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**SUBSTITUTE SENATE BILL 5083**

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**State of Washington**

**56th Legislature**

**1999 Regular Session**

**By** Senate Committee on Environmental Quality & Water Resources  
(originally sponsored by Senator Swecker)

Read first time 02/25/1999.

1 AN ACT Relating to biomedical waste treatment and disposal;  
2 amending RCW 70.95K.010 and 70.95K.020; adding a new section to chapter  
3 70.95K RCW; and creating new sections.

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

5 NEW SECTION. **Sec. 1.** (1) The University of Washington graduate  
6 school of public affairs shall conduct a study of the relative risks  
7 posed by different methods of treatment and disposal of biomedical  
8 waste. In the course of designing and conducting the study, the  
9 University of Washington shall consult with the department of ecology,  
10 the department of health, and the state solid waste advisory committee.  
11 The study shall consider the risk associated with exposure to  
12 infectious organisms, to workers who are involved in the handling,  
13 treatment, and disposal of biomedical waste, and to the surrounding  
14 communities for the following biomedical waste treatment technology  
15 categories or disposal methods:

- 16 (a) Autoclaving;  
17 (b) Incineration;  
18 (c) Electrothermal deactivation systems;  
19 (d) Microwaving;

1 (e) Chemical deactivation; and  
2 (f) Disposal of untreated medical waste in approved solid waste  
3 landfills.

4 (2) The study shall estimate the quantity of biomedical waste that  
5 is generated in the state, is transported into the state from other  
6 states and other countries, and shall characterize whether the  
7 biomedical waste is treated before disposal.

8 (3) The study shall examine the conclusions from related studies,  
9 including the 1993 study conducted by the United States environmental  
10 protection agency and the 1997 study conducted by the national  
11 institute for occupational safety and health.

12 (4) The University of Washington shall report its findings to the  
13 department of ecology, the department of health, and the state solid  
14 waste advisory committee and shall submit a final report of its  
15 findings to appropriate committees of the legislature by December 1,  
16 2001.

17 NEW SECTION. **Sec. 2.** A new section is added to chapter 70.95K RCW  
18 to read as follows:

19 (1) Each facility that accepts and treats biomedical waste from  
20 another party for remunerative benefit and operates biomedical waste  
21 under a solid waste permit shall develop a hazard analysis and critical  
22 control points plan. The scope of the plan shall cover worker health  
23 and safety and any health risks to the community surrounding the  
24 facility. The plan shall be a systematic approach to the  
25 identification, evaluation, and control of safety hazards and include:

- 26 (a) Conducting a hazard analysis;
- 27 (b) Determining the critical control points;
- 28 (c) Establishing critical limits;
- 29 (d) Establishing monitoring procedures;
- 30 (e) Establishing corrective actions;
- 31 (f) Establishing verification procedures; and
- 32 (g) Establishing recordkeeping and documentation procedures.

33 (2) The plan shall identify the corrective action that will be  
34 taken when there is a deviation from the critical limits for each  
35 identified step contained in the plan.

36 (3) The plan shall be submitted to the local health jurisdiction.  
37 The local health jurisdiction shall review the plan in consultation  
38 with the state department of health, the department of ecology, and the

1 department of labor and industries and shall approve the plan or  
2 recommend changes to the plan. The review shall be completed within  
3 one hundred twenty days of submission and shall include an explanation  
4 of the reasons for any recommended changes.

5 (4) Local health jurisdictions shall monitor the operation of the  
6 facilities to assure the plants are operated in accordance with the  
7 plan.

8 (5) If public health or worker safety issues develop with regard to  
9 the operation of a facility, including a significant change in the  
10 source of waste, a change in the critical control points or the  
11 emergence of a disease of concern, any of the public agencies  
12 enumerated in subsection (3) of this section or the plant operator may  
13 propose revision of the plan to the local health jurisdiction. The  
14 local health jurisdiction, in consultation with the involved public  
15 agencies, shall review the proposed revisions and may recommend  
16 additional corrective actions and changes to critical limits or other  
17 elements of the plan to provide improved protection to public health or  
18 worker safety.

19 (6) Local health jurisdictions, with assistance from the department  
20 of health, shall establish verification procedures as a condition of  
21 the permit and as necessary to protect the public or worker health and  
22 safety.

23 (7) Initial plans shall be prepared within two years of the  
24 effective date of this section. The plant operator shall review and  
25 update the hazard analysis and critical control points plan every two  
26 years. Such revisions shall be conducted in accordance with the  
27 procedure established in subsection (3) of this section.

