

SENATE, No. 1829

STATE OF NEW JERSEY 211th LEGISLATURE

INTRODUCED OCTOBER 4, 2004

Sponsored by:

Senator NIA H. GILL

District 34 (Essex and Passaic)

Senator WILLIAM L. GORMLEY

District 2 (Atlantic)

Co-Sponsored by:

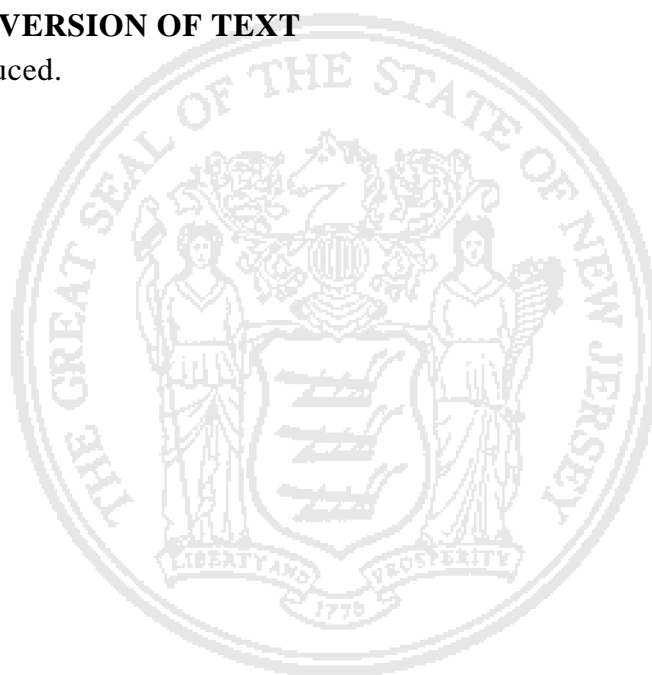
Senator Vitale

SYNOPSIS

"Bloodborne Disease Harm Reduction Act"; permits establishment of sterile syringe access programs.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 10/15/2004)

1 AN ACT providing for sterile syringe access programs, supplementing
2 Title 26 of the Revised Statutes and Title 2C of the New Jersey
3 Statutes and amending P.L.1989, c.34.

4

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

7

8 1. (New section) This act shall be known and may be cited as the
9 "Bloodborne Disease Harm Reduction Act."

10

11 2. (New section) The Legislature finds and declares that:

12 a. New Jersey, in comparison with other states nationwide, has the
13 highest rate of HIV infection among women, the third highest pediatric
14 HIV rate, the fifth highest adult HIV rate, and a rate of injection-
15 related HIV infection that is almost twice the national average;

16 b. About one in every three persons living with HIV or AIDS is
17 female;

18 c. Sterile syringe access programs have been proven effective in
19 reducing the spread of HIV, hepatitis C and other bloodborne
20 pathogens without increasing drug abuse or other adverse social
21 impacts; yet New Jersey remains one of only two states nationwide
22 that provide no access to sterile syringes in order to prevent the spread
23 of disease;

24 d. Every scientific, medical and professional agency or organization
25 that has studied this issue, including the federal Centers for Disease
26 Control and Prevention, the American Medical Association, the
27 American Public Health Association, the National Academy of
28 Sciences, the National Institutes of Health Consensus Panel, the
29 American Academy of Pediatrics, and the United States Conference of
30 Mayors, has found sterile syringe access programs to be effective in
31 reducing the transmission of HIV; and

32 e. Sterile syringe access programs are designed to prevent the
33 spread of HIV, hepatitis C and other bloodborne pathogens, and to
34 provide a bridge to drug abuse treatment and other social services for
35 drug users; and it is in the public interest to encourage the
36 development of such programs in this State in accordance with
37 statutory guidelines designed to ensure the safety of consumers who
38 use these programs, the health care workers who operate them, and
39 the members of the general public.

40

41 3. (New section) The Commissioner of Health and Senior Services
42 shall prescribe by regulation requirements for a municipality to
43 establish, or otherwise authorize the operation within that municipality

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 of, a sterile syringe access program to provide for the exchange of
2 hypodermic syringes and needles in accordance with the provisions of
3 this act.

