

EMPLOYEE ILLNESS & INJURY PREVENTION PROGRAM

2018-2019

Southern Oregon Child and Family Council, Inc.'s comprehensive program to
reduce and prevent incidents in the workplace



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Employee Illness and Injury Prevention Program

Safety Policy

It is the policy of Southern Oregon Child and Family Council, Inc. (SOCFC) to develop and promote healthy practices and routines, and provide safe and supportive learning environments in which children can thrive and grow. We maintain safe and clean facilities for children, parents, and staff. We enhance our children's safety through employee background checks, effective supervision practices, and safe transportation. We also commit to achieving employee health and safety excellence and striving for continual improvement in safety performance and in the safety culture of our organization. SOCFC implements a comprehensive safety management system that is integrated into daily operations and provides adequate resources, leadership, and training for effective safety programs. Employee involvement in planning and decision-making relative to safety matters is a key component of our system. SOCFC pledges to operate in compliance with the spirit and letter of applicable laws, standards, internal health, and safety procedures.

HEAD START PROGRAM PERFORMANCE STANDARDS: 45 CFR 1302

OREGON CHILD CARE DIVISION: RULES FOR CERTIFIED CHILD CARE CENTERS, CTR-132 05/03/2015

OREGON OSHA: (OAR 437, DIVISION 2) GENERAL OCCUPATIONAL SAFETY AND HEALTH RULES

CARING FOR OUR CHILDREN 3RD EDITION: NATIONAL HEALTH AND SAFETY PERFORMANCE STANDARDS

Scope/Purpose

This policy encompasses child and employee safety and is applicable to all agency organizations. It documents the agency's safety values and commitments, and establishes the framework to guide the development of the safety system, programs, goals, and operating procedures that support attaining the policy objectives.

Approved by Policy Council: August 18, 2015

Approved by the Board of Directors: September 17, 2015

Definitions

Bloodborne Pathogens – Pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV).

Exposure Incident – A specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious body fluids that results from the performance of an employee's duties.

Occupational Exposure – Reasonably anticipated skin, eye, mouth, other mucous membrane, or parenteral contact with blood or other potentially infectious body fluids that may result from the performance of an employee's duties.

Personal Protective Equipment – Specialized clothing or equipment worn by an employee for protection against a hazard. General work clothes not intended to function as protection against a hazard are not considered to be personal protective equipment.

Universal Precautions – An approach to infection control. According to the concept of Universal Precautions, all human blood and certain human body fluids are treated as if known to be infections for HIV, HBV, and other bloodborne pathogens.

Work Practice Controls – Controls that reduce the likelihood of exposure by altering the manner in which a task is performed.

Program Overview

Our illness and injury prevention program includes:

- Conducting monthly Safety Committee meetings and posting copies of committee meeting minutes to communicate activities.
- Conducting monthly safety trainings at all centers.
- Operations monitoring – conducting a monthly safety walk through at each location to ensure safe and healthy work environments for our staff and children.
- Training all employees in good safety and health practices.
- Completing a Job Hazard Analysis on work activities.
- Providing necessary personal protective equipment (PPE) and instructions for their use and care.
- Developing and implementing safe and healthy operating procedures, and training staff to those procedures.
- Providing the opportunity for employees to participate on the Safety Committee, submit safety suggestions, and work as a team member to encourage other staff to promote safe and healthy practices.
- Investigating accidents promptly and thoroughly to find the cause and rectify the problem to prevent reoccurrence.
- Recognizing and rewarding staff for outstanding safety service and performance.

Roles and Responsibilities

Shared Responsibilities

We recognize that the responsibility for safety and health is shared:

- The agency is accountable for and accepts the responsibility of the leadership of the illness and injury prevention program, for its effectiveness and improvement, and for providing the safeguards required to ensure safe conditions.
- Managers and supervisors are responsible for developing the proper attitudes toward safety and health, providing training for the staff they supervise, and promoting teamwork amongst staff to ensure that all operations are performed with the utmost regard for safety and health.
- Employees are responsible for continuously practicing safety, using a team approach to assist fellow staff with proper safety techniques, following incident reporting instructions as outlined in Appendix A, and reporting safety concerns and suggestions to continually improve safety in our work environments.

Individual Responsibilities

EVERYONE has a responsibility to themselves and to their fellow workers to *immediately* report unsafe or unsanitary conditions, hazards, or unsafe behaviors:

- Immediately bring the matter to the attention of the site supervisor.
- If the problem cannot be corrected by the site supervisor, it will be directed to the safety compliance manager.
- Work safely by following all safety and health policies and procedures, as well as your supervisor's instructions.
- Report all accidents, injuries, bloodborne pathogen (BBP) exposures, and near misses, and cooperate with your supervisor in an accident investigation.
- Maintain all work areas in a neat and orderly condition.
- Keep floor space cleared to prevent slips, trips, and falls.
- Keep all work areas free of rags, paper, junk, trash, etc.
- Follow cleaning, sanitizing, and disinfecting practices according to the Safety and Sanitation Procedures.
- Cooperate with other employees in keeping work areas clean.
- Maintain a high level of personal cleanliness.

Employee Fire Prevention Responsibilities:

- Keep all areas free of accumulations of combustible materials.
- Keep all fire exits clear.
- Remember that no smoking or vaping is allowed on any SOCFC property.
- Report all fire hazards immediately to your supervisor.
- Become familiar with all forms of firefighting equipment and their location at your worksite.
- Report any fire or the use of any fire equipment without delay.

- ONLY staff who have been properly trained and are authorized will use firefighting equipment and ONLY for the prevention and control of small fires.

Employee Training

An effective illness and injury prevention program requires effort, teamwork, practice, and participation from everyone in the workplace. SOCF has made a commitment to ensure that all employees know the materials and equipment they are working with, what known hazards are present, and what is being done to control or eliminate these hazards. It is extremely important for every employee to understand the following:

- No employee is expected to undertake a task until they have received appropriate training and have been authorized to perform that job.
- No employee will undertake a job or task which appears to be unsafe.
- No employee will use chemicals without having reviewed the Safety Data Sheet (SDS) and having understood the toxic properties and exposure risks.
- Every employee is required to report all unsafe acts or conditions encountered during work to their site supervisor or the safety compliance manager.
- All injuries, illness, BBP exposures, and near misses, no matter how slight, must be immediately reported to the site supervisor and the Human Resources Department. The employee must complete the required forms in the appropriate timeframe.
- Every employee is responsible for housekeeping duties at their work site. Good housekeeping is one of the most important factors in incident prevention.
- Employees are encouraged to participate in the improvement and implementation of the agency illness and injury prevention program.
- Every employee has stop work authority if they see anything that presents an imminent danger to staff, visitors, or children.

