# SAFETY MANUAL

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• Contractor Safety Guidelines

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Forms: Contractor Safety Agreement Form
1. All Employees / Students shall familiarize themselves with the location and information contained in the Material Safety Data Sheets.

2. All Employees / Students shall familiarize themselves with the Emergency Action Plan and the location of the fire exits and the fire extinguishers.

3. All work-related accidents must be reported to the injured employee’s supervisor within 24 hours regardless of whether the injury requires medical attention.

4. Eating, drinking or applying cosmetics are prohibited in work areas where there is a reasonable likelihood of occupational exposure.

5. Employees / Students shall wear Personal Protective Equipment (i.e., safety glasses, gloves, hearing protection, gowns, etc.) at all times where safe work practices and department rules require them.

6. All Employees / Students shall familiarize themselves with the information contained in the Bloodborne Pathogens Program.

7. All Employees / Students shall familiarize themselves with the information contained in the Hazard Communication Program.

8. All Employees / Students must know the location of their department emergency showers and eye wash stations.

9. Newly hired employees, or employees transferred to a new department, will be given safety orientation before beginning work.

10. All Students will be given safety orientation before beginning classes in science laboratories and specific classes, such as welding, where possible exposure may occur.

11. No food or drinks shall be stored in refrigerators, freezers, shelves or cabinets, or on counter tops or bench tops where blood or other potentially infectious materials are present.

12. All sharps containers will be replaced when they are 75 percent full.

13. All Southwest hallways will remain clear for safe emergency evacuation if needed – any displays or setups that may block passageway in any manner are not permitted. All emergency evacuation doors must remain open and operable.
What to do if an OSHA Inspector arrives at your location:

Inspectors from OSHA may arrive at your facility at any time to conduct a safety and health inspection. When this happens, the following steps should be carefully observed:

1. The Safety Officer should be immediately informed at (901) 333-5459 or (901) 333-4708.
2. Notify the Public Safety Department at (901) 333-5555.
3. Departmental leadership should ask for the proper credentials and inquire as to the reason for the visit.
4. Be courteous and cooperative and make the inspector as comfortable as possible.
5. Equip the inspector with any necessary personal protective equipment: safety glasses, gowns, gloves, etc.
6. The inspector has the right to request a private conference with any employee.
7. If the inspector takes any samples – air, material, etc. – be sure to take duplicate samples.
8. If any photographs or videotapes are to be shot, ask the official to wait until the Safety Officer arrives to shoot duplicate photographs and/or videotapes.
9. A list of all documents copied by the inspector – OSHA 300, accident investigations, etc. – must be noted for future reference.

Information you may disclose

- College name and location
- A list of your MSDSs
- Location of your department Safety materials

Information you should not disclose

- Purchase orders
- Finances
- Personnel files
- Employee medical or first aid records
- Processes
- Laboratory analyses
### Important Telephone Numbers

1. **Southwest Public Safety**  
   - Union Avenue Campus: (901) 333-5555  
   - Macon Cove Campus: (901) 333-4242

2. **Southwest Safety Department**  
   - (901) 333-5459

3. **Emergency**  
   - 911

4. **Shelby County Health Department**  
   - (901) 372-7581

5. **National Poison Help Hotline**  
   - 1 (800) 222-1222

6. **Mental Health Crisis Hotline**  
   - 1 (800) 809-9957

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</tbody>
</table>
Date _______________ Location ____________________________________________________________

Name of Person Completing Form _________________________________________________________

Hazard Communication

1. All employees have been trained regarding Material Safety Data Sheet content.
2. All employees know the location of the written Hazard Communication program.
3. All employees know the location of the OSHA-required posters.
4. Enter date when annual training was given: _______________________

Bloodborne Pathogens Program

1. All employees know the location of the written Bloodborne Pathogens Program.
2. All employees have received their annual Bloodborne Pathogens Program training and understand the principles of Universal Precautions.
3. All employees know the location of all Personal Protective Equipment.
4. Enter date when annual training was given: _______________________

Emergency Action Plan

1. All employees know the location of the written Emergency Action Plan.
2. All employees have received their OSHA annual training regarding Emergency Response and understand their role in the event of an actual emergency.
3. All employees receive annual emergency response drills.
4. Enter date when annual training was given: _______________________

SAFETY COMPLIANCE CHECK-OFF SHEET
Return or fax this form to Public Safety and Health and Safety within 24 hours of incident.

Date of Incident ____________ Time ____________ Location ________________________________

Name of Injured Person ______________________________________________________________

Social Security # ____________________ Dept./Area ________________________________

Sex  ❑ Male  ❑ Female  Work Telephone ____________ Home Telephone _________________

Age ____________  Marital Status  ❑ Married  ❑ Single

How did the injured person describe the cause of the injury/disease? Be specific and detailed. What exactly was the person doing at the time of injury? If using tools or handling material(s), name them and explain what the person was doing with them. Please attach any additional comments if necessary.

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Describe the nature of the injury/incident you observed. BE SPECIFIC.

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________
Witness to Injury/Incident __________________________ Witness Telephone ____________________

Witness Statement:

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

When and where was the injured person referred for treatment? ______________________________

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

What do you think would prevent this incident from happening again? _________________________

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Supervisor’s signature __________________________ Date __________________

Date incident was reported: ______________________________

I have read the above report and the statements are true to the best of my knowledge.

Student/Visitor/Employee Signature _____________________________________________________
(Circle one)

Date ______________________________
Purpose

The purpose of the Hazard Communication Program is to ensure that all hazardous chemicals used in the workplace are evaluated, and that any hazards are communicated to all employees. This comprehensive program complies with the OSHA guidelines under the Hazard Communication Standard (29 CFR 1910.1200) and the Employee Right to Know Act.

Program Provisions

Program provisions include:
- List of Hazardous Materials
- Material Safety Data Sheets (MSDS)
- Container Labeling
- Housekeeping and Waste Handling
- Disinfecting
- Spill and Cleanup Procedures
- Drugs and Medications
- Employee Training
- Maintaining the Program

Each department shall make an inventory of all hazardous chemicals used and forward a copy of that inventory list to the Safety Officer, Tim Tyler, at fax number (901) 333-4822.

Material Safety Data Sheets (MSDS)

All chemical manufacturers and/or importers must obtain or develop Material Safety Data Sheets for each hazardous chemical they produce or import.

A Material Safety Data Sheet must also be obtained and made available to every employee who has exposure or potential exposure to hazardous chemicals used in the workplace.

Material Safety Data Sheets will be obtained or developed for any hazardous chemical produced internally, such as carbon monoxide.

For new chemicals Material Safety Data Sheets will be made available prior to use.

MSDS Information Includes:
1. Chemical identity, including the name listed on the label, who makes or sells it and how to reach them in case of an emergency

2. Hazardous ingredients, including any safe-exposure limits; whether or not the ingredients are a trade secret; and Permissible Exposure Limit (PEL) without danger, over a standard workweek

3. Physical and chemical characteristics of the chemical, including vapor pressure, flashpoint, etc.
4. Fire and explosion hazard data, including boiling point, flashpoint, etc.

5. Reactivity, whether stable or unstable, and reactions to mixing with other substances

6. Health hazard data, including signs and symptoms of exposure, target organs, routes of exposure

7. Precautions for safe handling and use, including how to carefully handle this product in case of a spill or accidental release of the chemical

8. Control measures advising how to protect oneself, what type of protective equipment to use, and what hygienic practices to follow

Filing of MSDSs

The Material Safety Data Sheets are filed by room location and are maintained by Departmental Management in a central file location. Indexing by the room location is done for safety reasons. In case of fire, for instance, firefighters will know what chemicals are in each location. A copy of the chemical inventory list is available at each location, in addition to being filed in the central MSDS file by the Safety Officer.

Labeling

All containers that contain hazardous materials will be labeled. All employees will report unlabeled containers to:

Name: Tim Tyler
Job Title: Safety Officer

Departmental Management is responsible for monitoring all containers in their department, making sure any new products are labeled, and will update the hazardous chemical substance list, ensuring that the MSDS is actually in the facility before releasing the product for use:

- Chemicals that are not in the original container require labels (except materials for immediate use)
- A label must be affixed to the outside of the container and clearly note the following items (examples are illustrated):

The Brand Name of the Material ___________________________________________ Cidex
The Chemical Identity ___________________________________________ Glutaraldehyde
The Name of the Manufacturer ________________________________________________ Johnson & Johnson
Address _______________________________________________________________ Cleveland, Ohio
Telephone __________________________ (800) 698-9898
Hazards associated with its use _____________ Vapors, Danger to lungs, Liquids can cause blindness
Target organs affected _________________________________ Lungs, Eyes
Housekeeping and Waste Handling

If an obstruction exists that may present a physical danger to employees, such as a projecting pipe, duct, or stumbling danger, it must be relocated or at least labeled with a warning of the physical danger and a cautionary statement.

Containers for biohazard (infectious) wastes must be marked with the INTERNATIONAL BIOHAZARD symbol. The containers must be lined with red bags.

Wastes must be segregated into infectious and noninfectious (general) wastes. Bags for infectious waste must be of high quality, lead-proof, and red in color. Containers must have tight-fitting lids. Foot-operated opening mechanisms are preferred.

Two receptacles – one for general waste, and one for hazardous waste – should be provided in each room, if possible. If two wastes are mixed, the wastes are considered infectious, increasing waste disposal costs.

Medical supplies must be stored away from housekeeping items and under-sink areas.

Disinfecting

Low-grade disinfectants, such as bleach diluted 1:100, can be used to clean general environment and medical equipment. If a great deal of organic material is present, a stronger dilution of 1:10 is recommended by OSHA. Low-cost iodophors and phenols can be substituted for general cleaning.

Hospital-level tuberculocidal disinfectants, including glutaraldehyde, phenols and iodophors are used for high-level disinfecting or invasive medical instruments.

The Centers for Disease Control & Prevention recommends that needles and sharps be disinfected as quickly as possible after the infectious bio-burden is generated. A sharps container with a 28-day disinfectant is recommended for medical offices. It reduces putrescence and danger from needlestick infections.

Spill and Clean Up Procedures

Contain the spill with paper towels; then use cat litter, a commercial absorber, or other absorbent disposable material to absorb the spill.

Wear utility gloves for extra protection if exam gloves seem too light to protect you from acid or other corrosive materials.

Consult the MSDS of the spilled material for cleanup instructions or warnings. If there is potential for dangerous fumes, evacuate people from the area. Ask assistance from others to keep personnel away. Put absorber onto the spill to convert the liquid into a manageable solid material.
Drugs and Medications

Certain drugs defined by the Food, Drug and Cosmetics Act are considered to be hazardous chemicals and, therefore, require an MSDS, as do drugs that have been changed from their original form (such as by crushing) prior to patient administration.

Training

Training will be provided to all employees at the time of initial assignment for existing hazards. Additional training will be provided whenever a new hazard is introduced and when new information about the hazards of a chemical is discovered. Also, annual refresher training will be provided as required.

Hazard Communication Employee Training objectives will include the following:
- Learn how to read and understand an MSDS
- Identify hazardous chemicals in the work area and where they are found
- Describe what different chemicals look like and the odor of the chemicals
- Identify tasks or procedures where an employee might be exposed
- Review the purpose of detection or monitoring devices
- Learn the actions to be taken when there is an exposure (first-aid, etc.)
- Recognize the availability of Personal Protective Equipment, including type, use and limitations of PPE
- Identify the location of Personal Protective Equipment
- Review sample MSDS and labels
- Use PPE effectively – don, doff, dispose, etc.

