

**SR-46, As Adopted by Senate, October 31, 2013**

**Substitute for Senate Resolution No. 46.**

A resolution to encourage the inclusion of syringe and scalpel safety scores in health care facility accreditation audits.

Whereas, Health care workers face many occupational risks as they care for sick and injured persons. Sharps-related injuries from needles or scalpels are the most significant of these risks. The Centers for Disease Control and Prevention estimates that about 385,000 sharps-related injuries occur annually among health care workers in hospitals in the United States. A health care worker who is accidentally pricked by a needle or scalpel may be exposed to dangerous blood-borne pathogens, such as HIV, hepatitis B, or hepatitis C; and

Whereas, Innovative safety technologies have been developed to protect health care workers and others from sharps-related injuries. Safety syringes contain a shield over the needle or retract the needle into the syringe barrel after use. Safety scalpels have protective sheaths to guard against accidental cuts. Health care workers are particularly susceptible to a sharps injury when used scalpel blades are removed and replaced with new ones. Single-handed scalpel blade removers allow users to safely remove blades from the handle, instead of using fingers or forceps; and

Whereas, A health care facility's use of sharps-related safety technology can be evaluated using "safety scores." The Syringe Safety Score could be determined by calculating the portion of a health care facility's annual syringe purchases which are comprised of safety syringes. A Scalpel Safety Score can be determined by comparing annual purchases of safety scalpels and single-handed scalpel blade removers with the health care facility's total annual scalpel blade purchases. A Suture Needle Safety Score could be determined by calculating the proportion of a health care facility's annual suture needle purchases that are comprised of blunt-tipped suture needles; and

Whereas, Assessing health care facilities' utilization of sharps-related safety technologies can contribute to staff and patient safety. Syringes cause 3.2 injuries per 100,000 purchased, and scalpels cause 662 injuries per 100,000 purchased. Helping health care facilities reduce these numbers will help promote a culture of safety for health care workers and patients; now, therefore, be it

Resolved by the Senate, That we encourage the inclusion of syringe and scalpel safety scores in health care facility accreditation audits; and be it further

Resolved, That copies of this resolution be transmitted to the Michigan Department of Community Health, the Bureau of Health Facilities Licensing in the Department of Licensing and Regulatory Affairs, and all bodies conducting health care facility accreditation in Michigan.