RIVERSIDE COUNTY
SAFETY DIVISION
A DIVISION OF HUMAN RESOURCES
November
2016
Safety Newsletter

CHEMICAL STORAGE

Does your office or department store chemicals? If so, be aware that not all chemicals are created equally. Due to the multitude of variables involved, it is important to know how and where to store your chemicals. To protect employees from the potential dangers of chemicals, OSHA and the National Fire Protection Association (NFPA) utilizes a color code and placard system to assist in the proper and safe storage of chemicals. The table below provides an overview of the color codes and their respective storage methods.

Color Code	Type of Hazard	Storage Method	GHS Logo	Examples
Red	Flammable	Flammable Cabinet or flammable storage area		• Flammables • Pyrophorics • Self-Heating • Flammable Gas • Self-Reactives • Organic Peroxides
Blue	Health Hazards/ Toxins	Designate as poison area or keep separate from other chemicals		• Carcinogen • Mutagenicity • Reproductive Toxicity • Respiratory Sensitizer • Target Organ Toxicity • Aspiration Toxicity
Yellow	Reactive/ Oxidizers	Store corrosives in this group in chemical resistant secondary containers or in corrosive-proof cabinets. Store away from organic material, flammables or other incompatible materials		• Oxidizers
White	Corrosives/ Contact Hazards	Store in chemical resistant catch trays or corrosive cabinet. Store acids separate from bases.		• Skin Corrosion/Burns • Eye Damage • Corrosive to Metals

Above logos comply with current Global Harmonization Standards.

NFPA Rating Explanation Guide

HEALTH HAZARD

4 **EXTREME** - Highly toxic - May be fatal on short-term exposure.

3 **SERIOUS** - Toxic - Full protective suit and breathing apparatus should be worn.

2 **MODERATE** - Breathing apparatus and face mask must be worn.

1 **SLIGHT** - Breathing apparatus may be worn.

0 **MINIMAL** - No precautions necessary.

FLAMMABILITY HAZARD

4 **EXTREME** - Extremely flammable gas or liquid. Flash Point below 73°F.

3 **SERIOUS** - Flammable. Flash Point 73°F to 100°F.

2 **MODERATE** - Combustible. Requires moderate heating to ignite. Flash Point below 200°F.

1 **SLIGHT** - Slightly combustible. Requires strong heating to ignite.

0 **MINIMAL** - Will not burn under normal conditions.

SPECIFIC HAZARD

OXIDIZER	**OXY**
ACID	**ACID**
ALKALI	**ALK**
CORROSIVE	**COR**
Use NO WATER	**W**
RADIATION	☢

INSTABILITY HAZARD

4 **EXTREME** - Explosive at room temperature.

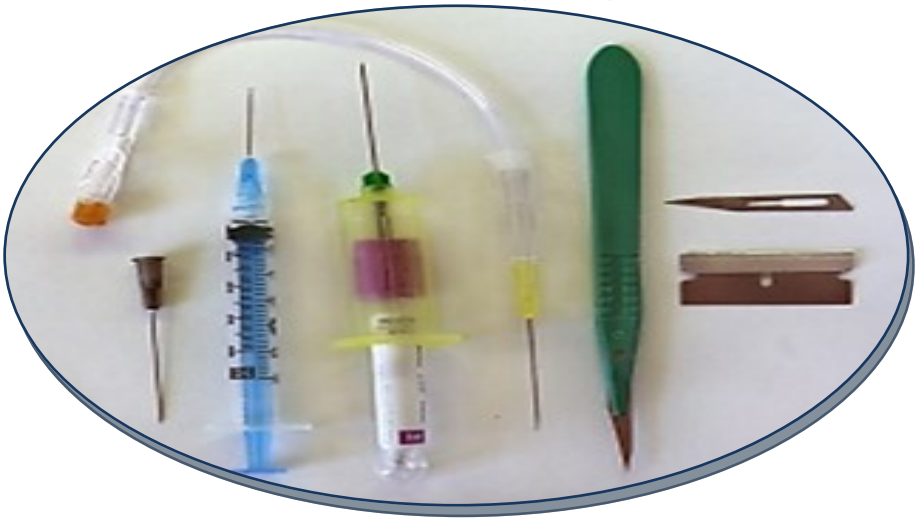
3 **SERIOUS** - May detonate if shocked or heated under confinement or mixed with water.

