

Introduction

The standards referenced in this checklist include South Carolina's Safety and Health Standards for General Industry and Construction from **29 CFR** (Code of Federal Regulations) **Part 1910 and Part 1926** under the authority 41-15-210, for statutory authority, South Carolina Code of Laws (1976) as amended.

Pursuant to this authority, the Director of the South Carolina Department of Labor, Licensing and Regulation has put into force and made public certain Occupational Safety and Health Standards, which are identical to those enforced by the Secretary of Labor, United States Department of Labor. These standards are known as the Occupational Safety and Health Rules and Regulations of the State of South Carolina and have been published as Article VI.

The Office of OSHA Voluntary Programs conducts safety and health training programs and seminars at employers' sites throughout the state. Training materials, such as this checklist, are used extensively in these programs. Sample written programs (i.e. lockout/tagout, hazard communication, bloodborne pathogens, respiratory protection) and other training information is available upon request by calling 803-896-7744 or visit, www.llr.state.sc.us/Labor/SCOVP/

In addition to these training programs, the Office of OSHA Voluntary Programs offers courtesy (consultation) services and technical assistance to South Carolina employers in recognizing safety and health hazards and in developing and/or improving their overall safety and health programs. These services are free to private and public sector employers upon request, and no fine or citations are imposed. For more information, or to set up an on-site consultation visit, call 803-896-7744.

This checklist has been compiled to help employers and employees comply with the Occupational Safety and Health Act of 1970. The questions in this list are based upon Article VI of the S.C. Rules and Regulations (Part 1910 of the Federal OSHA Standards), which contains standards for general industry.

This checklist, however, is only a **guide** to be used in conjunction with the OSHA Code of Federal Regulations, **Part 1910 and 1926**. Compliance with it does not necessarily assure full compliance with all OSHA standards.

This checklist is designed so that a negative answer to any question indicates an area of safety concern. After using this checklist, if you determine that a problem exists, or if a question or concern should develop, contact:

S.C. Department of Labor, Licensing and Regulation
Office of Voluntary Programs
P.O. Box 11329
Columbia, S.C. 29211-1329

Phone: 803-896-7744
Fax: 803-896-7750
E-mail: scovp@mail.llr.state.sc.us

Safety and Health Systems

Currently, there is no OSHA regulation requiring employers to establish a safety and health system, but the U.S. Department of Labor/OSHA has published Safety and Health Program Management Guidelines for use by employers to prevent occupational injuries and illnesses.

The South Carolina Department of LLR, Office of Voluntary Programs (OVP), has recognized that organizations with effective safety and health systems have reduced injuries and illnesses. This General Community Long-Term Care Checklist will assist employers in hazard identification and is designed to aid the industry in quickly identifying possible health and safety problems. However, hazard identification is only one element of an effective safety and health system. Today, nursing homes, personal care and long-term care facilities employ approximately 1.7 million workers at 21,000 work sites. By the year 2005, industry employment levels will rise to an estimated 2.4 million workers. Among U.S. industries, nursing homes and long-term care facilities have the **fourth highest** rate of nonfatal injury and illness cases - 14.2 injuries and illnesses per 100 full-time workers; this is more than double the incident rate of 6.7 for industry as a whole. Only meat products processing, motor vehicle/equipment manufacturing industries and air transportation industries, rank higher. The most frequently cited violations are bloodborne pathogens, uncontrolled electrical hazards, lockout/tagout, hazard communication, medical services and first aid, recordkeeping, egress, and machine guarding. The information gathered through the use of this checklist should be supplemented by research on the applicable safety and health regulations as well as any related information deemed appropriate.

1. Management Commitment and Planning

- ___ a) Do you have a written policy and goals?
- ___ b) Do you have a line of accountability so that managers, supervisors and employees know what is expected?
- ___ c) Do you provide adequate authority and make resources available?
- ___ d) Does your company have management involvement?
- ___ e) Is coverage provided for contract workers?

2. Hazard Assessment

- ___ a) Are new processes, materials, substances and equipment analyzed for safety and health hazards and the need for personal protective equipment?
- ___ b) Has your department conducted a comprehensive baseline survey? (A baseline survey is the first inspection of the workplace to identify hazards).
- ___ c) Do you conduct periodic self-inspections?
- ___ d) Do you conduct a hazard analysis of the workplace?
- ___ e) Is there a system in place for employee notification of hazards without fear of reprisal?
- ___ f) Is there a procedure for conducting accident/incident investigations?
- ___ g) Do you analyze injury and illness trends?

