, 200 Grand River Avenue, Port Huron, MI 48060, (810) 989-6900 three days prior to said meeting.

2023 Memorandum of Agreement: MSU Extension Services in St. Clair County

Summary:

ATTACHMENTS:

	Description	Upload Date	Type
📎	SCC Cover Memo - 2023 MOA 21-Nov-2022_MSUE	11/21/2022	Cover Memo
📎	2023 Memorandum of Agreement: MSU Extension Services in St. Clair County	11/17/2022	Cover Memo

To: St. Clair County Board of Commissioners

From: Jerry Johnson, MSU Extension District Director

Date: November 21, 2022

Re: 2023 Memorandum of Agreement: MSU Extension Services in St. Clair County

The attached Memorandum of Agreement (MOA) clarifies the terms and conditions of MSU Extension's work efforts in St. Clair County. In addition, it verifies the budget terms upon which have been previously agreed.

The annual assessment for 2023 is \$97,814.00 which is to be paid quarterly consistent with past practice. This assessment provides the financial support for expenses related to educator staff and program support for the 4-H Youth Development program as well as funding for the Office Coordinator position. St. Clair County also provides work space and office supplies necessary for daily operations. MSU will provide access to programs in all four MSU Extension Institutes for St. Clair County. This includes access to Educators, Program Instructors and MSU faculty affiliated with each Institute.



We enter into this agreement annually subject to the approval by the St. Clair County Board of Commissioners.

I will be in attendance to answer any questions or concerns expressed by the board.

Sincerely,

A handwritten signature in blue ink, appearing to read "Jerry Johnson".

Jerry Johnson
District 10 Director
MSU Extension

**St. Clair County
MSU EXTENSION**

200 Grand River Avenue
Suite 102
Port Huron, MI 48060

810.989.6935
Fax: 810.985.3557

msue.stclaircounty.org

AGREEMENT FOR EXTENSION SERVICES

This AGREEMENT FOR EXTENSION SERVICES ("Agreement") is entered into on _____ by and between Saint Clair County, Michigan ("County"), and the BOARD OF TRUSTEES OF MICHIGAN STATE UNIVERSITY ("MSU") on behalf of MICHIGAN STATE UNIVERSITY EXTENSION (MSUE").

The United States Congress passed the Smith-Lever Act in 1914 creating a National Cooperative Extension System and directed the nation's land grant universities to oversee its work; and,

MSUE helps people improve their lives by bringing the vast knowledge resources of MSU directly to individuals, communities and businesses; and,

For more than 100 years, MSUE has helped grow Michigan's economy by equipping Michigan residents with the information needed to do their jobs better, raise healthy and safe families, build their communities and empower our children to succeed; and,

It is the mission of MSUE to help people improve their lives through an educational process that applies knowledge to critical issues, needs and opportunities; and,

Further, as an organization committed to the principles of diversity, equity and inclusion, we will work collaboratively with our community partners to ensure participation from the broad human diversity of each community (including race, color, religion, national origin, age, sex, disability, height, weight, marital status, gender, gender identity (gender expression), political beliefs, sexual orientation, family status, veteran status or any other factor prohibited by applicable law) and work to make our programs accessible and inclusive of the multiple realities and forms of knowledge that will support equitable outcomes for all throughout Michigan's 83 counties;

MSUE meets this mission by providing Extension educational programs in the following subject matter areas:

- Agriculture & Agribusiness
- Children & Youth Development, including 4-H
- Health & Nutrition
- Community, Food & Environment

NOW THEREFORE in consideration of the mutual covenants herein contained, and other good and valuable consideration, the parties hereto mutually agree as follows:

A. MSUE will provide:

1. Access to programs in all four MSUE Institutes to residents in your County. This includes access to educators and program instructors appointed to the Institutes and MSU faculty affiliated with each Institute to deliver core programs.

