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From: Melissa.Temkin. (PSC)
Sent: Friday, June 27, 2008 1:51 PM
To: NIOSH Docket Office (CDC)
Subject: 135 - NIOSH Healthcare Workers Survey
Attachments: Worker safety survey pdf.pdf

To Whom It May Concern:

Attached please find the American Health Care Associations comments on the NIOSH Survey of Healthcare Workers' Safety and Health and NIOSH Survey of Healthcare Employer Safety and Health Practices.

Thank you,

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June 27, 2008

NIOSH Mailstop: C-34
Robert A. Taft Laboratory
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Re: NIOSH Docket Number 135, Request for Comments on NIOSH Survey of Healthcare Workers' Safety and Health and NIOSH Survey of Healthcare Employer Safety and Health Practices, 73 Federal Register, April 2, 2008

To Whom It May Concern:

The American Health Care Association (AHCA) and the National Center for Assisted Living (NCAL) welcome the opportunity to provide comments to the National Institute for Occupational Safety and Health (NIOSH) on the proposed Survey of Healthcare Workers' Safety and Health, and the proposed Survey of Healthcare Employer Safety and Health Practices.

AHCA and NCAL represent more than 10,000 non-profit and for-profit providers dedicated to continuous improvement in the delivery of professional and compassionate care for our nation's frail, elderly and disabled citizens who live in long term care (LTC) facilities, including nursing facilities, assisted living residences, sub-acute centers and homes for individuals with developmental disabilities. Our member facilities employ nearly one million workers, the majority of whom are front-line caregivers. AHCA/NCAL also represents LTC to the Department of Labor, the Centers for Disease Control and Prevention; the Department of Health and Human Services Centers for Medicare & Medicaid Services; the Institute of Medicine; and other agencies and organizations in various worker safety initiatives.

Executive Summary

NIOSH is requesting public comment on the content and conduct of a survey of healthcare workers' safety and health and a survey of healthcare employers' safety and health practices. The goal of the healthcare worker survey is to collect information describing hazards, exposures, safety and health practices, and use of exposure controls by occupation, type and size of establishments.

THE AMERICAN HEALTH CARE ASSOCIATION IS COMMITTED TO PERFORMANCE EXCELLENCE AND QUALITY FIRST, A COVENANT FOR HEALTHY, AFFORDABLE AND ETHICAL LONG TERM CARE. AHCA REPRESENTS MORE THAN 10,000 NON-PROFIT AND FOR-PROFIT PROVIDERS DEDICATED TO CONTINUOUS IMPROVEMENT IN THE DELIVERY OF PROFESSIONAL AND COMPASSIONATE CARE FOR OUR NATION'S FRAIL, ELDERLY AND DISABLED CITIZENS WHO LIVE IN NURSING FACILITIES, ASSISTED LIVING RESIDENCES, SUBACUTE CENTERS AND HOMES FOR PERSONS WITH MENTAL RETARDATION AND DEVELOPMENTAL DISABILITIES.

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The goal of the management survey is to collect information by type and size of establishment by: describing facility-based health and safety resources, safety and health management programs, and policies and practices for the health and safety hazards covered in the worker survey. Information collected from these hazard surveillance surveys will be useful in identifying gaps relative to the use of best practices and define future research and intervention priorities.

AHCA/NCAL Comments and Recommendations

This draft guidance has been well thought out and is comprehensive, but AHCA/NCAL has some concerns and recommendations relating to LTC facilities as follows:

- NIOSH states that the surveys were pilot-tested at two large medical centers to evaluate response rates, validate the management and worker questionnaires, etc. In addition, NIOSH states that the management questionnaire was validated at four hospitals that completed the surveys and permitted NIOSH on-site visits to assess the accuracy of the hospitals' responses. As LTC facilities operate quite differently from medical centers and hospitals, these pilot tests would not accurately reflect the appropriateness of these surveys for LTC. **Therefore, AHCA/NCAL recommends that NIOSH pilot test these surveys in LTC facilities and revise them as appropriate.**
- The surveys are lengthy and complex, and it will take much longer for employees and managers to complete the surveys than NIOSH estimates; especially as many of the questions in the management survey would require additional significant research and staff coordination to obtain a response. In addition, LTC facility staff are too busy caring for their residents to take the time needed to accurately complete these lengthy surveys. An additional stumbling block is the requirement that the surveys be completed by computer as computer use is restricted and limited in LTC facilities.. The resultant low response rate would render a non-representative sample of employees and managers completing the survey. **Therefore, AHCA/NCAL requests that NIOSH revise the surveys to be less lengthy and establish a mail-in option for management and employees to complete the surveys.**
- Management Questionnaire:
 - a. Routine medical surveillance for workers: The management questionnaire consistently and inaccurately implies that routine medical surveillance of workers, without apparent clinical problems, is a best practice standard to promote safety. Although LTC facilities do perform skin testing for occupational exposure to tuberculosis and have occupational health programs for employee referral in cases of injury, etc., there is little rationale for general health surveillance. **Therefore, AHCA/NCAL recommends that NIOSH**