4 a. The commissioner shall:

5 (1) request an application, to be submitted on a form and in a
6 manner to be prescribed by the commissioner, from any municipality
7 that seeks to establish a sterile syringe access program, or from other
8 entities authorized to operate a sterile syringe access program within
9 that municipality as provided in paragraph (2) of subsection a. of
10 section 4 of this act;

11 (2) approve those applications that meet the requirements
12 established by regulation of the commissioner and contract with the
13 municipalities or entities whose applications are approved to establish
14 a sterile syringe access program as provided in paragraph (2) of
15 subsection a. of section 4 of this act to operate a sterile syringe access
16 program in any municipality in which the governing body has
17 authorized the operation of sterile syringe access programs within that
18 municipality by ordinance;

19 (3) support and facilitate, to the maximum extent practicable, the
20 linkage of sterile syringe access programs to such health care facilities
21 and programs as may provide appropriate health care services,
22 including mental health and substance abuse treatment, to consumers
23 participating in any such program;

24 (4) provide for the adoption of a uniform identification card or
25 other uniform Statewide means of identification for consumers, staff
26 and volunteers of a sterile syringe access program pursuant to
27 paragraph (8) of subsection b. of section 4 of this act; and

28 (5) maintain a record of the data reported to the commissioner by
29 sterile syringe access programs pursuant to paragraph (10) of
30 subsection b. of section 4 of this act.

31 b. The commissioner shall be authorized to accept such funding as
32 may be made available from the private sector to effectuate the
33 purposes of this act.

34
35 4. (New section) a. In accordance with the provisions of section
36 3 of this act, a municipality may establish or authorize establishment
37 of a sterile syringe access program that is approved by the
38 commissioner to provide for the exchange of hypodermic syringes and
39 needles.

40 (1) A municipality that establishes a sterile syringe access program
41 may operate the program directly or contract with one or more of the
42 following entities to operate the program: a hospital or other health
43 care facility licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.),
44 a federally qualified health center, a public health agency, a substance
45 abuse treatment program, an AIDS service organization, or another
46 nonprofit entity designated by the municipality. These entities shall

1 also be authorized to contract directly with the commissioner in any
2 municipality in which the governing body has authorized the operation
3 of sterile syringe access programs by ordinance pursuant to paragraph
4 (2) of this subsection.

5 (2) Pursuant to paragraph (2) of subsection a. of section 3 of this
6 act, a municipality whose governing body has authorized the operation
7 of sterile syringe access programs within the municipality may require
8 within the authorizing ordinance that an entity as described in
9 paragraph (1) of this subsection obtain approval from the municipality,
10 in a manner prescribed by the authorizing ordinance, to operate a
11 sterile syringe access program prior to obtaining approval from the
12 commissioner to operate such a program, or may permit the entity to
13 obtain approval to operate such a program by application directly to
14 the commissioner without obtaining prior approval from the
15 municipality.

16 (3) Two or more municipalities may jointly establish or authorize
17 establishment of a sterile syringe access program that operates within
18 those municipalities pursuant to adoption of an ordinance by each
19 participating municipality pursuant to this section.

20 b. A sterile syringe access program shall comply with the following
21 requirements:

22 (1) Sterile syringes and needles shall be provided at no cost to
23 consumers 18 years of age and older;

24 (2) Program staff shall be trained and regularly supervised in:
25 harm reduction; substance abuse, medical and social service referrals;
26 and infection control procedures, including universal precautions and
27 needle stick injury protocol; and programs shall maintain records of
28 staff and volunteer training and of hepatitis C and tuberculosis
29 screening provided to volunteers and staff;

30 (3) The program shall offer information about HIV, hepatitis C and
31 other bloodborne pathogens and prevention materials at no cost to
32 consumers, and shall seek to educate all consumers about safe and
33 proper disposal of needles and syringes;

34 (4) The program shall provide information and referrals to
35 consumers, including HIV testing options, access to substance abuse
36 treatment programs, and available health and social service options
37 relevant to the consumer's needs;

38 (5) The program shall screen out consumers under 18 years of age
39 from access to syringes and needles, and shall refer them to substance
40 abuse treatment and other appropriate programs for youth;

