

# STATE OF NEW YORK

9552--C

## IN ASSEMBLY

January 23, 2018

Introduced by M. of A. L. ROSENTHAL -- read once and referred to the Committee on Social Services -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee -- again reported from said committee with amendments, ordered reprinted as amended and recommitted to said committee -- reported and referred to the Committee on Codes -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee

AN ACT to amend the social services law, in relation to requiring homeless shelters to keep an opioid antagonist on hand, have at least one trained employee on duty at all times, and provide an opioid antagonist training program for residents

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

Section 1. Article 2-A of the social services law is amended by adding a new title 3 to read as follows:

### TITLE 3

#### OPIOID ANTAGONISTS IN HOMELESS SHELTERS

##### Section 47. Opioid antagonist use and training.

§ 47. Opioid antagonist use and training. 1. Any provider of temporary housing assistance, which shall include, but not be limited to, a family shelter, a shelter for adults, a hotel, an emergency apartment, a domestic violence shelter, a runaway and homeless youth shelter, or a safe house for refugees operating in this state shall have at its premises at all times:

(a) an opioid antagonist and a method of administering it on site which may include, but not be limited to, a naloxone kit; and

(b) at a minimum, one employee trained in the administration of an opioid antagonist on duty at all times.

2. All employees of providers of temporary public housing assistance who are authorized to administer an opioid antagonist shall:

(a) have completed an initial training program, which may include a department of health registered opioid overdose prevention training program;

(b) complete a refresher training program at least every two years;

EXPLANATION--Matter in italics (underscored) is new; matter in brackets [-] is old law to be omitted.

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1 (c) contact the emergency medical system during any response to a  
2 victim of suspected drug overdose and advise if an opioid antagonist is  
3 being used;

4 (d) comply with protocols for response to victims of suspected drug  
5 overdose; and

6 (e) report all responses to victims of suspected drug overdose to the  
7 department of health.

8 3. All providers of temporary housing assistance shall develop a  
9 training plan in conjunction with a registered opioid overdose  
10 prevention program in the applicable region regarding the administration  
11 of opioid antagonists to any individual residing on a provider's prem-  
12 ises who is at risk of experiencing or witnessing an opioid overdose.

13 4. For the purposes of this subdivision, the term "opioid antagonist"  
14 shall mean a federal food and drug administration-approved drug that,  
15 when administered, negates or neutralizes in whole or in part the phar-  
16 macological effects of an opioid in the body and that is limited to  
17 naloxone or other medications approved by the department of health for  
18 this purpose and "naloxone kit" shall mean a prefilled naloxone syringe  
19 or needle-free intranasal drug delivery device.

20 5. The commissioner is authorized to promulgate rules and regulations  
21 necessary for the implementation of this title.

22 § 2. This act shall take effect on the thirtieth day after it shall  
23 have become a law. Effective immediately, the addition, amendment and/or  
24 repeal of any rule or regulation necessary for the implementation of  
25 this act on its effective date are authorized to be made and completed  
26 on or before such effective date.