EMERGENCY EYEWASH AND SHOWER PROGRAM

1. REASON FOR ISSUE: This Veterans Health Administration (VHA) directive states policy and provides requirements and standards for the evaluation, selection, installation, operation and maintenance of emergency eyewash and shower units.

2. SUMMARY OF MAJOR CHANGES: This directive:

a. Maintains the requirement for all Department of Veterans Affairs (VA) medical facilities to create an Emergency Eyewash and Shower Program but removes the requirement to establish a written local policy to allow for flexibility in local implementation.

b. Adds roles and responsibilities for the Director, Office of Healthcare Engineering; VHA Consolidated Mail Outpatient Pharmacy Associate Deputy Chief Consultant; Veterans Integrated Services Network (VISN) Occupational Safety and Health (OSH) Manager; and VA medical facility OSH Manager (see paragraph 4).

c. Revises responsibilities for the Under Secretary for Health; Assistant Under Secretary for Health for Support; Assistant Under Secretary for Health for Operations; Director, OSH; VISN Director; VA medical facility Director; and VA medical facility Emergency Eyewash and Shower Coordinator (see paragraph 4).

d. Relocates considerations for emergency eyewash and shower installation and removal from the VA medical facility Emergency Eyewash and Shower Coordinator responsibilities to Appendix A, paragraph 3.

3. RELATED ISSUES: VA Directive 7700, Occupational Safety and Health, dated February 11, 2009; and VHA Directive 7701, Comprehensive Occupational Safety and Health Program, dated May 5, 2017.

4. RESPONSIBLE OFFICE: The Assistant Under Secretary for Health for Support (19) is responsible for the content of this directive. Questions may be addressed to the Director, Occupational Safety and Health Office, Office of Healthcare Environment and Facilities Programs (19HEF) at <u>VHAOccSafetyandHealthAction@va.gov</u>.

5. RESCISSIONS: VHA Directive 7704(1), Location, Selection, Installation, Maintenance, and Testing of Emergency Eyewash and Shower Equipment, dated February 16, 2016, is rescinded.

6. RECERTIFICATION: This VHA directive is scheduled for recertification on or before the last working day of October 2026. This VHA directive will continue to serve as national VHA policy until it is recertified or rescinded.

BY DIRECTION OF THE OFFICE OF THE UNDER SECRETARY FOR HEALTH:

/s/ Deborah E. Kramer Acting Assistant Under Secretary for Health for Support

NOTE: All references herein to VA and VHA documents incorporate by reference subsequent VA and VHA documents on the same or similar subject matter.

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EMERGENCY EYEWASH AND SHOWER PROGRAM

1. PURPOSE

This Veterans Health Administration (VHA) directive states policy concerning the location, selection, installation, maintenance and testing of emergency eyewash and shower equipment at Department of Veterans Affairs (VA) medical facilities. **AUTHORITY:** 38 U.S.C. § 7301(b); 29 C.F.R. §§ 1910.151(c), 1960.8.

2. BACKGROUND

a. VA employees routinely perform work using a variety of substances that may pose a threat to their health and safety because they can cause corrosion, severe irritation, permanent tissue damage or can be absorbed through the skin and eyes. In the case of accidental chemical exposures to the eyes, a quick and effective response is essential to prevent lasting damage or a loss of sight.

b. In order to prevent or minimize injuries to eyes and skin, 29 C.F.R. § 1910.151(c) requires that suitable facilities for quick drenching or flushing of the eyes and body be provided in workplaces for immediate emergency use when exposure to corrosive materials occurs.

c. Emergency eyewashes and showers are first aid rather than preventive measures, and must be readily available in spaces where the worker may be exposed to hazardous chemicals. The term hazardous chemical is defined at 29 C.F.R. § 1910.1200(c) to mean any chemical which is classified as a physical hazard or a health hazard, a simple asphyxiant, combustible dust, pyrophoric gas or hazard not otherwise classified. Emergency eyewash and shower equipment are not to be used in lieu of appropriate personal protective equipment (PPE). Evaluation of areas for emergency eyewashes and showers, however, must be conducted as if PPE was not used.

d. A lack of definitive guidance has resulted in confusion regarding compliance with eyewash installation, maintenance and testing requirements. Although the Occupational Safety and Health Administration (OSHA) requires that "suitable facilities" be provided "for immediate emergency use", specific definitions of these terms are not provided. The voluntary American National Standards Institute (ANSI) Z358.1 "American National Standard for Emergency Eyewash and Shower Equipment" provides detailed information regarding the installation and operation of emergency eyewash and shower equipment. Therefore, although OSHA has not formally adopted the standard, they have often referred employers to ANSI Z358.1 as a source of guidance for protecting employees who may be exposed to injurious corrosive materials.

