



The Commonwealth of Massachusetts  
Executive Office of Health and Human Services  
Department of Public Health  
250 Washington Street, Boston, MA 02108-4619

MAURA T. HEALEY  
Governor

KIMBERLEY DRISCOLL  
Lieutenant Governor

KATHLEEN E. WALSH  
Secretary

ROBERT GOLDSTEIN, MD, PhD  
Commissioner

Tel: 617-624-6000  
www.mass.gov/dph

**To:** DPH BHCSQ/BSAS Licensed and/or Approved Providers

**From:** Deirdre Calvert, Director, Bureau of Substance Addiction Services  
Antonio Sousa, Acting Director, Bureau of Health Care Safety and Quality  
James Lavery, Director, Bureau of Health Professions Licensure  
H. Dawn Fukuda, Assistant Commissioner, Director Bureau of Infectious Disease and Laboratory Sciences

**Date:** September 24, 2024

**Subject:** Harm Reduction Services in Healthcare Settings for People Who Use Drugs (PWUD)

---

The Commonwealth is committed to expanding access to harm reduction services to address the persistently high rates of fatal opioid overdoses and risks associated with the unregulated drug supply across the state. Harm reduction services incorporate a spectrum of strategies to meet people who use drugs “where they’re at,” addressing conditions of use along with the use itself. Interventions and policies grounded in harm reduction principles must reflect specific individual and community needs and goals. Harm reduction services for people who use drugs (PWUD) include, but are not limited to, provision of supplies such as naloxone, fentanyl test strips, and safer consumption materials. These interventions reduce the risk of overdose, bacterial infections, and the transmission of infectious diseases such as hepatitis C and HIV. This document is meant to provide recommendations and resources to support the integration of harm reduction services in healthcare settings.

Healthcare providers have an opportunity to strengthen comprehensive health promotion and disease prevention support for PWUD by incorporating harm reduction into their scopes of practice. On July 10, 2024, the Massachusetts Board of Registration in Nursing (BORN) published advisory [ruling 24-01](#), “The Role of Nursing in Harm Reduction” clarifying that:

*It is the position of the Board that nursing practices that are consistent with harm reduction, including the provision of harm reduction supplies and/or services, do not violate Standards of Conduct found in 244 CMR 9.03(7): “Nurses shall not aid any person in performing any act prohibited by law or regulation” so long as the nurse complies with all organizational policies and procedures. Licensed nurses shall not be subject to professional disciplinary action solely for the provision of harm reduction supplies or services to patients, regardless of setting.*

**We affirm the position articulated by BORN. Further, it is the position of the Department of Public Health that no [licensed healthcare professional](#) should be subject to professional disciplinary action**

**solely for the provision of harm reduction supplies or services to patients and the Commissioner has instructed all boards they may not discipline a healthcare professional solely for the provision of harm reduction supplies to a patient.** Direct provision of harm reduction supplies or services by health care providers and referral to harm reduction services in community settings are lifesaving actions that are appropriate to clinical settings.

### **Provision of Harm Reduction Supplies**

To ensure the safety of PWUD, including patients with opioid use disorder (OUD) and/or presenting after an overdose, healthcare facilities should develop and implement policies to provide harm reduction supplies to patients.

DPH recommends that supplies include: naloxone (two to four doses); [rescue breathing masks](#); safer consumption materials; and [fentanyl test strips](#). Additional supplies may be provided as appropriate (*Appendix A*). Information/referrals should be available on: [SafeSpot](#) (Massachusetts Overdose Prevention Helpline); [community-based harm reduction programs](#) and [Syringe Service Programs](#) (SSPs); drug testing services; [treatment services](#); support groups ([Learn to Cope](#), [Grief Support groups](#), local peer support groups, etc.); and local crisis response resources. Patients should also receive [education](#) on how and why to use harm reduction supplies. Additional information regarding specific harm reduction supplies and resources are provided below.

#### *Syringe Services*

[Syringe Service Programs](#) support access to sterile injection equipment for persons who inject drugs and provide infectious disease testing, overdose prevention and naloxone distribution, and supported referral to substance use disorder treatment programs. At these programs, individuals may access sterile syringes free of cost, dispose of used needles and syringes, and get connected to other services such as testing for Hepatitis C, HIV and other sexually transmitted infections, overdose education, and naloxone.

#### *Naloxone*

To assist with the provision of naloxone, DPH has [published](#) a statewide pharmacy standing order pursuant to M.G.L. c. 94C, § 19B, as amended by section 32 of chapter 208 of the acts of 2018, *An Act for Prevention and Access to Appropriate Care and Treatment of Addiction*, and the Board of Registration in Pharmacy has published a policy regarding the dispensing of naloxone under this standing order. The standing order authorizes licensed pharmacists to dispense naloxone rescue kits to a person at risk of experiencing an opioid-related overdose, family member, friend or other person in a position to assist a person at risk of experiencing an opioid-related overdose.