2. Extension Educators and program staff as needed to implement programs within the County, housed at the county office.
3. A county 4-H program. **0** FTE 4-H Program Coordination.
4. Salary and benefits of MSUE Personnel and the cost of administrative oversight of Personnel.
5. Operating expenses, per MSU policy, for MSUE personnel ("Personnel").
6. Supervision of MSU-provided academic and paraprofessional staff. Supervision of county employed clerical staff and/or other county employed staff, upon request.
7. Administrative oversight of MSUE office operations.
8. An annual report of services provided to the residents of the County during the term of this Agreement, including information about audiences served, and impact of Extension programs in the County.

B. The County will provide:

1. An annual assessment that will be charged to the county and administered by MSUE. The assessment will help fund Extension services for the County, including operating expenses for certain Extension personnel and the operation of the County 4-H program.
2. Office and meeting space meeting the following requirements:
 - a. Sufficient office space to house Extension staff as agreed upon between the County and the MSUE District Director.
 - b. Utilities, including telephone and telephone service sufficient to meet the needs of Personnel utilizing MSUE office space.
 - c. High-speed Internet service sufficient to meet the needs to Personnel utilizing the MSUE office space.
 - d. Access to space for delivering Extension programs.
 - e. Access to the office building and relevant meeting spaces must be ADA compliant/accessibile.
3. Clerical support for staff for the MSUE office as agreed upon between the County and MSUE District Director that will perform clerical functions, including assisting County residents in accessing MSUE resources by office visit, telephone, email, internet and media. The clerical support staff will be either a County employed clerical staff, or the County will provide funding for an MSUE employed clerical staff.

1.0 FTE MSU employed Clerical Staff

Optional:

4. Funding for additional Extension educators at **0 FTE**
5. Funding for additional 4-H program capacity at **0 FTE**
6. Funding for additional paraprofessional(s) at **0 FTE**
7. Total Annual Assessment in the amount of **\$97,814**

Payments due and payable under the terms of this agreement shall be made on the first of the month, of the first month, in each quarter of the county fiscal year, unless otherwise requested and agreed as provided below.

Payment mailing address: MSU Extension Business Office, Justin S. Morrill Hall of Agriculture, 446 W. Circle Drive, Room 160, East Lansing, Michigan 48824

C. Staffing and Financial Summary:

A. Base Assessment (includes 0 FTE 4-H Program Coordination)	\$97,814
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ADDITIONAL PERSONNEL

B. 1.0 FTE Clerical Support Staff to be employed by MSU	\$68,674
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C. 0 FTE Educator (Program Area:)	\$0
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D. Credit 1.0 FTE County Employed 4-H Program Coordinator	\$(68,674)
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E. 0 FTE Additional paraprofessional staff	\$0
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TOTAL COUNTY ASSESSMENT PAYABLE TO MSU FOR FY 2023:	\$97,814
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I. Term and Termination

The obligations of the parties under this Agreement will commence on January 1, 2023, the first day of the County budget year 2022 and shall terminate on the last day of such County budget year 2023. Either party to this Agreement may terminate the Agreement, with or without cause, with 120 days written notice delivered to Michigan State University Extension, Justin S. Morrill Hall of Agriculture, 446 W. Circle Drive, Room 160, East Lansing, MI 48824 if to MSUE and delivered to County of St. Clair, Office of the Administrator/Controller, Attn: Accts Payable, 200 Grand River Ave., Ste. 203, Port Huron, MI 48060, if to the County.

II. General Terms

1. **Independent Contractor.** The University is an independent contractor providing services to the County. The County and MSU do not have the relationship of legal partners, joint venturers, principals or agents. Personnel have no right to any of County's employee benefits.

2. **Force Majeure.** Each party will be excused from the obligations of this agreement to the extent that its performance is delayed or prevented by circumstances (except financial) reasonably beyond its control, including, but not limited to, acts of government, embargoes, fire, flood, explosions, acts of God, or a public enemy, strikes, labor disputes, vandalism, or civil riots.
3. **Assignment.** This agreement is non-assignable and non-transferable.
4. **Entire Agreement.** This Agreement, with its Appendix "A" is the entire agreement between MSU and the County. This Agreement supersedes all previous agreements, for the subject matter of this Agreement. The Agreement can only be modified in writing, signed by both MSU and the County.
5. **No Third Party Beneficiaries.** This Agreement is solely for the benefit of MSU and the County and does not create any benefit or right for any other person, including residents of the County.
6. **Nondiscrimination:** The parties will adhere to all applicable federal, state and local laws, ordinances, rules and regulations prohibiting discrimination. Neither party will discriminate against a person to be served or any employee or applicant for employment because of race, color, religion, national origin, age, sex, disability, height, weight, marital status, or any other factor prohibited by applicable law.

