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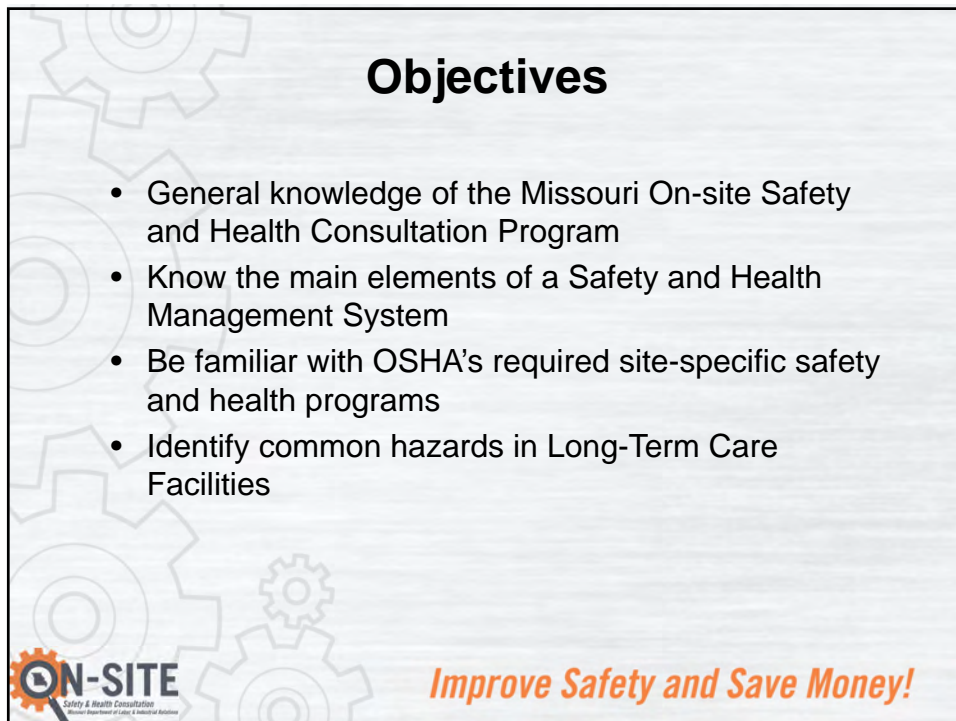
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OSHA: Managing Your Workplace Safety and Health

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 DEPARTMENT OF LABOR & INDUSTRIAL RELATIONS

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Objectives

- General knowledge of the Missouri On-site Safety and Health Consultation Program
- Know the main elements of a Safety and Health Management System
- Be familiar with OSHA's required site-specific safety and health programs
- Identify common hazards in Long-Term Care Facilities

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Missouri On-site Safety and Health Consultation Program





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Background

- The need for OSHA Consultation
- Section 21(d)(2) of OSHA Act
- 29 CFR 1908 - Consultation Agreements
- 90%/10% funding

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Consultation Program

- OSHA “mock” inspection
- No fines, penalties, or citations
- No cost



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Consultation Program (continued)

- Completely Confidential!
- Serious hazards/Imminent danger
- No referral since program’s inception



