## Florida House of Representatives - 1999 HB 2159 By Representative Kosmas

1	A bill to be entitled
2	An act relating to safety standards for public
3	health care employees; providing definitions;
4	requiring that the Department of Health adopt a
5	blood-borne-pathogen standard for public
6	employees; requiring the use of needleless
7	systems and sharps with engineered sharps
8	injury protection; requiring that incidents of
9	exposure be recorded in a sharps injury log;
10	specifying the information to be included in
11	the sharps injury log; authorizing the
12	Department of Health to include additional
13	requirements as part of the
14	blood-borne-pathogen standard; requiring that
15	the department compile a list of needleless
16	systems and sharps with engineered sharps
17	injury protection to assist employers in
18	complying with the department's standard;
19	providing an effective date.
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21	Be It Enacted by the Legislature of the State of Florida:
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23	Section 1. $(1)$ As used in this section, the term:
24	(a) "Blood-borne pathogens" means pathogenic
25	microorganisms that are present in human blood and that can
26	cause disease in humans, including, but not limited to,
27	hepatitis B virus, hepatitis C virus, and human
28	immunodeficiency virus.
29	(b) "Engineered sharps injury protection" means:
30	1. A physical attribute built into a needle device
31	used for withdrawing body fluids, accessing a vein or artery,
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or administering medications or other fluids which effectively 1 2 reduces the risk of an exposure incident by a mechanism such as barrier creation, blunting, encapsulation, withdrawal, 3 retraction, destruction, or other effective mechanisms; or 4 5 2. A physical attribute built into any other type of б needle device, or into a non-needle sharp, which effectively 7 reduces the risk of an exposure incident. 8 (c) "Needleless system" means a device that does not 9 use needles for: 10 1. The withdrawal of body fluids after initial venous 11 or arterial access is established. 2. The administration of medication or fluids. 12 13 3. Any other procedure that involves the potential for 14 an exposure incident. 15 (d) "Public employer" means any employer that employs 16 public employees who have occupational exposure to blood or 17 other material that potentially contains blood-borne 18 pathogens. 19 (e) "Public employee" means an employee of the state 20 or a political subdivision of the state who is employed in a health care facility, home health care organization, or other 21 22 facility that provides health care services. (f) "Sharp" means any object used or encountered in a 23 health care setting which can be reasonably anticipated to 24 25 penetrate the skin or any other part of the body and to result 26 in an exposure incident, including, but not limited to, needle devices, scalpels, lancets, broken glass, broken capillary 27 28 tubes, exposed ends of dental wires, dental knives, drills, 29 and burs. (2) The Department of Health shall adopt a 30 blood-borne-pathogen standard governing public employees. The 31 2

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standard must be at least as stringent as the standard adopted 1 2 by the federal Occupational Safety and Health Administration and must include, but need not be limited to: 3 4 (a) A requirement that needleless systems be 5 implemented and that sharps with engineered sharps injury 6 protection be used in all facilities that employ public 7 employees, except in cases where an evaluation committee, 8 established by the public employer and consisting of a 9 majority of health care workers, determines by means of an objective evaluation of products that the use of such devices 10 11 will jeopardize the safety of patients or employees with 12 respect to a specific medical procedure. 13 (b) A requirement that information concerning 14 incidents of exposure be recorded in a sharps injury log that 15 includes, but need not be limited to: 16 1. The date and time of the exposure incident. 2. The type and brand of sharp involved in the 17 exposure incident. 18 19 3. A description of the exposure incident, which must 20 include: The job classification of the exposed employee. 21 a. 22 b. The department or work area where the exposure 23 incident occurred. 24 c. The procedure that the exposed employee was 25 performing at the time of the incident. 26 d. How the incident occurred. 27 e. The body part involved in the exposure incident. 28 f. If the sharp had engineered sharps injury 29 protection, whether the protective mechanism was activated, 30 and whether the injury occurred before the protective 31

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mechanism was activated, during activation of the mechanism, 1 2 or after activation of the mechanism, if applicable. 3 g. If the sharp did not have a form of engineered 4 sharps injury protection, the injured employee's opinion as to 5 whether and how such a mechanism could have prevented the 6 injury, as well as the basis for the opinion. 7 h. The employee's opinion about whether any other engineering, administrative procedure, or work practice could 8 9 have prevented the injury, as well as the basis for the 10 opinion. 11 (3) The Department of Health shall consider additional 12 requirements as part of the blood-borne-pathogen standard in 13 order to prevent sharps injuries or exposure incidents, including, but not limited to, training and educational 14 15 requirements, measures to increase vaccinations, strategic 16 placement of sharps containers as close to the work area as practical, and increased use of personal protective equipment. 17 (4) The Department of Health shall compile and 18 19 maintain a list of existing needleless systems and sharps with 20 engineered sharps injury protection, which shall be available to assist public employers in complying with the requirements 21 22 of the blood-borne-pathogen standard adopted under this section. The list may be developed from existing sources of 23 24 information, including, but not limited to, the federal Food and Drug Administration, the federal Centers for Disease 25 26 Control and Prevention, the federal Occupational Safety and 27 Health Administration, and the United States Department of 28 Veterans Affairs. 29 Section 2. This act shall take effect July 1, 1999. 30 31

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2	SENATE SUMMARY
3	Requires the Department of Health to adopt a
4	blood-borne-pathogen standard for health care employees employed by the state or a political subdivision of the state. Requires that the standard include the use of
5	needleless systems and sharps with engineered sharps
6	injury protection. Requires that incidents of exposure be recorded in a sharps injury log. Authorizes the Department of Health to include additional requirements
7	in the blood-borne-pathogen standard. (See bill for details.)
8	details.)
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