The individuals signing below each have authority to bind MSU and the County, respectively.

**BOARD OF TRUSTEES OF
MICHIGAN STATE UNIVERSITY**

By: _____

Evonne Pedawi
Contract & Grant Administration

Its: _____

Date: _____

SAINT CLAIR COUNTY

By: _____

Print name: _____

Its: _____

(title)

Date: _____

Appendix A

Technical Standards for County Internet Connections

Michigan State University Extension (MSUE) employs the use of technology to meet the ever-changing needs of our constituents. We strive to utilize standard, enterprise tools when appropriate, but also recognize the need to evolve with the times and utilize innovative tools to reach a broad array of people.

MSUE does support and encourage the use of technologies that others may not, including social media platforms. We view communication with our constituents through Facebook, Twitter, Instagram, YouTube, and other emerging social media to be critical to our work. MSUE staff are required to follow the MSU Acceptable Use Policy (AUP) <https://tech.msu.edu/about/guidelines-policies/aup/>.

We ask that our county partners provide Extension personnel access to a high-speed Internet connection. From that access, the easiest way to create a secure path to necessary applications is to open the full MSU Internet Protocol Range to and from your network, as well as opening social media sites to the addresses used by MSUE staff at your location. MSUE is prepared to support end user needs if there is high-speed internet, networking to clients, and phone system support. MSU will provide firewall functionality and client support. To discuss this possibility please contact your MSUE District Director. To provide the needed services on county equipment review the following MSU-owned ranges:

The MSU-owned ranges are:
NetRange35.8.0.0 - 35.9.255.255 CIDR35.8.0.0/15

If you would like to narrow the scope further for additional protection, some of the addresses that will need to be allowable include:

Office 365 – Details on what to open are at <https://docs.microsoft.com/en-us/microsoft-365/enterprise/urls-and-ip-address-ranges?view=o365-worldwide>
search.msu.edu
35.9.160.36 (1935,443) authentication)
45.60.149.216
35.9.247.31 (zoom.msu.edu)
d2l.msu.edu (80 and 443) (D2L – Desire to Learn @ Brightspace.com)
108.161.147.0/24, 199.231.78.0/24, 64.62.142.12/32, 209.206.48.0/20 (external) Meraki Cloud communication
199.231.78.148/32, 64.156.192.245/32 (external) Meraki VPN registry

The following applications are necessary on all computers – MS Office (preferably O365, MSUE provides MS licensing), Adobe Acrobat, Zoom, SAP client, VPN client, Antivirus. (Most recent version of Chrome, Firefox, or Edge)

Other notable web server/sites IP addresses:

canr.msu.edu – 52.5.24.1
msue.anr.msu.edu – 52.5.24.1
events.anr.msu.edu/web3.anr.msu.edu – 45.60.11.113
web2.canr.msu.edu | web2.msue.msu.edu - 35.8.200.220
master Gardener (External) – 128.120.155.54
extension.org (External) – 54.69.217.186 msu.zoom.us (External)

Questions may be directed to anr.support@msu.edu where they will be routed to the best person to assist you.