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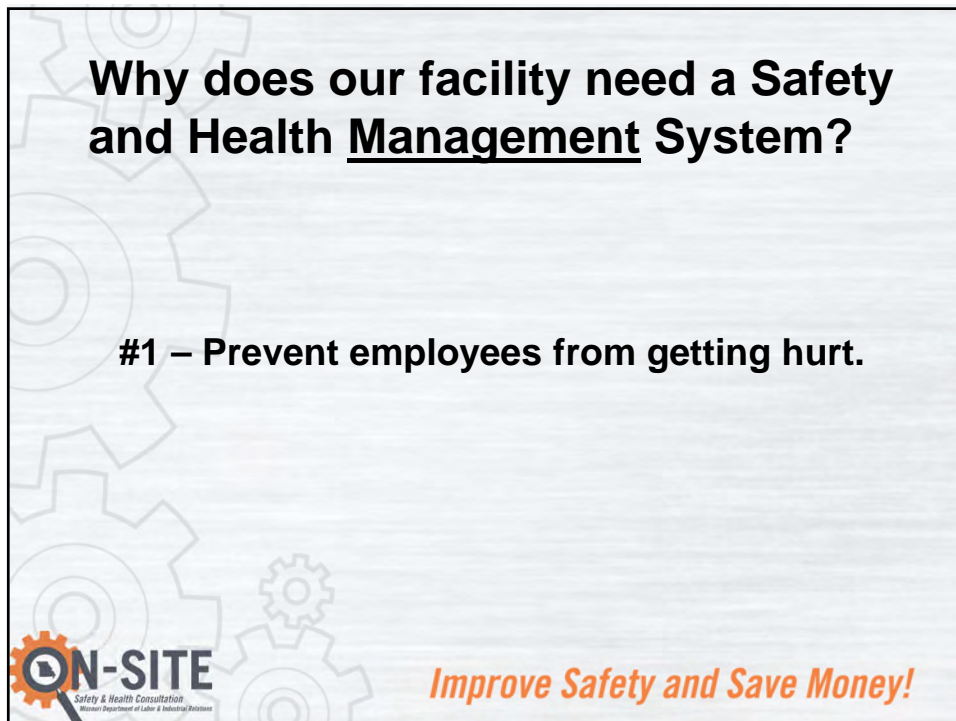


Elements of a Safety and Health Management System

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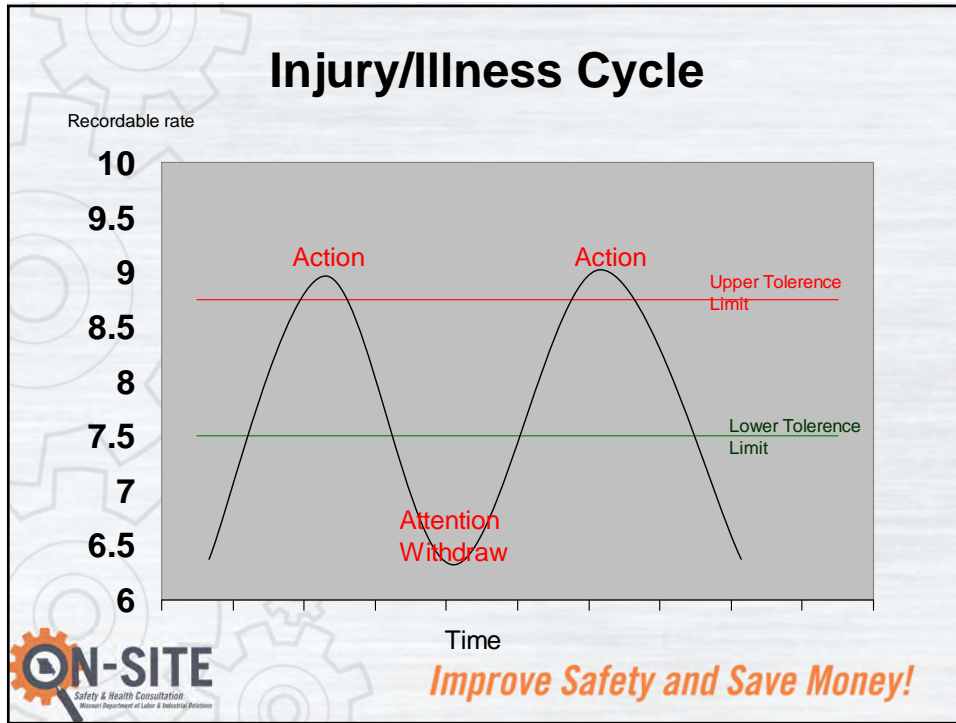
Why does our facility need a Safety and Health Management System?

#1 – Prevent employees from getting hurt.