41 (6) The program shall develop a plan for the handling and disposal
42 of used syringes and needles in accordance with requirements set forth
43 at N.J.A.C.7:26-3A.1 et seq. for regulated medical waste disposal
44 pursuant to the "Comprehensive Regulated Medical Waste
45 Management Act," P.L.1989, c.34 (C.13:1E-48.1 et al.), and shall also
46 develop and maintain protocols for post-exposure treatment;

1 (7) The program shall maintain the confidentiality of consumers by
2 the use of confidential identifiers, which shall consist of the first two
3 letters of the first name of the consumer's mother and the two-digit
4 day of birth and two-digit year of birth of the consumer, or by the use
5 of such other uniform Statewide mechanism as may be approved by the
6 commissioner for this purpose;

7 (8) The program shall provide a uniform identification card that has
8 been approved by the commissioner to consumers and to staff and
9 volunteers involved in transporting, exchanging or possessing syringes
10 and needles, or shall provide for such other uniform Statewide means
11 of identification as may be approved by the commissioner for this
12 purpose;

13 (9) The program shall provide consumers at the time of enrollment
14 with a schedule of program operation hours and locations, in addition
15 to information about prevention and harm reduction and substance
16 abuse treatment services; and

17 (10) The program shall provide aggregate data on a quarterly basis
18 to the commissioner, on a form and in a manner determined by the
19 commissioner, that includes: the number of consumers served by the
20 program, the number of syringes and needles distributed each month,
21 and the number and type of referrals provided to consumers.

22 c. A municipality may terminate a sterile syringe access program
23 established or authorized pursuant to this act, which is operating
24 within that municipality, if its governing body approves such an action
25 by ordinance, in which case the municipality shall notify the
26 commissioner of its action in a manner prescribed by regulation of the
27 commissioner.

28
29 5. (New section) a. The Commissioner of Health and Senior
30 Services shall report to the Governor and the Legislature, no later than
31 one year after the effective date of this act and biannually thereafter,
32 on the status of sterile syringe access programs established pursuant
33 to sections 3 and 4 of P.L. , c. (C.)(pending before the
34 Legislature as this bill), and shall include in that report the data
35 provided to the commissioner by each sterile syringe access program
36 pursuant to paragraph (10) of subsection b. of section 4 of P.L. ,
37 c. (C.)(pending before the Legislature as this bill).

38 b. The commissioner shall report to the Governor and the
39 Legislature no later than six months after the date that the initial sterile
40 syringe access program, which is approved by the commissioner
41 pursuant to section 3 of P.L. , c. (C.)(pending before the
42 Legislature as this bill), commences its operations, and shall include in
43 that report:

44 (1) an assessment of whether an adequate number of substance
45 abuse treatment program slots is available to meet the treatment needs
46 of persons who have been referred to substance abuse treatment

1 programs by sterile syringe access programs pursuant to paragraph (4)
2 of subsection b. of section 4 of P.L. , c. (C.)(pending before
3 the Legislature as this bill); and

4 (2) a recommendation for such appropriation as the commissioner
5 determines necessary to ensure the provision of an adequate number
6 of substance abuse treatment program slots for those persons.

7

8 6. (New section) a. The Commissioner of Health and Senior
9 Services, in consultation with the Commissioner of Environmental
10 Protection and pursuant to the "Administrative Procedure Act,"
11 P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and regulations
12 to effectuate the purposes of sections 3 and 4 of P.L. , c.
13 (C.)(pending before the Legislature as this bill).

14 b. Notwithstanding any provision of P.L.1968, c.410 to the
15 contrary, the commissioner shall adopt, immediately upon filing with
16 the Office of Administrative Law and no later than the 90th day after
17 the effective date of this act, such regulations as the commissioner
18 deems necessary to implement the provisions of sections 3 and 4 of
19 P.L. , c. (C.)(pending before the Legislature as this bill), which
20 shall be effective until the adoption of rules and regulations pursuant
21 to subsection a. of this section and may be amended, adopted or
22 readopted by the commissioner in accordance with the requirements
23 of P.L.1968, c.410.

