



Safety, Health, and Risk Management Manual

2016-2021

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Milton Campus

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Century Center

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South Santa Rosa Center

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Gulf Breeze, Florida 32563
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Pensacola State College

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Safety, Health, Risk Management Council Contacts

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Blood borne Pathogens, OSHA and Hazardous Materials Coordinator	484-1699
Jonathan Garrett - Environmental Management Manager (Pensacola Campus)	
Campus Representative – Milton	484-4463
Anthea Amos – Campus Dean (Milton Campus)	
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Judy Harrington – Health Clinic Coordinator	
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Safety and Loss Prevention Coordinator	484-2500
Hank Shirah– Director of Public Safety/Chief of Police	
Training & Professional Development	484-1953
Juanita Scott – Director, Staff and Professional Development	
Worker’s Compensation Loss Time, Medical and Leave Benefits	484-1766
Tammy Henderson – Director of Human Resources	

Safety, Health, Risk Management

Purpose

The purpose of the district Safety, Health and Risk Management Plan is to assist the College to execute appropriate institutional policies, procedures and practices that promote a healthy, safe and secure environment for students, employees and guests of Pensacola State College. The safety plan is designed to ensure compliance with local, state and federal statutes regulating health, safety, loss prevention and risk management. An effective safety plan includes the concepts of a healthy and safe environment conducive to the learning needs of students, described in the Accreditation Criteria of the Southern Association of Colleges and Schools Commission on Colleges.

Policy Statement

The concepts of health, safety and effective risk management are embedded in the policies and practices of Pensacola State College. A comprehensive Safety Plan is designed to support regulatory compliance with local, state and federal statutes that promote health, safety, loss prevention and risk management throughout the College district. A healthy, safe and secure environment to support the learning needs of students is the overarching objective of an effective institutional Safety Plan.

Pensacola State College employees are expected to adhere to institutional policies, procedures and practices designed to prevent accidents and injuries and to minimize occupational exposure to disease and illness. Violations of health and safety policies and procedures will result in corrective actions that assure the health and safety of all individuals.

Authority

The Safety Plan is reviewed annually by the SHRM Council and with modifications approved by the Executive Committee.

Roles and Responsibilities

Risk Manager

The responsibilities of the Risk Manager include:

- coordination of district legal affairs in property, casualty and liability claims litigations, grievances, and dispute resolutions
- coordination of Workers' Compensation Insurance program, including reporting requirements, claims management and litigations
- coordination of self-insurance and recovery funds through the Florida College System Risk Management Consortium
- coordination of bonding process for Board of Trustees and district employees
- coordination of athletic insurance coverage
- primary College representative in coordination with the Florida College System Risk Management Consortium
- communications to district employees on risk management issues
- accident and incident investigations received and reviewed
- maintenance of accident and incident report log
- coordination of insurance and death benefits for public safety officers
- evaluation of institutional compliance with local, state and federal statutes and corrective actions regarding health, safety, loss prevention and risk management matters

Safety and Loss Prevention Coordinator

The responsibilities of the Safety and Loss Prevention Coordinator include:

- organization and implementation of district safety and security programs that affect students, faculty, staff, facilities and equipment district wide
- implementation of district campus safety, traffic safety and pedestrian safety programs and protective services
- coordination of district College Public Safety department activities and programs with other departments and law enforcement agencies
- evaluation of College Public Safety personnel
- presentation of workshops and lectures as requested on public safety and security functions and programs to College classes and staff
- coordination of periodic safety inspections of district buildings and facilities
- formulation and approval of policies, procedures, rules and regulations covering departmental activities
- administration of staff and department to ensure that all duties and functions are efficiently and economically performed
- coordination of civil defense preparedness for the College

- coordination and communication with appropriate College personnel and departments to assure that construction and renovation projects comply with existing safety and fire prevention codes

OSHA Coordinator

The OSHA Coordinator's responsibilities include:

- acquisition of a library of OSHA Regulations and information
- response to research questions related to OSHA Regulations
- point of contact for OSHA inspections, State or Federal
- campus visits to college sites and campuses quarterly to monitor compliance with OSHA standards
- authorization to stop college operations at any location when violation of OSHA standards presents imminent and serious danger for employees, students or campus visitors
- coordination of mandatory OSHA related training and placement in Human Resource records of documentation of employee training
- review of accident reports to determine if OSHA violations contributed to the accident; if violations occur, preparation of appropriate training and/or physical plant changes
- formation of college policy statements and policy changes to ensure compliance with OSHA standards

Hazardous Materials Coordinator

The responsibilities of the Coordinator for Hazardous Materials includes:

- district management of Hazardous Materials; chemical and biological
- coordination of training in management of hazardous materials
- assists departmental managers in chemical inventories, chemical safety awareness and training of chemical laboratory assistants
- point of contact for assistance in hazardous materials; procure SDS
- assistance in the evaluation of institutional compliance in local, state and federal statutes related to hazardous materials management
- assists in review of all campus sites to ensure regulatory compliance
- resource person for workshops and seminars related to hazardous materials
- communication and response to hazardous materials issues to increase institutional awareness

Health Clinic Nurse

The responsibilities of the Health Clinic Nurse include:

- assistance in the workers compensation claim process; coordination with Human Resources and the Public Safety Department

- coordination of employee referral process for medical services of worker's compensation claims
- coordination of health services for employees, student athletes and students
- assistance in workshops and presentations on bloodborne pathogens and other health related issues
- assistance in the Bloodborne Pathogens Infection Control process; in consultation with medical consultant for the College

Executive Committee

Members of the Executive Committee have authority and responsibility for maintaining a safe and healthy campus environment.

The Executive Committee's responsibilities include:

- leadership and direction in the adherence to policies and procedures designed to support prevention of injury, disease, accident and losses of property throughout the College district
- utilization of the resources of the College Risk Manager, Safety and Loss Prevention Coordinator and OSHA Coordinator to aggressively promote safety, health, loss prevention and risk management
- compliance with local, state and federal health and safety policies and procedures
- supportive opportunities for employee training in safety, health, loss prevention measures
- assistance in the assessment of campus compliance with health and safety statutes and recommendation of corrective actions
- assistance in monitoring institutional health and safety issues to promote an environment conducive to student learning
- assistance in financial support and budgetary allocations to improve campus health, safety, loss prevention and risk management functions

Administrators/Supervisors/Departmental Leaders

Administrators and supervisors within the College district are responsible for enforcing safety policies, procedures and training that ensure a healthy, safe environment conducive to the learning needs of students.

Administrators, Supervisors, Departmental Leaders' responsibilities include:

- authority and responsibility for a healthy, safe workplace for employees under their jurisdiction
- compliance with the Safety Plan of the district to promote the health, safety and training of employees and students
- assessment of the health and safety needs of the administrative unit to initiate corrective actions for identified deficiencies

- participation in health and safety training procedures to assure adequate knowledge of health and safety practices district wide
- compliance with local, state and federal health and safety policies and procedures
- enforcement of the use of personal protective equipment for the health and safety of employees and students
- assistance in self-inspections of hazardous operations and materials
- compliance with institutional reporting procedures for accident, injuries and incidents
- coordination of health and safety compliance training with the institutional Risk Manager, Safety and Loss Prevention Coordinator and OSHA Coordinator
- maintenance of protective devices and safety equipment properly
- identification of hazardous materials in work areas to prevent accidents and injuries

Employees

Employees are required to adhere to policies, procedures and practices that promote health and safety to prevent accidents and injuries to themselves, students and others. Each employee is responsible for compliance with local, state and federal regulations related to health and safety in the workplace.

Employees' responsibilities include:

- sensible care and sound judgment in the prevention of accidents, injuries and exposure to disease and illness
- prompt reporting of accidents, injuries and incidents to the immediate supervisor, and completion of accident/injury forms required by the Risk Management Office and the campus Public Safety Department
- adherence to health and safety policies, procedures and practices which are designed to prevent accidents and injuries
- utilization of appropriate personal protective equipment to maximize protection
- observance of health and safety regulations at all times
- assessment of health and safety needs and appropriate notification of supervisor of identified deficiencies
- assurance that work areas are maintained in a clean and safe condition
- current knowledge of emergency procedures prescribed by the College to assure responsiveness to health and safety needs
- participation in health and safety training to update knowledge of policies and procedures related to health and safety

Students

Students are responsible for following the health, safety and training policies and procedures prescribed by the College, as applicable. Detailed health, safety and training procedures required of students in health related programs, chemistry, biology, science laboratories, art studio courses, culinary arts, theater, industrial shops, technology, and hazardous materials programs are contained in the course

syllabi within the academic department. An extended listing of programs are covered in Appendix A. Students are expected to comply with the safety and training requirements of the academic department.

Safety, Health and Risk Management Council

A Safety, Health and Risk Management Council is appointed at the district level to ensure institutional procedures and practices that promote health, safety, loss prevention and risk management. The Council is charged with monitoring the health and safety needs of the College and with making recommendations for corrective actions to the Executive Committee.

The Safety, Health, and Risk Management Council recommend technical representatives to serve on the campus level Safety Committee. Membership of the district SHRM Council is appointed by the President and includes representation from the following:

Standing Members	Risk Manager Safety and Loss Prevention Coordinator OSHA Coordinator Hazardous Materials Coordinator Health Clinic Nurse
Campus Reps	Pensacola, Milton, and Warrington Campuses; South Santa Rosa, Century, and Downtown Centers
Administration	Department Heads, Advanced Technology
Faculty	Physical Sciences/Health Sciences
Student	Campus Activity Board member (selected by campus dean)

Safety, Health and Risk Management Council Meetings are held twice a year.

Responsibilities of the Safety, Health and Risk Management Council

Responsibilities of the Council include:

- recommendation of institutional policies and procedures to support compliance with local, state and federal statutes regulating safety
- assessment of the health and safety needs of the College district and appropriate recommendations to the Executive Committee
- review summary analyses of accident, injury and incident reports to make recommendations for corrective action; review frequency, severity and trend data in College accidents; review all lost time accidents; recommend policy changes
- recommendation of technical representatives for campus and center level safety committees
- promotion of employee awareness and training programs that support institutional health and safety practices
- promotion of self-inspection practices throughout the district

- utilization as a resource for faculty, students, and administrators in the implementation of health and safety policies and procedures
- participation in safety inspections process, internal and external audits related to health and safety compliance issues; review audits and propose recommendations

Goals and Objectives of the Council are to:

- monitor an effective safety management program throughout the district
- increase safety awareness through a quality employee training effort
- secure financial resources to support an effective safety program
- improve the communication and response processes to safety issues
- promote policies to protect the life, limb and property interests of college

Campus/Center Safety Committees

The responsibility of each Campus/Center Safety Committee is to:

- convene its first scheduled meeting not more than forty-five days after the date of its inception
- convene scheduled meetings at least twice a year
- maintain minutes of committee meetings and communicate procedures for conducting internal safety inspections of the workplace, with particular attention to the special needs of each campus and center
- assist the SHRM Council to establish and communicate procedures for the investigation of workplace accidents, safety-related incidents, injuries, illnesses, diseases and fatalities
- assist in evaluating the effectiveness of safety rules, policies and procedures in the workplace and make recommendations to the SHRM Council
- promote institutional health and safety policies and procedures to ensure a safe and healthy campus
- communicate health and safety concerns appropriately through the campus deans, vice presidents and SHRM Council
- communicate with the College Public Safety department, Health Clinic Nurse, Risk Manager and administration on health and safety issues
- promote campus and institutional compliance with local state and federal health and safety regulations and serve as a liaison to the SHRM Council
- serve as a campus and institutional resource for current safety and health policies, procedures and training

Risk Management Functions

The Florida College System Risk Management Consortium is created by mutual agreement of the Boards of Trustees of the Florida College System for the sole purpose of joining in a cooperative effort to develop, implement and participate in a coordinated statewide State College risk management program. To provide protection against civil actions, including actions in tort, arising against the boards of

trustees, or any officer, employee or agent of the boards for acts or omissions arising out of or within the scope of their appointment, employment or function; to obtain protection against loss or damage to property owned by or under the control of each board or groups of boards; casualty loss, workers compensation protection and such other protection mutually agreed upon.

- A. To provide an organizational structure, operating policies, guidelines and procedures to effectively implement and administer a long range program to meet the risk management objectives.
- B. To provide for the utilization of the expertise of the College staff and to incorporate the necessary authority and flexibility to administer the program.
- C. To consolidate services to reduce duplication of effort and achieve maximum utilization of resources.

The scope of the risk management program includes:

- Administrative Defense
- Errors & Omissions
- Money and Securities
- General, Automobile, and Defense Liabilities
- Facilities Use
- General Liability Claims
- Property Liability (Fire, Extended Coverage, Theft)
- Workers' Compensation
- Faithful Performance and Fiscal Agent Bonds
- Fine Arts
- Allied Health Professionals
- Intercollegiate Student Athletes
- Law Enforcement Officers (Liability & Casualty)
- Position Fidelity and Public Officials Bonds
- Notary Public Commissions
- Boilers and Machinery

Administrative Defense - provides for coverage for legal defense costs which may occur through the administrative process related to: (a) The Florida Human Rights Act of 1977, (b) The Florida Ethics Commission, (c) Title VII of the 1964 Civil Rights Act, (d) The Federal Age Discrimination Employment Act, (e) Claims of Discrimination based on Veterans Preference or Status (f) the American Disabilities Act, or (g) the Family Medical Leave Act.

Errors and Omissions - provides coverage including defense costs, charges and expenses as well as damages in (a) improper termination, (b) discrimination - employment, failure to hire, (c) discrimination - employee promotions, (e) freedom of speech, (f) failure to provide equal benefits, (f) discrimination - students, (g) improper suspension or expulsion - students, (h) failure to educate.

Money and Securities - provides coverage for theft, burglary, robbery, disappearance or destruction of money and securities.

General Automobile and Defense Liabilities - provides coverage for losses by reason of liability of College for direct or consequential damages for external claims and legal suits for personal injuries, death, and damage to or destruction of property of others, including use of automobiles.

Property Liability - provides coverage for fire, extended losses (e.g. flood), and theft of property owned by the College, with the exception of fine arts.

Workers' Compensation - provides coverage required by State of Florida's Workers Compensation Law for personal injury or death by accident for any employee arising out of and in the course of their College employment.

Facilities Use - provides premises liability coverage for external groups using College facilities for non-College sponsored activities; this program is designed to protect the College against injuries sustained by individuals attending non-College sponsored events and the cost of the insurance to the College is reimbursed by the external organization.

Faithful Performance and Fiscal Agent Bonds - provides coverage for dishonest and fraudulent acts by an employee, including those involved with counting or handling College funds.

Fine Arts - provides coverage for loss of fine art objects over \$10,000.

Allied Health Professionals - provides professional liability coverage for students, faculty, and the College's allied health programs.

Intercollegiate Student Athletes - provides secondary medical accident coverage for students participating in intercollegiate athletic programs.

Law Enforcement Officers (Liability & Casualty) - provides liability coverage for college Public Safety officers/employees for personal and bodily injury, property damage, and other defined exposures within the scope of law enforcement duties; accidental death and dismemberment coverage for officers/employees is included.

