



SOCFC

INJURY AND ILLNESS PREVENTION PROGRAM

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Definitions

Blood borne 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.

Standard Precautions – Standard precautions are meant to reduce the risk of transmission of blood borne and other pathogens from both recognized and unrecognized sources. They are the basic level of infection control precautions which are to be used, as a minimum, in the care of anyone who is ill, injured or experiencing a life threatening condition.

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 minutes of meetings on the Safety and Sanitation Share Point page.
- Conducting monthly safety trainings at all centers by the center Safety Representative.
- Safety & Compliance Center Visits – conducted twice annually by the Safety Resource Manager to ensure safety protocols are practiced.
- Training all employees in good safety and health practices.
- 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 plan for its effectiveness and improvement and for providing the safeguards required to ensure safe conditions.
- Managers and supervisors are responsible for developing the positive 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 supervisor.
- If the problem cannot be corrected by the supervisor, it will be directed to the Safety Resource Officer.
- Work safely by following all safety and health policies and procedures, as well as your supervisor's instructions.
- Report all accidents, injuries, blood-borne 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.

Employee Fire Prevention

Responsibilities:

- Keep all areas free of accumulations of combustible materials.
- Keep all fire exits clear..
- 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.

Employee Training

An effective illness and injury prevention program requires effort, teamwork, practice, and participation from everyone in the workplace. SOCFC 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 Manager or the Safety Resource Officer.
- All injuries, BBP exposures, and near misses, no matter how slight, must be immediately reported to the Site Manager, followed by submitting an online incident report.
- 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 plan.
- 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 manager 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:

- Routine training of safe performance of individual work assignment
- 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:

- Additional training if job duties or work assignments are expanded or changed.
- Post-accident training when necessary.
- Hazardous material training when necessary.
- Emergency response training.

Employees will sign a training verification form (Appendix C) 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 Manager, 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 procedures for specific work areas and activities are posted on the Safety and Sanitation Share Point page. 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.

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, with another employee holding the ladder steady.

Ergonomic Practices

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. 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.

Exits and Emergency Equipment

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

Housekeeping

Good housekeeping is one of the most important factors in injury 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.

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

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.

Sprains and Strains

Injuries such as a sprained or strained ankle, knee, wrist and elbow are common in the child care setting. Lower back strains are also common. When these minor injuries are treated immediately with a cold compress, ibuprofen (if tolerated) and a compression bandage for ankles, knees, wrists and elbows the healing process is sped up and additional injury can be avoided. Each center has the following supplies to assist the employee in providing immediate first aid to themselves for sprains and strains, along with first aid instructions.

- Cold and hot compress in the center freezer
- Compression bandage
- Ibuprofen (taken only if tolerated)

Kitchen Burns

In a fast paced kitchen setting, burns unfortunately can occur to even the most experienced cook. When this occurs, immediately action is recommended to ease pain and cool the burned area. Each kitchen has supplies and posted instructions on the recommended first aid treatment of burns. First aid supplies consist of:

- Aloe Vera gel
- Non adherent pad
- Conforming stretch gauze

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) Site Manager Center Assistant Area Assistant Cook & Cook Assistant Education Supervisor Family Advocate Food Service Supervisor Health Screener Teacher Teacher Assistant Center Assistant EHS Cook & Cook Assistant 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 Assisting with a nose bleed

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 blood borne disease frequency, transmission, and symptoms.

- Explanation of SOCFC'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 SOCFC 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:

- Standard 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 hand sanitizer. Hand sanitizer must always be kept out of reach of children. 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

- SOCFC 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 includes vinyl gloves, and pocket masks for rescue breathing/CPR.
- 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 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 disinfected after contact with blood or other potentially infectious body fluids. Work surfaces shall immediately, or as soon as feasible, be disinfected with the appropriate disinfectant.. 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.

Items that are soiled with blood or body fluids (bandages, gauze, etc.) must be placed in a sealed plastic 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.