24

25 7. (New section) The possession of a hypodermic syringe or
26 needle by a consumer who participates in, or an employee or volunteer
27 of, a sterile syringe access program established pursuant to sections 3
28 and 4 of P.L. , c. (C.)(pending before the Legislature as this bill)
29 shall not constitute an offense pursuant to N.J.S.2C:36-1 et seq. This
30 provision shall extend to a hypodermic syringe or needle that contains
31 a residual amount of a controlled dangerous substance or controlled
32 substance analog.

33

34 8. Section 3 of P.L.1989, c.34 (C.13:1E-48.3) is amended to read
35 as follows:

36 3. As used in sections 1 through 25 of this act:

37 "Board" means the Board of Public Utilities.

38 "Collection" means the activity related to pick-up and
39 transportation of regulated medical waste from a generator, or from
40 an intermediate location, to a facility, or to a site outside the State, for
41 disposal.

42 "Commissioners" means the Commissioner of Environmental
43 Protection and the Commissioner of Health and Senior Services.

44 "Departments" means the Department of Environmental Protection
45 and the Department of Health and Senior Services.

46 "Dispose" or "disposal" means the storage, treatment, utilization,

1 processing, resource recovery of, or the discharge, deposit, injection,
2 dumping, spilling, leaking, or placing of any regulated medical waste
3 into or on any land or water so that the regulated medical waste or any
4 constituent thereof may enter the environment or be emitted into the
5 air or discharged into any waters, including groundwaters.

6 "Facility" means a solid waste facility as defined in section 3 of
7 P.L.1970, c.39 (C.13:1E-3); or any other incinerator or commercial or
8 noncommercial regulated medical waste disposal facility in this State
9 that accepts regulated medical waste for disposal.

10 "Federal Act" means the "Medical Waste Tracking Act of 1988"
11 (42U.S.C. s.6903 et seq.), or any rule or regulation adopted pursuant
12 thereto.

13 "Generator" means an ambulatory surgical or care facility,
14 community health center, medical doctor's office, dentist's office,
15 podiatrist's office, home health care agency, health care facility,
16 hospital, medical clinic, morgue, nursing home, urgent care center,
17 sterile syringe access program operating pursuant to sections 3 and 4
18 of P.L. , c. (C.)(pending before the Legislature as this bill),
19 veterinary office or clinic, animal, biological, clinical, medical,
20 microbiological, or pathological diagnostic or research laboratory, any
21 of which generates regulated medical waste, or any other facility
22 identified by the departments that generates regulated medical waste.
23 "Generator" shall not include individual households utilizing home
24 self-care.

25 "Regulated medical waste" means blood vials; cultures and stocks
26 of infectious agents and associated biologicals, including cultures from
27 medical and pathological laboratories, cultures and stocks of infectious
28 agents from research and industrial laboratories, wastes from the
29 production of biologicals, discarded live and attenuated vaccines, and
30 culture dishes and devices used to transfer, inoculate, and mix
31 cultures; pathological wastes, including tissues, organs, and body parts
32 that are removed during surgery or autopsy; waste human blood and
33 products of blood, including serum, plasma, and other blood
34 components; sharps that have been used in patient care or in medical,
35 research, or industrial laboratories engaged in medical research,
36 testing, or analysis of diseases affecting the human body, including
37 hypodermic needles, syringes, Pasteur pipettes, broken glass, and
38 scalpel blades; contaminated animal carcasses, body parts, and bedding
39 of animals that were exposed to infectious agents during research,
40 production of biologicals, or testing of pharmaceuticals; any other
41 substance or material related to the transmission of disease as may be
42 deemed appropriate by the departments; and any other substance or
43 material as may be required to be regulated by, or permitted to be
44 exempted from, the Federal Act. The departments may adopt, by rule
45 or regulation and pursuant to the "Administrative Procedure Act,"
46 P.L.1968, c.410 (C.52:14B-1 et seq.), a more specific definition of

1 regulated medical waste upon the expiration of the demonstration
2 program established under the Federal Act.

3 "Noncommercial facility" means a facility or on-site generator, as
4 the case may be, which accepts regulated medical waste from other
5 generators for on-site disposal for a cost-based fee not in excess of the
6 costs actually incurred by the facility or on-site generator for the
7 treatment or disposal of the regulated medical waste.

