



**A SAFETY MODULE:
ALL ABOUT OSHA**



...Developing top-notch caregivers, one in service at a time.



A Safety Module:
ALL ABOUT OSHA

We hope you enjoy this inservice, prepared by registered nurses especially for caregivers like you!

Instructions for the Learner

If you are studying the inservice on your own, please do the following:

- Read through **all** the material. You may find it useful to have a highlighting marker nearby as you read. Highlight any information that is new to you or that you feel is especially important.
- If you have questions about anything you read, please ask your supervisor.
- Take the quiz. Think about each statement and pick the best answer.
- Check with your supervisor for the right answers. You need **8 correct** to pass!
- Print your name, write in the date, and then sign your name.
- Email In the Know at feedback@knowingmore.com with your comments and/or suggestions for improving this inservice.

THANK YOU!

After finishing this inservice, you will be able to:

Explain the importance of OSHA in the healthcare workplace.



Describe OSHA's Safe Patient Handling Standards and explain why they are so important.



Apply OSHA's Bloodborne Pathogen Standards at all times, with every patient.



Discuss every healthcare workers' rights and responsibilities in keeping safe from falls and chemical hazards.



Practice safely by following all OSHA Standards in your daily work.

THINK
SAFETY
FIRST

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A DARK AND DANGEROUS PLACE . . .

The year is 1920, it's the turn of the century in America. The Industrial Revolution has changed the way everything works. There are more *businesses* and more *jobs*. People have more *money* than they have ever had before—which makes *demand* for products and services skyrocket!

Factories, construction, mining, and healthcare all boom. Big businesses become even bigger. Large corporations make a lot of money. You can actually hear the "Fat Cats" chuckling all the way to the bank.

Sadly, there isn't much laughter amongst the workers in those businesses.

- Working conditions are difficult and terribly unsafe. In the 25 years leading up to 1960, **nearly 400,000 Americans were killed** by work-related accidents and disease, and close to **50 million more suffered disabling injuries on the job**.
- During the 1960s, occupational injuries and illnesses increased by 20 percent and 14,000 workers were dying on the job *each year*.

The American workplace was a dark and dangerous situation that needed a superhero!

OSHA, which has been lovingly called the "**Bureaucratic Caped Crusader**" was created in response to public outcry against rising injury and death rates on the job. And like the fictional Caped Crusader (Batman), **OSHA does not really possess any superpowers**. OSHA makes use of intellect, detective skills, science, and technology to improve conditions for American workers!

Keep reading to learn about all the ways OSHA makes your working conditions safer!

As you read, keep in mind that this inservice is intended to be an *overview* of topics related to OSHA. Look for our full inservices on Standard Precautions, Performing Safe Transfers, Chemical Hazards in the Workplace and Violence in the Workplace for more detailed information.



A BRIEF HISTORY OF OSHA

OSHA, The Occupational Safety and Health Act was signed into law on December 29, 1970 by President Richard M. Nixon. However, the drive to make American workplaces safer did not begin with OSHA. In fact, it started about one hundred years earlier.

- Massachusetts passed the nation's first safety and health laws in 1877.
- By 1890, nine states had factory inspectors, 13 required machine guarding, and 21 had some protection against certain health hazards.
- The Department of Labor was established in 1913 by President William Howard Taft.
- In 1934, Frances Perkins, the new Secretary of Labor would help assure that workplaces would be "as safe as science and law can make them," by creating the Bureau of Labor Standards. This was the first federal agency created to promote safety and health for working men and women.

Despite the efforts of these early crusaders, there was still debate between government, business, and the workers' unions. Businesses didn't want to be told what to do by the government. But the unions argued that without government intervention, businesses could not be trusted to keep workers safe from harm.

In the end, the workers won and the new Federal Agency known as OSHA was formed.

FACT: The first five industries targeted by OSHA for safety hazards were cargo ships, roofing and sheet metal work, the meat industry, transportation, and lumber manufacturers. Five health hazards were also targeted: asbestos, lead, silica, carbon monoxide, and cotton dust.