Michigan State University Extension (MSUE) - Office Closure Request 12/27/22 - 12/29/22

Summary:

ATTACHMENTS:

	Description	Upload Date	Type
	Michigan State University Extension (MSUE) - Office Closure Request 12/27/22 - 12/29/22	11/22/2022	Cover Memo

To: St. Clair County Board of Commissioners

From: Jerry Johnson, MSU Extension District Director

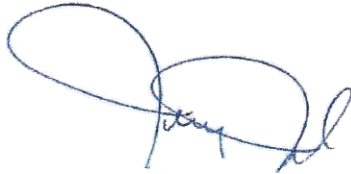
Date: November 22, 2022

Re: Request Office Closure 12/27/22 – 12/29/22

MSU has added three additional days of vacation for MSU employed staff. For 2022, those days are Tuesday, 12/27/22 through Thursday, 12/29/22. As these are not approved holidays for employees of St. Clair County, I'm requesting permission to close the office for those days. We have one full time county employee, our 4-H program coordinator, who would be given permission to work remotely for those three days when she is not otherwise engaged in community programming. Typically, foot traffic is extremely light during this time period and are able to monitor incoming phone calls remotely. In my estimation, this does not create a significant inconvenience for the residents of St. Clair County.

Thank you for your consideration of this request.

Sincerely,



Jerry Johnson
District 10 Director
MSU Extension



**St. Clair County
MSU EXTENSION**

200 Grand River Avenue
Suite 102
Port Huron, MI 48060

810.989.6935
Fax: 810.985.3557

msue.stclaircounty.org

Health Department Points of Interest - November 2022

Summary:

ATTACHMENTS:

Description		Upload Date	Type
☐	Points of Interest	11/21/2022	Cover Memo
☐	Harm Reduction Endorsement letter	11/21/2022	Backup Material
☐	Fact Sheets	11/21/2022	Backup Material

NOVEMBER 2022***Points of Interest...***

- The St. Clair County Health Department's Teen Health school-based health centers, Port Huron, Algonac and Capac locations, completed a 4-day extensive state accreditation process. Many hours of preparation time went into planning for the review. A formal notification letter is pending which will explain the rating process and outcomes. An "A" rating is expected.
- St. Clair County Health Department remains committed to harm reduction strategies designed to reduce the negative consequences of drug use (including Hepatitis C, HIV, and overdose) as well as acknowledging and advocating that there is a relationship between the health of the community and substance use disorders. Recently a strong letter of support for Syringe Service Programs was received and endorsed by all ten of Michigan's Pre-paid Inpatient Health Plans (PIHP) (see attached). An [FAQ](#) was also developed to assist in understanding harm reduction strategies such as syringe access/exchange by SCCHD staff. These documents are located [here](#) on the SCCHD website.
- St. Clair County Health Department in partnership with the Blue Water Immunization Partnership (BWIP) hosted two drive-thru influenza and Covid-19 vaccine clinics in November. The first was at the Tri-hospital EMS station in Wadhams and the second was at Marysville Fire and EMS station. 55 vaccines were administered.
- The Outreach team attended five community events resulting in a total of 1,443 face-to-face interactions. The following was provided: 10 Medicaid referrals (assisting individuals with finding a doctor or specialist within their insurance network); 71 community referrals (mostly for food, clothing, shelter and legal aid); and assisted 5 individuals in completing a Medicaid insurance application (Medicaid health insurance provides comprehensive health care services to low income adults and children).
- The Environmental Health division helped facilitate China Township obtaining an EGLE permit to construct nearly 2,400 feet of sewer line along King Road to serve 15 residences between Marine City Highway and Booth Road. The low-pressure grinder pump system, anticipated to be installed next spring, will alleviate a long-term sewage disposal issue. Four homes (north of Booth Road) with sewage disposal issues were not included in the final project plans. Therefore, Environmental Health has reach out to each of these residents to start the process of installing individual sewage disposal systems.
- A meeting with the St. Clair County Community Health Improvement Plan (CHIP) stakeholders' group was held on November 21. Participants spent time brainstorming strategies that will be put into action in an effort to meet the goals and objectives of the 2023-2027 CHIP. Over 20 people were in attendance.



Harm Reduction: A Consensus Statement of Support by Michigan's 10 Community Mental Health Entities (Pre-Paid Inpatient Health Plans)

Michigan has a comprehensive infrastructure of prevention, treatment and recovery services for people living with a substance use disorder (SUD). Individuals living with a SUD, however, often follow a bumpy road to recovery and sobriety. Social stigma, judgment from others and shame are barriers to individuals seeking treatment. Even after people have engaged in treatment, they can stumble on that road and relapse. Most people living with addictions, however, do recover. A 2017 [Harvard study](#) found that while 10% of the U.S. adult population has had a SUD, 9.1% of American adults are in recovery. Despite that, [per the CDC](#), the U.S. exceeded 107,000 drug overdose deaths in 2021 largely related to heroin, methamphetamine and cocaine being laced with synthetic opioids like fentanyl.

