

NUTRITION AND FOOD SERVICES SAFETY

- 1. REASON FOR ISSUE.** This Veterans Health Administration (VHA) Handbook defines the mandated Nutrition and Food Services procedures regarding safety issues.
- 2. SUMMARY OF MAJOR CHANGES.** This is a new Handbook that includes guidelines to assist NFS managers with the review and follow-up of workers' compensation for food service employees.
- 3. RELATED DIRECTIVE:** VHA Directive 1109.
- 4. RESPONSIBLE OFFICE:** The Office of Patient Care Services, Director, Nutrition and Food Services (111N) is responsible for the contents of this Handbook. Questions may be addressed to 202-273-8516.
- 5. RESCISSION.** VHA Manual M-2, Part III, Chapter 6, Safety Management Programs, is rescinded.
- 6. RECERTIFICATION.** This VHA Handbook is scheduled for recertification on or before the last working date of March 2012.

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NUTRITION AND FOOD SERVICES SAFETY

1. PURPOSE

This Veterans Health Administration (VHA) Handbook defines the mandated Nutrition and Food Services procedures regarding safety issues. *NOTE: The information and guidance in this Handbook describes actions and requirements relevant to food service practices and does not supersede other Department of Veterans Affairs (VA) or VHA documents that cover the same or similar topics in other settings or VA-wide.*

2. DEFINITIONS

a. **Hazardous Materials.** Hazardous materials are any substance, or combination of substances, that has properties capable of producing adverse effects on the health or safety of a human. They are designated as such by Title 29 Code of Federal Regulations (CFR), Part 1910, Subpart Z, Toxic and Hazardous Substances, and by the American Conference of Governmental Industrial Hygienists (ACGIH) Threshold Limit Values.

(1) Hazardous chemicals are classified as either or both of the following:

(a) **Health Hazards.** Health hazards include chemicals which are carcinogens, toxic or highly toxic agents, reproductive toxins, irritants, corrosives, sensitizers, hepatotoxins, nephrotoxins, neurotoxins, agents which act on the hematopoietic system, and agents which damage the lungs, skin, eyes, or mucous membranes.

(b) **Physical Hazards.** Physical hazards cause destructive changes to the physical environment; they include, but are not limited to: combustible liquids, compressed gases, explosives, flammables, organic peroxides, oxidizers, pyrophorics, and any other unstable or reactive chemicals.

(2) Hazardous materials include infectious materials such as biohazardous wastes and radioactive materials.

b. **Ground Fault Circuit Interrupter (GFCI).** An GFCI is an electronic device that constantly monitors the amount of current flowing through a circuit and cuts off the electricity at the first sign of an imbalance.

c. **Personal Protective Equipment (PPE).** PPE is all clothing and other work accessories designed to create a barrier against work place hazards (see Occupational Safety and Health Administration (OSHA) Guidebook 3077, Personal Protective Equipment).

d. **Automated Safety Incident Surveillance and Tracking System (ASISTS).** ASISTS is the software utilized by VHA to track workplace incidents.

e. **National Fire Protection Association. NFPA.** NFPA is a non-regulatory body responsible for writing and publishing the national fire codes.

3. RESPONSIBILITIES OF THE CHIEF, NUTRITION AND FOOD SERVICES, OR PROGRAM MANAGER

The Chief, Nutrition and Food Services, or Program Manager, is responsible for:

a. Supporting the medical center's Safety and Infection Control Program by developing policies and procedures that maintain a safe and sanitary work environment and address the safe handling of food and nutrition products provided for patients and residents.

b. Establishing Standard Operating Procedures (SOPs) that implement OSHA regulatory requirements, the Hazard Analysis and Critical Control Point (HACCP) food service safety standards, the guidelines of the Joint Commission on Accreditation of Healthcare Organizations (JCAHO), and the Food and Drug Administration (FDA).