2 **MODERATE** - Unstable. May react with water.

1 **SLIGHT** - May react if heated or mixed with water.

0 **MINIMAL** - Normally stable. Does not react with water.

Bloodborne Pathogens and Sharps Injury Prevention



Bloodborne pathogens are infectious microorganisms present in blood that can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV), the virus that causes AIDS. Workers exposed to bloodborne pathogens are at risk for serious or life-threatening illnesses. Healthcare workers in particular are at greatest risk of injury and bloodborne disease. The Centers for Disease Control and Prevention (CDC) estimated that about 385,000 sharps -related injuries occur annually among health care workers in hospitals. OSHA estimates that 600,000 American workers are exposed annually. It has also been estimated that about half or more of sharps injuries go unreported. Most reported sharps injuries involve nursing staff, but laboratory staff, physicians, housekeepers, and other health care workers are also injured. Additionally, correctional and law enforcement workers and emergency responders under certain circumstances are at risk of exposure.

Sharps injury from needlesticks can result in infection and subsequent disease. Sharps injuries can be prevented by engineering controls and safe handling practices of sharps. A sharp is any object used or encountered that can be reasonably anticipated to penetrate the skin or any other part of the body, and to result in an exposure incident, including,

but not limited to, needle devices, scalpels, lancets, broken glass, broken capillary tubes, exposed ends of dental wires and dental knives, drills and burs.

Engineering Controls

Per County Safety Manual document 2011, Bloodborne Pathogens Exposure Control Plan Guidelines, healthcare facilities shall use needleless systems, needle devices with engineered sharps injury protection and non-needle sharps for the withdrawal of body fluids after initial venous or arterial access is established, the administration of medications or fluids and any other procedure involving the potential for an exposure incident for which a needless system or needle with engineered sharps injury protection is available as an alternative to the use of needle devices. The only exceptions for use of these devices would be (1) if the engineering control is not available in the marketplace (2) if it is determined that the use of the engineering control will jeopardize the patient's safety or the success of the procedure involving the patient (3) if it can be demonstrated by means of objective product evaluation criteria that the engineering control is not more effective in preventing exposure incidents than the alternative used by the employer and (4) it can be demonstrated that reasonable specific and reliable information is not available on the safety performance of the engineering control for the procedure and the department is actively determining by means of objective product evaluation criteria whether use of the engineering control will reduce the risk of exposure incidents occurring in the workplace.

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Safe Handling Practices

The most common sharp injury, needlesticks, have been related to certain unsafe handling practices such as recapping, transferring a body fluid between containers, and failing to properly dispose of used needles in puncture-resistant sharps containers. To protect themselves and their coworkers, health care workers should be aware of the hazards posed by needlestick injuries and use available safety devices and improved handling practices as follows:

1. Avoid the use of needles where safe and effective alternatives are available. Use devices with safety features provided by your employer and offer input to your employer regarding the selection and evaluation of devices with safety features.

2. Avoid recapping needles.

3. Plan safe handling and disposal before beginning any procedure using needles.

4. Dispose of used needle devices promptly in appropriate sharps disposal containers.

5. Report all needlestick and other sharps related injuries promptly to supervision to ensure that you receive appropriate medical care. Tell your employer about hazards from needles that you observe in your work environment.

6. Participate in bloodborne pathogen training and follow recommended infection prevention practices, including hepatitis B vaccination.

Sharps Containers for Disposal

All needles and sharps are to be placed in puncture-resistant, waterproof containers labeled "BIOHAZARD" and have the international biohazard symbol displayed. Containers are to be easily accessible to personnel and located as close as feasible to the immediate area where sharps are used, are to be maintained upright through use and are to be collected for disposal when ¾ full. Reusable containers shall not be opened, emptied or cleaned manually. Prior to removal or replacement, the container shall be closed to prevent spillage.

located as close as feasible to the immediate area where sharps are used, are to be maintained upright through use and are to be collected for disposal when ¾ full. Reusable containers shall not be opened, emptied or cleaned manually. Prior to removal or replacement, the container shall be closed to prevent spillage.

Note: Broken glassware, which may be contaminated, shall not be picked up directly with hands. It shall be cleaned up from its location using mechanical means, such as a brush and dust pan, tongs or forceps. Debris shall be placed in a puncture resistant container, labeled and disposed of as biohazardous waste.

