

State of Alaska Department of Labor and Workforce Development Division of Labor Standards and Safety

AKOSH Program Directive #19-01

Date: October 1, 2018

To: All AKOSH Staff

From: Deborah Kelly, Director

Subject: AKOSH Local Emphasis Program for Health Care Facilities

This program directive establishes enforcement procedures to implement the AKOSH Local Emphasis Program (LEP) for programmed safety and health inspections in certain segments of the healthcare industry.

This program directive becomes effective immediately. Please ensure that all members of your staff receive this program directive, and understand how to implement it.

Attachment: AKOSH Health Emphasis Program FFY 2019-2023

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EXECUTIVE SUMMARY

This directive provides the framework for a local emphasis program to reduce and/or eliminate occupational safety and health (OSH) hazards associated with the healthcare industry in Alaska.

I. Purpose. The purpose of this directive is to establish an enforcement initiative to prevent

- **I.** <u>Purpose</u>. The purpose of this directive is to establish an enforcement initiative to prevent occupational injuries and illnesses among Alaskan workers in the healthcare industry.
- **II.** Scope. This directive applies to all AKOSH offices in Alaska and those worksites in Alaska that are under AKOSH jurisdiction.

III. <u>References</u>.

- A. Alaska Occupational Safety and Health Field Operation Manual (AKOSH FOM) Program Directive PD # 18-05, May 1, 2018 or current update.
- B. OSHA Instruction CPL 04-00-001 (CPL 2-0.102A), Procedures for Approval of Local Emphasis Programs (EPs), November 10, 1999 or current update.
- C. AKOSH Program Directive PD # 18-01 Enforcement and Scheduling for Occupational Exposure to Workplace Violence, December 12, 2017 or current update.
- D. AKOSH Program Directive PD # 16-06 Inspection Procedures for Respiratory Protection Standards, September 27, 2016 or current update.
- E. AKOSH Program Directive PD # 16-01 Enforcement Procedures and Scheduling for Occupational Exposure to Tuberculosis, March 16, 2016 or current update.
- F. AKOSH Program Directive PD # 13-01 National Emphasis Program Nursing and Residential Care Facilities, October 2, 2012 or current update.
- G. AKOSH Program Directive PD # 14-01 OSHA Strategic Partnership Program for Workers Safety and Health, April 25, 2014 or current update.
- H. Alaska Statutes AS 18.60.010 through AS 18.60.105
- I. Alaska Administrative Code (AAC) all safety and health standards enforced by AKOSH and contained in Title 8, Chapter 61of the Alaska Administrative Code.
- J. 29 CFR 1910 Subpart I, Personal Protective Equipment
- K. 29 CFR 1910 Subpart L, Fire Protection
- L. 29 CFR 1910.1030, Bloodborne Pathogens
- M. 29 CFR 1910.1047, Ethylene Oxide
- N. 29 CFR 1910.1048, Formaldehyde
- O. 29 CFR 1910.1096, Ionizing Radiation
- P. 29 CFR 1910.1200, Hazard Communication
- Q. OSHA Hospital eTools
- R. OSHA Nursing Home eTools

IV. Expiration. This directive expires on September 30, 2023, but may be renewed as necessary.

V. Background.

- A. During normal operations at certain health care facilities employees could be exposed to hazards involving any of the following:
 - a. Bloodborne pathogens: hazards associated with infectious agents transmitted via blood
 - b. Electrical
 - c. Ergonomics
 - d. Ethylene oxide, glutaraldehyde, and other cold disinfectants
 - e. Fire
 - f. Hazardous chemicals
 - g. Inappropriate PPE
 - h. Infectious agents: tuberculosis, seasonal flu, multidrug resistant organisms
 - i. Ionizing radiation
 - j. Latex allergy
 - k. Lasers
 - 1. Slips/trips/falls
 - m. Workplace stress
 - n. Workplace violence
- B. Scheduling inspections.
 - 1. AKOSH Health Care Emphasis Program inspection list.

Under direction of the Chief of OSH, the program analyst will compile a list of establishments using the following sources:

a. The North American Industry Classification System (NAICS) 62 Health Care and Social Assistance licensed in Alaska.

