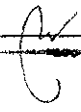


FIFTEENTH CONGRESS OF THE REPUBLIC)
OF THE PHILIPPINES)
First Regular Session)

SENATE
OFFICE OF THE SECRETARY

10 JUL 21 AM 38

SENATE
S. No. 1706

RECEIVED BY: 

Introduced by Senator Miriam Defensor Santiago

EXPLANATORY NOTE

The Constitution, Article 2, provides:

Section 15. The State shall protect and promote the right of health of the people and instill health consciousness among them.

The Constitution, Article 2 further provides:

Section 18. The State affirms labor as a primary social economic force. It shall protect the rights of workers and promote their welfare.

Health workers are constantly exposed to the risk of acquiring deadly disease such as hepatitis and the Acquired Immunodeficiency Syndrome (AIDS) caused by bloodborne pathogens. These diseases can be transmitted to health care workers who are exposed to sharp related injuries when caring for patients. Considering the important role of health workers in keeping our citizens healthy, the legislature needs to pass measures that will protect them from occupational health risks that will endanger their lives.*


MIRIAM DEFENSOR SANTIAGO

* This bill was originally filed during the Thirteenth Congress, First Regular Session.

10 JUL 21 AM 10:38

SENATE
S. No. 1706

RECEIVED BY: 

Introduced by Senator Miriam Defensor Santiago

1 AN ACT
2 TO REQUIRE THE SECRETARIES OF HEALTH AND LABOR TO
3 ISSUE REGULATIONS TO ELIMINATE OR MINIMIZE THE SIGNIFICANT RISK
4 OF NEEDLESTICK INJURY TO HEALTH CARE WORKERS

5 *Be it enacted by the Senate and the House of Representatives of the Philippines in Congress*
6 *assembled:*

7 SECTION 1. *Short Title.* - This Act shall be cited as the "Health Care Worker
8 Needlestick Prevention Act."

9 SECTION 2. *Declaration of policy.* -It is the policy of the State to:

10 (A) Protect and promote the right of health of the people and instill health consciousness
11 among them; and

12 (B) Protect the rights of workers and promote their welfare. Harmonizing these two
13 policies, the State clearly has the role of protecting the health of the people, particularly the
14 workers, in specific job-related risks.

15 SECTION 3. *Definitions.* -For purposes of this Act, the term:

16 (A) "Bloodborne pathogens" means pathogenic microorganisms that are present in
17 human blood and can cause disease in humans. These pathogens include hepatitis B virus,
18 hepatitis C virus, and human immunodeficiency virus;

19 (B) "Contaminated" means the presence of the reasonably anticipated presence of blood
20 or other potentially infectious materials on an item or surface;

21 (C) "Direct care health care worker" means an employee responsible for direct patient
22 care with potential occupational exposure to sharps related injuries;

23 (D) "Employer" means each employer having an employee with occupational exposure
24 to human blood or other material potentially containing bloodborne pathogens;

1 (E) “Engineered sharps injury protection” means –

2 (1) A physical attribute built into a needle device used for withdrawing body
3 fluids, accessing a vein or artery, or administering medications or other fluids that
4 effectively reduces the risk of exposure incident by a mechanism such as a barrier
5 creation. Blunting, encapsulation, withdrawal, retraction, destruction, or other
6 effective mechanisms; or

7 (2) A physical attribute built into any type of needle device, or into a non-needle
8 sharp, which effectively reduces the risk of an exposure incident;

9 (F) “Needleless system” means a device that does not use needles for –

10 (1) The withdrawal of body fluids after initial venous or arterial access is
11 established;

12 (2) The administration of medication or fluids; and

13 (3) Any other procedure involving the potential for an exposure incident;

14 (G) “Sharp” means any objects used or encountered in a health care setting that can be
15 reasonably anticipated to penetrate the skin or any other part of the body, and to result in an
16 exposure incident, including, but not limited to, needle devices, scalpel, lancets, broken gals,
17 broken capillary tubes, exposed ends of dental wires and dental knives, drills and burs;

18 (H) “Sharps injury” means any injury caused by a sharp, including cuts, abrasions, or
19 needlesticks; and

20 (I) “Sharps injury log” means a written or electronic record satisfying the requirements of
21 Section 4.

22 SECTION 4. *Requirements.* –

23 (A) *Bloodborne Pathogens Standard.* - Except as provided in paragraph (B) the
24 Secretary of Health and the Secretary of Labor, shall prescribe the bloodborne pathogens
25 standard to require that:

26 (1) Employers utilize needleless systems and sharps with engineered sharps injury
27 protections in their work sites to prevent the spread of bloodborne pathogens; and

1 (2) To assist employers in meeting the above requirement, non-managerial direct
2 health care workers of employers participate in the identification and evaluation
3 of needleless systems and sharps with engineered sharps injury protections.