It wasn't until the 1990s that OSHA began to deal with the emerging healthcare-related issue of infectious disease.

- Although there were some standards that applied to the healthcare setting, it was the Bloodborne Pathogens standard that had the greatest influence on the safety and health of workers in the healthcare industry.
- On November 6, 2000, President Clinton signed the Needlestick Safety and Prevention Act which mandated that OSHA revise its Bloodborne Pathogens standard to include requirements protecting workers from needlestick injuries.
- Today, OSHA protects you from infectious diseases, musculoskeletal injuries, chemical hazards, and much more in your healthcare work environment!



The Facts

"Every day in America, 13 people go to work and never come home.

Every year in America, nearly 4 million people suffer a workplace injury from which some may never recover.

These are preventable tragedies that disable our workers, devastate our families, and damage our economy. American workers are not looking for a handout or a free lunch. They are looking for a good day's pay for a hard day's work. They just want to go to work, provide for their families, and get home in one piece."

– Secretary of Labor Hilda Solis, April 26, 2012

"In 1970, 38 workers were killed on the job every day in America; now it's 13 a day. This is a great improvement, but it's still 13 too many."

– OSHA Assistant Secretary of Labor, David Michaels, April 27, 2012



WHAT EXCITES YOU?

A NO-LIFT PIONEER!

In 1988, a nurse in Australia named Elizabeth Langford, was injured while moving a patient and became unable to work. She was devastated by the lack of support she received by her employer and was told by the insurance companies that she needed to look for other work.

Instead, she got busy developing the "No Lift" method of direct patient care.

The "No Lift" method has been accepted worldwide and is now used in around 70 percent of hospitals and long term care facilities in the United States.

In the US, employers decide whether or not to enforce a "No Lift" policy. However, in 2005, Texas became the first state in the US to make it a law. Since then at least eleven other states have also made the "No Lift" policy a requirement for healthcare employers.

OSHA'S ROLE IN SAFE PATIENT HANDLING

WHY DOES OSHA CARE ABOUT SAFE PATIENT HANDLING?

- According to the Bureau of Labor Statistics, nearly 80 percent of all injuries to nursing assistants are the result of lifting, pulling, pushing, holding, carrying, and turning clients.
- Every single day in the United States, 9000 healthcare workers sustain a disabling injury while performing work-related tasks.

WHAT ARE THE GUIDELINES?

OSHA requires all healthcare employers to protect workers from musculoskeletal injuries by identifying problems and developing solutions for resident lifting and repositioning. Please note: solutions will be different based on the workplace (client homes or facility) and on client conditions and needs.

In addition, OSHA recommends **minimizing manual lifting** of patients in all cases and **eliminating lifting when possible**. Your workplace may have a "No Lift Policy" in place.

YOUR RIGHTS

- You have a right to have **access to proper assistive devices** and equipment needed to reduce excessive lifting hazards for all clients based on the specific needs of the facility, clients, and staff.
- You have the right to be **properly trained** on all lift equipment and transfer procedures recommended for every client for whom you provide care.

YOUR RESPONSIBILITIES

- It is your responsibility to know if your workplace enforces a "No Lift Policy" and, if so, it is your responsibility to follow the guidelines in that policy.
- If a "No Lift Policy" is *not* in place, always make use of assistive devices like mechanical lifts, transfer belts, sliding boards, or draw sheets when appropriate.
- Never operate a lift or perform a transfer unless you have been properly trained to do so.
- If you hurt yourself while moving or lifting a client, let your supervisor know right away and follow up with your family physician.
- It is your responsibility to request special equipment or help as needed to minimize your risk of injury. For example, if your client is very large and immobile but no mechanical lift is available, you have a responsibility to report this need to your supervisor.
- If your employer does not provide reasonable accommodations or help to protect you from injuries, you have a responsibility to contact OSHA.

OSHA AND BLOODBORNE PATHOGENS

WHY DOES OSHA CARE ABOUT BLOODBORNE PATHOGENS?

