As healthcare professionals, Occupational Safety and Health Administration Standards (OSHA) play an important part in creating a safe and healthy workplace. OSHA and the Joint Commission on the Accreditation of Healthcare Organizations (JCAHO) work together in a joint effort in order to enforce these regulations within healthcare facilities. One extremely important regulatory rule is the Bloodborne Pathogens Act of 1991. This act was created to limit the exposure of healthcare workers to blood and body fluids that could potentially cause occupational disease (Slate, 2016). Employers are required to implement an Exposure Control Plan that centralizes around proper hand hygiene and makes universal precautions mandatory. Personal Protective Equipment (PPE) must be made available to employees at no charge as a protection against blood and body fluid exposure. This act also includes measures to prevent needle sticks, blood splashing, and to ensure correct handling, labeling, and disposing of body fluid specimens (Slate, 2016). In addition, all healthcare workers who have an exposure are given a post-exposure evaluation and follow-up including laboratory evaluation, counseling, and prophylaxis at no charge to the employee. According to Michels & Hopinson (1992) key points of the Bloodborne Pathogens Act include:

- The development of a written Exposure Control Plan
- Requirement that all employees follow universal precautions
- Handwashing facilities that are readily accessible to employees must be provided
- Puncture-resistant containers for the disposal of needles and sharps must be provided
- Hepatitis B vaccinations to employees with a “reasonable anticipated” chance of occupational exposure must be provided at no cost to the employee
Post exposure follow-up after an exposure incident must be provided to employees

Education and training in infection control and compliance must be provided to employees

Medical records of employees with an occupational exposure must be kept confidential

Incompliance with these standards will result in up to a $70,000 fine

This act is very important to us as healthcare workers since we come in contact with blood and other body fluids during the course of a normal work day. It not only protects us but also gives us rights if we have an exposure. Upon implementation of this standard it was estimated that it would protect more than 5.6 million workers, prevent more than 9,200 infections and 200 deaths per year (Michels & Hopkinson, 1992). It is scary to think of how our workplace environment might be different if this act was not implemented.

Currently, I don’t believe there is any reason to change or adapt this rule but if I felt it was necessary I would need to contact both OSHA and JCAHO. My argument for change would need to be thorough with measurable outcomes presented.

References

