

COUNTY OF SANTA CRUZ
STATE OF CALIFORNIA



AT THE BOARD OF SUPERVISORS MEETING

On the Date of February 11, 2014

REGULAR AGENDA

Item No. 45

Upon the motion of Supervisor McPherson, duly seconded by Supervisor Caput, the Board, with Supervisor Friend voting no, (1) accepted and filed response to the City of Santa Cruz Public Safety Task Force as outlined in the letter of the County Administrative Officer dated January 29, 2014 with the following modifications: Attachment A, Santa Cruz County Response to City of Santa Cruz, under Highest Priority Recommendations, in 1A Response, add language to read: "Supervisors in the 3rd and 5th Districts will be considered the primary points of contact for the Syringe Exchange Program in contact with the City of Santa Cruz while involving all Supervisors in the discussion of how to address the issues raised in the report. As the Board pointed out, the solutions will not be quick and will require true collaboration. If public policy decisions are made by one jurisdiction, that jurisdiction should understand how those actions impact others." and (2) incorporated revisions as outlined in the letter of Supervisor McPherson dated February 10, 2014; with the additional direction that the County Response relating to Syringe Services Program (SSP) shall read: "Page 4 - Change the last paragraph of the response under 1) SSP Relocation: The Board recognized the importance of locating services where the needs exist but directed staff to investigate options for relocation services to non-residential areas and report back to the SSP Advisory Task force within 60 days."

cc:

COUNTY OF SANTA CRUZ
STATE OF CALIFORNIA



AT THE BOARD OF SUPERVISORS MEETING
On the Date of February 11, 2014

CAO
County Counsel
HSA
HSD
Sheriff-Coroner
Planning Department
Probation Department
District Attorney
City of Santa Cruz Council Members
City of Santa Cruz, Manager
Kris Reyes, Chair, Public Safety Task Force

State of California, County of Santa Cruz-ss.

I, Susan A. Mauriello, Ex-officio Clerk of the Board of Supervisors of the County of Santa Cruz, State of California, do hereby certify that the foregoing is a true and correct copy of the order made and entered in the Minutes of said Board of Supervisors. In witness thereof I have hereunto set my hand and affixed the seal of said Board of Supervisors.

by *Susan A. Mauriello*, Deputy Clerk ON February 13, 2014



County of Santa Cruz

COUNTY ADMINISTRATIVE OFFICE

701 OCEAN STREET, SUITE 520, SANTA CRUZ, CA 95060-4073

(831) 454-2100 FAX: (831) 454-3420 TDD: (831) 454-2123

SUSAN MAURIELLO, J.D., COUNTY ADMINISTRATIVE OFFICER

January 29, 2014

AGENDA: February 11, 2014

BOARD OF SUPERVISORS
County of Santa Cruz
701 Ocean Street
Santa Cruz, CA 95060

PUBLIC SAFETY TASK FORCE REPORT RESPONSE

Dear Members of the Board:

On January 28, 2014, your Board considered the County response to the Public Safety Task Force Report to the City of Santa Cruz, requested to continue this item to today's agenda and directed staff to include additional comments from Board members within the response document.

The County response is provided as attachment A with changes noted in strikethrough/underline style. Comments by members of the Board have been edited for ease of reading and in an attempt to combine associated ideas. Attachment B contains information your Board requested regarding syringe identification.

IT IS THEREFORE RECOMMENDED THAT YOUR BOARD:

1. Accept and file this response to the City of Santa Cruz Public Safety Task Force Report;
2. Forward a copy of this report to the Council Members and City Manager of City of Santa Cruz; and,
3. Direct the County Administrative Officer and appropriate departments to continue to work collaboratively with the City of Santa Cruz to enhance public safety in our community.

Very truly yours,

SUSAN A. MAURIELLO
County Administrative Officer

cc Health Services Agency
Human Services Department
Sheriff's Department
Planning Department
Probation Department

County Counsel
District Attorney
City of Santa Cruz Council Members
City of Santa Cruz City Manager
Kris Reyes, Chair, Public Safety Task Force

Attachments (2)

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2.

ATTACHMENT A: SANTA CRUZ COUNTY RESPONSE TO CITY OF SANTA CRUZ PUBLIC SAFETY TASK FORCE REPORT

Attachment A addresses recommendations in the Public Safety Task Force Report (PSTFR) that either: called out County programs specifically, identified areas of collaboration with the County, or would have impacts to County operations if implemented. The highest priority recommendations are presented first, followed by the secondary priorities. The four main categories are identified as well as any specific sub-category. The original page number of the recommendation is also referenced for ease of comparison with the PSTFR. Staff used our best judgment to address every comment referencing or impacting the County. If any omissions are noted, they will be addressed in subsequent communications.

Highest Priority Recommendations

PREVENTION

I. Environmental Design and Protection of High Crime Areas and Open Spaces

A.) Page 36: With regard to the County's Syringe Exchange Program, the Task Force recommends that City staff and the City Council work with the County Health Services Agency and 3rd/5th District Supervisor Office to ensure the public safety efficacy (harm reduction of users and community affected by discarded syringes) of the County's Syringe Services Program.

Response: While we recognize that the 3rd and 5th District Supervisors directly represent citizens of the City of Santa Cruz, the impacts of substance abuse affect all areas of the county and we respectfully suggest that the City staff and Council work with the County Health Services Agency and the offices of all of the Board of Supervisors to craft appropriate public safety solutions.

Supervisors in the 3rd and 5th Districts will be considered the primary points of contact for the Syringe Exchange Program while involving all Supervisors in the discussion of how to address the issues raised in the report. As the Board pointed out, the solutions will not be quick and will require true collaboration. If public policy decisions are made by one jurisdiction, that jurisdiction should understand how those actions impact others.

B.) Page 36: Insist that the County Board of Supervisors address the community-wide impacts of Syringe Services Program (SSP) on their work plan/agenda.

Response: The Health Services Agency (HSA) has organized the Syringe Exchange Services (SSP) Advisory Task Force which is comprised of representatives of the community from law enforcement, providers, State, Probation Department, City of Santa Cruz top management, physician, community-based organizations serving intravenous drug users and subject matter experts. The Task Force has met regularly since March 2013 and it has reviewed the utilization and demographics data for SSP. This Task Force will continue to review data, provide advice and consultation to HSA for the SSP biennial report. In addition, HSA is schedule to provide a written and oral report to the Board of Supervisors in public meeting in Spring/Summer 2014 to adhere to AB 604 (2011) requiring biennial reports regarding the syringe exchange program operating in the County. The Board is committed to addressing the impacts of the SSP.

C.) Page 36: Ensure best practices are in place for SSP to mitigate impacts to the City's public spaces and neighborhoods.

- 1) Relocate SSP to County-owned property located in a non-residential area.
- 2) Implement a syringe identification tagging program (e.g. color-coding or serial number).
- 3) Exchange to be on a true one for one basis with an actual physical count of syringes being exchanged. No estimates should be allowed.
- 4) Account for both syringes being distributed and returned. Account separately for syringes without identification tag.

Response: Implied within these recommendations is the assumption that the SSP is directly contributing to illegal behavior and the proliferation of improperly discarded needles. However, research findings from multiple peer-review professional journal articles reveal the following:

- The establishment of Syringe Exchange Services/Programs (SEPs) does not lead to increased public discard of syringes.
- SEPs do not create environments in which injection risk increases (injection risk is defined as: more injection drug use, lower tendency to seek treatment and recovery, and increased crime). SEP's actually decrease this risk.
- SEP's increased access to drug treatment and medical care.
- SEPs did not increase criminality in the neighborhoods in which they were situated.