3. POLICY

It is VHA policy that each VA medical facility, whether the space is owned, operated or leased, maintains an Emergency Eyewash and Shower Program that is compliant with relevant standards governing first aid response to accidental chemical exposures to the eyes and body to protect the safety of Veterans, visitors and staff.

4. **RESPONSIBILITIES**

a. <u>Under Secretary for Health.</u> The Under Secretary for Health is responsible for ensuring overall VHA compliance with this directive.

b. <u>Assistant Under Secretary for Health for Operations.</u> The Assistant Under Secretary for Health for Operations is responsible for:

(1) Communicating the contents of this directive to each of the Veterans Integrated Services Networks (VISNs).

(2) Assisting VISN Directors to resolve implementation and compliance challenges in all VA medical facilities within that VISN.

(3) Providing oversight of VISNs to ensure compliance with this directive and its effectiveness.

c. <u>Assistant Under Secretary for Health for Support.</u> The Assistant Under Secretary for Health for Support is responsible for establishing policy and providing guidance and oversight as necessary to ensure the timely and successful implementation of this directive.

d. <u>Deputy Director, Assistant Under Secretary for Health for Support.</u> The Deputy Director, Assistant Under Secretary for Health for Support is responsible for:

(1) Overseeing the VHA Occupational Safety and Health (OSH) program.

(2) Periodically assessing the Emergency Eyewash and Shower Program and system for continued need, currency and effectiveness.

(3) Coordinating with the Assistant Under Secretary for Health for Operations, VISN Directors and VA medical facility Directors to ensure all necessary action is taken and funding is obtained to address Emergency Eyewash and Shower Program performance in a manner that meets the requirements of Federal, State and local statutes and regulations; applicable Executive Orders; and VA and VHA directives.

e. <u>VHA Consolidated Mail Outpatient Pharmacy Associate Deputy Chief</u> <u>Consultant.</u> The VHA Consolidated Mail Outpatient Pharmacy (CMOP) Associate Deputy Chief Consultant is responsible for:

(1) Developing, implementing and managing Emergency Eyewash and Shower Programs at CMOP facilities.

(2) Ensuring that CMOPs comply with applicable Federal, State and local environmental regulations, Executive Orders, VA and VHA policies.

(3) Providing information and reports related to Emergency Eyewash and Shower Programs to the Assistant Under Secretary for Health for Support upon request.

f. <u>Director, Office of Healthcare Engineering.</u> The Director, Office of Healthcare Engineering (OHE) is responsible for collaborating with the Director, OSH in the development and distribution of directives and guidance regarding emergency eyewash and shower equipment.

g. <u>Director, Occupational Safety and Health Office.</u> The Director, OSH is responsible for:

(1) Supporting the implementation and oversight of this directive across VHA.

(2) Providing guidance, administrative management and technical support to VA medical facility Emergency Eyewash and Shower programs in complying with regulations regarding eye hazards and eyewash and shower equipment, using results from the Annual Workplace Evaluations (AWE). **NOTE:** AWEs are required by VHA Directive 7701, Comprehensive Occupational Safety and Health Program, dated May 5, 2017.

(3) Collaborating with the Director, OHE, in the development of and distribution of directives and guidance regarding emergency eyewash and shower equipment.

h. <u>Veterans Integrated Services Network Director</u>. The VISN Director is responsible for:

(1) Ensuring that all VA medical facilities within the VISN comply with this directive and informing leadership when barriers to compliance are identified.

(2) Providing adequate resources for the implementation and maintenance of this directive within the VA medical facilities of their jurisdiction.

(3) Ensuring that the VISN OSH Manager evaluates Emergency Eyewash and Shower Programs during VA medical facility AWEs.

(4) Reviewing the results of the AWE of VA medical facilities' Emergency Eyewash and Shower Program and associated abatement plan.

(5) Assigning VISN or VA medical facility personnel to provide implementation support, including AWEs, at applicable VHA offices located within the VISN but outside of the administrative authority of the VISN Director, in accordance with VHA Directive 7701. These VHA offices include but are not limited to VHA research facilities and CMOPs.

i. <u>Veterans Integrated Services Network Occupational Safety and Health</u> <u>Manager.</u> The VISN OSH Manager is responsible for:

(1) Providing technical assistance to VA medical facility staff.

(2) Evaluating the Emergency Eyewash and Shower Program during each VA medical facility AWE.

