THE GENERAL ASSEMBLY OF PENNSYLVANIA

SENATE BILL

No. 1152 Session of 2022

INTRODUCED BY MASTRIANO, ARGALL, PHILLIPS-HILL, STEFANO AND PITTMAN, MARCH 24, 2022

AS AMENDED ON SECOND CONSIDERATION, HOUSE OF REPRESENTATIVES, OCTOBER 25, 2022

AN ACT

- 1 Establishing the Overdose Mapping System INFORMATION NETWORK; <-2 providing for implementation and for use; and conferring
- powers and imposing duties on the Pennsylvania State Police.
- 4 The General Assembly of the Commonwealth of Pennsylvania
- 5 hereby enacts as follows:
- 6 Section 1. Short title.
- 7 This act shall be known and may be cited as the Overdose
- 8 Mapping Act.
- 9 Section 2. Definitions.
- 10 The following words and phrases when used in this act shall
- 11 have the meanings given to them in this section unless the
- 12 context clearly indicates otherwise:
- 13 "Application programming interface." A set of tools,
- 14 definitions and protocols for building and integrating
- 15 application software and services with different software
- 16 programs.
- 17 "AUTHORIZED USERS." LAW ENFORCEMENT OFFICERS, EMS PROVIDERS, <--

- 1 MEDICAL PERSONNEL AND ANY OTHER PERMITTED USERS OF THE OVERDOSE
- 2 INFORMATION NETWORK, AS DETERMINED BY THE PENNSYLVANIA STATE
- 3 POLICE, WHO ARE REQUIRED TO REPORT OVERDOSES AND SUSPECTED
- 4 OVERDOSES TO THE NETWORK IN ACCORDANCE WITH THIS ACT.
- 5 "Emergency medical services provider" or "EMS provider." As <--
- 6 defined in 35 Pa.C.S. § 8103 (relating to definitions).
- 7 "Information technology platform." As follows:
- 8 (1) The Overdose Information Network (ODIN).
- 9 (2) Any other platform approved by the Pennsylvania
- 10 State Police to capture real-time overdose reporting.
- "Law enforcement officer." A police officer certified A <--
- 12 MEMBER OF THE PENNSYLVANIA STATE POLICE, A SHERIFF OR DEPUTY <--
- 13 SHERIFF OR AN INDIVIDUAL EMPLOYED AS A POLICE OFFICER WHO HOLDS
- 14 A CURRENT CERTIFICATE under 53 Pa.C.S. Ch. 21 Subch. D (relating
- 15 to municipal police education and training).
- 16 "Local leader." Any of the following:
- 17 (1) The chief executive officer of a municipality.
- 18 (2) The governing body of a municipality.
- 19 (3) The chief law enforcement officer of a municipality.
- 20 "Municipality." As defined in 1 Pa.C.S. § 1991 (relating to <--
- 21 definitions).
- 22 "Overdose." Injury to the body that happens when one or more-
- 23 substances are taken in excessive amounts.
- 24 "Overdose incident." An occurrence where a law enforcement
- 25 officer or an EMS provider who administers emergency services
- 26 encounters an individual experiencing, or who recently-
- 27 experienced, a confirmed or suspected overdose.
- 28 "Overdose reversal drug." Naloxone hydrochloride or other-
- 29 similarly acting drug that is approved by the United States Food-
- 30 and Drug Administration for the emergency treatment of an-

- 1 overdose.
- 2 "OVERDOSE." AS FOLLOWS:

- 3 (1) AN ACUTE MEDICAL CONDITION, INCLUDING SEVERE
- 4 PHYSICAL ILLNESS, COMA, MANIA, HYSTERIA OR DEATH, WHICH IS
- 5 THE RESULT OF CONSUMPTION OR USE OF ONE OR MORE CONTROLLED
- 6 SUBSTANCES CAUSING AN ADVERSE REACTION.
- 7 (2) A PERSON'S CONDITION SHALL BE DEEMED AN OVERDOSE IF
- 8 A PRUDENT LAYPERSON WOULD REASONABLY BELIEVE THAT THE
- 9 CONDITION IS IN FACT A DRUG OVERDOSE AND REQUIRES IMMEDIATE
- 10 MEDICAL ATTENTION.
- "OVERDOSE INFORMATION NETWORK" OR "NETWORK." THE STATEWIDE
- 12 OVERDOSE MAPPING AND RESPONSE NETWORK ESTABLISHED UNDER THIS
- 13 ACT.
- 14 "OVERDOSE REVERSAL DRUG." A DRUG OR DEVICE APPROVED BY THE
- 15 FEDERAL FOOD, DRUG, AND COSMETIC ACT (52 STAT. 1040, 21 U.S.C. §
- 16 301 ET SEO.) FOR EMERGENCY REVERSAL OF A KNOWN OR SUSPECTED
- 17 OVERDOSE, INCLUDING NALOXONE HYDROCHLORIDE OR OTHER SIMILARLY
- 18 ACTING DRUGS APPROVED BY THE UNITED STATES FOOD AND DRUG
- 19 ADMINISTRATION.
- 20 "Overdose spike." The occurrence of a significant increase
- 21 in the number of confirmed or suspected overdoses in a certain
- 22 time frame within a specific geographic area.
- 23 "System." The overdose mapping and response system
- 24 established under this act.
- 25 Section 3. Establishment and design.
- 26 (a) Establishment. The Pennsylvania State Police is
- 27 directed to:
- 28 (1) Ascertain and document the number, trends and
- 29 patterns associated with known and suspected overdoses in-
- 30 this Commonwealth and issue an annual report available in an

- online format for reference by county and local officials and the general public.
- (2) Utilize an overdose mapping system in which a central repository containing information about overdose incidents is established and maintained using data from an information technology platform.
- (3) Ensure access to collected data, in the form of raw-data, dashboards and useful exportable reports, by State, county and local governmental, public health and public-safety stakeholders to real time data that may be used to-make actionable decisions in as close to real time as-possible.
- (4) Send automatic and immediate overdose spike alerts
 to preapproved State, county and local governmental, public
 health and public safety leaders who may use the notification
 to make decisions regarding how to respond to overdose
 anomalies in their areas of responsibility. Initial
 recommended spike thresholds shall be established using
 relevant public health data. Local leaders shall have the
 option to adjust the local spike threshold to fit the local
 response plan needs.
- (5) Share examples of the spike response framework with State, county and local leaders and support the leaders in the implementation of the responses by providing access to overdose data and useful reports based on the data.
- (6) Using an application programming interface, connectthe data in the Pennsylvania State Police system with the Overdose Mapping Application Program created by the Washington-Baltimore High Intensity Drug Trafficking Areas.

(A) ESTABLISHMENT. -- THE PENNSYLVANIA STATE POLICE SHALL

- 1 LAUNCH AN OVERDOSE INFORMATION NETWORK FOR THE PURPOSE OF
- 2 ELECTRONICALLY TRACKING KNOWN OR SUSPECTED OVERDOSES IN THIS
- 3 COMMONWEALTH, THE FOLLOWING APPLY:
- 4 (1) THE NETWORK SHALL BE ADMINISTERED BY THE
- 5 PENNSYLVANIA STATE POLICE, WHICH SHALL HAVE DESIGNATED
- 6 NETWORK ADMINISTRATORS AS NEEDED TO MEET THE DEMANDS OF THE
- 7 NETWORK AND THE INDIVIDUALS USING THE NETWORK IN CONSULTATION <--
- 8 WITH THE DEPARTMENT OF HEALTH. ALL TECHNICAL ONBOARDING,
- 9 ASSISTANCE AND MAINTENANCE OF THE OVERDOSE INFORMATION
- 10 NETWORK SHALL BE PROVIDED BY THE PENNSYLVANIA STATE POLICE.
- 11 (2) THE OVERDOSE INFORMATION NETWORK SHALL BE ACCESSIBLE
 12 BY AUTHORIZED USERS.
- 13 (3) THE PENNSYLVANIA STATE POLICE, IN CONSULTATION WITH <--
- 14 THE DEPARTMENT OF HEALTH, SHALL ADOPT, AMEND AND RESCIND
- 15 RULES, REGULATIONS, GUIDELINES AND PROTOCOLS FOR THE FUNCTION
- AND ADMINISTRATION OF THE NETWORK, WHICH SHALL ADDRESS, AT A
- 17 MINIMUM, THE FOLLOWING:
- 18 (I) THE BEST OPTIONS FOR MAINTAINING THE NETWORK AND
- 19 ENSURING EASE OF USE AND ONLINE ACCESS BY AUTHORIZED
- 20 USERS, INCLUDING DEVELOPING INSTRUCTIONS ON HOW TO USE
- 21 AND ACCESS THE NETWORK.
- 22 (II) THE BEST PRACTICES FOR RECORD RETENTION WITHIN
- THE NETWORK.
- 24 (III) IDENTIFYING AND DEFINING ROLES OF AUTHORIZED
- USERS WHO HAVE ACCESS TO THE NETWORK.
- 26 (IV) SPIKE THRESHOLDS DEVELOPED BY THE DEPARTMENT OF <--
- 27 HEALTH USING RELEVANT PUBLIC HEALTH DATA.
- 28 $\frac{\text{(IV)}}{\text{(V)}}$ (V) ANY OTHER ASPECT OF THE NETWORK'S FUNCTION, <--
- USE OR ADMINISTRATION AS MAY BE REQUIRED OVER TIME TO
- 30 ENSURE THAT THE NETWORK MEETS THE NEEDS OF AUTHORIZED

