

# **NORTHWEST TECHNOLOGY CENTER**

Alva Campus – 1801 South 11<sup>th</sup> Street Alva, OK 73717 580-327-0344

Fairview Campus – 801 Vo-Tech Drive Fairview, OK 73737 580-227-3708

## **OCCUPATIONAL SAFETY AND HEALTH PROGRAM**

### **SAFETY PLAN**

**Revised 10-26-09**

**Revised 12-07-09**

**Revised 04-27-10**

**Revised 06-12-11**

**Revised 10-30-12**

**Revised 09-18-13**

**Revised 10-13-14**

**Revised 10-05-15**

**Revised 10-27-17**

**Revised 10-29-18**

**Revised 01-30-20**

**Revised 10-01-20**

**Revised 10-21-21**

**Revised 10-24-22**

**Revised 09-14-23**

**Revised 07-16-24**

**Revised 09-08-25**

**Revised 02-05-26**

# INTRODUCTION TO OCCUPATIONAL SAFETY AND HEALTH PLAN

A written safety plan is essential to the day-to-day operations of Northwest Technology Center (NWTC). However, this safety plan is to be used in conjunction with policies and procedures set by the NWTC Board of Education. All employees will be required to follow the guidelines included in this safety plan.

The NWTC Occupational Safety and Health Plan was approved by the Board of Education initially on 11/02/2009. This plan is revised and approved by the Board of Education annually.

*Daren Slater*

Northwest Technology Center  
Superintendent

**NORTHWEST TECHNOLOGY CENTER**  
Alva Campus - 1801 South 11<sup>th</sup> Street Alva, OK 73717 580-327-0344  
Fairview Campus – 801 Vo-Tech Drive Fairview, OK 73737 580-227-3708

**OCCUPATIONAL SAFETY AND  
HEALTH PROGRAM**

**SAFETY PLAN**

**TABLE OF CONTENTS**

		<b>PAGE</b>
<b>SECTION I</b>	<b>MANAGEMENT COMMITMENT AND EMPLOYEE PARTICIPATION</b>	<b>5</b>
<b>SECTION II</b>	<b>WORKSITE ANALYSIS</b>	<b>14</b>
<b>SECTION III</b>	<b>HAZARD PREVENTION AND CONTROL</b>	<b>22</b>
<b>SECTION IV</b>	<b>EMERGENCY PREPAREDNESS PLAN</b>	<b>25</b>
<b>SECTION V</b>	<b>SAFETY AND HEALTH TRAINING</b>	<b>28</b>
<b>SECTION VI</b>	<b>HAZARD COMMUNICATIONS PLAN</b>	<b>31</b>
<b>SECTION VII</b>	<b>RESPIRATORY PROGRAM</b>	<b>49</b>
<b>SECTION VIII</b>	<b>RESPIRATORY PROGRAM APPENDIX A</b>	<b>56</b>

<b>SECTION IX</b>	<b>RESPIRATORY PROGRAM APPENDIX B</b>	<b>63</b>
<b>SECTION X</b>	<b>RESPIRATORY PROGRAM APPENDIX C</b>	<b>66</b>
<b>SECTION XI</b>	<b>RESPIRATORY PROGRAM APPENDIX D</b>	<b>78</b>
<b>SECTION XII</b>	<b>CONTROL OF HAZARDOUS ENERGY SOURCES (LOCKOUT/TAGOUT)</b>	<b>87</b>
<b>SECTION XIII</b>	<b>BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN</b>	<b>96</b>
<b>SECTION XIV</b>	<b>POWERED INDUSTRIAL TRUCK (FORKLIFT) PROGRAM</b>	<b>128</b>
<b>SECTION XV</b>	<b>ASBESTOS HAZARD EMERGENCY ACT (AHEA)</b>	<b>133</b>
<b>SECTION XVI</b>	<b>PANDEMIC PROCEDURES</b>	<b>135</b>
<b>SECTION XVII</b>	<b>CAMPUS SAFETY</b>	<b>137</b>
<b>SECTION XVIII</b>	<b>VISITORS</b>	<b>137</b>
<b>SECTION XIX</b>	<b>BUILDING SECURITY</b>	<b>137</b>

## **SECTION I**

# **MANAGEMENT COMMITMENT AND EMPLOYEE PARTICIPATION**

**NORTHWEST TECHNOLOGY CENTER**  
***OCCUPATIONAL SAFETY AND HEALTH PROGRAM***

**SAFETY AND HEALTH PROGRAM STATEMENT**

The employees of Northwest Technology Center consider the issue of safety and health protection as a most important phase in the daily operations of this center. Therefore, we will work toward providing and maintaining safe and healthful working conditions at all times.