The recommended best practices for syringe exchange services are a collective of best practices from several experts in the field of harm reduction, intravenous drug use and disease control as outlined in the following report: "Recommended best practices for effective syringe exchange programs in the United States: Results of a consensus meeting." New York City Department of Health and Mental Hygiene. Scott, G., Irwin, K., eds. 2009
www.santacruzhealth.org/pdf/SEP%20Recs%20-%20Consensus%20Meeting.pdf

Other best practice recommendations are included in the following report: "Ontario needle exchange programs: Best practice recommendations." Toronto: Ontario Needle Exchange Coordinating Committee. 2. Strike C, Leonard L, Millson M, Anstice S, Berkeley N, Medd E. 2006.
www.health.gov.on.ca/english/providers/pub/aids/reports/ontario_needle_exchange_programs_best_practices_report.pdf

~~Some examples of these best practices include:~~

- ~~▪ Provide sterile needles in the quantities requested by clients~~
 - ~~○ without requiring clients to return used needles~~
 - ~~○ with no limit on the number of needles provided~~
 - ~~○ with encouragement to return used needles~~
- ~~▪ Educate clients about the risks of using non-sterile needles~~

Additionally, in the operating requirements for California State-Certified Syringe Exchange Programs, it states that the program must be designed to provide new, sterile syringes to meet the needs of participants in accordance with the recommendations made by the U.S. Public Health Service, published in the Center for Disease Control and Prevention's *Medical Advice for Persons Who Use Injection Drugs, 1997*, to support the use of a new, sterile syringe for each injection.
<http://cdcnpin.org/Reports/MedAdv.pdf>

The Board reiterated the importance of paying attention to the more than 20 years of best practice research on this health care practice while at the same time recognizing the need to deal with the impacts that this practice creates.

4.

1) SSP Relocation: Among the best practice recommendations is to locate syringe exchange services where the needs are and not limit the sites. Thus, it would be against best practice to locate SSP just in County-owned property and/or in non-residential area. In addition, using safety net clinic location as fixed site exchange services, given the funding constraints, for the current SSP program is the best solution at this time. ~~If there is additional funding, it is recommended to add more exchange sites in other locations where the~~ Consideration of any future sites should assure that clients are to provide more accessibility to collect used syringes and provide sterile syringes to promote and protect the public health of the community.

The Board recognized the importance of locating services where the needs are but asked staff to consider relocating these services to non-residential areas.

2) Syringe Identification: Implementing a syringe identification and tagging program is not recommended by national and international best practices. The HSA has consulted with syringe manufacturers on this issue and it was advised that the only way to tag needles would be to manually stick a barcode or similar identification on each syringe. This could compromise the sterility and safety of the syringe as well as add additional costs to the manufacturing of the syringes which would be passed on to the purchasing agency. The benefit of tagging needles is unclear at this point. Knowing whether an improperly discarded needle came from the SSP or another source is simply a data point. We would need to consider what course of action would be determined by the use of this data before we invest limited resources in such a system. However, understanding the community's concern for the improper discarding of needles, we propose the following other solutions to a tagging and identification system:

1. Conduct focus groups with people who use drugs (PWUD) in order to determine the cause for improper disposal and potential solutions.
2. Develop and distribute an educational document for PWUD explaining the importance of proper disposal.
3. Create one organized and consolidated operated system to maintain the accounting of needles found in public places.
4. Provide education to encourage disposing of needles properly.

Attachment B is a response to the Board's request that staff explore the potential for syringe identification.

3) One-to-One Exchange: This is not a best practice recommendation. In response to the community's concerns currently the program will give out more than one for one, however, only if it is a medical necessity per the SSP Policy and Procedure Manual:

Medical necessity will be utilized for participants that have an elevated risk of transmitting disease or becoming infected with HIV, hepatitis C and other infectious agents if they request more syringes equating to a one for one exchange. If a syringe service participant requests more than their verified one for one amount then a needs assessment must be made and approved by the Health Officer who is a Public Health Physician to determine whether the participant is eligible for additional syringes due to public health risks.

The Board asked staff to continue to review whether exchanges should be a true one-to-one based on actual counts. It is important to note that medical exceptions have been limited.

The Syringe Services Program also provides around-the-clock disposal kiosks for residents to safely dispose used prescription and non-prescription syringes and needles. There are two kiosks, which have been made available to the public since April 2013, and in combination they have collected a

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total of 614 pounds of sharps waste. The kiosks are located outside of Watsonville and Emeline Federally Qualified Health Centers. There are two additional kiosks available for placement countywide, and the Board asked that County work with the City on the placement of any potential kiosks within the City. The County has collected more needles than it has given out according to the last two SEP reports and the number of people getting more than one-to-one exchange is low. The Board wishes to build on these facts to create an effective policy.

4) Accounting for syringes: The County SSP has established database system to account for syringes being distributed and returned. Two 90- day progress reports have been published showing the account of syringes distributed and returned. However, we will be unable to account separately for syringes without identification tags as there will be no separately tagged syringes per the previous response.

Consistent with the State operating requirements for State-Certified SEPs and the current SSP Policy and Procedure Manual, the SSP will adhere to the following two points:

- The program will be designed to maximize return of used syringes without increasing risk of needle stick injury to staff or program participants, and
- The program will track the number of syringes returned in a manner that eliminates direct handling of sharps waste and does not interfere with service provision, and
- The program cannot tag syringes as noted above.

D.) *Page 37:* City should prevent additional syringe exchanges programs operating or opening within the City limits.

Response: The County respects the fact that the County should work cooperatively with the City on programs operating within the jurisdiction of the City. However, this recommendation could impact the delivery of County public health services and we would hope, in the spirit of collaboration, that the City and the County would jointly consider the many complex factors and best practices noted above.

The Board requested that any new SEP sites not be located in the cities of Santa Cruz or Watsonville unless those cities agree to have them, that resources be situated close to where the problem exists, that areas not currently served by SEP be prioritized for new sites under construction, and that the County work collaboratively to ensure SEP sites are evenly distributed countywide.

II. Enhancement of Drug and Alcohol Treatment Funding

A.) *Page 37:* The Task Force therefore recommends that the City Council and staff work with the County Board of Supervisors and the County Health Services Agency staff on the County Strategic Plan for Alcohol and Drug Treatment Intervention to insure that proven, evidence-based interventions and treatment programs that address specific City needs are included in the Strategic Plan and adequately funded. Needs specific to the City noted by the Task Force include the following:

- Reduce public anti-social behaviors caused by serial inebriates and drug users.
- Reduce both violent and non-violent crime caused by addiction to opiates and other drugs.

Response: The County will work collaboratively with the City to utilize the Alcohol and Drug Treatment Strategic Planning process as a mechanism to identify Evidence Based and best practice models that will most effectively address the needs of individuals with alcohol and drug abuse and dependency issues while working to address public safety concerns within this population.

B.) *Page 37:* The Task Force therefore recommends that the City Council and staff work with the County Board of Supervisors and the County Health Services Agency staff on the County Strategic

Plan for Alcohol and Drug Treatment Intervention to insure that proven, evidence-based interventions and treatment programs that address specific City needs are included in the Strategic Plan and adequately funded. Needs specific to the City noted by the Task Force include the following:

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- Reduce both violent and non-violent crime caused by addiction to opiates and other drugs.

Response: The County will work collaboratively with the City to utilize the Alcohol and Drug Treatment Strategic Planning process as a mechanism to identify Evidence Based and best practice models that will most effectively address the needs of individuals with alcohol and drug abuse and dependency issues.

The Board asked staff to examine the forthcoming report on substance abuse and enforcement from the law enforcement community, which included the District Attorney, judges and others. This report will look at comprehensive systemic changes regarding how we deal with people who are reliant on drugs and determine if there are points we should follow.

In addition, County staff have been working to enroll people in Medi-Cal per the provisions of the Affordable Care Act. This allows people to access medical and treatment services in a way that they have not been able to in the past to start addressing some of the core problems that contribute to anti-social behavior. The Board asked that we try harder to enroll people in these programs and to access services that provide them with the basis of support to change their behavior.