Training Records

Records will include: Training dates, names of employees, job titles, social security numbers, outline of training, and instructor and title.

Responsibilities

Employees have the right to know about hazardous chemicals. Employees also have responsibilities:

1. Know and follow proper work practice procedures.
2. Report all problems and hazards to the department supervisor.
3. Read and follow all directions for proper handling of chemicals, including PPE.
Hazard Communication Standard

Responsibilities of Administration / Safety Officer:

1. Administer the Training Program / Test after Hazard Communication training.
2. Obtain a copy of the Hazard Communication Program for each employee.
3. Request a Hazardous Chemical Substance List for each work site.
4. Help ensure Material Safety Data Sheets (MSDS) are obtained from the distributor or manufacturer.
5. Ensure all unlabeled containers are labeled.
6. Provide cleanup supplies for blood, acid and alkaline spills. Label them “spill kits” and have them accessible.
7. Check the physical location for work hazards. Label with warnings.
8. Provide infectious waste containers in appropriate locations.
9. Review MSDS with all employees for each pertinent location. Review new MSDS with all pertinent employees as they are received.
10. Prepare Employee Training and Administration Records for each exposed employee.
Employee Name ________________________________________________________________

Name and Address of Office or Department __________________________________________

— — — Date Provided — — —

Initial Hazard Communication Training:

• Employee attended Hazard Communication training. ______________________________

• Employee was instructed where the Hazard Communication Program and OSHA Regulations are located. ______________________________

• Employee was instructed about specific chemical hazards in the workplace, including a review of the MSDS of the hazardous chemicals. ______________________________

• Employee received annual retraining on the Hazard Communication Standard. ______________________________

• Employee received special training regarding new chemical substance hazards, new safety policies, or other specific training. ______________________________

Person conducting the training: ____________________________________________________

Note: Maintain this record for five years.
<table>
<thead>
<tr>
<th>CHEMICAL NAME</th>
<th>COMMON NAME</th>
<th>MANUFACTURER</th>
<th>QUANTITY ON HAND</th>
<th>MSDS ON FILE?</th>
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### Chemical Hygiene for Laboratories Checklist

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<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
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<tbody>
<tr>
<td>Lab staff, supervisors, and faculty know where the Southwest written Chemical Hygiene Plan is kept for their area, have received required training, know the name of their safety chairperson and how to contact their department’s safety chairperson?</td>
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<td>Completed CHP awareness certificates are on file in the departments?</td>
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<td>Written Emergency Procedures in place and understood by the lab staff?</td>
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<tr>
<td>Are chemicals NOT stored on the floor? Are containers of liquids stored at eye level or below?</td>
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<td>Is glass apparatus that is under pressure or vacuum either taped or caged?</td>
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<td>Is unobstructed access available to eyewashes and safety showers available from the workstations?</td>
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<td>Are PPE and engineering controls, such as fume hoods, operating properly?</td>
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<td>Are gas cylinders secured, and are incompatible gases stored separately?</td>
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<td>Are rooms or areas designated for use of SPECIAL HEALTH HAZARDS labeled?</td>
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<td>Is every laboratory door posted with names and phone numbers of responsible personnel to be contacted in case if emergency?</td>
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### Chemical Waste Management Checklist

<table>
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<th>Question</th>
<th>YES</th>
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<tbody>
<tr>
<td>Does this location generate hazardous wastes?</td>
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<tr>
<td>Are wastes stored in a designated area and segregated according to their compatibilities and physical characteristics?</td>
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<td>Are waste containers correctly labeled with the words HAZARDOUS WASTE and with the container ingredients?</td>
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<td>Are waste containers and waste collection containers tightly capped or closed?</td>
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<tr>
<td>Are containers not leaking and safe for transportation?</td>
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<tr>
<td>Is the volume of waste stored less than 50 gallons or 1 quart of acutely toxic waste? (Guidelines - Attachment 1)</td>
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<tr>
<td>Are MSDS available for waste trade/brand name products?</td>
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## Environmental Health Checklist

<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
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<tbody>
<tr>
<td>Are employees exposed to biohazardous agents? (bacteria, fungus, parasites, toxins)</td>
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<tr>
<td>Have employees been provided with a copy of the Southwest Safety Manual and appropriately trained in the hazards of exposure?</td>
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<tr>
<td>Have employees been made aware of signs and symptoms associated with exposure to Biohazards in their work area?</td>
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<tr>
<td>Do employees understand the principles of safe lab practices? (PPE, handling, labeling, and storage of biohazardous agents)</td>
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<tr>
<td>Do employees know what to do in the event of a biohazardous agent exposure, such as a puncture, cut, splash or inhalation?</td>
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<tr>
<td>Does the location generate biohazardous wastes?</td>
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<tr>
<td>Are personnel familiar with Purdue’s Infectious Waste Disposal Program and Completion of the Bio-Materials Pick-Up and Treatment Certification Form?</td>
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<tr>
<td>Are biohazardous wastes chemically or physically treated and are biohazardous wastes labeled and stored in a designated area in appropriate bags?</td>
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## Bloodborne Pathogens

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<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
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<tbody>
<tr>
<td>Are employees exposed to human blood, human blood products, or human tissue?</td>
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<td>Are these employees given annual required bloodborne pathogen training and do they understand the concept of universal precautions?</td>
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<tr>
<td>Are these employees given the opportunity to receive, at no cost to them, hepatitis B vaccinations?</td>
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<tr>
<td>Are blood products or tissue specimens disinfected, labeled and disposed of properly?</td>
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**COMMENTS OR ISSUES FOR FOLLOW-UP:**
<table>
<thead>
<tr>
<th>General Safety Checklist</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
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<tr>
<td>Housekeeping</td>
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<td>Are the aisles clear and at least three feet wide? Are stairs well lit?</td>
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<td>Are floors free of oil, grease, liquids, broken and uneven surfaces, or sharp objects?</td>
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<td>Is all trash placed in proper containers? Is it disposed of properly? (examples: shaprs, used toner, empty chemical containers, broken glass)</td>
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<td>Are materials stored so they don’t stick out, and can’t fall?</td>
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<tr>
<td>Machinery and Equipment</td>
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<tr>
<td>Are machine guards in place and in use?</td>
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<tr>
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<td>Have hazard assessments been completed and made readily available for the tasks?</td>
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<td>Have employees been trained on correct use, care, donning and doffing of PPE, and are training records available?</td>
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<tr>
<td>Emergency Protection</td>
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<tr>
<td>Are fire extinguishers unobstructed?</td>
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<tr>
<td>Are sprinkler heads unobstructed? (at least 18” clearance surrounding the head)</td>
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</tbody>
</table>

COMMENTS OR ISSUES FOR FOLLOW-UP:
<table>
<thead>
<tr>
<th>Hazard Communication for Non-Laboratories Checklist</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the written compliance manual for Hazards Communication readily available?</td>
<td></td>
<td></td>
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<tr>
<td>Do all containers have complete, legible labels?</td>
<td></td>
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<tr>
<td>Are MSDS available to all staff for all hazardous substances used?</td>
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<tr>
<td>Is a chemical inventory complete and up-to-date?</td>
<td></td>
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<tr>
<td>Is the Hazard Communication poster posted?</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Environmental Health Checklist</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biohazards</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are employees exposed to biohazardous agents? (bacteria, fungus, parasites, toxins)</td>
<td></td>
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</tr>
<tr>
<td>Have employees been provided with a copy of the Southwest Safety Manual and appropriately trained in the hazards of exposure?</td>
<td></td>
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<tr>
<td>Have employees been made aware of signs and symptoms associated with exposure to biohazards used in their work area?</td>
<td></td>
<td></td>
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<tr>
<td>Do employees understand the principles of safe lab practices? (PPE, handling, labeling, and storage of biohazardous agents)</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Do employees know what to do in the event of a biohazardous agent exposure, such as a puncture, cut, splash or inhalation?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does the location generate biohazardous wastes?</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Environmental Health Checklist</td>
<td>YES</td>
<td>NO</td>
<td>N/A</td>
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<tr>
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</tr>
<tr>
<td><strong>Bloodborne Pathogens</strong></td>
<td></td>
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<td></td>
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<tr>
<td>Are employees exposed to human blood, human blood products, or human tissue?</td>
<td></td>
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<tr>
<td>Are these employees given annual required bloodborne pathogen training and do they understand the concept of universal precautions?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are these employees given the opportunity to receive, at no cost to them, hepatitis B vaccinations?</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Are blood products or tissue specimens disinfected, labeled and disposed of properly?</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Are human blood product waste materials (petri plates, needles, glassware, clean-up materials) disinfected, labeled, and disposed of properly?</td>
<td></td>
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</tr>
<tr>
<td><strong>Chemical Waste Management</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Does this location generate hazardous wastes?</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Are wastes stored in a designated area and segregated according to their compatibilities and physical characteristics? (Guidelines – Table 1)</td>
<td></td>
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</tr>
<tr>
<td>Are waste containers correctly labeled with the words HAZARDOUS WASTE and with the container ingredients?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are waste containers and waste collection containers tightly capped or closed?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are containers not leaking and safe for transportation?</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Are MSDS available for waste trade/brand name products?</td>
<td></td>
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</tbody>
</table>
## General Safety Checklist

### Housekeeping

<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are the aisles clear and at least three feet wide? Are stairs well lit?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are floors free of oil, grease, liquids, broken and uneven surfaces, or sharp objects?</td>
<td></td>
<td></td>
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<tr>
<td>Is all trash placed in proper containers? Is it disposed of properly? (examples: sharps, used toner, empty chemical containers, broken glass)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are materials stored so they don’t stick out, and can’t fall?</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

### Machinery and Equipment

<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are machine guards in place and in use?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are electrical cords not frayed and do outlets match? Are outlets not overloaded?</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Are ladders in good condition and suited for the job?</td>
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</tr>
</tbody>
</table>

### Personal Protective Clothing and Equipment

<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
</tr>
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<tbody>
<tr>
<td>Have hazard assessments been completed and made readily available for the tasks?</td>
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<td>Have employees been trained on correct use, care, donning and doffing of PPE, and are training records available?</td>
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</tbody>
</table>

### Emergency Protection

<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
<th>N/A</th>
</tr>
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<tbody>
<tr>
<td>Are fire extinguishers unobstructed?</td>
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<td>Are the fire exits unobstructed and identified?</td>
<td></td>
<td></td>
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<tr>
<td>Are non-exit doors identified?</td>
<td></td>
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<tr>
<td>Are sprinkler heads unobstructed? (at least 18” clearance surrounding the head)</td>
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<tr>
<td>A Incompatible with</td>
<td>B</td>
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<tr>
<td>---------------------</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Alkali and alkaline earth</td>
<td>Water</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Carbides</td>
<td>Acids</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hydrides</td>
<td>Halogenated organic compounds</td>
<td></td>
<td></td>
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<tr>
<td>Hydroxides</td>
<td>Halogenating agents</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Metals</td>
<td>Oxidizing agents</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Oxides</td>
<td>Peroxides</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Azides, inorganic</td>
<td>Acids</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Heavy metals and their salts</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Oxidizing agents</td>
<td></td>
<td></td>
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<tr>
<td>Cyanides, inorganic</td>
<td>Acids</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Strong bases</td>
<td></td>
<td></td>
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<tr>
<td>Nitrates, inorganic</td>
<td>Acids</td>
<td></td>
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<td></td>
<td>Reducing agents</td>
<td></td>
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<tr>
<td>Organic compounds</td>
<td>Oxidizing agents</td>
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<tr>
<td>• Organic acyl halides</td>
<td>Bases</td>
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<td></td>
<td>Organic hydroxy and amino compounds</td>
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<tr>
<td>• Organic anhydrides</td>
<td>Bases</td>
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<tr>
<td></td>
<td>Organic hydroxy and amino compounds</td>
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<td></td>
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<tr>
<td>Organic halogen compounds</td>
<td>Group IA and IIA metals</td>
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<td></td>
<td>Aluminum</td>
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<tr>
<td>Organic nitro compounds</td>
<td>Strong bases</td>
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</tr>
</tbody>
</table>
Oxidizing agents
- Chlorates
- Chromates
- Chromium trioxide
- Dichromates
- Halogens
- Hydrogen peroxide
- Nitric acid
- Nitrates
- Perchlorates
- Peroxides
- Permanganates
- Persulfates