8 "Transporter" means a person engaged in the collection or
9 transportation of regulated medical waste.

10 (cf: P.L.1989, c.34, s.3)

11

12 9. (New section) a. The board of chosen freeholders of each
13 county and the New Jersey Meadowlands Commission, in accordance
14 with standards adopted by the Commissioner of Environmental
15 Protection in consultation with the Commissioner of Health and Senior
16 Services, shall prepare and adopt a sharps disposal component as an
17 amendment to the district solid waste management plan required
18 pursuant to the provisions of the "Solid Waste Management Act,"
19 P.L.1970, c.39 (C.13:1E-1 et seq.) to provide for the proper and safe
20 disposal of medical waste generated at home within the district.

21 b. The sharps disposal component of each district solid waste
22 management plan shall be developed in consultation with a work group
23 established by the governing body of the affected county and the New
24 Jersey Meadowlands Commission, in the case of the Hackensack
25 Meadowlands District, that includes persons not employed by or
26 affiliated with the county or the commission, as the case may be, who
27 have a demonstrated interest or expertise in the use and disposal of
28 sharps, including, but not limited to, representatives of waste
29 management companies, persons with diabetes and licensed health care
30 facilities.

31 c. The Commissioner of Environment Protection shall provide such
32 financial assistance as may be available to the commissioner for the
33 purpose of this section to the various counties to implement the sharps
34 disposal component of the district solid waste management plan. The
35 commissioner shall be authorized to accept such funding as may be
36 made available from the private sector to effectuate the purposes of
37 this section.

38

39 10. (New section) a. The Commissioner of Environmental
40 Protection, in consultation with the Commissioner of Health and
41 Senior Services and pursuant to the "Administrative Procedure Act,"
42 P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and regulations
43 to effectuate the purposes of section 9 of P.L. , c. (C.)(pending
44 before the Legislature as this bill).

45 b. Notwithstanding any provision of P.L.1968, c.410 to the
46 contrary, the commissioner shall adopt, immediately upon filing with

1 the Office of Administrative Law and no later than the 90th day after
2 the effective date of this act, such regulations as the commissioner
3 deems necessary to implement the provisions of section 9 of P.L. ,
4 c. (C.)(pending before the Legislature as this bill), which shall be
5 effective until the adoption of rules and regulations pursuant to
6 subsection a. of this section and may be amended, adopted or
7 readopted by the commissioner in accordance with the requirements
8 of P.L.1968, c.410.

9
10 11. This act shall take effect immediately.

11
12
13 STATEMENT

14
15 This bill, which is designated the "Bloodborne Disease Harm
16 Reduction Act," permits the establishment of sterile syringe access
17 programs to prevent the spread of HIV/AIDS, hepatitis C and other
18 bloodborne diseases.

19 Specifically, the bill provides as follows:

20 -- The Commissioner of Health and Senior Services is directed to
21 prescribe by regulation requirements for a municipality to establish, or
22 otherwise authorize the operation within that municipality of, a sterile
23 syringe access program to provide for the exchange of hypodermic
24 syringes and needles.

25 -- The commissioner is to:

26 (1) request an application, to be submitted on a form and in a
27 manner to be prescribed by the commissioner, from any municipality
28 that seeks to establish a sterile syringe access program, or from other
29 entities authorized to operate a sterile syringe access program within
30 that municipality as provided in the bill;

31 (2) approve those applications that meet the requirements
32 established by regulation of the commissioner and contract with the
33 municipalities or entities whose applications are approved to establish
34 a sterile syringe access program as provided in the bill to operate a
35 sterile syringe access program in any municipality in which the
36 governing body has authorized the operation of sterile syringe access
37 programs within that municipality by ordinance;

38 (3) support and facilitate, to the maximum extent practicable, the
39 linkage of sterile syringe access programs to such health care facilities
40 and programs as may provide appropriate health care services,
41 including mental health and substance abuse treatment, to consumers
42 participating in any such program;

43 (4) provide for the adoption of a uniform identification card or
44 other uniform Statewide means of identification for consumers, staff
45 and volunteers of a sterile syringe access program; and

46 (5) maintain a record of the data reported to the commissioner by

1 sterile syringe access programs pursuant to the bill.

