
ACTION

ITEM #3

Written Workplace Health and Safety Program

Mineral County School District

**Arlo K. Funk District Services Center
751 A Street, Hawthorne, Nevada 89415**

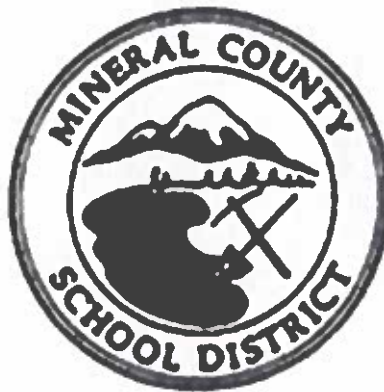


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Section 1: Policy Statement

Program Policy Statement

The Mineral County School District (MCSD) shall comply with all applicable federal and State of Nevada occupational safety and health laws. To accomplish this, employees must be constantly aware of unsafe acts and conditions in all work areas that can cause injury. Employees are neither expected nor required to work at a job that is not healthy and safe. Safety of our employees is vital to successful public service. This Plan incorporates provisions of Nevada Revised Statutes Chapter 618 and OSHA 29 CFR 1910. MCSD shall not:

1. Require or permit any employee to go or be in any employment or place of employment which is not healthy and safe;
2. Fail to furnish, provide, and use safety devices and safeguards or fail to adopt and use methods and processes reasonably adequate to render such employment and place of employment healthy and safe;
3. Fail or neglect to do everything reasonably necessary to protect the life, safety, and health of such employees; and
4. Maintain any place of employment that is not healthy and safe.

Safety is an important consideration for all employees. Employees must follow the responsibilities outlined in this Written Workplace Safety Plan (WWSP) and must especially inform supervisors immediately of any safety situation that may be beyond their ability or authority to correct.

Supervisors and managers may be disciplined for failure to properly train employees whom they directly supervise.

Andre Ponder, Superintendent and Safety Director

Date:

[Name and Title of Relevant Supervisor]

Date:

[Name of Employee]

Date:

Section 2: Assignment of Responsibilities

The following sections describe the responsibilities of management and employees that will ensure the WWSP is successfully implemented throughout MCSD. The prevention of bodily injury and safeguarding the health of employees are the first considerations in all workplace actions and are the responsibility of every employee at every level. MCSD is committed to maintaining a safe working environment in which work is performed in a safe manner and energies are directed toward protecting the safety of the individual, other employees, and the public they serve. In keeping with this commitment, all employees in the course of their employment are required to adhere to organization wide and departmental safety rules, regulations, and practices, Chapter 618 of the Nevada Revised Statutes, Occupational Safety and Health Act, and other pertinent Federal and State laws. The cooperation and commitment of all employees to the goals established will help to provide for a safe work environment for both employees, students, and members of the public.

1. Superintendent of Schools

- A. Ensure the development and implementation of the MCSD WWSP.
- B. Set high standards with respect to health and safety and lead by example.
- C. Ensure that financial, material, and personnel resources are provided to achieve the goals and objectives of the health and safety program, by informing and working closely with and the MCSD Board of Trustees.
- D. Ensure accountability.

2. Safety Director, or designee

- A. Serve as Chairperson of the Safety Committee.
- B. Ensure that the WWSP is adequately and appropriately administered.
- C. Promote health and safety and serve as a resource to assist MCSD in completing the WWSP goals.
- D. When requested or as appropriate, work with supervisors and employees to (a) assess knowledge of safety practices; (b) identify any need for, and ensure proper use of, appropriate safety devices and safeguards; and (c) ensure duty or job specific standards, practices, and procedures establish the safest method of accomplishing the duty or job.
- E. Investigate incidents resulting in death or serious injury following the procedure in this WWSP and prepare a written Incident Investigation Report.
- F. Review each Incident and Near-miss Report with the Safety Committee, while observing any confidentiality requirements.
- G. Report all reportable occupational injuries to OSHA; maintain OSHA 300 Log data and prepare annual summary of work-related injuries.

H. Monitor, review, and evaluate incidents to identify trends and develop policies and procedures to prevent recurrence.

3. Administrators (Principals)

A. Adopt, implement, and administer approved district safety standards, plans, policies, and/or procedures.

B. Ensure site safety records are kept.

C. Maintain a safe and healthy working environment.

D. Assist supervisors and/or the Safety Director in investigating incidents, near-misses, and reported safety concerns to determine root causes and identify appropriate corrective measures.

E. Monitor site safety assessment or inspections and complete any required Job Hazard Analysis reports and update as needed.

F. Ensure appropriate prompt and reasonable corrective action is taken to resolve identified hazards.

4. Supervisors

A. Ensure that relevant standards, policies, and procedures pertaining to health and safety are posted in a prominent location of the work area, communicated to all employees, and employees understand and acknowledge their obligation to follow relevant standards, policies, and procedures.

B. Ensure that employees are adequately trained in the proper and accepted way each duty or job must be accomplished upon initial assignment and any change in standard, policy, procedure, or assignment. Advise the Safety Director of training needs of employees under their supervision.

C. Before assigning the operation of any equipment or machinery, ensure that employees are trained in the proper and accepted method of operating the equipment or machinery.

D. Ensure that safety devices, safeguards, and Personal Protective Equipment (PPE) for each duty or job are available and functional.

E. Ensure employees can identify where PPE is required and are trained in its proper and accepted use.

F. Conduct daily health and safety inspection of his/her school/department and any equipment or machinery used. Ensure that any maintenance required for equipment or machinery is current.

G. Stop or shut down any activity or operation considered to be an imminent danger to employees or the public. Remove employees from potentially hazardous duties or job where appropriate safety device, safeguard, and/or protective equipment is not properly used.

H. When an incident occurs investigate and complete an Incident Investigation Form. If a Near-miss is reported, complete a Near-miss Form. Ensure reports are provided to the Safety Director in a reasonably prompt fashion.

I. Ensure that prompt and reasonable corrective action is taken whenever hazards are identified, or unsafe acts found or observed.

J. If a member of the Safety Committee, attend and participate in Committee meetings. Ensure that health and safety suggestions and/or comments from employees are encouraged and where appropriate, forwarded to the Safety Director for consideration.

6. Employees

A. Be an active participant in the health and safety program and training.

B. Perform his/her duty or task in accordance with established standards, policies, procedure, and other relevant safe work practices.

C. Evaluate the health and safety of his/her workspace daily.

D. Inspect and ensure that all safety devices and safeguards on equipment or property are properly adjusted and in good working order. Operate equipment or machinery only if trained and authorized to do so. Do not attempt repairs of equipment or machinery unless trained and authorized to do so.

E. Inspect and ensure that protective equipment is functional and in good working order. Do not attempt repairs of protective equipment unless trained and authorized to do so.

F. Use and/or wear protective equipment and devices where it is necessary to perform a duty or job.

G. Immediately report any hazards to a supervisor.

H. Immediately, or as soon as reasonably possible, report any incident, injury, illness, or property damage to a supervisor.

I. Cooperate fully with any investigation concerning incidents, injury, illnesses, or property damage.

J. Offer or make suggestions and/or comments regarding the health and safety of his/her work area, duty, or job.

K. If a member of the Safety Committee, attend and participate in Committee meetings.

Section 3: Safety Committee

1. Purpose

To implement, oversee, and update the MCSD's WWSP and to identify corrective measures needed to eliminate or control recognized safety and health hazards. Oversee and implement entity safety projects and objectives. The Safety Committee shall foster on-going communication and cooperation between employees and management on all issues related to safety and health.

2. Membership

A. In addition to management, the Safety Committee must include representatives of employees. Members can be assigned by management, voted on by employees, or selected from volunteers. If the employees are represented by a labor organization, the employee representatives must be selected by the employees and not appointed by the employer. See NRS 618.383(2)(b).

B. The Safety Director will serve as the chairperson of the Safety Committee. The terms of other committee members will be determined by the Safety Committee and should be staggered to provide continuity to the committee.

C. Employee representatives, while engaging in the business of the Safety Committee, including attendance at meetings, authorized inspections, or any other activity of the committee, must be paid as if the employee were engaged in his/her usual work activities.

3. Responsibilities

A. The Safety Committee will:

(1) Hold meetings as described in paragraph 4 of Section 3 to discuss safety and health issues, suggestions, and concerns.

(2) Assist management in communicating procedures for evaluating the effectiveness of control measures used to promote safety and health practices.

(3) Review all employee and non-employee injuries and near-misses occurring since the last Safety Committee meeting and develop a process to address the root causes and take corrective action.

(4) Review and update safety standards, practices, and/or policies based on incident investigations reports, near-miss reports, or employee hazard reports.

(5) Assist management in developing, reviewing, and annually updating the WWSP. Reviews and annual updates to the WWSP will be accomplished by evaluating investigation reports, incident reports and near-miss reports; formulating corrective measures; and recommending proper training to prevent recurrence.

(6) Promote safety and health awareness and participation through continuous improvement to the WWSP.

(7) Participate in safety training and be responsible for assisting management in monitoring safety training to ensure that it is in place, effective, and documented.

(8) Conduct periodic safety inspections and compile and distribute a report on issues found.

B. Safety Committee Positions.

(1) Chairperson. The Chairperson, or designee, will:

- (a) Attend and conduct each Safety Committee meeting;
- (b) Ensure that the WWSP is functional, appropriate, current; and develop the meeting agenda;
- (c) Inform the Board of Trustees of safety concerns and projects;
- (d) Review each incident with the Safety Committee and conduct any investigation wherein an incident has resulted in serious injury or property damage (including "near-misses"); and
- (e) Oversee and document corrective action.

(2) Secretary. The Secretary will:

- (a) Attend all Safety Committee meetings;
- (b) Record minutes of meetings;
- (c) Distribute minutes to committee members;
- (d) Post minutes for other employees; and
- (e) Assume chairperson's duties if required.

(3) Members. Members of the Safety Committee will:

- (a) Attend all Safety Committee meetings;
- (b) Report injuries, near-misses, accidents, unsafe conditions, and practices from their department;
- (c) Contribute ideas and suggestions for improvement of workplace safety;
- (d) Influence others to work safely;
- (e) Participate in inspections of their Department;
- (f) With the Safety Director and Committee, ensure that applicable OSHA standards are identified and made accessible to their Department;

(g) With the Safety Director and Committee, identify safety procedures, training, and appropriate safety equipment (including PPE) required within their department; and

(h) Monitor whether new-hire training is occurring within their Department and report to the Safety Committee.

4. Meetings

A. Safety Committee meetings shall be held at least quarterly and more often if needed. A quorum will consist of simple majority of membership.

