26:2H-5.10 to 26:2H-5.16

LEGISLATIVE HISTORY CHECK

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LAWS OF: **1999** **CHAPTER:** 311

NJSA: 26:2H-5.10 to 26:2H-5.16 (Health care facilities – use safety needles)

BILL NO: A3546 (Substituted for S2227)

SPONSOR(S): Augustine and Wright

DATE INTRODUCED: November 15, 1999

COMMITTEE: **ASSEMBLY:** ------

SENATE: ------

AMENDED DURING PASSAGE: No

DATE OF PASSAGE: **ASSEMBLY:** December 9, 1999

SENATE: December 13, 1999

DATE OF APPROVAL: January 4, 2000

FOLLOWING ARE ATTACHED IF AVAILABLE:

FINAL TEXT OF BILL: Original
(Amendments during passage denoted by superscript numbers)

A3546

SPONSORS STATEMENT: (Begins on page 4 of original bill) Yes

COMMITTEE STATEMENT: **ASSEMBLY**: No

SENATE: No

FLOOR AMENDMENT STATEMENTS: No

LEGISLATIVE FISCAL ESTIMATE: No

S2227

SPONSORS STATEMENT: (Begins on page 4 of original bill) Yes

COMMITTEE STATEMENT: **ASSEMBLY**: No

SENATE: Yes

FLOOR AMENDMENT STATEMENTS: Yes

LEGISLATIVE FISCAL ESTIMATE: No

VETO MESSAGE: No

GOVERNOR'S PRESS RELEASE ON SIGNING: Yes

FOLLOWING WERE PRINTED:

No

REPORTS:

No

HEARINGS:

Yes

NEWSPAPER ARTICLES:

“New law mandates use of safer syringes,” 1-5-00, Bergen Record, p. A5.

“Safe syringes ok’d by state,” 1-5-00, Home News & Tribune, p. A3.

“Needle bill to protect health care workers,” 1-5-00, Courier News, p. 5A

“New Jersey requires safer needles at hospitals,” 1-5-00, Trenton The Times, p. A7

§§1-7 -
C.26:2H-5.10
to 26:2H-5.16

P.L. 1999, CHAPTER 311, ***approved January 4, 2000***
Assembly, No. 3546

AN ACT concerning the use of needles and other sharp devices in health care facilities and supplementing Title 26 of the Revised Statutes.

BE IT ENACTED *by the Senate and General Assembly of the State of New Jersey:*

1. The Legislature finds and declares that:

a. The use of conventional needles results in increased risk of HIV infection and hepatitis B and C to health care workers;

b. Each year, from 150 to 200 health care workers die and many suffer chronic and debilitating diseases due to needle stick injuries;

c. Equipment exists to prevent most injuries that result from needle stick injuries but overall concern with cutting health care costs has impeded the widespread use of advanced, safer technology; and

d. Newer, safer needle technology should be adopted in health care facilities.

2. As used in this act:

"Commissioner" means the Commissioner of Health and Senior Services.

"Department" means the Department of Health and Senior Services.

"Needle stick injury" means the parenteral introduction into the body of a health care worker of blood or other potentially infectious material by a needle or other sharp device during the worker's performance of health care duties in a health care facility.

3. a. No later than 12 months after the date of enactment of this act, the commissioner shall require that a health care facility licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) use only needles and other sharp devices with integrated safety features, which needles and other sharp devices have been cleared or approved for marketing by the federal Food and Drug Administration and are commercially available for distribution.

b. By a date established by the commissioner by regulation, but no later than 36 months after the date of enactment of this act, the requirements of subsection a. of this section shall also apply to pre-filled syringes, as that term is defined by the commissioner by regulation pursuant to this act.

c. No later than six months after the date of enactment of this act, the commissioner shall develop evaluation criteria for use by an evaluation committee established pursuant to subsection a. of section 4 of this act in selecting needles and other sharp devices for use by a

health care facility.

d. In the event that there is no cleared or approved for marketing product with integrated safety features for a specific patient use, the licensed health care facility shall continue to use the appropriate needle or other sharp device that is available, including any needle or other sharp device with non-integrated, add-on safety features, until such time as a product with integrated safety features is cleared or approved for marketing and is commercially available for that specific patient use.

e. No later than six months after the date of enactment of this act, the commissioner shall develop and make available to health care facilities a standardized form that shall be used by health care professionals and the health care facility's evaluation committee for applying for a waiver and in reviewing a request for a waiver, respectively, and for reporting the use of a needle or other sharp device without integrated safety features in an emergency situation by a health care professional, pursuant to the provisions of subsection d. of section 4 of this act.