Position Fidelity and Public Officials Bonds - provides coverage's for losses resulting from dishonest or criminal act of employees and to ensure selected College employees faithfully perform their duties and responsibilities.

Notary Public Commissions - provides coverage to reduce the exposure of the College to unnecessary financial risk and liabilities.

General Liability Claims - constitute a financial risk to the College. It shall be the responsibility of every employee to engage in practices designed to reduce the exposure of the College to unnecessary financial risk and liability.

Boilers and Machinery - provides property damage to any boiler and/or machinery in the College's facilities.

Worker's Compensation

For work related injuries and injuries, the worker will be sent to a facility used by the College per coordination of the FCSRMC. A medical referral will be handled by the College's health clinic. For a medical emergency, the worker may go to the nearest emergency room.

In completing an Accident/Incident form, the following information will be needed on the concerning the affected worker:

- A. Full name, address, and telephone number.
- B. Employee's occupation, working department, and supervisor's name.
- C. Date of Birth.
- D. Date employee was hired.
- E. Rate of pay, normal hours worked per day, and week.

The report will be given to the Risk Console website for worker's compensation, or called in by the health clinic.

The completed report will be sent to Human Resources for monitoring lost time; to the supervisor for work-related reasons, and to the worker's compensation adjuster assigned to the College's account. Copies will be provided to the employee and maintained in a chart at the health clinic.

When employees are referred for treatment, they will be provided a Worker's Compensation Medical Report form which will be completed by the physician and returned to the health clinic. The ability to return to work will be noted on the Return to Work Status form. Copies will be distributed to the worker's comp carrier, and maintained on file in the health clinic.

Each doctor visit thereafter will require the status of returning to work, noting any limitations. Return to work will be assessed by the Human Resources Director in discussion and agreement with the injured employee's supervisor. Lost time and wages will be reported to the worker's comp carrier.

Accident/Incident Reporting Procedure

Purpose

The purpose of this procedure is to ensure that a consistent approach is followed for accident-incident reporting and investigation among all college campuses and locations. Reporting all accidents and incidents provides the College with an accurate record of its accident experience which can be used to determine the most efficient use of resources in accident prevention strategies.

The purpose of accident-incident investigation is to determine the underlying causes and appropriate corrective actions to prevent repeat occurrences of accidents and incidents. It is NOT designed to apportion blame on any individual or group.

An accident is an event which results in damage to person, property and/or material or product. An incident is an event which has the potential to culminate in the above damages and/or was a “near-miss” accident. Florida College System Risk Management Consortium (FCSRMC) **ACCIDENT/INCIDENT REPORT FORMS MUST BE COMPLETED BY THE IMMEDIATE SUPERVISOR FOR ALL ACCIDENTS AND INCIDENTS.**

Accident Reporting Categories:

- student accidents
- employee accidents
- visitor accidents
- accidents involving property
- vehicle accidents

All accidents, injuries and incidents involving employees, students, temporary workers, and visitors on college property or using college equipment shall be reported. **Supervisors, faculty and staff are responsible for assisting college Public Safety Personnel or Emergency Response persons in completing an official College Accident-Incident Report form.** The Risk Manager will present a summary analysis of campus accidents, injuries and incidents to the district SHRM Council. Referral for Medical Services, First Report of Injury and Workers’ Compensation Managed Care Arrangement Grievance forms (if necessary) must be properly completed in a timely manner.

Injuries to Members of the Campus Community

In the case of a severe injury to a member of the campus community, call 9-911. Public Safety should also be notified to respond to the scene for investigation and facilitation of emergency response. The college Health Clinic should also be contacted by the immediate supervisor for ANY campus accident or injury within 24 hours of occurrence.

In the event of an accident or incident involving a college employee, visitor, student, temporary agency employee, volunteer or guest, an FCSRMC Accident-Incident Report must also be completed by the supervisor and sent directly to the Risk Manager by the next calendar workday after the incident occurrence. Failure to make required contacts and to complete and forward these reports in a timely manner could result in fines being levied against the college.

Reporting and Investigation

All accidents and incidents shall be reported on Florida College System Risk Management Consortium (FCSRMC) Accident/Incident Report forms and investigated by the immediate supervisor. All reported hazards must be investigated. Public Safety will be informed by the immediate supervisor at the time of occurrence of an accident or incident and will investigate the occurrence and complete their applicable report.

An accident or incident that did/could result in injury to a member of the campus community will be investigated immediately by Public Safety. It is the responsibility of the immediate supervisor to contact Public Safety, at the time of the incident occurrence. Immediate response facilitates a thorough and complete investigation allowing interviewing of the injured party and witnesses, collection of evidence and written and visual documentation. The level of investigation and membership of the investigation team will depend on the potential outcome of the sequence of events.

Public Safety Incident Reports will be forwarded by Public Safety to the Risk Manager for review. The Risk Manager, Safety and Loss Prevention Coordinator and OSHA Coordinator may be involved in any investigation if they so request. The Risk Manager will review accidents and incidents and make an annual summary report to the District Safety, Health and Risk Management Council.

Accident/Incident Reports

All FCSRMC Accident/Incident Report forms completed by supervisors should be sent directly to the Risk Manager by the next calendar workday after the incident occurrence. If an event requiring an Accident/Incident Report occurs when a supervisor is not present, a college Public Safety officer will take the report and process it. All Accident/Incident Reports will be logged by the Risk Manager. Copies of Accident/Incident Reports will be retained by the department supervisor for monitoring and corrective actions. Records are retained centrally by the Risk Manager for coordination with the FCRMC, appropriate individuals and committees, and with the Safety, Health and Risk Management (SHRM) Council for monitoring and reporting purposes.

Missing, Lost, and Stolen College Property

In the event of missing, lost or stolen college property or criminal damages to such property, the college Public Safety must be notified, in accordance with college Administrative Procedure # 119. College Public Safety officers will respond to the scene, investigate and complete a criminal offense report.

Administrative Responsibility

All administrators, department heads, and supervisors must ensure that all employees are informed about this Accident/Incident Reporting procedure.

Safety and Loss Prevention Policy and Procedures

The establishment of the Florida Community College's Safety and Loss Prevention Program and its assigned responsibilities is in accordance with administrative rule of the Florida State Board of Education, Workers' Compensation Law (Chapter 440, F. S.), Florida Administrative Code, Rule 381-10 Department of Labor and Employment Security, Division of Safety and other applicable statutes and guidelines.

The purpose of the Safety and Loss Prevention Program is to minimize injury to faculty, staff, students, visitors and damage to property. Inherent in this purpose is the charge to provide a safe and healthy environment in which to pursue the College's activities.

Pensacola State College supports the local, state and federal statutes pertaining to health, safety, loss prevention and risk management. College personnel are trained as required in safety policies and procedures to minimize exposure to accident, injury and illness. A comprehensive Safety, Health and Risk Management Plan assist in the effort to assure a safe and secure environment for all individuals. An effective safety program involves individuals at every level of the organization to support and sustain a collective effort that ensures safe institutional practices.

The scope of the Safety and Loss Prevention Program includes:

- Safety and Loss Prevention Policy
- Safety and Loss Prevention Rules
- Safety Inspection Program
- Safety and Health Training Program
- First Aid Program
- Accident Investigation Program
- Record Keeping

General Safety Rules for all College Personnel and Departmental Units

These rules have been established by the College Safety, Health and Risk Management Council for the protection of students, employees and staff. All employees, students and temporary staff are expected to cooperate in observing safety rules to assure that Pensacola State College is a safe place to work and to learn.

1. Never operate any machine or equipment unless you are authorized to do so by the supervisor/instructor.

2. Do not operate defective equipment. Do not use broken hand tools. Report defective or hazardous equipment to the supervisor/instructor immediately.
3. Obtain full instructions from the supervisor/instructor before operating any machine with which you are not familiar.
4. Never start any hazardous job without being completely familiar with the safety techniques that apply to it. Ask the supervisor/instructor when in doubt.
5. Make sure all safety devices are in place and properly adjusted before operating a machine.
6. Do not operate any machine or equipment at unsafe speeds. Shut off equipment that is not in use.
7. Wear appropriate personal protective equipment to be safe on the job.
8. Do not wear loose clothing or long hair while operating moving machinery. Secure hair in a way that does not create a safety hazard. Avoid wearing dangling jewelry such as long necklaces, chains, etc. which may get caught in moving machinery.
9. Never repair or adjust a machine or equipment unless authorized to do so by the supervisor/instructor.
10. Never oil, clean, repair, or adjust any machine while it is in motion.
11. Never remove a safety guard or safety device guarding a machine except when the machine is stopped, the power disconnected and for the purpose of cleaning, adjusting or repairing only.
12. Put tools and equipment away when they are not being used.
13. Do not lift items that are too heavy or too bulky to be handled by one person.
14. Keep all aisles, stairways, and other exits clear.
15. Do not place equipment so as to block emergency escape routes or fire equipment.
16. Stack all materials neatly; ensure all piles are stable.
17. Keep all work areas and machinery clean and neat.
18. Never take chances. When in doubt ask the supervisor/instructor.
19. Report any injury to the supervisor/instructor immediately.

20. Know the location of first aid/emergency equipment in your work areas and ensure accessibility to essential items in the event of an emergency.
21. Observe traffic safety laws on campus to prevent accidents.
22. Do not work or drive while under the influence of alcohol or drugs.

Science/Laboratory Safety

The College science laboratory areas, including storage and prep areas will be maintained in a safe manner through the following safe practices:

1. Chemicals must be stored in clearly labeled containers; containers must be on shelves no higher than eye level and shelves must be designed to prevent a container from being accidentally knocked off.
2. Flammable chemicals must be stored in approved flammable storage cabinets, away from all other materials; oxidizers must also be stored apart from other oxidizable material. An unbreakable carrier should be used when transporting large glass containers of liquids.
3. Hazardous materials/wastes (both chemical and biological) must be labeled and stored according to state and federal regulations; contact the Hazardous Materials Coordinator for details.
4. Aisles should be kept clear and free of clutter.
5. Safety equipment should be inspected on a regular basis.
6. Chemical and biological wastes should be placed in special waste containers, separate from the paper trash; sharp objects such as broken glass and metal should also be placed in special waste containers.
7. Copies of Material Safety Data Sheets (MSDS) for all chemicals should be available in the storage/prep areas for quick reference.
8. All personnel working in science laboratory areas should receive safety training appropriate for the activities in which they will be engaged; the level of training will differ according to the situation.

Students Enrolled in Laboratory Courses

College students enrolled in laboratory courses will be instructed in safe laboratory practices including the use of personal protective devices (to protect eyes, skin and respiratory systems), safe handling of chemical and/or biological hazards, location and use of safety equipment (fire extinguishers, safety showers, eyewash fountains, etc.), appropriate disposal procedures and emergency procedures.

The content of the training is the responsibility of each department. Written records should be kept to document that each student has received training.

Students working with chemicals must, at a minimum, wear safety glasses, solid shoes and either a plastic apron or a lab coat; individual departments may require additional items. Students working with biohazard must use appropriate protection against infection, in addition to protection from chemical hazards. Under no circumstances should a student be allowed to work unsupervised.

Students Employed as Laboratory Assistants

Students working as laboratory assistants should be trained by their immediate supervisor in both the safe laboratory practices which pertain to students enrolled in science laboratory courses, and in the additional safety practices required of laboratory employees. It must be remembered that student assistants are not trained science professionals; accordingly they should always be given detailed instructions before beginning any new task. They should not be allowed to work unsupervised.

As employees, student assistants must also be informed about any hazardous materials (as defined by federal and state laws) with which they will be working including the location of Material Safety Data Sheets (MSDS) for those materials.

Faculty and Staff Working in Science Laboratory Areas

Faculty and staff working in science laboratory areas should adhere to the standards of laboratory safety appropriate to their disciplines. It is preferable that no one work alone in a science laboratory area, but if this is not possible, there should at least be someone nearby who is aware that a person is working in the lab area. Tasks which involve more than minimal safety risks should NOT be performed alone—another knowledgeable employee should be present.

Protective Safety Wear

1. Follow safety instructions and use required personal protective equipment as directed by the instructor/supervisor.
2. Wear gloves approved by the instructor/supervisor which resist penetration by the chemical being handled, and which do not have pin holes, tears, or rips.

3. Wear a laboratory coat or apron to protect skin and clothing from chemicals.
4. Wear shoes or boots that cover feet completely to protect feet.
5. Wear protective eye equipment as required; laboratory goggles, face mask and visors, etc.
6. Use other protective equipment as required by specific programs and departments.

Smoke-Free Workplace

Pensacola State College is dedicated to providing a healthy, comfortable and productive work environment. Since secondhand smoke can be a cause of disease in non- smokers exposed to environmental tobacco smoke, a smoke-free workplace appears to be a way to insure that optimum health of the College's employees is protected.

In accordance with the Florida Clean Indoor Air Act, § 386.201, Fla. Stat., *et. seq.*, smoking is prohibited within all buildings including classrooms, lunchrooms, conference rooms, restrooms, meeting rooms, and community areas. Smoking shall be disallowed at covered entrance ways and exits to all buildings. This policy applies to all employees, students, clients, contractors, visitors and volunteers.

Employees must share in the responsibility for adhering to and enforcing this policy. Problems should be brought to the attention of the appropriate supervisor and Public Safety.

Safety Inspection Program

- Annual Comprehensive Safety and Sanitation Inspections; performed annually by a certified person meeting the requirements of the State Board of Education rules, and State Requirements for Educational Facilities (SREF) 1997. Follow up inspections are performed by the OSHA Coordinator, Director, Physical Plant and Safety and Loss Prevention Coordinator to insure corrective actions are taken.
- Annual Fire Safety Inspections; performed by certified fire safety inspectors and conducted in accordance with the rules of the Department of Insurance and the State Fire Marshall.
- Food Service Inspections; conducted by the Escambia County Health Department.
- Machinery, Equipment Inspections; conducted by certified engineers representing current insurance carriers. Elevators are inspected annually by contracted certified inspectors; certificates attesting to current inspection dates are posted in appropriate public places.
- Equipment, tools and accessories are visually inspected by unit employees or their designee for unsafe condition before utilization; any equipment considered unsafe must be noted and reported to the supervisor.
- Fire Extinguishing Equipment Inspections; conducted annually by certified inspectors.
- Other Inspections; conducted as required to identify environmental hazards, structural hazards or other potential safety hazards; pool, bus, fire sprinklers, fuel tanks, hydraulics.
- Vehicles are inspected routinely for maintenance and repair.

- OSHA (Occupational Safety and Health Act of 1970) Inspection; compliance officers may make non-scheduled inspections of any place of employment in order to determine compliance with OSHA standards. In addition to the hazard communication standard, compliance officers may also review the safety and health management programs and areas considered high hazard areas of the workplace. OSHA inspectors have authority to expand a record keeping inspection to a comprehensive safety and health investigation if observed conditions warrant it.
- Annual safety inspections of fire sprinkler systems by qualified inspector
- Structural inspection of bleachers every other year by certified structural engineer
- Annual inspection of campus elevators for safety certification
- Annual safety inspection of Hartford boilers by qualified inspectors

All personnel are expected to cooperate in safety inspections. Safety inspections are conducted by qualified and certified individuals.

