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COMMITTEE SUBSTITUTE

[ public health and safety - Needlestick Injury  
Prevention Act - duties of the Committee -  
codification -

emergency ]

BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

SECTION 1. NEW LAW A new section of law to be codified  
in the Oklahoma Statutes as Section 1-539.1 of Title 63, unless  
there is created a duplication in numbering, reads as follows:

A. This act shall be known and may be cited as the "Needlestick  
Injury Prevention Act".

B. For purposes of the Needlestick Injury Prevention Act:

1. "Bloodborne pathogens" means pathogenic microorganisms that  
are present in human blood and that can cause disease in humans  
including, but not limited to, hepatitis B virus (HBV), hepatitis C  
virus (HCV), and human immunodeficiency virus (HIV);

2. "Committee" means the Needlestick Injury Prevention  
Committee;

3. "Engineered sharps injury protection" means:

- a. a physical attribute built into a needle device used  
for withdrawing body fluids, accessing a vein or  
artery, or administering medications or other fluids,  
which effectively reduces the risk of an exposure  
incident through the use of mechanisms such as barrier  
creation, blunting, encapsulation, withdrawal,

retraction, destruction, or other effective mechanisms, or

- b. a physical attribute built into any other type of needle device, or into a nonneedle sharp, which effectively reduces the risk of an exposure incident;

4. "High exposure area" means an operating room including an ambulatory surgical center, an emergency room, an intensive care unit, an ambulance or a rescue service;

5. "Needleless systems" means devices that do not utilize needles for:

- a. the withdrawal of body fluids after initial venous or arterial access is established,
- b. the administration of medication or fluids, and
- c. any other procedure involving the potential for an exposure incident;

6. "Needlestick injury" means the parenteral introduction into the body of a health care worker of blood or other potentially infectious material by a hollow-bore needle or sharp instrument, including, but not limited to, needles, lancets, scalpels, or contaminated broken glass, during the performance of duties of such worker; and

7. "Sharps" means any objects used or encountered in a health care setting that can be reasonably anticipated to penetrate the skin or any other part of the body, and to result in an exposure incident, including, but not limited to, needle devices, scalpels, lancets, broken glass, broken capillary tubes, exposed ends of dental wires and dental knives, drills, and burs.

SECTION 2. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1-539.2 of Title 63, unless there is created a duplication in numbering, reads as follows:

A. By July 1, 2000, each of the following agencies and associations shall appoint a member to the Needlestick Injury Prevention Committee:

1. The State Department of Health;
2. The State Department of Labor;
3. The Oklahoma Board of Nursing;
4. The Oklahoma Health Care Authority;
5. The Oklahoma Hospital Association;
6. The Oklahoma Nurses Association;
7. The Department of Mental Health and Substance Abuse

Services;

8. The Pharmaceutical Research and Manufacturers of America;

and

9. A state wide association of firefighters; and

10. A statewide association of emergency medical care providers at the intermediate or paramedic levels.

B. The State Commissioner of Health shall convene the first meeting of the Committee on or before August 1, 2000.

C. 1. The Committee shall elect a chair and vice-chair from among its members. The Committee shall meet as often as necessary to develop guidelines for the use of needleless systems and engineered sharps injury protection and to comply with the provisions of the Needlestick Injury Prevention Act. A majority of the members shall constitute a quorum for the transaction of business.

2. The Committee is authorized to utilize the conference rooms of the State Department of Health and to obtain staff assistance from the Department as needed.

3. The members of the Committee shall be reimbursed expenses incurred in the performance of their duties as provided in the State Travel Reimbursement Act. For members who are not state employees, the State Department of Health shall be responsible for the

processing and payment of any authorized expense incurred in the performance of such members' duties, as provided in the State Travel Reimbursement Act.

D. Before developing any guidelines for the development of uniform rules, the Committee shall give public notice, offer opportunity for public comment and conduct statewide public meetings.

E. The Committee shall have the power and duty to:

1. Evaluate needleless systems and sharps with engineered sharps injury protection in high exposure areas;

2. Compile a list of existing needleless systems and sharps with engineered sharps injury protection to assist employers;

3. Develop guidelines for uniform administrative rules related to the use of needleless systems and engineered sharps injury protection in high exposure areas;

4. Develop compliance thresholds for needleless systems in high exposure areas;

5. Assess the rate of use of needleless systems in high exposure areas;

6. Develop reporting mechanism for needlestick injuries in high exposure areas by January 1, 2001; and

7. Evaluate and consider such other data and information necessary to perform its duties and responsibilities pursuant to the provisions of the Needlestick Injury Prevention Act.

