



**SANTA BARBARA COUNTY EDUCATION OFFICE**  
**INJURY AND ILLNESS PREVENTION PROGRAM**

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## **SECTION A POLICY**

The personal safety of each County Education Office employee while in the performance of the employee's work activity is of primary importance to the County Education Office. The prevention of occupationally induced injuries or illnesses will be accomplished through an Injury & Illness Prevention Program at each County Education Office site. This program will ensure, to the greatest extent possible, compliance with both legal requirements and the highest standards of safe work practice. The success of this program is to be achieved through the continuous mutual cooperation and support of management and employees.

### **1.0 General**

- 1.1. This Injury and Illness Prevention Program includes the following elements: management support; identification, evaluation, and control of safety hazards; employee and management education; routine inspections; accident investigation and analysis; record keeping; and routine safety meetings.
- 1.2. Management support and participation in all elements of the Injury & Illness Prevention Program important. The supervisor is the key person to implement and enforce this program.
- 1.3. Identification, evaluation, and control of safety hazards. The County Education Office has conducted a comprehensive safety and health audit to identify and evaluate job hazards.

### **2.0 Audit Activities**

- 2.1. Review of safety orders and other regulations. The County Education Office has reviewed safety orders, regulations, and industry standards applicable to the processes, equipment, materials, and procedures used at each County Education Office worksite in order to evaluate whether hazards are present.
- 2.2. Review of internal records and information. The County Education Office has reviewed internal records of accidents, injuries, occupational illnesses, near-miss incidents, and safety violations to detect relationships between job hazards and recorded mishaps.
- 2.3. Review of outside sources. The County Education Office has reviewed state and federal accident and illness statistics, highlighting areas that may uncover hazards in this organization. The statistics that were reviewed are filed in the SIPE Safety Office.
- 2.4. Job hazard analyses. The County Education Office has made analyses of representative jobs to determine what hazards exist in connection with the procedures, processes, materials, and equipment used to perform them. The results of these analyses were recorded in writing, and the records are filed in the Human Resources Department.
- 2.5. Inspection. The County Education Office has a program of regularly scheduled inspections. Inspections are conducted using checklists designed to uncover job hazards. Inspection records are retained for three years and are stored in the Human Resources Department.



- 2.6. Employee reporting. Employees are instructed to report any and all safety hazards which they may observe or become aware of. The County Education Office uses a specified hazard reporting form, SIPE Form 2-588. However, employees may report hazards by any available method. Oral reports are recorded in writing by supervisors. Reports may be submitted anonymously, at the employee's option. The County Education Office advises all employees that it invites reports of hazards and pledges to take no disciplinary action against any employee as a result of the employee's submission of a hazard report. Employees may submit hazard reports to their supervisor or directly to the Safety Committee. Supervisors are directed to route all hazard reports to the Safety Committee.
  
- 2.7. Accident investigation. Each accident is investigated by a supervisor or manager. Accident investigation and analysis including interviews with the injured employee and, as necessary, witnesses to an accident, will be conducted on all accidents using SIPE Form 6-588 to identify the causes and recommend corrective measures. Accident reports shall be completed within 48 hours from the time the accident was first reported. Accident investigation reports are forwarded to the Safety Committee for recommendations as to corrective action. Recommendations for corrective action are entered in the minutes of the Safety Committee meeting, along with the name of the person assigned to make the corrections. A copy of the minutes is forwarded to the person so assigned. Employee and management education will be conducted to instruct and certify workers in safe work practices and use of Personal Protective Equipment (PPE), to advise on reporting of unsafe conditions; to inform employees of potential job hazards; and to communicate the enforcement actions that will follow violations of any safety rule or procedure.

### 3.0 Inspections

- 3.1. Routine inspections will be performed both to assure that existing safety equipment, conditions, housekeeping, and work practices are in compliance with applicable laws and to identify additional unsafe conditions and acts. Recommendations on correction of problems will be made by qualified personnel, and a final correction date will be established.
  - 3.1.1. The SIPE Safety Officer will perform an annual safety inspection at all County Education Office workplaces.
  - 3.1.2. Safety evaluations performed by the SIPE Safety Officer will be submitted to the County Education Office in a draft for review and approval before it is submitted in final form. The County Education Office has 30 days to reply with their action on open safety deficiencies.
  - 3.1.3. Record Keeping
    - 3.1.3.1. Completion and posting of forms as required by applicable state and federal OSHA regulations.
    - 3.1.3.2. Completion of forms and records for insurance purposes.



- 3.1.3.3. Documentation of all activities relating to the implementation of the Injury & Illness Prevention Program, such as safety meetings, employee training, job safety analyses, safe work procedures, issuance of PPE, and accident investigations. SIPE Form 1-588 will be used to document employee safety training. Online safety training will be recorded using the online database.
- 3.1.3.4. Maintenance of statistics on incidence/severity rates of OSHA-recordable injuries and illnesses will be provided by Workers' Compensation Administrators or the SIPE Safety Office at least monthly. This report will be briefed to the SIPE Board and filed in the SIPE Safety Office.
- 3.1.3.5. OSHA Form 300, *Log and Summary of Occupational Injuries and Illnesses*, will be completed and posted in a conspicuous location from February 1 to March 1. Completed OSHA Form 300s will be kept on file for 5 years. The County Education Office will use the supplementary record of Occupational Injuries and Illnesses, OSHA Form 301 or SIPE Form 6-588, *Employee and Supervisor Review of Industrial Injury/Illness Report*.

#### 4.0 Correction of Job Hazards

- 4.1. With regard to hazards that are uncovered by periodic inspections, reported by employees, or discovered as a result of an accident, the person receiving initial notice of the hazard, whether an inspector, manager, or Safety Committee member, is required to record the name of the person assigned responsibility for correction on the form on which the hazard is recorded and to forward copies of any such recommendations to all persons so named. All recommendations are followed up within a time limit established by the committee, supervisor, or inspector. Any failure of the person assigned the responsibility for correction to take corrective action within the established time limit is reported immediately to the responsible person's supervisor.
- 4.2. Completed inspection checklists, employee hazard reports, and accident investigation reports remain open before the Safety Committee and are not filed away until all corrective measures have been completed and documented.
- 4.3. In the case of imminent hazards that cannot be corrected safely without exposing employees to danger, supervisory personnel are instructed to evacuate all non-essential personnel from the area of the hazard until such corrective measures have been completed as to render the area safe.

#### 5.0 Responsibilities

- 5.1. The County Education Office Safety Coordinator shall be responsible for supervising the Injury & Illness Prevention Program and for notifying the SIPE Safety Officer regarding any state or federal inspection related to occupational health and safety and its outcome, and to notify Workers Compensation Administrators and Cal/OSHA of any occupational fatality or serious injury or illness immediately.



- 5.2. Designated representatives will serve on the County Education Office Safety Committee, which shall meet quarterly. This committee shall encourage employee participation in all aspects of safety, monitor the effectiveness of the Injury & Illness Prevention Program, and maintain minutes of its proceedings.
  - 5.3. All supervisors shall be responsible for the success of the Injury & Illness Prevention Program. This includes assuring compliance with all applicable safety practices and procedures by all employees, students, and by any non-employee visiting or working in a County Education Office facility.
  - 5.4. Each County Education Office employee, as a condition of employment, shall comply with all applicable safety practices and procedures in accordance with instruction and training received and are subject to discipline for noncompliance. Discipline shall be consistent with County Education Office board policy, Personnel Commission rules, and/or collective bargaining agreements including, but not limited, to:
    - 5.4.1. Verbal counseling
    - 5.4.2. Written warning
    - 5.4.3. Written reprimand
    - 5.4.4. Suspension without pay
    - 5.4.5. Termination
  - 5.5. The County Education Office Safety Coordinator, under the direction of the County Superintendent of Schools or designee, shall provide all elements of the County Education Office with the technical assistance and information required in implementing the Injury & Illness Prevention Program and will audit County Education Office elements periodically and report to the County Superintendent of Schools on safety deficiencies and accomplishments.
- 6.0 Safety Committee
- 6.1. As a minimum, participants in the Safety Committee shall be a representative from the following divisions; human resources, administrative services, special education, and a representative from each department.
  - 6.2. Functions
    - 6.2.1. Develop safety policies and recommend their adoption by management.
    - 6.2.2. Identify unsafe work practices and conditions and suggest appropriate recommendations.
    - 6.2.3. Develop and implement an effective safety training program.
    - 6.2.4. Encourage feedback from all levels of employees in all areas of the County Education



Office with regard to problems, ideas, and solutions related to safety.

- 6.2.5. Engage in accident investigations and develop recommendations.
- 6.2.6. Develop and recommend adoption of appropriate safety programs to supplement a general program, e.g., a specific housekeeping program, fire prevention program, protective clothing program.
- 6.2.7. Keep everyone in the County Education Office informed about new safety policies, training programs, accident causation, and other safety related matters.
- 6.2.8. Identify safety-related problems that seem to be recurring and develop appropriate preventative measures.
- 6.2.9. Maintain meeting minutes that are disseminated to all affected employees and retained for one year.

## 7.0 OSHA Inspection Protocol

- 7.1. When an OSHA inspector arrives on site, the County Education Office Safety Coordinator or designee shall:
  - 7.1.1. Greet the inspector with courtesy.
  - 7.1.2. Determine the purpose of the inspector's visit.
  - 7.1.3. Contact the responsible supervisor, the safety coordinator, and the division lead.
  - 7.1.4. Provide the documentation requested and accompany the inspector on the walkthrough.
  - 7.1.5. Request that the inspector conduct a post conference with appropriate site staff.
  - 7.1.6. The County Education Office representative may contact the SIPE Safety Office for direction or questions related to an OSHA inspection.



## **SECTION B SAFETY TRAINING**

- 1.0 General Training includes safe work practices and procedures that most employees would use during the course of their work.
  - 1.1. Correct lifting procedures
  - 1.2. Use of PPE, if applicable
  - 1.3. Knowledge of exits and emergency procedures
  - 1.4. Good housekeeping
  - 1.5. Fire protection procedures
  - 1.6. Evacuation
  - 1.7. Handling of flammables and toxic materials
  - 1.8. Hazardous communication
- 2.0 Specific Instruction Training includes safe work practices in certain job classifications
  - 2.1. Proper use and adjustment of machine guards
  - 2.2. Ladders and fall protection
  - 2.3. Power and hand tool safety
  - 2.4. Welding/cutting safety
  - 2.5. Bloodborne pathogens
  - 2.6. Electrical safety
  - 2.7. Confined space
- 3.0 Specialized Safety Training and Certification
  - 3.1. Respiratory Protection
    - 3.1.1. Employees shall be instructed in the need, use, sanitary care, and limitations of such respiratory equipment that any employee may have occasion to use.
    - 3.1.2. Respirators shall be inspected before each use and shall not be worn when conditions prevent a good gas-tight face seal.
    - 3.1.3. Every respirator wearer shall be instructed in how to properly fit and test respiratory



equipment and how to check the face piece fit and shall be provided the opportunity to wear respiratory equipment in normal air for an adequate familiarity period, and to wear it in a test atmosphere (such as generated by smoke tubes or odor of banana oil).

- 3.1.4. County Education Office representatives will contact the SIPE Safety Officer for training and a fit test.
- 3.1.5. All employees required to use respiratory protection will be fit tested annually.
- 3.1.6. Employees must show proof of a medical physical prior to the fit test.
- 3.1.7. The County Education Office Respiratory Protection Program is located in Section N.

### 3.2. Confined Space

- 3.2.1. The County Education Office will implement the provisions of this section before any employee is permitted to enter a confined space.
- 3.2.2. Confined space training will be conducted annually.
- 3.2.3. Written, understandable operating and rescue procedures shall be developed and shall be provided to affected employees.
- 3.2.4. Operating procedures shall conform to the applicable requirements of this article and shall include provision for the surveillance of the surrounding area to avoid hazards such as drifting vapors from tanks, piping, and sewers.
- 3.2.5. Employees, including standby persons working in a confined space, shall be trained in the operating and rescue procedures, including instruction as to the hazards they may encounter.
- 3.2.6. At least one person trained in First Aid and CPR shall be immediately available whenever the use of respiratory protective equipment is in a confined space operation.
- 3.2.7. The SIPE Safety Officer will be contacted prior to all confined space entry.

### 3.3. Hazard Communication Employee Training (See Section I)

### 3.4. General Noise Control Training Program

- 3.4.1. The SIPE Safety Office shall institute a training program for all employees who are exposed to noise at or above an 8-hour time weighted average of 85 DBA and shall ensure employee participation in such programs.
- 3.4.2. The training program shall be repeated annually for each employee included in the hearing conservation program. Information provided in the training program shall be updated to be consistent with changes in protective equipment and work processes.





3.4.3. The training program shall ensure that each employee is informed of the following:

3.4.3.1. The effects of noise on hearing;

3.4.3.2. The purpose of hearing protectors, the advantages, disadvantages, and attenuation of various types, and instruction on selection, fitting, use, and care;

3.4.3.3. The purpose of audiometric testing and explanation of the test procedures.

### 3.5. Fire Training and Education

3.5.1. Where the County Education Office has provided portable fire extinguishers for employee use in the workplace, the County Education Office shall also provide an educational program to familiarize employees with the general principles of fire extinguisher use and the hazards involved with incipient stage firefighting.

3.5.2. Portable fire extinguishers will be inspected monthly and inspection cards signed.

3.5.3. The County Education Office shall provide the fire prevention training upon initial employment and at least annually thereafter.

### 3.6. Emergency Action Plan

3.6.1. Before implementing the Emergency Action Plan, the County Education Office Safety Coordinator shall designate and train a sufficient number of persons to assist in the safe and orderly emergency evacuation of employees.

3.6.2. The County Education Office Safety Coordinator shall advise each employee of their responsibility under the plan at the following times:

3.6.2.1. Initially when the plan is developed;

3.6.2.2. Whenever the employee's responsibilities or designated action under the plan change;

3.6.2.3. Whenever the plan is changed.

3.6.3. The County Education Office Safety Coordinator shall review with each employee, upon initial assignment, those parts of the plan which the employee must know to protect the employee in the event of an emergency.

### 3.7. Fire Prevention Plan

3.7.1. The County Education Office Safety Coordinator shall provide training to applicable employees on fire hazards of the materials and processes to which they are exposed. They shall also review with each employee upon initial assignment, those parts of the fire prevention plan which the employee must know to protect the County Education Office



in the event of an emergency.

### 3.8. Agriculture Operations

#### 3.8.1. Pesticide and Antimicrobial Training

- 3.8.1.1. The County Education Office shall provide to each employee working with any pesticide adequate instruction and training so that the employee understands the safety procedures required for the pesticides with which the employee will work.
- 3.8.1.2. Training will be conducted upon the employee's initial assignment and annually thereafter.
- 3.8.1.3. Pesticide Usage Log, SIPE Form 7-588, will be used to record all pesticide usage at County Education Office sites.

#### 3.8.2. Operation of Agricultural Equipment

- 3.8.2.1. At the time of initial assignment and at least annually thereafter, the County Education Office shall instruct every employee in the safe operation and servicing of all equipment with which the employee is or will be involved.