Copies of safety inspection reports are sent to the Risk Manager, Safety and Loss Prevention Coordinator and SHRM Council. Safety Inspection reports are centralized in the Office of the Safety and Loss Prevention Coordinator.

Safety Training Program

Annual and other required safety training workshops are scheduled through the Office of Staff Professional Development.

Workshop content should include but not be limited to the following topics:

- Accident investigation procedures
- Hazard Communication/right to know laws
- Fire prevention and fire extinguisher utilization
- Personal protective equipment use
- First aid and CPR
- Bloodborne Pathogens Control Procedures
- Safety Management Procedures and Awareness
- Back injury prevention techniques

Official training records are centralized in the Human Resources Office. The Director of Staff Program Development will forward the records of completed training certifications to the Human Resources Office for filing in official employee personnel records.

Wellness Program

Pensacola State College supports a Wellness Program. Employees are encouraged to participate routinely in the life fitness centers located at district campus locations. The Wellness course should be taken prior to using the fitness facilities.

First Aid Guidelines

Instructional personnel and other staff are not required to administer first aid within the scope of routine duties and responsibilities. First aid assistance for minor injuries may be offered by knowledgeable individuals upon request of the victim as appropriate. In responding to minor injuries of students, visitors or staff, the victim may be assisted to self-administer first aid as appropriate. Victims of minor injuries should be directed to a First Aid kit or station for assistance with first aid supplies. The Health Clinic nurse (Pensacola), Public Safety and the immediate supervisor should be consulted when an injury of any kind occurs on campus.

First aid kits are located in the Health Clinic (Pensacola) and Public Safety Offices at district locations. Supervisors are responsible for assuring that first aid supplies are available for minor accidents and injuries. Accident/Incident reports for minor injuries are filed directly with the campus Risk Manager.

The following guidelines are recommended in responding to minor injuries requiring first aid assistance:

- First aid assistance for minor injuries may be offered by capable individuals knowledgeable in first aid procedures upon request of victim
- Individuals (students, visitors or staff) may be referred to the First Aid kit or station for self-treatment of minor injuries when appropriate
- The College Health Clinic nurse (Pensacola) and Public Safety should be informed of all accidents or injuries occurring on campus
- Usage of first aid treatment must be indicated on the Accident/Incident report (assistance or self-administration)
- Access to a first aid kit and treatment is not intended to substitute for medical attention
- The victim involved and the supervisor must complete an Accident/Incident report and forward to the Risk Manager

Note: A report for all College employee injuries must be completed and sent to the college insurance carrier within five (5) work days by risk management personnel or the Health Clinic nurse or the College is subject to a monetary fine.

Emergency Medical Treatment/Severe Injuries

If a serious or severe injury is sustained requiring medical attention, the following action must be taken:

- Call Public Safety and Health Clinic nurse on Pensacola Campus for help; seek assistance from a co-worker or call 911 immediately.
- If unable to walk, notify the campus Public Safety and Health Clinic Nurse for assistance in contacting EMS; emergency telephone numbers are posted near telephones.
- If able to walk, seek medical attention at a local clinic or medical facility.

- Report detailed information to the supervisor or designated person; supervisor must submit an Accident/Incident Report immediately.

Serious Injuries

When an accident results in an injury to an employee while the employee is performing the duties of his employment, the injury dictates the course of action to be taken.

If the injury is of a serious or life threatening nature, emergency help should be immediately summoned. Arrange for the employee to be taken to the nearest medical facility, depending on the circumstances.

When emergency help is called by the supervisor or department head, someone should be assigned to stand by to meet them and direct them to the location where help is needed. In any accident of a serious nature, the injured employee's family should be notified in person by the supervisor or Public Safety and advised of the action that has been taken. A mode of transportation should also be established in the event the injured employee is unable to operate his or her own vehicle or does not have private transportation.

The Risk Manager must be notified of serious injuries in order that the Risk Management Consortium and insurance carrier can be notified of a life threatening accident. The President of the College must be notified of any serious injury by the Risk Manager, Public Safety or clinic nurse.

Record Keeping Procedures

A comprehensive Safety, Health, Risk Management Plan containing safety policies and procedures is located in the Library at district campus locations, in campus Deans' Offices, in the Public Safety Offices at district locations, in the Health Clinic on Pensacola campus, in the Risk Manager's Office, Safety and Loss Prevention Coordinator's Office, OSHA Coordinator's Office and the In-Service Training Office.

All official Accident-Incident Reports are maintained in the Risk Manager's Office. College Police Accident Investigations Reports and related Accident-Incident Reports are maintained in the college Public Safety Office.

Employee safety training records mandated by state and federal regulations are monitored by the OSHA Coordinator and the Staff and Program Development (SPD) Office. The OSHA Coordinator, with the assistance of department heads, will organize a master list of SHRM training required annually by state and federal regulations. The SPD Office will schedule and acquire instructors for the SHRM workshops. The SPD Office will centrally monitor and track the required training to ensure it is completed annually. Individual training files will be established by the SPD Office for identified trainees and a check list of required training for each individual will be monitored for annual completion of training. The SPD Office will send required training reminders for individuals to department heads.

The list of SHRM workshop attendees and certificates of seminar completions for required training will be forwarded to the Human Resources Department to update individual training files with the training completion information for placement in official records. Departments with specialized programs will also maintain working copies of unofficial training records.

Safety and Security Guidelines (Public Safety Department)

The mission of Pensacola State College Public Safety Department (PSD) is to provide our campus community with a safe and secure environment in which to pursue an education or profession with a minimum fear of victimization.

To assure 24 hour-a-day assistance for the campus community, PSD operates a dispatch office and employs non-sworn Public Safety Officers around the clock. Sworn Police Officers are on duty 16 hours a day, 7:00 a.m. to 11:00 p.m., Monday through Friday, for the protection of students, staff and visitors. Uniformed police officers patrol the campus by marked vehicle, by foot patrol, by buggy and by bicycle.

Sworn Police Officers carry firearms and have arrest powers. Uniformed, non-sworn Public Safety Officers assist in situations that do not call for police action. Student assistants, identified by orange SAFETY vests, also assist with non-enforcement duties.

Emergency Situations

In the case of any emergency, it is important to remain calm and think clearly. Always have a plan of action ahead of time. If one does become the victim of a crime or disaster of some type, remember that one can survive and continue in a healthier and stronger way.

Fire Alarms

Fire alarms are required in buildings for safety. Departmental managers should assign responsibilities for exiting the building in the case of activation of a fire alarm. PSD should be immediately called. The department head, supervisor or their designee should immediately begin a search for a fire source. The Fire Department should only be called if flames and heavy smoke are visible; in this case, immediately dial 9-911 for responding fire departments.

In the case of an actual fire, the department head or supervisor will verbally notify building occupants of the situation. Fire alarms should only be silenced by PSD personnel or authorized maintenance personnel. Departmental Staff should never silence fire alarms. Students should be advised of fire alarm procedures during campus safety training events.

Campus Disasters

Disasters are not always predictable. Any disaster occurring on a college campus, including but not limited to airline crashes, serious traffic accidents, tornados, explosions, gunfire, physical injury to or death of a member of the campus community, must be reported immediately to the PSD.

Departmental managers, supervisors or designee should assume responsibility and take charge of the situation until assistance arrives. Onlookers and those not involved in life saving procedures should be moved from the scene. Those in positions of responsibility should assist as directed by emergency personnel.

In the case of outside gunfire, members of the campus community should remain inside the secured room, away from doors and windows.

In the case of chemical spills that could threaten the campus community, individuals should immediately be moved from the area.

News media must be directed to the Office of Marketing and College Information. College personnel should refrain from making statements to members of the media.

Active Shooter

When an active shooter is in your vicinity, quickly determine the most reasonable way to protect your own life. Run, hide, and fight are options for employees and college visitors on campus:

- run; have an escape route and plan in mind; leave your belongings behind; keep your hands visible
- hide; hide in an area out of the shooter's view; block entry to your hiding place and lock the doors; Silence your cell phone
- fight; as a last resort and only when your life is in imminent danger; attempt to incapacitate the shooter; act with physical aggression and throw items at the active shooter.

Call 911 when it is safe to do so. When law enforcement arrives:

- remain calm and follow instructions
- put down any items in your hands (i.e. bags, jackets)
- raise hands and spread fingers
- keep hands visible at all times
- avoid quick movements towards officers such as holding on to them for safety
- avoid pointing, screaming or yelling
- do not stop to ask officers for help or direction when evacuating

Information you should provide to law enforcement or 911 operator:

- Location of the active shooter
- Number of shooters
- Physical description of the shooters
- Number and type of weapons held by shooters
- Number of potential victims at the location

Bomb Threats

In the event of a called in bomb threat:

- remain calm and think clearly
- ask the caller to repeat the initial statement
- ask where the bomb is located (campus, building, floor, room, grounds)
- ask type and size of bomb (box, bag) and explosive used
- ask why the caller is setting a bomb
- ask whether a remote device is being used
- note whether caller is male, female, adult, child, sober, intoxicated
- note speech pattern and type of accent
- note whether background noise is present
- after caller hangs up, immediately notify PSD, campus dean, office of the president or the most senior College official available

Firearms and Weapons

Laws pertaining to firearms, weapons, or destructive devices on campus can be found in Chapter 790 of the Florida Statutes. Section 790.115, Florida Statutes, prohibits possessing, discharging or exhibiting any sword, sword cane, firearm, electric weapon or device, destructive device, razor blade, box cutter, or other weapon as defined under the law at a College sponsored event or on College property; provided however, that an adult person may have a firearm in a College parking lot if it is secured in an automobile and not ready for immediate use.

In addition to possible criminal prosecution, administrative disciplinary action may be initiated by PSC against any student or student organization found responsible for violating the provisions of Chapter 790, or any provision of the student code of conduct.

Missing Persons

The Higher Education Opportunity Act of 2008 requires any institution participating in Title IV federal student financial aid programs that maintain on-campus housing facilities to establish a missing student notification policy and related procedures. Pensacola State only offers on campus housing facilities for student athletes. If a member of the PSC community has reason to believe that a student is missing, he or she should immediately notify the Public Safety Department at (850) 484-2500. The Public Safety

Department will generate a missing person report and initiate an investigation. In the event that the Public Safety Department determine that the student is missing, notifications will be made to the following within twenty-four hours of the determination:

- student's designated confidential/emergency contact
- student's parent or legal guardian, if under the age of eighteen and not emancipated
- surrounding law enforcement agencies

The confidential/emergency contact information will be accessible only to authorized campus officials, and may not be disclosed except to law enforcement personnel in furtherance of a missing person investigation. In addition to the notifications mentioned above, once an investigation is initiated, it may include contacting any or all of the following:

- student's parents
- law enforcement agency that has jurisdiction where the student's permanent residence is located
- enforcement agencies along a route where the student may have likely traveled.
- any other person or entity that may have information as to the whereabouts of the missing student

Hostage Situations

In the case of a possible or actual hostage situation, contact the Public Safety Department immediately. If possible, remove all non-involved persons from the scene. Do not attempt to resolve a hostage situation on your own. Trained hostage negotiators will be involved in hostage negotiations. Do not look a hostage taker in the eye nor challenge their authority.

Required Campus Reports

Faculty, staff and administrators are required to report all crimes, suspicious circumstances, safety hazards, and/or unsafe conditions to the PSD. Reports of problems or potential problems on campus or at any college off campus facility should be made to the PSD as soon as possible.

Crime/Suspicious Circumstances

Crimes which must be reported include but are not limited to, thefts of college or personal property, destruction of college or personal property, crimes committed against anyone on any college campus, domestic violence and stalking cases. If one is suspicious of any criminal activity that could harm any member of the campus community, it must be reported just as one would report an actual crime.

Safety Hazards/Unsafe Conditions

Safety hazards which must be reported include but are not limited to, potholes, slick stairwells, sidewalks needing repairs, areas needing additional lighting, inadequate communication systems, faulty electrical equipment and unsafe practices. Report conditions to the PSD, Physical Plant Supervisor or the Risk Manager in order that corrective action may be taken.

Traffic Crashes, Injury to Campus Community Members, Stolen/Damaged Property

Anytime a member of the campus community is involved in a traffic crash or suffers personal injury that requires documentation, PSD must be immediately notified. Anytime personal or college property is stolen or damaged, the PSD should be contacted immediately. Police officers will respond, provide or procure medical attention, take reports as dictated by law and assist in any other necessary paperwork, including the required Accident/Incident Reports (Reporting procedures included under Risk Management section of manual).

Traffic Issues

If involved in a traffic crash on campus, immediately notify PSD. Do not leave the scene of the accident. Request that a third party immediately summon any emergency aid necessary. Any other traffic issue, including parking citations, traffic flow, speed limits and/or traffic safety issues should be routed to PSD.

College employees and students are required to display parking decals on any vehicle driven on college campuses. Parking decals are issued at no cost. Decals and rules and regulations pertaining to parking on college campuses are available in the PSD location on each campus.

College Vehicles

Florida law requires the use of seatbelts in the front seat of any motor vehicle. The college requires the use of seatbelts in all college-owned vehicles.

Approval to Drive College Vehicle

Students and employees requesting approval to drive any college vehicle for any reason, at any time, must submit a copy of that individual's driver's license to the PSD for driver safety verification. A driving history check will be made in order to determine whether the individual in question will be approved to drive a College vehicle. Submission of the driver's license should be made three (3) weeks in advance of the scheduled drive in order that the information may be processed.

Transportation in College Vehicles

Only college employees, students and approved individuals may be transported in College owned vehicles. In the performance of his or her duties, PSD officers have the authority to transport those individuals who fall within department guidelines for transportation.

Loss Prevention Procedures

College Property

Departmental managers and supervisors must assume a significant role in the security and accountability of departmental property.

Employees must be aware of responsibility in aiding in the protection of COLLEGE property. College property in an individual employee's area should be noted. If that property is missing at any time, the employee should follow through on attempting to locate the missing property. Doors and windows should be locked when no one is in an office area. Missing property, suspicious people and unusual circumstances should be reported to the PSD.

Personally owned valuable property should be left at home, or if brought to work, should be securely stored under lock and key. Personal items on campus should be marked with the owner's driver's license number. Items that cannot be marked should be photographed. Model and serial numbers should be recorded in a safe area separate from where the property is kept.

In the case of stolen, damaged, or missing college property, Accident/Incident Reports, as required by the Florida Risk Management Consortium, are to be completed. It is the responsibility of the department head or supervisor to see that all accident, injuries and losses are reported on the required paperwork. PSD should be called to the scene to take any required criminal or police reports. The Accident/Incident Report should be filled out completely and sent directly to the college Risk Manager's Office (Refer to Risk Management Section of Manual).

Key Control

Keys are issued to college employees according to the College Operating Procedures. Key control assures the safety and security of the College, College property and the campus community. Issued keys are the responsibility of the individual employee accepting the key. Keys are to only be used according to the College Operating Procedures. Keys are not to be loaned to another individual for any reason. Departmental managers and supervisors are responsible for the issuing and collecting of keys for adjuncts. Lost or stolen keys must be immediately reported to PSD.