(3) Reporting program deficiencies in the AWE report and working with the VA medical facility OSH Manager to track corrective actions in the abatement plan until they are closed. The AWE report and abatement plan are shared between the VISN Director and VA medical facility Director for review.

j. <u>VA Medical Facility Director.</u> *NOTE:* For purposes of this directive, VA medical facility Director includes the Facility Director for VHA research facilities and the CMOP Director. The VA medical facility Director is responsible for overseeing the VA medical facility's Emergency Eyewash and Shower Program, including:

(1) Ensuring overall VA medical facility compliance with this directive and appropriate corrective action is taken if non-compliance is identified.

(2) Providing adequate resources to maintain emergency eyewash and shower units.

(3) Designating an Emergency Eyewash and Shower Coordinator to administer the VA medical facility Emergency Eyewash and Shower Program.

(4) Ensuring the VA medical facility Emergency Eyewash and Shower Coordinator maintains an Emergency Eyewash and Shower Program in accordance with this directive (see Appendices A - F).

(5) Ensuring the VA medical facility OSH Manager and Emergency Eyewash and Shower Coordinator take into account the factors listed in Appendix A, paragraph 3, when removing or installing eyewash and shower stations.

(6) Reviewing the results of the AWE and associated abatement plan for eyewash and shower program deficiencies.

(7) Designating employees in the VA medical facility Emergency Eyewash and Shower Program to perform activation of emergency eyewash and shower stations. See Appendix D. **NOTE:** Employees designated to perform emergency eyewash and shower activations may include but are not limited to VA medical facility engineering or workplace employees who have custody of the units at their worksite. For portable eyewashes, special attention must be given to manufacturer requirements regarding activation, disinfection intervals and the use of chemical additives to extend service life; see "Plumbed and Self-Contained Emergency Showers, Eyewash Equipment, Eye/Face Wash Equipment and Combination Units Performance and Maintenance Criteria" in the most current ANSI Z358.1. For personal eye irrigation bottles, expiration dates and overall condition/serviceability must be checked at each inspection. See Appendices E and F for more information.

(8) Purchasing a copy of the most recent version of ANSI Z358.1 American National Standard for Emergency Eyewash and Shower Equipment for use as a reference, using VA medical facility funds.

k. VA Medical Facility Occupational Safety and Health Manager. The VA medical

facility OSH Manager is responsible for:

(1) Conducting (or delegating to OSH staff) hazard assessments jointly with the VA medical facility Chief Engineer, Facility Manager or equivalent, and Work Area Supervisors in all areas of the VA medical facility, including areas with existing eyewashes, using the guidance provided in Appendix A.

(2) Conducting (or delegating to OSH staff) updated hazard assessments when changes occur to processes, work practices or chemicals, as identified by VA medical facility Work Area Supervisors. **NOTE:** A chart identifying areas and eye hazards that need to be evaluated is included in the General Safety Guidebook available at: <u>http://vaww.hefp.va.gov/guidebooks/general-safety-guidebook-0</u>. This is an internal VA website that is not available to the public. This is not a comprehensive list of all areas requiring emergency activation units. Additionally, the listing of an agent does not mandate installation of emergency equipment, but it does indicate that an assessment must be conducted.

(3) Providing results of hazard assessments to VA medical facility Work Area Supervisors to facilitate employee training in emergency eyewash or shower locations and ensure correct activation and proper use of equipment, including personal eye irrigation bottles. For further information on training requirements, see paragraph 5.

(4) Maintaining written hazard assessment records for all areas of the VA medical facility. See Appendix A.

(5) Providing technical assistance to the Facility Manager and other personnel in the location, selection, installation, maintenance and testing of emergency eyewashes and showers.

(6) Approving the selection of emergency eyewashes and equipment (see Appendix B) and personal eye irrigation bottles after performing hazard assessments (see Appendix F).

(7) In collaboration with the VA medical facility Emergency Eyewash and Shower Coordinator, taking into account the factors listed in in Appendix A, paragraph 3, when removing or installing eyewash and shower stations.

(8) Identifying emergency eyewashes and showers that are no longer needed and submitting a request to the Facility Manager for their removal.

(9) Reviewing project specifications for all new construction and renovation projects to determine the need for eyewash and shower units, including proper selection and installation.

(10) Overseeing the annual review conducted by the VA medical facility Emergency Eyewash and Shower Coordinator of all elements of the Emergency Eyewash and Shower Program.

(11) Training employees and Work Area Supervisors in the use, inspection, maintenance and testing of emergency eyewash and shower units (see paragraph 5).

(12) Working with the VISN OSH Manager to track corrective actions in the abatement plan associated with the VA medical facility's AWE until they are closed.

I. <u>VA Medical Facility Emergency Eyewash and Shower Coordinator.</u> The VA medical facility Emergency Eyewash and Shower Coordinator is responsible for:

(1) Overseeing compliance and day-to-day operation of the VA medical facility Emergency Eyewash and Shower Program.