#### 3.8.3. Powered Industrial Trucks (Forklift) Training/Certification

- 3.8.3.1. Only drivers authorized by the County Education Office and trained in the safe operations of industrial trucks or industrial tow tractors shall be permitted to operate such equipment.
- 3.8.3.2. Training and certification shall be conducted to meet Cal/OSHA requirements.
- 3.8.3.3. The County Education Office will contact the SIPE Safety Office for forklift, backhoe, and aerial lift training.
- 3.8.3.4. Forklift, backhoe, and aerial lift training will consist of two hours of classroom instruction and a two-hour operational and proficiency training.
- 3.8.3.5. Upon completion, employees will be able to:
  - 3.8.3.5.1. Know the operator training definition for NIOSH and OSHA.
  - 3.8.3.5.2. Know the skills required for safe operation, including those involved in the pre-start safety inspection, general operating, and material handling.
  - 3.8.3.5.3. Establish efficient preventive maintenance, recharging, and refueling procedures.



- 3.8.3.5.4. Evaluate safe pedestrian and lift truck patterns.
- 3.8.3.5.5. Understand fire safety in terms of hazardous atmosphere conditions.

3.8.3.6. A completion certificate to operate will be issued to those employees who successfully complete the training course.

- 3.8.3.6.1. The certificate will have an expiration date three years from the date of training.
- 3.8.3.6.2. Employees involved in a forklift, backhoe or aerial lift mishap, or when recommended by their supervisor, shall be required to attend a recertification training program.
- 3.8.3.6.3. Training will be conducted by the SIPE Safety Officer using the Ives Training & Compliance Group training program.

### 3.9. Specific employee training

- 3.9.1. Employees will be trained in what they need to know to be safe.
- 3.9.2. All employees shall be trained in general safety principles.
- 3.9.3. Employees who face specific job hazards shall be trained about those hazards.
- 3.9.4. Supervisors shall be trained in all hazards faced by their employees, as well as in the techniques of training employees.

### 3.10. Training Records

- 3.10.1. SIPE Form 1-588 will be used to document employee safety training.
- 3.10.2. Online safety training may use web data base to record training.
- 3.10.3. SIPE Form 10-588 will be used to document supervisors' safety training.
- 3.10.4. Employee health and safety training records will be retained for three years.



**SECTION C**  
**EMPLOYEE INJURY/ILLNESS REPORTING PROCEDURE**

The County Education Office contracts with a third-party administrator, Workers' Compensation Administrators (WCA) to manage all claims.

- 1.0 If medical treatment is needed, injured employees are referred to Occupational Medicine Offices listed below:

**North County**

Central Coast Industrial Care	805.614.9000	340 E. Betteravia Road., Suite. A, Santa Maria
Family & Industrial Medical Center	805.542.9596	47 Santa Rosa Street, San Luis Obispo
Industrial Medical Group	805.922.8282	3070 Skyway Drive, Santa Maria
Med Plus Medical Center	805.474.8450	877 N. Oak Park Blvd, Pismo Beach
MedPost Urgent Care	805.226.4222	500 First Street, Paso Robles
MedStop Urgent Care	805.549.8162	283 Madonna Road, Suite B, SLO
Sansum Clinic	805.737.8740	1225 North H Street, Lompoc
West Side Urgent Care	661.765.1935	100 E. North Street, Taft

**South County**

Sansum Clinic	805.898.3311	101 South Patterson Avenue
Sansum Clinic	805.566.5000	4806 Carpinteria Avenue, C

- 2.0 The Human Resources Department will complete *Employee's Claim for Workers Compensation Benefits Form 1* and *Employer's Report of Occupational Injury or Illness*.
- 3.0 The *Claim for Workers Compensation Benefits Form 1* shall be submitted within 24 hours after an injury. The Human Resources Department will then forward two copies to WCA.
- 4.0 The Human Resources Department shall complete SIPE Form 6-588, *Employee and Supervisor Report of Industrial Injury/Illness* and forward a copy to the SIPE Safety Office.
- 5.0 The Human Resources Department will notify the Payroll Department each time an employee leaves work and returns to work as a result of a job injury.
- 6.0 Correspondence or bills relating to injuries are sent to:



Workers' Compensation Administrators  
265 East Donovan  
Santa Maria, CA 93458  
(805) 922-9157

7.0 Injured employees may contact WCA if they need assistance or have questions.



## SECTION D EMPLOYEE INJURY/ILLNESS RECORD KEEPING

If one or more employee suffers an occupational related injury or illness, certain forms and records shall be retained. If a death or serious injury or illness occurs, a report shall be submitted promptly to Cal/OSHA.

- 1.0 Record keeping requirements for injuries and illness. If an employee suffers an occupational injury or illness, the following forms must be completed:
  - 1.1. The *Employee's Claim for Workers Compensation Benefits*, DWC Form 1
  - 1.2. The *Employer's First Report of Occupational Injury or Illness*, DLSR Form 5020, Rev. 5
  - 1.3. The *Doctor's First Report of Occupational Injury or Illness*, DLSR Form 5021
  - 1.4. *Log and Summary of Occupational Injuries and Illnesses*, OSHA Log 300
  - 1.5. SIPE Form 6-588, *Employee and Supervisor Report of Industrial Injury/Exposure Report*
- 2.0 Employee's Claim Form
  - 2.1. The County Education Office shall provide an *Employee's Claim for Workers Compensation Benefits* to an employee who has suffered an occupational injury or illness.
  - 2.2. The County Education Office shall provide this form to the employee within 24 hours of learning of the injury or illness. There is no time limit as to when the employee must return the form to the County Education Office.
  - 2.3. The County Education Office shall record the time and date of learning of the injury or the onset of illness. The Office will also document when the *Employee's Claim for Workers Compensation Benefits* form was provided or why the form was not provided.
  - 2.4. The County Education Office will date this form and provide copies to WCA and the employee, dependent, or representative who filed the claim within one working day after receiving the completed form from the employee.
  - 2.5. If the employee is available but will be unaware of presence of the form (for example, the employee is unconscious), the County Education Office will leave the form with a representative of the employee and will keep a record of such events.
- 3.0 Employer's First Report
  - 3.1. The County Education Office will complete the *Employer's First Report of Occupational Injury or Illness* when an employee suffers an occupational injury or illness if:
    - 3.1.1. The occupational injury or illness requires medical treatment beyond First Aid. First Aid is defined as any one-time treatment of minor scratches, cuts, burns, splinters, and so



forth, which does not require the services of a physician.

- 3.1.2. The occupational injury or illness results in lost time, which is defined as absence from work for a full day or shift beyond the date of injury or illness.
  - 3.2. The County Education Office will not file an *Employer's First Report* if:
    - 3.2.1. The occupational injury or illness results only in First Aid treatment; or
    - 3.2.2. There is no lost time.
  - 3.3. The report will be filed with WCA within five calendar days after the injury or illness has been reported to the County Education Office.
  - 3.4. The County Education Office recognizes that the primary intent of the document is to gather statistics for research by the state of California, but that it is not privileged and is available to all parties in litigation.
  - 3.5. The County Education Office will ensure the accuracy of the report, keep in mind its availability in litigation, and exercise care in accumulating and recording the information necessary to complete the form. Specifically, unless an accident investigation has been completed within five days of learning of the injury or onset of the illness, and the actions of the injured employee and the cause of the accident (or exposure) have been determined, the Office may state in paragraphs 16 and 17 of the *Employer's First* that the information called for is unavailable and/or uncertain. Follow-up information may always be provided.
  - 3.6. The County Education Office will retain a copy of the *Employer's First* for the employee's duration of employment or five years, whichever is less.
- 4.0 Doctor's First Report
- 4.1. If an employee is sent to a physician, it is the responsibility of the attending physician to complete the *Doctor's First Report of Occupational Injury or Illness*, the "*Doctor's First*," or employee evaluation and treatment summary.
  - 4.2. A treating physician must complete a *Doctor's First* on all occasions, regardless of whether medical treatment or First Aid is rendered to the employee. The report must be completed within five days after initial examination.
  - 4.3. The attending physician is responsible for providing the original of the Doctor's First to WCA, and WCA is responsible for forwarding a copy of the report to the Division of Labor Statistics and Research.
  - 4.4. Unlike the *Employer's First*, which the insurance carrier must send to the Division of Labor Statistics and Research immediately upon receipt, the *Doctor's First* must be sent to the Division of Labor Statistics within five days after the insurance carrier receives it.



- 4.5. The physician has the option of transmitting the information to the agency on an approved computer input media, as long as the data is acceptable and compatible with computer equipment of the Division of Labor Statistics and Research.
  - 4.6. If the attending physician treats the employee for pesticide poisoning or a condition suspected to be pesticide poisoning, the physician must file a *Doctor's First* directly with Division of Labor Statistics and Research within five days of initial treatment. This report is in addition to the report the physician files with the County Education Office or with WCA.
  - 4.7. Since the *Doctor's First* is characterized as an employee's medical record, the County Education Office will maintain that record with the other medical records of the employee and separate from their personnel records to ensure privacy of the medical records.
  - 4.8. The *Doctor's First* form is characterized as confidential in accordance with the Medical Information Act, which includes provisions for both civil and criminal sanctions if the County Education Office does not maintain confidentiality of the type of information included on *Doctor's First*.
  - 4.9. The physician often will determine whether treatment is to be characterized as medical treatment or First Aid. The categorization of the treatment often will determine whether the injury or illness is recordable for the purposes of the Cal/OSHA log and whether it must be reported on the *Employer's First*.
- 5.0 Completing and Posting the OSHA Log 300
- 5.1. If required, the County Education Office will complete the *Log and Summary of Occupational Injuries and Illnesses*, OSHA Log 300.
  - 5.2. A recordable occupational injury or illness is any occupational injury or illness that results in:
    - 5.2.1. Fatality.
    - 5.2.2. Lost workdays.
    - 5.2.3. Injuries or illnesses resulting in a transfer to another job or in termination of employment.
    - 5.2.4. Injuries or illnesses requiring medical treatment, other than First Aid.
    - 5.2.5. Injuries or illnesses that involve a loss of consciousness or restriction of work or motion.
    - 5.2.6. A diagnosed occupational illness reported to the County Education Office.
  - 5.3. First Aid is any one-time treatment and any follow-up visits for the purpose of observation of minor scratches, cuts, burns, splinters, etc. The fact that a physician provides the treatment does not change First Aid treatment to medical treatment.
  - 5.4. Medical treatment consists of treatment administered by a physician (or registered professional





personnel under standing orders of a physician) which is not First Aid.

- 5.5. The log is completed on a calendar year basis: January 1 through December 31. The entries on the log must be made as early as practicable but no later than six days after learning that a recordable entry has occurred.
- 5.6. The County Education Office has more than one establishment. The actual record keeping function will be done at a single location. Each entry will clearly identify the actual job site location of the injury and/or illness. A copy of the log will be kept in the Human Resources Department of the County Education Office.

#### 6.0 Annual Summary - OSHA Log 300

- 6.1. An annual summary of the log shall be completed within one month after the end of the calendar year for which the log was maintained.
- 6.2. The annual summary is not a separate document. It is the right portion of the OSHA Log 300, folded at the vertical line. The information for the summary is taken from the log or logs completed during the calendar year and will include:
  - 6.2.1. Calendar year covered.
  - 6.2.2. County Education Office site name.
  - 6.2.3. Establishment site name.
  - 6.2.4. Establishment site address.
  - 6.2.5. A certification signature, title, and date.
  - 6.2.6. Columns in the form shall be totaled as follows:
    - 6.2.6.1. Add number of entries in columns 1 and 8.
    - 6.2.6.2. Add number of checks in columns 2, 3, 6, 7, 9, 10, and 13.
    - 6.2.6.3. Add number of days in columns 4, 5, 11 and 12.
  - 6.2.7. Yearly totals for each column 1-13 are required for posting. Running or page totals may be generated at the discretion of the County Education Office.
- 6.3. The County Education Office Safety Coordinator will certify the accuracy of the log and summary.
- 6.4. Each year, from February 1 to March 1, the summary covering the previous calendar year will be posted in a conspicuous place where notices to employees are customarily posted.
- 6.5. If no injuries or illnesses occurred during the year, the annual summary will still be completed and posted although all of the "total" lines at the bottom of the log would be zero.



- 6.6. The log and annual summary will be retained for five years following the end of the year to which they relate.
- 6.7. The log and annual summary will be available for inspection and copying by representatives of Cal/OSHA and other specifically designated agencies. The log and annual summary shall also be available to any employee, former employee, or their representatives.

## 7.0 Reporting a Death or Serious Injury

- 7.1. California regulations require an employer to submit a report to the nearest Cal/OSHA district office if any of the following occurs:
  - 7.1.1. An employee is seriously injured on the job or in connection with the job.
  - 7.1.2. An employee suffers a serious job-related illness.
  - 7.1.3. An employee dies on the job or in connection with it.
- 7.2. An injury or illness is defined as "serious" if:
  - 7.2.1. The employee is hospitalized for more than 24 hours for reasons other than medical observation; or
  - 7.2.2. An employee loses any part of the body or suffers permanent disfigurement.
- 7.3. The County Education Office will make the report as soon as practically possible, but not longer than 24 hours after the Office knows or, with diligent inquiry, could have known of the death, serious illness or injury.
- 7.4. The County Education Office will make the report by telephone or telegraph or fax to:

Cal/OSHA  
1000 Hill Road, Suite 110  
Ventura, CA 93003  
(805) 654-4581  
Fax: (805) 654-4852

- 7.5. The report shall include the following:
  - 7.5.1. Time and date of the accident.
  - 7.5.2. Employer's name, address and telephone number.
  - 7.5.3. Name and job title of the person reporting the accident.
  - 7.5.4. Address where the accident or event occurred.
  - 7.5.5. Name of person to contact at the accident site.



- 7.5.6. Name and address of the injured employee(s).
- 7.5.7. Name of injury(ies).
- 7.5.8. Location where the injured employee(s) was/were moved.
- 7.5.9. List and identify any law enforcement agents present at the site of the accident.
- 7.5.10. Description of the accident and whether the accident scene or any of the equipment or machinery has been altered.

7.6. The County Education Office shall not report an injury or illness caused by an accident on a public street or highway or an injury, illness or death resulting from a crime.

#### 8.0 Employee and Supervisor Industrial Injury/Exposure Report

- 8.1. The County Education Office will ensure that the employee completes and signs the employee's report section.
- 8.2. The employee's supervisor will complete and sign the supervisor's review section.
- 8.3. Safety Committee review section is optional. The Safety Coordinator shall then sign and forward one copy to Workers' Compensation Administrators and one copy to the SIPE Safety Office.
- 8.4. All injuries will be reported within 24 hours no matter how trivial.

#### 9.0 Workers' Compensation Administrators (WCA)

- 9.1. The County Safety Coordinator and injured employees shall contact WCA if they have any questions or need assistance.
- 9.2. Correspondence or bills relating to injuries shall be sent to:

Workers' Compensation Administrators  
265 East Donovan  
Santa Maria, CA 93458  
(805) 922-9157

- 9.3. All requests for information about employee injuries shall be referred to Workers' Compensation Administrators.



## SECTION E RETURN-TO-WORK PROGRAM

The most significant costs to an employer for worker's compensation claims are associated with lost time injuries. A return-to-work program operates on the premise that costs, including litigation, will be reduced if the employee returns to the workplace as soon as possible.