B. Management will post the agenda and minutes of each meeting in an accessible place, available for all.

C. Safety Committee records will be maintained for not less than three (3) years.

5. Training

A. Safety Committee members should be trained in:

(1) How to work in a committee, such as Robert's Rules of Order or other committee system.

(2) How to conduct inspections and recognize hazards.

(3) Accident investigation techniques.

(4) Available safety and health resources within the local area.

6. Records

A. Records from all Safety Committee meetings will be handled as follows:

(1) Minutes of all committee meetings will be drafted by the secretary, who is either elected or appointed.

(2) The agenda, minutes, and attendance of those participating in the committee meeting will be retained by the Safety Director for at least three (3) years and must be available for review by the Division of Industrial Relations upon request.

(3) The agenda and copies of minutes should be posted in an easy to access area and provided to each Safety Committee member, principal, department manager, and supervisor.

Section 4: Hazard Identification, Analysis and Control

1. Identification & Analysis

MCSD is committed to eliminating or controlling workplace hazards that could cause injury or illness to our employees. To that end, hazards will be identified and analyzed using some or all the following programs/tools:

A. Outside, site-specific assessment or inspection.

(1) ADA Site Assessments should be conducted on an as needed basis. (Nevada Center for Excellence in Disabilities, ADA Nevada MS0285, University of Nevada, Reno, 89557, (775) 682-9056.)

(2) CyberSecurity: Dark Web Monitoring, Passive Network Assessments (PNA), KnowB4 program and similar services may be conducted by Anthony Rucci, Information Internal Associates, Inc., through coordination with POOL/PACT.

(3) Nevada Safety and Health Consultation and Training Section (SCATS) Assessments, conducted in association with POOL/PACT, may perform worksite hazard assessments on an as needed basis.

B. Employee Occupational Safety and Health Concerns. All employees are not only encouraged, but responsible for notifying their supervisor regarding conditions they believe to be a safety, health, or environmental hazard without fear of reprisal. Notification may be made verbally or by submitting a Safety Concern or Near-miss Form.

C. Equipment and/or Machinery Inspections and Maintenance Records.

(1) The Transportation Department is responsible for regular inspection and maintenance of bus and vehicle fleets. Inspections will be performed before and after fleet vehicle use. Maintenance will be conducted in accordance with manufacturer service specifications and as needed. Inspection and maintenance records will be kept until the vehicle is removed from fleet service.

(2) The Maintenance Department is responsible for regular building and equipment inspections.

(a) Visual building safety inspections will be performed seasonally. These inspections will address obvious defects, damages, safety hazards, seasonal weatherization, and the documentation of the inspection and any corrective action taken. Records should be maintained for the life of the building.

(b) Visual equipment inspections will be performed before and after each use. Maintenance will be conducted in accordance with the manufacturer service specifications and as needed. Inspection and maintenance records will be maintained for the life of the equipment.

D. Record Review. Review of Incident, Near-miss, and OSHA 300 Log of Work-related Injuries and Illnesses will be conducted by the Safety Director.

E. Review of Property and Casualty and/or Workers Compensation Claims. Member Valuation & Performance (MVP) Reviews may be conducted on an as needed basis with POOL/PACT Risk Management and include analysis of property and casualty and/or workers compensation claims to identify and minimize or eliminate hazards or causes of injury.

H. Job Hazard/Safety Analysis (JHA). JHA establishes a method for analyzing potentially dangerous jobs for the purpose of creating standards, policies, and/or procedures for safety. Directors/Site Administrators shall require the development of a JHA for all hazardous jobs performed by their employees. The JHA will be updated whenever the job changes or standard, policy, and/or procedure deficiencies are noted. Hazards may be caused by equipment used to perform the job, actions needed to perform the job, or the environment in which the job is performed. Involving employees in the JHA process will help minimize oversights in the analysis. The JHA will analyze steps employees take in performing job duties to identify means to minimize or eliminate known hazards. Information gathered from JHA may be used in training, reasonable accommodations, writing job descriptions, audits, and return-to-work programs.

2. Elimination & Control of Workplace Hazards

Hazard control is triggered by a determination that a hazard or potential hazard exists and includes methods and/or procedures for correcting unsafe or unhealthy conditions, work practices and procedures in a timely manner, based on whether the hazard is imminent or non-imminent.

A. Imminent Hazard

(1) An Imminent Hazard is any condition where there is reasonable certainty that a danger exists that can be expected to cause death or serious physical harm immediately, or before the danger can be eliminated.

(2) If an imminent hazard is observed or discovered by an employee, the employee should notify their supervisor immediately. The supervisor will notify the appropriate administrator immediately.

(3) Corrective action should be taken at once to abate the hazard including, but not limited to, placing an out of service tag on defective tools or equipment, as a temporary means of warning employees. If an imminent hazard cannot be immediately abated, all personnel will be removed from the area. The Safety Director will determine what safeguards and corrective measures are to be implemented.

B. Non-imminent Hazards

(1) If a non-imminent hazard is observed or discovered by an employee, the employee's immediate supervisor and/or site administrator should be made aware of the exposure so that a corrective action can be taken in a timely manner. Determination of the time allotted for correction will be at the discretion of the supervisor.

C. Hazard Control

(1) Any hazard that can be eliminated will be.

(2) All other hazards will be controlled using engineering or work practice controls, or a combination of these, as appropriate. We will meet or exceed the requirements of safety standards where there are specific rules about a hazard or potential hazard in our workplace.

(3) The Safety Director will evaluate and implement controls for the hazards.

(4) Supervisors are responsible for correcting hazards within their sites and ensuring that any remaining hazards are passed to the Safety Director for corrective action.

(5) Work practice controls may be designated as a separate program or part of our procedures. The following controls for specific situational hazards can be found in separate programs:

(a) Emergency Operations Plan, Evacuation Plan, and/or Continuity of Operations Plan, Section 8.

(b) Portable Fire Extinguishers, Section 9.

(c) Medical and First Aid, Section 10.

(d) Bloodborne Pathogen Exposure Control Plan, Section 11.

(e) Ergonomics and Workplace Safety, Section 13.

(6) Protective equipment will be used as a last option or as an interim measure. Where necessary, PPE will be provided at no cost to the employee. If PPE is selected, a PPE Program should be developed and implemented.

(7) The Site Administrator will monitor the progress of all elimination and/or control measures and ensure all affected employees are apprised of the status.

(8) The Site Administrator will coordinate safety standards, policies, and procedures to any vendors and/or subcontractors working within facility or on location.

(9) The Site Administrator will provide the Safety Committee with the status of implemented controls, pending controls, and needed controls based upon identification and analysis.

3. Basic Safety Rules

The following basic safety rules have been established to help make our work environment safe and efficient place to work. Never do anything that is unsafe to get the job done. If you are unsure about whether you are engaging in an unsafe activity, ask your supervisor. If a job is unsafe, stop and report it to your supervisor.

A. Always keep safety devices or safeguards in place.

B. Operate equipment and/or machinery only if you have been trained and authorized to do so.

- C. Obey all safety warning signs.
- D. Use appropriate personal protective equipment whenever required.
- E. Working under the influence of alcohol or illegal drugs or using them at work is prohibited.
- F. Do not bring firearms or explosives onto Mineral County School District property.
- G. Smoking and vaping is not permitted on school grounds or in school district vehicles.
- H. Horseplay, running, and fighting are prohibited.

Section 5: Safety Training

Training must be conducted in a language and format the employees understand. NRS 618.383(4). If substitute teachers or staff are used, MCSD will ensure they are provided training for safety of employees before they begin work at each site.

MCSD has developed a training program in compliance with NRS 618.383. Under no circumstances should an employee perform their work duties until he/she has successfully completed the appropriate training.

Each department at each site in MCSD is responsible for developing topics and providing training for both new employees and existing employees who need training or retraining for specific hazards to which they are exposed. The goal of the training program is not just to provide knowledge, but to affect behavior and provide employees with enough information so they can actively participate in protecting themselves.

Resources include eLearning provided through POOL/PACT. Please contact your supervisor or the MCSD Human Resources (HR) Department concerning training needs that are not currently in the catalog.

1. Supervisory Training

The MCSD administrators and supervisors are key figures in the implementation and overall success of the health and safety program. As a minimum, administrators and supervisors shall be trained in the following areas:

- A. The need to establish and maintain healthy and safe working conditions in the area supervised.
- B. The dangers associated with a duty, task, or job; the potential effect on employees; and the standards, policies, and/or procedures for control of these dangers.
- C. How to relate this information by example and instruction to employees, to ensure that they understand and follow safe procedures.
- D. Incident investigation such as OSHA Course #7505, *Introduction to Incident Investigation*, or a substantially similar incident investigation training.
- E. Suggested **eLearning** courses, in addition to New-Hire training:
 - (1) Nevada Anti-Harassment Training for Supervisors.
 - (2) Safe and Sober Workplace for Employees – Supervisor Supplement.
 - (3) Nevada Ethics in Government.

2. New-Hire Employee Orientation

All new hires must attend a new-hire orientation prior to commencing employment. It is the responsibility of the supervisor to ensure that each new hire is trained in the following:

- A. Review and explanation of this WWSP, including how to access relevant documents and forms.
- B. Disciplinary procedures for non-compliance with the WWSP.
- C. Emergency Action Plans.
- D. Hazardous Condition Reporting.
- E. Incident Reporting.
- F. Safe Use of Equipment and Machinery.
- G. Personal Protective Equipment (when applicable).
- H. Signed and dated NV OSHA Employee Rights and Responsibility Agreement (NRS 618.376) placed in employee's file.
- I. Mandatory Child Abuse Reporting Laws
- J. Suggested new-hire **eLearning** courses:
 - (1) Cyber Security Awareness, Phishing, Ransomware, and enrollment in KnowBe4 program for all employees who will have access to MCSD network server(s).
 - (2) Bullying in the Workplace.
 - (3) Workplace Violence Awareness.
 - (4) Nevada Anti-Harassment Training for Employees.
 - (5) Whistleblower Protections – What, When, and How.
 - (6) Conflict of Interest.
 - (7) Hazard Communication; see OSHA Hazard Communication Quickcards.¹
 - (8) Back Safety in the Workplace.
 - (9) Bloodborne Pathogens Awareness.
 - (10) Controlling Workplace Exposure to Bloodborne Pathogens.
 - (11) Safe and Sober Workplace for Employees
 - (12) Slip, Trip, and Fall Prevention – Extended Course.

¹ Hazard Communication QuickCards may be found at <https://www.osha.gov/publications/bytype/popular-downloads>.

(13) Fire Extinguisher Training.

(14) Active Shooter.

3. Job Specific Training

In addition to general orientation training, certain employees may receive additional, specific training depending upon work assignments. Supervisors for every department are responsible for being aware of job hazards in their area and ensuring that those under their supervision receive in-house or contracted to an outside source training. The training must be consistent with the specific hazards to which employees are exposed. Some job specific training may be provided through the eLearning catalog.