Safety and health protection shall be an integrated part of all operations. Every employee will be involved in the planning, developing, and implementation of safety and health protection.

Each site director will be responsible for the safety and health of those employees working in their respective departments. The site director's interest must be vocal, visible, active, and continuous.

All employees shall follow safe working practices, obey safety regulations, and work in a way that maintains the high safety and health standards set forth by the Northwest Technology Center administration and school board.

It is the policy of the Northwest Technology Center to cooperate fully with any audits or investigations by governmental authorities.

All employees are encouraged to make this safety and health program an integral part of daily operations. By accepting mutual responsibility to operate safely, everyone will contribute to the wellbeing of one another and to Northwest Technology Center.

## **GOALS AND OBJECTIVES**

### **GOAL 1**

**A comprehensive written safety program developed cooperatively by the staff of Northwest Technology Center to meet our health and safety needs as well as any regulatory compliance.**

#### **OBJECTIVES:**

- Develop a safety and health policy statement and communicate it to every employee and student.
- Establish goals and objectives of the written workplace safety plan and review them annually for continued applicability.

### **GOAL 2**

**The establishment of a comprehensive written job hazard assessment program that assesses all existing hazards of our worksite and controls these hazards.**

#### **OBJECTIVES:**

- Create a Hazard Report Form to address the identity of and plan for control of hazards.
- Complete Job Hazard Analysis of all identified tasks.

### **GOAL 3**

**The establishment of a training program that meets the health and safety needs of all personnel, students and visitors.**

#### **OBJECTIVES:**

- Conduct safety surveys to determine if there are changes that need to be made to goals/objectives, engineering controls, workplace practices and training.
- Develop a written emergency preparedness plan.
- Provide safety training necessary to correlate with the NWTC Safety Plan and provide for the elimination of workplace hazards.

## **TOP MANAGEMENT/ AND/OR HIS/HER DESIGNEE**

Leadership for the NWTC *Occupational Safety and Health Program* will be provided by the Superintendent and the NWTC Safety Committee.

The Administrative leadership will provide the motivating force within the school and the community by attending safety meetings, participating in safety groups, and working with community organizations to promote safety.

Within the school, the Safety Committee will follow all safety regulations, participate in safety committee meetings, facilitate safety presentations, and conduct walk-through safety inspections of each department. This Safety Committee will also promote employee involvement by having an open-door policy to discuss concerns about safety and health issues without fear of reprisal.

## **SAFETY COMMITTEE MEMBERSHIP**

The Safety committee of Northwest Technology Center shall consist of:

- One (1) representative from the Student Services Department,
- One (1) representative from the Full-Time Programs Department,
- One (1) representative from the Business & Industry Services Department,
- One (1) representative from the Maintenance/Custodial Department,
- One (1) representative from Administration,
- One (1) representative from the Administrative Assistants
- The Public Information Officer
- The Safety Facilitator and
- The Safety Compliance Officers.

**2009-2010 Safety Committee Members:**

Student Services – Judi Shirley  
Full Time Programs – John Buller  
Business & Industry – Tara Thomas  
Maintenance & Custodian – Dan Crawford  
Administration – Daren Slater  
Administrative Assistants – Evelyn Hofen  
Public Information Officer – Melinda Barton  
Safety Facilitator – Len Haight  
Safety Compliance Officers – Charlotte Hadwiger and Steve Kliewer

**2011-2012 Safety Committee Members:**

Student Services – Karen Koehn  
Full Time Programs – Jon Buller  
Business & Industry – Steve Kliewer  
Maintenance & Custodian – Lenette Shelite  
Administration – Daren Slater and Gerald Harris  
Administrative Assistants – Susan Bymaster  
Public Information Officer – Melinda Barton  
Safety Facilitator – Len Haight  
Safety Compliance Officers – Charlotte Hadwiger and Steve Kliewer