- The CDC estimates that 5.6 million workers in the healthcare industry and related occupations are at risk of occupational exposure to bloodborne pathogens, including human immunodeficiency virus (HIV), hepatitis B, hepatitis C, and others.
- Of all OSHA standards, ***the Bloodborne Pathogens standard has had the greatest influence on the safety and health of healthcare workers.***

WHAT ARE THE GUIDELINES?

OSHA’s Bloodborne Pathogen Standard requires all employers to:

- Establish an infection control plan that includes ***Standard Precautions***.
- Provide ***personal protective equipment (PPE)*** such as gloves, gowns, eye protection, and masks.
- Require and provide bloodborne pathogens ***training*** and maintain records of that training.
- Offer ***hepatitis B vaccinations*** to all workers at risk for exposure.
- ***Monitor*** workers to ensure that proper precautions are being taken to reduce the possibility of exposure while handling and disposing of contaminated sharps, handling specimens, handling laundry, and cleaning contaminated surfaces and items.
- Confidentially ***evaluate and follow-up*** any worker who experiences an exposure incident.

YOUR RIGHTS

- You have the right to attend a training program that outlines your role in preventing exposure to bloodborne pathogens.
- You have the right to receive the ***hepatitis B vaccination*** free of charge. You may also refuse the vaccine or request it at a later date.
- You have the right to have ***easy access to PPE*** as needed. You may also request additional equipment. For instance if you are allergic to latex, your employer must provide latex-free gloves for you.
- You have the right to receive any ***treatment*** recommended by the U.S. Public Health Service for a work-related exposure, free of charge.

YOUR RESPONSIBILITIES

- It is your responsibility to follow Standard Precautions with all clients at all times, whether they seem sick or not.
- You are responsible for using appropriate personal protective equipment for all clients with isolations precautions.
- You must know and follow your workplace’s exposure control plan regarding clean-up of bodily fluid spills.



CONNECT IT!

WHAT IF YOU ARE EXPOSED?

Ask your supervisor for the written policy on what you should do if you are exposed to bodily fluids. Then, answer the following questions:

If I am stuck by a used needle, I should:

If I get bodily fluid splashed in my eyes, I will:

If I have an open wound, I will:



THE NEXT STEP!

What will you do if a client becomes aggressive?

Here are a few suggestions:

- Never tease or ignore an angry client.
- Keep yourself calm. If you get upset, the aggressive person may become more violent.
- Stand at least an arm's length away from an aggressive person.
- Avoid letting the person trap you in a corner or block your exit from the room.
- If you fear for your safety, leave the room and contact your supervisor.
- "Buddy up" to provide care to clients who are known to be aggressive.

How do you handle combative clients?

Share your experiences and ideas with your co-workers and ask them how they handle these situations.

OSHA AND WORKPLACE VIOLENCE

WHY DOES OSHA CARE ABOUT WORKPLACE VIOLENCE?

Healthcare workers fall victim to nearly half of all injuries caused by workplace violence. In fact, nursing assistants who work in long-term care facilities have the highest incidence of workplace violence of all American workers.

- Twenty-seven percent of all workplace violence happens in nursing homes.

WHAT ARE THE GUIDELINES?

OSHA currently has no specific standards for workplace violence. However, under OSHA, employers are required to provide their employees with a place of employment that **"is free from recognizable hazards that are likely to cause death or serious harm to employees."**

That means that any time an employer becomes aware of threats, intimidation, or other signs of potential violence in the workplace, the organization must act in a way that *minimizes* or *eliminates* the risk of harm to employees.

YOUR RIGHTS

- You have a right to a place of employment that is free from hazards that are known or likely to cause death or serious physical harm.
- You have a right to know about any potential security hazards and how to respond and protect yourself should a situation arise.

YOUR RESPONSIBILITIES

- You are responsible for **knowing your workplace policy** for handling a difficult individual. Ask your supervisor, TODAY, for your workplace policy on dealing with a difficult or dangerous situation. If no policy is in place, volunteer to be on a committee to create one.