- 1.0 Early Intervention. The County Education Office will implement a program of early intervention, including:
  - 1.1. Building the goal of return to work into medical diagnosis and treatment.
  - 1.2. Working with rehabilitation professionals on job analysis and prevention.
  - 1.3. Looking for light-duty or alternate-duty jobs that an employee can perform before they are back to full strength.
  - 1.4. Making supervisors aware of the importance of helping the employee return to productive work and developing a re-entry process that will make that possible.
  - 1.5. Communicating continually with the employee from the first day of injury/illness to emphasize the expectation that the employee will return to work and that the County Education Office will work closely with the employee to realize that goal.
  
- 2.0 Operating Procedures
  - 2.1. A copy of the *Employee and Supervisor Report of Industrial Injury/Illness* (SIPE Form 6-588) is completed and processed immediately after an employee is injured. The claim process is started.
  - 2.2. The employee is sent for medical treatment at an approved provider facility. The medical facility will be informed by WCA that the County Education Office has a return-to-work program. The County Education Office will provide to the physician a copy of the injured employee's job description to enable the physician to make a proper evaluation regarding return to work restrictions.
  - 2.3. After receiving medical treatment, the employee reports back to his worksite with the physician's report and work restrictions. The County Education Office or WCA may contact the physician's office to clarify any uncertainties.
  - 2.4. Every effort will be made by the County Education Office to temporarily accommodate a return-to-work employee. First priority will be to assign the employee to their same work unit and same job.
  - 2.5. If appropriate tasks cannot be found within the same work unit, the employee may be placed in another work unit within the County Education Office.
  - 2.6. If the employee refuses the work in the modified work program, it may jeopardize their rights to



temporary disability benefits or industrial accident leave benefits. Sick leave or other forms of leave will be subject to approval by the Human Resources Department.

- 2.7. The County Education Office and WCA will evaluate the employee's status on a continuous basis. Communication shall be maintained with the physician to ensure a return to full-work status as soon as possible.
  - 2.8. If the physician states that the employee should not return to work for a specified time, the County Education Office shall follow-up with the physician to confirm the determination. The County Education Office shall also remain in contact with the physician to follow up on the possibility of modified duty at a later date.
- 3.0 The return-to-work program is intended to be a means of maintaining employees in the workplace. It is not to establish new jobs or to displace other employees. It is a means the County Education Office can utilize for tasks which there currently isn't time to do or which normally would not be done because of lack of time, manpower, funds, etc.

Any assignment that keeps the employee in the workplace rather than at home will benefit both the County Education Office and the employee.



## SECTION F EYE AND FACE PROTECTION

- 1.0 The County Education Office will ensure that eye and face protection are provided for students, employees, and visitors when participating in activity or the use of hazardous substances likely to cause injury to the eyes or face.
- 2.0 Activity or hazardous substances likely to cause injury to the eyes/face are, but not necessarily limited, to the following:
  - 2.1. Working with hot molten metal.
  - 2.2. Milling, sawing, turning, shaping, cutting, grinding, and stamping of any solid materials.
  - 2.3. Heat treating, tempering or kiln firing of any metal or other materials.
  - 2.4. Gas or electric arc welding.
  - 2.5. Repairing or servicing of any vehicles, or other machinery or equipment.
  - 2.6. Working with hot liquids or solids, or with chemicals which are flammable, toxic, corrosive to living tissues, irritating, strongly sensitizing, radioactive, or which generate pressure through heat decomposition or other means.
  - 2.7. Exposure to injurious light rays.
  - 2.8. Exposure to radiant energy.
- 3.0 Where eye protection is required, and the students and employees require vision correction, such eye protection shall be provided as follows:
  - 3.1. Safety spectacles with suitably corrected lenses, or
  - 3.2. Safety goggles designed to fit over spectacles, or
  - 3.3. Protective goggles with corrective lenses mounted behind the protective lenses.
- 4.0 Eye and face protective devices shall be kept clean and in good repair.
- 5.0 The wearing of contact lenses is prohibited in working environments having harmful exposure to materials or light flashes, except when special precautionary procedures, which are medically approved, have been established for the protection of the exposed student and employee.
- 6.0 Suitable welding screens or shields isolating hazards from arc welding flash exposure shall be used to safeguard nearby students and employees.
- 7.0 Injury prevention signs shall be posted to warn of specific dangers or possible hazards to eye and face.





## SECTION G

### EXPOSURE CONTROL PLAN FOR BLOODBORNE PATHOGENS

#### 1.0 Purpose

1.1. The purpose of the bloodborne pathogens plan is to reduce occupational exposure to Hepatitis B Virus (HBV), Human Immunodeficiency Virus (HIV) and other bloodborne pathogens that employees may encounter in their workplace.

#### 2.0 County Education Office employees will follow good general principles when working with bloodborne pathogens. These include:

2.1. Minimization of occupational exposure to bloodborne pathogens.

2.2. Never underestimating the risk of exposure to bloodborne pathogens.

2.3. Use of PPE when required and when otherwise necessary to protect against exposure to bloodborne pathogens.

#### 3.0 Objective

3.1. To protect employees from the health hazards associated with bloodborne pathogens.

3.2. To provide appropriate treatment and counseling should an employee be exposed to bloodborne pathogens.

#### 4.0 Responsibilities

4.1. Department heads and Supervisors are responsible for exposure control in their respective departments.

4.2. Supervisors will be responsible for providing information and training to all employees who may be subject to occupational exposure. The SIPE Safety Officer will provide training assistance.

4.3. It is important that employees:

4.3.1. Know what tasks they perform that may have occupational exposure.

4.3.2. Attend training sessions to learn the appropriate procedures to avoid occupational exposure.

4.3.3. Plan and conduct all operations in accordance with work practice controls.

4.3.4. Develop good personal hygiene habits.

4.4. This exposure control plan will be accessible to all employees. Employees are advised of its availability during their education/training sessions.





5.0 This plan will be reviewed and updated under the following circumstances:

- 5.1. Annually, on or before June 30th of each year.
- 5.2. Whenever necessary to reflect new or modified tasks and procedures that affect occupational exposure.
- 5.3. Whenever necessary to reflect new or revised employee positions that affect occupational exposure.
- 5.4. To review incidents of exposure that occurred since the previous update.

6.0 Exposure Determination

6.1. "Occupational exposure" means reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or Other Potentially Infectious Materials (OPIM) that may result from the performance of an employee's duties.

6.2. Primary Exposure - Category A

6.2.1. Employees in the primary exposure category are reasonably anticipated to incur an occupational exposure to blood or OPIM during the performance of their job duties. Primary exposure job classifications and associated tasks in which occupational exposure may occur include all positions providing instruction or assistance to students in Special Education, Juvenile Court and Community Schools, and Child Development.

6.2.2. Employees in this category:

- 6.2.2.1. will receive specialized training annually,
- 6.2.2.2. will be offered the Hepatitis B vaccination series, and
- 6.2.2.3. will be provided with post-exposure evaluation and follow-up in the case of an exposure incident.

6.3. Secondary Exposure - Category B

6.3.1. Employees, including designated First-Aid responders or emergency response team members not covered by the primary exposure category, are considered secondary exposure. Employees in the secondary exposure category are not reasonably expected to incur exposure to blood or OPIM or procedures that would cause exposure during the performance of their job duties. However, employees in this category:

- 6.3.1.1. will be provided with awareness training about methods of preventing occupational exposure to infectious disease with emphasis on Hepatitis B and HIV.
- 6.3.1.2. will be provided with post-exposure medical evaluation and follow-up in the



case of an exposure incident.

6.4. This determination shall be made without regard to the use of PPE.

## 7.0 Methods of Compliance

7.1. Universal precautions. The County Education Office and its employees will treat all human blood and body fluids as if they are known to be infectious for HBV, HIV, and other bloodborne pathogens. Where it is difficult or impossible to differentiate between body fluid types, we assume all body fluids to be potentially infectious. All procedures involving blood or other body fluids shall be performed in such a manner as to minimize splashing, spraying, splattering, and generation of droplets of these substances.

### 7.2. Engineering Controls

7.2.1. Handwashing facilities or antiseptic hand cleansers and towels or antiseptic towelettes will be made readily accessible.

7.2.2. Mechanical means (dustpan, brush, tongs or forceps, etc.) will be readily accessible to all employees who have the potential for exposure.

7.2.3. First aid kits will be equipped with gloves, handwipes and CPR masks.

7.3. Work Practice Controls. In addition to engineering controls, the County Education Office uses a number of work practice controls to help eliminate or minimize employee exposure.

7.3.1. Supervisors are responsible for overseeing the implementation of work practice controls.

7.3.2. Each County Education Office site will adopt the following work practice controls as part of the compliance program.

7.3.2.1. Employees will wash their hands immediately, or as soon as possible after removal of potentially contaminated gloves or other PPE.

7.3.2.2. Following any contact of body areas with blood or any other infectious materials, employees will wash their hands and any other exposed skin with soap and water as soon as possible. They will flush exposed mucous membranes with water.

7.3.2.3. Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in work areas where there is a reasonable likelihood of occupational exposure.

7.3.2.4. Equipment that becomes contaminated will be examined prior to servicing or shipping and decontaminated as necessary.

7.3.2.5. When a new employee is hired or an employee changes jobs within the County Education Office, that employee will be trained in the tasks/procedures and



work practice controls pertaining to their new job classification.

7.3.2.6. Mouth pipetting/suctioning of blood or OPIM is prohibited.

7.4. PPE. Where there is potential for occupational exposure, the County Education Office shall provide, at no cost to the employee, the PPE needed to protect employees against such exposure.

7.4.1. PPE includes, but is not limited to gloves, safety glasses, goggles, face shields/masks, and respirators.

7.4.2. Supervisors are responsible for ensuring that all departments and work areas have appropriate PPE available to employees unless the employee temporarily and briefly declines to use PPE when it was the employee's professional judgement in the specific instance that the use of such equipment would have prevented the delivery of health care or public safety services or would have presented an increased hazard to the safety of the worker or co-worker. When the employee makes this judgement, the circumstances shall be investigated and documented in order to determine whether changes can be instituted to prevent such occurrences in the future.

7.4.3. All PPE will be inspected periodically and repaired or replaced as needed to maintain its effectiveness.

7.4.4. Reusable PPE will be cleaned, laundered and decontaminated as needed at no cost to the employee.

7.4.5. PPE that cannot, for whatever reason be decontaminated, will be disposed of in accordance with biohazard rules and regulations.

7.4.6. Any garments penetrated by blood or other infectious materials will be removed immediately, or as soon as feasible.

7.4.7. All potentially contaminated PPE is removed prior to leaving a work area.

7.4.8. Gloves are worn in the following circumstances:

7.4.8.1. Whenever employees anticipate hand contact with potentially infectious material.

7.4.8.2. When handling or touching contaminated items or surfaces.

7.4.8.3. Hypo-allergenic gloves, glove liners, powderless gloves, or other similar alternatives shall be readily accessible to those employees who are allergic to the gloves normally provided.

7.4.9. Sharps Precautions (for qualified staff only). Precautions shall be taken to prevent injuries caused by needles and other sharp instruments or devices used during nursing



procedures, when cleaning used instruments, during disposal of used needles, and when handling sharp instruments after procedures.

- 7.4.9.1. To prevent needle stick injuries, needles shall not be recapped, purposely bent or broken by hand, removed from disposable syringes, or otherwise manipulated by hand.
- 7.4.9.2. Shearing or breaking of contaminated needles is prohibited.
- 7.4.9.3. After use, disposable syringes and other sharp items shall immediately be placed in puncture-resistant containers for disposal. The containers shall be located as closely as practical to the use area, kept upright throughout use, replaced at least every year or when full and shall not be allowed to overfill. When a sharps container is full, the County Education Office will contact the SIPE Safety Office to arrange for collection.
- 7.4.9.4. Immediately, or as soon as possible after use, contaminated reusable sharps shall be placed in appropriate containers until properly reprocessed. These containers shall be puncture-resistant, labeled, leakproof on the sides and bottom, and constructed to not allow employees to reach by hand into them.
- 7.4.9.5. When moving containers of contaminated sharps from the area of use, the containers shall be closed immediately prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport, or shipping, and placed in a secondary container if leakage is possible.
- 7.4.9.6. The second container shall be closable, constructed to contain all contents and prevent leakage during handling, storage, transport, or shipping, appropriately labeled, and closed immediately prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport, or shipping.
- 7.4.9.7. Reusable containers shall not be opened, emptied, or cleaned manually or handled in any other manner which would expose employees to the risk of percutaneous injury.
- 7.4.9.8. Reusable sharps that are contaminated with blood or OPIM shall not be stored or processed in a manner that requires employees to reach by hand into the containers where these sharps have been placed.
- 7.4.10. CPR Precautions. To minimize the need for emergency mouth-to-mouth resuscitation, mouthpieces, resuscitation bags, pocket masks, or other ventilation devices shall be used. Such equipment shall be stored in all County Education Office health offices and First Aid kits.
- 7.4.11. Qualified Staff/First Aid Providers Precautions. Qualified staff/First Aid providers who



have exudative lesions or weeping dermatitis shall be examined as soon as possible. These employees shall refrain from all direct individual care and from handling individual care equipment until such examination occurs.

#### 7.5. Housekeeping

- 7.5.1. All equipment and surfaces will be cleaned and decontaminated after contact with blood or OPIM.
- 7.5.2. Protective coverings, such as plastic trash bags or wrap, aluminum foil or absorbent paper, used to cover equipment and environmental surfaces will be removed and replaced as soon as it is feasible when they have become contaminated.
- 7.5.3. All trash containers, pails, bins and other receptacles intended for reuse which have a reasonable likelihood for becoming contaminated with blood or OPIM shall be inspected and decontaminated on a regularly scheduled basis and cleaned and decontaminated immediately or as soon as feasible upon visible contamination. Trash containers will be lined with plastic liners.
- 7.5.4. Potentially contaminated broken glassware shall not be picked up directly by the hand but by using mechanical means (dustpan and brush, tongs, forceps, etc.)
- 7.5.5. Body fluids such as urine, feces, and vomit not contaminated with blood, can be disposed of using conventional methods.
- 7.5.6. Laundry
  - 7.5.6.1. Universal precautions as defined in Section 7.1 shall be observed with all laundry that is contaminated with body fluids, e.g., athletic clothing and diapers. Such laundry shall be stored in a leak-resistant container such as a plastic bag and labeled accordingly.
  - 7.5.6.2. Laundry support shall be provided by outside vendors utilizing bloodborne pathogen exposure control guidelines as outlined by Cal/OSHA.

#### 7.6. Disposal Procedures

- 7.6.1. Medical Regulated Waste:
  - 7.6.1.1. This category includes all of the following: liquid or semi-liquid blood or OPIM, contaminated items that would release blood or the aforementioned materials in a liquid or semi-liquid state if compressed, items that are caked with dried blood or OPIM and are capable of releasing these during handling, contaminated sharps, and pathological or microbiological wastes containing blood or OPIM.
  - 7.6.1.2. Regulated waste shall be segregated into two waste streams, sharps and non-

sharps.