4. A health care facility shall:

a. Establish an evaluation committee in which at least half of the members are direct-care health care workers who shall select needles and other sharp devices from each class of needle or other sharp device for which the commissioner has developed evaluation criteria pursuant to subsection c. of section 3 of this act;

b. Provide for education and training, as appropriate, in the use of designated needles and other sharp devices;

c. Develop a mechanism to continually review and evaluate newly introduced needles and other sharp devices available in the marketplace for use in a health care facility;

d. Establish a waiver procedure for health care professionals wherein a health care professional practicing at the health care facility may request the evaluation committee to grant the professional a waiver from the requirements of subsection a. or b. of section 3 of this act for a specific product that will be used for a specific medical procedure that shall be performed on a specific class of patients. The evaluation committee shall grant a waiver if it determines that use of a needle or other sharp device with integrated safety features potentially may have a negative impact on patient safety or the success of a specific medical procedure.

A health care professional may use a needle or other sharp device without integrated safety features in an emergency situation, without obtaining a waiver from the evaluation committee, if the professional determines that use of a needle or other sharp device with integrated safety features potentially may have a negative impact on patient safety or the success of a specific medical procedure, and the professional

notifies the evaluation committee, in writing, within five days of the date the needle or other sharp device was used of the reasons why that needle or other sharp device was necessary.

The use of a needle or other sharp device that does not meet the requirements of subsection a. or b. of section 3 of this act shall be permitted under this act if it is used in accordance with the requirements of this subsection;

e. Record needle stick injuries in a Sharps Injury Log or an OSHA 200 Log, and shall include in the log a description of the injury, including the type and brand name of the needle or other sharp device involved in the injury; and

f. Report to the department quarterly, in a form and manner prescribed by the department: (1) all entries of an injury in a Sharps Injury Log or an OSHA 200 Log; and (2) all waivers granted to health care professionals and the reasons therefor, and all emergency uses by health care professionals of needles and other sharp devices without integrated safety features and the reasons therefor, pursuant to subsection d. of this section.

5. The department shall review the reports submitted by health care facilities pursuant to section 4 of this act on a quarterly basis and shall make recommendations to the respective health care facility for reducing the incidence of needle stick injury, when appropriate.

6. The commissioner shall report annually to the Senate and General Assembly Health Committees on the implementation of this act. The report shall include the number of needle stick injuries, the type and brand names of the needles or other sharp devices involved in the injuries, the number of waivers that were granted and the number of emergency uses of needles or other sharp devices without integrated safety features. The report shall include such recommendations for Legislative action as the commissioner deems appropriate to ensure that the purposes of this act are realized.

7. The commissioner, pursuant to the "Administrative Procedure Act," P.L.1968, c.413 (C.52:14B-1 et seq.), shall adopt rules and regulations to effectuate the purposes of this act.

8. This act shall take effect immediately.

STATEMENT

This bill requires that, no later than 12 months after its date of enactment, the Commissioner of Health and Senior Services shall require that each licensed health care facility use only needles and

other sharp devices with integrated safety features, which needles and other sharp devices have been cleared or approved for marketing by the federal Food and Drug Administration (FDA) and that are commercially available for distribution. Further, by a date established by the commissioner by regulation, but no later than 36 months after the date of enactment of this bill, these requirements shall also apply to pre-filled syringes.

The bill directs the commissioner, no later than six months after the date of enactment of the bill, to develop evaluation criteria for use by an evaluation committee established pursuant to this bill in selecting needles and other sharp devices for use by a health care facility. The bill provides, however, that in the event that there are no FDA-cleared or approved products with integrated safety features that are commercially available for specific patient uses, the licensed health care facility shall continue to use the appropriate needles and other sharp devices, including needles or other sharp devices with non-integrated, add-on safety features, that are available until such time as products with integrated safety features are cleared or approved for that specific patient use.