Reducing agents
- Ammonia, anhydrous and aqueous
- Carbon
- Metals
- Metal hydrides
- Nitrites
- Organic compounds
- Phosphorous
- Silicon
- Sulfur

Reducing agents
- Arsenates
- Arsenites
- Phosphorous
- Selenites
- Selenates
- Tellurium salts and oxides

Sulfides, inorganic

Acids
Purpose

The purpose of the Bloodborne Pathogens Program is to identify employees who are at high risk for exposure, and adhere to safety and control measures to minimize or eliminate the exposure to bloodborne pathogens. To comply with the Standard, Southwest Tennessee Community College has implemented this Bloodborne Pathogens Program. The program includes:

- Determining the exposure risks for Southwest personnel
- Assessment and selection of personal protective equipment
- Offering the Hepatitis B vaccination at no cost to all employees occupationally exposed
- Exposure control and post-exposure protocols
- Training for Southwest personnel

Program Provisions

Program provisions include:
- Exposure determination/job classification
- Universal Precautions
- Hepatitis B
- Hepatitis C
- HIV/AIDS
- Methods of Compliance:
  - Engineering and work practice controls
  - PPE
  - Housekeeping and Disinfection
- Hepatitis B Vaccine
- Post-exposure evaluation and follow-up
- Communication of hazards to employees
- Training
- Record keeping

Exposure Determination/Job Classifications

Exposure risk is established by identifying job classifications and frequency of possible exposure to bloodborne pathogens. Exposure Determination forms assist in determining which employees have the potential to be exposed. A form should be prepared on each employee in the department by the following categories:

Category I Employees: Tasks involving exposure to blood, body fluids, or tissues. “All procedures or other job-related tasks that involve an inherent potential for mucous membrane or skin contact with blood, body fluids or tissues, or a potential for spill splashes of them, are Category I tasks. Use of appropriate protective measures should be required for every employee engaged in Category I tasks.” Such employees may include, but may not be limited to, Allied Health fields, nurses and laboratory technicians.
Category II Employees: Tasks which involve no usual exposure to blood, body fluids or tissues, but employment may require performing unplanned Category I tasks. “The normal work routine involves no exposure to blood, certain body fluids or tissues, but exposure or potential exposure may be required as a condition of employment.” For example, staff who may, as a part of their duties, help clean up, handle instruments, or send out lab work are generally considered Category II employees.

Category III Employees: Tasks that involve no exposure to blood, body fluids, or tissues. “The normal work routine involves no exposure to blood, body fluids, or tissues. Persons who perform these duties are not called upon as part of their employment to perform or assist in emergency medical care or first aid or to be potentially exposed in any other way.”

Southwest Tennessee Community College considers Category I and Category II employees to have potential for exposure. These employees will be offered the Hepatitis B vaccine at no charge.

Tasks and Procedures Where Occupational Exposures May Occur Include:
- Injections and immunizations
- Handling contaminated sharps
- Performing lab tests on body fluids
- Invasive procedures
- Starting IVs
- Phlebotomy
- Minor surgical procedures performed within biological labs
- Cleaning up body fluid and wound care
- Handling contaminated laundry
- Handling boxes or bags of infectious waste

It has been determined that the following procedures have no reasonable likelihood of occupational exposure (would be classified as a Category III employee):
- Receptionists
- Human Resource personnel
- Administrative records personnel
- Appointment personnel
- Business and accounting personnel
- Other office staff who have no contact with potentially infectious material

Steps in Determining Exposure Control:
1. Review the Exposure Determination Form with each employee, particularly those in medium-to-high risk exposure levels.
2. Ensure that all major tasks and procedures done by each employee are noted on the form.
3. Study the form to find potential exposure incidents.
4. Provide protection materials and training to the exposed workers, determined by the type and frequency of possible bloodborne pathogen exposure.
5. Maintain a list of all job classifications in which employees are exposed to bloodborne pathogens on a regular basis. Maintain a separate list of job classifications with some exposure, and a third list of job classifications that are never exposed to bloodborne pathogens.

Determination of exposure shall be made without regard to the use of personal protective equipment.

Employees who have the potential to be exposed to bloodborne pathogens must be provided training in bloodborne pathogen safety, offered free immunization against Hepatitis B, and provided protective equipment against BBP. An annual PPE hazard assessment of tasks and exposure determination is required by Southwest. A change in an exposure risk may alter the form of protection offered to the employee. For example: An office assistant now performs clean up duty in some Educational laboratories. This office assistant may have been a Category III employee, but now he/she should be classified as a Category II employee.

This program is intended to inform the employees of the contents of the OSHA Standard as it applies to bloodborne pathogens. A bloodborne pathogen is defined as a “pathogenic microorganism that is present in human blood and can cause disease in humans.” These pathogens include, but are not limited to, HBV and HIV.

Universal Precautions

“Universal Precautions” presume that all blood and body fluids of all patients are considered potentially infected with AIDS (HIV), Hepatitis B virus (HBV), Hepatitis C virus (HCV), and other bloodborne pathogens, and must be handled accordingly.

Universal Precautions applies to other potentially infectious materials (OPIM) such as cerebrospinal fluid, synovial fluid, pleural fluid, peritoneal and pericardial fluid, amniotic fluid, vaginal secretions, semen, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids. It does not include feces, nasal secretions, sputum, sweat, tears, urine, saliva, breast milk, and vomitus, unless visible blood is present.

OSHA requires that all employees who have the reasonable potential to be exposed to blood or other potentially infectious materials in their workplace to be trained in bloodborne pathogen safety and be offered the Hepatitis B vaccine.

Hepatitis B Virus

The acute and chronic consequences of Hepatitis virus (HBV) infection are major health problems in the United States. The disease claims an estimated 200,000 – 300,000 cases a year. More than one million people in the United States are carriers of the disease. In the United States, most infections occur among adults and adolescents. Hepatitis B is transmitted to workers via blood and body fluids or infected patients, usually through accidental needlesticks and unprotected cuts and sores. Other specific modes of transmission have been identified, including sexual contact, especially among homosexual men and persons with multiple heterosexual partners; parenteral drug use; household contact with a person who has an acute infection or
with a chronic carrier. Immunization with Hepatitis B vaccine is the most effective means of preventing HBV infection and its consequences.

Hepatitis symptoms may include jaundice, a yellow hue to the skin, loss of appetite, nausea, and elevated liver function tests. AIDS and Hepatitis dangers can be prevented or reduced by:
- Using protection against body fluids during at-risk procedures
- Using disinfectants to reduce pathogens in the environment
- Washing hands after working with / around potentially infected material
- Using puncture resistant sharps containers for needle disposal
- Using safe syringes

**Hepatitis C Virus**

Hepatitis C may result from exposure to blood or body fluids that contain the Hepatitis C virus. Hepatitis C was traditionally transfusion-related, but persons at increased risk of acquiring Hepatitis C include intravenous drug users, workers with occupational exposure to blood, and hemodialysis patients.

**AIDS/HIV**

AIDS (HIV) is not as contagious in the healthcare setting as Hepatitis. There is no vaccine for HIV and there is no cure. It is transmitted through blood and other body fluids, so healthcare workers are exposed to it during their work routine.

OSHA requires that potentially exposed employees be trained in AIDS prevention, and are required to protect themselves during at-risk procedures. Once training has been given, and protective equipment is provided, the employee is responsible for protecting him/herself from harm. AIDS (HIV) is mainly in the blood, semen, and vaginal secretions of an infected person. It is spread through sexual contact with an infected person by needle sharing among intravenous drug users, or less commonly and now rarely, through transfusions of infected blood or clotting factor. It can also be transmitted prenatally from mother to unborn child.

**AIDS (HIV) has never been reported to be transmitted through casual contact with a carrier.** In studies of hundreds of households where families have lived with and cared for AIDS patients, including situations where it was not known that a household member was HIV positive, no instances of nonsexual, non-blood, or non-perinatal transmission were found, despite the sharing of kitchen and bathroom facilities, meals, and eating and drinking utensils. If HIV is not transmitted in these settings, it would be less likely to occur in social settings, such as schools and offices.

Symptoms of AIDS (HIV) infection are varied and include fatigue, fever, night sweats, weight loss, rashes, mouth sores or pneumonia.

Because there is no vaccination against AIDS (HIV), The Centers for Disease Control recommends that Universal Precautions be instituted in all settings where the potential for exposure exists. OSHA enforces this requirement.
Methods of Compliance

Engineering and Work Practice Controls:
- Sharps containers
- Splash shields
- Self-sheathing needles
- Secondary containers
- Infectious waste bags
- Transport boxes
- Phlebotomy trays
- No food or drink in potentially infectious areas
- Schedule procedures with sufficient time to perform them accurately and safely

**Personal Protective Equipment (PPE)** (in compliance with 29 CFR 1910.132.140): Southwest Tennessee Community College provides Personal Protective Equipment near all locations where there is exposure to hazardous substances, including physical, chemical, or biological, via inhalation, ingestion, absorption, or other physical contact. Each department is responsible for providing Personal Protective Equipment commensurate with the exposure risks in each area. The use of Personal Protective Equipment is a requirement of OSHA and a requirement of Southwest Tennessee Community College.

**PPE Hazard Assessment**: Each department is required to perform a PPE Hazard Assessment. This assessment is made to determine if hazards that require the use of PPE are present or likely to be present. If hazards or the likelihood of hazards are determined, the appropriate PPE must be selected and approved by Southwest. The affected employees will use the properly fitted Personal Protective Equipment for protection from existing hazards.

Training: Employees shall be trained in the use of Personal Protective Equipment and when Personal Protective Equipment is necessary; what type is necessary; how it is to be worn; and what its limitations are, as well as know its proper care, maintenance, useful life, and disposal. Certify in writing the name of each employee trained, job title, PPE and date of training. A copy of the training documentation should be sent to the Safety Officer.

**Different Types of PPE**

**Hand Protection**: The appropriate hand protection must be worn when hands are exposed or have the potential for exposure, to hazards such as absorption of harmful substances, blood and other potential infectious materials (OPIM), cuts or lacerations, chemicals, temperature extremes, etc.

**Gloves**: Two basic glove types are provided by Southwest Tennessee Community College:

- **Utility**: Strong latex gloves used for maintenance and scrubbing work. These are reusable until they puncture, tear, or crack.
- **Examination Gloves**: For laboratory procedures not requiring sterile gloves and for routine infection prevention.
After donning gloves, examine them for physical defects. Wear gloves whenever your hands might touch blood, body fluids, or surfaces that could be contaminated by them.Discard gloves after each patient. Fit gloves so they cover the cuff of your clothing, if possible, to reduce the area of skin exposure.