**2012-2013 Safety Committee Members:**

Student Services – Karen Koehn  
Full Time Programs – Jon Buller and Dennis Bushman  
Business & Industry – Steve Kliewer  
Maintenance & Custodian – Gary Murrow  
Administration – Daren Slater and Colt Shaw  
Administrative Assistants – Susan Bymaster  
Public Information Officer – Melinda Barton  
Safety Facilitator – Len Haight  
Safety Compliance Officers – Charlotte Hadwiger and Steve Kliewer

**2013-2014 Safety Committee Members:**

Student Services – Jane Harris  
Full Time Programs – Debra Stubsten and Brook Meyer  
Business & Industry – Tammy Mustard  
Maintenance & Custodian – Shane Glover  
Administration – Daren Slater and Colt Shaw  
Administrative Assistants – Kate Nickel  
Public Information Officer – Melinda Barton  
Safety Facilitator – Len Haight  
Safety Compliance Officers – Charlotte Hadwiger and Steve Kliewer

**2014-2015 Safety Committee Members:**

Student Services – Jane Harris  
Full Time Programs – Debra Stubsten and Brook Meyer  
Business & Industry – Tammy Mustard  
Maintenance & Custodian – Shane Glover  
Administration – Daren Slater and Colt Shaw  
Administrative Assistants – Kate Nickel  
Public Information Officer – Melinda Barton  
Safety Facilitator – Len Haight  
Safety Compliance Officers – Charlotte Hadwiger and Steve Kliewer

**2015-2016 Safety Committee Members:**

Student Services – Jane Harris  
Full Time Programs – Brooke Meyer and Ashlee Smart  
Business & Industry – Tammy Mustard  
Maintenance & Custodian – Shane Glover  
Administration – Daren Slater and Colt Shaw  
Administrative Assistants – Kate Nickel  
Public Information Officer – Melinda Barton  
Safety Facilitator – Len Haight  
Safety Compliance Officers – Charlotte Hadwiger and Steve Kliewer

**2016-2017 Safety Committee Members:**

Student Services – Jane Harris  
Full Time Programs – Brooke Meyer and Ashlee Smart  
Business & Industry – Tammy Mustard  
Maintenance & Custodian – Shane Glover  
Administration – Daren Slater and Colt Shaw  
Administrative Assistants – Kate Nickel and Janice Harder  
Public Information Officer – Melinda Barton  
Safety Facilitator – Len Haight  
Safety Compliance Officers – Charlotte Hadwiger and Steve Kliewer

**2017-2018 Safety Committee Members:**

Student Services – Jane Harris  
Full Time Programs – Brooke Meyer  
Business & Industry – Tammy Mustard  
Maintenance & Custodian – Shane Glover and Gary Murrow  
Administration – Daren Slater and Colt Shaw  
Administrative Assistants – Janice Harder  
Public Information Officer – Melinda Barton  
Safety Facilitator – Len Haight  
Safety Compliance Officers – Charlotte Hadwiger and Steve Kliewer

**2018-2019 Safety Committee Members:**

Student Services – Tami Frascht  
Full Time Programs – Brooke Meyer, Shawn Cusack and Bobby Watson  
Business & Industry – Tammy Mustard  
Maintenance & Custodian – Shane Glover and Gary Murrow  
Administration – Jeremy Eaton and Colt Shaw  
Administrative Assistants – Janice Harder  
Public Information Officer – Melinda Barton  
Safety Facilitator – Len Haight  
Safety Compliance Officers – Charlotte Hadwiger and Steve Kliewer

**2019-2020 Safety Committee Members:**

Student Services – Tami Frascht  
Full Time Programs – Brooke Meyer, Shawn Cusack and Bobby Watson  
Business & Industry – Tammy Mustard  
Maintenance & Custodian – Shane Glover and Gary Murrow  
Administration – Jeremy Eaton and Colt Shaw  
Administrative Assistants – Brenda Waggoner  
Public Information Officer – Melinda Barton  
Safety Facilitator – Len Haight  
Safety Compliance Officers – Charlotte Hadwiger and Steve Kliewer