2 -- The commissioner is authorized to accept such funding as may
3 be made available from the private sector to effectuate the purposes of
4 the bill.

5 -- A municipality may establish or authorize establishment of a
6 sterile syringe access program that is approved by the commissioner
7 pursuant to the bill to provide for the exchange of hypodermic syringes
8 and needles.

9 (1) A municipality that establishes a sterile syringe access program
10 may operate the program directly or contract with one or more of the
11 following entities to operate the program: a hospital or other licensed
12 health care facility, a federally qualified health center, a public health
13 agency, a substance abuse treatment program, an AIDS service
14 organization, or another nonprofit entity designated by the
15 municipality. These entities will also be authorized to contract directly
16 with the commissioner in any municipality in which the governing body
17 has authorized the operation of sterile syringe access programs by
18 ordinance pursuant to the bill.

19 (2) A municipality whose governing body has authorized the
20 operation of sterile syringe access programs within the municipality
21 may require within the authorizing ordinance that an entity as
22 described in the bill obtain approval from the municipality, in a manner
23 prescribed by the authorizing ordinance, to operate a sterile syringe
24 access program prior to obtaining approval from the commissioner to
25 operate such a program, or may permit the entity to obtain approval
26 to operate such a program by application directly to the commissioner
27 without obtaining prior approval from the municipality to operate such
28 a program.

29 (3) Two or more municipalities may jointly establish or authorize
30 establishment of a sterile syringe access program that operates within
31 those municipalities pursuant to adoption of an ordinance by each
32 participating municipality.

33 -- A sterile syringe access program must comply with the following
34 requirements:

35 (1) Sterile syringes and needles are to be provided at no cost to
36 consumers 18 years of age and older;

37 (2) Program staff are to be trained and regularly supervised in:
38 harm reduction; substance abuse, medical and social service referrals;
39 and infection control procedures, including universal precautions and
40 needle stick injury protocol; and programs are to maintain records of
41 staff and volunteer training and of hepatitis C and tuberculosis
42 screening provided to volunteers and staff;

43 (3) The program is to offer information about HIV, hepatitis C and
44 other bloodborne pathogens and prevention materials at no cost to
45 consumers, and seek to educate all consumers about safe and proper
46 disposal of needles and syringes;

1 (4) The program is to provide information and referrals to
2 consumers, including HIV testing options, access to substance abuse
3 treatment programs, and available health and social service options
4 relevant to the consumer's needs;

5 (5) The program is to screen out consumers under 18 years of age
6 from access to syringes and needles, and refer them to substance abuse
7 treatment and other appropriate programs for youth;

8 (6) The program is to develop a plan for the handling and disposal
9 of used syringes and needles in accordance with requirements set forth
10 at N.J.A.C.7:26-3A.1 et seq. for regulated medical waste disposal
11 pursuant to the "Comprehensive Regulated Medical Waste
12 Management Act," and also develop and maintain protocols for post-
13 exposure treatment;

14 (7) The program is to maintain the confidentiality of consumers by
15 the use of confidential identifiers, which are to consist of the first two
16 letters of the first name of the consumer's mother and the two-digit
17 day of birth and two-digit year of birth of the consumer, or by the use
18 of such other uniform Statewide mechanism as may be approved by the
19 commissioner for this purpose;

20 (8) The program is to provide a uniform identification card that has
21 been approved by the commissioner to consumers and to staff and
22 volunteers involved in transporting, exchanging or possessing syringes
23 and needles, or provide for such other uniform Statewide means of
24 identification as may be approved by the commissioner for this
25 purpose;

26 (9) The program is to provide consumers at the time of enrollment
27 with a schedule of program operation hours and locations, in addition
28 to information about prevention and harm reduction and substance
29 abuse treatment services; and

30 (10) The program is to provide aggregate data on a quarterly basis
31 to the commissioner, on a form and in a manner determined by the
32 commissioner, that includes: the number of consumers served by the
33 program, the number of syringes and needles distributed each month,
34 and the number and type of referrals provided to consumers.