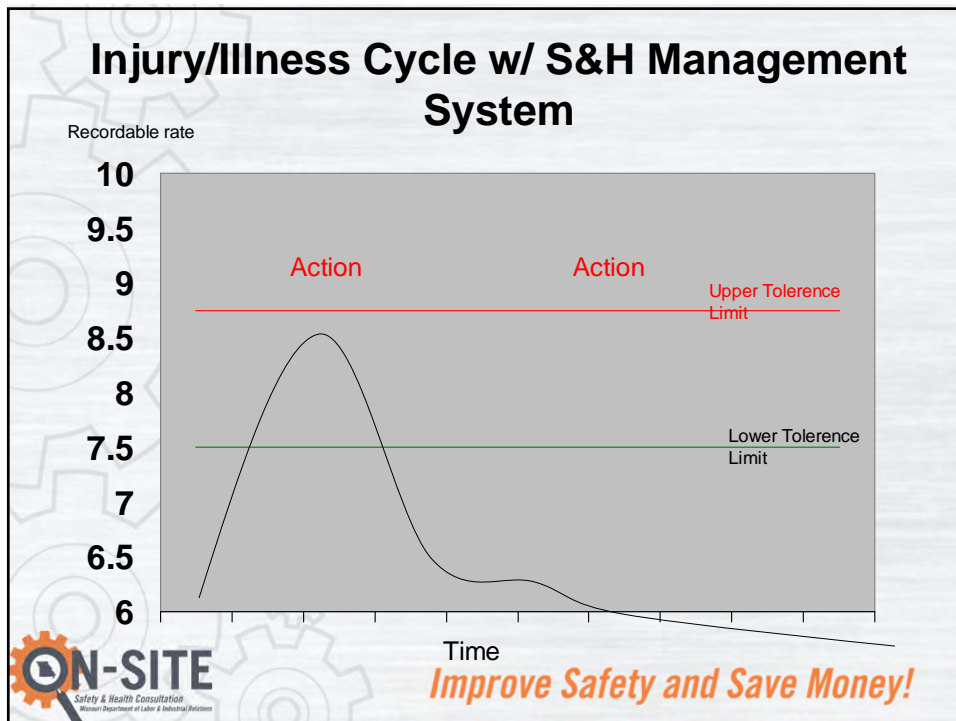
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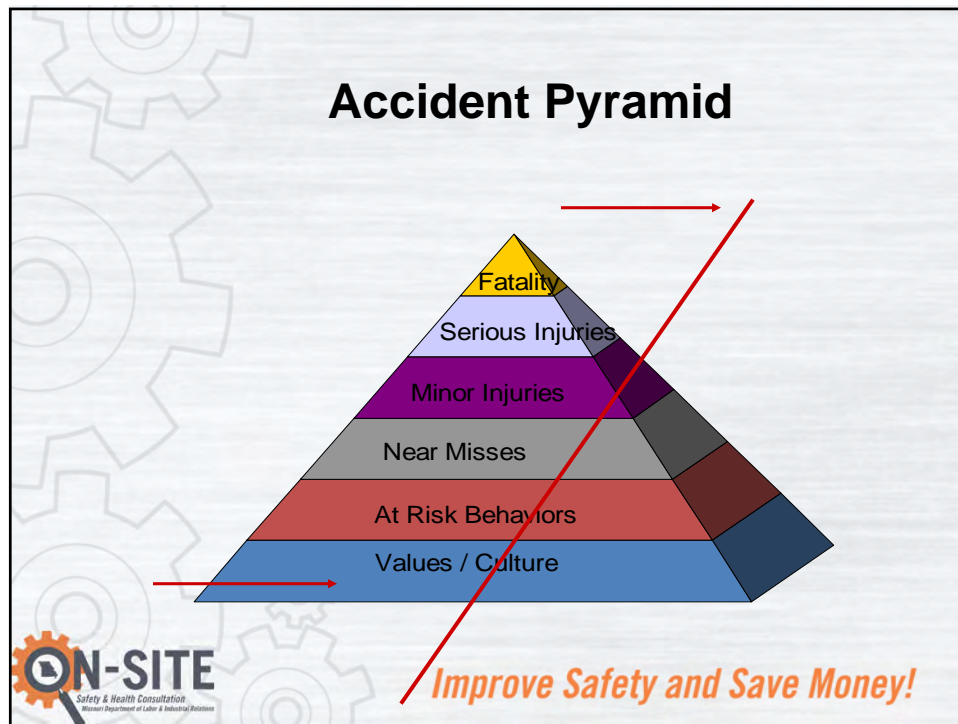
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Why does our facility need a Safety and Health Management System?