3. Hazard Prevention, Correction and Control

- ___ a) Do you have professional safety and health expertise available, such as OVP and OSHA standards?
- ___ b) Is there a system for tracking hazard correction at your facility?
- ___ c) Have you established a consistent disciplinary system, and is it used?
- ___ d) Do you plan and train for emergencies?
- ___ e) Do you have a preventive maintenance program for equipment and facilities?
- ___ f) Are first aid and emergency medical care available?

4. Safety and Health Training

- ___ a) Do you have ongoing safety and health education and training with a method to ensure understanding

- _____ such as testing or observation?
_____ b) Do you have training for new hires, both general and job specific?
_____ c) Is there a method in place for tracking the training given?
_____ d) Is training provided for management, supervisors and employees?

5. Employee Participation

- _____ a) Are employees involved in the safety and health program?
_____ b) Do you have safety and health committees, and do employees participate?
_____ c) Does your department have a safety officer, and is sufficient administrative authority assigned to this person to correct serious safety violations at the time?
_____ d) Does your department have a safety committee to study accidents, determine their cause and recommend solutions to management?
_____ e) Is the safety committee given the necessary information from all concerned parties to accomplish item (d) above?

6. Safety and Health Program Self-Evaluation

- _____ a) Is an evaluation of the Safety and Health Management Program conducted at least annually?
_____ b) Do you document the results and use them to improve upon your program?

7. Administrative/Recordkeeping Requirements*

- _____ a) Are exposure and medical records maintained on employees who have been exposed to toxic substances or harmful agents such as lead and asbestos?
1910.1001 (m) (1) Asbestos; 1910.1020 (b) and (d) Medical Access; 1910.1025 (n) (1) Lead

*b) S.C. OSHA Records (OSHA 300 Logs, OSHA 301 Reports, OSHA 300A Summaries or Workers Compensation, First Report of Injury)

- _____ *c) Are OSHA 300 Logs capturing occupational injury and illness records current and retained for five years? S.C. Rules and Regulation (SCRR) Chapter 71, Article 1, Subarticle 3, Sections 3.29, 3.32, and 3.33

- _____ *d) Are required equipment, inspection and modification records maintained (such as maintenance and inspection records) for all of the various standards that require such records?

* This section will apply only to those industries required to keep records under S.C. Rules and Regulation (SCRR) Chapter 71, Article 1, Subarticle 3, Sections 3.01 and 3.02. Some industries may be exempt from these requirements and should check their Standard Industrial Classification (SIC) to ascertain whether they are required to maintain these records.

Exit Routes/Emergency Action Plans

This section will cover those actions that employers and employees must take during emergencies to ensure safety in the workplace.

- _____ 8. Is an emergency action plan (EAP) in place for your facility?
1910.38 (a) (1)
- _____ 9. Where an emergency action plan is required, has an employee alarm system, which complies with 1910.165, been established?
1910.38 (a) (3)
- _____ 10. Has the employer reviewed the EAP with employees?
1910.38 (a) (5) (ii)
- _____ 11. Are exits marked by a readily visible sign with letters at least six inches high and 3/4" wide?
1910.37 (q) (1) & 1910.37 (q) (8)
- _____ 12. Are the accesses to exits marked by readily visible signs where access is not apparent?
1910.37 (q) (1) & 1910.37 (q) (5)
- _____ 13. Are means of egress continually maintained free of all obstructions and impediments and not locked during occupancy?
1910.36 (b) (4) & 1910.36 (d) (1) & 1910.37 (k) (2)

Fire Protection

This section addresses the issue of protection against workplace fires, which kill and injure many employees each year. The human and financial toll underscores the serious nature of fires and fire protection.

