

The Safety & Health Advisor

Fall 2015



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New OSHA Focus on Healthcare Facilities

On June 25, 2015, OSHA issued a policy memo establishing guidance for inspections conducted at inpatient healthcare settings including hospitals, skilled nursing and residential care facilities. All site inspections will include the hazards addressed in the recent National Emphasis Program (NEP) such as

- Musculoskeletal disorders (MSDs) relating to patient or resident handling (i.e. ergonomics),
- Workplace violence (WPV),
- Bloodborne pathogens (BBP),
- Tuberculosis (TB), and
- Slips, trips and falls (STFs).

These focus hazards will be covered in addition to any other hazards that may be the subject of an OSHA inspection. The goal of the policy is to significantly reduce these hazards, which contribute to a high level of injuries, through a combination of enforcement, compliance assistance and outreach.

According to the Bureau of Labor Statistics (BLS) and OSHA's inspection history with the NEP, inpatient healthcare settings consistently had exposures to the safety and health hazards that are noted above.

"For example, with regard to MSDs, between April 5, 2012 and April 5, 2015, OSHA conducted 1,100 inspections of nursing and residential care facilities under the NEP. Ergonomic stressors were evaluated in 596 of these inspections, which generated 192 ergonomic hazard alert letters (EHALs) to employers and 11 citations of OSHA's general duty clause for hazardous ergonomic conditions."

Also, due to the fact that about 13% of incidents in the healthcare setting involved some type of workplace violence compared with 4% for all of

private industry, OSHA continued inspection guidance for this subject.

Other hazards that may be evaluated during inspections include, but are not limited to:

- Exposure to multi-drug resistant organisms (MDROs), such as Methicillin-resistant *Staphylococcus aureus* (MRSA).
- Exposures to hazardous chemicals, such as sanitizers, disinfectants, anesthetic gases, and hazardous drugs (i.e. Hazard Communication).

Inpatient healthcare settings had some of the highest rates of injury and illness among industries based on injury and illness rates calculated for Calendar Year 2013. In 2013, U.S. hospitals recorded 57,680 work-related injuries and illnesses, a total case rate of 6.4 work-related injuries and illnesses for every 100 full-time employees, almost twice as high as the rate for private industry as a whole (3.3 per 100 full-time employees for all U.S. industries).

Nursing homes and personal care facilities continued to have one of the highest rates of injury and illness among industries for which lost workday injury and illness (LWDII) rates are calculated.

According to BLS data, in 2013, one in five reported nonfatal occupational injuries occurred among workers in the health care and social assistance industry, the highest number of such injuries reported for all private industries.

In 2014, OSHA published a new educational web resource with materials to help hospitals prevent worker injuries, assess workplace safety needs, enhance safe patient handling programs and implement comprehensive safety and health management systems. This new resource contains a number of guidance products, including fact sheets, self-assessments, and industry-recognized best practices, and is available at <http://www.osha.gov/dsg/hospitals/>.

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Furthermore, OSHA has well-established webpages, such as Safety and Health Topics webpages for Nursing Homes and Personal Care Facilities

(<http://www.osha.gov/SLTC/nursinghome/index.html>) and Healthcare

(<http://www.osha.gov/SLTC/healthcarefacilities/index.html>). The Agency published the brochure,

Safe Patient Handling: Preventing

Musculoskeletal Disorders in Nursing Homes

(<https://www.osha.gov/Publications/OSHA3708.pdf>)

For general information on workplace violence prevention in healthcare and social services, see OSHA's *Guidelines for Preventing Workplace Violence for Healthcare and Social Service Workers*, located at:

www.osha.gov/Publications/osha3148.pdf

In recognition of these injury trends and the OSHA compliance focus, Atlantic Charter held client seminars over the past year about safe patient handling and workplace violence prevention.

With OSHA's focus on the healthcare industry, it would be prudent for organizations to evaluate their safety and injury prevention programs, as well as training and documentation associated with the stated emphasis areas to determine if there may be additional opportunities for staff injury prevention.