STRATEGIC ENFORCEMENT WITH ACCOUNTABILITY

I. Strategic Police Enforcement

A.) *Page 42:* In addition, to enhance the City's enforcement of repeat municipal code offenders, the City Council should designate existing infractions as misdemeanors in the municipal code for current infractions such as depositing of public waste, multiple offenses for illegal camping, and other offenses that the City Council designates to curb quality of life crimes in the City. This recommendation would include a request to the County to fund a municipal code prosecutor as well as designating the revenue from current infraction penalties to fund the increased court costs.

Response: In conjunction with additional responses below, this office does not support designating limited resources for prosecuting municipal code infractions. In addition, the County has no jurisdiction over where the penalties assessed are designated. With regard to the issue of misdemeanors and infractions, it should be noted that most counties do not utilize the expensive resources of the jail to address low level quality of life issues. Multiple repeat offenders should be identified and strategic plans to impact the negative behavior should be developed for the offending population. Using the courts and the justice system for this purpose will undoubtedly not be cost justified.

The Board directed the County, Sheriff's Office, Probation and District Attorney to work collaboratively with the City to develop a possible approach to habitual offenders whereby habitual offenders will be held accountable for the multitude of quality of life offenses that currently go unaddressed in this population. The Board suggested identifying alternative ways to hold people accountable for their actions, such as problem-solving court, citation dismissal programs, different kinds of public defender, reentry or transition planning, reentry housing and reentry employment. There is an interest in looking closely at programs being instituted by other jurisdictions to determine if they are appropriate here and the kind of resources needed to fund these programs.

II. Offender Assistance with Accountability / Recidivism Reduction

A.) *Page 42:* The Task Force recommends the City to collaborate in developing a strategic multi-disciplinary team (enforcement, criminal justice, drug treatment, social service providers) to identify individuals repeatedly exhibiting behaviors and crimes harmful to the community (i.e., the "top offenders" as identified by SCPD). Strategic team will develop an intervention and accountability plan on a case by case basis for each offender in order to reduce criminal behavior and harm to the community. The overall goal of the team would be reduce recidivism and crime in the City. The strategic team would work with SCPD on identifying those that are generating the most calls for services, arrests, and municipal code infraction citations.

Response: While this recommendation is targeted to the City, the County would welcome participation in a model that would address the needs of frequent offenders for expanded social services, including, but not limited to mental health services, MediCal, CalFresh, and/or substance abuse treatment services. In fact, since this report was drafted, the County has already begun working with the SCPD, City staff, and County Health and Human Services staff to develop such a Task Force to address the needs and impacts of frequent offenders thereby reducing recidivism.

COLLABORATIVE OVERSIGHT AND APPROPRIATE FUNDING

A.) *Page 46:* The Task Force recommends the City Council and County Board of Supervisors consider an alternative funding mechanism to fund any programs identified herein that are outside of the City and County's regular budget. The City should consider various options to fund many of these new recommendations, including but not limited to a city alcohol tax with proceeds going directly to fund public safety programs, a city or county sales tax dedicated to funding public safety programs, as well as innovative private funding and federal grant opportunities such as "Pay For Success" programs and Social Impact Bonds. The city should re-evaluate Measure E funding for specific use of clean-up programs on the San Lorenzo Riverway. The city should also consider using municipal code violation revenue to specifically fund a specialty to deal with recidivist violations. The city should also tie the distribution of Community Development Block Grants as it relates to public safety to results-based programs and require measurable deliverables.

Response: The County is willing to work with the City on potential alternative funding mechanisms, including joint efforts to secure grant funding and Social Impact Bonds.

The Board requested that staff identify additional resources for the County Public Works staff to assist in clean-up activities for the homeless encampments. Resources are needed to do the clean-ups, support volunteers who are actively working to clean up these sites and help with short-term housing assistance until we have a long-term plan.

8.

Secondary Priority Recommendations

PREVENTION

i. Social Service Enhancements

A.) *Page 39, #11:* Add to the point in time Homeless Census Survey questions that concern the City.

Response: The Homeless Census Survey is conducted by the United Way with participation from various stakeholders, including County and City representatives. New questions can be proposed through the committee structure and process.

In addition, elsewhere on today's agenda the Human Services Department Director is seeking Board of Supervisors approval for a contract with the United Way to facilitate the development of a coordinated, countywide, long range strategic plan to address homelessness. The plan would involve participation and input from multiple community based organizations, each of the four cities in Santa Cruz County, relevant County departments and the Housing Authority. We believe development of this strategic plan will advance the options to better coordinate services and create positive outcomes for this population.

B.) *Page 39, #13:* Recommend that the City and County Planning Departments encourage landlords to support investment in HUD recognized best practice programs including Housing First models such as 180/180, and any kind of incentive to renting to special needs populations. See "Santa Clara program."

Response: There are three elements to the response to this recommendation.

1. Landlords should be encouraged to accept HUD Section 8 Housing Choice Vouchers, including those set aside for medically vulnerable clients who have received a set aside voucher. In furtherance of this strategy, a landlord incentive program should be considered.

The Disabled and Medically Vulnerable (DMV) Voucher set aside program that the Housing Authority has been operating in association with the 180/180 program is an innovative approach that prioritizes eligible participants and speeds up the process of getting them a voucher. One of the significant challenges this approach faces is finding landlords willing to lease to participants who they consider high risk. This problem is not limited to the DMV vouchers but is being experienced by many Section 8 voucher holders. In the past there have been programs that were meant to "meet landlords half way" by guaranteeing rent in the event an eviction was necessary (a 3-4 month process that represents loss of income to the landlord) as well as providing additional damage deposit. One of these programs was called "Rent Plus" and was funded with grant funds that were available at that time. The 180 Campaign may be interested in considering a program like this.

2. Investment in housing that uses a Housing First approach is encouraged.

Housing First is a model of Permanent Supportive Housing (PSH) that intends to place participants in housing without pre-requisite program requirements, such as substance abuse treatment. It presupposes the following three elements:

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- a. First, there is a client that is connected to adequate social services that will wrap around them once they move into a housing unit. This is a population of people who are unlikely to be successful in housing without extensive and on-going support,
- b. Second, there is operating subsidy available that will pay the difference between what the tenant can afford to pay (about \$230 if they have an SSI income) and the cost of operating the unit, or rent, and
- c. Third, there is a unit available to house this client. The unit could be a market rental with a cooperative landlord or a home in a project developed for this purpose

Annual funding for PSH rental subsidy and supportive services funding comes from several sources. The County's PSH Program at HPHP includes a total of 112 units, with details provided below. In addition, there are 120 units provided through Veterans Administration Supportive Housing Program (VASH) coordinated through the VA, there are currently 12 units active in the Mental Health Services Act (MHSA) Housing Program with another 5 units coming on line in 2014. These 249 units serve homeless populations, there are additional permanent supportive housing units that provide service-enriched housing to other groups, such as people with mental illness, who are not homeless prior to accessing the housing. It is worth noting, that these resources have been developed over just the last ten years.

3. Other Housing Types; Single Room Occupancy Hotels

One of the housing types frequently identified for PSH is Single Room Occupancy (SRO) projects. This is seen as an ideal housing type for many people because the units are independent—avoiding the need for the challenges shared housing can provide, and they are efficient with units aggregated in a single property. In addition, many older cities have a stock of old residential hotels that convert to PSH relatively easily, such as Skid Row in Los Angeles or the Tenderloin in San Francisco. Unfortunately, this is not the case in Santa Cruz. There are several SRO hotels in downtown Santa Cruz (The Palomar, the Hotel Royal) and Watsonville (The Resetar, the Plaza Hotel) that provide housing to some clients receiving services, although they are not formally PSH projects. But when the HAP successfully included an SRO Mod-Rehab project in its 2000 HUD application it was five years before the project could be completed. An exhaustive search for an available SRO property was conducted before Nuevo Sol, on Barson Street in the City of Santa Cruz was identified. The search for a site did include initial analysis of some of the older hotels along Hwy 9 and other locations in the County.