remove the implication throughout the management questionnaire that broad medical surveillance of workers is routinely appropriate beyond that for tuberculosis exposure.

- b. Questions A15 and A18: These questions ask whether there is an individual at the facility whose **primary** [emphasis supplied by NIOSH] responsibility is to manage the occupational safety program, or an individual to manage the occupational or employee health program. The “yes” or “no” response options to these questions are inappropriate as, in LTC, coordinating these programs would not be the primary function of the manager, who is probably a member of the maintenance staff, is the director of nursing, etc. Therefore, AHCA recommends that NIOSH add an alternative response option that is more appropriate for LTC as our staff perform numerous functions in their roles, only one of which may be management of facility safety programs.
 - c. Question A 26: This question inquires about the facility’s emergency preparedness plan. LTC facilities are not equipped for isolation beds (e.g., having extensive ventilation systems,) or for systems to decontaminate victims/facility personnel affected by contaminants, as are listed in this question. These equipment and systems would be inappropriate as LTC facilities do not admit patients with tuberculosis or they discharge them upon diagnosis in order to protect the much larger numbers of rehabilitation and long-term stay patients. However, LTC facilities correctly have programs in place to prepare employees for emergencies, such as shelter in place and evacuation plans, employee vaccination programs, etc. Therefore, AHCA/NCAL recommends that NIOSH add an additional alternative response to the survey which is appropriate to evaluate LTC emergency preparedness.
- Worker Core Module:
 - a. NIOSH’s “population based” approach to gather hazard surveillance data from health care workers by partnering with various labor unions and professional associations (that will in turn send surveys out to their members) likely will render an unrepresentative sample of the total population of workers nationwide. In LTC, labor unions such as the Service Employee’s International Union (SEIU,) are concentrated only in certain areas of the country, so union member responses could skew survey results and make them unrepresentative of healthcare workers nationwide. **Therefore, AHCA/NCAL recommends that NIOSH evaluate the geographic membership of the organizations it partners with to promote obtainment of more nationally representative health care worker data.**
 - b. Unlike the management questionnaire, there is no way to validate the results of the worker questionnaire because it includes no information that could link a worker to his or her place of employment. This is in contrast to NIOSH indicating that it will validate some samples of management questionnaire responses via healthcare facility site visits. **AHCA/NCAL recommends that**

NIOSH establish a validation process for the worker questionnaire; if this is not feasible, NIOSH needs to note in its conclusion reports and press releases that survey results should not be used to make generalizations about entire employee populations.

- c. Question 21: Some of the questions in this "Job Demands" section appear unnecessary and add length to an already inappropriately long survey. Examples are when employees are asked for their level of agreement with item c, "My job requires me to be creative," and item f, "I have an opportunity to develop my own special abilities." These inquiries have no bearing on employee safety programs. **Therefore, AHCA/NCAL recommends that NIOSH pare down survey questions to those applicable to employee safety issues.**
- The questions in the employee core questionnaire and modules consistently exclude masks from the definitions of personal protective equipment (PPE.) However, surgical masks do remain important and are effective in healthcare settings for preventing many nosocomial infections. **Therefore, AHCA/NCAL recommends that surveys list masks as an appropriate type of PPE.**

AHCA/NCAL appreciates the opportunity to submit comments on the NIOSH Survey of Healthcare Workers' Safety and Health and the NIOSH Survey of Healthcare Employer Safety and Health Practices, and how they affect LTC providers. We encourage NIOSH to contact us at any time for additional information.

Sincerely,



Bruce Yarwood
President & CEO