



INJURY AND ILLNESS PREVENTION PROGRAM (IIPP)

**OAK GROVE SCHOOL DISTRICT
6578 Santa Teresa Blvd., San Jose CA 95119
408-227-8300**

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INJURY AND ILLNESS PREVENTION PROGRAM

ACKNOWLEDGEMENT

The Oak Grove School District has developed this Injury and Illness Prevention Program (IIPP), with the objective of maintaining a safe and healthful work environment for all employees. This program is in compliance with the California Labor Code Section 6401.7, and the California Code of Regulations Title 8, Sections 1509 and 3203, and it consists of the following elements:

- Responsibility
- Compliance
- Communication
- Hazard Assessment
- Hazard Correction
- Accident/Exposure Investigation
- Training and Instruction
- Recordkeeping

The District has developed a comprehensive Safe Schools Plan, to provide a safe learning environment for employees, volunteers and students. The safety of the children and personnel is the paramount priority of Oak Grove School District. The Injury and Illness Prevention Program (IIPP) for employees and volunteers works conjunctively with said plans.

Safety and accident prevention are essential to the Oak Grove School District. We strive to prevent injuries to staff, students and volunteers. By making safety a high priority for every employee and volunteer, we attempt to reduce injuries and illnesses, increase productivity, and promote a safer and healthier environment for all individuals at the Oak Grove School District. We also want to protect our environment and community. As it is necessary, we will contract with experts in specialized fields of safety and health to meet these goals.

The Oak Grove School District will provide the tools and education necessary for every employee and volunteer to work efficiently and safely. We expect these individuals to willingly follow and utilize the procedures set forth. We also expect that employees and volunteers will provide feedback to us when better methods or new ideas come to their attention. Any concerned person may contact the Oak Grove School District at (408) 227-8300.

RESPONSIBILITY

Safety Official

The ultimate responsibility for the Oak Grove School District's Injury and Illness Prevention Plan (IIPP) rests with the Coordinator of Human Resources. In this program, this person will be referred as the Safety Official:

Name: Gabriel Altamirano

Title: Chief Operations Officer

Address: 6578 Santa Teresa Blvd, San Jose, CA 95119

Telephone: (408) 227-8300 ext. 357

Email: galtamirano@ogsd.net

Responsibilities include:

- Working with the Leadership Team of representatives at school sites on health and safety issues. *See Appendix B for the Leadership Team list of contacts and phone numbers*
- Working with upper management to develop safety and health guidelines and policies
- Preparing and distributing the District's IIPP and General Safe Work Practices
- Maintaining current information on local, state and federal safety and health regulations
- Serving as liaison with governmental agencies
- Planning, organizing and coordinating safety trainings
- Develop department specific safe work practices as necessary
- Developing safety and health inspection guidelines and follow up procedures to ensure necessary corrective action is taken
- Reviewing injury and illness trends
- Scheduling and participating on the Safety Committee and its practices
- Establish a system for maintaining the records of inspection, hazard identification, correction and training

Program Directors and Managers

- Ensuring appropriate job specific safety training is received
- Ensuring workplace safety and work practices and procedures are clearly communicated and understood by employees and volunteers through training programs
- Enforcing health and safety rules fairly and uniformly related to job performances
- Ensuring safety responsibilities are outlined in the job descriptions, which govern the employees and volunteers under their direction
- Evaluating employee compliance with safety guidelines and practices
- Acknowledge employees and volunteers who make a significant contribution to maintenance of a safe workplace and disciplining employees who fail to follow safe work practices
- Encourage employees and volunteers to report workplace hazards without fear and reprisal.
- Ensuring periodic, scheduled workplace inspections are conducted and that identified health and safety deficiencies are corrected in a timely fashion

- Ensuring accidents and injuries are reported and investigated promptly. *See 8.0 Injury/Illness Report and Investigations*
- Ensuring inspections/investigations and employee health and safety records are kept for the designated period of time
- Purchasing appropriate personal protective equipment (PPE)
- Ensuring workplaces and equipment are safe, well maintained, and in compliance with external agency regulations and district's policies, programs and practices.

Employees and Volunteers

Immediate responsibility for workplace health and safety rests with each individual employee and volunteer. This involves:

- Following the established work procedures and safety guidelines in their area, as well as those identified in this program
- Keeping them informed of conditions affecting their health and safety
- Adhering to health and safe practices in their workplace
- Using personal protective equipment as required to protect them from identified hazards
- Prompt reporting to their managers of potential hazards in the workplace, injuries and/or accidents or any unsafe condition.

COMPLIANCE

The Oak Grove School District shall ensure that employees and volunteers comply with safe and healthy work practices. The Oak Grove School District strives to maintain a safe and healthful workplace for all employees, volunteers and students. Our experience shows that the effort taken to recognize and correct safety violations is cost effective and helps to improve the quality of educational services.

- Program Directors and Managers are responsible for establishing and maintaining good health and safety practices
- Program Directors and Managers will be responsible for recognizing constructive safety efforts for all employees and volunteers
- They will encourage employees and volunteers to make safety recommendations, which can be implemented
- Employees recognized for following safe and healthful work practices
- Every employee and volunteer is expected to participate in the District's safety program
- Overall job performance evaluations will include an aspect of safety involvement. Program Directors and Managers will also recognize those employees or volunteers not following safe work practices which have been explained to employees. Disciplinary action will begin for employees and volunteers, according to district procedures.
- Employees and volunteers receive initial training and retraining, as necessary or as required
- Health and safety practices are integrated into new employee job descriptions and performance appraisals
- Employees and volunteers are encouraged to report safety and health concerns with no fear of reprisal.

The District is aware occupational safety and health regulations and workplace practices are designed to reduce or eliminate employee occupational injuries and illnesses. However, the regulations and work practices are only effective if all employees faithfully abide by them. Therefore, the District, through the Safety Committee, will implement a system or systems to ensure that all employees comply with workplace safety and health practices. The committee will review and update the IIPP annually.

In the case of a workplace injury or illness, employees who do not have a Designated Physician form on file should obtain medical treatment at:

Concentra Occupational Medicine
1901 Monterey Road
Suite 10
San Jose, CA 95112

or Kaiser Occupational Medicine Clinic
275 Hospital Parkway, Suite 565
San Jose, CA 95119
498-972-6800

The system or combinations of systems will include any one or a combination of the following:

- Training
- Newsletters
- Intranet
- Board policies and procedures
- Disciplinary letters for non-compliant employees
- Handbooks

AED

California recently enacted legislation aimed at increasing the installation and use of automated external defibrillators ("AEDs"). On Sept. 8, 2015, Gov. Jerry Brown signed S.B. 658 into law. The bill revises the rules that must be followed to obtain immunity from civil liability for the selection, installation, placement and use of AEDs. The new law goes into effect on Jan. 1, 2016.

The intent of this new law bill is clearly to make it easier to obtain immunity for, and encourage, AED placement and use. Comments to S.B. 658 were submitted by the [American Heart Association](#) ("AHA"), and studies from the [Centers for Disease Control](#) and Prevention and Emergency Medical Services Authority ("EMSA") were considered. These comments and studies noted that increased access to AEDs can lead to increased cardiac arrest survival rates. The AHA noted in particular that cardiac arrest survival rates can increase to nearly 40 percent in communities with AED programs.

A.B. 658 provides that a person or entity that acquires an AED for emergency use is not liable for any civil damages resulting from the use of an AED to provide emergency care if that person or entity does all of the following:

- comply with all regulations governing the placement of an AED;
- notify the local emergency medical service agency of the existence, location and type of AED;
- maintain and test the AED according to the manufacturer's guidelines;
- test the AED at least twice a year and after each use;
- inspect all AEDs on the premises at least every 90 days; and

- maintain records of the maintenance and testing of the AED as required by the statute.

S.B. 658 eliminates employee CPR training requirements. Under the prior law, entities providing AEDs were required to have at least one employee trained in CPR for every AED unit acquired up to five units and one additional trained employee for every additional five units. Employers no longer have to train employees in CPR or the use of AEDs. And under S.B. 658, employers with AEDs are no longer required to have employees trained to respond to emergencies during normal work hours.

S.B. 658 also modifies the requirements that building owners must follow to obtain immunity. The new rules require building owners who provide AEDs to:

- annually notify building tenants of the location of the AED units and provide information on how to voluntarily take CPR or AED training;
- annually offer a demonstration on how to properly use an AED in an emergency;
- post instructions on how to use the AED next to the AED in at least 14-point font.

In addition S.B. 658 provides that a medical doctor is not required to be involved in the acquisition or placement of an AED.

Please note that the new law also modifies the requirements for AEDs placed in a public or private K-12 school. K-12 schools that provide AEDs are now required to provide information on sudden cardiac arrest, the school's emergency response plan and the proper use of an AED to administrators and staff annually, and must post similar information in at least 14-point font next to every AED. The revisions eliminated the requirement that principals must designate trained employees who can respond to an emergency during normal business hours. The new law makes clear that school employees are permitted to render aid with an AED.

S.B. 658 retains the prior law language that provides immunity for persons using an AED for emergency care when they do so "in good faith and not for compensation". See Civil Code 1714.21(b). Unfortunately, S.B. 658 has not clarified the quoted terms which have caused confusion and uncertainty in some cases. As an example, issues have been raised over what constitutes "good faith" and when is an employee using an AED not doing so "for compensation."

Practical Considerations

Employers and building owners in California should now review and revise their policies and procedures governing AEDs to meet the new S.B. 658 requirements. And those who have previously chosen not to provide AEDs out of concern that the law governing immunity was not sufficiently broad, may now want to review those decisions.

It may be prudent to still generally make use of AEDs voluntary and not part of an employee's job duties in order to minimize any dispute over whether an employee uses an AED "not for compensation." S.B. 658's revisions may make this less of an issue as employers are no longer required to provide trained employees to operate the AEDs. However, this issue may not be fully resolved. Please note that a common exception to such voluntary use would be for those who are emergency responders as part of their job duties. Under that

circumstance, workers' compensation law in California would typically provide protection against liability for workers who are accused of causing injury to co-workers as part of their job duties, but some exceptions are theoretically possible, such as a willful physical assault. See California Labor Code § 3602.

It may also be prudent to remind anyone who may use an AED that the device must only be used “in good faith” and explain that term as best as possible.

Although training is no longer required (apparently in recognition that AEDs are easy to use) employers and business owners should still give serious consideration to providing training. Despite their ease of use, it is still far more likely that employees and others will use AEDs, and use them properly and effectively, if training is provided.

COMMUNICATION

We recognize open, two-way communication between management and staff on health and safety issues is essential to an injury-free, productive workplace. The following system of communication is designed to facilitate a continuous flow of safety and health information between management and staff in a form that is readily understandable and consists of one or more of the following items:

- New worker orientation including a presentation and sign-off of the District's General Safe Work Practices
- Review of the District's IIPP workplace safety and health training programs
- Regularly scheduled safety meetings
- Effective communication of safety and health concerns between workers, supervisors, including translation where appropriate
- Posted or distributed safety information
- A system for workers to report workplace hazards
- A District Safety Committee which meets regularly, prepares minutes of the safety committee meetings, reviews the months inspections, accidents and exposures as necessary with a goal and objective of maintaining a safe and healthy workplace

Communication will consist of any one or combination of the following:

- Newsletters
- District Board Policies and Procedures
- Annual and monthly trainings
- Postings

It is the responsibility of the employee to read and understand the material provided to them.

ANONYMOUS NOTIFICATIONS

To further encourage employees to report unsafe conditions, the District has a system which promotes anonymous notifications. The anonymous Employee Safety Information form can be located in the Oak Grove School District Intranet.

NEW EMPLOYEES

Materials are provided to new employees at New Employee Orientation informing them of the OSHA safety regulations, reporting procedures, and responsibilities.

MISCELLANEOUS

When appropriate, the District may use written communications such as inter-district memos, newsletters, and workplace postings to supplement the previously described systems and further communicate to employees on matters relating to workplace safety and health. It is the responsibility of the employee to use the tools provided to stay informed of policies, procedures and changes.