All new employees are required to attend New Employee Orientation (NEO) which includes required safety and health training, and they must complete an initial center orientation with the site supervisor in order to be instructed in:

- General agency and center safety policies and procedures.
- Safe work procedures and practices.
- Safety and sanitation policies and procedures.

In addition, other work related education is included in the training process.

The safety training program for all new employees will consist of:

- A training period of up to 14 days (refer to OAR 414-300-0120) which includes individual instruction on the safe use of equipment to be used and operated, accident reporting procedures, and safe work practices.
- Routine training of safe performance of individual work assignments.

- Hazard communication when hazardous chemicals are to be used before initial work performance.
- Safe lifting techniques and proper ergonomics.
- An overview of monthly center safety meetings and safety committee meetings.

The program is also intended to provide ongoing general and job specific safety training to existing agency personnel. To ensure that all employees receive appropriate job safety training, all employees will participate in:

- Scheduled safety meetings.
- Additional training if job duties or work assignments are expanded or changed.
- Annual updated safety trainings.
- Post-accident training when necessary.
- Hazardous material training when necessary.
- Emergency response training.

Employees will sign a training verification form (Appendix D) stating that they have received and understand each of the trainings. Records of all trainings will be maintained in employee records by the Human Resources Department.

The Worksite Orientation form must be completed within ten days of the employee starting work at the worksite. Once all items have been reviewed, the form must be signed by the employee and the site supervisor, and the original must be sent to the Human Resources Department.

General Safe Operating Practices

Employees must understand these practices shall be followed without exception. The fact that proper equipment may not be readily accessible or that the job can be done with less delay by ignoring these policies and procedures will not be accepted as sufficient reason for not observing the prescribed methods and procedures.

Approved agency safety and sanitation policies and procedures for specific work areas and activities are posted on the Head Start Staff Zone website. Supervisors will not make work assignments that are contrary to policies and procedures. Staff may receive disciplinary action for nonobservance of approved practices and procedures.

Established safe operating procedures must be used in the operation of work stations and equipment. Employees will receive instruction for the operation of equipment from a supervisor or an authorized trained employee. These procedures have been developed and are accepted as the safest, most efficient methods. The use of all shop equipment is restricted to trained employees authorized by the Operations Director.

Ladders

Ladders are common and helpful devices which almost everyone uses in the course of their job. A defective or misused ladder can be one of the most hazardous pieces of equipment. Never substitute

boxes, chairs, desks, or other supports for a ladder. Always secure a ladder and check for defect before attempting a job requiring climbing. It is important to keep metal ladders away from any electrical apparatus or wiring to avoid electrical shock.

Due to its greater stability, a stepladder should be used in preference to a straight ladder whenever possible. When it is necessary to use a straight ladder, make sure the ladder is positioned firmly top and bottom. If necessary, another employee should hold the ladder steady. Safety feet, which help keep the bottom of the ladder from slipping, should be provided on all straight ladders.

- Select the right ladder for the job.
- Check the condition of the ladder.
- If the ladder is defective, mark it as defective, remove it from the premises, and inform your supervisor so that the defective ladder can be repaired or replaced.

Materials Handling

Incorrect use of the body muscles and faulty lifting methods may result in serious injury. Over-reaching, upward or outward or stretching sideways to lift something can produce a painful muscle strain.

When lifting, it is important to keep the load as close to your body as possible. Avoid bending your back or twisting your body. When lifting an object, bend your knees and keep your shoulders back. This permits your leg muscles to bear the weight. Follow the same principle when lowering a load.

Shift your feet when turning to avoid twisting your body. Good footing is necessary to avoid strains due to slipping. Quick, jerky motions also contribute to muscle strains and should be avoided.

Know your own strength. You should always make a preliminary “heft” to be sure that the load is easily within your lifting capacity. When two or more people lift or carry a heavy or bulky object, it is important for them to work in unison to avoid injury. Often, it helps for one of the people to “call the signals”. When carrying bulky objects that obstruct your view, you should always ask someone to help guide your movements.

Always be prepared for the unexpected. Keep a safe distance in case a child reacts unexpectedly. Get down to the level of the children instead of bending over; kneel down on one knee for balance. Don’t straighten up when a child grabs you around the neck; instead, kneel down and request the child to let go. Move with a child that has a hold of you, rather than moving away.

Set yourself up ergonomically correct. Request an ergonomic evaluation from the Human Resources Department if your work area is not ergonomically correct for you.

Tools

Select the right tool for the job. Improper use of tools is often a cause of injury. For example, a wrench that is too small requires extra effort and may result in muscle strain. A wrench that is too large may slip. Examine your tools frequently for excessive wear or defects and have them properly repaired or replaced. Have a place for each tool and keep it in the place when it’s not in use. Always place tools where they will not fall.

Horseplay

Everyone enjoys a good joke, but a practical joke may backfire and result in serious injury. You can never tell how a person will react to being tripped or tickled. Fun has its place, but not under conditions that may result in an injury.

Exits and Emergency Equipment

Exits, aisle ways, stairways, and emergency equipment must be kept clear of obstructions at all times.

Housekeeping

SOCFC has developed the *Safety and Sanitation Policies and Procedures* to ensure that all worksites are maintained in a clean and sanitary condition. Monthly safety walkthroughs are required and completed to ensure compliance with those policies and procedures, and to identify any hazards or concerns that need attention.

Good housekeeping is one of the most important factors in incident prevention. People can trip over loose objects on the floor, slip on wet or dirty floors, or bump against carelessly piled or placed materials. Good housekeeping, which is cleanliness and in order, is important for safety as well as appearance. It is the individual responsibility of each employee to keep their work area clean and orderly. Clear aisles, kept free of objects, make for easy walking. Numerous falls have been caused by stumbling over material carelessly left in walkways.