The Board acknowledged the efficacy of supportive housing and the 180/180 campaign and asked that we find the resources to fully fund these programs. There is also an interest in investigating the suggestions made regarding anti-discrimination ordinances for more Section 8 housing.

STRATEGIC ENFORCEMENT WITH ACCOUNTABILITY

I. Offender Assistance with Accountability

A.) Page 45, #46: Work with County to increase funding to facilitate Rountree as a coerced treatment facility for serial inebriates/substance abusers, and as a mental health treatment center for County inmates already in custody.

Response: The Sheriff's Office has obtained funding to completely renovate the Rountree Jail Farm facility into a programming and transitional housing unit with 64 beds. The Sheriff's Office is modeling

a tiered incarceration model, which allows inmates to complete in-custody programming and demonstrate readiness for housing in a transitional housing complex prior to their release from custody. The bulk of the facility will be converted to classroom, programming space and visitation to provide space for continued in-custody programming and reunification with family.

II. Criminal Justice System Accountability

A.) *Page 45, #48:* Compel Santa Cruz County Probation Chief to appear before City Council twice per year to inform what the Probation Dept. is doing to address probation-related offenses on adult chronic reoffenders.

Response: The Department is committed to research-based probation strategies to ensure public safety through recidivism reduction, reduce victimization and maximize successful completion of the supervision terms. This is accomplished through 1) evidence-based supervision, 2) addressing issues that drive criminal behavior, 3) alternatives to incarceration, 4) and providing services and interventions, proven to reduce recidivism by matching the programs provided with individual needs. The department is exploring resources to support the Task Force strategic multi-disciplinary team to address chronic local ordinance violations. The Probation Department sends a monthly statistical report to law enforcement chiefs which can be shared with the City Council. In addition, the Chief of Probation is also certainly willing to appear before the City Council as circumstances require. We would also encourage the City to regularly attend Community Corrections Partnership (CCP) meetings in order to stay informed and provide input to the Probation Department.

B.) *Page 45, #50:* More jail space for short term incarceration post-conviction.

Response: Santa Cruz County has a long history of seeking alternatives to incarceration and reducing unnecessary incarceration for low level offenses. This was predicated in part by the jail facilities being over-crowded shortly after construction was completed. Today, the facilities continued to house more inmates than their rated capacity, frequently approaching the federal court's restrictions for the State prisons of 137.5% of design capacity. In addition, numerous studies have shown that incarceration for low-level offenders actually increases their recidivism rates, making them more likely to victimize the public upon release, decreasing public safety.

The jail facilities do not have the capacity to house low-level offenders and the County will not build additional capacity for them. Low level offenders who are prosecuted through the criminal justice system will be appropriately diverted into alternative forms of custody, including our successful Work Release program where offenders serve time by working on community projects.

C.) *Page 45, #53:* Work with County Probation to improve transparency of AB109 released prisoners into the county. Recommend County increase staffing levels of probation officers for adult population to adequately deal with AB109.

Response: AB 109 caseloads constitute approximately 5% of all cases currently on active probation supervision with the department. Since 2013, the adult division has added 7 deputy probation officers and 4 probation aide positions to the adult division to help us meet the goal of "right-sizing" current caseload to meet best practice caseload standards. Staffing levels are being continuously evaluated in light of limited resources. The department will continue to provide the Community Corrections Partnership and the public with outcome data related to the AB 109 population. The recent 2011-2013 AB 109 report from the Probation Department is an example of reports that will be shared.

D.) Page 45, #54: Recommend that the Jail to (sic) has access to funds for transportation for inmates to return to community of origin whenever possible, unless they're released on their own recognizance (OR).

Response: This has been implemented. Jail management has worked with City staff to expand the Homeward Bound program. This is a City-funded program to purchase bus tickets for County residents to return to their city of origin upon release from custody. Additionally, the County has funded and continues to fund, transportation options for inmates who are connected to services in other communities to return to those communities.

It should be noted that, although we can offer transportation to destinations outside the city limits, we cannot force individuals to travel against their will once they have been released from custody.

**ATTACHMENT B
SYRINGE IDENTIFICATION TAGGING**

The County has acknowledged the concerns expressed by the community regarding improperly discarded syringes. The Health Services Agency (HSA) has done extensive research regarding syringe identification/tagging options based on the recommendations of various individuals over the last six months. The California Department of Public Health, Office of AIDS and the Harm Reduction Coalition affirm that there are no needle exchanges in the United States that currently stamp syringes.

1. Manufacturer/Distributor Stamping

Currently under contracts and purchase orders, HSA has been using McKesson and Nassen/Point Defiance for syringes, needles and other healthcare supplies. Our research findings reveal limited or no vendors reasonably able to stamp syringes nor is there any known vendor that provides this service.

- a) **BD medical:** contact: Regional Business Manager for BD Medical
BD does not supply stamped syringes and the manager is not aware of another manufacture that does. He did check with his marketing/quality department and they are not capable at this time to individually stamp syringes for the following reasons:
- It would triple the price of the syringe: New print plates, unique catalog number, unique graphics, etc.
 - The minimum order quantity would be extremely high (over one million units/yr).
 - The timeline to complete this type of project would be approximately one year.
- b) **McKesson:** contact: County McKesson representative
McKesson does not carry stamped syringes. The representative does not know of any other vendor or company who sells this product.
- c) **Kimberly-Clark:** contact: Business Development Manager for Kimberly-Clark Western Region
Kimberly-Clark does not carry medical syringes and doesn't know of any vender who sells stamped syringes.

2. Manual Tagging

Based on potential utilization and trends there will be a need for at least 2.0 FTE in personnel to provide manual syringe tagging, sorting, and accounting.

Supplies: label maker, labels, and storage boxes

Potential Challenges: Most syringes come in 10 packs; the package will need to be opened for labeling therefore sterility will be compromised. The syringes would then need to be repackaged.

Syringe Collection: In order to know how many tagged vs. untagged syringes are returned, they will need to be sorted and counted upon receipt. This is also extremely risky and goes directly against the state law and best practice for infection control.

Estimated Cost: A minimum of \$62,400 in labor, plus the cost of the actual labels and other materials

3. Syringes by One Manufacturer

- a) Utilizing one manufacture would limit the variety of syringes used by clients. Varieties of syringes are utilized because they are needed to inject a specific drug and access veins safely.
- b) The two manufacturers utilized by SSP (BD and Easy Touch) are two very common syringe brands utilized by non-SSP clients for various medical needs throughout the healthcare industry and in the community by local hospitals and pharmacies and other healthcare settings.

Color Coded Syringes

A community constituent has provided some information regarding colored syringes. In our research on this option, we have learned that no US distributor currently distributes colored syringes. There is a provider in the United Kingdom, "Exchange Supplies, Tools for Harm Reduction" (http://www.exchangesupplies.org/shopdisp_nevershare_1ml_fixed_needle_syringes_mixed_colours.p hp) but they do not have U.S. Food and Drug Administration (FDA) approval to sell syringes in the United States. Therefore this option is not possible. HSA strongly recommends that the County utilize only healthcare products that are FDA approved.

In closing, our careful review of the options for syringe tagging reveals that the process would be costly and labor intensive with minimal improvement on the health and safety of the community. The funds and staffing that would be directed towards tagging activities would be better utilized to enhance services for drug detoxification and rehabilitation and referrals to community resources.



County of Santa Cruz

BOARD OF SUPERVISORS

701 OCEAN STREET, SUITE 500, SANTA CRUZ, CA 95060-4069
(831) 454-2200 • FAX: (831) 454-3262 TDD: (831) 454-2123

JOHN LEOPOLD
FIRST DISTRICT

ZACH FRIEND
SECOND DISTRICT

NEAL COONERTY
THIRD DISTRICT

GREG CAPUT
FOURTH DISTRICT

BRUCE MCPHERSON
FIFTH DISTRICT

AGENDA: 2/11/14

February 10, 2014

BOARD OF SUPERVISORS
County of Santa Cruz
701 Ocean Street
Santa Cruz, CA 95060

RE: SUGGESTED REVISIONS – ITEM 45

Dear Members of the Board:

I have the following proposed changes to the County's response to the City of Santa Cruz Public Safety Task Force Report. The page numbers cited below coincide with the handwritten numbers on the top of each page of the current version of the response. *All proposed revisions are in italics.*

Page 2 – Add the following language as the final paragraph under 1.B.)