The bill further requires that a health care facility:

- establish an evaluation committee in which at least half of the members are direct-care health care workers who shall select needles and other sharp devices from each class of needle or other sharp device for which the commissioner has developed evaluation criteria pursuant to this bill;
- provide for education and training, as appropriate, in the use of designated needles and other sharp devices;
- develop a mechanism to continually review and evaluate newly introduced needles and other sharp devices available in the marketplace for use in a health care facility;
- establish a waiver procedure for health care professionals wherein a health care professional practicing at the health care facility may request the evaluation committee to grant the professional a waiver from the requirements to use a needle or other sharp device with integrated safety features for a specific product that will be used for a specific medical procedure that shall be performed on a specific class of patients. The evaluation committee is directed to grant a waiver if it determines that use of a needle or other sharp device with integrated safety features potentially may have a negative impact on patient safety or the success of a specific medical procedure;
- permit a health care professional to use a needle or other sharp device without integrated safety features in an emergency situation, without obtaining a waiver from the evaluation committee, if the professional determines that use of a needle or other sharp device with integrated safety features potentially may have a negative

impact on patient safety or the success of a specific medical procedure, and the professional notifies the evaluation committee, in writing, within five days of the date the needle or other sharp device was used of the reasons why that needle or other sharp device was necessary;

- record needle stick injuries in a Sharps Injury Log or an OSHA 200 Log, and include in the log a description of the injury, including the type and brand name of the needle or other sharp device involved in the injury; and
- report to the Department of Health and Senior Services (DHSS), quarterly, all entries of an injury in a Sharps Injury Log or an OSHA 200 Log and all waivers granted by the evaluation committee and all emergency uses of needles and other sharp devices without integrated safety devices, and the reasons therefor.

The bill stipulates that DHSS shall review the reports of needle stick injuries submitted by health care facilities on a quarterly basis and shall make recommendations to the respective health care facility for reducing the incidence of needle stick injury.

Finally, the bill requires the commissioner to report annually to the Senate and General Assembly Health Committees on the implementation of this bill and include in the report the number of needle stick injuries, the type and brand names of the needles or other sharp devices involved in the injuries, the number of waivers that were granted and the number of emergency uses of needles or other sharp devices without integrated safety features. The report shall include such recommendations for Legislative action as the commissioner deems appropriate to ensure that the purposes of this bill are realized.

Requires health care facilities to use certain safety needles and other sharp devices.

ASSEMBLY, No. 3546

STATE OF NEW JERSEY

208th LEGISLATURE

INTRODUCED NOVEMBER 15, 1999

Sponsored by:
Assemblyman ALAN M. AUGUSTINE
District 22 (Middlesex, Morris, Somerset and Union)
Assemblywoman BARBARA WRIGHT
District 14 (Mercer and Middlesex)

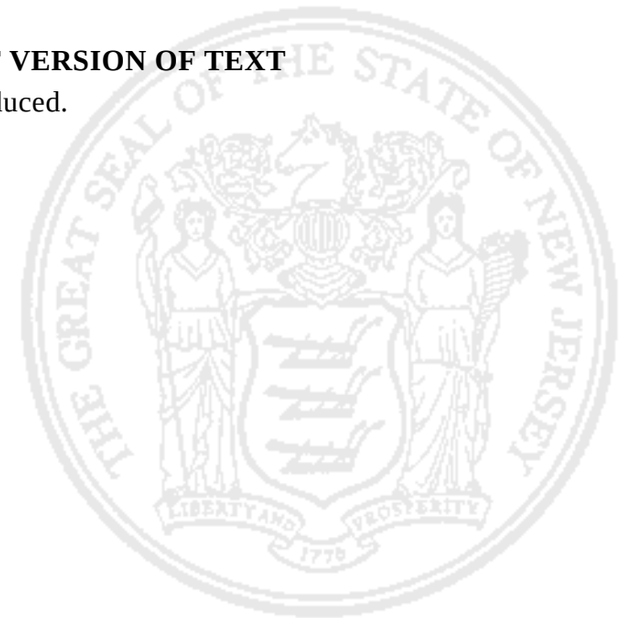
Co-Sponsored by:
Assemblymen Bagger, Biondi, Conaway, Conners, Assemblywoman Crecco, Assemblymen Felice, Gusciora, Assemblywoman Murphy, Assemblyman Wolfe, Senators Vitale, Bennett, Turner, Furnari, Baer, Girgenti, Sinagra, Allen and Inverso

SYNOPSIS

Requires health care facilities to use certain safety needles and other sharp devices.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 12/14/1999)

AN ACT concerning the use of needles and other sharp devices in health care facilities and supplementing Title 26 of the Revised Statutes.

BE IT ENACTED *by the Senate and General Assembly of the State of New Jersey:*

1. The Legislature finds and declares that:

a. The use of conventional needles results in increased risk of HIV infection and hepatitis B and C to health care workers;

b. Each year, from 150 to 200 health care workers die and many suffer chronic and debilitating diseases due to needle stick injuries;

c. Equipment exists to prevent most injuries that result from needle stick injuries but overall concern with cutting health care costs has impeded the widespread use of advanced, safer technology; and

d. Newer, safer needle technology should be adopted in health care facilities.