Hurricane Readiness

All College employees have specified responsibilities as a tropical storm or hurricane approaches. Complete instructions for specific divisions are located in the Appendices of the PSD Policy Manual, the Board of Trustees Procedures Manual and with the department heads, unit supervisors and provosts of the College. Basic employee safety and protective information is contained in this manual.

Hurricane Policy Objectives

- enable quick evacuation in an emergency condition
- coordinate informed individual divisions of the College to provide a written response
- provide for rapid mobilization of personnel and materials
- attempt to assure the safety of the College community
- preserve lives and property
- lessen the impact of the emergency situation
- enable orderly and timely evacuation of personnel when necessary
- provide for the dissemination of accurate information

Tropical Storm/Hurricane Condition Phases

Condition IV

A tropical storm has developed and its trend of movement indicates a possible threat of destructive winds to the Pensacola area within 72 hours.

Condition III

A developed tropical storm or hurricane continues to advance and its path has assumed a definite pattern which threatens the Pensacola area within 48 hours - Hurricane Watches are issued for projected landfall areas.

Condition II

The track of the tropical storm or hurricane has been definitely established and can be expected to strike the Pensacola area within 24 hours - Hurricane Warnings are issued for projected landfall areas.

Condition I

Winds of destructive force are an imminent threat to the Pensacola area within 12 hours.

Employee Responsibilities Throughout Tropical Storm/Hurricane Condition Phases

In the case of an impending storm, PSD is the college liaison with Escambia and Santa Rosa Emergency Operations Centers. The Public Safety Department in Building 5 on the Pensacola Campus is the designated Command Center for emergency response coordination.

All college employees are reminded that if, for some reason, they must ride out a storm on a college campus, the employee must check in with PSD and give the names of all persons in their party who are on campus. The employee and accompanying persons will be assigned a shelter area.

The Director of Public Safety shall maintain contact with the U S Weather Service and the Civil Defense coordinator and will issue information to the following offices throughout all tropical storm/hurricane condition phases:

- president, vice presidents, campus deans, center directors via the vice president for student affairs
- director of physical plant and maintenance
- director of facilities planning and construction
- health clinic nurse, Pensacola campus
- office of College Marketing and Information

Hurricane/Storm Preparations

Condition IV (72 hours)

- inventory taken of supplies on hand and necessary and projected equipment needs; preparation to order/stock items
- available College vehicles are checked, serviced and ready with appropriate equipment or will be equipped as directed
- radio batteries and other rechargeable equipment shall be placed on charge
- College employees are encouraged to secure their own homes and personal property and to begin to make preliminary arrangements to seek refuge at a designated shelter if needed
- preparation of an emergency recall plan to ensure availability of adequate personnel to check property and equipment will be initiated

Condition III (48 hours)

- coordination among College divisions regarding personnel needs and departmental assistance begins
- loose objects on campus grounds are secured
- work orders initiated and forwarded to Director, Facilities, as appropriate
- purchase orders initiated and forwarded to Purchasing Department as appropriate
- continuation of preparations and actions initiated during Condition IV

Condition II (24 Hours)

- full precautionary measures are in place to ensure protection of college campus lives and properties against the forces of destructive winds
- in order to prevent projectile damage in high winds, employees are expected to be attentive for loose objects which need to be secured; report the need to the Director, Facilities
- decisions are made concerning cancellation of classes
- electrical equipment owned by the College is moved away from windows and covered with heavy plastic
- personal items of value should be taken home or stored in as safe a manner as possible
- The College President will release all non-essential personnel from duty at the appropriate time after work areas are secure.

- Arrangements will be made for the parking of College and private vehicles which will remain on campus during the hurricane. Vehicles which will be used following the storm will be parked in a manner for easy accessibility.
- Continuation of preparations and actions initiated during Conditions IV and Condition III.

Condition I (12 Hours)

- full precautionary measures are completed to ensure protection of College properties and personnel
- all PSD sworn personnel report back to work with all foul weather gear, flashlights and other equipment needed to sustain them for at least 72 hours
- PSD personnel will report to the Command Center (Building 5). Areas experiencing flooding, downed power lines, roadway obstructions and other hazards; areas posing immediate threats to others will be secured to the best of the officer's ability
- police dispatch will be operated at all times to maintain land-line communications and relay radio communications as required

During the Storm

The Public Safety Department will:

- take shelter for their own protection in Building 5 at the appropriate time; other areas may be designated or assigned
- cease all outdoor patrol functions
- ensure that College employees who are in a College designated shelter stay within the shelter until the storm has passed; personnel will not be allowed to exit the shelter during the lull or the "eye" of the hurricane.

Post Storm

The Public Safety Department will:

- resume duties and responsibilities after the storm has passed
- survey the campuses for possible injuries and/or damage as a result of the storm
- reestablish services and full utilization of facilities by priority following relief/recovery incidents involving the protection of life
- document areas damaged as a result of fire, flood, structural damage, etc. by video and written report; efforts to prevent further damage will be initiated
- barricade or secure areas of potential danger
- evaluate and report conditions of hazardous material areas
- secure buildings and facilities against possible theft and looting
- limit access to College facilities to essential personnel
- coordinate recovery efforts and ascertain names and numbers of personnel on campus; personnel reporting to duty will check in with PSD
- maintain liaison with the local Emergency Operations Centers and with college Command Staff Administrators as to the pending recovery and relief efforts and other pertinent information in the aftermath of a hurricane
- advise local Emergency Operations Centers of any emergency needs or assistance required by the college as a result of the hurricane
- submit required status reports to the State of Florida Disaster Response Center
- debrief PSD personnel and evaluate policies and procedures relating to hurricane readiness for appropriate improvements

Routine Preparations

Public Safety personnel will follow Hurricane Procedures as set forth in the Department Policy and Procedures Manual. The PSD and/or Maintenance and Plant Operations offices shall maintain in constant readiness the following items for emergency use:

1. raincoats, flashlights and spare batteries for use by the Department personnel; minimum of three (3) sets each
2. stationary generator for use in Building 5 Student Center
3. portable trailer-mounted generator for use at Building 3 Health Clinic Pensacola Campus
4. portable generator for use at Building 5 Student Center
5. portable generator for use at Building 9 Maintenance
6. portable sump pump for use where needed in flooded transformer vaults or buildings
7. first aid kits (Buildings 3,4,5,7,9, and 16)
8. five (5) each battery powered lamps, and ten (10) sufficient back up batteries
9. twenty-four (24) sheets of ½ inch plywood, 4' x 8' exterior grade
10. forty-eight pieces of lumber, 2" x4" x8'

11. miscellaneous wire, rope, visquene, and hand tools in sufficient quantity to board up broken windows
12. minimum of two (2) large floor fans with 100 foot extension cords
13. portable lighting with 100 foot extension cords

The following items will be maintained for emergency use in addition to regular equipment:

1. two hundred fifty (250) sandbags for use against building doors subject to flooding ten yards of building sand)
2. raincoats, flashlights, and spare batteries for Departmental personnel, (10 ten minimum)
3. one hundred (100) cardboard boxes for use in packing loose material in offices
4. three (3) cases of plastic bags
5. portable generator for use by grounds personnel

Crime Awareness and Campus Security Act

The Crime Awareness and Campus Security Act of 1990 addresses safety and security issues on College and university campuses. As required by federal law, the college annually publishes all mandated reporting requirements. Statistical information can be found in the Employee Handbook, Student Handbook, and individually prepared brochures.

Printed information concerning crime prevention is placed throughout the campuses. Police officers are available to meet with individuals or classes to conduct crime prevention training. Members of the campus community are encouraged to take a proactive stance in avoiding victimization. Specific information is available dealing with accepting responsibility for one's own safety.

Rape awareness training is offered for the college campus community. The dynamics of rape as well as preventive information is offered individually and to groups. Information concerning what to do when one is the victim of a sexual assault and the rights of the victim are published and made available to the campus community.

A comprehensive program concerning alcohol and drug awareness is presented to the campus community. On campus possession and sale of alcohol and illegal drugs is prohibited. Employees and students are expected to report for work and school sober. Failure to do so can result in disciplinary action.

Pensacola State College does not tolerate any act of violence, including sexual harassment and or sexual offenses, domestic violence or stalking on campuses. Awareness programs in these areas are available to the campus community and reporting of these crimes and incidents are encouraged. An investigation will be conducted and any conclusive findings that a crime did occur may result in criminal and/or administrative action taking place.

Crisis counselors, notification of victim's rights and referral services are available to members of the college campus community.

Americans with Disabilities Act

Pensacola State College supports compliance with the Americans with Disabilities Act (ADA). The ADA is a civil rights statute that prohibits the discrimination of disabled citizens in employment, public services, transportation, public accommodation, and telecommunications. It was proposed by the National Council on Disability and signed by President George Bush on July 26, 1990.

What is Title I ?

Title I refers to the employment provision of the ADA. It protects qualified individuals with disabilities from employment discrimination. Title I does not interfere with an employer's right to hire the best qualified applicant, nor does the ADA impose any affirmative action obligations.

Who Must Comply?

The employment provision applies to employers, employment agencies, labor unions, and joint labor-management committees.

Who is Protected by the ADA?

The ADA protects approximately 43 million United States citizens who possess physical or mental disabilities that significantly limit activities such as working, walking, talking, seeing, hearing, or caring for oneself.

- individuals who have a record of such impairment and individuals who are simply regarded as having such an impairment are covered by ADA
- individuals with the AIDS virus or those who are HIV-positive are covered
- individuals actively participating in or who have successfully completed a rehabilitation program for alcohol or drug abuse
- individuals incorrectly regarded as using illegal drugs

Individuals Who Are Not Considered "Disabled" by the ADA

- individuals currently using illegal drugs
- solely because an individual is a transvestite
- ensure equal opportunity in recruiting, testing, and hiring of qualified applicants with disabilities
- ensure equal treatment in employing, recruiting, promoting, training, laying-off, paying, firing, designating job assignments, granting leave, providing benefits and all other employment related activities to qualified workers with disabilities

- provide reasonable accommodations for workers with disabilities including accessible facilities, restructuring jobs, setting up part-time or modified schedules, purchasing or modifying equipment or devices, modifying examinations, training materials, or policies, providing qualified readers or interpreters

*Reasonable accommodation is required for workers with disabilities unless “undue hardship” results for the employer.

Occupational Safety and Health Administration (OSHA) Standards

The OSHA regulations for general industry have been issued in the Code of Federal Regulations, Title 29 CFR 1910.

General safety standards include (a) confined space hazards, (b) electrical safety, (c) hazardous wastes operations and emergency response (HAZWOPER) 29 CFR 1910.120, (d) ergonomics: work that fits people, (e) fire prevention, (f) first aid and bloodborne pathogens, (g) forklift safety and designated drivers, (h) hazard communication and the right-to-know law, (i) lifting techniques and avoiding back injuries, (j) hazardous energy: lockout/tagout, (k) machine guarding: working safely with machines, (l) personal protective equipment (m) eye protection, (n) foot protection, (o) hand protection, (p) hearing conservation, (q) respiratory protection, (r) slips, trips, falls.

Bloodborne Pathogens (29 CFR 1910.1030 Final Rule)

Pensacola State College’s Exposure Control Plan is a separate document prepared to comply with the Occupational Safety and Health Administration (OSHA) Bloodborne Pathogens Regulation 29 CFR 1910.1030. The Occupational Exposure Control Plan is designed to eliminate or minimize employee exposure to bloodborne pathogens and infectious materials.

Components of the College’s Exposure Control Plan include: (a) occupational exposure classifications, (b) bloodborne pathogens training sessions, (c) methods of compliance, (d) hepatitis B vaccination series, (e) record keeping, (f) procedures for evaluating exposure incidents, (g) post-exposure evaluation and follow up, (h) annual occupational exposure control plan review.

The College’s Exposure Control Plan has been approved by the Executive Committee and the Board of Trustees. The Exposure Control Plan is included in the Safety, Health, Risk Management Manual located in the Learning Resource Center at each district location, in the Risk Management and Legal Affairs Office and in the Health Clinic on the Pensacola Campus. Questions and concerns may be directed to the College nurse in the Health Clinic on the Pensacola campus.

AIDS Policy and Procedures

The SHRM Council will serve as the committee responsible for the development and monitoring of AIDS policy and procedures. Committee membership includes at least five knowledgeable persons sensitive

to the medical and psychological needs of infected persons. The SHRM Council is responsible for making recommendations to the administration on AIDS policy and procedures.

The College recognizes the rights of infected persons to obtain education and employment and the rights of students and community college employees to an environment in which they are protected from contracting bloodborne infectious diseases. The College shall provide current information to employees and students on the prevention and transmission of bloodborne pathogens and infectious diseases. Reasonable effort will be made to accommodate the special needs of students and employees who have AIDS or who are HIV positive unless the accommodation places undue burdens on the institution.

Any employee or student medically identified as having an infectious bloodborne disease shall be referred by the College nurse to the College medical consultant for counseling and evaluation. Any student or employee who informs the College of an infectious disease shall be accorded confidentiality regarding disclosure of the medical condition. An infected employee who does not need any special accommodation shall be treated in the same manner as any employee diagnosed as having any other illness, injury or disability.

Detailed procedures, forms and additional information on the HIV/AIDS infection are available in the College's Bloodborne Pathogens Infection Control Plan. A copy of the AIDS policy approved by the College Board of Trustees is contained in the appendix of this document. Additional information may be obtained from the College nurse in the Health Clinic on the Pensacola Campus (Phone 484-1322).

Hazard Communication: The Right to Know Law

The OSHA regulation to control chemical exposure in the workplace is called the hazard communication standard or "hazcom" or the "Right to Know Law" and can be found in 29 CFR 1910.1200. The standard applies to those chemicals which pose either a physical or health hazard.

Important elements of a hazard communication program include: (a) Determining the Hazards of Chemicals Used in the Workplace, (b) Material Safety Data Sheets (MSDS), (c) Labels and Labeling, (d) a Written Hazard Communication Program, (e) Employee Information and Training.

Employee Rights Under Chapter 442, F. S. Right-to-Know Law are:

- the right to know of toxic substances present in the workplace
- the right to obtain a copy of the Material Safety Data Sheet for each listed toxic substance present in the workplace
- the right to refuse to work with a toxic substance, if not provided a copy of the MSDS for a particular substance within five (5) working days after submitting a written request to the employer

- the right to instruction, within 30 days of employment and at least annually thereafter, on the adverse health effects of each toxic substance with which employee works, and how to use each substance safely, and what to do in case of an emergency
- the right to obtain further information on the properties and hazards of listed toxic substances from: Toxic Substances Information Center, 2551 Executive Center Circle, West Suite 204, Tallahassee, Fl. 32301- 5014
- the right to protection against discharge, discipline or discrimination for having exercised any of these rights

The College's written Hazard Communication Program includes:

- a list of the hazardous chemicals known to be present in the workplace
- MSDS and requirements of the law
- labeling system
- employee training program
- methods used to inform employees of the hazards of non-routine tasks and such things as unlabeled piping
- methods used to inform employers of the workers on site such as service representatives, repairmen and subcontractors

Employees are provided information on the Right to Know Law, pertaining to toxic substances in the workplace, at the time of initial employment through the Human Resources Office. Departmental managers are responsible for assuring that employees within their area are informed of toxic substances used in the department and of new chemicals introduced into the workplace. Employees must be informed of the location and availability of the written hazard communication program. The location and availability of the MSDS file must be clearly communicated.