- 7.6.1.3. Every effort shall be made to avoid generation of non-sharp regulated wastes. This can be accomplished by employing such techniques as cleaning up spills or excess body fluids with tissue paper rather than rags or cloth materials and thoroughly disinfecting spills to render them non-hazardous, followed by absorption with enough absorbent material to prevent the release of excess liquid or semi-liquid waste material.
- 7.6.1.4. Only solid objects shall be placed in sharps containers, such as syringes, lancets, blades, and the like. Glass slides and small vials containing blood samples shall be cleaned with running water into a sink connected to the sanitary sewer, followed by rinse with bleach and water (1:10). These containers will not be used for soft materials such as rags, tissue paper, or product wrappers.
- 7.6.1.5. All non-sharp regulated waste that cannot be sewer-disposed or rendered non-hazardous, must be placed in plastic bags inside secondary containers that are closable, constructed to contain all contents and prevent leakage during handling and storage. The bag must be red in color and both the bag and secondary container must be labeled "Infectious Waste" and include the official biohazard symbol.
- 7.6.1.6. All sites shall provide proper storage, handling, and transportation of biohazard/regulated waste with proper labels. School nurses or a designated person are responsible for contacting the SIPE Safety Office for sharps removal and non-sharp regulated waste.
- 7.6.1.7. Santa Maria Medical Waste Environmental Engineers, Inc. (MWEE) will be called when sharps containers are ready for disposal. MWEE will remove the full container and replace it with a new container. MWEE will provide SIPE Safety with appropriate hazardous material disposal manifest.
- 7.6.2. Non-Regulated Medical Waste: Waste such as disposables containing non-fluid blood, e.g., dressing, gauze, cotton roll, drapes with small amounts of dried blood or other body fluid, are not considered medical waste. Nevertheless, the County Education Office will discard non-medical waste in double lined plastic trash bags before disposal into trash bin. California Health and Safety Code, Chapter 6.1, Section 25015.

## 8.0 Training

- 8.1. Training shall be provided at the time of initial assignment to tasks where occupational exposure may take place and at least annually thereafter. Where tasks or procedures are modified or newly created, training may be limited to addressing the new exposures created.
- 8.2. Training records shall be maintained for 3 years from the date on which the training occurred.



- 8.3. All employees that may be subject to occupational exposure shall attend a training class within the first 10 days of employment or attend the SIPE training classes held every third Wednesday. These classes are scheduled by the County Education Office Human Resources Department.
- 8.4. Training shall include the following items:
  - 8.4.1. A general explanation of the epidemiology and symptoms of bloodborne diseases;
  - 8.4.2. An explanation of the modes of transmission of bloodborne pathogens.
  - 8.4.3. An explanation of the exposure control plan and the means by which the employee can obtain a copy of the written plan;
  - 8.4.4. An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure;
  - 8.4.5. An explanation of regulated and non-regulated waste, appropriate waste disposal methods, and required signs and labels;
  - 8.4.6. An explanation of the use and limitations of methods that will prevent or reduce exposure including appropriate engineering controls, work practices, and PPE;
  - 8.4.7. Information on the types, proper use, location, removal, handling, decontamination, and disposal of PPE;
  - 8.4.8. An explanation of the basis for selection of PPE;
  - 8.4.9. Information on the Hepatitis B vaccine, including information on its efficiency, safety, method of administration, the benefits of being vaccinated, and that the vaccine and vaccination will be offered at no cost to the employee;
  - 8.4.10. Information on the appropriate actions to take, and persons to contact, including the immediate supervisor, in an emergency involving exposure;
  - 8.4.11. 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; and
  - 8.4.12. Information on the post-exposure evaluation and follow-up.
- 8.5. The majority of training items listed in 8.4 may be covered on a videotape. Each training session shall allow an opportunity for interactive questions and answers. Attendance is mandatory and shall be recorded on employee health and safety training record.
- 8.6. For incidents occurring outside normal operating hours, employees shall immediately report the incident to their physician or go to the emergency ward of hospital or clinic.

## 9.0 Vaccination Against Bloodborne Pathogens



- 9.1. Employees in Category A shall be offered Hepatitis B vaccination at no cost to them after they have received the training outlined in Section 8 and within 10 working days of their initial assignment.
  - 9.2. Designated First Aid providers who offer First Aid only as a collateral duty and generally at the location where the incident occurred, are not required to have the pre-exposure Hepatitis B vaccine. The Hepatitis B vaccine shall be provided to all designated employees who are expected to perform CPR/First Aid as an "essential" job duty.
  - 9.3. The vaccination program consists of a series of three inoculations over a six-month period.
  - 9.4. Vaccinations will be performed under the supervision of a licensed physician or other health care professional. If an employee initially declines the Hepatitis B vaccination, but at a later date decides to accept the vaccination while working in a position in Category A, the County Education Office shall make the Hepatitis B vaccination available at that time.
  - 9.5. Employees accepting or declining the vaccine must complete the Hepatitis B Vaccination Form.
  - 9.6. If vaccines against other bloodborne pathogens, e.g., HIV, become approved and recommended by the U.S. Public Health Service, immunization to all covered employees will be considered in accordance with those recommendations.
- 10.0 Post Exposure. *Employee and Supervisor Report of Industrial Injury/Illness* (SIPE Form 6-588) and Follow-up for Unvaccinated First Aid Responders.
- 10.1. A SIPE Form 6-588 must be prepared if First Aid was rendered by an unvaccinated employee(s) and there was a presence of blood or OPIM, regardless of whether an actual exposure incident occurred. This report must be submitted to the immediate supervisor before the end of the work shift in which the incident occurred.
  - 10.2. The SIPE Form 6-588 must include the names of all First Aid providers who rendered assistance, whether PPE was used, a description of the First Aid incident, the time and date of the incident, and whether an exposure incident occurred for each employee involved.
  - 10.3. The original of the SIPE Form 6-588 must be kept on file at the County Education Office and a copy forwarded to the SIPE Safety Office. Employees who are sent for medical evaluation as a result of the incident must be placed on the County Education Office OSHA 300 Log. SIPE Form 6-588 shall be readily available to employees.
  - 10.4. If an unvaccinated employee has rendered assistance in any situation involving the presence of blood or OPIM, regardless of whether a specific exposure incident occurred, provisions for the full Hepatitis B vaccination series must be made available as soon as possible, but in no event later than 24 hours after the incident. If the employee refuses, they shall sign a waiver statement.
- 11.0 Medical Evaluation





- 11.1. If an employee reports an exposure incident to blood or OPIM, a confidential medical evaluation shall be made immediately available to the exposed employee.
- 11.2. The medical evaluation shall include the following:
  - 11.2.1. Documentation of the route(s) and circumstances of exposure.
  - 11.2.2. Identification of the source individual, unless infeasible or prohibited by state law.
  - 11.2.3. Prompt testing of the source individual's blood for HBV or HIV as soon as consent is obtained. If consent cannot be obtained, this shall be documented.
    - 11.2.3.1. If the source individual's HBV or HIV status is known to be positive, repeat testing need not be done.
    - 11.2.3.2. Results of the source individual's testing shall be made available to the exposed employee, along with information about the applicable laws and regulations regarding disclosure of identity and infectious status of the source individual.
  - 11.2.4. Prompt testing of the exposed employee's blood for HBV and HIV shall be done as soon as the Medical Evaluation Consent Form is signed and received.
    - 11.2.4.1. If the employee does not consent to serological testing, consent to a baseline blood collection may be given. The sample shall be preserved untested for at least 90 days.
    - 11.2.4.2. If within 90 days of the exposure incident, the employee chooses to have the sample tested, this shall be done promptly using the stored sample as baseline and a current sample to document seroconversion. Without a preserved sample, baseline seroconversion to a specific incident cannot be proven.
    - 11.2.4.3. Additional collection and testing shall be made available as recommended by the U.S. Public Health Service.
  - 11.2.5. The County Education Office shall provide to the health care professional responsible for the employee's Hepatitis B vaccination:
    - 11.2.5.1. A copy of Title 8 Regulation 5193: Bloodborne Pathogens.
    - 11.2.5.2. A description of the exposed employee's duties as they relate to the exposure incident.
    - 11.2.5.3. Documentation of the route(s) of exposure and circumstances under which exposure occurred.
    - 11.2.5.4. Results of the source individual's blood testing, if available.



11.2.5.5. All medical records relevant to the appropriate treatment of the employee including vaccination status which are the County Education Office's responsibility to maintain.

11.3. Exposed employees shall be counseled by a knowledgeable health care professional regarding their exposure and any medical and/or legal implications.

11.4. If medically indicated and requested by the employee after appropriate counseling, any prophylactic procedures recommended by the U.S. Public Health Service shall be made available.

11.5. Employees contracting illness resulting from an occupational exposure shall be evaluated and followed with appropriate medical care. Appropriate reports of occupational illness shall be made.

## 12.0 Written Opinion

12.1. Within 15 days of an exposure evaluation, the employee shall be provided with a copy of the physician's written opinion which shall be limited to the following:

12.1.1. Whether HBV vaccination is indicated and if the employee has received it.

12.1.2. Informing the employee of the results of the evaluation.

12.1.3. Informing the employee about any medical condition resulting from exposure which requires further evaluation or treatment.

12.2. All other findings of diagnosis shall remain confidential and shall not be included in the written report.

## 13.0 Record Keeping

13.1. The medical record for each employee covered under this plan will include the following items.

13.1.1. The employee's name and social security number.

13.1.2. A copy of the employee's Hepatitis B vaccination status including the dates of all the Hepatitis B vaccinations and any medical records relative to the employee's ability to receive the vaccine.

13.1.3. A copy of all results of examination, medical testing, and follow-up procedures regarding this plan.

13.1.4. Copies of any health care professional's written opinion.

13.1.5. A copy of the information provided to the health care professional.

13.1.6. A copy of the completed incident log.

## 14.0 Procedures

#### 14.1. Direct Skin Contact

- 14.1.1. In many instances, unanticipated skin contact with body fluids may occur in situations where gloves may be immediately unavailable, e.g., when wiping a runny nose, applying pressure to a bleeding injury outside the classroom, helping a child in the bathroom.
- 14.1.2. Gloves need not be worn when feeding students or when wiping saliva from skin unless blood is present. First Aid for a bleeding child must not be delayed to secure gloves. In these instances, hands and other affected skin areas of all exposed persons shall be routinely washed with soap and water after direct contact has ceased. Unbroken skin is an excellent barrier to infectious agents. Staff with sores or cuts on their hands (non-intact skin) having contact with blood or body fluids shall always wear gloves. If contact with contaminated body fluids does occur, the staff member shall contact the local health department or private physician for evaluation of the need for post-exposure prophylaxis.

#### 14.2. Spilled Body Fluids

- 14.2.1. Standard procedures already in place for removing body fluids, e.g., vomitus, will be reviewed to determine whether appropriate cleaning and disinfection steps have been included. Schools shall stock sanitary absorbent agents specifically intended for cleaning body fluid spills. Disposable gloves will be worn when using these agents. The dry material is applied to the area, left for a few minutes to absorb the fluid, and then vacuumed or swept up. The vacuum bag or sweepings shall be disposed of in a plastic bag. Broom and dustpan shall be rinsed in a disinfectant. No special handling is required for vacuuming equipment.

#### 14.3. Hand washing

- 14.3.1. Proper hand washing requires the use of soap and water and vigorous washing under a stream of warm water for approximately 10 seconds. Use paper towels to thoroughly dry hands.
- 14.3.2. Facilities shall provide an adequate supply of running potable water, soap and single use towels, or hot air-drying machines. When provision of hand washing facilities is not feasible, the County Education Office shall provide an appropriate antiseptic towelette. When antiseptic hand cleansers or towelettes are used, hands shall be washed with soap and running water as soon as feasible.

#### 14.4. Disinfectants

- 14.4.1. An intermediate level disinfectant shall be used to clean surfaces contaminated with body fluids. Such disinfectants will kill vegetative bacteria, fungi, tubercle bacillus and viruses. The disinfectant shall be registered by the U.S. Environmental Protection Agency (EPA) for use as a disinfectant in medical facilities and hospitals.

14.4.2. Various classes of disinfectants are listed below. Hypochlorite solution (bleach) is preferred for objects that may be put in the mouth.

14.4.2.1. Ethyl or isopropyl alcohol (70%)

14.4.2.2. Phenolic germicidal detergent in a 1% aqueous solution, e.g., Lysol.

14.4.2.3. Household bleach diluted 1-part bleach to 10 parts water.

14.4.2.4. Quaternary ammonium disinfectant cleaner, e.g., Bactisol, Forward Disinfectant Cleaner.

14.4.2.5. Iodophor germicidal detergent with 500 ppm available iodine, e.g., Wescodyne).

14.5. Disinfection of hard surfaces, athletic mats

14.5.1. All equipment and working surfaces shall be cleaned and decontaminated after contact with blood or OPIM. Contaminated work surfaces shall be decontaminated with an appropriate disinfectant after completion of procedures, immediately, or as soon as feasible when surfaces are overtly contaminated or after any spill of blood or OPIM, and at the end of the work shift if the surface may have become contaminated since the last cleaning.

14.5.2. In order to provide a safe environment, hard surfaces shall be cleaned/disinfected at the conclusion of each day. This includes sporting equipment such as wrestling and gymnastics mats, as well as desk and tabletops used for eating. If an incident occurs where body fluid has contaminated a surface, cleaning and disinfecting shall take place prior to allowing activity to continue. The surface shall be cleaned of visible contamination and then disinfected. During athletic contests an ample supply of towels shall be available. Disposable towels and tissues are recommended. Towels must be used for one individual only and then disposed of in an appropriate receptacle.

14.5.3. Gloves must be worn when handling blood or objects contaminated with blood.

14.5.4. Soiled surfaces shall be promptly cleaned with disinfectant, such as household bleach, diluted 1-part bleach to 10 parts water. Disposable towels or tissues shall be used whenever possible, and mops shall be rinsed in disinfectant. Those who are cleaning shall wear latex gloves or other protective equipment and shall avoid exposure of open skin lesions or mucous membranes to the blood or body fluids.

14.6. Disinfection of rugs

14.6.1. Employees will apply sanitary absorbent agent, let dry, and vacuum. If necessary, mechanically remove body fluid with the dustpan and broom, then apply rug shampoo (a germicidal detergent) with a brush and re-vacuum. Rinse dustpan and broom in disinfectant. If necessary, wash brush with soap and water. Dispose of non-reusable



cleaning equipment as noted above.

#### 14.7. Care of cleaning equipment

14.7.1. Mops shall be soaked in the disinfectant after use and rinsed thoroughly or washed in a hot water cycle before rinse. Disposable cleaning equipment and water shall be placed in a toilet or plastic bag as appropriate. Non-disposable cleaning equipment (buckets) shall be thoroughly rinsed in the disinfectant. All bins, pails, cans, and similar receptacles intended for reuse which have a reasonable likelihood of becoming contaminated with blood or OPIM shall be inspected and decontaminated on a regularly scheduled basis and cleaned and decontaminated immediately, or as soon as feasible, upon visible contamination. The disinfectant solution shall be promptly disposed down a drainpipe. Gloves are removed and discarded in appropriate receptacles. Hands are washed.

#### 14.8. Laundry instructions for clothing soiled with body fluids

14.8.1. The most important factor in laundering clothing contaminated in the school setting is elimination of potentially infectious agents by soap and water. Addition of bleach will further reduce the number of potentially infectious agents. Clothing soaked with body fluids shall be washed separately from other items. Presoaking may be required for heavily soiled clothing. Otherwise, wash and dry as usual. If the material is bleachable, add ½ cup of household bleach to the wash cycle. If the material is not colorfast, add ½ cup non-Clorox bleach, e.g., Clorox II, to the wash cycle.

14.8.2. If presoaking is required to remove stains, e.g., blood, feces, use gloves to rinse or soak the item in cold water prior to bagging. Student clothing shall be sent home for washing with appropriate directions to parents. Contaminated disposable items, e.g., tissues, paper towels, diapers, shall be handled with disposable gloves.