If you are in a situation where you feel threatened by a client, co-worker, family member or stranger while you are working, you should remain calm, trust your instincts, and follow these three important steps:

1. **Quickly and calmly, end the interaction without making the situation worse.** You can do this by telling the person you will not accept abusive treatment. If the behavior continues, ask the person to leave—or leave yourself.
2. **Get help.** Send for security or call 911. Just remember, if you have threatened to call the police or security, you *must* follow through.
3. **File an incident report.** If it is not documented, it didn't happen. Don't allow abusive clients or co-workers to get away with threatening or abusing you.

OSHA'S VIEW ON SLIPS, TRIPS & FALLS

WHY DOES OSHA MAKE THESE GUIDELINES?

- It's your job to keep clients safe from slips, trips, and falls, but it's OSHA's job to keep **you** safe! The most recent study shows that healthcare workers slip, trip, or fall 90 percent more than all other industries combined. Slips, trips, and falls are the second most common cause of lost-workday injuries in hospitals.

WHAT ARE THE GUIDELINES?

- Keep all floors clean and dry. Particular attention should be paid to bathrooms, kitchens, and doors where rain, snow, or ice could be tracked in.
- Provide warning signs for wet floor areas.
- Where wet activities occur, facilities must maintain drainage and provide false floors, platforms, mats, or other dry standing places or provide appropriate waterproof footwear.
- Keep aisles and passageways clear and in good repair, (even those areas where no clients or visitors ever enter) with no obstruction across or in aisles that could create a hazard.
- Employers must have adequate power outlets so cords do not run across pathways.
- All exits must be free from obstruction at all times.



YOUR RIGHTS

- If you slip, trip, or fall at work and suffer an injury, you have the right to be examined by a doctor of your choice and, if the injury keeps you from working, you can file workers compensation (WC) claim.
 - **Please note:** In most states, unless gross negligence is involved on the part of your employer, you will not be able to sue your employer for more money than what the WC pays.

YOUR RESPONSIBILITIES

- Most slips, trips, and falls in the workplace are **dual responsibility**. That means that while your employer is responsible to a degree, you are also responsible for making safe choices while you work. For example:
 - If you see a spill, clean it immediately or report it to the proper team (depending on the type of spill) so that it can be cleaned right away.
 - Use a step ladder to reach items. Never stand on chairs, tables, or boxes as substitutes for ladders.
 - Use the handrail on stairs to slow yourself down—even if you're in a hurry!



TIME TO LAUGH!

A Fall Hazard . . .

An OSHA Inspector enters a workplace and sees a sign reading "Danger! Beware of the Dog." He then sees an old hound dog lying asleep on the floor.

"Is that the dog the sign is warning about?" asks the Inspector. "

Yes," replies the foreman. "Before I put the sign up, everyone kept tripping over him."

In Case Of Accident . . .

A man went to a factory in his home town to fill out a job application. While working on the application, he became confused about how to answer: "Person to notify in case of accident."

He paused for a moment, then wrote, "Anyone in sight."



THE NEXT STEP!

LEARN ABOUT THE PRODUCTS YOU USE REGULARLY

If you work in a facility, locate the SDS of a cleaning product you use on a regular basis.

If you work in home health, go online to search for it. For example, go to google.com and type "Lysol Toilet Bowl Cleaner SDS" in the search box.

- Using the SDS, find out what you need to do to keep yourself safe while using the product.
- Is it dangerous to mix this product with other chemicals? If so, which ones?
- Can this product cause harmful effects? If so, what?
- Did you learn anything that surprised you about the product?

OSHA CARES ABOUT CHEMICAL HAZARDS

WHY DOES OSHA MAKE THESE GUIDELINES?

- There is a widespread myth among healthcare workers that exposure to hazardous chemicals is just "no big deal." But, a recent study looked at healthcare-related hazardous chemicals found in the bodies of doctors and nurses. Each participant studied had **at least 24 healthcare-related hazardous chemicals** in their bodies, all of which are associated with chronic illness and physical disorders.

WHAT ARE THE GUIDELINES?

- OSHA requires each employer to develop a written Hazard Communication Program. This program includes all the policies and procedures about every possible chemical hazard in your workplace.
- Each employer must have a list of all the chemicals used in the workplace and there must be a Safety Data Sheet (SDS) for each chemical.
- All containers in the workplace must be labeled with the correct safety information, including the name of the chemical, any hazard warnings, and the name of the manufacturer.
- Every employee must be trained about chemical hazards *before* handling any chemicals in the workplace.