28 (8) A plant established after the effective date of this section  
29 shall develop a hazard analysis and critical control points plan before  
30 commencing operation. Such plan shall be submitted in accordance with  
31 the procedure established in subsection (3) of this section.

32 (9) This section does not affect nor replace other authorities or  
33 responsibilities of state or local agencies under other laws.

34 **Sec. 3.** RCW 70.95K.010 and 1994 c 165 s 2 are each amended to read  
35 as follows:

36 Unless the context clearly requires otherwise, the definitions in  
37 this section apply throughout this chapter.

1 (1) "Biomedical waste" means, and is limited to, the following  
2 types of waste:

3 (a) "Animal waste" is waste animal carcasses, body parts, and  
4 bedding of animals that are known to be infected with, or that have  
5 been inoculated with, human pathogenic microorganisms infectious to  
6 humans.

7 (b) "Biosafety level 4 disease waste" is waste contaminated with  
8 blood, excretions, exudates, or secretions from humans or animals who  
9 are isolated to protect others from highly communicable infectious  
10 diseases that are identified as pathogenic organisms assigned to  
11 biosafety level 4 by the centers for disease control, national  
12 institute of health, biosafety in microbiological and biomedical  
13 laboratories, current edition.

14 (c) "Cultures and stocks" are wastes infectious to humans and  
15 includes specimen cultures, cultures and stocks of etiologic agents,  
16 wastes from production of biologicals and serums, discarded live and  
17 attenuated vaccines, and laboratory waste that has come into contact  
18 with cultures and stocks of etiologic agents or blood specimens. Such  
19 waste includes but is not limited to culture dishes, blood specimen  
20 tubes, and devices used to transfer, inoculate, and mix cultures.

21 (d) "Human blood and blood products" is discarded waste human blood  
22 and blood components, and materials containing free-flowing blood and  
23 blood products.

24 (e) "Pathological waste" is waste human source biopsy materials,  
25 tissues, and anatomical parts that emanate from surgery, obstetrical  
26 procedures, and autopsy. "Pathological waste" does not include teeth,  
27 human corpses, remains, and anatomical parts that are intended for  
28 interment or cremation.

29 (f) "Sharps waste" is all hypodermic needles, syringes with needles  
30 attached, IV tubing with needles attached, scalpel blades, and lancets  
31 that have been removed from the original sterile package.

32 (2) "Control point" means any step at which biological, chemical,  
33 or physical factors can be controlled.

34 (3) "Corrective action" means procedures followed when a deviation  
35 occurs when associated with biomedical waste deactivation at facilities  
36 under a solid waste permit.

37 (4) "Critical control point" means a step at which control can be  
38 applied and is essential to prevent or eliminate a safety or health

1 hazard associated with biomedical waste deactivation at facilities  
2 under a solid waste permit, or to reduce it to an acceptable level.

3 (5) "Critical limit" means a maximum or minimum value to which a  
4 biological, chemical, or physical parameter must be controlled at a  
5 critical control point to prevent, eliminate, or reduce to an  
6 acceptable level the occurrence of a safety or health hazard associated  
7 with biomedical waste deactivation at facilities under a solid waste  
8 permit.

9 (6) "Drop-off programs" means those program sites designated by the  
10 solid waste planning jurisdiction where sharps users may dispose of  
11 their sharps containers.

12 (7) "Hazard analysis" means the process of collecting and  
13 evaluating information on hazards associated with biomedical waste  
14 deactivation at facilities under a solid waste permit to decide which  
15 hazards are significant and must be addressed in the plan.

16 (8) "Local government" means city, town, or county.

17 ~~((3) "Local health department" means the city, county, city-~~  
18 ~~county, or district public health department.~~

19 ~~(4))~~ (9) "Local health jurisdiction" means the county, city-county  
20 or multicounty public health department or district.

21 (10) "Mail programs" means those programs that provide sharps users  
22 with a multiple barrier protection kit for the placement of a sharps  
23 container and subsequent mailing of the wastes to an approved disposal  
24 facility.

25 (11) "Monitor" means to conduct a planned sequence of observations  
26 or measurements associated with biomedical waste deactivation at  
27 facilities under a solid waste permit to assess whether a critical  
28 control point is under control and to produce an accurate record for  
29 future use in verification.