MEETINGS

Meetings will be a part of the District's safety functions. The meetings are intended to be brief sessions to discuss one or more safety items and encourage open discussions between employees and management. The District monthly safety committee meetings cover a main topic each month. The safety committee is responsible for ensuring the District provides all students and staff with a safe and healthful workplace. The Safety Committee is intended to standardize various safety programs and procedures into an effective, uniform program and to ensure compliance with State and Federal Safety regulations. The Safety Committee monthly minutes will be posted on the Intranet in a Safety folder.

Documentation will include at minimum, the following:

- meeting topic(s)
- recommendations which may improve workplace safety
- list of attendees
- date of meeting
- time and length of meeting
- action items and completion dates
- review of any work accidents/injuries that have occurred since the last meeting and recommendations for prevention of such injuries in the future
- inspections and recommendations for correction of any hazards identified

HAZARD ASSESSMENT

Periodic inspections to identify and evaluate workplace hazards are performed by professional from DSA, SCCSIG, Fire Department, various Consultant Services and District Maintenance and Operations staff.

Inspections include, but are not limited to the following:

- Asbestos Hazard Emergency Response Act (AHERA). Inspections (6 months/3 years)
- DSA Design Reviews and Inspections by Inspector of Record for Construction Projects
- Food Service Inspections
- Fire Department, Annual Inspections
- Fire System Inspections and Tests (6 months)
- Groundwater and Storm Drain Inspections (Annual)
- Handicapped Lift Inspections (6 months)
- Hazardous Materials Inspection by the Fire Department (Annual)
- Property Liability Safety Inspections (3 to 5 years)

- Playground Inspections (weekly, quarterly, and all new installations)
- Williams Act Inspections (Annual)

Periodic inspections are performed according to the following schedule:

- When we initially established the IIPP
- When new substances, processes, procedures or equipment which present potential new hazards are introduced into the workplace
- When new, previously unidentified hazards are recognized
- When occupational injuries and illnesses occur
- Whenever workplace conditions warrant an inspection

Periodic inspections consist of identification and evaluation of workplace hazards utilizing applicable sections of the attached Site Inspection forms (available on intranet) or any other effective methods to identify and evaluate workplace hazards.

REPORTING PROCEDURES

For any occupational injury or illness which results in lost work time of at least a full day or shift beyond the date of occurrence, or which requires medical treatment beyond first aid, the employee must report the injury or illness immediately. Sylvia Alvarez will report the accident to the appropriate offices according to state and federal laws. For more information regarding injury and illness reporting, contact:

Sylvia Alvarez, Coordinator Human Resources
408-227-8300 ext 100187

WHERE TO SEEK MEDICAL ATTENTION

Employees should seek medical attention at the following clinic if they do not have a designated physician on file:

Concentra Occupational Medicine
1901 Monterey Road
San Jose, CA 95112
408-477-8080

SERIOUS INJURY OR DEATH

The following action is required:

- ✓ The incident is reported to the supervisor
- ✓ CAL/OSHA must be notified immediately or within 8 hours by telephone. The local Cal/OSHA District Office telephone number is 1-510-794-2521. Serious injuries or fatalities must be report to the local Cal-OSHA area office. <http://www.dir.ca.gov/title8/342.html>
- ✓ Completion of "Employer's Report of Occupational Injury or Illness" form 5020 within 24 hours

The supervisor shall conduct an initial investigation as soon as possible and distribute reports according to procedure.

LEGALLY REQUIRED REPORTS

A serious injury or illness is one which occurs in a place of employment or in connection with any employment which requires inpatient hospitalization for a period in excess of 24 hours, or in which an employee suffers a loss of any member of the body or suffers a serious degree of permanent disfigurement.

ACCIDENT/EXPOSURE INVESTIGATIONS

Procedures for investigating workplace accidents and hazardous substance exposures include:

Process and Action

- Visiting the accident scene as soon as possible
- Interviewing injured workers and witnesses
- Examining the workplace for factors associated with the accident/exposure
- Determining the cause of the accident/exposure
- Taking corrective action to prevent the accident/exposure from reoccurring
- Recording findings and corrective actions taken

Forms

- Use for Injury, Illness and Near Miss
- Report of Employee Incident/Injury completed online at <http://unltrclaimonline.insurancevisions.com/>

HAZARD CORRECTION

The District uses a District wide Work Order System to address any necessary corrections stemming from near misses, observed unsafe work conditions or corrective action for accidents or injuries.

Unsafe or unhealthy work conditions shall be corrected in a timely manner based on the severity of the hazards. Hazards shall be corrected according to the following procedures:

- When observed or discovered, sites and individuals are required to report necessary hazard corrections through the District Work Order System. School secretaries, and District Office Administrative Assistants are key contacts for this system
- Safety concerns which require immediate attention should be phoned into the Maintenance and Operations Department. 408-227-8300
- The online Work Order System should be used for all other corrective actions which do not create an immediate danger
- When an imminent hazard exists which cannot be immediately abated without endangering employee(s) and/or property, staff will remove all exposed workers from the area except those necessary to correct the existing condition. Workers necessary to correct the hazardous condition shall be provided with the necessary protection

- All such actions taken and dates they are completed shall be documented.

Unsafe practices or procedures that are observed should be reported to immediate supervisors to be addressed by taking corrective action or providing necessary training.

TRAINING AND INSTRUCTION

All workers, including managers and supervisors, shall have training and instruction on general and job-specific safety and health practices. Training and instruction shall be provided as follows:

- When the IIPP is first established
- To all new workers, training to be appropriate with employee skill level as determined by the interview process, self-reporting, and observation during the probationary period
- To all workers given new job assignments for which training has not previously been provided
- Whenever new substances, processes, procedures and/or equipment are introduced to the workplace and represent a new hazard (job specific)
- Whenever the employer is made aware of a new or previously unrecognized hazard
- To supervisors to familiarize them with the safety and health hazards to which workers under their immediate direction and control may be exposed
- To all workers with respect to hazards specific to each employee's job assignment

Workplace safety and health practices are based on our Hazard Assessment list and documented in our list of training subjects.

Training and instruction will be provided in any format or media which is readily understandable to all employees. Training formats and/or media may include but are not limited to:

- ✓ Seminars
- ✓ Workshops
- ✓ Manuals
- ✓ Policies and procedures posted
- ✓ Booklets
- ✓ Video, film or other visual media
- ✓ Meetings
- ✓ Newsletters and inter-district memos

District management will ensure which all training and instruction provided under the Injury and Illness Program are documented. Employees attending or receiving training mandated by this program may be requested to sign an attendance sheet.

LIST OF TRAINING SUBJECTS

We train our workers about the following training subjects:

- General Safe Work Practices
- Good housekeeping, fire prevention, safe practices for operating any construction equipment
- Safe procedures for cleaning, repairing, servicing and adjusting equipment and machinery
- Safe access to working areas
- Heat Stress
- Protection from falls
- Electrical hazards, including working around high voltage lines

- Proper use of powered tools
- Lock-out/Tag-out procedures
- Materials handling
- Chainsaw and other power tool operation
- Fall protection from elevated locations
- Use of elevated platforms, including condors and scissor lifts
- Driver safety
- Slips, falls and back injuries
- Ergonomic hazards, including proper lifting techniques and working on ladders or in a stooped posture for prolonged periods at one time
- Personal protective equipment
- Hazardous chemical exposures
- Hazard communication
- Physical hazards, such as heat/cold stress, noise
- Bloodborne pathogens and other biological hazards
- Emergency evacuation plan
- Provisions for medical services and first aid including emergency procedures
- Safety is Everyone's Business

RECORDKEEPING

We are a local government entity and we are not required to keep written records of the steps taken to implement and maintain our IIPP.

OAK GROVE SCHOOL DISTRICT

WORKPLACE VIOLENCE PREVENTION PROGRAM

WORKPLACE VIOLENCE IN CALIFORNIA

The circumstances associated with workplace violence in California can be divided into three major types.

TYPE I - Fatal workplace assaults involving a person entering a small late-night retail establishment; TYPE II - Workplace violence events involving an assault or threat by someone who is either the recipient of or the object of a service provided by the affected workplace or the victim; and TYPE III - Workplace violence event consists of an assault by an individual who has some employment-related involvement with the workplace. It is important to keep in mind that a particular occupation or workplace may be subject to more than one type.

Type I - Fatal workplace assaults involving a person entering a small late-night retail business. In California, the majority of fatal workplace assaults involve a person entering a small late-night retail establishment, e.g., liquor store, gas station or a convenience food store, to commit a robbery. During the commission of the robbery, a worker, or more likely, the proprietor, is killed or injured. Workers or proprietors who have face-to-face contact and exchange money with the public, who work late at night and into the early morning hours, and who often work alone or in very small numbers are at greatest risk of a Type I event. While the assailant may feign being a customer as a pretext to enter the establishment, he or she has no legitimate relationship to the workplace.

Type II - A Type II workplace violence event involves an assault or threat by someone who is either the recipient or the object of a service provided by the affected workplace or the victim.

Type II events involve fatal or nonfatal injuries to individuals who provide services to the public. These events chiefly involve assaults on public safety and correctional personnel, municipal bus or railway drivers, health care and social service providers, teachers, sales personnel, and other public or private service sector workers who provide professional, public safety, administrative or business services to the public.

Of increasing concern are Type II events involving assaults to the following types of service providers:

- ✓ Teaching, administrative and support staff in schools where students have a history of violent behavior; and
- ✓ Other types of service providers, e.g., justice system personnel, customer service representatives and delivery personnel.
- ✓

Unlike Type I events which often represent irregular occurrences in the life of any particular at-risk establishment, Type II events occur on a daily basis in many service establishments, and therefore represent a more pervasive risk for many service providers.

Type III - A Type III workplace violence event consists of an assault by an individual who has some employment-related involvement with the workplace. A Type III event usually involves a threat of violence, or a physical act of violence resulting in a fatal or nonfatal injury, by a current or former worker, supervisor or manager; a current or former spouse or lover; a relative or friend; or some other person who has a dispute involving a worker of the workplace.

Available data indicates that a Type III event is not associated with a specific type of workplace or occupation. Any workplace can be at risk of a Type III event. However, Type III events account for a much smaller proportion of fatal workplace injuries than Types I and II. Nevertheless, Type III fatalities often attract significant media attention and are perceived as more common than they actually are.

INJURY AND ILLNESS PREVENTION PROGRAM FOR WORKPLACE SECURITY

Oak Grove School District's Injury and Illness Prevention (IIP) Program for Workplace Security addresses the hazards known to be associated with the three major types of workplace violence. Type I workplace violence involves a violent act by an assailant with no legitimate relationship to the workplace who enters the workplace to commit a robbery or other criminal act.

RESPONSIBILITY

We have decided to assign responsibility for security in our workplace. The IIPP Administrator for workplace security is Sylvia Alvarez and has the authority and responsibility for implementing the provisions of this program for Oak Grove School District.

All administrators are responsible for implementing and maintaining this IIPP in their work areas and for answering worker questions about the IIPP. A copy of this IIPP is available in the Injury and Illness Prevention binder in the main office and is available on intranet in the Safety folder.

All initial reports regarding a workplace violence concern will be reported immediately to James Moreno, who will notify the Superintendent.

COMPLIANCE

Oak Grove School District has established the following policy to ensure compliance with our rules on workplace security.

Management of our establishment is committed to ensuring that all safety and health policies and procedures involving workplace security are clearly communicated and understood by all workers.

All workers are responsible for using safe work practices, for following all directives, policies and procedures, and for assisting in maintaining a safe and secure work environment. Our system of ensuring that all workers, including supervisors and administrators, comply with work practices that are designed to make the workplace more secure, and do not engage in threats physical actions which create a security hazard for others in the workplace, include:

- ✓ Informing workers, supervisors and administrators of the provisions of our IIPP for Workplace Security.
- ✓ Evaluating the performance of all workers in complying with our establishment's workplace security measures.
- ✓ Recognizing workers who perform work practices which promote security in the workplace.
- ✓ Providing training and/or counseling to workers whose performance is deficient in complying with work practices designed to ensure workplace security.
- ✓ Disciplining workers for failure to comply with workplace security practices.

