



**BAINBRIDGE
ISLAND**

SCHOOL DISTRICT No. 303

ACCIDENT

PREVENTION

PROGRAM

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SAFETY AND HEALTH POLICY

It is the policy of this district to promote and provide safe, healthful working conditions and practices for all district employees. Safety and health are among our principle responsibilities.

In order to fulfill the conditions of this policy, the district will provide safety information, safety orientations, and appropriate safety training as a means of protecting employee welfare. We aim to resolve safety and health problems through prevention.

Administration is wholly responsible for developing an effective safety and health program.

The district has adopted rules and regulations governing the safe performance of assigned work and the use of district equipment. By accepting the mutual responsibility of safe operating practices, we all contribute to the wellbeing of our personnel and subsequently the best interest of the district.



Superintendent/or Designee

12/21/2020

Date

PROGRAM OVERVIEW

This accident prevention program was developed in order to fully implement the district's safety and health policy. The elements of this program cover a broad spectrum of areas and are designed to prevent accidents and injuries. Taken individually, the program elements have minimal effect. As an integrated program, and with the support of employees at all levels, the accident prevention program can reduce the number and severity of job related injuries to district employees.

Related District Policies:

Policy 3432 Emergencies

Policy 6510 – Playground Equipment

Procedure 6510 – Playground Equipment

Policy 6511 – Staff Safety

Policy 6512 Infection Control Program

Procedure 6512 Infection Control Program

Policy 6520 – Hazardous Materials

Procedure 6520 – Hazardous Materials

Policy 6522 – Integrated Vegetation and Pest Management

Procedure 6522 – Integrated Vegetation and Pest Management

Policy 6883 – Closure of Facilities

RESPONSIBILITIES

The School District is required by WAC 296-800-140 to develop a formal, written Accident Prevention Program (APP) tailored to the needs of our particular workplace and to the types of hazards involved there. All employees are expected to abide by all safety procedures and rules applicable to their particular work situation. Each employee is accountable for their own safety and shares responsibility for the safety of other employees.

Administration – Each administrator is responsible for implementing safety and health procedures within their area of responsibility. Other responsibilities include:

- Delegating authority to supervisors and holding them accountable for accident prevention and reporting procedures as specified herein.
- Ensure that safety orientation training, as well as ongoing safety training, is accomplished within their divisions.
- Ensure compliance with WAC 296-800-32005, to promptly report fatalities or multiple hospitalization accidents.
- Provide personal protective equipment required to safely accomplish tasks.

Supervisors – The safety and health of the employees they supervise is a serious responsibility of each supervisor. To meet this obligation, supervisors shall:

- Ensure that all safety and health rules, standards, and procedures are observed.
- Orient and train employees in safe and efficient work methods, and see that they are practiced.
- Follow-up and act upon suggestions made by employees and the safety committee.
- Ensure that personal protective equipment is worn when the task dictates.

All Employees – Employees are required to:

- Attend the initial safety orientation/job specific safety training.
- Know and comply with all safety rules and procedures.
- Cooperate with co-workers, supervisors and the safety committee to assist in eliminating accidents.
- Immediately report all accidents to immediate supervisors regardless of severity or type.
- Complete an accident report and submit it to the supervisor within 24 hours or the next working day.
- Serve on safety committees when elected or selected.
- Maintain all personal protective equipment in a safe and usable condition, and to wear such equipment when tasks dictate.
- Participate in provided safety training.
- Perform all assigned tasks in a safe manner to avoid endangering themselves or their co-workers.

SAFETY & HEALTH COMMITTEE

1. The Safety Committee will be composed of employer-selected and employee-elected members (WAC 296-800-13020).
 - A. The term of employee-elected members is a maximum of one year. Should a vacancy occur on the committee, a new member will be elected prior to the next scheduled meeting.
 - B. The number of employer-selected members will not exceed the number of employee-elected members.
2. The safety committee will have an elected chairperson.
3. The safety committee is responsible for determining the frequency of committee meetings (minimum quarterly.)
 - A. The committee is responsible for determining the date, hour and location of the meeting.
 - B. The length of each meeting will not exceed one hour except by majority vote of the committee.
4. Minutes of each committee meeting will be prepared and filed for a period of at least one year and shall be made available for review by noncompliance personnel of the Division of Industrial Safety and Health.
5. Safety and health committee meetings will address the following:
 - A. A review of the safety and health inspection reports to assist in correction of identified unsafe conditions or practices.
 - B. An evaluation of the accident investigations conducted since the last meeting to determine if the cause of the unsafe acts or unsafe condition involved was properly identified and corrected. Review and investigate any hazard reports received either orally or in writing.
 - C. Periodic evaluation of the accident and illness prevention program, as implemented, and make recommendations for improvements.
 - D. Evaluate employee safety suggestions.
 - E. Attendance shall be documented.
 - F. All items discussed will be documented.
6. Meeting minutes will be distributed to each location for posting on the Safety Bulletin Board.

SAFETY BULLETIN BOARD

Purpose: The bulletin board is designed to increase the employees' awareness of safety and health issues and to communicate management's safety message.

Procedure: In order to have an effective bulletin board, the following issues should be considered

- A specific safety bulletin board or portion of an existing board should be designated and that spot reserved EXCLUSIVELY for safety material.
- Posters, safety committee minutes, and other information that becomes dated or worn should be changed periodically.

The following publications will be posted

- Job Safety and Health Law (F416-081-909)
- Notice to Employees Self-Insured (F207-037-909)
- Your Rights as a Worker (F700-074-909)
- A list of all valid first aid cardholders and location(s) of first aid kit(s)
- Most current safety committee meeting minutes
- Hazard reporting form
- Accident/Incident reporting form

You are not required to post the Spanish version of these publications unless a majority of your employees speak Spanish.

SAFETY ORIENTATION

Purpose: Orientation of new employees, re-hires, part-time employees, substitutes, temporaries and those transferred from another department within the district will occur within the first two weeks of employment on the new job. This program will provide an introduction of district policies and rules and will include reviewing the district's written safety and claims management procedures. The orientation should include a tour of the facilities to acquaint the employee with the entire operation. The employee will also be advised of their job performance acceptability level.

Procedure: The immediate supervisor of the employee will provide job specific safety training, covering all aspects of the safety program as it relates to each employee and their assigned duties. This training will be annotated on a "Safety Orientation" checklist, an example is included in Appendix A. Both employee and supervisor will sign, indicating that orientation was conducted. The original sign-off sheet will be sent to the personnel office for file placement and supervisors will retain a copy for their desk files.

ACCIDENT INVESTIGATION AND REPORTING

Purpose: Since every accident includes a sequence of contributing causes, it is possible to prevent a recurrence by recognizing and eliminating those causes. The removal of a single cause can prevent a recurrence of an accident/incident. The District and/or Supervisor can request an after-accident investigation be conducted by the Olympic Region ESD 114 Workers' Compensation Trust.

Medical Emergency Procedure: An aid car will be called in the event that the employee needs immediate medical attention. The telephone number is **911**.

Documentation Procedures – All accidents/incidents involving minor injuries and “near-misses” are to be reported to the immediate supervisor as soon as possible after the accident on the *Employee Incident Report form*. A “near-miss” accident is defined as an unplanned event where damage resulted but there was no personal injury to employees, **or** where damage did not result but the likelihood of personal injury to the employee was great. If the conditions that permitted the “near-miss” or “close-call” to exist are not eliminated, they will continue to be an issue, which may result in future accidents and/or personal injury to the employee(s). The supervisor will investigate and will complete the supervisor portion of the EIR (Employee Incident Report).

Minor Injuries – (Requiring doctor/outpatient care.) After emergency actions are taken following an accident, the immediate supervisor, in conjunction with any witnesses to the accident to determine the cause, will conduct an investigation of the accident. The completed *Supervisor's Report of Investigation* form will be sent out: one copy to the District Liaison, one copy to the Safety Committee Chairperson, and one copy to Olympic Region ESD 114 Workers' Compensation Trust.

Major Injuries – (Fatality or multiple hospitalizations)

- The district safety contact and supervisor are to be notified immediately by the person in charge and an investigation under the direction of the district will be conducted. In addition to the district investigator, the inspection party will include the claims manager, supervisor of the injured person(s), a representative from the safety committee (supervisor-staff), and an employee representative.
- In the case of a fatality, or if one or more employees are hospitalized, the supervisor will report the accident to the nearest office of the Department of Labor and Industries, phone number **1-800-423-7233** within eight hours of the occurrence of the accident. The report shall relate the circumstances, the number of fatalities and the extent of any injuries.

Note: Any equipment involved in an accident resulting in an immediate fatality is not to be moved until a representative of the Department of Labor and Industries investigates the accident and authorizes its removal. If, however, it is necessary to move the equipment to prevent additional accidents or to remove the victim, the equipment may be moved as required.

SAFETY AND HEALTH EDUCATION TRAINING

Purpose: On-going safety and health education programs will be provided for all employees in an effort to increase awareness of accident causal factors. This will also improve morale by demonstrating management's concern for the individual employee, and to promote acceptance of safety and health regulations by presenting accident prevention as a positive, desirable, and integral part of all activities.

Procedure: The school district will provide a systematic accident prevention-training program for the employee. This program will provide online and on-the-job training in work areas and will familiarize each employee with the district's safety and health requirements. The following training can be done in person with a Supervisor and/or through SafeSchools Online Training: (<https://bainbridge-wa.safeschools.com>)

All Employee Safety and Health Training

Frequency of Refresher

1. New Employee Orientation	Initial Only
2. Coronavirus Awareness	Initial Only
3. Coronavirus: Managing Stress and Anxiety	Initial Only
4. Accident Prevention Program	Initial/Changes
5. Back Injury Prevention	Initial/3 years
6. Slip and Fall Prevention	Initial/Annual
7. Bloodborne Pathogens	Initial/Annual
8. Repetitive Trauma/Ergonomics	Initial/2 years
9. Office Safety	Initial/3 years
10. Personal Protective Equipment (PPE)	Initial/Changes
11. Sprain/Strain Prevention	Initial/Annual
12. Emergency Procedures	Initial/Changes
13. Hazard Communications (HAZCOM)	Initial/3 years
14. Supervisor's Role in Safety (for supervisors only)	Initial/Changes

Maintenance/Custodial

Frequency of Refresher

- | | |
|---|-----------------|
| 1. Slips, Trips & Falls: Custodians, Maintenance & Facilities | Initial/2 years |
| 2. Back Injury & Lifting: Complete | Initial/2 years |
| 3. Ladder Safety | Initial/2 years |
| 4. Personal Protective Equipment (PPE) | Initial/Annual |
| 5. Asbestos Awareness (2 hr.)/Refresher (20 min.) | Initial/Annual |
| 6. Hazard Communications (HAZCOM) | Initial/2 years |
| 7. CPR/First Aid | Initial/2 years |
| 8. Aerial Lift Safety | Initial/2 years |
| 9. Forklift Safety | Initial/2 years |
| 10. Scissor Lift Safety | Initial/2 years |
| 11. Utility Cart Safety | Initial/3 years |
| 12. Confined Spaces | Initial/3 years |
| 13. Fall Protection | Initial/Annual |
| 14. Lockout/Tagout | Initial/3 years |
| 15. Hand & Power Tool Safety Overview | Initial/3 years |
| 16. Respirable Crystalline Silica Awareness | Initial/2 years |
| 17. Welding, Cutting and Brazing Safety Awareness | Initial/2 years |

Information Technology (IT)

Frequency of Refresher

- | | |
|---|-----------------|
| 1. Slips, Trips & Falls: Custodians, Maintenance & Facilities | Initial/2 years |
| 2. Back Injury & Lifting: Complete | Initial/2 years |
| 3. Ladder Safety | Initial/2 years |
| 4. Cybersecurity Overview | Initial/Annual |

Grounds Keeping

Frequency of Refresher

- | | |
|-------------------------------|-----------------|
| 1. Hearing Conservation | Initial/2 years |
| 2. Insect Bites | Initial/2 years |
| 3. Heat Illness Prevention | Initial/Annual |
| 4. Commercial Mower Safety | Initial/3 years |
| 5. Integrated Pest Management | Initial/Annual |

Food Service

Frequency of Refresher

- | | |
|-------------------------------------|-----------------|
| 1. Food Service Equipment: Safe Use | Initial/2 years |
| 2. Back Injury & Lifting: Complete | Initial/2 years |

OCCUPATIONAL INJURY AND ILLNESS RECORDKEEPING

Purpose: Occupational Injury and Illness Logs are maintained and posted in accordance with federal and state standards. They are posted annually to inform employees of the number and type of illnesses and injuries suffered at each place of employment.

Procedure: Educational entities have been granted a partial exemption from the requirement to maintain occupational injury and illness records. The district, however, may be selected to participate in a survey for statistical purposes. In that case, the district will be notified by the U.S. Department of Labor of its selection during the year prior to the survey in order to record data.

HAZARD REPORTING

Purpose: To provide each employee the opportunity to report, without fear of reprisal, any unsafe act, conditions or procedures that they may observe.

