

New COVID-19 work-safety rule targets health care facilities

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What's the news: The AMA raised serious concerns about the lack of notice and short comment time frame for a new Occupational Safety and Health Administration (OSHA) regulation regarding measures that health care organizations must take to protect workers amid COVID-19.

OSHA, an agency within the U.S. Department of Labor, published the COVID-19 health care emergency temporary standard (ETS) in the *Federal Register* on June 21. The ETS took effect on that date.

Comments on the interim final rule were due July 21, and the AMA said that fast timeline didn't give physicians or other health care stakeholders enough time to review the IFR and provide meaningful input to OSHA. Due to the advocacy of AMA and other stakeholders, OSHA extended the comment deadline to Aug. 20.

"With little to no warning, OSHA is requiring physician practices to undertake new infection-control efforts," AMA Executive Vice President and CEO James L. Madara, MD, wrote in a letter to Labor Secretary Marty Walsh. "Without adequate time to review the ETS, it is unclear if these steps are necessary or duplicative."

Why it's important: Since the pandemic's onset last year, doctors have been on the front lines saving the lives of patients with COVID-19 and "identifying ways to protect themselves and colleagues," Dr. Madara wrote.

"Physician practices took numerous steps to stem the transmission of COVID-19. Early in the pandemic, physician practices invested in technology and rapidly adopted telehealth, and they totally revamped their scheduling," the AMA's letter says. "They also purchased significant amounts of personal protective equipment and additional cleaning supplies and disinfectants while redesigning their offices and protocols to meet infection control standards."

Doctors now have 16 months of hard-won expertise on how to fight the transmission of COVID-19,

the AMA noted. The OSHA rule applies only to health care facilities, though millions of workers in other industries are potentially at risk of acquiring SARS-CoV-2 in working environments that are not directed by physicians.

“Given all the experience and the steps physician practices have already undertaken to address infection control issues COVID-19, it is imperative that OSHA provide physicians and the health care community with a real opportunity for a meaningful dialogue about the COVID-19 health care ETS,” Dr. Madara wrote.

The OSHA regulation may duplicate Centers for Disease Control and Prevention guidance that physicians practices are already following and cause confusion among doctors who have already made significant investments in telehealth technology and personal protective equipment for themselves and their staff. The AMA will submit additional comments before Aug. 20 deadline.

Learn more: The AMA COVID-19 resource center offers clinical information, guides and resources, and updates on advocacy and medical ethics.