Pensacola State College's written Hazard Communications Program is in the district safety manual and is available in the Learning Resource Center at each district location. A copy is also available in the Risk Manager's Office and in the Director's office at each Center or off-campus location. Detailed information is available within the academic departments.

Safety Data Sheets

A Safety Data Sheet (SDS) is a fact sheet for a chemical which poses a physical or health hazard in the workplace. SDSs must be in English and contain the following information:

- identity of the chemical (as used on the label)
- physical hazards (flammability, reactivity)
- health hazards
- primary routes of entry
- whether it is a carcinogen
- precautions for safe handling and use

- emergency and first aid procedures
- date of preparation of latest revision
- name, address and telephone number of manufacturer, importer or other responsible party

A master SDS file is located in the office of Environmental Management. A current SDS on toxic substances can be obtained within 24 hours from the Environmental Management Manager. The SDS should be immediately obtained for any toxic substance suspected in an emergency or accident situation; consult emergency treatment instructions.

Labels and Labeling Requirements

Containers of hazardous chemicals must be labeled in English. Information may also be presented in other languages for non-English speaking employees, but English is required. Labels must contain the following information:

- identity of the hazardous chemical
- appropriate hazard warnings
- name and address of the chemical manufacturer, importer and other responsible party. On individual stationary containers, signs, placards, batch tickets or printed operating procedures may be used in place of labels. Where the chemical is intended only for the use of the employee making the transfer during a specific work shift, portable transfer vessels are not required to be labeled, but if transferred on another shift, it must have a label

Toxic substances are not manufactured at any campus location. When materials containing toxic substances are ordered by the College, the purchase order shall indicate the need for the information contained on a Safety Data Sheet to be included on the label or the College shall refuse delivery. The College receiving department shall ensure that chemicals are properly labeled before accepting delivery.

Annual training in hazardous substance communication and toxic waste management policies and procedures is provided through the Office of Staff Professional Development. Training records must be signed by the employee and dated. Departmental managers are responsible for monitoring the training requirements of employees within their area.

Hazardous Waste Operations and Emergency Response (HAZWOPER) 29 CFR 1910.120.

OSHA has issued a special regulation dealing specifically with spills of chemicals. Improper handling or control of hazardous chemicals or waste can result in a severe threat to workers and to the general public. Specific training requirements are mandatory for accidental chemical releases.

OSHA has a formal training schedule for emergency responders under HAZWOPER regulations, with training levels ranging from awareness training for first response to technical training for those with responsibility for solving problems associated with spill cleanup. **Under no circumstances does OSHA**

permit untrained personnel to respond to a chemical spill without specific training. The College does not have personnel trained in chemical spill cleanups. The college Public Safety Department will contact an outside authorized chemical spill team

In the event of a chemical spill:

- act fast; contact Public Safety to alert an authorized chemical spill team; Pollution Control or other authorized chemical spill team will be notified
- alert supervisor and designated authorities
- contact the institutional emergency response team (Public Safety Office)
- wear gloves, goggles and necessary protective equipment
- administer emergency first aid as necessary
- assume vapors and fumes are toxic and leave area of spill contamination
- assemble material safety data sheets (MSDS) on chemicals used in area while response team is arriving
- know location of emergency and first aid equipment and how to use it
- know the location, operation and use of fire extinguishers
- know the building exits and proceed to clear obstructions to expedite response
- know general first aid rules and MSDS instructions for first aid for particular substances and chemicals used
- use the buddy system whether part of the response team or not; never enter a chemical emergency situation alone
- use protective equipment; do not touch any spills without protection
- avoid contact of contaminated clothing of injured individuals
- check area for potential hazards such as electrical cords or wires near a spill
- check for injuries and notify emergency medical assistance
- assist victims in order of need; decontaminate victims if possible according to level of training
- cooperate with the emergency response team
- consider level of evacuation required and involve public safety personnel

Follow up procedures are essential. OSHA must be notified if the incident resulted in fatalities or if three or more persons are hospitalized. If significant, the National Response Center must be notified as well.

A review and evaluation of all aspects of the incident must be conducted. A chronology of events in sequential order should be documented and signed.

Hazardous Waste in Safety Management

A waste is considered hazardous if it corrodes other materials; explodes; is easily ignited; reacts strongly with water; is unstable to heat or shock; or is poisonous.

College employees are prohibited from knowingly disposing of any hazardous material which is known to pose a physical, health, or environmental hazard into the ground, air or water.

Physical Hazard is described as any combustible liquid, compressed gas, explosive, flammable, organic peroxide, oxidizer, pyrophoric, unstable, or water reactive.

Health Hazard means a chemical that causes acute or chronic health effects in exposed employees such as carcinogens, toxic agents, irritants, corrosives, sensitizers, or targets specific organs.

Environmental Hazards is considered any material which will damage, significantly damage, or destroy human, plant or animal life or any naturally occurring thing.

Hazardous Wastes Must Not Be Disposed Of By:

- Pouring into a sink
- Pouring into a public or private sewer system
- Pouring into a septic tank
- Pouring into the ground
- Burying on public or private land
- Placing in dumpster, compactor, or other type refuse system
- Transported by private or College vehicle to a public or private dump or landfill. Disposal
- All hazardous waste disposals shall be managed through the Hazardous Materials Waste Management Coordinator
- All hazardous waste disposal requests must be submitted and approved by the appropriate department chair or the campus dean
- Notification for requests of hazardous waste disposal must be forwarded to the Hazardous Waste Coordinator or Maintenance Supervisor. Requests must be in writing and accompanied with a detailed inventory
- Hazardous waste inventory form must include the name of material, state of material (liquid, solid, gas), amount (gr., oz., pt., etc.), containment medium (glass, plastic jar, etc.), location, EPA hazardous waste number
- Each item accepted for disposal must be contained in a secure vessel with a proper seal
- Each material should be identified and labeled with 100% of the chemicals contained therein
- Unknowns, radioactives, or pathogenic material will not be accepted
- Certification must be provided that peroxide forming compounds are peroxide free
- Upon proper notification to the Waste Management Coordinator, an inspection will be conducted to verify the inventory and ensure all other standards are met
- Following inventory verification, an environmental waste disposal firm will be contacted to safely remove and dispose of the waste as outlined on the inventory manifest
- All materials accepted for disposal will be properly packaged, labeled, manifested, transported and disposed of in an approved EPA disposal site and in accordance with all local, state and federal requirements

Biological Wastes

- anything defined as preserved animal tissue must be disposed of in compliance with local, state, and federal laws
- anything packed in formaldehyde must be drained of formaldehyde prior to packaging for pick up. Formaldehyde should be drained into non-breakable, leak- proof containers and labeled with the contents, name and address of the College and date. The waste management coordinator must be notified in writing of the material, quantity and location
- all waste must be packaged for pick up in approved red bags and tagged with the name and address of the College and the date
- All waste must be placed in the red plastic bags and tagged. Jars, buckets and drums can be placed directly into the red bags without having to transfer the material
- red bagged waste will be transferred to a covered container for delivery to the pick up area. Wheeled covered containers will be delivered at the time a request for waste pick up is made
- notify the waste management coordinator when ready for a pick up and send a copy of the waste manifest. The manifest will list the amount of material (pounds) and the number of bags to be picked up. Upon receipt of the manifest, file a copy of the manifest in the department file and send the original to the Waste Management Coordinator.

Biohazardous Waste

Defined as any solid or liquid waste which may present a hazard of infection to humans; includes used absorbent materials such as bandages, gauze, sponges saturated with blood or certain body fluids. These materials are commonly used in the dental hygiene and dental assisting patient clinics.

- biohazardous waste shall be identified and segregated from other solid waste
- any biohazardous waste which is mixed with hazardous waste shall also be managed as a hazardous waste in accordance with the requirements of the DER
- biohazardous waste, except sharps, shall be packaged in impermeable, red, polyethylene or polypropylene plastic bags; must have minimum physical properties below
 - (a) impact resistant 165 grams ASTM D-1709-85
 - (b) tearing resistant 480 grams ASTM D-1922-67
 - (c) seams shall be of equal resistance to tearing
 - (d) seams shall be impermeable
 - (e) filled bags shall be sealed
 - (f) discarded sharps shall be segregated from other waste
- biohazardous waste is picked up on a contractual basis or in an emergency situation

Storage and Containment

- all storage of biohazardous waste shall be in a designated area away from general traffic flow patterns and accessible only by authorized personnel
- storage of biohazardous waste shall not be for a period greater than 30 days

- all areas primarily used for storage of biohazardous waste shall be constructed of smooth, easily cleanable materials that are impervious to liquids and capable of being maintained in a sanitary condition
- biohazardous waste prepared for transport off site shall be labeled by symbol and phrase or word

Labeling

- biohazardous waste shall be labeled immediately after packaging
- the label must be securely attached or permanently printed on the outer layer of the packaging including name and address of College, date waste was packaged, the international biohazard symbol, one of the following phrases: “Biohazardous Waste, Biohazard, Biohazardous or Infectious”

Off-Site Transfer Requirements

Bagged biohazardous waste being transported off site and manually unloaded prior to final treatment shall be enclosed in a double wall corrugated fiberboard box of equivalent rigid type container. If a fiberboard box is used, it shall meet the standards of DOT Section 178.210, CFR for minimum strength of at least 275 lbs. All containers shall be sealed prior to transport.

OSHA Regulations

Confined Space Entry 29 CFR 1910.146

A confined space is defined as a space that is large enough for an employee to enter, has restricted means of entry or exit, and is not designed for continuous employee occupancy.

Employees should be aware of the potential for dangerous vapors and gases, fires, explosions and physical hazards associated with work in a confined space. When working in a confined space, plan carefully before entering the space, periodically test the air, use ventilating equipment where possible and be aware of a rescue plan in case of emergency. Another individual or supervisor must be alerted when an employee is working in a confined space area.

Electrical Safety 29 CFR 1910.301-399.

Dynamic electricity (moving) rather than stationary (static) is the kind commonly used along electrical conductors throughout the College. The common hazards of electricity and its use are: (a) shock, (b) burns, (c) arc-blast, (d) explosions, and (f) fires.

Water presents a potentially dangerous situation when working with electricity in the work environment. Carelessness with water and electricity can be fatal. Electrical accidents are caused by one or a combination of factors:

- unsafe equipment and/or installation
- unsafe workplaces caused by environmental factors
- unsafe work practices

Electrical hazards may be prevented by:

- insulation
- electrical protective devices
- guarding
- grounding
- personal protective equipment safe work practices for handling electricity include lockout/tagout procedures. Common sense dictates that electrical equipment be de-energized before working on it. **Before any repair work or inspection of electrical equipment, the current must be turned off at the breaker and the switch padlocked in the OFF position or continuously watched by qualified worker.** Tagging of the switch or controls of the machine or equipment which is currently out of service should indicate which circuits or pieces of equipment are out of service.

The following general rules apply to every piece of electrical equipment used:

- Electrical equipment is maintained properly and inspected by qualified and authorized individuals.
- Safety features like three-prong plugs, double-insulated tools, safety switches, and machine safety guards are used.
- Installation and repair of electrical equipment is conducted by qualified and authorized individuals.
- Electrical cables and cords are clean and free from kinks; equipment is never carried by the cords.
- Extension cords are not allowed.
- Do not touch water, damp surfaces, ungrounded metal or any bare wires if not protected; wear approved rubber gloves when working with live wires or ungrounded surfaces, rubber-soled shoes or boots when working on damp or wet surfaces.
- Do not wear metal objects (rings, watches) when working with electricity because of the potential for a grounding injury.
- Do not work near overhead power lines of 50 kilo Volts (kV) or less, or come within 10 feet of the lines; add four inches of distance for every 10 kV over 50kV.

Lockout/Tagout Procedures to Control Hazardous Energy

The Occupational Safety and Health Administration (OSHA) regulates lockout/tagout through the control of hazardous energy standard, in 29 CFR 1910.147.

The standard mandates training, audits, and record keeping to ensure that workers will not be unintentionally injured by unintentionally energized equipment.

Lockout is the process of blocking the flow of energy from a power source to a piece of equipment and keeping it blocked out. It is accomplished by installing a lockout device at the power source so that equipment powered by that source cannot be operated. A lockout device is a lock, block or chain that keeps a switch, valve or lever in the off position.

Tagout is accomplished by placing a tag on the power source. The tag acts as a warning not to restore energy-it is not a physical restraint. Tags must clearly state: DO NOT OPERATE.

Energy must be controlled before working in situations involving repair and replacement work, renovation, modifications or adjustments to power equipment. OSHA requires that all power sources that can be locked out, must be locked out for servicing or maintenance.

Employees are trained in lockout/tagout procedures and annual audits are conducted by an authorized employee.

Fire Prevention

OSHA regulates emergency planning, fire prevention plans and evacuation in 29 CFR 1910.38. In addition, the provision of fire extinguishers and other protection is addressed in 29 CFR 1910.157.

The best defense against a fire is to prevent a fire from starting in the first place. Fires can start quickly and cause deadly damage. It is to our benefit to know how to size up a fire and how to respond in a fire emergency. Professional help should be alerted quickly. The college Public Safety Department should be contacted immediately in the event of a fire emergency.

The National Fire Protection Association (NFPA) classifies four general types of fires based on the combustible materials involved and the kind of extinguisher needed to put them out. Fires are classified as:

Class A Combustible materials are wood, cloth, paper, rubber and plastics. Extinguishing agent is water; dry chemicals are also effective. Do not use carbon dioxide extinguishers and sodium or potassium bicarbonate chemicals on these fires.

Class B Flammable liquids, gases, greases. Extinguishing agent is foam, carbon dioxide and dry chemical. Use water fog and vaporizing liquid extinguishers.

Class C Electrical Extinguishing agent-non-conducting agent such as carbon dioxide and dry chemical extinguishers. Never use foam or water-type extinguishers.

Class D Combustible metals, such as magnesium, titanium, zirconium and sodium. Specialized techniques are required. None of the common extinguishers should be used because they will increase the intensity of the fire.

Fire Prevention Techniques

- good housekeeping procedures
- proper chemical storage
- adequate disposition of flammable materials
- clutter-free environment
- extreme care in working with flammable solvents, gasoline, gases and fuels
- increased awareness of hazards of chemical substances; utilization, storage, transfer, handling and disposal

Compressed and Liquefied Gases

The flash points of compressed flammable gasses are extremely low and always below room temperature. To avoid fires resulting from ignition of compressed gases:

- Never roll or drag cylinders when gases are stored, transported or used. Use a hand cart or truck for gas cylinders.
- Store all cylinders upright and secure them to walls or bench tops during storage or use.
- Compressed gases should be stored in dry, cool and well ventilated areas, protected from the weather and away from flammable materials. The area should be posted for No Smoking.
- Keep compressed gas cylinders which contain oxygen away from oil, grease or liquid flammables.
- Separate fuel and oxidizing gas cylinders by at least 20 feet or a fire wall.
- Safety equipment should be located at hand, including gas detectors, gas masks, self-contained breathing apparatus and protective clothing.
- Inspect cylinders carefully before connections are made. Do not change, modify, repair, or tamper with pressure relief devices on cylinders.
- Request information and assistance from the supplier when in doubt about handling, contents, or cylinder condition.
- Be aware of emergency procedures, equipment and contacts.

