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## SUBSTITUTE SENATE BILL 5821

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State of Washington 60th Legislature 2007 Regular Session

By Senate Committee on Health & Long-Term Care (originally sponsored by Senators Roach, Benton, Stevens and Delvin)

READ FIRST TIME 02/28/07.

- 1 AN ACT Relating to regulating body art facilities; amending RCW
- 2 43.20.050; adding a new section to chapter 70.05 RCW; and creating a
- 3 new section.

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- 4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 5 <u>NEW SECTION.</u> **Sec. 1.** The legislature finds that members of the
- 6 public are obtaining body art including tattooing and body piercing.

Body art involves procedures where the skin is broken and the chance

- 8 for exposure to virus and infection exists. These procedures involve
- 9 health risks, some of which are significant because of bloodborne
- 10 pathogens contained in blood and other bodily fluids and the exposure
- 11 to contaminated waste. Although many providers of body art, including
- 12 tattooing and body piercing, maintain sufficient health and safety
- 13 standards and use proper techniques that protect and promote public
- 14 health and the health and safety of members of the public, others do
- 15 not. Currently, members of the public have no way of knowing which
- 16 body artists and facilities are fully qualified to perform these
- 17 invasive procedures. While significant work has been done by many
- 18 providers as a group and individually to develop and implement health

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- and safety standards, intervention by state and local health authorities is needed to protect the public's health and safety.
  - Sec. 2. RCW 43.20.050 and 1993 c 492 s 489 are each amended to read as follows:

- (1) The state board of health shall provide a forum for the development of public health policy in Washington state. It is authorized to recommend to the secretary means for obtaining appropriate citizen and professional involvement in all public health policy formulation and other matters related to the powers and duties of the department. It is further empowered to hold hearings and explore ways to improve the health status of the citizenry.
- (a) At least every five years, the state board shall convene regional forums to gather citizen input on public health issues.
- (b) Every two years, in coordination with the development of the state biennial budget, the state board shall prepare the state public health report that outlines the health priorities of the ensuing biennium. The report shall:
  - (i) Consider the citizen input gathered at the forums;
- (ii) Be developed with the assistance of local health departments;
- (iii) Be based on the best available information collected and reviewed according to RCW 43.70.050 ((and recommendations from the council));
  - (iv) Be developed with the input of state health care agencies. At least the following directors of state agencies shall provide timely recommendations to the state board on suggested health priorities for the ensuing biennium: The secretary of social and health services, the health care authority administrator, the insurance commissioner, the superintendent of public instruction, the director of labor and industries, the director of ecology, and the director of agriculture;
  - (v) Be used by state health care agency administrators in preparing proposed agency budgets and executive request legislation;
- (vi) Be submitted by the state board to the governor by January 1 of each even-numbered year for adoption by the governor. The governor, no later than March 1 of that year, shall approve, modify, or disapprove the state public health report.
- 36 (c) In fulfilling its responsibilities under this subsection, the

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state board may create ad hoc committees or other such committees of limited duration as necessary.

3 (2) In order to protect public health, the state board of health 4 shall:

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- (a) Adopt rules necessary to assure safe and reliable public drinking water and to protect the public health. Such rules shall establish requirements regarding:
- 8 (i) The design and construction of public water system facilities, 9 including proper sizing of pipes and storage for the number and type of 10 customers;
- 11 (ii) Drinking water quality standards, monitoring requirements, and 12 laboratory certification requirements;
  - (iii) Public water system management and reporting requirements;
- 14 (iv) Public water system planning and emergency response 15 requirements;
  - (v) Public water system operation and maintenance requirements;
- 17 (vi) Water quality, reliability, and management of existing but 18 inadequate public water systems; and
- 19 (vii) Quality standards for the source or supply, or both source 20 and supply, of water for bottled water plants.
  - (b) Adopt rules and standards for prevention, control, and abatement of health hazards and nuisances related to the disposal of wastes, solid and liquid, including but not limited to sewage, garbage, refuse, and other environmental contaminants; adopt standards and procedures governing the design, construction, and operation of sewage, garbage, refuse and other solid waste collection, treatment, and disposal facilities;
  - (c) Adopt rules controlling public health related to environmental conditions including but not limited to heating, lighting, ventilation, sanitary facilities, cleanliness and space in all types of public facilities including but not limited to food service establishments, schools, institutions, recreational facilities and transient accommodations and in places of work;
- 34 (d) Adopt rules for the imposition and use of isolation and 35 quarantine;
- 36 (e) Adopt rules for the prevention and control of infectious and 37 noninfectious diseases, including food and vector borne illness, and