Health Care and Social Assistance

Offices of Physicians and Dentists

- 621111 Offices of Physicians (except Mental Health Specialists)
- 621112 Offices of Physicians, Mental Health Specialists
- 621210 Offices of Dentists
- 621310 Offices of Chiropractors
- 621320 Offices of Optometrists
- 621330 Offices of Mental Health Practitioners (except Physicians)
- 621340 Offices of Physical, Occupational and Speech Therapists and Audiologists
- 621391 Offices of Podiatrists

621399 Offices of All Other Miscellaneous Health Practitioners

Outpatient Care Centers

621410 Family Planning Centers

621420 Outpatients Mental Health and Substance Abuse Centers

621491 HMO Medical Centers

621492 Kidney Dialysis Centers

621493 Freestanding Ambulatory Surgical and Emergency Centers

621498 All Other Outpatient Care Centers

Medical and Diagnostic Laboratories

621511 Medical Laboratories

621512 Diagnostic Imaging Centers

Home Health Care Services

621610 Home Health Care Services

Other Ambulatory Health Care Services

621910 Ambulance Services

621991 Blood and Organ Banks

621999 All Other Miscellaneous Ambulatory Health Care Services

Hospitals

622110 General Medical and Surgical Hospitals

622210 Psychiatric and Substance Abuse Hospitals

622310 Specialty (except Psychiatric and Substance Abuse) Hospitals

Nursing and Residential Care Facilities

623110 Nursing Care Facilities

623210 Residential Mental Retardation Facilities

623220 Residential Mental Health and Substance Abuse Facilities

623311 Continuing Care Retirement Communities

623312 Homes for the Elderly

623990 Other Residential Care Facilities

Social Assistance

624110 Child and Youth Services

624120 Services for the Elderly and Persons with Disabilities

624190 Other Individual and Family Services

624210 Community Food Services

624221 Temporary Shelters

624229 Other Community Housing Services

624230 Emergency and Other Relief Services

624310 Vocational Rehabilitation Services

624410 Child Day Care Services

- b. The State of Alaska, Department of Health and Social Services establishments that provide health care or social assistance but may be reported under General Government NAICS 99 will be added to the inspection list. The following State of Alaska, Department of Health and Social Services establishments will be included:
- Alaska Pioneer Homes
- Alaska Psychiatric Institute
- c. The State of Alaska's lists of licensed health facilities and assisted living facilities:

http://dhss.alaska.gov/dhcs/Documents/hflc/PDF/Health-Facilities-Licensing-and-Certification-Facilites-List.pdf

http://dhss.alaska.gov/dhcs/Pages/cl/all/default.aspx

Inspection scheduling will be in accordance with applicable provisions of the AKOSH FOM.

2. <u>Relationship to Other Programs</u>. Reports of imminent danger, fatality/catastrophe, complaints and referrals shall be scheduled as unprogrammed inspections and shall be inspected in accordance with the applicable provisions of the AKOSH FOM.

Establishments actively participating in the Alaska OSH recognition and exemption programs Alaska OSH Safety and Health Achievement Recognition Program (SHARP) and Alaska OSH Voluntary Protection Program (VPP) will be exempt from programmed inspections in accordance with the applicable provisions of the AKOSH FOM.

VI. Enforcement.

Inspections conducted under the AKOSH Health Care EP will be conducted pursuant to the following procedures:

The CSHO will review the OSHA 300 logs and OSHA 300A forms for the three most current years; review the employer's PPE hazard assessment to ensure CSHO is equipped with the appropriate PPE; follow the procedures outlined in the AKOSH FOM for conducting an opening conference; then proceed as quickly as possible with the walk around inspection. Unusual circumstances shall be handled in accordance with the AKOSH FOM.

All safety and health inspections will focus on the types of hazards considered common in hospitals and other health care settings: slips, trips and falls, bloodborne pathogens,

tuberculosis, workplace violence, and ergonomics. Inspections will be limited to these hazards unless a CSHO expands the scope of the inspection. The CSHO will expand the scope if the employer's OSHA 300 logs demonstrate high injury or illness rates related to hazards not listed above.

The Compliance Safety and Health Officer (CSHO) shall avoid all direct contact with potentially contaminated needles and other sharp instruments. The CSHO must establish the existence of hazards and adequacy of work practices through employee interviews and shall observe operations at a safe distance.

The privacy of clients must be respected. Photos must not show client faces, readable identification bracelets or any other image that could be used to reveal client identity.

The CSHO shall also evaluate the employer's overall safety and health management system, in accordance with the AKOSH FOM.

VII. Recording in OIS.

The OSHA Information System (OIS) identification code to be used in the Inspection Activity will be "HEALTHCARE". All inspections conducted shall be recorded as being "Comprehensive".

VIII. Outreach.

Outreach will be performed to trade groups and employee organizations by AKOSH Consultation and Training consultants.

IX. Evaluation.

No later than October 30 each federal fiscal year the AKOSH Health Care EP is in effect, the Chief of OSH will submit an evaluation report to the director. The report will address the following elements: number of enforcement inspections conducted, number, type and classification of violations, number of consultation visits and training events.