Lifting Techniques to Prevent Back Injuries

Proper ways to lift include the following:

- size up the load before trying to lift it; test the weight by lifting one corner and then get help, use a mechanical device, or make sure you can handle the weight.
- bend the knees; the single most important rule when lifting moderate to heavy objects. Lift with legs, not backs.

- when lifting a box, position feet close to it, center yourself over the load, bend knees and get a good hand hold, lift straight up smoothly, allow legs, not the back to do the work.
- do not twist or turn your body once you have made the lift. Keep the load close to the body and keep it steady; sudden twisting or turning may injure your back.
- make sure you can carry the load where you need to go before attempting to move it; make sure path is clear of obstacles.
- set the load down properly; setting the load down is just as important as lifting. Lower the load slowly by bending the knees, letting the legs do the work. Don't let go of the load until it is secure on the floor.
- always push, not pull the object when possible. When moving an object on rollers, pushing puts less strain on the back and is safer.

Ergonomics: designing work to fit people

The Occupational Safety and Health Administration (OSHA) have initiated the rulemaking process for an ergonomics standard. Until a final rule is developed, OSHA plans to continue to investigate ergonomic hazards and cite employers using Section 5 (a) (1) (the General Duty Clause) of the OSHA Act as the basis for issuing citations for ergonomic hazards not covered by an existing safety or health standard.

Following ergonomic principles in the workplace helps reduce stress and eliminate potential injuries and disorders associated with overuse of muscles, bad posture, and repetitive motion. The objective of ergonomics is to accommodate tasks through design of work stations, controls, displays, safety devices, tools, lighting and equipment.

Physical Hazards

- heavy lifting
- constant twisting and repeated motions

Physical characteristics of the worker vary from human to human including size, endurance, range of motion, strength, gender, and other factors. When the job demand exceeds the physical characteristics of the worker, an injury can result.

Back Disorders

Back disorders are frequently caused by excessive or repetitive twisting, bending and reaching, carrying, moving, or lifting loads that are too heavy or too big, staying in one position for too long, poor physical condition and poor posture.

Prolonged sitting stresses the body, particularly the lower back and the thighs. Other factors which contribute to back injuries include the natural degeneration of the back due to aging, inactivity both at work and at home, seasonal activity undertaken without prior physical conditioning.

Ergonomic Hazard Prevention Control:

- effective design of worksite, tools, equipment, workstation
- engineering controls to accommodate tasks expected
- maintenance of a healthy, safe posture
- sufficient space in worksite for knees and feet
- adjustable height of worktables and chairs
- appropriate support for back and legs
- ability to reach controls from right or left handed positions
- accommodation of a full range of motion in expected tasks
- reduction of number of repetitive actions
- frequent rest breaks
- cross training and rotation of duties
- employee cooperation and self-discipline
- participation in training sessions
- personal actions and self-discipline to prevent and alleviate potential disorders

Machine Guarding (Safety Guards)

The Occupational Safety and Health Administration (OSHA) regulates the use of electrically powered machinery in 29 CFR 1910.211-247. Safety Guards must meet the following requirements:

- prevent contact with moving parts
- secure and not easily removed
- protect from falling objects into moving parts of machine
- create no new hazards; shear points, jagged edges etc.

Supervisors shall ensure that all power activated tools are operated with the proper machine safeguards or safety devices in place. Routine inspections of power activated tools and machinery are conducted to assure that safety guards are not defective or removed.

Personal Protective Equipment

OSHA governs the use of personal protective equipment (PPE) in 29 CFR 1910.132-138. The standard requires the employer to conduct a hazard assessment in relation to PPE to determine if hazards are present which necessitate the use of PPE. PPE must be used in conjunction with safety guards, engineering controls and sound practices.

A hazard assessment includes:

- Sources of motion - machinery, tools, or personnel; collisions or hazards

- Sources of high temperature - potential for burns, eye injury or ignition of protective equipment.
- Types of chemical exposure - handling of chemicals, spills or leaks.
- Sources of harmful dust - cutting metal, concrete or operations producing dust.
- Sources of light radiation - welding, brazing, cutting, furnaces, heat treating, high intensity lights, etc.
- Sources of falling objects or potential for dropping objects - man lifts, stacked pallets, dollies.
- Sources of sharp objects - potential to pierce feet or cut hands- machinery, food handling and storage, sawing, cutting. Sources of rolling or pinching objects which could crush feet - moving stock such as paper rolls.
- Electrical hazards.
- Co-workers - working in the immediate vicinity of others.

Personal protective equipment for eyes, face, head, and other body parts, shall be provided and shall be maintained in a sanitary and operational condition. Personal protection equipment required by each respective unit shall be requested and budgeted through the departmental unit process to assure adequate availability of safety equipment. Supervisors are responsible for the assessment of each unit to ensure adequate personal protective equipment is available and maintained in good repair.

Eye Protection

The Occupational Safety and Health Administration (OSHA) regulates eye protection in 19CFR 1910.132-133. The standard requires employees to use eye protection to guard against injury in situations where reasonable probability of injury exists.

The use of safety glasses, goggles, guards, screens and shields should be used to prevent eye injuries. Eyewashes must be provided to minimize damage once an injury has occurred. The location of eyewash facilities is extremely important because eyes can be damaged very quickly. The first fifteen seconds after the injury occurs is the critical period. It is suggested that eyewashes be within 100 feet or a 10 second walk of the work area (American National Standards Institute ANSI Z358.1-1990).

Eyewash stations must not be installed where workers have to pass through a doorway, up or down stairs or weave between equipment to get help.

Hand Protection

OSHA regulates personal protective equipment in general and hand protection in 29 CFR 1910.132 and 138. Hand protection is required when exposed to hazards such as skin absorption of harmful substances, severe cuts, lacerations, severe abrasions, punctures, chemical burns, or harmful temperature extremes.

Gloves provide protection and should be worn to protect against specific hazards within each work area. The health technology areas must meet the requirements of specially designed gloves for health

occupations. Rubber, vinyl or neoprene gloves are used when handling caustic chemicals, acids, cleansers or petroleum products. Leather gloves are used for handling rough and abrasive materials. Canvas gloves are suitable for routine maintenance work. Supervisors are responsible for assessing the needs in each unit to assure that hand protection is available in hazardous areas.

Respiratory Protection

The Occupational Safety and Health Administration (OSHA) has issued regulations governing the use of respirators in 29 CFR 1910.132 and 134.

The use of respirators are important in certain areas for the prevention of harmful fumes, dust, vapors and gases that may cause cancer, lung impairment or other respiratory diseases. Unit supervisors are responsible for the assessment of the respective unit in determining the need for protective respirators. Employees requiring the use of protective respirators will be appropriately trained and instructed in the use of selected respirators.

Slips, Trips, Falls

OSHA regulations require that the workplace be kept clean and orderly [(29 CFR 1910.22 (a).] Many accidents are caused by improper cleaning methods. The following actions will assist in preventing slips, trips and falls:

- make sure you can see where you are going
- keep work areas well lighted
- keep work areas clean and clutter free
- arrange furniture to minimize interference with walkways or pedestrian traffic
- do not extend power tool cords across walk paths (prevent tripping hazards)
- eliminate hazards on stairs, steps and floors; report broken pavement, tiles etc.
- store gangplanks and ramps properly on loading docks
- use handrails on stairs to prevent falls
- do not carry a load you cannot see over
- do not jump but lower yourself carefully from docks, trucks or work stages
- check lighting to make sure hallways, stairs and work areas are lighted
- repair or replace broken rails, stairs
- wear non-skid shoes
- do not use makeshift ladders out of chairs, benches or boxes
- make sure only one person at a time is on a ladder
- check a ladder's condition before climbing
- do not place a ladder on boxes or blocks to make it taller
- use both hands for balance when climbing a ladder
- do not overreach from a ladder
- set ladders up using the 4 to 1 rule; distance from wall to ladder base should be one fourth the distance from the base of ladder to where it touches the wall

- report unsafe conditions promptly to supervisor

Routine, Preventive and Deferred Maintenance

The College maintains the facilities in compliance with the standards required by the Florida Department of Education Maintenance and Operation Guidelines and State Requirements for Educational Facilities (SREF).

Routine Maintenance

- equipment failure or condition requiring attention but does not present a hazard, danger or disruption of normal activity
- emergency defined as condition that disrupts normal activity, functions or presents a hazard or danger; must be reported immediately to the Director, Physical Plant
- routine requests are communicated by telephone or official work orders
- records are kept and centralized in the Director, Physical Plant Office
- completed work forms are filed on a fiscal year basis by building

Preventive Maintenance

- Director of Physical Plant and Maintenance maintains a permanent file and record system for facilities and equipment
- description of equipment/facility
- schedule of maintenance
- record of last maintenance
- update records upon task completion
- estimated cost
- total man hours utilized for task completion
- Deferred Maintenance
- priorities for maintenance projects are established by the Director of Physical Plant and Maintenance
- maintenance projects for which there are insufficient funds or time constraints are identified by the Director of Physical Plant and Maintenance as deferred maintenance projects

Important OSHA Updates

The following information is an update from 29 CFR 1910.1030, July 2016, Occupational Exposure to Bloodborne Pathogens: Final Rule.

Summary and Explanation

The revisions to OSHA's BBP standard required under the Needlestick Safety and Prevention Act can be broadly categorized into four areas: modification of definitions relating to engineering controls; revision and updating of the Exposure Control Plan; solicitation of employee input; and recordkeeping.

The revised standard adds two additional terms to the definition section found in paragraph (b) and alters the definition of one other term. It adds "Sharps with Engineered Sharps Injury Protections" and defines this term as "a nonneedle sharp or a needle device used for withdrawing body fluids, accessing a vein or artery, or administering medications or other fluids, with a built-in safety feature or mechanism that effectively reduces the risk of an exposure incident." This term encompasses a broad array of devices that make injury involving a contaminated sharp less likely, and includes, but is not limited to, syringes with a sliding sheath that shields the attached needle after use; needles that retract into a syringe after use; shielded or retracting catheters used to access the bloodstream for intravenous administration of medication or fluids; and intravenous medication delivery systems that administer medication or fluids through a catheter port or connector site using a needle that is housed in a protective covering.

The revised standard also adds the term "Needleless Systems," which is defined as "a device that does not use needles for: (A) The collection of bodily fluids or withdrawal of body fluids after initial venous or arterial access is established; (B) the administration of medication or fluids; or (C) any other procedure involving the potential for occupational exposure to bloodborne pathogens due to percutaneous injuries from contaminated sharps."

"Needleless Systems" provide an alternative to needles for the specified procedures, thereby reducing the risk of percutaneous injury involving contaminated sharps. Examples of needleless systems include, but are not limited to, intravenous medication delivery systems that administer medication or fluids through a catheter port or connector site using a blunt cannula or other non-needle connection, and jet injection systems that deliver sub-cutaneous or intramuscular injections of liquid medication through the skin without use of a needle.

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

The expanded definitions reflect the intent of Congress to have OSHA amend the BBP standard to clarify the direction already provided by OSHA in its Compliance Directive; namely, that employers who have employees with occupational exposure to bloodborne pathogens must consider and, where appropriate, use effective engineering controls, including safer medical devices, in order to reduce the risk of injury from needlesticks and from other sharp medical instruments.

Thus, the revised definitions do not reflect any new requirements being placed on employers with regard to protecting workers from sharps injuries, but are meant only to clarify the original standard, and to reflect the development of new safer medical devices since that time.

Paragraph (c)(1)(iv) of the standard is revised to add new requirements to the annual review and update of the Exposure Control Plan. The review and update of the plan is now required to "(A) reflect changes in technology that eliminate or reduce exposure to bloodborne pathogens; and (B) document annually consideration and implementation of appropriate commercially available and effective safer medical devices designed to eliminate or minimize occupational exposure." Thus, the additional provisions require that employers, in their written Exposure Control Plans, account for innovations in procedure and technological developments that reduce the risk of exposure incidents. This would include, but would not be limited to, newly available medical devices designed to reduce the risk of percutaneous exposure to bloodborne pathogens.

Consideration and implementation of safer medical devices could be documented in the Exposure Control Plan by describing the safer devices identified as candidates for adoption; the method or methods used to evaluate devices and the results of evaluations; and justification for selection decisions. This information must be updated at least annually.

The revised Exposure Control Plan requirements make clear that employers must implement the safer medical devices that are appropriate, commercially available, and effective. No one medical device is appropriate in all circumstances of use. For purposes of this standard, an "appropriate" safer medical device includes only devices whose use, based on reasonable judgment in individual cases, will not jeopardize patient or employee safety or be medically contraindicated.

Although new devices are being continually introduced, OSHA recognizes that a safer device may not be available for every situation. If a safer device is not available in the marketplace, the employer is not required to develop any such device. Furthermore, the revised requirements are limited to the safer medical devices that are considered to be "effective." For purposes of this standard, an "effective" safer medical device is a device that, based on reasonable judgment, will make an exposure incident involving a contaminated sharp less likely to occur in the application in which it is used.

Paragraph (c)(1)(v) of the revised standard now requires that "An employer, who is required to establish an Exposure Control Plan shall solicit input from non-managerial employees responsible for direct patient care who are potentially exposed to injuries from contaminated sharps in the identification, evaluation, and selection of effective engineering and work practice controls and shall document the solicitation in the Exposure Control Plan." This change represents a new requirement, which is performance-oriented.

No specific procedures for obtaining employee input are prescribed. This provides the employer with flexibility to solicit employee input in any manner appropriate to the circumstances of the workplace. A dental office employing two hygienists, for example, may choose to conduct periodic conversations to discuss identification, evaluation, and selection of controls. A large hospital, on the other hand, would likely find that an effective process for soliciting employee input requires the implementation of more

formal procedures. The solicitation of input required by the standard requires employers to take reasonable steps to obtain employee input in the identification, evaluation, and selection of controls.

Methods for soliciting employee input may include involvement in informal problem-solving groups; participation in safety audits, worksite inspections, or exposure incident investigations; participation in analysis of exposure incident data or in job or process hazard analysis; participation in the evaluation of devices through pilot testing; and involvement in a safety and health committee properly constituted and operated in conformance with the National Labor Relations Act.

Employee input can serve to assist the employer in overcoming obstacles to the successful implementation of control measures. A number of respondents to the RFI indicated that they encountered some resistance when new devices required staff members to adopt new techniques, or when staff members perceived that use of the device might have an adverse effect on the patient (e.g., Exs. 3-50, 3-79, 3-99, 3-133). As a way of addressing this resistance, staff involvement in the selection process can play an important role in the acceptance and proper use of safer medical devices (e.g., Exs. 3-18, 3-42, 3-56, 3-88, 3-324, 3-355). According to their experience, the participation of frontline workers can help to overcome the following barriers:

- Safer medical devices often require adjustments in technique, and a number of respondents noted that staff members are often reluctant to revise practices to which they have become accustomed.
- Equipment compatibility problems. With the broad array of devices being used in healthcare settings, it is critical to ensure that devices will work together when necessary.
- The need for continued evaluation of devices and the allotment of sufficient time for adequate device evaluation. After initial use by employees, some facilities found it necessary to replace the device originally selected with a more suitable device.

