

Appendix D

Hazard Communication Program

Rose City Veterinary Hospital

For Compliance with California Code of Regulations,
Title 8 General Industry Safety Orders,
Section 5194

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Introduction

The California Hazard Communication Regulation, California Code of Regulations (CCR), Title 8, Section 5194, was amended in May 1986 to include the Federal Hazard Communication Standard, commonly referred to as the worker's, "Right to Know." Under this legislation, Rose City Veterinary Hospital's, referred to herein as RCVH, Employees have the right to be informed of the hazards to which they may be exposed during the course of their work.

The RCVH Hazard Communication Program (HAZCOM) has been developed to assist in ensuring a safe and healthy work environment for all employees by providing information about chemical hazards and other hazardous substances including controlled hazards located in the workplace. The Hazard Communication Program describes RCVH's plan to ensure that the container labeling and the Material Safety Data Sheets (MSDS) requirements of California's hazard communication regulations are met. It also describes the activities to ensure that the information and training requirements of the Hazard Communication Program regulations are met. Finally, it describes the methods of informing contractor employers/employees who may be working on RCVH projects and/or work-sites of the potential exposure to hazards.

RCVH has hazardous materials located in a number of sites through the facility. Accordingly, a complete list and MSDS of the hazardous substances in used or stored in the employee lounge in compliance with the Hazard Communication Program. The digital originals are located on the Hospital Manager's computer and are available through the company intranet. The original Master File is maintained by the Hospital Safety Manager and the Team Leaders are responsible for informing their members of locations, availability to updates, and changes.

A list of the various locations of the Hazard communication Program follows below. The employee lounge location is the location of the Master File and should be regarded as such.

This program meets and exceeds the intent of Title 8, Section 5194 and the, "Employees Right to Know." Questions concerning the Hazard Communication Program, or concerns regarding hazards, or potential hazards, should be direct to the Hospital Safety Manager or the Hospital Manager.

Summary of the program follows:

The purpose of this Written Hazard Communication program is to ensure that:

1. Hazardous substances present in the work place are properly identified and labeled.
2. Employees have access to information on the hazards of these substances.
3. Employees are provided with information on how to prevent injuries or illnesses due to exposure to these substances.
4. Identify by job title who has the responsibility for maintaining the program, the MSDS sheets, conduct training, etc.

Note: This program will be available to all employees for review and a copy will be located in the following area(s):

Location:

- 1. Front Office: On the back reception shelves above the computers.**
- 2. Lounge: On the wall near the lockers (Master Copy).**
- 3. Rear Office: Inside the sperm bank above the computer in the corner.**

Hazard Determination

The following are the guidelines used in determining the potential hazards located in the facility:

- A. A "hazardous substance" is a physical or health hazard that is listed as such in either:
 1. 29 CFR Part 1910, Subpart Z, *Toxic and Hazardous Substances*, Occupational Safety and Health Administration.
 2. *Threshold Limit Values for Chemical Substances and Physical Agents in the Work Environment* (latest edition), American Conference of Governmental Industrial Hygienists (ACGIH).
- B. A "hazardous substance" is regarded as a carcinogen or potential carcinogen if it is identified as such by:
 1. National Toxicology Program (NTP), *Annual Report on Carcinogens* (latest edition).
 2. International Agency for Research on Cancer (IARC) *Monographs* (latest edition).
 3. 29 CFR Part 1910, Subpart Z, *Toxic and Hazardous Substances*, Occupational Safety and Health Administration.
- C. Manufacturers, importers and distributors will be relied upon to perform the appropriate hazard determination for the substances they produce or sell.
- D. The following materials are not covered by the Hazard Communication Standard:
 1. Any hazardous waste as defined by the Solid Waste Disposal Act, as amended by the Resource Conservation and Recovery Act of 1976, as amended (42 USC 6901 et seq.) when subject to regulations issued under that act by the Environmental Protection Agency.
 2. Tobacco or tobacco products.
 3. Wood or wood products. **NOTE:** Wood dust is not exempt since the hazards of wood dust are not "self-evident" as are the hazards of wood or wood products.
 4. Consumer products (including pens, pencils, adhesive tape) used in the work place under typical consumer usage.

