

LAUREL SCHOOL DISTRICT
DISTRICT #7 & 7-70
LAUREL, MONTANA

LOSS CONTROL PROGRAM

“SAFETY IS #1”

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SAFETY POLICY

It is the policy of School District #7 & 7-70 to be a safe place for all students and employees to learn and to work. We realize that safety and accident prevention succeeds only when all join in the responsibility, desire, and effort to create and maintain a continuous safety program.

SAFETY BEGINS WITH AN ATTITUDE AND PROGRESSES TO A HABIT.

All district personnel are asked to begin acquiring the following safety attitudes and habits.

It is the intent of School District 7 & 7-70 to comply with all existing safety and health regulations as established by the Occupational Safety and Health Act of 1970.

Our objectives are to provide to the best of our ability:

1. An accident and injury free work environment through:
 - a. a hazard free work place
 - b. a safety conscious work force
2. A reduction in costs associated with occupational accidents through:
 - a. a reduction in accident frequency
 - b. a reduction in injury severity
3. Accident and injury protection to students and the general public.

SAFETY POINTS

1. All accidents are preventable; 90% of all accidents are caused by unsafe acts, 10% by unsafe conditions.
2. All employees are responsible for working safely.
3. All exposures can be controlled. If you cannot eliminate the hazard, it must be managed.
4. All employees must follow procedures and practices taught at in-services and workshops.
5. All safety deficiencies must be reported for correction. All safety concerns should be reported to your immediate supervisor.
6. Safety benefits all.

PROGRAM AUTHORITY, RESPONSIBILITY AND ACCOUNTABILITY

ADMINISTRATION

The administration of the Laurel School District will be responsible for review, revisions and additions to the Loss Control Program. They have the authority to implement policies and procedures as identified by the School Board, regulatory agencies such as the Montana Department of Labor and Industry - Safety Bureau, our workers' compensation and property and liability carriers, and employees of the Laurel School District. The Business Manager of the Laurel School District will be the designated Safety Director.

The administration also has the responsibility to ensure that all supervisors and employees are in full compliance with the policies and procedures in the Loss Control Program.

The administration will make available new employee orientation, initial safety training, and continuing safety education for all employees.

The School Board has the final authority for all aspects of the program.

EMPLOYEES

Employees of the Laurel School District are responsible for following all policies and procedures that are contained in the Loss Control Program and as directed by the Administration. They are responsible for working with the Safety Director in increasing safety awareness and practices. Other responsibilities include:

- Working with others and following all safety rules;

- Assisting new employees in program compliance;

- Assisting in training new employees in job responsibilities and equipment operation;

- Identification of potential hazards to the Safety Director;

- Accident reporting;

- Assisting with accident investigations;

- Participation in safety committees;

- Attendance of safety meetings/training;

- Compliance with the general safety rules.

GENERAL SAFETY RULES

Safety regulations are established to protect lives and property. All employees are responsible for the following rules and also are asked to live up to their spirit in order to safeguard themselves and fellow employees.

THERE IS NO SUBSTITUTE FOR THE USE OF COMMON SENSE AND GOOD JUDGMENT WHEN IT COMES TO SAFETY

1. Study your job and working conditions. Recognize the hazards and protect yourself and your fellow workers against them.
2. Promptly report all injuries to your supervisor; administer first aid promptly. (In case of serious injury, do not move the person until medical aid arrives unless in dangerous location.)
3. Read and observe all signs and warnings. They are placed there for a purpose.
4. If you are in doubt about the safe or proper way to do any job, get instructions from your supervisor. Also correct and/or report any condition which you feel is unsafe to your supervisor as soon as possible.
5. Report fire immediately. Use fire extinguishers or appropriate equipment. Follow the area's direction for evacuation. **WALK, DO NOT RUN.**
6. Know the location of emergency exits and of safety equipment for your area(s). Know the location and general operation of hand fire extinguishers and other emergency equipment in your department. Keep emergency equipment and exits clear at all times. Report use of any emergency equipment to the supervisor.
7. All work areas will be kept free from hazards. Material stacking or storage must be arranged to prevent its falling or causing someone to trip. Oily and dirty rags must be stored and disposed of in proper containers. Fluids spilled on floor areas must be cleaned up immediately.
8. Repair jobs are not complete until all debris resulting from such job has been cleaned up.
9. Use the right tools for the job.
10. Report all identified hazards whether unsafe conditions or unsafe actions to your supervisor immediately. If a hazard is identified that can be corrected immediately, do so. Or at least locate and warn others of the hazard (example: water on the floor should be mopped up immediately or a wet floor sign posted until it can be mopped up).

