

**HOUSE . . . . . No. 2056**

By Mrs. Canavan of Brockton, petition of Christine E. Canavan and others relative to needlestick injury prevention in public health facilities. Public Health.

**The Commonwealth of Massachusetts**

PETITION OF:

Christine E. Canavan	Patricia D. Jehlen
David Paul Linsky	Cory Atkins
Kay Khan	William Smitty Pignatelli
Pamela P. Resor	Denise Provost
Bruce E. Tarr	Elizabeth A. Malia
Barbara A. L'Italien	Jennifer M. Callahan

In the Year Two Thousand and Seven.

AN ACT RELATIVE TO NEEDLESTICK INJURY PREVENTION IN PUBLIC HEALTH FACILITIES AND SETTINGS.

*Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:*

- 1 Chapter 111 of the General Laws is hereby amended by inserting
- 2 after Section 53C the following section:—
- 3 SECTION 53D:—All state, county and municipal public health
- 4 facilities, including but not limited to the department of mental retar-
- 5 dation, mental health and public health shall ensure the provision of
- 6 services to individuals through the use of hollow-bore needle
- 7 devices or other technology which minimize the risk of injury to
- 8 health care workers from hypodermic syringes or needles.
- 9 Accordingly, the Department of Public Health shall promulgate
- 10 rules and regulations by November 1, 2008 requiring the use, at all
- 11 state, county and municipal public health facilities, including but not
- 12 limited to the departments of mental retardation, mental health and
- 13 public health, of only such devices which minimize the risk of injury
- 14 to health care workers from needlesticks and sharps, so-called.
- 15 Such rules and regulations promulgated by the department shall
- 16 include the following requirements:—

17 (1) Written exposure control plans shall be developed by each  
18 public health facility that include an effective procedure for identi-  
19 fying and selecting existing sharps prevention technology, so-called,  
20 of the types specified by the department.

21 (2) Sharps injury prevention technology shall be included as engi-  
22 neering and work practice controls, except in cases where the  
23 employer or other appropriate party can demonstrate circumstances  
24 in which the technology does not promote employee or patient  
25 safety or interferes with a medical procedure. Those circumstances  
26 shall be specified by the employer and shall include, but not be lim-  
27 ited to, circumstances where the technology is medically contraindi-  
28 cated or not more effective than alternative measures used by the  
29 employer to prevent exposure incidents. In all cases the department  
30 shall make the final determination as to whether an employer or  
31 other appropriate party has demonstrated in a satisfactory manner  
32 circumstances which warrant an exemption from the inclusion of  
33 sharps injury prevention technology.

34 (3) Information concerning exposure incidents shall be recorded  
35 in a sharps injury log to be kept within the facility and reported  
36 annually to the department, including but not limited to, the type and  
37 brand of device involved in the incident. Such logs shall be used as  
38 the basis for continuing quality improvement in reducing sharps  
39 injuries through the provision of education and the procurement of  
40 improved products. Such logs shall be kept confidential and shall be  
41 used only for the intended purposes of this section.

42 (4) Written exposure control plans shall be updated when neces-  
43 sary to reflect progress in sharps prevention technology as deter-  
44 mined by the department.

45 The department shall compile and maintain a list of needleless  
46 systems, needles, and sharps, so-called, with engineered injury pro-  
47 tections. Said list shall be available to assist employers in complying  
48 with rules and regulations promulgated in accordance with this act.