Response:

The Board directed the County's representative on the SSP Advisory Task Force to agendize all of the Public Safety Task Force's recommendations regarding the SSP. The purpose will be to discuss innovative options to implement each recommendation or viable options to each recommendation toward the goal of dramatically reducing the number of illegally discarded needles in the community.

Page 3 – Make the changes shown in italics to the first paragraph of the response under 1. C.):

Implied within these recommendations is the assumption that the SSP is directly contributing to illegal behavior and the proliferation of improperly discarded needles. *Although research findings from multiple peer-review professional journal articles reveal otherwise, as outlined below, the County recognizes that the residents and businesses of the impacted areas perceive that the SSP is directly linked to undesirable activities. That perception needs to be respectfully acknowledged.*

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Page 4 – Change the last paragraph of the response under 1) SSP Relocation:

The Board recognized the importance of locating services where the needs exist but directed staff to investigate options for relocating services to non-residential areas and report back to the Board within 60 days.

Page 4 – Add this to the recommendations under 2) Syringe Identification:

5. The Board directed the County's representative on the SSP Advisory Task Force to agendize a discussion regarding creative options for identifying syringes distributed by the SSP and report back to the Board within 60 days.

Page 4 – Add the following language after the third paragraph under 3) One-to-One exchange:

The Board directed staff to provide the specific data regarding medical exceptions made since the inception of the SSP that resulted in providing more new needles than used needles being exchanged. Further, the Board directed staff to explain why there is not a cap on the total number of new needles an individual can receive from the SSP irrespective of the number of dirty needles offered for exchange.

Page 10 – Under B.), second paragraph, make the changes shown in italics:

The jail facilities do not have the capacity to house low-level offenders and the County *does not at present have the resources to build additional capacity for them.* Low-level offenders who are prosecuted through the criminal justice system *are currently released or put into* alternative forms of custody, including our successful Work Release program where offenders serve time by working on community projects. *The Board directed the County, Sheriff's Office, Probation and District Attorney to work collaboratively with the City to develop options for dealing with habitual offenders, even if they are low-level offenders. These recommendations will be taken under consideration by the Board as soon as they are available.*

Thank you for your consideration of these suggested modifications.

Sincerely,



BRUCE MCPHERSON, Supervisor
Fifth District

BAM:ted

cc: County Administrative Officer

2032A5

From: Renee Golder <renee.golder@gmail.com>
Date: January 28, 2014 at 8:57:08 AM PST
To: Zach Friend <Zach.Friend@santacruzcounty.us>
Subject: I can't make the meeting today

Dear County Board of Supervisors,

I am writing you to implore you to work with the Mayor, and the City of Santa Cruz to assist them in implementing any safety measures you can. As a citizens of Santa Cruz both my husband and I were born and raised in Santa Cruz, raising our children here we are constantly discouraged by the state of affairs here in town. We work very hard, own our home, and a rental. We volunteer, and I even served on the Citizen Safety Task Force; yet we feel like second class citizens at times. I do not feel safe downtown, my 8 year old cries when ever we go because she is scared of the anti social behavior we have witnessed on countless occasions. Our house has been burglarized more than once, and nightly, criminals walk our street checking locks on cars. We have installed a video surveillance system and see them working in teams. I don't have any magic bullet ideas to change things, but only you can work with the city offices to help improve the quality of life through creative solutions and collaboration.

Thank you for your time,
Renee Golder

—
Renee Golder
831-425-1855

From: Denise Elerick <denise@ebold.com>
Date: February 5, 2014 at 8:59:53 PM PST
To: Zach Friend <Zach.Friend@santacruzcounty.us>
Cc: John Leopold <John.Leopold@santacruzcounty.us>, Bruce McPherson <Bruce.McPherson@santacruzcounty.us>, Neal Coonerty <Neal.Coonerty@santacruzcounty.us>, Greg Caput <Greg.Caput@santacruzcounty.us>
Subject: In favor of Needle Exchanges
Dear Supervisors,

I am moved to contact all of you in light of numerous hearings and articles in the Sentinel representing conflict around the needle exchange programs. I support all needle exchange programs. I am an unpopular voice from Aptos speaking to you about an issue my Santa Cruz friends say "I have no idea , since I live in Aptos." I have quietly listened for months. I believe ransacking homeless camps, recently in Soquel is not a surprising way to find needles, it is like going into a home. This is hardly an example of a discarded needle. This is starting to feel like a witch hunt to me.

I am seeing what I believe are many scare tactics about discarded needles. I do not want to bombard you with an excessive amount of attachments on the matter but a few points to consider.

Please read the following report from the NIH

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2529409/>

Claims and fears about contracting HIV and Hepatitis from stepping on a discarded needle are fear based and not scientifically sound arguments. There is not one single case in the world of HIV contacted by an old used discarded needle. It might be upsetting to find a needle. It is a reminder of an underbelly of society that we would like to not confront. Counseling (education ??) is suggested in the above link and treatment and testing be done in the event of a needle stick on a case by case basis.

Some neighbors are upset by discarded needles. Perhaps users are discarding them out of fear of being arrested with drug paraphernalia. Could there possibly be a pilot project to ask those with needles to leave them with any officer and ask officers to carry a sharps container with no threat of arrest.

Perhaps some way to educate the public on what to do if a needle is found. How to handle, where to find a sharps container, how to document and report .

Perhaps some of these measures are already underway as I am not very well informed. I am trying to think outside the box here.

Discarded needles in public is not an issue unique to Santa Cruz. Can

45

there be a way to connect with other cities , of similar size, to see how they handle the matter. Is it an issue? Are there clean up volunteers? What is their response to angry mothers dramatically seizing the spotlight to stir up support to get people to collude with them. I can relate to them quite literally because I would have had the same reaction a few years ago. I have been that irate emotional mom.

With Santa Cruz having an HIV rate of 12% when the state has a 20% rate is an example of the program working.

To stop needle exchange programs in the light of upset neighbors is dangerous for all of us. We all suffer and all are at risk and will all pay if the rate of HIV and Hepatitis rises in the IDU community. One could surmise that this is more dangerous than finding or even stepping on a discarded needle.

I found the following link an interesting overview on the history of Needle Exchange. You may be well aware of the following.

<http://hpcpsdi.rutgers.edu/facilitator/SAP/downloads/articles%20and%20data/History+of+Needle+Exchange.pdf>

The debate will not likely come to an end. I am a former, very long ago volunteer for SCAP. I am very interested in public health issues, a mother of two finding a needle would not illicit a reaction in me. It is a sad reality. We live with drug use that is not going away any time soon.

Thank you for your time and your hours of dedication to Santa Cruz County,

Denise Elerick

Alicia Murillo

From: cdbbosmail@co.santa-cruz.ca.us
Sent: Sunday, February 09, 2014 2:22 PM
To: CBD BOSMAIL
Subject: Agenda Comments

Meeting Date : 2/11/2014

Item Number : 45

Name : Peter Haworth

Email : pete@haworths.org

Address : 152 Lupin Drive
Soquel CA 95073

Phone : 8314649778

Comments :

I see that the Public Safety Report and the county's response will be discussed at the supervisors meeting on Tuesday. I'm sure the Syringe Services Program will be a major topic in that context and would like to pass on some observations about it.

I have read the county's response to the report and what concerns me most is the constant reference to "best practices", phrases like "studies have shown", and "20 years of research cannot be ignored".