30 (12) "Person" means an individual, firm, corporation, association,  
31 partnership, consortium, joint venture, commercial entity, state  
32 government agency, or local government.

33 ~~((5) "Treatment" means incineration, sterilization, or other~~  
34 ~~method, technique, or process that changes the character or composition~~  
35 ~~of a biomedical waste so as to minimize the risk of transmitting an~~  
36 ~~infectious disease.~~

37 ~~(6))~~ (13) "Pharmacy return programs" means those programs where  
38 sharps containers are returned by the user to designated return sites  
39 located at a pharmacy to be transported by a biomedical or solid waste

1 collection company approved by the utilities and transportation  
2 commission.

3 (14) "Plan," which is a hazard analysis and critical control points  
4 plan, means a systematic approach to the identification, evaluation,  
5 and control of safety and health and safety hazards when associated  
6 with biomedical waste deactivation at facilities under a solid waste  
7 permit.

8 (15) "Residential sharps waste" has the same meaning as "sharps  
9 waste" in subsection (1) of this section except that the sharps waste  
10 is generated and prepared for disposal at a residence, apartment,  
11 dwelling, or other noncommercial habitat.

12 ~~((+7))~~ (16) "Sharps waste container" means a leak-proof, rigid,  
13 puncture-resistant red container that is taped closed or tightly lidded  
14 to prevent the loss of the residential sharps waste.

15 ~~((+8) "Mail programs" means those programs that provide sharps~~  
16 ~~users with a multiple barrier protection kit for the placement of a~~  
17 ~~sharps container and subsequent mailing of the wastes to an approved~~  
18 ~~disposal facility.~~

19 ~~(9) "Pharmacy return programs" means those programs where sharps~~  
20 ~~containers are returned by the user to designated return sites located~~  
21 ~~at a pharmacy to be transported by a biomedical or solid waste~~  
22 ~~collection company approved by the utilities and transportation~~  
23 ~~commission.~~

24 ~~(10) "Drop-off programs" means those program sites designated by~~  
25 ~~the solid waste planning jurisdiction where sharps users may dispose of~~  
26 ~~their sharps containers.~~

27 ~~((+11))~~ (17) "Source separation" has the same meaning as in RCW  
28 70.95.030.

29 ~~((+12))~~ (18) "Step" means a point, procedure, operation, or stage  
30 in the system associated with biomedical waste deactivation at  
31 facilities under a solid waste permit, from the point of biomedical  
32 waste acceptance, to final deactivation and disposal.

33 (19) "Treatment" means incineration, sterilization, or other  
34 method, technique, or process that changes the character or composition  
35 of a biomedical waste so as to minimize the risk of transmitting an  
36 infectious disease.

37 (20) "Unprotected sharps" means residential sharps waste that are  
38 not disposed of in a sharps waste container.

1        (21) "Verification" means those activities, other than monitoring,  
2 that determine the validity of the plan and that the system is  
3 operating according to the plan, when associated with biomedical waste  
4 deactivation at facilities under a solid waste permit.

5        **Sec. 4.** RCW 70.95K.020 and 1992 c 14 s 4 are each amended to read  
6 as follows:

7        (1) (~~At the request of an applicant,~~) The department of health,  
8 in consultation with the department of ecology and local health  
9 departments(~~, may~~) shall evaluate the environmental and public health  
10 impacts of biomedical waste treatment technologies. The agencies shall  
11 consider the guidelines established by the state and territorial  
12 association on the alternative treatment technologies in their  
13 evaluation. The department shall make available the results of any  
14 evaluation to local health (~~departments~~) jurisdictions.

15        (2) All direct costs associated with the evaluation shall be paid  
16 by the applicant to the department of health or to a state or local  
17 entity designated by the department of health.

18        (3) For the purposes of this section, "applicant" means any person  
19 representing a biomedical waste treatment technology that seeks (~~an~~  
20 ~~evaluation~~) approval to operate a plant by the local health  
21 jurisdiction under subsection (1) of this section before initially  
22 operating a plant employing that treatment technology or before seeking  
23 a significant change or upgrade in that treatment technology.

24        (4) The department of health may adopt rules to implement this  
25 section.

26        NEW SECTION. **Sec. 5.** If specific funding for the purposes of  
27 sections 2 and 3 of this act, referencing this act by bill or chapter  
28 and section numbers, is not provided by June 30, 1999, in the omnibus  
29 appropriations act, sections 2 and 3 of this act are null and void.

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