Procedure: Employees will report hazards to either their immediate supervisor or to the Safety Committee. Hazards may be submitted in writing or orally and may be submitted anonymously. The supervisor or safety committee will review, validate, and take corrective actions on valid hazards. The originator will be notified of any action planned or implemented for the correction or mitigation of the hazard. Action on hazard reports will be covered in the safety committee meeting minutes.

Reporting Forms can be found in Appendix B.

HAZARD COMMUNICATIONS PROGRAM

Purpose: The District Hazard Communication Program was developed to ensure that employees are informed of the chemical hazards associated with products used in their work areas.

Procedure: All employees will be provided training on the District Hazard Communications Program during the initial orientation/job safety training conducted by their supervisor. Employees will be informed of any hazard which may exist in relation to the products they will use in the performance of their jobs. The Safety Data Sheets (SDSs) will be used to show potential health hazards, first aid treatment, required personal protective equipment and actions to take in the event of a spill. Whenever a new product is introduced into the work area, the above training items will be covered with all affected personnel. Copies of SDSs for all products used in a work location will be maintained in that location and/or accessible to employees through or online through a SDS Management Program.

Safety Data Sheets (SDS)

- An SDS will be obtained for every hazardous chemical at the time the chemical is obtained. No chemical will be stored or used without an SDS.
- Copies of SDS for all hazardous chemicals in use will be kept in the site SDS manual and at the district office, or online through a SDS Management Program. SDS will be available to all employees during each work shift.
- The district office will keep a copy of all archived SDS after they are no longer used. These records should be kept for at least 30 years.

Container Labeling – Labels of containers of hazardous chemicals must be easy to read and in place on every container.

- Labels must have the name of the chemical or common name (adequate information for finding the SDS) and general information about the health and physical hazards of the chemical.
- Original labeled containers will be used at all times when possible. If the original label becomes difficult to read, it will be replaced.
- Whenever a quantity of material is transferred into a non-labeled container for use it shall be only in a quantity that will be used during the shift by the person making the transfer. If the chemical is kept in the container past the end of the shift, it must be labeled.
- If quantities of materials are to be used in containers other than the original labeled container they must be clearly labeled.

Employee information and Training – The Supervisor will make sure that before starting employment, each new employee attends a health and safety orientation that includes information and training on the following, and including specific information about specific chemicals the employee may be exposed to on site:

- An overview of the Hazard Communication Standard.
- Hazardous chemicals present at their workplace.
- Physical and health risks of the hazardous chemical and the symptoms of overexposure.
- How to determine the presence or release of hazardous chemicals in their work area.
- How to reduce or prevent exposure to hazardous chemicals through use of control procedures, work practices, and personal protective equipment.
- Procedures to follow if employees are overexposed to hazardous chemicals.
- How to read labels and review SDS to obtain hazard information.
- The location of the SDS binder and/or online SDS management program and written hazard communication program.
- Whenever there is a change in chemicals used, the supervisor will make sure all employees receive information or refresher training.

Hazard Communication Standard Staff Responsibilities

Building Administrators or Supervisors

- Maintain a list of hazardous chemicals used or stored in their work area, can be done through an online SDS management program.
- Submit new safety data sheets (SDS) to the SDS manager for database inclusion.
- Obtain/maintain copies of (SDS), as required, for each hazardous chemical used or stored in work areas and make the accessible to employees during each work shift.
- Review SDS received to make sure it is current and complete.
- If an SDS appears to be outdated or incomplete, send a letter to the manufacturer requesting a current and complete SDS.
- Make this written Hazard Communication Program available, upon request, to all employees.

Supervisors

- Ensure that all new chemicals introduced or used in work areas under their responsibility have SDSs readily accessible and inform employees of these locations
- Ensure that employees under their supervision who work with hazardous chemicals and/or whose work area contains hazardous chemicals receive the general hazard communication training when hired, and

receive work area specific training prior to their initial assignment of working with and/or being exposed to hazardous chemical(s) in work area. This includes any new chemical hazards introduced in the work area subsequent to initial training, those associated with non-routine tasks, and those introduced by non-District personnel (subcontractors, vendors, etc.).

- Ensure that employees are training in use of any recommended PPE and environmental controls as listed on the SDS, and they use it as instructed

SDS manager

- Maintains a district-wide file of safety data sheets (i.e., the master file) for all hazardous chemicals on each site, can be done with binders and/or through an online SDS management program
- Maintains a list of all hazardous chemicals used and stored on site, can be done with binders and/or through an online SDS management program
- Provides a summary of this Hazard Communication Program to subcontractors who will perform work onsite.
- Archives the chemical lists and SDS from prior years, so that the district has records, which include the chemical list by year and which detail the chemical, where it was used and when it was in use.

Science Teachers

- Science teachers shall follow procedures in this policy as it applies to an inventory and SDS for chemicals in their classrooms. In addition, they shall be provided general Hazard Communication and operation specific training if, as a part of their job, they use hazardous chemicals and/or are exposed to hazardous chemicals. Training shall be coordinated by their Building Administrator.
- If applicable, science teachers will also comply with the Laboratory Chemical Hygiene Plan in their site specific APP.

HAZCOM Chemical Inventory List (Site Specific)

Chemical Name	Manufacturer	Location Used

Hazard Communication Standard Pictogram

As of June 1, 2015, the Hazard Communication Standard (HCS) will require pictograms on labels to alert users of the chemical hazards to which they may be exposed. Each pictogram consists of a symbol on a white background framed within a red border and represents a distinct hazard(s). The pictogram on the label is determined by the chemical hazard classification.

HCS Pictograms and Hazards

Health Hazard



- Carcinogen
- Mutagenicity
- Reproductive Toxicity
- Respiratory Sensitizer
- Target Organ Toxicity
- Aspiration Toxicity

Flame



- Flammables
- Pyrophoric
- Self-Heating
- Emits Flammable Gas
- Self-Reactives
- Organic Peroxides

Exclamation Mark



- Irritant (skin and eye)
- Skin Sensitizer
- Acute Toxicity
- Narcotic Effects
- Respiratory Tract Irritant
- Hazardous to Ozone Layer (Non-Mandatory)

Gas Cylinder



- Gases Under Pressure

Corrosion



- Skin Corrosion/Burns
- Eye Damage
- Corrosive to Metals

Exploding Bomb



- Explosives
- Self-Reactives
- Organic Peroxides

Flame Over Circle



- Oxidizers

Environment

(Non-Mandatory)



- Aquatic Toxicity

Skull and Crossbones



- Acute toxicity (fatal or toxic)

EMERGENCY ACTIONS

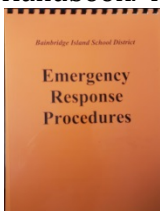
Purpose: The purpose of the plan is to identify emergency responsibilities for the School District and its employees. To inform employees of the proper actions that needs to be taken during various emergency situations. Upon assignment to an office or work area, if you have a disability which may limit or impede your ability to evacuate the building in a timely manner, notify Human Resources.

Procedure: All employees will be provided training on emergency actions during the initial orientation/job safety training. The plan will be tested on a regular basis through drills and any updates or changes will be issued at staff meetings. Employees are also encouraged to review the plan periodically. The Emergency Action Plan will include information on:

- Basic emergency response plan
- Emergency response teams
- Site-specific hazard vulnerabilities
- Evacuation procedures
- Lockdown procedures
- Emergency signaling system
- Notification procedures
- Training/drill requirements
- Sample training scenarios
- Crisis debriefing procedures

Emergency Handbook/Chart - Provides general information on how to respond to specific emergencies and is available throughout buildings and in every classroom. Employees should locate at least two escape routes from their work area. Use one as a secondary escape route in case smoke or fire blocks the primary route. Evacuation maps are posted in every classroom on BISD property, maps should be posted in a clearly visible location. Evacuation maps also contain the locations of fire extinguishers, AED's and first aid kits. Maps outlining building specific emergency utility shutoffs are located in the custodial offices at each site.

Upon recognition of an emergency, personnel will respond using the Emergency Response Plan and/or Emergency Handbook. If assistance by emergency response agencies is required, the employee should dial 911, and then notify School District Administration.



FIRST AID

Purpose: To ensure that each district employee is afforded quick and effective first aid treatment in the event of an on-the-job injury.

Procedure: Whenever an occupational injury or illness occurs the first obligation is to provide the injured or ill employee with first aid and/or other appropriate medical treatment. The severity of the injury or illness determines whether or not the employee is cared for at the worksite or transported to a medical facility for treatment.

Medical Emergency

- Assess the situation through the examination of the victim. Check for medical bracelets or tags around the neck.
- DO NOT LEAVE THE VICTIM UNATTENDED.
- Call out for assistance if no one is nearby.
- Assign someone to call 911 and have them provide responder's with the victim's location.
- Only trained personnel should administer first aid. If you are not a qualified first aid provider then find someone qualified in first aid and a first aid kit (also the AED if the victim has no pulse).
- Do not move the victim unless there are in a location where a life-threatening situation exists.
- Assign someone to go outside and meet the emergency medical service providers.
- If there are other people available assign someone else to contact the administrator in charge.

Note: Persons with serious injuries/illnesses should NOT be transported in private vehicles or drive himself or herself to the doctor's office or hospital. Contact 911 and the Emergency Responders (EMS) will work with the injured person to determine what kind of transport is appropriate.

First Aid Training - It is the employee's responsibility to attend first aid certification training if it is required on his/her job description.

- All PE and health teachers must have a first aid card: per OSPI.
- All school bus drivers must have a first aid card: per OSPI.
- All day care workers must have a first aid card: per WA State DOH.
- All coaches must have a valid first aid card: per WIAA.
- Maintenance workers that perform construction work must have someone onsite with a first aid card: per L & I.

- Any Instructors with students on trips where there will not be medical services close by must have a first aid card and CPR training: per WIAA.

Employees who provide first aid should only do so to their level of training that they have received. Employees who provide first aid are protected under RCW 4.24.300 (Good Samaritan Law).

First Aid Kits

- First aid kits will be maintained at each facility and their locations will be posted on the Site Map and shown to each employee during the safety orientation. If first aid kits are not clearly visible, a sign shall be posted indicating their location. All kits shall be readily accessible.
- Except in those instances where some other person is designated, the building principal or building supervisor is designated to ensure that the first aid kits are properly maintained and stocked.
- Emergency phone numbers and emergency procedures will be strategically located, such as on the first aid kit, at telephones, on the safety bulletin board and at other areas where appropriate.
- WAC 296-800-150 First-aid kit guidance
- Current ANSI (American National Standards Institute) kits will meet these requirements.

Automated External Defibrillator (AED) - The building has (see building specific APP)# of AED(s) location(s) are also identified on the Building Maps. The AED(s) is/are maintained by Facilities (i.e. the Nursing Program Specialist).

Fire Extinguishers - Fire extinguishers are located by exit doors and in fire exit pathways to exit doors. The locations are shown on the Building Maps throughout the building. Maintenance and placement of fire extinguishers are the responsibility of the Facilities Department . Annual Fire Extinguisher maintenance is managed by Guardian Security (i.e. a third-party contracted). Monthly reviews will be assigned to an employee by the Director of Facilities, and will be initialed on a monthly fire inspection log to be delivered to the Facilities Director at the end of each month.

Fire Alarm & Suppression Systems - Fire alarm pull boxes activate the building's fire alarm system. These red and white wall-mounted pull boxes, marked "FIRE - PULL DOWN," are located by all exterior (that open directly to the outside) doors. Suppression systems include sprinklers, smoke detectors, heat sensors, pumps, and backup generators. Maintenance of these systems is performed annually by Guardian Security, Emerald Fire Services and contracted through the Director of Facilities.

Eyewash Stations and Showers - There are eyewash station located in rooms # (building Specific APP). Annual maintenance checks are performed by facilities staff. Chemical Showers are located in rooms # (building specific) Monthly checks are assigned by the Director of Facilities, and the tag is attached to the eyewash station where the employee will initial for the completed check. Training will be provided by Supervisors for any employees that work with the associated chemicals.

BLOODBORNE PATHOGENS PROGRAM

Purpose: To provide a safe environment for all employees who may be potentially exposed to blood or body fluids in the performance of their duties, resulting in an occupational exposure to Bloodborne pathogens.

Procedures: All employees shall receive training on the district's initial Exposure Control Plan and will be updated whenever the introduction of new or modified tasks or procedures warrants it.

Universal Precautions – The term "universal precautions" refers to a method of infection control in which all human blood and other potentially infectious materials are treated as if known to be infectious for HIV and HBV. Universal precautions do not apply to feces, nasal secretions, sputum, sweat, tears, urine, or vomits unless they contain visible blood.