**Eye and Face Protection:** Eye and face protection must be worn when the eyes, nose, or mouth are likely to be contaminated or injured from flying particles, acids, or caustic liquids, gasses, or vapors, blood, other potential infectious material (OPIM) and other hazardous substances.

Masks, in combination with chin length face shields, goggles, or safety glasses with solid side shields, should be worn whenever splashed and aerosolization of blood or other potential infectious materials (OPIM) may be generated.

Eye, face or eye-and-face wear must meet the minimum requirements of the Standard and provide adequate protection against a particular hazard to which an employee is exposed. This should be determined by the PPE Hazard Assessment.

- The equipment should be comfortable, easy to clean and capable of being disinfected.
- The fit should be snug enough to protect properly and still not restrict movement.
- The equipment should be durable and kept clean and in good repair.

Persons using corrective eyeglasses may comply to OSHA requirements by the following types:

- Goggles that fit over corrective glasses without disturbing the adjustment or vision.
- Safety glasses that have the optical correction incorporated in the protective lenses.
- Goggles that have a part of corrective lenses mounted behind the protective lenses.

**Gowns and Head Coverings:** Gowns are primarily worn to protect street wear and the arm and neck areas from contamination. Gowns may be changed daily unless they become soiled or wet.

Head coverings are worn whenever procedures involve splashing or aerosolization of BBP or chemicals. Head coverings should cover the hair, ears, and parts of the neck.

**Resuscitation Equipment:** Pocket masks, resuscitation bags, and other equipment are provided by Southwest, to minimize the exposure to body fluids in case of emergency mouth-to-mouth resuscitation.

**Protective Clothing Disposal:** Linens and reusable protective clothing which is heavily soiled with body fluids shall be handled as little as possible. Such linens must be bagged at the location and put into red leakproof bags. Designated areas or containers should be labeled with the BIOHAZARD SYMBOL. Contaminated personal protective clothing or equipment is not to be worn or carried out of the work area.

**Handwashing:** Wash hands regularly with a soap (preferably antimicrobial) solution:

- Before gloving
- After gloving
- After your hands have touched a possibly contaminated surface

Prior to performing medical procedures on a patient, the Center for Disease Control suggests the use of antimicrobial soaps.
Sharps, Needles and Sharps Containers: Employees will not bend, recap, or remove contaminated needles from syringes. If recapping is necessary, the one-handed technique should be used. Sharp instruments, needles, and glass slides should be disposed into sharps containers. These containers must be available in areas that generate such hazardous waste (i.e., venipuncture).

Sharps containers will:
- be puncture resistant
- be labeled and/or color coded in regard to its standard
- be leakproof
- be changed when 75 percent full at a maximum
- be disposed of entirely into infectious waste containers, and never emptied or reused

Sharps containers are located:

Location ____________________________________________________________

Location ____________________________________________________________

Specimens: Specimens of blood, body fluids, or OPIM will be placed in a designated container that prevents leakage during collection, handling, processing, storing, transporting, or shipping. This container will be labeled with the BIOHAZARD SYMBOL and closed prior to storing, transporting, or shipping. Should contamination of the primary container occur, it must be placed into a second container which prevents leakage and is also labeled according to the Standard.

Equipment: Equipment that becomes contaminated with blood, body fluids, or other potential infectious materials, must be examined thoroughly before servicing or shipping. Such equipment, if contaminated, should be decontaminated with the appropriate disinfectant immediately, or as soon as feasible. The process indicated for an item (disinfecting or sterilization) will depend on its intended use.

Personal Hygiene: Employees will not eat, drink, smoke, apply cosmetics or lip balm, or handle contact lenses in work environments where risk of exposure may occur.

Employees will not place food or drinks in refrigerators, freezers, shelves, cabinets, or on counter tops or bench tops where blood or other potentially infectious materials are present.

Housekeeping

The working environment must be kept clean and free of health and safety hazards. All places of employment, passageways, storerooms and service rooms are included in the general work environment.

Housekeeping Rules:
- Clean and disinfect the work environment with a solution of at least 1 part sodium hypochlorite (bleach) to 100 parts water, or equivalent disinfectant (you may mix 1:10).
- Clean exposed equipment and work surfaces that have had recent contact with blood or OPIM with 1 part sodium hypochlorite (bleach) to 10 parts water, or equivalent disinfectant.
• Sterilize certain medical instruments with approved hospital sterilants or in autoclaves.
• Apply hospital level tuberculocidal disinfectant on blood spills. These disinfectants should be made available in all work settings where blood and infectious materials are handled.
• Place BIOHAZARD labels on sharps containers, infectious waste containers, refrigerators and holding media containing blood and other potentially infectious materials.
• Refresh bleach solutions every day. Once diluted, bleach solutions lose their disinfecting strength rapidly.

Infectious Waste

Materials that are considered to be infectious waste must be disposed of as follows:
• Each disposal container must be labeled, leakproof, and placed so that it is easily accessible to employees.
• All infectious waste hauled away to incinerators and landfills must be placed in leakproof containers with red bag inserts and tight fitting bags.
• Bags must be red and BIOHAZARD labeled.

Hepatitis B Vaccine

Hepatitis B vaccine is offered to all employees with high risk for exposure. The vaccine is administered in a three-dose series beginning within 10 working days of initial assignment for all exposed employees, unless the employee has already received the series via other means, and has provided his/her record of vaccination to Southwest Tennessee Community College.

An employee who refuses the Hepatitis B vaccination series must sign the Hepatitis B Vaccine Refusal Form. This is mandatory under the Standard CFR 1910.1030.

Southwest Policy on Seroconversion: Southwest Tennessee Community College will offer the Hepatitis B vaccination, free of charge, to those persons who have an occupational risk to Hepatitis B. After the two-dose series, blood should be drawn to check for seroconversion. If the employee has not reached a conversion level, Southwest will offer additional boosters in an attempt to reach a positive seroconversion. If an employee does not convert within this reasonable time frame and wishes to continue his/her duties, a waiver must be signed. The employee may wish to continue with additional vaccines, but must pay for the inoculations. These recommendations are from the Center for Disease Control and Prevention.

Post Exposure and Follow-Up: An occupational exposure consists of contact with blood, tissues, or other body fluids to which Universal Precautions apply, including laboratory specimens through:
• a needle stick or cut with a contaminated instrument
• mucous membranes
• skin (especially when the exposed skin is chapped, abraded, or afflicted with dermatitis, or contact is prolonged or involves an extensive area)

AFTER AN EXPOSURE, THE EMPLOYEE SHALL NOTIFY HIS OR HER SUPERVISOR IMMEDIATELY.
The supervisor will notify the Safety Officer immediately. An Injury/Incident Form must be completed within 24 hours and returned to the Safety Officer. The Safety Officer will assist the supervisor in medical follow-up for the injured employee.

If the source person is known, inform the source of the incident, obtain consent for blood testing (if the current status is unknown).

**Communication of Hazards to Employees**

**Labels and Signs:** The following must have a BIOHAZARD label:
- All containers of regulated waste
- Refrigerator or freezer containing blood or OPIM
- Containers used to store, transport, or ship blood or OPIM

Labels required shall include the following legend:

1. Labels shall be fluorescent orange or orange/red or predominantly so, with lettering and symbols in a contrasting color.
2. Labels shall be affixed to, or as close to, the container as possible; with string, wire, adhesive, or a method which prevents their loss or unintentional removal.
3. Contaminated equipment must also be labeled accordingly.
4. Decontaminated waste does not require labeling.

**Training:**
1. Training will occur at least annually.
2. Training will be documented, including:
   - Date
   - Topic
   - Department
   - Names of those Attended

A copy of the training documentation will be sent to the Safety Officer.
Recordkeeping

- Exposure Determination Forms and Category Sheets are to be kept for five years.
- Training records are to be kept for five years.
- Exposure records are to be maintained for at least the period of the employee’s employment plus 30 years.
- Hepatitis B records, including any refusals or conversion waivers, are to be kept for five years.

These records should be forwarded to and filed by the Safety Officer.

Bloodborne Pathogen Immunization Process

All Southwest Tennessee Community College, employees who work in a high-risk area relative to Bloodborne Pathogens are offered the Hepatitis B immunization series. Any employee refusing this immunization must bring proof that they have previously had this immunization series or sign a declination statement.

If the employee accepts the Hepatitis B immunization series offer, their supervisor schedules an appointment with a Health Department nurse. The immunization series is started and will consist of three shots and possibly a titer - drawn to confirm conversion.

After successfully completing the Hepatitis B immunization series the employee is scheduled for annual Bloodborne Pathogen Training.
EXPOSURE DETERMINATION FORM
EMPLOYEE CATEGORY I

To be completed by Departmental Management / Safety Officer

Employee Name __________________________ SS# __________________________

Job Title __________________________ Date of Hire __________________________

Exposure Potential Tasks:

1. ___________________________________________________________________________

2. ___________________________________________________________________________

3. ___________________________________________________________________________

4. ___________________________________________________________________________

If more space is needed, please provide additional page.

Personal Protective Equipment to be Worn:

1. ___________________________________________________________________________

2. ___________________________________________________________________________

3. ___________________________________________________________________________

**Category Definition**: Tasks involving exposure to blood, body fluids or tissues. “All procedures or other job-related tasks that involve an inherent potential for mucous membrane or skin contact with blood, body fluids, or tissues, or a potential for spill or splashes of them, are Category I tasks. Use of appropriate protective measures should be required for every employee engaged in Category I tasks.” Employees who fall into this category include, but may not be limited to, physicians, nurses, physician assistants, and laboratory technicians.

_________________________________________________   __________________________
Employee Acknowledgment		 	 	 	 	 	 Date
To be completed by Departmental Management / Safety Officer

Employee Name __________________________ SS# ________________

Job Title __________________________ Date of Hire ________________

Exposure Potential Tasks:

1. ___________________________________________________________________________________

2. ___________________________________________________________________________________

3. ___________________________________________________________________________________

4. ___________________________________________________________________________________

If more space is needed, please provide additional page.

Personal Protective Equipment to be Worn:

1. ___________________________________________________________________________________

2. ___________________________________________________________________________________

3. ___________________________________________________________________________________

Category Definition: Tasks that involve no usual exposure to blood, body, fluids or tissues, but employment may require performing unplanned Category I tasks. “The normal work routine involves no exposure to blood, body fluids or tissues, but exposure or potential exposure may be required as a condition of employment.” For example: Staff who may, as part of their duties, help clean up, handle instruments, or send out work, are generally Category II employees.

_________________________________________________   __________________________
Employee Acknowledgment		 	 	 	 	 									Date
To be completed by Departmental Management / Safety Officer

Employee Name ____________________________________________ SS# ________________________________

Job Title _______________________________________________ Date of Hire __________________________

Exposure Potential Tasks:

1. ___________________________________________________________________________________

2. ___________________________________________________________________________________

3. ___________________________________________________________________________________

4. ___________________________________________________________________________________

If more space is needed, please provide additional page.

Personal Protective Equipment to be Worn:

1. ___________________________________________________________________________________

2. ___________________________________________________________________________________

3. ___________________________________________________________________________________

Category Definition: Tasks that involve no exposure to blood, body fluids, or tissues. “The normal work routine involves no exposure to blood, body fluids or tissues. Persons who perform these duties are not called upon as part of their employment to perform or assist in emergency medical care or first-aid or to be potentially exposed in any other way.”

