

Quarterly Survey SSSP (PS22-2208)

Please complete the survey below. Please refer to the Reference Guide at this link.

[If the above link does not work, please copy and paste the following into your browser:
<https://sites.uw.edu/sharpta/files/2023/07/Strengthening-Syringe-Service-Programs-Evaluation-Reference-Guide.pdf>]

If you have any further questions or comments about this evaluation, please contact us at

DUH-grants@nastad.org Thank you!

Did your harm reduction program stop providing all services any time between [event-label] (i.e., your SSP could not provide services when you had expected to be open)?

☐ Yes
☐ No
☐ Don't know
☐ My program prefers not to answer this question.

Approximately how many hours was your SSP unexpectedly closed between [event-label]?

☐ Number of hours: ____
☐ Don't know
☐ My program prefers not to answer this question.

Has any of the following information changed for your harm reduction program between [event-label]?(Please select all that apply.)

☐ Service delivery model (e.g., fixed-site, mail-based, vending machine, etc.)
☐ Number of fixed sites/brick-and-mortar locations
☐ Number of harm reduction program vehicles
☐ Number of harm reduction vending machines
☐ Supplies offered in harm reduction vending machines
☐ Engagement and/or outreach to specific demographic groups (e.g., Ladies' Nights or outreach in youth centers)
☐ Service area (i.e., the tribal nations, states/territories, and/or counties to which you offer services)
☐ Syringe provision model (e.g., 1:1, need-based, etc.)
☐ Number of paid full-time employees
☐ Number of paid part-time employees
☐ Operating hours (number of hours per week)
☐ Services offered at your harm reduction program (by your SSP or a partner) (e.g., HCV testing, drug checking, MOUD, etc.)
☐ None of the above have changed in the last quarter. Don't know
☐ My program prefers not to answer this question.

What is your SSP service delivery model?(Please select all that apply.)

☐ Brick and mortar fixed site (including drop-in centers)
☐ Backpack/outreach or foot/pedestrian-based
☐ Pop-up sites (tables, tent, etc.)
☐ Delivery to regular locations (e.g., established route)
☐ Delivery to participant requested locations (e.g., home delivery)
☐ Mail-based distribution
☐ Vending machine
☐
☐
☐

Other (please describe) _____ Don't know

My program prefers not to answer this question.

As of [quarterly reporting period] how many brick-and-mortar locations did your harm reduction program operate?

- ☒ Don't know
- ☐ My program prefers not to answer this question.
- Number of locations: _____

As of [quarterly reporting period], how many outreach and/or delivery vehicles did your harm reduction program operate?

☐ Number of vehicles: __
☐ Don't know
☐ My program prefers not to answer this question.

As of [quarterly reporting period], how many harm reduction vending machines did your program operate?

☐ Number of vending machines: __
☐ machines did your program
☐ Don't know
☐ My program prefers not to answer this question.

As of [quarterly reporting period], what supplies did your harm reduction program offer in vending machines? (Please select all that apply.)

☐ Syringes
☐ Intramuscular naloxone
☐ kits Nasal naloxone kits
☐ Condoms and/or safer
☐ sex kits Other (please
☐ specify): __ Don't know
☐ My program prefers not to answer this question.

As of [quarterly reporting period], did your harm reduction program conduct activities designed to engage any of the following demographic groups? (Please select all that apply. If your program serves participants in any of these categories but does not conduct activities specifically designed to engage them, please do not mark the box for that category.)

☐ Lesbian, gay, bisexual, or queer persons
☐ Transgender, genderqueer, or non-binary persons
☐ Women
☐ American Indian or Alaska Native persons
☐ Asian persons
☐ Black or African-American persons
☐ Hispanic or Latinx persons
☐ Native Hawaiian or Other Pacific Islander persons
☐ Persons aged < 20 years
☐ Persons aged 20 to 29 years
☐ Persons aged 30 to 39 years
☐ Persons aged 40 to 59 years
☐ Persons aged < or = 60 years
☐ Persons who trade sex
☐ Other (please describe) _
☐ No, my program did not conduct activities designed to engage any specific demographic group(s).
☐ Don't know
☐ My program prefers not to answer this question.

Between [event-label], which of the following service area changes occurred in your program? (Please select all that apply.)

☐ Mail-based service area in TRIBAL NATIONS changed. Mail-based service area in STATES/TERRITORIES changed.
☐ In-person/on-site service area (including vending machines) in TRIBAL NATIONS changed.
☐ In-person/on-site service area (including vending machines) in STATES/TERRITORIES changed.
☐ In-person/on-site service area (including vending machines) in COUNTIES changed.
☐ Don't know
☐ My program prefers not to answer this question.

Between [event-label], in which tribal nation(s) does your program offer MAIL-BASED services? (Note: Your

☐ Tribal nations: __
☐ None
☐
☐

answer from the baseline survey will pre-populate here.)
question.

Don't know
My program prefers not to answer this

Between [event-label], in which state(s) or territory(/-ies) did your harm reduction program begin MAIL-BASED services? (Please select all that apply.) (

- ☐ All US states and territories
- ☐ Alabama
- ☐ American Samoa
- ☐ Alaska
- ☐ Arizona
- ☐ Arkansas
- ☐ California
- ☐ Colorado
- ☐ Connecticut
- ☐ Delaware
- ☐ District of Columbia (DC)
- ☐ Florida
- ☐ Georgia
- ☐ Guam
- ☐ Hawaii
- ☐ Idaho
- ☐ Illinois
- ☐ Indiana
- ☐ Iowa
- ☐ Kansas
- ☐ Kentucky
- ☐ Louisiana
- ☐ Maine
- ☐ Maryland
- ☐ Massachusetts
- ☐ Michigan
- ☐ Minnesota
- ☐ Mississippi
- ☐ Missouri
- ☐ Montana
- ☐ Nebraska
- ☐ Nevada
- ☐ New Hampshire
- ☐ New Jersey
- ☐ New Mexico
- ☐ New York
- ☐ North Carolina
- ☐ North Dakota
- ☐ Northern Mariana Islands
- ☐ Ohio
- ☐ Oklahoma
- ☐ Oregon
- ☐ Pennsylvania
- ☐ Puerto Rico
- ☐ Rhode Island
- ☐ South Carolina
- ☐ South Dakota
- ☐ Tennessee
- ☐ Texas
- ☐ United States Virgin Islands
- ☐ Utah
- ☐ Vermont
- ☐ Virginia
- ☐ Washington
- ☐ West Virginia
- ☐ Wisconsin
- ☐ Wyoming
- ☐ Don't know
- ☐ My program prefers not to answer this

question.

Between [event-label], in which tribal nation(s) does your program offer IN-PERSON or ON-SITE? services (including vending machines)? (Note: Your answer from the baseline survey will pre-populate here.)

☐ Tribal nation(s): ____
☐ None
☐ Don't know
☐ My program prefers not to answer this question.

Between [event-label], in which state(s) or territory(/-ies) did your harm reduction program offer IN-PERSON or ON-SITE services (including vending machines)? (Please select all that apply.) (

- ☐ Alabama
- ☐ American Samoa
- ☐ Alaska
- ☐ Arizona
- ☐ Arkansas
- ☐ California
- ☐ Colorado
- ☐ Connecticut
- ☐ Delaware
- ☐ District of Columbia (DC)
- ☐ Florida
- ☐ Georgia
- ☐ Guam
- ☐ Hawaii
- ☐ Idaho
- ☐ Illinois
- ☐ Indiana
- ☐ Iowa
- ☐ Kansas
- ☐ Kentucky
- ☐ Louisiana
- ☐ Maine
- ☐ Maryland
- ☐ Massachusetts
- ☐ Michigan
- ☐ Minnesota
- ☐ Mississippi
- ☐ Missouri
- ☐ Montana
- ☐ Nebraska
- ☐ Nevada
- ☐ New Hampshire
- ☐ New Jersey
- ☐ New Mexico
- ☐ New York
- ☐ North Carolina
- ☐ North Dakota
- ☐ Northern Mariana Islands
- ☐ Ohio
- ☐ Oklahoma
- ☐ Oregon
- ☐ Pennsylvania
- ☐ Puerto Rico
- ☐ Rhode Island
- ☐ South Carolina
- ☐ South Dakota
- ☐ Tennessee
- ☐ Texas
- ☐ United States Virgin Islands
- ☐ Utah
- ☐ Vermont
- ☐ Virginia
- ☐ Washington
- ☐ West Virginia
- ☐ Wisconsin
- ☐ Wyoming
- ☐ Don't know
- ☐ My program prefers not to answer this

question.

Between [event_label], in which Alaska borough(s) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All Alaskan
- ☐ Boroughs
- ☐ Aleutians East
- ☐ Aleutians West
- ☐ Anchorage
- ☐ Bethel
- ☐ Bristol
- ☐ Bay
- ☐ Denali
- ☐ Dillingham
- ☐ Fairbanks North
- ☐ Star Haines
- ☐ Juneau
- ☐ Kenai Peninsula
- ☐ Ketchikan
- ☐ Gateway Kodiak
- ☐ Island
- ☐ Lake and Peninsula
- ☐ Matanuska-
- ☐ Susitna Nome
- ☐ North Slope
- ☐ Northwest Arctic
- ☐ Prince of Wales-Outer
- ☐ Ketchikan Sitka
- ☐ Skagway-Hoonah-
- ☐ Angoon Southeast
- ☐ Fairbanks Valdez-
- ☐ Cordova
- ☐ Wade Hampton
- ☐ Wrangell-
- ☐ Petersburg
- ☐ Yakutat
- ☐ Yukon-
- ☐ Koyukuk
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Between [event-label], in which Alabama county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

All Alabama
Counties Autauga
Baldwin
Barbour
Bibb
Blount
Bullock
Butler
Calhoun
Chambe
rs
Cherokee
e
Chilton
Chocta
w
Clarke
Clay
Cleburn
e Coffee
Colbert
Conecu
h Coosa
Covingt
on
Crensha
w
Cullman
Dale
Dallas
De Kalb
Elmore
Escamb
ia
Etowah
Fayette
Frankli
n
Geneva
Greene
Hale
Henry
Housto
n
Jackson
Jefferso
n
Lamar
Lauderdal
e
Lawrence
Lee
Limestone
Lowndes
Macon
Madison
Marengo
Marion
Marshall
Mobile
Monroe
Montgom
ery
Morgan
Perry
Pickens
Pike
Randol
ph

☐ Tallapoosa
☐ Tuscaloosa
☐ Walker
☐ Washington
☐ Wilcox
☐ Winston
☐ Don't
☐ know



☐ My program prefers not to answer this question.

Between [event_label], in which Arkansas county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

All Arkansas Counties
Arkansas
Ashley
Baxter
Benton
Boone
Bradley
Calhou
n
Carroll
Chicot
Clark
Clay
Cleburn
e
Clevela
nd
Columb
ia
Conway
Craighea
d
Crawford
Crittende
n Cross
Dallas
Desha
Drew
Faulkner
Franklin
Fulton
Garland
Grant
Greene
Hempste
ad Hot
Spring
Howard
Independence
Izard
Jackson
Jefferson
Johnson
Lafayett
e
Lawrenc
e Lee
Lincoln
Little
River
Logan
Lonoke
Madison
Marion
Miller
Mississip
pi
Monroe
Montgom
ery
Nevada
Newton
Ouachita
Perry
Phillips
Pike
Poinset
t Polk

☐ Scott
☐ Searcy
☐ Sebastian
☐ n Sevier
☐ Sharp
☐ St.
☐ Francis

[illegible]

- ☐ Stone
- ☐ Union
- ☐ Van
- ☐ Buren
- ☐ Washingt
- ☐ on White
- ☐ Woodruff
- ☐ Yell
- ☐ Don't know
- My program prefers not to answer this question.

Between [event-label], in which American Samoa county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All American Samoa
- ☐ Counties Eastern
- ☐ Manu'a
- ☐ Rose
- ☐ Island
- ☐ Swains
- ☐ Island
- ☐ Western
- Don't know
- My program prefers not to answer this question.

Between [event-label], in which Arizona county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All Arizona Counties
- ☐ Apache
- ☐ Cochis
- ☐ e
- ☐ Coconin
- ☐ o Gila
- ☐ Graha
- ☐ m
- ☐ Greenl
- ☐ ee La
- ☐ Paz
- ☐ Marico
- ☐ pa
- ☐ Mohav
- ☐ e
- ☐ Navajo
- ☐ Pima
- ☐ Pinal
- Santa
- Cruz
- Yavapai
- Yuma
- Don't know
- My program prefers not to answer this question.