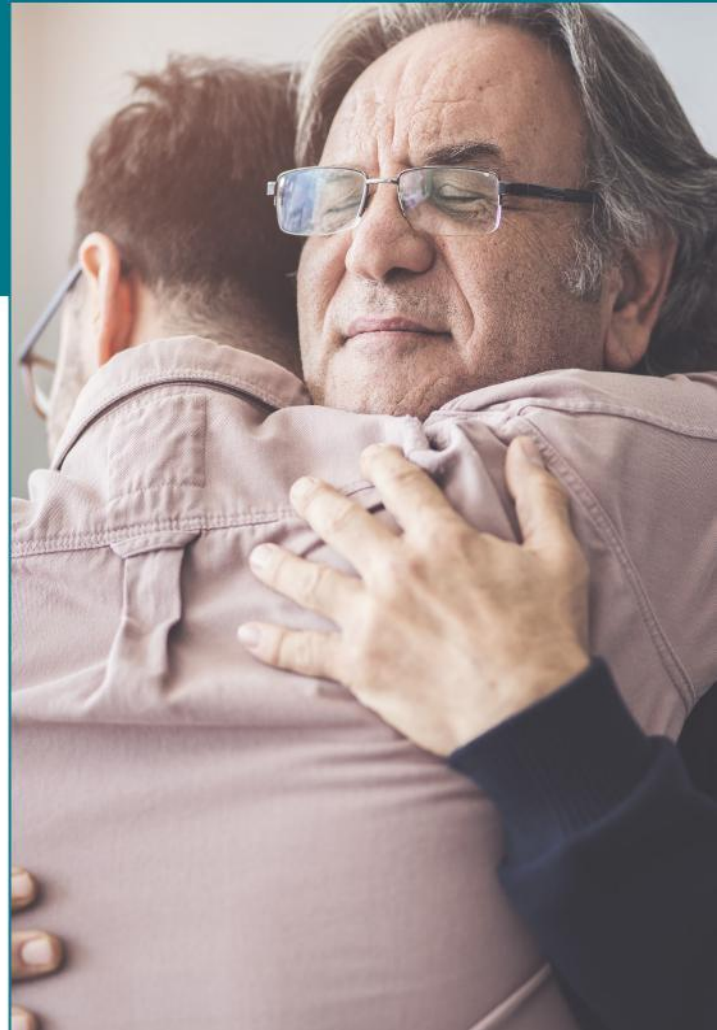
Harm reduction is an evidence-based strategy to keep people alive by supporting those struggling with active substance use *wherever they are* in their journey to recovery. If they are still using substances, a harm reduction approach works to lower the chance of overdose or of contracting Human Immunodeficiency Virus (HIV), Hepatitis C (HCV) or other diseases. Harm reduction strategies include distribution of naloxone, the overdose reversal medication that's saved many lives, and Syringe Service Programs (SSPs) which offer education about and connections to treatment pathways as they concurrently safely dispose of used syringes and distribute sterile syringes.

The myth that distributing sterile syringes increases drug use by enabling people to keep using drugs has been thoroughly discredited. In fact, individuals who use syringe service programs are 5 times more likely to engage in treatment and 3 times more likely to quit using drugs than individuals with a SUD that do not use an SSP (per [CDC](#)). Syringe Service Programs are not associated with any increase in crime (per [NIH](#)) and studies show that for every one dollar spent on harm reduction efforts, \$3 is saved in public health costs. Programs have also been shown to result, for example, in a 50% reduction in incidence of HIV and HCV (per [NIH](#)). By any measure, Syringe Service Programs are an effective means to save lives and keep people healthy along their journeys to recovery in our communities.