4. Retraining/Evaluation

The following OSHA general industry rules include annual retraining or employee information requirements:

- A. Access to employee exposure and medical records related to exposure.
- B. Bloodborne Pathogens.
- C. Permit-required confined space/rescue.
- D. Portable Fire Extinguishers.

5. Training Record Retention

Records of employee training attendance shall be kept in employee files and must include (1) who was trained, (2) the instructor, (3) the date of training, and (4) training topic. Records maintained for a period of three (3) years from the date of training and will be made available for inspection or review, upon request, by the employee, the employee's supervisor, the Safety Director, and/or the Division of Industrial Relations (OSHA).

Section 6: Incident Investigation and Corrective Action

1. Purpose

Incident investigation is an integral part of our workplace safety and health program. It is a fact-finding function – incident investigations are **not** fault finding. The purpose is to promote safety by identifying root causes and any shortcomings in the overall safety plan to prevent the incident from happening again. To that end, the MCSD will investigate all incidents, including near-misses, for prevention or reduction controls.

2. Training

All persons performing incident or near-miss investigations shall complete OSHA Course #7505, *Introduction to Incident Investigation*, or a substantially similar incident investigation training, prior to an incident investigation.

3. Incident Investigation

A. Responsibilities

(1) Employee Responsibilities

- (a) For occupational injuries, seek appropriate medical care.
 - (i) For emergency medical care, go to the nearest emergency room or call 911.
 - (ii) For PACT member non-emergency care, contact the **24-7-365 Nurse Triage Program at (844) 334-6472**. Otherwise, go to an approved workers compensation provider.
 - (iii) If the injury is minor and only requires first aid, obtain supplies from the nearest first aid kit.
- (b) Report the injury or near-miss.
 - (i) Contact your supervisor and complete the C-1 Notice of Injury Form.
 - (ii) The C-1 must be sent to your supervisor for signature.
 - (iii) If a Near-miss, complete the Near-miss Form and give it to your supervisor.
- (c) File a Workers Compensation Claim.
 - (i) During your initial medical evaluation, alert medical staff that your injury or illness is work related.
 - (ii) Complete the C-4 Form with the medical provider.

- (d) Follow up on medical care and modified duty.
 - (i) Notify your supervisor in advance of medical appointments.
 - (ii) If placed on modified duty, notify HR of the work restrictions in writing prior to your return to work. Only work within your restrictions.
 - (iii) Contact your supervisor at least once every two weeks if off work.

(2) Supervisor Responsibilities

- (a) Ensure proper medical treatment is received.
 - (i) For emergency medical care, go to the nearest emergency room or call 911.
 - (ii) For PACT member non-emergency care, contact the **24-7-365 Nurse Triage Program at (844) 334-6472**. Otherwise, go to an approved workers compensation provider. Transport the employee if necessary.
 - (iii) If the injury is minor and only requires first aid, assist in first aid.
- (b) Investigate and Report the Injury/Illness.
 - (i) Review the C-1 Form with the employee and sign it.
 - (ii) Investigate the incident and complete the Incident Investigation or Near-miss Form.
 - (iii) Forward both forms to the Safety Director and HR Department. The HR Department will forward the forms to Davies Claims Solutions.
 - (iv) Correct the hazard immediately when possible.
 - (v) For incidents involving death or serious injury, the Safety Director must be notified, and the incident scene secured, as soon as reasonably possible after proper emergency care is provided.
- (c) Follow up on employee medical care and modified duty.
 - (i) Provide modified duty as appropriate.
 - (ii) Contact the employee every two weeks if the employee is off work to determine medical progress.

(3) Safety Director, or designee

- (a) For incidents involving death or serious injury, the Safety Director will assist the Supervisor in arranging emergency medical care if appropriate, and secure or assist in securing the scene after ensuring emergency medical care is provided. Once emergency care is provided and the scene secure, begin the Incident

Investigation. Upon completion, complete a written Incident Investigation Report and provide a copy to the Safety Committee.

(b) Notify OSHA (within 8 hours for work-related deaths and within 24 hours for work-related inpatient hospitalizations, amputations, and any losses of an eye). The reports required by this paragraph must contain:

- (i) The name of the employer;
- (ii) The location and time of the incident resulting in death or serious injury;
- (iii) The number and names of employees hospitalized as inpatients or who suffered fatalities, amputations, or loss of an eye as a result of the incident;
- (iv) A brief description of the incident; and
- (v) The name and contact information of the Safety Director.

(c) Comply with Nevada OSHA Injury and Illness Recordkeeping and Reporting Requirements.

B. Incident Investigations and Corrective Measure

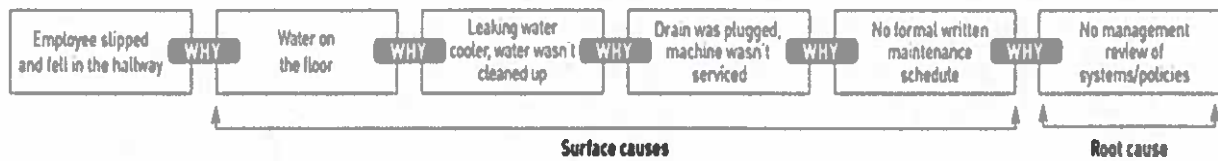
(1) The Safety Director, or designee, will review C-1, Incident Investigation, and Near-miss Forms upon receipt to determine if any further investigation is warranted. If necessary, the Safety Director will contact the reporter for additional information and clarification.

(2) Where needed or required according to this WWSP, the following steps will serve as a guide for conducting the investigation. The primary purpose of investigations is to identify root causes and develop corrective actions to prevent future occurrence, not to determine or assign blame.

(a) *Secure the Scene.* The primary goal is to secure and preserve the scene as quickly as possible to protect the well-being of the affected employee, prevent further injury, and protect information from being destroyed. Use of caution tape, cones, or other barricades may be necessary.

(b) *Collect Information.* Document facts using the Incident Investigation Form. Take photos, video, or draw diagrams of the area. Interview witnesses as quickly as possible. Review relevant records such as equipment manuals, maintenance schedules/logs, policies, procedures, training records, audits, assessments, previous corrective action recommendations, etc.

(c) *Determine Root Causes.* Use the data collected to determine the sequence of events. Analyze the facts and sequence of events to determine the root cause. The "Five Whys" technique, or other similar analytical tool should be used to determine the root cause. The main goal is to understand how and why existing barriers against the hazards failed or proved insufficient, not to find blame.



(d) *Recommend or Implement Corrective Measures.* Recommendations and corrective action should directly address root causes to the greatest extent possible. Identify who will be responsible for the corrective action and the time frame in which it will be implemented. If necessary, incorporate the corrective action into the safety program. The Safety Director and/or Site Administrator will follow up to ensure that the corrective action is implemented within the established time frame. Communicate the action to employee and provide necessary training.

Section 7: Program Compliance

1. Violations of health and safety rules, standards, policies, and/or procedure may result in discipline of the employee, in accordance with MCSD policy and negotiated agreements, up to and including termination.
2. Each supervisor will be responsible for administering this policy within his/her area of control and to his/her subordinates. Violations of health and safety rules, standards, policies, and/or procedures may result in discipline of the supervisor, in accordance with MCSD policy and negotiated agreements, up to and including termination.
3. All records pertaining to compliance issues will be maintained in the employee's personnel file.

Section 8: Emergency Action Plan (EAP), Evacuation Plan, and/or Continuity of Operations Plans (COOP)

MCSD is statutorily required to develop a School District Emergency Operations Plan Development Committee. In turn, the Development Committee must create and maintain an Emergency Operations Plan (EOP). Procedures for emergencies, evacuations, and continuity of operations are required annexes of the EOP. For further information, please contact the Mineral County School District Superintendent and/or the Mineral County School District Emergency Operations Plan Development Committee.

Section 9: Portable Fire Extinguishers

1. Intended Operation. MCSD maintains portable fire extinguishers at its premises. Portable fire extinguishers are provided to combat early-stage fires only. Employees are not required to use portable fire extinguishers in the event of any fire. If an employee decides to use a fire extinguisher to combat a fire, the employee must:

- A. Ensure the fire department has been called or notified by **calling 911** or triggering a monitored fire alarm system.
- B. Ensure other occupants are alerted to the fire.
- C. Ensure other occupants have begun evacuating the building.
- D. Ensure the fire is small and not spreading.
- E. Only operate a portable fire extinguisher if the employee has received appropriate training.
- F. Ensure that there is a safe means of escape that is not obstructed by the fire or other hazards.

***** If there is any doubt that one of the above conditions is not satisfied, evacuate. *****

2. Location and Type.

A. Location. Portable fire extinguishers are generally located at intervals of 75 feet in every MCSD building.

B. Type(s) of portable fire extinguisher(s). Generally, extinguishers are rated for class A, B, and C fires. Extinguishers rated for class K fires are in kitchen facilities. Extinguishers using Purple-K dry chemical agent are utilized for fuel pumps.

3. Inspection, Maintenance, and Testing

A. Inspection. The Safety Director, or designee, shall conduct monthly visual inspections of all portable fire extinguishers.

B. Maintenance and Testing. The Safety Director, or designee, shall ensure that all portable fire extinguishers are subject to annual maintenance, six (6) year internal maintenance, and twelve (12) year hydrostatic testing. Additionally, hydrostatic testing will be performed whenever the portable fire extinguishers show new evidence of corrosion or mechanical injury.

C. Removal and Replacement. Whenever a portable fire extinguisher fails visual inspection, annual maintenance, internal maintenance, or hydrostatic testing it will be removed from the workplace and replaced with a functioning unit.

4. Training. All employees will take Fire Extinguisher Training upon initial employment and annually thereafter.

Section 10: Personal Protective Equipment (PPE) Program

1. Purpose

A. Personal protective equipment (PPE), including personal protective equipment for eyes, face, head, and extremities, protective clothing, respiratory devices, and protective shields and barriers, shall be provided, used, and maintained in a sanitary and reliable condition wherever it is necessary by reason of hazards of processes or environment, chemical hazards, radiological hazards, or mechanical irritants encountered in a manner capable of causing injury or impairment in the function of any part of the body through absorption, inhalation or physical contact.

B. This PPE Program is intended to

- (1) Assist departments/sites in completing hazard assessments for PPE selection.
- (2) Provide resources for employee information and training.

2. Responsibilities

A. Safety Director

- (1) In accordance with this program, make available the necessary and appropriate PPE and training for each job duty or task where PPE is required.
- (2) Ensure that the PPE Program is properly implemented across MCSD.
- (3) Empower the designated Site Administrators and supervisors to implement the PPE Program.

