A bill to be entitled
An act relating to an infectious disease elimination
pilot program; creating the “Miami-Dade Infectious
Disease Elimination Act (IDEA)”; amending s. 381.0038,
F.S.; authorizing the University of Miami and its
affiliates to establish a sterile needle and syringe
exchange pilot program in Miami-Dade County;
establishing the pilot program criteria; providing
that the possession, distribution, or exchange of
needles and syringes under the pilot program is not a
violation of the Florida Comprehensive Drug Abuse
Prevention and Control Act or any other law; providing
conditions under which a pilot program staff member,
volunteer, or participant may be prosecuted; requiring
the pilot program to collect certain data for
reporting purposes; prohibiting the collection of
personal identifying information from program
participants; requiring the university and its
affiliates to submit annual reports to the Department
of Health; requiring the university and its affiliates
to submit a final report containing certain
information and summaries to the department;
prohibiting state, county, or municipal funds from
being used to operate the pilot program; requiring the
pilot program to be funded through private grants and
donations; providing for expiration of the pilot
program; providing for severability; providing an
effective date.
Be It Enacted by the Legislature of the State of Florida:

Section 1. This act may be cited as the “Miami-Dade Infectious Disease Elimination Act (IDEA).”

Section 2. Section 381.0038, Florida Statutes, is amended to read:

381.0038 Education; sterile needle and syringe exchange pilot program.—The Department of Health shall establish a program to educate the public about the threat of acquired immune deficiency syndrome.

(1) The acquired immune deficiency syndrome education program shall:

(a) Be designed to reach all segments of Florida’s population;

(b) Contain special components designed to reach non-English-speaking and other minority groups within the state;

(c) Impart knowledge to the public about methods of transmission of acquired immune deficiency syndrome and methods of prevention;

(d) Educate the public about transmission risks in social, employment, and educational situations;

(e) Educate health care workers and health facility employees about methods of transmission and prevention in their unique workplace environments;

(f) Contain special components designed to reach persons who may frequently engage in behaviors placing them at a high risk for acquiring acquired immune deficiency syndrome;

(g) Provide information and consultation to state agencies to educate all state employees; and
(h) Provide information and consultation to state and local agencies to educate law enforcement and correctional personnel and inmates;

(i) Provide information and consultation to local governments to educate local government employees;

(j) Make information available to private employers and encourage them to distribute this information to their employees;

(k) Contain special components which emphasize appropriate behavior and attitude change; and

(l) Contain components that include information about domestic violence and the risk factors associated with domestic violence and AIDS.

(2) The education program designed by the Department of Health shall use all forms of the media and shall place emphasis on the design of educational materials that can be used by businesses, schools, and health care providers in the regular course of their business.

(3) The department may contract with other persons in the design, development, and distribution of the components of the education program.

(4) The University of Miami and its affiliates may establish a single sterile needle and syringe exchange pilot program in Miami-Dade County. The pilot program may operate at a fixed location or through a mobile health unit. The pilot program shall offer the free exchange of clean, unused needles and hypodermic syringes for used needles and hypodermic syringes as a means to prevent the transmission of HIV, AIDS, viral hepatitis, or other blood-borne diseases among intravenous drug
users and their sexual partners and offspring.

(a) The pilot program must:

1. Provide for maximum security of exchange sites and equipment, including an accounting of the number of needles and syringes in use, the number of needles and syringes in storage, safe disposal of returned needles, and any other measure that may be required to control the use and dispersal of sterile needles and syringes.

2. Operate a one-to-one exchange, whereby the participant shall receive one sterile needle and syringe unit in exchange for each used one.

3. Make available educational materials; HIV, AIDS, and viral hepatitis counseling and testing; referral services to provide education regarding the transmission of HIV, AIDS, viral hepatitis, and other blood-borne diseases; and drug abuse prevention and treatment counseling and referral services.

(b) The possession, distribution, or exchange of needles or syringes as part of the pilot program established under this subsection is not a violation of any part of chapter 893 or any other law.

(c) A pilot program staff member, volunteer, or participant is not immune from criminal prosecution for:

1. The possession of needles or syringes that are not a part of the pilot program; or

2. The redistribution of needles or syringes in any form, if acting outside the pilot program.

(d) The pilot program must collect data for annual and final reporting purposes. The annual report must include information on the number of participants served, the number of
needles and syringes exchanged and distributed, the demographic
profiles of the participants served, the number of participants
entering drug counseling and treatment, the number of
participants receiving testing for HIV, AIDS, viral hepatitis,
or other blood-borne diseases, and other data necessary for the
pilot program. However, personal identifying information may not
be collected from a participant for any purpose. An annual
report must be submitted to the Department of Health by July 1
every year until the program expires. A final report is due on
August 1, 2021, to the Department of Health and must describe
the performance and outcomes of the pilot program and include a
summary of the information in the annual reports for all pilot
program years.

(e) State, county, or municipal funds may not be used to
operate the pilot program. The pilot program shall be funded
through grants and donations from private resources and funds.

(f) The pilot program shall expire July 1, 2021.

Section 3. If any provision of this act or its application
to any person or circumstance is held invalid, the invalidity
does not affect other provisions or applications of the act
which can be given effect without the invalid provision or
application, and to this end the provisions of this act are
severable.

Section 4. This act shall take effect July 1, 2016.