COMMUNICATION

At Oak Grove School District, we recognize to maintain a safe, healthy and secure workplace we must have open, two-way communication between all workers, including administrators and supervisors, on all workplace safety, health and security issues. Our establishment has a communication system designed to encourage a continuous flow of safety, health and security information between management and our workers without fear of reprisal and in a form that is readily understandable. Our communication system consists of the following items:

- ✓ Periodic review of our IIPP for Workplace Security with all personnel
- ✓ Training programs designed to address specific aspects of workplace security unique to our establishment

- ✓ Regularly scheduled safety meetings with all district personnel which include workplace security discussions
- ✓ A system to ensure that all workers, including managers and supervisors, understand the workplace security policies
- ✓ Posted or distributed workplace security information
- ✓ A system for workers to inform management about workplace security hazards or threats of violence
- ✓ Procedures for protecting workers who report threats from retaliation by the person making the threats
- ✓ Addressing security issues at our workplace security team meetings

HAZARD ASSESSMENT

District personnel will be performing workplace hazard assessment for workplace security in the form of periodic inspections. Periodic inspections to identify and evaluate workplace security hazards and threats of workplace violence are performed by the following observer(s) in the following areas of our workplace:

Gabriel Altamirano	Chief Operations Officer
James Moreno	Manager of Maintenance & Operations
Van Nguyen	Manager of Custodians and Transportation

Periodic inspections are performed according to the following schedule:

- ✓ When the IIPP for Workplace Security was initiated
- ✓ When new, previously unidentified security hazards are recognized
- ✓ When occupational injuries or threats of injury occur
- ✓ Whenever workplace security conditions warrant an inspection
- ✓ Monitor inspection daily

Periodic inspections for security hazards consist of identification and evaluation of workplace security hazards and changes in establishment performs inspections for each type of workplace violence by using the methods specified below to identify and evaluate workplace security hazards.

Inspections for Type I workplace security hazards include:

- ✓ Assessing the exterior and interior of the workplace for its attractiveness to robbers
- ✓ Assessing the need for security surveillance measures, such as mirrors or cameras
- ✓ Posting of signs notifying the public that limited cash is kept on the premises
- ✓ Assessing procedures for worker response during a robbery or other criminal act
- ✓ Assessing procedures for reporting suspicious persons or activities
- ✓ Posting of emergency telephone numbers for law enforcement, fire and medical services where workers have access to a telephone with an outside line.
- ✓ Limiting the amount of cash on hand and using time access safes for large bills

Inspections for Type II workplace security hazards include assessing:

- ✓ Access to, and freedom of movement within, the workplace
- ✓ Adequacy of workplace security systems, such as door locks, security windows, security alarm system, physical barriers and restraint systems
- ✓ Frequency and severity of threatening or hostile situations that may lead to violent acts by persons who are service recipients of our establishment
- ✓ Workers' skill in safely handling threatening or hostile service recipients
- ✓ Effectiveness of systems and procedures to warn others of a security danger or to summon assistance, e.g., alarms or panic buttons
- ✓ The availability of worker escape routes
- ✓ Inspections for Type III workplace security hazards include assessing

- ✓ How well Oak Grove School District's anti-violence policy has been communicated to workers, supervisors or managers
- ✓ How well Oak Grove School District's management and workers communicate with each other
- ✓ Our workers', supervisors' and managers' knowledge of the warning signs of potential workplace violence
- ✓ Access to, and freedom of movement within, the workplace by non-workers, including recently discharged workers or persons with whom one of our worker's is having a dispute
- ✓ Frequency and severity of worker reports of threats of physical or verbal abuse by managers, supervisors or other workers
- ✓ Any prior violent acts, threats of physical violence, verbal abuse, property damage or other signs of strain or pressure in the workplace
- ✓ Worker disciplinary and discharge procedures

INCIDENT INVESTIGATIONS

Oak Grove School District has established the following policy for investigating incidents of workplace violence. Our procedures for investigating incidents of workplace violence, which includes threats and physical injury, include:

- ✓ Reviewing all previous incidents
- ✓ Reporting the incident to the San Jose Police Department
- ✓ Reporting the incident as a Major Incident Report
- ✓ Visiting the scene of an incident as soon as possible
- ✓ Interviewing threatened or injured workers and witnesses
- ✓ Examining the workplace for security risk factors associated with the incident, including any previous reports of inappropriate behavior by the perpetrator
- ✓ Determining the cause of the incident
- ✓ Taking corrective action to prevent the incident from recurring
- ✓ Recording the findings and corrective actions taken

HAZARD CORRECTION

Hazards which threaten the security of workers shall be corrected in a timely manner based on severity when they are first observed or discovered.

Corrective measures for Type 11 workplace security hazards include:

- ✓ Controlling access to the workplace and freedom of movement within it, consistent with business necessity.
- ✓ Ensuring the adequacy of workplace security systems, such as door locks, security windows, physical barriers and restraint systems.
- ✓ Providing worker training in recognizing and handling threatening or hostile situations which may lead to violent acts by persons who are service recipients of our establishment.
- ✓ Ensuring adequate worker escape routes.

Corrective measures for Type 111 workplace security hazards include:

- ✓ Effectively communicating our District's anti-violence policy to all employees, supervisors or managers
- ✓ Improving communication between our District's management and employees
- ✓ Increasing employees', supervisors' and managers' awareness of the warning signs of potential workplace violence
- ✓ Controlling access to, and freedom of movement within, the workplace by non-workers, including recently discharged workers or persons with whom one of our worker's is having a dispute

- ✓ Ensure that all reports of violent acts, threats of physical violence, verbal abuse, property damage or other signs of strain or pressure in the workplace are handled effectively by management and that the person making the report is not subject to retaliation by the person making the threat
- ✓ Ensure that worker disciplinary and discharge procedures address the potential for workplace violence
- ✓ Ensure that worker's placed on administrative leave turn in their keys and other Oak Grove School District property at time of action taken
- ✓ Ensure that workers' on extended leave turn in their keys and other Oak Grove School District property at time of leave

TRAINING AND INSTRUCTION

Oak Grove School District has established the following policy on training all workers with respect to workplace security.

All workers, including administrators and supervisors, shall have training and instruction on general and job-specific workplace security practices. Training and instruction shall be provided when the IIPP for Workplace Security is first established and periodically thereafter. Training shall also be provided to all new workers and to other workers for whom training has not previously been provided and to all workers, supervisors and administrators given new job assignments for which specific workplace security training for that job assignment has not previously been provided. Additional training and instruction will be provided to all personnel whenever the employer is made aware of new or previously unrecognized security hazards.

General workplace security training and instruction includes, but is not limited to, the following:

- ✓ Explanation of the IIPP for Workplace Security including measures for reporting any violent acts or threats of violence
- ✓ Recognition of workplace security hazards including the risk factors associated with the three types of workplace violence
- ✓ Measures to prevent workplace violence, including procedures for reporting workplace security hazards or threats to managers and supervisors
- ✓ Measures to summon others for assistance
- ✓ Worker routes of escape
- ✓ Notification of law enforcement authorities when a criminal act may have occurred
- ✓ Emergency medical care in the event of any violent act upon a worker

Oak Grove School District has chosen the following items for Type II training and instruction for managers, supervisors and employees:

- ✓ Dealing with angry, hostile or threatening individuals
- ✓ Location, operation, care, and maintenance of alarm systems and other protective devices
- ✓ Communication procedures
- ✓ Awareness of indicators that lead to violent acts by service recipients

Oak Grove School District has chosen the following items for Type III training and instruction for administrators, supervisors and employees:

- ✓ Pre-employment screening practices
- ✓ Awareness of situational indicators that lead to violent acts
- ✓ Managing with respect and consideration for employee well-being
- ✓ Review of anti-violence policy and procedures

Cal / OSHA Consultation - Area Offices

California Division of Occupational Safety and Health Enforcement Office in Fremont

39141 Civic Center Dr., Suite 310

Fremont, CA 94538-5818

Phone 510-794-2521

Fax 510-794-3889

OAK GROVE SCHOOL DISTRICT

Bloodborne Pathogens Exposure Control Plan

Policy Statement

It is the policy of the Oak Grove School District to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with federal and state regulations. All human blood and other potentially infectious materials will be treated as if known to be infectious for human immunodeficiency virus (HIV), Hepatitis B virus (HBV), and other bloodborne pathogens.

Scope: The Exposure Control Plan (ECP) applies to all employees with actual or potential exposure to bloodborne pathogens at all sites.

Regulation: CCR-Title n8, Section 5193

Plan Administration

Table 1 provides the roles and contact information for the administration of the bloodborne pathogens program.

Table 1

Program Contact Information

Task	Name/Department	Phone
Plan Administrator	Sylvia Alvarez, Human Resources	Work: 408-227-8300 ext. 100287
Supplies (PPE, cleaning materials, other)	James Moreno, M&O	Work: 408-227-8300 ext. 100343 :
Medical recordkeeping	Sylvia Alvarez, Human Resources	Work: 408-227-8300 ext.100287
Training	Sylvia Alvarez, Human Resources	Work: 408-227-8300 ext.100287
Exposure incident contact	Sylvia Alvarez, Human Resources	Work: 408-227-8300 ext. 100223

The ECP administrator is responsible for implementation of the ECP, and will maintain, review, and update the ECP at least annually, and whenever necessary to include new or modified tasks and procedures and to reflect new or revised employee positions with occupational exposure.

Maintenance and Operations will provide and maintain all necessary PPE, engineering controls (e.g., sharps containers), and labels as required by the standard, and will ensure that adequate supplies of the aforementioned equipment are available in the appropriate sizes.

Sylvia Alvarez, will be responsible for ensuring all medical actions required by the standard are performed and that appropriate employee health and OSHA records are maintained.

Sylvia Alvarez, site administrators and program managers will be responsible for training, documentation of training, and making the written ECP available to employees, the regulating authority, and representatives of the California Occupational Safety and Health Association (CalOSHA).

Sylvia Alvarez will act as the initial contact for reporting exposure incidents and ensure the appropriate response is carried out.

Those employees determined to have occupational exposure to blood or other potentially infectious materials (OPIM) must comply with the procedures and work practices outlined in this ECP.

Annual Plan Review and Update

This ECP will be reviewed and updated annually, and whenever new hazards are introduced in the workplace or conditions change that would result in a change in occupational exposure by employees.

ACCESS TO THE ECP

Employees covered by the bloodborne pathogens rules and policies will receive an explanation of this ECP during their initial training session. It will also be reviewed in their annual refresher training. All employees can review this plan at any time during their work shifts by contacting Human Resources. A copy of the ECP will be provided free of charge to any employee who requests it.

Definitions

Universal precaution—an approach to infection control whereas all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens.

Bloodborne pathogen—microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV) which causes acquired immune deficiency syndrome (AIDS).

Exposure incident—a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral (i.e., needlestick) contact with blood or other potentially infectious materials that results from the performance of an employee's duties.

Occupational exposure—reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties. "Good Samaritan" acts such as assisting a co-worker with a nosebleed are not considered occupational exposure.

Other potentially infectious materials (OPIM)—body fluids visibly contaminated with blood, including saliva in dental procedures, semen, vaginal secretions, amniotic fluid, and other such material where it is difficult to differentiate between body fluids.

Percutaneous injury— exposure by injection or absorption through the unbroken skin.

Personal protective equipment (PPE)—protective covering for the head, eyes, hands, feet, and body, such as nitrile or other liquid-resistant gloves, a face mask, or an apron.

Sharps—any object contaminated with blood or OPIM that can penetrate the skin, including needles, scalpels, wood or metal splinters, broken glass, broken capillary tubes, and exposed ends of dental wires.

Employee Exposure Determination

Determinations for employee exposure are made for at risk job classifications where occupational exposure to blood or OPIM occurs, is likely to occur, or is possible to occur.