2. As used in this act:

"Commissioner" means the Commissioner of Health and Senior Services.

"Department" means the Department of Health and Senior Services.

"Needle stick injury" means the parenteral introduction into the body of a health care worker of blood or other potentially infectious material by a needle or other sharp device during the worker's performance of health care duties in a health care facility.

3. a. No later than 12 months after the date of enactment of this act, the commissioner shall require that a health care facility licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) use only needles and other sharp devices with integrated safety features, which needles and other sharp devices have been cleared or approved for marketing by the federal Food and Drug Administration and are commercially available for distribution.

b. By a date established by the commissioner by regulation, but no later than 36 months after the date of enactment of this act, the requirements of subsection a. of this section shall also apply to pre-filled syringes, as that term is defined by the commissioner by regulation pursuant to this act.

c. No later than six months after the date of enactment of this act, the commissioner shall develop evaluation criteria for use by an evaluation committee established pursuant to subsection a. of section 4 of this act in selecting needles and other sharp devices for use by a health care facility.

d. In the event that there is no cleared or approved for marketing product with integrated safety features for a specific patient use, the

licensed health care facility shall continue to use the appropriate needle or other sharp device that is available, including any needle or other sharp device with non-integrated, add-on safety features, until such time as a product with integrated safety features is cleared or approved for marketing and is commercially available for that specific patient use.

e. No later than six months after the date of enactment of this act, the commissioner shall develop and make available to health care facilities a standardized form that shall be used by health care professionals and the health care facility's evaluation committee for applying for a waiver and in reviewing a request for a waiver, respectively, and for reporting the use of a needle or other sharp device without integrated safety features in an emergency situation by a health care professional, pursuant to the provisions of subsection d. of section 4 of this act.

4. A health care facility shall:

a. Establish an evaluation committee in which at least half of the members are direct-care health care workers who shall select needles and other sharp devices from each class of needle or other sharp device for which the commissioner has developed evaluation criteria pursuant to subsection c. of section 3 of this act;

b. Provide for education and training, as appropriate, in the use of designated needles and other sharp devices;

c. Develop a mechanism to continually review and evaluate newly introduced needles and other sharp devices available in the marketplace for use in a health care facility;

d. Establish a waiver procedure for health care professionals wherein a health care professional practicing at the health care facility may request the evaluation committee to grant the professional a waiver from the requirements of subsection a. or b. of section 3 of this act for a specific product that will be used for a specific medical procedure that shall be performed on a specific class of patients. The evaluation committee shall grant a waiver if it determines that use of a needle or other sharp device with integrated safety features potentially may have a negative impact on patient safety or the success of a specific medical procedure.

A health care professional may use a needle or other sharp device without integrated safety features in an emergency situation, without obtaining a waiver from the evaluation committee, if the professional determines that use of a needle or other sharp device with integrated safety features potentially may have a negative impact on patient safety or the success of a specific medical procedure, and the professional notifies the evaluation committee, in writing, within five days of the date the needle or other sharp device was used of the reasons why that needle or other sharp device was necessary.

The use of a needle or other sharp device that does not meet the requirements of subsection a. or b. of section 3 of this act shall be permitted under this act if it is used in accordance with the requirements of this subsection;

e. Record needle stick injuries in a Sharps Injury Log or an OSHA 200 Log, and shall include in the log a description of the injury, including the type and brand name of the needle or other sharp device involved in the injury; and

f. Report to the department quarterly, in a form and manner prescribed by the department: (1) all entries of an injury in a Sharps Injury Log or an OSHA 200 Log; and (2) all waivers granted to health care professionals and the reasons therefor, and all emergency uses by health care professionals of needles and other sharp devices without integrated safety features and the reasons therefor, pursuant to subsection d. of this section.

5. The department shall review the reports submitted by health care facilities pursuant to section 4 of this act on a quarterly basis and shall make recommendations to the respective health care facility for reducing the incidence of needle stick injury, when appropriate.

6. The commissioner shall report annually to the Senate and General Assembly Health Committees on the implementation of this act. The report shall include the number of needle stick injuries, the type and brand names of the needles or other sharp devices involved in the injuries, the number of waivers that were granted and the number of emergency uses of needles or other sharp devices without integrated safety features. The report shall include such recommendations for Legislative action as the commissioner deems appropriate to ensure that the purposes of this act are realized.

7. The commissioner, pursuant to the "Administrative Procedure Act," P.L.1968, c.413 (C.52:14B-1 et seq.), shall adopt rules and regulations to effectuate the purposes of this act.

