HOUSE No. 1981

The Commonwealth of Massachusetts

PRESENTED BY:

Dylan A. Fernandes and Marjorie C. Decker

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act relative to preventing overdose deaths and increasing access to treatment.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
Dylan A. Fernandes	Barnstable, Dukes and Nantucket	1/16/2023
Marjorie C. Decker	25th Middlesex	1/19/2023
Mindy Domb	3rd Hampshire	1/23/2023
Lindsay N. Sabadosa	1st Hampshire	1/23/2023
Christine P. Barber	34th Middlesex	1/26/2023
Jessica Ann Giannino	16th Suffolk	2/3/2023
Joanne M. Comerford	Hampshire, Franklin and Worcester	2/3/2023
David Henry Argosky LeBoeuf	17th Worcester	2/3/2023
Jack Patrick Lewis	7th Middlesex	2/3/2023
Steven Ultrino	33rd Middlesex	2/3/2023
Steven Owens	29th Middlesex	2/3/2023
Vanna Howard	17th Middlesex	2/3/2023
David Paul Linsky	5th Middlesex	2/3/2023
Kay Khan	11th Middlesex	2/3/2023
Erika Uyterhoeven	27th Middlesex	2/3/2023
Kathleen R. LaNatra	12th Plymouth	2/3/2023
Patricia A. Duffy	5th Hampden	2/3/2023
John F. Keenan	Norfolk and Plymouth	2/3/2023

Antonio F. D. Cabral	13th Bristol	2/3/2023
Carmine Lawrence Gentile	13th Middlesex	2/3/2023
Andres X. Vargas	3rd Essex	2/3/2023
David M. Rogers	24th Middlesex	2/3/2023
William C. Galvin	6th Norfolk	2/6/2023
Samantha Montaño	15th Suffolk	2/6/2023
Jon Santiago	9th Suffolk	2/6/2023
Paul McMurtry	11th Norfolk	2/9/2023
James B. Eldridge	Middlesex and Worcester	2/10/2023
Tricia Farley-Bouvier	2nd Berkshire	2/14/2023
Kate Donaghue	19th Worcester	2/14/2023
Carol A. Doherty	3rd Bristol	2/20/2023
Natalie M. Higgins	4th Worcester	2/22/2023
Tram T. Nguyen	18th Essex	2/27/2023
James J. O'Day	14th Worcester	2/28/2023
Sean Garballey	23rd Middlesex	2/28/2023
Michelle L. Ciccolo	15th Middlesex	3/2/2023
Sally P. Kerans	13th Essex	3/7/2023
Kevin G. Honan	17th Suffolk	3/14/2023
Tommy Vitolo	15th Norfolk	3/20/2023
Natalie M. Blais	1st Franklin	3/26/2023
Mike Connolly	26th Middlesex	3/29/2023
Jennifer Balinsky Armini	8th Essex	4/2/2023
Christopher Hendricks	11th Bristol	4/20/2023
Ruth B. Balser	12th Middlesex	4/28/2023
John J. Mahoney	13th Worcester	5/16/2023
James C. Arena-DeRosa	8th Middlesex	6/22/2023
John Barrett, III	1st Berkshire	6/22/2023
Danillo A. Sena	37th Middlesex	7/27/2023
Margaret R. Scarsdale	1st Middlesex	7/27/2023
Kenneth I. Gordon	21st Middlesex	10/18/2023
Daniel M. Donahue	16th Worcester	10/19/2023
Bud L. Williams	11th Hampden	10/24/2023
Estela A. Reyes	4th Essex	10/25/2023
Peter Capano	11th Essex	11/3/2023
Judith A. Garcia	11th Suffolk	11/6/2023
Jeffrey N. Roy	10th Norfolk	11/9/2023
Adam Scanlon	14th Bristol	12/1/2023
Mary S. Keefe	15th Worcester	12/4/2023

HOUSE No. 1981

By Representatives Fernandes of Falmouth and Decker of Cambridge, a petition (accompanied by bill, House, No. 1981) of Dylan A. Fernandes, Marjorie C. Decker and others relative to preventing overdose deaths and increasing access to treatment. Mental Health, Substance Use and Recovery.