Floors and Stairways

Slippery and unsafe floors are conditions often encountered because of the nature of childcare. If you discover these conditions, report them to your supervisor, remove any hazards you can, and post signs, cones, etc. to warn others.

Running is an unsafe practice. Injuries from a fall are frequent and serious, and may range from a sprained ankle to a back injury.

Fire Protection

Fire exits and doors must be kept free of obstructions. Containers provided for waste paper should not have grease, oil, or flammable liquids discarded in them. Know the location of the fire alarm system and the evacuation routes.

Smoking

Smoking and vaping is prohibited on the grounds of any SOCFC facility or temporarily used training/activity site.

First Aid and Medical Procedures

Report all accidents, injuries, BBP exposures, and near misses, no matter how slight, to a supervisor and the Human Resources Department. In spite of all precautions, there may be injuries for which treatment is necessary. Improper handling of a seriously injured person may increase the extent of the injury. In case of a serious injury, it is important to keep the injured person quiet and warm. Call 911 if emergency medical treatment is necessary and contact the Human Resources Department as soon as possible.

Corrective Action

When it becomes necessary, SOCFC reserves the right to discipline employees who violate agency safety rules or policies. Disciplinary measures may include, but are not limited to:

Oral warning → Written warning → Suspension without pay → Demotion →
 Work improvement plan → Last chance agreement → Discharge.

BBP Exposure Control Plan

SOCFC has prepared the following exposure determination table which identifies staff who may incur occupational exposure to blood or other potentially infectious body fluids. The exposure determination will be made without regard to the use of PPE.

All job classifications in which some staff may have occupational exposure is determined by SOCFC and reviewed annually. Not all staff in these categories would be expected to incur exposure to blood and other potentially infectious body fluids. Job classifications and the associated tasks and procedures in which some staff may have occupational exposure have been identified as follows:

Job Classification	Possible Occupational Exposure
Service Area Assistant (center-based SAA's only) Area Manager Center Assistant Center Sweeper Classroom Aide Cook & Cook Assistant Education Supervisor Family Advocate Food Service Supervisor Head Teacher Health Screener Substitute Teacher Teacher Assistant EHS Center Assistant EHS Center Manager EHS Cook & Cook Assistant EHS Specialist I and II EHS Lead Family Specialist Listo - All Positions	Tasks or procedures involving blood or other potentially infectious body fluids: Vomiting Spitting Biting Diapering/Toileting Body Fluid/Human Waste Clean Up Scratching Feeding Teeth Brushing First Aid Administration Drug Paraphernalia Clean up
Epinephrine trained staff	Injection for acute allergic reactions

SOCFC will ensure that all staff participate in BBP training. The training will follow these guidelines:

- No cost to the staff member.
- Conducted during regular work hours.
- Annual refresher training.
- Include a discussion of bloodborne disease frequency, transmission, and symptoms.

- Explanation of SOCF's Exposure Control Plan and how an employee may obtain a copy of the plan.
- Explanation of the tasks and procedures that may involve exposure.
- Explanations of the use and limitations of methods to reduce exposure (work practice controls).
- Information on the types, use, location, removal, handling, decontamination, and disposal of PPE.
- Information about the Hepatitis B vaccine including effectiveness, safety, methods of administration, availability, health benefits, and which SOCF staff may receive the vaccine at no cost.
- Post-exposure procedure, including reporting and medical treatment.
- Opportunity for interactive questions.
- Additional training as appropriate.

Work Practice Controls

SOCFC will implement necessary work practice controls to eliminate or minimize staff exposure. Controls will be examined and maintained or replaced as appropriate on a regular schedule to ensure effectiveness. Controls will include but are not limited to:

- Universal precautions will be used by all staff. All blood or other potentially infectious body fluids will be presumed to be infectious, regardless of the perceived status of the source individual. All staff should avoid direct skin contact with body fluids. Whenever possible, a child should be encouraged to care for their own bleeding injury.
- Hand washing facilities will be readily accessible to staff. In the event that such facilities are not available (field trips, etc.), first aid kits will include antibacterial wipes. Staff will wash their hands or any other potentially contaminated skin area or clothing immediately or as soon as feasible after removal of gloves or other protective equipment. Skin or mucous membranes that have been exposed should be washed or flushed with warm water and soap as soon as possible. Any first aid or health care administered after any contact with potentially infectious body fluids should be followed by complete and effective hand washing with soap and warm water for at least twenty seconds.
- Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses will be prohibited in all work areas where there is a reasonable likelihood of exposure to blood or other potentially infectious body fluids.

Personal Protective Equipment

- SOCF will ensure that personal protective equipment is issued or readily accessible in appropriate sizes to staff with exposure risk. The Health Services Department will be notified whenever additional supplies are needed.
- PPE may include vinyl gloves, face masks, and pocket masks for rescue breathing/CPR.
- PPE will not permit blood or other potentially infectious body fluids to pass through to work clothes, undergarments, skin, eyes, mouth, or other mucous membranes under normal conditions of use.
- All staff who may come into contact with blood or other potentially infectious body fluids will have access to appropriately stocked first aid kits.

- All staff must use appropriate PPE when exposure is possible.
- The site supervisor, HR coordinator, and/or the safety compliance manager will investigate and document any such circumstances in which a staff member temporarily declines the use of PPE. Declining to use PPE will be permitted only when, in the staff member's professional judgement, its use would have prevented the delivery of health care or posed an increased hazard to the safety of others. The Safety Committee will determine whether changes can be instituted to prevent such occurrences in the future.
- The direct service staff will ensure that all PPE is cleaned, laundered, and/or disposed of immediately or as soon as possible and places in an appropriately designed container/area for storage, washing, decontamination, or disposal.

Housekeeping

All equipment and environmental/working surfaces shall be cleaned and decontaminated after contact with blood or other potentially infectious body fluids. Work surfaces shall immediately, or as soon as feasible, be decontaminated with the appropriate disinfectant. All bins or receptacles intended for reuse which have a reasonable likelihood for becoming contaminated shall be inspected and decontaminated on a regularly scheduled basis and decontaminated immediately upon visible contamination. Broken glass which may be contaminated shall not be picked up directly with hands; instead, it shall be cleaned up using mechanical means (e.g. brush and dust pan, tongs, etc.). Reusable sharps that are contaminated shall not be stored in a manner that requires employees to reach by hand into the containers where the sharps have been placed.