#1 - Prevent employees from getting hurt.

#2 - To lower costs.

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Direct Costs vs. Indirect Costs



- Compensation Payments
- Medical Costs

- Replacing Employees
- Investigation Time
- Supervision Time
- Training
- Staff Morale
- Break up of Work Team
- Administrative Time
- Overtime Paid
- All Other costs

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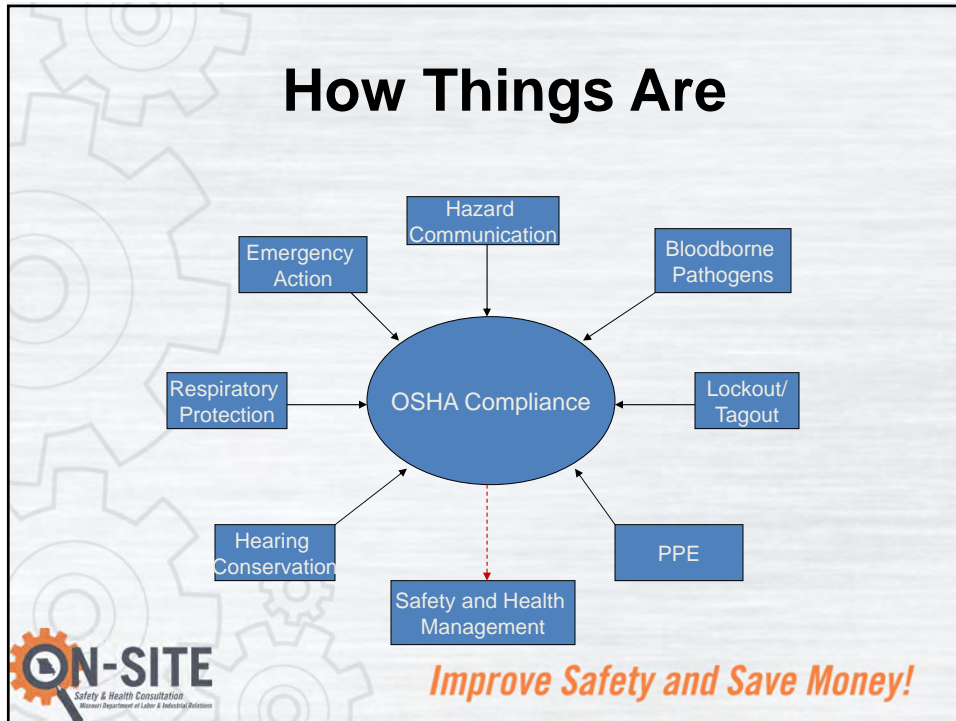
Why does our facility need a Safety and Health Management System?

- #1 – Prevent employees from getting hurt
- #2 - To lower costs.
- #3 - To achieve OSHA compliance.

