

OSHA Survey

- Purpose:** To observe and assess the Blood Borne Pathogen plan/program as defined by OSHA and the center.
- To observe and assess the Hazard Material plan/program as defined by OSHA and the center.
- To observe and assess the Sharps Safety plan/program as defined by OSHA and the center.
- To evaluate the education provided for staff annually for Blood Borne Pathogens, Hazardous Material handling, and sharp safety.
- To review evaluation documentation of sharp safety devices as performed by staff. (Must be staff not leadership)

Administrative

Action Item	Request for Information
1. Safety Plan	Be prepared to discuss the Safety Plan.
	Safety Plan should include but not be limited to the following items:
	a. Describe the Plan in -no more than a paragraph / Policy statement
	b. Describe purpose of plan
	c. Guidelines
	1. Responsibility : Who oversees the Plan ? (QAPI Committee) Who does the plan direct? Staff, leadership, medical staff, vendors, etc....
	2. Safety Officer responsibilities and Safety Officer’s responsibility to educate the staff
	3. Types of surveys to be conducted a. environment, b hazardous material, c equipment, d. sharps, e. personal protection equipment usage
	4. Reports: a. type of reports (environment, equipment, safety compliance (“PPE”) b. how often reports will be completed, c. who reviews the reports
	5. Organizational chart for safety
	6. Areas of data collection should include but is not limited to: a. Safety Management of

	Environment, b. Security, c. Hazardous Material handling, d. Hazardous Material Disposal, e. Emergency Preparedness (disaster, fire, cardiac arrest, malignant hyperthermia), f. Life Safety Equipment (maintenance, testing), g. Medical Equipment (biomedical), h. Utilities
	7. Establish outcome measures for all areas of the surveillance items. Examples: Cleanliness of the building, equipment checks for high risk equipment quarterly by biomed such as anesthesia machines, testing of the defibrillator every morning, security system, fire alarm system, medical gas system, sterilization equipment.
	8. Establish outcome measures of emergency supplies and equipment. Examples: emergency call system, panic button, cameras at doors and other areas of high risk, ambu bags, ventilators,
	9. Personnel preparation for emergencies. a. Fire Drill report card and training, b. Evacuation plan and quarterly testing of -bomb threat, other disasters that are common to your area (tornados, hurricanes, earthquakes, floods)
	10. Annual evaluation of sharp safety products process and expected outcome.
Policies and Procedures	Prepare a binder with all OSHA related Policies and Procedures
	1. Pull OSHA related policies and procedures from the center's policy and procedure manual(s) These policies include but are not limited to :
	➤ Blood Borne Pathogens
	➤ Hazardous Waste Handling and Disposal
	➤ Sharps Safety Plan and Policy
	➤ Hazmat issues: Blood Spills, Mercury Spills (although most of us do not have mercury filled equipment any more), chemical spills. Make sure policy tells where spill kits are located. Make sure staff can tell surveyor where kits are located. Identify the methods to be used to inform employees of the hazards of non-routine tasks.
	➤ List of all chemicals in the center, phone numbers for information in case of an emergency
	➤ Transportation of contaminated instruments and equipment to decontamination (make sure you have biohazard stickers for the transport carts, tables or whatever way you transport
	➤ Traffic Patterns for clean and dirty (contaminated) equipment, supplies, trash, etc...
	➤ Eye Wash Station as well as testing documentation; identification of person responsible for regular cleaning of eye wash station
	➤ Exposure control policy and procedure

	➤ Use of PPE and audits of use of PPE by staff and others working in the facility (physicians and anesthesia providers)
	➤ Policy on eating and drinking in the center (where you can and cannot eat and drink must be identified)
	➤ Sharps Safety Zone for the OR
	➤ Policies on other Safety Devices used in the center
	➤ Immunization Policy
	➤ Policy on respiratory protection program
	➤ Policy on how to handle sharp injuries (must include initial handling and follow-up)
	➤ Policies on chemicals used in the center
	➤ Sharps disposal policy (what you can use, recapping of needles, containers and when they are to be considered full and must be changed)
	➤ Immunization of Staff and other providers working in the center policy
	➤ Fire Drill policy (report card should be added to the policy)
	➤ Evacuation Plan for Fire with escape route assignments; procedure to account for all employees and patients
	➤ Disaster Plan for all potential disasters in area where the center is located
	➤ Policy on smoke evacuation from electrosurgical unit in OR
	➤ Policy on trace gas testing
	➤ Policy on Sharps Safety Evaluation (must describe process)
	➤ Policy on OSHA 300 form and posting of form in a conspicuous place for all employees to see from February 1 through April 30; entries must be made within 7 calendar days with any supplemental record constructed within 7 calendar days of the recordable case; forms must be retained for 5 years
	➤ PPE hazard assessment
Competencies	Annual and Ongoing Competencies proof in personnel file the following but not limited to the following was completed annually:
	➤ Sharp Safety
	➤ Use of PPE
	➤ Use of Equipment
	➤ Use of Chemicals /Hazmat

	➤ Proper transporting of biohazard trash and contaminated equipment and instruments
	➤ Safety Drills (Fire, Malignant Hyperthermia, Cardiac or Respiratory Arrest)
MSDS	Book is up to date
	Staff and Physicians must know where the MSDS book is kept
	Staff must be able to use book and pull out sheets on any item that the surveyor request to see
	Verify an MSDS sheet for every chemical within facility. Remove any MSDS sheets for which the product is no longer purchased or kept within facility.
Sharp Evaluations	Completed annually by staff (not leadership) Evaluation forms are kept to prove process was done
Education	To be done at least annually
	➤ Sharp Safety Program
	➤ Fire Safety including building evacuation
	➤ Biohazard Safety
	➤ Blood Borne Pathogens
	➤ Outside Training for Safety Officer
	➤ Hazmat Safety
	➤ Environmental Safety
	➤ Patient Safety
	➤ Employee Safety
Committee	The center can have a separate Safety Committee with meetings or Safety can be combined with QAPI Committee
	➤ Be sure Committee Organizational chart reflects safety
	➤ Be sure Committee Minutes discuss safety at least quarterly
	➤ Be sure MEC minutes discuss safety at least quarterly
	➤ Be sure Board Minutes discuss safety at least quarterly
	➤ Provide evidence that the physicians and Allied Health Staff credentialed have some sort of safety education annually. It can be in a one page newsletter or other media.

Survey	Have staffed prepared for a surprise survey and what to do when the surveyor walks in and identifies his or herself.
	Provide space for the surveyor to work and interview staff, physicians and leadership team
	Pull requested data and no more
	Be prepared to take surveyor on tour (they may or may not take pictures)
	Be prepared to pull personnel file on anyone the surveyor interviews
	Be prepared to pull credentialing files on anyone the surveyor interviews.
	Have Contract for Medical Waste disposal ready for the surveyor to see
	Ask clarifying questions to determine what surveyor is asking. . Do not guess.
	Be prepared to know more about your business than the surveyor. He or she may not be from a medical background.

Source: Genesee Associates, Dallas.