**2020-2021 Safety Committee Members:**

Student Services – Tami Frascht  
Full Time Programs – Brooke Meyer, Shawn Cusack and Bobby Watson  
Business & Industry – Kayla Turner  
Maintenance & Custodian – Shane Glover and Gary Murrow  
Administration – Jeremy Eaton and Colt Shaw  
Administrative Assistants – Brenda Waggoner  
Public Information Officer – Melinda Barton  
Safety Facilitator – Len Haight  
Safety Compliance Officers – Charlotte Hadwiger and Steve Kliewer

**2021-2022 Safety Committee Members:**

Student Services – Tami Frascht  
Full Time Programs – Brooke Meyer, Shawn Cusack and Bobby Watson  
Business & Industry – Kayla Turner  
Maintenance & Custodian – Shane Glover and Gary Murrow  
Administration – Jeremy Eaton and Colt Shaw  
Administrative Assistants – Brenda Waggoner  
Public Information Officer – Melinda Barton  
Safety Facilitators – Jason Wallace and Adam Honeyman  
Safety Compliance Officers – Charlotte Hadwiger and Steve Kliewer

**2022-2023 Safety Committee Members:**

Student Services –Tami Frascht  
Full Time Programs –Brooke Meyer, Shawn Cusack and Bobby Watson  
Business & Industry – Kayla Turner  
Maintenance & Custodian – Shane Glover and Gary Murrow  
Administration – Jeremy Eaton and Colt Shaw  
Administrative Assistants – Brenda Waggoner  
Public Information Officer – Melinda Barton  
Safety Facilitators – Scott Brown and Adam Honeyman  
Safety Compliance Officers – Charlotte Hadwiger and Jason Wallace

**2023-2024 Safety Committee Members:**

Student Services –Tami Frascht  
Full Time Programs –Brooke Meyer, Shawn Cusack and Bobby Watson  
Business & Industry – Kayla Turner  
Maintenance & Custodian – Shane Glover and Gary Murrow  
Administration – Jeremy Eaton and Colt Shaw  
Administrative Assistants – Brenda Waggoner  
Public Information Officer – Melinda Barton  
Safety Facilitators – Scott Brown and Adam Honeyman  
Safety Compliance Officers – Charlotte Hadwiger and Jason Wallace

**2024-2025 Safety Committee Members:**

Student Services –Tami Frascht  
Full Time Programs –Brooke Meyer, Shawn Cusack and Bobby Watson  
Business & Industry – Kayla Turner  
Maintenance & Custodian – Shane Glover and Tino Frairie  
Administration – Jeremy Eaton and Colt Shaw  
Administrative Assistants – Brenda Waggoner  
Public Information Officer – Melinda Barton  
Safety Facilitators – Scott Brown and Adam Honeyman  
Safety Compliance Officers – Charlotte Hadwiger and Jason Wallace

**2025-2026 Safety Committee Members:**

Student Services –Tami Frascht  
Full Time Programs –Brooke Meyer, Shawn Cusack and Bobby Watson  
Business & Industry – Melissa Powell  
Maintenance & Custodian – Shane Glover and Tino Frairie  
Administration – Jeremy Eaton and Colt Shaw  
Administrative Assistants – Brenda Waggoner  
Public Information Officer – Melinda Barton  
Safety Facilitators – Scott Brown and Adam Honeyman  
Safety Compliance Officers – Charlotte Hadwiger and Jason Wallace

## **EMPLOYEE INVOLVEMENT**

Employee participation in the NWTC *Occupational Safety and Health Program* is the key to its success. All employees have a vested interest in effective protection programs and will be involved in the creation of safety programs.

## **ASSIGNED RESPONSIBILITY, AUTHORITY AND ACCOUNTABILITY**

Each NWTC employee is responsible for workplace safety and health. To ensure an effective and flexible safety and health program specific personnel will be assigned specific responsibilities.

### **SUPERINTENDENT**

The NWTC Superintendent or his designee will:

- Assist in the creation and annual review of the NWTC *Occupational Safety and Health Program*.
- Provide the leadership and resources to carry out the stated school safety and health program.
- Assign clear responsibility for various aspects of the safety and health program.
- Support safety/health personnel and employees in their requests for information, training, facilities, tools, and equipment needed to conduct an effective safety and health program.
- Require all occupants; including vendors, customers, subcontractors, and visitors, to comply with the NWTC safety and health plan.
- Keep informed of and be able to interpret laws and standards dealing with employee risk and reduction of illnesses and injuries.
- Communicate with all employees and board members regarding the NWTC *Occupational Safety and Health Program*.