As the Mental Health Code – designated Community Mental Health Entities, Michigan's Prepaid Inpatient Health Plans (PIHPs), the regional entities that oversee the state's public behavioral health system, strongly endorse evidence-based practices like harm reduction. We are working to create a coordinated seamless continuum of care including prevention, harm reduction, treatment, and recovery. Along those lines, 86 SSP sites have been established around the state. We strongly support the work of Michigan's Syringe Service Programs in helping save lives of people who may be struggling with substance misuse or are in the early stages of recovery. We encourage our community partners to do the same.

ENDORSED AND ADOPTED BY ALL TEN OF MICHIGAN'S PRE-PAID INPATIENT HEALTH PLANS/
DESIGNATED COMMUNITY MENTAL HEALTH ENTITIES, OCTOBER 4, 2022

Syringe Services Programs (SSPs) FAQs



What is an SSP?

Syringe Services Programs (SSPs) are community-based programs that provide access to sterile needles and syringes, facilitate safe disposal of used syringes, and provide and link to other important services and programs such as:

- Substance use disorder treatment programs.
- Screening, care, and treatment for viral hepatitis and HIV.
- Naloxone distribution and education.
- Mental health and other medical and social services.
- Education about overdose prevention and safer injection practices.
- Vaccinations, including those for hepatitis A and hepatitis B.
- Screening for sexually transmitted diseases.
- Abscess and wound care.



Are SSPs legal?

Some states have passed laws specifically legalizing SSPs because of their life-saving potential. SSPs may also be legal in states where possession and distribution of syringes without a prescription are legal.

Decisions about use of SSPs as part of prevention programs are made at the state and local levels. The Federal Consolidated Appropriations Act of 2016 includes language that gives states and local communities meeting certain criteria the opportunity to use federal funds provided through the Department of Health and Human Services to support certain components of SSPs, with the exception of provision of needles, syringes, or other equipment used solely for the purposes of illicit drug use.



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention

Adapted by SCCHD October 2022



www.scchealth.co | follow @scchdmi

Syringe Services Programs (SSPs) FAQs - Continued

Do SSPs help people to stop using drugs? Yes.

- People who are injecting drugs using an SSP are more likely to enter treatment for substance use disorder and stop injecting than those who don't use an SSP.^{1,2,3,4}
- New users of SSPs are five times as likely to enter drug treatment.
- People who inject drugs and used an SSP regularly are nearly three times likely to report a reduction in injection frequency as those who have never used an SSP.²

Do SSPs reduce infections? Yes.

- Sharing needles and works can lead to transmission of HIV, viral hepatitis, bacterial, and fungal infections and other complications by providing access to sterile syringes and other injection equipment.
- SSPs help people prevent transmitting bloodborne infections when they inject drugs or provide easy-to-access treatment care.^{5,6,7}
- SSPs can prevent other life-threatening and costly health problems, such as infections of the heart (endocarditis), serious skin infections, and deep tissue abscesses.

Do SSPs lead to more crime and/or drug use? No.

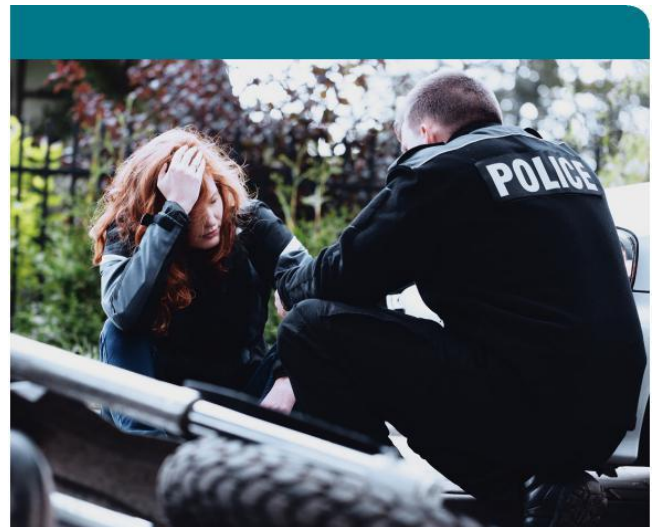
- Data shows that SSPs do not cause or increase illegal drug use, crime or violence within a community.^{14,15}

Are SSPs cost effective? Yes.