The Community Health Network (CHN) of San Francisco provides an example of a safety and health committee with responsibility for sharps injury prevention. Representatives of both labor and management serve on the committee, and are provided with access to non-confidential information regarding bloodborne pathogen exposure incidents at CHN facilities. The committee is responsible for establishing criteria for safer devices; overseeing device evaluation by representative groups of device users; and selecting preferred devices for purchase. The committee is also responsible for developing safer alternatives to work practices that are associated with exposure incidents.

The concept of involving a team in sharps injury prevention programs is supported by the American Hospital Association (AHA) in guidelines to assist hospitals and health systems in developing such programs. According to AHA, a successful program revolves around communication, education, training, and collaboration. Among the specific steps recommended are assembling a multidisciplinary team that includes representation of frontline workers and departments using devices; selecting targeted devices for evaluation; pilot-testing of devices; and collecting data after a device is adopted to evaluate its impact.

The standard requires that employers seek input from non-managerial employees responsible for direct patient care who are potentially exposed to injuries from contaminated sharps. Employees involved in administering treatment or performing any procedure in the presence of an individual receiving care are considered to be involved in direct patient care. For example, an employee who uses a needled syringe to collect blood from patients in a nursing home, or an employee who administers flu vaccinations in a factory employee health unit, would both be considered to be involved in direct patient care and engaged in activities that put them at risk of direct exposure due to needlestick injuries.

Employers may also choose to include other employees in the request for input, such as lab technicians, housekeeping staff, maintenance workers, and management-level personnel who may be at risk of injury involving contaminated sharps. An employer who is otherwise required to establish an Exposure Control Plan under the standard, but does not have any non-managerial employees responsible for direct patient care who are potentially exposed to injuries from contaminated sharps, is not required to solicit employee input with respect to this provision.

The revised standard does not require employers to request input from all potentially exposed employees involved in direct patient care; however, the employees involved by the employer should represent the range of exposure situations encountered in the workplace. Input from employees covered by a collective-bargaining agreement may also be requested through their authorized bargaining agent.

The revised standard requires that solicitation of input from employees be documented in the Exposure Control Plan. Employers can meet this obligation by identifying the employees who were involved and describing the process by which input was requested. Employers should also describe the input obtained with regard to identification, evaluation, and selection of controls. Evidence that employee input has been sought can include, for example, meeting minutes, copies of documents used to request employee participation, or records of responses received from employees such as reports evaluating the effectiveness of a safer medical device in trial applications.

The requirement for solicitation of input from employees has been designated as paragraph (c)(1)(v) in the revised standard. The requirement that the Exposure Control Plan be made available to the Assistant Secretary of Labor for Occupational Safety and Health and the Director of the National Institute for Occupational Safety and Health upon request, previously designated as paragraph (c)(1)(v), has been moved and is now paragraph (c)(1)(vi) in the revised standard.

The recordkeeping requirements of the standard at paragraph (h) have been amended by adding paragraph (h)(5) to require that employers maintain a sharps injury log to serve as a tool for identifying high risk areas and evaluating devices. Paragraph (h)(5)(i) now states, "The employer shall establish and maintain a sharps injury log for the recording of percutaneous injuries from contaminated sharps. The information in the sharps injury log shall be recorded and maintained in such manner as to protect the confidentiality of the injured employee.

The sharps injury log shall contain, at a minimum: (A) The type and brand of device involved in the incident, (B) the department or work area where the exposure incident occurred, and (C) an explanation

of how the incident occurred." The sharps injury log must be maintained for the period required by 29 CFR 1904. The requirement to establish and maintain the log only applies to employers who are otherwise required to maintain a log of occupational injuries and illnesses under 29 CFR 1904 (OSHA's Recordkeeping rule).

The sharps injury log must include the specified minimum information regarding the device involved (if known), the location of the incident, and the description of the events that resulted in the injury. The level of detail presented should be sufficient to allow ready identification of the device, location, and circumstances surrounding an exposure incident (e.g., the procedure being performed, the body part affected, objects or substances involved and how they were involved) so that the intended evaluation of risk and device effectiveness can be accomplished.

Information in the sharps injury log must be recorded and maintained in a manner that protects the privacy of the injured employee. If data from the log are made available to other parties, any information that directly identifies an employee (e.g., name, address, social security number, payroll number) or information that could reasonably be used to identify indirectly a specific employee (e.g., exact age, date of initial employment) must be withheld.

The format of the sharps injury log is not specified. The employer is permitted to determine the format in which the log is maintained (e.g., paper or electronic), and may include information in addition to that required by the standard, so long as the privacy of injured workers is protected.

The Agency recognizes that many employers already compile reports of percutaneous exposure incidents in a variety of ways. Existing mechanisms for collecting these reports will be considered sufficient to meet the requirements of the standard for maintaining a sharps injury log, provided that the information gathered meets the minimum requirements specified in the standard, and the confidentiality of the injured employee is protected.

Under newly published revisions to OSHA's Recordkeeping rule (29 CFR 1904), employers are required to record sharps injuries involving contaminated objects on the OSHA 300 Log of Work- Related Injuries and Illnesses and the OSHA 301 Injury and Illness Incident Report (the new forms replace the current 200 and 101 forms). When the revisions become effective, employers may elect to use the OSHA 300 and 301 forms to meet the sharps injury log requirements, provided two conditions are met.

First, the employer must enter the type and brand of the device on either the 300 or 301 form. Second, the employer must maintain the records in a way that segregates sharps injuries from other types of work-related injuries and illnesses, or allows sharps injuries to be easily separated. For example, if OSHA 300 and 301 records are maintained on a computer, the employer must ensure that the computer is able to produce a record of sharps injuries that does not include other types of work- related injuries and illnesses (i.e., through using a program that allows for sorting of entries by injury type). If records are kept on paper forms, the employer would need to use a separate page of the 300 Log for sharps injuries.

Exposure Control Plans that are reviewed and updated must reflect the requirements of the revised standard. Percutaneous exposure incidents that occur must be recorded on the sharps injury log.

OSHA's BBP standard, including the amendments herein promulgated, is applicable to general industry and shipyard employment (as referenced in 29 CFR 1915.1030).

Occupational Exposure Control Plan Employee Training Manual

Occupational Safety and Health Administration (OSHA)

2016/2021

Pensacola State College

Occupational Safety and Health Administration (OSHA) Standards

Occupational Exposure to Bloodborne Pathogens

INTRODUCTION

The educational information contained in this employee training packet is designed to assist Pensacola State College employees in complying with the Occupational Safety and Health Administration (OSHA) recommendations as published in the Federal Register (July 1, 2016) 29 CFR 1910.1030 Occupational Exposure to Bloodborne Pathogens: Final Rule:

In the interest of preventing accidental exposure to bloodborne pathogens and other infectious materials, Pensacola State College adheres to a policy of employee protection and workplace safety as prescribed by the OSHA regulations. Certain employees of Pensacola State College may face a significant health risk as the result of occupational exposure to blood and other potentially infectious materials. Bloodborne pathogens include hepatitis B virus which causes Hepatitis B, a serious liver disease, and human immunodeficiency virus, which causes Acquired Immunodeficiency Syndrome (AIDS).

AIDS

The human immunodeficiency virus (HIV) attacks the body's immune system, causing the disease known as the AIDS, or Acquired Immune Deficiency Syndrome. Currently there is no vaccine to prevent infection. A person infected with HIV:

- may carry the virus without developing symptoms for several years
- will eventually develop AIDS
- may suffer from flu-like symptoms, fever, diarrhea and fatigue
- may develop AIDS-related illnesses including neurological problems, cancer and other opportunistic infections.

HIV is transmitted primarily through sexual contact, but may also be transmitted through contact with blood and some body fluids. HIV is not transmitted by touching or working around people who carry the disease.

Hepatitis B

Hepatitis B is a serious and potentially deadly liver infection. It can cause serious liver problems such as Inflammation, Fibrosis, Cirrhosis and Liver Cancer. For more information on Testing, Diagnosis, Treatment and Living with Hepatitis B please visit www.HepBSmart.com.

Occupational Risk

The Occupational Safety and Health Administration office (OSHA) considers any employee who may come in contact with blood or other potentially infectious body fluids as a routine part of their job at increased risk for Hepatitis B or HIV infection. Protection is recommended for health care workers, law enforcement officers, fire fighters, emergency medical responders, correctional workers, waste handlers, and other workers who may be exposed to blood or other potentially infectious body fluids on the job.

Occupational Exposure Control Plan

Pensacola State College Occupational Exposure Control Plan has been developed to comply with the Occupational Safety and Health Administration (OSHA) Bloodborne Pathogens regulation 29CFR 1910.1030. The Occupational Exposure Control Plan is designed to eliminate or minimize employee occupational exposure to bloodborne pathogens.

Components of the College's Occupational Exposure Control Plan include:

- Occupational Exposure Determination Classifications
- Occupational Exposure Control Training Sessions
- Methods of Compliance
- Hepatitis B Vaccination Series
- Record keeping
- Procedures for evaluating exposure incidents
- Post-exposure evaluation and follow-up
- Occupational Exposure Control Plan Review

Occupational Exposure Determination

Occupational exposure means reasonably anticipated skin, eye, mucous membrane or parental contact with blood or other potentially infectious materials that may result from the performance of an employee's duty. Infectious pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva from dental procedures, any bodily fluid which is visibly contaminated with blood, or any bodily fluids difficult or impossible to differentiate.

Other infectious materials include unfixed tissue or organs (other than intact skin) from a living or dead person; HIV cells or tissue cultures, HIV or Hepatitis B (HBV) culture medium or solutions; blood, organs or tissues from experimental animals infected with HIV or HBV.

Occupational Exposure Classifications

Category I – Jobs in which required tasks routinely involve a potential for mucous membrane or skin contact with blood, body fluids or tissues. Use of appropriate protective measures is required for every employee in these jobs.

Category II – Jobs in which required tasks normally do not involve exposure to blood, body fluids or tissues, but may require performing unplanned Category I tasks. In these jobs the normal work routine involves no exposure to blood, body fluids, or tissues and the worker can decline to perform tasks which involve a perceived risk without retribution.

Employee exposure determination is based on the risks incurred while performing ones' job or procedures without the use of personal protective equipment.

All employees having occupational exposure to bloodborne pathogens will be trained in exposure control procedures at no cost to the employee. Employee training sessions are scheduled annually during normal working hours through the Pensacola State College In-service training office.

The Hepatitis B vaccination series will be available at no cost to College employees who have occupational exposure to bloodborne pathogens and infectious materials in the workplace (Category I and II).

All employees and supervisors share responsibility for safety in the workplace. Employees and departmental managers are urged to study all provisions of the College's Occupational Exposure Control Plan to assure compliance with the institution's policies for the prevention and transmission of disease. Supervisory personnel are responsible for monitoring employee training status and compliance with exposure control policies and practices within their areas.

Adherence with the requirements of the Pensacola State College Occupational Exposure Control Plan is required by all employees. Any questions relating to the College's exposure control plan should be directed to the College nurse located in the health clinic facility on the Pensacola campus.

Occupational Exposure Control Training Sessions

Pensacola State College Occupational Exposure Control training sessions are designed to provide employees with the following:

- (a) a copy of the OSHA bloodborne pathogen standards
- (b) a general description of the epidemiology and symptoms of bloodborne diseases
- (c) a description of modes of transmission of bloodborne pathogens

- (d) a copy of the Occupational Exposure Control Plan
- (e) training in appropriate methods for recognizing tasks and procedures that may involve exposure to blood or other potentially infectious materials
- (f) training in appropriate engineering controls, work practices, and personal protective equipment to prevent exposure to bloodborne pathogens
- (g) information on personal protective equipment, types available, proper use, location, removal, handling, decontamination and/or disposal
- (h) information on the selection of appropriate personal protective equipment
- (i) information on the Hepatitis B vaccine including its efficiency, safety and benefits
- (j) information on appropriate actions in the event of an exposure incident
- (k) information on post-exposure follow-up and counseling provided
- (l) an explanation of sign labels, and/or color-coding required by OSHA
- (m) a question and answer session with a knowledgeable occupational exposure trainer

Methods of Compliance

Universal Precautions is an approach to occupational infection control. According to the concept of Universal Precautions, all human blood and certain human body fluids (amniotic fluid, pericardial fluid, peritoneal fluid, pleural fluid, synovial fluid, cerebrospinal fluid, semen, and vaginal secretions, saliva contaminated with blood) are treated as if known to be infectious for HIV, HBV and other bloodborne pathogens.

The Center for Disease Control developed the principal of “universal blood and body fluid precautions” to address concern regarding transmission of HIV in the health-care setting. Since HIV and HBV transmission has not been documented from exposure to their body fluids (feces, nasal secretions, sputum, sweat, tears, urine and vomitus), universal precautions do not apply to these fluids. Universal precautions do not apply to saliva except in the dental environment where saliva is likely to be contaminated with blood or other potentially infectious materials.

General Infection Control procedures developed within the health care setting are applicable to other work environments where employees may be exposed to infectious agents. The modes of transmission noted in the hospital environment are observed in the work situations of emergency and public-safety workers as well. The use of general infection control procedures is important to protect both workers and the individuals with whom they come in contact from a variety of infectious agents.

Engineering and Work Practice Controls

Hand washing – Employees shall wash their hands immediately or as soon as possible after removal of gloves or other personal protective equipment and after contact with blood or other potentially infectious materials.

Eating, drinking, smoking, applying cosmetics, handling contact lenses are prohibited in work areas where there is a potential for occupational exposure to infectious materials. Food and drink shall not be

kept in refrigerators, freezers, shelves, cabinets or bench tops where blood or other potentially infectious materials are stored.

Bending, shearing, recapping of contaminated needles and other sharps is prohibited. Mouth pipetting/suctioning of blood or other infectious materials is prohibited.

Housekeeping

Work sites must be maintained in a clean, sanitary condition.

Broken glassware shall not be picked up directly with hands; employees must use a mechanical means such as dust pan and brush or tongs or forceps.

All bins, pails, cans, and receptacle intended for reuse which have a potential for becoming contaminated with blood or other potentially infectious materials shall be inspected, cleaned and disinfected immediately or as soon as possible upon visible contamination.

Sharps containers must be closable, puncture-resistant, leak-proof on sides and bottom and labeled or color-coded in accordance with OSHA regulations 29 CFR S 1910.1030.

Contaminated laundry must be handled as little as possible and placed and transported in containers which are labeled or color-coded in accordance with provisions of 29 CFR S 1910.1030.

Personal Protective Equipment

Personal, protective equipment must be worn whenever an employee is performing a task which may result in occupational exposure to infectious materials. Protective equipment must be readily accessible at the work site.