11. Do not enter confined spaces or any location where there may be a presence of "bad air". Such locations should be tested for air quality prior to entering and should be entered only upon supervisory approval, with assistance of a co-worker and with use of necessary and required personal protective equipment)possible self-contained breathing apparatus (SCBA).
12. Wear appropriate clothing for your job duties. Do not wear anything which may create a hazard (loose fitting clothing or necklaces in a shop area, slick soled shoes on icy surfaces, etc.).
13. Comply with all District safety policies, safety rules, safe operating procedures and all federal, state or local safety health regulations.
14. Do not do anything to jeopardize you or your co-workers safety and health.
15. Do not take short cuts. If in doubt about a procedure ask your supervisor.
16. Cooperate with supervision and administration in all loss prevention and safety and health activities. It is beneficial for everyone involved.
17. Develop a safe work attitude and maintain safe work habits. Use common sense and good judgment in daily work activities. Anticipate hazards, identify them and eliminate or control them.
18. **ONLY** those persons trained in handling asbestos shall be permitted to work with any project where asbestos may be present. If in doubt contact the head maintenance person in your facility.
19. Appropriate measures shall be taken when working in a confined space, ie. breathing apparatus, time limits, do not enter without another person being aware and standing by.

PERSONAL CONDUCT

1. Alcohol and work do not mix. Alcoholic beverages are not permitted on the premises at any time. Employees must not report to work under the influence of alcohol or with alcohol on their breath.
2. Laurel Public Schools is a "Drug Free" school. Tobacco products are not permitted on the premises at any time.
3. Drugs, stimulants, tranquilizers and similar substances shall not be used on the job unless cleared by a doctor.
4. Horseplay, practical jokes and fighting that could result in injury and/or property damages, must be avoided.
5. Deliberate misuse of tools, equipment or property is prohibited.
6. Observe all safety signs.
7. Use handrails when going up and down stairs.
8. Firearms and/or other lethal weapons have no place on school premises and are prohibited.

EMPLOYEE SAFETY ORIENTATION

New employees of the Laurel School District will be given a safety orientation before they start working for the district. The employee's supervisor will review the safety checklist that applies to the newly hired employee. Pages 8 - 12 are the checklists to be used for safety orientation. The safety checklists should be sent to safety director when completed.

Substitute employees will be given a safety manual when he/she signs up for the substitute list. Any questions should be directed to the supervisor in the area that the substitute is working in.

EMPLOYEE SAFETY TRAINING

- I. Supervisors of job related areas shall:
 - A) Provide job or task-specific safety training appropriate for employees before they perform that job or task without direct supervision.
 - B) Document on-the-job training. A safety training detail form located on page 15 should be completed and sent to the safety director.
 - C) Monitor on-the-job training periodically to determine its accuracy and effectiveness and that it is being conducted properly and consistently.
- II. Periodically, but at least annually, the school district shall conduct refresher safety training through formats such as brief department or facility safety meetings, annual in-service safety training, annual regulatory refresher training, annual conferences conducted by school related associations and the MSSF. A safety training detail report will be completed and sent to the safety director.

EMPLOYEE SAFETY MEETINGS

Internal safety meetings shall be conducted when facilities, procedures, processes, equipment or chemicals used by the district change, as new hazards are identified or possibly after an injury accident.

The safety committee will meet at least on a quarterly basis during the school year.

All minutes from safety committee meetings will be posted in each building and will be on file at the administration office.

EMPLOYEE AWARENESS

The school district will provide a system for the employer and their employees to develop an awareness and appreciation of safety through tools such as:

- 1) newsletters
- 2) periodic safety meetings
- 3) posters
- 4) safety incentive programs

The Laurel School District #7 & 7-70 will have a safety bulletin board in each school building of the district. The safety bulletin board will include safety posters, newsletters, safety committee minutes, state and federal regulations, and periodic updates.

ACCIDENT REPORTING AND INVESTIGATION

The Laurel School District investigates all accidents and incidents. This enables us to identify potential risks and to avoid these risks in the future. The primary reason is not to find fault or to discipline employees, although that may happen. Preventing reoccurrence of accidents and "near misses" is the primary objective of accident investigation.

Accidents may involve human injuries and/or property damage. An incident is any other situation where an injury may not have occurred, but has the potential for an accident (or near miss).

All incidents and accidents must be reported to the administration at the time they occur and no later than the end of the day. An accident report must be filled out and submitted to the Safety Director. This documentation is very essential to the functioning of the Loss Control Program. Failure or delay in reporting accidents may result in loss of benefits to the injured. The accident investigation report is on page 16.

A formal investigation will be conducted by the Safety Director and a review by the Safety Committee will be done. Corrective actions will be taken to avoid reoccurrence of the problem.. These actions may include employee training (retraining), development of SOP's, or other actions. In cases of serious injury and/or death an independent agency may be used for accident investigation.

