

CENTER OF SPECIAL CARE
POLICY AND PROCEDURES

TITLE: Hazard Communication Program	EFFECTIVE/REVISED DATE: 12/7/20
LAST REVIEWED WITHOUT CHANGES DATE: 12/7/2020	
RESPONSIBLE DEPARTMENT/COMMITTEE: FACILITIES MANGEMENT	
APPROVED BY: VP FACILITIES AND HOSPITALITY SERVICES, VP QUALITY, PATIENT SAFETY OFFICER	
CITATION/REFERENCE: N/A	
REPLACES/PREVIOUS TITLE:	

PURPOSE:

To establish a program, policy and procedures for Hospital *for Special Care* to obtain information about hazardous chemicals and materials found in the workplace and to communicate and make that information readily available to employees. Employees will be informed of the potential or real hazards of all chemicals used in the workplace and in their specific job function in accord with the provisions set forth in this program. This program will adhere to the requirements of 29CFR 1910.1200, OSHA Hazard Communication Standard (also known as Employee Right-to-Know), which requires employers to inform their employees about chemicals found in their workplace and provide training and education about proper handling of these chemicals.

POLICY:

It shall be the policy of Hospital *for Special Care* to manage all hazardous chemicals and materials in a manner that adheres to OSHA standards and the Hospital *for Special Care* hazardous materials and waste management program. The program strives to provide a safe working environment and to minimize and reduce the potential risk of injury or illness to employees, patients, and visitors. The hazard communication program includes: 1) compiling and maintaining a chemical inventory, 2) having available the corresponding Safety Data Sheets (SDS) for all items in the inventory, 3) the existence of proper container labeling and warning information, 4) information, education and training.

RESPONSIBILITIES:

Administration

The Administration of Hospital *for Special Care* accepts the responsibility for the hazard communication program's leadership, program effectiveness and continuous program review and improvement.

Vice President Materials Management, Facilities and Support Services and the Environmental Safety Director/ Corporate Groundskeeper

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The Environmental Safety Director/Corporate Groundskeeper in collaboration with the Vice President Materials Management, Facilities and Support Services oversees, monitors, and evaluates the program to assure overall compliance. They are responsible to ensure a central written inventory of all hazardous chemicals / materials is maintained, the corresponding SDS are available, and are available to provide guidance and assistance in complying with the requirements of the Hospital *for Special Care* and OSHA hazard communication program.

Department Heads/Managers/Supervisors

Department Heads, managers, and supervisors are responsible to perform a pre-purchase evaluation of a product to ensure that the least hazardous material is being used. They ensure that the purchased hazardous chemical / material is appropriately identified and inventoried for inclusion in the centralized chemical inventory and SDS database maintained by the Facilities Management Department. They develop, provide and document department specific education and training consistent with the Right-to-Know Law on hazardous chemicals / materials use and handling in accord with manufacturer's label requirements prior to initial exposure and then provide re-education on an as needed basis or annually thereafter. They must provide or make accessible Personal Protective Equipment (PPE) required when handling a hazardous or potentially hazardous chemical / material and ensure the individual use of appropriate PPE. They develop and enforce policies and procedures regarding the safe storage, use, handling, transportation and disposal of hazardous chemicals / materials, and proper spill response and cleanup in accord with manufacturers' label and SDS information. They respond to employee requests for information about hazardous substances and accept responsibility for the actions of employees within their area.

Employees

It is the responsibility of all employees to become familiar with and comprehend the Hazard Communication Program, related policies and procedures, and know where and how to access SDS for chemicals / materials that may be used within the workplace. Employees must attend required training, use appropriate PPE provided as required, and inform their immediate supervisor or manager when PPE is not available or needs to be replaced. Employees are responsible to promptly report spills, exposures, unsafe work practices, misuse, improper handling or disposal to their supervisor, to the manager responsible for safety, or a member of the Employee Health & Safety or Environment of Care Committees.

Vice President Materials Management, Facilities and Support Services and Vice President of Quality / Patient Safety Officer

The Vice President Materials Management, Facilities and Support Services and the Vice President of Quality / Patient Safety Officer are vested with the responsibility to direct, monitor and evaluate the overall hazard communication program; to ensure compliance with the OSHA hazard communication standard; and to help identify problem areas. They are appointed by the President to implement and coordinate an effective, comprehensive, facility wide hazard communication program, with specific duties that include hazard surveillance and assessment, development of policies and procedures, implementation of training programs and technical

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support, and program assessment and improvement. The Vice President Materials Management, Facilities and Support Services and the Vice President of Quality / Patient Safety Officer are empowered by the President to intervene whenever circumstances exist that result in an unsafe condition.