c. Developing and publishing a local medical center policy that addresses the responsibility for the safe handling, storage, preparation and service of food products. *NOTE: Guidance can be found in VHA Handbook 1109.3.*

d. Developing the fire plan with the assistance of qualified personnel (e.g., safety managers, safety specialists, industrial hygienists, safety engineers, fire protection engineers, etc.), and obtain the approval of necessary medical center committees.

e. Ensuring facility level policy is adhered to in terms of hazardous material management (see par. 6).

f. Identifying the potential hazards that could cause injury or illness and determining the PPE needs for each position in consultation with the Safety Manager.

g. Orienting and educating staff members regarding the process for reporting all incidents of occupational illness and personal injury, general safety processes, area specific safety, specific job related hazards and provision of safety related information. This can be accomplished by the establishment of a Safety Subcommittee.

h. Protecting the safety and health of employees, developing an annual training plan, maintaining training records and reports, and providing required reports to the medical center Environment of Care or Safety Committee.

i. Coordinating an annual safety inspection, with the appropriate services, as part of the preventive maintenance program.

4. SAFETY SUBCOMMITTEE

It is recommended that a safety subcommittee, composed of employees from different levels and areas of the service, be established to identify problem areas and to offer and implement solutions. Meetings are scheduled to accommodate the needs of the service. Minutes will be forwarded to the required medical center committees as delineated in medical center policies.

a. The safety subcommittee must analyze and evaluate occupational illness and accidents within the service as to:

- (1) Type of injury,
- (2) Cause of injury,
- (3) Results, and
- (4) Recommended follow-up action.

b. Duties of the subcommittee members include:

(1) Participation in Nutrition and Food Services safety inspections of equipment and work environment,

- (2) Reviewing work orders for safety issues,
- (3) Making recommendations for corrective action,
- (4) Assisting with the implementation of corrective actions, and

(5) Monitoring and developing, as required, an accident and/or occupational illness reduction plan and goals. This plan must include:

- (a) Type of injury,
- (b) Location (where the injury took place),
- (c) Time of injuries and/or illness occurring,
- (d) Body part affected,
- (e) Employee job classification, and
- (f) Corrective action planned or implemented.

c. Subcommittee meetings need to include an educational segment, which would cover such topics as:

- (1) Equipment operation safety,
- (2) Environmental safety and sanitation,
- (3) Fire drill review,

- (4) Treatment and handling of hazardous waste,
- (5) Emergency preparedness plan, and
- (6) Proper reporting, documentation, and follow-up of accidents and occupational illnesses.

5. FIRE SAFETY

In accordance with VA Directive 7700.1, Occupational Safety and Health, a fire plan is required for each VA Health Care System. In specific departmental responses to fire related emergencies:

a. The Fire Plan can be based on Rescue, Alert, Contain, Extinguish, and Evacuate (RACE) and must include:

(1) Evacuation instructions and procedures to follow in the event of an (Occupant Emergency Plan), such as:

- (a) Methods of reporting the fire,
- (b) Use of fixed and portable fire extinguishing equipment, and
- (c) Assignment of specific duties.

(2) Procedures to ensure safety of patients, residents, visitors, and employees and the continuity of operations in the event of a natural disaster or other emergency in accordance with each VA facility's emergency preparedness plan:

(3) Procedures to ensure that all equipment and systems installed to prevent or control ignitions or fires are maintained and operated properly, that processes are controlled, and that adequate emergency response procedures are implemented. All fire prevention equipment must be inspected in accordance with the applicable NFPA standard.

(4) Personnel on all shifts must participate in annual training and periodic fire drills. This training includes the:

- (a) Facility and Nutrition and Food Services Fire Plans;
- (b) Use and function of fixed and portable fire extinguishment systems;
- (c) Transmission of alarms, including silent alarms, general alarms, and the implementation of the "all clear;"
- (d) Movement of patients, residents, and personnel to safety; and
- (e) Containment of smoke and fire.

b. NFPA 96 requirements that all commercial cooking equipment (such as deep fat fryers, ranges, griddles, and broilers) that might be a source of ignition of grease must be protected with appropriate fire suppression systems.

