|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Employee Right to Know** | | | | |
| **Purpose** | Employee Right To Know (ERTK) is comprised of the Federal OSHA Hazard Communication Standard 29 CFR 1910.1200 and Minnesota OSHA Rules Chapter 5206 stating that employees have the right to know about any hazardous substances, harmful physical agents or infectious agents that they may encounter in the workplace.  The objective is to provide information and the training needed by laboratory employees to understand the hazards in their work areas and to have them take the necessary steps to maintain safety.  Employees have the right to:   1. Refuse to work under imminently dangerous conditions. 2. Be told about the hazardous substances, harmful physical agents and infectious agents they will be working with or exposed to. 3. Receive education on what hazards are, how to work safely with them, and how to protect themselves before being exposed to any hazardous substance or agent. | | | |
| **Definitions** | **Hazardous substance** – Any chemical or substance, or mixture of chemicals or substances which is either toxic or highly toxic, an irritant, corrosive, a strong oxidizer, a strong sensitizer, combustible, either flammable or extremely flammable, dangerously reactive, pyrophoric, pressure-generating, a compressed gas, a carcinogen, a teratogen, a mutagen, a reproductive toxic agent, or that otherwise, according to generally accepted documented medical or scientific evidence, may cause substantial acute or chronic personal injury or illness during or as a direct result of any customary or reasonably foreseeable accidental or intentional exposure to the chemical or substance.  **Harmful physical agents** – A physical agent that presents a significant risk to worker health or safety or imminent danger of death or serious physical harm to an employee. Harmful  physical agents include noise, heat, ionizing & non-ionizing radiation, and electricity.  **Infectious agents** – A communicable bacterium, parasite, virus or fungus which may cause substantial acute or chronic illness or permanent disability as a foreseeable and direct result of any routine exposure to the infectious agent. | | | |
| **Hazardous Chemical Inventory** | Hazardous Chemical Inventory (HCI)   * Each laboratory department (Chemistry, Hematology, Microbiology, Histology, etc) is responsible for maintaining a complete list of hazardous chemicals used in that department.   + Some chemicals in the laboratory are:     - Corrosive     - Flammable     - Oxidizers     - Carcinogens     - Poisonous/Toxic     - Irritants     - Explosive     - Teratogenic * The HCI list is updated annually or as needed when new chemicals are introduced for use in the laboratory. * The HCI list is available to all laboratory employees on the laboratory G drive in the Safety folder and on the hospital S drive in the Safety folder. | | | |
| **Chemical Labeling** | Containers that arrive in the laboratory with the manufacturer’s label are considered to be appropriately labeled. Manufacturer’s labels must not be removed or tampered with. Supplementing the manufacturer’s label with additional labeling is acceptable as long as the original label is not covered.  Chemical labeling includes the identity of the hazardous substance, appropriate hazard warning, and the name and address of the chemical manufacturer, importer, or other responsible party.  All laboratory employees are responsible for ensuring that the chemicals they use are properly labeled. | | | |
| **Labeling Secondary Containers** | If a chemical is transferred from its original container to another, it is the user’s responsibility to ensure that the new (secondary) container receives a proper label.  A label is **required** on a secondary or portable container IF:   * The container will be used for storage, with occasional use of the chemical * More than one person uses the chemical in the container * The chemical in the container is highly hazardous (flammable, carcinogenic, etc)   A label is **not required** on a secondary or portable container IF:   * The chemical is intended only for immediate use by the employee who performed the transfer   When in doubt, place a label on the container.  Secondary container label must have:   * Identity of the hazardous substance * Appropriate hazard warning (i.e. GHS label) * Name and address of the chemical manufacturer, unless this information is immediately available ([see M**SDSo**nline](https://msdsmanagement.msdsonline.com/a07dc954-23d8-42a9-b591-ef5763cdfd33/ebinder/?nas=True))   + SDS contains manufacturer ID   + Staff are trained in accessing SDS information   Never draw from or use a chemical container that does not have a proper label. | | | |
