June 2015

OSHA SAFETY TRAINING NEWSLETTER

Vol. 22/No. 6

OSHA announces Susan Harwood training grants

OSHA recently accepted applications for 2015 targeted-topic training grants and capacity-building training grants under the Susan Harwood Training Grant Program. A total of $3.5 million is available for nonprofit organizations, including community and faith-based organizations, employer associations, labor unions, joint labor/management associations, tribal organizations, and colleges and universities.

The grants fund the creation of in-person, hands-on training and educational programs and the development of materials for workers and employers in small businesses; industries with high injury, illness, and fatality rates; and vulnerable workers who are underserved, have limited English proficiency, or are temporary workers. The grants will fund training and education for workers and employers to help them identify and prevent workplace safety and health hazards.

"These grants provide such a valuable service to American workers because they're providing essential training to the vulnerable workers in small businesses and high-risk industries that need it most," said U.S. Secretary of Labor Thomas E. Perez. "Susan Harwood program grants fund great programs with a truly noble goal, which is to make sure that every worker gets home safe and healthy at the end of the day."

Targeted-topic

The targeted-topic training grants support quality training programs and educational materials that focus on identifying and preventing workplace hazards. Applicants must address the occupational safety and health hazards designated by OSHA in the grant announcement. Grants may be eligible for one additional follow-on grant, based on satisfactory performance. This announcement also makes available funds for targeted-topic training and educational materials that focus on developing quality training materials.

Capacity-building

Two types of capacity-building grants are available: capacity-building pilot and capacity-building developmental grants. Capacity-building pilot grants are intended to assist organizations in assessing their needs and formulating a capacity-building plan before launching a full-scale safety and health education program.

Capacity-building developmental grants focus on improving and expanding an organization's capacity to provide safety and health training, education, and related assistance to target audiences.

Capacity-building developmental grant recipients may be eligible for up to three additional 12-month follow-on grants, based on satisfactory performance.

More information

OSHA accepted applications for the grants through June 2, 2015. Details about the grants were announced in the April 15, 2015, *Federal Register*. The grantees will be announced later this year.

IN THIS ISSUE

EPA extends deadline for lead RRP recertification

In January 2015, EPA published a proposed rule that would amend the Lead Renovation, Repair, and Painting rule (Lead RRP) to eliminate the requirement that renovator refresher training have a hands-on component.

However, many renovators may not be able to take advantage of the changes, including possible financial savings, because their certifications will expire before the rule is finalized. To address these concerns, EPA finalized a rule to extend the certifications of thousands of individual renovators.

With the extension, renovators who received certification on or before March 31, 2010, now have until March 31, 2016, to get recertified. Renovators who received certification between April 1, 2010, and March 31, 2011, will have one year added to their five-year certification. Subsequent certifications for renovators receiving the extension will be five years. These extensions only apply to renovators that fall under EPA's renovation program and not to renovators under authorized state programs.

The rule, "Lead-based Paint Programs; Extension of Renovator Certifications," was published in the April 16, 2015, *Federal Register.* It's available on our website at: www. JJKeller.com/cmsc.

Staffing company fails to provide training

Left unguarded, dangerous machines with moving parts cause hundreds of thousands of workers to suffer finger, hand, or foot amputations and other serious injuries each year. Despite these dangers, one Chicago-based manufacturer has repeatedly ignored the risks and has been found in violation of safety and health standards four times in the last five years.

The company was inspected again in September 2014 by OSHA investigators and cited for five alleged repeated and 16 alleged serious safety and health violations, including electrical hazards and failing to train workers in forklift operations and machine hazards. The company faces proposed penalties of $294,300 and has been placed in OSHA's Severe Violator Enforcement Program.

Responding to a complaint, agency investigators saw workers endangered by machine hazards. While operating mechanical power presses, workers were exposed to unguarded foot pedals, point of operation hazards, and chains and sprockets. The company was cited for similar violations at this same facility in 2010 and 2012. The company also failed to store pallets of paint properly, provide training to workers on hazardous chemicals in the workplace, maintain fire extinguishers, inspect cranes periodically for safety issues, and provide welding screens and eye protection. Electrical safety hazards and lack of training were also noted. A total of 16 serious safety and health violations were issued.

OSHA has also cited a staffing company which provides temporary labor to the plant for failing to train workers on personal protective equipment needed for the job and the potential hazards of chemicals used in the facility. The company has a contract with the manufacturing company to provide training for any temporary workers it assigns to the plant. The staffing company was issued two serious safety violations with proposed penalties of $11,000.

The manufacturing company has been inspected by OSHA 24 times since 1975, resulting in the issuance of multiple safety and health violations.

DIRECTOR OF EDITORIAL RESOURCES: Paul V. Arnold

EDITOR: Judie Smithers

CONTRIBUTING EDITORS: Robert A. Ernst, Michael Henckel, Tricia S. Hodkiewicz, Peter McLaughlin, Lisa Neuberger, J. Travis Rhoden, Mark Stromme, Jennifer Stroschein

ISSN 1077-7008 GST R123-317687 (41045)

J. J. Keller & Associates, Inc.®
Since 1953

Printed on Recycled Paper (30% Post Consumer)

PRINTED WITH SOY INK

Quick Tips

Healthcare workers get updated violence prevention guidance

There were more than 23,000 significant injuries due to assault at work in 2013, according to the Bureau of Labor Statistics. More than 70 percent of these assaults were in healthcare and social service settings. Healthcare and social service workers are almost four times as likely to be injured as a result of violence than the average private sector worker.

To reduce the risk, OSHA released an update to its *Guidelines for Preventing Workplace Violence for Healthcare and Social Service Workers*. The publication includes industry best practices and highlights the most effective ways to reduce the risk of violence in various healthcare and social service settings.

In the section on safety and health training, it says: "Training topics may include management of assaultive behavior, professional/police assault-response training, or personal safety training on how to prevent and avoid assaults." And, "In general, training should cover the policies and procedures for a facility as well as de-escalation and self-defense techniques. Both de-escalation and self-defense training should include a hands-on component. The following provides a list of possible topics:

- The workplace violence prevention policy;
- Risk factors that cause or contribute to assaults;
- Policies and procedures for documenting patients' or clients' change in behavior;
- The location, operation, and coverage of safety devices such as alarm systems, along with the required maintenance schedules and procedures;
- Early recognition of escalating behavior or recognition of warning signs or situations that may lead to assaults;
- Ways to recognize, prevent, or diffuse volatile situations or aggressive behavior, manage anger, and appropriately use medications;
- Ways to deal with hostile people other than patients and clients, such as relatives and visitors;
- Proper use of safe rooms — areas where staff can find shelter from a violent incident;
- A standard response action plan for violent situations, including the availability of assistance, response to alarm systems, and communication procedures;
- Self-defense procedures where appropriate;
- Progressive behavior control methods and when and how to apply restraints properly and safely when necessary;
- Ways to protect oneself and coworkers, including use of the 'buddy system';
- Policies and procedures for reporting and recordkeeping; and
- Policies and procedures for obtaining medical care, trauma-informed care, counseling, workers' compensation, or legal assistance after a violent episode or injury."

The guidelines also stress the importance of developing a written workplace violence prevention program. The program should include management commitment and employee participation, worksite analysis, hazard prevention and control, safety and health training, and recordkeeping and program evaluation.

The revised guidelines — which update OSHA's 1996 and 2004 guidelines — are available at: www.JJKeller.com/wsc.

Q&A: What are OSHA's enforcement numbers for FY 2014?

The tally from federal OSHA is in:

- Number of inspections conducted in FY 2014 = 36,165
- Number of programmed inspections in FY 2014 = 19,198
- Number of complaint inspections in FY 2014 = 9,568
- Number of total violations in FY 2014 = 67,234
- Number of serious violations in FY 2014 = 48,951
- Number of repeat violations in FY 2014 = 2,922
- Number of willful violations in FY 2014 = 425
- The total penalty amount for all violations in FY 2014 as issued = $200,735,400
- The total penalty amount for all violations in FY 2014 as current amount = $139,636,940
- The total penalty amount for serious violations in FY 2014 as the current amount = $94,644,473

New communication system tested at mine rescue drills

Well-equipped and trained rescue teams along with effective communications can make the difference between life and death for miners who are trapped or injured.

Over the last five years, MSHA has worked with mine rescue teams and trainers, organized several mine rescue summits, staged mine emergency exercises, and held many meetings and discussions. These efforts have already led to significant advances in mine rescue:

- State of the art technology allows for direct communication between the advancing mine rescue teams and the command center, while back-up rescue teams standing-by at a fresh air base are kept in the loop with real time information. Previously, messages were passed from person to person and team to team, creating an inherent risk of miscommunication.
- New mapping technology allows the command center and other rescuers to watch the progress of the advancing rescue team in real time.
- New atmospheric monitoring technology features sensors that can be left at locations in the mine as rescuers move forward, or are forced to retreat. The monitors continue sending air quality information to the command center and providing reentering teams with better information on mine gases that are too often unknown.
- Upgraded MSHA command centers are designed to manage the new information streams and quickly relay critical information to others coordinating the mine emergency.

The new communications, tracking, mapping, and atmospheric monitoring systems were put to the test during an April 8, 2015, mine rescue simulation in southwestern Pennsylvania at the Harvey Mine, owned by Consol Energy Inc.

From early morning to late afternoon, MSHA's mine emergency unit and rescue team worked together with Consol Energy's eight rescue teams, the Pennsylvania Department of Deep Mine Safety, and the Pennsylvania Special Medical Response Team (SMRT) in a series of drills that featured injured miners and smoke-filled tunnels. Participants watched as rescuers were tracked on computer screens, allowing coordinators to help plot their next moves.

MSHA's goal is to equip all four MSHA mine emergency units with state of the art communications, tracking, and monitoring systems later this year.

Avoid take-home exposures

Do your workers know how to avoid bringing chemicals home from work? Chemicals can be brought home on workers' skin, hair, clothes, and shoes. This is called take-home exposure.

Let your employees know that, without taking precautions, these chemicals can get onto their floors and furniture, or into their cars, where family members or pets can be exposed. Some of these chemicals might be dangerous, especially for children.

The following are known hazards:

- A lot of different chemicals are accidentally brought home from work and can make family members sick. These include lead, pesticides, beryllium, and asbestos.
- Take-home exposures might be particularly dangerous to young children because children are small, spend lots of time on the floor, tend to put things in their mouths, and their bodies are still growing and developing.
- Lead is a chemical that is commonly brought into the home, and it can be very dangerous. Lead harms children's brains and can also be harmful to pregnant women because it can affect the unborn baby. People who work with lead include construction workers, painters, home renovators, and battery or electronics recyclers.

Prevention strategies

The best way to keep chemicals out of the home is to keep them from leaving work. Employees should:

- Wear protective clothing so that chemicals do not get on their street clothes.
- Change their clothes and shoes before leaving work.
- Keep their dirty work clothes and shoes separate from their clean clothes (for example, store them in sealed bags or separate lockers).
- Wash contaminants off. If the workplace has showers, encourage chemical workers to shower before leaving work. If not, they should wash their hands at the end of the shift.

If changing clothes and showering isn't an option, workers can take steps to reduce the amount of chemicals that enter the home:

- Take off work shoes in the garage or upon entering the home. Keep contaminants from spreading throughout the home.
- Change out of work clothes right away. Wash work clothes right away if possible.
- Wash work clothes as a separate load of laundry.
- Wash their hands or shower as soon as they get home.
- If other people in the household work, workers should ask them to help prevent take-home exposure from their work, too.

NIOSH recommends tobacco-free workplaces

If you inform workers about your company wellness program, you may be interested in a new NIOSH Current Intelligence Bulletin (CIB) that recommends all workplaces become tobacco-free and that employers make tobacco cessation programs available to workers. These latest recommendations also encompass the use of electronic nicotine delivery systems (ENDS) — or e-cigarettes.

Tobacco use enhances occupational hazards

Many workers and their employers do not fully understand that smoking in the workplace can increase — sometimes profoundly — the likelihood and/or the severity of occupational disease and injury caused by other hazards present. This can occur in various ways:

- A toxic industrial chemical present in the workplace can also be present in tobacco products and/or tobacco smoke, so workers who smoke or are exposed to second-hand smoke (SHS) are more highly exposed.
- Heat generated by smoking tobacco in the workplace can transform some workplace chemicals into more toxic chemicals, placing workers who smoke at greater risk of toxicity.
- Tobacco products can readily become contaminated by toxic workplace chemicals, through contact of the tobacco products with unwashed hands or contaminated surfaces and through deposition of airborne contaminants. Subsequent use of the contaminated tobacco products can facilitate entry of these toxic agents into the user's body.
- Often, a health effect can be independently caused by tobacco use and by workplace exposure to a toxic agent. For example, tobacco smoking can reduce a worker's lung function, leaving that worker more vulnerable to similar impairment caused by exposure to dusts, gases, or fumes.
- The combined impact of tobacco use and exposure to a toxic occupational agent can be synergistic. An example is the effect of tobacco smoking and asbestos exposure on lung cancer, which results in a profoundly increased risk among asbestos-exposed workers who smoke.
- The risk of occupational injuries and traumatic fatalities can be greatly enhanced when tobacco use is combined with an occupational hazard. Obvious examples are explosions and fires when materials are ignited by burning cigarettes. Another risk is distraction from machine or vehicle operation by opening, lighting, extinguishing, or disposing of a tobacco product.

Go tobacco-free

NIOSH urges all employers to embrace a goal that all their workplaces will ultimately be made and maintained tobacco-free. Initially, at a minimum, employers should:

- Establish their workplaces as smoke-free (encompassing all indoor areas without exceptions, areas immediately outside building entrances and air intakes, and all work vehicles);
- Ensure compliance with OSHA regulations that prohibit or otherwise restrict smoking, smoking materials, and/or use of other tobacco products in designated hazardous work areas; and
- Provide cessation support for their employees.

More information

NIOSH's CIB addresses the following aspects of tobacco use:

- Tobacco use among workers,
- Exposure to SHS in workplaces,
- Occupational health and safety concerns relating to tobacco use by workers,
- Existing occupational safety and health regulations and recommendations prohibiting or limiting tobacco use in the workplace,
- Hazards of worker exposure to SHS in the workplace, and
- Interventions aimed at eliminating or reducing these hazards.

Current Intelligence Bulletin 67: Promoting Health and Preventing Disease and Injury Through Workplace Tobacco Policies is available on our website at: www.JJKeller.com/wsc.

Training Blueprint

Be ready to use emergency eyewash/shower equipment

Emergency eyewash and shower equipment will only help reduce the extent of injuries if employees know how to use it properly.

Overview

Some OSHA standards specifically require emergency eyewash and shower equipment, but in many situations it's up to the employer to decide if the equipment is needed.

OSHA's standards don't go into much detail about emergency eyewash/shower installations, but many OSHA letters of interpretation state that the equipment should meet the specifications of ANSI 358.1 — *American National Standard for Emergency Eyewash and Shower Equipment*. This industry consensus standard was revised in 2014.

Specific training elements

1. Review how workers are exposed to chemical hazards in your facility.

Most jobs involving a risk for direct contact with harmful chemicals can be identified before there's an injury. If you work with chemicals, you need to know the risks involved, how to protect yourself, and how to get first aid and medical care.

To learn the risks, read Safety Data Sheets (SDSs) and container labels. Protecting yourself involves the use of engineering controls such as ventilation systems and material handling equipment. When there's still a risk for direct contact, wear personal protective equipment, including chemical splash goggles when handling liquid chemicals. Be sure to evaluate the hazards of non-routine jobs before the work starts so you have the right protection.

To get first aid after direct contact with a hazardous chemical, you'll need to know how to use emergency eyewash and shower equipment.

Trainer's note: *Discuss the jobs that expose workers to direct contact with injurious chemicals. Identify the chemicals and first aid procedures. Tell the trainees where the emergency eyewash and shower equipment is located.*

2. Outline when to use emergency eyewash and shower equipment.

If chemicals could splash into your eyes, be sure to keep a clear path to the nearest eyewash station while you work. It should take an injured person no longer then 10 seconds to reach the eyewash station.

Direct contact with many chemical products can harm your eyes and skin. The recommended first aid procedure is to flush your eyes and/or skin with plenty of clean water. First aid recommendations are found on the product's SDS. Learn about a chemical's first aid procedures before you use the chemical.

When you get a chemical in your eye or on your skin, you need to start first aid procedures right away.

3. Explain how to use an emergency eyewash station.

When a chemical splashes into your eyes, you'll feel immediate irritation and discomfort. Your eyes will squeeze shut and start to water — you won't be able to see clearly. Avoid rubbing your eyes. Try not to panic. You need to move to the nearest eyewash station and start flushing your eyes as soon as you can. This is why you've been keeping a clear path to the eyewash while you worked. If someone is in the immediate area, ask them to help you walk to the eyewash.

Poster Topic This Month

Start the eyewash, and place your eyes into the stream of water. You'll need to use your fingers to gently spread your eyelids apart and to hold your eyelids open — periodically lift your eyelids and roll your eyes so the water reaches the whole eye. Call for help.

Your face, arms, clothing, etc. will get wet. You'll feel very uncomfortable. But, keep flushing your eyes for at least 15 minutes. When someone is there to help you, ask them to check the clock.

Fifteen minutes is a very long time when you have water in your eyes and face. Remember, you are trying to prevent a serious injury. You'll need medical attention after you've flushed your eyes.

Trainer's note: *The best way to learn how to use an eyewash is to practice. Give each trainee a chance to know how it feels to use the eyewash.*

4. Indicate how to use an emergency shower.

Again, keep a clear path to the emergency shower. It should take the injured person no longer than 10 seconds to reach the emergency shower. Many designs have an eyewash that can be used along with the shower.

When your skin comes into direct contact with a chemical, you may or may not feel immediate irritation. Don't take chances — go to the emergency shower and start flushing your skin. The initial shock of the water will be very uncomfortable, but make sure to get all of the contaminated area into the water stream. Call for help. You need to flush your skin, not your clothes, so you'll have to remove any contaminated clothing. There might not be a shower curtain, but some corrosive chemicals can quickly cause serious burns — this isn't a good time to be modest. It's a good idea to keep some clean towels by the emergency shower so the injured worker can cover up after flushing the skin.

An emergency shower might not have a drain. The water will make a very large puddle, and you'll be tempted to stop the shower. But, you need to flush your skin for at least 15 minutes. The water can be cleaned up later. It's a good idea to keep absorbent pads near the emergency shower so a helper can try to dike the area and keep the water from spreading.

Get medical attention after you've flushed the chemical from your skin. Another good idea is to always keep a change of clothes in your locker or car.

Trainer's note: *Provide a demonstration of your emergency shower.*

5. Discuss how emergency eyewash equipment operates.

The ANSI standard sets minimum performance and use requirements for emergency eyewash and shower equipment. It contains specifications for the size of the shower head, diameter of the spray pattern, volume of water flow, and the distance of water nozzles from the floor.

When an eyewash unit is operated, the valves must remain open without the person having to hold them open. The water must wash both eyes at the same time. The velocity of the water flow has to be strong enough to flush the eyes, but it can't be too forceful that it could cause an injury. The ANSI standard sets a safe flow rate. The water flow must be strong enough to remove protective covers that help keep the nozzles clean — you won't have to remove the covers by hand. Self-contained units have to be able to provide flushing fluid for 15 minutes. The water temperature should be tepid.

You must be able to get to the eyewash unit within 10 seconds. You must have a clear path to the equipment. Where strong acids or caustics are used, the eyewash should be located away from the immediate chemical splash hazard, but within 10 seconds of travel. A highly visible sign should mark the location of the eyewash, and the area should be well lighted.

If the eyewash is connected through plumbing, it should be activated weekly to test its operation. All eyewash units must be inspected annually. It's important for you to know where the equipment is located and how to use it properly.

6. Provide additional information on emergency showers.

The ANSI standard says that you must be able to get to the emergency shower within 10 seconds. You must have a clear path to the equipment. The location should be identified with a highly visible sign, and the area should be well lighted. The flushing fluid temperature must be tepid.

Plumbed equipment must be activated weekly to test its operation. All shower units must be inspected annually. It's important for you to know where the equipment is located and how to use it properly.

Trainer's note: *Have a discussion with the trainees. Ask if any of them have ever had to use emergency eyewash/shower equipment and what they would do if a coworker needed help.*

Answers to Safety Selections quiz

1. False; 2. False; 3. True; 4. True; 5. False.

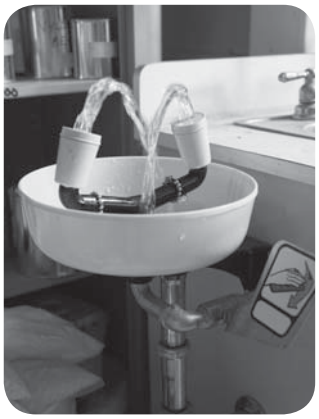
Safety Selections

The Safety Selections series can be used to conduct periodic safety meetings. The materials may be used by the safety director or other instructor as the basis for the safety discussion. J. J. Keller & Associates, Inc. grants permission to subscribers to reproduce the text of Safety Selections for internal use at one business location only provided that J. J. Keller's copyright notice remains visible on all copies. It can be reproduced and distributed to workers as a handy reminder.

Make a splash: Use the emergency eyewash/shower

Learn about a chemical's hazards before you use it. To prevent injuries, wear goggles and protective clothing when you work with chemicals.

Information on first aid is on the product's Safety Data Sheet. If you get a hazardous chemical in your eyes or on your skin, the recommended first aid procedure is to flush your eyes and/or skin with plenty of clean water.



Learn how to use emergency eyewash or shower equipment before you need to use it.

Use an eyewash

Keep a clear path to the nearest eyewash station while you use chemicals. You should be able to get to the eyewash station within 10 seconds.

It'll hurt when a chemical splashes into your eyes. Your eyes will squeeze shut and start to water — you won't be able to see clearly. Don't' rub your eyes, and don't panic. Remember, you have a clear path to the eyewash. Go to the eyewash and start flushing your eyes as soon as you can. If people are nearby, ask someone to help you.

Start the eyewash, and put your eyes into the water stream. You'll need to hold your eyes open with your fingers. Gently lift your eyelids and roll your eyes so the water reaches the whole eye. Call for help.

You'll get wet, and you'll be very uncomfortable. But, keep flushing your eyes for at least 15 minutes.

Fifteen minutes is a very long time when you have water in your eyes and face. Remember, you are trying to prevent a serious injury. You'll still need medical attention after you've flushed your eyes.

Use an emergency shower

Again, keep a clear path to the emergency shower. You should be able to reach it within 10 seconds. Many designs have an eyewash that can be used along with the shower.

When your skin comes into direct contact with the chemical, you may or may not feel immediate irritation. Don't take chances — go to the emergency shower and start flushing your skin. The initial shock of the water will be very uncomfortable, but get all of the contaminated area into the water. Call for help. Remove any contaminated clothing — even if there isn't a shower curtain. Act fast; some corrosive chemicals can quickly cause serious burns.

If the shower doesn't have a drain, there will be a very large puddle. Don't be tempted to stop the shower — the water can be cleaned up later. Keep flushing your skin for at least 15 minutes.

Get medical attention after you've flushed the chemical from your skin. It's a good idea is to always keep a change of clothes in your locker or car.

Quiz — Make a splash: Use the emergency eyewash/shower

For each question, show if you think the statement is True or False.

1. Don't use the emergency shower if the chemical doesn't burn right away.	True	False
2. Stop flushing if the floor gets too wet.	True	False
3. Goggles fit close to your face and protect you from chemical splashes.	True	False
4. Keep a clear path to the emergency shower as you work.	True	False
5. Keep your eyes shut tightly if the eyewash is uncomfortable.	True	False

Name: _____ **Date:** _____

(41045)