(2) Developing and implementing an Emergency Eyewash and Shower Program which addresses the process for locating, selecting, installing, maintaining and testing emergency eyewash and shower equipment within the VA medical facility. **NOTE:** Appendices A through F contain mandatory elements that must be incorporated into the VA medical facility's procedures or plans.

(3) Ensuring the VA medical facility OSH Manager conducts (or delegating to OSH staff) eyewash and shower hazard assessments in all areas of the VA medical facility in accordance with Appendix A. Sample hazard assessment tools can be found in the General Safety Guidebook located at http://www.hefp.va.gov/guidebooks/general-safety-guidebook-0 and the VHA Healthcare Environment and Facilities Programs (HEFP) Eyewash and Shower resources website at http://www.hefp.va.gov/resources/emergency-eyewash-and-shower-safety. NOTE: These are internal VA websites that are not available to the public.

(4) Preparing a prioritized list for installation and replacement of eyewashes, showers and personal eye irrigation bottles in consultation with the Facility Manager, using the results of the hazard assessment.

(5) Maintaining an inventory of all personal eye irrigation bottles used by workplace employees. See Appendix F.

(6) In collaboration with the VA medical facility OSH Manager, taking into account the factors listed in Appendix A, paragraph 3, when removing or installing eyewash and shower stations.

(7) Conducting an annual review of all elements of the Emergency Eyewash and Shower Program to identify program improvements and maintaining a written evaluation of the annual review. This annual review is tracked by the VA medical facility's Safety Committee as required in VHA Directive 7701.

m. **VA Medical Facility Chief Engineer or Facility Manager.** The VA medical facility Chief Engineer, Facility Manager or equivalent is responsible for the following:

(1) Consulting with the VA medical facility OSH Manager on the selection and location of emergency eyewashes and showers.

(2) Consulting with the VA medical facility Emergency Eyewash and Shower Coordinator on the development of a prioritized list for installation and replacement of eyewashes and showers.

(3) Executing all work orders for the installation, replacement or repair of emergency eyewash and shower equipment on a high priority basis.

(4) Removing emergency eyewashes and showers that have been identified for removal by the VA medical facility OSH Manager. **NOTE:** Removal work must include water supply piping to the extent necessary for dead-leg prevention.

(5) Ensuring that emergency eyewash and shower design specifications reference and require ANSI-compliant equipment or devices.

(6) Ensuring that emergency eyewashes and showers are installed in accordance with the equipment manufacturer's specifications and the most recent version of ANSI Z358.1. See Appendix C. **NOTE:** Emergency eyewash stations and showers that comply with ANSI Z358.1 must be compliant with the Americans with Disabilities Act. See 42 U.S.C. § 12101 et seq.

(7) Ensuring that installed thermostatic mixing valves are American Society of Sanitary Engineers (ASSE) 1071-compliant and are included in a preventative maintenance program for proper operation. **NOTE:** The Facility Manager must purchase valves that are compliant with the ASSE standard. The manufacturer will state whether the valves comply.

(8) Conducting and documenting annual performance testing (see Appendix E).

(9) Assisting (or delegating to Facilities Management staff) the VA medical facility OSH Manager in performing hazard assessments in all areas of the VA medical facility.

n. <u>VA Medical Facility Work Area Supervisors.</u> The VA medical facility Work Area Supervisors are responsible for the following:

(1) Maintaining compliance for the Emergency Eyewash and Shower Program in their assigned workplaces and processes, to include associated equipment.

(2) Notifying the VA medical facility OSH Manager of changes in workplaces or work processes and practices that require a hazard assessment to evaluate the need for new installations or for the removal of existing emergency eyewashes or showers. See Appendix A.

(3) Assisting the VA medical facility OSH Manager in performing hazard assessments of workplaces to determine where eyewashes and showers are needed.

(4) Tagging the emergency eyewash or shower unit with a "DO NOT USE" sign if the unit is not operating to ANSI specifications, and contacting the Facility Manager for repair or replacement (see Appendix E).

(5) Notifying all affected employees and the VA medical facility OSH Manager when emergency eyewash and shower equipment is out of service and contacting the Facility Manager for repair or replacement. See Appendix E. If the emergency eyewash and shower equipment is out of service or needs repair or replacement, the Work Area Supervisor must implement interim control measures until the system is back in service.

(6) Ensuring designated employee(s) perform weekly ANSI-compliant eyewash activations, monthly shower activations, weekly visual inspections of self-contained showers and eyewashes, and maintain appropriate activation and inspection records. See Appendix D for more details. **NOTE:** See VHA Directive 1061, Prevention of Health Care-Associated Legionella Disease and Scald Injury from Water Systems, dated February 16, 2021, for flushing frequency for irregularly used or low flow fixtures.