YOUR RIGHTS

- You have the right to know location of the Safety Data Sheets for your workplace and any appropriate emergency information regarding chemical exposures.
- You have a right to receive training on the safe handling of all chemicals you may come in contact with on the job.

YOUR RESPONSIBILITIES

- Know how to find and read an SDS and how to understand the information on a chemical label. Learn about chemicals before you start working with them.
- Ask questions if you don't understand any part of your chemical hazard training or you want to know more about a particular chemical.
- Use protective equipment, such as gloves and a mask whenever required by the SDS or the label of a particular product.
- Always follow your workplace policies for handling, cleaning up and disposing of chemicals.



WHAT WILL YOU DO IF YOU ARE INJURED ON THE JOB?

If you are hurt while transferring a client . . .

File a report with your employer and keep a copy for yourself. Recording and reporting every incident that results in back pain is important information for two reasons:

1. You will need it in case you need to file for workers' compensation or disability.
2. It can lead to an investigation that helps create a safer way to do things for *everyone*.

See a doctor. If you have signs of any injury, schedule a visit with your doctor immediately! Treatment will depend on what's wrong and what's causing the pain.

Be sure to tell your doctor all about your job. Explain the tasks that you must do on your job. Make sure the doctor knows:

- How long you have been working as a nursing assistant.
- The kind of lifting, bending and twisting you do every day.
- How much weight you are lifting every day.
- Which job tasks cause pain and discomfort.
- What kinds of body movement cause pain.
- Some states require that you see the company doctor first. If so, go see your own doctor as well.

Follow your doctor's orders! If the doctor puts you on "light duty," it may mean:

- No heavy lifting (above 25 pounds).
- No sitting for long periods of time.

Light duty tasks can include passing ice, manicuring nails, doing simple office tasks, and feeding residents.



If you are exposed to bodily fluids . . .

If you are stuck by a used needle, splashed in the face with a bodily fluid, or if a client's bodily fluid comes in contact with an open wound in your skin, follow these steps:

1. Wash the affected area right away. If it's a needle stick or other skin exposure, wash the affected area with soap and water. If the eyes or other mucous membrane are exposed, flush with clean, clear water.
2. Contact your supervisor to report the incident.
3. File a report. Be sure to include the **route** of exposure, the **source** of the bodily fluid (usually a client).
4. Give permission to have your blood tested for Hepatitis B and HIV status. (The client will also be tested unless a positive status is already known).

If your blood tests come back negative, you will be advised to follow up for additional testing in the future to confirm that your status remains negative.

- You may be offered prophylactic medication to ward off any germs . . . just in case!

If your blood test comes back positive, you will be advised on how to proceed with treatment by your doctor.

KEEP IN MIND . . .

It's much easier to *prevent* an accidental exposure to a bloodborne pathogen than it is to treat one! Do your part to prevent exposures by:

- Staying focused on what you are doing. Don't let yourself go on "autopilot" because this is when accidents happen.
- Getting enough sleep. Being tired can lead to careless behavior.
- Asking for help when you need it.
- Avoiding doing too many things at once.
- Never taking shortcuts when it comes to using gowns, gloves and masks when needed.

WHAT WILL YOU DO IF YOU ARE INJURED ON THE JOB?

If you slip, trip, or fall . . .

A slip, trip, or fall may not lead to any injury at all, or it can cause a mild injury, such as bruising, sprains, or strains. But slips, trips, and falls can also be serious, causing broken bones, spine injuries, concussions, traumatic brain injury or even death.

If you are not hurt or not seriously hurt, report the incident to your supervisor and document exactly what happened. It's important to report and document all slips, trips, and falls—even if you feel you are not seriously hurt because:

- Signs of concussion can be delayed or unnoticeable at first.
- There can be a delay in symptoms of pain with back and neck injuries.

