

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,

We would like to extend our appreciation to the Advisory Committee for preparing these proposals for our review and taking into consideration our previous comments. It is obvious that the proposed changes took a great deal of thought and time on the part of the Advisory Committee staff and we appreciate that.

Firstly, echoing previous comments made at many public meetings and in written comments, Worksafe fully supports the adoption of an effective regulation to prevent the risk of musculoskeletal injuries experienced by hotel housekeepers. As stated in previous comments, there is ample evidence to support the need for creating such a standard. (See Worksafe Comments 6/11/2015 and 10/23/2012). Furthermore, the hotel industry has not produced evidence to counter the widespread acceptance of ergonomic design hazards in their sector.

Next, on behalf of Worksafe, 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. We support adding language to this standard requiring employers to collaborate with workers in developing a joint-labor management health and safety committee. Currently, employers can elect to use such committees under the Injury and Illness Prevention Plan (IIPP) communication requirement. (Cal. Code Regs., tit. 8 § 3203.) Such committees would provide workers the opportunity to raise their collective concerns, and leverage their knowledge and experiences in the workplace. Requiring employers to adopt 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. Ultimately, we support requiring employers to use joint labor-management health and safety committees under this standard.

2. Representative

The definition of representative should be consistent with Labor Code section 6309, which reads "an employee's representative includ[es] but is not limited to, an attorney, health or safety professional, union representative, or government agency representative." Therefore, we support amending the draft definition of "representative" to be consistent with Labor Code section 6309.

3. Housekeeping musculoskeletal injury prevention program (MIPP)

MIPP, subsection (c)(3) should be divided into three parts, as follows:

For example, (c)(3)(A) should include language about the employer's responsibility of communicating the nature and type of workplace hazards and how they relate to the risk factors of MSDs. Subsection (c)(3)(B) should include 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. Subsection (c)(3)(C), should include language that allows the worker to complain without fear of reprisal.

4. Job hazard Analysis (JHA)

Subsection (c)(4)(E) 1, should read as follows:

"The job hazard analysis shall address at a minimum:

1. 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; (11) falling and striking objects and"

Additionally, where appropriate, measurements of force, lifting and other quantitative measures of the hazard should be included as considerations under this section. Consideration should also be given to maximum weight lifting requirements.

Subsection (c)(4)(E)(2), regarding safe work-rate should include the following language: "At minimum, the safe work-rate shall preclude a work-rate that can be *reasonably foreseen* by the employer to increase the risk of MSDs..."

In addition, this subsection should include parts 3, and 4, as stated below:

"3. A safe work-rate shall take into consideration 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.)

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

5. Procedures for investigating musculoskeletal injuries

In subsection (c)(5)(C), the word "opinion" should be changed to "input." The word "opinion" is too subjective.

6. Methods or Procedures for correcting

In subsection (c)(6) (A), regarding effective means to involve housekeepers in the identification and evaluation process, should include the following language: "and a means for employees to record their observations and suggestions in writing."

In subsection (c)(6)(B), regarding development of a means by which appropriate equipment or other corrective measures will be identified, should include a foot note stating, "consideration will be given to tools such as: fitted bed sheets; mops; long-handled and adjustable length tools for dusting and scrubbing walls, showers, tubs, and other surfaces; and light-weight or motorized carts. Additionally, these tools should also be considered during the JHA as specific remedies."

7. Training

In subsection (d)(2) language should be added requiring employers to include the following information when training housekeepers. First, an effective training must include information on the employer's program and process in identifying risk factors that lead to symptoms and injuries. Next, training must include information on how to identify risk factors, injuries, and symptoms related to MSD injuries. Additionally, training must include information on how to report signs of MSD injuries, symptoms and risk factors and its importance.

Language should also be added to the subsection requiring employers to train on the practice in the guest room performing housekeeping tasks using the types and models of equipment that the housekeeper will be expected to use <u>by an expert knowledgeable of 1) safe room cleaning</u> practices, 2) the employer provided equipment and procedures and carried out in a format of interactive questions and answers. (suggested language to add underlined and italicized.)

As for training of managers and supervisors, language should be added as follows: "Training of managers and supervisors on:

- 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;

8. Employee participation throughout the standard

In order for regulations to be effective, employee participation must be included throughout the standard. Other standards, such as the process safety management standard, include employee participation throughout the standard. (Cal. Code Regs., tit. 8 § 5189.) Workers need to be included in a meaningful way. Employers should be responsible for ensuring that workers have the opportunity to participate in every aspect of the standard. Language that makes employee participation mandatory should be included throughout the standard. Such language should be included within the following sections but not limited to:

- (c) (3) the system for communicating with housekeepers health and safety issues;
- (c) (4) in 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

9. Employee notification

We recommend including a posting requirement which promptly notifies workers of the results of the JHA, such as, "Posting will occur within 14 days of when management completes the JHA, or any updated JHA. The joint labor-management health and safety committee will receive a copy at the same time as the posting." Other standards, such as the lead standard include an employee notification process. (Cal. Code Regs., tit.8, § 5198, subd. (8)(A).) The lead standard requires employers to notify each employee in writing of the exposure results within 5 working days after the receipt of monitoring results.(*Ibid*.) We therefore support the inclusion of such language in this standard.

We thank you for your consideration of these comments.

Sincerely, Nicole Marquez

Nicole Marquez Staff Attorney Worksafe