FACILITY SAFETY INSPECTION REPORT

A formal safety inspection of the physical structure, equipment and grounds of the Laurel Schools shall be conducted at least annually. It shall be the responsibility of the Safety Director, the maintenance men, and head housekeepers to assure these inspections are completed. A written report will be submitted to the Superintendent and Safety Committee which lists hazards identified and corrective actions taken or planned. Results of the inspection will be made available to all employees of the Laurel School District.

A sample of the annual inspection form is located on pages 17 -18 for employee review. All employees shall review this form as it is indicative of potential hazards they should look for on a daily basis. Daily self inspections of operating procedures and work areas is one of the best methods of continuously monitoring for safety hazards in the work place. The principal, head maintenance person, and head housekeeper of each school building will annually complete safety checklist to the safety committee for review. The safety committee will make recommendations to the administration after its review. The safety checklist is located on pages 19 - 23. As safety awareness and hazard recognition is the responsibility of all district employees, it is the district's expectation that all employees will incorporate self inspections into their daily routines.

The employee's immediate supervisor or Safety Director shall be notified of all potential safety hazards, both physical and operational as soon as possible. A hazard report - safety work order is included on page 24. Any employee may fill out this work order and send to the safety director.

APPENDIX

SAFETY CHECKLIST FOR CLASSROOM TEACHERS, SECRETARIES, SUBSTITUTES AND/OR AIDES

I. Fire drill and bomb threat policy

- ☐ A. Explain procedures to all students such as exit to take, door to exit out of.
- ☐ B. Take the classroom grade book or class list.
- ☐ C. Close all windows and doors to prevent drafts.
- ☐ D. Leave in an orderly manner.
- ☐ E. Establish a place to meet upon leaving the building.
- ☐ F. Leave a list of exit routes and rules on the wall.
- ☐ G. Be sure the lights are out when exiting.
- ☐ H. Review procedures often.
- ☐ I. Return when and only when notified by a designated person or principal.
- ☐ J. Discuss policy on bomb threat.

II. Room safety and hall safety

- ☐ A. Do not leave the room unattended.
- ☐ B. Supervise the hall between classes.
- ☐ C. Report to principal or designated person any dangerous situations in the classroom immediately.
- ☐ D. Keep all chemicals labeled and stored properly.
- ☐ E. Instruct all students as to the proper use of any and all equipment used in the classroom.
- ☐ F. Use proper equipment and procedures when lifting and/or hanging objects over your head.
- ☐ G. Be careful of what is stored on open shelves.
- ☐ H. Students need to be supervised when coming and going to all school related activities.

III. Accidents/Injuries

- ☐ A. Report immediately to principal or supervisor.
- ☐ B. Treat to the best of your ability.
- ☐ C. Notify parent/guardian if necessary.
- ☐ D. Fill out injury report.

IV. Releasing of students

- ☐ A. No students are to be released from a classroom without first going through the office.

Supervisor signature

Date

Employee signature

Date

SAFETY AND TRAINING CHECKLIST FOR HOUSEKEEPING

- I. Chemical safety
 - ☐ A. Read all labels on chemicals, tools and machines.
 - ☐ B. Know when and where to store the same.
 - ☐ C. Have a working knowledge of what chemicals for cleaning can and cannot be used together.
- II. Fire procedures
 - ☐ A. Location of fire extinguishers.
 - ☐ B. Use of fire extinguishers.
 - ☐ C. Keep fire exits open and unobstructed.
- III. Electrical safety
 - ☐ A. Use of electrical cords.
 - ☐ B. Where all switch boxes are located -- how to shut off power as soon as possible in case of short out caused by machine.
 - ☐ C. Main power switches to building are located.
 - ☐ D. How to secure off area that is a danger point.
 - ☐ E. Know the breaker boxes and check on a regular basis.
 - ☐ F. Know the location of the electrical outlets and check regularly any plug in.
- IV. Power equipment checklist
 - ☐ A. Electrical and battery run floor machine.
 - ☐ B. Power run floor machines.
 - ☐ C. Other power equipment (drill for curtain).
- V. Use of ladders, scaffold and bleachers
 - ☐ A. Do not exceed the limit of height or recommended weight for ladders and scaffold.
 - ☐ B. Proper care and use of "genie lift".
 - ☐ C. Technique to be used with bleachers.
- VI. Wet Floor
 - ☐ A. Mark all areas "danger wet floor".
 - ☐ B. Wear proper foot wear.
 - ☐ C. Technique to be used with bleachers.
- VII. Proper lifting techniques
 - ☐ A. Use hand cart whenever possible.
 - ☐ B. Lift with your legs and not your back.
 - ☐ C. When and how to use dollies.
- VIII. Accidents and injuries
 - ☐ A. Treat to the best of your ability.
 - ☐ B. Report immediately to supervisor.
 - ☐ C. Notify parent/guardian.
 - ☐ D. Fill out injury report.
- IX. You are responsible for reading all safety material kept in the work site.
- X. Self protection when cleaning
 - ☐ A. Wear rubber gloves with chemicals and disposable gloves with body fluid and blood.
 - ☐ B. Use white paper towels with body fluids or blood and the proper chlorine solution.
 - ☐ C. Dispose of materials properly.
- XI. Do not allow an unauthorized person into a locked area.