Table 2 contains a list of all job classifications in which employees are at high risk of or likely to have occupational exposure to bloodborne pathogens.

Table 2

Likely Occupational Exposure—Job Classifications

Job Classification	Department/ Work Area	Exposure Task/Procedure
Bus Driver	Transportation	Student contact
Custodian	M&O	Cleaning up after students, assist in first aide
Health Clerk	Student Services	Administering first aid
Nurse	Student Services	Administering first aid and injections
Pre-School & BASE Staff	Student Services	Student contact, toileting
Instructional Assistant Spec Ed	Special Education	Student contact, toileting
Special Education Teacher	Special Education	Student contact

Table 3 contains a list of job classifications in which employees may at some time have occupational exposure, including part-time, temporary, contract, or per diem employees. The list includes tasks and procedures, or groups of closely related tasks and procedures, for which occupational exposure may occur for these individuals.

Table 3

Possible Occupational Exposure—Job Classifications

Job Classification	Department/ Work Area	Exposure Task/Procedure
School Secretaries	Site	Administering First Aid
Health Office Clerk	Site	Administering First Aid

If an employee believes he or she may be occupationally exposed to bloodborne pathogens and his or her job classification or tasks do not appear on the above lists, the employee should contact Sylvia Alvarez.

Implementation and Control Measures

UNIVERSAL PRECAUTIONS

All employees will use universal precautions in order to prevent contact with blood or OPIM. All blood and OPIM will be considered infectious regardless of the perceived status of the source.

Engineering Controls and Work Practices

Engineering controls and work practices will be implemented to prevent or minimize exposure to bloodborne pathogens. Sylvia Alvarez is responsible for ensuring that the engineering controls and work practices are implemented and updated as necessary.

The following engineering controls will or have been implemented:

- PPEs distributed
- New employee orientation training
- Annual review training
- Update Bloodborne Pathogen Exposure Control Plan annually
- Periodic information articles published
- Postings at all sites

The following work practices will be followed:

- Wash hands immediately after contact with blood or OPIM
- Exposed employees will wash their hands with running water and soap as soon as possible after using the antiseptic alternatives
- When skin or mucous membranes are exposed to blood or OPIM, those areas of the body will be washed or flushed with running water as soon as possible after contact
- After removal of PPE (e.g., gloves, face mask) used during exposure to blood or OPIM, the employee(s) will wash hands or other exposed skin areas with running water and soap as soon as possible

James Moreno evaluates new exposure control procedures and new products regularly by reviewing the Safety Data Sheets (SDS) and consulting with Student Services and Human Resources.

Housekeeping—Cleaning and Decontamination

All equipment, work areas, and working surfaces will be cleaned and decontaminated immediately or as soon as possible after any spill of blood or OPIM materials, after completion of procedures, and at the end of the work shift if the surface may have become contaminated since the last cleaning.

Decontamination of surfaces, equipment, and work areas will be accomplished by using the following materials:

- Use approved EPA disinfectant products; Morning Mist Cleaning Solutions, Peroxide Multi Surface Disinfectant and Cleaner, and GenEon Cleaner & Disinfectant Solution for mister.

Blood- or OPIM-contaminated waste will be placed in containers which are closable, constructed to contain all contents and prevent leakage, appropriately labeled or color-coded, and closed prior to removal to prevent spillage or protrusion of contents during handling.

The procedure for handling sharps disposal containers is:

1. Notify M&O for pick up
2. M&O disposes in the hazardous waste container by Health Services
3. M&O disposes sharps at Kaiser Permanente. Drop off requires a signature from the receiving person and department at Kaiser.

The procedure for handling blood- or OPIM-contaminated waste is:

1. Dispose of hazardous waste in a designated bag.
2. Notify M&O for pick up
3. M&O disposes in the hazardous waste container
4. M&O calls for hazardous waste pick up from a designated company

Contaminated sharps will be discarded immediately or as soon as possible in containers that are closable, puncture-resistant, leak proof on sides and bottoms, and appropriately labeled or color-coded. Clean sharps disposal containers are available at site health office.

Bins, pails (e.g., wash or emesis basins), cans, and similar receptacles will be inspected and decontaminated on a regularly scheduled basis, and cleaned and decontaminated as soon as possible after visible contamination.

Broken glassware that may be contaminated will only be picked up using mechanical means, such as a brush and dustpan.

Sharps Injury Prevention

The following sharps safer devices and engineering controls will be implemented:

- Needleless IV system
- Self-sheathing

All employees will comply with the following work practice controls to reduce exposure to sharps:

- Contaminated needles and other contaminated sharps will not be bent, recapped, or removed
- Shearing or breaking contaminated needles is prohibited
- Contaminated reusable sharps must be placed in designated reusable sharps containers
- Any bending, recapping, or needle removal must be accomplished by the school nurse

Sharps disposal. Sharps disposal containers are inspected and maintained or replaced by the school nurse whenever necessary to prevent overfilling.

Review and update procedures. This facility identifies the need for changes in engineering controls and work practices for the management of sharps through:

- Review of OSHA records
- Interviews with employees responsible for direct patient care

Human Resources will evaluate new procedures and new products regularly by reviewing new state and federal requirements and student needs.

Both front-line workers and management officials are involved in the process for evaluating new procedures and products in the following manner:

Union input
State and Federal guidelines
District needs

Student Services is responsible for ensuring that approved recommendations from the evaluations are implemented.

PPE

PPE is provided to our employees at no cost to them. PPE will be chosen based on the anticipated exposure to blood or OPIM. The PPE will be considered appropriate only if it does not permit blood or OPIM to pass through or reach the employee's clothing, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time in which it will be used.

Table 4 describes in detail how PPE will be provided and the types of PPE that will be given to employees.

Table 4

Provision of PPE to Employees

How Provided	PPE Distributor	Procedures Requiring PPE	Type of PPE Required
M&O Department	James Moreno	Cleaning	Gloves, glasses, clothing
Noon Duty	Sylvia Alvarez	First Aide	Gloves
Health Services	Van Nguyen	Cleaning and First Aid	Gloves
Training	Site Administrator Program Managers	Cleaning and First Aid	Gloves
Site Staff	Site Administrators	Cleaning and First Aid	Gloves

All PPE will be cleaned, laundered, and disposed of by the employer. All repairs and replacements will be made by the employer.

All PPE will be removed prior to leaving the work area. If visibly contaminated, PPE will be placed in an appropriately designated area or container for storage, washing, decontamination, or disposal. The designated areas are:

- Custodial Closet

Precautions when using PPE: All employees using PPE must observe the following precautions

- Wash hands immediately or as soon as possible after removal of gloves or other PPE
- Remove PPE after it becomes contaminated, and before leaving the work area
- Used PPE may be disposed of in the hazardous waste container
- Wear appropriate gloves when it can be reasonably anticipated that there may be hand contact with blood or OPIM, and when handling or touching contaminated items or surfaces; replace gloves if torn, punctured, contaminated, or if their ability to function as a barrier is compromised
- Never wash or decontaminate disposable gloves for reuse
- Wear appropriate face and eye protection when splashes, sprays, spatters, or droplets of blood or OPIM pose a hazard to the eye, nose, or mouth
- Remove immediately or as soon as feasible any garment contaminated by blood or OPIM, in such a way as to avoid contact with the outer surface

Blood-contaminated PPE

If PPE or personal clothing is splashed or soaked with blood or OPIM, the person wearing the PPE or clothing will remove the contaminated clothing as soon as possible. This clothing will be laundered at the employer's expense. Such clothing will be identified as contaminated and any employee exposed to it will be notified and protected from exposure.

Gloves

Gloves will be worn where it is reasonably anticipated that employees will have hand contact with blood, OPIM, non-intact skin, and mucous membranes. Gloves will be available from James Moreno, health assistants, and site administrators.

Disposable gloves will not be washed or decontaminated for reuse and will be replaced when they are torn, punctured, or when their ability to function as a barrier is compromised. Utility gloves may be decontaminated for reuse provided that the integrity of the glove is not compromised. Utility gloves will be discarded if they are cracked, peeling, torn, punctured, or exhibit other signs of deterioration or when their ability to function as a barrier is compromised.

PPE Training

All employees covered under the requirements of this plan will be trained to properly use, put on, take off, decontaminate, maintain, and store PPE. Training in the use of the appropriate PPE is provided by Human Resources, Student Services and site administrators.

Disposable PPE

Disposable gloves and paper face masks must not be used again once they are removed. Never wash or decontaminate disposable gloves for reuse. Replace them as soon as possible after they become contaminated or if they are torn, punctured, or their ability to function as a barrier is compromised.

Disposable PPE may be discarded in the regular trash if it has no visible contamination with blood or OPIM. Place PPE with visible contamination with blood or OPIM in a sharps or biohazard container.

HEPATITIS B VACCINATION

Human Resources and site administrators will provide training to employees on hepatitis B vaccinations, addressing safety, benefits, efficacy, methods of administration, and availability.

The hepatitis B vaccination series is available at no cost after initial employee training and within 10 days of initial assignment to all employees identified in the exposure determination section of this ECP.

When an employee elects to be vaccinated, a licensed health care professional will conduct a medical evaluation.

Vaccination is encouraged unless:

- Documentation exists that the employee has previously received the series;
- Antibody testing reveals that the employee is immune; or
- Medical evaluation shows that vaccination is contraindicated.

Following the medical evaluation, a copy of the health care professional's written opinion will be obtained and provided to the employee within 15 days of the completion of the evaluation. The evaluation will be limited to whether the employee requires the hepatitis vaccine and whether the vaccine was administered.

Vaccination will be provided by Kaiser if the employee is a Kaiser member or the District appointed clinic for all other employees.

Declination of the vaccine. If an employee declines the vaccination, the employee must sign a declination form (attached to this ECP). Employees who decline may request and obtain the vaccination at a later date at no cost. Signed declination forms are kept in Human Resources.

Exposure Incident Management

EXPOSURE INCIDENT REPORT

Any incident that results in occupational exposure to blood or OPIM will be reported immediately to Keenan and Associates. A separate report must be completed by each person exposed to blood or OPIM. The report will include the name of the person exposed, the time and date of the incident, and a determination of whether an exposure has occurred. If exposure has occurred, a post-exposure evaluation will be performed.

POST-EXPOSURE EVALUATION AND FOLLOW-UP

A confidential medical evaluation and follow-up will be conducted by Keenan and Associates. After initial first aid or medical attention, the following activities will be performed by

Concentra Occupational Medicine
1901 Monterey Road
San Jose, CA 95112
408-477-8080

or

Kaiser Occupational Medicine Clinic
275 Hospital Parkway, Suite 565
San Jose, CA 95119
408-972-6800

- Document the routes of exposure and how the exposure occurred
- Identify and document the source individual (unless the employer can establish that identification is infeasible or prohibited by state or local law)
- Obtain consent and make arrangements to have the source individual tested as soon as possible to determine HIV, HCV, and HBV infectivity; document that the source individual's test results were conveyed to the employee's healthcare provider
- If the source individual is already known to be HIV, HCV and/or HBV positive, new testing need not be performed
- Assure that the exposed employee is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g., laws protecting confidentiality).
- After obtaining consent, collect exposed employee's blood as soon as feasible after exposure incident, and test blood for HBV and HIV serological status

If the employee does not give consent for HIV serological testing during collection of blood for baseline testing, preserve the baseline blood sample for at least 90 days. If the exposed employee elects to have the baseline sample tested during this waiting period, perform testing as soon as feasible.

ADMINISTRATION OF POST-EXPOSURE EVALUATION AND FOLLOW-UP

Sylvia Alvarez ensures that the healthcare professional(s) responsible for employee's hepatitis B vaccination and post-exposure evaluation and follow-up are given a copy of the bloodborne pathogens regulation. Sylvia Alvarez will ensure that the healthcare professional evaluating an employee after an exposure incident receives:

- A description of the employee's job duties relevant to the exposure incident
- A description of route(s) of exposure
- Circumstances of exposure
- If possible, results of the source individual's blood test
- Relevant employee medical records, including vaccination status

The District's appointed clinic will provide the employee with a copy of the evaluating healthcare professional's written opinion within 15 days after completion of the evaluation.