Between [event-label], in which California county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All California Counties
- ☐ Alameda
- ☐ Alpine
- ☐ Amador
- ☐ Butte
- ☐ Calaveras
- ☐ Colusa
- ☐ Contra
- ☐ Costa Del
- ☐ Norte
- ☐ El Dorado
- ☐ Fresno
- ☐ Glenn
- ☐ Humboldt
- ☐ Imperial
- ☐ Inyo
- ☐ Kern
- ☐ Kings
- ☐ Lake
- ☐ Lassen
- ☐ Los
- ☐ Angeles
- ☐ Madera
- ☐ Marin
- ☐ Mariposa
- ☐ Mendocin
- ☐ o Merced
- ☐ Modoc
- ☐ Mono
- ☐ Monterey
- ☐ Napa
- ☐ Nevada
- ☐ Orange
- ☐ Placer
- ☐ Plumas
- ☐ Riverside
- ☐ Sacrame
- ☐ nto San
- ☐ Benito
- ☐ San
- ☐ Bernardino
- ☐ San Diego
- ☐ San
- ☐ Francisco
- ☐ San Joaquin
- ☐ San Luis
- ☐ Obispo San
- ☐ Mateo
- ☐ Santa
- ☐ Barbara
- ☐ Santa Clara
- ☐ Santa Cruz
- ☐ Shasta
- ☐ Sierra
- ☐ Siskiyou
- ☐ Solano
- ☐ Sonoma
- ☐ Stanisla
- ☐ us Sutter
- ☐ Tehama
- ☐ Trinity
- ☐ Tulare
- ☐ Tuolumn
- ☐ e
- ☐ Ventura
- ☐ Yolo
- ☐ Yuba

Don't know
My program prefers not to answer this question.

Between [event-label], in which Colorado county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All Colorado Counties
- ☐ Adams
- ☐ Alamos
- ☐ a
- ☐ Arapaho
- ☐ e
- ☐ Archulet
- ☐ a Baca
- ☐ Bent
- ☐ Boulder
- ☐ Chaffee
- ☐ Cheyen
- ☐ ne
- ☐ Clear
- ☐ Creek
- ☐ Conejos
- ☐ Costilla
- ☐ Crowley
- ☐ Custer
- ☐ Delta
- ☐ Denver
- ☐ Dolores
- ☐ Douglas
- ☐ Eagle
- ☐ El Paso
- ☐ Elbert
- ☐ Fremon
- ☐ t
- ☐ Garfield
- ☐ Gilpin
- ☐ Grand
- ☐ Gunnis
- ☐ on
- ☐ Hinsdal
- ☐ e
- ☐ Huerfa
- ☐ no
- ☐ Jackson
- ☐ Jefferso
- ☐ n Kiowa
- ☐ Kit
- ☐ Carson
- ☐ La Plata
- ☐ Lake
- ☐ Larimer
- ☐ Las
- ☐ Animas
- ☐ Lincoln
- ☐ Logan
- ☐ Mesa
- ☐ Mineral
- ☐ Moffat
- ☐ Montezu
- ☐ ma
- ☐ Montrose
- ☐ Morgan
- ☐ Otero
- ☐ Ouray
- ☐ Park
- ☐ Phillips
- ☐ Pitkin
- ☐ Prowers
- ☐ Pueblo
- ☐ Rio
- ☐ Blanco
- ☐ Rio
- ☐ Grande

Routt
Saguache
San Juan
San
Miguel
Sedgwick
Summit
Teller
Washingt
on Weld
Yuma
Don't
know
My program prefers not to answer this
question.

Between [event-label], in which Connecticut county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All Connecticut Counties
- ☐ Fairfield
- ☐ Hartford
- ☐ Litchfield
- ☐ Middlesex
- ☐ New Haven
- ☐ New London
- ☐ Tolland
- ☐ Windham
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Between [event-label], in which Delaware county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All Delaware Counties
- ☐ Kent
- ☐ New Castle
- ☐ Sussex
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Between [event-label], in which Florida county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

All Florida Counties

Alachua

Baker

Bay

Bradford

d

Brevard

d

Broward

d

Calhoun

n

Charlotte

City of

Clay

Collier

Columbia

Dade

De Soto

Dixie

Duval

Escambia

a

Flagler

Franklin

Gadsden

n

Gilchrist

Glades

Gulf

Hamilton

n

Hardee

Hendry

Hernando

do

Highland

ds

Hillsborough

gh

Holmes

Indian

River

Jackson

Jefferson

Lafayette

Lake

Lee

Leon

Levy

Liberty

Madison

n

Manatee

ee

Marion

Martin

Monroe

e

Nassau

u

Okaloosa

Okeechobee

ee

Orange

Osceola

Palm

Beach

Pasco
Pinellas
Polk
Putnam
Santa
Rosa
Sarasota
Seminole
St. Johns
St. Lucie
07/30/2023
10:02pm

Sumter
Suwanne
☐ e Taylor
☐ Union
☐ Volusia
☐ Wakulla
☐ Walton
☐ Washingt
☐ on
☐ Don't
☐ know

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☐ My program prefers not to answer this question.

Between [event-label], in which Georgia county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

All Georgia Counties

Appling

Atkinso

n

Bacon

Baker

Baldwin

Banks

Barrow

Bartow

Ben Hill

Berrien

Bibb

Bleckle

y

Brantle

y

Brooks

Bryan

Bulloch

Burke

Butts

Calhou

n

Camde

n

Candler

Carroll

Catoos

a

Charlto

n

Chatha

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Chattahoochee

Chattoo

ga

Cheroke

e Clarke

Clay

Clayton

Clinch

Cobb

Coffee

Colquitt

Columbi

a

Cook

Coweta

Crawfor

d

Crisp

Dade

Dawson

De Kalb

Decatur

Dodge

Dooly

Dougher

ty

Douglas

Early

Echols

Effingha

m

Elbert

Emanuel

Evans

Fannin

Fayette

Floyd

Forsyth

Franklin
Fulton
Gilmer
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k
Glynn

07/30/2023
10:02pm

Gordon
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☐ Haralso
☐ n
☐ Harris
☐ Hart
☐ Heard
☐ Henry
☐ Housto
☐ n Irwin
☐ Jackson
☐ Jasper
☐ Jeff
☐ Davis
☐ Jefferso
☐ n
☐ Jenkins
☐ Johnso
☐ n Jones
☐ Lamar
☐ Lanier
☐ Lauren
☐ s Lee
☐ Liberty
☐ Lincoln
☐ Long
☐ Lownde
☐ s
☐ Lumpki
☐ n
☐ Macon
☐ Madiso
☐ n
☐ Marion
☐ McDuffi
☐ e
☐ McIntos
☐ h
☐ Meriwether
☐ Miller
☐ Mitchell
☐ Monroe
☐ Montgom
☐ ery
☐ Morgan
☐ Murray
☐ Muscogee
☐ Newton
☐ Oconee
☐ Oglethorp
☐ e Paulding
☐ Peach
☐ Pickens
☐ Pierce
☐ Pike
☐ Polk
☐ Pulaski
☐ Putna
☐ m
☐ Quitm
☐ an
☐ Rabun
☐ Randolp
☐ h
☐ Richmo
☐ nd
☐ Rockdal
☐ e
☐ Schley
☐ Screven

Seminol
e
Spaldin
g
Stephen
s
Stewart
Sumter
Talbot
Taliaferr
o
Tattnall
Taylor
Telfair
Terrell
Thomas
Tift
Toombs
Towns

- ☐ Troup
- ☐ Turner
- ☐ Twiggs
- ☐ Union
- ☐ Upson
- ☐ Walker
- ☐ Walton
- ☐ Ware
- ☐ Warren
- ☐ Washingt
- ☐ on Wayne
- ☐ Webster
- ☐ Wheeler
- ☐ White
- ☐ Whitfield
- ☐ Wilcox
- ☐ Wilkes
- ☐ Wilkinson
- ☐ Worth
- ☐ Don't
- ☐ know

My program prefers not to answer this question.

Between [event-label], in which Hawaii county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All Hawaii
- ☐ Counties Hawaii
- ☐ Honolulu
- ☐ u
- ☐ Kalawa
- ☐ o Kauai
- ☐ Maui
- ☐ Don't know

My program prefers not to answer this question.

Between [event-label], in which Iowa county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

All Iowa Counties

Adair

Adams

Allamakee

e

Appanoose

e

Audubon

Benton

Black

Hawk

Boone

Bremer

Buchanan

Buena

Vista

Butler

Calhoun

Carroll

Cass

Cedar

Cerro Gordo

Cherokee

Chickasaw

Clarke

Clay

Clayton

Clinton

Crawford

Dallas

Davis

Decatur

Delaware

Des

Moines

Dickinson

Dubuque

Emmet

Fayette

Floyd

Franklin

Fremont

Greene

Grundy

Guthrie

Hamilton

Hancock

Hardin

Harrison

Henry

Howard

Humboldt

Ida

Iowa

Jackson

Jasper

Jefferson

Johnson

Jones

Keokuk

Kossuth

Lee

Linn

Louisa

Lucas

Lyon

Madison

n

Mills
Mitchell
Monona

☐ Monroe

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- ☐ Montgom
- ☐ ery
- ☐ Muscatine
- ☐ O'Brien
- ☐ Osceola
- ☐ Page
- ☐ Palo Alto
- ☐ Plymouth
- ☐ Pocahontas
- ☐ Polk
- ☐ Pottawatta
- ☐ mie
- ☐ Poweshiek
- ☐ Ringgold
- ☐ Sac
- ☐ Scott
- ☐ Shel
- ☐ by
- ☐ Sioux
- ☐ Story
- ☐ Tama
- ☐ Taylo
- ☐ r
- ☐ Unio
- ☐ n
- ☐ Van
- ☐ Buren
- ☐ Wapello
- ☐ Warren
- ☐ Washingt
- ☐ on
- ☐ Wayne
- ☐ Webster

Winneba
go
Winneshi
ek

Woodbur
y Worth
Wright

Don't
know

My program prefers not to answer this
question.

Between [event-label], in which Idaho county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All Idaho
- ☐ Counties Ada
- ☐ Adams
- ☐ Bannock
- ☐ Bear
- ☐ Lake
- ☐ Benewa
- ☐ h
- ☐ Bingham
- ☐ Blaine
- ☐ Boise
- ☐ Bonner
- ☐ Bonnevil
- ☐ le
- ☐ Boundar
- ☐ y Butte
- ☐ Camas
- ☐ Canyon
- ☐ Caribou
- ☐ Cassia
- ☐ Clark
- ☐ Clearwat
- ☐ er Custer
- ☐ Elmore
- ☐ Franklin
- ☐ Fremont
- ☐ Gem
- ☐ Gooding
- ☐ Idaho
- ☐ Jefferson
- ☐ Jerome
- ☐ Kootenai
- ☐ Latah
- ☐ Lemhi
- ☐ Lewis
- ☐ Lincoln
- ☐ Madison
- ☐ Minidoka
- ☐ Nez
- ☐ Perce
- ☐ Oneida
- ☐ Owyhee
- ☐ Payette
- ☐ Power
- ☐ Shoshon
- ☐ e Teton
- ☐ Twin
- Falls
- Valley
- Washington
- Don't know
- My program prefers not to answer this question.

Between [event-label], in which Illinois county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

All Illinois
Counties
Adams
Alexande
r Bond
Boone
Brown
Bureau
Calhoun
Carroll
Cass
Champai
gn
Christian
Clark
Clay
Clinton
Coles
Cook
Crawfor
d
Cumberla
nd De
Witt
DeKalb
Douglas
DuPage
Edgar
Edwards
Effingha
m
Fayette
Ford
Franklin
Fulton
Gallatin
Greene
Grundy
Hamilton
Hancock
Hardin
Henderso
n Henry
Iroquois
Jackson
Jasper
Jefferson
Jersey
Jo Daviess
Johnson
Kane
Kankake
e
Kendall
Knox
La Salle
Lake
Lawrenc
e Lee
Livingsto
n Logan
Macon
Macoupi
n
Madison
Marion
Marshall
Mason

[illegible]

- ☐ Morgan
- ☐ n
- ☐ Moultrie
- ☐ e Ogle
- ☐ Peoria
- ☐ Perry
- ☐ Piatt
- ☐ Pike
- ☐ Pope
- ☐ Pulask
- ☐ i
- ☐ Putnam
- ☐ m
- ☐ Randolph
- ☐ h
- ☐ Richland
- ☐ Rock
- ☐ Island
- ☐ Saline
- ☐ Sangamon
- ☐ on
- ☐ Schuyler
- ☐ Scott
- ☐ Shelby
- ☐ St. Clair
- ☐ Stark
- ☐ Stephens
- ☐ on
- ☐ Tazewell
- ☐ Union
- ☐ Vermilion
- ☐ Wabash
- ☐ Warren
- ☐ Washington
- ☐ on Wayne
- ☐ White
- Whiteside
- Will
- Williamson
- n
- Winnebago
- o
- Woodford
- Don't
- know
- My program prefers not to answer this question.