8. This act shall take effect immediately.

STATEMENT

This bill requires that, no later than 12 months after its date of enactment, the Commissioner of Health and Senior Services shall require that each licensed health care facility use only needles and other sharp devices with integrated safety features, which needles and other sharp devices have been cleared or approved for marketing by the federal Food and Drug Administration (FDA) and that are

commercially available for distribution. Further, by a date established by the commissioner by regulation, but no later than 36 months after the date of enactment of this bill, these requirements shall also apply to pre-filled syringes.

The bill directs the commissioner, no later than six months after the date of enactment of the bill, to develop evaluation criteria for use by an evaluation committee established pursuant to this bill in selecting needles and other sharp devices for use by a health care facility. The bill provides, however, that in the event that there are no FDA-cleared or approved products with integrated safety features that are commercially available for specific patient uses, the licensed health care facility shall continue to use the appropriate needles and other sharp devices, including needles or other sharp devices with non-integrated, add-on safety features, that are available until such time as products with integrated safety features are cleared or approved for that specific patient use.

The bill further requires that a health care facility:

- establish an evaluation committee in which at least half of the members are direct-care health care workers who shall select needles and other sharp devices from each class of needle or other sharp device for which the commissioner has developed evaluation criteria pursuant to this bill;
- provide for education and training, as appropriate, in the use of designated needles and other sharp devices;
- develop a mechanism to continually review and evaluate newly introduced needles and other sharp devices available in the marketplace for use in a health care facility;
- establish a waiver procedure for health care professionals wherein a health care professional practicing at the health care facility may request the evaluation committee to grant the professional a waiver from the requirements to use a needle or other sharp device with integrated safety features for a specific product that will be used for a specific medical procedure that shall be performed on a specific class of patients. The evaluation committee is directed to grant a waiver if it determines that use of a needle or other sharp device with integrated safety features potentially may have a negative impact on patient safety or the success of a specific medical procedure;
- permit a health care professional to use a needle or other sharp device without integrated safety features in an emergency situation, without obtaining a waiver from the evaluation committee, if the professional determines that use of a needle or other sharp device with integrated safety features potentially may have a negative impact on patient safety or the success of a specific medical procedure, and the professional notifies the evaluation committee, in writing, within five days of the date the needle or other sharp

device was used of the reasons why that needle or other sharp device was necessary;

- record needle stick injuries in a Sharps Injury Log or an OSHA 200 Log, and include in the log a description of the injury, including the type and brand name of the needle or other sharp device involved in the injury; and
- report to the Department of Health and Senior Services (DHSS), quarterly, all entries of an injury in a Sharps Injury Log or an OSHA 200 Log and all waivers granted by the evaluation committee and all emergency uses of needles and other sharp devices without integrated safety devices, and the reasons therefor.

The bill stipulates that DHSS shall review the reports of needle stick injuries submitted by health care facilities on a quarterly basis and shall make recommendations to the respective health care facility for reducing the incidence of needle stick injury.

Finally, the bill requires the commissioner to report annually to the Senate and General Assembly Health Committees on the implementation of this bill and include in the report the number of needle stick injuries, the type and brand names of the needles or other sharp devices involved in the injuries, the number of waivers that were granted and the number of emergency uses of needles or other sharp devices without integrated safety features. The report shall include such recommendations for Legislative action as the commissioner deems appropriate to ensure that the purposes of this bill are realized.

SENATE, No. 2227

STATE OF NEW JERSEY

208th LEGISLATURE

INTRODUCED NOVEMBER 8, 1999

Sponsored by:
Senator JOSEPH F. VITALE
District 19 (Middlesex)
Senator JOHN O. BENNETT
District 12 (Monmouth)

Co-Sponsored by:
Senators Turner, Furnari, Baer, Girgenti, Sinagra, Allen and Inverso

SYNOPSIS

Requires health care facilities to use certain safety needles and other sharp devices.

CURRENT VERSION OF TEXT

As introduced.

(Sponsorship Updated As Of: 11/16/1999)

AN ACT concerning the use of needles and other sharp devices in health care facilities and supplementing Title 26 of the Revised Statutes.

BE IT ENACTED *by the Senate and General Assembly of the State of New Jersey:*

1. The Legislature finds and declares that:

a. The use of conventional needles results in increased risk of HIV infection and hepatitis B and C to health care workers;

b. Each year, from 150 to 200 health care workers die and many suffer chronic and debilitating diseases due to needle stick injuries;

c. Equipment exists to prevent most injuries that result from needle stick injuries but overall concern with cutting health care costs has impeded the widespread use of advanced, safer technology; and

d. Newer, safer needle technology should be adopted in health care facilities.