_________________________________________________   __________________________
Employee Acknowledgment		 	 	 	 	 									Date
To be completed by Departmental Management

Department ________________________________________ Date ________________

Location ____________________________________________

Job classifications in which all employees in these job classifications have occupational exposure to bloodborne pathogens (Category I Employees).

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Job classifications in which some employees have occupational exposure to bloodborne pathogens (Category II Employees).

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Job classifications in which employees have no occupational exposure to bloodborne pathogens (Category III Employees).

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Category III Employees should not be performing occupational tasks and/or procedures.
To be reviewed with the employee by Departmental Management / Safety Officer

Employee Name

Department

Address

City/State/ZIP Code

I, ________________________, am employed by Southwest Tennessee Community College. Southwest has provided training to me regarding the Hepatitis B vaccine. I understand the effectiveness of the vaccine, the possible risks of contracting Hepatitis B in the workplace, and the importance of taking active steps to reduce the risk. I have been given the opportunity to be vaccinated with Hepatitis B vaccine, at no charge to myself.

However, I, of my own free will and volition, and despite the urging of Southwest, have elected not to be vaccinated against Hepatitis B. I have personal reasons for making the decision not to be vaccinated. If, in the future, I have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with Hepatitis B vaccine, I can receive the vaccine series at no charge to me.

Signature_______________________________________________ Date ___________________________

_____ I have previously received the Hepatitis B (HBV) series. (Attach official documentation, including series dates)

Signature_______________________________________________ Date ___________________________
Bloodborne Pathogens Standard ("Universal Precautions")

Responsibilities of Departmental Management / Safety Officer

____ 1. Determine who are probable “exposed employees” from the Exposure Identification Form and the Exposure Control Plan guide.

____ 2. Arrange for potential exposed employees to view the Bloodborne Pathogens videotape.

____ 3. Administer BBP Training Test and file after completion of Training.

____ 4. Provide a copy of the Bloodborne Pathogens Program for each employee to read.

____ 5. Determine from the Exposure Identification Form which employees have actual occupational exposure.

____ 6. Provide protective clothing and equipment at key locations to exposed personnel.

____ 7. Offer Hepatitis B immunizations to each exposed worker.

____ 8. Prepare/Procure disinfecting solutions and spill kits for clean-up tasks.

____ 9. Place BIOHAZARD Labels on appropriate containers and sites.

____ 10. Review safety equipment instructions and location of protective clothing with workers.

____ 11. Prepare Employee Training and Administration Records for each exposed employee. Keep them in a confidential area. Forward a copy to the Safety Officer.
Employee Name ____________________________________________________________

Name and Address of Office or Department ___________________________________________

_________________________________________________________________________________

———Date Provided———

Initial Hazard Communication Training:

• Employee attended Hazard Communication training. __________________________

• Employee was instructed where the Hazard Communication Program and OSHA Regulations are located. __________________________

• Employee was instructed about specific chemical hazards in the workplace, including a review of the MSDS of the hazardous chemicals. __________________________

• Employee received annual retraining on the Hazard Communication Standard. __________________________

• Employee received special training regarding new chemical substance hazards, new safety policies, or other specific training. __________________________

Person conducting the training:

_________________________________________________________________________________

Note: Maintain this record for five years.
Purpose

The purpose of the Emergency Action Plan is to establish and implement procedures to ensure the safety of employees during a fire and/or other emergencies. This plan works in conjunction with Southwest’s RAPID REACTION PLAN in this section.

Responsibilities of the Safety Officer

1. Lead the execution and development of the Emergency Action Plan.
2. Advise college leadership in the coordination of emergency preparedness.
3. Investigate all reports and emergencies.
4. Cooperate with and assist outside agency personnel on all survey tours and inspections.
5. In conjunction with Southwest Police Services and Administration, establish, review or amend any procedures related to the Emergency Action Plan.

Responsibilities of Departmental Administration

1. Provide initial emergency training of all new employees.
2. Plan escape routes for each work area, including primary and secondary escape routes. Escape routes will be posted on each floor and each reception area.
3. Appoint employees to assist in evacuation procedures.
4. Create an emergency action plan that explains duties of employees in emergency situations.
5. Develop a method to account for all employees in the department (post-evacuation) and include a designated area for all employees to assemble.
6. List names of persons to contact for further information.
7. Act as coordinator for any emergency situation in his/her area.
8. Maintain an up-to-date roll of all employees in his/her area and a roster of persons trained in CPR.
9. Maintain first-aid kits, flashlights, etc., for the area.
10. Keep a roster of employee duties to be performed during a fire, earthquake, tornado, etc.
11. Complete any specific training techniques, such as emergency notification procedures, information about the building alarm system, and evacuation procedures for the area.
12. Maintain all training logs for the area.

13. Serve as the communication link between the department and the Safety Officer in all matters concerning emergency preparedness.

**Responsibilities of the Employee**

1. Become familiar with general information concerning Southwest’s Emergency Action Plan. Also, each employee shall read and become familiar with the building protocol for the building he/she occupies.

2. Initiate emergency procedures when appropriate.

3. Remain at his or her work area to assist emergency personnel who enter the building, unless the building is evacuated.

4. Learn the duties to be performed during an emergency.

5. Learn the appropriate evacuation routes for his/her work area.

6. Learn the designated assembly point, post-evacuation.

**Notification**: Report initial emergencies by dialing 911. Notify Campus Police @ 5555/4242 and Southwest’s Safety Officer at (901) 333-5459 as soon as possible. Refer to the protocol for the building you occupy.

**Medical Treatment**: Administer first aid as required. First-aid may be appropriate in certain situations, but is not a substitute for professional medical care.

First-aid may include, but is not limited to:
- Establishing and maintaining airways to prevent choking
- Rescue Breathing
- Establishing circulatory efforts – CPR, control breathing
- Treatment for shock
- Cooling thermal burns
- Irrigation of eyes/skin from irritants
- Remaining with person until further help arrives (calm and reassure)
- Avoiding moving a seriously injured person unless that person is in danger of further injury.

Non-emergency on-the-job injuries should follow the Workers Compensation Claim procedure.

For remote facilities, emergency medical treatment should be directed to the nearest medical facility.
A disaster resulting in a mass casualty situation (e.g., earthquake, tornado, etc.) may fall under the direction of the Shelby County Disaster Plan. This would be determined by the first responding emergency unit and coordinated by Shelby County’s Emergency Management Agency (EMA). All medical facilities in Shelby County will take part in a countywide disaster. Please refer to the RAPID REACTION PLAN in this section, which outlines specific Emergency procedures and phone numbers.

**Fire**

**Procedures:** Emergency action steps to be taken when fire and/or smoke are detected:

1. Rescue anyone in immediate danger.

2. Remain calm. Sound the alarm – activate the nearest fire alarm pull station.

3. Alert others in your immediate area of the emergency. Follow the notification protocol of the building you are in. Notify Campus Police and the Safety Officer when possible.

4. Never attempt to fight a fire, no matter how small, unless you have been trained in the use of a fire extinguisher.

5. Close doors and windows to prevent the spread of fire and/or smoke, but do not lock doors. Smoke – not heat or flames – is the biggest killer in a fire.

6. Turn off equipment and fans in the affected area.

7. Be prepared to evacuate if so instructed. Follow the evacuation protocol for the building you are in.

8. Never re-enter a burning building once outside.

9. Work with the fire department upon their arrival. Notify fire department personnel of any missing persons after the initial head count.

**Evacuation:** Every department shall designate an assembly point for gathering after an evacuation. One person in each department will be appointed to conduct a head count. If evacuation of a unit or area is warranted, it should be carried out in a systematic order. The evacuation order will vary with your specific area and procedures in the protocol.

**Training:** Initial training of employees in evacuation procedures should take place at the time of hire and at least annually thereafter. Additional area-specific protocol training for employees should take place at the time of initial hire and annually thereafter.
**Drills:** Fire drills will be conducted either by the Public Safety department or by departmental Administration. Southwest Tennessee Community College will use the Fire Drill Evaluation Form to document drill events and to communicate problems, which need to be corrected. It will be the responsibility of each department or facility to ensure that the evaluation sheet for each area is completed. Review the drill protocols for your building.

NOTE: Rehearsal of the fire plan during drills must include faculty and students.

**Preparation for Evacuation in Case of Fire**

1. Turn all lights on.

2. When the fire alarm has sounded, the exit routes must be quickly inspected to ensure they are safe.

3. Refer to the evacuation maps posted in your area. If the primary exit is safe and passable, use this exit first.

4. If the primary exit is blocked or unsafe, use the secondary exit route. Make every effort to clear at least one of the exits.

5. Do not evacuate until an order has been given to evacuate or an emergency condition warrants that an evacuation is necessary. It could be more dangerous to evacuate an area than to remain where you are.

**Evacuation (Ground Level):**

1. When the order has been given to evacuate, begin the actual evacuation process.

2. Establish your primary and secondary routes of evacuation.

3. Evacuate persons nearest to danger area first.

4. Try to work away from the danger area, if possible, moving persons toward the assembly area outside the building. Try not to deviate from assigned escape routes, if possible.

5. Stay at the designated assembly area until further directed. Never re-enter the building or danger area once outside.

6. If both exits (primary and secondary) are blocked, move to a room furthest away from the danger. Close the door to the room. Take an object and break the window. Place a blanket, coat, etc., over the windowsill to prevent cuts, and then use the window as an escape route.

7. Move to the designated assembly area. Count and immediately report any missing persons to the person in charge. Remember: Do not re-enter the building until instructed by approved personnel.
Multilevel Evacuation:

1. If you are in a multilevel facility and need to evacuate, proceed down the stairwell, unless instructed otherwise.

2. If both the primary and secondary routes are blocked and cannot be cleared, go up to the next floor.

3. If all exits are blocked, move to a room as far away from the danger area as possible. Close the door to the room. It may be necessary to break a window. Remove the glass from the window and place a blanket or coat over the sill to prevent cuts. Do not use the window as an exit at this point – serious injury or death can result from a jump. Use the open window to signal for assistance. Wait for emergency rescue personnel to assist.

4. Do not use elevators.

5. Do not deviate from an assigned escape route, if possible.

6. Once you have reached the designated assembly area, count and immediately report any missing persons to the person in charge.

7. Never re-enter the building or danger area once inside.

Possible fire hazards:

1. Exit ways. Do not block or obstruct any aisles, doorways, or fire escapes.

2. Combustible waste. All combustible waste should be placed in all-metal containers with tight fitting covers ensuring containment if a fire should occur.

3. Electrical hazards. Report promptly any frayed, broken or overheated extension cords or electrical equipment within the facility. Do not operate light switches, or connect or disconnect any electrical equipment where any part of your body is in contact with metal fixtures or is in water.

4. Smoking is prohibited in all Southwest buildings unless posted otherwise. Smoking is not permitted in any classroom and Lab area and rooms or compartments where flammable liquid, combustible gas or oxygen is being used or stored.

5. Electrical heaters and fans are not permitted on the property, unless specifically approved by the building facility manager or the Safety Officer.

6. Holiday lights and electrical decorations are not permitted on the property.

7. Candles or heat-producing units such as potpourri burners are not permitted.
How to Fight a Fire

Fighting a Minor Fire:

1. Fight a minor fire by pouring water on it unless its origin is electrical or flammable liquid.

2. In the case of a trash fire, do not pick up burning trash and run with it. This will only fan the fire and cause it to burn more rapidly.

3. Stay calm. Do not panic. First alert someone else. If safe to do so, fight the fire with the nearest accessible fire extinguisher.