Between [event-label], in which Indiana county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

All Indiana Counties

Adams

Allen

Bartholomew

Benton

Blackford

Boone

Brown

Carroll

Cass

Clark

Clay

Clinton

Crawford

Daviess

De Kalb

Dearborn

Decatur

Delaware

Dubois

Elkhart

Fayette

Floyd

Fountain

Franklin

Fulton

Gibson

Grant

Greene

Hamilton

Hancock

Harrison

Hendrick

Henry

Howard

Huntington

Jackson

Jasper

Jay

Jefferson

Jennings

Johnson

Knox

Kosciusko

La Porte

Lagrange

Lake

Lawrence

Madison

Marion

Marshall

Martin

Miami

Monroe

Montgomery

Morgan

Newton

Noble

Porter
Posey
Pulaski
Putnam

h
Randolph



- ☐ Ripley
- ☐ Rush
- ☐ Scott
- ☐ Shelby
- ☐ Spence
- ☐ r St.
- ☐ Joseph
- ☐ Starke
- ☐ Steube
- ☐ n
- ☐ Sullivan
- ☐ Switzerla
- ☐ nd
- ☐ Tippecan
- ☐ oe Tipton
- ☐ Union
- ☐ Vanderbur
- ☐ gh
- ☐ Vermillion
- ☐ Vigo
- ☐ Wabash
- ☐ Warren
- ☐ Warrick
- ☐ Washingt
- ☐ on Wayne
- ☐ Wells
- White
- Whitley
- Don't
- know
- My program prefers not to answer this question.

Between [event-label], in which Kansas county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

All Kansas
Counties Allen
Anderson
Atchison
Barber
Barton
Bourbon
Brown
Butler
Chase
Chautauq
ua
Cherokee
Cheyenn
e Clark
Clay
Cloud
Coffey
Comanc
he
Cowley
Crawfor
d
Decatur
Dickinso
n
Donipha
n
Douglas
Edwards
Elk
Ellis
Ellswort
h
Finney
Ford
Frankli
n Geary
Gove
Graha
m
Grant
Gray
Greeley
Greenwoo
d
Hamilton
Harper
Harvey
Haskell
Hodgema
n Jackson
Jefferson
Jewell
Johnson
Kearny
Kingman
Kiowa
Labette
Lane
Leavenwo
rth Lincoln
Linn
Logan
Lyon
Marion
Marshall
McPherso

y Morris
Morton
Nemaha
Neosho
Nes
S



- ☐ Norton
- ☐ Osage
- ☐ Osborne
- ☐ Ottawa
- ☐ Pawnee
- ☐ Phillips
- ☐ Pottawato
- ☐ mie Pratt
- ☐ Rawlins
- ☐ Reno
- ☐ Republi
- ☐ c Rice
- ☐ Riley
- ☐ Rooks
- ☐ Rush
- ☐ Russell
- ☐ Saline
- ☐ Scott
- ☐ Sedgwi
- ☐ ck
- ☐ Seward
- ☐ Shawn
- ☐ ee
- ☐ Sherida
- ☐ n
- ☐ Sherma
- ☐ n Smith
- ☐ Staffor
- ☐ d
- ☐ Stanton
- ☐ Steven
- ☐ s
- ☐ Sumner
- ☐ Thoma
- ☐ s Trego
- ☐ Wabaunse
- ☐ e Wallace
- ☐ Washingto
- ☐ n Wichita
- Wilson
- Woodson
- Wyandotte
- Don't
- know
- My program prefers not to answer this question.

Between [event-label], in which Kentucky county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

All Kentucky Counties

Adair

Allen

Anderso

n

Ballard

Barren

Bath

Bell

Boone

Bourbo

n Boyd

Boyle

Bracke

n

Breathi

tt

Breckinridge

Bullitt

Butler

Caldwel

l

Callowa

y

Campb

ell

Carlisle

Carroll

Carter

Casey

Christia

n Clark

Clay

Clinton

Crittenden

Cumberland

Daviess

Edmonson

Elliott

Estill

Fayette

Fleming

Floyd

Franklin

Fulton

Gallatin

Garrard

Grant

Graves

Grayson

Green

Greenup

Hancock

Hardin

Harlan

Harrison

Hart

Henderso

n

Henry

Hickman

Hopkins

Jackson

Jefferson

Jessami

ne

Johnson

Kenton

Knott

Lawrence
Lee
Leslie
Letcher

☐ Lewi
☐ S

- ☐ Lincoln
- ☐ Livingst
- ☐ on
- ☐ Logan
- ☐ Lyon
- ☐ Madison
- ☐ Magoffin
- ☐ Marion
- ☐ Marshall
- ☐ Martin
- ☐ Mason
- ☐ McCrack
- ☐ en
- ☐ McCrear
- ☐ y
- ☐ McLean
- ☐ Meade
- ☐ Meniffee
- ☐ Mercer
- ☐ Metcalfe
- ☐ Monroe
- ☐ Montgom
- ☐ ery
- ☐ Morgan
- ☐ Muhlenbe
- ☐ rg Nelson
- ☐ Nicholas
- ☐ Ohio
- ☐ Oldham
- ☐ Owen
- ☐ Owsley
- ☐ Pendleton
- ☐ Perry
- ☐ Pike
- ☐ Powell
- ☐ Pulaski
- ☐ Robertso
- ☐ n
- ☐ Rockcas
- ☐ tle
- ☐ Rowan
- ☐ Russell
- ☐ Scott
- ☐ Shelby
- ☐ Simpson
- ☐ Spencer
- ☐ Taylor
- ☐ Todd
- ☐ Trigg
- ☐ Trimble
- ☐ Union
- ☐ Warren
- ☐ Washingt
- ☐ on Wayne

Webster

Whitley

Wolfe

Woodford

Don't

know

My program prefers not to answer this question.

Between [event-label], in which Louisiana parish(es) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All Louisiana
- ☐ Parishes Acadia
- ☐ Allen
- ☐ Ascension
- ☐ Assumpti
- ☐ on
- ☐ Avoyelles
- ☐ Beaurega
- ☐ rd
- ☐ Bienville
- ☐ Bossier
- ☐ Caddo
- ☐ Calcasieu
- ☐ Caldwell
- ☐ Cameron
- ☐ Catahoul
- ☐ a
- ☐ Claiborne
- ☐ Concordia
- ☐ De Soto
- ☐ East Baton
- ☐ Rouge East
- ☐ Carroll
- ☐ East
- ☐ Feliciana
- ☐ Evangelin
- ☐ e Franklin
- ☐ Grant
- ☐ Iberia
- ☐ Ibervill
- ☐ e
- ☐ Jackson
- ☐ Jefferso
- ☐ n
- ☐ Jefferson
- ☐ Davis La
- ☐ Salle
- ☐ Lafayette
- ☐ Lafourche
- ☐ Lincoln
- ☐ Livingston
- ☐ Madison
- ☐ Morehouse
- ☐ Natchitoches
- ☐ Orleans
- ☐ Ouachita
- ☐ Plaquemines
- ☐ Pointe
- ☐ Coupee
- ☐ Rapides
- ☐ Red
- ☐ River
- ☐ Richlan
- ☐ d
- ☐ Sabine
- ☐ St.
- ☐ Bernard
- ☐ St.
- ☐ Charles
- ☐ St.
- ☐ Helena
- ☐ St.
- ☐ James
- ☐ St. John the
- ☐ Baptist St.
- ☐ Landry
- ☐ St.

Martin
St. Mary
St.
Tammany
Tangipahoa
Tensas
Terrebonne
Union
Vermilion
Vernon
Washington
Webster
West Baton
Rouge West
Carroll
West
Feliciana
Winn
Don't know
My program prefers not to answer this
question.

Between [event-label], in which Massachusetts county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All Massachusetts
- ☐ Counties Barnstable
- ☐ Berkshire
- ☐ Bristol
- ☐ Dukes
- ☐ Essex
- ☐ Franklin
- ☐ Hampshire
- ☐ Hampden
- ☐ Hampshire
- ☐ Middlesex
- ☐ Norfolk
- ☐ Plymouth
- ☐ Suffolk
- ☐ Worcester
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Between [event-label], in which Maryland county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All Maryland
- ☐ Counties Allegany
- ☐ Anne Arundel
- ☐ Baltimore
- ☐ Baltimore
- ☐ city Calvert
- ☐ Caroline
- ☐ Carroll
- ☐ Cecil
- ☐ Charles
- ☐ Dorchester
- ☐ Frederick
- ☐ Garrett
- ☐ Harford
- ☐ Howard
- ☐ Kent
- ☐ Montgome
- ☐ ry
- ☐ Prince George's
- ☐ Queen Anne's
- ☐ Somerset
- ☐ St. Mary's
- ☐ Talbot
- ☐ Washington
- ☐ Wicomico
- ☐ Worcester
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Between [event-label], in which Maine county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- All Maine
☐ Counties
☐ Androscoggin
☐ Aroostook
☐ Cumberland
☐ Franklin
☐ Hancock
☐ Kennebe
☐ c Knox
☐ Lincoln
☐ Oxford
☐ Penobscot
☐ Piscataquis
☐ Sagadahoc
☐ Somerset
☐ Waldo
☐ Washington
☐ York
Don't know
My program prefers not to answer this question.

Between [event-label], in which Michigan county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

All Michigan Counties

Alcona

Alger

Allegan

n

Alpena

Antrim

Arenac

c

Baraga

a

Barry

Bay

Benzie

Berrien

n

Branch

h

Calhoun

n Cass

Charlevoix

x

Cheboygan

an

Chippewa

a Clare

Clinton

Crawford

Delta

Dickinson

n Eaton

Emmet

Genesee

Gladwin

Gogebic

Grand

Traverse

Gratiot

Hillsdale

Houghton

Huron

Ingham

m

Ionia

Iosco

Iron

Isabella

a

Jackson

n

Kalamazoo

oo

Kalkaska

Kent

Keweenaw

Lake

Lapeer

Leelanau

Lenawee

Livingston

n Luce

Mackinac

Macomb

Manistee

Marquette

e Mason

Mecosta

Menominee

ee
Midland
Missauke
e Monroe
Montcalm
Montmorency
Muskegon
07/30/2023
10:02pm

Newaygo
Oakland
☐ Oceana
☐ Ogemaw
☐ Ontonagon
☐ Osceola
☐
☐ Oscoda
☐ a

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A vertical column of 35 empty square checkboxes, starting from the second checkbox in the list above and continuing down to the bottom of the page.

- ☐ Otsego
- ☐ Ottawa
- ☐ Presque
- ☐ Isle
- ☐ Roscomm
- ☐ on
- ☐ Saginaw
- ☐ Sanilac
- ☐ Schoolcraf
- ☐ t
- ☐ Shiawasse
- ☐ e St. Clair
- ☐ St.
- ☐ Joseph
- ☐ Tuscola
- ☐ Van
- ☐ Buren
- Washtena
- w Wayne
- Wexford
- Don't
- know
- My program prefers not to answer this question.

Between [event-label], in which Minnesota county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

All Minnesota
Counties Aitkin
Anoka
Becker
Beltrami
Benton
Big
Stone
Blue
Earth
Brown
Carlton
Carver
Cass
Chippew
a
Chisago
Clay
Clearwat
er Cook
Cottonwoo
d Crow
Wing
Dakota
Dodge
Douglas
Faribault
Fillmore
Freeborn
Goodhue
Grant
Hennepin
Houston
Hubbard
Isanti
Itasca
Jackson
Kanabec
Kandiyoh
i Kittson
Koochiching
Lac qui
Parle Lake
Lake of the
Woods Le
Sueur
Lincoln
Lyon
Mahnom
en
Marshall
Martin
McLeod
Meeker
Mille
Lacs
Morrison
Mower
Murray
Nicollet
Nobles
Norman
Olmsted
Otter
Tail
Penningt
on Pine
Pipeston

☐ Redwood
☐ Renvill
☐ e Rice
☐ Rock
☐ Rosea
☐ u



- ☐ Scott
- ☐ Sherburne
- ☐ Sibley
- ☐ St.
- ☐ Louis
- ☐ Stearns
- ☐ Steele
- ☐ Steven
- ☐ s Swift
- ☐ Todd
- ☐ Travers
- ☐ e
- ☐ Wabas
- ☐ ha
- ☐ Waden
- ☐ a
- ☐ Waseca
- ☐ Washingto
- ☐ n
- ☐ Watonwan
- ☐ Wilkin
- Winona
- Wright
- Yellow
- Medicine
- Don't know
- My program prefers not to answer this question.