B. Site Administrator

- (1) Will perform the required hazard assessment for the site/department to which he/she is designated. Upon completion, the hazard assessment will be provided to the Safety Director.
- (2) Based on the hazard assessment, assist in the selection of the necessary and appropriate PPE for each job duty or task where PPE is required.
- (3) Ensure that the PPE program is properly implemented within the designated site/department.

C. Supervisor

- (1) Will assist the Site Administrator in conducting, and/or conduct, the hazard assessment as may be appropriate.
- (2) Ensure employees that must use PPE are appropriately and adequately trained according to this program. Where necessary, ensure employees receive any required retraining.
- (3) Ensure that PPE is appropriately maintained in a sanitary and reliable condition. Where PPE is damaged or defective, properly dispose of and replace PPE.
- (4) Verify the adequacy, proper maintenance, and sanitation of any employee purchased PPE.

D. Employee

- (1) Will not use PPE unless he/she has been trained in the proper use, limitations, and case of the PPE according to this program.
- (2) Where PPE is used, assist in the proper care and maintenance of reusable PPE and the proper disposal of single-use, damaged, or defective PPE.
- (3) Notify the supervisor where PPE is damaged, defective, or otherwise needs replacement.

3. Hazard Assessment

A. Each site/department will perform, document, and certify that a PPE hazard assessment is conducted to identify hazards for each job or task.

B. Each site/department will also review the PPE hazard assessment when changes occur to the job, task or work environment. A PPE hazard assessment will also be conducted for new equipment, processes, and tasks where new hazards may be introduced.

C. The hazard assessment should begin with a walk-through survey of the site/department to develop a list of potential hazards in the following basic hazard categories: (1) impact, (2) penetration, (3) compression (roll-over), (4) chemical, (5) heat/cold, (6) harmful dust, (7) light (optical) radiation, and (8) biologic.

D. In addition to noting the basic site/department layout and reviewing any history of occupational illnesses or injuries, things to look for during the walk-through include:

- (1) Sources of electricity.
- (2) Sources of motions, such as machines or processes where movement may exist that could result in an impact between personnel and equipment.
- (3) Sources of high temperature that could result in burns, eye injuries or fire.
- (4) Types of chemicals used in the workplace.
- (5) Sources of harmful dust.
- (6) Sources of light radiation such as welding, brazing, cutting, furnaces, heat treating, high intensity lights, etc.
- (7) The potential for falling or dropping objects.
- (8) Sharp objects that could poke, cut, stab, or puncture.
- (9) Biologic hazards such as blood or other potentially infectious material.

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4. Selection

A. The Site Administrator, Department Supervisor, and/or designee will select appropriate PPE based upon any uncontrolled, recognized hazard.

B. General Requirements

- (1) Selected PPE should be of safe design and construction.
- (2) Consideration should be given to the appropriate fit and comfort of selected PPE. If multiple types of PPE must be used together, PPE compatibility should be considered to ensure effective coverage.
- (3) Selected PPE must meet ANSI standards (Z87.1 eye and face protection, Z89.1 head protection, Z41.1 foot protection).
- (4) The site/department will consider the following when evaluating PPE:
 - (a) **Eye and face protection** when there is potential to encounter hazards such as flying debris, chemical splashes, chemical fumes, molten metal, potentially infectious material, and harmful light. Face shields used for splash protection must be used in conjunction with either safety glasses or goggles. NOTE: Affected employees wearing prescription lenses must wear eye protection that incorporates the prescription in its design or protection that can be worn over.
 - (b) **Head protection** may be required when there is a danger from falling objects from above, fixed objects (i.e. low clearance), or electrical shocks and burns.
 - (c) **Hand and arm protection** may be required when skin may be exposed to harmful substance, chemical or thermal burns, electrical dangers, bruises, abrasions, cuts, punctures, fractures, or amputations.
 - (d) **Foot and leg protection** may be required when hazards such as falling or rolling objects, crushing or penetrating materials, exposure to hot or corrosive materials, and electrical are present in the workplace.
 - (e) **Body protection** may be required when exposed to hot splashes from molten metals or other hot liquids, impact from tools or machines, or hazardous chemicals.
 - (f) **Hearing protection** may be required when an employee is exposed to industrial noise above 85dBA or electrical work involving an arc flash hazard (in conjunction with hearing protection program).
- (5) MCSD will provide PPE at no cost to employees that is required to comply with provisions in 29 CFR 1910.² When employees provide their own PPE, the supervisor will verify its adequacy, proper maintenance, and sanitation.

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² See 29 CFR 1910.132(h), <https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.132> (as viewed Dec. 3, 2021).

5. Maintenance

- A. Defective and/or damaged PPE shall not be used. Notify a supervisor if PPE is defective and/or damaged.
- B. Reusable PPE should be kept in plastic bags or other storage to promote cleanliness and prevent contamination or degradation.
- C. Manufacturers' instruction should be followed in cleaning and maintaining reusable PPE.

6. Training

- A. Before starting a job or task that requires PPE use, each employee that uses PPE must be trained to at least know the following:
 - (1) When PPE is necessary.
 - (2) What PPE is necessary.
 - (3) How to properly put on, take off, adjust, and wear the PPE.
 - (4) The limitations of the PPE.
 - (5) The proper care, maintenance, useful life, and disposal of PPE.
- B. Supervisors should ensure that employees required to use PPE can demonstrate an understanding of the PPE training as well as the ability to properly wear and use PPE before the perform work requiring PPE use.
- C. Retraining will be provided where:
 - (1) A supervisor believes that a previously trained employee is not demonstrating proper understanding or skill in use of PPE.
 - (2) Changes in the workplace or in the type of PPE required for the job or take make prior training obsolete.
- D. Training must be documented to certify the name of each employee trained, the date of the training, and the subject of the certification.

7. Program Availability

A copy of this program will be made available, upon request, to workers, their designated representatives, and OSHA.

Section 11: Medical and First Aid

1. FIRST AID KITS

A. Contents

(1) Each department shall be equipped with a standard first aid kit suitable for the size of the workforce. The minimally acceptable number and type of first aid supplies for first aid kits adequate for small work sites may be found at <https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.266AppA>.

(2) All first aid supplies shall be inspected at least monthly and replenished as needed using the checklist located with each kit.

B. Location

First aid kits are clearly marked "FIRST AID" and are located at:

- (1) Hawthorne Elementary School Main Office and Gymnasium.
- (2) Hawthorne Junior High School Main Office and Gymnasium.
- (3) Mineral County High School Lobby and Gymnasium.
- (4) Schurz Elementary School Main Office and Gymnasium.
- (5) Each bus operated by MCSD.

2. AUTOMATED EXTERNAL DEFIBRILLATORS (AED)

A. Location

(1) AED must be located so that they can be utilized within three (3) to five (5) minutes of report of an incident or injury.

(2) AED Stations are located at

- (a) Hawthorne Elementary School Main Office.
- (b) Hawthorne Junior High School Teacher's Lounge.
- (c) Mineral County High School Main Office and Gymnasium.
- (d) Schurz Elementary School Teachers' Lounge.
- (e) Mineral County District Office Main Office.
- (f) Mineral County District Office Hallway.
- (g) Mineral County High School Athletic Department Office.

(h) Mineral County School District Transportation and Maintenance Department.

B. Inspections

- (1) AED units must be inspected, tested, and maintained in accordance with the manufacturers' specifications.
- (2) The Safety Director, or designee, should ensure that AED units are routinely inspected, tested, and maintained.

C. Training

- (1) Employees that may use an AED should receive training, and if applicable, retraining, in accordance with the manufacturers' specifications.
- (2) Employees that may use an AED should receive training, and if applicable retraining, in basic emergency care of a person in cardiac arrest that includes training in the operation and use of an AED and in conducted in accordance with the standards of the American Heart Association, the American National Red Cross, or any similar organization.
- (2) Other training considerations. OSHA recommends that a worksite AED program by developed with physician oversight; compliance with local, state, and federal regulations; coordination with local EMS; a quality assurance program; and periodic review.

3. FOLOWING AN INJURY:

A. The employee's injury will be evaluated and if appropriate, first aid rendered.

- (1) All MCSD coaches and nurses are trained in, and responsible for administering, first aid.

- (2) **In the event of a serious injury, contact 911 for emergency medical assistance.**

B. As a PACT member, the **24-7-365 Nurse Triage Program** can be used for non-life-threatening occupational injuries requiring medical attention. For additional information contact **POOL/PACT Risk Management** at (775) 885-7475.

C. If the injury requires medical attention and is not an emergency, the employee will be escorted to the nearest appropriate medical facility. Further evaluation and treatment will be rendered.

D. The procedures for Incident Investigation and Report found in Section 6 of the WSP will be followed to appropriately document, report, and investigate the injury for hazard elimination to minimization.

E. The facts and circumstances of each incident will be reviewed by the Safety Director to assess the root cause of the incident. The safety training provided by the involved employee's supervisor will also be assessed.



4. FIRST AID TRAINING

A. Teaching Methods. Teaching methods which incorporate the following principles:

- (1) Basing a curriculum on a consensus of scientific evidence;
- (2) Developing “hands-on” skills;
- (3) Having appropriate first-aid supplies;
- (4) Using visual aids to expose trainees to various situations;
- (5) Including resources for both during and after training;
- (6) Allowing enough time for emphasis on common situations;
- (7) Emphasizing skills training and confidence-building; and
- (8) Emphasizing quick response.

B. Responding to a Health Emergency. The training program should instruct trainees in the following areas:

- (1) Prevention as a strategy;
- (2) Interacting with EMS;
- (3) Maintaining emergency telephone numbers that are accessible to all;
- (4) Understanding the legal aspects of first-aid care;
- (5) Understanding the effects of stress, fear, and panic on a situation; and
- (6) Learning the importance of precautions, such as body substance isolation to protect from bloodborne pathogens and other infectious materials.

C. Assessing the Injury. The training program should include:

- (1) Instruction in assessing the scene;
- (2) Prioritizing care when several people are injured;
- (3) Assessing each victim for responsiveness;

- (4) Taking a victim's history at the scene;
- (5) Performing head-to-toe check for injuries;
- (6) Continuously monitoring the victim; and
- (7) providing methods for safely moving and rescuing victims and repositioning victims to prevent further injury.

D. Responding to Life-Threatening Emergencies. First-aid instruction should be given in the following areas:

- (1) Establishing responsiveness;
- (2) Establishing and maintaining an open and clear airway;
- (3) Performing rescue breathing;
- (4) Treating airway obstruction; performing CPR;
- (5) Using an AED;
- (6) Recognizing signs and symptoms of shock and addressing the correct first-aid;
- (7) Controlling bleeding;
- (8) Dealing with poisons;
- (9) Recognizing and treating asphyxiation; and
- (10) Responding to other medical emergencies such as chest pain, stroke, breathing problems, seizures, impaled object, pregnancy complications, and more

E. Responding to Non-Life-Threatening Emergencies. The training program should include instruction on:

- (1) Wound care.
- (2) Burn care.
- (3) Temperature extremes.