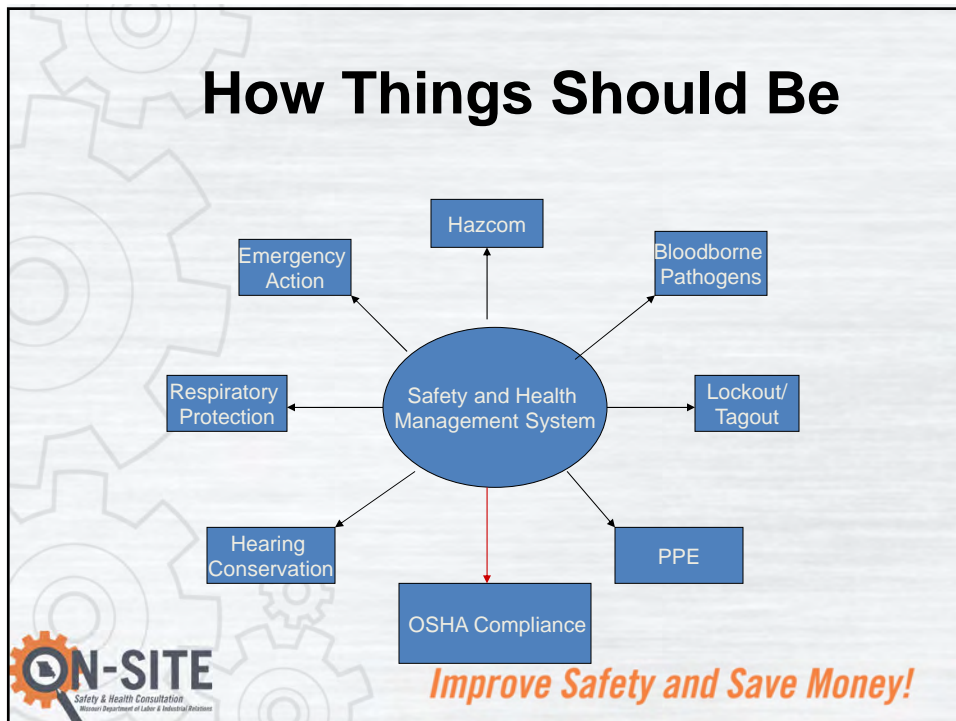


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Establishing a Safety and Health Management “System” (SHMS)



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Safety and Health Management System Elements

1. Management Leadership and Employee Involvement
2. Workplace Analysis
3. Hazard Prevention and Control
4. Safety and Health Training
5. Program Evaluation/Improvement
6. Coordination/Communication on Multiemployer Worksites




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Element #1 - Management Leadership and Employee Involvement

- Top management commitment essential!
- Policy statement
- Goals and objectives
- Management example



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Good management example???



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Management Leadership and Employee Involvement (continued)

- Assign safety and health responsibilities
- Provide authority and resources
- Accountability



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Element #2 - Worksite Analysis

- Baseline and periodic safety and health surveys
- Hazard reporting system
- Analyze new processes, buildings, materials, equipment



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Worksite Analysis

- Job safety and health analysis
- Expert hazard analysis
- Accident & incident investigation, near misses
- Trend analysis



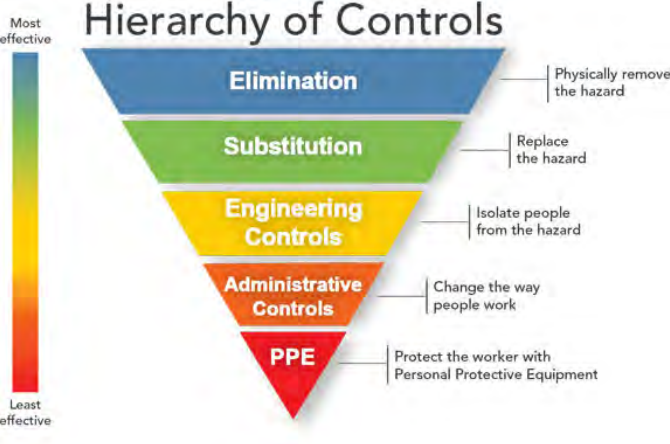
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Element #3 - Hazard Prevention and Control

Hierarchy of Controls



Control Level	Description
Elimination	Physically remove the hazard
Substitution	Replace the hazard
Engineering Controls	Isolate people from the hazard
Administrative Controls	Change the way people work
PPE	Protect the worker with Personal Protective Equipment

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Hazard Prevention and Control

- Hazard tracking
- Preventive maintenance
- Emergency drills
- Medical program



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Element #4 - Safety and Health Training

- New-Hire Employees
- Existing Employees
- Periodic Training Needs
- DOCUMENT!
- Tailor training for:
Employees
Supervisors
Managers



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Communication and Coordination for Host Employers, Contractors, and Staffing Agencies(new)