5. Articles (i.e. plastic chairs).
6. Foods, drugs, or cosmetics intended for personal consumption by employees while in the work place.
7. Foods, drugs, cosmetics, or alcoholic beverages in retail stores packaged for retail sale.
8. Any drug in solid form used for direct administration to the patient (i.e. tablets or pills).

Application

This program applies to the use of any hazardous substance which is known to be present in the workplace in such a manner that employees may be exposed under normal conditions of use or in a foreseeable emergency.

Responsibility for Compliance

The following are the guidelines for compliance and discipline for non-compliance:

- A. The administration of this program will be the responsibility of the Hospital Safety Manager. The administrative responsibilities of this individual/position will include:
 1. Identification of the employees to be included in the Hazard Communication Program, mandatory involvement includes the following; Team Leaders and the designated assistant to the Safety Manager.
 2. Development and maintenance of a hazardous substance master inventory.
 3. Coordination and supervision of employee training.
 4. Coordination and supervision of the facility's container labeling program.
 5. Coordination of any necessary exposure monitoring.
 6. Coordination and supervision of required recordkeeping.
 7. Periodic evaluation of the overall program.
- B. Employees are responsible for following all safe work practices and using proper precautions required by the guidelines in this program.

Hazardous Substance Inventory

The Medical Team Leader, Medical Purchaser and the Safety Manager are responsible for compiling, maintaining, and updating, when necessary, a master list of hazardous substances used or produced in the facility. The inventory list will include the common identity or trade name of the product and the name and address of the manufacturer. Hazardous substances will be listed alphabetically by manufacturer. Substances which are not in containers will also be included on the inventory list, e.g., welding fumes, carbon monoxide from a fork lift, etc. (*See Form #1*)

Labeling

ALL CONTAINERS OF HAZARDOUS SUBSTANCES SHALL BE LABELED.

The Hospital Safety Manager and the designated assistant are responsible for evaluating labels on incoming containers, establishing the appropriate secondary label for *ALL* secondary containers, and the requisition of any and all necessary labels supplied by the manufacturer. *ALL* secondary containers of hazardous materials must be labeled using one of the two available options listed on Form #SCL (secondary container labels), with no exceptions. Employees shall not remove or deface any existing labels on incoming containers of hazardous substances. Each label must contain the following information:

1. Identity of the hazardous substance(s).
2. Appropriate hazard warning.
3. Name and address of the manufacturer, importer, or other responsible party.

If the label is not appropriate, the designated assistant will notify the manufacturer (or supplier) that the label is not adequate. (*See Form #2*). The designated assistant will send a second request to the manufacturer if the correct label is not received within 30 days. (*See Form #3*)

The designated assistant is responsible for preparing an appropriate label if one is not supplied by the manufacturer within the second 30 days. A container will not be released for use until an appropriate label is affixed to the container.

Labels will be removed if they are incorrect. When the container is empty it may be used for other materials provided it is properly cleaned and relabeled. Each department supervisor is responsible for ensuring that all containers used in his/her department are labeled properly and remain legible. Defacing labels or using them improperly is prohibited.

Unlabeled portable containers, such as pails and buckets, should be used by one employee and emptied at the end of each shift. If the secondary containers are used by more than one employee and/or its contents are not emptied at the end of the shift, the department supervisor is responsible for labeling the container with either a copy of the original label or with a generic label which has a space available for appropriate hazard warnings.

Material Safety Data Sheets

The process to ensure hazardous awareness and communication centers on the effective dissemination of appropriate information, and the principle vehicle through which this occurs is the manufacturer's Material Safety Data Sheet (MSDS), a guide containing important safety related information on hazardous materials.

