BOSTON PUBLIC HEALTH COMMISSION REGULATION

Authorizing an Opioid Overdose Prevention and Reversal Pilot Program

Whereas, the City of Boston has a severe and growing public health problem with fatal overdoses resulting from the influx of cheap pure narcotics as well as the abuse of prescription drugs. The Massachusetts Department of Public Health found that drugs were deadlier than motor vehicles: narcotics caused 574 deaths, compared to 521 fatalities attributed to traffic accidents in 2003.

Whereas, the Mayor recognized this problem when he gave active help and encouragement through the development of local neighborhood efforts under the NoDrug Coalitions. Currently 14 coalitions are organized and are addressing this problem through community education, mobilization and treatment advocacy.

Whereas, the Boston Public Health Commission (BPHC) seeks to go beyond these education and prevention efforts and establish a preventive public health pilot program for active opiate drug users who are at risk of dying from fatal opiate overdoses.

Whereas, BPHC seeks to establish a pilot program that would train active opiate drug users in the techniques of overdose prevention and utilization of nasal Naloxone, an opiate antagonist that quickly reverses the respiratory depression that accompanies a heroin or synthetic opiate related overdose and can lead to death. The pilot program would be based at BPHC's needle exchange program (NEP, called AHOPE, Addicts Health Opportunity Program Exchange), which has been in existence since 1994 and is sited in Boston, run by the Boston Public Health Commission.

Therefore, the Boston Public Health Commission enacts the following public health regulation to be adopted for the purpose of establishing a preventive public health pilot program for the distribution of nasal naloxone to active opiate drug users for the prevention of drug overdoses in the city of Boston.

Section 1.00 Pilot Program

BPHC shall establish a pilot program to train active opiate drug users in the techniques of overdose prevention, the utilization of nasal naloxone and to dispense naloxone to program participants. The pilot program will be based at BPHC's needle exchange program.

Section 2.00 Appointment of special employees

All health care providers or other individual providing services pursuant to this regulation shall be considered special employees of BPHC. These special employees shall include, but not limited to, physicians and nurse practitioners licensed in the Massachusetts with authority to prescribe naloxone to participants in the pilot program. Services provided to the pilot program by the special employees shall be done in furtherance of administering a protective public health program pursuant to M.G.L., c. 112, §12C. BPHC shall assume legal liability pursuant to M.G.L., c. 258, related to the special employees' participation in the pilot program.

Section 3.00 Guidelines and Policies

The Executive Director of the Boston Public Health Commission may issue guidelines and policies, setting forth the administration of the pilot program.

Section 4.00 Effective Date.

This regulation shall take effect immediately upon the date of enactment.

Authority: M.G.L. c. 111, §31; M.G.L. c. 111, App. §§2-6(b), 2-7(a)(1), and 2-7(a)(15).