- _____ 14. Have procedures been established for sounding emergency alarms in the workplace if the employer decided to evacuate employees?
1910.165 (b) (5)
- _____ 15. Are portable fire extinguishers provided, mounted, located and identified so that they are readily accessible to employees?
1910.157 (c) (1)
- _____ 16. Are fire extinguishers selected and distributed based on the classes of anticipated fires and the size and degree of hazard?
1910.157 (d) (1)
- _____ 17. Are portable fire extinguishers hydrostatically tested as required?
1910.157 (f) (2)
- _____ 18. Are portable fire extinguishers visually inspected each month?
1910.157 (e) (3)
- _____ 19. Are annual maintenance checks of portable fire extinguishers completed and records, including the date completed, maintained?
1910.157 (e) (2)

Personal Protective Equipment

Personal Protective Equipment (PPE) is to be used when other controls do not reduce or eliminate employees' exposure to hazards. Employers are required to determine all exposures to hazards in the workplace and whether PPE is needed to protect workers.

- _____ 20. Has the employer assessed the workplace to determine if hazards are present, or are likely to be

present, which necessitates the use of personal protective equipment?
1910.132 (d) (1)

Note: A hazard assessment of PPE should include, but not be limited to the following items:

- ___ a) Head protection
- ___ b) Full protective clothing
- ___ c) Hand protection
- ___ d) Foot protection
- ___ e) Respiratory protection

___ 21. Is training provided to each employee who is required to use personal protective equipment?
1910.132 (f)

___ 22. Does the employer have a written certification for hazard assessment and training pertaining to personal protective equipment?
1910.132 (d) (2) and 1910.132 (f) (4)

Bloodborne Pathogens

This standard protects all employees whom employers have determined to have reasonable anticipation of being occupationally exposed to blood and other potentially infectious materials. Workers who perform tasks including, but not limited to, administering injections, changing soiled linens or dressings, and housekeeping, need protection from exposure to bloodborne pathogens.

___ 23. Does the employer have a written Exposure Control Plan that includes at least the following items?
___ a) Exposure determination
___ b) The schedule and method of implementation for methods of compliance, Hepatitis B vaccination and post-exposure evaluation and follow-up, communication of hazards to employees, and recordkeeping
1910.1030 (c) (i) (ii)

___ 24. Is the Exposure Control Plan accessible to all employees covered by the Plan?
1910.1030 (c) (1) (iii)

___ 25. Is the Exposure Control Plan reviewed and updated at least annually, and when necessary, to reflect new or modified tasks that affect occupational exposure, and to reflect changes in technology by documenting consideration and implementation of safer medical devices?
1910.1030 (c) (1) (iv)

___ 26. Has an exposure determination been prepared by job classification with a list of job tasks and procedures in which occupational exposure occurs and that are performed by employees?
1910.1030 (c)(2) (i)

___ 27. Are universal precautions being observed to prevent contact with blood or other potentially infectious materials?
1910.1030 (d) (1)

___ 28. Are hand washing facilities provided and used where feasible, or an appropriate antiseptic hand cleanser in conjunction with clean cloth/paper or antiseptic towelettes provided for employees when hand washing facilities are not feasible?
1910.1030 (d) (2) (iii) and (iv)

- _____ 29. Do employees wash their hands as soon as possible after removal of PPE?
1910.1030 (d) (2) (v)
- _____ 30. Is it prohibited for contaminated needles and other contaminated sharps to be bent, recapped or removed? And is it prohibited for needles to be sheared or broken?
1910.1030 (d) (2) (vii)
- _____ 31. Are contaminated sharps discarded immediately or as soon as feasible in containers that are:
_____ a) Puncture resistant
_____ b) Leakproof on the sides and bottom
_____ c) Labeled or color-coded according to this standard
1910.1030 (d) (2) (viii) (A) - (C)
- _____ 32. During use, are containers for sharps:
_____ a) Easily accessible to employees?
_____ b) Maintained upright throughout use?
_____ c) Replaced routinely and not allowed to overfill?
1910.1030 (d) (iii) (A) (2) (i) - (iii)
- _____ 33. Is eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses prohibited in work areas where there is a reasonable likelihood of occupational exposure?
1910.1030 (d) (2) (ix)
- _____ 34. Is personal protective equipment (PPE) provided to employees at no cost to include, but not be limited to, gloves, faceshields or masks and eye protection, and mouthpieces, resuscitation bags, pocket masks or other ventilation devices?
1910.1030 (d) (3)(i)
- _____ 35. Does the employer ensure that employees use the PPE provided?
1910.1030 (d) (3) (ii)
- _____ 36. Does the employer clean, launder and dispose of PPE at no cost to the employee?
1910.1030 (d) (3) (iv)
- _____ 37. Are garments penetrated by blood or other potentially infectious material (OPIM) removed immediately or as soon as possible?
1910.1030 (d) (3) (vi)
- _____ 38. Is it prohibited for disposable gloves to be re-used?
1910.1030 (d) (3) (ix) (B)
- _____ 39. Are all pieces of equipment and working surfaces cleaned and decontaminated with an appropriate disinfectant after contact with blood or OPIM?
1910.1030 (d) (4) (ii)(A)
(Note: EPA registered tuberculocidal or household bleach and water mixed 1:10 - 100 within the last 24 hours.)
- _____ 40. Is potentially contaminated broken glassware picked up using mechanical means such as a brush and dustpan or tongs?
1910.1030 (d) (4) (ii) (D)

