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September 11, 2015

Amalia Neidhart  
Senior Safety Engineer  
DOSH Research & Standard Health Unit  
495-2424 Arden Way  
Sacramento, CA 95825

**Re: Hotel Housekeeping Musculoskeletal Injury Prevention Regulation**

Dear Ms. Neidhardt,

On behalf of the UCLA Labor Occupational Safety and Health Program (UCLA-LOSH), I submit these comments regarding the adoption of a regulation to prevent the risk of musculoskeletal injuries experienced by hotel housekeepers.

A sizable body of research over the years has demonstrated high rates of musculoskeletal injuries within this workforce. UCLA-LOSH has collaborated with UNITE HERE and other partners to conduct education sessions with hotel workers that included using body maps to collectively identify patterns of injury and reviewing OSHA-mandated Logs of Injuries and Illnesses and Incident Reporting Forms at hotels of concern. More recently, we have supported student interns working with UNITE HERE in Los Angeles and Orange County to document musculoskeletal concerns among hotel employees and investigate ergonomic interventions to reduce injury risk during housekeeping tasks.

We would like to submit the following comments on the proposed changes, deletions and edits regarding the hotel housekeeping musculoskeletal injury prevention regulation:

**1. Joint labor-management health and safety committee**

Joint labor-management health and safety committees provide the optimal platform for workers to advocate on behalf of themselves and their co-workers. Currently, employers can elect to use such committees under the Injury and Illness Prevention Plan (IIPP) communication requirement (CCR Title 8 §3203). Such committees would provide workers the opportunity to raise their collective concerns and leverage their knowledge and experiences in the workplace. This model would allow meaningful worker participation and would contribute to the creation and implementation of effective policies, practices, and procedures to prevent musculoskeletal injuries amongst hotel housekeepers.

**2. Housekeeping musculoskeletal injury prevention program (MIPP)**

MIPP, subsection (c)(3) should distinguish between the following key components of communication:

Language about the employer's responsibility to communicate the nature and type of workplace hazards and how they relate to the risk factors of MSDs.

Language focusing on the employer's responsibility to create a system of communication between the housekeeper and the employer by which the employee can communicate signs, symptoms, and MSD injuries to the employer.

Language that allows the worker to complain without fear of reprisal.

### **3. Job hazard Analysis (JHA)**

In Subsection (c)(4)(E) 1, a job hazard analysis should address:

An assessment of the potential injury risks to housekeepers including but not necessarily limited to: (1) lifting and forceful exertions; (2) prolonged or awkward static postures; (3) extreme reaches and repetitive reaches above shoulder height, (4) torso bending, twisting, kneeling, and squatting; (5) pushing and pulling; (6); (7) pressure points where a part of the body presses against an object or surface; (8) excessive work-rate; (9) inadequate recovery time between tasks; (10) slips, trips and falls; and (11) falling and striking objects.”

Where appropriate, measurements of force, lifting and other quantitative measures of the hazard should be included as considerations as well as maximum weight lifting requirements.

A safe work-rate should consider the following two elements:

- (a) a pace at which a guest room is cleaned that allows the housekeeper to recover between tasks, i.e. making the bed, cleaning the bathroom, vacuuming the guest room, pushing the cart in the hallway and other routine housekeeping tasks;
- (b) an amount of time allotted to cleaning a guest room that allows the housekeeper sufficient time to perform these tasks using safe work practices. Safe work practices are those that decrease the likelihood that MSDs will occur by reducing the number of MSD risk factors, e.g. walking with a vacuum cleaner instead of bending forward using quick movements to cover more territory or taking the time to walk along each side of the bed and untuck the sheets instead of standing by one side of the bed and yanking all the sheets and duvet off the bed with extreme, forceful arm movements and extreme forward bending. (See Safe Work Practice UNITE HERE Petition 526 to OSHSB 2012.)

Employers should provide documentation of how the safe work-rate has been determined as an element of the job hazard analysis.

### **4. Methods or Procedures for correcting risk factors**

Subsection (c)(6)(A) regarding effective means to involve housekeepers in the identification and evaluation process, should include a provision for employees to record their observations and suggestions in writing.

### **5. Training**

In subsection (d)(2), effective training should include information on the employer's program and process to identify risk factors that lead to symptoms and injuries, how to identify risk factors, injuries, and symptoms related to MSD injuries, how to report signs of MSD injuries, injuries, symptoms and risk factors, and the importance of reporting. Training should also provide an opportunity for employee questions and for employees to practice with equipment they will use.

Manager and supervisor should include:

- 1) The signs, symptoms and risk factors of MSDs;
- 2) The importance and mechanism for early reporting of signs, symptoms and MSD injuries by the employee to the employer;
- 3) The elements of safe housekeeping practices; and
- 4) How to identify hazards, the employer's hazard correction procedures, how defective equipment can be identified and replaced, how to obtain additional equipment.

### **6. Employee notification and participation**

In order for regulations to be effective, employees must be trained and given the opportunity to participate in successful implementation without fear of reprisal. Potential areas of the standard to integrate opportunities for employee participation include:

- (c)(3) The system for communicating health and safety issues;
- (c)(4) The procedures for identifying and evaluating housekeeping hazards through a job hazard analysis;
- (c)(5) Procedures to investigate musculoskeletal injuries to housekeepers;
- (c)(6) Methods or procedures for correcting, in a timely manner, hazards identified in the job hazard analysis;
- (d) Training; and
- (e) Records.

A posting requirement which promptly notifies workers of the results of the JHA and provides the joint labor-management health and safety committee with the results can facilitate communication and employee participation.

We thank you for your consideration of these comments.

Sincerely,

A handwritten signature in cursive script that reads "Linda Delp".

Linda Delp, PhD, MPH  
UCLA-LOSH Director