PROCEDURES FOR EVALUATING THE CIRCUMSTANCES SURROUNDING AN EXPOSURE INCIDENT

Human Resources will review the circumstances of all exposure incidents to determine the:

- Engineering controls in use at the time
- Work practices followed
- Description of the device being used (including type and brand)
- Protective equipment or clothing that was used at the time of the exposure incident (gloves, eye shields, etc.)
- Location of the incident
- Procedure or task being performed when the incident occurred
- Employee's training

Student Services Department and Human Resources will record all percutaneous injuries from contaminated sharps in a Sharps Injury Log.

Employee Training

All employees who have occupational exposure to bloodborne pathogens will receive initial and annual training conducted by Human Resources and/or site administrator/Program Manager.

All employees who have occupational exposure to bloodborne pathogens will receive training on the epidemiology, symptoms, and transmission of bloodborne pathogen diseases. In addition, the training program covers, at a minimum, the following elements:

- A copy and explanation of the OSHA bloodborne pathogen standard
- An explanation of our ECP and how to obtain a copy
- An explanation of methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure incident
- An explanation of the use and limitations of engineering controls, work practices, and PPE
- An explanation of the types, uses, location, removal, handling, decontamination, and disposal of PPE
- An explanation of the basis for PPE selection
- Information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine will be offered free of charge
- Information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM
- An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available
- Information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident
- An explanation of the signs and labels and/or color coding required by the standard and used at this facility
- An opportunity for interactive questions and answers with the person conducting the training session

Recordkeeping

TRAINING RECORDS

Training records are completed for each employee upon completion of training. These documents will be kept for at least 3 years in Human Resources.

The training records will include the:

- Dates of the training sessions
- Contents or a summary of the training sessions
- Names and persons conducting the training
- Names and job titles of all persons attending the training sessions

Employee training records are provided upon request to the employee or the employee's authorized representative within 15 working days. Such requests should be addressed to Sylvia Alvarez

Medical Records

Medical records are maintained for each employee with occupational exposure in accordance with the employee exposure and medical records regulation. Sylvia Alvarez is responsible for maintenance of the required medical records. These confidential records are kept in Human Resources for at least the duration of employment plus 30 years.

OSHA RECORDKEEPING

An exposure incident is evaluated to determine if the case meets OSHA's Recordkeeping Requirements (29 CFR 1904).

Injury Log

In addition to the OSHA recordkeeping requirements, all percutaneous injuries from contaminated sharps are also recorded in a Sharps Injury Log. All incidents will include at least:

- The date of the injury
- The type and brand of the device involved (syringe, suture needle)
- The department or work area where the incident occurred
- An explanation of how the incident occurred

The Sharps Injury Log is reviewed as part of the annual program evaluation and maintained for at least 5 years following the end of the calendar year covered. If a copy is requested by anyone, it will have any personal identifiers removed from the report.

Oak Grove School District

ERGONOMICS INJURY AND ILLNESS PREVENTION PLAN

Introduction

Oak Grove School District has written and developed this program to comply with the provisions of Section 5110 of Title Eight of the California Code of Regulations and to address the problem of repetitive motion injuries that result from work-related activity.

The “Ergonomics Injury & Illness Prevention Program” outlines the policies and procedures that are both necessary and required to control RMI’s and comply with the various provisions of the ergonomics safety regulations. Although a copy of the current California standard is contained in this manual, significant changes should be anticipated over the coming months and possibly years. The Federal OSHA has issued a proposed ergonomics standard that could impact California in the near future.

Oak Grove School District will continue to stay informed of the changes in ergonomic rules and regulations, and we will make changes to our program as regulations evolve. In the meantime, the following procedures will define our approach to workplace ergonomics until those changes are approved and adopted.

Program Scope & Administration

STANDARD

Under certain specific circumstances, employers are required to develop a four-step prevention program to cope with repetitive motion injuries in the workplace.

SPECIFIC CRITERIA

1. This section (5110) applies to a job, process, operation, or other group work classification where a repetitive motion injury (RMI) has occurred to two or more employees.
2. The two RMI’s must have occurred within a single process, operation, or other similar work group classification to activate the requirements of this safety regulation.
3. The RMI must have been predominantly caused by a work-related repetitive job activity. Predominantly means over 50% caused by work activity.
4. The two or more employees incurring the RMI’s must have been performing the same job process or operation of identical work activity.
5. The RMI’s must have been musculoskeletal injuries that have been objectively identified and diagnosed by a licensed physician.
6. The RMI’s must have been reported to the employer by the involved employees within the last twelve months, but not prior to July 3, 1997.

7. Employers with nine or fewer employees are **NO LONGER** exempted from this regulation as of a California Court of Appeals decision in January 2000.

Work Site Evaluation & Hazard Assessment

STANDARD

All job classifications and/or categories that are covered by this section or safety standard must be evaluated and examined for exposure and hazards that may cause RMI's.

SPECIFIC CRITERIA

1. As with other portions of this standard, the exposure evaluation is required after two or more RMI's occur to two or more employees.
2. The exposure factors that need to be identified within each separate job category involve repetition and force. High repetition with strong forces has the most serious exposure to RMI's.
3. Repetition refers to the number of times an identical activity is repeated during a specific time period. A few repetitions per hour does not constitute a highly repetitive activity.
4. Force refers to the amount of energy or strength needed to perform an activity. The more force that is needed, the less the repetitions needed to potentially cause an RMI.

Control of Work-Related RMI Exposures

STANDARD

When a specific work group or category has demonstrated the potential for RMI's, an effort shall be made to control and/or mitigate the work exposures. The RMI exposures shall be addressed in a timely manner and to the extent feasible.

SPECIFIC CRITERIA

1. One method for mitigating exposures is the redesign of a job. Redesign means changing the way the job is performed so repetition and force exposures are reduced. In some cases redesign may involve transferring duties to other less stressful job categories.
2. Another method involves reducing force and repetition stress through teamwork. An example of basic teamwork includes requiring two people to lift a heavy object. Other ideas can be identified during the job evaluation phase.
3. Another technique involves the use of rest breaks and work pacing. Short, frequent breaks are usually preferable to longer, less frequent breaks.
4. Job rotation is another concept that has a practical application in some work situations. Worker skill and aptitude are required for this concept to be practical and effective.

5. Engineering controls are another exposure reduction concept and involve reducing the size of containers, installing handles or grips for lifting or pushing, increasing the size of wheels to improve rolling, and other ideas identified during the exposure evaluation process.
6. Modifications to clerical or computer workstations or adjustable furniture, such as stools or chairs should be considered as remedies to RMI exposures.
7. Cost and practicality are concepts that must be applied to the phrase “to the extent feasible.” Reducing RMI exposures should not put a business at financial risk or prohibit the actual performance of the job. Conversely, ideas known to the employer but not taken which may reduce RMI exposure to a greater extent without imposing significantly increased cost must be considered.

Employee Training

STANDARD

When this section is activated by the existence of two or more RMI's with a specific job classification, certain specific training requirements are activated.

SPECIFIC CRITERIA

1. Employees within one or more of the job categories covered by the standard should be made aware of the employer's ergonomics prevention program and its specific provisions.
2. Employees should be made aware of the various work injury exposures discovered during the RMI injury exposure evaluation process.
3. The various symptoms and the long-term consequences of the injuries caused by RMI's shall be communicated to employees within the affected work groups.
4. Employees within affected job groups must be made aware of the importance of reporting of symptoms so interventions can be more effective.
5. Training shall include an understanding of all exposure control methods, such as job redesign, workstation modification, exercise techniques, and other ideas discussed in the section on exposure control and reduction.

Workstation Evaluation

The proper setup of the workstation is the key to office ergonomics. An improper office arrangement will promote poor posture, increased physical stress, and can cause increased fatigue and may lead to symptoms of repetitive motion injuries (RSI's).

The evaluation must involve a comprehensive review of all factors, however, the chair is the place to start. The seat height should be adjustable so the legs of the employee can be properly positioned so the thighs are parallel with the floor and the feet are firmly resting on the floor. The legs should not hang nor should they be bent at

the ankles so the employee's toes can touch the floor. These conditions will lead to muscle tightening, tension, and fatigue.

The back of the chair should have a good lumbar pad which gives solid support to the small curve of the lower back. The back pad should be adjustable so the lower portion rides in the small of the back where support is needed. If the pad is too low it will not provide the needed support and the seat pad will tend to push the user toward the edge of the chair. Back pad tilt is a valuable option, but not as necessary as the height adjustments. Back pad tilt allows the user to bring the lumbar pad forward or back as needed.

Armrests are one of those accessories which can be described as a personal option. Some people like them and some don't. The important thing is to be sure the height of the armrest is low enough to allow the arms to hang in a natural position so the shoulders are not compressed up toward the neck. This condition will also lead to muscle fatigue in the shoulder and neck area. Arms rests are usually removable and some have an adjustable height.

The proper size of the seat pad will vary with the size of the user. The back of the legs should clear the front of the seat pad by 2 to 4 inches. If the clearance is much larger, the seat is probably too small and the user may feel like they are not being adequately supported. This will promote muscle tightening and will probably lead to aching muscles and leg fatigue.

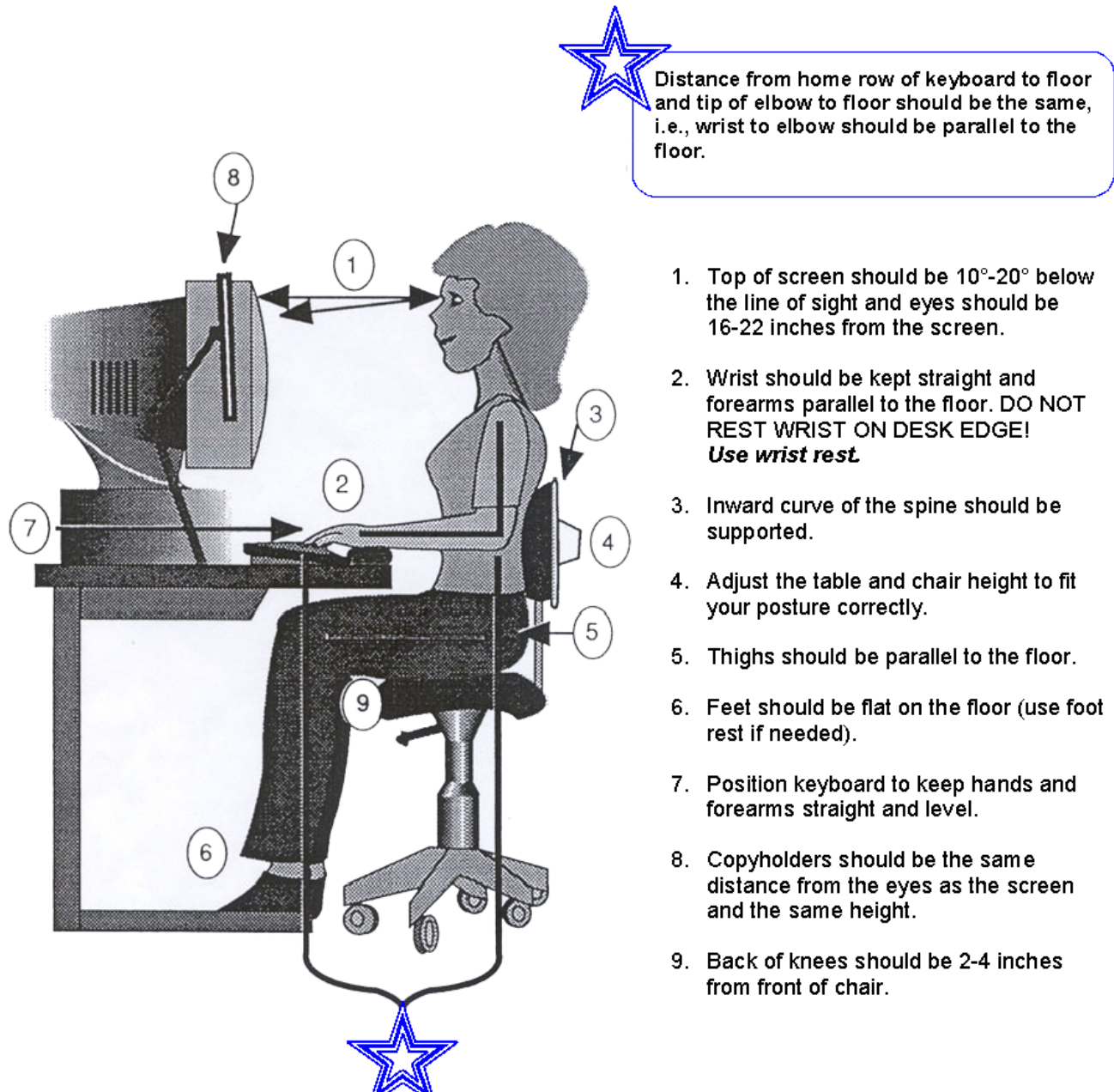
Other chair features include seat pad tilt, adjustable lumbar supports, and a rotational adjustment to the armrest. All of these features add cost and comfort, however, they are not as important as the other features. Once the proper chair has been selected we can move the employee into the work area to check other factors. The keyboard and mouse set-up are the next targets for review. The arms should be positioned similarly to the legs. They should be parallel with the floor and the wrist should be in the neutral (straight) position. If this is on the desktop, it may be too high. If an adjustable tray is being used, it may be positioned improperly. The adjustable keyboard tray with mouse support is probably the most desirable setup for most situations. The adjustment allows the user to position the keyboard and mouse at the proper level and proper angle without changing the position of the legs and feet.