2. As used in this act:

"Commissioner" means the Commissioner of Health and Senior Services.

"Department" means the Department of Health and Senior Services.

"Needle stick injury" means the parenteral introduction into the body of a health care worker of blood or other potentially infectious material by a needle or other sharp device during the worker's performance of health care duties in a health care facility.

3. a. No later than 12 months after the date of enactment of this act, the commissioner shall require that a health care facility licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) use only needles and other sharp devices with integrated safety features, which needles and other sharp devices have been cleared or approved for marketing by the federal Food and Drug Administration.

b. By a date established by the commissioner by regulation, but no later than 36 months after the date of enactment of this act, the requirements of subsection a. of this section shall also apply to pre-filled syringes, as that term is defined by the commissioner by regulation pursuant to this act.

c. No later than six months after the date of enactment of this act, the commissioner shall develop evaluation criteria for use by an evaluation committee established pursuant to subsection a. of section 4 of this act in selecting needles and other sharp devices for use by a health care facility.

d. In the event that there is no cleared or approved for marketing product with integrated safety features for a specific patient use, the licensed health care facility shall continue to use the appropriate needle

or other sharp device that is available, including any needle or other sharp device with non-integrated, add-on safety features, until such time as a product with integrated safety features is cleared or approved for marketing for that specific patient use.

e. No later than six months after the date of enactment of this act, the commissioner shall develop and make available to health care facilities a standardized form that shall be used by health care professionals and the health care facility's evaluation committee for applying for a waiver and in reviewing a request for a waiver, respectively, and for reporting the use of a needle or other sharp device without integrated safety features in an emergency situation by a health care professional, pursuant to the provisions of subsection d. of section 4 of this act.

4. A health care facility shall:

a. Establish an evaluation committee in which at least half of the members are direct-care health care workers who shall select needles and other sharp devices from each class of needle or other sharp device for which the commissioner has developed evaluation criteria pursuant to subsection c. of section 3 of this act;

b. Provide for education and training, as appropriate, in the use of designated needles and other sharp devices;

c. Develop a mechanism to continually review and evaluate newly introduced needles and other sharp devices available in the marketplace for use in a health care facility;

d. Establish a waiver procedure for health care professionals wherein a health care professional practicing at the health care facility may request the evaluation committee to grant the professional a waiver from the requirements of subsection a. or b. of section 3 of this act for a specific product that will be used for a specific medical procedure that shall be performed on a specific class of patients. The evaluation committee shall grant a waiver if it determines that use of a needle or other sharp device with integrated safety features potentially may have a negative impact on patient safety or the success of a specific medical procedure.

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The use of a needle or other sharp device that does not meet the requirements of subsection a. or b. of section 3 of this act shall be

permitted under this act if it is used in accordance with the requirements of this subsection;

e. Record needle stick injuries in a Sharps Injury Log or an OSHA 200 Log, and shall include in the log a description of the injury, including the type and brand name of the needle or other sharp device involved in the injury; and

f. Report to the department quarterly, in a form and manner prescribed by the department: (1) all entries of an injury in a Sharps Injury Log or an OSHA 200 Log; and (2) all waivers granted to health care professionals and the reasons therefor, and all emergency uses by health care professionals of needles and other sharp devices without integrated safety features and the reasons therefor, pursuant to subsection d. of this section.

5. The department shall review the reports submitted by health care facilities pursuant to section 4 of this act on a quarterly basis and shall make recommendations to the respective health care facility for reducing the incidence of needle stick injury, when appropriate.

6. The commissioner shall report annually to the Senate and General Assembly Health Committees on the implementation of this act. The report shall include the number of needle stick injuries, the type and brand names of the needles or other sharp devices involved in the injuries, the number of waivers that were granted and the number of emergency uses of needles or other sharp devices without integrated safety features. The report shall include such recommendations for Legislative action as the commissioner deems appropriate to ensure that the purposes of this act are realized.

7. The commissioner, pursuant to the "Administrative Procedure Act," P.L.1968, c.413 (C.52:14B-1 et seq.), shall adopt rules and regulations to effectuate the purposes of this act.

8. This act shall take effect immediately.

STATEMENT

This bill requires that, no later than 12 months after its date of enactment, the Commissioner of Health and Senior Services shall require that each licensed health care facility use only needles and other sharp devices with integrated safety features, which needles and other sharp devices have been cleared or approved for marketing by the federal Food and Drug Administration (FDA). Further, by a date established by the commissioner by regulation, but no later than 36 months after the date of enactment of this bill, these requirements shall

also apply to pre-filled syringes.