- _____ 41. Is contaminated laundry placed and transported in labeled or color-coded bags or containers?
1910.1030 (d) (4) (iv) (A) (2)
- _____ 42. Is wet, contaminated laundry with a reasonable likelihood of leakage placed and transported in bags that prevent leakage?
1910.1030 (d) (4) (iv) (A) (3)
- _____ 43. Does the employer make available Hepatitis B vaccination shots at no cost to all employees, who have been identified in the Exposure Determination to have an occupational exposure to blood or OPIM after training and within 10 days of initial assignment?
1910.1030 (f) (2)(i)
- _____ 44. Does the employer have post-exposure procedures in place?
1910.1030 (f) (3)
- _____ 45. Are bags or containers of regulated waste, refrigerators and freezers containing blood or OPIM, and other containers used to store, transport or ship blood or OPIM, red or marked with labels that are fluorescent orange or orange-red with the legend for **biohazard**?
1910.1030 (g) (1) (i)
- _____ 46. Do employees participate in a training session during work hours at no cost to the employee?
1910.1030 (g) (2) (i)
- _____ 47. Is the training provided at the time of initial assignment and at least annually thereafter?
1910.1030 (g) (2) (ii)
- _____ 48. Does the training program, at a minimum, include:
- _____ a) an explanation of the bloodborne standard accessible during training
 - _____ b) a general explanation of the epidemiology and symptoms of bloodborne pathogen diseases
 - _____ c) an explanation of the modes of transmission of bloodborne pathogens
 - _____ d) an explanation of the employer's Exposure Control Plan and how an employee can obtain a copy
 - _____ e) an explanation of the appropriate methods for exposure determination
 - _____ f) an explanation of the use and limitations of methods that will prevent or reduce exposure, including appropriate engineering controls, work practices and PPE
 - _____ g) information on the types, proper use, location, removal, handling, decontamination and disposal of PPE
 - _____ h) an explanation of the basis for selection of PPE
 - _____ i) information on the hepatitis B vaccine, including benefits, efficacy, safety, & method of administration
- _____ j) information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM
- _____ k) an explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available
- _____ l) information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident
- _____ m) an explanation of the signs and labels and/or color coding required
- _____ n) an opportunity for interactive questions and answers with the person conducting the training session
- 1910.1030 (g) (2) (vii) (A) - (N)

- _____ 49. Is the person conducting the training session knowledgeable in the subject matter as it relates to the workplace that the training will address?
1910.1030 (g) (2) (viii)
- _____ 50. Does the employer maintain medical records on employees with occupational exposure that, at a minimum, includes:
_____ a) name and Social Security number
_____ b) copy of employee's hepatitis B vaccination status including dates of shots
_____ c) a copy of all results of examinations, medical testing, and follow-up procedures related to the exposure incident
_____ d) employer's copy of healthcare professional's written opinion
_____ e) copy of information
1910.1030 (h) (1) (ii)
- _____ 51. Does the employer ensure confidentiality of medical records and not disclose them without the employee's express written consent to any person, internal or external?
1910.1030 (h) (1) (iii)
- _____ 52. Does the employer maintain medical records for at least the duration of employment plus 30 years?
1910.1020 (h) (1) (iv)
- _____ 53. Does the employer maintain training records for at least three years from the date on which the training occurred that includes at least the following elements:
_____ a) the dates of the training sessions
_____ b) the contents or a summary of the training sessions
_____ c) the names and qualifications of persons conducting the training
_____ d) the names and job titles of all persons attending the training sessions
1910.1030 (h) (2)
- _____ 54. Does the employer provide copies of medical and training records to the employee upon request?
1910.1030 (h) (3)

Hazard Communication

Employees are exposed to many chemicals in the workplace. The basic goal of a Hazard Communication program is to be sure employers and employees know what chemicals are in the workplace, what hazards these materials pose, and how workers can protect themselves.