35 -- c. A municipality may terminate a sterile syringe access program
36 established or authorized pursuant to the bill, which is operating within
37 that municipality, if its governing body approves such an action by
38 ordinance, in which case the municipality is to notify the commissioner
39 of its action in a manner prescribed by regulation of the commissioner.

40 -- The Commissioner of Health and Senior Services is directed to
41 report to the Governor and the Legislature, no later than one year after
42 the effective date of the bill and biannually thereafter, on the status of
43 sterile syringe access programs established pursuant to the bill, and is
44 to include in that report the data provided to the commissioner by each
45 sterile syringe access program pursuant to the bill.

46 -- The commissioner is further directed to report to the Governor

1 and the Legislature no later than six months after the date that the
2 initial sterile syringe access program, which is approved by the
3 commissioner pursuant to the bill, commences its operations, and is to
4 include in that report:

5 (1) an assessment of whether an adequate number of substance
6 abuse treatment program slots is available to meet the treatment needs
7 of persons who have been referred to substance abuse treatment
8 programs by sterile syringe access programs pursuant to the bill; and

9 (2) a recommendation for such appropriation as the commissioner
10 determines necessary to ensure the provision of an adequate number
11 of substance abuse treatment program slots for those persons.

12 -- The possession of a hypodermic syringe or needle by a consumer
13 who participates in, or an employee or volunteer of, a sterile syringe
14 access program established pursuant to the bill will not constitute an
15 offense pursuant to N.J.S.A.2C:36-1 et seq. This provision extends
16 to a hypodermic syringe or needle that contains a residual amount of
17 a controlled dangerous substance or controlled substance analog.

18 -- Each county freeholder board and the New Jersey Meadowlands
19 Commission, in accordance with standards adopted by regulation of
20 the Commissioner of Environmental Protection in consultation with
21 the Commissioner of Health and Senior Services, is to prepare and
22 adopt a sharps disposal component as an amendment to the district
23 solid waste management plan required pursuant to the "Solid Waste
24 Management Act" to provide for the proper and safe disposal of
25 medical waste generated at home within the district.

26 (1) The sharps disposal component of each district solid waste
27 management plan is to be developed in consultation with a work group
28 established by the governing body of the affected county and the New
29 Jersey Meadowlands Commission, in the case of the Hackensack
30 Meadowlands District, that includes persons not employed by or
31 affiliated with the county or the commission, as the case may be, who
32 have a demonstrated interest or expertise in the use and disposal of
33 sharps, including, but not limited to, representatives of waste
34 management companies, persons with diabetes and licensed health care
35 facilities.

36 (2) The Commissioner of Environmental Protection is to provide
37 such financial assistance as may be available to the commissioner to
38 the various counties to implement the sharps disposal component of
39 the district solid waste management plan, and is authorized to accept
40 such funding as may be made available from the private sector for this
41 purpose.

42 -- The bill directs the Commissioners of Health and Senior Services
43 and Environmental Protection to adopt rules and regulations, pursuant
44 to the "Administrative Procedure Act" (APA), to effectuate the
45 purposes of the bill; however, notwithstanding any provision of the
46 APA to the contrary, the commissioners are to adopt, immediately

1 upon filing with the Office of Administrative Law and no later than the
2 90th day after the effective date of the bill, such regulations as they
3 deem necessary to implement the bill, which are to be effective until
4 the adoption of rules and regulations pursuant to the APA and may be
5 amended, adopted or readopted by the commissioners in accordance
6 with the APA. (It is the sponsors' intent that the Commissioner of
7 Health and Senior Services may consult with the Public Health Council
8 established pursuant to N.J.S.A.26:1A-4 in the adoption of rules and
9 regulations to effectuate the purposes of the bill.)

10 It is the opinion of the sponsors that a municipality which
11 establishes or authorizes a sterile syringe access program pursuant to
12 this bill and its employees would be covered by the provisions of
13 N.J.S.A.59:6-3, which provides as follows: "Neither a public entity nor
14 a public employee is liable for an injury resulting from the decision to
15 perform or not to perform any act to promote the public health of the
16 community by preventing disease or controlling the communication of
17 disease within the community."