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WILL EBOLA DRIVE A NEW OSHA INFECTIOUS DISEASE STANDARD?

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If asked, most safety directors, human resource professionals and others involved regularly with OSHA would probably cite construction as the industry most associated with employee injury and illness. Yet, according to OSHA itself, health care and social assistance workers frequently report more injury and illness cases annually than any other private industry sector.

The recent Ebola scare reaffirms the threats faced regularly by many workers, especially health care and laboratory workers. The threats posed to health care and laboratory workers in particular are constant simply by the nature of their work, and often include exposure to biological hazards and bloodborne pathogens, respiratory hazards, chemical and drug exposures, and laser and x-ray hazards. Laboratory workers also regularly face frequent chemical exposure hazards, including formaldehyde, used for preservation of specimens for pathology, as well as numerous other chemicals used in healthcare laboratories. Workers such as these have long faced increased threats of exposure to tuberculosis, staph infections and high risk diseases such as SARS.

In the case of the Ebola virus itself, the National Institute for Occupational Safety and Health has already developed certain **prevention and control recommendations for health care workers**, as well as for workers in certain other fields – specifically, laboratory workers, airline workers and humanitarian workers.

OSHA currently addresses infectious disease-related workplace hazards via its Bloodborne Pathogen Standard, but agency officials have long argued that a formal infectious disease standard would facilitate enforcement. This is because government guidelines – such as those periodically issued by agencies such as the Centers for Disease Control – generally are not enforceable as actual regulations. Ebola may be the political impetus for such a new standard. In its June regulatory agenda, OSHA announced that the Agency was again “considering the need for a standard to ensure that employers establish a comprehensive infection control program and control measures to protect employees from infectious disease exposures to pathogens that can cause significant disease.”

Now, a 38-page draft document can be found on OSHA's website entitled “**OSHA's Infectious Diseases Regulatory Framework**.” Among other things, the proposed framework would require certain employers (e.g., hospitals) to draft and implement a “worker infection control plan,” impose various protective equipment requirements, conduct specialized training, and provide various vaccines to employees. Medical professionals and other potentially affected employers have already begun commenting negatively on the amount of additional training and policy drafting requirements contemplated under this new standard. Other concerns include possible overlap (or even conflict) with existing state and federal safety requirements. Employers, especially those in the laboratory and medical fields, would be wise to follow the status of this new framework closely.

PROFESSIONALS

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