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rules governing the receipt and conveyance of remains of deceased persons, and such other sanitary matters as admit of and may best be controlled by universal rule; and

- (f) Adopt rules for accessing existing data bases for the purposes of performing health related research.
- (3)(a) The state board of health may adopt rules for the purpose of permitting local health jurisdictions to regulate body art operators and body art facilities. These rules shall establish requirements regarding:
- 10 <u>(i) Minimum standards for facility cleanliness and education of</u> 11 <u>body artists;</u>
- (ii) Incorporation of national standards as developed by nationally recognized organizations with extensive expertise in body art;
- (iii) Knowledge and practice by operators of universal precautions, and requirements for sanitation, personal hygiene, sterilization, and aftercare requirements to prevent transmission of disease;
  - (iv) Appropriate exemptions for health care practitioners and other health care personnel performing within their legal scope of practice;
  - (v) Requirements for disclosure of the health risks, aftercare requirements, and contacts at the local health department to whom complaints or inquiries may be addressed to customers or potential customers of body art.
    - (b) For the purposes of this subsection:

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- (i) "Body art" means the practice of physical body adornment by body piercing, tattooing, branding, and scarification. "Body art" does not include practices that are considered health care procedures, such as implants under the skin that are within the licensed professionals' scope of practice;
- (ii) "Body art facility" means a place or premise, whether public,
  private, temporary, or permanent in nature or location, where the
  practices of body art are performed, even if no compensation is
  received;
- 33 (iii) "Body piercing" means any method of piercing or invading the
  34 skin or mucosa, except an ear lobe, in order to place any object or
  35 forms of jewelry through the skin or mucosa. "Body piercing" does not
  36 include practices that are considered health care procedures, such as
  37 implants under the skin that are within the licensed professionals'
  38 scope of practice;

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(iv) "Jewelry" means any object used for personal adornment worn in or through the body. "Jewelry" used for insertion in the initial (new or fresh) piercings must be made of implant grade materials; free of nicks, scratches, or irregular surfaces; and properly sterilized before insertion. For the purposes of this section, "jewelry" does not include stud and clasp systems used to pierce the earlobe in accordance with the manufacturer's directions and applicable United States food and drug administration requirements;

- (v) "Operator" means a person who controls, operates, manages, conducts, or practices body art activities and who is responsible for compliance with this chapter, whether or not the person actually performs body art. "Operator" includes a technician who performs body art under the direction of an operator; and
- (vi) "Tattooing" means any method of placing ink or other pigment into or under the skin or mucosa, by the aid of needles or any other instrument used to puncture the skin, resulting in permanent coloration of the skin or mucosa.
- (4) The state board may delegate any of its rule-adopting authority to the secretary and rescind such delegated authority.
- ((4))) (5) All local boards of health, health authorities and officials, officers of state institutions, police officers, sheriffs, constables, and all other officers and employees of the state, or any county, city, or township thereof, shall enforce all rules adopted by the state board of health. In the event of failure or refusal on the part of any member of such boards or any other official or person mentioned in this section to so act, he shall be subject to a fine of not less than fifty dollars, upon first conviction, and not less than one hundred dollars upon second conviction.
- (((5))) (6) The state board may advise the secretary on health 30 policy issues pertaining to the department of health and the state.
- NEW SECTION. Sec. 3. A new section is added to chapter 70.05 RCW to read as follows:
- 33 (1) The local public health officer, under powers and duties 34 provided in RCW 70.05.070, may establish a program to regulate body art 35 operators and body art facilities, based on standards adopted by rule 36 by the state board of health.

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(2) Local public health officers may develop their own standards, if the standards are not less rigorous than those developed by the state board of health.

- (3) Local public health officers may charge a fee or fees to body art facilities and artists sufficient to cover the expenses of their regulatory program under this chapter, but the fee or fees may not be more than the actual cost of the regulatory program.
- (4) Local public health officers that adopt a regulatory program are encouraged to work with local body artists in promoting public awareness of the risks of body art and the need to use body artists who meet at least the minimum standards as set forth in the state board of health rules.

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