

SENATE, No. 2321

STATE OF NEW JERSEY 218th LEGISLATURE

INTRODUCED MARCH 22, 2018

Sponsored by:

Senator JOSEPH P. CRYAN

District 20 (Union)

Senator THOMAS H. KEAN, JR.

District 21 (Morris, Somerset and 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.



(Sponsorship Updated As Of: 6/1/2018)

1 AN ACT concerning the emergency administration of opioid
2 antidotes in public libraries, supplementing chapter 73 of Title
3 18A of the New Jersey Statutes, and amending P.L.2013, c.46.

4
5 **BE IT ENACTED** by the Senate and General Assembly of the State
6 of New Jersey:

7
8 1. (New section) As used in this act:

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

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

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

25
26 2. (New section) a. A public library may obtain a supply of
27 opioid antidotes pursuant to a standing order under section 4 of the
28 “Overdose Prevention Act,” P.L.2013, c.46 (C.24:6J-4) or section 1
29 of P.L.2017, c.88 (C.45:14-67.2), to be maintained in a secure
30 location in the library for the purpose of responding to an opioid
31 overdose emergency. A public library may apply for a grant
32 pursuant to section 4 of this act for the costs of (1) purchasing
33 opioid antidotes, and (2) training to enable employees of the library
34 to administer opioid antidotes.

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

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

7 d. A librarian or library employee who administers an opioid
8 antidote shall ensure that the overdose victim is transported to a
9 hospital emergency room by emergency services personnel after the
10 administration of the opioid antidote, even if the person's symptoms
11 appear to have resolved.

12
13 3. (New section) No public library, librarian, library employee,
14 pharmacist, or a prescriber of opioid antidotes for a library through
15 a standing order, shall be held liable for any good faith act or
16 omission consistent with the provisions of this act. Good faith shall
17 not include willful misconduct, gross negligence, or recklessness.

18
19 4. (New section) a. The Commissioner of Human Services
20 may establish a grant program, based upon any monies appropriated
21 by the Legislature, to award grants to public libraries for the
22 purposes of purchasing opioid antidotes and providing training to
23 enable employees of the library to administer opioid antidotes. In
24 addition to any monies appropriated by the Legislature, the
25 commissioner may seek money from the federal government,
26 private foundations, and any other source to fund the grants
27 established pursuant to this section.

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

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

43
44 5. Section 3 of P.L.2013, c.46 (C.24:6J-3) is amended to read
45 as follows:

46 3. As used in this act:

47 "Commissioner" means the Commissioner of Human Services.

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

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

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

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

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

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

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

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

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

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

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

28 "Recipient" means a patient, professional, professional entity,
29 emergency medical responder, **[or]** emergency medical response
30 entity, or public library who is prescribed or dispensed an opioid
31 antidote in accordance with section 4 of P.L.2013, c.46 (C.24:6J-4).
32 (cf: P.L.2017, c.381, s.1)

33

34 6. Section 4 of P.L.2013, c.46 (C.24:6J-4) is amended to read
35 as follows:

36 4. a. (1) A prescriber or other health care practitioner, as
37 appropriate, may prescribe or dispense an opioid antidote:

38 (a) directly or through a standing order, to any recipient who is
39 deemed by the health care practitioner to be capable of
40 administering the opioid antidote to an overdose victim in an
41 emergency;

42 (b) through a standing order, to any professional or emergency
43 medical responder who is not acting in a professional or volunteer
44 capacity for a professional entity, or an emergency medical
45 response entity, but who is deemed by the health care practitioner to
46 be capable of administering opioid antidotes to overdose victims, as
47 part of the professional's regular course of business or volunteer
48 activities;

1 (c) through a standing order, to any professional who is not
2 acting in a professional or volunteer capacity for a professional
3 entity, but who is deemed by the health care practitioner to be
4 capable of dispensing opioid antidotes to recipients, for
5 administration thereby, as part of the professional's regular course
6 of business or volunteer activities;

7 (d) through a standing order, to any professional entity or any
8 emergency medical response entity, which is deemed by the health
9 care practitioner to employ professionals or emergency medical
10 responders, as appropriate, who are capable of administering opioid
11 antidotes to overdose victims as part of the entity's regular course of
12 business or volunteer activities;

13 (e) through a standing order, to any professional entity which is
14 deemed by the health care practitioner to employ professionals who
15 are capable of dispensing opioid antidotes to recipients, for
16 administration thereby, as part of the entity's regular course of
17 business or volunteer activities ;

18 (f) through a standing order, to a public library pursuant to the
19 provisions of section 2 of P.L. , c. (C.) (pending before the
20 Legislature as this bill).

