

## Reminder: OSHA rules apply to rehab facilities

*For safety's sake, don't overlook OSHA guidelines*

With so much focus on CMS, the Health Insurance Portability and Accountability Act of 1996, and national and local association standards, rehab facilities sometimes forget about a set of guidelines that affect any public business: the Occupational Safety & Health Administration (OSHA). A lot of people in the rehab world say that OSHA issues don't pertain to rehab, but they don't realize that OSHA guidelines cover all kinds of safety issues, says **Dena Frost**, provider services manager for PTPN, a national network of independent rehab providers headquartered in Calabasas, CA.

"OSHA compliance isn't the end-all, be-all for rehab providers, and you probably won't be surveyed, but it helps protect your employees from injuries and illness and your facility from penalties if an accident does occur," says Frost, who helps ensure that any rehab providers that are a part of the PTPN network are OSHA compliant.

### The OSHA checklist

When visiting rehab facilities, Frost says she checks out the following nine areas to ensure that the facility is OSHA compliant:

- ★ Hazardous communication program
- ★ Bloodborne pathogens plan
- ★ Injury and illness program
- ★ Emergency action and fire prevention plan
- ★ Hepatitis B vaccinations
- ★ Medical and first aid procedures
- ★ Documented self audits
- ★ OSHA annual program evaluation
- ★ Documented OSHA inservices

Each area varies in its significance and procedures for complying, but Frost says the amount of time to get each program in order is minimal compared to problems that not complying can cause.

### Toxic mistakes

The most common mistake rehab providers make is believing that they don't have any chemicals on the premises, Frost says. But chemicals aren't just chemotherapy drugs or other materials normally thought of

as dangerous. OSHA considers essentially any liquid or powder that is not food a hazardous chemical, including common materials such as Windex, bleach, and ultrasound gel, she says. To comply with OSHA regulations, employers must take inventory of every chemical in the facility and place a material safety data sheet (MSDS) on all hazardous chemicals. The MSDS lists all of the relevant information about the product. Facilities can obtain MSDS labels from just about any company that manufactures chemicals or from OSHA. Employers must also train staff how to properly use, handle, and dispose of each material.

### The pathogen to success

Frost says most facilities she visits are successful in incorporating a bloodborne pathogen plan, although many still feel that it's not much of an issue in rehab because therapists don't use needles or make incisions. However, blood can present itself in several ways, especially since many therapy patients are coming off of surgery or may have other wounds, Frost says. OSHA requires all employees to go through yearly bloodborne pathogen training to learn about biohazard containers, handling materials contaminated with blood, and reporting any blood exposure.

Frost says about 75% of the facilities she visits have solid bloodborne pathogen policies in place, but adds that it's not enough because this is one area in which OSHA offers little leeway for noncompliance.

### Staying healthy

The most important aspect of incorporating an injury and illness program at your facility is documenting any cases that take place on the job.

You're also required to have a person in charge of the program and to identify any areas that are risks. Many facilities have programs of some type, but don't follow through, Frost says. "You can't just have a policy that says 'wash your hands after treating a patient,' you must also say what happens when someone doesn't."

The facility should also train employees on all > p. 8

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**OSHA**

&lt; p. 7

risks and on how to use safety devices (e.g., eye-wash stations).

**Only you can prevent office fires**

An emergency action and fire prevention plan must include procedures for evacuating patients, route maps to exit doors, fire extinguishers, and proper signage, Frost says. Ask the fire department to visit your facility to take care of most of these action items. Keep in mind that having a fire extinguisher is not enough. It should be calibrated and stamped annually by a professional—usually a fire inspector—and a staff member should look at it monthly to ensure that it hasn't been discharged.

**The vaccine of compliance**

OSHA now enforces a regulation that requires anyone working in patient care to be offered a Hepatitis B vaccination within the first 10 days of employment. If you haven't presented the chance to be vaccinated to any of your employees, do it now, says Frost. Employees have the right to refuse the vaccination, but they must sign a declaration of refusal. This also applies to employees who have received the vaccination in the past—they don't need another one, but they must sign the declaration of refusal.

**The best comply with the rest**

The final four elements that Frost checks up on during an OSHA review are medical and first aid procedures, documented self audits, an OSHA annual program evaluation, and OSHA inservices.

These elements are all fairly simple and flexible, but that doesn't mean that they should be forgotten, Frost says. OSHA wants facilities to have procedures for calling 911 and for performing cardiopulmonary resuscitation (CPR). You don't need to have someone who is CPR-certified on staff, but you do need a breathing mask on hand, Frost says. The documented self audit requires that you have a list of all the OSHA requirements and check off that you comply with each (see the list on p. 9 for a sample list).

OSHA's annual program evaluation requires facilities

to look at their OSHA policies and evaluate anything that needs to be revised or documented as an accident in the past year. There might not be changes every year, but it's possible that you will need to alter a fire route because of construction, for example.

The final element that OSHA requires is an annual safety inservice to educate employees on OSHA. You must document this meeting and have employees sign in. The only requirement is that bloodborne pathogens be covered, but the rest of the meeting could be on any OSHA issues that you or your employees have (e.g., how to exit the building quickly or how to handle an unsafe hydrocollator). ■

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