#### 14.9. Hepatitis B Vaccination (HBV)

14.9.1. The County Education Office shall request that their medical provider perform screening to ensure that employees have responded appropriately after the initial series of the HBV vaccination.

14.9.2. The following guidelines will be used as reasonable accommodation for the Hepatitis B vaccination:

14.9.2.1. The number of vaccine series that employers are responsible for administering when an employee has been exposed to bloodborne pathogens are:

14.9.2.1.1. An initial series of three doses during a six-month period.

14.9.2.1.2. An additional series of three doses of vaccine shall be administered to individuals who do not respond to the initial vaccination series.



14.9.2.1.3. Employees should consult their physician if additional doses beyond the second series may be warranted.

14.9.2.2. In all cases, workers compensation will provide funding for the vaccination when it involves an exposure incurred while the employee was performing their duties.



## SECTION H AEROSOL TRANSMISSIBLE DISEASE PREVENTION PROGRAM

### 1.0 Purpose

- 1.1. To identify safe work practices that minimize the incidence of occupationally acquired diseases that are transmissible through aerosols in the school setting. The ATD Standard was written by Cal/OSHA, Title 8. Section 5199 Aerosol Transmissible Diseases (ATD) Standard, as a direct result of the experiences involving Severe Acute Respiratory Syndrome (SARS), Avian Influenza, and the Novel Influenza H1N1.

### 2.0 Scope

- 2.1. This policy applies to all County Education Office faculty, staff, hosted visitors, students, participating guests, and volunteers. The following job classifications may have occupational exposure to ATD at the County Education Office:
  - 2.1.1. Teachers and paraprofessionals
  - 2.1.2. Nurses or other licensed health care professionals involved in diagnosis, triage, direct patient care, and treatment
  - 2.1.3. Clerical and Administrative Support workers/classified employees
  - 2.1.4. Facilities management custodial employees

### 3.0 Definitions

- 3.1. Aerosol Transmissible Disease (ATD) or Aerosol Transmissible Pathogen (ATP): A disease or pathogen for which droplet or airborne precautions are required, as listed in Appendix A of the standard.
- 3.2. Airborne Infectious Disease (AirID): Either: (1) An aerosol transmissible disease transmitted through dissemination of airborne droplet nuclei, small particle aerosols, or dust particles containing the disease agent, or (2) The disease process caused by a novel or unknown pathogen for which there is no evidence to rule out with reasonable certainty the possibility that the pathogen is transmissible through dissemination of airborne droplet nuclei, small particle aerosols, or dust particles containing the novel or unknown pathogen.
- 3.3. Airborne Infectious Pathogen (AirIP): Either: (1) An aerosol transmissible pathogen transmitted through dissemination of airborne droplet nuclei, small particle aerosols, or dust particles containing the infectious agent, or (2) A novel or unknown pathogen for which there is no evidence to rule out with reasonable certainty the possibility that it is transmissible through dissemination of airborne droplet nuclei, small particle aerosols, or dust particles containing the novel or unknown pathogen.

- 3.4. Exposure Control Plan: A plan to protect employees from aerosol transmissible pathogens by reducing occupational exposure and providing appropriate treatment and counseling for employees potentially exposed to these pathogens.
- 3.5. Exposure incident: An event in which all of the following have occurred: (1) An employee has been exposed to an individual who is a case or suspected case of a reportable ATD, or to a work area or to equipment that is reasonably expected to contain ATPs associated with a reportable ATD; and (2) The exposure occurred without the benefit of applicable exposure controls required by this section, and (3) It reasonably appears from the circumstances of the exposure that transmission of disease is sufficiently likely to require medical evaluation.
- 3.6. *M. tuberculosis*: *Mycobacterium tuberculosis* complex, which includes *M. tuberculosis*, *M. bovis*, *M. africanum*, and *M. microti*. *M. tuberculosis* is the scientific name of the group of bacteria that cause tuberculosis.
- 3.7. Novel or unknown ATP: A pathogen capable of causing serious human disease meeting the following criteria:
  - 3.7.1. There is credible evidence that the pathogen is transmissible to humans by aerosols, and the disease agent is:
    - 3.7.1.1. A newly recognized pathogen, or
    - 3.7.1.2. A newly recognized variant of a known pathogen and there is reason to believe that the variant differs significantly from the known pathogen in virulence or transmissibility, or
    - 3.7.1.3. A recognized pathogen that has been recently introduced into the human population, or
    - 3.7.1.4. A not-yet-identified pathogen.
  - 3.7.2. Note: Variants of the human influenza virus that typically occur from season to season are not considered novel or unknown ATPs if they do not differ significantly in virulence or transmissibility from existing seasonal variants. Pandemic influenza strains that have not been fully characterized are novel pathogens.
- 3.8. Respirator: A device which has met the requirements of 42 CFR Part 84, has been designed to protect the wearer from inhalation of harmful atmospheres, and has been approved by NIOSH for the purpose for which it is used.
- 3.9. Source control measures: The use of procedures, engineering controls, and other devices or materials to minimize the spread of airborne particles and droplets from an individual who has or exhibits signs or symptoms of having an ATD, such as persistent coughing.
- 3.10. Suspected case: Either of the following:





- 3.10.1. A person whom a health care provider believes, after weighing signs, symptoms, and/or laboratory evidence, to probably have a particular disease or condition listed in Appendix A of the standard.
- 3.10.2. A person who is considered a probable case, or an epidemiologically linked case, or who has supportive laboratory findings under the most recent communicable disease surveillance case definition established by CDC.
- 3.11. Tuberculosis (TB): A disease caused by *M. tuberculosis*.

#### 4.0 Policy

- 4.1. This plan is administered in coordination with the SIPE Safety Office.
- 4.2. The plan is evaluated and updated to include methods for controlling/preventing respiratory pathogen transmission, i.e., new engineering and work practice controls, new cleaning and decontamination procedures, changes in isolation procedures, use of PPE, and determining employee exposures.
- 4.3. The following methods are used to prevent exposures to aerosol transmissible diseases/pathogens (ATDs/ATPs)
  - 4.3.1. Promptly identify suspect students or employees.
  - 4.3.2. Transfer to an appropriate room within the institution for airborne infectious disease students.
  - 4.3.3. When not feasible to provide airborne isolation rooms for a novel disease, provide other effective control measures, i.e., PPE, hand hygiene, social distancing, i.e., keeping 6 feet from suspected or diagnosed ATD students or employees.
- 4.4. Apply appropriate isolation precautions.
- 4.5. Maintain appropriate engineering controls. To prevent transmission, i.e., ventilation systems on fresh air exchanges in appropriated treatment rooms are used to manage the environment of students with ATD.
- 4.6. Implement appropriate work practices to prevent transmission:
  - 4.6.1. Food is not allowed in appropriate treatment rooms or areas.
  - 4.6.2. Respiratory etiquette is practiced by employees.
  - 4.6.3. Using PPE to protect employees from other pathogens spread by airborne/droplet route of transmission, i.e. Influenza.
  - 4.6.4. Wash hands before and after student contact.



4.6.5. Identify and review annually the work locations at higher risk for exposure to ATD/ATP, including school offices, classrooms, nurse's office, health office, or treatment room/area.

4.6.6. Maintain routine cleaning.

#### 4.7. Respiratory Protection

4.7.1. Respirators used, such as filtering facepieces must be NIOSH approved and have a minimum rating of N95.

4.7.2. Fit-testing and respiratory protection procedures will occur in accordance with the Santa Barbara County Education Office's Respiratory Protection Program.

4.7.3. N95 respirators will be reused when there is a lack of available inventory, i.e., pandemic or epidemic. The N95 respirator can be worn for one shift of work or more often depending on the need. The N95 respirator shall be inspected prior to use, and not used if it is damaged in any way. If there is a shortage of N95 Respirators, an elastomeric mask may be used.

#### 4.8. Implementation

4.8.1. This program and supporting procedures are generally followed at all times; however, specific implementation requirements identified in SIPE's ATD plan are voluntary. If a confirmed episode or epidemic of ATD is declared by either the County Department of Public Health, the Centers for Disease Control, or the California Department of Education, this plan will be converted from voluntary to mandatory, and thus, all procedures will be strictly adhered to according to this ATD Plan.

### 5.0 Procedures

5.1. Confirmed or suspected ATD students are placed in designated appropriate treatment rooms/areas.

5.2. Students suspected or confirmed as infectious due to airborne pathogen may wear a surgical mask until an appropriate room is available.

5.3. Visitors entering the rooms/areas housing ATD students will wear a surgical mask or equivalent during the visit. If able, the student may wear a surgical mask.

5.4. Work Practice Controls: Supervisors are responsible for enforcing employee work practice controls. The following work practice controls are implemented to prevent exposure to airborne pathogens. Employees taking care of students with suspected or confirmed airborne diseases must:

5.4.1. Wear appropriate PPE, up to and including respirators, gloves, and surgical masks.



- 5.4.2. Practice appropriate hand hygiene.
- 5.4.3. Maintain social distancing, i.e., keep 6 feet from students suspected or confirmed with an ATD/ATP when possible.
- 5.4.4. Students with communicable airborne diseases may wear a surgical mask during transport and other times when students are out of designated treatment rooms/areas.
- 5.4.5. Employees must wash their hands after removal of gloves.
- 5.4.6. Occupational exposures are to be reported to supervisors immediately.
- 5.4.7. Visitors who must enter an appropriate treatment room/area where suspect or confirmed ATD students are waiting to go home are to wear surgical masks.
- 5.5. Employee surveillance and post-exposure follow-up. The County Education Office is responsible for new employee and annual employee surveillance as well as post exposure follow-up for airborne pathogens.
- 5.6. Medical services for employees with occupational exposure to ATD:
  - 5.6.1. Assess exposure: TB skin tests are provided every 4 years according to Ed. Code and more frequently in accordance with applicable public health guidelines or if the public health officer recommends more frequent testing.
  - 5.6.2. Employees with TB test conversions are referred to a health care provider knowledgeable about TB for evaluation.
  - 5.6.3. Diagnostic tests and treatment options are provided to the employee.
  - 5.6.4. The circumstances of occupational exposure to any ATD shall be investigated and the investigation findings shall be documented.
  - 5.6.5. Vaccinations shall be made available to all employees with occupational exposures unless the employee has already received the vaccine, or it is determined the employee has immunity, or the vaccine is contraindicated for medical reasons.
  - 5.6.6. Individual providing vaccine or determining immunity provides information to the County Education Office (name, date, dose, immunity, any restrictions on employee's exposure, if additional vaccine is required, and date/dose it shall be provided).
  - 5.6.7. If vaccine is not available, the County Education Office shall document unavailability of the vaccine and check on availability every 60 days.
- 5.7. Training
  - 5.7.1. New employee orientation and annual education of employees.



5.7.2. Written materials, including handout or brochure about ATD is provided to employees during the New Employee Orientation classes and annual education classes. The topics include transmission, symptoms, incidence, risk group categories, and exposure prevention strategies.

#### 5.8. Record keeping

5.8.1. Employees skin test results are recorded by Human Resources department.

5.8.2. New employee and annual education of employees shall be recorded by the County Education Office Human Resources Department. These records will be maintained for 3 years.

5.8.3. Employee information will be kept confidential. Records will be maintained for 30 years past termination, resignation, or retirement.

#### 6.0 Additional References

6.1. Cal/OSHA Aerosol Transmissible Diseases Regulation <http://www.dir.ca.gov/title8/5199.html>

6.2. Appendix D: Aerosol Transmissible Pathogens – Laboratory List  
<http://www.dir.ca.gov/title8/5199d.html>

6.3. Cal/OSHA Respiratory Protection Program Regulation <http://www.dir.ca.gov/title8/5144.html>

6.4. California’s Local Health Officers

6.5. <http://www.cdph.ca.gov/programs/cclho/Documents/CCLHOHealthOfficerDirectory.pdf>

6.6. CDC Biosafety in Microbiological and Biomedical Laboratories, 5th Edition  
<http://www.cdc.gov/biosafety/publications/bmb15/>

6.7. Centers for Disease Control’s Respiratory Hygiene/Cough Etiquette Guidelines  
<http://www.cdc.gov/flu/professionals/infectioncontrol/resphygiene.htm>

6.8. Immunization Information from the California Department of Public Health  
<http://www.cdph.ca.gov/programs/immunize/Pages/HealthProfessionals.aspx>



## COVID-19 ADDENDUM June 30, 2020

### 1.0 Employee Training

1.1. The County Education Office shall educate employees on the topics listed below using methods that are easy to understand including verbal, visual, audiovisual, and picture-centered handouts and other resources.

1.2. All training shall be consistent with the Center for Disease Control (CDC) and state and local Public Health guidance and regulation.

1.2.1. [What is COVID-19 and how is it spread](#)

1.2.2. [Signs and symptoms of COVID-19](#)

1.2.3. [When to seek medical attention if not feeling well](#)

1.2.4. [Prevention of the spread of COVID-19 if you are sick](#)

1.2.5. [Use of face coverings to help slow the spread](#)

1.2.6. [Physical distancing guidelines](#)

1.2.7. Importance of [washing hands](#) with soap and water for at least 20 seconds or use of hand sanitizer if soap and water are not readily available.

1.2.8. [Coughing and sneezing etiquette](#)

1.2.9. [Guidance for cleaning and disinfecting](#)

1.2.10. Reading labels, wearing proper PPE, hazard review and steps to minimize harm to employees using cleaning products.

1.2.11. HAZCOM online module shall be required for all employees and substitutes.

1.2.12. Healthy Schools Act online module shall be required for all employees and substitutes.

### 2.0 Face Coverings

2.1. All employees will be required to wear face coverings consistent with state guidelines, County Education Office program decisions, and the adopted school site procedures of their assignments.

2.2. Employees will be provided with CDC resources on how to properly put on, remove, and launder face coverings.



2.3. Signs on how to properly wear a face covering shall be posted in various locations of the County Education Office.

2.4. Disposable masks shall be made available to employees who do not have a face covering or who forget to bring a face covering with them to their assigned workplace.

### 3.0 Physical Distancing

3.1. Physical distancing of at least 6 feet is an effective method that can help stop or slow the spread of an infectious disease by limiting close contact between people.

3.2. County Education Office employees will be provided with information from CDC on physical distancing and will be directed to engage in physical distancing at all times to the extent possible.

3.3. Signs reminding employees to maintain physical distancing will be posted in various locations of the County Education Office.

3.4. If physical distancing is not feasible, employees shall be required to wear a face covering or physical barriers will be put in place to help stop the spread of COVID-19.

### 4.0 Limits on Non-Essential Visitors and Travel

4.1. All meetings shall be virtual to the extent possible.

4.2. In-person meetings shall be limited to room capacity that allows for 6 feet of distance between each participant. The use of face coverings is recommended.

4.2.1. All meeting rooms shall be measured for room capacity to allow for 6 feet of distance and maximum room capacity signs shall be posted.

4.3. Visitors must be approved before arrival. Employees should maintain physical distancing from visitors and wear face coverings.

4.4. Visitors must be by appointment only and shall be informed of all County Education Office health and safety procedures prior to arrival.

4.5. Visitors shall wear face coverings and maintain physical distancing.

4.6. Visitor appointments shall be limited in time to minimize exposure.

4.7. All shared equipment such as tables and chairs utilized by a visitor shall be sanitized promptly once the visitor has departed.