Personal Protection

Avoid	Rubbing or touching eyes Use of jewelry during work hours
Use	Own personal care items - don't share drinking glasses, chapstick, combs, etc.
Hand wash before	Drinking, eating, or smoking Handling clean utensils, equipment or food
Handwashing After	Contact with all body secretions Handling soiled diapers, garments or equipment Caring for children, especially those with discharges Removing disposable gloves Removing lab coat or smock Going to the bathroom
Wear Gloves When	If care provider has an open lesion on his/her hands

	Handling contaminated disposable items (tissues, diapers, etc.) Direct hand contact with body fluids is anticipated Cleaning up body fluid spills Diapering
Types of Gloves	Non-sterile latex or vinyl (intact) disposable - dispose after each student contact General purpose utility gloves (e.g. rubber) - household gloves for housekeeping chores may be decontaminated and reused

Note: Dispose of disposables in plastic lined waste baskets - empty daily

Exposure Determination – Examples of occupational groups in schools considered at risk are listed below; however, individual job duties must be considered when determining those employees at risk.

- Health Room Providers (Nurses, Health Services Assistants, Office Managers and Secretaries caring for children in the Health Room)
- Occupational Therapists, Physical Therapists and Speech and Language
- Pathologists
- Coaches and their hired assistants
- Custodians
- Teachers and Para educators working in classrooms serving students that may present an increased risk of exposure to Bloodborne pathogens (i.e. students requiring diapering or other personal care; students with difficulty controlling secretions; students prone to behaviors such as biting)
- Bus drivers and assistants
- Security personnel
- Employees who are required by their job description to administer First Aid as a part of their job

People DO NOT get infected with HIV by

- Casual contact in schools, at parties, sharing food, in swimming pools, or the place work
- Hugging, shaking hands, or simply being near a person who is infected with the virus
- An insect bite
- Contact with a toilet seat

LOCKOUT TAGOUT PROGRAM

Purpose: This program is designed to protect employees from injury caused by the unexpected energization, start up, or release of stored energy during service or maintenance. Employees will use this procedure to make sure the machine or equipment is stopped, isolated from all potentially hazardous energy sources, and locked out before any employee begins work.

Procedure: Only trained and authorized employees can lockout/tag-out equipment or re-energize equipment. The authorized employee will identify the type and magnitude of the energy that the machine or equipment uses, understand the hazards of the energy, and the methods to control the energy before using this procedure.

Note: No employee will attempt to start, energize or use any machine or equipment that is locked out.

Authorization – The following persons are authorized to lock out or un-tag the machine or equipment using this procedure.

Dane Fenwick	Facility Manager
Bernie Mejia	Maintenance Lead
William Ackerman	Maintenance Technician
James Lindsley	Maintenance Technician

Locking Out Equipment

1. Notify all affected employees that the machine or equipment is to be shutdown and locked out for service or maintenance.
2. Shut down the machine or equipment by the normal stopping procedure (such as depressing a stop button, opening switches, or closing valves).
3. Completely isolate the machine or equipment from its energy sources by using the appropriate energy-isolating devices.
4. Lock out the energy isolating devices with assigned individual locks.
5. Dissipate or restrain stored and residual energy, such as that in capacitors, springs, elevated machine members, rotating flywheels, hydraulic systems, and air, gas, steam, or water pressure, using methods such as grounding, repositioning, blocking, or bleeding down.
- 6.

7. Make sure the equipment is disconnected from the energy sources and stored and residual energy has been made safe. Check that no personnel are exposed, then verify the isolation of the equipment.

Re-Energizing Equipment

1. Check the machine or equipment and the immediate area around it to make sure all nonessential items have been removed and that the machine or equipment is in operating condition and ready to energize.
2. Make sure all employees are safely positioned for starting or energizing the machine or equipment.
3. Verify that the controls are in neutral.
4. Remove the lockout devices and reenergize the machine or equipment. Some forms of blocking may require re-energization of the machine before they can be safely removed.
5. Notify affected employees that the servicing or maintenance is completed and the machine or equipment is ready to use.

Respiratory Protection Program

Our respirator program administrator is Dane Fenwick – Facility Manager

Our administrator’s duties are to oversee the development of the respiratory program, and ensure it is carried out at the workplace. The administrator will also evaluate the program regularly to make sure procedures are followed, respirator use is monitored and respirators continue to provide adequate protection when job conditions change.

Selection of Respirators

We have evaluated our use of chemicals at this facility and found respirators must be used by employees in the following locations or positions or doing the following duties, tasks or activities:

Employee position or activity	Chemicals or products used	NIOSH approved respirators assigned	When used (routinely, infrequently, or in emergencies)
Custodian	EPA Registered-N Disinfectants and COVID-19 Prevention	Honeywell North 5400 Full Face Respirator	Infrequently
Nurse	COVID-19 Prevention	Llsage N95 84A-6973 L-188 BYD N95 GB2626-2006 (LH9019) 3M 8210 (07048 / 81105)	Routinely
High Risk Staff (medical documentation provided)	COVID-19 Prevention	Llsage N95 84A-6973 L-188 BYD N95 GB2626-2006 (LH9019) 3M 8210 (07048 / 81105)	Routinely
Maintenance Technician	COVID-19 Prevention	Honeywell North 7700-30L Half Face Respirator	Infrequently

We selected these respirators based on the following information: Centers for Disease Control and Local Health Districts guidance on COVID-19 prevention in conjunction with

Medical Evaluations

Every employee of this company who must wear a respirator will be provided with a medical evaluation before they are allowed to use the respirator. Our first step is to give the attached medical questionnaire to those employees. Employees are required to fill out the questionnaire in private and send or give them to MultiCare Occupational Medicine Services and or OESD 114. Our non-readers or non-English-reading employees will be assisted by our interpreter service Language Line Solutions @ 1-866-874-3972 Client ID: 543875. Completed questionnaires are confidential and will be sent directly to medical provider without review by management.

If the medical questionnaire indicates to our medical provider that a further medical exam is required, this will be provided at no cost to our employees by MultiCare Occupational Medicine) We will get a recommendation from this medical provider on whether or not the employee is medically able to wear a respirator.

Additional medical evaluations will be done in the following situations:

- our medical provider recommends it,
- our respirator program administrator decides it is needed,
- an employee shows signs of breathing difficulty,
- changes in work conditions that increase employee physical stress (such as high temperatures or greater physical exertion).

Respirator Fit-testing

All employees who wear tight-fitting respirators will be fit-tested before using their respirator or given a new one. Fit-testing will be repeated annually. Fit-testing will also be done when a different respirator facepiece is chosen, when there is a physical change in an employee's face that would affect fit, or when our employees or medical provider notify us that the fit is unacceptable. No beards are allowed on wearers of tight-fitting respirators. Respirators are chosen for fit-testing following procedures in the WISHA Respirators Rule. Fit-testing is not required for loose-fitting, positive pressure (supplied air helmet or hood style) respirators. MultiCare Occupational Medicine will conduct all BISD fit testing required in this program using the Qualitative method with either the Bitrex or Saccharin protocol.

Documentation of our fit-testing results is kept at the office of the Facility Manager.

Our respirators will be checked for proper sealing by the user whenever the respirator is first put on, using the attached seal check procedures:

Respirator storage, cleaning, maintenance and repair

Our non-disposable respirators will be stored in the following clean locations:

1. Emergency Readiness Portable Trailer located at 9445 NE New Brooklyn Rd.
2. Custodial Offices at assigned building sites in sealed containers.

Respirators will be cleaned and sanitized after every use or whenever they are visibly dirty. (Does not apply to paper dust masks which are disposed daily). Respirators will be cleaned according to the manufacturer’s instructions (provided to the employee upon request)

All respirators will be inspected before and after every use, and during cleaning. In addition, emergency respirators and self-contained tank-type supplied air respirators in storage will be inspected monthly.

Respirators will be inspected for damage, deterioration or improper functioning and repaired or replaced as needed. Repairs and adjustments are done by Dane Fenwick who is trained in respirator maintenance and repair. Supplied air respirators will be checked for proper functioning of regulator and warning devices and amount of air in tanks where used.

On respirators with vapor or gas cartridges, the cartridges will be regularly replaced on the following schedule:

Check with respirator vendor for recommended replacement schedule for each brand and type of respirator.

Type of respirator cartridge	Location or job duties	Chemicals in use	Replacement schedule
7583P100L	School Sites	EPA Registered-N Disinfectants, Covid-19 infection prevention	All cartridges will be replaced (6) months after installation and or upon noticeable increase of breathing restriction.

Respirator Use

The Program Administrator will monitor the work area in order to be aware of changing conditions where employees are using respirators.

Employees will not be allowed to wear respirators with tight-fitting facepieces if they have facial hair (e.g., stubble, bangs) absence of normally worn dentures, facial deformities (e.g., scars, deep skin creases, prominent

cheekbones), or other facial features that interfere with the facepiece seal or valve function. Jewelry or headgear that projects under the facepiece seal is also not allowed.

If corrective glasses or other personal protective equipment is worn, it will not interfere with the seal of the facepiece to the face.

Note: Full-facepiece respirators can be provided with corrective glasses since corrective lenses can be mounted inside a full-facepiece respirator. Contact lenses can also be used with full facepiece respirators if they do not cause any problems for the employee.

A seal check will be performed every time a tight-fitting respirator is put on.

The program administrator will make sure that the NIOSH labels and color-coding on respirator filters and cartridges remain readable and intact during use.

Employees will leave the area where respirators are required for any of the following reasons:

- to replace filters or cartridges,
- when they smell or taste a chemical inside the respirator,
- when they notice a change in breathing resistance
- to adjust their respirator,
- to wash their faces or respirator,
- if they become ill,
- if they experience dizziness, nausea, weakness, breathing difficulty, coughing, sneezing vomiting, fever or chills.

The Program Administrator has identified the following areas or job duties as presenting the potential for IDLH (immediately dangerous to life or health) conditions: School spaces with suspected COVID-19 contamination.

Where any area or confined space is designated as IDLH, we will provide one standby employees outside the area if the work is not routine and requires additional safety supervision. These standby employees are trained in effective emergency rescue, are equipped with pressure-demand self-contained breathing apparatus (SCBAs), and will be in constant visual, voice or signal line communication with the employees in the IDLH area. The standby employees will notify the administrator before entering the IDLH area, and we will provide the necessary assistance when notified.

Respirator Training

Training is done by Dane Fenwick before employees wear their respirators and annually thereafter as long as they wear respirators. Our supervisors or crew bosses who wear respirators or supervise employees who do, will also be trained on the same schedule.

Additional training will also be done when an employee uses a different type of respirator or workplace conditions affecting respiratory hazards or respirator use have changed.

Training will cover the following topics:

Why the respirator is necessary,
The respirator's capabilities and limitations,
How improper fit, use or maintenance can make the respirator ineffective,
How to properly inspect, put on, seal check, use, and remove the respirator,
How to clean, repair and store the respirator or get it done by someone else,
How to use a respirator in an emergency situation or when it fails,
Medical symptoms that may limit or prevent respirator use,
Our obligations under the Respirators Rule.

Our training program is attached.

Respiratory Program Evaluation

We evaluate our respiratory program for effectiveness by doing the following steps:

1. Checking results of fit-test results and health provider evaluations.
2. Talking with employees who wear respirators about their respirators – how they fit, do they feel they are adequately protecting them, do they notice any difficulties in breathing while wearing them, do they notice any odors while wearing them, etc.
3. Periodically checking employee job duties for changes in chemical exposure.
4. Periodically checking maintenance and storage of respirators.
5. Periodically checking how employees use their respirators.
6. Other _____

Recordkeeping

The following records will be kept:

- A copy of this completed respirator program
- Employees' latest fit-testing results
- Employee training records
- Written recommendations from our medical provider

The records will be kept at the following location: The Office of the Facility Manger (9445 NE New Brooklyn Rd.) Employees will have access to these records upon request.

How to Select the Correct Respirator

The type and brands of respirators vary widely ranging from simple dust masks to supplied air respirators like the kind firemen wear. Following is description of the main types of respirators.



Dust Masks (filtering facepieces)

These simple, two-strap disposable dust masks are designed only for dusts. They are not as protective as other respirators, but do an adequate job in many cases, unless the dust is really toxic or copious. Don't confuse these two-strap masks with the less protective one-strap dust mask designed only for pollen or non-toxic dust.



Half-Face Air-Purifying Respirator

These respirators are sometimes called “half-face” or “half-mask” respirators since they cover just the nose and mouth. They have removable cartridges that filter out either dust, chemicals or both. Selecting the correct cartridges is essential since they are designed for particular types of chemicals or dust. A reputable respirator vendor can assist you in selecting the correct cartridges. These cartridges are typically removable and sometimes interchangeable.

Cartridges are available for solvents, ammonia, chlorine, acids and other chemicals. The cartridges must be changed out or replaced periodically, especially for chemicals, since they can absorb only so much contaminant before breakthrough occurs. A few cartridges are equipped with end-of-service indicators that show when a cartridge should be replaced. Most cartridges

don't have this indicator and you must develop a change-out schedule to prevent breakthrough. The change-out schedule is based on the chemical concentration, physical work effort, temperature and humidity. Many respirator manufacturers have cartridge change schedule calculators available on the Internet.



Full-Face Air-Purifying Respirator

In some situations, you may need or want to use full-face respirators. This type of respirator is used when the air contaminant irritates the eyes. They also provide somewhat higher protection to the lungs since they tend to fit tighter and are less prone to leaking. These respirators also have replaceable cartridges that must be changed on a regular basis as described above for half-face respirators.