Contaminated sharps shall be discarded immediately, or as soon as feasible, in containers that are closable, puncture resistant, leak-proof, and labeled or color-coded. These containers shall be maintained in an upright position, easily accessible to employees, and located as close as possible to areas where sharps are used or can be reasonably anticipated to be found. These containers shall be replaced routinely and not be allowed to overfill. When moving these containers, employees shall confirm they are securely closed and, if leakage is possible, placed in a secondary container that is closable, puncture resistant, leak-proof, and labeled or color-coded.

Contaminated laundry must be placed and transported in leak-proof bags supplied by the Health Services Department.

Items that are soiled with blood or body fluids (bandages, gauze, etc.) must be placed in a sealed plastic bag (spill kit bag) and disposed of in the trash away from children. All wastebaskets used to dispose of potentially infectious body fluids must be lined with a plastic liner and disposed of daily. Blood or body fluid soaked clothing belonging to a child shall be placed in a leak-proof bag and sent home to the parent.

Drug Paraphernalia and Human Waste Management

On occasion, drug paraphernalia* or human waste may be found by staff in the outdoor center environment. Drug paraphernalia and human waste can contain bloodborne pathogens or other infectious agents. Discarded items such as clothing, bedding or bags can contain drug paraphernalia and/or human waste and should be considered suspect. We use universal precautions when exposed to these materials, which means we assume anything we find is potentially infectious or harmful. If these

materials are discovered in a playground or any other portion of a facility maintained by SOHS they must be carefully removed to prevent exposure to staff, parents, visitors, and children using the area according to the following OHSA compliant procedures.

**Drug paraphernalia consists of syringes and caps, plastic baggies including blue "jewelry" bags, spoons, tin foil, cotton balls, pipes, straws (including tubes like pen cases), rubber straps, eyeglass cases, balloons, and anything else that appears to be related to drug use.*

General procedures:

1. Potentially harmful materials can either be in plain view or hidden on purpose. Used syringes are many times stuck in a crevice, crack, tree, piece of equipment, or covered up. While doing daily playground checks look carefully at everything that is exposed to children with an eye for something that should not be there or doesn't look right.
2. Upon discovery, someone must stay with the materials until they are cleaned up or someone else takes responsibility for management (like a school official). Do not let children approach the area. Contact agency operations or health services management.
3. If there is anything alarming about the nature or circumstances of the find (like the presence of large quantities of potential drugs or blood) contact law enforcement immediately. Don't touch the materials. Do not use the area until law enforcement has investigated it.
4. If an item like a box, container or backpack is discovered do not touch it. It could be an explosive device. Call law enforcement immediately and keep everyone inside until law enforcement removes the unidentified item(s).
5. If the materials are on property maintained by a school or other landlord entity, contact them immediately. School facilities staff may take management responsibility to complete the removal.
6. Most, if not all, of the finds the agency has experienced do not meet a level of significance that requires immediate law enforcement attention. These include discovery of lost or discarded drug related items or human waste. If staff and agency management conclude that the situation can be safely managed by trained staff, follow the specific clean up procedures below.

Clean Up Procedures:

1. Put on personal protective equipment (PPE). Never risk exposure without PPE.
2. Standard PPE consists of nitrile gloves, face shields, Z-87 safety glasses, and disposable polyethylene aprons.
3. Equipment includes Oxivir TB sanitizer, one gallon zip lock freezer bags, heavy duty plastic trash bags, tongs, a sharps/biohazard container, garden rake, plastic scoops, spill or vomit kit absorbent material, scrub brush, and a water source.
3. Put on the apron and nitrile gloves.

4. Use the face shield over the safety glasses for removing syringes or any item that may hold liquid.
5. For small drug-related items, spray everything with Oxivir TB sanitizer until wet and let it stand for one minute.
6. Work slowly and use the tongs to pick up all items requiring disposal. Syringe needles are very fine and if they are bent you may puncture your hand. Do not kneel down. Place syringes into the sharps container. Place everything else into one-gallon zip lock bags. Place all small bags into the larger trash bags for ease of transport. Deposit all bagged materials in an outside trash bin/dumpster. Don't take any waste inside except for the sharps container if you used one.
7. When removing human waste, including vomit, spray the waste with Oxivir TB and wait one minute. Absorbent material may be used to congeal the waste for easier clean up. Scoop the waste into a one-gallon zip lock bag. If any waste remains it must be washed off with Oxivir and water. Place small bags into large trash bags and dispose.
8. For large items such as clothing, bedding, or bags, put on nitrile gloves and use a garden rake to move the items around to look for hidden hazards like syringes. If liquids are encountered, put on the safety glasses and face shield. Pick the item up with the rake if possible and deposit it in an outside trash bin/dumpster. Don't pick up large items by hand unless you know for sure that they do not contain a hazard.
9. When the clean up is done, stay by the disposal container and remove your PPE. Remove your face shield. If it is splashed or you think it might be contaminated, dispose of it. Remove and dispose of your apron and your nitrile gloves. If your face shield is clean, wash it and your safety glasses in detergent and water for reuse.

Post-Exposure Procedure

Employees shall report any exposure incident to their supervisor and the Human Resources Department within two hours following the incident.

1. The HR coordinator will forward the *Precautions for Employees Exposed to Potential HIV Form* and the *Hepatitis B Vaccine Offer Form* to the employee.
2. The exposed employee shall complete a *SOCFC Incident Report* online, a *Worker's Compensation 801 Form (optional)*, an *Exposure Incident Report* and a *Consent/Waiver to Perform Laboratory Testing Form*. The *Consent/Waiver to Perform Laboratory Testing Form* must be signed by the exposed employee for permission to release confidential information to their health care provider and for the health care provider to return the written opinion. However, the exposed employee has the right to waive laboratory testing.
3. If a child is involved, the HR coordinator will notify the health services director of the incident and get a current Hepatitis B immunization status for the child.
4. If necessary, the health services director will contact the parent/guardian of the minor child to request consent to test the source individual's blood, as soon as feasible, for Hepatitis B and HIV. There will be no cost to the source individual.