4.8. The County Education Office shall limit any unnecessary travel with multiple passengers including travel in personal employee vehicles and district-provided vehicles.

4.9. The County Education Office shall eliminate all non-essential and non-related services, such as



entertainment activities and celebratory events.

## 5.0 Wellness Screening

- 5.1. All County Education Office employees and substitute employees shall affirm by signature that they will engage in wellness screening to help stop the spread of COVID-19.
  - 5.1.1. All employees shall engage in a passive screening daily prior to coming to work that includes a self-assessment wellness check that they are free from symptoms consistent with COVID-19 per CDC guidance.
  - 5.1.2. Designated employees will be required to engage in on-site active screening procedures consistent with the school site procedures adopted where they are assigned to work including but not limited to temperature checks, documentation that they are symptom-free, and/or COVID-19 testing.

## 6.0 COVID-19 Cases

- 6.1. All employees shall affirm by signature that they will immediately report to their supervisor if they have symptoms of COVID-19, have been diagnosed with COVID-19, or have recently had close contact with someone with a confirmed diagnosis of COVID-19.
- 6.2. If an employee is not feeling well and is exhibiting symptoms that may be attributed to COVID-19 and are not due to a known or chronic condition, the employee shall immediately return home, go to a health care facility if needed, or put on a face covering and self-isolate until they can be safely transported to the appropriate setting.
- 6.3. Supervisors shall inform employees they must go home or to a health care facility as needed if they are visibly exhibiting symptoms consistent with COVID-19 and not due to a known or chronic condition.
- 6.4. The County Education Office shall provide employees with appropriate resources on COVID-19 including how to seek medical care information.
- 6.5. The County Education Office shall work closely with the Santa Barbara County Public Health Department so that they may engage in proper contact tracing and notification to any individuals who may be affected by a COVID-19 case.
  - 6.5.1. Employee information shared with Public Health may include the employee's work location, work hours, general and specific work duties, if the employee has traveled to multiple worksites recently with timing, and the last day the employee was at work. The employee's name will not be disclosed unless asked by the health officials.
  - 6.5.2. Additional information may include which other employees have been in close contact with the individual with COVID-19.
- 6.6. Any physical space that has been identified as exposed to an individual with COVID-19 shall be



closed for 24 hours and then disinfected by staff trained and wearing proper PPE.

## 7.0 Employee Leaves

- 7.1. The County Education Office shall educate employees on leave options available for COVID-19 related absences including those consistent with the Families First Coronavirus Response Act.

## 8.0 Sanitizing and Disinfecting

- 8.1. The County Education Office has established routine schedules to clean and disinfect common surfaces and objects in the workplace. This includes but is not limited to:
  - 8.1.1. Tools, machinery, containers, counters, tables, chairs, benches, door handles, knobs, drinking fountains, refrigerators, vending machines, portable restroom and bathroom surfaces, County Education Office vehicles, and trash cans.
- 8.2. Designated staff shall receive specialized training and be required to disinfect common surfaces and objects in the workplace at least twice daily.
  - 8.2.1. All staff expected to disinfect areas compromised by exposure to individuals diagnosed with COVID-19 shall receive specialized training and shall wait 24 hours before disinfecting the areas affected.
  - 8.2.2. The process of disinfecting includes providing disinfecting products, any PPE required for their safe use, and review and compliance with manufacturer instructions for proper use.
- 8.3. All staff shall be trained and required to sanitize shared spaces or items after each use including but not limited to copiers, refrigerators, microwaves, water coolers, vending machines, and break rooms.
  - 8.3.1. Sanitizing supplies shall be made available in all communal areas and near all shared equipment.
  - 8.3.2. All staff required to sanitize shall be properly trained and provided with the appropriate PPE.

## 9.0 Good Sanitation Practices – The County Education Office shall:

- 9.1. Check restroom facilities frequently and make sure they are cleaned, sanitized, and clutter-free.
- 9.2. Assign an employee to check restrooms, open doors and windows, re-stock toilet paper, clean and sanitize as necessary.
- 9.3. Make sure hand washing areas have plenty of soap, paper towels and that staff is cleaning and sanitizing at least twice daily.
- 9.4. Make sure hand washing supplies are re-stocked regularly.





- 9.5. Assign an employee to stock and provide appropriate PPE including, but not limited to, gloves and disposable masks.
- 9.6. Sanitize frequently.

## 10.0 Air Flow

- 10.1. Click [HERE](#) for CDC info on matters of air including:
  - 10.1.1. Air filtration should not be relied on for controlling the spread of COVID-19.
  - 10.1.2. Increase circulation of outdoor air as much as possible by opening windows and doors, using fans, and other methods.
  - 10.1.3. Consider using natural ventilation (i.e., opening windows if possible and safe to do so) to increase outdoor air dilution of indoor air when environmental conditions and building requirements allow.
  - 10.1.4. At this time, the overall CDC recommendation is allowing fresh air as much as possible.
  - 10.1.5. Employee shall be informed to keep doors and windows open to the extent feasible and to consider free-standing signage that the Office is closed to the public to prevent people from coming into an open door.



## SECTION I HAZARDOUS SUBSTANCE PROGRAM

### 1.0 Program

- 1.1. County Education Office employees will receive Hazardous Communication training annually.
  - 1.1.1. Online hazardous communication training via SIPE online training program.
- 1.2. School site chemical inventory will include:
  - 1.2.1. Container labeling to include substances on inventory and new purchases. A plan of action if unlabeled container is found.
  - 1.2.2. Material Safety Data Sheets (MSDS) will be available for all chemicals in the County Education Office inventory.
- 1.3. The County Education Office will use the disciplinary procedures in Section A for employees who do not comply with rules regarding hazardous substances.
- 1.4. The County Education Offices will provide training when information about a substance becomes available.

### 2.0 Inspections. The County Education Office shall:

- 2.1. Survey existing facilities to identify kinds and quantities of chemicals, conditions of storage, and unstable materials for disposal.
- 2.2. Review laboratory experiments and maintenance process for use of toxic chemicals and determine which ones have the potential for significant staff or student exposure. Identify if engineering controls, if fume hoods, or ventilation systems are required.
- 2.3. List all hazardous substances by building at each site.
- 2.4. Identify unstable materials and quantify all materials in preparation for disposal.
- 2.5. Survey chemical use facilities to determine if they meet minimum safety standards.

### 3.0 Employee Training Program. The County Education Office shall:

- 3.1. Obtain MSDSs for all substances on inventory through MSDS on Demand or the company when the item is purchased.
- 3.2. Post listing of hazardous substances at each workplace and advise of the location and availability of the MSDSs.
- 3.3. Provide employees a sample MSDS for each "group type" of hazardous substance and explain how to read, interpret, and understand the information in the MSDS.



- 3.4. Group types:
  - 3.4.1. Flammables
  - 3.4.2. Corrosives
  - 3.4.3. Toxics
  - 3.4.4. Reactives
  - 3.4.5. Miscellaneous
- 3.5. Explain to employees how they can obtain an MSDS from the County Education Office files.
- 3.6. Employees within the County Education Office are enrolled in the 3E MSDS on Demand Program. The toll-free number for MSDS retrieval and maintenance is (800) 451-8346.
- 4.0 Purchasing Training. The County Education Office shall:
  - 4.1. Control what materials are purchased and the quantity. County Education Office shall establish a goal of only purchasing enough for each school year and avoid storage, age, and label problems.
  - 4.2. Obtain MSDS for each order or not accept the shipment.
  - 4.3. Post revised hazardous substance list at each workplace affected by the purchase.
  - 4.4. Set strict guidelines for acceptance of "donations" to be sure of the age, quantity and nature of the substance. Require MSDSs for all "donations."
- 5.0 Disposal
  - 5.1. Disposal shall be done by a person who has the proper knowledge of laws, local/federal, training, and PPE.
  - 5.2. Substances shall be identified, segregated by classification, and quantified.
  - 5.3. A contract-licensed disposal firm shall be used. Disposal firm will not pick up the material, etc., until the volume number and sizes of containers is known, and the County Education Office has an Environmental Protection Agency and Environmental Health Services Waste permit in place.
  - 5.4. The County Education Office shall contact the SIPE Safety Office for recommended disposal procedures and solicitation of authorized hazardous material disposal handlers.
  - 5.5. Target areas include:
    - 5.5.1. Custodial
    - 5.5.2. Food Service
    - 5.5.3. Science, Industrial Arts, and Fine Arts



5.5.4. Grounds

5.5.5. Maintenance & Warehouse Transportation

5.5.6. Swimming Pools

6.0 Toxic Art Supplies. The County Education Office shall:

- 6.1. Identify unstable art or craft materials that cannot be used in schools.
- 6.2. Identify materials that have been taken off the market but might still be used or stored in some schools.
- 6.3. Identify if art or craft materials have Certified Products or Approved Products Nontoxic seals.
- 6.4. Training sessions concerning toxic art supplies shall be conducted for industrial arts, fine art teachers, and purchasing departments.

7.0 Labeling

- 7.1. The County Education Office can use the NFPA or other means of labeling as long as it meets the requirement in Paragraphs 7.3 and 7.4.
- 7.2. All secondary containers will have a NFPA label identifying its contents if containers were not labeled/stenciled by the manufacturer.
- 7.3. Container labeling will identify the hazardous substance and appropriate warnings.
- 7.4. Labels shall be legible, in English. Other languages may be added.

8.0 Material Safety Data Sheets (MSDS)

- 8.1. Schools in the Santa Barbara County will use the MSDS on Demand program for MSDS questions, filing, and printouts.

9.0 Universal Waste Management

- 9.1. The County Education Office will follow SIPE's established universal waste management program.



## SECTION J SAFE DRIVING PROCEDURES

### 1.0 Purpose

- 1.1. This protocol is designed to assist employees in using defensive driver tactics to be safe while driving and reduce the odds of accidents occurring.

### 2.0 Policy

- 2.1. Only drivers possessing a valid driver's license and authorized by the County Education Office shall be permitted to operate a County Education Office vehicle.
- 2.2. Operators will comply with state and local laws governing the safe operation of a motor vehicle.
- 2.3. County Education Office delivery drivers shall complete a driver's training course as part of their job. This course is provided by SIPE either online or a hands-on driving training course.
- 2.4. When parking a County Education Office vehicle, a traffic cone shall be used. The traffic cone shall be placed at the rear bumper near the traffic lane. This procedure requires the driver to visually inspect the surrounding area around the parked vehicle before backing.
- 2.5. Drivers shall observe defensive driver recommendations.
- 2.6. Drivers shall maintain adequate insurance on a personal vehicle used for County Education Office business.

### 3.0 Procedures: Drivers shall be guided by these recommendations:

- 3.1. Anticipate other drivers' moves. Try to anticipate the worst in others.
- 3.2. Clearly communicate one's existence and intentions to other drivers.
  - 3.2.1. Make signaling a habit
  - 3.2.2. Let other drivers know of your intentions early
  - 3.2.3. Warn others as you stop or slow down
- 3.3. Leave room for error. An experienced driver maintains enough distance on all four sides of his car to allow them to safely react to the changes on the road.
- 3.4. Be courteous to reduce the level of anxiety around the vehicle, thus reducing the odds of an accident.
- 3.5. Know where you want to go. The first rule of defensive driving is knowing where you want to go.

### 4.0 Drivers shall be aware of leading causes of traffic accidents:



#### 4.1. Speeding

#### 4.2. Driving while intoxicated

### 5.0 Road Rage

#### 5.1. County Education Office employees shall be guided by these suggestions to help them avoid provoking other drivers:

5.1.1. Don't cut off other drivers: When you merge, make sure you have enough room and always signal before you merge.

5.1.2. Don't drive slowly in the left (fast) lane: Avoid using the fast lane except for the brief time it takes to pass another driver. Driving slowly in the fast lane frustrates other drivers.

5.1.3. Don't tailgate: Many drivers get angry when they are followed too closely. Remember to keep the appropriate following distance between your car and the car ahead of you.

5.1.4. Don't gesture to other drivers: Keep your hands on the steering wheel. Making obscene gestures to other drivers may provoke them.

5.1.5. Use your horn for emergencies only: Even a polite tap on your horn may be enough to provoke another driver.

## SECTION K FOOD SERVICE

- 1.0 Food service operations present a variety of hazards requiring care and action on the part of both the worker and the supervisor to prevent injuries. Floors must be frequently mopped and cleaned to prevent injuries. Lifting and moving of heavy boxes and cases can result in sprains and strains.
- 2.0 The equipment used in kitchens is designed to heat, cut, mix, or grind food. Fats and oils can scald when hot, and most are combustible. Electrically operated dishwashers present both electrical hazards as well as burn hazards from water temperature and from certain detergents used in the washing and rinsing cycles. Accumulation of grease in hoods and vents present fire hazards. Broken glasses and dishes with sharp edges must be handled with extreme care to prevent cuts.
- 3.0 Supervisors will provide training to all newly assigned employees. Training will be provided upon assignment and when there is a change in equipment, procedures, processes, safety, fire prevention, and occupational health requirements. Supervisors will develop written outlines to use in employee training using SIPE Form 1-588. Special attention will be given to the following:
  - 3.1. All food service personnel shall receive training in proper lifting techniques.
  - 3.2. Personnel working in the kitchen and food preparation department shall receive training in the safe use of cutlery and food processing machinery, handling of hot foods, and the danger of falls.
  - 3.3. Supervisors shall inform employees of hazardous chemicals used and their material safety data sheet.
  - 3.4. Employees shall receive fire prevention training initially and annually thereafter.
- 4.0 PPE. Such equipment is not a substitute for administrative or engineering controls. While these controls are being implemented, or if it has been determined that control methods are not feasible, PPE shall be used as needed to protect employees. This equipment includes respiratory and hearing protective devices, special clothing and protective devices for the eyes, face, head, and extremities.



## SECTION L ERGONOMICS

- 1.0 The County Education Office intends to prevent the rapidly escalating incidents of Cumulative Trauma Disorder (CTD) occurring from repetitive workplace operations, including, but not limited to, operation of computers.
- 2.0 To evaluate overall ergonomics and help reduce injuries due to CTD, the County Education Office shall:
  - 2.1. Complete an injury record review (such as Cal/OSHA 300 Logs, workers' compensation loss run, etc.) to identify the frequency of CTD injury and risks in the workplace.
  - 2.2. If injuries due to CTD exist, then workplace evaluations shall be performed by the SIPE Safety Officer. The evaluations shall include:
    - 2.2.1. Review of work activities
    - 2.2.2. Interviews with employees
    - 2.2.3. Identification of dangerous tasks
    - 2.2.4. Documentation of findings
  - 2.3. The County Education Office will ensure that all reported CTD symptoms are reported to Workers' Compensation Administrators and the SIPE Safety Office. The County Education Office will use the hazard/suggestion report (SIPE Form 2-588) or an *Employee and Supervisor Report of Industrial Injury/Illness Report* (SIPE Form 6-588) to fulfill the requirement.
  - 2.4. Based on the severity of the identified risks, risk control measures may need to be implemented. Such measures include:
    - 2.4.1. Engineering Controls - Designing or modifying the workstation, work methods, and tools to eliminate excessive exertion and awkward postures, and to reduce repetitive motion.
    - 2.4.2. Work Practice Controls - procedures for safe and proper work practices that are understood and followed by managers, supervisors, and workers. Key elements include proper work technique, employee conditioning, regular monitoring, feedback, maintenance, adjustments, modifications, and enforcement.
    - 2.4.3. PPE shall be selected with prevention of ergonomics stressors in mind. Appropriate PPE shall be provided in a variety of sizes, shall accommodate the physical requirements of workers and the job, and shall help prevent extreme postures and excessive forces.
    - 2.4.4. Administrative Controls - administrative controls that reduce the duration, frequency and severity of exposure to ergonomic stressors. Examples of administrative methods include the following:





- 2.4.4.1. Reducing the total number of work repetitions per employee by such means as decreasing production rate and limiting overtime work.
  - 2.4.4.2. Providing work pauses to relieve fatigued muscles and tendon groups. The length of rest time needed depends on the task's overall effort and total cycle time.
  - 2.4.4.3. Increasing the number of employees assigned to a task to alleviate potential injury conditions, such as lifting heavy objects.
  - 2.4.4.4. Using job rotation as an injury prevention measure, not as a response to symptoms.
  - 2.4.4.5. Effective housekeeping program to minimize slippery work surfaces and related hazards such as slips and falls.
- 2.5. Implement Training: General awareness and job specific training including:
- 2.5.1. Discussion of CTD risk factors, symptoms, consequences, safe workplace methods, medical management system, and reporting procedures.
  - 2.5.2. Job specific training for all employees whose work activities place them at risk of CTD.



