A BILL FOR AN ACT

CONCERNING AUTHORIZATION FOR GOVERNMENT AGENCIES TO APPROVE CLEAN SYRINGE EXCHANGE PROGRAMS TO REDUCE THE SPREAD OF BLOOD-BORNE DISEASE.

Bill Summary

(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at http://www.leg.state.co.us/billsummaries.)

The bill creates an exemption from drug paraphernalia laws for an employee or volunteer of an approved clean syringe exchange program (program). A county board of health or district board of health (board) is granted the authority to approve a program proposed by a county public
health agency or district public health agency (agency), provided certain procedures are followed. Prior to approving a program, the board shall consult with interested stakeholders from the community and shall address with them certain issues, including the scope of the program, any concerns of law enforcement, and the parameters of the program. The bill lists several components that proposed programs shall have the ability to provide. If an agency contracts with a nonprofit organization to operate a program, the contract will be subject to annual review and reauthorization.

One or more counties represented on a district board of health may at any time opt out of a proposed or approved program.

Each board that authorizes a program is required to submit an annual report to the department of public health and environment, which will in turn submit an annual report to the health and human services committees of the house of representatives and the senate.

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1. Be it enacted by the General Assembly of the State of Colorado:

   SECTION 1. Part 4 of article 18 of title 18, Colorado Revised Statutes, is amended BY THE ADDITION OF A NEW SECTION to read:

   18-18-430.5. **Drug paraphernalia - exemption.** A person shall be exempt from the provisions of sections 18-18-425 to 18-18-430 if he or she is participating as an employee or volunteer in an approved syringe exchange program created pursuant to section 25-1-520, C.R.S.

   SECTION 2. The introductory portion to 25-1-508 (5) and 25-1-508 (5) (j), Colorado Revised Statutes, are amended, and the said 25-1-508 (5) is further amended BY THE ADDITION OF A NEW PARAGRAPH, to read:

   25-1-508. **County or district boards of public health - public health directors.** (5) In addition to all other powers and duties conferred and imposed upon a county board of health or district board a district board of health by the provisions of this subpart 3, a county
BOARD OF HEALTH or district boards - A DISTRICT BOARD OF HEALTH shall have and exercise the following specific powers and duties:

(j) To provide environmental health services and to assess fees to offset the actual, direct cost of such services; except that no fee for a service shall be assessed against any person who has already paid a fee to the state or federal government for the service, and except that the only fee that shall be charged for annual retail food establishment inspections shall be the fee set forth in section 25-4-1607; and

(l) To approve, as provided for in section 25-1-520, a clean syringe exchange program proposed by an agency. A county board of health or district board of health shall not be required to approve a proposed program.

SECTION 3. Part 5 of article 1 of title 25, Colorado Revised Statutes, is amended BY THE ADDITION OF A NEW SECTION to read:

25-1-520. Clean syringe exchange programs - approval - reporting requirements - repeal. (1) A county public health agency or district public health agency may request approval from its county board of health or district board of health, referred to in this section as the "board", for a clean syringe exchange program operated by the agency or by a nonprofit organization with which the agency contracts to operate the clean syringe exchange program. Prior to approving or disapproving any such optional program, the board shall consult with the agency and interested stakeholders concerning the establishment of the clean syringe exchange program. Interested stakeholders shall include, but need not include
BE LIMITED TO, LOCAL LAW ENFORCEMENT AGENCIES, DISTRICT
ATTORNEYS, SUBSTANCE ABUSE TREATMENT PROVIDERS, PERSONS IN
RECOVERY, NONPROFIT ORGANIZATIONS, AND MEMBERS OF THE
COMMUNITY. THE BOARD AND INTERESTED STAKEHOLDERS SHALL
CONSIDER, AT A MINIMUM, THE FOLLOWING ISSUES:

(a) THE SCOPE OF THE PROBLEM BEING ADDRESSED AND THE
POPULATION THE PROGRAM WOULD SERVE;
(b) CONCERNS OF THE LAW ENFORCEMENT COMMUNITY; AND
(c) THE PARAMETERS OF THE PROPOSED PROGRAM, INCLUDING
METHODS FOR IDENTIFYING PROGRAM WORKERS AND VOLUNTEERS.

(2) EACH PROPOSED CLEAN SYRINGE EXCHANGE PROGRAM SHALL,
AT A MINIMUM, HAVE THE ABILITY TO:

(a) PROVIDE AN INJECTION DRUG USER WITH THE INFORMATION
AND THE MEANS TO PROTECT HIMSELF OR HERSELF, HIS OR HER PARTNER,
AND HIS OR HER FAMILY FROM EXPOSURE TO BLOOD-BORNE DISEASE
THROUGH ACCESS TO EDUCATION, STERILE INJECTION EQUIPMENT,
VOLUNTARY TESTING FOR BLOOD-BORNE DISEASES, AND COUNSELING;
(b) PROVIDE THOROUGH REFERRALS TO FACILITATE ENTRY INTO
DRUG ABUSE TREATMENT, INCLUDING OPIOID SUBSTITUTION THERAPY;
(c) ENCOURAGE USAGE OF MEDICAL CARE AND MENTAL HEALTH
SERVICES AS WELL AS SOCIAL WELFARE AND HEALTH PROMOTION;
(d) PROVIDE SAFETY PROTOCOLS AND CLASSES FOR THE PROPER
HANDLING AND DISPOSAL OF INJECTION MATERIALS;
(e) PLAN AND IMPLEMENT THE CLEAN SYRINGE EXCHANGE
PROGRAM WITH THE CLEAR objetivo OF REDUCING THE TRANSMISSION
OF BLOOD-BORNE DISEASES WITHIN A SPECIFIC GEOGRAPHIC AREA; AND
(f) DEVELOP A TIMELINE FOR THE PROPOSED PROGRAM AND FOR
THE DEVELOPMENT OF POLICIES AND PROCEDURES.

(3) The board may approve or disapprove the proposed clean syringe exchange program based on the results of the meetings held pursuant to subsection (1) of this section.

(4) If the board approves a clean syringe exchange program that is operated through a contract with a nonprofit organization, the contract shall be subject to annual review and shall be reauthorized only if the board approves the contract after consultation with the county or district public health agency and interested stakeholders as described in subsection (1) of this section.

(5) One or more counties represented on a district board of health may at any time opt out of a clean syringe exchange program proposed or approved pursuant to this section.

(6) (a) On or before July 1, 2011, and on or before July 1 each year thereafter, each board that authorizes a clean syringe exchange program pursuant to this section shall submit a report to the department of public health and environment concerning the results of the program. On or before September 1, 2011, and on or before September 1 each year thereafter, the department of public health and environment shall submit a report to the health and human services committees of the house of representatives and the senate, or any successor committees, summarizing the reports received from boards pursuant to this paragraph (a).

(b) This subsection (6) is repealed, effective July 1, 2014.

SECTION 4. Act subject to petition - effective date. This act
shall take effect at 12:01 a.m. on the day following the expiration of the ninetynine-day period after final adjournment of the general assembly (August 11, 2010, if adjournment sine die is on May 12, 2010); except that, if a referendum petition is filed pursuant to section 1 (3) of article V of the state constitution against this act or an item, section, or part of this act within such period, then the act, item, section, or part shall not take effect unless approved by the people at the general election to be held in November 2010 and shall take effect on the date of the official declaration of the vote thereon by the governor.