Powered Air Purifying Respirator (PAPR)

Powered Air Purifying Respirators have a battery pack that draws air through replaceable cartridges and blows into a full facepiece, helmet or hood. These respirators are often more comfortable in hot weather and some can provide more protection, depending on the type. The cartridges must be changed regularly as describe for half-face respirators above.



Airline Respirator



Tank-type respirator (SCBA)

Supplied Air Respirators and Self-Contained Breathing Apparatus (SCBA)

In a few situations, you may need to provide a supplied air respirator to your employees. These situations include large chemical spills or leaks, entering a confined space where there is lack of oxygen or high levels of air contaminants, or working around extremely toxic chemicals. They may also be necessary working at hazardous waste sites, during sandblasting or in some spray painting operations. “Supplied air,” means that clean air is provided by means of an air hose from a compressor or a pressurized air tank.

Supplied air respirators are required when a respiratory hazard is considered “immediately dangerous to life or health” (also called “IDLH”). Respiratory hazards are classified as IDLH as follows:

- There is a lack of oxygen (less than 19.5% oxygen)
- There is too much oxygen (more than 23.5% - a fire hazard)
- You know there are toxic chemicals in the air, but you don’t know how much
- The amount of chemical in the air is known or expected to be above the IDLH level for that chemical. See the [NIOSH Pocket Guide to Chemical Hazards](#) for chemical IDLH levels.

Levels of chemicals above IDLH can occur in confined spaces, or enclosed spaces where there is little or no ventilation.



Emergency Escape Respirators

Emergency escape respirators, as the name implies, can only be used for one thing – to escape or exit from a room or building in an emergency, usually a large chemical release, leak or spill, or when a supplied air respirator fails or runs out of air. An escape respirator is typically a small bottle or tank of air connected to a facepiece that supplies 5-10 minutes of air. Some supplied air respirators will have an auxiliary bottle of air for escape that connects to the existing facepiece.



How do you decide which type of respirator to select? First, it must be the correct type for the air contaminant. Second, it must fit properly. Third, it must provide adequate protection for the amount of chemical in the air. The more toxic or more concentrated the chemical is in the air, the higher the level of protection the respirator must provide.

Different respirators provide different protection. Depending on the amount of chemical in the air, you may need to use a respirator that provides more protection. Respirators are rated by their “assigned protection factor” (APF) which is a number between 10 and 10,000. The higher the number, the greater the protection. A respirator with a protection factor of 10 will provide adequate protection to levels of the chemical in the air 10 times the safe limit of that chemical. See Table 5 on the following page.

Table 5 Assigned Protection Factors (APF) for Respirator Types	
If the respirator is a(n)	Then the APF is
Air-purifying respirator with a: <ul style="list-style-type: none"> • Quarter-mask • Half-facepiece. This category includes filtering facepiece and elastomeric facepiece • Full-facepiece 	5 10 50
Powered air-purifying respirator (PAPR) with a: <ul style="list-style-type: none"> • Loose-fitting facepiece • Half-facepiece • Full-facepiece • Hood or helmet <p>Note: PAPRs with helmets/hoods may receive an APF of 1000 only when you have evidence that testing of these respirators demonstrates performance at a level of protection of 1,000 or greater. Such evidence must be provided by the respirator manufacturer. This level of performance can best be demonstrated by performing a workplace protection factor (WPF) or simulated workplace protection factor (SWPF) study or equivalent testing.</p>	25 50 1000 25/1000 (see note)
Air-line respirator with a: <ul style="list-style-type: none"> • Half-facepiece and designed to operate in demand mode • Loose-fitting facepiece and designed to operate in continuous flow mode • Half-facepiece and designed to operate in continuous-flow mode • Half-facepiece and designed to operate in pressure-demand or other positive-pressure mode • Full-facepiece and designed to operate in demand mode. • Full-facepiece and designed to operate in continuous-flow mode • Full-facepiece and designed to operate in pressure-demand or other positive-pressure mode. • Helmet or hood and designed to operate in continuous-flow mode <p>Note: Air-line respirators with helmets/hoods designed to operate in continuous-flow mode may receive an APF of 1000 when you have evidence that testing of these respirators demonstrates performance at a level of protection of 1,000 or greater. Such evidence must be provided by the respirator manufacturer. This level of performance can best be demonstrated by performing a workplace protection factor (WPF) or simulated workplace protection factor (SWPF) study or equivalent testing.</p>	10 25 50 50 50 1000 1000 25/1000 (see note)
Self-contained breathing apparatus (SCBA) with a tight fitting: <ul style="list-style-type: none"> • Half-facepiece and designed to operate in demand mode • Full facepiece and designed to operate in demand mode • Full-facepiece and designed to operate in pressure-demand mode or other positive pressure mode (e.g. open/closed circuit) • Helmet or hood and designed to operate in demand mode • Helmet or hood and designed to operate in pressure-demand or other positive-pressure mode (e.g., open/closed circuit). 	10 50 10,000 50 10,000
Combination respirators: <ul style="list-style-type: none"> • When using a combination respirator, such as an air-line respirator with an air-purifying filter, you must make sure the APF is appropriate to the mode of operation in which the respirator is used. 	
Escape respirators: <ul style="list-style-type: none"> • APFs in this table do not apply to respirators used solely for escape. To select escape respirators, go to Step 8 of this section. 	

Use **Table 6** below to select air-purifying respirators for particle, vapor, or gas contaminants.

Table 6
Requirements for Selecting Air-purifying Respirators

If the contaminant is a:	Then
<p>Gas or vapor</p> 	<p>Provide a respirator with canisters or cartridges equipped with a NIOSH-certified, end-of-service-life indicator (ESLI) (<i>note: there just a few of these</i>)</p> <p>or</p> <p>If a canister or cartridge with an ESLI is not available, develop a cartridge change schedule to make sure the canisters or cartridges are replaced before they are no longer effective (<i>note: most cartridge respirators fit in this category</i>)</p> <p>or</p> <p>Select an air-supplying respirator</p>
<p>Particle, such as a dust, spray, mist, fog, fume, or aerosol</p> 	<p>Select respirators with filters certified to be at least 95% efficient by NIOSH. For example, N95s, R99s, P100s, or High Efficiency Particulate Air filters (HEPA)</p> <p>Or</p> <p>You may select respirators NIOSH certified as “dust and mist,” “dust, fume, or mist,” or “pesticides.” You can only use these respirators if particles primarily have a mass median aerodynamic diameter of at least 2 micrometers <i>Note: These latter respirators are no longer sold for occupational use, but some employers may still be using them.</i></p>

How to Evaluate your Workplace for Employee Exposure to Chemicals

Respirators are required when employees are exposed (can inhale) chemicals or dust in the air that are at harmful levels. These can include vapors from handling solvents, spray-painting, and dust from grinding or sanding, or welding fumes. If you manage a small business, you probably quite familiar with each employee's job, what chemicals they use or how much welding, spray painting, grinding or sanding they do. Your employees may have told you that the chemical odors or dust bothered them or that they were worried about their chemical exposure. You may have switched to less hazardous chemicals. Or you may have no alternative but to use more hazardous chemicals to do the job or make your product. But without some knowledge of the amount of chemical or dust in the air in the workplace, you cannot know whether your employees are exposed to harmful amounts of chemicals they use.

Just about every chemical has its toxic amount or level that will make person sick. Even too much table salt can be harmful. On the other hand, highly toxic chemicals can be used without harm to employees if handled properly. Most commonly used chemicals have safe limits or "permissible exposure limits" in the air that if exceeded will cause harm. To view the list of chemicals with WISHA permissible exposure limits, If these limits are exceeded, you are required to take steps to protect your employees from that air exposure. If the levels cannot be reduced below the permissible exposure limits by ventilation, changes in the process or reduction in the length of time of exposure, than you must provide respirators to exposed employees.

The best way to accurately determine the levels of chemicals or dust in the air is to do some type of air sampling. There are a variety of instruments and devices for measuring air contaminants. Some are simple and cheap, most are quite expensive. The methods for doing the air sampling accurately are usually fairly complicated and should not be done by a layperson. Air sampling can be done by WISHA industrial hygiene consultants at your request. This is a free service and will not result in a citation or penalty or a report to WISHA safety inspectors. To request this service, contact the nearest Department of Labor & Industries Office near you. You can also have a private industrial hygiene consultant conduct air sampling. They can be found under "industrial hygiene services" in the Yellow Pages.

If you belong to a trade association or industry group, that organization may have information on common chemical hazards and methods of controls. The material safety data sheets for products used also provide information about the hazards of the chemicals, permissible exposure limits, methods of controls and recommended respirators.

Filtering Facepiece Respirator Fit Test Record

Attention: A medical evaluation must be completed before fit-testing.

Date:

Name of employee:

Has this employee been medically cleared for filtering facepiece respirator use? If not, then do not proceed with the fit test.

Yes ___ No ___

Is this employee clean shaven (i.e., no facial hair or stubble) in the mask-to-face seal area? If not then do not proceed with the fit test.

Yes ___ No ___

The employee was shown how to properly put on, seal check, and remove the respirator and was able to demonstrate this correctly. If not, provide additional instruction until the employee succeeds.

Yes ___ No ___

Fit-testing procedure/protocol used: Bitrex™ ___ Saccharin ___ Other:

Filtering Facepiece Make, Model, & Approval #	Size	Result: Pass or Fail? (circle one)
<i>(complete this row of information based on each fit test for this employee)</i>		P F
		P F
		P F

Name of person conducting this fit test

Employer-Provided Information for Medical Evaluations

This form may be used by the employer to give to your medical provider, information on respirator use by your employees, but it is not a required form. You can also consult directly with your medical provider and discuss the information below.

You must also give the medical provider a copy of your written respiratory program and copy of the Respirators Rule

Specific Respirator Use Information

Employee Name: _____

Company name: _____

Employee job title: _____

Company Address: _____

Company contact person and phone #: _____

1. Will the employee be wearing protective clothing and/or equipment (other than the respirator) when using the respirator?

Yes/No _____ If "Yes," describe protective clothing and/or equipment:

2. Will employee be working under hot conditions (temperature exceeding 77°F)?

Yes/No _____ If "Yes", describe nature of work and duration:

3. Will employee be working under humid conditions? Yes / No _____

4. Describe any special or hazardous conditions the employee could encounter when using the respirator (for example, confined spaces, life-threatening gases).
-

Specific Respirator Use Information, Continued

Check Box	Respirator Type	Face / Head Cover Type (half or full face, helmet, or hood)	Frequency of Use (hours per day, week, or month)	Work Effort Light, Moderate, Heavy (see descriptions below)	Respirator Wt.
	Disposable facepiece particulate filter (N, R or P series)	1/2 facepiece			
	Mask with replaceable filter or cartridge				
	Mask with canister				
	Powered air-purifying respirator (PAPR)				
	Air line, continuous flow				
	Air line, negative pressure demand				
	Air line, positive pressure demand				
	SCBA, negative pressure demand	Full facepiece			
	SCBA, positive pressure demand	Full facepiece			

Work Effort Descriptions

Examples of a **light work effort** are sitting while writing, typing, drafting, or performing light assembly work; or standing while operating a drill press (1-3 lbs.) or controlling machines.

Examples of **moderate work effort** are sitting while nailing or filing; driving a truck or bus in urban traffic; standing while drilling, nailing, performing assembly work, or transferring a moderate load (about 35 lbs.) at trunk level; walking on a level surface about 2 mph or down a 5-degree grade about 3 mph; or pushing a wheelbarrow with a heavy load (about 100 lbs.) on a level surface.

Examples of **heavy work effort** are lifting a heavy load (about 50 lbs.) from the floor to your waist or shoulder; working on a loading dock; shoveling; standing; standing while bricklaying or chipping castings; walking up an 8-degree grade about 2 mph; climbing stairs with a heavy load (about 50 lb.).

Criteria for deciding whether one or two standby employees are needed at an IDLH location

WAC 296-842-19005

Provide standby assistance in immediately dangerous to life or health (IDLH) conditions

You must

- Provide at least 2 standby employees outside the IDLH area.



Note:

You need only one standby employee **if** the IDLH condition is well characterized, will remain stable **and** you can show one employee can adequately do **all** of the following:

- Monitor employees in the IDLH area
- Implement communication
- Initiate rescue duties.

Seal Check Procedures

Table 21
User Seal Check Procedure

Important Information for Employees:

- You need to conduct a seal check each time you put your respirator on before you enter the respirator use area. The purpose of a seal check is to make sure your respirator (which has been previously fit tested by your employer) is properly positioned on your face to prevent leakage during use and to detect functional problems.
- The procedure below has 2 parts; a positive pressure check and a negative pressure check. You must complete both parts each time. It should only take a few seconds to perform, once you learn it.
 - If you can't pass both parts, your respirator is not functioning properly, see your supervisor for further instruction.