### **ASSISTANT SUPERINTENDENT(S)**

The NWTC Assistant Superintendent or their designee will:

- Conduct walk-through safety surveys monthly and safety inspections annually.
- Supervise and evaluate each worker's safety/health behavior and work methods.
- Issue oral or written warnings to employees for violations of safety regulations.
- Maintain a file for documenting all observed safety violations and action taken. Copies of documented safety violations and actions taken will be submitted to the Safety Compliance Officer.
- Work with the Safety Facilitator and Safety Committee concerning safety hazards.
- Ensure that the NWTC Hazard Report system is being followed and that any repair and replacement needs found during those activities are tracked to completion.
- Maintain good housekeeping in their area.
- Assist in providing adequate equipment for personal protection, industrial hygiene, and fire prevention.
- Conduct accident/incident investigations.
- Work with the Safety Facilitator and Safety Committee in planning and scheduling safety training seminars.
  - Communicate with all employees regarding the NWTC *Occupational Safety and Health Program*.

### **SAFETY FACILITATOR**

The NWTC Safety Facilitator will:

- Ensure that the NWTC Hazard Report system is being followed and that any repair and replacement needs found during those activities are tracked to completion.
- Investigate employee reports of hazards.
- Respond to employee safety and health suggestions.
- Conduct walk-through safety surveys and inspections.

- Conduct accident/incident investigations.
- Work with the Site Directors and the Safety Committee members concerning safety hazards.
- Assist in maintaining good housekeeping.
- Work with the Site Directors and the Safety Committee in planning and scheduling safety training seminars.
- Communicate with all employees regarding the NWTC *Occupational Safety and Health Program*.

### **SAFETY COMPLIANCE OFFICERS**

The NWTC Safety Compliance Officers will:

- Maintain a file for the annual summary of training.
- Communicate with all employees regarding the NWTC *Occupational Safety and Health Program*.

### **HUMAN RESOURCES DIRECTOR**

The NWTC Human Resources Director will:

- Maintain the OSHA 300 Log.
- Maintain a file for all safety and health hazards reported along with corrective action taken to correct the hazard.
- Make required reports to Department of Labor.

### **SAFETY COMMITTEE MEMBERS**

The NWTC Safety Committee Members will:

- Encourage and actively support employee involvement in the safety and health program and provide positive reinforcement and recognition to outstanding individual and group performances.
- Make sure each employee knows what to do in case of an emergency in accordance with the Emergency Management Plan.
- Respond to employee safety and health suggestions.
- Work with Site Directors and the Safety Facilitator concerning the identification and correction of safety hazards.
- Communicate with all employees regarding the NWTC *Occupational Safety and Health Program*.

### **ALL EMPLOYEES**

All NWTC employees will:

- Learn NWTC's safety and health regulations. They will understand them, follow them, and avoid short cuts that could present a safety hazard.
- Periodically review the NWTC safety and health plan.
- Make sure workplace emergency responsibilities are understood and followed.
- Obtain and maintain up-to-date knowledge and skills required to detect safety and health violations and other hazards in their department.
- Conduct site safety surveys in their work area departments.
- Conduct a hazard analysis, that includes hazard detection, and write a plan of improvement for repair or control of equipment and/or facilities and report all deficiencies via electronic hazard report form.
- Maintain good housekeeping in their work area.
- Assist in training and re-training of fellow employees.
- Participate as members of the Safety Committee, periodically.
- Communicate with all employees regarding the NWTC *Occupational Safety and Health Program*.

## **RESOURCES**

Types of resources that may be available:

- Appropriately trained and equipped personnel, including NWTC employees and adjunct consultants and instructors.
- Safety training curriculum.
- Facilities and equipment for safety training seminars.
- Sufficient operational and capital funding.
- Strategy plan for overcoming resource deficiencies.

**SECTION II**  
**WORKSITE ANALYSIS**

## **HAZARD IDENTIFICATION**

### **PROGRAM STATEMENT**

All employees of Northwest Technology Center will work toward developing and implementing procedures for identifying existing and potential workplace hazards. The process for this task will include:

- Analysis of potential hazards; •
- Routine hazard analysis; and •
- Regular site inspections.