1 USERS AND LOCAL LEADERS.

THE OVERDOSE INFORMATION NETWORK SHALL SEND 2 AUTOMATIC AND IMMEDIATE OVERDOSE SPIKE-ALERTS TO PREAPPROVED 3 STATE, COUNTY AND LOCAL GOVERNMENTAL, PUBLIC HEALTH AND 4 5 PUBLIC SAFETY LEADERS, WHICH MAY BE USED TO MAKE ACTIONABLE DECISIONS IN THEIR AREAS OF RESPONSIBILITY. SPIKE THRESHOLDS <--6 7 SHALL BE ESTABLISHED BY LOCAL LEADERS USING RELEVANT PUBLIC 8 HEALTH DATA, LOCAL LEADERS SHALL HAVE THE OPTION TO ADJUST 9 THE LOCAL SPIKE THRESHOLD TO FIT THE LOCAL RESPONSE PLAN

- (5) THE PENNSYLVANIA STATE POLICE SHALL SHARE EXAMPLES OF THE SPIKE-RESPONSE FRAMEWORK WITH STATE, COUNTY AND LOCAL LEADERS AND SUPPORT THE LEADERS IN THE IMPLEMENTATION OF THE RESPONSES BY PROVIDING ACCESS TO OVERDOSE DATA AND USEFUL REPORTS BASED ON THE DATA.
- 16 (6) THE PENNSYLVANIA STATE POLICE SHALL UTILIZE AN

 17 APPLICATION PROGRAMMING INTERFACE TO CONNECT THE DATA IN THE

 18 NETWORK WITH THE OVERDOSE MAPPING APPLICATION PROGRAM CREATED

 19 BY THE WASHINGTON-BALTIMORE HIGH INTENSITY DRUG TRAFFICKING

 20 AREAS.
 - (7) THE PENNSYLVANIA STATE POLICE SHALL ENTER INTO
 PARTICIPATION AGREEMENTS, DATA SHARING AGREEMENTS AND OTHER
 MEMORANDA OF UNDERSTANDING NECESSARY TO FULLY IMPLEMENT THE
 NETWORK WITH OTHER COMMONWEALTH, COUNTY OR LOCAL ENTITIES.
- 25 (b) Design.--The system must OVERDOSE INFORMATION NETWORK <-26 SHALL be designed to avoid data entry duplication wherever
- 27 possible, which may include using one or more application
- 28 programming interfaces to transfer information about overdose
- 29 incidents OVERDOSES that are currently reported to active <--
- 30 databases existing in this Commonwealth.

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NEEDS.

1 (C) ANNUAL REPORT. -- THE PENNSYLVANIA STATE POLICE, IN <--2 CONJUNCTION WITH THE DEPARTMENT OF HEALTH THE DEPARTMENT OF <--HEALTH, IN CONJUNCTION WITH THE PENNSYLVANIA STATE POLICE, SHALL 3 ISSUE AN ANNUAL REPORT AND POST THE REPORT ON ITS PUBLICLY 4 ACCESSIBLE INTERNET WEBSITE. THE REPORT MUST IDENTIFY, AT A 5 MINIMUM, THE FOLLOWING INFORMATION: 6 7 THE TOTAL NUMBER OF KNOWN OR SUSPECTED OVERDOSES IN 8 EACH COUNTY. 9 (2) THE TOTAL NUMBER OF OVERDOSE REVERSAL DRUGS 10 ADMINISTERED BY AUTHORIZED USERS TO KNOWN OR SUSPECTED OVERDOSE VICTIMS IN EACH COUNTY. 11 12 (3) THE TOTAL NUMBER OF REPORTED OVERDOSE DEATHS <--13 INVOLVING ANY OPIOID OR SYNTHETIC OPIOID IN EACH COUNTY. 14 (4) THE TOTAL NUMBER OF REPORTED OVERDOSE DEATHS <--INVOLVING A CONTROLLED SUBSTANCE OTHER THAN AN OPIOID OR 15 SYNTHETIC OPIOID IN EACH COUNTY. 16 (5) THE TOTAL NUMBER OF REPORTED OVERDOSE DEATHS 17 <--18 INVOLVING FENTANYL OR ANY ANALOGUE OF FENTANYL OR ANY 19 CONTROLLED SUBSTANCE OR COUNTERFEIT SUBSTANCE CONTAINING ANY TRACE OF FENTANYL OR ANY ANALOGUE OF FENTANYL IN EACH COUNTY. 20 (6) THE TIME AND GEOGRAPHIC LOCATION OF ANY OVERDOSE 21 22 SPIKES. 23 (7) CONTACT INFORMATION FOR THE NATIONAL DRUG ABUSE 24 HOTLINE, THE DEPARTMENT OF DRUG AND ALCOHOL PROGRAM'S HOTLINE AND ANY OTHER SUBSTANCE ABUSE TREATMENT PROVIDERS OR DRUG 25 26 REHABILITATIVE SPECIALISTS. Section 4. Entry requirements for law enforcement and EMS-27 <--28 providers who administer emergency services. <--29 (a) Reporting by law enforcement officers. A law <--

30 enforcement officer who goes to an overdose incident must report

- 1 information about the overdose incident to an information
- 2 technology platform as soon as possible, but no later than 72
- 3 hours after the overdose incident, to the extent that the
- 4 information is known.
- 5 (b) Reporting by EMS provider who administers emergency
- 6 services. An EMS provider who administers emergency services
- 7 who goes to an overdose incident, or who transports an
- 8 individual experiencing a confirmed or suspected overdose to a
- 9 medical facility, must report information about the overdose-
- 10 incident to an information technology platform as soon as-
- 11 possible, but no later than 72 hours after the overdose
- 12 incident, to the extent that the information is known. If an
- 13 individual is experiencing a confirmed or suspected overdose and
- 14 was not transported to a medical facility by an individual
- 15 required to report under this subsection, medical personnel at-
- 16 the receiving medical facility shall report information about
- 17 the overdose under this section.
- 18 (c) Information reported. At a minimum, the following
- 19 information about an overdose incident must be reported by the-
- 20 law enforcement officer or EMS provider identified in this-
- 21 section using an information technology platform:
- 22 (A) REPORTING BY LAW ENFORCEMENT OFFICERS AND EMS <--
- 23 PROVIDERS.--A LAW ENFORCEMENT OFFICER OR EMS PROVIDER WHO <--
- 24 ENCOUNTERS A KNOWN OR SUSPECTED OVERDOSE SHALL ACCESS THE
- 25 OVERDOSE INFORMATION NETWORK TO REPORT AND DOCUMENT THE INCIDENT
- 26 IN ACCORDANCE WITH SUBSECTION (C) NO LATER THAN 72 HOURS AFTER <--
- 27 THE OVERDOSE. (B) WITHIN 72 HOURS OF THE OVERDOSE.
- 28 (B) REPORTING BY MEDICAL PERSONNEL. IF AN INDIVIDUAL IS <--

- 29 EXPERIENCING A KNOWN OR SUSPECTED OVERDOSE AND WAS NOT-
- 30 TRANSPORTED TO A MEDICAL FACILITY BY A LAW ENFORCEMENT OFFICER

- 1 OR EMS PROVIDER, MEDICAL PERSONNEL AT THE RECEIVING MEDICAL
- 2 FACILITY SHALL ACCESS THE OVERDOSE INFORMATION NETWORK TO REPORT
- 3 AND DOCUMENT THE OVERDOSE IN ACCORDANCE WITH SUBSECTION (C) NO
- 4 LATER THAN 72 HOURS AFTER THE OVERDOSE VICTIM'S ARRIVAL OR
- 5 ADMISSION TO THE MEDICAL FACILITY.
- 6 (C) (B) INFORMATION REPORTED. -- AN WHEN REPORTING A KNOWN OR <--
- 7 SUSPECTED OVERDOSE, AN AUTHORIZED USER SHALL DOCUMENT THE
- 8 FOLLOWING INFORMATION IN THE OVERDOSE INFORMATION NETWORK:
- 9 (1) The date and time of the overdose incident. <--
- 10 (2) The location of the overdose incident.
- 11 (3) Whether an overdose reversal drug was administered <--

- 12 and, if so, the number of doses and the type of delivery.
- 13 (4) (3) THE KNOWN OR SUSPECTED CONTROLLED SUBSTANCES <--
- ADMINISTERED TO OR INHALED, INGESTED, IMBIBED OR INJECTED BY
- 15 THE OVERDOSE VICTIM.
- 16 (4) WHETHER AN OVERDOSE REVERSAL DRUG WAS ADMINISTERED
- 17 AND, IF SO, THE TYPE OF OVERDOSE REVERSAL DRUG ADMINISTERED,
- 18 THE NUMBER OF DOSES ADMINISTERED AND THE METHOD OF
- 19 ADMINISTRATION.
- 20 (5) Whether the confirmed or suspected overdose was
- 21 fatal or nonfatal.
- 22 (d) (C) Other reporting requirements.--An individual's or <--
- 23 entity's AUTHORIZED USER'S report of information about an
- 24 overdose incident under this act does not preempt or replace any <--
- 25 other reporting requirement applicable to that individual or <--
- 26 entity THE AUTHORIZED USER. <--
- 27 Section 5. Implementation.
- 28 (a) General rule. During the course of implementing the <--
- 29 system, the Pennsylvania State Police:
- 30 (1) Shall enter into participation agreements, data

- 1 sharing agreements and other memoranda of understanding-
- 2 necessary to fully implement the system with other
- 3 Commonwealth, county or local entities.
- 4 (2) May promulgate rules, regulations or standard
- 5 operating procedures necessary to carry out the requirements
- 6 of this act.
- 7 (b) Limitation of liability. -- Individuals or entities
- 8 reporting information about an overdose incident under this act-
- 9 in good faith are not subject to civil or criminal liability or
- 10 damages for making the report, unless their acts or omissions
- 11 constitute willful and wanton misconduct.
- 12 (c) Compliance. The failure of a law enforcement officer or
- 13 an EMS provider who administers emergency services, or medical
- 14 personnel if applicable, to report information about an overdose-
- 15 incident as required by this act constitutes a form of
- 16 unprofessional conduct. The Pennsylvania State Police may:
- 17 (1) Refer matters of noncompliance to the appropriate
- 18 local entity supervisor.
- 19 (2) Exempt law enforcement officers or EMS providers who
- 20 administer emergency services based on resource or
- 21 technological limitations.
- 22 (d) Report. The Pennsylvania State Police shall issue a
- 23 progress report to the General Assembly regarding the usage of
- 24 the overdose mapping system implementation at six months, 12-
- 25 months and 30 months after the effective date of this section.
- 26 (A) LIMITATION OF LIABILITY. -- AUTHORIZED USERS WHO REPORT

- 27 INFORMATION ABOUT AN OVERDOSE UNDER THIS ACT IN GOOD FAITH ARE
- 28 IMMUNE FROM CIVIL LIABILITY OR DAMAGES FOR MAKING THE REPORT,
- 29 UNLESS THEIR ACTS OR OMISSIONS CONSTITUTE WILLFUL AND WANTON
- 30 MISCONDUCT.

- 1 (B) COMPLIANCE. IF AN AUTHORIZED USER FAILS TO REPORT
- 2 INFORMATION ABOUT AN OVERDOSE OR OTHERWISE FAILS TO COMPLY WITH
- 3 THE REQUIREMENTS OF THIS ACT, THE PENNSYLVANIA STATE POLICE MAY
- 4 REFER MATTERS OF NONCOMPLIANCE TO THE APPROPRIATE SUPERVISOR OF
- 5 THE AUTHORIZED USER.
- 6 (C) (B) REPORT.--THE PENNSYLVANIA STATE POLICE SHALL ISSUE A <--
- 7 PROGRESS REPORT TO THE GENERAL ASSEMBLY REGARDING ITS
- 8 IMPLEMENTATION, ADMINISTRATION AND MAINTENANCE OF THE OVERDOSE
- 9 INFORMATION NETWORK AT 6 MONTHS, 12 MONTHS AND 30 MONTHS AFTER
- 10 THE EFFECTIVE DATE OF THIS SECTION. THE PROGRESS REPORT SHALL
- 11 IDENTIFY, AT A MINIMUM, THE FOLLOWING:
- 12 (1) THE COSTS INCURRED BY THE PENNSYLVANIA STATE POLICE
- 13 IN IMPLEMENTING, ADMINISTERING AND MAINTAINING THE NETWORK.
- 14 (2) A FULL STATISTICAL ANALYSIS OF THE REPORTS OF
- 15 OVERDOSES MADE TO THE NETWORK.
- 16 (3) ANY INSTANCES OF WILLFUL AND GROSS NONCOMPLIANCE
- 17 WITH THE PROVISIONS OF THIS ACT.
- 18 (4) ANY RECOMMENDATIONS FOR ADDITIONAL LEGISLATION TO
- 19 FULFILL THE PURPOSES OF THIS ACT AND TO COMBAT DRUG
- TRAFFICKING, DRUG ABUSE, OVERDOSES AND OVERDOSE DEATHS.
- 21 Section 6. Use.
- 22 (a) General rule. The information about overdose incidents <--
- 23 reported under this act shall be available to users of an
- 24 information technology platform authorized to view the data in-
- 25 real time. The process by which authorized users are decided
- 26 upon and designated shall be addressed in one or more of the
- 27 following when implementing the system:
- 28 (1) Participation agreements.
- 29 (2) Data sharing agreements.
- 30 (3) Memoranda of understanding.

1 (b) Limitations.--

(1) Information about overdose incidents reported to the <-system by an individual or entity OVERDOSES REPORTED TO THE <-OVERDOSE INFORMATION NETWORK BY AN AUTHORIZED USER other than
a law enforcement officer may not be used for a criminal
investigation or prosecution of any individual who satisfies
the exemption from criminal liability contained in section
13.7 of the act of April 14, 1972 (P.L.233, No.64), known as
The Controlled Substance, Drug, Device and Cosmetic Act. The
reporting of information about overdose incidents OVERDOSES <-as provided for in this act does not diminish the protections
afforded by section 13.7 of the The Controlled Substance, <-Drug, Device and Cosmetic Act.

- (2) Except for the sharing of personally identifying <-information, the sharing of overdose incident information <-collected by the system OVERDOSE INFORMATION NETWORK by, <-between and among governmental agencies, programs and
 nongovernmental organizations whose missions include the
 mitigation of illegal substance use, trafficking, treatment <-SUBSTANCE ABUSE, DRUG TRAFFICKING, DRUG TREATMENT, harm
 reduction and recovery support is permissible under this act.
- (2) THE SHARING OF OVERDOSE INCIDENT INFORMATION <-COLLECTED BY THE OVERDOSE INFORMATION NETWORK BY, BETWEEN AND
 AMONG GOVERNMENTAL AGENCIES, PROGRAMS AND NONGOVERNMENTAL
 ORGANIZATIONS IN ORDER TO PROVIDE OR OTHERWISE FACILITATE
 TREATMENT RELATED TO SUBSTANCE USE DISORDER OR BEHAVIORAL
 HEALTH IS PERMISSIBLE UNDER THIS ACT.
- 28 Section 7. Funding.
- 29 (a) Federal funds.--The Pennsylvania State Police shall
 30 pursue all Federal funding for the initial start up and ongoing <--

- 1 activities ANY AVAILABLE FEDERAL FUNDING TO IMPLEMENT,
- <--
- 2 ADMINISTER AND MAINTAIN THE OVERDOSE INFORMATION NETWORK AS
- 3 required under this act.
- 4 (b) Receipt of funding. -- The Pennsylvania State Police may
- 5 receive gifts, grants and endowments from public or private
- 6 sources as may be made from time to time, in trust or otherwise,
- 7 for the use and benefit of the purposes of this act and expend
- 8 the same or any income derived from it according to the terms of
- 9 the gifts, grants or endowments.
- 10 Section 8. Effective date.
- 11 This act shall take effect in 60 days.