Be sure to pay close attention to your body in the days following a slip, trip, or fall. Report any new symptoms of pain, stiffness, numbness, headache, or dizziness and seek immediate treatment.

If you are seriously injured, seek emergency treatment right away. This may include calling for your supervisor, a nurse, a doctor or 911.



If you are exposed to a dangerous chemical . . .

Get emergency help immediately if you are having trouble breathing or are severely burned.

- First aid for a chemical exposure depends on the chemical and how the exposure happened. The SDS spells out the kind of first aid required for each product. Here are some examples of first aid for chemical exposures:

Inhalation (Breathing in a chemical):

- Get some fresh air.
- Go to the hospital and get oxygen.

Ingestion (Swallowing):

- Drink water or milk.
- Induce vomiting.
- Call poison control for instructions.

Skin Contact:

- Wash your skin with soap and water.
- Seek treatment for burns.

NOTE: Make sure you know how to get first aid if you need it—*before* an accidental exposure happens.

“WATCH YOUR STEP” IN CLIENTS’ HOMES

1. Visually scan porches and floors before taking a single step. If it appears unsafe (uneven, rotting wood, obvious holes), look for another way (side or back door) to get to the client.
2. Remove any throw rugs that slide when you walk on them. This can be dangerous for you and your client!
3. Always use handrails when walking up and down stairs.
4. Keep your shoes on while you work. If you have a client who prefers you remove your shoes, keep clean, non-skid shoe covers with you and cover your shoes while in the home.

CHEMICAL HAZARDS IN HOME HEALTH

If you use **normal household chemicals** in your client's home (like you would in your own home), then your employer does not need to have an SDS for that product. However, you still need to follow warnings labels and directions regarding the use of gloves and diluting concentrated chemicals.

- Ventilate closed or small spaces, like the bathroom, before you begin cleaning with a product that contains bleach or ammonia.
- Never use a food-related container to store cleaning supplies.
- If you must place a cleaning product into a separate container, be sure to clearly label the container with a permanent marker.



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EMPLOYEE NAME
(Please print):

DATE: _____

- *I understand the information presented in this inservice.*
- *I have completed this inservice and answered at least eight of the test questions correctly.*

EMPLOYEE SIGNATURE:

SUPERVISOR SIGNATURE:

Inservice Credit:

<input type="checkbox"/> Self Study	1 hour
<input type="checkbox"/> Group Study	1 hour

File completed test in employee's personnel file.

Are you "In the Know" about OSHA? Circle the best choice or fill in your answer. Then check your answers with your supervisor!

- The main role of OSHA in the healthcare workplace is to protect:**
 - A. Patients from abuse.
 - B. Workers from injury and illness.
 - C. Doctors from being sued.
 - D. Businesses from bankruptcy.
- The _____ Standard has had the greatest influence on the safety and health of workers in the healthcare industry.**
 - A. Bloodborne Pathogens.
 - B. Slips, Trips & Falls.
 - C. Safe Patient Handling.
 - D. Right to Know Chemical Hazards.
- The last pack of XXL incontinence briefs you need is out of your reach on the top shelf. There is no step ladder in the room. You should:**
 - A. Lock the wheels on the wheelchair and then stand on it.
 - B. Use the shelf as a ladder, but only if it's anchored to the wall.
 - C. Toss another object at the pack to get it to fall off the top shelf.
 - D. Look elsewhere for a step ladder or request help from someone taller.
- If you are injured on the job by a slip, trip, or fall and are unable to work, you have a right to:**
 - A. Sue your employer.
 - B. Get paid time off.
 - C. Be promoted to management.
 - D. File a Workers' Compensation claim.
- True or False**
If you want to know if a cleaning product is safe to use without gloves, you should check the product's SDS.
- True or False**
OSHA currently has no specific standards for workplace violence.
- True or False**
You don't have to report being accidentally stuck by a used needle as long as you know the person it was used on is healthy.
- True or False**
Health care was one of the first industries targeted by OSHA in the 1970s.
- True or False**
OSHA recommends eliminating manual lifting of patients when possible.
- True or False**
OSHA is a huge federal agency with more than 10,000 inspectors.