5. If verbal consent is obtained from the source individual or their parent/guardian, the health services director will ensure that the *Source Individual History and Consent Form* is filled out and sent with the individual to his/her health care provider.
6. The child's health care provider will return the completed *Source Individual History and Consent Form* to the health services director for review and will follow up with the parent/guardian.
7. The exposed employee will be referred to Asante Work Health for blood testing within 24 hours after consent is obtained.
8. The HR coordinator will ensure the following forms are sent to the exposed employee's health care provider:
 - Employee Consent/Waiver to Perform Laboratory Testing Form.*
 - Health Care Provider's Written Opinion.*
 - Exposed Employee's Hepatitis B vaccination record, if done through SOCFC.*
9. The HR coordinator will obtain a copy of the *Health Care Provider's Written Opinion* from the evaluating health care provider within 15 days of the completion of the evaluation. A copy will be given to the employee. A copy will be kept in a confidential file, along with the completed *Exposure Incident Report* under the supervision of the HR Department.

Evaluation of Exposure Circumstances

The HR coordinator, HR manager, or safety compliance manager will use the information on the *SOCFC Incident Report* and the *Exposure Incident Report* to evaluate the circumstances under which the exposure occurred. The findings will be reviewed by the Safety Committee, which will determine whether changes can be instituted to prevent such occurrences in the future.

Hepatitis B Vaccine Administration

The Hepatitis B screening and HBIG (series of three vaccine injections) will be made available to all staff who are at risk for exposure and will be ordered in accordance with the following:

- Determination of risk exposure to BBPs.
- Provided at no cost to the staff member.
- Provided at a reasonable time and location.
- Performed by or under the supervision of a licensed physician or another licensed health professional.
- Provided according to the most current recommendations of the U.S. Public Health Service.
- Laboratory tests will be conducted by an accredited lab.
- A staff member who declines to accept the vaccination as offered will be required to sign the waiver indicating refusal.
- A staff member who initially declines the Hepatitis B vaccine, but who decides at a later date to accept the vaccination, will be offered the vaccine free of charge.
- If a routine booster dose of the Hepatitis B vaccine is recommended by the U.S. Public Health Service at a future date, SOCFC will incur the cost of the booster and arrangements for the staff to receive the booster will be made.
- If a staff member receiving the HBIG discontinues employment with SOCFC, they will incur the cost of any remaining injections or booster they receive.

Copies of all forms will be given to the Human Resources Department for placement in staff medical records.

Facility Contact Information

Refer to Appendix B.

Occupational Recordkeeping Procedure

The Human Resources Department maintains an accurate medical record of each staff member with bloodborne pathogen exposure and/or potential exposure which includes the following:

- Name and social security number of the employee.
- Post-Exposure Waiver form(s).
- A copy of all results of examinations, medical tests, and follow-up procedures as allowed by law.
- A copy of any information provided to the health care provider following any exposure incident.
- A copy of the health care provider's written opinion. All findings and diagnoses shall remain confidential and shall not be included in the written report. This written opinion will be limited to the following:
 - Whether Hepatitis B vaccination is indicated for a staff person and if the staff person has received the vaccination.
 - The staff person has been informed of the results of the post-exposure evaluation and has been informed of any medical conditions resulting from exposure to blood or other potentially infectious body fluids which require further evaluation or treatment.
- All medical records will be kept confidential and maintained for at least the duration of employment, plus 30 years. Medical records will not be disclosed or reported to any person within or outside the work place (except as required by law) without the express written consent of the employee to which the medical records belong.

Training Recordkeeping Procedure

The Human Resources Department maintains training records for a period of three years from the date on which the training took place including:

- Dates of the training session(s).
- Content or summary of material presented at the training session.
- Names and qualifications of the person conducting the training.
- Names and job titles of all persons attending the training session.

All training and medical records shall be provided upon request for examination and copying to the subject employee, to anyone having written consent of the subject employee, and in accordance with OAR 437-002-0360.

The human resources director, human resources coordinator, and/or safety compliance manager may annually review, with the recommendations of the Safety Committee, the agency's Exposure Control Plan and its effectiveness.

Hazard Communication

Background

Oregon's Occupational Safety and Health Administration (OSHA) requires employers to provide a safe and healthful workplace for all workers. OSHA's Hazard Communication Standard requires employers to train their employees to recognize chemical hazards and to take the necessary precautions to protect themselves from exposure to them. This plan addresses all of the provisions of Oregon's OSHA regulations to ensure compliance and promote worker knowledge and safety.

SOCFC is classified as a low-hazard industry. Nonetheless, we do have chemicals in the workplace, some of which are considered hazardous, to which staff may be exposed to. In addition, the children we serve comprise a vulnerable population with respect to hazardous chemical exposure and to a wide variety of pathogenic micro-organisms in their environments that can cause sickness and disease. SOCFC must control both exposure to chemicals and potentially harmful organisms that can impact children and staff. SOCFC makes serious efforts to select chemicals with reduced toxic and hazardous properties for use in our facilities. The most potentially hazardous categories of chemicals SOCFC uses are sanitizers and disinfectants. SOCFC selects sanitizers and disinfectants that are registered by the U.S. Environmental Protection Agency (EPA) to ensure rigorously tested and approved products that meet the program's specific needs are being used. These are used in accordance with product labels and written safety and sanitation policies and procedures for classrooms, offices, parent rooms, diapering areas, bathrooms, playgrounds, and kitchens. The agency's Operations Department manages a list of approved chemicals normally used in maintenance activities. Generally, only maintenance staff are exposed to these chemicals. When pest control is necessary, state integrated pest management regulations are followed and chemicals of low toxicity to humans and non-target organisms are applied.

Roles and Responsibilities

Each staff member has a crucial responsibility for ensuring safety and minimizing exposure and risk to themselves and others when using a hazardous chemical. This includes ensuring that employees have the proper training to use the chemical before they are required to do so. Employees shall not use any hazardous chemical before they have been trained and have read the label and the SDS.

The agency Health & Safety Committee has the responsibilities to review all requests for new chemicals, make decisions on chemical selection, and to rescind prior approvals if information comes forth indicating new risks for chemicals in use. The committee's focus is on minimizing potential risk to health and exposure to staff and others.