Between [event-label], in which Missouri county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

All Missouri
Counties Adair
Andrew
Atchison
Audrain
Barry
Barton
Bates
Benton
Bollinger
Boone
Buchana
n Butler
Caldwell
Callaway
Camden
Cape
Girardeau
Carroll
Carter
Cass
Cedar
Charito
n
Christia
n Clark
Clay
Clinton
Cole
Cooper
Crawfor
d Dade
Dallas
Davies
s De
Kalb
Dent
Dougla
s
Dunklin
Frankli
n
Gascona
de
Gentry
Greene
Grundy
Harrison
Henry
Hickory
Holt
Howard
Howell
Iron
Jackson
Jasper
Jefferson
Johnson
Knox
Laclede
Lafayett
e
Lawrenc
e Lewis
Lincoln
Linn
Livingsto
n Macon

☐ d Mercer
☐ Miller
☐ Mississipp
☐ pi
☐ Monitea
☐ u

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- ☐ Monroe
- ☐ Montgome
- ☐ ry Morgan
- ☐ New
- ☐ Madrid
- ☐ Newton
- ☐ Nodaway
- ☐ Oregon
- ☐ Osage
- ☐ Ozark
- ☐ Pemiscot
- ☐ Perry
- ☐ Pettis
- ☐ Phelps
- ☐ Pike
- ☐ Platte
- ☐ Polk
- ☐ Pulaski
- ☐ Putna
- ☐ m Ralls
- ☐ Randol
- ☐ ph Ray
- ☐ Reynol
- ☐ ds
- ☐ Ripley
- ☐ Saline
- ☐ Schuyl
- ☐ er
- ☐ Scotlan
- ☐ d Scott
- ☐ Shanno
- ☐ n
- ☐ Shelby
- ☐ St.
- ☐ Charles
- ☐ St. Clair
- ☐ St.
- ☐ Francois
- ☐ St. Louis
- ☐ St. Louis
- ☐ city Ste.
- ☐ Genevieve
- ☐ Stoddard
- ☐ Stone
- ☐ Sullivan
- ☐ Taney
- ☐ Texas
- ☐ Vernon
- ☐ Warren
- Washingt
- on Wayne
- Webster
- Worth
- Wright
- Don't
- know
- My program prefers not to answer this question.

Between [event-label], in which Northern Mariana Island(s) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All Northern Mariana
- ☐ Islands Northern Islands
- ☐ Rota
- ☐ Saipan
- ☐ Tinian
- ☐ Don't
- ☐ know
- My program prefers not to answer this question.

Between [event-label], in which Mississippi county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

All Mississippi
Counties Adams
Alcorn
Amite
Attala
Benton
Bolivar
Calhoun
Carroll
Chickasaw
Choctaw
Claiborne
Clarke
Clay
Coahoma
Columbia
Covington
DeSoto
Forrest
Franklin
George
Greene
Grenada
Hancock
Harrison
Hinds
Holmes
Humphreys
Issaquena
Itawamba
Jackson
Jasper
Jefferson
Davis Jones
Kemper
Lafayette
Lamar
Lauderdale
Lawrence
Leake
Lee
Leflore
Lincoln
Lowndes
Madison
Marion
Marshall
Monroe
Montgomery
Neshoba
Newton
Noxubee
Oktibbeha
Panola
Pearl River
Perry
Pike
Pontotoc

[illegible]

- ☐ Tate
- ☐ Tippah
- ☐ Tishomin
- ☐ go Tunica
- ☐ Union
- ☐ Walthall
- ☐ Warren
- ☐ Washingt
- ☐ on
- ☐ Wayne
- ☐ Webster
- ☐ Wilkinson
- ☐ Winston
- ☐ Yalobush
- ☐ a Yazoo
- ☐ Don't

know
My program prefers not to answer this question.

Between [event-label], in which Montana county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All Montana Counties
- ☐ Beaverhead
- ☐ Big Horn
- ☐ Blaine
- ☐ Broadwat
- ☐ er Carbon
- ☐ Carter
- ☐ Cascade
- ☐ Chouteau
- ☐ Custer
- ☐ Daniels
- ☐ Dawson
- ☐ Deer
- ☐ Lodge
- ☐ Fallon
- ☐ Fergus
- ☐ Flathead
- ☐ Gallatin
- ☐ Garfield
- ☐ Glacier
- ☐ Golden Valley
- ☐ Granite
- ☐ Hill
- ☐ Jefferson
- ☐ Judith
- ☐ Basin
- ☐ Lake
- ☐ Lewis and
- ☐ Clark Liberty
- ☐ Lincoln
- ☐ Madison
- ☐ McCone
- ☐ Meagher
- ☐ Mineral
- ☐ Missoula
- ☐ Musselshel
- ☐ I Park
- ☐ Petroleum
- ☐ Phillips
- ☐ Pondera
- ☐ Powder
- ☐ River
- ☐ Powell
- ☐ Prairie
- ☐ Ravalli
- ☐ Richland
- ☐ Roosevelt
- ☐ Rosebud
- ☐ Sanders
- ☐ Sheridan
- ☐ Silver Bow
- ☐ Stillwater
- ☐ Sweet
- ☐ Grass
- ☐ Teton
- ☐ Toole
- ☐ Treasure
- ☐ Valley
- ☐ Wheatlan
- ☐ d Wibaux
- ☐ Yellowsto
- ☐ ne
- ☐ Yellowstone National
- ☐ Park Don't know
- ☐ My program prefers not to answer this question.

Between [event-label], in which North Carolina county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

All North Carolina
Counties Alamance
Alexander
Alleghany
Anson
Ashe
Avery
Beaufort
Bertie
Bladen
Brunswick
Buncombe
Burke
Cabarrus
Caldwell
Camden
Carteret
Caswell
Catawba
Chatham
Cherokee
Chowan
Clay
Cleveland
Columbus
Craven
Cumberland
Currituck
Dare
Davidson
Davie
Duplin
Durham
Edgecombe
Forsyth
Franklin
Gaston
Gates
Graham
Granville
Greene
Guilford
Halifax
Harnett
Haywood
Henderson
Hertford
Hoke
Hyde
Iredell
Jackson
Johnston
Jones
Lee
Lenoir
Lincoln
Macon
Madison

n
Martin
McDowe
ll
Mecklenburg
Mitchell

07/30/2023
10:02pm

Montgomery
Moore

- ☐ Nash
- ☐ New
- ☐ Hanover
- ☐ Northampt
- ☐ on Onslow
- ☐ Orang
- ☐ e

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- ☐ Pamlico
- ☐ Pasquotan
- ☐ k Pender
- ☐ Perquima
- ☐ ns Person
- ☐ Pitt
- ☐ Polk
- ☐ Randolph
- ☐ Richmon
- ☐ d
- ☐ Robeson
- ☐ Rockingh
- ☐ am
- ☐ Rowan
- ☐ Rutherfor
- ☐ d
- ☐ Sampson
- ☐ Scotland
- ☐ Stanly
- ☐ Stokes
- ☐ Surry
- ☐ Swain
- ☐ Transylva
- ☐ nia Tyrrell
- ☐ Union
- ☐ Vance
- ☐ Wake
- ☐ Warren
- ☐ Washingt
- ☐ on
- ☐ Watauga
- ☐ Wayne
- ☐ Wilkes
- ☐ Wilson

Yadkin

Yancey

Don't

know

My program prefers not to answer this question.

Between [event-label], in which North Dakota county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All North Dakota
- ☐ Counties Adams
- ☐ Barnes
- ☐ Benson
- ☐ Billings
- ☐ Bottine
- ☐ au
- ☐ Bowma
- ☐ n Burke
- ☐ Burleig
- ☐ h Cass
- ☐ Cavalie
- ☐ r
- ☐ Dickey
- ☐ Divide
- ☐ Dunn
- ☐ Eddy
- ☐ Emmon
- ☐ s Foster
- ☐ Golden Valley
- ☐ Grand Forks
- ☐ Grant
- ☐ Griggs
- ☐ Hettinger
- ☐ Kidder
- ☐ La
- ☐ Moure
- ☐ Logan
- ☐ McHenr
- ☐ y
- ☐ McIntos
- ☐ h
- ☐ McKenzi
- ☐ e
- ☐ McLean
- ☐ Mercer
- ☐ Morton
- ☐ Mountr
- ☐ ail
- ☐ Nelson
- ☐ Oliver
- ☐ Pembin
- ☐ a Pierce
- ☐ Ramsey
- ☐ Ransom
- ☐ Renville
- ☐ Richlan
- ☐ d
- ☐ Rolette
- ☐ Sargent
- ☐ Sherida
- ☐ n Sioux
- ☐ Slope
- ☐ Stark
- ☐ Steele
- ☐ Stutsm
- ☐ an
- ☐ Towner
- ☐ Traill
- ☐ Walsh
- ☐ Ward
- ☐ Wells
- ☐ William
- ☐ s
- ☐ Don't know
- ☐ My program prefers not to answer this question.

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Between [event-label], in which Nebraska county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

All Nebraska Counties

Adams
Antelope
Arthur
Banner
Blaine
Boone
Box
Butte
Boyd
Brown
Buffalo
Burt
Butler
Cass
Cedar
Chase
Cherry
Cheyenne
Clay
Colfax
Cuming
Custer
Dakota
Dawes
Dawson
Deuel
Dixon
Dodge
Douglas
Dundy
Fillmore
Franklin
Frontier
Furnas
Gage
Garden
Garfield
Gosper
Grant
Greeley
Hall
Hamilton
Harlan
Hayes
Hitchcock
Holt
Hooker
Howard
Jefferson
Johnson
Kearney
Keith
Keya
Paha
Kimball
Knox
Lancaster
Lincoln
Logan
Loup
Madison
McPherson
Merrick
Morrill
Nance

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- ☐ Phelps
- ☐ Pierce
- ☐ Platte
- ☐ Polk
- ☐ Red
- ☐ Willow
- ☐ Richards
- ☐ on Rock
- ☐ Saline
- ☐ Sarpy
- ☐ Saunders
- ☐ Scotts
- ☐ Bluff
- ☐ Seward
- ☐ Sheridan
- ☐ Sherman
- ☐ Sioux
- ☐ Stanton
- ☐ Thayer
- ☐ Thomas
- ☐ Thurston
- ☐ Valley
- ☐ Washingt
- ☐ on Wayne
- ☐ Webster
- ☐ Wheeler
- ☐ York
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Between [event-label], in which New Hampshire county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All New Hampshire
- ☐ Counties Belknap
- ☐ Carroll
- ☐ Cheshire
- ☐ Coos
- ☐ Grafton
- ☐ Hillsborou
- ☐ gh
- ☐ Merrimac
- ☐ k
- ☐ Rockingha
- ☐ m
- ☐ Strafford
- ☐ Sullivan
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Between [event-label], in which New Jersey county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All New Jersey Counties
- ☐ Atlantic
- ☐ Bergen
- ☐ Burlingto
- ☐ n
- ☐ Camden
- ☐ Cape May
- ☐ Cumberla
- ☐ nd Essex
- ☐ Glouceste
- ☐ r Hudson
- ☐ Hunterdo
- ☐ n Mercer
- ☐ Middlesex
- ☐ Monmout
- ☐ h Morris
- ☐ Ocean
- ☐ Passaic
- ☐ Salem
- ☐ Somerset
- ☐ Sussex
- ☐ Union
- ☐ Warren
- ☐ Don't

know

My program prefers not to answer this question.

Between [event-label], in which New Mexico county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All New Mexico Counties
- ☐ Bernalillo
- ☐ Catron
- ☐ Chave
- ☐ s
- ☐ Cibola
- ☐ Colfax
- ☐ Curry
- ☐ De
- ☐ Baca
- ☐ Dona
- ☐ Ana
- ☐ Eddy
- ☐ Grant
- ☐ Guadalu
- ☐ pe
- ☐ Harding
- ☐ Hidalgo
- ☐ Lea
- ☐ Lincoln
- ☐ Los
- ☐ Alamos
- ☐ Luna
- ☐ McKinley
- ☐ Mora
- ☐ Oter
- ☐ o
- ☐ Qua
- ☐ y
- ☐ Rio
- ☐ Arriba
- ☐ Roosevelt
- ☐ t San
- ☐ Juan San
- ☐ Miguel
- ☐ Sandoval
- ☐ Santa Fe
- ☐ Sierra
- ☐ Socorro
- ☐ Taos
- ☐ Tarrant
- ☐ Union
- ☐ Valencia
- ☐ Don't
- ☐ know
- ☐ My program prefers not to answer this question.

Between [event-label], in which Nevada county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All Nevada
- ☐ Counties Carson
- ☐ City Churchill
- ☐ Clark
- ☐ Douglas
- ☐ Elko
- ☐ Esmerald
- ☐ a Eureka
- ☐ Humboldt
- ☐ t Lander
- ☐ Lincoln
- ☐ Lyon
- ☐ Mineral
- ☐ Nye
- ☐ Pershing
- ☐ Storey
- ☐ Washoe
- ☐ White
- ☐
- ☐

Pine
Don't
know
My program prefers not to answer this
question.