- SSPs reduce health care costs by preventing HIV, viral hepatitis, and other infections.
- The estimated lifetime cost of treating one person living with HIV is more than \$450,000.¹⁶
- Hospitalizations in the U.S. for substance-use-related infections cost over \$700 million each year.¹⁷

Do SSPs cause more needles in public places? No.

- Studies show that SSPs protect the public and first responders by providing safe needle disposal and reducing the presence of needles in the community.^{8,9,10,11,12,13}



St. Clair County's Harm Reduction: Syringe Services Program (SSP) FACTS

What is Harm Reduction?

It is a **movement** for social justice built on a belief in, and respect for, the rights of people. People can get help “where they’re at,” at their own pace, and make healthier choices to prevent disease.

It is both a **strategy** and **tool**. The strategy is defined as a set of practical public health strategies designed to reduce the negative consequences of drug use, lead people to a healthy lifestyle and build a better community. The tool guides us to manage the gap between active substance use and recovery to reverse overdoses, and reduce the negative impacts of behaviors that can cause harm.

What is the role of the Health Department in combating drug use?

The Health Department combats drug use by:

- Partnering with other community organizations that work with people using drugs.
- Acknowledging and advocating that there is a direct relationship between the health of the community and substance use issues.
- Hosting a comprehensive SSP called, “The Exchange”.



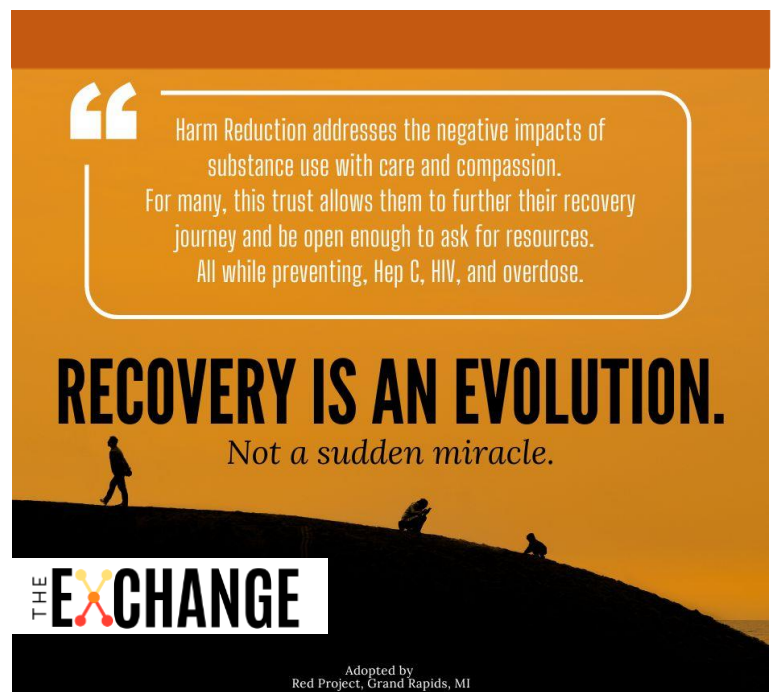
What does The Exchange do?

The Exchange provides naloxone kits, recovery information, safe needle disposal resources, rapid HCV and HIV testing, and first aid / hygiene items on-site at the main location of the Health Department and through an on-the-go Mobile Unit to meet people “where they’re at”.

Providing stigma-free services by using person-centered language, avoiding bias, providing education, and building rapport/trust with clients by alleviating harm along the way is a goal of the Exchange.

The Exchange is located at St. Clair County Health Department 3415 28th Street, Port Huron, MI 48060. Hours of operation are Monday 10:00 am – 6:00 pm and Tuesday through Friday 8:00 am – 4:00 pm. No appointment necessary. A short intake is required for services.

Disclaimer: Local dollars are not used to support the St. Clair County Health Department's Exchange program.