- _____ 55. Does the employer have a written program that, at a minimum, includes information on:
_____ a) labeling
_____ b) material safety data sheets

- _____ c) employee information and training
 - _____ d) all hazardous chemicals known to be present (i.e. firefighting foam, gasoline, cleaning agents, etc.)
 - _____ e) the methods the employer will use to inform employees of the hazards of non-routine tasks
- 1910.1200 (e) (1)

56. Does the employer ensure that each container of hazardous chemicals in the workplace is labeled or marked with the following information:

- _____ a) identity of the hazardous chemicals
 - _____ b) appropriate hazard warnings, or words, pictures, symbols or combination thereof that provide information regarding the hazards of the chemicals
- 1910.1200 (f) (5)

_____ 57. Does the employer ensure that labels are not defaced or removed?
1910.1200 (f) (8)

_____ 58. Does the employer maintain MSDS in the workplace for each hazardous chemical and ensure that they are readily accessible during each work shift?
1910.1200 (g) (8)

_____ 59. Does the employer provide employees with training and information on hazardous chemicals in their workplace at the time of their initial assignment and whenever a new physical or health hazard is introduced into the work area?
1910.1200 (h)

60. Does the training include, at a minimum, the following items:

- _____ a) methods and observations that may be used to detect the presence or release of a hazardous chemical in the work area such as monitoring, visual appearance, etc.
 - _____ b) the physical and health hazards of the chemicals in the work area
 - _____ c) the measures employees can take to protect themselves from these hazards, including specific procedures the employer has implemented to protect employees from exposure to hazardous chemicals, such as appropriate work practices, emergency procedures and PPE to use
 - _____ d) the details of the hazard communication program developed by the employer, including an explanation of the labeling system and the MSDS, and how employees can obtain and use the appropriate hazard information
- 1910.1200 (h) (3)

Walking and Working Surfaces

Slips, trips and falls are the result of a variety of conditions in the workplace. The accidents caused constitute 15 percent of all accidental workplace deaths, but these incidents are highly preventable.

_____ 61. Are floors clean and dry?
1910.22 (a) & 1910.141 (a) (3)

_____ 62. Are permanent aisles and passageways appropriately marked and kept clear?

1910.22 (b) & 1910.176 (a)

___ 63. Are load limit weights posted in overhead storage rooms/areas?
1910.22 (d) (1)

___ 64. Is adequate lighting provided in all work areas?
(Not an OSHA standard but a recommended practice)

___ 65. Is every open-sided floor or platform 4 feet or more above adjacent floor or ground level and guarded by a standard guardrail or the equivalent?
1910.23 (c) (1)

___ 66. Are all hatchway and floor openings guarded or covered?
1910.23 (a) (3)

___ 67. Are floor holes into which persons can accidentally walk guarded or covered?
1910.23 (a) (8)

___ 68. Are covers or guardrails provided to prevent persons from falling into drainage ditches, open pits, vats, tanks, etc.?
1910.22 (c) or 1910.176 (g)

___ 69. Are all fixed industrial stairways at least 22 inches wide?
1910.24 (d)

___ 70. Are all fixed industrial stairways with four or more risers provided with a stair railing on all open sides?
1910.24 (h)

___ 71. Are closed stairways provided with a hand railing on at least one side?
1910.23 (d) (1) or 1910.24 (h)

___ 72. Are all fixed stairways with a width in excess of 88 inches provided with a center stair railing?
1910.23 (d) (1) (v)

___ 73. Is a seven-foot vertical clearance maintained above all stair tread?
1910.24 (i)

Electrical

This standard deals with the concern that electricity can be a serious workplace hazard, exposing workers to dangers, such as shock and electrocution. Employers and employees should seek to minimize this exposure through the safe use of electrical equipment and systems.