Between [event-label], in which New York county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All New York Counties
- ☐ Albany
- ☐ Allegany
- ☐ Bronx
- ☐ Broome
- ☐ Cattaraugus
- ☐ Cayuga
- ☐ Chautauqua
- ☐ Chemung
- ☐ Chenang
- ☐ Clinton
- ☐ Columbia
- ☐ Cortland
- ☐ Delaware
- ☐ Dutchess
- ☐ Erie
- ☐ Essex
- ☐ Franklin
- ☐ Fulton
- ☐ Genesee
- ☐ Greene
- ☐ Hamilton
- ☐ Herkimer
- ☐ Jefferson
- ☐ Kings
- ☐ Lewis
- ☐ Livingston
- ☐ Madison
- ☐ Monroe
- ☐ Montgomery
- ☐ Nassau
- ☐ New York
- ☐ Niagara
- ☐ Oneida
- ☐ Onondaga
- ☐ Ontario
- ☐ Orange
- ☐ Orleans
- ☐ Oswego
- ☐ Otsego
- ☐ Putnam
- ☐ Queens
- ☐ Rensselaer
- ☐ Richmond
- ☐ Rockland
- ☐ Saratoga
- ☐ Schenectady
- ☐ Schoharie
- ☐ Schuyler
- ☐ Seneca
- ☐ St. Lawrence
- ☐ Steuben
- ☐ Suffolk
- ☐ Sullivan
- ☐ Tioga
- ☐ Tompkins
- ☐ Ulster

Warren
Washingto
n Wayne
Westchest
er
Wyoming
Yates
Don't know
My program prefers not to answer this
question.

Between [event-label], in which Ohio county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

All Ohio
Counties
Adams
Allen
Ashland
Ashtabula
Athens
Auglaize
Belmont
Brown
Butler
Carroll
Champaign
Clark
Clermont
Clinton
Columbia
Coshocton
Crawford
Cuyahoga
Darke
Defiance
Delaware
Erie
Fairfield
Fayette
Franklin
Fulton
Gallia
Geauga
Greene
Guernsey
Hamilton
Hancock
Hardin
Harrison
Henry
Highland
Hocking
Holmes
Huron
Jackson
Jefferson
Knox
Lake
Lawrence
Licking
Logan
Lorain
Lucas
Madison
Mahoning
Marion
Medina
Meigs
Mercer
Miami
Monroe
Montgomery
Morgan
Morrow
Muskingum
Noble
Ottawa
Paulding

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- ☐ Putnam
- ☐ Richland
- ☐ Ross
- ☐ Sandusky
- ☐ Scioto
- ☐ Seneca
- ☐ Shelby
- ☐ Stark
- ☐ Summit
- ☐ Trumbull
- ☐ Tuscaraw
- ☐ as Union
- ☐ Van Wert
- ☐ Vinton
- ☐ Warren
- ☐ Washingto
- ☐ n Wayne
- ☐ Williams
- ☐ Wood
- ☐ Wyandot
- ☐ Don't
- ☐ know

My program prefers not to answer this question.

Between [event-label], in which Oklahoma county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

All Oklahoma
 Counties Adair
 Alfalfa
 Atoka
 Beaver
 Beckham
 Blaine
 Bryan
 Caddo
 Canadian
 Carter
 Cherokee
 Choctaw
 Cimarron
 Cleveland
 Coal
 Comanche
 Cotton
 Craig
 Creek
 Custer
 Delaware
 Dewey
 Ellis
 Garfield
 Garvin
 Grady
 Grant
 Greer
 Harmon
 Harper
 Haskell
 Hughes
 Jackson
 Jefferson
 Johnston
 Kay
 Kingfisher
 Kiowa
 Latimer
 LeFlore
 Lincoln
 Logan
 Love
 Major
 Marshall
 Mayes
 McClain
 McCurtain
 McIntosh
 Murray
 Muskogee
 Noble
 Nowata
 Okfuskee
 Oklahoma
 Okmulgee
 Osage
 Ottawa
 Pawnee

a Roger
Mills
Rogers
Seminole

] Sequoy
] ah



- ☐ Stephens
- ☐ Texas
- ☐ Tillman
- ☐ Tulsa
- ☐ Wagoner
- ☐ Washingt
- ☐ on
- ☐ Washita
- ☐ Woods
- ☐ Woodwar
- ☐ d Don't
know
- ☐ My program prefers not to answer this
question.

Between [event-label], in which Oregon
county(/-ies) did your harm reduction
program provide IN-PERSON and/or ON-SITE
services (including vending machines)?
(Please select all that apply).

- ☐ All Oregon
- ☐ Counties Baker
- ☐ Benton
- ☐ Clackam
- ☐ as
- ☐ Clatsop
- ☐ Columbi
- ☐ a Coos
- ☐ Crook
- ☐ Curry
- ☐ Deschut
- ☐ es
- ☐ Douglas
- ☐ Gilliam
- ☐ Grant
- ☐ Harney
- ☐ Hood
- ☐ River
- ☐ Jackson
- ☐ Jefferson
- ☐ Josephin
- ☐ e
- ☐ Klamath
- ☐ Lake
- ☐ Lane
- ☐ Lincoln
- ☐ Linn
- ☐ Malheur
- ☐ Marion
- ☐ Morrow
- ☐ Multnom
- ☐ ah Polk
- ☐ Sherman
- ☐ Tillamook
- ☐ Umatilla
- ☐ Union
- ☐ Wallowa
- ☐ Wasco
- ☐ Washingt
on
- ☐ Wheeler
- ☐ Yamhill
- ☐ Don't
know
- ☐ My program prefers not to answer this
question.

Between [event-label], in which Pennsylvania county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

All Pennsylvania
 Counties Adams
 Allegheny
 Armstrong
 Berks
 Blair
 Bradford
 Bucks
 Butler
 Cambria
 Cameron
 Carbon
 Centre
 Chester
 Clarion
 Clearfield
 Clinton
 Columbia
 Crawford
 Cumberland
 Dauphin
 Delaware
 Elk
 Erie
 Fayette
 Forest
 Franklin
 Fulton
 Greene
 Huntingdon
 Indiana
 Jefferson
 Juniata
 Lackawanna
 Lancaster
 Lawrence
 Lebanon
 Lehigh
 Luzerne
 Lycoming
 McKean
 Mercer
 Mifflin
 Monroe
 Montgomery
 Montour
 Northampton
 Northumberland
 Perry
 Philadelphia
 Pike
 Potter
 Schuylkill
 Snyder

Warren
Washington
Wayne
☐ Westmoreland
☐ and Wyoming
☐ York
☐ Don't
☐ know



☐ My program prefers not to answer this question.

Between [event-label], in which Puerto Rico county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

All Puerto Rico Counties

Adjuntas
Aguada
Aguadilla
Aguas
Buenas
Aibonito
Anasco
Arecibo
Arroyo
Barcelonet
a
Barranquit
as
Bayamo'n
Cabo Rojo
Caguas
Camuy
Canovanas
Carolina
Catano
Cayey
Ceiba
Cidra
Coamo
Comerio
Corozal
Culebra
Dorado
Fajardo
Florida
Guanica
Guayam
a
Guayani
Ila
Guayna
bo
Gurabo
Hatillo
Hormiguer
os
Humacao
Isabela
Jayuya
Juana
Diaz
Juncos
Lajas
Lares
Las
Marias
Las
Piedras
Loiza
Luquillo
Manati
Maricao
Mayaguez
Moca
Morovis
Naguabo
Naranjito
Orocovis
Patillas
Penuelas
Ponce
Quebradill

San
Lorenzo
San
☐ Sebastian
☐ Santa
☐ Isabel Toa
☐ Alta
☐
☐ Toa
☐ Baja



- ☐ Trujillo
- ☐ Alto
- ☐ Utuado
- ☐ Vega
- ☐ Alta
- ☐ Vega
- ☐ Baja
- ☐ Vieques
- ☐ Villalba
- ☐ Yabucoa
- ☐ Yauco
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Between [event-label], in which Rhode Island county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All Rhode Island Counties
- ☐ Bristol
- ☐ Kent
- ☐ Newport
- ☐ Providenc
- ☐ e
- ☐ Washingt
- ☐ on Don't know
- ☐ My program prefers not to answer this question.

Between [event-label], in which South Carolina county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All South Carolina
- ☐ Counties Abbeville
- ☐ Aiken
- ☐ Allendale
- ☐ Anderson
- ☐ Bamberg
- ☐ Barnwell
- ☐ Beaufort
- ☐ Berkeley
- ☐ Calhoun
- ☐ Charlesto
- ☐ n
- ☐ Cherokee
- ☐ Chester
- ☐ Chesterfi
- ☐ eld
- ☐ Clarendo
- ☐ n
- ☐ Colleton
- ☐ Darlinto
- ☐ n Dillon
- ☐ Dorchest
- ☐ er
- ☐ Edgefield
- ☐ Fairfield
- ☐ Florence
- ☐ Georgetow
- ☐ n
- ☐ Greenville
- ☐ e
- ☐ Greenwo
- ☐ od
- ☐ Hampton
- ☐ Horry
- ☐ Jasper
- ☐ Kershaw
- ☐ Lancaster
- ☐ Laurens
- ☐ Lee
- ☐ Lexington
- ☐ Marion
- ☐ Marlboro
- ☐ McCormic
- ☐ k
- ☐ Newberry
- ☐ Oconee
- ☐ Orangebur
- ☐ g Pickens
- ☐ Richland
- ☐ Saluda
- ☐ Spartanbu
- ☐ rg Sumter
- ☐ Union
- ☐ Williamsb
- ☐ urg York
- ☐ Don't know
- ☐ My program prefers not to answer this question.

[illegible][illegible]

All South Dakota
Counties Aurora
Beadle
Bennett
Bon
Homme
Brookings
Brown
Brule
Buffalo
Butte
Campbell
Charles
Mix Clark
Clay
Codingt
on
Corson
Custer
Davison
Day
Deuel
Dewey
Dougla
s
Edmun
ds Fall
River
Faulk
Grant
Gregor
y
Haakon
Hamlin
Hand
Hanson
Harding
Hughes
Hutchins
on Hyde
Jackson
Jerauld
Jones
Kingsbur
y Lake
Lawrenc
e Lincoln
Lyman
Marshall
McCook
McPhers
on
Meade
Mellette
Miner
Minneha
ha
Moody
Penningt
on
Perkins
Potter
Roberts
Sanborn
Shannon
Spink
Stanley
Sully
Todd
Tripp
Turner

Union
Walworth
Yankton
Ziebach
Don't
know
My program pref_perrorsjecnrtordtcopagnrsgwer
this question.

Between [event-label], in which Tennessee county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

All Tennessee Counties

Anderson
Bedford
Benton
Bledsoe
Blount
Bradley
Campbell
Cannon
Carroll
Carter
Cheatham
Chester
Claiborne
Clay
Cocke
Coffee
Crockett
Cumberland
Davidson
Decatur
DeKalb
Dickson
Dyer
Fayette
Fentress
Franklin
Gibson
Giles
Grainger
Greene
Grundy
Hamblen
Hamilton
Hancock
Hardeman
Hardin
Hawkins
Haywood
Henderson
Henry
Hickman
Houston
Humphreys
Jackson
Jefferson
Johnson
Knox
Lake
Lauderdale
Lawrence
Lewis
Lincoln
Loudon
Macon
Madison
Marion
Marshall
Maury
McMinn
McNairy
Meigs
Monroe

Obion
Overton

Perr
y

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- ☐ Pickett
- ☐ Polk
- ☐ Putnam
- ☐ Rhea
- ☐ Roane
- ☐ Robertso
- ☐ n
- ☐ Rutherfo
- ☐ rd Scott
- ☐ Sequatc
- ☐ hie
- ☐ Sevier
- ☐ Shelby
- ☐ Smith
- ☐ Stewart
- ☐ Sullivan
- ☐ Sumner
- ☐ Tipton
- ☐ Trousdal
- ☐ e Unicoi
- ☐ Union
- ☐ Van
- ☐ Buren
- ☐ Warren
- ☐ Washingt
- ☐ on
- ☐ Wayne
- ☐ Weakley
- ☐ White

Williamso

n Wilson

Don't

know

My program prefers not to answer this question.

