



SUMMARY OF CONCERNS

WorkSafe BC proposal for regulating protection from unsafe medical sharps going to public hearing November 2006

There are four comments on the proposal:

- 1** We support the proposed amendments to extend the use of safety engineered medical devices.
- 2** Our concern is that it is a long time prior to implementation (January 2008 and October 2008).
- 3** The proposal still lacks a provision to log medical sharp injuries.
- 4** No consultation with Joint Safety Committee or worker in selecting devices.

The BCNU is pleased to see the proposed regulation includes a hierarchy for selection of safety devices giving preference to the types that are most effective in protecting the worker.

The extension of the regulation to all medical sharps will decrease the rates of injuries and associated trauma and stress to workers who would have to undergo anti-retroviral treatments.

Statistics compiled by the Occupational Health and Safety Agency for Health Care (OHSAH) show that 70% of medical sharps injuries do not fall into the "vascular" type of uses. Many injections are done subcutaneously (into the skin rather than or artery or vein) these injections pose a risk of transmission of blood borne pathogens.

The inclusion of other types of medical sharps besides hollow bore needles is a positive move to protect all workers.

Those include scalpels, suture needles and anything else that might produce a puncture wound that would expose a worker to blood or other potentially infectious material.

Devices need to be selected in consultation with those people that will use them. The joint health and safety committees include the management and the workers from the various sectors of the workforce. It is through these committees that consultation should occur.

Devices need to be chosen on the basis of those that most effectively do the job they are intended for and provide the highest level of protection. This consultation helps to ensure the success of the changeover to safety devices and the prevention of injury. If the devices perform the job poorly they will not be accepted by those that have to use them. **Failure to include provisions for consultation will result in some circumstances devices being chosen on the basis of cost by persons with no knowledge or appreciation for their use.**

There is no provision in the WCB proposal for logging medical sharps injuries.

Documenting these injuries has been and continues to be a significant problem. WorkSafe BC itself has no idea what the total number of injuries is. The only information they have in their systems is the number of wage loss injuries. This is totally inadequate. **A requirement for logging injuries should be part of the regulation as was proposed by the BCNU.**

The implementation period of this regulation is too long to wait and completely unrealistic.

In this time period over 6,000 workers will be injured from sharps. If one of these workers contracts Hepatitis C, the cost will be over \$1 million to WorkSafe BC. Most health authorities have implemented safety devices for their needles already. The implementation should be by July 2007.

The BCNU supports the implementation of this regulation with the changes noted above.

This regulation could prevent so much personal hardship and emotional uncertainty by reducing the number of injuries. Also the cost savings to the system will be significant.