(4) Musculoskeletal injuries.

(5) Mouth and teeth injuries.

(6) Bites and stings.

F. Trainee Assessment. The training program should include instructor observation of acquired skills and a written performance assessment.

G. Retraining. Instructor led retraining for life-threatening emergencies should occur annually. Retraining for non-life-threatening emergencies should occur periodically.

Section 12: Bloodborne Pathogens Exposure Control Plan

Definitions

“Blood” means human blood, human blood components, and products made from human blood. 29 CFR 1910.1030(b).

“Bloodborne Pathogens” means pathogenic 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) and human immunodeficiency virus (HIV). 29 CFR 1910.1030(b).

“Contaminated” means the presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface. 29 CFR 1910.1030(b).

“Contaminated Laundry” means laundry which has been soiled with blood or other potentially infectious materials or may contain sharps. 29 CFR 1910.1030(b).

“Contaminated Sharps” means any contaminated object that can penetrate the skin including, but not limited to, needles, scalpels, broken glass, broken capillary tubes, and exposed ends of dental wires. 29 CFR 1910.1030(b).

“Decontamination” means the use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use, or disposal. 29 CFR 1910.1030(b).

“Engineering control” means a physical change to the workplace that removes a hazard or creates a barrier between an employee and a hazard. See NRS 618.7304; The National Institute for Occupational Safety and Health (NIOSH), <https://www.cdc.gov/niosh/engcontrols/> (as viewed Nov. 19, 2021).

“Exposure Incident” means a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee's duties. 29 CFR 1910.1030(b).

“Handwashing Facilities” means a facility providing an adequate supply of running potable water, soap, and single-use towels or air-drying machines. 29 CFR 1910.1030(b).

“Licensed Healthcare Professional” is a person whose legally permitted scope of practice allows him or her to independently perform the activities required by paragraph (f) Hepatitis B Vaccination and Post-exposure Evaluation and Follow-up. 29 CFR 1910.1030(b).

“HBV” means hepatitis B virus. 29 CFR 1910.1030(b).

“HIV” means human immunodeficiency virus. 29 CFR 1910.1030(b).

“Occupational exposure” means 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. 29 CFR 1910.1030(b).

“Other Potentially Infectious Materials” means:

(1) The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids;

(2) Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and

(3) HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV. 29 CFR 1910.1030(b).

“Source Individual” means any individual, living or dead, whose blood or other potentially infectious materials may be a source of occupational exposure to the employee. 29 CFR 1910.1030(b).

“Work practice control” means a practice, procedure, or rule that is used to reduce the risk of a hazard in the workplace. See NRS 618.7310; Occupational Safety and Health Administration (OSHA), <https://www.osha.gov/ergonomics/control-hazards> (as viewed Nov. 19, 2021).

“Universal Precautions” is an approach to infection control. According to the concept of Universal Precautions, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens. 29 CFR 1910.1030(b).

1. Policy

The goal of the MCSD Bloodborne Pathogen Exposure Control Plan (ECP) is to outline the basic requirements of the OSHA Bloodborne Pathogen standard and procedures at MCSD. General requirements include:

- A. A written ECP, reviewed and updated annually.
- B. Use of universal precautions.
- C. Use of engineered and work practice controls, appropriate personal protective equipment (gloves, face and eye protection, gowns), and housekeeping requirements.
- D. Hepatitis B vaccine offered to employees who have occupational exposure free of cost.
- E. Medical follow-up in the event of exposure and training.
- F. Communications of hazards to employees.
- G. Recordkeeping.
- I. Procedures for evaluating circumstances surrounding exposure incidents.

2. Roles and Responsibilities

A. The Safety Director, or designee, is responsible for implementing the ECP. The Safety Director will maintain, review, and update the ECP at least annually, and whenever necessary to include new or modified standards, practices, and/or procedures.

Andre Ponder, Superintendent

B. 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.

C. The Maintenance Supervisor, Athletic Director, Superintendent, and/or designee will provide and maintain all necessary personal protective equipment (PPE), engineering controls, labels, and red bags as required by this standard. The Maintenance Department will ensure that adequate supplies of PPE are available in appropriate sizes.

D. The School District Nurse and/or Site Administrators will be responsible for ensuring that all medical actions required by the standard are performed and that appropriate employee health and OSHA records are maintained.

E. Human Resources will be responsible for training, documentation of training, and making the written ECP available to employees and OSHA representatives.

3. Employee Exposure Determination

A. The following is a list of all job classifications at MCSD in which employees may have an occupational exposure:

<u>Job Title</u>	<u>Department/Location</u>
Maintenance employees	<ul style="list-style-type: none">• Maintenance Department
Transportation employees	<ul style="list-style-type: none">• Transportation Department
School nurses	<ul style="list-style-type: none">• Hawthorne Elementary• Hawthorne Junior High• Mineral County High School• Schurz Elementary
Athletics Department employees	<ul style="list-style-type: none">• Hawthorne Elementary• Hawthorne Junior High• Mineral County High School• Schurz Elementary
Custodians	<ul style="list-style-type: none">• Hawthorne Elementary• Hawthorne Junior High• Mineral County High School• Schurz Elementary• District Office

Teachers	<ul style="list-style-type: none"> • Hawthorne Elementary • Hawthorne Junior High • Mineral County High School • Schurz Elementary
Other	<ul style="list-style-type: none"> • Adult Education • Paraprofessionals • Substitute teachers • Secretaries

4. Methods of Implementation and Control

A. Universal Precaution

- (1) All employees will utilize universal precautions.

B. Exposure Control Plan

(1) Employees covered by the bloodborne pathogens standard receive an explanation of this ECP during their new-hire training. It will also be reviewed in their annual refresher training. All employees can review this plan at any time during their shifts by contacting Human Resources. If requested, MCSD will provide an employee a copy of the ECP free of charge and within 15 days of the request.

(2) The Safety Director, Human Resources Department, and Maintenance Department is responsible for reviewing and updating the ECP annually or more frequently if necessary to reflect any new or modified standards, policy, or procedure that affects occupational exposure and to reflect new or revised employee positions with occupational exposure.

C. Engineering and Work Practice Controls.

(1) Engineering and Work Practice Controls will be used to prevent or minimize exposure to bloodborne pathogens. The specific Engineering and Work Practice Controls used are listed below:

(a) Engineering Controls. These controls must be employed to minimize exposures to workers while performing their job. This includes engineering controls used to prevent needlestick injuries. Any device or procedure that requires the use of a needle must be engineered using the best available technology. Preferably a needle is not used to perform the task but, if necessary, then the operator must be protected from needlestick injury. Engineering controls to be used include, but might not be limited to, the following:

- Sharps disposal containers
- Eye wash facilities
- Hand wash facilities
- Biohazardous waste bags

(b) Work Practice Controls. This method utilizes best practice work procedures to eliminate or minimize the occupational exposure potential to employees.

- Procedures for inspecting, maintaining, and safe disposal of contaminated sharps and sharps disposal containers.
- Procedures for eye or other membrane flushing upon exposure incident, followed by parental contact.
- Procedures for handwashing upon exposure incident, followed by parental contact.
- Procedures for disposing of used, disposable PPE, or other items saturated during an exposure incident in red Biohazardous waste bags

(c) The Safety Committee is responsible for identifying the need for changes in engineering and work practice controls through its activities as specified in Section 3. New procedures and products are reviewed by Safety Director, or designee, and brought to the Safety Committee through appropriate channels. The Safety Director, or designee, is responsible for ensuring Safety Committee actions relevant to the ECP are implemented in a timely fashion.

D. Personal Protective Equipment (PPE)

(1) MCSD provides PPE to employees at no cost whenever there is potential for occupational exposure. Training in the use of the appropriate PPE for specific tasks or procedures is provided by Supervisors and/or Site Administrators.

(2) PPE available to employees consists of gloves, gowns, and/or face shields. PPE is available in MCSD nurses' offices and custodial closets.

(3) All employees using PPE must observe the following precautions:

(a) Wash hands immediately or as soon as feasible after removing PPE.

(b) Remove PPE after it becomes contaminated and before leaving the work area.

(c) Used, disposable PPE may be disposed of in red biohazardous waste bags.

(d) Wear appropriate gloves when it is 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, or contaminated, or if their ability to function as a barrier is compromised.

(e) Utility gloves may be decontaminated for reuse if their integrity is not compromised; discard utility gloves if they show signs of cracking, peeling, tearing, puncturing, or deterioration.

(f) Never wash or decontaminate disposable gloves for reuse.

(g) 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.

(h) 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.

(4) The procedure for handling used PPE is used, disposable PPE will be placed in red, properly labeled, biohazardous waste bags and provided to the MCSD nurse for proper disposal at Mt. Grant General Hospital or the Community Health Clinic.

E. Housekeeping

(1) Contaminated sharps are 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 (see the following paragraph, "Labels"). Sharps disposal containers are available at both MCSD nurses' offices.

(2) Sharps disposal containers are in both MCSD nurses' offices. When full, or at pre-determined intervals, sharps containers are disposed of at Mt. Grant General Hospital or the Community Health Clinic by MCSD nurses.

(3) Bins, pails, and/or basins are cleaned and decontaminated as soon as feasible after visible contamination.

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

F. Labels

(1) Warning labels are placed on containers used to store or transport blood or OPIM, including biohazardous waste bags and sharps containers. The label will be a fluorescent orange, red, or orange-red biohazard label with lettering in a contrasting color (see example below).



(2) Employees responding to an exposure incident are responsible for ensuring that warning labels are affixed or red biohazardous waste bags are used as required if regulated waste or contaminated equipment is brought into MCSD.

(3) Employees are to notify the MCSD nurse, Supervisors, and/or Site Administrators as soon as possible if regulated waste containers, contaminated equipment, or other container in which used PPE, blood, or other OPIM is discovered without proper labels or color-coding.

5. Hepatitis B Vaccination

- A. Human Resources will provide training to employees on hepatitis B vaccinations addressing safety, benefits, efficacy, methods of administration, and availability.
- B. 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 plan. Vaccination is encouraged unless (1) documentation exists that the employee has previously received the series; (2) antibody testing reveals that the employee is immune; or (3) medical evaluation shows that the vaccinations is contraindicated.
- C. If an employee declines the vaccination, the employee must sign a declination form. Employees who decline may request and obtain the vaccination at a later date at no cost. Documentation of refusal of the vaccination is kept within Human Resources Confidential Medical Files.
- D. Vaccinations will be provided by Mt. Grant General Hospital.
- E. Following the medical evaluation, a copy of the license healthcare professional's written opinion will be obtained and provided to the employee within fifteen (15) days of the completion of the evaluation. It will be limited to whether the employee requires the hepatitis vaccine and whether the vaccine was administered.

