

Protecting Healthcare Workers Against Bloodborne Pathogens

In 2000, OSHA implemented the Needlestick Safety and Prevention Act (NSPA). NSPA is strongly enforced today and OSHA continues to require engineering and work-practice controls to effectively manage and/or minimize employee exposure.

For years, workplace safety programs in healthcare organizations have emphasized protecting healthcare workers from slips, falls and sharp objects. Although needlestick injuries, slips and falls get the most attention, nonsharps exposures pose a risk to healthcare workers as well. Splashes are another potential threat facing healthcare workers, says Jacie Volkman, board member for the Association for Professionals in Infection Control and owner of Safe Patient Surveys Inc., an infection prevention consulting company. According to Volkman, many healthcare organizations fail to address splash exposures, putting caregivers at risk of developing potentially fatal diseases.

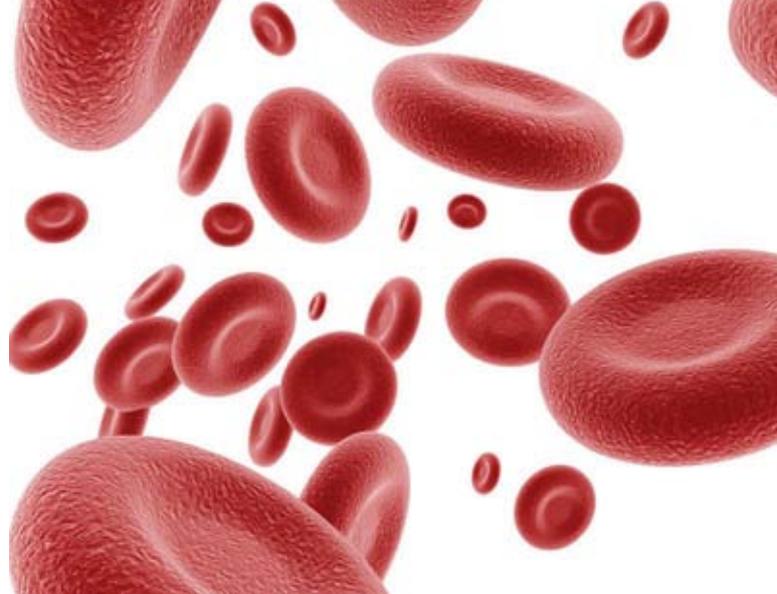
Nurses and providers may contract infections such as hepatitis B, hepatitis C, HIV and other pathogens from performing daily activities. Splashes to the eyes, nose or mouth from emptying suction cups, washing bedpans, cleaning urine bottles or cutting open catheter bags poses a significant occupational hazard. A 2003 study revealed that more than one-third (39%) of registered nurses and one-fourth (27%) of licensed practical nurses had experienced at least one of these mucocutaneous blood exposures in the prior 3 months.

The frequency of these types of exposures not only puts healthcare workers at risk, but also desensitizes them to the danger and the need to take proper precautions.

"We've bred a culture of desensitization," says Tom Jedowski from MEIKO USA Inc. "Workers would freak out if it was a pan full of blood, but because it's something else people just pass it off as being part of the drudgery of care."

The same study found that only about 73% of these splashes were reported. According to Volkman, many healthcare workers have accepted splashes as an unavoidable part of the job, but another issue may have more to do with the time and cost that go into reporting an incident. Reporting a splash can be considered a hassle, she says. After an employee reports the incident, the worker and the patient must receive several tests, costing the hospital time and money; if infections are found, a round of treatment is needed, costing even more time and money.

Even excluding the personal and emotional ramifications of exposure, many factors must be considered, says Volkman.



Lost time, cost of exposure panels for both the patient and employee, and any resulting healthcare costs are all burdens on the system.

To decrease splash exposures in a healthcare setting, which in turn decreases organizational costs, there must be a shift in culture, says Volkman. Hospitals must change their safety culture. Senior leadership must endorse measures that leads to a safer environment, which includes changes in systems, PPE and employee education.

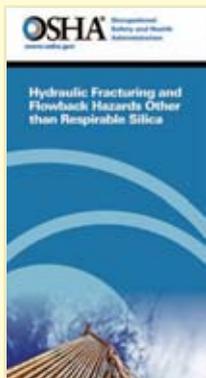
Systems: Many hospitals use a commode spray to clean urinals, bedpans or suction canisters, creating a severe risk of splash back, says Jedowski. Disinfection appliances, such as bedpan washers, can decrease the risk of splashes by eliminating the need to empty these devices into a toilet or hopper.

PPE: According to Volkman, PPE must be available everywhere. Having PPE readily available helps employees remember to wear it at all times. Many organizations use cabinet-type dispensers to display equipment to make it more apparent when the stock is low. Volkman also suggests using face masks with attached eye shields to help workers limit eye exposures as long as they are already protecting their nose and mouth.

Education: Whenever there is a change in practice, education is imperative. Compliance should be monitored as well as issues with any particular device or PPE.

Workplace safety programs have successfully reduced injuries from slips, falls and sharp objects. With these changes, splash risks can be reduced as well. "There is no magic bullet," Volkman says, adding that it is up to individual organizations to understand the hazards in their facilities and design a program and environment to effectively manage these hazards to keep workers safe. —SL

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Fracking & Drilling Hazards: Beyond Respirable Silica

An OSHA hazard alert indicates that increased fracking and drilling may increase worker exposure to hazards other than respirable silica, including ergonomic issues, chemical exposure and potentially flammable atmospheres. The alert, "Hydraulic Fracturing and Flowback Hazards Other Than Respirable Silica," states that more workers are potentially exposed to the hazards created by hydraulic fracturing and flowback operations due to the large increase in the number of such operations in the past decade. Approximately 35,000 wells are hydraulically fractured in the U.S., per the hazard alert.

Fracking operations increased concurrently with horizontal well development, which requires multiple stimulation stages per well, according to OSHA. OSHA and EPA each have dedicated websites that provide additional information on these processes (<http://1.usa.gov/1EfEvNT> and <http://1.usa.gov/1e1rxst>, respectively). Download the alert at www.osha.gov/Publications/OSHA3763.pdf to learn more about acceptable exposure levels and recommended mitigation strategies. —TS

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