Sharps Injury Log

Employers shall establish and maintain a sharps injury log, which is a record of each exposure incident involving a sharp. The exposure incident shall be recorded on the log within 14 working days of the date the incident is reported to the employer. The information in the sharps injury log shall be recorded and maintained in such a manner as to protect the confidentiality of the injured employee. The sharps injury log must be kept five (5) years from the date the exposure incident occurred.

At least annually, information collected from the sharps injury log will be evaluated to determine frequency of use of the types and brands of sharps involved in the exposure incidents as well as currently available engineering controls and work practices for procedures performed by employees in their respective work areas. Input will be solicited from non-managerial employees responsible for direct patient care who are potentially exposed to injuries from contaminated sharps for identification, evaluation and selection of effective engineering and work practice controls.

Tips for Fall Forward

- **Check and replace the batteries in your smoke detectors**
- **Check and replace the batteries in your carbon monoxide (CO) alarms.**
- **Prepare a winter emergency kit for your automobile.**
- **Park in a well -lighted area**
- **Safety in numbers so leave together whenever possible**

Tips for Computer Users

Repetitive and prolonged use of a computer keyboard and/or mouse can lead to muscle aches and discomfort. Posture and positioning are important. Try to incorporate the following tips into your work style to avoid problems.

Maintain Good Posture When Working

Sit all the way back in the chair against the backrest.

Keep your knees equal to, or lower, than your hips with your feet supported.

Keep your elbows in a slightly open angle (100° to 110°) with your wrists in a straight position. The keyboard tilt can help you attain the correct arm position. A negative tilt (front of keyboard higher than back) helps when working in upright sitting positions. If you recline, a positive tilt (front of the keyboard lower than the back) might be necessary.

Avoid Overreaching

Keep the mouse and keyboard within close reach.

Center the most frequently used section of the keyboard directly in front of you.

Center the monitor in front of you at arm's length distance and position the top of the monitor 2" to 3" above seated eye level. You should be able to view the screen without turning or tilting your head up or down.

Place source documents on a document folder positioned between your monitor and keyboard. If there is not enough space, place documents on an elevated surface close to your screen.

Use Good Typing Technique

Float your arms above the keyboard and keep your wrist straight when keying.

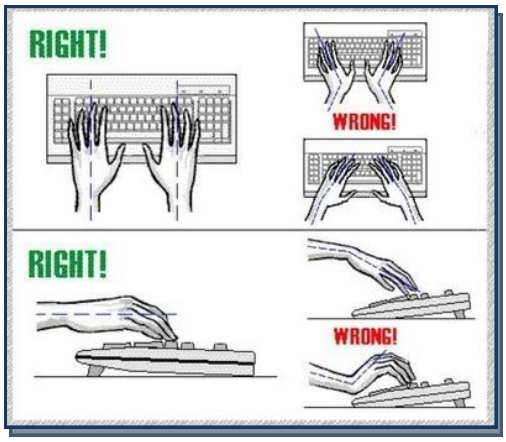
If you use a palmrest, use it to support your palms when pausing, not while keying.

Hit the keyboard keys with light force. The average user keys four times harder than necessary.

Keep your wrists straight and hands relaxed when using your pointer.

Don't hold the pointer with a tight grip or extend fingers above the activation buttons.

Avoid moving the pointer with your thumb or wrist. Movement should originate at your shoulder and elbow.



Limit Repetitive Motions

Reduce keystrokes with macros and software programs such as voice recognition. Reduce pointing device movement with scroll locks and keystroke combinations.

Reduce Glare and Eye Fatigue

Place your monitor away from bright lights and windows. Use an optical glass glare filter when necessary.

Take eye breaks and intermittently refocus on distant objects. Try palming your eyes in your hands to reduce eye fatigue.

Take Breaks

Take 1 or 2 minute breaks every 20-30 minutes, and 5 minute breaks every hour.

Take eye breaks and intermittently refocus on distant objects. Try palming your eyes in your hands to reduce eye fatigue.

Wallets

Sitting on your wallet may cause pain, tingling, and numbness in the gluteal muscles. Any pelvic tilt caused by your wallet may also lead to imbalanced muscle strain in your back and hips.

To relieve pain associated with wallet-related imbalances, carefully stretch your hamstrings and hip muscles. Also consider the Piriformis Stretch to focus on your deeper gluteal muscles.

Ref: http://ergonomics.ucla.edu/office-ergonomics/tips-for-computer-users.html