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CLACKAMAS COUNTY BOARD OF COUNTY COMMISSIONERS

Policy Session Worksheet

Presentation Date: April 28, 2026

Approx. Start Time: 2:30 PM

Approx. Length: 1 hour

Presentation Title: Syringe Exchange Safety Barrier Ordinance Research

Department: Health, Housing and Human Services and County Counsel

Presenters: Mary Rumbaugh, Director; Andrew Naylor, Assistant Counsel

WHAT ACTION ARE YOU REQUESTING FROM THE BOARD?

Staff will present information on Syringe Service Programs (SSP) in Clackamas County and options for syringe service program policy consideration.

EXECUTIVE SUMMARY:

Clackamas County is committed to the dual priorities of safe communities and the prevention of infectious disease transmission. As such, Clackamas County continues to explore options to ensure that syringes are properly disposed of and that programs are appropriately situated within our communities.

SB 1573 (Attachment A) was introduced in the 2026 legislative session and did not pass. In February 2026, the Board of County Commissioners requested staff return with recommendations to advance community safety, in a manner similar to SB 1573.

SSPs are a well-established public health intervention that reduces transmission of HIV and hepatitis C and serve as critical entry points to substance use treatment, wound care, overdose prevention, and other services. Oregon law authorizes local public health authorities and community partners to operate SSPs, many of which rely on mobile or temporary outreach to reach underserved populations. SSPs typically operate in a fixed physical location or through a mobile service (i.e. providers drive to the patients).

Currently, Public Health is not aware of any mobile or temporary SSPs operating within unincorporated or incorporated Clackamas County. Clackamas County contracts with Outside In to provide syringe services at two fixed locations within the county: Clackamas Service Center (unincorporated) and The Father's Heart (incorporated).

H3S leadership, in consultation with County Counsel and Transportation and Development, researched three options for the Board of Commissioners to consider:

1. Adopt a local ordinance (higher cost and feasibility concerns)

The Board could adopt an ordinance similar to SB 1573 that restricts operation of SSPs within a specified distance of certain facilities.

There are significant implementation and oversight costs associated with a local ordinance of this nature, as it would require County Code Enforcement and/or Public Health staff time and resources to establish a new regulatory enforcement system

If an ordinance is pursued, H3S recommends the following:

- a. A 1,000-foot buffer around K–12 schools to balance community concerns with operational feasibility. Inclusion of childcare facilities is not recommended, as it would create a “moving target” for compliance given the ubiquity of such facilities and their frequent opening and closing.

- b. Inclusion of an exemption process (e.g. for public health emergencies), to ensure timely service delivery during an emergency or access to health services.
- c. Do not include broad civil liability related to proximity requirements, as such provisions could disproportionately impact syringe service programs and the populations they serve and may discourage individuals from accessing services that reduce harm and support pathways to care.

The ordinance would also need to be drafted to ensure compliance with applicable laws.

2. Implement a contract-based SSP policy (lower costs and feasibility concerns)

Given the County’s current use of contracted syringe service providers, incorporating clear expectations into scopes of work offers a practical approach that is less costly and avoids the administrative complexity of an ordinance. Contract provisions could include requirements related to syringe disposal, as well as service evaluation. Similar exemption processes would be included in the policy, and any restrictions would need to be in compliance with applicable law.

3. Defer action and monitor state legislation

Delay local action pending the upcoming legislative session, where legislation may be reintroduced and could preempt county-level action. This approach also allows time to coordinate with local cities should a statewide policy not be adopted.

FINANCIAL IMPLICATIONS (current year and ongoing):

Is this item in your current budget? YES NO N/A

What is the cost? Unknown at this time, depending on which option the Board selects staff could return with an estimate at a future date when appropriate.

What is the funding source? Unknown

STRATEGIC PLAN ALIGNMENT:

- **How does this item align with your Department’s Strategic Business Plan goals?**
Alignment with community safety & health if actions maintain equitable access to prevention services, reduce environmental harm, and address community concerns.
- **How does this item align with the County’s Performance Clackamas goals?**
The options considered intersect with the Performance Clackamas Healthy People goal to create a recovery-oriented system of care (ROSC) that addresses homelessness, mental health and substance use disorders across a continuum of care.

LEGAL/POLICY REQUIREMENTS:

Ordinances restricting access to SSPs have been challenged in other jurisdictions. Were the Board to impose either an ordinance or policy restricting SSPs from operating near certain facilities, such ordinance or policy would need to be closely reviewed to ensure compliance with applicable law.

PUBLIC/GOVERNMENTAL PARTICIPATION: N/A

OPTIONS:

1. Direct staff to draft an ordinance restricting syringe service program operations.
2. Direct staff to draft a syringe service program policy for inclusion in provider contracts.
3. Take no action at this time and monitor state legislation.
4. Direct staff on an alternative approach

RECOMMENDATION:

Staff recommends Option #3: Take no action at this time and monitor state legislation.

ATTACHMENTS:

A: SB 1573

SUBMITTED BY:

Division Director/Head Approval __Kim La Croix_____

Department Director/Head Approval __Mary Rumbaugh_____

County Administrator Approval _____

For information on this issue or copies of attachments, please contact __Kim La Croix_____@ 971-806-0004_____

Attachment A

83rd OREGON LEGISLATIVE ASSEMBLY--2026 Regular Session

Senate Bill 1573

Sponsored by Senator DRAZAN, Representative EDWARDS, Senator ANDERSON; Senators MEEK, SMITH DB, THATCHER, Representatives BUNCH, EVANS, HELFRICH, ISADORE, LEVY B, LEWIS, RESCHKE, RIEKE SMITH, SMITH G, WRIGHT, YUNKER (at the request of Stadiumhood) (Pre-session filed.)

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure as introduced. The statement includes a measure digest written in compliance with applicable readability standards.

Digest: The Act says a syringe service program may not operate by a school or child care facility. (Flesch Readability Score: 65.1).

Prohibits a syringe service program from operating a mobile or temporary location within 2,000 feet of a school or licensed child care facility. Defines "syringe service program." Provides that any person may bring a cause of action for damages against a syringe service program operating in violation of the prohibition.

A BILL FOR AN ACT

Relating to syringe service programs.

Be It Enacted by the People of the State of Oregon:

SECTION 1. (1) As used in this section:

(a) "Licensed child care facility" means a child care center certified under ORS 329A.280 that is operating under authority of a valid business license.

(b) "Syringe service program" means a program that provides services including free sterile needles and syringes and safe disposal for needles and syringes.

(2) A syringe service program may not provide services from a mobile or temporary location that is within 2,000 feet of the real property comprising an existing:

(a) Public or private elementary, secondary or career school attended primarily by minors; or

(b) Licensed child care facility.

(3)(a) Any person may bring an action to enforce the requirements of subsection (2) of this section in the circuit court in the county in which a syringe service program operates.

(b) In an action under this subsection, there is a rebuttable presumption that discarded needles, syringes or drug paraphernalia, as defined in ORS 475.525, found within 2,000 feet of the real estate described in subsection (2) of this section were discarded from a syringe service program operating in violation of subsection (2) of this section.

(c) A plaintiff who prevails in an action under this subsection may recover the greater of:

(A) \$5,000; or

(B) The actual damages incurred by the plaintiff to clean up the discarded items.

(d) The court shall award reasonable attorney fees to the plaintiff if the plaintiff prevails in an action under this subsection.

NOTE: Matter in boldfaced type in an amended section is new; matter [italic and bracketed] is existing law to be omitted. New sections are in boldfaced type.