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 blood borne 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 standard 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 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 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, and an apron.
3. Equipment includes disinfectant spray, one gallon zip lock freezer bags, heavy duty plastic trash bag a sharps/biohazard container, if needed, garden rake, shovel, scrub brush, Dawn dish detergent and a water source.
4. For small drug-related items, spray everything with Disinfectant until wet and let it stand for 10 minutes.
5. Work slowly and use a shovel to pick up all large items requiring disposal. Syringe needles are very fine and if they are bent you may puncture your hand. Do not kneel down. Carefully place syringes into the sharps container without touching the needle. 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.
6. When removing human waste, including vomit, 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 soap and water. Place small bags into large trash bags and dispose.

7. 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. 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.
8. When the clean up is done, stay by the disposal container and remove your PPE. Remove your apron and place it in a garbage bag and label it as "contaminated". The apron needs to be deposited into an empty washing machine by itself and washed in hot water.

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 safety resource manager 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 to return the written opinion. However, the exposed employee has the right to waive laboratory testing.
3. If a child is involved, the safety resource manager will notify the health services manager of the incident and get a current Hepatitis B immunization status for the child.
4. If necessary, the health services manager 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 manager 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 safety resource manager 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 safety resource manager 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 safety resource 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 identified as at risk for exposure. Hep B vaccination includes the following:

- 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.

Occupational Recordkeeping Procedure

The Human Resources Department maintains an accurate medical record of each staff member with blood borne 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, and/or safety resource 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 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 Facility Department manages a list of approved chemicals normally used in maintenance activities. When pest control is necessary, state integrated pest management (IPM) regulations are followed and only pesticides or herbicides included on the state of Oregon's low impact list are applied when IPM alone has failed to resolve the problem.

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 Safety Committee operates in compliance with OSHA requirements. Safety representatives from each center serve as resources to help address any site-specific safety matter including anything related to hazard communication, the safe use of approved chemicals, established safety protocols, and identification of potential hazards.

Identifying Hazardous Chemicals










The agency maintains a list of approved chemicals for use in the classroom, maintenance, and kitchen operations (Refer to Appendix B). 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 safety resource manager reviews the request. SDS's are reviewed to make a hazard determination, then the request is either approved or denied.

Labels

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 resource manager to determine the required label information before making a label.

The labels on EPA registered pesticides (sanitizers and disinfectants) are directions approved by the EPA 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 sanitizer and disinfectant label directions. If they have questions, they should contact the safety resource 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>  <p>➤ Oxidizers</p>	<p>Environment (Non Mandatory)</p>  <p>➤ Aquatic Toxicity</p>	<p>Skull and Crossbones</p>  <p>➤ Acute Toxicity (fatal or toxic)</p>

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

Figure 1.

Safety Data Sheets (SDS)

The agency maintains a current SDS for all potentially hazardous chemicals on the Share Point Safety and Sanitation page. The safety resource manager is responsible for ensuring the SDS are current with the agency chemical list. Employees should direct any questions about SDS's to their supervisor and the safety resource manager.

Training

Prior to starting work, each new employee will attend a safety and compliance training at the 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.
- 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.
- Prevention of infectious illnesses
- Blood Borne Pathogen Training
- Incident Reporting
- Ergonomic training

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 supervisor to identify and obtain an SDS for any chemical(s) a contractor may bring into the workplace.

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, **but only if children have zero access to the kitchen.**

The facilities 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 Manager 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 manager should complete this form within 24 hours of the near miss occurrence.
- A *Maintenance* ticket should be completed in order to report the hazard that created the near miss (i.e. the loose carpet, faulty equipment, etc.).
- The safety resource manager 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. 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 manager should complete this form. The form requires the incident details and a statement from the affected party within 24 hours.

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 manager or sub-directors will coordinate first aid activities and call 911 if necessary, then contact Human Resources immediately.
- The site manager 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 manager 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 manager will need to contact Human Resources immediately.
- If the employee has been released to modified duty, Human Resources will coordinate with the site manager 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 manager must complete the required online incident reporting form on the SOCFC Staff Zone website within 24 hours.
- 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 the safety and compliance manager.
- A *Maintenance* ticket 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 manager will coordinate first aid activities and call 911 if necessary, then contact Human Resources immediately.
- The site manager must complete the required online incident reporting form on the SOCFC Staff Zone website within 24 hours.
- Human Resources will contact the operations director.

