



HOUSE BILL 712: Pilot Project/Used Needle Disposal

2015-2016 General Assembly

Committee:	Rules and Operations of the Senate	Date:	September 17, 2015
Introduced by:	Reps. Faircloth, Horn, Avila, Harrison	Prepared by:	Theresa Matula
Analysis of:	Second Edition		Legislative Analyst

SUMMARY: *House Bill 712 requires the State Bureau of Investigation (SBI), in consultation and collaboration with the NC Harm Reduction Coalition, to establish and implement a used needle and hypodermic syringe disposal pilot program by December 1, 2015. The bill also amends the law to provide that a person shall not be charged for residual amounts of a controlled substance contained in a needle or sharp object. Initially the pilot will operate in two counties, but the SBI may select up to four counties if the pilot is successful. The SBI is required to report to the chairs of the Joint Legislative Oversight Committees on Health and Human Services and Justice and Public Safety regarding the status of the pilot.*

BILL ANALYSIS:

Section 1 of House Bill 712 requires the State Bureau of Investigation (SBI), in consultation and collaboration with the North Carolina Harm Reduction Coalition, to establish and implement a used needle and hypodermic syringe disposal pilot program by December 1, 2015.

Pilot Program: The pilot program must offer the free disposal of used needles and hypodermic syringes and include all of the following:

- (1) Reasonable and adequate security of disposal sites and equipment.
- (2) An accounting of the approximate number of used needles and hypodermic syringes returned and disposed.
- (3) Within each of the counties chosen - a general report of the availability of relevant educational materials; HIV and viral hepatitis counseling and testing; referral services to provide education regarding HIV, AIDS, and viral hepatitis transmission; and drug abuse prevention and treatment counseling and referral services.

Sites: The SBI must select two counties in which to operate the pilot initially, but may select up to four counties total after successful demonstration of the pilot. The SBI must collaborate with the local health departments and local law enforcement agencies of the counties when implementing and operating the pilot program.

Limited Immunity: The bill provides that any person participating in the pilot program must not be charged with or prosecuted for possession of drug paraphernalia for any used needle or hypodermic syringe returned and disposed of, or for residual amounts of a controlled substance contained in the used needle or hypodermic syringe returned and disposed of. The limited immunity does not apply to the possession of needles or hypodermic syringes that are not a part of the pilot program.

Report: No later than one year after implementing the pilot program, the SBI is required to report the results of the pilot program to the chairs of the Joint Legislative Oversight Committee on Health and Human Services and the chairs of the Joint Legislative Oversight Committee on Justice and Public Safety. If the SBI determines the initial pilot program in two counties is a success, the initial report may

O. Walker Reagan
Director



Research Division
(919) 733-2578

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include a recommendation to add two additional counties to the pilot program which would allow the extension of the pilot for an additional year and a subsequent report to the two Committees.

Expiration: The pilot program will expire upon the submission of the report.

Section 2 of the bill amends G.S. 90-113.22(c) to prohibit a person from being charged with or prosecuted for possession of residual amounts of a controlled substance contained in a needle or sharp object if the person alerts the officer to the needle or other sharp object prior to the search.

EFFECTIVE DATE: Section 2 of the bill becomes effective December 1, 2015, the remainder of the bill is effective when it becomes law.