SENATE, No. 1073

STATE OF NEW JERSEY

219th LEGISLATURE

INTRODUCED JANUARY 30, 2020

Sponsored by:
Senator JOSEPH P. CRYAN
District 20 (Union)

SYNOPSIS

Authorizes public libraries to maintain supply of opioid antidotes and permits emergency administration of opioid antidote by librarian or other trained library employee.

CURRENT VERSION OF TEXT

As introduced.

AN ACT concerning the emergency administration of opioid antidotes in public libraries, supplementing chapter 73 of Title 18A of the New Jersey Statutes, and amending P.L.2013, c.46.

BE IT ENACTED *by the Senate and General Assembly of the State of New Jersey:*

1. (New section) As used in this act:

"Opioid antidote" means any drug, regardless of dosage amount or method of administration, which has been approved by the United States Food and Drug Administration (FDA) for the treatment of an opioid overdose. "Opioid antidote" includes, but is not limited to, naloxone hydrochloride, in any dosage amount, which is administered through nasal spray or any other FDA-approved means or methods.

"Opioid overdose" means an acute condition including, but not limited to, extreme physical illness, decreased level of consciousness, respiratory depression, coma, or death resulting from the consumption or use of an opioid drug or another substance with which an opioid drug was combined, and that a layperson would reasonably believe to require medical assistance.

"Public library" means a library that serves free of charges all residents of an area without discrimination and receives its financial support, in whole or in part, from public funds.

2. (New section) a. A public library may obtain a supply of opioid antidotes pursuant to a standing order issued to the library pursuant to section 4 of the "Overdose Prevention Act," P.L.2013, c.46 (C.24:6J-4) or from a pharmacy pursuant to a standing order issued pursuant to section 1 of P.L.2017, c.88 (C.45:14-67.2), to be maintained in a secure location in the library for the purpose of responding to an opioid overdose emergency. A public library may apply for a grant pursuant to section 4 of this act for the costs of (1) purchasing opioid antidotes, and (2) training to enable employees of the library to administer opioid antidotes.

b. A public library that maintains a supply of opioid antidotes shall ensure that at least one librarian or other library employee has received training on standardized protocols for the administration of an opioid antidote to a person who experiences an opioid overdose. The training shall include the overdose prevention information described in subsection a. of section 5 of the "Overdose Prevention Act," P.L.2013, c.46 (C.24:6J-5). The State Librarian, in consultation with the Department of Human Services, shall specify an appropriate entity or entities to provide the training to library employees.

EXPLANATION – Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined <u>thus</u> is new matter.

c. A librarian or other library employee who is trained pursuant to subsection b. of this section may administer an opioid antidote to any person whom the librarian or employee in good faith believes is experiencing an opioid overdose. The librarian or employee shall only be authorized to administer opioid antidotes after receiving the training required under subsection b. of this section.

d. A librarian or library employee who administers an opioid antidote shall ensure that the overdose victim is transported, or is offered transportation, to a hospital by emergency medical services personnel or another first responder after the administration of the opioid antidote, even if the person's symptoms appear to have resolved.

3. (New section) No public library, librarian, library employee, pharmacist, or a prescriber of opioid antidotes for a library through a standing order, shall be held liable for any good faith act or omission consistent with the provisions of this act. Good faith shall not include willful misconduct, gross negligence, or recklessness.

4. (New section) a. The Commissioner of Human Services may establish a grant program, based upon any monies appropriated by the Legislature, to award grants to public libraries for the purposes of purchasing opioid antidotes and providing training to enable employees of the library to administer opioid antidotes. In addition to any monies appropriated by the Legislature, the commissioner may seek money from the federal government, private foundations, and any other source to fund the grants established pursuant to this section.

b. To be eligible for consideration for a grant award, a public library shall submit an application to the Department of Human Services, in accordance with application procedures and requirements prescribed by the commissioner. A grant application shall include, at a minimum, information regarding: the quantity of opioid antidotes the library intends to obtain; the number of library employees who are, or will be, trained in administering opioid antidotes; the prevalence of opioid abuse and overdose deaths in the geographic area where the library is located; and any other information specified by the commissioner.

c. The commissioner shall establish selection criteria for the awarding of grant funds under the program and shall award grants based upon review of the applications and subject to the availability of funds. The commissioner shall establish the amount for each grant that is approved.

5. Section 3 of P.L.2013, c.46 (C.24:6J-3) is amended to read as follows:

3. As used in this act:

"Commissioner" means the Commissioner of Human Services.

"Drug overdose" means an acute condition including, but not limited to, physical illness, coma, mania, hysteria, or death resulting from the consumption or use of a controlled dangerous substance or another substance with which a controlled dangerous substance was combined and that a layperson would reasonably believe to require medical assistance.

"Emergency medical response entity" means an organization, company, governmental entity, community-based program, or healthcare system that provides pre-hospital emergency medical services and assistance to opioid or heroin addicts or abusers in the event of an overdose. "Emergency medical response entity" includes, but is not limited to, a first aid, rescue and ambulance squad or other basic life support (BLS) ambulance provider; a mobile intensive care provider or other advanced life support (ALS) ambulance provider; an air medical service provider; or a fire-fighting company or organization, which squad, provider, company, or organization is qualified to send paid or volunteer emergency medical responders to the scene of an emergency.