4 (B) *Exception.* - The bloodborne pathogens standard requirements of paragraph (A) shall
5 apply to any employer, except where the employer demonstrates, to the Secretary's satisfaction,
6 that –

7 (1) There are circumstances in the employer's work facility in which the
8 needleless systems and sharps with engineered sharps injury protections do not
9 promote employee safety, interfere with patient safety, or interfere with the
10 success of a medical procedure; or

11 (2) The needleless systems and sharps with engineered sharps injury protections
12 required are not commercially available to the employer.

13 (C) *Exposure Plan Control.* - The employer shall include in their exposure, plan control
14 an effective procedure for identifying and selecting existing needleless systems and sharps injury
15 protecting and other methods of preventing bloodborne pathogens exposure.

16 (D) *Sharps Injury Log.* - The employer shall maintain a separate contaminated sharps
17 injury log containing the following information, to the extent such information is known to the
18 employer, with regard to each exposure incident:

19 (1) The date and time of the exposure incident;

20 (2) The type and brand of sharp involved in the exposure incident;

21 (3) The description of the exposure incident which shall include –

22 (a) The job classification of the exposed employee;

23 (b) The department or work area where the exposure incident occurred;

24 (c) The procedure that the exposed employee was performing at the time of the
25 incident;

26 (d) How the incident occurred;

27 (e) The body part involved in the exposure incident;

28 (f) If the sharp had engineered sharp injury protections, whether the protective
29 mechanism was activated, and whether the injury occurred before the protective

1 mechanism was activated, during the activation of the mechanism, or after
2 activation of the mechanism, if applicable; and whether the employee received
3 training on how to use the device before use, and a brief description of the
4 training.

5 (g) If the sharp had no engineered sharps injury protections, the injured
6 employee's opinion as to whether and how such a mechanism could have
7 prevented the injury, as well as basis for the opinion; and

8 (h) The employee's opinion about whether any other engineering, administrative,
9 or work practice control could have prevented the injury as well as the basis for
10 the opinion.

11 (E) *Training.* - A requirement that all direct care health care workers shall be provided
12 adequate training on the use of all needleless systems and sharps with engineered sharps injury
13 protections which they may be required to use.

14 SECTION 5. *Clearing House on Safer Needle Technology.* -

15 (A) *In General.* - The Department of Health and the Department of Labor and
16 Employment shall establish and maintain a national database on existing needleless systems and
17 sharps with engineered sharps injury protections.

18 (B) *Evaluation Criteria.* - The Secretary of Health and the Secretary of Labor and
19 Employment shall develop a set of evaluation criteria for use by employers, employees, and
20 other persons when they are evaluating and selecting needleless systems and sharps with
21 engineered sharps injury protections,

22 (C) *Training.* - The Secretary of Health and the Secretary of Labor and Employment shall
23 develop a model training curriculum to train employers, employees, and other persons on the
24 process of evaluating needleless systems and sharps with engineered sharps injury protection and
25 shall, to the extent feasible, provide technical assistance to persons who request such assistance.

26 (D) *Monitoring.* - The Secretary of Health and the Secretary of Labor and Employment
27 shall establish a national system to collect comprehensive data on needlestick injuries to health
28 care workers, including data mechanisms to analyze and evaluate prevention interventions in
29 relation to needlestick injury occurrence. In carrying out its duties under this paragraph, the

1 Department of Health and the Department of Labor and Employment shall have access to
2 information recorded by employers on the sharps injury log as required by Section 4.

3 SECTION 6. *Appropriation.* - To carry out the provisions of this Act, such amount as
4 may be necessary is hereby authorized to be appropriated from the National Treasury.
5 Thereafter, the amount necessary for the continuous operation of the Act shall be included in the
6 annual appropriation of the Department of Health and the Department of Labor and
7 Employment.

8 SECTION 7. *Separability Clause.* - If any provision or part hereof, is held invalid or
9 unconstitutional, the remainder of the law or the provision not otherwise affected shall remain
10 valid and subsisting.

11 SECTION 8. *Repealing Clause.* - Any law, presidential decree or issuance, executive
12 order, letter of instruction, administrative order, rule or regulation contrary to or is inconsistent
13 with the provision of this Act is hereby repealed, modified, or amended accordingly.

14 SECTION 9. *Effectivity Clause.* - This Act shall take effect fifteen (15) days after its
15 publication in at least two (2) newspapers of general circulation.

16 Approved,