6. HAZARDOUS MATERIALS

Hazardous chemicals or materials must be handled, stored, used, and disposed of in a responsible manner. Nutrition and Food Services is responsible for:

a. Storing chemicals in accordance with VHA Handbook 1109.03, and local facility policy.

b. Maintaining a current hazardous material inventory list and Material Safety Data Sheets (MSDS) in each work area. MSDS references must be updated with all product changes immediately. If there are no new products or changes, MSDS references are to be reviewed, at least annually, to ensure that they are current (include a table of contents for quick reference in emergent situations).

c. Ensuring all chemicals in use are properly labeled, which includes the:

(1) Identity of the hazardous chemical;

(2) Appropriate hazard warning; and

(3) Name and address of chemical manufacturer, importer, or other responsible party.

d. Following proper spill containment procedures:

(1) **Minor Chemical Spill.** A minor spill is an accidental release of a hazardous chemical that can be managed by an employee who spilled or found the hazardous material. The employee who spilled or found the material needs to have knowledge of the chemical (MSDS) so that the employee can safely and effectively manage the spill. The employee needs to obtain the MSDS reference for that product and follow the spill clean up procedures.

(2) **Major Chemical Spill.** A major spill is an accidental release of a hazardous chemical that cannot be safely contained and cleaned by the employee who spilled or found the material. *NOTE: Such a spill that may cause damage to health, property, and the environment.* The area needs to be immediately evacuated, all doors closed, and the facility safety office notified to handle clean up. Any employee who experiences chemical exposure needs to seek medical attention immediately.

e. Training appropriate employees when initially assigned and henceforth annually, and when a new product is introduced into the area, in OSHA Standards, and proper facility procedures, such as:

(1) Proper use of and disposal of hazardous materials.

(2) Proper labeling of containers and how to read labels and MSDS sheets.

- (3) Emergency procedures for chemical spills or accidental over exposure.
- (4) Proper use of PPE.
- (5) Physical and health hazards in the work environment.
- (6) How to read and understand labels and MSDS references.
- (7) Location of MSDS references.

7. EQUIPMENT SAFETY

a. Kitchen Equipment

(1) The following recommendations identify potential hazards associated with kitchen machinery and the safety practices to follow. The list is not all-inclusive for every category of equipment. Refer to the manufacturer's manuals for specific recommendations on the use and care of all equipment.

(a) Mincers, Choppers, Dicers, Food processors, Mixers, Slicers

1. Use push sticks or tamps to feed, or remove food, from machines, do not use hands to feed pieces of meat.

2. Use machine guards that are provided; do not bypass any of the safety guards.

3. Do not open or put hand into an operating machine to stir contents, remove or guide food.

4. Turn off and unplug the machine before disassembling and cleaning.

5. Do not wear loose clothing or jewelry that could become caught in machinery. **NOTE:** *It is necessary for each employee to follow proper grooming policy.*

(b) Microwave Oven. The microwave is to be located at approximately waist level and within easy reach, and the manufacturer's instructions for operating the microwave must be followed.

1. Cover food to avoid splattering.

2. Use caution when opening tightly covered containers.

3. Use PPE, such as hot pads when removing foods.

4. Make sure door seals are in good condition and free from food or grease buildup.

5. Do not use a microwave if it has a door that is damaged or doesn't lock properly.
6. Do not microwave metals, foil, or whole eggs.
7. If sparking occurs inside the microwave, immediately turn off the microwave, unplug it and do not use.
8. Be aware that food continues to cook or heat up after the microwave shuts off.

(c) Steamers, Combination Ovens, and Pressure Cookers

1. Do not open the door while the steamer is on, shut off the steam, and then wait before releasing the pressure and opening.
2. Open the steamer door by standing to the side, keeping the door between you and the open steamer.
3. If a steamer is stacked, remove the tray from the top steamer first, then the lower one, to prevent burns from rising steam.

b. **Electrical Hazards.** Electrical hazards can be eliminated through safeguards and safe work practices. Electricians are responsible for the repair of all electrical equipment and receptacles.