21 (2) (a) For the purposes of this subsection, whenever the law
22 expressly authorizes or requires a certain type of professional or
23 professional entity to obtain a standing order for opioid antidotes
24 pursuant to this section, such professional, or the professionals
25 employed or engaged by such professional entity, as the case may
26 be, shall be presumed by the prescribing or dispensing health care
27 practitioner to be capable of administering or dispensing the opioid
28 antidote, consistent with the express statutory requirement.

29 (b) For the purposes of this subsection, whenever the law
30 expressly requires a certain type of emergency medical responder or
31 emergency medical response entity to obtain a standing order for
32 opioid antidotes pursuant to this section, such emergency medical
33 responder, or the emergency medical responders employed or
34 engaged by such emergency medical response entity, as the case
35 may be, shall be presumed by the prescribing or dispensing health
36 care practitioner to be capable of administering the opioid antidote,
37 consistent with the express statutory requirement.

38 (3) (a) Whenever a prescriber or other health care practitioner
39 prescribes or dispenses an opioid antidote to a professional or
40 professional entity pursuant to a standing order issued under
41 paragraph (1) of this subsection, the standing order shall specify
42 whether the professional or professional entity is authorized thereby
43 to directly administer the opioid antidote to overdose victims; to
44 dispense the opioid antidote to recipients, for their administration to
45 third parties; or to both administer and dispense the opioid antidote.
46 If a standing order does not include a specification in this regard, it
47 shall be deemed to authorize the professional or professional entity
48 only to administer the opioid antidote with immunity, as provided

1 by subsection c. of this section, and it shall not be deemed to
2 authorize the professional or professional entity to engage in the
3 further dispensing of the antidote to recipients, unless such
4 authority has been granted by law, as provided by subparagraph (b)
5 of this paragraph.

6 (b) Notwithstanding the provisions of this paragraph to the
7 contrary, if the law expressly authorizes or requires a certain type of
8 professional, professional entity, emergency medical responder,
9 **[or]** emergency medical response entity, or public library to
10 administer or dispense opioid antidotes pursuant to a standing order
11 issued hereunder, the standing order issued pursuant to this section
12 shall be deemed to grant the authority specified by the law, even if
13 such authority is not expressly indicated on the face of the standing
14 order.

15 (4) Any prescriber or other health care practitioner who
16 prescribes or dispenses an opioid antidote in good faith, and in
17 accordance with the provisions of this subsection, shall not, as a
18 result of the practitioner's acts or omissions, be subject to any
19 criminal or civil liability, or any professional disciplinary action
20 under Title 45 of the Revised Statutes for prescribing or dispensing
21 an opioid antidote in accordance with P.L.2013, c.46 (C.24:6J-1 et
22 seq.).

23 b. (1) Any professional or professional entity that has obtained
24 a standing order, pursuant to subsection a. of this section, for the
25 dispensing of opioid antidotes, may dispense an opioid antidote to
26 any recipient who is deemed by the professional or professional
27 entity to be capable of administering the opioid antidote to an
28 overdose victim in an emergency.

29 (2) Any professional or professional entity that dispenses an
30 opioid antidote in accordance with paragraph (1) of this subsection,
31 in good faith, and pursuant to a standing order issued under
32 subsection a. of this section, shall not, as a result of any acts or
33 omissions, be subject to any criminal or civil liability or any
34 professional disciplinary action for dispensing an opioid antidote in
35 accordance with P.L.2013, c.46 (C.24:6J-1 et seq.).

36 c. (1) Any emergency medical responder or emergency medical
37 response entity that has obtained a standing order, pursuant to
38 subsection a. of this section, for the administration of opioid
39 antidotes, may administer an opioid antidote to overdose victims.

40 (2) Any emergency medical responder or emergency medical
41 response entity that administers an opioid antidote, in good faith, in
42 accordance with paragraph (1) of this subsection, and pursuant to a
43 standing order issued under subsection a. of this section, shall not,
44 as a result of any acts or omissions, be subject to any criminal or
45 civil liability, or any disciplinary action, for administering the
46 opioid antidote in accordance with P.L.2013, c.46 (C.24:6J-1 et
47 seq.).