Justifying claims with vague statements like that immediately makes me question their validity. I have no doubt that best practices do exist and that studies have been carried out, but as far as I know none of them were carried out in Santa Cruz. What works in one place does not necessarily work in another and the findings of a 20 year old study may very well not be valid today.

Here's what I personally need in order to make any reasonable judgement about the Syringe Services Program.

According to the Syringe Services Program Description:

"The primary goal of the SSP is to work in partnership with the community to help prevent the spread of infectious diseases associated with injection drug use and to address the community's concern regarding improperly discarded syringes."

Since the program started, it has published two quarterly reports chock full of statistics, none of which address those goals. The success of any program in the private or public sector must be judged on whether it meets its goals or not and I have seen no evidence on any progress toward either of those goals. In fact it's pretty clear that no progress at all has been made towards the second goal. Does any such evidence exist and if not, how are we to judge the success of the SSP?

I am also curious as to how any program that purports to help drug users does not have as its absolute number 1 primary goal to help them get off drugs.

Next I'd like to address some of the claims made in the Public Safety Report and the county's response.

The county has chosen to make an assumption that some of the Public Safety Reports findings imply that "the

SSP is directly responsible for directly contributing to illegal behavior and the proliferation of improperly discarded needles" and cites "research findings from multiple peer-review and professional journal articles" to refute those claims.

Did any of the cited articles include research in Santa Cruz? What empirical evidence does the county have to either support or refute either of those claims specifically with regard to the Emeline Street SSP location?

I strongly believe that the efficacy of the SSP can only be determined on the basis of factual evidence related specifically to the its implementation in Santa Cruz.

From: Denise Elerick <denise@ebold.com>
Date: February 5, 2014 at 8:59:53 PM PST
To: Zach Friend <Zach.Friend@santacruzcounty.us>
Cc: John Leopold <John.Leopold@santacruzcounty.us>, Bruce McPherson <Bruce.McPherson@santacruzcounty.us>, Neal Coonerty <Neal.Coonerty@santacruzcounty.us>, Greg Caput <Greg.Caput@santacruzcounty.us>
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The debate will not likely come to an end. I am a former, very long ago volunteer for SCAP. I am very interested in public health issues, a mother of two finding a needle would not illicit a reaction in me. It is a sad reality. We live with drug use that is not going away any time soon.

Thank you for your time and your hours of dedication to Santa Cruz County,

Denise Elerick

Alicia Murillo

From: cbdbosmail@co.santa-cruz.ca.us
Sent: Monday, February 10, 2014 8:22 AM
To: CBD BOSMAIL
Subject: Agenda Comments

Meeting Date : 2/11/2014

Item Number : 45

Name : Sylvia Caras

Email : Not Supplied

Address : Not Supplied

Phone : Not Supplied

Comments :

Focus groups with PWUD will provide good information on why so many needles are discarded thoughtlessly. Jurisdictions could waive dump fees for volunteer clean up teams. More broadly, litter (butts, drink cans, needles, paper, plastic. ...) is a sign of disengagement. A Clean And Green campaign could create a general sense of ownership and pride, even encourage visitors not to trash.

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Alicia Murillo

From: cdbosmail@co.santa-cruz.ca.us
Sent: Sunday, February 09, 2014 11:34 PM
To: CBD BOSMAIL
Subject: Agenda Comments

Meeting Date : 2/11/2014

Item Number : 45

Name : Peter Haworth

Email : pete@haworths.org

Address : 152 Lupin Drive
Soquel CA 95073

Phone : 831-464-9778

Comments :

Further to my earlier email, I have just read the email sent to you by the Needles In Public Spaces group which presents important information regarding my request for empirical evidence of the success or failure of the Syringe Services Program.

First, there has been no decrease in the number of needles found in public places since the SSP was instituted.

Second, the area around the SSP exchange site on Emeline Street was found to be a "hotspot", meaning that more discarded there than in other areas of Santa Cruz. This clearly refutes the statement by county staff that "best practices" and "studies" show that SSP programs do not increase the number of improperly disposed needles in the area of the exchange site.

This is exactly the sort of factual evidence that is needed to evaluate the effect of the Santa Cruz SSP.

From: Stijn Cattaert <stinux@gmail.com>
Date: February 9, 2014 at 2:45:07 PM PST
To: Zach Friend <Zach.Friend@santacruzcounty.us>, Neal Coonerty <Neal.Coonerty@santacruzcounty.us>, John Leopold <John.Leopold@santacruzcounty.us>, Greg Caput <Greg.Caput@santacruzcounty.us>, Bruce McPherson <Bruce.McPherson@santacruzcounty.us>

Subject: Re: Please reconsider the best practices for the needle exchange.
Please read in attached link how many needles have been found in Santa Cruz during the last year alone. 6 persons were stuck accidentally by discarded needles of which 3 KIDS!!

Tell me again in all honestly why the BOS thinks no changes are needed for the needle exchange.

It was to be moved out of our neighborhoods.

And it has to be a 1 for 1 exchange. NO Exceptions!

Thank you

Stijn Cattaert.

<https://www.facebook.com/groups/takebacksantacruz/10152279422283420/>

Sent from my iPhone

On Feb 9, 2014, at 9:19 AM, Stijn Cattaert <stinux@gmail.com> wrote:
Each of these "best practices" examples I see in the report are wrong. We know that there is more crime in this area, that it is a discarded needle hot spot, and common sense says you don't allow drug addicts to shoot up around children.

If you move it outside the city, your 400 users will follow and have less impact on our neighborhood.

It's such a no brainer to me!

And only a 1 to 1 exchange can be acceptable.

Please something has to happen, this situation is not acceptable.

Thank you

Stijn Cattaert.
Pryce Street.

Sent from my iPhone

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From: Sue Schabot <calliesalfa@sbcglobal.net>

Date: February 9, 2014 at 7:46:54 PM PST

To: Bruce McPherson <Bruce.McPherson@santacruzcounty.us>, Greg Caput <Greg.Caput@santacruzcounty.us>, John Leopold <John.Leopold@santacruzcounty.us>, Neal Coonerty <Neal.Coonerty@santacruzcounty.us>, Zach Friend <Zach.Friend@santacruzcounty.us>

Subject: A plea for our town

Reply-To: Sue Schabot <calliesalfa@sbcglobal.net>

Dear Board of Supervisors

I am sending this email in the hopes that you will give great consideration to the Public Safety Task Force.

I have lived in Santa Cruz for almost 25 years. I am a mother and a grandmother and have seen violence escalate in our town beyond anything I would have ever imagined.

A few days ago I heard from a young mother who dropped her daughter's library books at the downtown branch and was chased and threatened to be killed by a man she did not know. She outran him and made it to her car where her 9 year old daughter was sitting in the back seat, in a locked car, only to witness the man pounding on the car and screaming he was going to kill her mother. The mother was trying to console her daughter that she was all right, unlock the door and remain alive throughout the ordeal. The man was apprehended, but was not arrested as best we can find out. A day or so later he was seen at Costco selling drugs out of his car.

The trauma these two young people had to go through will remain with the 9 year old girl for a lifetime. This is not an isolated incident by any stretch of the imagination. There are stories like this everyday. Santa Cruz needs to change. We need to not let this happen to anyone again.

I am pleading to you all to pray for wisdom and to please put your energy into coming to a wise decision to end the violence, deaths and fear that is so rampant in our town, our county. I am a senior, will be 70 in a couple of months and have gradually limited my activities so I am not out and about alone. Santa Cruz of the past is gone. Downtown is off limits for most of us.

Please make safety a priority in our community, our county. Please consider all of us, especially the little 9 year old girl, Sasha, when you discuss solutions.

