



# CITY OF CONCORD

*New Hampshire's Main Street™*

## Public Safety Advisory Board Meeting

### **DRAFT** Minutes

June 28, 2021

#### **Call to Order**

Councilor Amanda Grady Sexton called the meeting to order at 3:02 p.m.

**Board Members Present:** Councilor Amanda Grady Sexton (**chair**), Councilor Candace Bouchard, Councilor Erle Pierce, Councilor Zandra Rice-Hawkins, Lisa, Brown, Donald Carter and Steve Edwards.

**Late:** Carol Hargrove

**Absent:** Councilor Fred Keach, Mayor Jim Bouley and Anna McKenna

**City Employees Present:** Police Chief Bradley Osgood, Deputy Police Chief John Thomas, Fire Chief Sean Brown, PIO Stefanie Breton

**Non- Board Members Present:** Councilor Byron Champlin, Ellen Groh, Cassidy Jensen, Lauren McGinley, Rebecca Sky, and Anna Thomas.

#### **Approval of Minutes**

Councilor Erle Pierce motioned to approve the minutes from May 3, 2021. Councilor Bouchard seconded the motion. The minutes were unanimously approved.

#### **Approval of the PSAB Homeless Subcommittee Minutes**

Councilor Candace Bouchard motioned to approve the minutes. Councilor Zandra Rice-Hawkins seconded the motion. The minutes were unanimously approved.

#### **New Hampshire Harm Reduction Coalition**

Lauren McGinley, Executive Director for the New Hampshire Harm Reduction Coalition addressed the Board. Ms. McGinley stated that the purpose of the NH Harm Reduction Coalition was to “come together and promote compassion and care for people who use drugs through harm reduction services by supporting syringe exchange activities, utilizing best practices and advocating for human rights”. She said that they have been operating in New Hampshire since June of 2017. They began in Strafford County. In 2019 they began a program in Manchester, NH. She noted that they have supported other exchange programs throughout the State.

Councilor Amanda Grady Sexton asked if Ms. McGinley could talk about the philosophy behind why harm reduction.

Ms. McGinley said that the goal is to keep people safe from the harm that can be inferred by injecting drugs. Without programs like this there is a higher risk of contracting HIV, Hepatitis C, infections from infected wounds, as well as fatalities from unintended overdose deaths. She said that Harm Reduction distributes supplies, connects with participants, and provides education and communication pertaining to safer practices. She said that they want to keep people alive and encourage them to get treatment. She also noted that treatment works but it takes time.

Councilor Amanda Grady Sexton asked if this enables people to continue to use without getting treatment.

Ms. McGinley said that the CDC has researched and developed data regarding Harm Reduction Programs. She said that it does not enable a person to continue to use drugs. She said that in New Hampshire, everyone has access to syringes by purchasing them at a pharmacy. She said that this program enables them to make small steps to being safer.

Donald Carter asked Ms. McGinley if she had any statistics about how many people who use the Harm Reduction services are homeless.

Ms. McGinley said that she doesn't have the data but in the two other exchanges, at least half the population that accesses the syringe services is unsheltered or under sheltered in some way. She personally believes that the homeless community accounts for around 60% of the people accessing these services.

Mr. Edwards asked what other metrics that the organization uses.

Ms. McGinley answered that participant data is very important to the organization and they have partnered with an organization called the HEELS study. She said that this study looks at how effective the syringe exchange programs in New Hampshire, the activities and care coordination. She said that they provide substantial data reports quarterly to the Department of Health and Human Services.

Mr. Edwards asked if there was any distinction between the other organizations. He asked if they all operate at the same level or if some are better than others.

Ms. McGinley said that she has been impressed with SONA, which is the harm reduction program in Nashua. She said there is a great partnership with the community and municipalities. She also noted that they have participation in recovery services. She said they have unlimited amounts of supplies and disposal services that they can offer their participants. She said that the other syringe exchange programs do not have an unlimited supply that they can offer individuals; there are limits and exchange rates that are enforced due to budgetary constraints.

Mr. Edwards asked how the City of Concord can be assured that the program will not be a lower end program. He asked what controls will be in place to ensure that their organization can provide the safest program not only for the users but for the residents of the City as well.