Supervisor Signature

Date

Employee Signature

Date

SAFETY & TRAINING CHECKLIST FOR MAINTENANCE

- _____ A. Only boiler licensed personnel should be in the boiler room and turning switches off and on except in emergency situations.
- _____ B. Keep all aisles clear and not stacked over the recommended height. Keep storage areas use to legal limit.
- _____ C. When lifting always wear proper equipment and always use proper procedure. Do not lift beyond limits and get help when needed.
- _____ D. Use all power tools and equipment as recommended by manufacturers. Power tools should only be used by trained personnel. Always use safety shields and goggles when using equipment them. Be sure all extension cords have good ends on them and are in good condition. Always know where the breaker boxes are in case of emergencies.
- _____ E. When using lawn mowers and weed eaters always wear long pants, shoes and eye shields. Always turn machines off before refueling or checking blades or clogged machines. Use machines and equipment for designed purpose only.
- _____ F. When mowing with tractor or riding mower, always shut blades off before getting off.
- _____ G. When mixing weed sprays, always check the label to mix properly and always use rubber gloves. Do not throw any at anyone. Don't pour unused chemical down the drain. Always dispose of as required by law. If chemicals do splash on you, wash and flush the area thoroughly with water and see a doctor if necessary. Only authorized personnel may use and spray chemicals.
- _____ H. When painting, be sure there is plenty of ventilation.
- _____ I. When using ladders, do not exceed their limit of height and recommended weight. Be careful of overhead wires.
- _____ J. In case of accident or injury:
 - treat to best of your ability
 - inform your immediate supervisor immediately
 - fill out injury report

Employee Signature

Date

Supervisor Signature

Date

SAFETY AND TRAINING CHECKLIST FOR FOOD SERVICE

I. FIRE PROCEDURES

- ☐ A. Location of fire extinguishers.
- ☐ B. Use of fire extinguishers.
- ☐ C. Shut all windows and turn off all electricity.
- ☐ D. Make sure door is closed when leaving building.

II. PROPER LIFTING TECHNIQUES

- ☐ A. Use handcarts whenever possible.
- ☐ B. Lift with legs not your back.

III. PROPER USE OF EQUIPMENT

- ☐ A. Convection ovens
- ☐ B. Stove - oven combination
- ☐ C. Tilting Skillet
- ☐ D. Dishwasher and garbage disposal
- ☐ E. Meat slicer
- ☐ F. Large mixer
- ☐ G. Microwave
- ☐ H. Holding oven
- ☐ I. Notify food service director of any equipment malfunction

IV. ACCIDENTS AND INJURIES

- ☐ A. Treat to the best of your ability.
- ☐ B. Inform the building principal immediately.
- ☐ C. Inform food services director.
- ☐ D. Fill out injury report.

Supervisor Signature

Date

Employee Signature

Date

BUS SAFETY

- _____ A. Do not deviate from designated routes.
- _____ B. Have medical releases for your regular route students.
- _____ C. Do not allow non-assigned students to ride without proper approval.
- _____ D. Load and unload only at designated stops.
- _____ E. Students are to remain seated while bus is moving. At all times body parts must be kept inside the bus.
- _____ F. When loading, the door is not closed and the bus does not move until all students are seated.
- _____ G. Make sure bus is in proper working order prior to each trip (lights, air, horn, etc.)
- _____ H. Keep order among students on routes and extra curricular trips.
- _____ I. It is the drivers decision on the safety of travel in adverse conditions.
- _____ J. All passengers must be off the bus when refueling.
- _____ K. No drinking of beverages by the driver and students on regular routes.
- _____ L. Protect all students when loading and unloading by good judgement with the use of your lights.
- _____ M. Do not deviate from any state laws.
- _____ N. Mutual aid frequency is channel 2 on our radios and weather channel is on 3.
- _____ O. All evacuation drills will be done on school property.
- _____ P. During evacuation drills have the students helped from the bus by the driver and a responsible student. Do not allow students to "jump".
- _____ Q. Report any accident, no matter how minor to your supervisor.
- _____ R. On extra curricular trips check with the coach or chaperone before leaving the bus unattended.
- _____ S. Report all accidents and injuries to immediate supervisor and fill out an injury report.