- a. Where there is potential for occupational exposure, employees will be provided and required to use personal protective equipment including but not limited to: gloves, goggles, glasses with side shields, and face shields.
- b. Appropriate protective equipment does not permit blood or other potentially infectious materials to pass through or to contact the employees clothing, skin, mouth or mucous membranes. When necessary, hypo-allergenic, powderless or alternative gloving will be provided for employees who are allergic to glove types normally provided.
- c. Disposable gloves may not be decontaminated or washed for reuse.
- d. Personal protected equipment must be removed prior to leaving the work area and must be disposed of in appropriate containers that are properly labeled.
- e. Protective work clothing contaminated with blood or other body fluids to which universal precautions apply should be placed and transported in bags or containers that prevent leakage. Personnel involved in the bagging, transport, and laundering of contaminated clothing must wear gloves.

- f. All personal protective equipment must be inspected, cleaned, and replaced without cost to employees, as needed, in order to maintain its effectiveness.

Resuscitation Equipment

No transmission of HIV or HBV infection during mouth-to-mouth resuscitation has been documented. However, because of the risk of salivary transmission of other infectious diseases and the theoretical risk of HIV and HBV transmission during artificial ventilation of trauma victims, disposable airway equipment or resuscitation bags must be used. Disposable resuscitation equipment and devices should be used once and disposed of properly.

Law enforcement personnel are advised to use extreme caution in conducting searches and evidence handling. Personal, protective equipment must be used to prevent accidental exposure to disease.

Hepatitis B Vaccination Series

OSHA considers HBV vaccination a key component of an infection control program. The OSHA Compliance Directive 29CFR 1910.1030 requires that HBV vaccination be offered at no cost to the employees whose jobs involve the risk of directly contacting blood or other potentially infectious materials at least once a month on average. The employer is also required to provide post-exposure evaluation and follow-up in the event of an exposure incident.

Hepatitis B vaccine, Recombinant, is a non-infectious subunit viral vaccine derived from Hepatitis B surface antigen produced in yeast cells. The vaccine against Hepatitis B, prepared from recombinant yeast cultures, is free of association with human blood or blood products. Each lot of Hepatitis B vaccine is tested for safety in mice and guinea pigs, and for sterility.

A high percentage of healthy people who receive three doses of vaccine achieve high levels of surface antibody (anti-HBs) and protection against Hepatitis B. Persons with immune-system abnormalities, such as dialysis patients, have less response to the vaccine, but over half of those receiving it do develop antibodies.

Full immunization requires three doses of the vaccine over a six month period. Hepatitis B vaccine, given according to manufacturer's directions, induces protective antibody levels in 85% to 97% of healthy adults. Protection against both the illness and the development of the carrier state lasts at least nine years (the duration of follow-up studies) and perhaps considerably longer.

Although Hepatitis B antibodies in many individuals will decay below detectable levels within seven years after immunization. If these individuals are exposed to HBV, they develop the rapid (anamnesis) antibody response and do not become ill or develop the HBV carrier state. For persons with normal immune status, it is not presently recommended that a booster dose of Hepatitis B vaccine be given after the initial series but a booster dose may be recommended in the future if it appears that immunity conferred by the vaccine wanes after some period of time.

There is no evidence that the vaccine has ever caused Hepatitis B. However, persons who have been infected with HBV prior to receiving the vaccine may develop hepatitis in spite of immunization. The duration of immunity is known at this time.

POSSIBLE SIDE EFFECTS: The incidence of side effects is very low. No serious side effects have been reported with the vaccine. A few persons experience tenderness and redness at the site of infection. Low-grade fever may occur. Rash, nausea, joint pain and fatigue have also been reported. The possibility exists that more serious side effects may be identified with more extensive use.

CONTRAINDICATIONS: The HBV vaccine is not recommended for individuals to whom any of the following applies: PREGNANCY, FEVER OR ACUTE ILLNESS, ALLERGY TO ANY VACCINE COMPONENT SUCH AS MERCURY, YEAST, ALUMINUM, OR FORMALDEHYDE.

College employees who have occupational exposure to bloodborne pathogens in the workplace and who decline to accept the Hepatitis B vaccination series available to Pensacola State College employees are required to sign the College's Occupational Exposure Declination form.

Record Keeping

Employee's records must be kept confidential for each exposed employee for their term of employment plus 30 years. Records must include the employees' name and social security number; Hepatitis B vaccination status; examination, testing and follow-up information; a copy of the physician's written opinion; and a copy of information provided to the physician.

Training records must be kept on file and made available to the employee, to anyone with written consent by the employee and to the Occupational Safety and Health Administration's Office.

Exposure Incidents

Employee exposure incidents are to be reported to the College nurse located in the Pensacola State College Health Clinic facility on the Pensacola campus (Phone: 484-1322).

Post-exposure evaluation and follow-up will be available to at-risk employees who experience an occupational exposure incident. Post-exposure counseling and follow-up will be available through the College health clinic facility on the Pensacola campus.

Occupation Exposure Control Plan Review

Pensacola State College Occupational Exposure Control Plan is reviewed annually for revisions and updates. The plan is approved annually by the Executive Committee.

Appendix A

Employee Health Services OSHA Bloodborne Pathogens Exposure Control Training

I attended an OSHA Bloodborne Pathogens Exposure Control Training session provided by Pensacola State College and received the following information:

- A description of the epidemiology and symptoms of bloodborne disease
- A description of modes of transmission of bloodborne pathogens
- A copy of the Pensacola State College Exposure Control Plan
- Training methods for recognizing tasks and procedures that may involve exposure to blood or other potentially infectious materials
- Training in the use and limitations of practices that will prevent or reduce exposure, including engineering controls, work practices and personal protective equipment
- Information on types, proper use, location, removal, handling, decontamination and/or disposal of personal protective equipment
- Information for selecting personal protective equipment
- Information on Hepatitis B vaccine, its efficacy, safety, and benefits
- Information on how to respond to emergencies involving infectious materials
- Information on appropriate actions in the event of an exposure incident
- Information on post-exposure follow-up and counseling available to exposed employees
- An explanation of signs, labels, and/or color-coding of infectious materials as required by OSHA
- A question and answer session with a knowledgeable trainer

Employee Signature: _____ Date: _____

Employee ID Number: _____ Facilitator: _____

Appendix B

Employee Health Services Recombivax HB Vaccine Consent Form

Employee Name: _____ Date: _____

Employee ID Number: _____ Department: _____

Telephone (home): _____ Work Number: _____

I request the Recombivax HB vaccine be administered to me by the Pensacola State College health nurse. I understand that three (3) administrations of the vaccine are necessary for complete immunity. Following the initial administration of the vaccine, the second dosage will be given 30 days later and the final dosage of the vaccine will be administered six (6) months later.

I understand that this vaccine is not recommended for pregnant women, or individuals with acute illness, fever or allergy to any vaccine component such as mercury, yeast, aluminum, or formaldehyde.

I have read the information about Hepatitis B Vaccine (Recombinant) and have had an opportunity to ask questions. I understand the benefits and risks of Recombivax HB Vaccine (Recombinant).

I understand, as with all medical treatments, there is no guarantee that I will become immune or that I will not experience an adverse side effect from the vaccine.

Date Vaccinated	Lot No.	Site
1.		
2.		
3.		

Employee Signature: _____ Date: _____

Health Nurse Signature: _____

Appendix C

**Employee Health Services Hepatitis B Vaccine
Declination Statement**

Employee Name: _____ Date: _____

Employee ID Number: _____ Department: _____

Telephone (home): _____ Work Number: _____

I understand that due to my occupational exposure to blood or other potentially infectious materials, I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with Hepatitis B vaccine, at no charge to myself. However, I decline the Hepatitis B vaccination at this time.

I understand that by declining the Hepatitis B vaccine at this time, I continue to be at risk of acquiring Hepatitis B, a serious disease. If, in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with the Hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Employee Signature: _____ Date: _____

Health Nurse Signature: _____

Appendix D

Employee Health Services Hepatitis B Vaccination Verification

Employee Name: _____ Date: _____

Employee ID Number: _____ Department: _____

Telephone (home): _____ Work Number: _____

I have completed three (3) administrations of Hepatitis B Vaccine at:

(PLACE VACCINATED)

on this the _____ of _____

Employee Signature: _____ Date: _____

Appendix E

**Employee Health Services Exposure
Incident Evaluation and Follow Up**

Employee Name: _____ Date: _____

Address: _____ Telephone: _____

Facility: _____ Date: _____

Address: _____ Date: _____

Describe Circumstances of Occupational Exposure Incident: _____

Personal Protective Equipment Used: _____

- | | | |
|---------------------|--|---|
| Route of Exposure: | <input type="checkbox"/> _____
<input type="checkbox"/> _____
<input type="checkbox"/> _____ | needle stick puncture, laceration
body fluid contact to skin with breaks, cuts, sores, rashes, etc. body fluid
contact with eyes, nose, or mouth |
| Source of Exposure: | <input type="checkbox"/> _____
<input type="checkbox"/> _____
<input type="checkbox"/> _____
<input type="checkbox"/> _____
<input type="checkbox"/> _____
<input type="checkbox"/> _____
<input type="checkbox"/> _____ | Treated/Untreated Waste
treated medical waste (after, autoclave or incinerator) requires first aid only
untreated or unknown status medical waste

Individual (source of needle, blood, or body fluid) unknown
known
refuses to be tested
consents to testing (HBV, HIV) test
results are negative
test results are positive |

Appendix F

Employee Consent to Baseline Testing

- _____ Refused testing (document)
- _____ Refused testing but allowed blood sample taken (preserve for 90 days)
- _____ Consented to testing

FOLLOW-UP PROCEDURES

HIV PRECAUTIONS – Assess current status – Elisa Test. If reactive, Western Blot Test is administered to confirm

	Scheduled Date	Actual Date	Results	Signature
Initial	_____	_____	_____	_____
6 weeks	_____	_____	_____	_____
12 weeks	_____	_____	_____	_____
6 months	_____	_____	_____	_____

HBV PRECAUTIONS –Assess current status (vaccination, pre-existing immunity)

- _____ Immunity Confirmed
- _____ Confirmation unavailable-test for Anti-HBs (Antibodies to HB Surface Antigens)
 - _____ Immunity confirmed
 - _____ Immunity not confirmed
 - a) Give HB Immune Globulin (Gluteal I.M.)
 - b) Initiate Vaccine Series

	Scheduled Date	Actual Date	Given in Deltoid	Signature
Initial	_____	_____	_____	_____
1 month	_____	_____	_____	_____
6 months	_____	_____	_____	_____

Appendix G

Hepatitis Non-A, Non-B/Hepatitis C (HVC) Precaution

_____ Immune Globulin (I. G.) given

Date: _____

Signature: _____

TETANUS PRECAUTIONS – Assess current status:

_____ booster received within last five years – not action

_____ Date: _____

_____ Signature: _____

_____ never received tetanus/diphtheria primary series

	Scheduled Date	Actual Date	Given in Deltoid	Signature
Initial	_____	_____	_____	_____
2 month	_____	_____	_____	_____
6-12 months	_____	_____	_____	_____

COMMENTS: _____

Appendix H

Exposure Protocol

FIRST AID - Immediately clean wound and protect

EXPOSURE INCIDENT COUNSELING – Inform employee of the following:

- The potential risk of HIV infection is extremely low
- The rate or transmission of HIV from an exposure to blood from an unknown source is extremely low
- One is far less likely to become infected with HIV (Aids) than with HBV (Hepatitis B); the concentration of the HIV virus is significantly lower than the concentration of HBV virus in blood from infected persons
- The test results from source individual (if tested)
- The test results of the blood test and medical evaluation
- Any medical conditions resulting from the incident that would require further evaluation or treatment
- The strict confidentiality maintained in all phases of the medical follow-up
- The need for HIV blood testing and immunization therapy (both active and passive)

EMPLOYEE IS ADVISED DURING THE FOLLOW-UP PERIOD:

- To report to the physician for any illness that occurs—particularly if fever, rash, fatigue, swollen glands, or flu-like symptoms develop
- To refrain from donating blood, semen or body organs
- To abstain from or use protective measures during sexual intercourse
- To refrain from breast-feeding (if female)
- To return to the physician if any questions or concerns arise
- To keep all follow-up and/or scheduled appointments

Appendix I

Occupational Exposure Plan OSHA's Blood borne Pathogens Regulations

REFERENCES

BFI Medical Waste Systems (1992). OSHA'S Bloodborne Pathogen Final Standard, Browning- Ferris Industries: Education and Compliance Department.

Department of Labor (2016). Occupational Exposure to Bloodborne Pathogens: Final Rule. Federal Register Vol. 56, No. 235, July 1, 2016.

Fazio, L. (1992). Exposure Control Plan for Dental Personnel, Pensacola State College, Pensacola, Florida.

MSD: Merck, Sharp & Dohme (1990). Resource Manual: A Program for Employees Exposed to Bloodborne Infections:

U.S. Department of Health and Human Services Public Health Service Centers for Disease Control (1989). Guidelines for Prevention of Transmission of HIV and HBV to Health-care and Public-Safety Workers. Georgia: National Institute for Occupational Safety and Health.

West Florida Regional Medical Center (1992). Exposure Control Plan. Pensacola, Florida. www.HepBSmart.com.

Appendix J

Courses and Programs Insured

- Allied Health Sciences
 - EMS/EMT
 - Paramedics
 - Bio-Med/Biotechnology
 - Coding/Medical Billing Specialist
 - Dental Hygienist (2 yr)
 - Dental Hygienist (4 yr)
 - EEF/EKG Technician
 - Health Tech
 - Health Services Administration
 - Medical Assistant
 - Nursing Assistant (CAN)
 - Nursing (Perioperative)
 - Nursing (Practical, LPN/Vocational, LVN)
 - Nursing (Prof) 2 yr
 - Nursing (Prof) 4 yr
 - Patient Care/Nursing Asst/Tech, CAN & PCA
 - Pharmacy Technician
 - Phlebotomist
 - Physical Therapist
 - Radiography/Radiologic Tech
 - Sonography
 - Surgical Technician
 - Veterinary Tech LD

- Education/Training Student Accident Coverage
 - Radiography/Radiologic Tech
 - Sonography
 - Surgical Tech
 - Teacher Education
 - Theater/Entertainment
 - Veterinary Tech
 - Welding
 - Architectural Design
 - Barbering
 - Building Construction
 - Ceramics
 - Chemistry Labs

- Child Development
- Coding Specialist/Biller
- Color, Materials and Methods
- Cosmetology
- Crime Scene Tech
- Criminal Justice (Law Enf/Coor)
- Critical Care/O.R. (Grant)
- Culinary Arts
- Dental Asst/Hygienist/Lab 2 yr
- Dental Hygienist – Local Anesthesia
- Drafting
- EEF/EKG
- Electronic Tech
- EMS/EMT
- Engineering
- Facial Tech
- Glass Blowing
- Health Technology
- Health Services Administration
- Heating/Air Cond(HARV)
- Hospitality
- Industrial Mg Tech
- Jewelry
- Large Format Camera
- Manufacturing Tech
- Massage Therapy
- Medical Assisting
- Nail Technology
- Networking Tech
- Nursing (operating Rm/Reg 1st Asst)
- Nursing (Practical, LPN/Vocational, LVN)
- Nursing (Prof 2 & 4 Year)
- Paramedic's Tech
- Patient Care Tech
- Pharmacy Tech
- Phlebotomist
- Photographic Lighting Techniques
- Photography
- Physical/Exercise/Fitness
- Physical Therapy/Asst
- Printmaking
- Sculpture