### **HAZARD REPORTING SYSTEM**

Every employee is expected to watch for and report any possible hazards to employee safety and health. Employees may report potentially hazardous conditions or practices in person to your supervisor, or by submitting a written report through the NWTC Work Order/Hazard Report Form. The reports must be made as soon as possible.

No employee of Northwest Technology Center will discipline or harass any other employee because of hazards reported. Any employee found to have disciplined or harassed another employee, for this reason, will be disciplined. Each employee's participation is essential to keep this workplace safe and healthful.

# Job Hazard Analysis Form

DATE: \_\_\_\_\_

Date of Inspection: \_\_\_\_\_

Prepared By: \_\_\_\_\_

Reviewed By: \_\_\_\_\_

List Job Function: \_\_\_\_\_

---

---

---

---

Hazard Chemical involved Yes or No

If yes, list the chemicals: \_\_\_\_\_

---

---

---

Is PPE required Yes or No?

If yes, what type: \_\_\_\_\_

---

---

---

Has Employee received training on PPE Yes or No?

List all known hazards associated with job: \_\_\_\_\_

---

---

List all safety training required to do with this job: \_\_\_\_\_

---

---

Other observations: \_\_\_\_\_

---

---

---

# Hazard Report Form

Date of Report \_\_\_\_\_

Report made by \_\_\_\_\_ Submitted to \_\_\_\_\_

Location \_\_\_\_\_ Date Submitted \_\_\_\_\_

## List Hazard

---

---

---

---

---

# Northwest Technology Center Work Order/Hazard Report

## Report of Hazard, Unsafe Condition or Practice

### I. Employee's Action

Area (Specific Work Location)

Describe hazard, unsafe condition or practice. Recommended corrective action.

---

---

---

---

---

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

### II. Supervisor's Action

Recommend or describe action taken to eliminate the hazard, unsafe condition or practice.  
(If corrective action has been taken, indicate the date of abatement.)

---

---

---

---

---

Supervisor Signature \_\_\_\_\_ Date \_\_\_\_\_

### III. Approving Official's Action (Check One and Complete)

The following corrective action was taken to eliminate the hazard, unsafe condition or practice. (Indicate date of abatement):

A work order has been submitted to plant maintenance to effect the following change:

There are no reasonable grounds to determine such a hazard exists. This decision is based upon:

---

---

---

---

---

Approving Official Signature \_\_\_\_\_ Date \_\_\_\_\_

### IV. Maintenance Action (Complete if Necessary)

Date Hazard Abated \_\_\_\_\_

Maintenance Supervisor Signature \_\_\_\_\_ Date \_\_\_\_\_

## ACCIDENT INVESTIGATION AND INJURY/ILLNESS ANALYSIS

Even though preventive safety measures are in place, we realize that an accident/incident may still occur. Therefore, every effort will be made to properly investigate, analyze, and correct the hazard.

### DEFINITIONS

An **“accident”** will be identified as an unplanned, negative occurrence causing personal injury or property damage.

An **“incident”** will be considered as an unplanned, negative occurrence that has a negative impact on the outcome of a task.

A **“personal injury”** will be considered as an illness or injury resulting from a single accident or incident.

### ACCIDENT INVESTIGATION TEAM

Serious accidents/incident will be investigated by the Site Director and the NWTC Safety Facilitator. This investigation will include the process of determining:

- What happened?
- When the accident/incident occurred?
- Who were the personnel/students/visitors involved, either directly or indirectly?
- Where the accident/incident occurred?
- How the accident/incident occurred?
- Why the accident/incident occurred?

During the course of an accident/incident investigation all forms will be completed by the necessary personnel and maintained by the investigative team. All forms regarding accident/incident investigation will be available from the Site Directors and the Safety Facilitator. At the conclusion of the investigation, copies of all forms will be filed with the NWTC Safety Compliance Officer within a 24-hour period and kept on permanent file for an indefinite period of time.

As a result of the investigation, any need for training, engineering controls, or Personal Protective Equipment will be considered. All occurrences of accidents/incidents will be reviewed annually by the NWTC Safety Committee.

# Instructions for Completing Accident Report

Please print or type all information. Complete report in as much detail as possible.