Supervisor Signature

Date

Employee Signature

Date

Laurel School District
District #7 & 7-70
Laurel, MT 59044

SAFETY TRAINING DETAIL

SCHOOL: _____

DEPARTMENT: _____

TRAINING CONDUCTED BY: _____

DURATION: _____ DATE: _____
(Hrs., Min.)

TRAINING TYPE: ___ In-service ___ Dept mtg ___ Unit mtg ___ Other
 ___ Certified staff ___ Non-certified ___ Administration

TRAINING DESCRIPTION:

EMPLOYEE SIGNATURES:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

ACCIDENT INVESTIGATION REPORT

Employee Name _____ Occupation _____ School _____

Length of Employment _____ On This Job _____

Date of Injury _____ Hour _____ AM or PM _____

Location Of Accident _____ Date Reported To Employer _____

Accident Reported To _____

Describe the accident. Include the machine, object or substance involved and explain exactly what you, the injured worker, were doing. (Please use other side - if more room is needed.)

If pain gradually occurred, how do you, the employee, relate this problem to work?

Names of Witnesses _____

Result

Has the worker sought medical treatment? ____ YES ____ NO If yes, Date _____

Attending physicians's name _____

Address _____ Phone # _____

What part(s) of the body were injured? (Be specific, i.e., left knee.)

Did employee return to work during next scheduled shift? ____ Yes ____ No

Last day worked date _____ Date of return, if returned to work _____

Employee Signature & Date

Supervisor Signature & Date

This report will be sent to our Worker's Compensation carrier. Completion of this form **does not** automatically give approval by our Worker's Compensation carrier. The carrier will investigate, determine eligibility and notify you directly.

**LAUREL SCHOOL DISTRICT
DISTRICT #7 & 7-70
LAUREL, MT
LAUREL SCHOOL FACILITY INSPECTION REPORT**

School/Building _____
Inspected By _____

Date _____
Title _____
Title _____
Title _____

A. ELECTRICAL

- _____ 1. Discontinue use of extension in lieu of permanent wiring.
- _____ 2. Each outlet box shall have a cover faceplate or canopy.
- _____ 3. Maintain wiring in good condition.
- _____ 4. Discontinue use of non-approved multi-plug adapters.

Comment: _____

B. EXITS

- _____ 1. Remove unapproved locks or latches from exit doors.
- _____ 2. Unlock all exit doors during school hours.
- _____ 3. Remove obstructions from exits, aisles, or corridors.
- _____ 4. Maintain smoke barriers in operable conditions.
- _____ 5. Maintain exit doors and hardware to operate properly.

Comment: _____

C. EXIT LIGHTING

- _____ 1. Maintain lighting for exit doors.
- _____ 2. Provide lighting for exits, aisles and corridors.
- _____ 3. Exits shall be illuminated at all times during occupancy.

Comment: _____

D. FIRE EXTINGUISHERS

- _____ 1. Extinguishers placed as to state codes.
- _____ 2. Extinguishers serviced and tagged annually.

Comment: _____

E. FIRE PROTECTION AND ALARM SYSTEMS

- _____ 1. Inspect and maintain fire alarm system.
- _____ 2. Keep attic access and scuttle openings closed.

Comment: _____

F. FLAMMABLE LIQUIDS

- _____ 1. Sealed and stored in appropriate containers.
- _____ 2. Discontinue use of Class 1 liquids for cleaning.
- _____ 3. Store liquids away from exits and corridors.
- _____ 4. Remove flammable liquids not used for maintenance.

Comment: _____

G. HOUSEKEEPING

- _____ 1. Remove or store waste material and oily rags in closed metal containers.
- _____ 2. Clean grease filters and hood duct system over cooking appliances.
- _____ 3. Provide approved waste containers for combustible waste.

Comment: _____

H. STORAGE

- _____ 1. Remove storage from exits, aisles, corridors, stairways.
- _____ 2. Arrange storage in orderly manner and provide for egress.
- _____ 3. Reduce storage height to at least 2 feet below ceiling.

Comment: _____

APPENDIX A

BLOOD BORNE PATHOGEN - EXPOSURE CONTROL PLAN

The Superintendent or designee shall comply with federal Occupational Safety and Health Administration (OSHA) standards (Title 29, Part 1910, 1030)(and State or local requirements when applicable) to prevent the spread of blood borne pathogens and other potentially infectious materials in the workplace. The Superintendent or designee has developed a written exposure control plan designed to protect employees from possible infection caused by blood borne pathogens including, but not limited to, Human Immunodeficiency Virus (HIV) and Hepatitis B Virus (HBV).

As part of the Exposure Control Plan, the Superintendent or designee has determined that the following employees could reasonably be expected to have exposure to blood borne pathogens and other potentially infectious materials contaminated with blood as a result of performance of job duties: coaches, secretaries and teacher aides.