(7) Inspecting personal eye irrigation bottles weekly to ensure that all bottles are sealed and have not reached their expiration dates. **NOTE:** Expired personal eye irrigation bottles must be discarded and replaced; see Appendices B and F.

(8) Conducting and documenting training for all employees regarding workplace hazards which require emergency eyewashes and showers in coordination with OSH staff. For further information on training requirements, see paragraph 5. *NOTE: Training must include specific hazards based on the results of hazard assessments, correct activation and proper use of equipment, including personal eye irrigation bottles.*

(9) Ensuring that any employee who uses an emergency eyewash or shower is provided medical care as soon as possible.

5. TRAINING

The following training is *required*:

a. All personnel assigned to perform maintenance or staff designated to activate and inspect emergency eyewashes and showers must be trained on the manufacturer's specifications and on ANSI performance standards for the specific device's activation and visual inspection requirements.

b. VA medical facility Work Area Supervisors must be trained in the rationale for use, inspection, maintenance and operation of emergency eyewash and shower equipment.

c. Employees working in areas with emergency eyewashes and showers are required to be trained and demonstrate competency on the following two items:

(1) Proper operation and effective use of the emergency equipment.

(2) Procedures for assisting other employees in using the eyewash and shower.

d. <u>Eyewash Bottle Training.</u> All designated personal eye irrigation bottle users must be:

(1) Trained in the proper use and limitations of the personal eye irrigation bottle, including a demonstration of actual use of the bottle and identifying the expiration date of the irrigation fluid.

(2) Informed of the necessity of quickly accessing a plumbed eyewash, or reporting to the emergency care unit, whichever is closer.

6. RECORDS MANAGEMENT

All records regardless of format (e.g., paper, electronic, electronic systems) created by this directive must be managed as required by the National Archives and Records Administration (NARA) approved records schedules found in VHA Records Control Schedule 10-1. Questions regarding any aspect of records management should be addressed to the appropriate Records Officer.

7. REFERENCES

a. 38 U.S.C. § 7301(b).

b. 42 U.S.C. § 12101 et seq.

c. 29 C.F.R. §§ 1910.151(c); 1910.1200 Appendix A; 1960.8.

d. VHA Directive 1061, Prevention of Health Care-Associated Legionella Disease and Scald Injury from Water Systems, dated February 16, 2021.

e. VHA Directive 7701, Comprehensive Occupational Safety and Health Program, dated May 5, 2017.

f. VA Plumbing Design Manual. https://www.cfm.va.gov/til/dManual/dmPlbg.pdf.

g. VHA HEFP, Eyewash and Shower resources website. <u>http://vaww.hefp.va.gov/resources/emergency-eyewash-and-shower-safety</u>. *NOTE: This is an internal VA website that is not available to the public.*

h. VHA HEFP General Safety Guidebook. <u>http://vaww.hefp.va.gov/guidebooks/general-safety-guidebook-0</u>. **NOTE:** This is an internal VA website that is not available to the public.

i. American National Standards Institute (ANSI), Z358.1-2014 (or most current version). American National Standard for Emergency Eyewash and Shower Equipment. <u>http://www.ansi.org/</u>.

j. American Society of Sanitary Engineers (ASSE), Standard #1071-2012 (or most current version). Temperature Actuated Mixing Valves for Plumber Emergency Equipment. <u>https://www.asse-plumbing.org/</u>.

k. OSHA Standard Interpretations referencing 29 C.F.R. 1910.151(c).

https://www.osha.gov/pls/oshaweb/owalink.query_links?src_doc_type=STANDARDS&s rc_unique_file=1910_0151&src_anchor_name=1910.151(c).

EMERGENCY EYEWASH AND SHOWER LOCATION (MANDATORY)

1. HAZARD ASSESSMENT

a. Each area of the Department of Veterans Affairs (VA) medical facility designated for plumbed eyewashes, deluge showers, portable wash stations or personal eye irrigation bottles must have a documented hazard assessment. **NOTE:** For complete requirements of the personal eye irrigation bottle program, see Appendix F, paragraph 5.

b. The VA medical facility Occupational Safety and Health (OSH) Manager or OSH staff designated by the OSH Manager perform the hazard assessment using the general eye and skin hazard classification considerations detailed in 29 C.F.R. § 1910.1200, Appendix A (Health Hazard Criteria). Health Hazard Criteria is also on the Safety Data Sheet (SDS) where the eye and skin hazard classification may be found for a specific chemical. *NOTE:* SDSs can be found at <u>http://vaww.hefp.va.gov/occupational-safety-health-gems/safety-data-sheetchemical-inventory-service. This is an internal VA website that is not available to the public.</u>

c. The hazard assessment must describe the work processes/tasks and the specific chemical splash/contact risks which drive the requirement for an emergency eyewash or shower and any alternative controls that were evaluated, including process modifications, exposure controls and consideration for less hazardous chemical alternatives. Records of this assessment must be periodically updated to ensure documented conditions reflect the current workplace layout and be readily available for review by staff in these areas.

