OSHA cracks down on sharps-safety violators

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THE OCCUPATIONAL Safety and Health Administration (OSHA) is cracking down on facilities that don’t comply with sharps-safety regulations. Two citations issued in 2003 show that health care facilities must fully comply with OSHA’s requirement to use safety-engineered sharp devices or pay a price.

In 2001, OSHA revised the Bloodborne Pathogens Standard, strengthening its requirement to use safety devices to reduce needle-stick risk. Since then, OSHA has dramatically increased citations for violations. Two recent citations are especially noteworthy—in one case, for the size of the fine imposed; in the other, for the detail and scope of the violations cited.

Money talks
In July 2003, OSHA fined a Pennsylvania rehabilitation center $92,500 for Bloodborne Pathogens Standard violations. This was the first time it levied the maximum $70,000 penalty for willful failure to use sharps with engineered protections.

The remainder of the fine, $22,500, was for serious deficiencies in the exposure control plan, the safety device selection process, post-exposure counseling, and handling of sharps containers. Violations are serious, says OSHA, when there’s a “substantial probability that death or serious physical harm could result from the cited condition” and “the employer knew, or should have known, of the hazard.”

Resident physicians press for compliance
The second groundbreaking citation was issued in September 2003 after a group of resident physicians at a New York hospital filed a complaint with OSHA detailing how and where nonsafety devices were used. (See Where Safety Is Lacking.) Although the hospital had been making substantial progress in implementing safety devices, conventional devices were still used in some areas, such as the ICU, the department of surgery, and the ED, despite the availability of safer alternatives.

The citation listed 26 instances in which safety-engineered devices should have been used but weren’t. It also cited the facility for improper handling of contaminated reusable sharps and failure to make available or use personal protective equipment.

Shortly after the hospital received the citation, some of the resident physicians as well as the president of the American Medical Students Association and the consumer advocacy group Public Citizen wrote to the American Hospital Association urging it to notify member hospitals about OSHA’s action. Their letter stated that medical students and residents are prepared to file additional complaints against hospitals that disregard current sharps-safety standards.

Wake-up call
Despite widespread conversion to sharps-safety devices in the United States, market data indicate that the process remains incomplete. The two OSHA citations described here serve as a wake-up call: Health care facilities that haven’t reached full compliance must do so, and they must monitor actual use of safety devices in all clinical areas.

[Look for the authors’ upcoming survey report on needle-stick and sharps safety in the April issue of Nursing2004.]