Coaches Could be reasonably expected to come in contact with blood or body fluids when assisting with first aid/injuries (including, but not limited to, football, softball, wrestling, golf, basketball, track, cross country and volleyball).

PE teachers Could be reasonably expected to come in contact with blood or body fluids when assisting with first aid/injuries in the physical education program.

Building Secretaries Could be reasonably expected to come in contact with blood or body fluids as designated first aid providers.

Teacher Aides Could be reasonably expected to come in contact with blood or body fluids when assisting with first aid/injuries while performing playground duties.

Teacher Aides (assigned to assist students with activities of daily living needs such as toilet needs (i.e. diapering, wiping of genitalia). Also of concern are bodily fluids such as nasal secretions and saliva.

Housekeeping and Maintenance Could be reasonably expected to come in contact with blood or body fluids as designated when assisting with cleanup.

Employees determined to have occupational exposure shall participate in in service education during their work hours and be offered hepatitis B vaccine, within 10 working days of assignment, at no cost.

Blood Borne Pathogen - Exposure Control Plan

Any employee not identified as having risk for occupational exposure in the school district's exposure determination may petition to be included in the Hepatitis B Vaccination program. Any such petition shall be submitted to the Superintendent or designee who will evaluate the request and notify the petitioner of the decision. The Superintendent or designee may deny a request when there is no reasonable anticipation of contact with blood or blood-contaminated materials as a result of job duties except when acting as a Good Samaritan in giving first aid.

If an employee is exposed to the blood or other potentially infectious materials contaminated with blood of another person as a result of collaterally providing first aid assistance, the employee is required to notify their immediate supervisor or designee, and an Occupational Exposure Incident form, and a Workman's Compensation Accident form must be completed. The School District will provide a confidential medical evaluation, including post-exposure Hepatitis B vaccination, within 24 hours of the exposure incident. The post exposure evaluation and follow-up will include the following: documentation of the route of exposure and the circumstances related to the incident. If possible, the status of the source individual, the blood of the source individual will be tested (after consent is obtained for **HIV/HBV** infectivity); results of testing of the source individual will be made available to the exposed employee with the exposed employee informed about the applicable laws and regulations concerning disclosure of the identity and infectivity of the source individual; the employee will be offered the option of having their blood collected for testing of the employee **HIV/HBV** serological status. The blood sample will be preserved for up to 90 days to allow the employee to decide if the blood should be tested for **HIV** serological status. However, if the employee decides prior to that time that testing will or will not be conducted, then the appropriate action can be taken and the blood sample discarded; the employee will be given the appropriate counseling precautions to take during the period after the exposure incident; and, the employee will also be given information on what potential illnesses to be alert for and to report any related experiences to appropriate personnel. The designated safety officer shall be responsible for assuring that this portion of the policy is carried out.

Annual training is required for all employees, and training is to be conducted whenever job assignments or job procedures change. The training for all employees will be conducted prior to initial assignment to tasks where occupational exposure may occur. The training and information presented to employees will include the following:

- A. Location of the standard and an explanation of its' requirements.
- B. An explanation of the epidemiology and symptoms of blood borne diseases.
- C. An explanation of the modes of transmission of blood borne diseases.
- D. An explanation of the employer's Exposure Control Plan and means by which the employee can obtain a copy of the written plan.
- E. An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials.

- F. An explanation of the use and limitations of methods that will prevent or reduce exposure, including appropriate engineering controls, work practices, and personal protective equipment.
- G. Information on the types, location, proper use, and disposal of personal protective equipment.
- H. Information on the Hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine and vaccination will be offered, post exposure, free of charge.
- I. Information on the appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious materials.
- J. An explanation of the procedure to follow if an exposure occurs, including the method of reporting the incident and the medical follow-up that will be made available.
- K. Information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident.
- L. An opportunity for interactive question and answers with the person conducting the training.

All personal protective equipment used at this facility will be provided without cost to employees. Personal protective equipment will be chosen based on the anticipated exposure to blood or other potentially infectious materials. The protective equipment will be considered appropriate only if it does not permit blood or other potentially infectious materials to pass through or reach the employees' clothing, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time which the protective equipment will be used.

Disposable gloves shall be worn where it is reasonably anticipated that employees will have hand contact with blood, other potentially infectious materials, non-intact skin, and mucous membranes. Kits are provided in each classroom, in each bus, and provided by maintenance and housekeeping personnel by request.

Blood Borne Pathogen - Exposure Control Plan

Medical records will be maintained by the School District for thirty years after the termination of the employment of those employees who report exposure incidents and those employees determined in the Exposure Control Plan to be reasonably expected to have exposure to blood borne pathogens as a result of performance of job duties. The medical records must include name and social security number; hepatitis B vaccination status (including dates); results of any examinations, medical testing and follow-up procedures; and a copy of information provided to the health care professional. Further, the medical records will be stored in a manner that is in compliance with federal, state and local laws concerning privacy and confidentiality of medical records.