OSHA's National Emphasis Program on Amputations and a recent machine amputation at a food manufacturer

On August 13, 2015 the Occupational Safety and Health Administration issued an updated [National Emphasis Program on Amputations](#). The NEP has been in existence since 2006 and is targeted to industries with high numbers and rates of amputations. This directive updates the 2006 NEP on Amputations and applies to general industry workplaces in which any machinery or equipment likely to cause amputations are present. In this updated NEP, OSHA is using current enforcement data and Bureau of Labor Statistics injury data to assist with determining which industries will be inspected.

According to the most recent Bureau of Labor Statistics data, manufacturing employers report that 2,000 workers suffered amputations in 2013. The rate of amputations in the manufacturing sector was more than twice as much (1.7 per 10,000 full-time employees) as that of all private industry (0.7). These serious injuries are preventable by following basic safety precautions.

The NEP includes a list of industries with high numbers and rates of amputations as reported to BLS.

"Workers injured from unguarded machinery and equipment can suffer permanent disability or lose their lives," said Assistant Secretary of Labor for Occupational Safety and Health Dr. David Michaels. "This directive will help ensure that employers identify and eliminate serious workplace hazards and provide safe workplaces for all workers."

OSHA's inspections over the past 40 years indicate that employee exposures to unguarded or inadequately guarded machinery and equipment, along with related hazardous energy exposures during servicing and maintenance activities, occur in many workplaces. Inspections will include an evaluation of employee exposures during operations such as: clearing jams; cleaning, oiling or greasing machines or machine pans; and locking out machinery to prevent accidental start-up. More information concerning the directive can be found at:

https://www.osha.gov/OshDoc/Directive_pdf/CPL-03-00-019.pdf.

On a related note, on Jan. 1, 2015, OSHA issued new requirements for [reporting work-related fatalities and severe injuries](#). Employers must now report fatalities within eight (8) hours of learning of the incident and amputations within 24 hours of learning of the incident.

On September 21, 2015, OSHA cited a cookie and cracker manufacturer in Ohio related to a machine related finger amputation occurred. Hearthside Food Solutions LLC, in McComb, Ohio, which produces cookies and crackers for national brands received citations for one [repeated](#) and two [serious](#)

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safety violations totaling \$52,500 in proposed penalties.

The citations follow an OSHA investigation which opened after a 55-year-old worker lost part of his right middle finger while unjamming a dough-cutting machine. OSHA inspectors found the machine lacked adequate guarding to protect him from dangerous moving parts. The company was cited for a similar violation at the same facility back in 2010, resulting in the issuance of one repeated violation. OSHA also issued two serious violations for failing to turn off the machine during maintenance and not training employees on safety procedures to prevent exposure to operating parts. Specifics concerning the citations can be viewed following this link: <http://www.dol.gov/opa/media/press/osha/OSHA20151769fs.pdf>

Based in Downers Grove, Illinois, Hearthside Food Solutions LLC is the food industry's largest contract manufacturer of baked goods and bars. With 23 facilities in North America and Europe the company employs about 6,000 workers, nearly 1,800 of them at the McComb plant.

NH Hands-Free Law

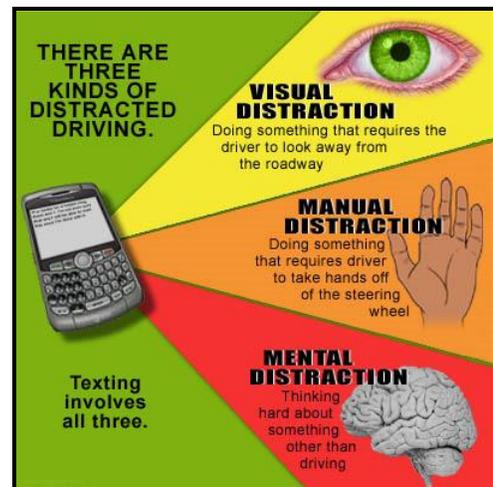
New Hampshire's hands-free driving law took effect on July 1, 2015. What does this mean?