6. Post-Exposure Evaluation and Follow Up

- A. Should an exposure incident occur, immediately contact your supervisor.
- B. An immediately available confidential medical evaluation and follow up will be conducted.
- C. Following initial first aid post-exposure (clean the wound, flush eyes or other mucous membrane, etc.), the following activities will occur:
 - (1) Document the routes of exposure and how the exposure occurred.
 - (2) Identify and document the source individual (unless the employer can establish that identification is not feasible or prohibited by state or local law).
 - (3) Obtain consent and arrange 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.
 - (4) Assure that the exposed employee is provided with 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).
 - (5) After obtaining consent, collect exposed employee's blood as soon as feasible after exposure incident and test blood for HBV and HIV serological status.

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

7. Administration of Post-Exposure Evaluation and Follow Up

A. Mt. Grant General Hospital ensures that the licensed healthcare professional(s) responsible for employee's hepatitis B vaccination and post-exposure evaluation and follow up are given a copy of OSHA's bloodborne pathogen standard.

B. The MCSD nurse ensures that the licensed healthcare professional evaluating an employee after an exposure incident receives the following:

- (1) A description of the employee's duties related to the incident.
- (2) Documentation of the route of entry and exposure circumstances.
- (3) Available source blood testing results.
- (4) A copy of, or information regarding, all available medical records relevant to the treatment of the employee, including vaccination status which are the employer's responsibility to maintain.

8. Procedures for Evaluating the Circumstances Surrounding and Exposure Incident

A. Human Resources will review the circumstances of all exposures and complete a Bloodborne Pathogen Exposure Report for Safety Committee review. The investigation and report will seek to determine:

- (1) Engineering controls in use at the time.
- (2) Work practice controls in place and followed at the time.
- (3) A description of the device being used (including type and brand).
- (4) PPE or clothing that was used at the time of the exposure incident (i.e. gloves, eye shields, etc).
- (5) Location of the incident.
- (6) Procedure being performed when the incident occurred.
- (7) Employee training.

B. School nurses and/or Human Resources will record all percutaneous injuries from contaminated sharps in a Sharps Injury Log. This log will be maintained by the Safety Director and will be forwarded to the responsible manager/supervisor of the location where the injury took place.

(1) The sharps injury log must maintain confidentiality and will contain (a) the location of the injury, (b) the type and brand of the device involved, and (c) An explanation of how the incident occurred.

(2) All records shall be made available to the employee, employee representative and OSHA upon request of reviewing and copying.

C. If revisions to this ECP are needed, the Safety Director and/or Human Resources, in conjunction with the Safety Committee, will ensure that appropriate changes are made (i.e., evaluation and consideration of safer devices, adding employees to exposure determination list, etc.).

9. Employee Training

A. All employees who have occupational exposure to bloodborne pathogens receive initial and annual training conducted through the Absorb Learning Management System. POOL/PACT and/or Human Resources will keep and make available training materials.

B. Training will consist of epidemiology, symptoms, and transmission of bloodborne pathogen diseases. Additionally, training will cover the following elements:

(1) A copy and explanation of the OSHA bloodborne pathogen standard.

(2) An explanation of the ECP and how to obtain a copy.

(3) An explanation of methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure event.

(4) An explanation of the use and limitations of engineering controls, work practice controls, and PPE.

(5) An explanation of the types, uses, location, removal, handling, decontamination, and disposal of PPE.

(6) An explanation of the basis of PPE selection.

(7) 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.

(8) Information on the appropriate actions to take and persons to contact in an emergency involving blood or other OPIM.

(9) 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.

(10) Information on the post-exposure evaluation and follow up that the employer is required to provide for the employee following an exposure incident.

(11) An explanation of the signs and labels and/or color-coding required by the standard and used at this facility.

(12) An opportunity for interactive questions and answers with the person conducting the training session.

10. Recordkeeping

A. Training Records

(1) Training records are completed for each employee upon completion of training and will be maintained for at least three (3) years at Human Resources.

(2) Training records include dates of the training session, contents or summary of the training, names and qualifications of persons conducting the training, and names and job titles of all persons attending the training.

(3) Training records are provided upon request to the employee or the employee's authorized representative within 15 working days.

B. Medical Records

(1) Medical records are maintained for each employee with occupational exposure in accordance with 29 CFR 1910.1020, "Access to Employee Exposure and Medical Records."

(2) Human Resources is responsible for maintaining required medical records. These confidential records are kept in Human Resources Confidential Employee Medical Files for at least the duration of employment plus 30 years.

(3) Training records are provided upon request to the employee or the employee's authorized representative within 15 working days.

C. OSHA Recordkeeping

(1) An exposure incident is evaluated to determine if the case meets OSHA's Recordkeeping Requirements (29 CFR 1904). This determination and recording activity are done by Human Resources.

D. Sharps Injury Log

(1) In addition to 1904 general recordkeeping requirements, all percutaneous injuries from contaminated sharps are also recorded in a Sharps Injury Log (29 CFR 1904.8). All incidents must include at least:

(a) Date of injury.

(b) Type and brand of the device involved.

(c) Department or work area where the incident occurred.

(d) Explanation of how the incident occurred.

(2) This log is reviewed as part of the annual program evaluation and maintained for at least five (5) years following the end of the calendar year covered. If a copy is requested by anyone, or used by the Safety Committee, any personal identifying information must be removed.

(3) Percutaneous injuries from contaminated sharps may be recorded using the OSHA 300 log provided that

(a) The type and brand of the device involved is recorded in the OSHA 300 log,

(b) Records are maintained in a way that allows sharps injuries to be easily separated from other types of work-related injuries, and

(c) The employee's name is not entered on the 300 log to meet the privacy requirements of 1904.29(b)(6) through (b)(9).

Section 13: Ergonomics and Workplace Safety

1. Learn to lift and handle materials safely. Do not hesitate to ask for help in lifting heavy loads. Always push rather than pull a load.
2. Keep walking surfaces free from tripping hazards. Keep work areas dry, clean and orderly.
3. Do not leave desk and file cabinet drawers open.
4. Open one file drawer at a time. Place heavier items in drawers at the bottom of the cabinet.
5. The top of the computer monitor should not be higher than the user's eyes for normal vision. Bifocal and trifocal users may prefer their monitor at a lower position.
6. The computer screen and any document holder should be the same distance from the eye and at the same level to avoid constant changes in focus and close enough together so the operator can look from one to the other without excessive movement of the neck or back.
7. The preferred viewing distance for computer monitors ranges between 18" and 24".
8. The preferred working position for most computer keyboard operators is with the forearms parallel to the floor and elbows at the sides.
9. The computer mouse should be positioned at the operator's side with his or her arm close to the body for support, while maintaining a straight line between the hand and forearm.
10. If you have a concern relating to your workstation, please contact your supervisor.

Section 14: Requirements and Definitions

STATUTORY AND REGULATORY REQUIREMENTS

The following sections must be in all WWSPs. NRS 618.383(4) requires that a WWSP and required training programs must be conducted and made available in a language and format understandable to each employee.

(1) Responsibility: A WWSP must include statement explaining that the managers, supervisors, and employees are responsible for carrying out the program. NAC 618.540(1)(a).

(2) Hazard Identification, Analysis & Control: A WWSP must include an explanation of the methods used to identify, analyze, and control new and existing hazards. NAC 618.540(1)(b).

(3) Training: A WWSP must include an explanation of the methods used to ensure that employees receive the appropriate safety and health training before performing work duties. NAC 618.540(1)(c).

(4) Incident Investigation & Corrective Action: A WWSP must include procedures that must be followed to investigate an incident which has occurred and the corrective actions to be initiated. NAC 618.540(1)(d).

(5) Program Compliance: A WWSP must include a method for ensuring that employees comply with the safety rules and work practices. NAC 618.540(1)(e).

(6) Reporting of incidents resulting in death, in-patient hospitalization, amputation, or loss of eye must be reported to OSHA within eight (8) hours if the incident results in death to one or more employees, or twenty-four (24) hours if the incident results in an in-patient hospitalization, amputation, or loss of an eye. NRS 618.378. For reporting, **Nevada OSHA** may be reached at **(702) 486-9020 in Southern Nevada** or **(775) 688-3700 in Northern Nevada**.

(7) Harmful Exposure and Corrective Action: Each employer shall promptly notify any employee who has been or is being exposed to toxic materials or harmful physical agents in concentrations or at levels which exceed those prescribed by an applicable occupational safety and health standard adopted under this chapter and shall inform such employee of any action being taken to correct the condition. NRS 618.380.

(8) Safety Committee Recordkeeping. The entity must keep written record of (1) the safety and health issues discussed at Safety Committee meetings, (2) attendance of Safety Committee meetings, and (3) attendance of employees in training programs. NAC 618.542.

(9) Other Requirements: Nevada enforces the federal OSHA General Industry and Construction Standards found in 29 CFR 1910 and 29 CFR 1926, respectively. **Plans/programs other than your WWSP may need to be developed on the activities of your entity.** Examples include Bloodborne Pathogen Exposure Control, Hazardous Communications, Lock-Out, Tag-Out; Personal Protective Equipment; Indoor Air Quality; Chemical Spill Controls; etc.³

³ For assistance in identifying other requirements of your WSP, consult the OSHA Compliance Assistance Quick Start at <https://www.osha.gov/complianceassistance/quickstarts>.

(10) **District Emergency Operations Plan (NRS 388.251, 388.243, 388.259).** The MCSD *School District Emergency Operations Plan Development Committee* (SDEOPDC) is responsible for developing the Emergency Operations Plan (EOP). Similarities and differences between a Development Committee and a Workplace Safety Plan include:

1. Similarities:

- a. Both are statutorily required
 - i. Development Committee: NRS 388.241.
 - ii. WWSP: NRS 618.383.
- b. The objective of both is to promote employee and public safety and eliminate/reduce workplace (school property) accidents and injuries.

2. Differences:

- a. The board of trustees shall establish the SDDC.
- b. Membership is specifically defined by statute.
- c. The SDEOPDC is not subject to the requirements of the Open Meeting Law.
- d. The SDEOPDC emergency and crisis plans are confidential.
- e. The public should not be aware of the districts emergency management and crisis plans (i.e. EOP evacuation procedures and meeting areas).
- f. Unlike a WWSP, which should be updated and reviewed at least annually, the SDEOPDC plan is required to undergo annual plan review and submission to the Nevada Department of Education on or before July 1, of each year.

