

SENATE BILL REPORT

SHB 1304

As of March 9, 2011

Title: An act relating to administration of drugs by health care assistants.

Brief Description: Concerning the administration of drugs by health care assistants.

Sponsors: House Committee on Health Care & Wellness (originally sponsored by Representatives Jinkins, Harris, Green, Cody, Van De Wege, Kelley, Schmick, Bailey, Clibborn, Moeller, Hinkle and Reykdal).

Brief History: Passed House: 2/14/11, 93-1.

Committee Activity: Health & Long-Term Care: 3/09/11.

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Staff: Kathleen Buchli (786-7488)

Background: A certified health care assistant is authorized to provide assistance to certain licensed health care practitioners, such as physicians, nurses, and naturopaths. A licensed health practitioner may delegate certain functions to the health care assistant such as administering skin tests, injections, and performing blood withdrawals. Each health care assistant is certified by the facility in which they are employed, or by the practitioner who delegates functions to the health care assistant, pursuant to standards adopted by the Department of Health (DOH) in rule. The facility or practitioner must submit a roster of certified health care assistants to the DOH. Health care assistants are divided into seven different categories based on differing educational, training, and experiential requirements.

The different tasks each category of health care assistant may perform are as follows (all health care assistants may administer vaccines):

- Category A: venous and capillary invasive procedures for blood withdrawal.
- Category B: arterial invasive procedures for blood withdrawal.
- Category C: intradermal, subcutaneous, and intramuscular injections for diagnostic agents and the administration of skin tests.
- Category D: intravenous injections for diagnostic agents.
- Category E: intradermal, subcutaneous, and intramuscular injections and the administration of skin tests.
- Category F: intravenous injections for therapeutic agents.
- Category G: hemodialysis.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

In 2009 the Legislature authorized health care assistants to administer certain over-the-counter drugs (e.g., Benadryl, acetaminophen, ibuprofen, aspirin, or Neosporin) and certain legend drugs (e.g., kenalog, hydrocortisone cream, raglan, or compazine). The administration of these drugs is limited to oral, topical, rectal, otic, ophthalmic, or inhaled routes and must be pursuant to a written order of a supervising health care practitioner. Only category C or E health care assistants may administer oral drugs.

The provisions allowing health care assistants to administer drugs expire on July 1, 2013.

Summary of Bill: Only category C or E health care assistants may administer over-the-counter drugs and legend drugs (as opposed to oral over-the-counter and legend drugs). The DOH must adopt any rules necessary to implement this limitation.

Appropriation: None.

Fiscal Note: Available.

Committee/Commission/Task Force Created: No.

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

Staff Summary of Public Testimony: PRO: This is a technical correction. The bill adopted in 2009 was over-inclusive by drawing in health care assistants who do not have the proper training to administer medication. Only two categories of health care assistants have the proper training to administer medication and this bill will apply to those two categories who have the proper training and also work in the appropriate setting. All parties agree that this is an appropriate change.

Persons Testifying: PRO: Representative Jinkins, prime sponsor; Carl Nelson, Washington State Medical Association; Sofia Aragon, Washington State Nurses Association.