The agency Safety Committee operates in compliance with OSHA requirements and monitors operations for hazards and opportunities for improvement in safety performance. Safety representatives from each center are resources available to help address any site-specific safety matter including anything related to hazard communication and chemical management. Employees are encouraged to utilize the *Safety Concern Form* to document any health or safety concern and have it reviewed by the Safety Committee.

Identifying Hazardous Chemicals

The agency maintains a list of approved chemicals for use in the classroom, maintenance, and kitchen operations (Refer to Appendix C). Any staff member can make a recommendation or suggestion for purchasing a chemical that may be considered to be useful or necessary in any operation. The Health & Safety Committee reviews the request. SDS's are reviewed to make a hazard determination, then the request is either approved or denied. Not all chemicals are hazardous. Most wood products, food products, and consumer products used in the workplace for the purpose intended by the manufacturer are examples of items that may not be hazardous and therefore are not regulated by the Hazard Communication Standard.

Labels

SOCFC does not buy chemicals in bulk form. Containers are purchased in ready to use size or ready to dilute in small quantities. It is agency practice to maintain the original container label on all hazardous chemicals. If labels are needed for secondary containers, a complete laminated color copy of the original label is preferred. If this is not possible, employees shall confer with the safety compliance manager to determine the required label information before making a label.

The labels on EPA registered pesticides (sanitizers and disinfectants) are the federal directions for use of the products. The directions are federal law and using the product inconsistent with label directions is a violation of federal law. Employees must always read, understand, and follow pesticide label directions. If they have questions, they should contact the safety compliance manager for help. The following pictograms are used globally to classify chemicals based upon health or physical hazard. They are a visual reminder of the hazards associated with the chemical to which they are affixed.

HCS Pictograms and Hazards










<p>Health Hazard</p>  <ul style="list-style-type: none"> • Carcinogen • Mutagenicity • Reproductive Toxicity • Respiratory Sensitizer • Target Organ Toxicity • Aspiration Toxicity 	<p>Flame</p>  <ul style="list-style-type: none"> • Flammables • Pyrophorics • Self-Heating • Emits Flammable Gas • Self-Reactives • Organic Peroxides 	<p>Exclamation Mark</p>  <ul style="list-style-type: none"> • Irritant (skin and eye) • Skin Sensitizer • Acute Toxicity (harmful) • Narcotic Effects • Respiratory Tract Irritant • Hazardous to Ozone Layer (Non Mandatory)
<p>Gas Cylinder</p>  <ul style="list-style-type: none"> • Gases under Pressure 	<p>Corrosion</p>  <ul style="list-style-type: none"> • Skin Corrosion/ burns • Eye Damage • Corrosive to Metals 	<p>Exploding Bomb</p>  <ul style="list-style-type: none"> • Explosives • Self-Reactives • Organic Peroxides
<p>Flame over Circle</p>  <ul style="list-style-type: none"> ➤ Oxidizers 	<p>Environment (Non Mandatory)</p>  <ul style="list-style-type: none"> ➤ Aquatic Toxicity 	<p>Skull and Crossbones</p>  <ul style="list-style-type: none"> ➤ Acute Toxicity (fatal or toxic)

Figure 1. Pictograms used on many chemical containers conveying the health and physical hazards associated with the product

Safety Data Sheets

The agency maintains a current SDS for all potentially hazardous chemicals at all worksites. Each center also has a printed copy of chemicals in a binder that can be used in the facility that staff and children may be exposed to. The safety compliance manager is responsible for ensuring that each set of SDS's is complete and current. Employees should direct any questions about SDS's to their supervisor and the safety compliance manager.

Training

Prior to starting work, each new employee will attend a health and safety training at New Employee Orientation where they will receive information on the following:

- An overview of the requirements contained in the Oregon OSHA Hazard Communication Standard, OAR 437-002-0360.
- Any operations in their work area where hazardous chemicals are present.
- Location and availability of our written hazard program.
- Physical and health hazards of chemicals in their work area.
- Methods and observation techniques used to determine the presence or release of toxic and hazardous substances in the work area.
- Measures employees can take to protect themselves from hazards in their workplace, including specific procedures SOCFC has implemented to prevent exposure to hazardous chemicals, and personal protective equipment.
- Explanation of the labeling system and what the label information means.
- Explanation of an SDS and how employees can use this information to protect themselves.

Prior to a new chemical hazard being introduced into any facility, each employee in that facility will be given information as outlined above.

Hazardous Non-routine Tasks

Periodically, employees may be required to perform hazardous non-routine tasks. Prior to starting work on such projects, each affected employee will be given information by their supervisor about hazardous chemicals to which they may be exposed to during the activity. This information will include:

- Specific hazards. A job hazard analysis will be completed.
- Protective and safety measures the employee can take.
- Measures SOCFC has taken to lessen the hazards including ventilation, respirators, presence of another employee, and emergency procedures.

Most activities and tasks performed as part of work for SOCFC staff are regular and routine. Maintenance may develop projects that are non-routine but in most cases this work is contracted out.

Informing Contractors

To ensure that outside contractors work safely at SOCFC facilities, it is the responsibility of the business services manager and the maintenance manager to provide contractors the following information:

- Hazardous chemicals to which they may be exposed to while on the job site and the procedures for obtaining an SDS.
- Precautions employees may take to lessen the possibility of exposure by using appropriate protective measures and an explanation of the labeling system used.

Also, it is the responsibility of the maintenance manager to identify and obtain an SDS for any chemical(s) a contractor may bring into the workplace.

Pipes and Piping Systems

There are no pipes or piping systems in any SOFC facilities that carry chemicals.

Chemical Storage

All hazardous chemicals in any classroom area are stored in locked cabinets or closets, or in a cabinet with a child-proof latch. Spray bottles containing sanitizer may be stored unlocked in a diapering area in accordance with Oregon CTR-132:414-300-0180 (5)(c).

Chemicals in the kitchens may be stored in unlocked storage spaces. Children do not enter kitchen areas unless they are supervised.

The Maintenance Department manages the chemicals they use in a safe manner. Only small quantities of chemicals, mostly one gallon or less, are stored in a maintenance shop or transported in maintenance vehicles for daily usage. Occasionally, five gallon buckets of wax or paint are staged in secure locations as they are needed.

