

PATIENT RESTRICTED

Coalinga State Hospital

OPERATING MANUAL

SECTION - EMERGENCIES
ADMINISTRATIVE DIRECTIVE NO. 362
(Replaces A.D. No. 362 dated 3/16/06)

Effective Date: June 14, 2007

SUBJECT: HAZARD COMMUNICATION PROGRAM

I. PURPOSE

The policy of Coalinga State Hospital is to protect the welfare of employees, patients, visitors, volunteers, and the community environment by maintaining an effective Hazard Communication Program.

II. AUTHORITY

California Code of Regulations (CCR); Title 8, Section 5194, Hazard Communication.

III. POLICY

"Right-To-Know" is part of the Hazard Communication Standard, which states that employees have a right to know what chemical hazards they face on the job and how to protect themselves from these hazards.

IV. METHOD

- A. The Health and Safety Department provides new employee overview orientation and an annual refresher course that addresses the requirements of the Hazard Communication Standard and the employee's right to information on chemical hazards they face on the job ("Right-To-Know"), and the availability of Material Safety Data Sheets (MSDS).
- B. Area supervisors are responsible for assuring that all employees are trained in the proper handling, labeling, storage, use, and disposal of hazardous materials in their work area(s), and evacuation procedures. This training must be completed upon initial assignment and before using a new hazardous material in the work area(s). The MSDS will be the basis for this training. This training shall be documented by completion of the Training sign-in sheet and forwarding it to the Training Center. The area shall retain a copy of the sign-in sheet and a listing of the hazardous materials for which training was provided.

V. MATERIAL SAFETY DATA SHEETS (MSDS)

All hazardous materials in the hospital shall have a current, legible, and complete MSDS readily accessible during each work shift to employees when they are in their work area(s). Area supervisors and managers are responsible for ensuring the accessibility of MSDS. No hazardous material will be accepted in any area without the MSDS. MSDS shall be no older than three years; if an MSDS is older than three years, it will be verified as current with a notation on the top right-hand corner.

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A. MSDS Binders and Indexes:

1. MSDS shall be kept in a binder that is easily accessible, easily identifiable, and clearly labeled "Material Safety Data Sheets". MSDS shall be arranged alphabetically in the binder. All binders shall have a numerical (1,2,3,4,5) or alphanumerical (A-1, B-1, B-2, C-1, C-2) index cross-referenced to tabs for the MSDS to enhance emergency access. All employees shall be instructed by their supervisor on the binder's location and how to locate specific MSDS.
2. MSDS binders (indexes and MSDS) shall be updated quarterly and whenever a product is added or deleted. MSDS indexes shall be verified as accurate each quarter by the supervisor's signature and date. This quarterly review shall be sent to the Health and Safety Department in January, April, July, and September.
3. The following four areas shall be highlighted on each MSDS on site only:
 - a. Product's brand name;
 - b. Manufacturer's emergency phone number;
 - c. Emergency/first aid procedures; and
 - d. Personal protective equipment.
4. All indexes shall prominently list the Chemtrec Emergency Telephone Number.

B. MSDS Inventories:

1. Supervisors are responsible for maintaining an accurate alphabetical inventory of hazardous materials used in their work area(s) and for ensuring the appropriateness of products used and quantities in inventory.
2. Inventories shall be updated quarterly and whenever a product is added or deleted, and shall be verified as accurate each quarter by the supervisor's signature and date. This quarterly review shall be sent to the Health and Safety Department in January, April, July, and September.
 - a. Unit Inventories

Program inventories may be combined with the index and shall contain the following information:

 - i. Chemical name(s);
 - ii. Location or storage of container;
 - iii. Size of containers;

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- iv. Number of containers;
 - v. Type of containers: Plastic (P), Glass (G), Metal (M), and
 - vi. Cardboard (C); Property of chemical: Gas (G), Liquid (L), or Solid (S);
 - vii. MSDS on site: Yes or No;
 - viii. Manufacturers; and
 - ix. Person in charge and Contact #.
- b. Department and Program Office inventories shall contain the following information:
- i. Product name;
 - ii. Chemical names;
 - iii. Chemical concentrations;
 - iv. Hazardous materials classification (NFPA) hazard ratings;
 - v. Size of container;
 - vi. Maximum quarterly amount; and
 - vii. Location of product.
3. The Associate Hazardous Materials Specialist (AHMS) shall review the inventories for appropriateness of both substance and quantity based on information received.
4. When a hazardous material is discontinued and the MSDS deleted, the MSDS shall be sent to the Health and Safety Department. The MSDS shall identify the Department/Program and Unit that used the product and the date the product was removed from use. The AHMS shall maintain a master file of MSDS for hazardous materials that are no longer in use.

VI. LABELING AND PROPER CONTAINERS

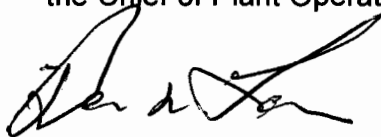
- A. All hazardous materials used in the hospital shall be stored in proper containers designed for that purpose. Each container shall be labeled as follows:
1. Original containers from the manufacturer shall have labels including:
 - a. Identity of the hazardous material.

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- b. Appropriate hazard warning regarding potential physical safety hazards and health hazards.
 - c. Name and address of the manufacturer, importer, or other responsible party.
2. Secondary containers must indicate:
- a. Identity of the hazardous material.
 - b. Appropriate hazard warnings regarding potential physical safety hazards and health hazards.
3. Placarding may be used when containers are too small to be labeled. The placard shall provide all the information necessary for a secondary label and identify the container(s) to which it is applicable.

VII. ASBESTOS NOTIFICATION

The Health and Safety Department provides annual notification to all employees and notification to new employees during new employee orientation of the location of asbestos containing materials within the hospital. Compilation of the list shall be the responsibility of the Chief of Plant Operation III.



BEN MCLAIN
Executive Director (Acting)

Cross Reference(s):

A.D. No. 366 Hazardous Materials/Waste Management Program
A.D. No. 979 Hospital Health and Safety Program