

June 30, 2015

New OSHA Inpatient Facility Review Guidance Focuses on Five Workplace Hazards

On June 25, 2015, the Occupational Safety & Health Administration (OSHA) issued a [memorandum](#) regarding inpatient health care settings. The memorandum does not create new law. Rather, it provides guidance to OSHA compliance officers on how they should investigate health care facilities. The memorandum focuses on five hazards in particular:

- Musculoskeletal injuries “relating to patient or resident handling”
- Workplace violence
- Blood-borne pathogens
- Tuberculosis
- “Slips, trips and falls,” as OSHA shortens that phrase, “STFs.”

In addition, although not the focus of this memorandum, OSHA reminds its compliance officers to consider two additional hazards: multidrug-resistant infectious organisms and hazardous chemicals, to include sanitizers, disinfectants and drugs.

OSHA prefaced its memorandum with the observation that it believes the rate of work-related injuries in health care is “almost twice as high as the rate for private industry as a whole.”

In particular, OSHA instructs its compliance officers to consider hazards associated with patient/resident handling, which includes lifting, repositioning and transferring patients/residents. To analyze the sufficiency of a company’s efforts to protect against those hazards, OSHA instructs its compliance officers to ask 16 specific questions. OSHA has also published an entire web page devoted to “[Safe Patient Handling](#).”

To analyze a company’s efforts to protect against the other risks, OSHA points its compliance officers to its prior guidance. For workplace violence, OSHA instructs its compliance officers to follow the steps listed in a [2011 Directive](#); for tuberculosis to a [1996 guidance](#); for blood-borne pathogens to a [2001 guidance](#); and for STFs (Slips, Trips and Falls) to a [1984 guidance](#).

For inspections involving infectious organisms, OSHA instructs its compliance officers to look to CDC publications and for hazardous chemicals to its own (OSHA) prior guidance.

The memorandum concludes by providing compliance officers sample language to be used in drafting citations when a violation is found.

Health care employers should immediately review this memorandum. Realizing OSHA’s internal game plan for inspections—in advance of any issue—will help even the most safe company to be prepared for an inspection in the event OSHA does come knocking.

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