Between [event-label], in which Texas county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

All Texas
Counties
Anderson
Andrews
Angelin
a
Aransas
Archer
Armstro
ng
Atascos
a Austin
Bailey
Bander
a
Bastrop
Baylor
Bee
Bell
Bexar
Blanco
Borden
Bosque
Bowie
Brazori
a
Brazos
Brewst
er
Briscoe
Brooks
Brown
Burleso
n
Burnet
Caldwe
ll
Calhou
n
Callaha
n
Camero
n Camp
Carson
Cass
Castro
Chamber
s
Cherokee
Childress
Clay
Cochran
Coke
Coleman
Collin
Collingswor
th Colorado
Comal
Comanche
Concho
Cooke
Coryell
Cottle
Crane
Crockett
Crosby
Culberso
n Dallam

[illegible]

- ☐ El Paso
- ☐ Ellis
- ☐ Erath
- ☐ Falls
- ☐ Fannin
- ☐ Fayette
- ☐ Fisher
- ☐ Floyd
- ☐ Foard
- ☐ Fort
- ☐ Bend
- ☐ Franklin
- ☐ Freeston
- ☐ e Frio
- ☐ Gaines
- ☐ Galvest
- ☐ on
- ☐ Garza
- ☐ Gillespie
- ☐ Glassco
- ☐ ck
- ☐ Goliad
- ☐ Gonzale
- ☐ s Gray
- ☐ Grayson
- ☐ Gregg
- ☐ Grimes
- ☐ Guadalu
- ☐ pe Hale
- ☐ Hall
- ☐ Hamilton
- ☐ Hansford
- ☐ Hardema
- ☐ n Hardin
- ☐ Harris
- ☐ Harrison
- ☐ Hartley
- ☐ Haskell
- ☐ Hays
- ☐ Hemphill
- ☐ Henderso
- ☐ n Hidalgo
- ☐ Hill
- ☐ Hockley
- ☐ Hood
- ☐ Hopkins
- ☐ Houston
- ☐ Howard
- ☐ Hudspeth
- ☐ Hunt
- ☐ Hutchins
- ☐ on Irion
- ☐ Jack
- ☐ Jackson
- ☐ Jasper
- ☐ Jeff
- ☐ Davis
- ☐ Jefferso
- ☐ n Jim
- ☐ Hogg
- ☐ Jim
- ☐ Wells
- ☐ Johnso
- ☐ n Jones
- ☐ Karnes
- ☐ Kaufma
- ☐ n
- ☐ Kendall
- ☐ Kenedy

Kent
Kerr
Kimble
King
Kinney
Kleberg
Knox

- ☐ Lamb
- ☐ Lampas
- ☐ as
- ☐ Lavaca
- ☐ Lee
- ☐ Leon
- ☐ Liberty
- ☐ Limesto
- ☐ ne
- ☐ Lipscom
- ☐ b Live
- ☐ Oak
- ☐ Llano
- ☐ Loving
- ☐ Lubbock
- ☐ Lynn
- ☐ Madison
- ☐ Marion
- ☐ Martin
- ☐ Mason
- ☐ Matagor
- ☐ da
- ☐ Maveric
- ☐ k
- ☐ McCullo
- ☐ ch
- ☐ McLenn
- ☐ an
- ☐ McMulle
- ☐ n
- ☐ Medina
- ☐ Menard
- ☐ Midland
- ☐ Milam
- ☐ Mills
- ☐ Mitchell
- ☐ Montagu
- ☐ e
- ☐ Montgomery
- ☐ Moor
- ☐ e
- ☐ Morri
- ☐ s
- ☐ Motle
- ☐ y
- ☐ Nacogdoch
- ☐ es Navarro
- ☐ Newton
- ☐ Nolan
- ☐ Nueces
- ☐ Ochiltree
- ☐ Oldham
- ☐ Orange
- ☐ Palo
- ☐ Pinto
- ☐ Panola
- ☐ Parker
- ☐ Parmer
- ☐ Pecos
- ☐ Polk
- ☐ Potter
- ☐ Presidio
- ☐ Rains
- ☐ Randall
- ☐ Reagan
- ☐ Real
- ☐ Red
- ☐ River
- ☐ Reeves

Refugio
Roberts
Robertso
n
Rockwal
l
Runnels
Rusk
Sabine
San
Augustine
San Jacinto
San
Patricio
San Saba
Schleicher
Scurry
Shackelfor
d

- ☐ Smith
- ☐ Somerv
- ☐ ell Starr
- ☐ Stephen
- ☐ s
- ☐ Sterling
- ☐ Stonew
- ☐ all
- ☐ Sutton
- ☐ Swisher
- ☐ Tarrant
- ☐ Taylor
- ☐ Terrell
- ☐ Terry
- ☐ Throckmort
- ☐ on Titus
- ☐ Tom
- ☐ Green
- ☐ Travis
- ☐ Trinity
- ☐ Tyler
- ☐ Upshur
- ☐ Upton
- ☐ Uvalde
- ☐ Val Verde
- ☐ Van
- ☐ Zandt
- ☐ Victoria
- ☐ Walker
- ☐ Waller
- ☐ Ward
- ☐ Washingt
- ☐ on Webb
- ☐ Wharton
- ☐ Wheeler
- ☐ Wichita
- ☐ Wilbarger
- ☐ Willacy
- ☐ Williamso
- ☐ n Wilson
- ☐ Winkler
- ☐ Wise
- ☐ Wood
- ☐ Yoakum
- ☐ Young

Zapata

Zavala

Don't

know

My program prefers not to answer this question.

Between [event-label], in which Utah county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All Utah Counties
- ☐ Beaver
- ☐ Box
- ☐ Elder
- ☐ Cache
- ☐ Carbon
- ☐ Daggett
- ☐ Davis
- ☐ Duches
- ☐ ne
- ☐ Emery
- ☐ Garfield
- ☐ Grand
- ☐ Iron
- ☐ Juab
- ☐ Kane
- ☐ Millar
- ☐ d
- ☐ Morga
- ☐ n
- ☐ Piute
- ☐ Rich
- ☐ Salt Lake
- ☐ San Juan
- ☐ Sanpete
- ☐ Sevier
- ☐ Summit
- ☐ Tooele
- ☐ Uintah
- ☐ Utah
- ☐ Wasatch
- ☐ Washingt
- ☐ on
- ☐ Wayne
- ☐ Weber
- ☐ Don't
- ☐ know
- ☐ My program prefers not to answer this question.

Between [event-label], in which Virginia county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

All Virginia
Counties
Accomack
Albemarle
Alexandria
Alleghany
Amelia
Amherst
Appomattox
Arlington
Augusta
Bath
Bedford
Bedford
Bland
Botetourt
Bristol
Brunswick
Buchanan
Buckingham
Buena Vista
Campbell
Caroline
Carroll
Charles
City
Charlotte
Charlottesville
Chesapeake
Chesterfield
Clarke
Clifton Forge
Colonial
Heights
Covington
Craig
Culpeper
Cumberland
Danville
Dickenson
Dinwiddie
Emporia
Essex
Fairfax
Fairfax
Falls
Church
Fauquier
Floyd
Fluvanna
Franklin
Franklin
Frederick
Fredericksburg
Galax
Giles
Gloucester
Goochland
Grayson
Greene
Greensville
Halifax
Hampton
Hanover

Harrisonburg
Henrico
Henry
Highland

07/30/2023
10:02pm

Hopewell
Isle of
☐ Wight
☐ James City
☐ King and Queen
☐ King
☐ George

projectredcap.org



- ☐ King
- ☐ William
- ☐ Lancaster
- ☐ Lee
- ☐ Lexington
- ☐ Loudoun
- ☐ Louisa
- ☐ Lunenbur
- ☐ g
- ☐ Lynchbur
- ☐ g Madison
- ☐ Manassas
- ☐ Manassas
- ☐ Park
- ☐ Martinsville
- ☐ Mathews
- ☐ Mecklenburg
- ☐ Middlesex
- ☐ Montgomery
- ☐ Nelson
- ☐ New Kent
- ☐ Newport
- ☐ News Norfolk
- ☐ Northampton
- ☐ Northumberla
- ☐ nd Norton
- ☐ Nottoway
- ☐ Orange
- ☐ Page
- ☐ Patrick
- ☐ Petersbu
- ☐ rg
- ☐ Pittsylva
- ☐ nia
- ☐ Poquoso
- ☐ n
- ☐ Portsmou
- ☐ th
- ☐ Powhata
- ☐ n
- ☐ Prince
- ☐ Edward
- ☐ Prince
- ☐ George
- ☐ Prince
- ☐ William
- ☐ Pulaski
- ☐ Radford
- ☐ Rappahann
- ☐ ock
- ☐ Richmond
- ☐ Richmond
- ☐ Roanoke
- ☐ Roanoke
- ☐ Rockbridge
- ☐ Rockingha
- ☐ m Russell
- ☐ Salem
- ☐ Scott
- ☐ Shenando
- ☐ ah Smyth
- ☐ South
- ☐ Boston
- ☐ Southampt
- ☐ on
- ☐ Spotsylvani
- ☐ a Stafford
- ☐ Staunton
- ☐ Suffolk
- ☐ Surry

Sussex
Tazewell
II
Virginia
Beach
Warren
Washington
Waynesboro
Westmoreland
Williamsburg
Winchester
Wise
Wythe
York
Don't know
My program prefers not to answer this question.

Between [event-label], in which US Virgin Islands county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All US Virgin Islands
- ☐ Counties Angaur
- ☐ Hatobohei
- ☐ t Kayangel
- ☐ Koror
- ☐ Ngarchelo
- ☐ ng
- ☐ Ngardmau
- ☐ Ngatpang
- ☐ Ngchesar
- ☐ Peleliu
- ☐ Sonsorol
- ☐ St. John
- ☐ St.
- ☐ Thomas
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Between [event-label], in which Vermont county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All Vermont Counties
- ☐ Addison
- ☐ Benningt
- ☐ on
- ☐ Caledonia
- ☐ Chittende
- ☐ n Essex
- ☐ Franklin
- ☐ Grand
- ☐ Isle
- ☐ Lamoille
- ☐ Orange
- ☐ Orleans
- ☐ Rutland
- ☐ Washingt
- ☐ on
- ☐ Windham
- ☐ Windsor
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Between [event-label], in which Washington county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All Washington
- ☐ Counties Adams
- ☐ Asotin
- ☐ Benton
- ☐ Chelan
- ☐ Clallam
- ☐ Clark
- ☐ Columb
- ☐ ia
- ☐ Cowlitz
- ☐ Dougla
- ☐ s Ferry
- ☐ Frankli
- ☐ n
- ☐ Garfield
- ☐ Grant
- ☐ Grays
- ☐ Harbor
- ☐ Island
- ☐ Jefferson
- ☐ King
- ☐ Kitsap
- ☐ Kittitas
- ☐ Klickitat
- ☐ Lewis
- ☐ Lincoln
- ☐ Mason
- ☐ Okanoga
- ☐ n Pacific
- ☐ Pend
- ☐ Oreille
- ☐ Pierce
- ☐ San Juan
- ☐ Skagit
- ☐ Skamania
- ☐ Snohomis
- ☐ h
- ☐ Spokane
- ☐ Stevens
- ☐ Thurston
- ☐ Wahkiaku
- ☐ m Walla
- Walla
- Whatcom
- Whitman
- Yakima
- Don't
- know
- My program prefers not to answer this question.

Between [event-label], in which Wisconsin county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

All Wisconsin
Counties Adams
Ashland
Barron
Bayfield
Brown
Buffalo
Burnett
Calumet
Chippewa
Clark
Columbia
Crawford
Dane
Dodge
Door
Douglas
Dunn
Eau Claire
Florence
Fond du Lac
Forest
Grant
Green
Green
Lake Iowa
Iron
Jackson
Jefferson
Juneau
Kenosha
Kewaunee
La Crosse
Lafayette
Langlade
Lincoln
Manitowish
Marathon
Marinette
Marquette
Menominee
Milwaukee
Monroe
Oconto
Oneida
Outagamie
Ozaukee
Pepin
Pierce
Polk
Portage
Price
Racine
Richland
Rock
Rusk
Sauk
Sawyer

☐ eau
☐ Vernon
☐ Vilas
☐ Walworth
☐ Washburn
☐ Washingto
☐ n
☐ Waukes
☐ ha



- ☐ Waupaca
- ☐ Waushar
- ☐ a
- ☐ Winneba
- ☐ go Wood
- ☐ Don't

know

My program prefers not to answer this question.