## **I. General Information**

Fill in all information requested. Name of person injured, date, exact location, job title, job being performed, etc. For description of type of accident/illness, injury and body part, see the following:

### **A. Type of Accident/Illness**

- Slip/fall
- Struck by/against
- Caught in/on/between
- Contact with/by
- Over exertion/lifting
- Burn by
- Cut by
- Amputation

### **B. Type of Injury**

- cut
- bruise
- puncture
- abrasion
- strain
- sprain
- burn
- irritation
- swelling
- fracture

### **C. Part of Body Injured**

(select as many as needed)

- thumb/finger/hand/wrist
- elbow/arm/shoulder
- toe/foot/ankle
- leg/knee/hip
- head/neck/face
- nose/eye/ear/throat
- chest/abdomen
- Upper back/lower back

## **II. Description of Accident**

Describe in as much detail as possible where and how the accident happened. This section is for facts, not opinions. Statements the injured or witnesses made should be detailed. Use an additional piece of paper if more space is needed. Include sketches or photos if they help explain what happened.

## **III. Causes**

**Identify and describe in detail type of equipment, tools, processes etc., unsafe conditions (mechanical, physical, environmental) and/or personal factors involved in the accident.**

Discuss the use and requirements regarding any personal protective equipment. Through interviews and investigation is the accident chargeable to the employee? Was the accident preventable? (If yes to either, explain in detail.)

## **IV. Recommendations**

Once causes are identified, action must be taken to prevent the same thing from happening again. Realistic yet effective recommendation should be implemented. The form should be signed and dated by the appropriate supervisor.

## **V. Follow-Up**

List actions which have been taken and their respective completion date. Proper follow-up should continue on any incomplete recommendations.

General Information	<b>Supervisor</b>			<b>Equipment</b>		<b>Unit #</b>	
	Name:			Was there a fatality?	Yes	No	
	Faculty	Staff	Student	Was anyone sent to the hospital?	Yes	No	
	Department:			Was a citation issued?	Yes	No	
	Date of Report:			Was NWTC vehicle towed?	Yes	No	
	Accident Reported To:			Was other vehicle towed?	Yes	No	
	Date of Accident/Injury:			If the answer to any question above was yes, a driver must take a drug and alcohol test within 2 hours of accident.	CDL		
	Other Person Involved (Name):						
	Part of Body Injured:			Was test given?	Yes	No	
	Treatment:			If so, were proper authorities notified?	Yes	No	
	First Aid	Medical	Hospital	Did employee return to work the same day?	Yes	No	
	None						
	Descp.	Where and how did the accident happen? (Use additional sheets if necessary)					
Causes	Specify machinery, substance, or object connected with the accident.						
	Unsafe mechanical/physical/environmental condition at the time of the accident. (Be Specific)						
Recmndt							
	Personal factors (Attitude, lack of knowledge or skill, slow reaction, fatigue)						
	Personal protective equipment required						
Follow Up	Was injured employee using required equipment?						
	Action plan to prevent recurrence ((Modification of machine, mechanical guarding, environment, and training)						
Supervisor's Signature				Date			
Actions taken on recommendations (Include date completed)							

## **SECTION III**

# **HAZARD PREVENTION AND CONTROL**

## **HAZARD PREVENTION AND CONTROL PROGRAM**

Northwest Technology Center personnel will work diligently to prevent hazards and accidents through the use of appropriate control measures and preventive maintenance. The methods of preventing or controlling hazards will consist of:

- Engineering Controls
- Safe Work Practices
- Personal Protective Equipment
- Administrative Controls
- Preventive Maintenance Program

### **ENGINEERING CONTROLS**

The work environment and the job itself will be designed to eliminate or reduce employee exposure to hazards. The NWTC engineering controls will be based on the following general principles:

- If feasible, the facility and equipment will be designed to remove hazards and/or introduce a non-hazardous or less hazardous substitute.
- If removal or substitutions are not feasible, the hazard will be enclosed to prevent exposure in normal operations.
- Where complete enclosure is not feasible, barriers or local ventilation will be established to reduce exposure to the hazard in normal operations.

### **Elimination of hazards by design**

Present and future NWTC facilities and equipment will be designed to eliminate potential hazards and offer the safest environment within the feasibility of annual financial resources of the district.