4. Be sure that the fire is extinguished. Remove burning articles to an area where they cannot rekindle or cause any further damage or confusion.

5. Assure all personnel that everything is under control and that the fire has been extinguished.

6. Report the incident to Public Safety, the Safety Officer or department management. Advise that the fire has been extinguished, and relate the details.

7. Recheck the fire area to see if it is safe to enter.

8. Do not use the fire alarm if the fire is of a minor nature. Keep activities and information localized.

9. Close all doors and windows in the fire area.

10. Seal off the fire area by placing a wet blanket under the room entrance door to prevent smoke from entering the rest of the building.

Fighting a Major Fire: Remain calm. Do not panic.

1. Should a major fire (one that is out of control) be discovered or a minor fire get out of control, immediately activate the nearest fire alarm pull station and call 911.

2. Ensure that evacuation of all employees from the danger area is initiated. Work away from the danger area.

3. Move away from the danger to preassigned areas.

4. Be sure that all personnel are accounted for. Report missing persons immediately.

5. Close all doors and windows in rooms as they are evacuated.

6. Check exits to ensure that they are safe and usable. Clear any obstacles.
7. Turn all lights on.

8. Do not return to the danger area once away from it.

9. Turn off any equipment with blower fans (such as heating and cooling systems) and all unnecessary electrical equipment.

10. Do not let anyone return to the area once they have been evacuated.

**Fire Extinguishers**

Fire extinguishers come in many varieties. They are coded to provide information as to the type of fire they will extinguish. The code is determined by the type of fuel that is burning (i.e., wood, gas, etc.). Listed below are five main types of extinguishers and their uses:

**Class APW**: Air pressurized water (H2O), use mainly on wood, paper and trash. Do not use on chemicals, grease, electrical wiring or computers.

**Class ABC**: Mono-ammonium phosphate with a nitrogen carrier and other ingredients to keep it flowing. Use on paper, trash, wood, liquid greases, and electrical wiring – not for computers or radio equipment.

**Class DC**: Dry Chemical: basically, baking soda with nitrogen carrier and other ingredients. Use for liquid greases and electrical — not for paper, wood, or computers.

**Class Halon**: Bromochlorodifluormethane, good for computers and electronic equipment. Also can be used on paper trash, wood, and liquid greases.

**Class CO2**: Carbon Dioxide, good for chemicals, grease, electrical wiring, and computers – but not for wood, paper or trash.

**EACH CLASS OF FIRE EXTINGUISHER SHOULD BE USED ONLY FOR THE KIND OF FIRE FOR WHICH IT IS INTENDED.** Using the wrong fire extinguisher could make a fire worse – for example, using water (Class APW extinguisher) on a grease fire.

Become familiar with the type of fire extinguishers used in your facility. Most fire extinguishers work in a similar fashion, but there are exceptions. Read the directions. If you are using a live extinguisher, do not let a fire get between you and the exit.
Learn How to PASS (Pull, Aim, Squeeze and Sweep.)

**PULL** the pin. Some units require the release of a lock latch, pressing a puncture lever, or other motion.

**AIM** the extinguisher nozzle (hose) at the base of the fire.

**SQUEEZE** the trigger.

**SWEEP** from side to side at the base of the fire until it goes out. Shut off the extinguisher. Watch to see if the fire starts again (reflashes) and be ready to reactivate the extinguisher if necessary. Foam or water extinguishers require slightly different action — read the directions.

**Earthquake**

The actual movement of the ground during an earthquake is seldom the direct cause of injury or death. Most casualties are a direct result of damaged buildings and other structures that generate falling objects and debris.

Injuries can be caused by:

- collapsing roofs, walls and ceilings, and falling light fixtures.
- overturned furniture, fixtures and appliances.
- fallen power lines.
- fires resulting from broken gas lines, explosions, etc.
- glass from broken windows.
- drastic human actions resulting from panic.

**Procedures During an Earthquake:**

1. Remain calm. Try to reassure others.

2. If indoors, remain indoors. It is generally safer to stay where you are. Do not dash for an exit because stairways may collapse or be jammed with people. **DO NOT USE ELEVATORS.**

3. Watch for falling debris (e.g., ceiling, plaster, fixtures). Stay clear of high bookcases, filing cabinets, shelves, and any other objects that may slide or fall. Keep away from windows and exterior walls.

4. If possible, crouch under a solid object, such as a table or desk.

5. If you are in an elevator, stop the elevator at the nearest floor, get out and take cover. If trapped in an elevator, utilize the elevator emergency notification device.

6. If in a crowded auditorium, do not rush for the doorway (everyone else may have the same idea). In leaving a building, choose your exit as carefully as possible.
7. If outside, avoid high buildings, walls, power poles, and other objects that could fall. If possible, move to an open area away from all hazards. If in an automobile, stop in the safest place possible, preferably an open area.

Procedures After an Earthquake:

1. Do not use telephones for outside calls except in emergencies.

2. Be prepared for additional earthquake shocks, which are called “after shocks.” Although most of these are smaller than the main shock, some may be large enough to cause additional damage.

3. Check for injuries. Do not move seriously injured persons unless they are in immediate danger of further injury (such as building collapse, fire, etc.) Administer first aid as required.

4. Check for fires and fire hazards.

5. Check utility lines for gas leaks or damage. See that the gas and electricity are turned off at the main valves and switches, if necessary. (Authorized personnel must do this.)

6. Be aware that power outages may have eliminated all lighting. Be familiar with the location of exit stairs and other escape routes.

7. DO NOT use matches or cigarette lighters because of the possibility of ruptured gas lines or other flammable materials being present.

8. If evacuation of the building is ordered, quickly walk to the nearest exit. Beware of structural damage and assist both the disabled and the injured. Do not lean or hold onto anything that will not support you. Protect yourself as you exit the building. DO NOT USE THE ELEVATORS.

9. Do not attempt to re-enter a building once you are outside.

Tornado

Tornadoes are violent storms with whirling winds that can reach 200-400 miles per hour. The funnel-shaped cloud may travel “on the ground” in a path that generally ranges from 200 yards to one mile wide. The south-central, southeastern, and mid-western parts of the United States are the most susceptible regions to develop these storms.

A tornado watch means that conditions are favorable for the possible development of a tornado in a specified area.

A tornado warning means that a tornado has actually been sighted in the area or located on radar.

Tornadoes occur with little or no warning and there may be little time to prepare.
Procedures: If there is a tornado watch indicated by the National Weather Service, listen to a radio or television for additional updates. If there is a tornado warning indicated by the National Weather Service, be prepared to take immediate cover for protection. Listen for sirens sounded by the Emergency Management Agency during a tornado warning. Take the following actions:

1. Remain calm and seek immediate shelter.

2. If inside, move to an interior area at the bottom of the building. If your building does not have a basement, move to an inner area on the ground floor and stay away from windows.

3. Stay away from large open areas such as an atrium or auditorium. If outside, move to a shelter. If there is no time to move inside, lie flat in the nearest ditch or culvert and shield your head. Be sure to leave the ditch or culvert after the tornado has passed to avoid the possibility of being injured in a flash flood.

Review the protocol for the building you are currently occupying. Check to see if there is a designated shelter in that building.

Emergency Evacuation of Persons with Disabilities


Introduction: Southwest Tennessee Community College policies and procedures require that all persons in a facility be trained to evacuate that facility any time the fire alarm system is activated or an emergency necessitates. Persons with disabilities may not be able to evacuate unassisted. Therefore, each disabled person should inform another person that assistance might be necessary during fire alarm activation.

The Buddy System: A “buddy system” is the best plan for the evacuation of persons with disabilities. To use the buddy system, the facility staff will assign persons with disabilities as their “buddies.” When the alarm sounds, the staff employee will note the location of his or her buddy and go outside and inform emergency personnel that a person in that location needs assistance in leaving the building. Emergency personnel will then enter the building and evacuate those persons with disabilities.

Evacuation Options: Use these options in conjunction with the buddy system to assure the prompt evacuation of any person with a disability:

Horizontal Evacuation: Move away from the area of imminent danger to a safe distance (e.g., another wing, opposite end of the corridor, or adjoining building).

Vertical (Stairway) Evacuation: Those who are able to evacuate with or without assistance can use stairways. Persons who must use crutches or other devices as walking aids will need to use their own discretion, especially when several flights of stairs are involved.
Stay in Place: Unless danger is imminent, remain in a room with an exterior window and a telephone – close the door if possible. Call 911 and give your name, location and the reason you are calling. If the phone lines fail, the person can signal from the window by waving a cloth or other visible object.

Disability Guidelines:

Mobility Impaired (Wheelchair): Persons using wheelchairs should stay in place unless moved to another area with their buddy away from danger. The evacuation buddy should then proceed to the evacuation assembly point outside the building and inform emergency personnel of the location of the person with the disability.

Mobility Impaired (Non-Wheelchair): Persons with disabilities who are able to walk independently may be able to negotiate stairs in an emergency situation with minor assistance. These people need to be included in the “buddy system” and assisted if needed. They should wait until heavy traffic has cleared before attempting to navigate stairs.

Hearing Impaired: Southwest buildings are equipped with fire alarm horns and strobes that sound the alarm and flash strobe lights. The strobe lights are for hearing impaired persons.

Visually Impaired: The fire alarm horn is for sight-impaired persons. The buddy system is necessary to ensure that all visually impaired persons are evacuated successfully.

Summary: Most Southwest facility doors, walls and ceilings were constructed as fire-rated units. Two-way communication is available (telephones) and most rooms have windows (for fresh air or to make a signal). Sprinkler systems have been installed. With proper planning and practice, persons with disabilities can be evacuated successfully utilizing the previously mentioned procedures. Refer to the Emergency Evacuation and the Rapid Reaction Plan sections of this manual for planning and practicing for emergencies.
Fill out completely and as accurately as possible. Do not leave any spaces blank. Answer with “N/A” or “Unknown” if necessary.

Department ___________________________ Supervisor ___________________________

Building _______________________________ Floor ___________________________

Date and time alarm sounded ________________________________

Did alarm bell/horn function properly?   Yes  No
Was an announcement heard?   Yes  No
Did all fire doors close properly?   Yes  No
Was a clear announcement heard? (All Clear)   Yes  No

If any answers were marked “No,” please explain ___________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

Please evaluate your area’s Fire Plan by answering the following:

Do all personnel know how to manually activate the fire alarm system?   Yes  No
Do all personnel know their roles in the containment of smoke and fire?   Yes  No
Do all personnel know the appropriate escape routes and evacuation procedures?   Yes  No
Do all personnel know the designated area to assemble if an evacuation is required?   Yes  No

Where is your area? _______________________________________________________________________

Form completed by ___________________________ Title ___________________________

Department ___________________________ Date ___________________________
By signing this statement, I am stating that I have read and understand the Emergency Action Plan and the Rapid Reaction Plan of Southwest Tennessee Community College. I further state that I shall utilize my best efforts to abide by these Plans.

__________________________________________________________   ___________________
Signature of Employee 			 		 	 	 	 	 	 Date

_____________________________________________________________________________________
Witness
General Policy

Every Southwest Tennessee Community College employee shall be entitled to receive compensation for personal injury, death by accident or occupational disease arising out of and in the course of employment with Southwest subject to the workers compensation law. No employee will be discriminated against in any way because of his/her decision to file a claim under the workers compensation law.

Notice of Injury

An injured employee must notify his/her supervisor immediately upon the occurrence of an injury or as soon as reasonably practicable. An employee may lose the right to receive workers compensation if notice is not given on a timely basis. The Injury/Incident Report should be filled out and returned to the Safety Officer within 24 hours of the incident. A copy of the Injury/Incident Report should be taken to the designated initial treatment facility.

Injuries Not Covered

No compensation shall be allowed for an injury or death due to any of the following reasons:

1. Willful misconduct
2. Intentional self-inflicted injury
3. Intoxication
4. Willful failure or refusal to:
   • Use necessary personal protective equipment or Safety Devices
   • Perform a duty required by law
   • Follow Southwest safety rules and programs

Southwest Tennessee’s workers compensation carrier determines whether or not an illness or injury arises out of and in the course of employment with Southwest.

Workers Benefits

1. The employee will receive a full day’s pay for the day on which he or she incurred an accident or injury arising out of employment.

2. Employees who are unable to work because of disability arising out of employment are eligible for weekly compensation and will be paid according to state law. Workers compensation payments are 66 percent of regular pay.

3. There is a week’s delay before employees receive compensation. The injured employee may elect to utilize accrued sick or disability pay for reimbursement for the initial period of disability.
4. Employees receiving workers compensation benefit payments are not eligible to also receive sick pay. Any duplication of payments made must be reimbursed.

5. In the event the employee elects to use accrued sick pay for the initial period of disability and later receives workers compensation benefits, certain tax liabilities are incurred for which the employee is responsible.

6. The employee may not use accrued sick leave for work-related illness or injury past the seventh day of disability, unless the injury or illness is determined to be non-work related.

7. All time off due to work-related injuries or illness must be noted on the employee’s time sheet. If the employee elects to use accrued sick leave for days 2-7, the time sheet should reflect this.

**Medical Payments**

Payments for medical attention, including hospitalization, doctors’ fees etc., related to a work-related disability, are paid in accordance with state law.

**Awards**

If partial or permanent disability results from an accident or illness arising out of employment, a further award may be made by the insurance carrier in accordance with state law.

**Workers Compensation Record Keeping**

1. The Occupational Safety and Health Administration (OSHA) requires that a log be kept to record time missed from work and other information relative to time lost from work due to employment-related illness or injury. The Safety Officer will maintain this log.

2. An employee who misses work due to work-related injuries should record all time lost in his time sheet(s) under “Other” and should note, “Workers Compensation Claim” in the Comments section.

3. The OSHA log will be posted during the month of February by the Safety Officer to reflect the previous year’s workers compensation activity.
1. Sedgwick CMS – Knoxville
   P.O. Box 14484
   Lexington, KY 40512-4484
   1 (800) 526-2305 (toll-free)
   (865) 583-8310 (fax)

2. Prime Health Network
   1 (866) 348-3887

3. To File a New Claim:
   1 (866) 245-8588 (toll-free)

If you have questions, call the Treasury Department Division of Claims Administration at (615) 741-2734.

For general information, go to: www.treasury.state.tn.us/wc

State of Tennessee Workers’ Compensation Program

If you have an accident at work:
  • Contact your supervisor to report your injury.
  • Contact the Call Center at 1 (866) 245-8588 to file your claim.
  • If you need medical treatment, call the State’s Administration, Segdwick Claims Management Services, at 1 (800) 526-2305, or Prime Health Network at 1 (866) 348-3887, for the name of a provider who is authorized to treat you.

You must choose a provider from the state’s directory for full payment of your bills. If you use an unauthorized provider, you will be responsible for payment of your bills. If you have questions, call the Treasury Department Division of Claims Administration at (615) 741-2734. For general information, go to www.treasury.state.tn.us/wc
Return or fax this form to the Safety Department within 24 hours of incident.

Date of Incident __________ Time __________ Location __________________________________________

Name of Injured Employee ________________________________________________________________

Department ________________________________________ Social Security # ______________________

Sex ___Male ___Female Work Phone_______________ Home Phone _____________________________

Date of Birth ____________________________ Marital Status _____Married _____Single

Job Title ________________________________________ Hours worked per week_________________

How did the injured employee describe the cause of the injury/disease? Be specific and detailed. What exactly was the person doing at the time of injury? If using tools or handling material(s), name them and explain what the person was doing with them. Please attach any additional comments if necessary.

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

Describe the nature of the injury/disease you observed. Be specific.

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

INJURY/INCIDENT REPORT

Witness to Injury/Incident ___________________________ Witness Phone ________________________

Witness Statement:
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

When and where was the injured person referred for treatment? _________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

What do you think would prevent this incident from happening again? __________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Supervisor’s Signature __________________________________________ Date _________________

Date Incident was Reported ______________________________

I have read the above report and the statements are true to the best of my knowledge.

Employee Signature ______________________________________ Date _________________
The purpose of this report is to help prevent similar incidents from occurring. Complete the report as accurately and thoroughly as possible.

Injured Person’s Name __________________________________________ Age ________

Occupation __________________________________________ Hire Date__________

Investigation conducted by ___________________________ Date ____________

Incident Date ___________________________ Time ___________________________ a.m./p.m.

☐ Close Call ☐ Minor Injury ☐ Major Injury ☐ Illness

Where did the accident/injury occur? __________________________________________

________________________________________________________________________

How did the accident/injury happen? __________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Describe the injury: _______________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

What do you recommend to be done (or what have you done) to prevent this type of incident?

________________________________________________________________________

________________________________________________________________________

What unsafe act(s) or condition(s) contributed to the incident? ____________________________

________________________________________________________________________

________________________________________________________________________

Corrective action(s) taken and date __________________________________________

________________________________________________________________________
All personnel conducting operations on Southwest Tennessee Community College properties are mandated to comply with all applicable local, state, and federal rules and regulations pertaining to occupational health and safety and the environment. Persons conducting construction related activities are required to review and sign the document entitled “Contractor Safety Agreement” prior to working on site. All contractors working onsite are subject to inspection by the College’s Department of Environmental Health and Safety (EH&S).

Contractor Safety Guidelines

This program establishes the requirements which shall be applicable to all contractors who perform work for Southwest Tennessee Community College. It is acknowledged that the contractor is responsible for the safety of his individual employees, but Southwest also recognizes that contractor safety can in some cases directly affect its staff, faculty and students. Consequently Southwest requires a contractor safety agreement to be signed by all contractors.

The objective is to guide contractors to establish and maintain an accident prevention program which eliminates accidents to contractor personnel and property, and which eliminates contractor accidents that may affect Southwest personnel and property.

A. SCOPE: This program shall be applicable to all contractors who perform work for Southwest Tennessee Community College. The program contains the minimum safety rules and procedures for performance of work by those contractors and their subcontractors as required by Southwest.

The contractor assumes and has the full responsibility and liability for the safety of its agents, servants and employees and for the compliance of its subcontractors. Anything contained herein does not relieve the contractor of such responsibility or liability. Contractors unwilling to secure personnel performance in keeping with these rules will not be acceptable.

In addition to the rules set forth herein, contractors must be cognizant of and comply with any applicable federal, state and local laws.

B. REQUIREMENTS:

1. Training: The contractor shall provide training for its employees, and such training shall include, but not be limited to:

   a. Disclosure of potentially dangerous conditions in the workplace;
   b. Provide an explanation of how to perform the work safely;
   c. Provide a thorough demonstration as to the proper operation of Personal Protective Equipment

Adequate programs should comply with the OSHA Hazard Communication Standard, Hearing Conservation Standard, Resource Conservation Recovery Act, Lockout/Tagout and other standards applicable to the contractor’s work.
2. Smoking: Smoking is prohibited in all Southwest facilities whether “No Smoking” signs are posted or not. Consult with the Southwest project supervisor for authorized smoking locations in the area.

3. Reporting Accidents/Injuries: All accidents and injuries must be immediately reported to the contractor’s supervisor and the Southwest project supervisor. The Southwest project supervisor will report the accident/injury to the physical plant director and EH&S.

4. Intoxicating Beverages, Drugs and Firearms: Possession of illegal drugs, drug paraphernalia, intoxicating beverages, firearms or other weapons are unauthorized and prohibited on Southwest property. Contractors shall remove from Southwest property any person found to be in possession of any of these items or under the influence of alcohol or other drugs.

5. Housekeeping: Work areas shall be maintained in a neat and orderly manner. Trash, oil spills, etc., must be cleaned up as soon as possible. Aisles and emergency exits must be kept free of materials at all times.

6. Compressed Gases: All cylinders containing compressed gases shall be returned to a suitable storage area after use. They shall not be permitted to lay about the work site. Protective caps shall be placed over the cylinder valves when not in use or when being transported and kept away from heat, fire, molten metal or electrical lines. They shall not be transported by mobile cranes unless a special carrier, designed for that purpose is used, and should be stored in the upright position and secured to some stationary object or structure.

7. Hazardous Chemicals: Material Safety Data Sheets (MSDSs) must be available for all chemicals used on the job site and personnel working at the site must be properly instructed in their use. Personal Protective Equipment outlined in the MSDS must be provided by the contractor and worn by the exposed personnel. The contractor will be responsible for all chemicals used and stored on site. Containers must be properly labeled and managed to prevent spillage on Southwest property, including use of secondary containment, if necessary. Empty, full or partially full containers must be properly closed at all times to prevent any leakage.

8. Personal Protective Equipment (PPE): The wearing of appropriate Personal Protective Equipment is required on Southwest property as designated in the OSHA Standards 29 CFR 1910 and 1926. This includes eye protection, head protection, foot protection, hearing protection, respiratory protection, hand protection and other protective equipment as dictated by the hazards to which the personnel are exposed.

9. Overhead Work: When working overhead, the area below shall be roped off or other equivalent measures shall be taken to protect workers on the work site. Signs reading “Danger - Work Overhead” shall be conspicuously posted around the area. Personnel shall never pass under a suspended load.
10. Scaffolds or Work Platforms: All scaffolds or work platforms used for installation and maintenance or removal of machinery or equipment shall be constructed, maintained and used in compliance with the applicable OSHA Standards 29 CFR 1910 and 1926.

11. Safety Harnesses and Lifelines: Safety harnesses and lifelines shall be provided by the contractor and worn by all workers when working above ten (10) feet where it is impractical to provide adequate work platforms with handrails and toe boards. This shall be applicable to all work performed from articulating boom equipment.

12. Trenching and Excavation: Prior to beginning any excavations, it shall be determined if any underground hazards exist (gas lines, electrical lines, etc.). When personnel must enter any trench greater than five (5) feet in depth or in any location where hazardous ground movement can be expected (regardless of depth), applicable safety standards and regulations must be addressed by the contractor (29 CFR 1910 and 1926).

13. Hot Work: If hot work, which includes welding, cutting, grinding or any other activity that produces a spark or open flame, is to be performed in a Southwest facility that is occupied by students, faculty or staff, the contractor must notify the EH&S. The contractor must have a Hot Work Permit.

14. Confined Space Entry: The contractor must have a Confined Space Entry Program prior to working in confined spaces. Prior to entry into a confined space, the EH&S must review the contractor’s Confined Space Program to ensure it complies with the OSHA Standard and incorporates all potential hazards in the assessment of the space. The project supervisor must disclose all hazard and potential hazard information on a confined space prior to the contractor entering the space. Proper atmospheric testing is required prior to entry into the confined space.