References

Oregon OSHA's Guide to the GHS-aligned Hazard Communication Standard, 5/16 – <http://osha.oregon.gov/OSHAPubs/4960.pdf>

U.S. Department of Labor OSHA Hazard Communication website – <https://www.osha.gov/dsg/hazcom>

Hazard Communication: Small Entity Compliance Guide for Employers That Use Hazardous Chemicals – <https://www.osha.gov/Publications/OSHA3695.pdf>

Appendix A

INCIDENT REPORTING INSTRUCTIONS

Employees, volunteers, and visitors should report any near misses, accidents, injuries, and/or illnesses to the site supervisor immediately. The following are guidelines on how employees and supervisors should respond to each of the various situations. For all child incidents, refer to *Policies & Procedures: Accidents, Injuries, and Medical Emergencies-Child*.

Near Miss

A near miss is defined as an unplanned event where damage did not result, but the likelihood of personal injury was great. Reporting these types of events is very important in preventing a real accident from occurring. Many times the hazard that created the near miss can be identified and removed so that another employee does not get injured in the future.

- Near misses must be reported using the online incident reporting form on the SOCFC Staff Zone website. The affected party or the site supervisor should complete this form. The form requires the incident details and a statement from the affected party. The report must be submitted within 24 hours of the near miss to Human Resources at the Main Office.
- A *Maintenance Request* should be completed in order to report the hazard that created the near miss (i.e. the loose carpet, faulty equipment, etc.).
- Human Resources will complete a follow up analysis if necessary, and forward documentation to any applicable supervisor and safety representatives of the site where the incident occurred.

Accident/Illness (not requiring medical treatment or time lost from work)

An accident is an immediate event where an individual is injured or property is damaged. An illness is an event occurring over time, either through exposure to disease or performing the duties required of the employee's position. An accident or an illness does not always mean that an employee has to seek medical treatment as a result of the accident or illness. Reporting an accident/illness is just as important as reporting a near miss, regardless of whether or not the affected party sought medical treatment or lost time from work. Reporting can prevent further accidents/illnesses.

- Minor and potentially serious accidents/illnesses must be reported using the online incident reporting form on the SOCFC Staff Zone website. The affected party or the site supervisor should complete this form. The form requires the incident details and a statement from the affected party. The report must be submitted within 24 hours of the incident to Human Resources at the Main Office.
- A *Maintenance Request* should be completed in order to report the hazard that created the accident/illness (i.e. loose carpet, faulty equipment, etc.).
- Human Resources will complete a follow up analysis if necessary, and forward documentation to any applicable supervisor and safety representatives of the site where the incident occurred.

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Employee Accident/Illness (requiring medical treatment or resulting in time lost from work)

If an employee has an accident or illness that requires medical treatment or results in time lost from work, the following steps must be taken:

- The site supervisor will coordinate first aid activities and call 911 if necessary, then contact Human Resources immediately.
- The site supervisor may accompany the employee to the health care provider (or delegate this to someone else if it is not feasible for them to go).
- The health care provider will complete a *Release to Return to Work* for the employee. The employee and/or site supervisor will ensure that a copy of this form is forwarded to Human Resources by the end of the work shift. If restrictions have been placed on the employee, the site supervisor will need to contact Human Resources immediately.
- If the employee has been released to modified duty, Human Resources will coordinate with the site supervisor or other managers to obtain a temporary alternative assignment for the employee when he/she is unable to perform his/her usual and customary duties.
- The employee and/or site supervisor must complete the required online incident reporting form on the SOCFC Staff Zone website. The report must be submitted within 24 hours of the incident to Human Resources at the Main Office.
- If the employee wishes to file a Workers' Compensation claim, then the employee needs to complete the top portion of the *801 Worker's Compensation Claim Form* and send it to Human Resources.
- A *Maintenance Request* should be completed in order to report the hazard that created the accident/illness (i.e. loose carpet, faulty equipment, etc.).

Visitor/Volunteer Accident/Illness (requiring medical treatment)

If a visitor or volunteer has an accident or illness that requires medical treatment, the following steps should be taken:

- The site supervisor will coordinate first aid activities and call 911 if necessary, then contact Human Resources immediately.
- The site supervisor must complete the required online incident reporting form on the SOCFC Staff Zone website. The report must be submitted within 24 hours of the incident to Human Resources at the Main Office.
- Human Resources will contact the operations director.

If you have any questions about the procedures, contact the HR coordinator at the Main Office at 541-734-5150 ext. 1021.

Revised 2018

Appendix B

FACILITIES PROVIDING TESTING FOR HEPATITIS B & TUBERCULOSIS

ASANTE OCCUPATIONAL HEALTH – MEDFORD

781 Black Oak Dr
Medford, OR 97504
541-789-4236

ASANTE OCCUPATIONAL HEALTH – GRANTS PASS

625 SW Ramsey Ave Ste. A
Grants Pass, OR 97527
547-507-2290

JACKSON COUNTY HEALTH DEPARTMENT

140 S. Holly St
Medford, OR 97501
541-774-8209

JOSEPHINE COUNTY HEALTH DEPARTMENT

715 NW Dimmick St
Grants Pass, OR 97526
541-474-5325

SISKIYOU COMMUNITY HEALTH CENTER

25647 Redwood Hwy, Cave Junction, OR 97523
1701 NW Hawthorne Ave, Grants Pass, OR 97526
541-472-4777

LA CLINICA DEL VALLE

3617 S Pacific Hwy, Medford, OR 97501
1307 W Main St, Medford, OR 97501
730 Biddle Rd, Medford, OR 97504
4940 Hamrick Rd, Central Point, OR 97502
541-618-6239

Appendix C

Southern Oregon Child and Family Council, Inc.

Approved Chemicals for Use in All Centers – 7/23/2018

This list includes all chemicals currently approved for use by staff. All chemicals must be used with **caution** and the instructions on the product label **must** be followed. The agency maintains current Safety Data Sheets (SDS) for these products on the agency website and in binders in each facility. All users should be familiar with the SDS and product labels. Individual sensitivity to chemicals varies and it is good practice to minimize usage and use when people are not in the immediate vicinity. Any chemical in your center that is not on this list should be safely dispositioned. Contact your center Safety Representative with any questions.