1 d. (1) Any person who is the recipient of an opioid antidote,
2 which has been prescribed or dispensed for administration purposes
3 pursuant to subsection a. or b. of this section, and who has received
4 overdose prevention information pursuant to section 5 of P.L.2013,
5 c.46 (C.24:6J-5), may administer the opioid antidote to another
6 person in an emergency, without fee, if the antidote recipient
7 believes, in good faith, that the other person is experiencing an
8 opioid overdose.

9 (2) Any person who administers an opioid antidote pursuant to
10 paragraph (1) of this subsection shall not, as a result of the person's
11 acts or omissions, be subject to any criminal or civil liability for
12 administering the opioid antidote in accordance with P.L.2013, c.46
13 (C.24:6J-1 et seq.).

14 e. In addition to the immunity that is provided by this section
15 for authorized persons who are engaged in the prescribing,
16 dispensing, or administering of an opioid antidote, the immunity
17 provided by section 7 or section 8 of P.L.2013, c.46 (C.2C:35-30 or
18 C.2C:35-31) shall apply to a person who acts in accordance with
19 this section, provided that the requirements of those sections, as
20 applicable, have been met.

21 f. Notwithstanding the provisions of any law, rule, regulation,
22 ordinance, or institutional or organizational directive to the
23 contrary, any person or entity authorized to administer an opioid
24 antidote, pursuant to this section, may administer to an overdose
25 victim, with full immunity:

26 (1) a single dose of any type of opioid antidote that has been
27 approved by the United States Food and Drug Administration for
28 use in the treatment of opioid overdoses; and

29 (2) up to three doses of an opioid antidote that is administered
30 through intranasal application, or through an intramuscular auto-
31 injector, as may be necessary to revive the overdose victim. Prior
32 consultation with, or approval by, a third-party physician or other
33 medical personnel shall not be required before an authorized person
34 or entity may administer up to three doses of an opioid antidote, as
35 provided in this paragraph, to the same overdose victim.

36 g. No later than 45 days after the effective date of P.L.2017,
37 c.381, the Commissioner of Health shall provide written notice to
38 all emergency medical response entities affected by subsection f. of
39 this section, notifying them of the provisions of subsection f. of this
40 section.

41 h. Any public library, librarian, or library employee who
42 administers, or permits the administration of, an opioid antidote in
43 good faith in accordance with the provisions of section 2 of P.L. ,
44 c. (C.) (pending before the Legislature as this bill), and
45 pursuant to a standing order issued under subsection a. of this
46 section, shall not, as a result of any acts or omissions, be subject to
47 any criminal or civil liability, or any disciplinary action, for

1 administering, or for permitting the administration of, the opioid
2 antidote in accordance with P.L.2013, c.46 (C.24:6J-1 et seq.).

3 (cf: P.L.2017, c.381, s.2)

4
5 7. This act shall take effect on the first day of the fourth month
6 next following the date of enactment.

7
8
9 STATEMENT

10
11 This bill permits a public library to obtain a supply of opioid
12 antidotes to be maintained in a secure location in the library for the
13 purpose of responding to an opioid overdose emergency. A public
14 library may obtain the opioid antidotes through a standing order
15 pursuant to the "Overdose Prevention Act," P.L.2013, c.46
16 (C.24:6J-1 et seq.), or from a pharmacist pursuant to the provisions
17 of P.L.2017, c.88 (C.45:14-67.2). A library that maintains a supply
18 of opioid antidotes is required to have at least one librarian or other
19 library employee who is trained in the administration of opioid
20 antidotes. The State Librarian, in consultation with the Department
21 of Human Services, will specify an appropriate entity or entities to
22 provide the training to library employees, and the training will
23 include the overdose prevention information described in subsection
24 a. of section 5 of the "Overdose Prevention Act" (C.24:6J-5).
25 Under the bill, a librarian or other library employee who is properly
26 trained will be permitted to administer an opioid antidote to any
27 person whom the librarian or employee in good faith believes is
28 experiencing an opioid overdose.

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

1 The bill provides immunity from liability for public libraries,
2 librarians, library employees, pharmacists, and prescribers of opioid
3 antidotes for libraries, for good faith acts or omissions consistent
4 with the bill's provisions. In addition, the bill amends the
5 "Overdose Prevention Act" to: (1) include public libraries among
6 the recipients that may be prescribed opioid antidotes through a
7 standing order; and (2) provide that immunity from liability for
8 opioid antidote administration in accordance with the "Overdose
9 Prevention Act" will be applicable to public libraries, librarians,
10 and library employees who administer, or permit the administration
11 of, opioid antidotes in good faith under the provisions of the bill.