Positive Pressure Check:

1. Remove exhalation valve cover, if removable.
2. Cover the exhalation valve completely with the palm of your hand while exhaling gently to inflate the facepiece slightly.
3. The respirator facepiece should remain inflated (indicating a build-up of positive pressure and no outward leakage).
 - If you detect no leakage, replace the exhalation valve cover (if removed), and proceed to conduct the negative pressure check .
 - If you detect evidence of leakage, reposition the respirator (after removing and inspecting it), and try the positive pressure check again.

Negative Pressure Check:

4. Completely cover the inhalation opening(s) on the cartridges or canister with the palm(s) of your hands while inhaling gently to collapse the facepiece slightly.
 - If you can't use the palm(s) of your hands to effectively cover the inhalation openings on cartridges or canisters, you may use:
 - Filter seal(s) (if available)
 - or
 - Thin rubber gloves
5. Once the facepiece is collapsed, hold your breath for 10 seconds while keeping the inhalation openings covered.
6. The facepiece should remain slightly collapsed (indicating negative pressure and no inward leakage).
 - If you detect no evidence of leakage, the tightness of the facepiece is considered adequate, the procedure is completed, and you may now use the respirator.
 - If you detect leakage, reposition the respirator (after removing and inspecting it) and repeat both the positive and negative fit checks.

Respirator Cleaning Procedures

Table 20
Respirator Cleaning Procedure

Step	Task
1.	Remove filters, cartridges, canisters, speaking diaphragms, demand and pressure valve assemblies, hoses, or any components recommended by the manufacturer. <ul style="list-style-type: none"> • Discard or repair any defective parts.
2.	Wash components in warm (43°C [110°F] maximum) water with a mild detergent or with a cleaner recommended by the manufacturer. <ul style="list-style-type: none"> • A stiff bristle (not wire) brush may be used to help remove the dirt. • If the detergent or cleaner doesn't contain a disinfecting agent, respirator components should be immersed for 2 minutes in one of the following: <ul style="list-style-type: none"> - A bleach solution (concentration of 50 parts per million of chlorine). Make this by adding approximately one milliliter of laundry bleach to one liter of water at 43°C (110°F) - A solution of iodine (50 parts per million iodine). Make this in 2 steps: <ul style="list-style-type: none"> • First, make a tincture of iodine by adding 6-8 grams of solid ammonium iodide and/or potassium iodide to 100 cc of 45% alcohol approximately. • Second, add 0.8 milliliters of the tincture to one liter of water at 43°C (110°F) to get the final solution. - Other commercially available cleansers of equivalent disinfectant quality when used as directed, if their use is recommended or approved by the respirator manufacturer
3.	Rinse components thoroughly in clean, warm (43°C [110°F] maximum), preferably, running water. Note: The importance of thorough rinsing can't be overemphasized. Detergents or disinfectants that dry on facepieces could cause dermatitis. In addition, some disinfectants may cause deterioration of rubber or corrosion of metal parts, if not completely removed.
4.	Drain components.
5.	Air-dry components or hand dry components with a clean, lint-free cloth.
6.	Reassemble the facepiece components. <ul style="list-style-type: none"> • Replace filters, cartridges, and canisters, if necessary (for testing)
7.	Test the respirator to make sure all components work properly.

OSHA RESPIRATOR MEDICAL EVALUATION QUESTIONNAIRE
Please complete, sign and fax form to 360-782-3341 ATTN: Clinical Staff

To The Employer: Answers to the questions in Section 1, and to question 9 in Section 2, do not require a medical examination.

To The Employee: Can you read? _____ Yes / _____ No.

Your employer must allow you to answer this questionnaire during normal working hours, or at a time and place that is convenient to you. To maintain your confidentiality, your employer or supervisor must not look at or review your answers, and your employer must tell you how to deliver or send this questionnaire to the health care professional who will review it.

SECTION 1. (Mandatory). The following information must be provided by every employee who has been selected to use any type of respirator. (Please print.)

1. Today's date: _____
2. Your name: _____
3. Your age: _____ (to nearest year) DOB: _____
4. Sex: _____ Male / _____ Female
5. Your height: _____ ft. _____ in.
6. Your weight: _____ lbs.
7. Your job title: _____ Employer: _____
8. A phone number (including area code) where you can be reached by the health care professional who reviews this questionnaire: _____
9. The best time to phone you at this number: _____
10. Has your employer told you to contact the health care professional who will review this questionnaire?
_____ Yes / _____ No.
11. Check the type of respirator you will use. (You can check more than one category.)
 - a. _____ N, R, or P disposable respirator (filter-mask, non-cartridge type only).
 - b. _____ Other type (for example, half- or full-face piece type, powdered-air purifying, supplied-air, self-contained breathing apparatus).

12. Have you ever worn a respirator? _____ Yes / _____ No. If "yes" what type(s): _____

SECTION 2. (Mandatory for Questions 1-9). Questions 1 through 9 below must be answered by every employee who has been selected to use any type of respirator. (Check yes or no.)

1. Do you currently smoke tobacco, or have you smoked tobacco in the last month? _____ Yes / _____ No.
2. Have you ever had any of the following conditions?
 - a. Seizures (fits)? _____ Yes / _____ No.
 - b. Diabetes (sugar disease)? _____ Yes / _____ No.
 - c. Allergic reactions that interfere with your breathing? _____ Yes / _____ No.
 - d. Claustrophobia (fear of closed-in places)? _____ Yes / _____ No.
 - e. Trouble smelling odors? _____ Yes / _____ No.
3. Have you ever had any of the following pulmonary or lung problems?
 - a. Asbestosis? _____ Yes / _____ No.
 - b. Asthma? _____ Yes / _____ No.
 - c. Chronic bronchitis? _____ Yes / _____ No.
 - d. Emphysema? _____ Yes / _____ No.
 - e. Pneumonia? _____ Yes / _____ No.
 - f. Tuberculosis? _____ Yes / _____ No.
 - g. Silicosis? _____ Yes / _____ No.
 - h. Pneumothorax (collapsed lung)? _____ Yes / _____ No.
 - i. Lung cancer? _____ Yes / _____ No.
 - j. Broken ribs? _____ Yes / _____ No.
 - k. Any chest injuries or surgeries? _____ Yes / _____ No.
 - l. Any other lung problems that you've been informed about? _____ Yes / _____ No.
4. Do you *currently* have any of the following symptoms of pulmonary or lung illness?
 - a. Shortness of breath? _____ Yes / _____ No.
 - b. Shortness of breath when walking fast on level ground or walking up a slight hill or incline? _____ Yes / _____ No.
 - c. Shortness of breath when walking at your own pace on level ground? _____ Yes / _____ No.
 - d. Have to stop for breath when waling at your own pace on level ground? _____ Yes / _____ No.
 - e. Shortness of breath when washing or dressing yourself? _____ Yes / _____ No.
 - f. Shortness of breath that interferes with your job? _____ Yes / _____ No.
 - g. Coughing that produces phlegm (thick sputum)? _____ Yes / _____ No.
 - h. Coughing that wakes you early in the morning? _____ Yes / _____ No.
 - i. Coughing that occurs mostly when you are lying down? _____ Yes / _____ No.
 - j. Coughing up blood in the last month? _____ Yes / _____ No.
 - k. Wheezing: _____ Yes / _____ No.

- l. Wheezing that interferes with your job? _____ Yes / _____ No.
- m. Chest pain when you breathe deeply? _____ Yes / _____ No.
- n. Any other symptoms that you think may be related to lung problems? _____ Yes / _____ No.
5. Have you *ever* had any of the following cardiovascular or heart problems?
- Heart attack? _____ Yes / _____ No.
 - Stroke? _____ Yes / _____ No.
 - Angina? _____ Yes / _____ No.
 - Heart failure? _____ Yes / _____ No.
 - Swelling in your legs or feet (not caused by walking)? _____ Yes / _____ No.
 - Heart arrhythmia (heart beating irregularly)? _____ Yes / _____ No.
 - High blood pressure? _____ Yes / _____ No.
 - Any other heart problem that you've been told about? _____ Yes / _____ No.
6. Have you *ever* had any of the following cardiovascular or heart symptoms?
- Frequent pain or tightness in your chest? _____ Yes / _____ No.
 - Pain or tightness in your chest during physical activity? _____ Yes / _____ No.
 - Pain or tightness in your chest that interferes with your job? _____ Yes / _____ No.
 - In the past two years, have you noticed your heart skipping or missing a beat? _____ Yes / _____ No.
 - Heartburn or indigestion that is not related to eating? _____ Yes / _____ No.
 - Any other symptoms that you think may be related to heart or circulation problems?
_____ Yes / _____ No.
7. Do you *currently* take medication for any of the following problems?
- Breathing or lung problems? _____ Yes / _____ No.
 - Heart trouble? _____ Yes / _____ No.
 - Blood pressure? _____ Yes / _____ No.
 - Seizures? _____ Yes / _____ No.
8. If you've used a respirator, have you *ever* had any of the following problems? (If you've never used a respirator, check the following space and go to question 9) _____ No.
- Eye irritation? _____ Yes / _____ No.
 - Skin allergies or rashes? _____ Yes / _____ No.
 - Anxiety? _____ Yes / _____ No.
 - General weakness or fatigue? _____ Yes / _____ No.
 - Any other problem that interferes with your use of a respirator? _____ Yes / _____ No.
9. Would you like to talk to the health care professional who will review this questionnaire about your answers to this questionnaire? _____ Yes / _____ No.

Your Printed Name

Your Signature

Today's Date

Questions 10 to 15 below must be answered by every employee who has been selected to use either a full-face piece respirator or a self-contained breathing apparatus (SCBA). For employees who have been selected to use other types of respirators, answering these questions is voluntary.

10. Have you *ever* lost vision in either eye (temporarily or permanently)? _____ Yes / _____ No.
11. Do you *currently* have any of the following vision problems?
 - a. Wear contact lenses? _____ Yes / _____ No.
 - b. Wear glasses? _____ Yes / _____ No.
 - c. Color blind? _____ Yes / _____ No.
 - d. Any other eye or vision problem? _____ Yes / _____ No.
12. Have you *ever* had an injury to your ears, including a broken ear drum? _____ Yes / _____ No.
13. Do you *currently* have any of the following hearing problems?
 - a. Difficulty hearing? _____ Yes / _____ No.
 - b. Wear a hearing aid? _____ Yes / _____ No.
 - c. Any other hearing or ear problem? _____ Yes / _____ No.
14. Have you *ever* had a back injury? _____ Yes / _____ No.
15. Do you *currently* have any of the following musculoskeletal problems?
 - a. Weakness in any of your arms, hands, legs or feet? _____ Yes / _____ No.
 - b. Back pain? _____ Yes / _____ No.
 - c. Difficulty fully moving your arms or legs? _____ Yes / _____ No.
 - d. Pain or stiffness when you lean forward or backward at the waist? _____ Yes / _____ No.
 - e. Difficulty fully moving your head up or down? _____ Yes / _____ No.
 - f. Difficulty fully moving your head side to side? _____ Yes / _____ No.
 - g. Difficulty bending at your knees? _____ Yes / _____ No.
 - h. Difficulty squatting to the ground? _____ Yes / _____ No.
 - i. Climbing a flight of stairs or a ladder carrying more than 25lbs? _____ Yes / _____ No.
 - j. Any other muscle or skeletal problem that interferes with using a respirator? _____ Yes / _____ No.

Part B: Any of the following questions, and other questions not listed, may be added to the questionnaire at the discretion of the health care professional who will review the questionnaire.

1. In your present job, are you working at high altitudes (over 5,000 feet) or in a place that has lower than normal amounts of oxygen? _____ Yes / _____ No.
If "yes," do you have feeling of dizziness, shortness of breath, pounding in your chest, or other symptoms when you're working under these conditions? _____ Yes / _____ No.
2. At work or at home, have you ever been exposed to hazardous solvents, hazardous airborne chemicals (e.g., gases, fumes, or dust), or have you come into skin contact with hazardous chemicals? _____ Yes / _____ No.
If "yes," name the chemicals if you know them: _____

-
-
3. Have you ever worked with any of the materials, or under any of the conditions, listed below:
- a. Asbestos? _____ Yes / _____ No.
 - b. Silica (e.g., in sandblasting)? _____ Yes / _____ No.
 - c. Tungsten/cobalt (e.g., grinding or welding this material)? _____ Yes / _____ No.
 - d. Beryllium? _____ Yes / _____ No.
 - e. Aluminum? _____ Yes / _____ No.
 - f. Coal (for example, mining)? _____ Yes / _____ No.
 - g. Iron? _____ Yes / _____ No.
 - h. Tin? _____ Yes / _____ No.
 - i. Dusty environments? _____ Yes / _____ No.
 - j. Any other hazardous exposures? _____ Yes / _____ No.
If "yes," describe these exposures: _____

4. List any second jobs or side businesses you have: _____

5. List your previous occupations: _____

6. List your current and previous hobbies: _____

7. Have you been in the military services? _____ Yes / _____ No.
If "yes," were you exposed to biological or chemical agents (either in training or combat)?
_____ Yes / _____ No.
8. Have you ever worked on a HAZMAT team? _____ Yes / _____ No.
9. Other than medications for breathing and lung problems, heart trouble, blood pressure, and seizures mentioned earlier in this questionnaire, are you taking any other medications for any reason (including over-the-counter medications)? _____ Yes / _____ No.
If "yes," name the medications if you know them: _____

10. Will you be using any of the following items with your respirator(s)?
- a. HEPA Filters? _____ Yes / _____ No.
 - b. Canisters (for example, gas masks)? _____ Yes / _____ No.
 - c. Cartridges? _____ Yes / _____ No.
11. How often are you expected to use the respirator(s) (check "yes" or "no" for all answers that apply to you)?
- a. Escape only (no rescue)? _____ Yes / _____ No.
 - b. Emergency rescue only? _____ Yes / _____ No.
 - c. Less than 5 hours *per week*? _____ Yes / _____ No.
 - d. Less than 2 hours *per day*? _____ Yes / _____ No.

e. 2 to 4 hours per day? _____ Yes / _____ No.

f. Over 4 hours per day? _____ Yes / _____ No.