If you have any questions about the procedures, contact the safety resource manager at the Main Office at 541-734-5150 ext. 1008.

Approved Chemicals Use

August, 2023

This list includes all chemicals currently approved for use by staff. Chemical products not on this list are not allowed for center use, and must be safely disposed of according to the product label. All chemicals must be used with **caution** and the instructions on the product label **must** be followed. Where possible, we strive to use products with the **EPA Safer Choice label** (see below).

All users need to 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.

Classrooms and Associated Areas Only:

- **Stride Floor Cleaner- SC Johnson**
- **Purell Foodservice Surface Sanitizer- *For EHS use only*:** To sanitize changing tables, and mouthed toys.
- **Buckeye All Purpose Glass Cleaner-**To clean glass, windows, mirrors, Plexiglas, etc.
- **Buckeye Neutral Disinfectant (E23)** – To Disinfect bathrooms and blood/bodily fluid accidents on surfaces.
- **Buckeye Eco Sanitizer (E62)-**To sanitize meal service tables.
- **Buckeye Hydrogen Peroxide cleaner**
- **Baking soda**
- **Bon Ami powder cleaner**
- **Mr. Clean Magic Eraser-** original
- **Dawn dish soap**
- **Vegetable oil-based soaps-** Castile, Murphy's Oil soap for cleaning wood surfaces.
- **Vinegar-** white
- **ALL-** Free and Clear laundry detergent
- **Costco ECOS** laundry detergent
- **ArtNaturals Premium Fractionated Coconut Oil 16 oz. pump bottle-**for HS and EHS self-soothing activity with children for use on their hands.
- **Aveeno baby daily moisture lotion natural oatmeal-**for HS and EHS usage
- **Clorox Control Bleach Packs** (for laundry use)
- **Corn starch**
- **Baby oil**
- **Cream of Tartar**
- **Glycerin**
- **Barbasol Shaving Cream** (The container is always kept out of reach of children at all times)
- **Sunscreen provided by Health Service**
- **Ingredients required for Slime and Playdough recipes APPROVED by the Ed Department**
- **Expo Non-toxic White Board Cleaner**
- **ZORBX-**unscented, non-toxic, odor remover (must be kept in a locked cabinet)



Kitchen:

- **Apex Dish Machine Soap**
- **Bleach:** Sysco brand or Clorox Regular Household Bleach brand for use in sanitizing kitchen surfaces and stain removal on plates. Must have an EPA registration number on the label.
- **Buckeye Eco pH Neutral Cleaner**
- **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 Trump**
- **Keystone Pots and Pan Detergent-Ready to Use**
- **Keystone Satin Shine Cleaner & Polish**
- **Keystone Under Counter Machine Soap**
- **Keystone Drain Treatment**
- **Mr. Clean Magic Eraser for Kitchens with Dawn Dish Detergent**
- **Seventh Generation Dish Wash Soap**
- **Soft Scrub Cleanser**
- **Spitfire Power Cleaner**
- **Sterno Cooking Fuel**
- **Sysco Brand Comet Cleaner**
- **Sysco Brand Dishwashing Powder**
- **Tork Foam Soap**
- **Weiman Stainless Steel Polish**
- **Weiman Glass Cook Top Cleaner and Polish**

Offices—MO, Progress, Park View, ABC

- **Buckeye Products-Disinfectant, Sanitizer, Glass Cleaner, Hydrogen Peroxide Cleaner**
- **Comet**
- **Dawn Dish Detergent**
- **Folex carpet spot remover**
- **Pledge furniture polish**
- **Vinegar**
- **Expo Non-Toxic whiteboard cleaner**

Appendix C

Employee Safety Training Verification

I have received training and instructions for the SOCFC 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

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 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