Between [event-label], in which West Virginia county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All West Virginia
- ☐ Counties Barbour
- ☐ Berkeley
- ☐ Boone
- ☐ Braxton
- ☐ Brooke
- ☐ Cabell
- ☐ Calhoun
- ☐ Clay
- ☐ Doddridg
- ☐ e Fayette
- ☐ Gilmer
- ☐ Grant
- ☐ Greenbri
- ☐ er
- ☐ Hampshi
- ☐ re
- ☐ Hancock
- ☐ Hardy
- ☐ Harrison
- ☐ Jackson
- ☐ Jefferson
- ☐ Kanawha
- ☐ Lewis
- ☐ Lincoln
- ☐ Logan
- ☐ Marion
- ☐ Marshall
- ☐ Mason
- ☐ McDowel
- ☐ I Mercer
- ☐ Mineral
- ☐ Mingo
- ☐ Mononga
- ☐ lia
- ☐ Monroe
- ☐ Morgan
- ☐ Nicholas
- ☐ Ohio
- ☐ Pendleto
- ☐ n
- ☐ Pleasants
- ☐ Pocahont
- ☐ as
- ☐ Preston
- ☐ Putnam
- ☐ Raleigh
- ☐ Randolph
- ☐ Ritchie
- ☐ Roane
- ☐ Summers
- ☐ Taylor
- ☐ Tucker
- ☐ Tyler
- ☐ Upshur
- ☐ Wayne
- ☐ Webster
- ☐ Wetzel
- ☐ Wirt
- ☐ Wood
- ☐ Wyoming
- ☐ Don't
- ☐ know
- ☐ My program prefers not to answer this question.

Between [event-label], in which Wyoming county(/-ies) did your harm reduction program provide IN-PERSON and/or ON-SITE services (including vending machines)? (Please select all that apply).

- ☐ All Wyoming Counties
- ☐ Albany
- ☐ Big Horn
- ☐ Campbell
- ☐ Carbon
- ☐ Converse
- ☐ Crook
- ☐ Fremont
- ☐ Goshen
- ☐ Hot
- ☐ Springs
- ☐ Johnson
- ☐ Laramie
- ☐ Lincoln
- ☐ Natrona
- ☐ Niobrara
- ☐ Park
- ☐ Platte
- ☐ Sheridan
- ☐ Sublette
- ☐ Sweetwat
- ☐ er Teton
- ☐ Uinta
- ☐ Washakie
- ☐ Weston
- ☐ Don't know
- ☐ My program prefers not to answer this question.

As of [quarterly reporting period], what was your harm reduction program's syringe provision model?

- ☐ One-for-one exchange (1:1)
- ☐ One-for-one (1:1) plus (i.e., one-for-one "rounding up")
- ☐ One-for-one exchange (1:1) with starter packs
- ☐ One-for-one (1:1) plus (i.e., "rounding up") with starter packs
- ☐ Need-based
- ☐ Other (please describe:) __
- ☐ Don't know
- ☐ My program prefers not to answer this question.

As of [quarterly reporting period], how many syringes does your program provide in a starter pack?

- ☐ Number of syringes: __
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Between [event-label], how many paid full-time employees: _____ services program have

- ☐ Number of full-time employees did your syringe
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Between [event-label], how many paid part-time employees: _____ services program have?

- ☐ Number of part-time employees did your syringe
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Between [event-label], how many hours per week did {ssp_qty_hrs_no} your syringe services program offer? Please enter the number of hours only. question.

- ☐ Number of hours: _____
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Note: If your program offers services in multiple locations or modes, please provide the sum of all service hours (e.g., 2 brick-and-mortar locations open 20 hours a week each [20x2] + 10 hours of mobile outreach per week= 50)"

In the last quarter, how many hours per week did your syringe services program offer services? Please enter _____ the number of hours only.

Note: If your program offers services in multiple locations or modes, please provide the sum of all service hours (e.g., 2 brick-and-mortar locations open 20 hours a week each [20x2] + 10 hours of mobile outreach per week= 50)"

Between [event_label], did you ever need to limit ("cap") the number of syringes each participant could receive because of inventory? (Note: If your program always has a limit to the number of syringes a participant can receive, regardless of inventory, please select "No.")

☐ Yes, cap quantity: ____
☐ Yes, but I don't know the cap quantity.
☐ Yes, but my program prefers not to disclose the cap quantity.
☐ No
☐ Don't know
☐ My program prefers not to answer this question.

When did the cap begin? (Note: Please enter date in MM-DD-YYY format.)

☐ Cap start date: ____
☐ Don't know
☐ My program prefers not to answer this question.

When did the cap end? (Note: Please enter date in MM-DD-YYY format.)

☐ Cap end date: ____
☐ The cap is still in place.
☐ Don't know
☐ My program prefers not to answer this question.

How many encounters did your syringe services program have between [event-label]? (Note: For the purposes of this survey, "encounter" refers to one participant visit to your harm reduction program or, for mail-based services, one mailing.)

☐ Number of encounters: ____
☐ Don't know
☐ My program prefers not to answer this question.

Between [event-label], how many unique participants _____

Number of participants:
☐ visited your syringe services program?
☐ Don't know
☐ My program prefers not to answer this question.

Between [event-label], how many new unique participants visited your syringe services program?

☐ Number of new participants: ____
☐ Don't know
☐ My program prefers not to answer this question.

Below, we ask about services your program offers. For the purposes of this evaluation, here is how we define a few key terms:

Referral means giving participants information about services.

Navigation is defined as a strategy that improves linkage to services, like assisting with appointment scheduling, transportation, and/or appointment accompaniment.

Provision means a service is provided directly to a participant by your organization or a partner, on-site or via telehealth.

Participants means the number of unique individuals receiving the specified service.

For clarification on any additional questions or terms, please refer to the survey reference guide, available [here](#).

When or the following service categories changed (i.e., your program began or ended services in this area) between [event-label]? (Please select all that apply.)

Participant means the number of unique individuals receiving the specified service.

- ☐ Hepatitis C Testing Services
- ☐ Offered Hepatitis C Treatment
- ☐ Services offered
- ☐ Hepatitis A and/or B Vaccination Services
- ☐ Offered Hepatitis B Testing Services
- ☐ offered
- ☐ Wound Care Services
- ☐ Offered HIV Testing
- ☐ Services Offered HIV
- ☐ Treatment Services
- ☐ Offered
- ☐ Pre-exposure Prophylaxis (PrEP) Services
- ☐ Offered Drug Checking Services
- ☐ Offered Naloxone Services
- ☐ Offered Medications for Opioid Use Disorder (MOUD) Services
- ☐ Offered Non-medication Treatment for Substance Use Disorder
- ☐ Offered
- ☐ None of the above
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Between [event-label], which of the following hepatitis C (HCV) testing services were offered at your harm reduction program, whether by you or a partner organization? (Please select all that apply.)

- ☐ HCV Rapid Testing
- ☐ HCV Laboratory-based RNA
- ☐ Testing Referrals to HCV
- ☐ Testing Navigation to HCV
- ☐ Testing
- ☐ None of the above
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Why is HCV rapid testing no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Why is HCV laboratory-based RNA testing no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Why are HCV testing referrals no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Why is HCV testing navigation no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- ☐ My program prefers not to answer this question.

How many hepatitis C (HCV) rapid tests did your program provide between [event-label]?

- ☐ Number of HCV rapid tests:
- ☐ Don't know
- ☐ My program prefers not to answer this question.

How many hepatitis C (HCV) laboratory-based RNA tests: _____
[event-label]? ☐ Number of HCV Laboratory-based RNA tests did your program provide between [event-label]?
☐ Don't know
☐ My program prefers not to answer this question.

How many hepatitis C (HCV) testing referrals did your referrals: _____
[event-label]? ☐ Number of HCV testing program provide between
☐ Don't know
☐ My program prefers not to answer this question.

How many encounters involved hepatitis C (HCV) testing encounters: _____
[event-label]? ☐ Number of HCV testing navigation navigation from your program between
☐ Don't know
☐ My program prefers not to answer this question.

How many participants received hepatitis C (HCV) HCV testing testing navigation from your program between navigation: _____
[event-label]? ☐ Don't know
☐ My program prefers not to answer this question.

Between [event-label], which of the following hepatitis C (HCV) treatment services were offered at your harm reduction program, whether by you or a partner organization? (Please select all that apply.)

☐ Referrals to HCV Treatment
☐ Navigation to HCV Treatment
☐ Provision of HCV Treatment in-person
☐ Provision of HCV Treatment via telehealth
☐ None of the above
☐ Don't know
☐ My program prefers not to answer this question.

Why are HCV treatment referrals no longer available at your program? (Please select all that apply.)

☐ Staff shortage
☐ Equipment /supplies shortage
☐ Dedicated funding ended or decreased Partnership with service provider ended Other
☐ (please describe): _____
☐ Don't know
☐ My program prefers not to answer this question.

Why is HCV treatment navigation no longer available at your program? (Please select all that apply.)

☐ Staff shortage
☐ Equipment /supplies shortage
☐ Dedicated funding ended or decreased Partnership with service provider ended Other
☐ (please describe): _____
☐ Don't know
☐ My program prefers not to answer this question.

Why is in-person HCV treatment no longer available at your program? (Please select all that apply.)

☐ Staff shortage
☐ Equipment /supplies shortage
☐ Dedicated funding ended or decreased Partnership with service provider ended Other
☐ (please describe): _____
☐ Don't know
☐ My program prefers not to answer this question.

question.

Why is HCV treatment via telehealth no longer available at your program?
(Please select all that apply.)

- ☐ Staff shortage
 - ☐ Equipment /supplies shortage
 - ☐ Dedicated funding ended or
 - ☐ decreased Partnership with
 - ☐ service provider ended Other
 - ☐ (please describe): _____
 - ☐ Don't know
- My program prefers not to answer this question.

How many hepatitis C treatment referrals did your program provide between [event-label]?

- ☐ Number of referrals: _
- ☐ Don't know
- ☐ My program prefers not to answer this question. My program does not collect this data.

How many encounters involved hepatitis C treatment navigation from your program between [event-label]?

- ☐ Number of encounters: _
- ☐ Don't know
- ☐ My program prefers not to answer this question. My program does not collect this data.

How many participants received hepatitis C treatment navigation from your program between [event-label]?

- ☐ Number of participants: _
- ☐ Don't know
- ☐ My program prefers not to answer this question. My program does not collect this data.

How many encounters involved hepatitis C treatment in-person between [event-label]?

- ☐ Number of encounters: _
- ☐ Don't know
- ☐ My program prefers not to answer this question. My program does not collect this data.

How many participants did your program provide with hepatitis C treatment in-person between [event-label]?

- ☐ Number of participants: _
- ☐ Don't know
- ☐ My program prefers not to answer this question. My program does not collect this data.

How many participants did your program provide with hepatitis C treatment via telehealth between [event-label]? question.

- ☐ Number of participants: _
- ☐ Don't know
- ☐ My program prefers not to answer this question.
- ☐ My program does not collect this data.

How many encounters involved hepatitis C treatment via telehealth between [event-label]?

- ☐ Number of encounters: _
- ☐ Don't know
- ☐ My program prefers not to answer this question. My program does not collect this data.

How many participants attained sustained hepatitis C clearance between [event-label]?

- ☐ Number of participants: _
- ☐ Don't know
- ☐ My program prefers not to answer this question. My program does not collect this data.

Between [event-label] , which of the following hepatitis A and hepatitis B vaccination services were offered at your harm reduction program, whether by you or a partner organization?

- ☐ Hepatitis A Vaccination
- ☐ Referrals to Hepatitis A
- ☐ Vaccination Navigation to Hepatitis A
- ☐ Hepatitis B Vaccination
- ☐ Referrals to Hepatitis B
- ☐ Vaccination Navigation to Hepatitis B
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Why is hepatitis A vaccination no longer available at your program? (Please

select all that apply.)

5

1

5

5

1

11

1

Why are referrals to hepatitis A vaccination no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or decreased Partnership with service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- My program prefers not to answer this question.

Why is hepatitis A navigation no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or decreased Partnership with service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- My program prefers not to answer this question.

Why is hepatitis B vaccination no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or decreased Partnership with service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- My program prefers not to answer this question.

Why are hepatitis B referrals no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or decreased Partnership with service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- My program prefers not to answer this question.

Why is hepatitis B vaccination navigation no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or decreased Partnership with service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- My program prefers not to answer this question.

How many hepatitis A vaccinations did your program provide between [event-label]?

- ☐ Number of vaccinations: _
- ☐ Don't know
- ☐ My program prefers not to answer this question. My program does not collect this data.

How many hepatitis A vaccination referrals did your program provide between [event-label]?

- ☐ Number of referrals: _
- ☐ Don't know
- ☐ My program prefers not to answer this question. My program does not collect this data.

How many participants received hepatitis A vaccination navigation from your program between [event-label]? ☒ Number of participants: _
☐ Don't know
☐ My program prefers not to answer this question. My program does not collect this data.

How many encounters involved hepatitis A vaccination navigation from your program between [event-label]? ☒ Number of encounters: _
☐ Don't know
☐ My program prefers not to answer this question. My program does not collect this data.

How many hepatitis B vaccinations did your program provide between [event-label]? ☐ Number of encounters: _
☐ Don't know
☐ My program prefers not to answer this question. My program does not collect this data.