### **Enclosure of hazards**

When a hazard cannot be removed and cannot be replaced with a less hazardous alternative, the enclosure process will be utilized. This will prevent exposure during normal operations. Potential exposure may occur during maintenance operations or if the enclosure system breaks down. In this case, additional controls, such as safe work practices or personal protective equipment, may be necessary to control exposure.

### **Barriers or local ventilation**

When the potential hazard cannot be removed, replaced, or enclosed the approach will be barrier to exposure or local ventilation. This control should be used in conjunction with other controls, such as safe work practices, personal protective equipment, and others as needed.

## **SAFE WORK PRACTICES**

An important part of the NWTC hazard prevention and control program will be the Hazard Controls. These controls will play a major part in identifying acceptable and unacceptable behavior. The unacceptable hazardous practices will be as follows:

- Failing to follow rules and regulations regarding the use of equipment or materials.
- Creating unsafe conditions
- Tampering with machine guards and/or removing tags or locks.
- Failing to wear appropriate and required Personal Protective Equipment.
- Creating unsanitary conditions or failing to follow good housekeeping practices.
- Using equipment or materials without authorization and/or proper training.

## **Positive Reinforcement**

A system of positive reinforcement will be used as a method to acknowledge NWTC personnel who follow the established safe work procedures. The charting of OSHA Recordable will be kept in the NWTC Faculty Work Room to serve as an incentive for the continuance of safe work practices.

## **Enforcement**

Safe work practices will be made a condition of employment. The degrees of negligence will consist of:

- Accidental/Careless Negligence
- Blatant/Intentional Negligence
- Malicious Negligence

The disciplinary procedures will be enforced up to and including termination for willful violations.

## **PERSONAL PROTECTIVE EQUIPMENT**

All personnel will receive training in the proper use of Personal Protective Equipment (PPE). Employees will be provided with all necessary Personal Protective Equipment.

## **PREVENTIVE MAINTENANCE PROGRAM**

The preventive maintenance program will be established in order to reduce the risk of possible hazards. Manufacturer's recommended guidelines and NWTC maintenance schedules will be followed to keep the process operating appropriately. An NWTC workplace survey will be used to identify all equipment or processes which may require routine maintenance. The NWTC Preventive Maintenance Program will be readily accessible. All completed maintenance records will be kept on file with the appropriate staff.

**SECTION IV**  
**EMERGENCY PREPAREDNESS**  
**PLAN**

## **EMERGENCY PLANNING AND PREPARATION**

Emergencies are not part of the expected daily routine, but they may happen any day. During these emergencies, hazards sometimes appear that normally are not found in the NWTC workplace. Therefore, the following Emergency Management Plan has been written and put into effect in the event an emergency does occur.

### **PURPOSE**

- A. This plan has been developed to provide a comprehensive (multi-use) Emergency Preparedness Program for Northwest Technology Center. It seeks to prepare for measures to be taken which will preserve life, minimize damage, enhance response during emergencies and provide necessary assistance.
- B. This plan attempts to define who does what, when, where, and how, in order to prepare for and respond to the effects of natural disasters, technological accidents, classroom accidents, and other major incidents/hazards.

### **SITUATION AND ASSUMPTIONS**

- A. Northwest Technology Center Alva Campus is located in the southwestern city limits of Alva, Oklahoma. Northwest Technology Center Fairview Campus is located in the southwestern limits of Fairview, Oklahoma. The campuses are exposed to many hazards, all of which have the potential for disrupting operations, causing damage and creating casualties. Potential hazards, which may occur in or around the school, are floods, tornadoes, winter storms, civil disorder, Hazmat incidents, power failure, and fires.
- B. Northwest Technology Center will continue to be exposed to the hazards identified above as well as others, which may develop in the future. NWTC officials will continue to recognize their responsibilities with regard to safety and exercise their authority to implement this emergency preparedness plan in a timely manner when confronted with real or threatened disaster.

### **CONCEPT OF OPERATIONS**

- A. Northwest Technology Center is undertaking comprehensive management of emergencies in order to protect life and property from the effects of hazardous events. This plan is based upon the concept that various groups assisting in an emergency situation will perform emergency functions. In some cases, this will parallel their normal day-to-day functions. To the extent possible, personnel will be used in a manner which is best suited for their training.
- B. