
Introduction to Long Term Care Inspections



Course Content

- **Ergonomics**
- **Slips, Trips and Falls**
- **Bloodborne Pathogens**
- **Tuberculosis**
- **Workplace Violence**
- **MRSA**
- **Hazard Communication**
- **Recordkeeping**
- **Tracking in OE**
- **OPN 132 Appendices**

Objectives

At the end of this training participants should be familiar with...

- The basic components and requirements of the OPN 132 SEP
- The common hazards CSHOs can encounter during LTC inspections
- The tools and guidance available to help assist CSHOs in LTC inspections

WorkSafeBC

Presentation Scope/Purpose

North Carolina Department of Labor
Occupational Safety and Health Division
Raleigh, North Carolina

North Carolina Department of Labor Occupational Safety and Health Division

Raleigh, North Carolina

Field Information System

Operational Procedure Notice 132H

Subject: Special Emphasis Program for Long Term Care Facilities.

A. Purpose and Scope.

This Operational Procedure Notice (OPN) describes the North Carolina Department of Labor (NCDOL) Occupational Safety and Health (OSH) Division – Special Emphasis

Strategic Management Plan for October 1, 2012 - September 30, 2013 and continued for the October 1, 2013 - September 30, 2018 Strategic Management Plan.

C. Background.

LTC facilities had one of the highest injury and illness rates among industries for which nationwide lost workday injury and illness (LWDII) rates were calculated for calendar year 2000 (CY 2000). According to data from the Bureau of Labor Statistics (BLS), the national average LWDII rate for private industry for CY 2000 was 3.0. LTC facilities experienced an average LWDII rate of 7.9, despite the availability of feasible controls that had been identified to address hazards within this industry. CY 2000 data from

OPN 132 Purpose

- Standardize Long Term Care (LTC) compliance inspections.



OPN 132 Purpose

- Reduce injury/illness rates in LTC industry

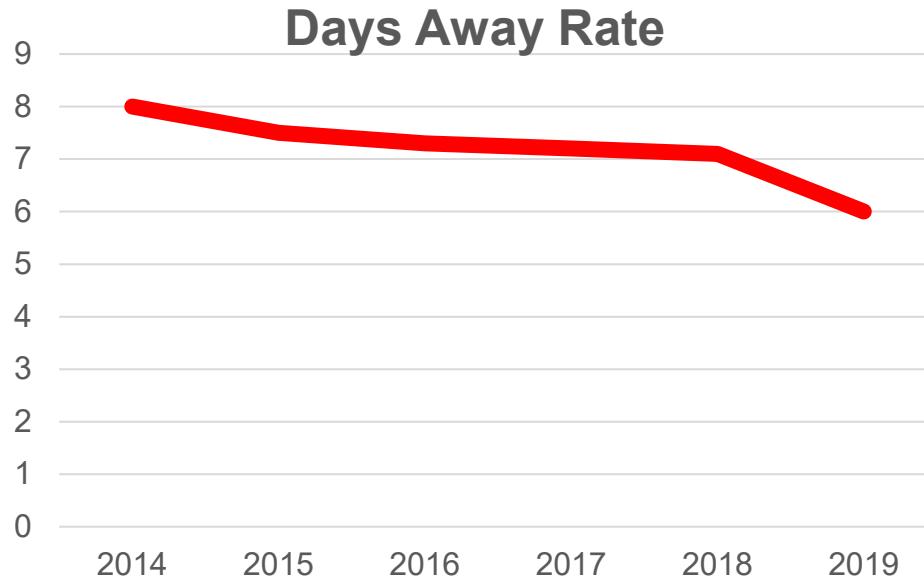


Chart for illustration only

OPN 132 Scope

NAICS Code	Description
623110	Nursing Care Facilities
623210	Residential Intellectual and Developmental Disability Facilities
623220	Residential Mental Health and Substance Abuse Facilities
623311	Continuing Care Retirement Communities
623312	Assisted Living Facilities for the Elderly
623990	Other Residential Care Facilities

Why a LTC SEP?

- DART rates ***at least double*** the rates for the US workforce
- North Carolina rates ***significantly higher*** than the NC average for ***all*** workers

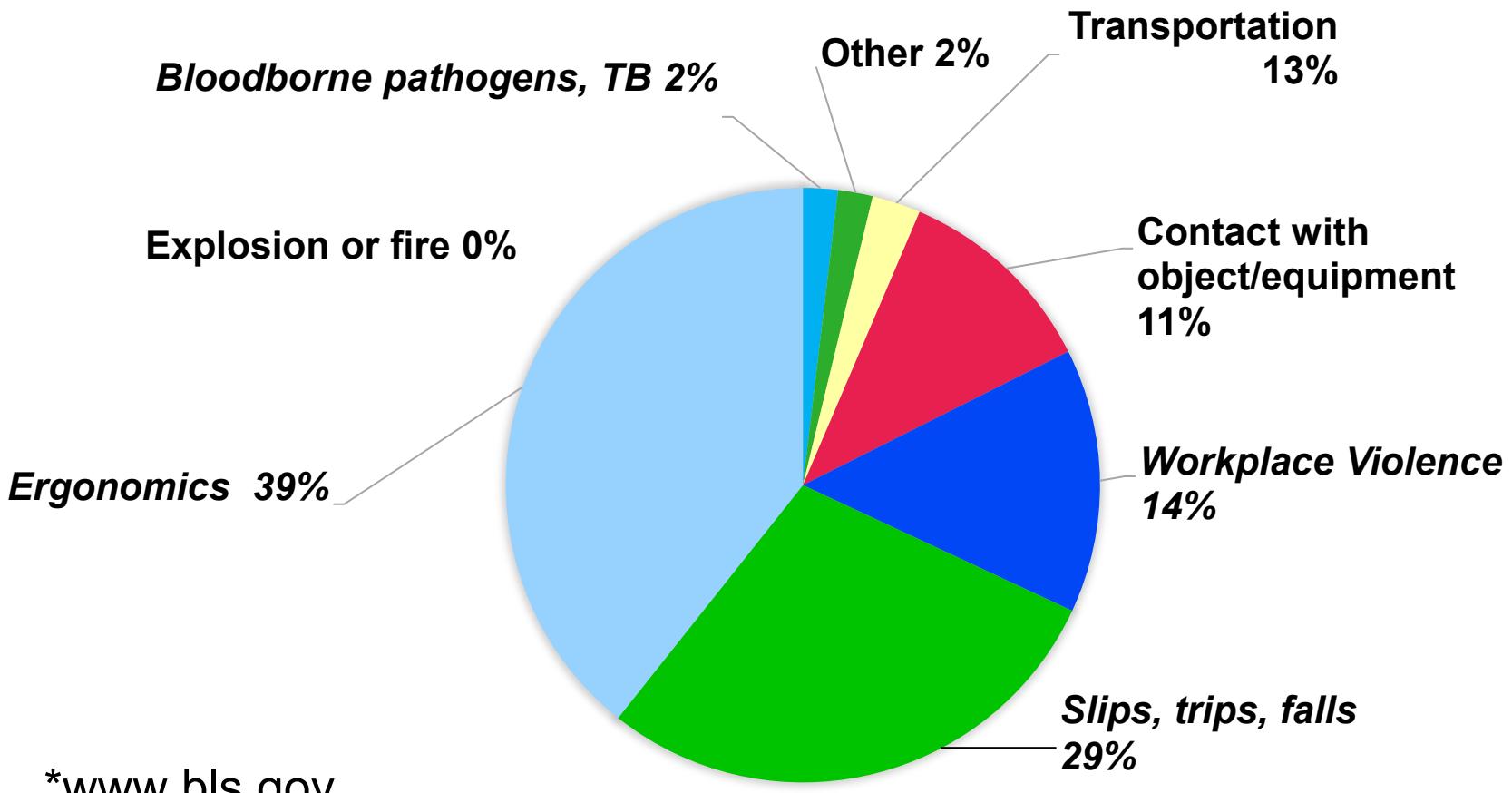
Why an LTC SEP?

NAICS 623 DART Rates

	2017	2016
National Average	3.8	3.9
North Carolina	3.7	3.3

LTC Injury/Illness Data

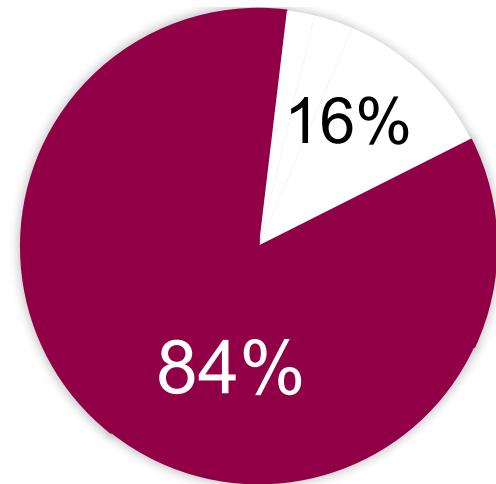
NON-FATAL INJURIES WITH DAYS AWAY FROM WORK AVERAGES 2011-2014



*www.bls.gov

LTC – Areas of Emphasis

- **Approximately 84% of injuries/illness from:**
 - Bloodborne Pathogens
 - Ergonomics
 - Slips, Trips, and Falls
 - Tuberculosis (TB)
 - Workplace Violence



Source: Annual Internal NCDOL Training Event
"OPN 132 , LTC Facilities" 09/12/16

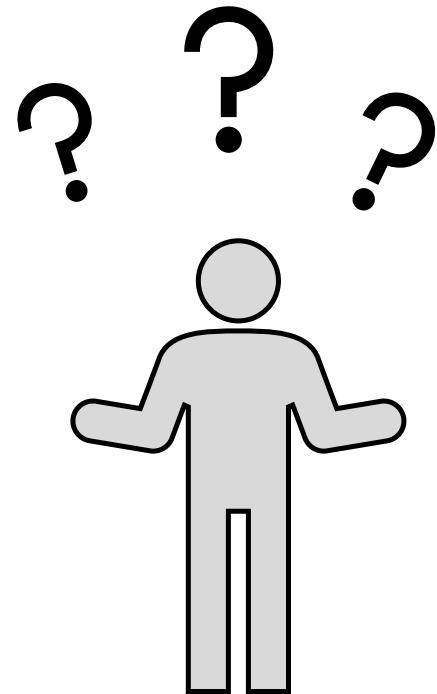
Priority Based LTC Assignments

- Accidents
- Complaints
- Referrals
- General Schedule



Pre-Inspection Preparation

- Check for site inspection exemptions/deferrals
- Are there...
 - Consultative Services Surveys?
 - Star Evaluations?
 - SHARP Evaluations?



[Microsoft Word Icons](#)

Inspection Exemptions

FOM Ch. III, D.3.h

- **Consultation Program Deferrals:**

- Consultation Program Surveys
 - » Full-Service
 - » Limited Service/Scope
- SHARP participant
- Carolina Star Program



[Photo by LinkedIn Sales Navigator on Unsplash](#)

NC Site Lookup or “Targeting”

Establishment Lookup Establishment Search Result:

UI:	CNTY:	Ownership:	STATUS:	Deferral Info:
Trade Name:	Phys. Addr :	Phone 1:	State_Zip1:	Insp Info:
UI Name:	UI Addr:	Phone 2:	State_Zip2:	
FID:	NAICS:	ORG Type:	SIC:	EMP Number:
Predecessor UI:	Successor UI:	Longitude/Latitude:	OSH Mod Yr:	
9431386-00000	MASTER	5	1	S:12/31/2020 H:12/31/2020
	1628 GARNER'S CHAPEL ROAD MOUNT OLIVE	919 -9219058	NC 28365	
BUTTERBALL LLC	PO BOX 589 PO BOX 589 MOUNT OLIVE		NC 283650589	
561458630	311615	P	2015	4210
9547112-00000	=	-077.9137 / 35.140234		

Note: Inspection older than 3 year will not be linked.

[Help](#)

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NC Site Lookup or “Targeting”

Establishment Lookup
Establishment Search Results

Establishment Name	Address	City	State	Zip	Phone
ABC Company	123 Main St	Charlotte	NC	28202	123-456-7890
XYZ Corporation	456 Elm St	Winston-Salem	NC	27101	987-654-3210
ABC Company	123 Main St	Charlotte	NC	28202	123-456-7890
XYZ Corporation	456 Elm St	Winston-Salem	NC	27101	987-654-3210

NC Company (ESC) Lookup

UI : 0059173-00004

Safety Inspection Information

Insp Number	Insp Date	Insp Type	Insp Scope
318170370	06/18/2019	Programmed Planned	Comprehensive

[Insp Info](#)

Compliance Inspection Procedures

- Normal compliance activities - **programmed inspections**
- For **complaints, referrals, or accidents** - follow this OPN for guidance and FOM Chapter IX – “Complaints, Referrals and Accidents”
- For **fatalities or catastrophes** – follow this OPN for guidance and FOM Chapter VIII – “Fatality and Catastrophe Investigations”

SEP Hazards and Related Concerns

- Proceed with the inspection by following steps related to the following hazard categories:

- Ergonomic Risk Factors
- Slips, Trips and Falls
- Bloodborne Pathogens
- Tuberculosis (TB)
- Workplace Violence



- Additional Concerns:

- MRSA
- Hazard Communication
- Recordkeeping
- Privacy
- Employee Medical Records



Ergonomics in LTC

**OPN 132 SEP
FOM Ch. XVII**

Ergonomics Injuries and Sources

- **Overexertion and bodily reaction: 39% of injuries with lost work time**

- Muscle strains
- Low back injuries
- Rotator cuff injuries
- Tendonitis



- **Handling, transferring and repositioning patients/residents**

- MSD rates for nursing assistants **4x** average for all

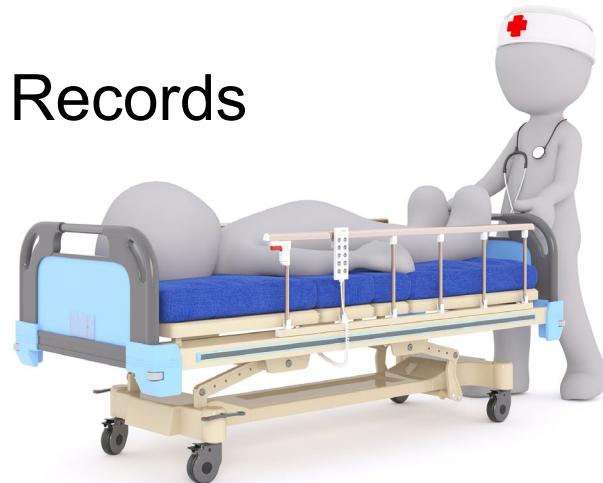
Source: Annual Internal NCDOL Training Event
“OPN 132 , LTC Facilities” 09/12/16

Are Ergo Hazards Present?

FOM Ch. XVII

- Determine the presence of hazards:

- OSHA 300 logs, NC-19's, OSHA 301's
- Incident Reports
- Ergonomics Program
- Ergonomics Training Media and Records
- Job Hazard Analyses or similar
- Ergo Record Review Checklist



[Image by Peggy und Marco Lachmann-Anke from Pixabay](#)

Patient Handling/Ergo Program

FOM Ch. XVII

- **Review Employers Ergo Program**
- **Look for:**
 - Hazard identification and analysis
 - Responsible and authorized personnel
 - Employee input regarding lifting procedures
 - Compliance to policies/procedures and deficiency follow-up
 - Policy/procedure change(s) and injury/illness effect
 - Medical treatment

Patient Handling/Ergo Program

FOM Ch. XVII

- **Also check for:**

- Management commitment
- Assessment of new lifting technologies/designs
- Employee education and training
- Program evaluation

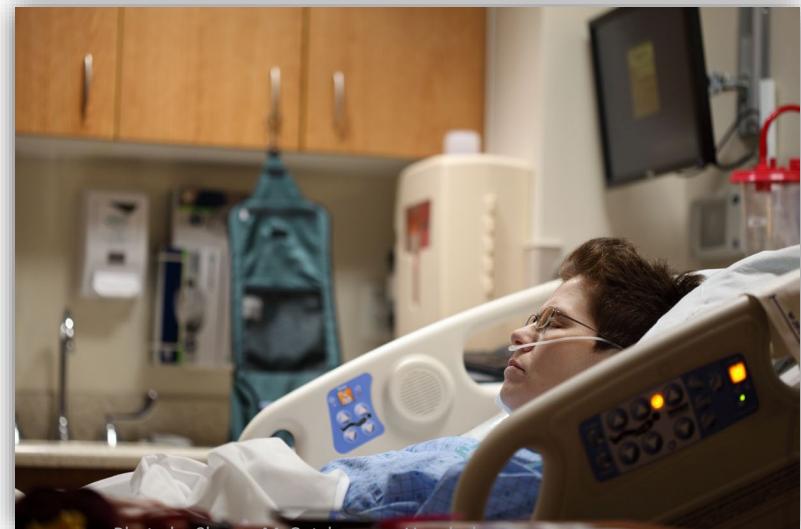


Photo by Sharon McCutcheon on Unsplash

Ergo Program/Health Management

- **Additionally, ensure ER**
 - Evaluates workplace regularly
 - Promotes early reporting
 - Medical Management
 - Maintains safety commitment



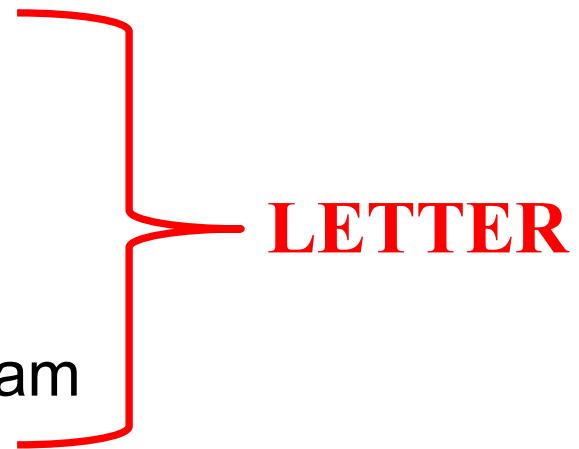
Photo by Olga Kononenko on [Unsplash](#)

Ergo Program

FOM Ch. XVII

- Calculate DART and severity rates
- Review with **Supervisor** to determine course:

- Rates Improving + Effective Program
- Rates Improving + Deficient Program
- Rates Not Improving + Effective Program



Ergo Program

FOM Ch. XVII

- Review with **Supervisor** to determine course:
 - **Rates Not Improving + Deficient Ergo Program = INSPECTION**
 - **Additionally, if clusters of Ergo injuries exist = INSPECTION**

INSPECTION

INSPECTION

Conduct Interviews

FOM Ch. XVII

- **Use LTC Questionnaire to determine:**

- Resident mobility determination
- Use of equipment as related to manual lifts
- Decision on lifting approach
- Available lifting devices
- Availability and condition of slings, gait belts and other transfer devices
- Proper availability and use of policies and procedures

Conduct Interviews

FOM Ch. XVII

- Verify EE's are trained in:
 - Hazard Recognition
 - Process for Correcting Hazards
 - Requirement of Reporting
 - Injuries
- Ask about injuries/issues
- Video EE's performing tasks



Photo from www.osha.gov

Citation Guidance

FOM Ch. XVII

- If Ergo hazard(s) are found to exist:
 - Evaluate elements of General Duty Clause
 - » Hazard is present?
 - » Hazard recognized in the industry?
 - » Hazard likely to cause serious physical harm?
 - » Feasible method of abatement?

Citation Guidance

FOM Ch. XVII

● Hazard alert letters

- Sent in lieu of a citation
- Describes observed deficiencies
- May include elements of an effective ergonomics program



Slips, Trips, & Falls in LTC

OPN 132 SEP

Slips, Trips and Falls

OPN 132

- **Evaluate the general work environments and document hazards such as:**
 - » Slippery or wet floors
 - » Tripping hazards
 - » Poor lighting
 - » Floor openings and holes
 - » Issues with stairs
 - » No fall prevention measures (elevated work surfaces w/o guardrails)
 - » Inadequate aisles
 - » Improper use of ladders and stepstools
 - » Use of improper equipment for elevated work

Slips, Trips and Falls

OPN 132

- Check ER policies and procedures for:

- Reporting and clean-up of spills
- Posting of signs/barriers
- Good housekeeping
- Appropriate footwear
- Prevention of slick walking surfaces



WorkSafeBC

Slips, Trips and Falls

OPN 132

● Citation Guidance

- 29 CFR 1910 Subpart D – Walking-Working Surfaces
- Subpart J – General Environmental Controls
- 29 CFR 1910.140 – Personal Fall Protection Systems

Bloodborne Pathogens in LTC

**OPN 132 SEP
CPL 02-02-069**

Bloodborne Pathogens

CPL 02-02-069

- Occupational exposure to blood and other potentially infectious materials (OPIM)



[Photo by Chang Duong on Unsplash](#)

Evaluate ECP

CPL 02-02-069

- Evaluate the written Exposure Control Plan (ECP)
 - Reviewed annually?
 - Updated when employee tasks/procedures modified?
 - Exposed employee tasks/procedures identified?
 - Accessible to exposed employees?
 - Procedure for documenting exposure incidents?
 - And more...

Image by Arek Socha from Pixabay

Evaluate ECP

CPL 02-02-069

- Assess the implementation of engineering and work practice controls
 - Use of **sharps**
 - Types of **sharps** devices used
 - Are safer devices considered?
 - Is employee feedback solicited?



Image by Angelo Esslinger from Pixabay

During the Walkaround

CPL 02-02-069

- Are proper work practices/PPE in place?



- Is biological waste handled properly?



- Are adequate handwashing facilities available?



During the Walkaround

CPL 02-02-069

- Is appropriate PPE provided?
- Are procedures in place for clean-up of contaminated materials?

NCDOL Photo Library



During the Walkaround

CPL 02-02-069

● Are EPA approved disinfectants used?

- List A: EPA's registered antimicrobial products as sterilants
- List B: EPA registered tuberculocide products effective against *Mycobacterium spp*
- List C: EPA's registered antimicrobial products effective against human HIV-1 Virus
- List D: EPA's registered antimicrobial products effective against human HIV-1 and Hepatitis B virus
- List E: EPA's registered antimicrobial products effective against *Mycobacterium spp*, human HIV-1 and Hepatitis B virus
- List F: EPA's registered antimicrobial products against Hepatitis C virus
- List G: EPA's registered antimicrobial products for medical waste treatment
- List H: EPA's Registered Antimicrobial Products Effective Against Methicillin Resistant *Staphylococcus aureus (MRSA)* and Vancomycin Resistant *Enterococcus faecalis* or *faecium (VRE)*
 - or
- Household bleach (5% NaOCl₂): at 1:10 - 1:100 in H₂O

Vaccination Requirements

CPL 02-02-069

- **Occupationally exposed employees**

- HBV vaccine within 10 days of assignment
- Vaccine offered at no cost
- Declination forms are signed/maintained
- Antibody tests included with vaccination



Image by Peggy und Marco Lachmann-Anke from Pixabay

Further Requirements

CPL 02-02-069

- **Bloodborne Pathogens Training**
 - Initial/annual
- **Sharps Injury Log**
 - Record of sharps injuries
 - Lists type/brand of device
 - Lists work area/department
 - Lists how injury occurred
 - EE confidentiality must be maintained
- **OSHA 300 Logs**

[Image by Corey Ryan Hanson from Pixabay](#)

Lower Risk Tasks - BBP

CPL 02-02-069

- Assisting with bathing or oral care
- Handling incontinence pads, linens, and contaminated trash
- Cleaning rooms, common areas, and equipment

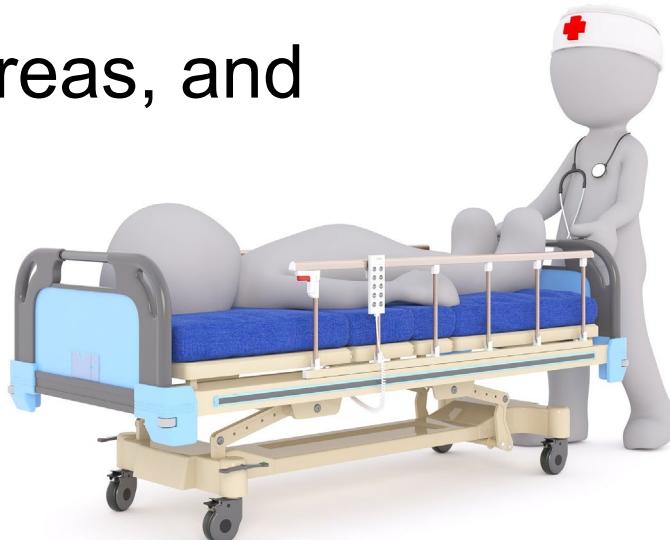


Image by Peggy und Marco Lachmann-Anke from Pixabay

Higher Risk Tasks - BBP

CPL 02-02-069

- Assisting with wound care
- Monitoring blood glucose
- Giving an injection of medication
- Cleaning blood/body fluid spills
- Helping with nail or skin care
- Providing first aid such as managing nose bleeds or abrasions

Tuberculosis in LTC

**OPN 132 SEP
CPL 02-02-078**

Tuberculosis (TB) Video

CPL 02-02-078

– “How TB Spreads”



<http://www.cdc.gov/tb/topic/basics/howtbspreads.htm>

Tuberculosis (TB) Inspection and Citation Guidance

CPL 02-02-078

- Determine if a TB case is suspected or confirmed (w/in last 6 months)



- If “No”
 - » Suspend TB investigation
- If “Yes”
 - » proceed with CPL 02-02-078

If TB Cases Are Found...

CPL 02-02-078

- Review plans for employee TB protection
- Verify TB protection plans are in place/utilized
- Assess appropriate areas of facility

Determine if Employer is in compliance!

Image by Arek Socha from Pixabay

If TB Cases Are Found...

CPL 02-02-078

- **Protect yourself!**

- 2005 CDC *Guidelines for Preventing the Transmission of Mycobacterium tuberculosis*
- Ask for/Follow Employer and facility exposure control requirements



If TB Cases Are Found...

CPL 02-02-078

- **Protect yourself!**

- *Do not enter occupied Airborne Infection Isolation*

- Room(s) (w/o authorization from District Supervisor)*

- *Wash your hands*

- *Tuberculin Skin Test (TST)*



Image by Wikimages from Pixabay

Possible Citations for TB

CPL 02-02-078

- **NCGS 95-129(1)** - General Duty Clause
- **29 CFR 1904** – Recording and Reporting Occupational Injuries and Illnesses
- **29 CFR 1910.132** – General Requirements for PPE
- **29 CFR 1910.134** – Respiratory Protection
- **29 CFR 1910.145** – Specifications for Accident Prevention Signs and Tags
- **29 CFR 1910.1020** – Access to Employee Exposure and Medical Records

Workplace Violence in LTC

**OPN 132 SEP
Memo 5/1/2017 (WPV3)/CPL 02-01-058**

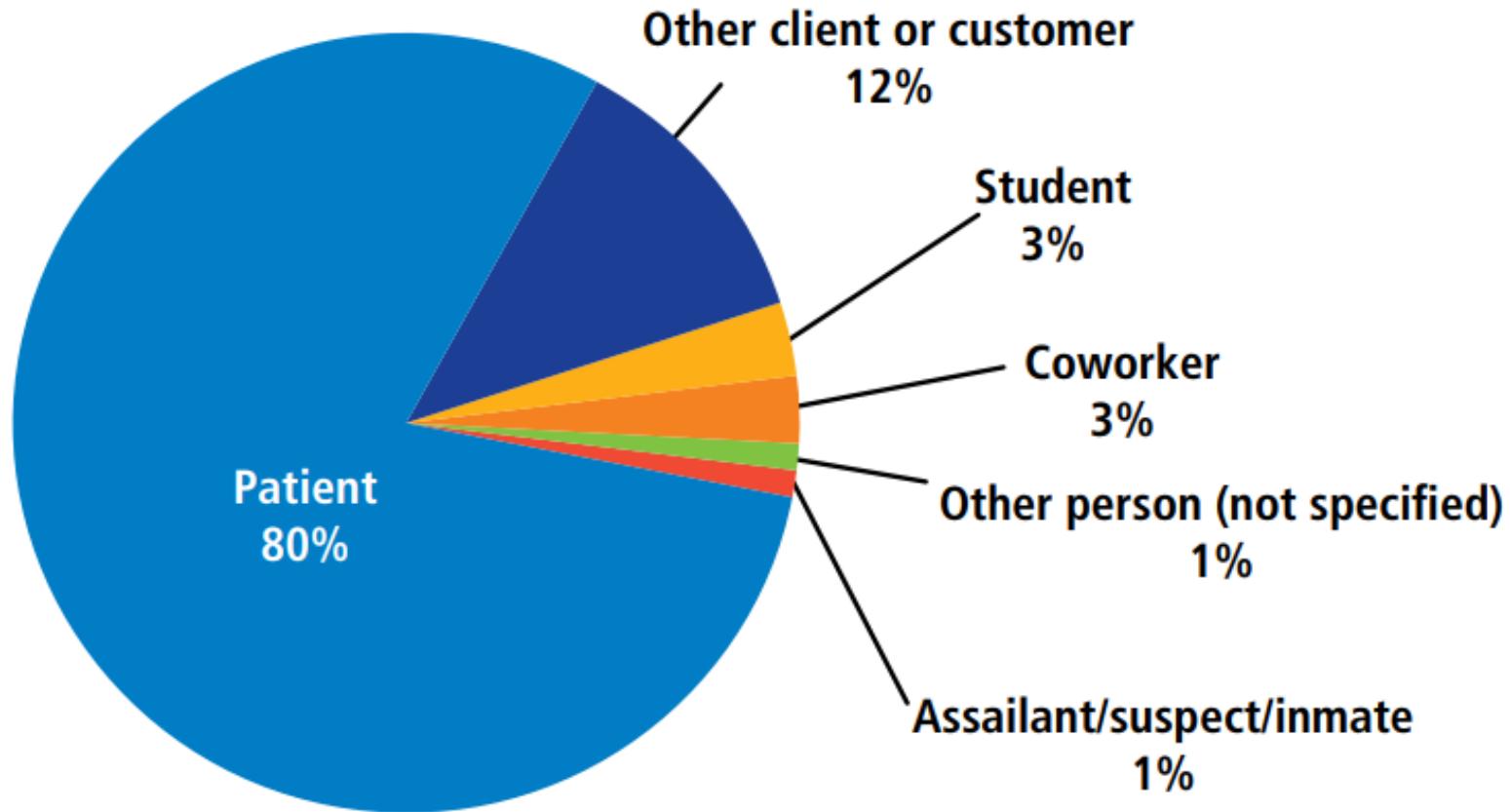
Workplace Violence (WPV)

CPL 02-01-058

- Cause of 14% of lost work injuries
- NIOSH defines: “**violent acts directed toward persons at work or on duty.**”



Workplace Violence in Health Care



Data source: Bureau of Labor Statistics (BLS), 2013 data. These data cover three broad industry sectors: ambulatory healthcare services, hospitals, and nursing and residential care facilities. Source categories are defined by BLS.

WPV Documentation

CPL 02-01-058

- Workplace Violence Prevention program
- OSHA 300 logs & injury reports
- Training records/program information
- Workers Compensation records
- Accident/incident/near-miss logs

Image by Ag Ku from Pixabay

WPV Documentation

CPL 02-01-058

- Hazard Assessments
- Health & Safety meeting minutes
- Employee interviews
- Medical records



Image by Pexels from Pixabay

Written WPV Program

CPL 02-01-058
OSHA 3148-06R

- Should contain:
 - Management Commitment/Employee Participation
 - Worksite Analysis
 - Hazard Prevention and Control
 - Safety and Health Training
 - Recordkeeping
 - Program evaluation



[Image by Peggy und Marco Lachmann-Anke from Pixabay](#)

Signs of Concern

CPL 02-01-058

- Lack of “good faith” to reduce hazards
- Lack of procedural changes in response to related injuries
- Lack of commitment from top management
- Lack of medical or counseling programs for injured employees
- Inadequate staffing
- Failure to report violent incidents to police

Image by geralt from Pixabay

Inspection and Citation Guidance

CPL 02-01-058

- General Duty Clause (GDC)
- OSH Workplace Violence Memo dated 5/1/2017
(WPV 3), (OSHA directive CPL 02-01-058)



Image by StockSnap from Pixabay

GDC: Death/Serious Hazard

CPL 02-01-058

- Documented WPV injuries
 - 300 logs
 - Injury reports
 - Workers' compensation records
 - Medical records
 - Police and security records
 - Employee interviews (written)
- Past complaints or grievances
- Meeting minutes where WPV was discussed
- Actual or potential employee exposure

GDC: Death/Serious Harm

CPL 02-01-058

- **Documentation that the WPV hazard caused or was likely to cause serious physical harm**
 - Employee interviews
 - Injury/illness logs
 - Police reports
- **Evidence of actual incidents**
 - Threats of physical harm
 - Seriously injured or killed by WPV

GDC: Employer Knowledge

CPL 02-01-058

- Documentation of employees information
- Employer awareness of prior incidents
- Precautions taken by employer to prevent/minimize WPV
- How employer currently addresses WPV including:
 - Prevention plan
 - Training plan
 - Security plan
- Management interviews including person responsible for certifying OSHA 300 logs

GDC: Industry Recognition

CPL 02-01-058

- Documentation from business groups/associations affiliated with the employer identifying WPV
- Journal articles/research showing WPV in LTC
- NIOSH and OSHA publications
- National consensus standards

GDC: Feasible Abatements

CPL 02-01-058

- Reference:
 - **OSHA publication 3148: Guidelines for Preventing Workplace Violence for Healthcare and Social Service Workers**

Potential Abatements

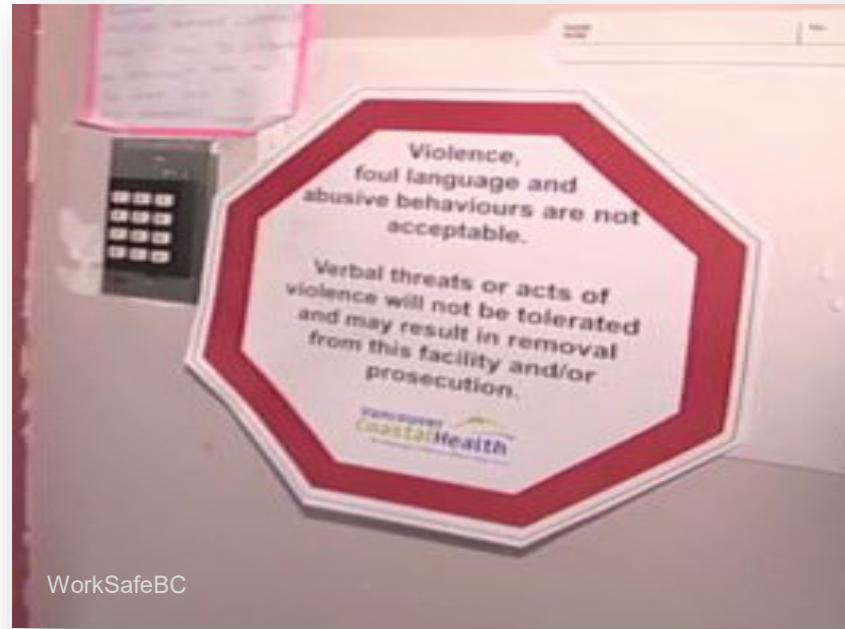
CPL 02-01-058

- **Implement WPV prevention program**
- **Selected controls:**
 - Zero tolerance policy
 - Ensure trained and qualified staff are available
 - Determine behavioral history of new/transferred residents
 - Establish system to identify patients with assaultive behavior problems
 - Coworkers and supervisors jointly plan ways to effectively treat violent patients

Employer Outreach

CPL 02-01-058

- Hazard Alert Letter
- Provide Outreach Materials



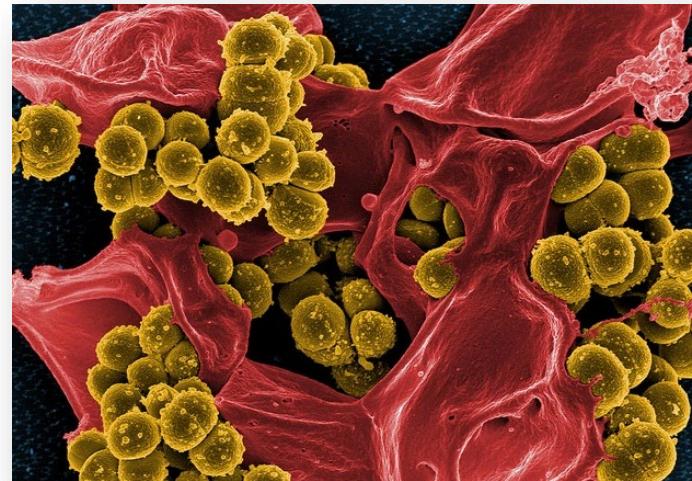
MRSA in LTC

OPN 132 SEP

What is MRSA?

OPN 132 SEP

- **methicillin-resistant *Staphylococcus aureus* (MRSA)**
 - *Antibiotic resistant bacteria*
 - *5% of patients in U.S. hospitals carry MRSA*
- MRSA can cause severe problems:
 - bloodstream infections
 - pneumonia
 - Sepsis
 - death



(Image courtesy of the National Institute of Allergy and Infectious Diseases)

How is MRSA Spread?

OPN 132 SEP

- **Direct Contact:**

- Skin-to-skin
- Skin to contaminated surface
- With infected wound/skin
- With asymptomatic carriers

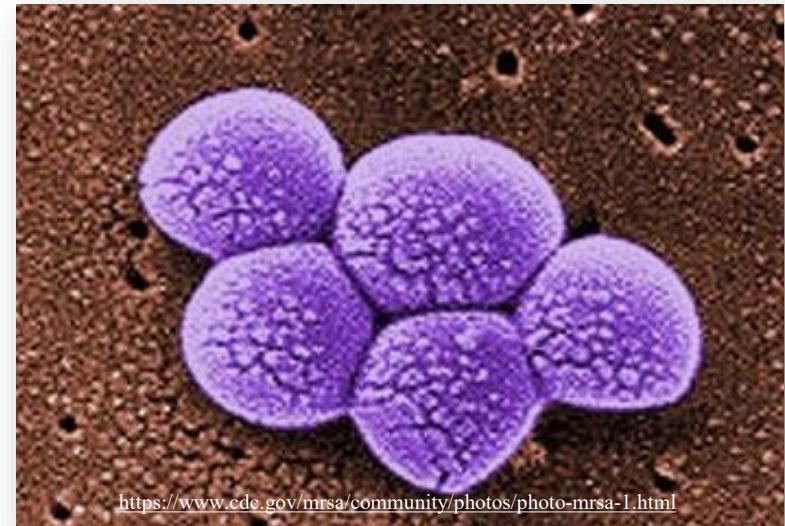


MRSA Cases

OPN 132 SEP

CDC estimated in 2011

- **80,461**
 - Invasive (surgery, dialysis) MRSA Infections per year
- **11,285**
 - Deaths from MRSA per year

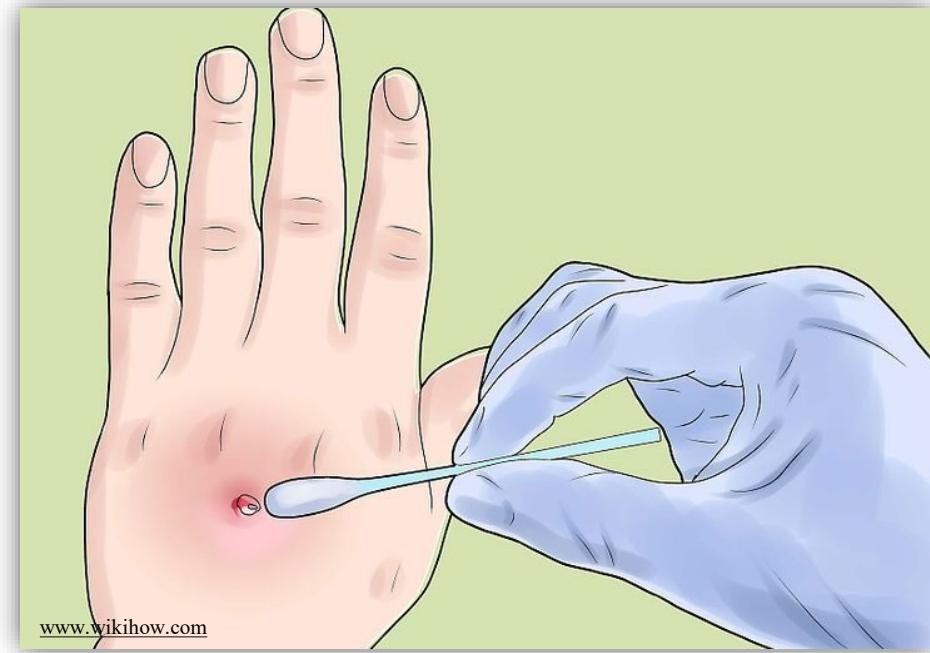


Source: Annual Internal NCDOL Training Event
"OPN 132 , LTC Facilities" 09/12/16

Diagnosis of MRSA

OPN 132 SEP

- Tissue Sample or Nasal Secretions tested
- Determine if drug-resistance
- Determine if/which antibiotic will be effective



Info Source: Annual Internal NCDOL Training Event
"OPN 132 , LTC Facilities" 09/12/16

Potential Citations for MRSA

OPN 132 SEP

- NCGS 95-129(1) - General Duty Clause
- 29 CFR 1904 – Recording and Reporting Occupational Injuries and Illnesses
- 29 CFR 1910.132 – General Requirements for PPE
- 29 CFR 1910.141 - Sanitation
- 29 CFR 1910.1030 – Bloodborne Pathogens

Image by DrawnByShaun from Pixabay

Source: Annual Internal NCDOL Training Event
“OPN 132 , LTC Facilities” 09/12/16

Recommended CDC Guidelines

OPN 132 SEP

- ***Guidelines for Isolation Precautions: “Preventing Transmission of Infectious Agents in Healthcare Settings”, 2007***



CDC.gov

Hazard Communication in LTC

**OPN 132 SEP
CPL 02-02-079**

Hazard Communication

CPL 02-02-079

- Hazardous chemicals often encountered...
 - sanitizers
 - disinfectants
 - hazardous drugs



Hazard Communication

CPL 02-02-079

- Written program
- Worker training
- Employee exposure
- Hazard Communication labels
- Access to Safety Data Sheets



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Hazard Communication

CPL 02-02-079

- Refer to **CPL 02-02-079: Inspection Procedures for Hazard Communication (2012)**



Recordkeeping in LTC

**OPN 132 SEP
CPL 02-00-135**

Recordkeeping

CPL 02-00-135

- Follow requirements:
 - **29 CFR 1904: Recording and Reporting Occupational Injuries and Injuries**
 - **CPL 02-00-135: Recordkeeping Policies and Procedures Manual**
 - **CPL 02-02-069: Enforcement Procedures Bloodborne Pathogens**
 - And other applicable requirements

- Resident Privacy and Medical Records
 - *Respect for resident privacy must be a priority*
 - Obtain consent prior to reviewing medical records



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Privacy

CPL 02-00-135

- Obtain family members or guardian consent prior to videotaping or photographing
 - Appendix A: Resident Consent and Release



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Employee Medical Records

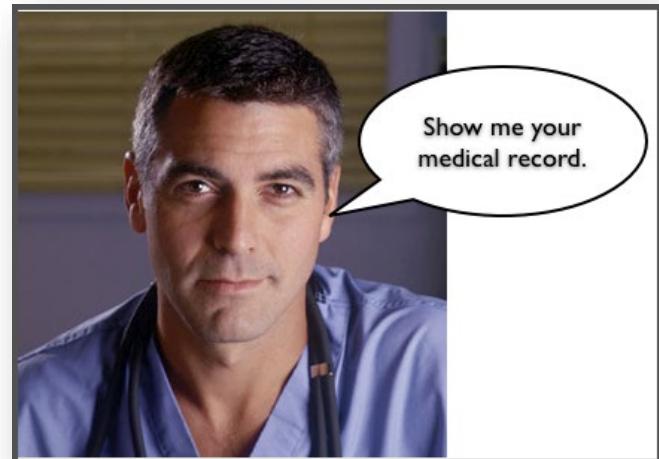
CPL 02-00-135

- Medical Records not specifically required by OSHA
 - medical exam results
 - laboratory tests
 - medical opinions/diagnoses,
 - first aid records
- Obtain and maintain in accordance with
 - FOM Ch. III – Inspection Procedures,
 - FOM Ch. XIII – Fatality and Catastrophe Investigations
 - FOM Ch. XVI – Administrative File Activities.

Employee Medical Records

CPL 02-00-135

- Legal justification for requesting medical records:
 - 45 CFR 164.512 (b)(1)(v):
 - Health and Human Services' Standards for Privacy of Individually Identifiable Health Information



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Tracking in OE

Recording and Tracking

Establishment

Inspection | Dates | Contacts | Emphasis/Initiatives | OSHA-1AC | Health | Violations | OSHA File

1. Reporting ID	0453710	24. Inspection Type	Unprogrammed Other
2. CSHO Information		25. Inspection Classification	<input type="checkbox"/> Safety Manufacturing <input type="checkbox"/> Safety Construction <input type="checkbox"/> Safety Maritime
a. CSHO ID	Martin, Julie	26. Employed in Establishment	
b. Job Title	Safety Compliance Officer	27. Covered by Inspection	
c. Supervisor Assigned	Atkinson, Lafayette	28. Controlled by Employer	
d. Trainee(1)		29. Union?	
e. Trainee(2)		30. Employee Walk Around	
3. Optional Report Number		31. Employee Interviewed	
18. Legal Entity		35. Scope of Inspection	
20. Type of Business		43. Reason No Inspection	
21. Inspection Category		97. Federal Contractor	
22. Primary NAICS/SIC		98. Attempt to collect info	
23. Secondary NAICS/SIC	<input checked="" type="checkbox"/> NAICS/SIC Xref	99. Imminent Danger Notice	
a. Guide			
b. Inspected			

Unprogrammed Other

- A Fatality/Catastrophe
- B Complaint
- C Referral
- D Monitoring
- E Variance
- F Follow-up
- G Unprogrammed Related
- H Programmed Planned
- I Programmed Related
- J Unprogrammed Other**
- K Programmed Other
- L Other
- N Other--Data Initiative Non-Responder
- O Accident
- P Referral-Employer Reported

5. Related Activity

Type	Number	Sat Safety?	Sat Health?	Cmp/Ref Close	Related Close Date

Add

Delete

42. Optional Information

Type	ID	Value

Add

Delete

Recording and Tracking

Establishment

Inspection | Dates | Contacts | Emphasis/Initiatives | OSHA-1AC | OSHA-167I | Health | Violations | OSHA File

1. Reporting ID	0453710	24. Inspection Type	Programmed Planned														
2. CSHO Information		25. Inspection Classification	<input type="checkbox"/> Safety Manufacturing <input type="checkbox"/> Safety Construction <input type="checkbox"/> Safety Maritime <input checked="" type="checkbox"/> Health Manufacturing <input type="checkbox"/> Health Construction <input type="checkbox"/> Health Maritime <input type="checkbox"/> Migrant														
a. CSHO ID		26. Employed in Establishment	66														
b. Job Title		27. Covered by Inspection	66														
c. Supervisor Assigned		28. Controlled by Employer	66														
d. Trainee(1)		29. Union?	No														
e. Trainee(2)		30. Employee Walk Around	No														
3. Optional Report Number	005-19	31. Employee Interviewed	Yes														
18. Legal Entity	Corporation	35. Scope of Inspection	Comprehensive Inspection														
20. Type of Business	Assisted Living	43. Reason No Inspection	No														
21. Inspection Category	Health	97. Federal Contractor	No														
22. Primary NAICS/SIC	623110	98. Attempt to collect info	Yes														
23. Secondary NAICS/SIC	<input checked="" type="checkbox"/> NAICS/SIC Xref	99. Imminent Danger Notice	No														
a. Guide			00/00/0000														
b. Inspected																	
5. Related Activity																	
<table border="1"> <thead> <tr> <th>Type</th> <th>Number</th> <th>Sat Safety?</th> <th>Sat Health?</th> <th>Cmp/Ref Close</th> <th>Related Close Date</th> </tr> </thead> </table>				Type	Number	Sat Safety?	Sat Health?	Cmp/Ref Close	Related Close Date								
Type	Number	Sat Safety?	Sat Health?	Cmp/Ref Close	Related Close Date												
				Add	Delete												
42. Optional Information																	
<table border="1"> <thead> <tr> <th>Type</th> <th>ID</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>S</td> <td>01</td> <td>1.0</td> </tr> <tr> <td>S</td> <td>03</td> <td>80</td> </tr> <tr> <td>S</td> <td>05</td> <td>06/05/18</td> </tr> </tbody> </table>				Type	ID	Value	S	01	1.0	S	03	80	S	05	06/05/18	Add	Delete
Type	ID	Value															
S	01	1.0															
S	03	80															
S	05	06/05/18															

Recording and Tracking

OSHA Express

- OSHA 1/Put in Item 42 Optional Codes
- Example below:

42. Optional Information

Type	ID	Value
N	02	BLOOD
N	02	TB

Recording and Tracking

2. Optional Information

Type	ID	Value		
S	05	06/05/18		
N	02	BLOOD		
S				
N - 01 - Multi_employer Inspection Number				
N - 02 - BLOOD Bloodborne Pathogens Related Inspection				
N - 02 - HEATAG Agriculture Heat Related Illnesses				
N - 02 - HEATCON Construction Heat Related Illnesses				
N - 02 - HEATGI General Industry Heat Related Illnesses				
N - 02 - HEATMI Maritime Heat Related Illnesses				
N - 02 - TB TB Related Inspection				
N - 03 - BACK Back Disorders				
N - 03 - OTHER Other Ergonomic Disorders				

42. Optional Information

Type	ID	Value		
S	05	06/05/18		
N	02	BLOOD		
S	17	ERGO HAZARD ALERT LETTER		
S - 01 - ENTER ERM # ONLY				
S - 03 - HOURS SPENT ON INSPECTION (# HOURS ONLY)				
S - 04 - FOLLOW-UP RECOMMENDED				
S - 05 - VERIFIED WITH SECRETARY OF STATE, (DATE ONLY)				
S - 06 - EMPLOYER REQUEST DATE OF INFORMAL CONFERENCE (DATE)				
S - 07 - DATE SETTLEMENT AGREEMENT SENT TO EMPLOYER OR DATE NO CHANGE LETTER SENT				
S - 08 - DATE SIGNED SETTLEMENT AGREEMENT RECEIVED (DATE)				
S - 11 - METHCHLO PROG				
S - 12 - HLTH HAZ PROG II Health Hazards Program Improvements				
S - 13 - THIRD PARTY LITIG				
S - 16 - GEN DUTY ERGO C General Duty Ergonomic Citation Issued				
S - 17 - ERGO HAZARD ALI Ergonomic Hazard Alert Letter Issued				
S - 18 - IC MISCLASS REFL IC MISCLASSIFICATION REFERRAL				

Recording and Tracking

OSHA Express

- OSHA 1/Put in field 42 Optional Codes

Code	Information
S-16	General Duty Ergonomic Citation Issued
S-17	Ergonomic Hazard Related Inspection
N-02-BLOOD	Bloodborne Pathogen Related Inspection
N-02-TB	TB Related Enforcement Inspection

Recording and Tracking

OSHA Express

● OSHA 1/Strategic Plan Activity

Inspection Number: 318184280 144188 Establishment:

Inspection Date: 00/00/0000

Inspection - 318184280

Inspection Dates Contacts Emphasis/Initiatives OSHA-1AC Health Violations

1. Reporting ID	0453710	24. Inspection Type
2. CSHO Information		25. Inspection Classification
a. CSHO ID	Martin, Julie	<input type="checkbox"/> Safety Manufacturing
b. Job Title	Safety Compliance Officer	<input type="checkbox"/> Safety Construction
c. Supervisor Assigned	Atkinson, Lafayette	<input type="checkbox"/> Safety Maritime
d. Trainee(1)		26. Employed in Establishment
e. Trainee(2)		27. Covered by Inspection
3. Optional Report Number		28. Controlled by Employer
18. Legal Entity		29. Union?
20. Type of Business		30. Employee Walk Around
21. Inspection Category		31. Employee Interviewed

Recording and Tracking

OSHA Express

- OSHA 1/Strategic Plan Activity

Strategic Plan Activity Description

- AMPUTATIONS SEP
- ASBESTOS EXPOSURE
- CHROMIUM EXPOSURE
- CONSTRUCTION SEP
- ISOCYANATES EXPOSURE
- LEAD EXPOSURE
- LONG TERM CARE FACILITIES**
- PROGRAM IMPROVEMENTS
- SILICA EXPOSURE
- TREE FELLING

Add

Delete

OPN 132 Appendices

OPN 132 Appendices

- Appendix A:
 - Resident Consent and Release



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- **Resources:**

- CPL 02-00-135, Recordkeeping
- CPL 02-02-069, Bloodborne Pathogens
- CPL 02-02-078, Tuberculosis
- CPL 02-02-079, Hazard Communication

- **Publications:**

- NIOSH, Musculoskeletal Disorders and Workplace Factors, 2nd printing, US DHHS, CDC, NIOSH Pub No. 97-141.
- Back Injury Prevention Guide in the Health Care Industry for Health Care Providers, Cal OSHA (11/97).

Appendix C

OPN 132

- Sample N.C. General Statute 95-129(1) AVD for MRSA Exposure
 - General Duty Clause sample verbiage (AVD)

Appendix D

OPN 132

- Sample Opening Conference Questionnaire
- Contains questions on:
 - Ergonomics
 - Slips, Trips, and Falls
 - Bloodborne Pathogens
 - Tuberculosis
 - Workplace Violence
 - MRSA
 - Hazard Communication

Appendix E

OPN 132

- Sample Employee Interview Questionnaire
 - Not required for case file
 - Useful for interview process
 - Questions cover gamut of SEP

Employee name: _____

Job title: _____

Address: _____

Years of service: _____ Years in industry: _____

Phone number: _____

Phone number: _____

Summary

In this presentation we reviewed...

- The basic components and requirements of the OPN 132 SEP
- The common hazards CSHOs can encounter during LTC inspections
- The tools and guidance available to help assist CSHOs in LTC inspections

Thank You For Attending!

Final Questions?

1-800-NC-LABOR

(1-800-625-2267)

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