d. The Veterans Health Administration (VHA) General Safety Guidebook contains an example of an Emergency Eyewash and Shower Hazard Assessment and is available on the VHA Healthcare Environment and Facilities Program website at: http://www.hefp.va.gov/guidebooks/general-safety-guidebook-0. **NOTE:** This is an internal VA website that is not available to the public.

e. Hazard assessments must be repeated whenever a change in processes, chemicals or controls could result in the need for new emergency eyewash or shower equipment or the removal of existing equipment. VA medical facility Work Area Supervisors in charge of the subject workplace are responsible for requesting updated hazard assessments when processes, work practices or chemical(s) used change. **NOTE:** A chart identifying some areas and agents that need to be evaluated is included in the General Safety Guidebook. This is not a comprehensive list of all areas requiring American National Standards Institute (ANSI)-compliant emergency eyewash and shower units. Additionally, the listing of an agent does not mandate installation of emergency equipment, but it does indicate that an assessment must be conducted.

2. ACCESSIBILITY

a. The distance from the worker's location to the emergency eyewash or shower is not to exceed 10 seconds walking distance. ANSI recognizes that the average person travels about 55 feet in 10 seconds. In areas where extremely corrosive chemicals are used, that distance may be reduced. The SDS for chemicals must be consulted when determining travel distances to emergency equipment. Reduced travel distance or additional controls must be considered, if necessary, to accommodate persons with disabilities. ANSI-compliant emergency eyewash and shower equipment must be located on the same floor level as the hazard.

b. The emergency eyewash or shower units are not to be located in an area where employees must pass through a locked or latched doorway or weave around equipment to obtain access.

c. For substances that are gaseous or highly volatile, the emergency eyewash or shower may be located outside of the immediate area of the potential release.

3. EYEWASH AND SHOWER INSTALLATION AND REMOVAL CONSIDERATIONS

The following information can be used when removing or installing eyewash and shower stations:

a. Eliminating or minimizing the use of caustic and corrosive chemicals. These are defined as strongly acidic or strongly basic mixtures or compounds, having a pH less than 2 or greater than 11.

b. To the greatest extent possible, centralize the storage and use of concentrated caustic and corrosive chemicals to specific, designated areas. For instance, restrict the mixing of cleaning agents to a centralized area, which can be equipped with a plumbed eyewash or shower, as appropriate.

c. Implementing engineering controls to reduce or eliminate employee risk of splash, immersion or contact exposure. For example, using closed or automatic chemical dispensing systems, splash guarding or long handle spraying and cleaning tools.

d. To the greatest extent possible, requiring the use of "green" chemical products, especially cleaning products, where available. *NOTE:* Chemical products that are certified as 'environmentally safe' or 'green' are, in general, less corrosive and have less potential for harm than traditional cleaners. Their use may decrease the likelihood and severity of injuries that do occur. Manufacturer claims should always be verified by a review of the provided SDS and consultation with VA medical facility OSH staff.

e. To the greatest extent possible, implementing policies to minimize or eliminate the purchase and use of chemicals for which Occupational Safety and Health Administration requires emergency eyewash systems for worker protection. Examples include methylene chloride and formaldehyde.

f. The placement and design of eyewash and showers must comply with the VA Plumbing Design Manual (latest edition) for the protection of all employees working in the immediate area. **NOTE:** The current VA Plumbing Design Manual is located at <u>https://www.cfm.va.gov/til/dManual/dmPlbg.pdf</u>.

g. Eyewash and shower equipment no longer required in a workplace, based on the current hazard assessment, must be taken out of service as soon as possible. The unit must be tagged with a "DO NOT USE" sign, the water supply turned off and a work request prepared to remove the equipment.

h. In areas where plumbed eyewash or shower units are required, but not in place, a work request will be prepared to install appropriate equipment.

i. Until plumbed or self-contained eyewashes can be installed, interim measures must be taken to protect employees. **NOTE:** Acceptable temporary substitutes include personal eye irrigation bottles (see Appendix F) and portable ANSI-compliant eyewashes. They are not intended as a permanent substitute for plumbed equipment.

j. When deemed necessary by the hazard assessment, ANSI-compliant emergency eyewashes and showers must be installed in areas with new construction.