With hope and sincerity

Susan M Schabot

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From: Gabrielle Korte <gabbyoda@gmail.com>

Date: February 9, 2014 at 7:21:06 PM PST

To: Neal Coonerty <Neal.Coonerty@santacruzcounty.us>, John Leopold <John.Leopold@santacruzcounty.us>, Bruce McPherson <Bruce.McPherson@santacruzcounty.us>, Greg Caput <Greg.Caput@santacruzcounty.us>, Zach Friend <Zach.Friend@santacruzcounty.us>

Subject: Re: Quality of Life in Santa Cruz

Dear Supervisors,

I am once again calling upon you to consider the danger and anxiety to the public the needle giveaway is causing. I do not accept the "best practices" excuse. Best practices for who? Is a child stepping on a needle in Blue Ball Park a hallmark of best practices? I stand in full support of my friend Meriah Campbell, who - as you know from your last meeting - is suffering, along with her family, from crime and discarded needles in her neighborhood next to the needle giveaway. Please get the needle giveaway out of her neighborhood, and preferably phased out of Santa Cruz County altogether.

As I've stated before, I understand the argument in favor of the needle giveaway, I really do. However, public safety and quality of life **MUST** be taken into account, and the balance should always be tipped in favor of our children. Did you know that right now there are children in your County who do not get the simple pleasure of feeling the sand between their toes? One because she stepped on a needle, and the others because their parents are afraid they will step on a needle. Do you really want that to be your legacy?

-Gabrielle Korte

On Tue, Nov 19, 2013 at 11:55 AM, Gabrielle Korte <gabbyoda@gmail.com> wrote:
Dear Supervisors,

I am again asking you to stop the practice of giving away free needles, as it is endangering our children and the general public. Over a month ago I forwarded you this email I wrote to the Public Safety Task Force listing all the places that are unsafe for my children. Unfortunately, my family's "unsafe places" list has grown since then, due to discarded needles. Just this week a 5-year-old girl was **STUCK** with a used/discarded needle in the sandbox at Blue Ball Park in Soquel. She will have to undergo testing for HIV and Hepatitis. We live in Santa Cruz but used to drive all the way to Soquel for my children to enjoy this sanctuary. Not any more.

Over the summer, one of my son's schoolmates (9 years old) found and placed a syringe in his pocket at Seabright Beach. His mother was not aware until 2 days later when she was shaking out his shorts to do laundry and found it. He too had to undergo testing for HIV and Hepatitis. Thankfully both tests were negative. However, this family had to (and still does) endure anxiety from this incident. I can only imagine what the family of the 5-year-old girl recently stuck with a needle is going through. Because of the proliferation of needles, I, along with every other mother I know, feel anxiety over taking our kids to Santa Cruz parks and beaches. Just two years ago, when my family and I lived in San Bruno, I never would have dreamed of having these concerns.

Here is a map of all the places where dirty needles have been found:

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<http://www.arcgis.com/home/webmap/viewer.html?webmap=3c8d1cb962a64869bd406bc7bbe76a01&extent=-122.0385%2C36.9766%2C-122.0007%2C36.9987>. As I said in my prior email, I understand the arguments in favor of giving away clean needles. However, the danger to the general public—especially children—greatly outweighs those concerns. Why not give out bleach kits instead?

Having clean parks and beaches is a basic right children should have. You have the power. Shut down the needle giveaway and give our children back their spaces to play!

-Gabrielle Korte

----- Forwarded message -----

From: **Gabrielle Korte** <gabbyoda@gmail.com>

Date: Fri, Oct 4, 2013 at 1:52 PM

Subject: Quality of Life in Santa Cruz

To: santacruztaskforce@gmail.com

Dear Members of the Public Safety Task Force:

As a mother of two young children (ages 4 and 7), I am writing to express my frustration with the public safety crisis in Santa Cruz and how it has impacted my family's quality of life. I am asking that our representatives take immediate, emergency action to protect families such as ours. Our family's list of "unsafe" places is steadily growing. The list includes, but is not limited to:

- San Lorenzo Park where transients openly abusing drugs and drinking alcohol greatly outnumber children;
- Harvey West where there was a drug overdose by a transient during my children's swimming lesson;
- Lighthouse Field where my kids (wearing sandals and shorts) discovered mounds upon mounds of human excrement and used toilet paper under a tree;
- Cowell's Beach which has become the second dirtiest beach in the state;
- Downtown, where I must protect my children from aggressive panhandlers;
- And—saddest of all—the very space behind our own home (Carbonera Creek area - see attached photo I took at a recent volunteer clean-up), where drug-addicted transients feel free to camp and dump their trash without consequence.

Two years ago I moved my family to Santa Cruz from San Bruno so that my kids could experience the same childhood I experienced growing up in this beautiful city.

Unfortunately, we quickly found that this is not the same Santa Cruz that I grew up in. Besides being intimidated in parks and downtown, my family's "Welcome to Santa Cruz" present was having our car window smashed (right in front of our home) and my son's life-saving Epi-Pens and inhaler stolen from the front seat. Then last year, after transients were seen trespassing on the property, a fire started outside the first grade classroom of Spring Hill Elementary School and destroyed a significant portion of the building. My son and many other students spent the school year in portable classrooms. Most recently, I found a bloody glove in front of our home.

Having first raised my children in another community, I can tell you that the way things are in Santa Cruz is NOT NORMAL. Before moving to Santa Cruz, my kids could safely play in any park or beach they wanted, and take a hike anywhere they wanted. And I NEVER had to tell my kids to keep their shoes on and to watch out for needles! By allowing drug addicts, criminals and homeless-by-choice to take over and pollute our

public spaces (and even private property), the message from Santa Cruz is loud and clear: It does not care about its families. Instead, the enabling of drug addicts and criminals has taken precedence over keeping our hard-working citizens safe. As Judge Symons said, Santa Cruz is truly a magnet for people who want to live on the streets and commit crime. The corollary to this is families feeling forced to move out of Santa Cruz.

To combat these problems, I ask that the Task Force make the following recommendations to our City and County Leaders:

- **Acknowledge the problem.** The least our residents deserve is honesty from their representatives. Do not blame it on tourists (Don Lane) or claim the crime rate has gone down (Judge Salazar).
- **Shut down the Day Services Center.** I am shocked at the number of arrestees—including sex offenders—who list their address as 115 Coral Street. As long as the Center continues to harbor criminals, I do not support my tax dollars going there. With proper intake and screening, we can take care of the local, truly down-and-out individuals and families that need our help. The blanket hand-outs need to stop. I recommend the book "Toxic Charity" by Robert Lupton. (http://www.amazon.com/Toxic-Charity-Churches-Charities-Reverse/dp/0062076213/ref=sr_1_1?ie=UTF8&qid=1380901757&sr=8-1&keywords=toxic+charity)
- **End our "Catch & Release" form of justice.** What a joke! No wonder criminals love Santa Cruz – there are no consequences for their behavior. Our judiciary has completely abdicated its responsibilities by turning over "citations" to a collections agency. This has resulted in a completely unfair and ineffective system with two different expectations of behavior; the collections agency could come after me because I own a home, but there is no recourse against someone who chooses to be a homeless criminal. Ticketed persons who are unable to pay should have to work off their fines. If more jail space is needed, then find it.
- **Shut down the Needle Exchange.** I understand the argument in favor of a Needle Exchange (to reduce the risk of spreading HIV and Hepatitis). However, this does not take into account the risk to those who might step on one of the numerous discarded needles. Furthermore, it does not take into account the loss of safety and security to citizens who find needles or fear stepping on needles. Additionally, it is just another form of enabling and attracting drug addicts to our town. Most other towns don't have a needle exchange; why should we?
- **Stop the harassment downtown.** As Judge Symons said, enforce our loitering and other laws so that we can actually enjoy our downtown. I don't know anyone who actually strolls downtown! We all either avoid downtown entirely, or "strategically park" near the business we need to go to.
- **Do not allow a "Sanctuary Camp".** It hasn't worked in other places and it won't here. It will simply invite more outsiders and more crime to our already overburdened town.
- **Treat this as an emergency situation.** We can't let this fester any longer. Families deserve "compassion" too. Please do all you can to keep us safe.