___ 74. Is each disconnecting means for motor and appliances, each service, feeder and branch circuit legibly marked to identify its purpose?
1910.303 (f)

___ 75. Are exposed live electrical parts operating at 50 volts or more guarded against accidental contact by approved cabinets or enclosures, by location, or by limiting access to qualified persons only?

1910.303 (g) (2) (i)

____ 76. Are rooms or enclosures containing exposed live parts or conductors operated at more than 600 volts, nominal, kept locked or under the observation of a qualified person at all times?

1910.303 (h) (2)

____ 77. Are over-current devices (i.e. circuit breakers) readily accessible, not exposed to physical damage and not located in the vicinity of easily ignitable material?

1910.304 (e) (1) (iv)

____ 78. Is the path to ground from circuits, equipment and enclosures permanent and continuous?

1910.304 (f) (4)

____ 79. Are exposed metal parts of cord- and plug-connected appliances and equipment such as refrigerators, electric washers, fans, battery chargers, freezers and air conditioners, which may become energized, grounded?

1910.304 (f) (5) (v) (c) (1)

____ 80. Are all pull boxes, junction boxes and fittings provided with covers approved for the purpose?

1910.305 (b) (2)

____ 81. Are flexible electrical cords and cables used as a substitute for the fixed wiring of a structure prohibited?

1910.305 (g) (1) (iii)

____ 82. Are the electrical wiring and equipment located in hazardous (classified) locations intrinsically safe, approved for the hazardous location, or safe for the hazardous location?

1910.307 (b)

____ 83. Is it prohibited to splice flexible (extension) cords?

1910.305 (g) (2) (ii)

____ 84. Are flexible (extension) cords and plug-connected equipment removed from service if a defect or evidence of damage is detected?

1910.334 (a) (2) (ii)

____ 85. Are flexible (extension) cords and plug-connected equipment visually inspected for any external defects before use?

1910.334 (a) (2) (i)

____ 86. Do flexible (extension) cords used with grounding-type equipment contain an equipment-grounding conductor?

1910.334 (a) (3) (i)

____ 87. Are adapters (cheater plugs), which interrupt the continuity of the equipment-grounding connection, prohibited?

1910.334 (a) (3) (iii)

____ 88. Is it prohibited for attachment plugs and receptacles to be connected or altered in a manner that would prevent proper continuity of the grounding conductor at the point where plugs are attached to receptacles?

1910.334 (a) (3) (ii)

- _____ 89. Is it prohibited for flexible (extension) cords to be fastened with staples or otherwise hung in such a fashion as could damage the outer jacket or insulation?
1910.334 (a) (1)
- _____ 90. Is it prohibited for employees' hands to be wet when plugging and unplugging flexible (extension) cords, and cord and plug equipment?
1910.334 (a) (5)
- _____ 91. Are portable generators equipped with a functioning Ground Fault Circuit Interrupter (GFCI)?
1926.404 (B) (1) (ii)

Note: OVP encourages the use of **GFCI** on **all** electrical equipment used.

Medical, First Aid and Eyewash

This standard references first aid requirements where there is a potential for a life-threatening injury. The key is whether the potential for life-threatening activities is present. Where EMS does not respond to an emergency scene, or a medical facility is not available in a timely manner at the emergency scene, it would be advisable to have people trained to provide first aid and CPR.

- _____ 92. If an infirmary, clinic or hospital for the treatment of employees with life-threatening injuries is absent, or not in close proximity to the workplace, is a person or persons adequately trained to render first aid?
- _____ 93. Are adequate first aid supplies readily available?
1910.151 (b)

Control of Hazardous Energy Sources (Lockout/Tagout)

The standard for the control of hazardous energy sources (lockout-tagout) covers servicing and maintenance of machines and equipment in which the unexpected energization or start-up of the machines or equipment or the release of stored energy could cause injury or death to employees.

- _____ 94. Does the employer have a written energy control procedure that addresses electrical, mechanical, hydraulic, pneumatic and stored energy hazards?
1910.147 (c) (1)
- _____ 95. If an energy-isolating device cannot be locked out, is a tagout procedure used?

1910.147 (c) (2) (i)

___ 96. Does the employer have and utilize procedures for control of hazardous energy with specific requirements for securing machines, placement, transfer and removal of lockout devices, and testing locked machinery?

