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Top 2023 OSHA Citations for the Ambulatory Health Care Setting

Occupational Safety and Health Administration (OSHA) conducts inspections to identify hazards in various workplace settings. The most recent statistics on ambulatory health care citations from OSHA reveal that there were 46 standards cited between October 2022 and September 2023 resulting in \$1,517,189 in fines. The top three citations include respiratory protection, bloodborne pathogens, and hazard communication. Take a look at these requirements and how AAAHC Standards support compliance for ambulatory health care settings.

Bloodborne pathogens. This standard requires ambulatory health care organizations to have a program in place that seeks to prevent occupational exposure to blood or other potentially infectious materials. Along with an exposure plan, AAAHC Standards require education and active surveillance for hand hygiene and safe injection practices. Deficiencies related to safe injection practices are rated as a top deficiency in the 2023 AAAHC Quality Roadmap. Noncompliance with standards specific to infection prevention and safe injection practices place patients at risk and are a potential liability for organizations. Organizations should address these issues promptly and on an ongoing basis to ensure compliance with standards and delivery of high-quality patient care. To improve compliance with this requirement, observe and document hand hygiene and safe injection practice compliance frequently using different staff or patients as observers (similar to "secret shoppers") to gain accurate data.

Respiratory protection. This standard refers to maintaining a written respiratory protection program that includes identifying required personal protective equipment, maintenance, fit testing, sanitation, replacement, and training. This OSHA standard requires employers to perform an assessment of activities and types of exposure to determine if and when employees are required to wear personal protective equipment. This is consistent with AAAHC Standards which require the organization to have a written exposure plan with policies and procedures to ensure that health care workers are protected from biologic hazards, consistent with prevailing laws, regulations, and nationally recognized guidelines. This plan and related policies must be approved by the governing body and reviewed at least annually. The Centers for Disease Control and Prevention (CDC) and National Institute for Occupational Safety and Health (NIOSH) have a resource for Improving Your Exposure Control Plan that can be used as a guide.

Hazard communication. This standard is designed to ensure that employers and employees know about hazardous chemicals in the workplace and how to protect themselves. AAAHC Standards require that a program is maintained to assess and reduce risks associated with occupational chemical exposures. For additional resources, refer to OSHA for the Globally Harmonized System of Classification and Labeling of Chemicals (GHS) on use of **labels and pictograms**. Consider including hazardous materials, chemical spills, and use of eye wash stations in annual drills.

This article emphasizes how important it is to proactively identify, manage, and communicate potential hazards. Refer to OSHA for more detailed information on referenced standards.



Frequently Asked Questions: Worksite Safety

In this issue of *Triangle Times Today*, AAAHC continues our ongoing series of AAAHC Standards Q&A focusing on exposure control.

What should be included in a written Exposure Control Plan (ECP)? How often do I need to update it? A written exposure control plan is designed to identify, prevent, and protect workers from potential exposure to bloodborne pathogens. The required elements of an ECP include:

- An assessment of job classification, tasks, and procedures that include potential exposure.
- Implementation of engineering controls and work practices, personal protective equipment, procedures, and other practices determined by the organization to mitigate risk.
- Detailed policies and procedures for vaccination/testing requirements, post-exposure and follow-up process, incident review, communication, record keeping, and training.

AAAHC Standards require that organizations review and update written exposure control plans at least annually or when construction is anticipated.

Does the OSHA Bloodborne Pathogens standard apply to medical or dental offices that have fewer than 10 employees?

According to OSHA, the bloodborne pathogens standard applies to all employers with employees who have occupational exposure to blood or other potentially infectious materials (OPIM), regardless of how many workers are employed.

Does my organization require an adverse event reporting system? Yes. AAAHC Standards require organizations to have an adverse event reporting system. In addition to this, surgery centers are required to enter each sharps injury on the **OSHA 300 log**. This log must contain the type and brand of device involved in the injury, location of incident, and an explanation of how the injury occurred. The log must be maintained in a manner that protects the confidentiality of the staff, e.g., removal of personal identifiers (OSHA Appendix A, 29 CFR Part 1904).

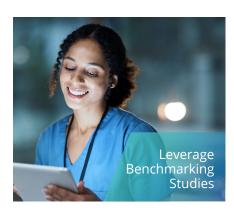
Where can I learn more about Safe Injection Practices? Led by CDC and the Safe Injection Practices Coalition (SIPC), the *One & Only Campaign* seeks to raise awareness about safe injection practices. This campaign applies to any health care facility that administers medications with a syringe. Additionally, AAAHC's *Safe Injection Practices Toolkit* contains evidence-based research, a risk assessment checklist, a training plan, and a list of references to help organizations enhance their injection protocols. **Order your copy at AAAHC store.**



Frequently Asked Questions: Worksite Safety Continued

What AAAHC Standard addresses eye wash station location? AAAHC Standards require organizations to have a policy defining the minimum equipment and supplies that should be readily accessible in all areas of patient services for emergencies. ANSI Z358.1 details the specific requirements for eyewash stations, emergency showers, and combination units. Essentially, an emergency eyewash station should be plumbed and located on the same level as chemical hazards, it must be accessible within 10 seconds via unobstructed egress. The eyewash station must also have a controlled flow of tepid water able to deliver at least 0.4 gallons/minute at 30 psi of flow pressure. Consistent with AAAHC Standards, the eyewash must be marked with signs, inspected, and maintained per the manufacturer's instructions and staff should receive training on access and use.

AAAHC offers guidance and resources to help organizations prepare for emergency situations. The *Emergency Drills Toolkit*, released in 2023, educates organizations about the types of emergencies that can occur in the ambulatory health care setting and the importance of developing a crisis plan before an actual disaster hits. **Order your copy at the AAAHC store.**



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