Ms. McGinley stated that part of the contract with DHHS was to open up a syringe service operation in Concord by July 1, 2021. She said that in September of 2020 they assembled a steering committee that consisted of members from Concord Hospital, Foundation for Healthy Communities, Capital Area Public Health Network, Riverbend, Concord Coalition to End Homelessness and Cap; she noted that this was not a full list. She said that they identified that there was a need to implement an needle exchange service in the City, and then began to start the planning process of what a syringe exchange will look like in Concord and how they can implement this service into the City without detracting from other operations that were already taking place.

Ms. McGinley stated that the Concord Operation will be smaller scaled than other operations that are currently in place across the state. She said that budgetarily there is not a lot of support. She said that there isn't a lot of fundraising that can be done for these programs.

Mr. Edwards asked what the difference was between a syringe and a needle.

Ms. McGinley stated that there was no difference.

Mr. Edwards asked if there was a location that this would be taking place at.

Ms. McGinley said that there is a business owner that has offered the program space to operate on. She said that the business owner reached out to them and offered their lot for syringe exchange activities and has also said that they would allow them to use their indoor space during the winter. She said that the business is "Next Level Auto", and that they are located near Target.

Councilor Erle Pierce asked what the next steps were for the program.

Ms. McGinley said that there was a contractual start date through the department of Public Health Services of July 1<sup>st</sup>. She said that they picked the date of July 7<sup>th</sup> to be the first two-hour syringe exchange that will be operating. There will be trained volunteers and a Care Coordinator as well as some community agencies that have said that they will come by the site and offer services and support. She said that there will be a moderate limit of syringes to begin due to funding restraints. She said that 100 syringes will be the maximum number of syringes that an individual will be able to take with them. The program follows a "plus ten" model, she said that if a person brought back fifty syringes that they would be able to get sixty syringes in return. She stated that this promotes them returning their syringes. The maximum amount they could get is 100 syringes per a person.

Councilor Pierce asked what kinds of permits were needed for the program.

Ms. McGinley said that they had to fill out an application with the Department of Public Health Services, they had to register their site, her name, supplies and services that they would be offering, and they had to disclose that they will be doing disposal and that they contract with a medical disposal agency.

Mr. Edwards asked if the people who will be administering this are volunteers.

Ms. McGinley said that they are staff and volunteers.

Mr. Edwards asked what training that they are required to go through, or if they were registered with a department?

Ms. McGinley said that they are trained by the Harm Reduction Coalition and that they are encourage to continue with quarterly and annual trainings that are offered which go above and beyond safe handling of syringes, disposable polices, interaction and participant policies, information about treatment and recovery options. She said that the Care Coordinator will always be on site.

Councilor Grady Sexton asked if there has been any research into people coming from other communities to the site. She asked if there is any illegal activity that occurs on the sites such as the exchange of illegal substances.

Ms. McGinley said that there has been no research into that topic however in Manchester when the site moved to a new lot it was noted that people weren't staying at the exchange often. She said that from what she had witnessed these participants are making a step to wellness and trying to help themselves by coming to the exchange center.

Mr. Edwards asked where the line between the services offered is and health care? He also asked how an individual who is a continuous user, who comes and gets the needles but does not make any efforts to stop using narcotics, is managed. He asked at what point the program would step in?

Ms. McGinley said that the education that a Care Coordinator relays to the participants revolves around medical topics. She noted the teaching of wound care, and that some of the information that they give to participants is medical information. She said that they are the vessel of that information, and that all information is accurate.

In response to Mr. Edwards second question, she said that it is more difficult to answer. She said that there is no other reason that a participant would be accessing their services aside from them being a drug user. She noted that all information received from participants is confidential and that they would not be able to share a participant contact information, identifying information, and health information without their express consent. She said that they haven't gotten to the point of having participants sign releases because they are not transmitting the protected information without them asking for the program to provide that information to another entity. She said that the program would not be able to talk to law enforcement or other agencies about a participant that is not making efforts to recover. She said that in the CDC has studied the syringe service programs for ten years and has reported that 85% of people who access a syringe service program has moved on with a recovery or treatment program while accessing the syringe exchange. She said that the data does not account for the large population of participants that self-regulate their use. She said that she hopes that stronger studies will be released on self-tapering practices.

Mr. Carter asked what the police and fire department could expect for needs during the programs open hours.