12. During the period you are using the respirator(s), is your work effort:

a. *Light* (less than 200 kcal per hour)? _____ Yes / _____ No.

If "yes," how long does this period last during the average shift: _____ hrs. _____ mins.

Examples of a light work effort are sitting while writing, typing, drafting, or performing light assembly work; or standing while operating a drill press (1-3lbs.) or controlling machines.

b. *Moderate* (200 to 350 kcal per hour)? _____ Yes / _____ No.

If "yes," how long does this period last during the average shift: _____ hrs. _____ mins.

Examples of moderate work effort are *sitting* while nailing or filing; *driving* a truck or bus in urban traffic; *standing* while drilling, nailing, performing assembly work, or transferring a moderate load (about 35 lbs.) at trunk level; *walking* on a level surface about 2 mph or down a 5-degree grade about 3 mph; or *pushing* a wheelbarrow with a heavy load (about 100 lbs.) on a level surface.

c. *Heavy* (above 350 kcal per hour)? _____ Yes / _____ No.

If "yes," how long does this period last during the average shift: _____ hrs. _____ mins.

Examples of heavy work are *lifting* a heavy load (about 50 lbs.) from the floor to your waist or shoulder; working on a loading dock; *shoveling*; *standing* while bricklaying or chipping castings; *walking* up an 8-degree grade about 2 mph; climbing stairs with a heavy load (about 50 lbs.).

13. Will you be wearing protective clothing and/or equipment (other than the respirator) when you're using your respirator: _____ Yes / _____ No.

If "yes," describe this protective clothing and/or equipment: _____

14. Will you be working under hot conditions (temperature exceeding 77 deg. F)? _____ Yes / _____ No.

15. Will you be working under humid conditions? _____ Yes / _____ No.

16. Describe the work you'll be doing while you're using your respirator(s): _____

17. Describe any special or hazardous conditions you might encounter when you're using your respirator(s) (for example, confined spaces, life-threatening gases): _____

18. Provide the following information, if you know it, for each toxic substance that you'll be exposed to when you're using your respirator(s):

Name of the first toxic substance: _____

Estimated maximum exposure level per shift: _____

Duration of exposure per shift: _____

Name of the second toxic substance: _____

Estimated maximum exposure level per shift: _____

Duration of exposure per shift: _____

Name of the third toxic substance: _____

Estimated maximum exposure level per shift: _____

Duration of exposure per shift: _____

The name of any other toxic substances that you'll be exposed to while using your respirator:

19. Describe any special responsibilities you'll have while using your respirator(s) that may affect the safety and well-being of others (for example, rescue, security):



Bainbridge Island School District N95 Voluntary Respirator Use Form

Information for Employees who voluntarily Use Respirators

Per **APPENDIX D** to OSHA Sec. 1910.134 (Mandatory) Information for Employees Using Respirators When Not Required Under the Standard

Respirators are an effective method of protection against designated hazards when properly selected and worn. Respirator use is encouraged, even when exposures are below the exposure limit, to provide an additional level of comfort and protection for workers. However, if a respirator is used improperly or not kept clean, the respirator itself can become a hazard to the worker. Sometimes, workers may wear respirators to avoid exposures to hazards, even if the amount of hazardous substance does not exceed the limits set by OSHA standards. If your employer provides respirators for your voluntary use, or if you provide your own respirator, you need to take certain precautions to be sure that the respirator itself does not present a hazard.

You should do the following:

1. Read and heed all instructions provided by the manufacturer on use, maintenance, cleaning and care, and warnings regarding the respirators limitations.
2. Choose respirators certified for use to protect against the contaminant of concern. NIOSH, the National Institute for Occupational Safety and Health of the U.S. Department of Health and Human Services, certifies respirators. A label or statement of certification should appear on the respirator or respirator packaging. It will tell you what the respirator is designed for and how much it will protect you.
3. Do not wear your respirator into atmospheres containing contaminants for which your respirator is not designed to protect against. For example, a respirator designed to filter dust particles will not protect you against gases, vapors, or very small solid particles of fumes or smoke.
4. Keep track of your respirator so that you do not mistakenly use someone else's respirator.

Employee Signature: _____ Date: _____

Program Administrator: _____ Date: _____

COVID-19 Prevention Program

In accordance with the Office of the Governor of the State of Washington under RCW chapters 38.08, 38.52, and 43.06, the Bainbridge Island School District will adhere to all applicable orders within proclamation 20-05 (State of Emergency), including but not limited to subsequent proclamations (20-08, 20-09, and 20-09.3) pursuant to the State of Emergency issued February 29th, 2020.

The Bainbridge Island School District has created and made available to all staff the “COVID-19 Safety Handbook”. The handbook is available for electronic review and printing on the BISD website under the resources tab in section “C” - [COVID-19 Safety Handbook](#). The COVID-19 Safety Handbook is a collection of guidance and direction from the following governing bodies and research institutes: Washington State Department of Health (DOH), Office of the Superintendent of Public Instruction (OSPI), Washington State Department of Labor and Industries (L&I), Kitsap County Public Health District (KPHD), Centers for Disease Control (CDC), U.S. Environmental Protection Agency (EPA), National Institute of Standards and Technology (NIST), and The American Society of Heating and Air Conditioning Engineers (ASHRAE). The COVID-19 Handbook has been created and implemented by the district COVID-19 points of contact or (POC’s) and is uniform district wide. A hard copy of the COVID-19 Safety Handbook will accompany each site specific accident prevention program in its common storage location at each BISD site/building.

All staff are required to complete all COVID-19 training prior entering a district facility, including access and review of the COVID-19 Safety Handbook in a language they best understand.

Safe Schools Modules:

- Coronavirus Awareness
- Coronavirus: Managing Stress and Anxiety

COVID-19 Points of Contact are responsible for the creation, implementation, and revision of the COVID-19 prevention plan district wide. POC’s work closely with all applicable governing bodies to review and update guidance, as new information and materials related to the COVID-19 pandemic are made available. The district POC’s are listed below:

Erin Murphy – Associate Superintendent

Dane Fenwick – Facility Manager

James Corsetti – Athletic Director

COVID-19 Prevention Plan Supervisors

Administrator/Supervisor:	Building Site:
<u>Kristen Haizlip</u>	<u>Bainbridge High School</u>
<u>Sebastian Ziz</u>	<u>Woodward Middle School</u>
<u>Andrew Crandall</u>	<u>Sakai Intermediate School</u>
<u>Tricia Corsetti</u>	<u>Commodore Options School</u>
<u>Melinda Reynvaan</u>	<u>Ordway Elementary School</u>
<u>Amii Pratt</u>	<u>Wilkes Elementary School</u>
<u>Reese Ande</u>	<u>Blakely Elementary School</u>
<u>Erin Murphy</u>	<u>Administration/Technology Building</u>
<u>Dane Fenwick</u>	<u>Maintenance Building</u>
<u>Mary Howes</u>	<u>Transportation Building</u>

COVID-19 Prevention Plan Supervisors are required to:

- Ensure that all employees working on-site or in-person have been trained prior to beginning work.
- Ensure that adequate supplies (at least meeting minimum requirements) of required masks, respirators, and all other personal protective equipment are readily available at each site. This requirement will be conducted in coordination with the Head Custodian at each site and or the Facility Manager.
- Ensure that supervisors have a clear understanding of resources and references to mask requirements and respiratory protection programs specific to staff functions and operations at their site.
- Maintain a knowledge and or understanding of the publication: [Employer-Health-and-Safety-Requirements-for-School-Scenarios](#) and be prepared to furnish employees with a hard or digital copy of the entire document upon request.

APPENDIX A: SITE SPECIFIC PROGRAMS

CHEMICAL HYGIENE PLAN

Purpose: The WISHA Hazardous Chemicals in Laboratories Standard (WAC 296-62-400,

Part Q) requires the employer to appoint a Chemical Hygiene Officer (CHO) and to provide a written Chemical Hygiene Plan (CHP) if employees use or are exposed to chemicals in a laboratory; e.g., high school chemistry and biology labs.

Procedure: Employees must receive information and training relating to any hazardous substance they may encounter in their workplace. The supervisor must review the list of hazardous chemicals in the workplace with the employee. (A current chemical inventory list can be used for this purpose.)

Chemical Hygiene Officer: Is overall responsible for the chemical hygiene plan, the chemical list, proper chemical storage, training on chemicals for students and to assist district employees on training, SDS management for the lab, and testing and maintaining any associated PPE, eyewash and chemical shower stations.

Lab Classroom Personnel Responsibilities

Chemical Hygiene Officer - The school district's Safety Program Manager must appoint a Chemical Hygiene Officer for each school that contains a laboratory.

- Making sure this chemical hygiene plan is readily available to employees and their representatives.
- Records: Maintaining adequate records detailing efforts and results of employee exposure monitoring (including associated accident reports, if applicable) and medical consultations and examinations.
- Training: Ensuring that employees are provided with the required and appropriate training to carry out their responsibilities.
- Monitoring the legal requirements concerning hazardous substances.
- Personal Protective Equipment (PPE): ordering, cleaning, and maintaining the required PPE for the chemicals used in the lab for instructors and students.

Laboratory Staff: Instructors are responsible for planning and conducting laboratory operations in accordance with the appropriate procedures and rules outlined in the Chemical Hygiene Plan. The instructors are also responsible for developing good personal chemical hygiene habits.

Students: Although students are not covered under the Chemical Hygiene Plan, good personal chemical hygiene habits must also be taught to all students who use the lab while enrolled in science courses. Students must not be allowed to use school district laboratories outside of regular science course classes, unless they first obtain permission and are directly supervised during their work.

General Employee Responsibilities: Employees working in classroom labs need to know the following list, this can include but not limited to maintenance, custodial, and assistants.

- The Hazard Communication Program
- The identity of the Chemical Hygiene Officer
- The Chemical Hygiene Plan
- Labels and other forms of warning
- Safety data sheets (SDS)
- Chemical Inventory Control procedures
- Chemical storage area(s) and procedures
- Chemical spill clean-up materials and procedures

Supervisor Responsibilities: Supervisors with employees working in classroom labs need to instruct their employees on the following list.

- Locations of hazardous chemicals within the employee's work area
- Location of the written Hazard Communication Program
- Location of the written Chemical Hygiene Plan in High Schools
- Location of the safety data sheets (SDS) for all hazardous chemicals in the employee's assigned work area
- Location of the list of persons trained and authorized to handle the hazardous chemicals
- Location of the spill-containment procedures and spill clean-up materials to be used in the event of a hazardous chemical spill

Standard Operating Procedures for Lab Classrooms:

- Respiratory equipment – Respirators are not an acceptable substitute for a properly functioning chemical fume hood when attempting to keep employee exposures below PELs. If a chemical fume hood is unavailable, proper respiratory equipment must be provided to employees where the use of respirators is necessary to maintain exposure below PELs. Respirators must be selected and used in accordance with WAC 296-62-07715.

- Personal protective equipment – (PPE) and instructions on the proper use of this equipment must be provided to employees, as appropriate, to minimize exposure to hazardous chemicals.

Room Design: Laboratory facilities should include the following list, where appropriate.

- An adequate general ventilation system with air intakes and exhausts located to avoid intake of contaminated air
- Well-ventilated stockrooms and storerooms
- Proper chemical storage for specific hazardous materials; e.g., flammables, corrosives, poisons and oxidizers
- Adequate laboratory hoods and sinks
- Emergency equipment including fire extinguishers, spill kits, and alarms
- First aid equipment including first aid kits, eyewash fountains and drench showers
- Drain-free floors in chemical storage rooms
- Well-ventilated stockrooms and storerooms
- Proper chemical storage for specific hazardous materials; e.g., flammables, corrosives, poisons and oxidizers

Chemical Procurement:

- Do not accept donations of chemical compounds.
- Purchase chemicals for the laboratory in accordance with the Chemical Hygiene Plan. Staff are prohibited from purchasing or storing restricted chemicals.
- Buy no more than a five-year supply of laboratory chemicals at a time. It is only acceptable to exceed this limit if the chemical is not available in a smaller container.
- Request safety data sheets for all chemicals being purchased. Understand proper handling, storage and disposal before ordering chemicals. Inspect chemical containers when they arrive. Open shipping boxes and Styrofoam outer containers when chemical products arrive. This allows you to see if containers or contents have been damaged in shipping. Return even slightly damaged new containers for refund and replacement.
- Carcinogens, reproductive toxins or highly acute toxins are not allowed in middle school or high school laboratories in this school district without written approval of the Safety Program Manager or Chemical Hygiene Officer.