15. Lockout/Tagout: The contractor must have a Lockout/Tagout Program whenever the proposed work includes installation, repair or maintenance on equipment that contains or may contain hazardous energy (i.e., electrical, hydraulic, steam, pressure, etc.). The program must include a system to prevent unauthorized start-up of the equipment as well as the elimination of potential energy build-up. Prior to beginning work on the equipment, the contractor must contact the Project supervisor for additional information regarding lockout of the equipment on which the work is to be performed.

16. Fire Protection: Fire protection equipment is located strategically throughout campus facilities. This equipment is for emergency use only. Any unauthorized use of this equipment for any other purpose is forbidden. It is the responsibility of the contractor to provide their own fire protection equipment appropriate for the work being performed. Southwest’s fire protection equipment may be used to supplement the contractor’s equipment if conditions warrant and the use is approved by the project supervisor. Any use of Southwest equipment must be reported to the project supervisor.
17. Asbestos: During maintenance or destruction/renovation activities of Southwest facilities, asbestos health hazards may be encountered. When this hazard has been identified or suspected, the contractor shall follow additional guidelines as outlined by OSHA Standards (29 CFR 1910 and 1926). Under no circumstances should demolition work progress on Southwest property until written approval is provided by the Project Supervisor.

18. Regulated Waste Disposal: All regulated waste – Resource Conservation and Recovery Act (RCRA) hazardous waste, Class I, and II non-hazardous Waste, asbestos – generated from the demolition of any Southwest property should be disposed of in compliance with any applicable local, state, and federal rules and regulations. All RCRA hazardous waste manifests should be forwarded to the EH&S. All other manifests and disposal documents should be made available to EH&S upon request.

19. Storm water Protection: The contractor must conduct activities in a manner that will minimize the release of any contaminants to the storm water or sanitary sewers. When applicable, the Contractor must comply with permit requirements mandated under the State of Tennessee, Memphis, Tennessee Pollutant Discharge Elimination System (TPDES) program or the EPA managed National Pollutant Discharge Elimination System (NPDES).

20. Protection of the General Public: The contractor must take the necessary steps to protect the general public from any hazards associated with the work site including, but not limited to, trip hazards, fall hazards, falling objects, releases of contaminants that may contribute to poor indoor air quality (dusts, gasses, etc.). The protection of the general public can be secured by using control methods such as barriers, signage that indicates any potential hazards, or securing the jobsite. A checklist entitled is included in this document. The document entitled “Pedestrian Access during Construction Projects” provides guidance on the proper methods for ensuring

21. Indoor Air Quality (IAQ): The contractor must take the necessary steps to ensure that the indoor air quality for building occupants adjacent to construction sites are not compromised by fugitive emissions. A checklist entitled “IAQ Considerations for Occupied Buildings under Construction” is included in this document to aid in implementing the proper engineering, or administrative controls necessary to ensure this.

22. Emergencies: Emergencies involving an injury, the release of any hazardous materials to the environment or any questions regarding potential exposure to asbestos shall be immediately reported to the Southwest project supervisor. An emergency call list for Southwest safety personnel is included in this document in the event that the project manager cannot be reached.

C. CONTRACTOR SAFETY PERFORMANCE SURVEY: The EH&S department will conduct routine surveillance of construction activities (see attached construction safety inspection form) primarily in those areas that may affect employees, students and visitors. Upon completion of a routine inspection, a copy of the construction safety inspection form will be forwarded to the Southwest Project Supervisor. The Project Supervisor shall be the liaison for communicating safety and health concerns to a contractor.
### OCCUPANT NOTIFICATION

<table>
<thead>
<tr>
<th>Description</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Will occupants be notified of upcoming construction activity to include a brief description of the work planned, precautions taken for air quality, health effects of low-level exposures to construction related dust and odors, and given an opportunity to voice concerns?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have considerations been made to relocate hypersensitive individuals during the duration of the project?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Will renovation work be stopped until potentially significant health issues are resolved?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### SCHEDULING

<table>
<thead>
<tr>
<th>Description</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>If possible, can construction activity be conducted during off hours (evenings or during weekends?)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has source substitution using lower Volatile Organic Compound (VOC) emitting products been considered?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### CONTROL MEASURES

<table>
<thead>
<tr>
<th>Description</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>What control measures will be used to ensure occupants are not adversely exposed to construction activity dust and odors?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Equipment) Local exhaust</td>
<td></td>
<td></td>
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<tr>
<td>(Equipment) Air cleaning</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Equipment) Cover or seal contaminants</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Pathway) Depressurize work area</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Pathway) Pressurize occupied space</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Pathway) Erect barriers to contain construction area</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Pathway) Relocate pollutant sources</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(HVAC) Supply side air intakes will be blocked</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(HVAC) Return side air intakes will be blocked</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(HVAC) Filtration efficiency will be increased</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Housekeeping) Is there an established schedule for cleaning up the site?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Housekeeping) Is it recognized that all work areas must be dry as possible?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>For construction projects in which the duct system has been contaminated during construction or a system with preexisting dust buildup will duct cleaning be conducted?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The purpose of these standards for construction in the public right-of-way is to ensure pedestrian safety and access. Standards apply to contractors, and all others working in the right-of-way. Each project is unique and requires thorough review to ensure complete, safe, usable and accessible paths of travel.

**Maintenance of a Clear and Accessible Pedestrian Corridor**

The Contractor shall maintain an accessible corridor that provides at least one safe path of travel for all pedestrians at all times for the duration of the project. Temporary closure of designated pedestrian routes and crossings shall be allowed only when flaggers are present and safely directing pedestrians around hazards.

- Pedestrian corridor shall be a nominal width of 6’ whenever feasible, and shall conform to Americans With Disabilities Act Accessibility Guidelines. It shall not be less than 48” wide at single point of contact or obstruction.
- Accessible pedestrian corridor shall connect with facilities throughout the project area.
- Equipment, debris, construction materials or vehicles shall not obstruct the corridor.
- No parked vehicles can obstruct blue curb parking spaces unless permitted by the City.

**Temporary Ramps Conforming to Accessibility Standards**

The Contractor shall install and maintain temporary concrete, asphalt or wood ramps to provide a safe path of travel for mobility-impaired pedestrians at all locations where ramps have been temporarily removed OR needed to route pedestrians.

- Temporary ramps shall be constructed so installation and removal will not damage existing pavement, curb and/or gutter.
- Ramps shall have a minimum 4’ wide walking surface and a slope not to exceed 8 percent.
- Ramps shall snugly meet existing surfaces without gaps. When required for drainage schedule 40 PVC pipe minimum 2” diameter shall be installed through ramp.
- Transitions between ramps and the street surface shall be smooth such that no lip exists at the base of the ramp.
- Sides of a ramp shall be protected where there is any drop-off.

**Construction of Signposts, Barricades and Fencing**

Barricades that are impenetrable shall be used to separate pedestrians from hazards on all sides of excavations that may be exposed to pedestrians. Use materials and methods suitable to site conditions. Signs and fencing material shall not protrude into the clear pathway.

- A-frames used for defining path of travel (not barricading trenches) shall be placed end-to-end without spacing, and shall be connected and maintained to ensure stability to help a person who is blind negotiate a safe path while using a cane.
- Caution Tape shall NOT be used by itself to delineate the path of travel or create a barricade.
- Fencing material requires a minimum 3’ height, solid, uninterrupted toe-board.
- Signposts, scaffolding and fencing supports shall be placed entirely outside the pedestrian path of travel, and shall be minimum 4’ wide and 80” high without obstruction.
- Construction barriers shall be maintained in a sound, neat and clean condition.
Identification of Safe Path of Travel

If a portion of the pedestrian way is rerouted due to construction, the path of travel shall be clearly defined. Traffic Engineer shall review any pedestrian access limitations and signage notification requirements for pedestrians with mobility or vision impairments.

- Paths of travel that DO NOT continue to the next corner or to a safe crosswalk shall be closed to pedestrian traffic. Signs a minimum of 36” x 36” must be posted stating the sidewalk is closed and detour pedestrians to accessible sidewalk.
- Pedestrian access corridors shall be clearly delineated with cones or barricades, as approved by the Engineer.
- If a crosswalk is closed, curb ramps leading into that crosswalk must be barricaded in such a manner that walkways that are not closed remain accessible to use.
- Caution Tape shall NOT be used by itself to delineate the path of travel or create a barricade.

Surfacing of Pedestrian Corridors

During construction, tripping hazards and barriers for people with mobility impairments must be removed to maintain an accessible pedestrian corridor.

- Any change of level, which exceeds 1/4” height, must be beveled at 45°.
- Closed trenches, temporary paving surfaces, walking surfaces, steel plates; etc. shall have a smoothly finished, firm walking surface made even w/surrounding walkways.
- Aisle or loading area adjacent to a parking space is part of the pedestrian corridor.

Restoration of Pedestrian Routes

After construction, the site shall be returned to its former condition, or new condition as required.

- Temporary ramps shall be removed as soon as construction and approval of permanent ramp is completed.
- After work is completed, surface of the pedestrian path shall be restored free from all ridges, gaps, bumps and rough edges.
- Construction that affects any existing curb ramp shall include replacement or repair of the curb ramp to meet current City standards.
This agreement must be reviewed and signed by all contractors/subcontractors prior to working at Southwest.

**Contractor Company Name**
__________________________________________________________

**Assigned Work Locations(s)**
________________________________________________________________

*Please initial each item.*

___ 1. All contractor personnel must wear appropriate work apparel including personal protective equipment, as required.

___ 2. Hazardous chemicals are present at Southwest in certain buildings and operations. Contractor personnel must familiarize themselves with campus safety procedures and emergency evacuation plans for the area(s) they are working in.

___ 3. No hazardous or flammable chemicals may be brought on Southwest property without approval from the EH&S office. Material Safety Data Sheets are required for any chemicals that are permitted on campus.

___ 4. Possession of alcohol, illegal drugs or firearms on Southwest property is prohibited.

___ 5. Frayed or damaged extension cords/power cords are not permitted on Southwest work sites.

___ 6. The contractor is responsible for maintaining good housekeeping in and around their work area.

___ 7. The contractor will not discharge any chemicals, paints, oils, etc., substances to any drain or Southwest property without approval from Southwest Facilities Project Manager or the EH&S Office.

___ 8. Any contractor personal or property accidents or cases of job-related injuries/illnesses must be immediately reported to Southwest Facilities Project Manager.

___ 9. Contractors/subcontractors shall know the location of the nearest fire extinguisher, pull station alarm and first aid equipment. In the event of a fire/emergency, notify the nearest Southwest employee and the Facilities Project Manager.

___ 10. Contractor safety meetings must be held as needed to communicate job-site safety information for all contractors regularly working on Southwest property for extended periods of time.

___ 11. Contractor work will be periodically monitored by the Facilities Project Manager and the EH&S Office to ensure adherence to Southwest requirements.
12. Emergency and evacuation procedures shall be explained to the contractor by the Facilities Project Manager or designee prior to beginning work.

13. Contractors will provide, if necessary, their employees Lockout/Tagout, Excavation/Trenching, and Confined Space Entry Training before work begins.

All contractors are required to sign, in agreement, that they have received a copy of the Contractor Safety Agreement Form and have read and fully understand its contents. This form must be kept on file by the Facilities Project Manager.

The undersigned contractor represents and warrants that they shall comply with all applicable Federal, State and Local laws, regulations and rules while engaged to perform services for Southwest. Any contractors/subcontractors who violate these rules may be prohibited from conducting work for Southwest. The contractor is also responsible for ensuring that all employees and subcontractors comply with these rules.

Contractor/Subcontractor/Laborer

[Signature]

Assigned Facilities Project Manager

[Signature]