How many hepatitis B vaccination referrals did your program provide between [event-label]? ☐ Number of encounters: _
☐ Don't know
☐ My program prefers not to answer this question. My program does not collect this data.

How many participants received hepatitis B vaccination navigation from your program between [event-label]? ☐ Number of encounters: _
☐ Don't know
☐ My program prefers not to answer this question. My program does not collect this data.

How many encounters involved hepatitis B vaccination navigation from your program between [event-label]? ☐ Number of encounters: _
☐ Don't know
☐ My program prefers not to answer this question. My program does not collect this data.

Between [event-label] , which of the following hepatitis B testing services were offered at your harm reduction program, whether by you or a partner organization?
☐ Hepatitis B Testing
☐ Referrals to Hepatitis B
☐ Testing Navigation to
☐ Hepatitis B Testing Don't know
☐ My program prefers not to answer this question.

Why is hepatitis B testing no longer available at your program? (Please select all that apply.)
☐ Staff shortage
☐ Equipment /supplies shortage
☐ Dedicated funding ended or decreased Partnership with service provider ended Other
☐ (please describe): _____
☐ Don't know
☐ My program prefers not to answer this question.

Why are referrals to hepatitis B testing no longer available at your program? (Please select all that apply.)
☐ Staff shortage
☐ Equipment /supplies shortage
☐ Dedicated funding ended or decreased Partnership with service provider ended Other
☐ (please describe): _____
☐ Don't know
☐ My program prefers not to answer this question.

Why is hepatitis B testing navigation no longer available at your program? (Please select all that apply.)
☐ Staff shortage
☐ Equipment /supplies shortage
☐ Dedicated funding ended or decreased Partnership with service provider ended Other
☐ (please describe): _____
☐ Don't know
☐ My program prefers not to answer this question.

How many hepatitis B tests did your program provide between [event-label]?

- ☐ Number of tests: ____
- ☐ Don't know
- ☐ My program prefers not to answer this question. My program does not collect this data.

How many hepatitis B testing referrals did your program provide between [event-label]?

- ☐ Number of referrals: ____
- ☐ Don't know
- ☐ My program prefers not to answer this question. My program does not collect this data.

How many encounters involved hepatitis B testing navigation from your program between [event-label]? ☐ Number of encounters: _
☐ Don't know
☐ My program prefers not to answer this question. My program does not collect this data.

How many participants received hepatitis B testing navigation from your program between [event-label]? ☐ Number of participants: _
☐ Don't know
☐ My program prefers not to answer this question. My program does not collect this data.

Between [event-label] , which of the following HIV testing services were offered at your harm reduction program, whether by you or a partner organization? (Please select all that apply.)

- ☐ HIV Rapid Testing
- ☐ HIV Laboratory-based
- ☐ Testing Referrals to HIV
- ☐ Testing Navigation to
- ☐ HIV Testing Don't know
- ☐ My program prefers not to answer this question.

Why is HIV rapid testing no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Why is HIV laboratory-based RNA testing no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Why are referrals to HIV testing no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Why is HIV testing navigation no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- ☐ My program prefers not to answer this question.

How many HIV rapid tests did your program provide ☐ Number of HIV rapid tests:
☐
☐
☐

between [event-label]?

Don't know

My program prefers not to answer this question. My program does not collect this data.

How many HIV laboratory-based RNA tests did your program provide between [event-label]?

☐ Number of HIV RNA tests:

☐ Don't know

☐ My program prefers not to answer this question. My program does not collect this data.

How many HIV testing referrals did your program provide between [event-label]?

- ☐ Number of referrals: __
- ☐ Don't know
- ☐ My program prefers not to answer this question. My program does not collect this data.

How many participants received HIV testing navigation from your program between [event-label]?

- ☐ Number of participants: _
- ☐ Don't know
- ☐ My program prefers not to answer this question. My program does not collect this data.

How many encounters involved HIV testing navigation from your program between [event-label]?

- ☐ Number of encounters: _
- ☐ Don't know
- ☐ My program prefers not to answer this question. My program does not collect this data.

Between [event-label] , which of the following PrEP services were offered at your harm reduction program, whether by you or a partner organization? (Please select all that apply.)

- Referrals to PrEP services
- ☐ Navigation to PrEP
- ☐ services Provision of PrEP
- ☐ in-person Provision of
- ☐ PrEP via telehealth Don't
- ☐ know
- ☐ My program prefers not to answer this question.

Why are referrals to PrEP services no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- My program prefers not to answer this question.

Why is navigation to PrEP services no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- My program prefers not to answer this question.

Why is provision of PrEP in-person no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- My program prefers not to answer this question.

Why is provision of PrEP via telehealth no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐
- ☐

(please describe): _____
Don't know

My program prefers not to answer this question.

How many referrals to PrEP services did your program provide between [event-label]?

- ☐ Number of referrals: __
- ☐ Don't know
- ☐ My program prefers not to answer this question. My program does not collect this data.

How many participants received PrEP services navigation from your program between [event-label]?

- ☐ Number of participants: _
- ☐ Don't know
- ☐ My program prefers not to answer this question. My program does not collect this data.

How many encounters involved PrEP services navigation from your program between [event-label]?

- ☐ Number of encounters: _
- ☐ Don't know
- ☐ My program prefers not to answer this question. My program does not collect this data.

How many PrEP prescriptions did your program provide prescriptions: _____

- ☐ Number of in-person in-person between [event-label]?
- ☐ Don't know
- ☐ My program prefers not to answer this question. My program does not collect this data.

How many PrEP prescriptions did your program provide prescriptions: _____ telehealth?

- ☐ Number of telehealth between [event-label] via
- ☐ Don't know
- ☐ My program prefers not to answer this question. My program does not collect this data.

Between [event-label] , which of the following HIV treatment services were offered at your harm reduction program, whether by you or a partner organization? (Please select all that apply.)

- ☐ Referrals to HIV Treatment
- ☐ Navigation to HIV Treatment
- ☐ Provision of HIV Treatment in-person
- ☐ Provision of HIV Treatment via telehealth
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Why are referrals to HIV treatment no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or decreased Partnership with service provider ended Other (please describe): _____
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Why is navigation to HIV treatment no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or decreased Partnership with service provider ended Other (please describe): _____
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Why is in-person HIV treatment no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or decreased Partnership with service provider ended Other (please describe): _____
- ☐ Don't know

My program prefers not to answer this

question.

Why is HIV treatment via telehealth
no longer available at your program?
(Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know

My program prefers not to answer this
question.

How many referrals to HIV treatment did your program provide between [event-label]? ☐ Number of encounters: _
☐ Don't know
☐ My program prefers not to answer this question. My program does not collect this data.

How many participants received HIV treatment navigation from your program between [event-label]? ☐ Number of participants: _
☐ Don't know
☐ My program prefers not to answer this question. My program does not collect this data.

How many encounters involved HIV treatment navigation from your program between [event-label]? ☐ Number of encounters: _
☐ Don't know
☐ My program prefers not to answer this question. My program does not collect this data.

How many participants did your program provide with HIV treatment in-person between [event-label]? ☐ Number of participants: _
☐ Don't know
☐ My program prefers not to answer this question. My program does not collect this data.

How many encounters involved HIV treatment in-person between [event-label]? ☐ Number of encounters: _
☐ Don't know
☐ My program prefers not to answer this question. My program does not collect this data.

How many participants did your program provide with HIV treatment via telehealth between [event-label]? ☐ Number of participants: _
☐ Don't know
☐ My program prefers not to answer this question. My program does not collect this data.

How many encounters involved HIV treatment via telehealth between [event-label]? ☐ Number of encounters: _
☐ Don't know
☐ My program prefers not to answer this question. My program does not collect this data.

Between [event-label] , which of the following wound care services were offered at your harm reduction program, whether by you or a partner organization? (Please select all that apply.)

☐ Wound care (in-person) Wound care
☐ supplies
☐ Referrals or navigation to wound care services
☐ None of the above
☐ Don't know
☐ My program prefers not to answer this question.

Why is wound care no longer available at your program? (Please select all that apply.)

☐ Staff shortage
☐ Equipment /supplies shortage
☐ Dedicated funding ended or decreased
☐ Partnership with service provider ended
☐ Other (please describe): _____
☐ Don't know
☐ My program prefers not to answer this question.

Why are wound care supplies no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know

My program prefers not to answer this question.

Why are referrals or navigation to wound care services no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- ☐ My program prefers not to answer this question.

How many encounters involved providing wound care services between [event-label] at your program?

- ☐ Number of encounters: _
- ☐ Don't know
- ☐ My program prefers not to answer this question. My program does not collect this data.

How many encounters involved navigation or referrals to wound care services from your program between [event-label]? question.

- ☐ Number of encounters: _
- ☐ Don't know
- ☐ My program prefers not to answer this question.
- ☐ My program does not collect this data.

Between [event-label], which of the following drug checking services were offered at your harm reduction program, whether by you or a partner organization? (Please select all that apply.)

- ☐ Fentanyl Test Strips
- ☐ Xylazine Test Strips
- ☐ Benzodiazepine Test Strips
- ☐ Non-test strip drug-checking on-site (e.g., mass spectrometry)
- ☐ Non-test strip drug-checking off-site (e.g., mail-in drug-checking)
- ☐ None of the above
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Why are fentanyl test strips no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Why are xylazine test strips no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Why are benzodiazepine test strips no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- ☐ My program prefers not to answer this question.

question.

Why is non-test strip drug-checking on-site (e.g., mass spectrometry) no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
 - ☐ Equipment /supplies shortage
 - ☐ Dedicated funding ended or
 - ☐ decreased Partnership with
 - ☐ service provider ended Other
 - ☐ (please describe): _____
 - ☐ Don't know
- My program prefers not to answer this question.

Why is non-test strip drug-checking off-site (e.g., mail-in drug-checking) no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- ☐ My program prefers not to answer this question.

How many encounters involved on-site, non-test-strip drug checking services at your program between [event-label]? question.

- ☐ Number of encounters: _
- ☐ Don't know
- ☐ My program prefers not to answer this
- ☐ My program does not collect this data.

How many encounters involved off-site, non-test-strip drug checking services at your program between [event-label]? question.

- ☐ Number of encounters: _
- ☐ Don't know
- ☐ My program prefers not to answer this
- ☐ My program does not collect this data.

Between [event-label] , which of the following naloxone access options were offered at your harm reduction program, whether by you or a partner organization?

- ☐ Naloxone Access
- ☐ Referrals Naloxone
- ☐ Doses
- ☐ None of the
- ☐ above Don't
- ☐ know
- ☐ My program prefers not to answer this question.

Why are naloxone access referrals no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Why are naloxone doses no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Between [event-label], which of the following Medications for Opioid Use Disorder (MOUD) services were offered at your harm reduction program, whether by you or a partner organization?

- ☐ Referrals for Medications for Opioid Use
- ☐ Disorder Navigation to Medications for
- ☐ Opioid Use Disorder Provision of
- ☐ Medications for Opioid Use Disorder in-person
- ☐ Provision of Medications for Opioid Use Disorder via telehealth
- ☐ None of the above
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Why are MOUD referrals no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know

My program prefers not to answer this question.

Why is navigation to MOUD no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Why is in-person MOUD provision no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Why is MOUD via telehealth no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Between [event-label], which of the following non-medication substance use disorder treatment services were offered at your harm reduction program, whether by you or a partner organization?

- ☐ Referrals for Non-Medication Substance Use Disorder Treatment
- ☐ Navigation to Non-Medication Substance Use Disorder Treatment
- ☐ Provision of Non-Medication Substance Use Disorder Treatment in-person
- ☐ Provision of Non-Medication Substance Use Disorder Treatment via telehealth
- ☐ None of the above
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Why are referrals to non-medication substance use disorder treatment no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Why is navigation to non-medication substance use disorder treatment no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Why is in-person non-medication substance use disorder treatment no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know

My program prefers not to answer this question.

Why is non-medication substance use disorder treatment via telehealth no longer available at your program? (Please select all that apply.)

- ☐ Staff shortage
- ☐ Equipment /supplies shortage
- ☐ Dedicated funding ended or
- ☐ decreased Partnership with
- ☐ service provider ended Other
- ☐ (please describe): _____
- ☐ Don't know

My program prefers not to answer this question.

These final questions are about how NASTAD, VOCAL-NY, and UW can best support you.

Does your harm reduction program currently have any

Yes technical assistance needs that you'd like our support

with?

- ☐ No
- ☐ Don't know
- ☐ My program prefers not to answer this question.

What is the best e-mail address to contact you with a response to this TA request?

- ☐ E-mail address: ____
- ☐ Don't know
- ☐ My program prefers not to answer this question.

Please briefly describe the support you need (e.g., "writing an outreach worker job description;" "developing encounter forms," etc.):
question.

- ☐ Description: ____
- ☐ Don't know
- ☐ My program prefers not to answer this question.