Hazard Identification: Container Labels and Laboratory Signs

- Labels on incoming containers of hazardous chemicals must not be removed or defaced.
- When dispensing chemicals from one container to another, label the new container with the chemical's name and hazards. Label all secondary containers in this manner unless they are intended for immediate use by the person who dispensed the chemicals.
- Label reusable pipettes with the chemical formula of the solution they contain. Return pipettes to a storage container that is labeled with the chemical's name, formula and hazards.
- Signs should be posted to show the location of safety showers, eyewash stations, exits, first aid kits, fire extinguishers, emergency numbers, etc.
- Extinguishers should be labeled to show the type of fire for which they are intended.
- Label waste containers to show the type of waste that can be safely deposited in them.
- Consumption of food and beverages is not permitted in areas where laboratory operations are being carried out. Mark areas where food is permitted with a warning sign (e.g., EATING AREA - NO CHEMICALS).
- Refrigerators used for chemical storage must have this warning sign posted - "CHEMICAL STORAGE - NO FOOD OR BEVERAGES ALLOWED!"
- All other refrigerators in laboratory spaces must have this warning sign posted - "FOOD STORAGE ONLY - NO CHEMICALS OR LAB SPECIMENS ALLOWED!"

PERSONAL PROTECTIVE EQUIPMENT

Purpose: To provide employees with protective equipment while performing tasks which present a potential for injury.

Procedure: During the initial orientation and safety training, all employees whose position requires the use of personal protective equipment (PPE) will be provided instruction by their supervisor. The instruction will include the issuance of, and the requirement for use, care, and maintenance of personal protective equipment a survey of the work area will be conducted to assess the need for PPE and a record of the assessment will be kept on file.

Supervisors – Are required to assess the hazards of each job and determine what PPE is necessary on the job. PPE requirements can be found in an SDS, manufacturers' user's guides, and WAC's by job type.

- Employees are required to wear PPE as instructed by their supervisor to safely perform their work.
- All required PPE will be furnished employees at no cost to them.
- Employees are required to maintain PPE in clean working condition according to manufacturer's instructions, test PPE before each use, and to request new PPE as needed.
- It is the supervisor's duty to ensure that appropriate PPE is available to employees, they are trained in its use and care, and that PPE requirements are enforced.

Hand Protection – Gloves are the most common form of PPE.

- One-use disposable nitrile or vinyl gloves can be found in First Aid Kits, in case a trained employee should be required to provide first aid or clean up after injury.
- Custodial, maintenance, and yard crews are furnished appropriate gloves to protect them from materials they handle and for the protection against any chemicals or cleaning compounds where the SDS requires it.
- Kitchen workers are furnished appropriate gloves to protect against cuts when using knives and heat from cooking.
- Maintenance staff working on or near energized electrical sources (i.e. testing, troubleshooting), will be furnished rated electrical gloves and protectors.

Eye & Face Protection – Prior to work in any area with potential exposure to hazardous materials/chemicals, the nearest eyewash shall be identified and communicated to all.

- Safety glasses (ANSI Z87.1 approved) will be worn at all times while performing tasks where particles could hit eyes. ANSI approved eye wear shall be worn over prescription glasses for access to project work areas.
- Goggles shall be worn if the potential for fine particles or chemical hazards exist.

Head / Scalp – Hard-hats are to be worn in all construction areas unless otherwise communicated or posted. Hard-hats shall meet ANSI Z.89.1- 1986 and shall be Class A or B.

Legs, Thighs, Knees, Shins, & Ankles

- Custodial and maintenance employees shall wear full length pants and shirts with sleeves at least 4" long. Overalls or pants must not have loose, torn or dragging fabric.
- Pointed tools shall not be carried in pockets. A canvas or leather tool sheath hung from the belt is acceptable. Remember: All Points Down, Feet & Toes.
- At no time will tennis shoes or those types be accepted for adequate footwear. Tennis shoes, running shoes, light canvas shoes, etc., are not authorized for wear for custodial or maintenance work or construction areas.

Hearing Protection

- Employees operating equipment are required to wear either foam earplugs or earmuffs as provided by the district when exposed to noise levels equal to or over 90 dB as determined by instrumental spot-testing or when recommended by equipment manufacturer.

HAZMAT Exposures – Qualified employees with current training and certification will assist in the choice of PPE whenever entry or work in a hazardous site is required. They will select the PPE in accordance with the manufacturer's recommendations, as stated in the SDS for the chemical exposure that has been identified, or called for by their training. This may include, but is not limited to, protective eyewear, clothing, gloves, or respirators. (Use of a respirator requires proper training, fitting, and medical monitoring.)

FALL PROTECTION PROGRAM

Purpose: To help reduce or eliminate fall hazards and protect employees, the school district has established a Fall Protection Program. This program applies to all employees involved in construction, alteration, repair, or maintenance and everyone who is assigned to perform tasks where fall hazards of ten feet or more exist.

Procedures: All employees who work ten feet or more above the ground or other work surfaces shall be trained in the primary elements of the district's Fall Protection Program and job-site plans in accordance with WISHA requirements. "Fall Restraint and Fall Arrest" general standards are set forth in Washington Administrative Code, WAC 296-155-245, and Part C-1.

Fall Protection Required Regardless of Height – Floor holes into which persons can accidentally walk, shall be guarded by either a standard railing with standard toeboard on all exposed sides, or a floor hole cover of standard strength and construction that is secured against accidental displacement.

- While the cover is not in place, the floor hole shall be protected by a standard railing.
- Regardless of height, open sided floors, walkways, platforms, or runways above or adjacent to dangerous equipment, such as material handling equipment, and similar hazards shall be guarded with a railing and toeboard.

Fall Protection Required at 4 Feet or More – Examples of such fall risks are: raised walking surfaces are wall openings, excavations, holes, ramps, runways, walkways, scaffolding, and low slope roofs.

Every open sided walking working surface or platform 4 feet or more above adjacent floor or ground level shall be guarded by one of the following fall protection systems:

- A standard railing, or the equivalent, on all open sides, except where there is entrance to a ramp, stairway, or fixed ladder. The railing shall be provided with a standard toeboard wherever, beneath the open sides, persons can pass, or there is moving machinery, or there is equipment with which falling materials could create a hazard.

Fall Protection Required at 10 Feet or More – The district will develop and implement a site specific plan including each area of the workplace where employees are assigned and where fall hazards of 10 feet or more exist.

Prior to permitting employees into areas where fall hazards exist, the supervisor will insure that employees have received training in the site fall protection work plan and that all fall protection restraint and fall arrest systems have been inspected and comply with the work plan.

Safety Watch System – When one employee is conducting any repair work or servicing equipment on a roof that has a pitch no greater than four in twelve, employers are allowed to use a safety watch system. Ensure the safety watch system meets the following requirements:

- There can only be two people on the roof while the safety watch system is being used. The one employee acting as the safety watch and the one employee engaged in the repair work or servicing equipment.
- The employee performing the task must comply promptly with fall hazard warnings from the safety watch.
- The safety watch system cannot be used when weather conditions create additional hazards.
- The employee acting as the safety watch must meet the definition of a competent person as defined in WAC 296-155-24603, has full control over the work as it relates to fall protection, has a clear, unobstructed view of the worker, is able to maintain normal voice communication; and performs no other duties while acting as the safety watch.

Training

All Employees – That are exposed to falls will be trained in the Fall Protection Program. General fall protection training is a requirement for all maintenance/facilities employees as of new employee orientation.

Site-Specific Training – Will be provided for site-specific fall protection work plans prior to the employee commencing work in the area. Site-specific training records will be maintained at the work site, with a signed training report for each employee filed with the employee's safety training records.

Retraining – Will be provided whenever there is a change of procedure or equipment, a change on job task assignments, or when deficiencies in training are noted by the supervisor.

PEST MANAGEMENT PROGRAM

Purpose: Integrated Pest Management (IPM) on school property is a long-term approach to maintaining healthy landscapes & facilities that minimizes risks to people and the environment.

Procedure: The school district will use: site assessment, monitoring, and pest prevention in combination with a variety of pest management tactics to keep pests within acceptable limits. Instead of routine chemical applications, cultural, mechanical, physical, and biological controls will be employed with selective use of pesticides when possible.

Pesticides – If the district deems it necessary to use chemical sprays to manage vegetation and/or insect pests, the following guidelines are adhered to.

- Whenever possible, pesticide spraying treatments will be managed at times when school is not in session. When it is necessary to apply pesticides when school is in session, the areas will be clearly marked and isolated from the school population.
- Pesticides used in the district must be pre-approved by the Facilities Maintenance Supervisors.
- Records of applications and Material Safety Data Sheets (MSDS) for approved materials are on file at the Support Services Center.
- Notification and posting of pesticide treatments will be made in accordance with applicable state laws.
- Except in emergencies, in the highly unlikely case where pesticides may be used when school is in session, pre-notification information will be sent home with all students at the site where the application takes place.

Personal Protective Equipment (PPE) – Employees are required to maintain PPE in clean working condition according to manufacturer's instructions, test PPE before each use, and to request new PPE as needed.

Notifications – Washington Pesticide Application Act, section 17.21.410 of the Revised Code of Washington, requires that an individual, not just a certified applicator, that applies pesticides to the grounds of a school, nursery school or day-care center, must post indoor and outdoor signs at the time of the application and remain posted for 24 hours. Details on whom to contact for information regarding the pesticide application is included on the sign. Pesticide information displayed for each application:

- Location of area treated
- Product name
- Active ingredient

- EPA registration number
- Time and date of application

Training – WAC 296-307 Safety Standards for Agriculture, Parts I, J and J-1. Only state Certified Pesticide Applicators employees, WPS handler trained employees, or licensed third parties will perform pest management. Training is repeated every five years.

- unacceptable.

HEARING CONSERVATION PROGRAM

Purpose: The purpose of the Hearing Conservation Program is to ensure that all employees are protected from exposure to noise hazards. Employers whose workers are exposed to high noise levels must have an active program for protecting their employees' hearing.

Procedure: Employees who are exposed to noise at or above an eight-hour time-weighted average of 85 dB (decibels) must be covered under a hearing conservation program. For these employees, the employer must develop, implement, and maintain (at no cost to the employees) a program consisting of the following.

- Mandatory audiometric testing
- Making hearing protectors available and ensuring their use.
- Comprehensive training explaining hearing loss, hearing protective devices, and the employer's hearing conservation program.
- Installation of warning signs for high noise areas (115 dBA or higher).
- Keeping accurate records.
- Ensuring employee access to their records.

HAZARDOUS WASTE MANAGEMENT

Purpose: The hazardous waste management and emergency response plan is designed to Protect employees from harmful hazards while handling, storing, and removing hazardous waste within the confines of the district. It is also to protect the environment from chemical spills or contamination. The plan also provides guidelines for chemical spill control.

Procedures: The district will ensure that all employees who handle chemicals will be trained in Proper waste handling and emergency procedures. Chemical exposures include, but are not limited to classroom settings such as: science labs, shops, CTEs, life skills, theater/drama, and art. Other areas include but are not limited to: maintenance shops, transportation departments, food service, and outdoor chemical use.

Program – Please refer to the district’s Emergency Response Plan located at each site for chemical hazards that do not originate from the school district. This program contains information regarding the district’s Hazardous Waste Management Plan procedures.

Chemical Spill –Only trained employees will clean up a chemical spill. Employees will follow the instructions for PPE, first aid, storage, and disposal listed on the chemical manufacturer’s SDS.

Chemical Spill Cleanup Procedures

1. Cordon off the spill area.
2. Evacuate the area if needed, keep students away.
3. Control the spread of the liquid or dust as much as possible.
4. If the substance is volatile or can produce airborne dusts, close doors and increase ventilation (through fume hoods, for example) to prevent the spread of dusts and vapors to other areas.
5. Have a trained employee follow SDS instructions and hazard warnings, and wear proper PPE for cleanup.
6. Collect and contain the cleanup residues.
7. Dispose of the waste properly.
8. Decontaminate the area and affected equipment if necessary.
9. Document all details about the spill and cleanup and submit to the school principal or school district HR department.

Disposal – The Kitsap County Public Works Department accepts unwanted, outdate, or mixed household hazardous waste from households and school districts. Wastes that are contaminated mixtures and cannot be practically

reused or recycled onsite, or are too dangerous to be safely reused are processed, stored, and transported off-site by a licensed waste hauler.

Storing for Disposal – The school district employees will comply with the manufacturer’s SDS on storing, handling, and transportation requirements of each chemical.

OUTDOOR HEAT EXPOSURE PREVENTION PLAN

Purpose: The purpose of this program is to ensure compliance with the Outdoor Heat Exposure rule, WAC 296-62-095, for employees who are exposed to temperatures at or above Table 1 of the regulation. Employees with only incidental exposure as defined in the rule are not included.