The monitor should be placed directly in front of the worker, and it should be low enough that the top of the screen is about 5 degrees below eye level when looking straight out. The distance is recommended between 16 to 22 inches allowing the head to rest comfortably over the shoulders. Glasses, personal choice and the need for a desk surface could affect the distance. The distance is a concern, but it is not as critical as the height and the location. Working with the head tilted back and/or twisted to the side will lead to neck cramps and fatigue. Bifocals are discouraged because of the required head tilt. A single prescription lens is recommended for the computer user.

Other accessories include the work holder. The holders that mount on the top of the monitor with Velcro are effective because they leave the desk surface clear and they keep the work close to the screen. An office products catalog contains a variety of different designs and locating the proper type should be no problem. It is important to avoid twisting the neck to look at copy work which is positioned on a return or table off to the side. Keep the copy work in front of the user and at the same distance as the screen.

The diagram in the next section displays the various factors discussed above. Review the drawing and review the information included. By using the diagram, the above information, and the checklist which follows; you should be able to complete an effective workstation review.

YOU AND YOUR VDT



In general, move the frequently used objects into a primary space that is closest to you. Be careful to take into consideration your left/right preferences to reduce reaching and stretching. Move freely and work health

ERGONOMIC EXERCISES

RELEASING HAND, WRIST & SHOULDER TENSION

- | | |
|-------------------------|--|
| STRETCHING | – Place your hands out in front of you. Then spread your fingers as far apart as possible. Hold for five seconds and then relax. Repeat this process five times. |
| ROTATIONS | – Rotate your wrists, keeping your fingers relaxed and your elbows still. With your hands extended, first turn your palms up and then rotate your palms down. Repeat the exercise five times. |
| HANDSHAKING | – With your hands extended, relax your muscles and let your hands dangle at the wrists. Then shake your hands. First, shake them up and down and then shake them from side to side. Repeat the exercise until the tension is gone. |
| REACHING | – Place your arms over your head. With your fingers stretched, reach toward the ceiling. Hold the stretch for five seconds and then relax. Repeat five times. |
| ROLLING | – Using a wide circular motion, roll your shoulders backward. Repeat the exercise five times. |
| SHIFTING | – While sitting in your chair, move around to loosen up. Slouch, slump, look away from the screen, and dangle your arms. Repeat as often as necessary. |
| NECK GLIDES | – While seated, glide your neck forward and hold. Then glide the neck to the rear and hold. Keep the chin level. Repeat the exercise five times. |
| DEEP BREATHING | – Close your eyes, inhale and hold your breath while tightening your entire body. Slowly exhale and relax. Repeat five times. |
| EYE RELAXATION | – Using the index and middle finger gently massage the eye area just above and below the brow – first in a clockwise direction and then a counter- clockwise direction. |
| FINGER STRETCHES | – With hands at your sides and keeping the wrist straight, curl the fingers to the base of the fingers bending only the joints. Straighten the hands and relax. Repeat five times. |

Exercises and Relaxation Techniques

Repetition and force are important factors in the study of ergonomics and in determining the cause of RSI's. Repetition and force coupled with an improper workstation setup can in some cases lead to discomfort, fatigue, and the symptoms of RSI's over a longer period of time.

Repetition refers to the number of times a worker has to complete hand, arm, and finger manipulations. Force refers to the amount of effort or strain that must be exerted with each repetition. A high number of repetitions with heavy force are the most undesirable situation. There are a number of ways the effects of force and repetition can be mitigated.

Exercises are an excellent way to relieve some of the stress and tightness in the neck, fingers, hands, and shoulders. There are several different exercises included in this section that can be performed at the desk. Additionally, there are software programs available that remind the workers when to take breaks and show them how to exercise properly.

Taking rest breaks from the keyboard to do copying, filing, and other tasks is another way to reduce the build-up of tension and fatigue. Even short breaks are beneficial because they allow for some recovery in the muscles and tendons. And in addition, short breaks allow for a mental rest which can have a major effect on reducing stress build up.

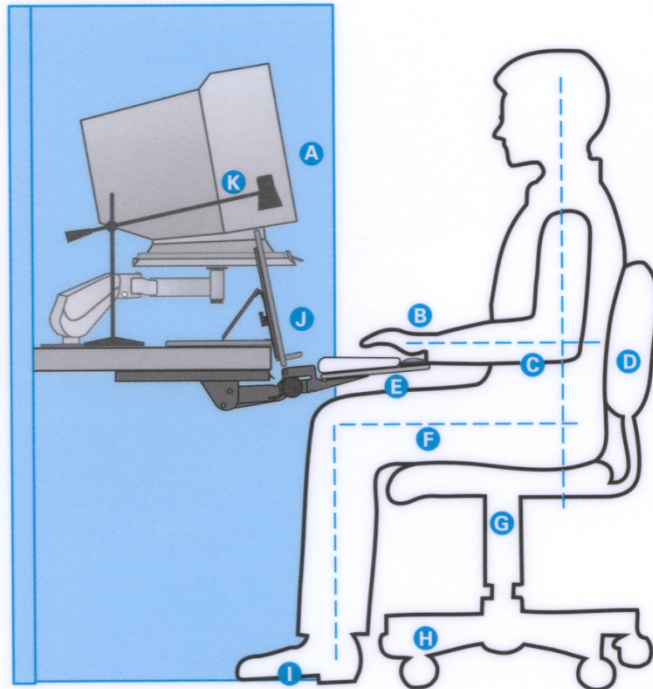
Scheduling is another method which can be used to avoid prolonged periods at the keyboard. By breaking up a variety of duties such as filing, copying, keying, and other tasks, the employee can limit keying to four one-hour periods rather than one prolonged four-hour period. The short segments allow for recovery between segments.

Taking breaks, organizing the work so a variety of tasks can be mixed over a period of a few hours is preferred rather than spending prolonged periods at one repetitive motion task.

The Ergonomically Positioned Workstation

Slouching, slumping or bending forward at the waist in a chair can lead to discomfort, fatigue and backache. Follow these guidelines to help prevent problems from occurring when sitting at your workstation.

- A. Top one-third of the screen at eye level; distance from operator a minimum of 18 inches.
- B. Wrists should be a natural extension of the forearm, not angled up or down.
- C. Elbow relaxed; lower arm at approximately 90° to upper arm.
- D. Adjustable back rest to accommodate the normal curve of the lower spine.
- E. Keyboard flat at elbow level with palm rest to support hands during rest.
- F. Thighs approximately parallel to the floor.
- G. Easily adjustable seat height. Seat pan short enough (front to back) for knee clearance and with a waterfall front edge.
- H. Swivel chair with 5-point base and casters.
- I. Feet resting firmly on the floor; footrest needed if feet are not supported by the floor.
- J. Document holder at same angle as screen.
- K. Adjustable task lighting for hard copy documents, if necessary.



OFFICE ERGONOMICS CHECKLIST

General Overview

Location:			Date:
Jobs:			Used For:
Main Topic	Yes	No	Comments
WORKER POSITIONING			
1. Are the worker's forearms and wrists parallel to the floor and the upper arms resting at his/her sides when positioned at the keyboard or the work surface?	<input type="checkbox"/>	<input type="checkbox"/>	
2. Are the worker's thighs parallel to the floor?	<input type="checkbox"/>	<input type="checkbox"/>	
3. Are the worker's feet flat on the floor or a footrest?	<input type="checkbox"/>	<input type="checkbox"/>	
4. Is there at least 2 inches of clearance between the worker's thighs and the working surface?	<input type="checkbox"/>	<input type="checkbox"/>	
5. Is there space between the edge of the seat pan and the back of the worker's knees?	<input type="checkbox"/>	<input type="checkbox"/>	
6. Are the worker's palms and wrists free from touching the keyboard or desk edge?	<input type="checkbox"/>	<input type="checkbox"/>	
7. Is the top of the viewing screen at eye level?	<input type="checkbox"/>	<input type="checkbox"/>	
8. Does the chair backrest support the curve of the worker's lower back?	<input type="checkbox"/>	<input type="checkbox"/>	
WORKSTATION SETUP			
9. Does the worker refer primarily to items placed in front of him/her?	<input type="checkbox"/>	<input type="checkbox"/>	
10. Is the VDT monitor positioned perpendicular to window light?	<input type="checkbox"/>	<input type="checkbox"/>	
11. Is there glare from overhead light?	<input type="checkbox"/>	<input type="checkbox"/>	
12. Is the screen between 18-24 inches from the worker's eyes?	<input type="checkbox"/>	<input type="checkbox"/>	
13. Can the workspace be adapted for either right or left-hand use?	<input type="checkbox"/>	<input type="checkbox"/>	
14. Are all frequently used items within a 6- to 14-inch reach of the worker?	<input type="checkbox"/>	<input type="checkbox"/>	
15. Are frequent reaches below shoulder height and/or above knee height?	<input type="checkbox"/>	<input type="checkbox"/>	
16. Does the arrangement of the work area allow access to all equipment and job aids without twisting?	<input type="checkbox"/>	<input type="checkbox"/>	
17. Are all cables routed out of the worker's way?	<input type="checkbox"/>	<input type="checkbox"/>	
WORK SPACE			
18. Is there space to perform all tasks at the workstation (at least 24" deep and 24")?	<input type="checkbox"/>	<input type="checkbox"/>	
19. Are work surfaces and/or equipment corners or edges rounded and smooth?	<input type="checkbox"/>	<input type="checkbox"/>	