October 12, 2021

EMERGENCY EYEWASH AND SHOWER SELECTION (MANDATORY)

1. Emergency eyewashes and showers purchased and installed for projects and procurements under the direct control of the Department of Veterans Affairs (VA) medical facilities must comply with American National Standards Institute (ANSI) standards. Emergency equipment must be installed in accordance with the manufacturer's specification to maintain the ANSI certification. Eyewashes and showers determined to be necessary by a current risk assessment must be evaluated and certified by qualified personnel or the Facility Manager to ensure those units meet ANSI installation and operation standards. Units that do not meet ANSI standards must be given priority for modification, repair or replacement (see Appendix E). *NOTE:* ANSI-compliant portable eyewash and shower equipment is available from manufacturers for field or remote locations.

2. Selection of the emergency eyewashes and equipment must be approved by the VA medical facility Occupational Safety and Health (OSH) Manager. *NOTE:* When necessary, OSH staff need to be consulted for assistance.

3. Equipment selection must take into consideration space required to install and operate equipment, plumbing connections, accessibility and availability of drains and hazards that might result from equipment operation.

4. ANSI-compliant self-contained eyewashes are acceptable, especially in areas where a tepid water supply is not available.

5. Drench hoses used as eye or face washes must meet the ANSI performance requirements for those devices.

6. Personal eye irrigation bottles (sealed, single-use and disposable products) are not ANSI-compliant eyewashes and should be strictly monitored. Personal eye irrigation bottles may be used as a method to flush the eye when first aid and an ANSI-compliant eyewash are not required. (See Appendix F.)

EMERGENCY EYEWASH AND SHOWER INSTALLATION (MANDATORY)

1. Emergency eyewashes and showers must be installed in accordance with manufacturer's specifications and American National Standards Institute (ANSI) installation standards.

2. All units must be in accessible locations, free from obstructions. Units that do not meet accessibility requirements must be evaluated by the Department of Veterans Affairs (VA) medical facility Occupational Safety and Health (OSH) Manager and granted a written approval for continued use. In addition, a work order for relocation or removing the obstruction must be generated. A copy of this approval must be maintained in the workplace and in the VA medical facility Safety Office.

3. The location of this equipment must be identified with a highly visible sign.

4. The equipment must be installed on a system that can deliver the quantity and pressure of water required by the manufacturer's specification to comply with the requisite ANSI Z358.1 approval.

5. All emergency eyewash and showers need to deliver tepid water (60-100 degrees Fahrenheit). Installed thermostatic mixing valves must be American Society of Sanitary Engineers (ASSE) #1071-2012 compliant. **NOTE:** The General Safety Guidebook provides information on methods of achieving tepid water. In addition, the ANSI standards are to be used as a reference for the requirements for thermostatic balancing of mixing valves installed in eyewash stations, available at: <u>http://vaww.hefp.va.gov/guidebooks/general-safety-guidebook-0</u>. This is an internal VA website that is not available to the public.

6. Exceptions for tepid water provisions must be approved by the VA medical facility Safety and Health Leadership Committee. For further information regarding this committee, see Veterans Health Administration (VHA) Directive 7701, Comprehensive Occupational Safety and Health Program, dated May 5, 2017.

7. Freeze protection must be provided, when needed.

EMERGENCY EYEWASH AND SHOWER MAINTENANCE (MANDATORY)

1. All personnel assigned to perform maintenance or staff designated to activate and inspect emergency eyewashes and showers must be trained on the manufacturer's specifications and on American National Standards Institute (ANSI) performance standards for the specific device's activation and visual inspection requirements.

2. Emergency equipment must be maintained in accordance with the manufacturer's specifications.

3. Modifications to emergency equipment that void the ANSI compliance of the device are prohibited.

4. Plumbed emergency eyewashes, combination eye and face washes and drench hoses must be activated weekly by designated personnel to activate the line and ensure proper operation. The duration must be long enough to activate the water contained in the emergency eyewash service line, back to the connection point to the building water supply. Consult with Facilities Management staff, if necessary, to determine the amount of time to hold open the activation mechanism. This process verifies adequate flow, ensures the supply line remains clear of sediment and reduces the buildup of microbial contamination (biofilm) due to sitting water.

5. Plumbed emergency showers (stand-alone and combination units) must be activated monthly by designated personnel. The duration must be long enough to flush all water contained in the emergency shower service line, back to the connection point to the building water supply. This process verifies adequate flow and ensures the supply line remains clear of sediment and reduces the buildup of biofilm due to sitting water.

6. If examination of the fluid flushed from the shower reveals discoloration or sediment, increase the activation frequency until the problem is corrected or until the shower is replaced.

