
Submission ID: P08.Y36.M92.4RC

Part 6: Substance Specific Requirements, relating to safety-engineered devices for all hollow bore needles

1. Name: Maxine Armstrong

(a) Feedback is provided: on own behalf

Organization:

(b) Feedback is provided: from a worker's perspective

2. E-mail:

3. Feedback:

Section 6.36- I agree with the regulation being extended to all medical sharps as this will decrease the rate of injuries and associated trauma and stress to workers who would have to undergo anti-retroviral treatments. 70% (stats compiled by OHSAH) of medical sharp injuries do not fall into the "vascular" type of uses. Many injections are done subcutaneously and pose a risk of transmission of blood borne pathogens. The extension of other types of medical sharps (scalpels, suture needles, etc.) besides hollow bore needles is a positive move to protect all workers.

Devices need to be selected in consultation with those people that will use them. The joint health and safety committees include 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 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 poorly they will not be accepted by those who 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.

Documenting medical sharp injuries has been and continues to be a significant problem. A requirement for logging injuries should be a part of the regulation.

The long time prior to implementation is a concern. In this time period over 6,000 workers could be injured from sharps. The cost to WorkSafeBC could be over \$1 million if even one of these workers contracts Hepatitis C. Most health authorities have implemented safety devices for their needles already. The implementation should be July 2007.

4. Please indicate your level of support of the proposed amendments:
generally agree