KEYBOARD			
20. Is the keyboard detachable from the monitor?	<input type="checkbox"/>	<input type="checkbox"/>	
21. Can the keyboard adjust in angle? (ANSI recommends adjustability between 0-25 degrees.)	<input type="checkbox"/>	<input type="checkbox"/>	
22. Does the keyboard have a matte finish?	<input type="checkbox"/>	<input type="checkbox"/>	
23. Is the keyboard positioned on a user adjustable height/tilt support?	<input type="checkbox"/>	<input type="checkbox"/>	
MONITOR			
24. Can the monitor height be adjusted by the user?	<input type="checkbox"/>	<input type="checkbox"/>	
25. Does the monitor tilt? Swivel?	<input type="checkbox"/>	<input type="checkbox"/>	
26. Are images on the screen clear/sharp and easy to read?	<input type="checkbox"/>	<input type="checkbox"/>	
27. Is the screen anti-glare?	<input type="checkbox"/>	<input type="checkbox"/>	
28. If there is glare, is there an anti-glare filter or a VDT hood?	<input type="checkbox"/>	<input type="checkbox"/>	
29. Are there adjustable brightness and contrast controls?	<input type="checkbox"/>	<input type="checkbox"/>	
DOCUMENT HOLDER			
30. Is the document holder positioned at a similar distance from the workers' eyes to the monitor?	<input type="checkbox"/>	<input type="checkbox"/>	
31. Is the document holder positioned to allow neutral head positioning?	<input type="checkbox"/>	<input type="checkbox"/>	
CHAIR			
32. Can the worker, when seated, easily adjust the chair?	<input type="checkbox"/>	<input type="checkbox"/>	
33. Is the lumbar support adjustable in height and angle? Does it lock?	<input type="checkbox"/>	<input type="checkbox"/>	
34. Is the lumbar support at least 12 inches wide and 6-9 inches high (ANSI)?	<input type="checkbox"/>	<input type="checkbox"/>	
35. Is the tension on the backrest support adjustable?	<input type="checkbox"/>	<input type="checkbox"/>	
36. Is the center of the lumbar support between 6-10 inches above the seat pan (ANSI)?	<input type="checkbox"/>	<input type="checkbox"/>	
37. If a chair has armrests, are they adjustable in height?	<input type="checkbox"/>	<input type="checkbox"/>	
38. If a chair has armrests, do they allow workers to get close to the work surface?	<input type="checkbox"/>	<input type="checkbox"/>	
39. If a chair has armrests, are they at least 18.2 inches apart from each other (ANSI)?	<input type="checkbox"/>	<input type="checkbox"/>	
40. If a chair has armrests, are they at least 2 inches wide?	<input type="checkbox"/>	<input type="checkbox"/>	
41. If the chair has armrests, are the edges contoured and padded?	<input type="checkbox"/>	<input type="checkbox"/>	
42. Is the front seat pan edge rounded?	<input type="checkbox"/>	<input type="checkbox"/>	
43. Does the seat pan tilt? Lock?	<input type="checkbox"/>	<input type="checkbox"/>	

44. Is the seat pan at least 18 inches wide (ANSI)?	<input type="checkbox"/>	<input type="checkbox"/>	
45. Is the seat pan depth between 15-17 inches (ANSI)?	<input type="checkbox"/>	<input type="checkbox"/>	
46. Does the seat pan adjust in height between 16 to 20-½ inches (ANSI) (excludes drafting chairs)?	<input type="checkbox"/>	<input type="checkbox"/>	
47. Does the chair have a 5-legged swivel base?	<input type="checkbox"/>	<input type="checkbox"/>	
48. Does the chair have wheels or casters that allow mobility on carpeted floors?	<input type="checkbox"/>	<input type="checkbox"/>	
49. Is the chair padded?	<input type="checkbox"/>	<input type="checkbox"/>	
50. Do employees feel that the chair is comfortable (ask)?	<input type="checkbox"/>	<input type="checkbox"/>	
FOOTREST			
51. If a footrest is used, is it at least 2 inches high (ANSI) and adjustable angle?	<input type="checkbox"/>	<input type="checkbox"/>	
52. If a footrest is used, does it allow the worker to position himself/herself correctly at the workstation?	<input type="checkbox"/>	<input type="checkbox"/>	
ENVIRONMENT			
53. Are light levels 19 to 46 foot candles (fc) overall at the VDT workstation (ANSI)?	<input type="checkbox"/>	<input type="checkbox"/>	
54. Is task lighting (50 to 100 fc) provided for visually demanding tasks?	<input type="checkbox"/>	<input type="checkbox"/>	
55. Do lights shine in the worker's eyes?	<input type="checkbox"/>	<input type="checkbox"/>	
56. If there are windows, are window treatments used (blinds, curtains, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>	
57. Do all surfaces at the workstation have non-reflective (matte finishes) which reduce glare?	<input type="checkbox"/>	<input type="checkbox"/>	
58. Are colors at the workstation neutral?	<input type="checkbox"/>	<input type="checkbox"/>	
59. Is the work area free of drafts?	<input type="checkbox"/>	<input type="checkbox"/>	
60. Is the work area well ventilated?	<input type="checkbox"/>	<input type="checkbox"/>	
61. Is the work area noisy?	<input type="checkbox"/>	<input type="checkbox"/>	

OAK GROVE SCHOOL DISTRICT

HEAT STRESS PREVENTION PLAN

Heat Illness

Prevention

Scope: This Plan covers employees who are exposed to heat or hot conditions at or above the threshold levels for work areas and activities identified in the heat stress hazard assessment.

Policy: This organization is committed to protecting employees from the hazards of hot conditions and to preventing heat-related illnesses at the workplace. We will identify, evaluate, and control potential exposure of our employees to extreme temperature, humidity, and other heat-related factors.

Plan Administrator. The Plan Administrators, Pending, Chief Operations Official and James Moreno, Manager of Maintenance and Operations are responsible for implementing the Heat Stress Prevention Program, monitoring work area heat conditions and for ensuring that employees are trained to recognize the signs and symptoms of heat stress illnesses or injury and what to do if these occur.

Contact information:

Chief Operations Official	Pending	408-277-8300 x 100357
Manager of MOT Manager of MOT	James Moreno Van Nguyen	408-674-1265 408-242-7208

The Administrator may designate and authorize other personnel to implement specific components of the Plan.

Supervisors. Supervisors are responsible for encouraging employees to frequently consume water or other acceptable beverages to ensure hydration.

Prior to each workday, the forecasted temperature and humidity for the worksite will be reviewed and will be compared against the National Weather Service Heat Index to evaluate the risk level for heat illness. Determination will be made of whether or not workers will be exposed at a temperature and humidity characterized as either “extreme caution” or “extreme danger” for heat illnesses. It is important to note that the temperature at which these warnings occur must be lowered as much as 15 degrees if the workers under consideration are in direct sunlight.

The temperature will be taken into consideration to determine when it will be necessary to make modifications to the work schedule (such as stopping work early, rescheduling the job, working at night or during the cooler hours of the day, increasing the number of water and rest breaks.

Employees. Employees are responsible for monitoring their own personal factors for heat-related illness including consumption of water or other acceptable beverages to ensure hydration and taking cool-down breaks in the shade.

Plan Review and Update

This Plan will be periodically reviewed and updated when:

- New activities or equipment that creates heat stress are introduced into the workplace.
- Evaluations of heat stress hazards, injuries, and illnesses demonstrate that the current Plan is outdated or not effective.
- Regulatory or applicable national consensus standards change that require this Plan to be updated.

DEFINITIONS

Acclimatization or acclimate is the physiological (i.e., physical, mechanical, and biochemical) change that allows the human body to adapt or get used to the effects of a new physical environment or climate. After a period of acclimatization, the same physical activity will produce fewer cardiovascular demands. The worker will sweat more efficiently, causing better evaporative cooling, and thus will more easily be able to maintain normal body temperatures.

Calorie is the amount of heat required to raise 1 gram of water 1°Celsius (C) (based on a standard temperature of 16.5 to 17.5°C).

Conduction is the transfer of heat between materials that contact each other. Heat passes from the warmer material to the cooler material. For example, a worker's skin can transfer heat to a contacting surface if that surface is cooler, and vice versa.

Convection is the transfer of heat in a moving fluid. Air flowing past the body can cool the body if the air temperature is cool. On the other hand, air that exceeds 80° Fahrenheit (F) can increase the heat load on the body.

Dry bulb (DB) temperature is the measurement of the heat content of freely exposed air measured by a thermal sensor that is shielded from direct radiant energy sources.

Evaporative cooling takes place when sweat evaporates from the skin. High humidity reduces the rate of evaporation and thus reduces the effectiveness of the body's primary cooling mechanism.

Globe temperature is the temperature inside a blackened, hollow, thin copper globe.

Heat is a measure of energy that is transferred by a difference in temperature.

Metabolic heat is a by-product of the body's activity.

Natural wet bulb (NWB) temperature is measured by exposing a wet sensor, such as a wet cotton wick fitted over the bulb of a thermometer, to the effects of evaporation and convection. The term "natural" refers to the movement of air around the sensor.

Radiation is the transfer of heat energy through space. A worker whose body temperature is greater than the temperature of the surrounding surfaces radiates heat to these surfaces. Hot surfaces and infrared light sources radiate heat that can increase the body's heat load.

Heat-Related Illnesses

Illness as defined by OSHA is generally not instantaneous and occurs some time (hours or days) after the initial exposure to an occupational hazard. For example, an instantaneous reaction such as a burn after touching a hot

surface is considered an injury; whereas a delayed reaction to a hot environment such as heat exhaustion that occurs hours after the initial exposure is considered an illness.

Heat collapse is a condition where the brain does not receive enough oxygen because blood pools in the extremities, resulting in a loss of consciousness (fainting or syncope). This reaction is similar to that of heat exhaustion and does not affect the body's heat balance. However, the onset of heat collapse is rapid and unpredictable. Heat syncope is a fainting episode or dizziness that usually occurs with prolonged standing or sudden rising from a sitting or lying position. Factors that may contribute to heat syncope include dehydration and lack of acclimatization.

Heat cramps are usually caused by performing hard physical labor in a hot environment. These cramps have been attributed to an electrolyte imbalance caused by sweating. Cramps can be caused by both too much and too little salt. Cramps appear to be caused by the lack of water replenishment. Because sweat is a hypotonic solution ($\pm 0.3\%$ sodium chloride), excess salt can build up in the body if the water lost through sweating is not replaced. Thirst cannot be relied on as a guide to the need for water; instead, water must be taken every 15 to 20 minutes in hot environments. Under extreme conditions, such as working for 6 to 8 hours in heavy protective gear, a loss of sodium may occur. Recent studies have shown that drinking commercially available carbohydrate-electrolyte replacement liquids is effective in minimizing physiological disturbances during recovery.

Heat exhaustion is a condition with symptoms of headache, nausea, vertigo, weakness, thirst, and giddiness. Fainting associated with heat exhaustion can be dangerous because the victim may be operating machinery or controlling an operation that should not be left unattended; moreover, the victim may be injured when he or she faints. Also, the signs and symptoms seen in heat exhaustion are similar to those of heat stroke, a medical emergency.

Heat fatigue is a temporary state of discomfort and mental or psychological strain arising from prolonged heat exposure. It is generally caused by fluid loss. Workers unaccustomed to the heat are particularly susceptible and can suffer, to varying degrees, a decline in task performance, coordination, alertness, and vigilance. There is no treatment for heat fatigue except to remove the heat stress before a more serious heat-related condition develops. The severity of transient heat fatigue will be lessened by a period of gradual adjustment to the hot environment (heat acclimatization).

Heat rash is "prickly" heat manifested as red papules (i.e., small, inflammatory, irritated spots on skin) and usually appears in areas where the clothing is restrictive. It is the most common problem in hot work environments. As sweating increases, these papules give rise to a prickling sensation. Prickly heat occurs on skin that is persistently wetted by unevaporated sweat, and heat rash papules may become infected if they are not treated. In most cases, heat rashes will disappear when the affected individual returns to a cool environment.

Heat stroke is a condition when the body's system of temperature regulation fails and body temperature rises to critical levels. This condition is caused by a combination of highly variable factors, and its occurrence is difficult to predict. Heat stroke is a medical emergency. The primary signs and symptoms of heat stroke are confusion, irrational behavior, loss of consciousness, convulsions, a lack of sweating (usually), hot and dry skin, and an abnormally high body temperature (e.g., a rectal temperature of 41°C (105.8°F)). If body temperature is too high, it causes death. The elevated metabolic temperatures caused by a combination of work load and environmental heat load, both of which contribute to heat stroke, are also highly variable and difficult to predict.

HAZARD ASSESSMENT

The Administrator or designee will conduct an initial inspection and hazard assessment of all work areas and environments where hot conditions are anticipated or may occur. He or she will periodically conduct follow-up inspections to ensure compliance with this Plan and to evaluate the effectiveness of heat stress control measures.