1910.147 (c) (4)

___ 97. Is lockout hardware provided by the employer; and is it durable, standardized, substantial and identifiable?

1910.147 (c) (5)

___ 98. Are all employees trained in the lockout/tagout program?

1910.147 (c) (7)

___ 99. Are periodic reviews conducted and documented to ensure compliance with the program?

1910.147 (c) (6)

Ergonomics

There is no OSHA standard for ergonomics; however the prevalence of musculoskeletal injuries, such as back injuries, indicate a real need for these issues to be addressed, especially in the healthcare environment where these injuries occur more often than in any other industry.

___ 100. Are ergonomic issues, such as proper lifting procedures, being addressed by the employer?

___ 101. Is there a resident handling program, including training on potential injuries and engineering, administrative or work practice controls?

___ 102. Is there a program administered to report ergonomic-related concerns?

___ 103. Are employees actively involved in evaluations of the workplace for ergonomic issues?

___ 104. Are trends evaluated and problem jobs identified?

Dietary

Using kitchen equipment in an unsafe manner may lead to injuries to workers. Employer policies regarding good work practices, engineering controls, as well as PPE, are effective means of reducing or eliminating these injuries.

___ 105. Are employees trained in the proper use of kitchen equipment?

___ 106. Are employees provided with and trained in the use of appropriate personal protective equipment while handling hot items or cutting food, for example?

1910.138 (a)

___ 107. Are stoves, grills and duct work kept clean of flammable residues and properly maintained?

1910.38 (b) (3) & (5)

___ 108. Are flammable items stored away from heat-producing equipment?

1910.38 (b) (3)

___ 109. Are machines, such as dough mixers, meat slicers and continuous-feed dishwashers properly

guarded?
1910.212 (a) (1)

_____ 110. Is electrical service near sources of water properly grounded?
1910.304 (f) (5) (v)

Tuberculosis

Throughout the nation, several employees have become infected, and have required treatment after workplace exposure to tuberculosis. Employers should implement strategies to protect their employees. Although there is currently no OSHA standard on tuberculosis, the primary reference for such policies are guidelines from the Center for Disease Control (CDC).

_____ 111. Has the employer implemented an effective control plan to minimize exposures to tuberculosis?

_____ 112. Does the employer allow for early screening of residents?

_____ 113. Is TB addressed in the employer's Exposure Control Plan?

_____ 114. Are employees trained on the tasks or procedures that may involve risk of exposure to TB?

_____ 115. Is adequate isolation provided for those patients with TB or suspected TB?

_____ 116. Are procedures in place for transfer of a TB patient if a facility cannot, or will not, provide treatment?

_____ 117. Are adequate labels and signs posted at the entrance to isolation rooms or where services are being provided to patients with TB or suspected TB?

_____ 118. Are proper housekeeping and venting procedures in place for cleaning TB-contaminated rooms?

_____ 119. Has a respiratory protection program been established and maintained?
1910.139 (a) (2)

Respiratory Protection

This standard requires employers to establish and maintain a respiratory protection program to protect employees in situations where there is a need to wear a respirator. Information on **general** use of respirators is contained in CFR 1910.134. **Respirator use for protection against exposure to tuberculosis will be governed by 1910.139 until OSHA finalizes its TB standard.**

_____ 120. Has the employer developed and implemented a written respiratory protection program to include required work-site specific procedures and elements for required respirator use to include the following items?

_____ a) Selection of approved respirators (i.e., TB - **HEPA** [High Efficiency Particulate] respirator certified by NIOSH under 30 CFR, Part 11 or any of the particulate respirators approved under 42 CFR, Part 84 [N95, N99, N100])

_____ b) Medical evaluations

_____ c) Fit testing procedures for tight-fitting respirators

_____ d) Procedures for proper use of respirators in routine and emergency situations

_____ e) Procedures and schedules for cleaning, disinfecting, storing, inspecting, repairing, discarding and otherwise maintaining respirators

- _____ f) Training of employees in the proper use of respirators, including putting on and removing them, and limitations on their use and their maintenance
- _____ g) Training in respiratory hazards to which they are potentially exposed during routine and emergency situations
- _____ h) Procedures for regularly evaluating the effectiveness of the program
1910.134 (c) (1) (i) - (ix)
1910.139 (a), (b)