The bill directs the commissioner, no later than six months after the date of enactment of the bill, to develop evaluation criteria for use by an evaluation committee established pursuant to this bill in selecting needles and other sharp devices for use by a health care facility. The bill provides, however, that in the event that there are no FDA-cleared or approved products with integrated safety features for specific patient uses, the licensed health care facility shall continue to use the appropriate needles and other sharp devices, including needles or other sharp devices with non-integrated, add-on safety features, that are available until such time as products with integrated safety features are cleared or approved for that specific patient use.

The bill further requires that a health care facility:

C establish an evaluation committee in which at least half of the members are direct-care health care workers who shall select needles and other sharp devices from each class of needle or other sharp device for which the commissioner has developed evaluation criteria pursuant to this bill;

C provide for education and training, as appropriate, in the use of designated needles and other sharp devices;

C develop a mechanism to continually review and evaluate newly introduced needles and other sharp devices available in the marketplace for use in a health care facility;

C establish a waiver procedure for health care professionals wherein a health care professional practicing at the health care facility may request the evaluation committee to grant the professional a waiver from the requirements to use a needle or other sharp device with integrated safety features for a specific product that will be used for a specific medical procedure that shall be performed on a specific class of patients. The evaluation committee is directed to grant a waiver if it determines that use of a needle or other sharp device with integrated safety features potentially may have a negative impact on patient safety or the success of a specific medical procedure;

C permit a health care professional to use a needle or other sharp device without integrated safety features in an emergency situation, without obtaining a waiver from the evaluation committee, if the professional determines that use of a needle or other sharp device with integrated safety features potentially may have a negative impact on patient safety or the success of a specific medical procedure, and the professional notifies the evaluation committee, in writing, within five days of the date the needle or other sharp device was used of the reasons why that needle or other sharp device was necessary;

C record needle stick injuries in a Sharps Injury Log or an OSHA 200 Log, and include in the log a description of the injury, including the

type and brand name of the needle or other sharp device involved in the injury; and

C report to the Department of Health and Senior Services (DHSS), quarterly, all entries of an injury in a Sharps Injury Log or an OSHA 200 Log and all waivers granted by the evaluation committee and all emergency uses of needles and other sharp devices without integrated safety devices, and the reasons therefor.

The bill stipulates that DHSS shall review the reports of needle stick injuries submitted by health care facilities on a quarterly basis and shall make recommendations to the respective health care facility for reducing the incidence of needle stick injury.

Finally, the bill requires the commissioner to report annually to the Senate and General Assembly Health Committees on the implementation of this bill and include in the report the number of needle stick injuries, the type and brand names of the needles or other sharp devices involved in the injuries, the number of waivers that were granted and the number of emergency uses of needles or other sharp devices without integrated safety features. The report shall include such recommendations for Legislative action as the commissioner deems appropriate to ensure that the purposes of this bill are realized.

SENATE HEALTH COMMITTEE

STATEMENT TO

[First Reprint]

SENATE, No. 2227

STATE OF NEW JERSEY

DATED: DECEMBER 6, 1999

The Senate Health Committee reports favorably Senate Bill No. 2227 (1R).

This bill requires that, no later than 12 months after its date of enactment, the Commissioner of Health and Senior Services shall require that each licensed health care facility use only needles and other sharp devices with integrated safety features, which needles and other sharp devices have been cleared or approved for marketing by the federal Food and Drug Administration (FDA) and which are commercially available. Further, by a date established by the commissioner by regulation, but no later than 36 months after the date of enactment of this bill, these requirements shall also apply to pre-filled syringes.

The bill directs the commissioner, no later than six months after the date of enactment of the bill, to develop evaluation criteria for use by an evaluation committee established pursuant to this bill in selecting needles and other sharp devices for use by a health care facility. The bill provides, however, that in the event that there are no FDA-cleared or approved products with integrated safety features for specific patient uses which are commercially available, the licensed health care facility shall continue to use the appropriate needles and other sharp devices, including needles or other sharp devices with non-integrated, add-on safety features, that are available until such time as products with integrated safety features are cleared or approved and commercially available for that specific patient use.