**M.G.L. c. 94C § 19B(f) protects the physician signing the statewide order, and all practitioners prescribing or dispensing naloxone from criminal or civil liability or any professional disciplinary action.** In addition to the immunity established under M.G.L. c. 94C, § 34A, M.G.L. c. 94C § 19B(g) also provides criminal and civil immunity for anyone, acting in good faith, who administers an opioid antagonist to an individual appearing to experience an opioid-related overdose.

Healthcare providers should develop familiarity with local pharmacies and facilitate access to naloxone for their patients, and patients should be provided with education on how to recognize and respond to an overdose and [how to access naloxone](#) from retail settings, pharmacies, and community-based programs. DPH also recommends that prescribers issue standing orders for naloxone dispensing within their healthcare facility or practice setting (such as a clinic, acute care hospital, or emergency department) for individuals with opioid use disorder and those presenting after an overdose. It is also recommended that facilities allow patients to retain possession of naloxone rescue kits while receiving services.

Provision of naloxone should include written and/or illustrated instructions on how to use the formulation of naloxone being dispensed. Instructions should be available in all common languages among the population being served. Free educational material can be found through the [Massachusetts Health Promotion Clearinghouse](#).

#### *Fentanyl Test Strips (FTS)*

Use of FTS is an engagement and consumer safety harm reduction tool. Use and distribution of FTS by health care providers is supported by DPH. To support access, FTS may be ordered through the [Massachusetts Health Promotion Clearinghouse](#), contingent on inventory. FTS obtained from the Massachusetts Health Promotion Clearinghouse are intended to be used to test for the presence of fentanyl in unregulated substances and are not intended to be used for urine testing, diagnosing patients, and/or making treatment decisions. Provision of FTS should include written or illustrated instructions on how to use the test strips, [such as these wallet cards](#). An FAQ document on FTS for providers can be found [here](#).

#### *Wound Care*

The need for harm reduction supplies evolves as the drug supply evolves. Recently, [increases in xylazine](#) have created increases in ulcerated wounds among PWUD. As such, DPH recommends providers be prepared to address wounds and offer wound care supplies to PWUD, as appropriate. Providers should continue to be aware of [community drug checking trends](#).

#### *Substance Use Services*

The [Massachusetts Substance Use Disorder Helpline](#) is a statewide, public resource for finding substance use treatment, recovery, harm reduction, and problem gambling services. Helpline services are free and confidential, and available 24/7.

#### *Overdose Education*

DPH has made a series of educational modules entitled “[You Can](#)” about reversing an overdose, including learning the signs of an overdose, how to respond, how to administer naloxone, and how to use rescue breathing in response to an overdose, even if you don't have naloxone. These resources may be useful to healthcare providers and for healthcare providers to share with their patients. DPH also supports trainings on overdose prevention and response through the [BeHERE Initiative](#).

#### *Training and Technical Assistance*

Boston Medical Center (BMC) [Grayken Center for Addiction Training and Technical Assistance \(TTA\)](#) provides education, support, and capacity building to community health centers and other healthcare and social service providers on best practices for caring for patients with substance use disorders. The TTA team provides pre-recorded and live trainings, phone support, and on-site technical assistance to community health centers, substance use treatment providers, and healthcare professionals across the state. The TTA program also operates a warmline to facilitate rapid access and/or coordination to care for individuals interested in medications for opioid use disorder treatment, with an on-call prescriber able to provide treatment on-demand for those who urgently need SUD care.

**Appendix A:** Example Harm Reduction Supplies

General Harm Reduction Supplies	
	Naloxone (two to four doses)
	Rescue Breathing Masks
	Fentanyl Test Strips (for testing unregulated substances)
Safer Injection Supplies	
	Syringes of appropriate gauge
	Cookers (container for mixing or heating drugs before use)
	Tourniquets
	Stem Covers
	Co-flex Wraps
	Wound Care Tape
	Saline Ampules
	Sterile Gauze
	Non-stick gauze pads
	Bacitracin Ointment
	Hand Wipes
	Cotton balls
	Band-aids
	Hot Packs
	Cold Packs
	Bleach Kits
	Vitamin C / Ascorbic Acid
Safer Smoking Supplies	
	Chore Boy Scrubbing Pads
	Glass Stems
	Glass Bubbles
	Plastic Razor blades
	Paper wrapped straws
	Scooper Straws (spoon shape on the bottom)
	Plastic Cards (blank PVC cards)
	Sharps Containers
	Fitpacks
Safer Sex Supplies	
	Male Condoms
	Lifestyle KYNG Condoms
	Flavored Condoms - ONE Flavored
	Female Condoms
	Dental Dams

	Lube
Hygiene Supplies	
	Baby Wipes
	Washcloths
	Sunblock
	Razors
	Q-tips
	Empty Plastic Bottles
	Tampons
	Pads
	Hand Sanitizer
	Lip Balm
	Individually Wrapped Tissue Packs