- _____ 121. Does the employer provide at no cost to the employee, respirators, training and medical evaluations?
1910.134 (c) (4)
1910.139 (a) (2), (b) (3), (b) (10)

- _____ 122. Has the employer designated a suitably trained person to administer the respiratory program?
1910.134 (c) (3)

- _____ 123. Prior to fit testing or requiring the employee to use the respirator, does the employer provide medical evaluations for employees using a medical questionnaire as provided in 1910.134 Appendix C?
1910.134 (e) (2) (ii)

- _____ 124. Does the employer provide follow-up medical examinations for employees who give a positive response to any question among questions 1 - 8 in the Medical Questionnaire as printed in 1910.134?
1910.134 (e) (3) (i)

- _____ 125. Does the employer obtain from the physician or other licensed health care professional (PLHCP) a written recommendation regarding the employee's ability to use a respirator?
1910.134 (e) (6) (i)

- _____ 126. Does the employer provide fit testing for employees prior to requiring them to use a respirator and require them to pass this test prior to use?
1910.134 (f) (2)
1910.139 (e) (5) (i)

- _____ 127. Is the fit test administered using an OSHA-accepted Qualitative Fit Test (QLFT) or Quantitative Fit Test (QNFT) protocol?
1910.134 (f) (5) (note: Accepted protocols are found in Appendix A of 1910.134)

- _____ 128. Are additional fit tests provided when the employee, employer, PLHCP, supervisor or program administrator make visual observations of changes in the employee's physical condition that could affect respirator fit?
1910.134 (f) (3)
1910.139 (e) (5) (i)

- _____ 129. Are respirators stored to protect them from damage, contamination, dust, sunlight, extreme temperature, excessive moisture and damaging chemicals, without deformation of the facepiece and exhalation valve?
1910.134 (h) (2) (i)
1910.139 (f) (1) (iv)

130. Does the employer provide respiratory training to employees that at least includes the following items:
- ___ a) Why the respirator is necessary, and how improper fit, usage or maintenance can effect use
 - ___ b) What the limitations and capabilities of the respirator are
 - ___ c) How to use the respirator effectively in emergency situations including malfunctions
 - ___ d) How to inspect, put on and remove, use and check the seals of the respirator
 - ___ e) What the procedures are for maintenance and storage of the respirator
 - ___ f) How to recognize medical signs and symptoms that may limit or prevent the effective use of respirators
 - ___ g) The general requirements of section (k) "Training and Information" of 1910.134 (k) (l) TB - 1910.139 (b) (3)
- ___ 131. Is the training provided prior to the employee using the respirator?
1910.134 (k)
- ___ 132. Is retraining provided at least annually?
1910.134 (k) (5)
- ___ 133. Does the employer conduct evaluations of the work place to determine the effectiveness of the respirator program to include consulting employees to ensure they are using the respirators effectively?
1910.134 (l) (1) and (2)
- ___ 134. Does the employer maintain records regarding medical evaluations, fit testing and the respirator program?
1910.134 (m)

Utility/Housekeeping

Cleanliness of the workplace, especially in the healthcare environment, is crucial. Employers should have policies in place to provide clean and sanitary workplaces for their employees and the people whom they serve.

- ___ 135. Has an appropriate written schedule for cleaning and decontamination been implemented?
- ___ 136. Has a determination been made as to the use of **appropriate** disinfectants?
OSHA Directive CPL 2-2.44D, paragraph (d) (4) (ii)

Workplace Violence

Although there is no workplace violence standard, it is a critical workplace safety issue. Nearly 1,000 workers are murdered, and 1.5 million are assaulted in the workplace each year. The **highest** number of nonfatal assaults, primarily by patients/residents/clients on caregiving staff, occur in the healthcare and social service sectors. An effective violence prevention program may help to reduce the potential for incidents of violence in the workplace.

- ___ 137. Has a written violence prevention program been established and maintained?

- ___ 138. Are management and employees working together to reduce/eliminate workplace violence?
- ___ 139. Has a worksite analysis been done and potential hazards identified and addressed?
- ___ 140. Has staff been trained to identify and deal with potential/actual incidents of workplace violence?
- ___ 141. Is post-incident response and programs of support for workers provided within the program?
- ___ 142. Have adequate evaluation and recordkeeping practices for the program been implemented?