DEFINITIONS

“Employee” means every person who is required, permitted or directed by any employer to engage in any employment, or to work or be at any time in any place of employment, under any appointment or contract of hire or apprenticeship, express or implied, oral or written, whether lawfully or unlawfully employed. NRS 618.085.

“Employer” in the context of this template, means: (1) any county, city, town, school district or other unit of local government; (2) any public or quasi-public corporation; and (3) any officer or management official having direction or custody of any employment or employee. NRS 618.095.

“Employment” means any trade, work, business, occupation or process of manufacture, or any method of carrying on such trade, work, business, occupation, or process of manufacture, including construction work, in which any person may be engaged. NRS 618.105.

“Engineering control” means a physical change to the workplace that removes a hazard or creates a barrier between an employee and a hazard. See NRS 618.7304; The National Institute for Occupational Safety and Health (NIOSH), <https://www.cdc.gov/niosh/engcontrols/> (as viewed Nov. 19, 2021).

“Near-miss” means an incident that could have caused serious injury, illness, or property damage but did not; also called a “close call.” See OSHA, *Incident [Accident] Investigations: A Guide for Employers* (Dec. 2015).

“Place of employment” means any place, whether indoors or out or elsewhere, and the premises appurtenant thereto, where, either temporarily or permanently, any industry, trade, work, or business is carried on, including all construction work, and where any person is directly or indirectly employed by another for direct or indirect gain or profit. NRS 618.155.

“Safety Device” or **“Safeguard”** means any practicable method of mitigating or preventing a specific danger. NRS 618.165.

“Safety Director” means the person assigned by an employer to be in charge of occupational safety and health. NRS 618.375(4). A Safety Director may be a position title within an entity or a responsibility of an existing job or position.

“Serious injury” means injury resulting in inpatient hospitalization, amputation, or loss of an eye. See NRS 618.378.

“Work practice control” means a practice, procedure, or rule that is used to reduce the risk of a hazard in the workplace. See NRS 618.7310; Occupational Safety and Health Administration (OSHA), <https://www.osha.gov/ergonomics/control-hazards> (as viewed Nov. 19, 2021).

“Written Workplace Safety Plan” or **“WWSP”** means the document prepared by an employer that creates a workplace safety training program and explains

- (1) How employers and employees are responsible for carrying out the plan;
- (2) How hazards are identified, analyzed, and controlled;
- (3) How employees will receive workplace safety training prior to beginning work duties; and
- (4) The procedures of incident investigation, including corrective action, pursuant to NRS 618.383(2) and NAC 618.540.

Section 15: Forms & Checklists

1. [Incident Investigation Form](#).
2. [Safety Concern and Near-miss Form](#).
3. [Nevada Workers' Compensation Forms](#). (Links to Forms).
 - A. C-1 Notice of Injury or Occupational Disease
 - B. C-3 Employer's Report of Industrial or Occupational Disease
 - C. C-4 Employee's Claim for Compensation
 - D. C-4A Release of Medical and Other Information for Nevada Workers' Compensation Claims
4. [Nevada OSHA Forms](#). (Links to Forms).
 - A. OSHA Injury and Illness Recordkeeping & Reporting Requirements (Federal OSHA).
 - B. Injury and Illness Recordkeeping Instructions
 - C. Injury and Illness Recordkeeping Forms (300, 300A, and 301)
 - D. Employee Rights & Responsibilities (English).
 - E. Employee Rights & Responsibilities (Spanish).
 - F. Nevada Safety and Health Protection on the Job (Poster).
 - G. Emergency Phone Numbers (Poster).
5. [Safety Committee Form 1 – Organizational Template](#).
6. [Safety Committee Form 2 – Agenda Template](#).
7. [Safety Committee Form 3 – Minutes Template](#)
8. [Hazard Assessment Form for PPE Use](#)
9. [Hepatitis B Vaccination Request/Declination Form](#)
10. [Bloodborne Pathogen Incident Exposure Form](#)

Incident Investigation Form

Section A: Information	
Entity Name:	Date:
Investigator or Team Name(s) and Title(s)	
<u>Name</u>	<u>Title</u>
Section B: Incident Description/Injury Information	
1. Injured Employee Information	
(a) Name & Age of Injured Employee:	
(b) Employee's first language:	
(c) Employee Job Title:	
(d) Job at time of injury:	
(e) Type of Employment:	
(f) Length of Time with Entity:	
(g) Length of Time in Current Position:	
(h) Description and Severity of Injury:	
2. Incident Information	
(a) Date and Time of Incident:	
(b) Location of Incident:	

(c) Detailed description of incident. Include relevant events leading up to, during, and after the incident. *[It is preferred that the information is provided by the injured employee.]*

Use additional pages if needed.

(d) Description of incident from eye witnessed, including relevant events leading up to, during, and after the incident. Include names of persons interviewed, job titles, and date/time of interviews.

Use additional pages if needed.

(e) Description of incident from additional employees with knowledge, including relevant events leading up to, during, and after the incident. Include names of persons interviewed, job titles, and date/time of interviews.

Use additional pages if needed.

Section C: Identify Root Causes

The Root Causes are the underlying reasons the incident occurred and are the factors that need to be addressed to prevent future incidents. If safety procedures were not being followed, **why** were they not being followed? If a machine was faulty or a safety device failed, **why** did it fail? It is common to find factors that contributed to the incident in several of these areas: equipment/machinery, tools, procedures, training or lack of training, and work environment. If these factors are identified, you must determine **why** these factors were not addressed before the incident.

Use additional pages if needed.

Section D: Recommend Corrective Action to Prevent Future Incidents

Recommend any corrective actions necessary to prevent future incidents and if relevant, identify who should implement the corrective action and the time frame in which the corrective action should be implemented.

Use additional pages if needed.

Section E: Corrective Actions Taken/Root Causes Addressed

Document the corrective action taken, who implemented the corrective action, when the corrective action was implemented, and when provided to the Safety Committee.

Use additional pages if needed.

Safety Concern and Near-miss Form

This form allows employees to describe a safety concern or near-miss, note the location, and provide a report to a manager/supervisor and/or the Safety Director. Reporting safety concerns and near-misses allows [Entity] the opportunity to evaluate the condition to either eliminate the hazard or provide workplace or administrative controls.

Employees are advised that the use of this form or other reports of unsafe practices or conditions are protected by law. It is illegal for the employer to take any action against any employee in reprisal for exercising rights to participate in communications involving safety.

Section A: Safety Concern or Near-miss Information	
Entity Name:	
Date & Time of Report:	
Location of potential incident/hazard/concern:	
Type of Report: <ul style="list-style-type: none"> <input type="radio"/> Safety Concern <input type="radio"/> Near-miss <input type="radio"/> Safety Suggestion <input type="radio"/> Other (describe): 	Type of Concern: <ul style="list-style-type: none"> <input type="radio"/> Unsafe act <input type="radio"/> Unsafe condition or area <input type="radio"/> Unsafe use of equipment <input type="radio"/> Unsafe condition of equipment <input type="radio"/> Other (describe):
Describe the potential incident/hazard/concern and possible outcome in as much detail as possible:	
Safety Suggestions:	
Name (Optional):	
Phone Number (Optional):	
Email Address (Optional):	
<p><i>The remainder of this form will be completed by your manager/supervisor or Safety Director. Please send all Safety Concern & Near-miss Report Forms to your manager/supervisor or Safety Director for further action.</i></p> <p style="text-align: center;">[Safety Director Contact Number:]</p> <p style="text-align: center;">[Safety Director email:]</p>	

Section B: Identify Root Causes

Review the safety concern or near-miss. The Root Causes are the underlying reasons the near-miss occurred and are the factors that need to be addressed to prevent future incidents. If safety procedures were not being followed, **why** were they not being followed? If a machine was faulty or a safety device failed, **why** did it fail? It is common to find factors that contributed to the near-miss in several of these areas: equipment/machinery, tools, procedures, training or lack of training, and work environment. If these factors are identified, you must determine **why** these factors were not addressed before the near-miss.

Use additional pages if needed.

Section C: Recommend Corrective Action to Prevent Future Incidents

Recommend any corrective actions necessary to prevent future incidents and if relevant, identify who should implement the corrective action and the time frame in which the corrective action should be implemented.

Use additional pages if needed.

Section D: Corrective Actions Taken/Root Causes Addressed

Document the corrective action taken, who implemented the corrective action, when the corrective action was implemented, and when provided to the Safety Committee.

Use additional pages if needed.

Nevada Workers Compensation Forms

C-1 Notice of Injury or Occupational Disease (Incident Report):

<https://dir.nv.gov/uploadedFiles/dirnv.gov/content/WCS/c-1.pdf>.

C-3 Employer's Report of Industrial Injury or Occupational Disease:

<https://dir.nv.gov/uploadedFiles/dirnv.gov/content/WCS/c-3.pdf>.

C-4 Employee's Claim for Compensation:

<https://dir.nv.gov/uploadedFiles/dirnv.gov/content/WCS/C-4%20revised%208-12-2021%20.pdf>.

C-4A Release of Medical and Other Information for Nevada Workers' Compensation Claims:

<https://dir.nv.gov/uploadedFiles/dirnv.gov/content/WCS/PM%20MEDICAL%20RELEASE%20C-4A%208-12-21.pdf>.

Nevada OSHA Forms

OSHA Injury and Illness Recordkeeping & Reporting Requirements (Federal OSHA):

<https://www.osha.gov/recordkeeping>.

Injury & Illness Recordkeeping Instructions:

[https://dir.nv.gov/uploadedFiles/dirnv.gov/content/Governance/300%20Logs%20\(Instructions\).pdf](https://dir.nv.gov/uploadedFiles/dirnv.gov/content/Governance/300%20Logs%20(Instructions).pdf).

Injury & Illness Recordkeeping Forms (300, 300A, & 301):

[https://dir.nv.gov/uploadedFiles/dirnv.gov/content/Governance/300%20Logs%20\(Forms%20300,%20300A%20and%20301\).xls](https://dir.nv.gov/uploadedFiles/dirnv.gov/content/Governance/300%20Logs%20(Forms%20300,%20300A%20and%20301).xls).

Employee Rights & Responsibilities (English):

[https://dir.nv.gov/uploadedFiles/dirnv.gov/content/Governance/Rights%20and%20Responsibilities%20\(English\).pdf](https://dir.nv.gov/uploadedFiles/dirnv.gov/content/Governance/Rights%20and%20Responsibilities%20(English).pdf).

Employee Rights & Responsibilities (Spanish):

[https://dir.nv.gov/uploadedFiles/dirnv.gov/content/Governance/Rights%20and%20Responsibilities%20\(Spanish\).pdf](https://dir.nv.gov/uploadedFiles/dirnv.gov/content/Governance/Rights%20and%20Responsibilities%20(Spanish).pdf).