Endnotes

1. Wodak A, Cooney A. Do needle syringe programs reduce HIV infection among injecting drug users: a comprehensive review of the international evidence. *Subst Use Misuse*. 2006;41(6-7):777-813.
2. Hagan H, McGough JP, Thiede H, Hopkins S, Duchin J, Alexander ER. Reduced injection frequency and increased entry and retention in drug treatment associated with needle-exchange participation in Seattle drug injectors. *J Subst Abuse Treat*. 2000;19(3):247-252.
3. Strathdee SA, Celentano DD, Shah N, et al. Needle-exchange attendance and health care utilization promote entry into detoxification. *J Urban Health*. 1999;76(4):448-460.
4. Bluthenthal RN, Gogineni A, Longshore D, Stein M. (2001). Factors associated with readiness to change drug use among needle-exchange users. *Drug Alcohol Depend*. 2001;62(3):225-230.
5. Robinowitz N, Smith ME, Serio-Chapman C, Chaulk P, Johnson KE. Wounds on wheels: implementing a specialized wound clinic within an established syringe exchange program in Baltimore, Maryland. *Am J Public Health*. 2014;104(11):2057-2059. doi:10.2105/AJPH.2014.302111.
6. Grau LE, Arevalo S, Catchpool C, Heimer R. Expanding harm reduction services through a wound and abscess clinic. *Am J Public Health*. 2002;92(12):1915-1917.
7. Pollack HA, Khoshnood K, Blankenship KM, Altice FL. The impact of needle exchange-based health services on emergency department use. *J Gen Intern Med*. 2002;17(5):341-348.
8. Tookes HE, Kral AH, Wenger LD, et al. A comparison of syringe disposal practices among injection drug users in a city with versus a city without needle and syringe programs. *Drug Alcohol Depend*. 2012;123(1-3):255-259. doi:10.1016/j.drugalcdep.2011.12.001.
9. Riley ED, Kral AH, Stopka TJ, Garfein RS, Reuckhaus P, Bluthenthal RN. Access to sterile syringes through San Francisco pharmacies and the association with HIV risk behavior among injection drug users. *J Urban Health*. 2010;87(4):534-542. doi:10.1007/s11524-010-9468-y.
10. Klein SJ, Candelas AR, Cooper JG, et al. Increasing safe syringe collection sites in New York State. *Public Health Rep*. 2008;123(4):433-440. doi:10.1177/003335490812300404.
11. de Montigny L, Vernez Moudon A, Leigh B, Kim SY. Assessing a drop box programme: a spatial analysis of discarded needles. *Int J Drug Policy*. 2010; 21(3):208-214. doi:10.1016/j.drugpo.2009.07.003.
12. Doherty MC, Junge B, Rathouz P, Garfein RS, Riley E, Vlahov D. The effect of a needle exchange program on numbers of discarded needles: a 2-year follow-up. *Am J Public Health*. 2000;90(6):936-939.
13. Bluthenthal RN, Anderson R, Flynn NM, Kral AH. Higher syringe coverage is associated with lower odds of HIV risk and does not increase unsafe syringe disposal among syringe exchange program clients. *Drug Alcohol Depend*. 2007;89(2-3):214-222.
14. Marx MA, Crape B, Brookmeyer RS, et al. Trends in crime and the introduction of a needle exchange program. *Am J Public Health*. 2000;90(12):1933-1936.
15. Galea S, Ahern J, Fuller C, Freudenberg N, Vlahov D. Needle exchange programs and experience of violence in an inner city neighborhood. *J Acquir Immune Defic Syndr*. 2001;28(3):282-288.
16. Farnham PG, Gopalappa C, Sansom SL, et al. Updates of lifetime costs of care and quality of life estimates for HIV-infected persons in the United States: Late versus early diagnosis and entry into care. *J Acquir Immune Defic Syndr*. 2013;64(2):183-189. doi:10.1097/QAI.0b013e3182973966.
17. Ronan, M., & Herzig, S. (2016). Hospitalizations related to opioid abuse/dependence and associated serious infections increased sharply, 2002-12. *Health Affairs (Millwood)*. 2016;35(5):832-837. doi: 10.1377/hlthaff.2015.1424.
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