Ms. McGinley asked Mr. Carter if he could clarify needs and asked if he was asking about the needs at the syringe exchange site.

Mr. Carter asked if the site needs the support or constant support of emergency services. He asked if they get called in if there is an issue.

Ms. McGinley said that if there was an issue with a participant that they would place a call to the police and let them know that there was something developing that could cause harm to others or property. She said that they have been lucky and they have not had that occur yet. She said that the program consistently needs help with disposal costs, and that volunteer's work on finding the correct types of buckets that will be donated to the program.

Councilor Erle Pierce asked what type of public outreach has been done and wanted to know who does that outreach.

Ms. McGinley said that they have approached that topic with caution. She said that they would like to offer the participants privacy and safety as they first access these services. She said that she hoped that there wasn't a big public response to where the exchange will be held. She said that they are not publicly advertising it for at least several weeks.

Chief Osgood asked what time of day the events will be held.

Ms. McGinley answered 5:30 p.m., to 7:30 p.m.

Chief Osgood asked how they advertise. He also wanted to know what kind of information can be shared publicly with the City of Concord and whether or not she was able to identify where the people who attend currently reside.

Ms. McGinley stated that they could share data points that are collected. She said that all of the data is de-identified. Each participant is given a unique id number so that they are able to track that individual's participation at syringe exchanges. She said that they don't gather zip code or where the participants are coming from.

Chief Osgood asked how it was determined whether or not the syringe exchange program is successful.

Ms. McGinley said that the first few days that the program is open is slow moving. She said that it takes several visits for individuals to feel safe and engage in the services. She said that if they don't have supplies left, a lot of disposal and follow up for the next weeks then they would deem that successful.

Mr. Edwards asked what success looks like in a year from now.

Ms. McGinley said that they look closer at five to ten years. She said that there is a housing crisis; treatment access in New Hampshire can be difficult. She said that harm reduction programs work to reduce the transmission of Hepatitis C, transmission of HIV and the fatality prevention in the form of overdoses. She said that the success within the next year will be looking at those numbers; if those numbers have diminished then she would say that the program is successful. She said that they keep a very close eye on fatalities and compile that data in quarterly reports. She said that she is in the process of looking at the last quarter. She noted that harm reduction works but that the definition of success will vary from person to person.

Deputy Chief Thomas asked if the program provides Narcan.

Ms. McGinley answered that they do provide Narcan to participants.

Deputy Chief Thomas asked if they give out “work kits” so that users can cook the drugs.

Ms. McGinley answered that safe injection kits accompany the syringes. She said that a “cooker” is provided because Hepatitis C is transmitted with used cookers; cottons that filter the substances also can transmit Hepatitis C, and two tourniquets and wound care kits are distributed with the kits.

Deputy Chief Thomas asked how many of those kits are given out, per needles disbursed.

Ms. McGinley said that they hope to only distribute one to a participant regardless of the number of needles that they get. She said occasionally they will distribute more. She noted that those items are costly.

Councilor Grady Sexton said asked if there was a way to follow up with Ms. McGinley and asked her to provide contact information.

Ms. McGinley provided cards to the board and also provided a sampling of participant cards for the board to review.

Anna Thomas joined the discussion. Ms. Thomas is the Public Health Director for the City of Manchester and was invited to the meeting to discuss the Harm Reduction program in Manchester.

Amanda Grady Sexton said that they invited Ms. Thomas to the meeting so that she could talk about the impact that a syringe exchange program has had on the City of Manchester.

Ms. Thomas said that she has been with the City of Manchester for 27 years. Ms. Thomas noted that every community is different so what may be essential for Manchester may not be essential for Concord. She feels it is important that the City define how they want this service to be conducted. She said that when the service first started in Manchester there were many complaints about the service. She said that the way that the legislation is written in New Hampshire does not allow the City to have any oversight of what the programs do. She noted that Manchester feels strongly that “harm reduction” should prevent harm for the individual but not at the expense of the community. She also noted that harm reduction can be achieved without needle exchange; she said that syringe services are a component of harm reduction but they are not synonymous. Ms. Thomas explained that she felt that harm reduction services should be connected to a medical model. She said that services were provided in the open in a prominent public park in the City of Manchester and that she doesn’t feel that this type of service should be provided in a public park. She felt that they should be discreet, should be respectful to the clients and the patients who are being served. She said ideally, they should be wrapping around other services when interacting with these clients. She said that there are models where there are multiple partners working together. She said that the model in the City has evolved to that, and that they feel good about this model now. She noted that there are multiple partners that are all on site at the time the needle exchange services are being provided. She said that there are different models of these services. She said that there is a backpack model where they go to homeless camps and offer their services there, fixed site model- which is the plan for Concord, and there is a mailing model- where people can get the syringes mailed to them, she said that she is not a fan of that. She said that the best model looks at how it will best serve the individual. In Manchester, there were a lot of businesses complaining. She said that she is in favor of syringe services; it is an evidenced based service. She said that overall it is a balance of trying to find a place that works best for everyone, especially the clients. The goal of syringe services is to prevent the spread of infectious disease. She said that the services do not need to be limited to that and that they can be