| **Labels** | Children’s MN laboratory utilizes the Hazardous Materials Identification System (HMIS), National Fire Protection Association (NFPA), and Globally Harmonized System (GHS) for labeling chemicals.  **HMIS NFPA**  https://safety.ag.utk.edu/safetyplan/10chemweb/Nfpa.gif  **PROTECTIVE EQUIPMENT**  A Safety glasses  B Safety glasses, gloves  C Safety glasses, gloves, synthetic apron  D Face shield, gloves, synthetic apron  E Safety glasses, gloves, dust respirator  F Safety glasses, gloves, synthetic apron, dust respirator  G Safety glasses, gloves, vapor respirator  H Splash goggles, gloves, synthetic apron, vapor respirator  I Safety glasses, gloves, dust & vapor respirator  J Splash goggles, gloves, synthetic apron, dust & vapor respirator  K Airline hood or mask, gloves, full suit, boots  X Ask your supervisor for special handling instructions.  **GHS** | | | |
| **Safety Data Sheets** | Safety Data Sheets (SDS) are intended to serve as the employee’s primary source of information regarding hazardous chemicals.  The hospital maintains the SDS library for chemicals on the Hazardous Chemical Inventory list.  When new hazardous chemicals are introduced into the laboratory, department leaders should obtain an SDS from the manufacturer or distributor, and forward it to the safety department or purchasing department to be added to the SDS library. These SDS must be received at the hospital prior to, or at the time of receipt of the first shipment of the hazardous chemical from the vendor.  Laboratory staff access [M**SDS**online](https://msdsmanagement.msdsonline.com/a07dc954-23d8-42a9-b591-ef5763cdfd33/ebinder/?nas=True) via Children’s Star Net home page. | | | |
| **Training** | New employees complete:   * Safety Management online course   + Employee Right-to Know   + Chemicals and chemical hazards     - Chemical labeling     - Safe handling & storage     - Locate Hazardous Chemical Inventory online   + Hazardous waste     - Labels     - Collect & store       * Satellite accumulation rules     - Disposal   + Chemical safety     - PPE     - Eyewash & safety showers     - SDS       * Information they contain       * Location – how to access   + Exposure and spill response * Infection Prevention online course   + Standard precautions   + Hand hygiene   + Bloodborne pathogens * Employee Safety online course   + Work related injuries/illnesses   + Ergonomics   + Emergency management   + Safety policies * Laboratory orientation where the laboratory safety program is introduced   Employees annually complete:   * Safety Management online course * Infection Prevention online course * Employee Safety online course     The safety information provided is specific to hazards in the laboratory.  Records of laboratory employee training will be maintained. | | | |
| **Supporting Documents** | [960.00 Employee Right to Know Program](http://khan.childrensmn.org/manuals/policy/900/005665.pdf)  [938.00 Safety Management Plan](http://khan.childrensmn.org/manuals/policy/900/005331.pdf) | | | |
| **References** | 1. MN Office of Occupational Safety and Health. Employee Right to Know (Minnesota Rules Part 5206). 2. MN Department of Labor and Industry. Occupational Safety and Health Division. An Employer’s Guide to Developing a Hazard Communication or Employee Right-To-Know Program. January 2017. 3. CLSI. *Clinical Laboratory Safety; Approved Guideline – Third Edition.* CLSI document GP17-A3. Wayne, PA: Clinical and Laboratory Standards Institute; 2012. | | | |
|  | | | | |
| **Historical Record** | **Version** | **Written/Revised by:** | **Effective Date:** | **Summary of Revisions** |
| 1 | Kerstin Halverson | 11/13/03 | Initial |
|  | 2 | Carol Buhl | 05/29/15 | Reformatted to CMS.  Renumbered from 3.1.  Added HCI information.  Added Chemical Labeling information.  Added Label examples.  Updated SDS information.  Expanded Training section to include online courses and content.  Added Supporting Documents and References. |
|  | 3 | Carol Buhl & Lab Safety Committee | 08/17/18 | Added hyperlinks to MSDSonline.  Expanded Labeling Secondary Containers section:  Added criteria for secondary container label.  Added statement ‘Never draw from or use a chemical that does not have a proper label’.  Updated references. |

`