The Commonwealth of Massachusetts

In the One Hundred and Ninety-Third General Court (2023-2024)

An Act relative to preventing overdose deaths and increasing access to treatment.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

SECTION 1. Notwithstanding any general or special law to the contrary, there shall be a

10-year pilot program establishing overdose prevention centers that utilize harm reduction tools,

including clinical monitoring of the consumption of pre-obtained controlled substances in the

presence of trained staff, for the purpose of reducing the risks of disease transmission and

5 preventing overdose deaths.

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The department of public health shall promulgate rules and regulations necessary for the

operation of an overdose prevention center, including but not limited to, establishing a process to

apply for licensure. Entities that provide health and social services, including private

organizations and municipal departments, shall be eligible to apply for licensure to operate an

overdose prevention center. Approval from the local board of health to participate in the pilot

program shall be required before an entity may apply for licensure to operate an overdose

12 prevention center.

14	department's approval or denial of licensure, in writing, within 45 days of a completed
15	application to the applicant and to the local board of health where the overdose prevention center
16	would be located. A denial of licensure shall not prohibit an entity from submitting a future
17	application at any time.
18	To be considered for licensure, an overdose prevention center shall, at a minimum:
19	(1) provide a hygienic space where participants may consume pre-obtained controlled
20	substances;
21	(2) provide adequate staffing by healthcare professionals or other trained staff or
22	volunteers;
23	(3) provide sterile injection supplies, collect used hypodermic needles and syringes, and
24	provide secure hypodermic needle and syringe disposal services;
25	(4) provide education on safe consumption practices, proper disposal of hypodermic
26	needles and syringes, and overdose prevention;
27	(5) monitor participants for potential overdose and administer first aid, if needed;
28	(6) provide access or referrals to addiction treatment;
29	(7) educate participants on the risks of contracting HIV and viral hepatitis, and provide

The department of public health shall send notification and an explanation of the

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(8) provide access to naloxone or referrals to obtain naloxone for participants;

access or referrals to prevention, screening, and treatment services;

- 32 (9) ensure the confidentiality of participants using an anonymous unique identifier, if 33 needed;
- (10) provide trainings for staff members to deliver services offered by the overdose
 prevention center or make available any trainings provided by the department of public health, if
 required;
- (11) establish standard security procedures in consultation with local law enforcement;
 and
 - (12) establish standard policies that facilitate communication and education with local businesses, community members, local law enforcement, and first responders.

A licensed overdose prevention center shall be authorized as a needle exchange program under section 215 of chapter 111 of the General Laws.

Notwithstanding any general or special law or rule or regulation to the contrary, the following persons shall not be arrested, charged, or prosecuted for any criminal offense, including, but not limited to, charges pursuant to sections 13, 32I, 34, 43 or 47 of chapter 94C of the General Laws, or be subject to any civil or administrative penalty, including seizure or forfeiture of data records, assets or property or disciplinary action by a professional licensing board, credentialing restriction, contractual liability, and action against clinical staff or other employment action, or be denied any right or privilege, solely for participation or involvement in an overdose prevention center licensed by the department of public health pursuant to this section: (i) a participant; (ii) a staff member or administrator of a licensed overdose prevention center, including a health-care professional, manager, employee, or volunteer; (iii) a property owner who owns property at which a licensed overdose prevention center is located and

operates, (iv) the entity operating the licensed overdose prevention center. Entering or exiting a licensed overdose prevention center cannot serve as the basis for, or a fact contributing to the existence of, reasonable suspicion or probable cause to conduct a search or seizure.

The department of public health shall submit a report to the clerks of the senate and house of representatives and to the senate and house chairs of the joint committee on mental health, substance use and recovery. The report shall include site-specific and aggregate data for all licensed overdose prevention centers including but not limited to: (i) number of participant visits; (ii) number of overdoses reversed; (iii) number of referrals to addiction treatment and (iv) number of hypodermic needles and syringes collected and distributed. The report shall be submitted no later than 18 months after implementation of the pilot program, and annually thereafter.

SECTION 2. The department of public of health shall promulgate regulations to implement section 1 within 6 months of the effective date of this act.