Procedures: The following requirements are only in effect during the months of May through September each year for the following job categories or positions having outdoor heat exposure in accordance with the WAC.

Training – Each year prior to the month of May, all employees working under the Director of Facilities will be provided training on signs and symptoms of outdoor heat exposure and on the company policies to prevent heat-related illness.

Employee Training Content

- The environmental factors that contribute to the risk of heat-related illness.
- General awareness of personal factors that may increase susceptibility to heat-related illness.
- Removing heat-retaining personal protective equipment during breaks.
- Frequent consumption of small quantities of drinking water or other acceptable beverages.
- Acclimatization
- The different types of heat-related illness, and the common signs and symptoms.
- Immediately reporting signs or symptoms of heat-related illness in either themselves or in co-workers to the person in charge and the procedures the employee must follow including appropriate emergency response procedures.

Supervisor Training Content

- The procedures the supervisor must follow to implement the applicable provisions of WAC 296-62-095 through 296-62-09560.
- The procedures the supervisor must follow if an employee exhibits signs or symptoms consistent with possible heat-related illness, including appropriate emergency response procedures.
- Procedures for moving or transporting an employee(s) to a place where an emergency medical service provider, if necessary can reach the employee.

Drinking Water – On days when the temperature is at or above those listed in Table 1 of the regulation, employees will be provided a sufficient quantity of drinking water, which is readily accessible at their work location. The water quantity will be sufficient to allow each employee to drink at least a quart or more of water each hour. Drinking water packaged as a consumer product and electrolyte-replenishing beverages such as sports drinks that do not contain caffeine are acceptable.

CONFINED SPACES PROGRAM

Purpose: The purpose of the confined space program is to set into place, procedures to protect workers whenever entry into a confined space is required for inspection, maintenance or other reasons. Adherence to the standards in this program is imperative to ensure safe entry, safe work and safe egress. This program is in accordance with the Washington Industrial Safety and Health Administration's (WISHA), Confined Spaces standard, WAC 296-809.

Procedure: All persons preparing to enter a confined space must identify the procedure for the specific space and follow all procedures as detailed in this program.

Confined Space – A space defined by the concurrent existence of all of the following conditions

1. Large enough and so configured that a person can enter and perform work.
2. Has limited or restricted means for entry or exit.
3. Is not designed for continuous occupancy.

Permit-Required Confined Space (PRCS) – A confined space that has one or more of the following characteristics

- Contains or has a potential to contain a hazardous atmosphere.
- Contains a material that has the potential for engulfing an entrant.
- Has an internal configuration such that an entrant could be trapped or asphyxiated by inwardly converging walls or by a floor which slopes downward and tapers to a smaller cross-section.
- Contains any physical hazard. This includes any recognized health or safety hazards including engulfment in solid or liquid material, electrical shock, thermal hazards, chemical contact hazards or moving parts.
- Contains any other recognized serious safety or health hazard that could either impair the ability to self-rescue or result in a situation that presents an immediate danger to life or health.

Non-Permit Confined Space (NPCS) – Any confined space not having any of the four characteristics of a Permit-Required Confined Space as listed above, i.e. does not contain actual hazards or potential hazards capable of causing death or serious physical harm.

Note: If the opening is large enough for the worker to fully enter the space, a permit is required even for partial body entry. Permits are not required for partial body entry where the opening is not large enough for full entry, although other rules such as Lockout-Tag-out, WAC 296-24-110 or Respiratory Hazards, chapter 296-841 WAC may apply.

Hazardous Atmosphere – An atmosphere that may expose employees to the risk of death, incapacitation, and impairment of ability to escape unaided from a permit-required confined space, injury, or acute illness caused by one or more of the following

- Flammable gas, vapor, or mist in excess of 10% of its lower flammable limit (LFL).
- Airborne combustible dust at a concentration that meets or exceeds its LFL.
- Atmospheric oxygen concentration below 19.5% or above 23.5%.
- Atmospheric concentration of any substance which may exceed a permissible exposure limit. - Any other atmospheric condition that is immediately dangerous to life or health.

Employee Responsibilities – The district Safety Officer and the district’s Maintenance Department Manager are responsible for managing the confined space program. Their duties include:

- Identification of all confined spaces in the workplace
- Classification of confined spaces as permit or non-permit required
- Documentation of the classification process
- Informing affected employees about the existence, location, and danger of any permit-required confined spaces
- Taking effective measures to prevent unauthorized employees from entering permit-required confined spaces
- Working closely with contractors who enter district confined spaces (see WAC 296-809-20006)
- Reevaluation of non-permit required spaces if hazards develop.

Identified Confined Spaces

<i>Site Location</i>	<i>Permit/Non-Permit</i>	<i>CS Description</i>	<i>Department in Charge</i>

Training

Permit Required Confined Spaces – Provided to all employees that might work in these spaces

- The location and hazard of each space
- The district program for confined spaces
- Emphasis on not entering the space for any reason.

Non-Permit Required Confined Spaces – Provided to employees who might enter these spaces

- Explanation of the general hazards associated with confined spaces.
- Discussion of specific confined space hazards associated with the facility, location, or operation.
- Reason for, proper use, and limitations of personal protective equipment and other safety equipment required for entry into confined spaces.
- A clear understanding of what conditions would prohibit entry.
- Procedures for responding to emergencies.
- Duties and responsibilities of the confined space entry team.
- Description of how to recognize symptoms of overexposure to probable air contaminants in themselves and co-workers, and method(s) for alerting the Attendant(s).

Space Entry

Non-permit Confined Space – Prior to entry into an NPCCS all workers must observe conditions in the area to determine if there are any changes or conditions that suggest an unsafe work environment. If there are concerns about the safety of the NPCCS, the worker must not enter the space and report his/her concerns to their supervisor. For a safe work environment it may be necessary to complete the following steps.

- Lock out/Tag out equipment—Prevent unwanted operation of fans in duct areas, protect against flow of liquid or steam in pipes being worked on in confined area.
- Erect barriers to direct pedestrian & vehicular traffic away from site. Block or tie boiler doors open to prevent accidental closure.
- Wear personnel protective devices such as clothing, eye protection, hard hat, hearing protection, and/or respiratory protection. If asbestos is present, comply with all asbestos-handling regulations.
- Provide additional ventilation as needed for personal comfort.
- Wear personal air monitoring device to detect possible change in air quality.

- Establish ongoing communication with someone outside the confined space. Check-in/check-out calls to the Maintenance Department or use of a maintenance helper outside the confined space should be considered.
- Be alert to changes in yourself—Headaches, dizziness and other feelings of discomfort may be warning signs of something wrong. IF IN DOUBT, GET OUT.

Permit Confined Spaces – Will only be entered by a contractor. When a contractor is hired to perform work in a district confined space, the district will provide the contractor with the following information.

- The location of the permit spaces.
- Entry into permit spaces is only allowed by following the written entry program.
- The reasons for listing the space as a permit space, including both of the following:
- The identified hazards
- Who will debrief the contractor at the completion of entry operations, or during entry if needed, on whether any hazards were confronted or created during their work.

Personal Protective Equipment (PPE) – Certain confined spaces have conditions that require the use of Personal Protective Equipment (PPE) to protect workers from injury. All entrants shall use PPE as specified by the person authorizing entry. Additional PPE may be worn at the discretion of the worker.

APPENDIX B: FORMS

EMPLOYEE INCIDENT REPORT (EIR)

PART I: To be completed by EMPLOYEE

If you seek medical treatment, call ESD 114 Workers' Compensation Trust at 1-800-643-4369 or 360-464-6889 to file a claim

Incident Date _____ Hour _____ am/pm Work Phone _____

School District _____ School Name _____

Employee's Name _____ Social Security Number _____

Address _____ City _____ Zip _____

Home Phone _____ Date of Birth _____ Marital Status / Dependents _____

Department _____ Job Title _____ Shift Hours _____ to _____

(Food Service, Transportation, Maintenance, etc.)

Please mark the applicable category with an X:

Have not received first aid or medical treatment at this time, but may want to file a claim at a later date.

Received first aid (If YES, please describe type and by whom) _____

Will or have received medical treatment (**Phone 1-800-643-4369 to file a claim** and add the provider's information below):

If receiving medical treatment complete: (Medical Provider's Name / Clinic / Hospital) (Phone Number) (City)

Reported the Incident to _____ Date Reported _____

Name(s) of Witness (es) _____

Did Incident Occur On or Off School Premises? _____

Were You Doing Your Regular Work? _____

Where Did Incident Occur? _____

(Breezeway, classroom, garage, grounds, etc.)

Description of Incident (include task being performed; step by step detail of incident; any tool/object involved):

Injury: _____ Body Part Injured: _____ Side: RIGHT or LEFT
(Bruise, sprain, strain, wound, etc.)

EMPLOYEE SIGNATURE _____ **DATE** _____

PART II: To be completed by the SUPERVISOR

Send to District Office/HR within 2 days of incident*

Date Investigated _____ Equipment Damaged? YES or NO If yes, describe: _____

Describe incident per your findings: _____

Could the incident have been prevented? YES or NO If yes, how? _____

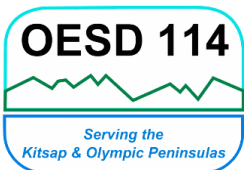
Describe what was found unsafe (Employee actions, equipment, lighting, clutter etc.) _____

Follow up action to be taken _____ By whom _____ Date _____

Last date worked _____ Return to work date _____

Is light duty work available? YES or NO

SUPERVISOR SIGNATURE _____ **Phone #** _____ **Date** _____



Olympic ESD 114 Workers' Compensation Trust

105 National Ave N., Bremerton, WA 98312

*Upon receipt send top page to OESD 114 114 WCT or Fax: (360) 754-6288

Revised January 2020

RECORD OF HAZARD OBSERVED

Reported By: (Optional) _____ Date: _____

Reported To: _____ Date: _____

Nature of Hazard: (Describe-Act, Equipment Situation, etc.)

Location of Hazard: (Be specific, i.e., custodial closet, West Wing, XYZ Elementary School)

Action Taken: (By Supervisor)

Signature _____ Date _____

Forward to Safety Committee for review: _____

Safety Committee Review _____ Date _____

Safety Committee Chairperson _____ Date _____

ACCIDENT CAUSATION GUIDE

DIRECT CAUSES OF ACCIDENTS

Energy Sources

1. Mechanical: machinery, compressed gases, moving objects, tools explosives, strain (self)
2. Electrical: uninsulated conductors, high voltage sources
3. Chemical: acids, fuels, bases, reactive materials
4. Thermal Radiation: x-rays, lasers, microwave

Hazardous Materials

1. Compressed or Liquefied Gases: flames, hot surfaces
2. Corrosive Materials
3. Flammable or Explosive Materials: solid, liquid, gas
4. Oxidizing Materials
5. Poison
6. Dust: grinding or sawing that creates unsafe particulates

BASIC CAUSES OF ACCIDENTS

Management Safety Policies and Decisions

1. Health and Safety Policy is not: in writing, reviewed periodically, signed by top management, distributed
2. Health and Safety procedures do not provide for: a written manual; accident investigation safety meetings; job safety analysis; adequate housekeeping; medical surveillance; preventive maintenance; reports; safety inspections
3. Health and safety not considered in procurement of: supplies; equipment; services
4. Inadequate personnel practices regarding: employee selection; communication; training; assigned responsibility; assignment; accountability; job observation

INDIRECT CAUSES OF ACCIDENTS

Unsafe Acts

1. Failing to use personal protective equipment
2. failing to warn co-workers or secure equipment
3. Engaging in horseplay
4. Lifting improperly
5. Loading or placing equipment or supplies improperly
6. Rendering safety devices inoperable
7. Operating equipment at improper speeds
8. Operating equipment without training or authority
9. Servicing equipment while energized
10. Improper work position
11. Using drugs or alcohol
12. Using defective equipment
13. Using equipment improperly

Unsafe Conditions

1. Congestion of workplace
2. Defective tools, equipment, or supplies
3. Excessive noise without proper hearing protection
4. Fire and/or explosion hazards
5. Hazardous atmospheric conditions without proper ventilation equipment: gases, dust, fumes, vapors
6. Inadequate supports or guards
7. Inadequate warming or cooling systems
8. Poor housekeeping
9. Poor lighting

Personal Factors

1. Behavior Factors: frequent accidents, risk taking, lack of hazard awareness
2. Experience Factors: insufficient knowledge, accident record, inadequate training or skills, unsafe practices
3. Physical Factors: size, strength, stamina
4. Mental Factors: emotional, addiction, depression
5. Motivational Factors: needs, capabilities
6. Attitude Factors: people, company, job

Environmental Factors

1. Unsafe Facility Design: mechanical layout, access ways, electrical systems, material handling, hydraulic systems, lighting, temperature, ventilation, noise
2. Unsafe Operating Procedures
3. Unsafe Projections: physical plant, equipment, procedures, supplies
4. Unsafe Location Factors: geographic area, surroundings, terrain, weather