

As Passed by the House

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Am. H. B. No. 92

Representatives Antonio, Sears

**Cosponsors: Representatives Foley, Rogers, Ashford, Stinziano, Fedor,
Strahorn, Brown, Letson, Barnes, Bishoff, Johnson, Boyd, Celebrezze,
Driehaus, Hackett, Hagan, R., McGregor, O'Brien, Ramos, Sheehy, Smith,
Sprague, Terhar, Williams, Winburn**

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A B I L L

To enact section 3707.37 of the Revised Code to 1
authorize the establishment of syringe exchange 2
programs. 3

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:

Section 1. That section 3707.37 of the Revised Code be 4
enacted to read as follows: 5

Sec. 3707.37. (A) As used in this section: 6

(1) "Bloodborne pathogens" means the human immunodeficiency 7
virus (HIV), hepatitis B virus, and hepatitis C virus. 8

(2) "Board of health" means the board of health of a city or 9
general health district or the authority having the duties of a 10
board of health under section 3709.05 of the Revised Code. 11

(3) "Controlled substance" has the same meaning as in section 12
3719.01 of the Revised Code. 13

(4) "Injection drug user" means a person who uses a syringe 14
or hypodermic needle to inject a controlled substance into the 15

person's own body. 16

(B) A board of health may establish a syringe exchange 17
program for the purpose of reducing the transmission of bloodborne 18
pathogens among the residents of the health district represented 19
by the board. The cost of the program is the responsibility of the 20
board of health. 21

(C) A syringe exchange program shall, at a minimum, do all of 22
the following with respect to the program's operation and its 23
participants: 24

(1) Provide a sterile syringe or hypodermic needle to each 25
injection drug user in exchange for each respective used syringe 26
or needle collected from the user; 27

(2) Dispose of used syringes and hypodermic needles in 28
accordance with Chapter 3734. of the Revised Code; 29

(3) Provide safety protocols and education regarding handling 30
and disposal of syringes and hypodermic needles to each injection 31
drug user; 32

(4) Provide each injection drug user with the information and 33
means to protect the user, any person sharing the user's syringes 34
or needles, and the user's family from exposure to bloodborne 35
pathogens; 36

(5) Provide counseling to each injection drug user regarding 37
exposure to bloodborne pathogens; 38

(6) Refer each injection drug user to the board of alcohol, 39
drug addiction, and mental health services that serves the area in 40
which the health district is located; 41

(7) Encourage each injection drug user to seek appropriate 42
medical, mental health, or social services; 43

(8) Use a recordkeeping system that ensures that the identity 44
of each injection drug user remains anonymous; 45

(9) Provide each injection drug user with a wallet certificate that states that the user is an active participant in the program. 46
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(D) If a board of health establishes a syringe exchange program, the board shall establish policies and procedures for the program. The policies and procedures shall be developed in consultation with the interested parties identified in division (E)(1) of this section and, at a minimum, shall address all of the following: 49
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(1) Subject to the standards established in rules adopted under division (I) of this section, the content of the wallet certificate to be provided to each active participant in the program, including the certificate's expiration date as determined by the board, and the distribution of certificates to participants; 55
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(2) Notification of each relevant law enforcement agency regarding the program, including the location of each facility to be used by the program and the immunity from criminal liability granted by division (G) of this section; 61
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(3) Provision of care to program participants in need of immediate medical attention at the time they receive syringes or hypodermic needles through the program; 65
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(4) Compliance with applicable state and federal rules and regulations governing participant confidentiality. 68
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(E)(1) Before establishing a syringe exchange program, the board of health shall consult with all of the following interested parties from the health district represented by the board: 70
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(a) Law enforcement representatives; 73

(b) Prosecutors, as defined in section 2935.01 of the Revised Code; 74
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<u>(c) Representatives of alcohol and drug addiction programs</u>	76
<u>certified under section 3793.06 of the Revised Code;</u>	77
<u>(d) Persons recovering from substance abuse;</u>	78
<u>(e) Relevant private, nonprofit organizations, including</u>	79
<u>hepatitis C and HIV advocacy organizations;</u>	80
<u>(f) Residents of the health district;</u>	81
<u>(g) The board of alcohol, drug addiction, and mental health</u>	82
<u>services that serves the area in which the health district is</u>	83
<u>located;</u>	84
<u>(h) Any other interested parties selected by the board of</u>	85
<u>health.</u>	86
<u>(2) When consulting with the interested parties, the board of</u>	87
<u>health and the interested parties shall consider, at a minimum,</u>	88
<u>all of the following:</u>	89
<u>(a) The scope of transmission of bloodborne pathogens through</u>	90
<u>syringe or hypodermic needle use in the health district;</u>	91
<u>(b) The population to be served by the syringe exchange</u>	92
<u>program;</u>	93
<u>(c) Concerns of the law enforcement representatives;</u>	94
<u>(d) Day-to-day administration of the program, including the</u>	95
<u>hiring of employees or use of volunteers.</u>	96
<u>(F) A board of health may contract with a private, nonprofit</u>	97
<u>organization to operate a syringe exchange program on behalf of</u>	98
<u>the board. A contract may not be in effect longer than one year.</u>	99
<u>Before a contract expires, the board shall review the</u>	100
<u>contract to determine whether it should be renewed. During the</u>	101
<u>review, the board shall consult with interested parties selected</u>	102
<u>by the board and consider the issues listed under division (E)(2)</u>	103
<u>of this section. After the review, if the board determines that</u>	104

the organization has satisfactorily carried out the purpose of the 105
program and will continue to do so, the board may renew the 106
contract. 107

(G)(1) An employee or volunteer of a syringe exchange program 108
when carrying out the duties of the program is not subject to 109
criminal liability under any of the following: 110

(a) Section 2923.24 of the Revised Code; 111

(b) Section 2925.12 of the Revised Code; 112

(c) Division (C)(1) of section 2925.14 of the Revised Code 113
regarding the prohibition against illegal possession of drug 114
paraphernalia; 115

(d) Division (C) or (D) of section 3719.172 of the Revised 116
Code regarding the prohibition against furnishing a hypodermic to 117
another person. 118

(2) An injection drug user who is within one thousand feet of 119
a program facility and is in possession of a wallet certificate 120
stating that the user is an active participant in the program is 121
not subject to criminal liability under any of the following with 122
regard to the user's possession of a syringe or hypodermic needle: 123

(a) Section 2923.24 of the Revised Code; 124

(b) Section 2925.12 of the Revised Code; 125

(c) Division (C)(1) of section 2925.14 of the Revised Code 126
regarding the prohibition against illegal possession of drug 127
paraphernalia. 128

(H) A board of health that establishes a syringe exchange 129
program shall include details about the program in its annual 130
report prepared under section 3707.47 of the Revised Code. 131

(I) The department of alcohol and drug addiction services 132
shall adopt rules establishing statewide standards for the wallet 133
certificates to be issued to participants of syringe exchange 134

programs. The rules shall be adopted in accordance with Chapter
119. of the Revised Code.

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