Establish effective communication

- Define relationships between parties for safety and health
- Exchange information on the hazards present and controls
- Prevent creation of new hazards
- Contractors and temp agencies provide info on injuries and illnesses reported
- Right to inspect each other and access to injuries and illness data
- What to do in nonroutine and emergencies
- All info communicated before work begins



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Communication and Coordination for Host Employers, Contractors, and Staffing Agencies(new)

Establish effective coordination

- Procedures to resolve conflicts before work begins
- Plan and schedule work ahead of time
- How to deal with unexpected staffing needs and how to train replacements
- Manager availability to prepare and deal with day to day coordination issues



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OSHA Compliance



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OSHA 300 log (29 CFR 1904)

- Annual log of recordable injuries and illnesses
- 300A posted from February 1 to April 30
- 301 – Injury and Illness Incident Report



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What do I have to report to OSHA?

- Fatality--within 8 hours
- Within 24 hours:
 - In-patient hospitalization
 - Amputation
 - Loss of an Eye



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OSHA Site-Specific Programs (not all inclusive)



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OSHA Poster

- Must be displayed where workers can see it
- Explains worker and employer rights
- Downloadable from OSHA's website



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Emergency Action Plan (29 CFR 1910.38)

- Identify "reasonably foreseeable" emergencies
- Procedures to report emergencies
- Head count
- Critical facility operations
- If you have 11 or more employees, the plan has to be in writing
- Train your employees on Day #1



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Hazard Communication (29 CFR 1910.1200)

- Inventory/list of hazardous materials
- SDS for each hazardous material
- SDS available on all shifts



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Hazard Communication (continued)

- Labeling - primary and secondary containers
- Independent contractors
- Non-routine tasks
- Employee Training



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Lockout/Tagout Program (29 CFR 1910.147)

Establish Energy Control Program -

- Energy Control Procedures
- Employee Training
- Periodic Inspections (annually)
- Excluded Operations:
 - Cord/Plug equipment (if plug is controlled)



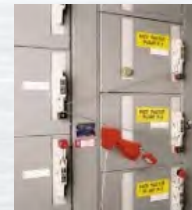
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Lockout/Tagout Program (29 CFR 1910.147)

Energy Control Program (continued)

- Independent Contractors
- Group Lockout/Tagout
- Shift Changes



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Personal Protective Equipment (29 CFR 1910.132)

- Hazard Assessment
- Written Certification
- Employee Training
 1. When PPE is necessary
 2. What PPE is necessary
 3. How to properly don, doff, adjust and wear PPE
 4. Limitations of PPE
 5. Proper care, maintenance, useful life and disposal



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Bloodborne Pathogen Program (29 CFR 1910.1030)

- Applies if employees have exposure to blood or other infectious materials
- Exposure Control Plan
- Universal Precautions
- Hepatitis B Vaccinations
- Communication of Hazards to Employees
- Training




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Respiratory Protection Program (29 CFR 1910.134)

- Voluntary Use
- Procedures for selection
- Medical Evaluations
- Fit Testing




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Respiratory Protection Program (continued)

- Cleaning, disinfecting and storage
- Training
- Evaluation of program effectiveness



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Ergonomics

- Back injuries - #1 Problem
- Enforced through General Duty Clause
- Job Hazard Analysis – step, hazard, control
- Engineering controls



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Reduce Risk Factors

Reduce:

- Bending
- Twisting
- Reaching
- Awkward posture
- Lifting more than 50 pounds

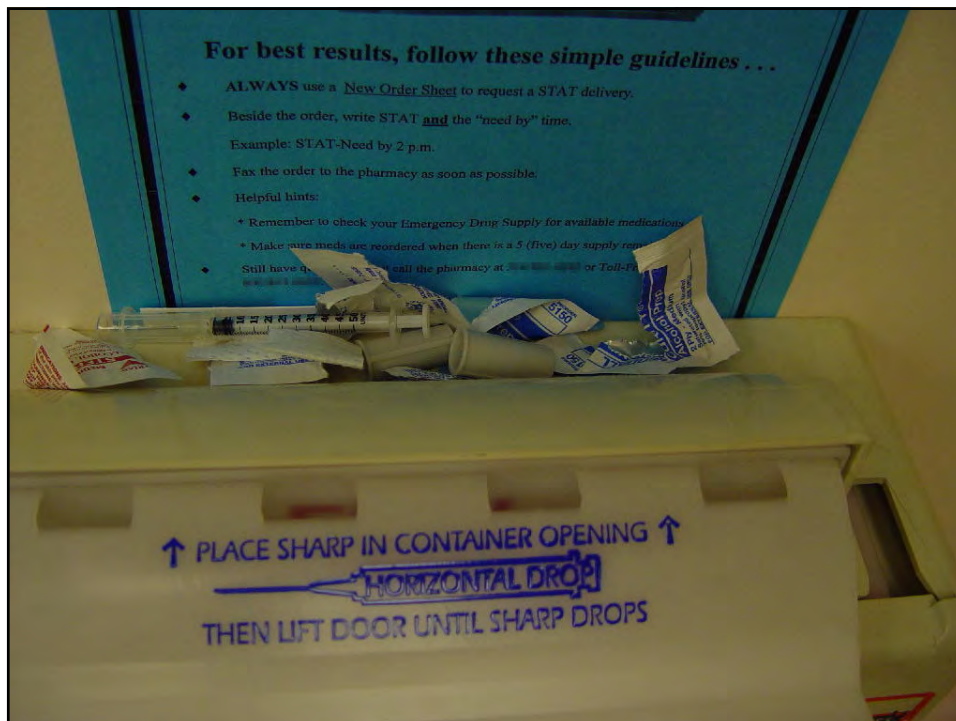


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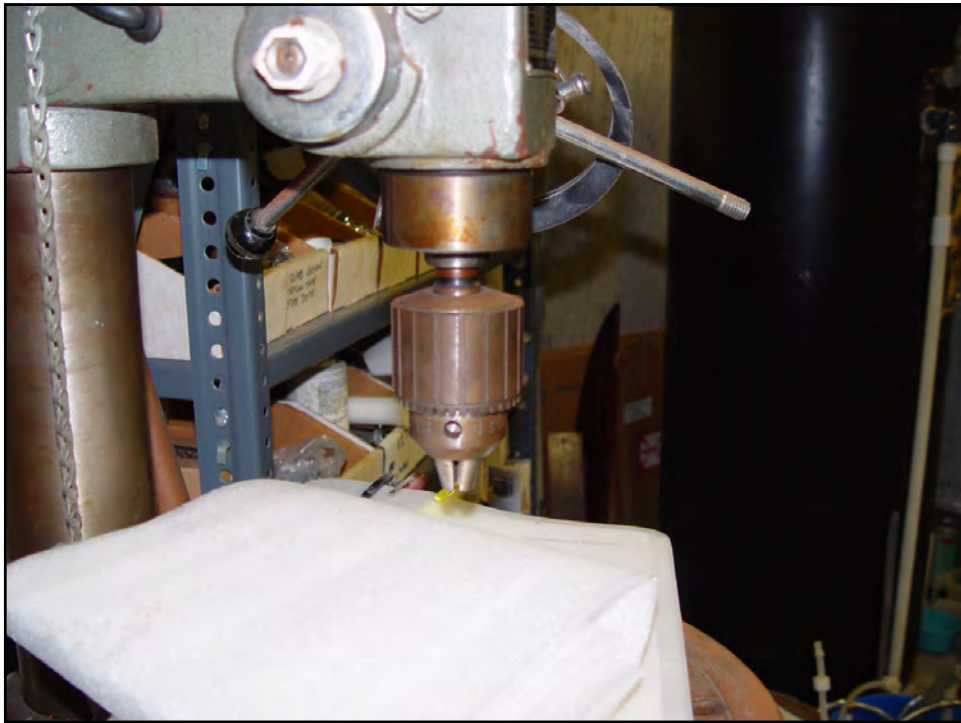
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Questions?

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