grounds for other services. She also spoke about the “safe stations” that are offered at the fire departments, as well as the Manchester Police Department now has a mental health unit that works with these individuals. She also noted that the City now has a steering committee with the goal of working together and finding ways to make the programs work and be effective in the City of Manchester.

Ms. Thomas said she believes that legislation should be looked at all of the time. She recently presented to the Governor’s Commission on Alcohol and other drugs regarding strategies. She recommended that legislation should be looked at all times. She noted that in some communities across the country, certifications for these programs are mandated. She said that the training should be based on public health models and evidenced based practices. She noted that now that DHHS is funding these programs she sees more of that happening. She further recommended that these programs be evaluated regularly and noted not one size fits all. She also noted that she believes that cooperative agreements should be in place with multiple departments. She said that she also believes there should be sustainability plans.

Ms. Thomas said that a program such as this is good for the community when it is done well, comprehensively and a consensus is formed about how it is going to play out in the community. She said that she hopes that these programs get stronger in the future.

Councilor Rice-Hawkins asked how the Harm Reduction Coalition came to fruition, and if they have a formal written plan that could be reviewed.

Ms. Thomas said that there is a foundation document and the first official meeting of this committee was going to be held on the Thursday July 1, 2021. She said that the goal was to figure out how to build to a model that everyone could agree to, promote and fuel in order to make the program successful.

Deputy Chief Thomas will provide the document to the PSAB.

Chief Osgood will provide the PowerPoint submitted by Ms. McGinley to the PSAB.

Mr. Carter asked Ms. Thomas about the oversight of this group by the City of Manchester and he wanted to know who keeps track of it all.

Ms. Thomas answered that the way that the law is written is that they have to register to NHDHHS and report out data to the NHDHHS. She said that there is no licensure, no certification; they just have to register and report out the data. She also noted that she receives some of that data in a quarterly report. She notes that if something is reported to the City that she calls the State and relays it to them.

Mr. Carter followed up and asked if there were any concerns or restrictions with zoning or those types of issues in the City of Manchester. He asked if they can set up where they want or if they need permits.

Ms. Thomas said that there is no permit for them. They are a non-profit that comes into the community and they can operate wherever they want as long as it is not in a drug free school zone, unless they are granted permission from the school board.

Councilor Grady Sexton asked Ms. Thomas if a medical based model would be something similar to a site co-located, such as on a hospital campus.

Ms. Thomas said that they have a program called Doorways that is located at Catholic Medical Center. She said that her department has spoken to the area hospital in Manchester about potentially allowing the Harm Reduction/Syringe Exchange program to operate on hospital grounds and there is resistance. She feels that lack of education of the provider, politics, and the controversy that surrounds these programs are factors that contribute to the resistance of housing these programs. She feels that by having the programs at a hospital or mental health provider can infuse other holistic care.

Ms. Carol Hargrove asked who funds the programs.

Ms. Thomas said that some of them are funded through federal dollars coming in the NHDHHS, and that some of it is State dollars or private foundation dollars. She said unfortunately they are not as well funded as they could and should be.

### **Homeless Task Force Discussion**

Councilor Byron Champlin and Ellen Groh joined the discussion.

Councilor Grady- Sexton gave an overview of the past discussions that the PSAB has had regarding homelessness and crimes that may occur as a result of the homeless programs. She said that she felt it might be helpful to have members of the Task Force join the meeting to address whether there was a need for members of the PSAB to join into those conversations and to discuss other information that may be valuable for the PSAB to hear.