## SECTION M WORKPLACE VIOLENCE PREVENTION

- 1.0 The County Education Office has an interest in preventing violence in the workplace to protect itself, employees, and others from harm. The County Education Office also has a legal duty, as do all California employers, public and private, to provide a safe workplace. The County Education Office is legally obligated, in certain circumstances, to take action to prevent violent incidents from occurring on the job. In addition to its legal obligations, management also has certain rights it may choose to exercise in its pursuit of providing a safe workplace. These rights, however, are limited in certain circumstances by federal and state laws, including, but not limited to, the Americans with Disabilities Act and individuals' constitutionally protected right to privacy.
  
- 2.0 Management Rights and Legal Obligations
  - 2.1. Cal/OSHA requires employers to implement and maintain a workplace security plan focused on preventing workplace violence.
  - 2.2. Employers must not ignore threats of violence made by or towards its employees.
  - 2.3. An employer may adopt a "Zero Tolerance Policy" prohibiting threats and weapons in the workplace.
  - 2.4. An employer may establish a drug testing policy for employees.
  - 2.5. An employer may seek to obtain a temporary restraining order against an employee for unlawful violence or credible threats of violence.
  
- 3.0 Duty to Provide a Safe Work Environment – Cal/OSHA Requirements
  - 3.1. The California Occupational Safety and Health Act (Cal/OSHA) generally requires employers to provide its employees with safe and healthful working conditions. In 1994, the Department of Industrial Relations, Division of Occupational Safety and Health (DOSH), adopted guidelines for workplace security specifically addressing the problem of violence in the workplace. These guidelines provide information and guidance about workplace security issues. The guidelines also require employers to implement and maintain, as part of their Injury and Illness Prevention Program, a workplace security plan focused on preventing workplace violence. Therefore, the County Education Office, as an employer, is bound by the Cal/OSHA requirements and has an additional duty to provide a safe working environment for its employees.
  - 3.2. While the Guidelines are not enforceable per se, Cal/OSHA is currently enforcing them by way of 3203 of the California Code of Regulations, Title 8. Pursuant to the Guidelines, violence is now a recognized hazard in the workplace that must be addressed in every employers' existing Injury and Illness Prevention Plan (IIPP). Whether or not a violation of 3203 will be found, however, depends on the circumstances of a particular workplace. Cal/OSHA analyzes each situation on a case-by-case basis, considering the particular hazards present in the workplace and what, if any,



measures have been taken in response thereto. Therefore, in order to reduce the risk of being cited for violating 3203, the County Education Office is adopting a workplace security element in their current IIPP addressing the hazard of workplace violence.

#### 4.0 Types of Workplace Violence

- 4.1. Type I Events are the most common type of fatal workplace event and include an act of violence committed by persons having no legitimate relationship to the workplace. Such a person usually enters the workplace to commit a robbery or some other criminal act.
- 4.2. Type II Events include acts of violence committed by a client, customer, or other recipient of a service provided by the affected workplace or the victim. This type mainly applies to service providers, such as health care providers, but also includes assaults on public safety personnel and other public service sector employees.
- 4.3. Type III Events account for a small portion of all fatal workplace injuries but attract the most significant media attention. This type of violence usually involves an assault on an employee, supervisor or manager by a current or former employee, supervisor or manager, or by a person known to a current employee, supervisor or manager, such as a spouse, lover, relative, or friend. These acts of violence may involve an individual seeking revenge for what he or she perceives as unfair treatment by a co-employee, supervisor or manager, or a domestic or romantic dispute in which an employee is threatened in their workplace by an individual with whom they have a relationship outside of work.

#### 5.0 Workplace Security Plan – Preventing Workplace Violence

- 5.1. Preventive Measures. The County Education Office shall:
  - 5.1.1. Demonstrate a strong commitment to prevent workplace violence.
  - 5.1.2. Establish a clear anti-violence management policy.
  - 5.1.3. Develop a system for communicating information about workplace security hazards, including means by which employees can inform County Education Office of hazards without fear of reprisal. SIPE Form 2-588 can be used for this purpose.
  - 5.1.4. Implement a procedure for investigating injuries arising from a workplace assault or threat of assault. The County Education Office’s workers compensation injury investigation process will be used to investigate all workplace assaults or threats.
  - 5.1.5. Train and educate all employees, supervisors, and managers regarding risk factors, crime awareness, assault and rape prevention, how to diffuse hostile situations, and what steps to take during an emergency situation. Workplace violence in-services are available to employees and shall be coordinated through the SIPE Safety Office.
  - 5.1.6. Implement appropriate work practice and physical security measures, as appropriate, such as:



- 5.1.6.1. Control of physical access to the workplace,
- 5.1.6.2. Implementation of a “buddy” system to prevent placing employees alone in a high-risk area,
- 5.1.6.3. Installation of alarm systems and/or “panic” buttons,
- 5.1.6.4. Provide two-way communication system so employees can make contact with other staff members, especially evening shift employees,
- 5.1.6.5. Employment of security personnel.
- 5.1.7. Provide for on-site inspections and security hazard inspections.
- 5.1.8. Utilize post-event procedures such as providing emergency medical care, debriefing employees about the incident, and providing post-event trauma counseling.

## 6.0 Reporting and Recording Workplace Violence

- 6.1. The County Education Office shall record all work-related fatalities and other recordable injuries on Cal/OSHA Form 300. Information relating to a fatality or injury shall be entered on Form 300, no later than 6 working days after receiving information that a recordable incident has occurred. These records shall be retained for 5 years following the end of the year to which they relate.
- 6.2. The County Education Office shall also report injuries arising out of, or in the course of, employment to Workers’ Compensation Administrators. The report shall be made on Form 5020, *Employer’s Report of Occupational Injury or Illness*, and shall be filed within 5 days after the County Education Office obtains knowledge of the injury.
- 6.3. In addition, the County Education Office shall report immediately, by telephone, all “serious illness or injury, or death” to Cal/OSHA. However, “serious illness or injury” excludes injuries, illnesses or death caused by the commission of a Penal Code violation. Thus, even though a workplace assault which results in an employee’s death, injury or illness, is recordable on the Cal/OSHA 300 Log, it may not be reportable to Cal/OSHA if “it is caused by the commission of a Penal Code violation.” The County Education Office shall call the local area Cal/OSHA office located in Ventura California at (805) 654-4581 and use Cal/OSHA Form 4-A when making the call. To avoid a potential violation of these reporting requirements, if there is any doubt as to whether the cause of an injury, death or illness constitutes a Penal Code violation, County Education Office staff shall report the event to Cal/OSHA, or the SIPE Safety Officer.

## 7.0 Workplace Security Evaluation

- 7.1. Cal/OSHA will investigate any and all complaints alleging a workplace security hazard in the same manner as any other complaint. When evaluating a complaint alleging a workplace security hazard, Cal/OSHA compliance personnel shall determine, at a minimum, the following:
  - 7.1.1. Does the workplace have an IIPP which addresses workplace security hazards?



- 7.1.2. How effective is the County Education Office's IIPP in identifying and correcting workplace security hazards and in investigating workplace assaults?
- 7.1.3. Is effective workplace violence prevention training provided to employees?
- 7.1.4. What are the physical characteristics and the work practices of the establishment that impact the security of the employees who work in the establishment?
- 7.1.5. Have assaults occurred in the establishment in the past? If so, how often and what was their severity? What measures were taken to investigate the causes(s) of the assault(s) and what corrective measures were taken by the County Education Office to prevent other assaults?
- 7.1.6. Is the inspected establishment one which is considered to be at high risk of Type I workplace violence event?

## 8.0 Emergency

- 8.1. County Superintendent of Schools: Dr. Susan C. Salcido: 805-964-4711 x5285
- 8.2. County Education Office Safety Coordinator: Mari Minjarez Baptista: 805-964-4711 x5279
- 8.3. SIPE Safety Office: (805) 922-8003
- 8.4. Police or Fire – 911



## SECTION N RESPIRATORY PROTECTION PROGRAM

### 1.0 Scope

- 1.1. The purpose of this program is to establish the necessary requirements and responsibilities to protect employees from possible exposure to hazards through inhalation.
- 1.2. California Code of Regulations, Title 8, Section 5144 mandates that a written standard operating procedure governing the selection and use of respirators be established by every employer whose employees are required to use respirators in the course of their work.
- 1.3. This program will be modified as required due to changes in operations, procedures, chemical usage, or as applicable laws mandate.
- 1.4. This program shall be implemented and enforced when it is clearly impractical to control harmful dusts, fumes, gases, mists, or vapors at their source by engineering or administrative means or when emergency protection is needed. Voluntary use of respiratory protective equipment is also subject to this program.
- 1.5. This program does not cover the use of respiratory protection for atmospheres immediately dangerous to life or health as defined by Section 5144(b).
- 1.6. This program does not apply to those employees whose only use of respirators involves the voluntary use of filtering face pieces (dust masks).

### 2.0 Responsibility

- 2.1. The County Education Office designates the County Education Office Safety Coordinator as their respiratory program administrator.
- 2.2. Administrative responsibilities:
  - 2.2.1. Identify areas requiring the use of respiratory protective equipment.
  - 2.2.2. Assure all personnel receives adequate training and are fit tested to their respirators.
  - 2.2.3. Assure that all equipment within the work group is properly used, serviced, and maintained.
  - 2.2.4. Assure all employees who are required (or may be required) to wear respiratory protective equipment have been medically evaluated and found to be physically capable to use required equipment.
  - 2.2.5. Provide proper respiratory protection at no cost to the employee.
  - 2.2.6. Implement all feasible administrative and engineering controls to reduce the exposure



level as much as possible.

2.3. Employee responsibilities include:

- 2.3.1. Using the respiratory equipment in accordance with established procedures.
- 2.3.2. Maintaining the respirator clean, in good condition, and properly stored.
- 2.3.3. Reporting any equipment malfunction.
- 2.3.4. Assuring adequate respiratory fit is achieved each time the respirator is worn.
- 2.3.5. Reporting any changes in physical well-being.

3.0 Hazard Assessment

- 3.1. Assessments in each work area are necessary to identify materials that may be an inhalation hazard.
- 3.2. Monitoring shall be done to document and calculate the exposure of these operations. Results of the monitoring are usually expressed numerically in terms of an eight-hour time weighted average and/or a ceiling or peak concentration.
- 3.3. The program administrator shall also consult employees who use respirators to assess their views on the effectiveness of the program and to identify problems.

4.0 Hazard Control

- 4.1. Regulations require prevention of worker exposure to harmful levels of airborne contaminants by implementing the following controls:
  - 4.1.1. Engineering Controls - This type of control includes: substitution of a less toxic substance, isolation, encapsulation, or enclosure of the process and/or ventilation.
  - 4.1.2. Administrative Controls - This type of control may involve limiting the time an employee is exposed by limiting the time performing the task.
- 4.2. Engineering and administrative controls shall be implemented to reduce exposure whenever feasible.
- 4.3. Respiratory protection will be used to control an employee's exposure only when engineering controls are being installed or implemented or when engineering or administrative controls fail to adequately control the employee's exposure.

5.0 Operating Procedures. Each employee who uses respiratory protection will follow these operating procedures. The procedures include provisions for selection, instruction and training, cleaning, inspection, and maintenance.

- 5.1. Selection and Issuance. All respiratory protection equipment shall be approved by MSHA and



NIOSH. The correct respirator shall be assigned for each specific job to ensure adequate protection. Supervisors shall ensure that employees use the correct respirator on each job. Voluntary use of respiratory equipment is also subject to this program. Respiratory protection is based on the specific airborne contaminants for which the employee may be exposed, and the exposure levels. Specific contaminants, respirator selections, and cartridge change schedules are listed in Appendix B of the standard. Respirators that are individually assigned shall be marked to indicate to whom it is assigned. The mark must not affect the respirator performance in any way. The date of issuance will also be recorded.

5.2. Training and Education. Employees who are required to wear respiratory protective equipment will receive training. Training will be structured and documented under the direction of the program administrator with the assistance of the SIPE Safety Officer. The training shall be repeated annually to ensure employees have the proper understanding regarding respiratory protection and to ensure they can demonstrate knowledge and skills specific to the hazards and uses of respirators. The training shall include:

- 5.2.1. Explanation of respiratory hazard and exposure.
- 5.2.2. Discussion of why respiratory protection is needed.
- 5.2.3. Discussion of the function, capabilities, and limitation for the equipment.
- 5.2.4. Discussion of the proper care and maintenance of equipment
- 5.2.5. Explanation of the effects of personal factors such as eyewear, facial hair, and physical capabilities.
- 5.2.6. Explanation of medical limitations.
- 5.2.7. Explanation and documentation of required fit testing.
- 5.2.8. Discussion of emergency use situations.
- 5.2.9. Any other applicable information.

5.3. Fit Checks/Testing

- 5.3.1. Fit checks/testing are essential to ensure that a respirator forms a good seal with the wearer's face. This prevents contaminants from leaking into the mask.
- 5.3.2. When the employee is issued a respirator, they will be able to try on a variety of sizes to find one with a comfortable fit. Several tests are then performed to determine proper fit.
- 5.3.3. Employees shall be provided the opportunity to wear the respirator in normal air for an adequate familiarity period. The following fit checks shall be conducted each time a tight-fitting respirator is used:
  - 5.3.3.1. Negative pressure check: The wearer closes off the respirator inlet (cartridges)



and inhales. A vacuum and partial inward collapse of the mask should result. If a vacuum cannot be maintained for at least 10 seconds, readjust the mask and try again.

- 5.3.3.2. Positive pressure check: The wearer closes off the exhalation valve and breathes out gently. Air will escape through any gaps in the seal. The wearer should be careful not to exhale too strongly so as not to force leakage.
- 5.3.3.3. Fit testing within a test atmosphere will also be conducted by introducing a test substance (isoamyl acetate and/or irritant smoke) around the seal of the mask. If the wearer detects a smell or irritation, they should readjust the mask and try again. It may be necessary to try several different sizes or makes of respirators in order to find one that fits properly.
- 5.3.3.4. Employees will wear the equipment in a test atmosphere such as generated by smoke to ensure adequate fit. This type of fit test will be conducted annually.
- 5.3.3.5. Quantitative fit tests provide a numerical measurement of respirator performance and require the use of technical equipment and trained personnel.