During the assessment the inspector will:

- Determine building and facility operating characteristics that may cause, contribute to, or alleviate hot conditions.
- Determine whether engineering and administrative controls are functioning properly
- Verify information obtained from employee interviews
- Perform temperature measurements and make other determinations to identify potential sources of heat stress

Investigators will discuss any operations which have the potential to cause heat stress with engineers or other knowledgeable personnel. A walk-around inspection will cover all affected areas. Heat sources such as furnaces, ovens, and boilers, and relative heat load per employee will be noted.

Heat Stress Factors

The following workplace factors will be considered in the assessment for heat stress:

- Air temperature
- Radiant heat sources
- Conductive heat sources
- Humidity
- Direct physical contact with hot objects
- Workload activity and duration
- Semi-permeable or impermeable protective clothing

The following worker heat sensitivity factors will also be considered in evaluating the potential for heat stress:

- Age
- Weight
- Degree of physical fitness
- Degree of acclimatization
- Metabolism
- Use of alcohol or drugs
- Medical conditions such as hypertension
- Prior heat injury (predisposes an individual to additional injury)

HEAT STRESS PREVENTION PROGRAM

This Heat Stress Prevention Program describes controls and work practices to protect employees from heat stress while working in hot conditions.

Program Implementation Criteria

The Administrator or designee will implement the Heat Stress Prevention Program when the action levels for hot conditions in the WBGT are exceeded.

Heat Stress Engineering Controls

The following engineering controls will be implemented before and in combination with work practices.

General Ventilation

General ventilation will be used where feasible and practical to dilute hot air with cooler air. Portable or local exhaust systems will be provided for small areas where general ventilation is not feasible or practical. If the dry bulb temperature is higher than 80°F and the air is dry, evaporative cooling may be improved by air movement. When the dry bulb temperature exceeds 80° and the relative humidity is 100%, air movement will make the worker hotter and forced ventilation will not be used to alleviate heat stress.

Fans

Fans will be provided where general ventilation is insufficient or impractical and when evaporative cooling will be improved by air movement.

Air Cooling or Conditioning

Air cooling or conditioning systems will be provided where feasible and practical.

Insulation

Heating pipes will be insulated or otherwise shielded to reduce radiant heat.

Heat Stress Prevention Work Practices

Work practices will be implemented to reduce the risk of elevating an employee's core body temperature. Heat stress prevention practices that may be implemented individually or in combination include:

- Employee work and rest intervals
- Continual personal monitoring of physiological signs of heat stress
- Provide cool liquids
- Establish and implement acclimatization schedules
- Use warm-weather cooling garments
- Reduce the physical demands of work, e.g., excessive lifting or digging with heavy objects
- Provide recovery areas such as air-conditioned enclosures and rooms
- Use shifts such as early morning, cool part of the day, or night work
- Use intermittent rest periods with water breaks
- Use relief workers
- Use worker pacing
- Assign extra workers and limit worker occupancy, or the number of workers present, especially in confined or enclosed spaces
- Schedule work in hot conditions for the cooler part of the day
- Schedule routine maintenance and repair work in hot areas for the cooler seasons of the year.

Employee Work/Rest Intervals

The Administrator or designee will determine the work/rest intervals and communicate them to employees by *meeting with them in the morning*. Work/rest intervals are adjusted throughout the work shift as needed and communicated to each employee at the conclusion of an applicable rest period, prior to reentry into a work area.

When temperatures are 95 degrees or higher, employees will take a 10 minute break every two hours in a shaded area.

Fluid Replacement

Since dehydration is a primary cause of heat illness, employees on each site will be reminded on the importance of liquid consumption. One cup (8 oz) every 20 minutes is recommended. Ample supplies of liquids (1 quart per person per hour) are available at each site.

Drinking water will be available to all employees at each site. Employees will have access to drinking water at all sites through school site water fountains and/or water containers. Water in water containers will be refilled with cool water when the water level within a container drops below 50 percent.

Water will be fresh, pure, and suitably cool and provided to employees free of charge. Supervisors will visually examine the water and pour some on their skin to ensure that the water is suitably cool.

Water containers will be located as close as practicable to the areas where employees are working to encourage the frequent drinking of water. If field terrain prevents the water from being placed as close as possible to the workers, bottled water or personal water containers will be made available, so that workers can have drinking water readily accessible.

All water containers will be kept in sanitary condition. Water from non-approved or non-tested water sources (e.g., untested wells) is not acceptable. If hoses or connections are used, they must be governmentally approved for potable drinking water systems, as shown on the manufacturer's label.

Workers will be reminded daily of the location of the water coolers and of the importance of drinking water frequently. When the temperature exceeds or is expected to exceed 80 degrees Fahrenheit, brief tailgate meetings will be held each morning to review with employees the importance of drinking water, the number and schedule of water and rest breaks and the signs and symptoms of heat illness.

When the temperature equals or exceeds 95 degrees Fahrenheit or during a heat wave, a pre-shift meeting before the commencement of work to encourage employees to drink plenty of water and remind employees of their right to take a cool-down rest when necessary will be conducted. Additionally, the number of water breaks will be increased to 10 minutes every two hours in a shaded area.

Personal Protective Equipment

The Administrator or designee will determine the types of PPE that may be used to minimize heat stress after engineering controls and work practices have been implemented and workers are still exposed to heat stress hazards.

Reflective Clothing

Reflective clothing varies from aprons and jackets to suits that completely enclose the worker from neck to feet and can stop the skin from absorbing radiant heat. Because most reflective clothing does not allow air exchange through the garment, the reduction of radiant heat must more than offset the corresponding loss in evaporative cooling. For this reason, reflective clothing should be worn as loosely as possible. In situations where radiant heat is high, auxiliary cooling systems can be used under the reflective clothing.

Wetted Clothing

Wetted clothing is effective when reflective or other impermeable protective clothing is worn. The clothing may be wetted terry cloth coveralls or wetted two-piece, whole-body cotton suits. This approach is effective under conditions of high temperature and low humidity where evaporation from the wetted garment is not restricted.

Shade structures

Shade structures will be opened and placed as close as practical to the workers when the temperature equals or exceeds 80 degrees Fahrenheit. When the temperature is below 80 degrees Fahrenheit, access to shade will be provided promptly when requested by an employee.

Note: The interior of a vehicle may not be used to provide shade unless the vehicle is air-conditioned and the air conditioner is on.

Enough shade structures will be available at the site to accommodate all the employees who are on a break at any point in time. During meal periods there will be enough shade for all of the employees who choose to remain in the general area of work or in areas designated for recovery and rest periods.

Workers will be informed daily of the location of the shade structures and will be encouraged to take a five-minute cool-down rest in the shade.

Shade structures will be relocated to follow along with the crew and they will be placed as close as practical to the employees, so that access to shade is provided at all times. All employees on a recovery, rest break or meal period will have full access to shade so they can sit in a normal posture without having to be in physical contact with each other.

PROCEDURES FOR HANDLING A HEAT WAVE:

“Heat wave” means any day in which the predicted high temperature for the day will be at least 80 degrees Fahrenheit and at least ten degrees Fahrenheit higher than the average high daily temperature in the preceding five days.

During a heat wave or heat spike, the work day will be cut short or rescheduled

During a heat wave or heat spike, and before starting work, tailgate meetings will be held to review the District’s heat illness prevention procedures, the weather forecast and emergency response. In addition, if schedule modifications are not possible, workers will be provided with an increase in the number of water and rest breaks and will be observed closely for signs and symptoms of heat illness.

EMERGENCY RESPONSE

The Administrator or designee will implement the following emergency response procedures for the type of heat stress indicated.

Heat Stroke

If a worker shows signs of possible heat stroke, professional medical treatment will be obtained immediately. The supervisor or co-workers will take the following steps to treat a worker with heat stroke:

1. Call 911 and notify the supervisor.
2. Move the sick worker to a cool, shaded area.
3. Cool the worker using methods such as soaking his or her clothes with water, spraying, sponging, or showering him or her with water, and fanning his or her body.

The worker should be placed in a shady area and the outer clothing should be removed. The worker’s skin should be wetted and air movement around the worker should be increased to improve evaporative cooling until professional methods of cooling are initiated and the seriousness of the condition can be assessed. Fluids should be replaced as soon as possible. The medical outcome of an episode of heat stroke depends on the victim’s physical fitness and the timing and effectiveness of first-aid treatment. Regardless of the worker’s protests, no employee suspected of being ill from heat stroke should be sent home or left unattended unless a physician has specifically approved such an order.

Heat Exhaustion

Heat exhaustion responds readily to prompt treatment. A worker suffering from heat exhaustion should:

- Rest in a cool, shaded, or air-conditioned area.
- Drink plenty of water or other cool, nonalcoholic beverages.

- Take a cool shower, bath, or sponge bath.

Workers suffering from heat exhaustion will be removed from the hot environment and given fluid replacement. They will also be encouraged to get adequate rest.

Heat Syncope (Fainting)

Workers who exhibit signs of heat syncope will be instructed by a supervisor or co-workers to:

- Sit or lie down in a cool place when they begin to feel symptoms.
- Slowly drink water, clear juice, or a sports beverage.

Heat Cramps

Workers with heat cramps should:

- Stop all activity, and sit in a cool place.
- Drink clear juice or a sports beverage.
- Not return to strenuous work for a few hours after the cramps subside, because further exertion may lead to heat exhaustion or heat stroke.
- Seek medical attention if the worker has heart problems, the worker is on a low-sodium diet, or the cramps do not subside within one hour.

Heat Rash

Workers experiencing heat rash will be treated according to the following procedures:

- Directed to work in a cooler, less humid environment when possible.
- Keep the affected area dry.
- Use dusting powder to help increase comfort.

TRAINING

SUPERVISORS:

Supervisors will be trained on their responsibility to provide water, shade, cool-down rests and access to first aid as well as employees' right to exercise their rights under this standard without retaliation.

Supervisors will be trained in appropriate first aid and/or emergency responses to different types of heat illness, and in addition, that heat illness may progress quickly from mild symptoms and signs to serious and life-threatening illness.

Supervisors will be trained on how to track the weather at the job site (by monitoring predicted temperature highs and periodically using a thermometer). Supervisors will be instructed on how weather information will be used to modify work schedules, to increase the number of water and rest breaks or cease work early if necessary.

All employees who are exposed or potentially exposed to heat stress will receive training regarding heat stress-related injuries and illnesses and prevention measures at the time of assignment to work activities that involve hot conditions.

The following topics will be covered during safety training for heat stress:

- Knowledge of the hazards of heat stress, including environmental factors that might contribute to the risk of heat-related illness (temperature, humidity, radiant heat, air movement, conductive heat sources, workload activity and duration, and personal protective equipment)
- Recognition of predisposing factors, danger signs, and symptoms (e.g., age, degree acclimatization, medical conditions, consuming alcohol, caffeine use, nicotine use, and use of medications that affect the body's response to heat)
- The importance of frequent drinking of small quantities of water
- The importance of shade and cool down break
- Awareness of first-aid procedures for heat stroke and other heat stress-related illnesses
- The procedure for reporting signs and symptoms of heat-related illness in themselves and co-workers
- Employee and supervisors responsibilities in avoiding heat stress
- Use of protective clothing and equipment, including the importance of removing heat-retaining PPE, such as non-breathable chemical resistant clothing, during breaks
- First aid and other emergency response procedures

REFRESHER TRAINING

Personnel covered by this Plan will receive refresher heat stress training at least once per year, and whenever there is a change in work assignment or hot conditions, or when a new heat source is introduced to a work area.

RECORDKEEPING

Heat stress-related illnesses that are relieved by first aid and do not require additional medical treatment will not be recorded in injury and illness records.

Heat stress-related illnesses that require medical treatment beyond first aid will be recorded as an illness or injury and illness recordkeeping forms. For example, the administration of fluids by intravenous injections is recordable as medical treatment, and more serious cases of heat disorders involving such injections will be entered into the injury and illness records. In addition, any diagnosis by a physician or other licensed healthcare professional of heat syncope (fainting due to heat) will be recorded.

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