Councilor Byron Champlin shared some background on the City's plan to end homelessness. He said that the City created a task force to look at developing a plan for the city to address homelessness. The plan was adopted by City Council and a Steering Committee was created to oversee the aspects of that plan. He said that the Concord Coalition to End Homelessness was designated as an agency to act as a facilitator with the Steering Committee. He said that some of the data in the plan (adopted in 2013/2014) is outdated. He noted that during that time a one-bedroom apartment would rent at about \$800.00 a month and that currently a one-bedroom apartment would rent for about \$1,200.00 to \$1,300.00 a month. He said that he has heard that some apartment owners are being offered more than the asking rent by prospective tenants who want to get into a specific apartment. This presents a challenge, as part of the homeless problem in the city is due to a lack of housing. He said that the vacancy rate in Concord is currently less than 1%. He said that when an encampment is broken up, essentially the people move to another encampment. He said that on occasion one or more people may leave the community but the encampments generally move around.

Ms. Groh said that this is a complex issue and housing is key. She noted that some people do get housed when an encampment is broken up but that most people moved on to someplace else because there was not any housing to be offered. She said that the majority of the people in encampments in Concord have been homeless for a long time. She said that it takes a lot of services to get housed when they are in that state as the long-term homeless population are often suffering from either diagnosed or undiagnosed mental health issues, substance use disorder, physical disabilities and their only income is only disability income so they cannot afford anything without rental assistance.

Ms. Groh stated that she is guessing that there are about 70 people that are in each encampment and that there are about six main encampments throughout the city, plus multiple smaller encampments throughout the city. She noted that the old drive in theater is the largest in the City, which has about thirty people.

Councilor Champlin said that at the last meeting there were two strategies that were endorsed that the Concord Coalition to prevent homelessness was engaging in. He said one was to support efforts to create a by name census of the chronically homeless; those who have been homeless for a year or more. He said that this allows tracking of individual homeless and try to develop a plan to get them into some sort of supported housing. The second aspect of the plan was to attempt to move to foster more housing opportunities that have options for those exiting homelessness such as working with the Concord Coalition against homelessness. He said fundamentally the best way to address those concerns it to chip away at the homeless population.

Ms. Groh added that there are four communities across the United States that have ended chronic homelessness. She said that they did with the assistance of an organization called Community Solutions. She noted that the director of that agency lives in Concord, and she has been helping to guide the Coalition. She said that it is a process to end homelessness, and that it takes looking at the chronically homeless on an individual basis. She said that an individual who has supported the cause for a couple years has offered to fund a position that would be focused on that.

She said that the light at the end of the tunnel is finding a home for each of these people. She said that they believe there are about 150 individuals that are chronically homeless. She added that they don't know what the exact number is.

Mr. Edwards asked what the Coalition had been doing for the last 15 years.

Ms. Groh answered that before she had joined the Coalition it had a Resource Center. She said that since she has been with the Coalition they have added to the Center so that people are now able to shower and obtain services other resources right at the center. She said that they have started a permanent supported housing program that now houses 15 people who were previously chronically homeless. She also noted that they just built the Green Street apartments which in turn got four more chronically homeless persons into housing.

She also noted that their newest initiative that the Coalition has taken on is to turn the Church Building into housing. She said that they are envisioning thirty units of affordable housing, and a portion of those units would be for people coming from homelessness. She said that they want to partner with those that are doing larger developments so that they are able to get a subset of apartments for people coming from homelessness. She said that Dakota Partners which is doing a development on Langdon Road has agreed to partner with the Coalition and they will set aside five units for people coming from homelessness.

Councilor Champlin mentioned that the Coalition took on the responsibility for creating a Winter Emergency Shelter when First and South Church could no longer house the shelters. He said that the Coalition raised funds so that they could build a permanent emergency winter shelter on North State Street.

Councilor Erle Pierce asked if there was a way to measure the Community costs of Homelessness. He asked how what they've done has affected the Community costs, EMS responses, and other costs associated with homelessness.

Ms. Groh said that there are National statistics and studies regarding that. She said that those costs go down considerably when someone is permanently housed. She noted that the cost to do permanent housing is less than having them living on the streets and utilizing all those services. She said that to do a specific analysis of that in Concord would be very time consuming and that they don't have the resources to do that currently.