- (1) Use ground fault circuit interrupters (GFCIs) on all 120-volt, single phase, and 15- and 20-ampere receptacles where electricity and water coexist.
- (2) Plugs should match outlets; for example, polarized plugs, with one prong wider than the other, require polarized receptacles.
- (3) Electricians should ensure that all circuit breakers or fuse boxes bear a label for each circuit breaker or fuse that clearly identifies its corresponding outlets and fixtures.
- (4) Workers should be informed that, in the event of an electrical injury, no contact should be made with the victim or the electrical apparatus causing the injury until the current has been shut off.
- (5) Electricians should have sufficient access and working space around all electric equipment to permit ready and safe operation and maintenance of such equipment.
- (6) Provisions of the medical center lock-out and tag-out policy must be followed, when and wherever applicable.
- (7) Report and identify all damaged receptacles and/or cords and remove any portable electrical equipment from use until all needed repairs are completed.

(8) Use of power strips, multiple plugs, or extension cords must be avoided. These temporary wiring devices can cause an overload of the circuits.

(9) Use of portable appliances near a sink filled with water must be avoided. If any electric-operated appliance falls in the water, anyone nearby could be electrocuted.

(10) All electrical equipment must be Underwriter's Laboratory (UL) listed.

(11) All ON and OFF switches, electrical panels, and electrical closets must be readily accessible at all times.

c. **Knife Safety**

(1) Follow OSHA Hand Protection Standard 1910.138a, which requires employers to make available appropriate hand protection equipment when hands are exposed to hazards such as cuts and lacerations; for example, use steel mesh or Kevlar gloves when cutting.

(2) Keep knives sharpened and in good condition; dull knives tend to slip and may cause injury. Tell other staff when knives are newly sharpened.

(3) Store knives in a designated storage area when not in use. Do not store the blades with the cutting edge exposed.

(4) Clean knives immediately after use or place them in a dishwasher or a container labeled "for knives only." Do not place knives and other sharp objects in sinks between periods of use.

d. **Training.** All Nutrition and Food Services employees who are required to operate equipment must be trained in its safe use.

(1) Training methods need to include in-service programs, manufacturer training classes, and on-the-job training. An evaluation method needs to be included for employees to describe and demonstrate competencies learned.

(2) The training plan must include the proper use of equipment and address the following:

(a) Improper operating procedures that are likely to pose a threat, and

(b) Safe operation and cleaning of equipment.

e. **Operation of an Indoor Motorized Vehicle.** The most common types of indoor motorized vehicles found in the medical facility are commonly referred to as a "widgets" or "tuggers," and motorized pallet jacks. These devices are collectively referred to as "indoor vehicles."

(1) **Operating Requirements.** Vehicles must always be operated in a safe manner. **NOTE:** Refer to manufacturer's operating manual for specific recommendations for use of the vehicles.

(a) Vehicles must be driven only for legitimate work related needs, and only by officially-designated employees who have had the appropriate training.

(b) Vehicles are not to be operated on public roadways.

(c) Any defective vehicles must be reported to the supervisor.

(d) Any accidents involving indoor vehicles must be reported promptly to the supervisor.

(e) Vehicles (except pallet jacks) are not permitted on the elevators.

(f) Passengers are limited to the seating capacity of the vehicle.

(g) Riding on motorized jacks is not permitted.

(2) Vehicle Regulations

(a) The operator must remove the key when the vehicle is unattended.

(b) The vehicles may be charged only in designated areas.

(c) Governors are to be adjusted on the vehicle so that the speed is sufficient to the load, and not in excess of manufacturer's recommendations, which would put patients, visitors, or employees at risk.

(d) Vehicles must have a horn, bell, or other warning device.

(3) Operator Regulations. Vehicle operators must have a valid driver's license.

(a) Pedestrians always have the right of way.

(b) Stop at all corridor intersections.

(c) Sound horn or bell when approaching any "blind" intersection, turn or similar area.

(d) Reduce speed in congested areas and sound horn.