"Emergency medical responder" means a person, other than a health care practitioner, who is employed on a paid or volunteer basis in the area of emergency response, including, but not limited to, an emergency medical technician, a mobile intensive care paramedic, or a fire fighter, acting in that person's professional capacity.

"Health care practitioner" means a prescriber, pharmacist, or other individual whose professional practice is regulated pursuant to Title 45 of the Revised Statutes, and who, in accordance with the practitioner's scope of professional practice, prescribes or dispenses an opioid antidote.

"Medical assistance" means professional medical services that are provided to a person experiencing a drug overdose by a health care practitioner, acting within the practitioner's scope of professional practice, including professional medical services that are mobilized through telephone contact with the 911 telephone emergency service.

"Opioid antidote" means any drug, regardless of dosage amount or method of administration, which has been approved by the United States Food and Drug Administration (FDA) for the treatment of an opioid overdose. "Opioid antidote includes, but is not limited to, naloxone hydrochloride, in any dosage amount, which is administered through nasal spray or any other FDA-approved means or methods.

"Patient" means a person who is at risk of an opioid overdose or a person who is not at risk of an opioid overdose who, in the person's individual capacity, obtains an opioid antidote from a health care practitioner, professional, or professional entity for the purpose of administering that antidote to another person in an emergency, in accordance with subsection c. of section 4 of

P.L.2013, c.46 (C.24:6J-4). "Patient" includes a professional who is acting in that professional's individual capacity, but does not include a professional who is acting in a professional capacity.

"Prescriber" means a health care practitioner authorized by law to prescribe medications who, acting within the practitioner's scope of professional practice, prescribes an opioid antidote. "Prescriber" includes, but is not limited to, a physician, physician assistant, or advanced practice nurse.

"Professional" means a person, other than a health care practitioner, who is employed on a paid basis or is engaged on a volunteer basis in the areas of substance abuse treatment or therapy, criminal justice, or a related area, and who, acting in that person's professional or volunteer capacity, obtains an opioid antidote from a health care practitioner for the purposes of dispensing or administering that antidote to other parties in the course of business or volunteer activities. "Professional" includes, but is not limited to, a sterile syringe access program employee, or a law enforcement official.

"Professional entity" means an organization, company, governmental entity, community-based program, sterile syringe access program, public library, or any other organized group that employs two or more professionals who engage, during the regular course of business or volunteer activities, in direct interactions with opioid or heroin addicts or abusers or other persons susceptible to opioid overdose, or with other persons who are in a position to provide direct medical assistance to opioid or heroin addicts or abusers in the event of an overdose.

“Public library” means the same as that term is defined in section 1 of P.L. , c. (C.) (pending before the Legislature as this bill).

"Recipient" means a patient, professional, professional entity, emergency medical responder, emergency medical response entity, school, school district, or school nurse who is prescribed or dispensed an opioid antidote in accordance with section 4 of P.L.2013, c.46 (C.24:6J-4).

(cf: P.L.2018, c.106, s.7)

6. This act shall take effect on the first day of the fourth month next following the date of enactment.

STATEMENT

This bill permits a public library to obtain a supply of opioid antidotes to be maintained in a secure location in the library for the purpose of responding to an opioid overdose emergency. A public library may obtain the opioid antidotes through a standing order issued to the library pursuant to the “Overdose Prevention Act,”

P.L.2013, c.46 (C.24:6J-1 et seq.), or from a pharmacy pursuant to a standing order issued pursuant to the provisions of P.L.2017, c.88 (C.45:14-67.2). A library that maintains a supply of opioid antidotes is required to have at least one librarian or other library employee who is trained in the administration of opioid antidotes. The State Librarian, in consultation with the Department of Human Services, will specify an appropriate entity or entities to provide the training to library employees, and the training will include the overdose prevention information described in subsection a. of section 5 of the "Overdose Prevention Act" (C.24:6J-5). Under the bill, a librarian or other library employee who is properly trained will be permitted to administer an opioid antidote to any person whom the librarian or employee in good faith believes is experiencing an opioid overdose. A librarian or other library employee who administers an opioid antidote will be required to ensure that the overdose victim is transported, or is offered transport, to a hospital by emergency medical services personnel or by another first responder after the administration of the opioid antidote, regardless of whether the person's symptoms appear to have resolved.

The bill authorizes the Commissioner of Human Services to establish a grant program in order to assist public libraries with the costs of purchasing opioid antidotes and providing training to library employees. The grant program will be based upon any monies appropriated by the Legislature and any monies the commissioner may seek from the federal government, private foundations, or other sources. To be eligible for consideration of a grant award, a public library will submit an application to the Department of Human Services in accordance with application procedures and requirements prescribed by the commissioner. At a minimum, the grant applications will include information regarding: the quantity of opioid antidotes the library intends to obtain; the number of library employees who are, or will be, trained in administering opioid antidotes; the prevalence of opioid abuse and overdose deaths in the geographic area where the library is located; and other information as specified by the commissioner. The commissioner will establish selection criteria for awarding the grants, subject to the availability of funds, and will determine the amount for each grant that is approved.