Records of participation in in service education provided by the School District will be compiled and maintained for three years.

Substitute employees will be given a training information sheet upon initial assignment of their job duties.

Temporary Employees Training Information Sheet

Laurel Schools, in compliance with OSHA standards, has developed a written blood borne pathogen-exposure control plan designed to protect employees from possible infection caused by blood borne pathogens including, but not limited to, human immunodeficiency virus (HIV) and hepatitis B virus (HBV).

A copy of the Exposure Control Plan is available for review from the administrative office and also included in the employee's safety manual.

Temporary employees are encouraged to practice universal precautions as an approach to infection control. Please find an information sheet on universal precautions attached. If you have any further questions, please contact your immediate supervisor.

DOCUMENTATION OF ANNUAL TRAINING

By my signature below, I acknowledge that I have received information and training regarding:

- A. Location of the standard and an explanation of it's requirements.
- B. An explanation of the epidemiology and symptoms of blood borne diseases.
- C. An explanation of the modes of transmission of blood borne diseases.
- D. An explanation of the employer's Exposure Control Plan and means by which the employee can obtain a copy of the written plan.
- E. An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials.
- F. An explanation of the use and limitations of methods that will prevent or reduce exposure, including appropriate engineering controls, work practices, and personal protective equipment.
- G. Information on the types, location, proper use, and disposal of personal protective equipment.
- H. Information on the Hepatitis B Vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine and vaccination will be offered, post exposure, free of charge.
- I. Information on the appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious materials.
- J. An explanation of the procedure to follow if an exposure occurs, including the method of reporting the incident and the medical follow-up that will be made available.
- K. Information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident.
- L. An opportunity for interactive question and answers with the person conducting the training.

The training session was conducted by: _____

Qualification of individual conducting training session: _____

UNIVERSAL PRECAUTIONS FOR ALL PERSONNEL

“Universal Precautions” is an approach to infection control. The concept of universal precautions is that all human blood and body fluids are treated as if known to contain disease-causing germ (pathogens).

Human immunodeficiency virus (HIV) and hepatitis B (HBV) can be found in blood, semen, vaginal secretions and breast milk. HBV (not HIV) is also found in high enough concentrations in saliva to transmit infection from one person to another. Saliva and other body fluids such as urine, vomitus, nasal secretions, sputum, and feces often contain germs that cause other diseases. It is not always possible to know when blood or body fluids are infectious; therefore, all body fluids shall be handled as if precautions to prevent and reduce spread of infectious disease:

1. Wear disposable waterproof gloves whenever you expect to come into direct contact with blood, other body fluids containing blood, or contaminated items and surfaces. This applies to incidents including, but not limited to, caring for nosebleeds or cuts, cleaning up spills, or handling clothing soiled by blood or body fluids containing blood. Do not reuse gloves. After each use, remove gloves without touching outside and dispose of them in a lined waste container. After removing gloves, wash hands thoroughly with soap and water as described below.
2. Wash your hands and any other contacted skin surfaces thoroughly for 15 to 30 seconds with dispensable soap and warm running water, rinse under running water, leave water running, thoroughly dry with disposable paper towels; and then shut off water with paper towel.
 - a. Immediately after any accidental contact with blood, body fluids, or drainage from wounds, or with soiled garments, objects or surfaces.
 - b. Immediately after removing gloves or other protective equipment or clothing.
 - c. Before assisting others with eating and drinking as well as eating or drinking yourself.
 - d. Before handling food, cleaning utensils or kitchen equipment.
 - e. Before and after diapering and assisting with toileting as well as toileting yourself.

When running water is not available, use antiseptic hand cleanser and clean towels or antiseptic towelettes, and use soap and running water as soon as feasible.

Universal Precautions for all Personnel

3. Clean surfaces and equipment contaminated with blood with soap and water and disinfect them promptly with a fresh solution of household bleach (ten parts water to one part bleach) or other disinfectant. While cleaning, wear disposable gloves and use disposable towels whenever possible. Rinse mops or other reusable items in the disinfectant and dry thoroughly.
4. Properly dispose of contaminated materials. Under normal conditions, the amount of wastes generated at a typical educational facility would not warrant segregation and special handling procedures as outlined in 29 CFR 1910.1030.
 - a. Materials contaminated with blood or other potentially infectious materials should be segregated at the time of the incident, double bagged in plastic bags, and disposed of with ordinary trash.
 - b. Do not segregate and accumulate a quantity of contaminated materials for later disposal. Where large quantities of blood and wastes are generated, there will likely be assistance from professional emergency personnel who are trained in proper handling and disposal of contaminated materials.
 - c. If a school staff member must be involved in handling and disposal of medical sharps, such as syringes, hypodermic needles or other potentially infectious objects which are capable of penetrating the skin, these items should be containerized in labeled sharps containers available from the school nurse.
5. Do not care for others' injuries if you have any bleeding or oozing wounds or skin conditions yourself.
6. Use a mouthpiece, resuscitation bag or other ventilation device when readily available when it is necessary to provide mouth-to-mouth resuscitation.
7. Immediately report any incident of accidental exposure to blood or first-aid incident that involved direct contact with blood in accordance with district policies about accidents reporting and Exposure Control Plan.