The bill further requires that a health care facility:

- establish an evaluation committee in which at least half of the members are direct-care health care workers who shall select needles and other sharp devices from each class of needle or other sharp device for which the commissioner has developed evaluation criteria pursuant to this bill;
- provide for education and training, as appropriate, in the use of designated needles and other sharp devices;
- develop a mechanism to continually review and evaluate newly introduced needles and other sharp devices available in the

marketplace for use in a health care facility;

- establish a waiver procedure for health care professionals wherein a health care professional practicing at the health care facility may request the evaluation committee to grant the professional a waiver from the requirements to use a needle or other sharp device with integrated safety features for a specific product that will be used for a specific medical procedure that shall be performed on a specific class of patients. The evaluation committee is directed to grant a waiver if it determines that use of a needle or other sharp device with integrated safety features potentially may have a negative impact on patient safety or the success of a specific medical procedure;
- permit a health care professional to use a needle or other sharp device without integrated safety features in an emergency situation, without obtaining a waiver from the evaluation committee, if the professional determines that use of a needle or other sharp device with integrated safety features potentially may have a negative impact on patient safety or the success of a specific medical procedure, and the professional notifies the evaluation committee, in writing, within five days of the date the needle or other sharp device was used of the reasons why that needle or other sharp device was necessary;
- record needle stick injuries in a Sharps Injury Log or an OSHA 200 Log, and include in the log a description of the injury, including the type and brand name of the needle or other sharp device involved in the injury; and
- report to the Department of Health and Senior Services (DHSS), quarterly, all entries of an injury in a Sharps Injury Log or an OSHA 200 Log and all waivers granted by the evaluation committee and all emergency uses of needles and other sharp devices without integrated safety devices, and the reasons therefor.

The bill stipulates that DHSS shall review the reports of needle stick injuries submitted by health care facilities on a quarterly basis and shall make recommendations to the respective health care facility for reducing the incidence of needle stick injury.

Finally, the bill requires the commissioner to report annually to the Senate and General Assembly Health Committees on the implementation of this bill and include in the report the number of needle stick injuries, the type and brand names of the needles or other sharp devices involved in the injuries, the number of waivers that were granted and the number of emergency uses of needles or other sharp devices without integrated safety features. The report shall include such recommendations for Legislative action as the commissioner deems appropriate to ensure that the purposes of this bill are realized.

This bill is identical to Assembly Bill No. 3546 (Augustine/Wright) which is pending before the Assembly.

STATEMENT TO

SENATE, No. 2227

with Senate Floor Amendments
(Proposed By Senators VITALE and BENNETT)

ADOPTED: NOVEMBER 15, 1999

This amendment clarifies that the requirement to use only needles and other sharp devices with integrated safety features that have been cleared or approved for marketing by the federal Food and Drug Administration (FDA) applies to such devices that are commercially available for distribution.

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Office of the Governor
NEWS RELEASE

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RELEASE: January 4, 2000

Governor Signs Safe Needles Bill
Provides Protection for Health Care Workers

Governor Christie Whitman today signed legislation that will require health care facilities to use safety needles and sharp devices.

"Every day health care workers dedicate themselves to providing quality health services to our citizens," said Governor Whitman. "We must recognize the risks they may face when administering some treatments. This bill will help minimize the incidence of inadvertent needle stick injuries suffered by health care workers."

A-3546 was sponsored by Assembly Members Alan M. Augustine (R- Middlesex/ Morris/Somerset/Union) and Barbara Wright (R-Mercer/Middlesex) and Senators Joseph F. Vitale (D-Middlesex), John O. Bennett (R-Monmouth), Jack Sinagra ((R-Middlesex), Diane B. Allen (R-Burlington/Camden) and Peter A. Inverso (R-Mercer/Middlesex), will require health care facilities to use safety needles and sharp devices with integrated safety features.

The Commissioner of the Department of Health and Senior Services will establish a date upon which the bill would apply to pre-filled syringes. Also, the Commissioner will develop evaluation criteria that will be used in selecting specific needles and other sharp devices to be used.

If a safety needle is not available for a specific patient use, another needle or sharp device may be used until products with the safety features are available.

In addition, each health care facility must establish an evaluation committee to select needles and other sharp devices according to the criteria established by DHSS. Education and training must be provided in the use of the safety needles and a mechanism must be created to continually evaluate newly introduced needles.

A record must be kept of all needle stick injuries and reported to DHHS. Also, a procedure must be established for health care professionals to request a waiver to use a needle that is not a safety needle selected by the facility. In addition, a health care professional is permitted to use a needle that is not a selected safety needle if the safety needle may have a negative impact on patient safety or the success of a medical procedure. All waivers may be reported to DHSS and the Department will report annually to the Senate and Assembly Health Committees on the implementation of this bill.