MSDS's will be available to the employees on all hazardous substances to which there is potential or actual exposure. The Medical Supply Purchaser is responsible for ensuring that MSDS are available on all incoming products. A product will not be released for use until a completed MSDS is on file. (*See Form #4*)

A MSDS sheet gives detailed information on how to:

- Store, handle, and use a product in a safe manner;
- What to do should an emergency situation occur;
- The chemical and physical properties of a product;
- A list of hazardous ingredients.

The MSDS provides the employee/user everything they need to know to work safely with the product and should be read BEFORE starting a job.

A list of all of the potential hazardous substances will be maintained in each of the listed locations. This list shall contain the chemical or common name, which is indicated on the MSDS sheet for the substance. This shall permit a cross reference to be made among the list of hazardous substances, the label, and the MSDS. Please review the Form#HSL for a sample format.

Hazardous Materials are tracked by;

- Chemical Name
- Location
- Quantity
- Hazard Classification
- Chemical Properties

If the MSDS is not available, the Medical Supply Purchaser will notify the manufacturer that MSDS is needed. (*See Form #5*). The Medical Supply Purchaser will send a second request to the manufacturer if the MSDS is not received within 30 days. (*See Form #6*)

The Medical Supply Purchaser is responsible for the review of all incoming MSDS's. If the MSDS is not complete, it will be returned to the manufacturer with a request for the missing **information**. (*See Form #7*)

The Medical Supply Purchaser will send a second request for the missing information if a complete MSDS is not received within 30 days. (*See Form #8*)

The Hospital Safety Manager and the Medical Supply Purchaser are responsible for compiling and updating the master MSDS file. This file will be kept at (Name of location).

Copies of MSDS's will be kept in the following areas:

Department

Location

Lounge

Mounted on the wall (Master Copy)

Front Office

Above the computers on the back shelf

Back Office

Inside the sperm bank above the computer in the corner

Employees will have access to these MSDS's during all work shifts. Copies will be made available upon request to the Safety Manager. (*See* Form #10)

The Safety Manager is responsible for updating the data sheets to include new information as it is received. A notice will be posted to inform employees that revised information has been received. (*See* Form #11)

Employee Training

RCVH's Hospital Manager, Safety Manager and supervisors, shall provide employees with information and training on hazardous substances in their work area at the time of their initial assignment, hire date, and whenever a new hazard is introduced onto their work area.

Whenever a new or revised MSDS sheet is received, such information shall be provided to employee on a timely basis if the new information indicates significantly increased risks to, or measures necessary to protect, employee health as compared to those stated on an MSDS previously provided.

When training new employees who may be exposed to hazardous substances, RCVH in coordination with the managers and/or supervisor, shall ensure that each of the following hazard communication training requirements are covered:

Prior to starting work with hazardous substances, each employee will attend a Hazard Communication Training Session where they will receive information on the following topics:

1. Policies and procedures related to the Hazard Communication Standard.
2. Location of the written Hazard Communication Program.
3. How to read and interpret an MSDS.
4. Location of MSDS's.
5. Physical and health hazards of hazardous substances in their work area.
6. Methods and observation techniques to determine the presence or release of hazardous chemicals.
7. Work practices that may result in exposure.
8. How to prevent or reduce exposure to hazardous substances.
9. Personal protective equipment.
10. Procedures to follow if exposure occurs.
11. Emergency response procedures for hazardous chemical spills.

Upon completion of the training program, each employee will sign a form documenting that he/she has received the training. (*See* Form 12)

Whenever a new employee is transferred or hired, he/she will be provided training regarding the Hazard Communication Standard. The training session will be conducted by the Hospital Manager before the start of his/her employment if possible.