5.3.4. There are several factors that may interfere with the fit of a mask. They include:

- 5.3.4.1. Corrective eyewear (glasses) may cause leakage where the mask seal passes over the temple bar.
- 5.3.4.2. Employees who are assigned respiratory protective equipment and require prescription glasses may require glass inserts.
- 5.3.4.3. Facial features - normal variations in size and shape may affect the ability of the mask to seal properly.
- 5.3.4.4. Facial hair - facial hair in the respirator seal area will reduce the ability of the mask to obtain a proper seal. No facial hair will be allowed along the seal areas of the mask.

5.3.5. Fit testing will be administered and documented as part of the respiratory protection training.

5.4. Inspection and Maintenance. All respirators shall be inspected routinely. This includes inspection before and after each use. If any problem is detected during the inspection, which would violate protection, the respirator will not be worn until the problem is corrected. Needed repairs and problems will be reported immediately to the supervisor.

5.4.1. The tightness of connections and the condition of face pieces, head bands, valves, connecting tubes, and canisters shall be inspected before use.



- 5.4.2. Masks shall be cleaned and disinfected after each use.
- 5.4.3. Respirator filters shall be replaced when the user notices an increased resistance inhaling or as the odor or taste of the contaminant is noticed by the user. If in doubt, the filters shall be changed.
- 5.4.4. All equipment will be MSHA/NIOSH approved and certified. Equipment without this approval will not be used.
- 5.4.5. All replacement parts must also have the approval. Respirators are approved as a system. Cartridges, canisters, filters, valves, etc., cannot be interchanged between different manufacturers or between different respirator models unless specifically approved.
- 5.4.6. Respirators and cartridges must be approved for the hazardous atmosphere to which the worker will be exposed.
- 5.4.7. Repair shall be conducted by a qualified person.
- 5.4.8. All required inspections and maintenance procedures for respiratory equipment will be the responsibility of each employee for whom the equipment is assigned. The program administrator will be responsible for ordering parts and ensuring that mandatory inspections and maintenance is documented.
- 5.4.9. Sanitation and Storage
  - 5.4.9.1. After removing filters and straps, the respirator shall be washed in mild soap solution or immersed in a sanitary solution recommended by the manufacturer for at least two minutes. The respirator shall be air dried. Prepackage respirator wipes may be used for maintaining freshness between cleanings.
  - 5.4.9.2. Respiratory equipment shall not be passed on from one person to another until it has been cleaned and sanitized.
  - 5.4.9.3. Respirators will be stored to protect against dust, sunlight, extreme temperatures, excessive moisture, or damaging chemicals when not in use.

## 6.0 Medical Surveillance

- 6.1. Employees who are required to wear respiratory protection shall have a medical evaluation from a physician and shall complete a Respirator Medical Evaluation Questionnaire. This requirement shall also apply to the voluntary use of respirators. The physician shall provide a written statement that indicates the employee's physical ability to safely wear respiratory protective equipment. Medical evaluations conducted by a licensed physician shall be required initially and pursuant to the following:
  - 6.1.1. An employee reports medical signs or symptoms that are related to ability to use a respirator;



- 6.1.2. A Physician or other Licensed Health Care Professional (PLHCP), supervisor, or the respirator program administrator informs the County Education Office that an employee needs to be reevaluated;
  - 6.1.3. Information from the respiratory protection program, including observations made during fit testing and program evaluation, indicates a need for employee reevaluation; or
  - 6.1.4. A change occurs in workplace conditions (e.g., physical work effort, protective clothing, temperature) that may result in a substantial increase in the physiological burden placed on an employee.
- 6.2. If changes in an employee's medical status have occurred, the physician may recommend further evaluation or restrict respirator use.
  - 6.3. There are several medical conditions that could possibly interfere with respirator usage. The PLHCP shall determine what health and physical conditions are pertinent.

## 7.0 Program Surveillance and Evaluation

- 7.1. Appropriate and ongoing surveillance of all work areas is critical in assessing the adequacy of the program and employee protection.
- 7.2. Items to consider when evaluating the program include increases in exposure concentration, the introduction of other toxic substances, or other conditions that increase the degree of employee exposure.
- 7.3. The program effectiveness shall be evaluated by regular inspection of the work areas and through review by management at least annually. This written program shall be updated as any new information arises or as soon as conditions warrant such revision.

## 8.0 Recordkeeping

- 8.1. The following records are to be maintained by the program administrator
  - 8.1.1. The qualitative fit test.
  - 8.1.2. Date of employee training and type of respirator.
  - 8.1.3. Respirator Assignment Record.
  - 8.1.4. Documentation of injuries involving the use of respirators.



## SECTION O HEAT ILLNESS PREVENTION

### 1.0 Purpose

- 1.1. A Heat Illness Prevention Standard has been established to identify and control exposure to heat, which may be hazardous to County Education Office employees in their work environments, and to ensure appropriate precautions are taken to prevent heat illness.

### 2.0 Authorities

- 2.1. California Employers with any outdoor places of employment must comply with the Heat Illness Prevention Standard, California Code of Regulations - Title 8, Subchapter 7. General Industry Safety Orders Group 2. Safe Practices and Personal Protection, Article 10. Personal Safety Devices and Safeguards 3395. Heat Illness Prevention. These procedures have been created to assist employers in crafting their heat illness prevention procedures, and to reduce the risk of work-related heat illness among their employees.

### 3.0 Definitions

- 3.1. Acclimatization means temporary adaptation of the body to work in the heat that occurs gradually when a person is exposed to it. Acclimatization peaks in most people within four to fourteen days of regular work for at least two hours per day in the heat.
- 3.2. Heat Illness means a serious medical condition resulting from the body's inability to cope with a particular heat load, and includes heat cramps, heat exhaustion, heat syncope, and heat stroke.
- 3.3. Environmental risk factors for heat illness means working conditions that create the possibility that heat illness could occur, including air temperature, relative humidity, radiant heat from the sun and other sources, conductive heat sources such as the ground, air movement, workload severity and duration, protective clothing, and PPE worn by employees.
- 3.4. Personal risk factors for heat illness means factors such as an individual's age, degree of acclimatization, health, water consumption, alcohol consumption, caffeine consumption, and use of prescription medications that affect the body's water retention, or other physiological responses to heat.
- 3.5. Preventative recovery period means a period of time to recover from the heat in order to prevent heat illness.
- 3.6. Shade means blockage of direct sunlight. Canopies, umbrellas and other temporary structures or devices may be used to provide shade. One indicator that blockage is sufficient is when objects do not cast a shadow in the area of blocked sunlight. Shade is not adequate when heat in the area of shade defeats the purpose of shade, which is to allow the body to cool. For example, a car sitting in the sun does not provide acceptable shade to a person inside it, unless the car is



running with air conditioning.

4.0 Covered Employees. Santa Barbara SIPE Safety Office has identified the following categories of employees as having exposure to heat due to outdoor work:

- 4.1. Coaches
- 4.2. Grounds Workers
- 4.3. Maintenance Workers
- 4.4. Campus monitors/yard duty supervisors
- 4.5. Custodians
- 4.6. Viticulture Workers

5.0 Responsibilities.

5.1. Risk Management has the following responsibilities:

- 5.1.1. Maintaining a written program in compliance with current Federal and State regulations, including annual updates.
- 5.1.2. Coordinate, implement, conduct and monitor any training required by the regulations, including:
  - 5.1.2.1. The environmental and personal risk factors for heat illness;
  - 5.1.2.2. The County Education Office's procedures for complying with the requirements of this standard;
  - 5.1.2.3. The importance of frequent consumption of small quantities of water, up to four cups per hour, when the work environment is hot, and employees are likely to be sweating more than usual in the performance of their duties;
  - 5.1.2.4. The importance of acclimatization;
  - 5.1.2.5. The different types of heat illness and the common signs and symptoms of heat illness;
  - 5.1.2.6. The importance to employees of immediately reporting to the County Education Office, directly or through the employee's supervisor, symptoms or signs of heat illness in themselves, or in co-workers;
  - 5.1.2.7. The County Education Office's procedures for responding to symptoms of possible heat illness, including how emergency medical services will be provided should they become necessary;



- 5.1.2.8. The County Education Office's procedures for contacting emergency medical services, and if necessary, for transporting employees to a point where they can be reached by an emergency medical service provider;
- 5.1.2.9. The County Education Office's procedures for ensuring that, in the event of an emergency, clear and precise directions to the worksite can and will be provided as needed to emergency responders.
- 5.1.3. Providing all employees in the departments listed in section 4.0 with information about the program.
- 5.1.4. Assisting employees and supervisors in implementing the requirements of Santa Barbara SIPE Heat Illness Prevention Program.
- 5.1.5. Assisting sites and departments in identifying and implementing feasible engineering controls.
- 5.1.6. Maintaining records as required under the regulations.
- 5.1.7. Conduct facility audits to assess exposure in the workplace and use of engineering and administrative controls in order to ensure their effectiveness.
- 5.2. Department Managers and Supervisors will be responsible for:
  - 5.2.1. Informing their staff of the location and availability of this written program, training materials, and information supplied to the County Education Office by the U.S. Department of Labor or Cal/OSHA.
  - 5.2.2. Informing their staff of the equipment, operations or areas where there may be a concern.
  - 5.2.3. Providing and ensuring their staff use engineering controls and/or wear appropriate clothing to prevent problems.
  - 5.2.4. Provide materials and equipment to ensure fulfillment of their operational goals and objectives in a safe work environment.
  - 5.2.5. Ensuring Risk Management is notified of a need to evaluate work conditions under this standard.
  - 5.2.6. Maintaining records as required under the regulations.
- 5.3. The immediate supervisor (administrator or classified manager) is responsible for:
  - 5.3.1. Ensuring compliance with this standard by meeting with the employee involved and applying counseling and progressive discipline in accordance with established County Education Office policy and procedures.



5.3.2. Ensure employees listed in Section 4.0 complete the Heat Illness Prevention online training module annually.

5.4. Employees are responsible for:

5.4.1. Notifying their supervisor and or Risk Management of the need to evaluate work conditions that may cause issue.

5.4.2. Using engineering controls or wearing appropriate clothing to prevent issue in compliance with Safety Operating Procedures (SOPs), postings, instruction or training received.

5.4.3. Maintain physical fitness in order to meet the physical demands of their job.

## 6.0 Components of Standard

6.1. The elements reflected within this Heat Illness Prevention guide are those contained in Title 8 of the California Code of Regulations, Section 3395 (T8 CCR 3395) and consist of the following:

6.1.1. Provision of water - Water is a key preventive measure to minimize the risk of heat related illness. Water will be available for all outdoor activities.

6.1.2. Access to shade - Access to rest and shade or other cooling measures are important preventive steps to minimize the risk of heat related illnesses.

6.1.2.1. When outdoor temperature exceeds 80 degrees Fahrenheit, shade must be available or provide employees with ventilation or cooling.

6.1.2.2. Employees shall be allowed and encouraged to take a cool down rest no less than five minutes, no more than 15 minutes when they feel the need to do so to protect themselves from overheating.

6.1.3. Written procedures - Written procedures help reduce the risk of heat related illnesses and ensure that emergency assistance is provided without delay.

## 7.0 Training

7.1. Training is critical to help reduce the risk of heat related illnesses and to assist with obtaining emergency assistance without delay.

7.2. All employees will receive heat illness prevention training prior to working outdoors.

7.3. Heat illness prevention training is available on-line via [sipeonlinetraining.com](http://sipeonlinetraining.com).

## 8.0 Recordkeeping

8.1. All medical information obtained under this policy will be treated in accordance with the Confidentiality of Medical Information Act (Civil Code Sections 56-56.37), and the General



Industry Safety Orders, Section 3204. Medical information will be kept in separate files from personnel records and shall be available for inspection by an employee upon request.

## 9.0 Reporting

9.1. "WHISTLEBLOWER" PROTECTION: California Labor Code Section 6310 prohibits employers from firing or discriminating against any worker because the worker has informed their employer, or filed a complaint with Cal/OSHA, about unsafe or unhealthy working conditions. Employees have a right to inform their employer or file a complaint with Cal/OSHA when unsafe conditions exist at their workplace, and this right is assured to them under the California Occupational Safety and Health Act of 1973.

## 10.0 Contractors

10.1. Contractors shall maintain and enforce an Injury and Illness Prevention Program as required by State law, and in signing any contractual agreement with the County Education Office, make the following certification:

10.2. "Contractor is aware of the provisions of California Labor Code, Division 5, and of the California Code of Regulations, Title 8, and shall maintain an active comprehensive Injury and Illness Prevention Plan (IIPP) - including applicable standards (e.g., ergonomic, haz-com) in accordance with such provisions before commencing the performance of the contractual agreement. The IIPP shall be available upon request."





## **SECTION P**

### **AUTOMATED EXTERNAL DEFIBRILLATION PROGRAM**

The County Education has deployed an Automated External Defibrillation (AED) Program in many of its work locations and has identified volunteers to implement the procedure in case of appropriate emergency. The SIPE Safety Office shall train and work with employees who volunteer to serve as trained responders in the event of a medical emergency requiring cardiopulmonary resuscitation (CPR) and the use of an AED. The SIPE Safety Office shall provide necessary maintenance of equipment. The County Education Office volunteers shall prepare necessary paperwork in connection with the use of these emergency procedures in accordance with SIPE guidelines.



## SECTION Q USE OF A SAFETY SUPPORT BELT

- 1.0 The use of back belts
  - 1.1. Back belts are meant to be a reminder of good body mechanics, not a replacement for good body mechanics.
  - 1.2. Back belts provided by the SIPE Safety Officer are issued as safety items. Back belts do not replace the concepts of good lifting techniques or help employees lift beyond their means.
- 2.0 The following job classifications have been identified as recipients of back belts:
  - 2.1. Maintenance
  - 2.2. Custodial
  - 2.3. Warehouse
  - 2.4. Food Service
  - 2.5. Special Education - for disabled students
  - 2.6. Bus Drivers - for disabled students
  - 2.7. Mechanics
  - 2.8. Groundkeepers
- 3.0 Supervisors requesting back belts shall contact the SIPE Safety Officer. Upon approval of the request, employees will be directed to contact the vendor for sizing and training on the proper use of the belts.
- 4.0 Back belts are issued on a one-time basis only. Any replacements needed, i.e., worn out belts, stolen belts, etc. will be the responsibility of the employee.
- 5.0 How to wear back belts:
  - 5.1. Back belts should be worn low across the back to support the L3 and L5 vertebrae of the back.
  - 5.2. A corset-style back belt consists of two elastic sub-assemblies joined as one unit. The first assembly, often referred to as the primary "belt", has the purpose of positioning the boning stays properly on the body. The second assembly, often referred to as the cinch "strap", is joined at the center back of the primary belt and closes over the boning stays sewn into the primary belt, exerting pressure which forms the stays to the shape of the lower back.
  - 5.3. Shoulder straps are not suspenders. Just the opposite, a tight shoulder strap adjustment works against the principle of lumbar locking by potentially pulling the back support up the body and out of the desired low-on-the hips position.

- 5.4. The purpose of the shoulder straps is twofold: (1) Compliance - a supervisor looking over a group of employees can readily confirm by looking for shoulder straps over clothing that workers have their assigned belt with them, and (2) convenience - when not engaged, the back supports will hang loosely like a vest from the shoulders and remain available when work resumes.