EMPLOYEE OCCUPATIONAL EXPOSURE INCIDENT FORM

Name: _____

Social Security Number: _____

Building: _____

Job Classification: _____

_____ Copy of employee's Hepatitis B vaccination record or declination form.
Attach any medical records relative to Hepatitis B.

_____ Brief Description of Exposure Incident: _____

Date: _____

Log and attach all results of examinations, medical testing, and follow-up procedures:

Log and attach this district's copy of information provided to the health care professional:

_____ Accident report

_____ Results of the source, individual blood testing, if available.

Log and attach this district's copy of the health care professional's written opinion

NOTE: Maintain this record for duration of employment, plus 30 years.

BLOOD BORNE PATHOGEN - POST EXPOSURE PROTOCOL

BLOOD BORNE Pathogen Post Exposure Treatment Centers for District Employees

The sites listed below are designed to provide post exposure evaluation and treatment to district employees:

*Life Care - St. Vincent Hospital
Call for Appointment: 657-7878

Hours: Monday - Friday 7 a.m. - 6 p.m.; Saturday, Sunday 10 a.m. - 6 p.m.

After Hours

*Call Ask a Nurse: 657-8778

Employee Must:

- * Report occupational exposure immediately within 24 hours to site administrator and/or immediate supervisor.
- * Complete an Accident Report and initiate the Employee Occupational Exposure Incident Form.
- * Go to the designated clinic listed above for treatment. (A post within 24 hour exposure while on duty is considered a Workman's Compensation case).
- * See Blood Borne Pathogen Exposure Control Plan for details.

**HEPATITIS B VACCINATION
CONSENT/DECLINATION**

Employee Name (Print): _____
Last First MI

Social Security No. _____

Address: _____
City/State/Zip

Work Location: _____ Position: _____

Telephone No. (Work) _____ (Home) _____

I have been informed of the symptoms and modes of transmission of blood borne pathogens including hepatitis B virus (HBV). I know about the district's infection control program and understand the procedure to follow if an exposure incident occurs.

I understand that the hepatitis B virus is available, at no cost, to employees whose jobs involve the risk of directly contacting blood or other potentially infectious material. I understand that vaccinations shall be given according to recommendations for standard medical practice in the community.

SIGN A or B Below (ONE ONLY)

A. Hepatitis B Vaccine Consent

I consent to administration of the Hepatitis B vaccine. I have been informed of the method of administration, the risks, and expected benefits of the vaccine. I understand that the district is not responsible for any reactions caused by the vaccine.

Employee's Signature

Date

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Hepatitis B Vaccination

Consent/Declination

B. Hepatitis B Vaccine Declination

I understand that due to my occupational exposure to blood or other potentially infectious materials, I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with hepatitis B vaccine, at no charge to myself. However, I decline hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring hepatitis B, a serious disease. If, in the future, I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Employee's Signature

Date

Consents: Call Lifecare, for vaccination appointment.

Declinations: File in Employee's Personnel File

Temporary Employees Training Information Sheet

Laurel Schools, in compliance with OSHA standards, has developed a written blood borne pathogen-exposure control plan designed to protect employees from possible infection caused by blood borne pathogens including, but not limited to, human immunodeficiency virus (HIV) and hepatitis B virus (HBV).

A copy of the Exposure Control Plan is available for review from each of the following:

Building Principals
Administration Office

Temporary employees are encouraged to practice universal precautions as an approach to infection control. Please find an information sheet on universal precautions attached. If you have any further questions, please contact your immediate supervisor.

EMPLOYEE SAFETY PLEDGE

My signature below indicates that I have read the Safety Manual for Laurel Public Schools, District #7 & 7-70 and that I have a copy of the manual for future references. I understand the necessity for calling these important safety instructions to my attention. My signature also represents a pledge to cooperate with the safety program requirements of School District #7 & 7-70.

I understand that compliance with all safe work practices and rules is a condition of employment.

I also understand that it is one of the requirements of my employment to IMMEDIATELY report any work-related injuries, no matter how slight, to my supervisor.

(Please print) Last Name

First Name

Employee Signature

Date

Building Administrator Signature

Date