F. In exercising such powers and duties the Committee shall:

1. Consider training and education requirements and increased use of personal protective equipment in high exposure areas;

2. Consider the cost, cost benefit analysis and the availability of a needleless system; and

3. Consider information contained in the Center for Disease Prevention and Control's publication on universal precautions;

G. 1. On or before February 1, 2003, the Committee shall establish guidelines for the development of uniform administrative rules by the agencies specified in Section 3 of this act related to the use of needleless systems and engineered sharps injury protection. Guidelines established by the Needlestick Prevention Committee and rules promulgated by the state agencies specified in Section 3 of this act shall in no way prohibit or otherwise limit the use of a prefilled syringe that is approved by the federal Food and Drug Administration; provided, however, this exemption shall expire on March 1, 2003.

2. Before developing such guidelines the Committee shall provide an opportunity for public comment through a series of state-wide public hearings. The Committee shall give advance public notice of such hearings.

3. On or before May 1, 2003, the agencies listed in Section 3 of this act shall submit copies of proposed rules to the Committee for review.

4. On or before June 1, 2003, the Committee shall review the proposed rules prepared by such agencies for uniformity and compliance with the guidelines established by the Committee. The Committee shall forward copies of the proposed rules to the Hospital Advisory Council for review.

5. Beginning September 1, 2003, the Hospital Advisory Council shall forward to the Committee for review copies of any proposed amendments to the rules promulgated pursuant to the Needlestick Injury Prevention Act. The Committee shall consider such comments and recommendations in making its recommendations to such agencies for modifications to the proposed rules, as necessary to ensure uniformity and compliance with the established guidelines.

6. On or before July 1, 2003, the Committee shall develop and maintain a list of existing needleless systems and engineered sharps injury protections. This list shall be available to assist

employers in complying with the requirement of the standards, adopted in accordance with the Needlestick Injury Prevention Act.

7. Beginning January 1, 2004, the Committee shall meet not less than annually and more often as necessary, as determined by the chair of the Committee, for the purpose of reviewing proposed or necessary amendments to the rules promulgated pursuant to the Needlestick Injury Prevention Act, in order to ensure the continuing consistency and uniformity of the rules to provide for necessary revisions of the list.

H. Each state agency listed in Section 3 of this act shall provide information and staff assistance as necessary to prepare the rules, procedures, forms and lists required by the Needlestick Injury Prevention Act.

SECTION 3. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1-539.3 of Title 63, unless there is created a duplication in numbering, reads as follows:

A. By November 1, 2001, each of the state agencies specified in subsection C of this section shall have promulgated uniform emergency rules and shall have submitted proposed permanent uniform rules to the Governor and Legislature pursuant to the Administrative Procedures Act for the use of needleless systems and engineered sharps injury protection in this state by health care professionals, licensed health care facilities and at other public or private health care locations. Specifically the uniform rules shall require that:

1. Each public or private health care facility or location have a written exposure control plan for risk exposure to bloodborne pathogens;

2. Sharps prevention technology be included as engineering or work practice controls, except in cases where the employer or other appropriate party can demonstrate circumstances in which the technology does not promote employee or patient safety or interferes

with a medical procedure. Those circumstances shall be specified in the control plan, and shall include, but not be limited to, circumstances where the technology is medically contraindicated or not more effective than alternative measures used by the employer to prevent exposure incidents;

3. The written exposure control plans include an effective procedure for identifying and selecting existing sharps prevention technology;

4. A written exposure control plan be updated when necessary to reflect progress in implementing the sharps prevention technology specified by the Committee and promulgated by rule of the regulating agency;

5. Information concerning exposure incidents be recorded in a sharps injury log, including, but not limited to, the type and brand of device involved in the incident; and

6. Such other requirements deemed necessary by the Needlestick Injury Prevention Committee.

B. The failure of any agency to promulgate rules consistent with the provisions of the Needlestick Injury Prevention Act shall be reported by the Committee in writing to the Speaker of the House of Representatives and the President Pro Tempore of the Senate.

C. Each of the following agencies shall promulgate uniform rules and procedures for the use of needleless systems and engineered sharps injury protection in compliance with the provisions of the Needlestick Injury Prevention Act:

1. The State Department of Health;

2. The State Department of Labor;

3. The Oklahoma Board of Nursing;

4. The Oklahoma Health Care Authority;

5. The Department of Mental Health and Substance Abuse

Services; and

6. The governmental entity responsible for regulation of firefighters.

D. Rules promulgated pursuant to this section shall expire upon sufficient market penetration of sharps prevention technology as determined by the reporting mechanisms required in Section 2 of this act.

SECTION 4. It being immediately necessary for the preservation of the public peace, health and safety, an emergency is hereby declared to exist, by reason whereof this act shall take effect and be in full force from and after its passage and approval.

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CJ

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