Thank you,

Gabrielle Korte

From: Melanie Premo <melaniepremo@gmail.com>

Date: February 10, 2014 at 6:48:30 AM PST

To: Bruce McPherson <Bruce.McPherson@santacruzcounty.us>, Greg Caput <Greg.Caput@santacruzcounty.us>, John Leopold <John.Leopold@santacruzcounty.us>, Neal Coonerty <Neal.Coonerty@santacruzcounty.us>, Zach Friend <Zach.Friend@santacruzcounty.us>

Subject: Needles

Dear County Supervisors,

My understanding is that at tomorrow's meeting, you will be deciding whether to adopt your original response to the Santa Cruz Public Safety Task Force recommendations, which states that

- 1) the SSP does not cause increased public discard of syringes and increased criminality in the neighborhood where it is located;
- 2) "Best Practices" include providing needles in the quantity requested by client without requiring clients to return used needles, with no limit on the number of needles provided;
- 3) a one-to-one exchange is NOT a "best practice"; and
- 4) it is not a "best practice" to locate the SSP in a non-residential area.

I strenuously disagree with each and every point of this response, and strongly urge you to reject this response, and adopt the recommendations of the Santa Cruz Public Safety Task Force.

Needles are being found near the county facilities where they are being given out. The neighborhood surrounding the county facilities is inundated with crime, needles, sketchy characters and other problems.

I am asking you to heed the pleas of the citizens of our community. Santa Cruz has massive problems that are getting worse every day due to drug addicts, and our community is circling the drain. Enabling drug addiction is not working. Giving out needles is not working. These things are making the problems worse.

Please stop looking at the problems of needles only through the prism of shared needles, and instead look at the problems faced by all members of our community. Thank you for your attention.

--Melanie Premo
Santa Cruz, CA

45

From: Ronald Jr Perrigo [<mailto:rperrigojr@gmail.com>]
Sent: Monday, February 10, 2014 3:58 PM
To: Zach Friend; Neal Coonerty; John Leopold; Greg Caput; Bruce McPherson
Subject: Citizens Public Safety Task Force

County Supervisors, Please give every careful consideration to the Citizen's Public Safety Task Force Report that has been brought to you, along with the input at oral communications from your constituents regarding the collateral effects of having an SSP located in their neighborhood.

To those supervisors, who have heard the neighbors, and have instituted changes in the county response to the report, Thank you very much for paying attention, and carefully listening. I think we can learn a great deal from their experiences there.

Thanks again, Sincerely,
Ron Perrigo Jr
314 Cayuga
Santa Cruz, CA 95062

#45

From: Paul Scott <paul.scott.scott@gmail.com>
Date: February 10, 2014 at 9:26:25 PM PST
To: John Leopold <John.Leopold@santacruzcounty.us>, Zach Friend <Zach.Friend@santacruzcounty.us>, Neal Coonerty <Neal.Coonerty@santacruzcounty.us>, Greg Caput <Greg.Caput@santacruzcounty.us>, Bruce McPherson <Bruce.McPherson@santacruzcounty.us>

Subject: 200+ Needles found at Evergreen cemetery

Dear Board of Supervisors,

No doubt you have received other emails with these same images posted. A gentlemen called Gary Neier who has been cleaning up Evergreen cemetery for a number of years reports to have found these in a creek below a camp.

When is this madness going to be brought to a halt? I have lived in Santa Cruz a number of years, my wife, 14 year old daughter and 1 year old son being natives. I am tired of seeing evidence of chronic drug addiction, mental health and homelessness in our community being met with a seemingly revolving door band aid approach.

I am tired of seeing people dealing drugs on the street that I live on.
I am tired of hearing people high on drugs behaving unsociably late at night (I do call the cops)
I am tired of going downtown later on at night and having congregations of people smoking on Pacific and begging for money.
I am tired of seeing hundreds, now thousands of needles, tonnes of human excrement in our public spaces and waterways, where our children play.

I want to know what is going to be done to mitigate this mess.
Best Regards,

Paul Scott
312 Spruce Street,
Santa Cruz



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From: Casey <caseywase@yahoo.com>

Date: February 10, 2014 at 9:40:55 PM PST

To: John Leopold <John.Leopold@santacruzcounty.us>, Zach Friend

<Zach.Friend@santacruzcounty.us>, Neal Coonerty

<Neal.Coonerty@santacruzcounty.us>, Greg Caput

<Greg.Caput@santacruzcounty.us>, Bruce McPherson

<Bruce.McPherson@santacruzcounty.us>

Subject: PLEASE!!!

Reply-To: Casey <caseywase@yahoo.com>

Please, please do something about this!!!! These apathetic people are completely DESTROYING our community and our environment, PLEASE put a stop to the needle exchange program!!! The lives of the men, women and children in that cemetery are being so blatantly disregarded and disrespected, these people were the history of Santa Cruz, and this is how we allow their resting place to be treated? Not to mention the future, I can't even take my son for a walk without finding a needle somewhere. FORGET letting him play in the sand at a park! ENOUGH IS ENOUGH!!!!



Date: February 11, 2014 at 12:15:58 AM PST

To: John Leopold <John.Leopold@santacruzcounty.us>, Zach Friend <Zach.Friend@santacruzcounty.us>, Neal Coonerty <Neal.Coonerty@santacruzcounty.us>, Greg Caput <Greg.Caput@santacruzcounty.us>, Bruce McPherson <Bruce.McPherson@santacruzcounty.us>

Subject: Santa Cruz Needle Program

Reply-To: Jeffrey and Robin Samuels <samuels585@yahoo.com>

Dear Honorable Supervisors,

Santa Cruz has become a gross, filthy, and a violent reflection of it's former self. Tax paying, law abiding citizens are no longer safe walking our streets. Gang problems, drug addicts, violent homeless - Santa Cruz is a scary place. There are so many cars being broken in to, it is hard to count. These problems are not being adequately reported by the SC Sentinel, but are being reported by the people who are the victims through Facebook (Take Back Santa Cruz), which I highly recommend all of you read. We do not go to downtown Santa Cruz after dark. I know people who carry Mace for personal protection downtown. It's actually a smart thing. However, tax paying, law abiding citizens should not feel they have to carry Mace. It's just plain wrong.

I am angry and appalled by what has happened in my hometown. We will not bring out of town guests to Santa Cruz (we live in Felton). Today, I am writing about the so-called Needle Exchange. Thousands of needles (!!!!) have been found on our streets, in our parks, and on our beaches over the past year. This is UNACCEPTABLE to the citizens of this county. If you are concerned about disease transmission, then hand out bleach kits -- NO NEEDLES! This report that more needles have been turned in, than have been found thrown down, where ever, is quite frankly, irrelevant. Since needles are not even counted when turned in, the report is also completely unreliable. The property crimes, filth, trash at homeless camps (an environmental nightmare), needles in public places, violence, is completely out of control.

People that utilize the Homeless Services Center need to put in to the system, to get out. They should be picking up trash in town, cleaning graffiti, trimming plants, cleaning up homeless camps -- in teams, and under supervision. Let them do something useful and helpful. Help them get out of the cycle they are in. Free shelter, free food, free needles, free bicycles (also sky high in theft levels)... Why should they do anything to improve their lives? We give them everything to stay an addict. Why is it the citizens are doing the clean up (an uphill battle, by the way), while it appears the leadership watches? If some of you are involved in clean ups, and trying to end the free needle program, my apologies. These are hard questions, but in my opinion, it's high time someone started asking them.

Enough talk, it's time to take action. End the free needle giveaway. It's a joke. Require mandatory drug treatment with bleach kits. This free-for-all is destroying Santa Cruz city and county from the inside out.

Have you really, really looked around? Santa Cruz depends on tourist dollars. Who would want to come here? I'm not saying Santa Cruz can't be a little weird, a little funky, and a lot artsy. But, that is no where near where we are now.

Sincerely,

Robin Samuels
Felton
335-0580

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