For Use in Classrooms and associated areas only

Stride Floor Cleaner – SC Johnson

Baking soda – pure

Bon Ami powder cleanser

Borax

Lemon juice

Mr. Clean Magic Eraser – original

Salt

Dawn dish soap

Simple Green – ready to use cleaner, “Free and Clear” (not concentrated, no dyes or perfumes)

Equate hand soap - NOT anti-bacterial, no fragrance

Vegetable oil-based soaps – Castile, Murphy’s Oil soap

Vinegar – commonly white

ALL brand – free and clear laundry detergent

ECOS Laundry detergent – available at Costco

Alpha-HP multi-surface disinfectant – bathrooms and all floors

Oxivir TB ready to use sanitizer – spray bottle, all classroom and center areas and objects including diapering areas

Johnson & Johnson baby naturals nourishing lotion

Clorox Control Bleach packs – for laundry use

Corn starch

Baby oil

Cream of tartar

Glycerin

Kitchen

Apex Dish Machine Soap

Baking Soda

Chlorine bleach, standard – kitchen use on food contact surfaces only; preferably concentration 5.25 – 6.0%, non-germicidal, no additives

Comet

Dawn Dish Soap

Earth Friendly Wave Dish Washing Gel
Eco Lab Wash & Walk
Eco Lab Jet Dry
Eco Lab Lime Away
Eco Lab Pathway Drain Treatment
Eco Lab Power Dish Machine Soap
Eco Lab Super Swamp
Equate Hand Soap
Keystone High Temp Grill Cleaner
Keystone Satin Shine Cleaner & Polish
Keystone Under Counter Machine Soap
Keystone Drain Treatment
Seventh Generation Dish Wash Soap
Simple Green
Soft Scrub Cleanser
Soft Scrub Hand Soap
Spitfire Power Cleaner
Sterno Cooking Fuel
Sysco Brand Comet Cleaner
Sysco Brand Dishwashing Powder
Tork Foam Soap
Weimen Stainless Steel Polish

Maintenance Use Only

Ace water based striping paint spray
Ace Window glazing
Beadex joint compound all purpose
Behr prem. Plus drywall prime/seal gal latex
Blackjack neoprene super flash cement #99 tube
Chalkboard paint
Chemrex BASF CX-941 polyurethane floor adhesive
Concentrated Simple Green All Purpose Cleaner Spray
Do it Best foaming wasp & Hornet Killer
Do it Best general purpose floor adhesive
Do it Best striping paint spray
Elmer's Carpenter Wood Filler (internal, external)
Elmer's Wood Glue
Gemini Gem Glo stain - wiping
Glidden external latex
GooGone Citrus power
Great stuff foam insulating spray
Henry 430 commercial tile vct adhesive
Henry 547 unipro universal patch/skim coat
Henry Patch Additive 1 qt
Jasco Premium paint & epoxy remover
Jasco tsp liquid concentrate

Johnsonite flooring & tread adhesive
Klean-stip paint thinner, odorless mineral spirits
Krylon primer spray
Latex Wood Filler
Lift off graffiti remover spray 4
Light weight spackle
Liquidnails FRP 310
Liquidnails project adhesive
Minwax Stains & Seals
Minwax water based wood conditioner
Minwax wipe on poly finish
Mold control spray concrobium
Olympic Elite Stain Sealant Semi transparent
Pesticides – Roundup
Quick setting cement - quikrete
Ready mix concrete patch DAP Bodex
Revere graffiti remover
Roberts carpet adhesive
Rodda floor finish plytiethene 5G
Rodda pro traffic marking paint gal
Royal semi-gloss Ac. Latex enamel
Rust-Oleum gloss enamel spray
SkidTex by Bondex additive to paint
Traffic & zone mark paint (gal)
Trustworthy spray enamel
TSP/90 Cleaner - powder
Valspar anti skin additive
Valspar enamel
Valspar zone marking paint qt.
Wagner cleaner lub latex
Wagner paint easy conditioner
Wasp & Hornet Killer
Weldon 750 Hot Weld PVC glue (blue) fast set
Weldwood contact cement (gel)
Zinsser concentrate wallpaper stripper
Zinsser Bullseye Shellac spray clear
Zinsser covers up ceiling paint/primer
Zinsser oil base stain block gal.
Zinsser Primer
Cutting Edge professional ice melt

Miscellaneous

Duracell Batteries
Natural Gas

Office

Bleach
Comet
Dawn
Folex Carpet Spot Remover
Innovera Canned Air
Pledge Furniture Polish
Terro Ant Killer
Vinegar
Whiteboard Cleaner
ZorbX (also for use in adult bathroom facilities)

Appendix D

Employee Safety Training Verification

I have received training and instructions for the SOFCF Illness and Injury Prevention Program. I fully understand the training and understand that I am required to follow these instructions at all times when performing my job.

ARTICLE 26A – EMPLOYEE ILLNESS AND INJURY PREVENTION

Negotiated: 8/1/2013

Negotiated: 8/1/2006

Negotiated: 9/27/2003

Section 1. The Agency will provide insurance for all employees in case of work-related injuries in accordance with state law and the practices and procedures outlined in the Policies & Procedures section “Workers Compensation.”

Section 2. To insure that the work environment is as safe and injury-free as possible, all employees of the Agency will be instructed in and receive ongoing training in workplace health, safety policies and procedures, and best practices.

Section 3. Employees will not be discriminated or retaliated against in any manner because the employee has instituted a safety-related proceeding, has testified in that type of proceeding, or has otherwise exercised any right provided by law.

Section 4. Violations of Agency safety rules, regulations, or policies and procedures regarding Workers Compensation injuries and claims may result in disciplinary action up to and including termination. Such violations may include, but are not limited to:

- Failure to report a work-place accident or near misses and complete/submit required paperwork to HR and the employee safety manager within 24 hours;
- Failing to use required personal protective equipment (PPE);
- Engaging in improper body mechanics (e.g. improper lifting, failing to use step stools/ladders appropriately);
- Failing to properly maintain a safe work environment (e.g. failing to use wet floor signage, creating tripping hazards, failing to report and/or rectify safety concerns/hazards);
- Endangerment of clients, self, and staff of any type;
- Fraudulent reporting of work-related injury claim(s) or statements related to such claims;
- Improper use of agency equipment or hazardous agents (i.e., cleaning solutions, electricity, hot water, etc.);
- Horseplay that results in a work-related injury.

Employee Signature

Print Name

Date

Human Resources

Date