8. PROTECTIVE CLOTHING AND EQUIPMENT

a. An SOP must be established identifying who provides, cleans, and stores PPE.

b. PPE for eyes, face, head, and extremities must be provided whenever it is necessary to protect from: hazards of process or environment; chemical hazards; or mechanical irritants that are encountered by the employee in a manner capable of causing injury or impairment of any part of the body through absorption, inhalation, or physical contact. Employees are required to use the PPE provided.

(1) Eye and face protection is required when an employee is exposed to eye or face hazards from flying particles, liquid chemicals, acids or caustic liquids, or chemical gases or vapors.

(2) Safety shoes or boots are required where there is a danger of foot injuries due to falling objects, rolling objects, or objects piercing the sole. Safety shoes or boots with impact protection are required when employees carry or handle materials such as packages, objects, parts, or heavy tools that could be dropped. *NOTE: Each Chief, Nutrition and Food Services, or Program Manager must work with their station Safety Officer to assess which personnel require protective footwear due to the nature of their duties and responsibilities.*

(3) Appropriate gloves must be selected when employees are exposed to skin absorption of harmful substances, chemical burns, thermal burns, harmful temperature extremes, severe cuts or lacerations, or severe abrasions.

(4) Appropriate outerwear (jackets, trousers, raincoats, rubber boots) are required when employees are routinely exposed to inclement weather, or areas such as walk-in freezers.

(5) Hearing protection may be required in areas where the noise level may cause hearing impairment.

c. All PPE determined to be required and provided to employees must be worn, properly cleaned and maintained, and returned to the appropriate storage area.

(1) It is important that all PPE be kept clean and properly maintained. Cleaning is particularly important for eye and face protection where dirty or fogged lenses could impair vision.

(2) All PPE is to be inspected, cleaned, and maintained at regular intervals so that the PPE provides the requisite protection.

(3) Personal items such as safety shoes, items that are not easily interchangeable, and expendable items become the property of the individual employee using same.

d. Each employee that is required to wear PPE must be trained in the use and care of that equipment and must be able to demonstrate an understanding of the training received.

9. ACCIDENT REPORTS AND WORKERS COMPENSATION

The Chief, Nutrition and Food Services, or Program Manager, is responsible for:

a. Following established policies and procedures for employees to provide notification (on approved forms) to their supervisor of any job related accident, incident, injury, illness, or disease.

b. Ensuring employees and supervisors complete the required accident reports through ASISTS or per hospital policy.

c. Consulting with the Workers' Compensations Specialist on matters pertaining to:

(1) Compensation and medical benefits related to job related injuries; and

(2) Identification and placement of job-injured employees in alternate, or limited, duty assignments.

d. Conducting a job safety review when repetitive lost-time accidents for Nutrition and Food Services employees occur. This review is performed in conjunction with the Nutrition and Food Services Safety Committee. Following the review, safe operating procedures are developed as appropriate. A service reduction plan is required when it is determined that the Nutrition and Food Services average injury rate is higher than the healthcare foodservice industry injury standard. This plan must be comprehensive and provide specific tasks, time frames, and objectives.

e. Reporting patient and resident injuries or incidents that almost caused patient or resident injuries to the facility patient manager and the National Center for Patient Safety consistent with the VHA Handbook 1050.1.

10. KEY CONTROL

The Chief, Nutrition and Food Services, or Program Manager is responsible for maintaining maximum security to Nutrition and Food Services by:

a. Determining areas requiring key control;

b. Authorizing key requests; and

c. Providing written policy designating responsibility and authorization for access to key controlled areas including:

(1) Opening and closing the area(s),

(2) Authorizing access to food and supply storage areas,

(3) Designating how and where the keys will be maintained during the work day,

(4) Identifying areas to remain locked, when not in use, and

(5) Ensuring that a list of keys by number, areas, and employees assigned responsibility is maintained in a secure place in Nutrition and Food Services, or as assigned to another service.

11. REFERENCES

a. VHA Handbook 1050.1.

b. VHA Directive 7700.1

c. National Fire Protection Association (NFPA) Standards.