- No use of hand held electronic devices capable of providing voice or data communication while driving or temporarily halted in traffic for a stop sign or traffic signal or other momentary delays.
- This includes cell phones, GPS, tablets, iPods, iPads or other devices that require data entry.
- Emergency calls to 911 or other public safety agencies will be allowed.
- Bluetooth or other hands-free electronic devices will be allowed.
- One hand non-cellular 2-way radio use will be allowed.
- Teen drivers under the age of 18 will not be allowed to use any electronic devices except to report an emergency.

- If your vehicle is not equipped with Bluetooth functionality, auto service centers can install after-market systems or over the ear devices can be purchased at retailers such as Staples, Best Buy or your cell phone carrier.

Distraction.gov, the official US government website for distracted driving, published the following sobering statistics on distracted driving (source of the last three bullet items is Virginia Tech Transportation Institute [VTTI](http://www.vtti.org)):

- 10% of drivers of all ages under the age of 20 involved in fatal crashes were reported as distracted at the time of the crash. This age group has the largest proportion of drivers who were distracted.
- Engaging in visual-manual subtasks (such as reaching for a phone, dialing and texting) associated with the use of hand-held phones and other portable devices increased the risk of getting into a crash by three times.



- Five seconds is the average time your eyes are off the road while texting. When traveling at 55mph, that's enough time to cover the length of a football field blindfolded. (2009, VTTI)
- Headset cell phone use is **not** substantially safer than hand-held use. (VTTI)

Regarding the latter, when driving, one ear should always be uncovered to hear emergency vehicles and other audible vehicle alerts.

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While headsets are not prohibited in NH (they are in MA), keeping at least one ear uncovered is a best practice.

The National Safety Council recommends policies that prohibit **both** hands-free and handheld devices and apply to all employees. Reduce the risk of cell phone crashes among your employees with their 'free' Cell Phone Policy Kit. The kit has all the materials an organization needs to build leadership support for a cell phone policy and tools to communicate to employees. It can be downloaded at <http://safety.nsc.org/cellphonekit>.

Atlantic Charter clients have access to our safety DVD lending library which includes ones on driver safety. Current titles include *Driven to Distraction*, *Driven to Distraction II*, *Defensive Driving: Prepared for the Worst*, *Defensive Driving for Healthcare Workers* and our newest DVD, *Street Smarts*. Contact your Safety and Health Consultant if you would like to borrow any of these DVDs or others.

Computer Workstation eTool

When considering office ergonomics resources, be sure to visit www.osha.gov/SLTC/etools/computerworkstation/checklist_evaluation.html for the Occupational Safety and Health Administration (OSHA) eTool on Computer Workstations. Located on OSHA's website there are several eTools that are stand-alone, interactive, and web-based on a variety of different occupational safety and health topics. They are highly illustrated and utilize graphical menus.

The eTool on Computer Workstations illustrates simple, inexpensive principles that will help employees create a safe and comfortable computer workstation. There is no single "correct" posture or arrangement of components that will fit everyone. However, there are basic design goals to consider when setting up a computer workstation.

Topics include: Good Working Positions, Workstation Components, Checklists, Work Process and the Workstation Environment.

The two checklists titled "Evaluation" and "Purchasing Guide" are particularly useful as they help you to analyze an existing workstation and trouble shoot areas of concern. The Purchasing Guide checklist will help evaluate and guide you when looking for new ergonomic items.

When using the checklists it's best to consider your workstation as you read through each section and see if you can identify areas for improvement in posture, component placement, or work environment. The eTool will provide suggestions to minimize or eliminate identified problems, and allow you to create your own "custom-fit" computer workstation.

For additional information regarding office ergonomics please see the following links:

Health Computing

[Http://www.healthycomputing.com](http://www.healthycomputing.com)

Cornell University Ergonomics

<http://ergo.human.cornell.edu/>

The National Institute for Occupational Safety and Health (NIOSH)

<http://www.cdc.gov/niosh/topics/ergonomics/default.html>

If you need assistance in evaluating your ergonomics or safety and health program, please contact Neal Freedman, John Cotnam, Margarita Strzepka, or Mark Hickox from Atlantic Charter's Safety and Health Department at (617) 488-6500.