The Vice President Materials Management, Facilities and Support Services, the Vice President of Quality/Patient Safety Officer and Risk Management are available to assist in developing, reviewing and enforcing the components of this program.

Environment of Care Committee

The EOC Committee is a multidisciplinary team with representation from administration, clinical and support service areas. The EOC Committee is chaired by the Environmental Safety Director/Corporate Groundskeeper who has the authority to intervene whenever conditions exist that pose an immediate threat to life, health or the environment.

The committee will analyze, plan, implement and evaluate the environment of care plans, assuring they remain an integral part of all ongoing activities within Hospital for Special Care. The EOC Committee is also responsible for the following:

1. Acting in an advisory capacity based on applicable federal, state and local regulations on the handling, use, and disposal of and the development of rules, practices, policies and procedures related to hazard communication and hazardous materials and waste management;
2. Maintaining written minutes of the EOC Committee meetings;
3. Reporting all pertinent committee and subcommittee findings and recommendations to appropriate administrative and area representatives;
4. Maintaining a reporting system for the investigation and evaluation of incidents reported and for the documentation of corrective actions taken;
5. Conducting inspections for the purpose of discovering and correcting unsafe conditions or practices in relation to the misuse, improper handling or disposal of hazardous materials and wastes;
6. Establishing that local, state, and federal laws and ordinances on handling and disposal of hazardous materials and waste regulations are complied with;
7. Advising and overseeing the development and implementation of hazardous materials and waste management policies and plans;

Employee Health and Safety Committee

The Employee Health and Safety Committee is a multidisciplinary team with representation from administration, clinical and support service areas. The Safety Committee is chaired by the Environmental Safety Director/Corporate Groundskeeper who has the authority to intervene whenever conditions exist that pose an immediate threat to life, health or the environment.

Reporting / Function:

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Issues are presented to the Employee Health and Safety Committee, the EOC Committee, and the Infection Prevention and Control Department. Issues that are presented at committee meetings have been identified through several venues, such as, but not limited to, unit based staff, Infection Prevention and Control, Facilities Management and Employee Health. Reporting and investigation of all hazardous materials or waste spills or exposures or other incidents which involve patients, visitors, personnel or property is provided through the Incident Reporting procedure done by Security, and the Employee Incident report completed by the Employee Health Department. If incident reports, performance improvement monitors, or supervisor observation indicate a situation that creates a real or potential risk to patients, visitors, staff and/or the environment, the appropriate Department Manager and Risk Management will be notified so appropriate corrective action can be taken immediately. If a monitor indicates an unusual or inconsistent condition, reports will be submitted as necessary to the EOC Committee, Infection Prevention and Control Committee, Employee Health and Safety Committee or other groups as appropriate.

Safety and EOC reports are submitted to other committees or departments as needed.

PROGRAM COMPONENTS:

The Hospital *for Special Care* Hazard Communication Program includes the following elements, per OSHA standard 29 CFR 1910.1200, in order to address and maintain a program that assures: 1) hazard determination and product selection, 2) container labeling, 3) chemical inventory and Safety Data Sheets (SDS), 4) education and training.

1. Hazard Determination and Product Selection:

The Hospital for Special Care does not determine the hazard properties of a material but will refer to the manufacturer and the manufacturer's labeling and SDS to determine if a substance is considered as hazardous under the OSHA Hazard Communication Standard. Department heads and supervisors will evaluate a material prior to purchase to determine if a less hazardous material is available for use and, where practical and when warranted, will utilize the least hazardous material available. Materials purchased for use will be based on the needs of the facility or an individual department, the hazards of the material, and department manager or other appropriate management or supervisory level approval.

2. Container Labeling:

Manufacturer Containers: All materials purchased and received by Hospital for Special Care will be labeled with the manufacturers or distributors original labeling present and intact and will accurately reflect the identity of the contents within the container and the appropriate hazard warning. Materials not properly labeled will not be received and will be returned to the manufacturer or distributor. Materials will be stored in the manufacturers or distributors original container and will be transferred to a secondary or end use container in accord with the secondary container labeling requirements as defined in OSHA 29 CFR 1910.1200.

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Secondary Containers: All materials that are transferred from the manufacturers or distributors original container into a secondary or end use container will be appropriately labelled and will accurately reflect the identity of the contents of that container unless the product will be used immediately. Containers used as an immediate transfer device are exempt from this labeling requirement.

Where possible and if necessary, every effort will be made to obtain secondary or end use containers from the manufacturer or supplier with the correct product labeling already present. The individual transferring the material into the secondary or end use container is responsible to ensure the container is properly labeled. The use of secondary containers for the storage of a material is discouraged and will occur only when absolutely necessary.

Portable Containers and Tanks: Portable containers of a liquid, gas or solid will be properly identified and marked with the appropriate hazard warning. Open surface tanks will be identified with the appropriate signage.

3. Chemical Inventory & Safety Data Sheets (SDS):

Chemical Inventory: A facility wide chemical inventory is maintained and annually reviewed by the Facilities Management Department. Individual departments are responsible to inform Facilities Management when a new product is introduced so it can be added to the facility-wide inventory. Individual departments may also maintain a separate department specific inventory.

Safety Data Sheets: SDS are supplied by the manufacturer, distributor and or supplier of a material. It is the responsibility of the department head, manager, or supervisor to request and obtain a SDS for any new product available for use within the facility and to provide the original SDS or a copy of the original SDS to the Facilities Management Department for entry into the electronic SDS database available on computer for all staff to review at any time. SDS are maintained for a minimum period of 30 years after discontinuation of use of a product.

Contractors are responsible to provide SDS and any other information as requested for chemicals they use at or bring onto Hospital *for Special Care* property.

4. Education and Training:

All new employees are provided with facility wide education during New Hire Orientation.

Department heads, managers and supervisors are responsible to provide new employees with department specific education about the chemicals within their work area prior to the initial use of or exposure to a chemical by the employee. This training includes the name and type of chemicals within their specific work area, the location of and how to access SDS for all chemicals within the facility, Personal Protective Equipment (PPE) required for each chemical as described on the label and the proper use and availability of PPE.

Employees will be trained when a new chemical is introduced for use in the workplace or when an employee is given a task involving unfamiliar chemicals. Employees who are regularly exposed to or use chemicals as a part of their work assignment will receive annual refresher

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training. Employees will be retrained when new PPE is introduced to the workplace or when incidents or supervisor observation indicate a need for retraining. Documentation of any training provided will be maintained by the department head, manager or supervisor.

Contractors and vendors will be informed about chemicals and hazardous materials used at Hospital *for Special Care* prior to beginning a project in an area where these materials are used or stored. The Director of Engineering Plant Operations will provide and maintain documentation of such training.

ANNUAL EVALUATION:

The Hazard Communication Program will be reviewed as a part of the annual review of the Hazardous Materials and Waste Management Program. Recommended changes, improvements, and education initiatives are based on the annual review and are submitted to the EOC Committee for approval.

ATTACHMENTS:

- Attachment A: OSHA Quick Card, Hazard Communication Safety Data Sheets
- Attachment B: OSHA Quick Card, Hazard Communication Standard Pictogram
- Attachment C: OSHA Quick Card, Hazard Communication Standard Labels

ATTACHMENT A



Hazard Communication Safety Data Sheets

The Hazard Communication Standard (HCS) requires chemical manufacturers, distributors, or importers to provide Safety Data Sheets (SDSs) (formerly known as Material Safety Data Sheets or MSDSs) to communicate the hazards of hazardous chemical products. As of June 1, 2015, the HCS will require new SDSs to be in a uniform format, and include the section numbers, the headings, and associated information under the headings below:

Section 1, Identification includes product identifier; manufacturer or distributor name, address, phone number; emergency phone number; recommended use; restrictions on use.

Section 2, Hazard(s) identification includes all hazards regarding the chemical; required label elements.

Section 3, Composition/information on ingredients includes information on chemical ingredients; trade secret claims.

Section 4, First-aid measures includes important symptoms/effects, acute, delayed; required treatment.

Section 5, Fire-fighting measures lists suitable extinguishing techniques, equipment; chemical hazards from fire.

Section 6, Accidental release measures lists emergency procedures; protective equipment; proper methods of containment and cleanup.

Section 7, Handling and storage lists precautions for safe handling and storage, including incompatibilities.

Section 8, Exposure controls/personal protection lists OSHA's Permissible Exposure Limits (PELs); ACGIH Threshold Limit Values (TLVs); and any other exposure limit used or recommended by the chemical manufacturer, importer, or employer preparing the SDS where available as well as appropriate engineering controls; personal protective equipment (PPE).

Section 9, Physical and chemical properties lists the chemical's characteristics.

Section 10, Stability and reactivity lists chemical stability and possibility of hazardous reactions.

Section 11, Toxicological information includes routes of exposure; related symptoms, acute and chronic effects; numerical measures of toxicity.

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Section 12, Ecological information*

Section 13, Disposal considerations*

Section 14, Transport information*

Section 15, Regulatory information*

Section 16, Other information, includes the date of preparation or last revision.

*Note: Since other Agencies regulate this information, OSHA will not be enforcing Sections 12 through 15 (29 CFR 1910.1200(g)(2)).

Employers must ensure that SDSs are readily accessible to employees.

See Appendix D of 1910.1200 for a detailed description of SDS contents.

For more information:



U.S. Department of Labor



www.osha.gov (800) 321-OSHA (6742)
OSHA 3493-12R 2013










ATTACHMENT B



Hazard Communication Standard Pictogram

As of June 1, 2015, the Hazard Communication Standard (HCS) will require pictograms on labels to alert users of the chemical hazards to which they may be exposed. Each pictogram consists of a symbol on a white background framed within a red border and represents a distinct hazard(s). The pictogram on the label is determined by the chemical hazard classification.

HCS Pictograms and Hazards

<p>Health Hazard</p>  <ul style="list-style-type: none"> • Carcinogen • Mutagenicity • Reproductive Toxicity • Respiratory Sensitizer • Target Organ Toxicity • Aspiration Toxicity 	<p>Flame</p>  <ul style="list-style-type: none"> • Flammables • Pyrophorics • Self-Heating • Emits Flammable Gas • Self-Reactives • Organic Peroxides 	<p>Exclamation Mark</p>  <ul style="list-style-type: none"> • Irritant (skin and eye) • Skin Sensitizer • Acute Toxicity (harmful) • Narcotic Effects • Respiratory Tract Irritant • Hazardous to Ozone Layer (Non-Mandatory)
<p>Gas Cylinder</p>  <ul style="list-style-type: none"> • Gases Under Pressure 	<p>Corrosion</p>  <ul style="list-style-type: none"> • Skin Corrosion/ Burns • Eye Damage • Corrosive to Metals 	<p>Exploding Bomb</p>  <ul style="list-style-type: none"> • Explosives • Self-Reactives • Organic Peroxides
<p>Flame Over Circle</p>  <ul style="list-style-type: none"> • Oxidizers 	<p>Environment (Non-Mandatory)</p>  <ul style="list-style-type: none"> • Aquatic Toxicity 	<p>Skull and Crossbones</p>  <ul style="list-style-type: none"> • Acute Toxicity (fatal or toxic)

For more information:

Occupational Safety and Health Administration
 U.S. Department of Labor
www.osha.gov (800) 321-OSHA (6742)

OSHA 3491-02 2012

ATTACHMENT C



Hazard Communication Standard Labels

OSHA has updated the requirements for labeling of hazardous chemicals under its Hazard Communication Standard (HCS). As of June 1, 2015, all labels will be required to have pictograms, a signal word, hazard and precautionary statements, the product identifier, and supplier identification. A sample revised HCS label, identifying the required label elements, is shown on the right. Supplemental information can also be provided on the label as needed.

For more information:
Occupational Safety and Health Administration
 (800) 321-OSHA (6742)
 www.osha.gov

SAMPLE LABEL

<p>CODE _____</p> <p>Product Name _____</p> <p>Company Name _____</p> <p>Street Address _____</p> <p>City _____ State _____</p> <p>Postal Code _____ Country _____</p> <p>Emergency Phone Number _____</p>	<p>Product Identifier</p> <p>Supplier Identification</p>
<p>Keep container tightly closed. Store in a cool, well-ventilated place that is locked.</p> <p>Keep away from heat/sparks/open flame. No smoking.</p> <p>Only use non-sparking tools.</p> <p>Use explosion proof electrical equipment.</p> <p>Take precautionary measures against static discharge.</p> <p>Ground and bond container and receiving equipment.</p> <p>Do not breathe vapors.</p> <p>Wear protective gloves.</p> <p>Do not eat, drink or smoke when using this product.</p> <p>Wash hands thoroughly after handling.</p> <p>Dispose of in accordance with local, regional, national, international regulations as specified.</p> <p>In Case of Fire: use dry chemical (BC) or Carbon Dioxide (CO₂) fire extinguisher to extinguish.</p> <p>First Aid</p> <p>If exposed call Poison Center.</p> <p>If on skin (or hair): Take off immediately any contaminated clothing. Rinse skin with water.</p>	<p>Hazard Pictograms</p> <p>Signal Word</p> <p>Danger</p> <p>Hazard Statements</p> <p>Highly flammable liquid and vapor. May cause liver and kidney damage.</p> <p>Precautionary Statements</p> <p>Supplemental Information</p> <p>Directions for Use _____</p> <p>Fill weight: _____ Lot Number: _____</p> <p>Gross weight: _____ Fill Date: _____</p> <p>Expiration Date: _____</p>

OSHA 3492-02 2012