1	H.39
2	Introduced by Representatives Maguire of Rutland City, Burditt of West
3	Rutland, Canfield of Fair Haven, Dickinson of St. Albans
4	Town, Donahue of Northfield, Galfetti of Barre Town, Gregoire
5	of Fairfield, Hango of Berkshire, Harrison of Chittenden,
6	Higley of Lowell, Howland of Rutland Town, Keyser of
7	Rutland City, Labor of Morgan, Lipsky of Stowe, Luneau of St.
8	Albans City, Malay of Pittsford, McCoy of Poultney, McFaun
9	of Barre Town, Morgan, L. of Milton, Morgan, M. of Milton,
10	Morrissey of Bennington, Nelson of Derby, Nielsen of
11	Brandon, Parsons of Newbury, Pinsonault of Dorset, Powers of
12	Waterford, Southworth of Walden, Taylor of Milton, and Toof
13	of St. Albans Town
14	Referred to Committee on
15	Date:
16	Subject: Regulated drugs; overdose prevention centers
17	Statement of purpose of bill as introduced: This bill proposes to repeal the
18	statute that provides limited liability protection to individuals who provide
19	services or utilize services of an overdose prevention center.

An act relating to repeal of authorization of overdose prevention centers

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1	It is hereby enacted by the General Assembly of the State of Vermont:
2	Sec. 1. 18 V.S.A. § 4256 is amended to read:
3	§ 4256. OVERDOSE PREVENTION CENTERS
4	(a) An overdose prevention center:
5	(1) provides a space, either at a fixed location or a mobile facility,
6	supervised by health care professionals or other trained staff where persons
7	who use drugs can consume preobtained drugs and medication for substance
8	use disorder;
9	(2) provides harm reduction supplies, including sterile injection
10	supplies; collects used hypodermic needles and syringes; and provides secure
11	hypodermic needle and syringe disposal services;
12	(3) provides drug-checking services;
13	(4) answers questions on safer consumption practices;
14	(5) administers first aid, if needed, and monitors and treats potential
15	overdoses;
16	(6) provides referrals to addiction treatment, medical services, and social
17	services;
18	(7) educates participants on the risks of contracting HIV and viral
19	hepatitis, wound care, and safe sex education;
20	(8) provides overdose prevention education and distributes overdose
21	reversal medications, including naloxone;

1	(9) educates participants regarding proper disposal of hypodermic
2	needles and syringes;
3	(10) provides reasonable security of the program site;
4	(11) establishes operating procedures for the program as well as
5	eligibility criteria for program participants; and
6	(12) trains staff members to deliver services offered by the program.
7	(b) The Department of Health, in consultation with stakeholders and health
8	departments of other jurisdictions that have overdose prevention centers, shall
9	develop operating guidelines for overdose prevention centers not later than
10	September 15, 2024. The operating guidelines shall include the level of staff
11	qualifications required for medical safety and treatment and referral support
12	and require an overdose prevention center to staff trained professionals during
13	operating hours who, at a minimum, can provide basic medical care, such as
14	CPR, overdose interventions, first aid, and wound care, as well as have the
15	ability to perform medical assessments with program participants to determine
16	if there is a need for emergency medical service response. Overdose prevention
17	center staff may include peers, case managers, medical professionals, and
18	mental health counselors.
19	(c)(1) The following persons are entitled to the immunity protections set
20	forth in subdivision (2) of this subsection for participation in or with an
21	approved overdose prevention center that is acting in the good faith provision

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1	of overdose prevention services in accordance with the guidelines established
2	pursuant to this section:
3	(A) an individual using the services of an overdose prevention center
4	(B) a staff member, operator, administrator, or director of an
5	overdose prevention center, including a health care professional, manager,
6	employee, or volunteer; or
7	(C) a property owner, lessor, or sublessor on the property at which an
8	overdose prevention center is located and operates;
9	(D) an entity operating the overdose prevention center; and
10	(E) a State or municipal employee acting within the course and scope
11	of the employee's employment.
12	(2) Persons identified in subdivision (1) of this subsection shall not be:
13	(A) cited, arrested, charged, or prosecuted for unlawful possession of
14	a regulated drug in violation of this chapter or for attempting, aiding or
15	abetting, or conspiracy to commit a violation of any of provision of this
16	chapter;
17	(B) subject to property seizure or forfeiture for unlawful possession
18	of a regulated drug in violation of this chapter;
19	(C) subject to any civil liability or civil or administrative penalty,

including disciplinary action by a professional licensing board, credentialing

1	restriction, contractual liability, or medical staff or other employment action;
2	Of
3	(D) denied any right or privilege.
4	(3) The immunity provisions of subdivisions (2)(A) and (B) of this
5	subsection apply only to the use and derivative use of evidence gained as a
6	proximate result of participation in or with an overdose prevention center.
7	Entering, exiting, or utilizing the services of an overdose prevention center
8	shall not serve as the basis for, or a fact contributing to the existence of,
9	reasonable suspicion or probable cause to conduct a search or seizure.
10	(4) The immunity provisions in subdivision (2)(C) of this subsection
11	shall not apply to:
12	(A) an individual using the services of an overdose prevention center
13	if the basis for the civil claim is that the person operated a motor vehicle in
14	violation of 23 V.S.A. § 1201; or
15	(B) claims unrelated to the provision of overdose prevention services
16	(d) An entity operating an overdose prevention center shall make publicly
17	available the following information annually on or before January 15:
18	(1) the number of program participants;
19	(2) deidentified demographic information of program participants;
20	(3) the number of overdoses and the number of overdoses reversed on-
21	site;

1	(4) the number of times emergency medical services were contacted and
2	responded for assistance;
3	(5) the number of times law enforcement were contacted and responded
4	for assistance; and
5	(6) the number of participants directly and formally referred to other
6	services and the type of services.
7	(e) An overdose prevention center shall not be construed as a health care
8	facility for purposes of chapter 221, subchapter 5 of this title. [Repealed.]
9	Sec. 2. EFFECTIVE DATE
10	This act shall take effect on July 1, 2025.