7. Self-contained showers and eyewashes must be visually inspected weekly to ensure that the irrigation fluid is full and in good condition. Self-contained units must be maintained in accordance with the manufacturers' requirements. During each inspection, verify cleanliness and expiration date of the irrigation fluid. Discard expired fluid immediately and refill the unit according to manufacturer instructions.

8. A written record of the activation and inspection of emergency units must be maintained at or near the device. Records must be kept on a tag or label attached to the eyewash or shower, on an inspection checklist maintained on file or by an electronic method that provides a permanent record.

9. Units that fail testing must be repaired immediately. If deficiencies cannot be immediately corrected, the VA medical facility Work Area Supervisor must be notified and the unit must be tagged "DO NOT USE". The VA medical facility Work Area

Supervisor must notify all affected employees and the VA medical facility Safety Office when emergency equipment is out of service. A suitable substitute shall be used as a temporary (interim) control for the eyewash if the hazardous activity continues during repair or replacement.

EMERGENCY EYEWASH AND SHOWER ANNUAL PERFORMANCE TESTING (MANDATORY)

1. The Department of Veterans Affairs (VA) medical facility Chief Engineer or Facility Manager is responsible for:

a. Testing all emergency equipment after installation to ensure that it meets the manufacturer's installation requirements.

b. Testing all devices annually using the manufacturer's inspection procedures to ensure continued conformance with American National Standards Institute (ANSI) Z358.1. **NOTE:** This annual performance test is separate from the activations performed by VA medical facility Work Area Supervisors described in Appendix D.

c. Maintaining a written record of the annual performance testing procedures used and the testing date.

2. Units that fail testing must be repaired immediately. If deficiencies cannot be immediately corrected, the Facility Manager notifies the VA medical facility Work Area Supervisor who tags the unit with a "DO NOT USE" sign. The VA medical facility Work Area Supervisor must notify all affected employees and the VA medical facility Safety Office when emergency equipment is out of service. A portable unit may be temporarily required to meet the need for an emergency eyewash and shower.

3. A written record of the activation and inspection of emergency units must be maintained at or near the device. Records must be kept on a tag or label attached to the eyewash or shower, on an inspection checklist maintained on file or by an electronic method that provides a permanent record. **NOTE:** An example of a tag is included in the Veterans Health Administration (VHA) General Safety Guidebook available at: http://www.hefp.va.gov/guidebooks/general-safety-guidebook-0. This is an internal VA website that is not available to the public.

PERSONAL EYE IRRIGATION BOTTLES (MANDATORY)

1. Personal eye irrigation bottle stations are not authorized for use in areas where American National Standards Institute (ANSI)-compliant eyewashes are required.

2. Personal eye irrigation bottles may be considered for use:

a. During an interim period until permanent eyewashes can be installed.

b. For activities remote to VA medical facilities that do not allow immediate access to plumbed eyewashes.

c. As a method to flush the eyes when first aid and ANSI-compliant eyewashes are not required.

d. The Department of Veterans Affairs (VA) medical facility Occupational Safety and Health (OSH) Manager performs a hazard assessment prior to authorizing the use of personal eye irrigation bottles. See paragraph 5 of this appendix.

3. For remote field operations, personal eye irrigation bottles may be made available at the immediate job site to be used in conjunction with sealed portable eyewash units available on the work vehicle or truck.

4. For highly mobile operations within the VA medical facilities, personal eye irrigation bottles may be supplied on work carts for immediate first aid. Employees must be trained on the locations of the closest permanent eyewash stations to be used for sustained activation in each workplace.

5. Where personal eye irrigation bottles are allowed, a formal personal eye irrigation bottle program must be administered that includes:

a. <u>Hazard Assessment.</u> Selection and use of personal eye irrigation bottles must be evaluated and approved by the VA medical facility OSH Manager. Factors to consider in the evaluation include, but are not be limited to:

(1) The physical and chemical characteristics of the chemical, including the risk of injury.

(2) Contingencies for cold temperatures and potential for eyewash solution freezing. Electrical heating units may be required.

(3) Volume of solution required for operations with a high risk of eye injury and remoteness to a plumbed eyewash to allow for longer activation times.

b. <u>Approval.</u> Upon approval, personal eye irrigation bottles must be assigned to workplaces.

c. <u>Master List.</u> The VA medical facility Emergency Eyewash and Shower Coordinator maintains an inventory of all personal eye irrigation bottles used by workplace employees, including the number of bottles assigned to the service, and the expiration dates of the eyewash solutions.

d. <u>Inspection Training.</u> VA medical facility Work Area Supervisors inspect personal eye irrigation bottles weekly to ensure that all personal eye irrigation bottles are sealed and have not reached their expiration dates.