



Office of Advocacy

Small Business and the Occupational Safety and Health Administration's Proposed Tuberculosis Rule

The Office of Advocacy submitted comments on [March 5, 1998](#), concerning the Occupational Safety and Health Administration's (OSHA) proposed rule for controlling workplace exposure to tuberculosis (TB) ([published in the Federal Register on Oct. 17, 1997](#)) [PDF File]. OSHA's rule targets high-risk job settings, such as hospitals, nursing homes, homeless shelters and hospices. According to Advocacy, OSHA's proposal will have a significant impact on small entities that provide services to the sick, the homeless, and the elderly.

To illustrate that impact, Advocacy provided an overview of the effect of the rule on key service sectors. In the case of homeless shelters, for example, OSHA estimates that 10,000 homeless shelters will identify, isolate, and transfer TB cases in order to protect shelter workers from the disease. Based on information provided by OSHA and analyzed by the Office of Advocacy, the average cost to a homeless shelter for compliance with this rule would be \$1,000 per year; the cost for a homeless shelter with an active case of TB would be \$41,000.

Advocacy contended that the cost of the rule would put shelters in the position of choosing between protecting employees and serving the homeless population. "In the case of shelters," said Chief Counsel for Advocacy Jere W. Glover, "the issue of controlling this disease should be left to local health organizations and programs, which are closer to the high-risk population p both employees and homeless."

Many of the concerns discussed in Advocacy's comments were first raised by small entities during the SBREFA Panel held for this rule in November 1996. While OSHA responded to some of the concerns, such as further clarification of key terms and definitions, Advocacy sought more fundamental changes to improve the rule and protect at-risk populations.

The U.S. Public Health Service's Centers for Disease Control and Prevention (CDC) has reported that the number of TB cases reported in the United States is declining. In fact, between 1992 and 1995 (the latest available numbers) TB has declined substantially, 14.5 percent. In order to control TB, OSHA is proposing fundamental changes to existing work practices, including: the development and implementation of a written plan to control employee exposure to TB; the required use of respirators when administering certain job functions and patient care; provisions specifying medical management and recordkeeping for employees who may be exposed to TB; and detailed requirements for work practice and engineering controls.

The Office of Advocacy asserted that, as proposed, many small organizations will not be able to comply with this rule, rendering it ineffective. To improve the rule, Advocacy encouraged OSHA to consider existing programmatic alternatives that address the risk of TB to employees. Advocacy recommended that OSHA coordinate with existing public and private bodies with experience in controlling infectious disease in the general population, and look at state programs and private certification options that might have equally effective results at less cost.



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