Councilor Rice Hawkins asked Ms. Groh if she could walk the board through what happens when someone is facing losing their housing right now.

Ms. Groh said that there are different agencies that handle homelessness and those that are housing insecure. She stated that those people who are facing homelessness should contact the Community Action Program (CAP). She said that they have short term funds that can help people through immediate crisis.

Ms. Groh stated that addressing an individual's specific situation is client driven. She said that a Case Manager will meet with the clients and attempt to help them. She did note that if a client doesn't do the steps necessary then the Coalition cannot go looking for them. She also noted that what they need is not always available.

Councilor Rice-Hawkins stated that she was aware of a family that had obtained housing assistance outside of the City however; they worked in Concord and obtained child care in Concord. She asked what happens in a situation like that.

Ms. Groh said that there are situations like that. She said that if someone calls the City Welfare Department and says that they need assistance or shelter; if there is a shelter available elsewhere then they may be placed there. She said that she believes that the CAP agency may do something similar to that as well.

Mr. Carter asked if there is a specific group or agency that coordinates all the efforts of all the agencies so that they can work together.

Ms. Groh said that there is not one agency that coordinates with all of the groups but all of the groups/agencies talk with each other in order to find the best solutions.

Mr. Carter said that he thinks it may be best to have some type of central coordination.

Ms. Groh said that although she is open to the idea, she doesn't think it is necessary. She noted that each agency has their own missions and that they focus on those missions.

Mr. Edwards re-addressed Councilor Pierce's question regarding the impact to the City Services; police, fire, ems, etc. Mr. Edwards asked Ms. Groh if she has that data.

Ms. Groh answered that she does not.

Mr. Edwards asked if it would be helpful to know that data.

Councilor Pierce said that in 2014 there was a study done. He said he would like to see an update.

Ms. Groh said that she believes that data would have to come from public safety. She said that she does not believe that the Coalition would have that data.

Councilor Champlin added that in New Hampshire the statistics are not easy to obtain and that they cost money. He noted that they would have to employ someone to collect and process that data in order to report on it. He asked if that data is of value, and what decisions could be made based on that data. He noted that the Steering Committee would like to work closely with the Public Safety Advisory Board in order to address the public safety issues in whatever way that they can.

Mr. Edwards asked if the homeless issue is growing.

Councilor Grady Sexton answered that it does seem to be growing from the perspective of the police department.

Ms. Groh said that it is growing. She said that they have a goal to have an accurate understanding of who is homeless in Concord. She noted that it is a complicated issue.

Ms. Hargrove asked if homeless individuals come to Concord from smaller towns because of the services that Concord is able to offer.

Ms. Groh answered that people do come from smaller towns. The Coalition does not have a residence requirement. It was noted that the law states that if someone comes to the City and requests these services then the City needs to help them.

Councilor Rice-Hawkins addressed garbage issues among the homeless and asked if the Concord Coalition has anything to add to previous discussions regarding the garbage issue.

Ms. Groh stated that she believed that the population was told that they could not use the City's dumpsters. She referred the question to Julie Green who was not present at the meeting.

Councilor Rice-Hawkins asked if the Coalition had discussions about having an encampment that has services that an individual could go to.

Ms. Groh said that although it sounds like a simple solution it consists of many challenges and a big financial need. She noted some of the challenges such as, where would it be, how would it be funded, etc. She noted that she does not feel that it is a good solution. She said it would help but could be very expensive.

Councilor Rice-Hawkins asked what the recommendation is to help house the population since there is not a lot of affordable housing in the city.

Mr. Edwards asked Councilor Rice-Hawkins if she had an idea of where a potential city homeless encampment could be located.

Councilor Rice-Hawkins said that she did not. She discussed some of the previous homeless camps that have been around the city and have been removed.

Councilor Grady Sexton noted that there were many residents in those areas who expressed safety concerns.

Councilor Grady Sexton recommended devoting an hour to the LEACT report during the next meeting. She noted that the LEACT is specific to the State of New Hampshire and that she feels that it is important to discuss this report.

Chief Osgood announced that the Police Department will be sponsoring the “National Night Out “event at Rollins Park on August 3, 2021 from 5:00 p.m., to 8:00 p.m.

The next meeting will be July 26, 2021 at 3:00 p.m.

The meeting was adjourned at 5:05 p.m.