

SENATE BILL REPORT

SB 5880

As Reported By Senate Committee On:
Health & Long-Term Care, March 1, 1999

Title: An act relating to needle stick protections.

Brief Description: Establishing needle stick protections.

Sponsors: Senators Thibaudeau, Winsley, Wojahn, Heavey, Franklin, Deccio, Prentice, McAuliffe, Costa, Swecker, McDonald, Johnson, B. Sheldon and Oke.

Brief History:

Committee Activity: Health & Long-Term Care: 2/24/99, 3/1/99 [DPS-WM].
Ways & Means: 3/8/99.

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: That Substitute Senate Bill No. 5880 be substituted therefor, and the substitute bill do pass and be referred to Committee on Ways & Means.

Signed by Senators Thibaudeau, Chair; Wojahn, Vice Chair; Costa, Deccio, Franklin, Johnson and Winsley.

Staff: Joan K. Mell (786-7447)

SENATE COMMITTEE ON WAYS & MEANS

Staff: Brian Sims (786-7431)

Background: The federal government estimates that health care workers incur between 600,000 and 1 million needle stick injuries per year. Many of these needles have been used and are potentially contaminated. Of all the blood-borne diseases transmitted by used needles, the human immunodeficiency virus (HIV) usually raises the most concern. However, there are up to 20 other blood-borne diseases that can be transmitted to health care workers as a result of exposure to blood on the job. Of these, Hepatitis B and Hepatitis C pose the most serious threat to health care workers. Experts now estimate that more health care workers will eventually die due to complications from occupational exposure to Hepatitis C than from HIV.

Summary of Substitute Bill: The Department of Labor and Industries (L&I) must adopt emergency rules by September 1999 (and six months after, adopt permanent rules) governing occupational exposure to blood-borne pathogens, such as Hepatitis B virus, Hepatitis C virus, and HIV.

The emergency rules must require each employer to conduct product evaluations of needleless systems and sharps, which must be conducted by front-line health care workers

representing all wards and medical specialties where they are used. The product evaluation period should continue for not less than six months from the date of commencement.

L&I must consider additional revisions to the blood-borne pathogen standard to prevent sharps injuries or exposure incidents including training and educational requirements, measures to increase vaccinations, strategic placement of sharps containers and increased use of personal protective equipment.

Written exposure control plans must be developed including a requirement that information concerning exposure incidents be recorded in a sharps injury log.

The Department of Health must compile and maintain a list of existing needleless systems and sharps with engineered sharps injury protection, that is available to assist employers in complying with these requirements.

Substitute Bill Compared to Original Bill: The term sharp– has been redefined to exclude broken glass and the term sharps injury– has been redefined to exclude human bites.

A violation of the emergency rules results in a warning only.

Exceptions are set forth to the engineering control requirement for sharps and needles: engineering controls are not available in the marketplace; engineering controls would jeopardize safety according to the employer and front line workers; and engineering controls are not safer according to the employer after certification that employees were adequately trained with a normal adjustment period to adapt to the new device.

Provisions are added to require written exposure control plans include an effective procedure for identifying and selecting safe systems.

Written control plans must be updated, not less than annually.

The Department of Labor and Industries is authorized to promulgate additional amendments to the bloodborne pathogen standard necessary to implement the act and must evaluate the impact of the rules on reduction of injuries to the extent funds are promulgated.

Appropriation: None.

Fiscal Note: Requested on February 21, 1999.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Testimony For: Significant occupational injuries have resulted from an accidental needle stick and other sharp injuries. Some people have even died from diseases such as AIDS communicated to them from the needle stick or other injury. Safety mechanisms for needles and other instruments are available and are safe. It is cost effective to implement protections for workers at risk of harm.

Concerns are expressed that sharps as defined in the bill is too broad and that there is no exception for the exercise of professional judgment regarding the appropriateness of the safety device for a particular patient.

Testimony Against: None.

Testified: Dwight Bushue, Tamara Warnke, Washington State Nurses Association (pro); Ellie Menzies, SEIU/1199 (pro); Lisa Thatcher, Washington State Hospital Association (concerns); Michael Silverstien, L&I (pro); Jeff Larsen, WOMA, WAPA (concerns); Linda Hull, Washington State Dental Association & NW Kidney Center (concerns); Peter Marchson, WSMA (concerns); Nick Federick, WAITSA (concerns).