Nevada Safety and Health Protection on the Job (Poster):

<https://www.4safenv.state.nv.us/wp-content/uploads/2021/04/ENG-OSHA-POSTER-1-21.pdf>.

Emergency Phone Numbers (Poster):

<https://www.4safenv.state.nv.us/wp-content/uploads/2021/04/EMERGENCY-PHONE-NUMBERS-English.pdf>.

Safety Committee Organization Template



Mineral County School District Safety Committee	
Chairperson: <i>[Name of Chairperson]</i>	
Secretary: <i>[Name of Secretary]</i>	
Members	
<u>Name</u>	<u>Department</u>
<i>[Management Rep.]</i> <i>[Employee Rep.]</i>	<i>[Member Department]</i>
<i>[Management Rep.]</i> <i>[Employee Rep.]</i>	<i>[Member Department]</i>
<i>[Management Rep.]</i> <i>[Employee Rep.]</i>	<i>[Member Department]</i>
<i>[Management Rep.]</i> <i>[Employee Rep.]</i>	<i>[Member Department]</i>
<i>[Management Rep.]</i> <i>[Employee Rep.]</i>	<i>[Member Department]</i>

Safety Committee Meeting Agenda Template



Date: [Date]

Time: [Time]

Location: [Location]

1. ATTENDANCE

- A. Members Present:
- B. Members Absent:
- C. Guests/Visitors:

2. CALL TO ORDER

3. REVIEW AND APPROVE MINUTES OF PREVIOUS MEETING

4. DEPARTMENT REPORTS

- A. Incidents/Near-misses
- B. Corrective Actions
- C. Claims
- D. Job Hazard Analyses
- E. Projects/Training

5. REVIEW OLD BUSINESS, COMMITTEE TRAINING, PROJECTS, PLANNING

6. NEW BUSINESS, SUGGESTIONS, RECOMMENDATIONS, OR COMMENTS

7. SCHEDULE NEXT MEETING

- A. Date:
- B. Time:
- C. Location:
- D. Assignments:

Safety Committee Meeting Minutes Template

Date: [Date]

Time: [Time]

Location: [Location]

Who Conducted Meeting: [Name of Person Conducting Meeting]

1. ATTENDANCE (*List each member present, each member absent, and include any guests or visitors.*)

2. APPROVAL MINUTES OF [Date] MEETING (*Include who introduced the minutes, any corrections, who moved for approval, who seconded the motions, and votes for and against approval.*)

4. DEPARTMENT REPORTS (*List each Incident, Near-miss, Claims, and/or Project discussed by Department.*)

5. REVIEW COMMITTEE TRAINING, PROJECTS, PLANNING (*List each Committee Training, Project, or Plan discussed and the results of any motions related to trainings, projects, and planning.*)

6. NEW SUGGESTIONS, RECOMMENDATIONS, OR GENERAL COMMENTS (*List each suggestion, recommendation, or general comment discussed and the results of any motions for action based upon a suggestion, recommendation, or general comment.*)

7. SCHEDULE NEXT MEETING

A. Date:

B. Time:

C. Location:

D. Assignments:

Hazard Assessment for Personal Protective Equipment (PPE) Use

To be reviewed annually or upon changes to the workplace, work process, or introduction of machinery or equipment.

OSHA requires the employer shall assess the workplace to determine if hazards are present, or are likely to be present, which necessitate the use of personal protective equipment. 29 CFR 1910.132(d)(1). The Employer shall verify the required workplace hazard assessment has been performed through a written certification that identifies the workplace evaluated; the person certifying that the evaluation has been performed; the date(s) of the hazard assessment; and, which identifies the document as a certification of hazard assessment. 29 CFR 1910.132(d)(2). This form may be used to document your hazard assessment. Keep it on permanent file in your department.

PERFORMED BY (Name & Title): _____ DEPARTMENT: _____

LOCATION: _____ DATE: _____

NONE. Hazards requiring PPE are not present or not likely to be present.

SOURCE	ASSESSMENT OF HAZARD	PPE REQUIRED	COMMENTS
Use or handling of: <input type="checkbox"/> Chemicals <input type="checkbox"/> Biological agents, human blood, or OPIM <input type="checkbox"/> Radioactive materials	Eye or face injury <input type="checkbox"/> Impact from flying particles <input type="checkbox"/> Chemical splash in eyes <input type="checkbox"/> Facial/skin chemical contact <input type="checkbox"/> Nose/mouth contact with blood/OPIM Body/Skin/Hand contact <input type="checkbox"/> Biological agents <input type="checkbox"/> Sharps <input type="checkbox"/> Radioactive materials <input type="checkbox"/> Chemical <input type="checkbox"/> Hot/Cold objects	<input type="checkbox"/> Safety glasses <input type="checkbox"/> With side shields <input type="checkbox"/> Safety goggles <input type="checkbox"/> Chemical splash goggles <input type="checkbox"/> Face shield <input type="checkbox"/> Face mask for blood/OPIM only <input type="checkbox"/> Other: _____ <input type="checkbox"/> Lab coat/gown <input type="checkbox"/> Latex gloves <input type="checkbox"/> Apron <input type="checkbox"/> Double latex gloves <input type="checkbox"/> Scrubs <input type="checkbox"/> Rubber gloves <input type="checkbox"/> Tyveks <input type="checkbox"/> Chemical resistant gloves <input type="checkbox"/> Other: _____	
<input type="checkbox"/> Operations generating airborne fiber, dust, fumes, mist, or vapor	<input type="checkbox"/> Required: inhalation exposure > exposure standards <input type="checkbox"/> Voluntary: inhalation exposure < exposure standards	Respirator <input type="checkbox"/> Filter or cartridge EI SCBA or airline <input type="checkbox"/> Other: _____	Contact Safety Director for initial inhalation assessment.
<input type="checkbox"/> High noise levels from equipment or operation	<input type="checkbox"/> Required: noise exposure > standards <input type="checkbox"/> Voluntary: noise exposure < standards	<input type="checkbox"/> Muff <input type="checkbox"/> Ear plugs <input type="checkbox"/> Other: _____	Contact Safety Director for initial noise assessment.
<input type="checkbox"/> Non-ionizing radiation sources <input type="checkbox"/> Lasers <input type="checkbox"/> Welding <input type="checkbox"/> Infrared <input type="checkbox"/> Ultraviolet	Radiation burns to: <input type="checkbox"/> Eyes <input type="checkbox"/> Body <input type="checkbox"/> Skin	<input type="checkbox"/> Shaded safety glasses <input type="checkbox"/> With side shields <input type="checkbox"/> Shaded safety goggles <input type="checkbox"/> Welding helmet <input type="checkbox"/> Protective clothing <input type="checkbox"/> Barriers, shields <input type="checkbox"/> Other: _____	
<input type="checkbox"/> General Safety: physical hazards from equipment, process, or material	<input type="checkbox"/> Foot injury: equipment/object that can fall or roll onto feet <input type="checkbox"/> Impact or penetration to eye, face, head, body, or soles of feet <input type="checkbox"/> Electrical contact	<input type="checkbox"/> Safety shoes <input type="checkbox"/> Other: _____ <input type="checkbox"/> Safety glasses <input type="checkbox"/> With side shields <input type="checkbox"/> Safety goggles <input type="checkbox"/> Face shield <input type="checkbox"/> Safety shoes <input type="checkbox"/> Hard hat <input type="checkbox"/> Cut resistant gloves <input type="checkbox"/> Coveralls <input type="checkbox"/> Other: _____	
	<input type="checkbox"/> Other: extreme heat or cold	<input type="checkbox"/> Thermal gloves <input type="checkbox"/> Face shield <input type="checkbox"/> Thermal clothing <input type="checkbox"/> Safety glasses <input type="checkbox"/> Barrier/shield <input type="checkbox"/> Other: _____	
Other:			

Hepatitis B Vaccination Request/Declination Form

Employee Name: _____

Employee Email: _____

As an employee of [Entity], I understand that and hereby acknowledge that I have received Bloodborne Pathogens Training and am being offered participation in the hepatitis B series immunization which is wholly voluntary. I have been offered the hepatitis B series at no cost to myself.

Check the applicable statement below:

- ☐ I decline participation in the hepatitis B series of vaccinations. I understand that due to my occupational exposure to blood and other potentially infectious materials I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been given an opportunity to be vaccinated with the hepatitis B vaccine at no charge to myself. However, I decline the hepatitis B vaccine 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 the hepatitis B vaccine, I can receive the vaccination series at no cost to me.
- ☐ I desire to be inoculated for hepatitis B.

You must complete the following section regardless of whether you decline or accept vaccination.

Job Title: _____

Department: _____

Supervisor's Name: _____

Please sign and date to indicate that the information on this form is accurate.

Signature: _____

Date: _____

Bloodborne Pathogen Incident Exposure Form

In the event of an incident involving the exposure of a staff person, student and/or infant/toddler to blood or other potentially infectious materials, this form, as required by the Occupational Safety and Health Administration (OSHA), shall be completed as soon as possible. The information collected below is intended to assist with evaluating the control methods used and with preventing future exposures.

Name of Person(s) Exposed: _____

Location: _____

Incident Date: _____ **Time:** _____

Incident: Mark in each column, as appropriate:

Exposure:

☐ Blood

☐ Other Body Fluids

Specify: _____

Was blood seen in body fluid?

Yes ____ No ____

☐ Infectious Material

Specify: _____

☐ Other _____

Injury Type/Exposure Route:

☐ Abrasion

☐ Laceration

☐ Puncture

☐ Mucous Membrane

☐ Human Bite

☐ Other _____

Body Part Injured:

☐ Finger

☐ Hand

☐ Arm

☐ Eye

☐ Other: _____

Description of Incident: _____

Protective equipment in use at time of incident:

☐ Gloves

☐ Protective Sleeves

☐ Other: _____

☐ Goggles

☐ Lab Coat

☐ Face Mask/shield

☐ Gown

Referred to: _____

☐ No Medical Treatment sought

☐ Emergency Treatment Center

“Universal Precautions, Infection Control and Post-Exposure Management”:

____ All staff are trained and familiar with policy. - or - Number of staff not currently trained: ____

Engineering controls in place at the time of the exposure incident:

The term "engineering controls" includes all control measures that isolate or remove a hazard from the workplace, encompassing not only sharps with engineered sharps injury protections and needleless systems but also other medical devices designed to reduce the risk of percutaneous exposure to bloodborne pathogens. Examples include blunt suture needles and plastic or mylar-wrapped glass capillary tubes, as well as controls that are not medical devices, such as sharps disposal containers and biosafety cabinets.

The work practices and protective equipment or clothing used at the time of the exposure incident:

Notation of any "failures to control" at the time of the exposure incident:

What changes need to be made to prevent reoccurrence?

Report prepared by: _____

Date: _____

Position: _____