The Medical Team Leader and the Hospital Safety Manager are responsible for identifying and listing any non-routine hazardous task performed at this facility. The Hospital Safety Manager will conduct training on the specific hazards of the job and the appropriate personal protective equipment and safety precautions and procedures. (*See* Form 13)

When a new substance is added to the inventory list, the Hospital Safety Manager is responsible for reviewing the MSDS for potential health effects. If the product presents a new health hazard (causes health effects unlike those covered in the training session), the the Hospital Safety Manager is responsible for notifying all affected employees about the new health effects which result from exposure to the new substance.

A copy of the new Material Safety Data Sheet (MSDS) will be posted by the Hospital Safety Manager for 5 days in the employee lounge. Both the new Material Safety Data Sheet and the Employees New Substance Signature Form will be placed above or near the MSDS information binder. Each affected employee must read the MSDS and sign the signature form. (*See Form #11*)

Informing Contractors

The Hospital Safety Manager is responsible for providing outside contractors with the following information:

- Hazardous chemicals to which they may be exposed as a result of working in this facility.
- Suggestions for appropriate protective measures.

Contractors that are potentially exposed to hazardous chemicals present at the facility will not be allowed to begin work until they have been provided information concerning these hazards and have signed a form to document this exchange. (*See Form #14*)

The Hospital Safety Manager is responsible for obtaining information from contractors on all hazardous substances to which State employees may be exposed as a result of the contractor's work at the facility. (*See Form #15*). The Hospital Safety Manager will notify affected employees about the health affects that may result from exposure to each substance.

Personell Policies

When an employee is not following safety and health rules regarding working with a hazardous substance, disciplinary action will be taken. The only addendum to the standard disciplinary policy is as follows:

Employees have two conferences befor an official write up. This can come in the form of a quick reminder to resolve the safety discrepancy, or it may come as a formal written conference. Either way, the employees have two instances before a write up is prompted.

Record Keeping

All MSDS's will be kept for a period of 1 year after the use of the substance has been discontinued.

EXCEPTION: If an employee exposure to a particular hazardous chemical occurs, the MSDS for that product will become part of the employee's medical records. Medical records must be kept for **30** years.

Note: "Exposure" or "exposed" means that an employee is subjected to a toxic substance or harmful physical agent in the course of employment through any route of entry (inhalation, ingestion, skin contact or absorbtion, etc.), and includes past exposure, but does not include situations where the employer can demonstrate that the toxic substance or harmful physical agent is not used, handled, stored, generated, or present in the workplace in any manner different from typical non-occupational situations.

Community Hazard Communication

The Hospital Manager is responsible for responding to requests from members of the community on hazardous substances used in the facility.

Emergency Response Procedures for Hazardous Chemical Spill

When a hazardous chemical spill occurs, follow these procedures:

1. Move all employees away from spill to a safe environment.
2. Inform the Safety Manager or the Hospital Manager of the incident.
3. Call 911 or the designated emergency response number in your area to notify the necessary response team for the hazardous chemical spill.
4. Retrieve the Hazard Communication Information Binder, if possible.
5. Locate the MSDS for the hazardous chemical which spilled.
6. If requested, provide the MSDS to the Emergency Response Team, or begin the appropriate clean up of the spill.

Note: Do not try to contain the spill if it is not appropriate. If appropriate, take all precautions when dealing with containment of any containable chemical spill.

Program Evaluation

The Hospital Manager and the Hospital Safety Manager will conduct an evaluation of the Hazard Communication program annually. The individual responsible for the items identified for improvement will be notified in writing. It is expected that action will be taken to correct the item within five working days. (See Form #16)

At least annually, eight employees will be interviewed to determine the effectiveness of the Hazard Communication Program. Each interview will assess the employee's retention of information given during the training session, use of MSDS's and response to chemical spills (if applicable). The results of each interview will be recorded on the Employee Interview Form. (See Form #17) The Employee Interview Form will be retained on file for 12 months.

This written program has been developed by the Mike Jennings, RCVH's Hospital Manager. The program was adapted from a written program originally developed by the Occupational Safety and Health Administration (OSHA).

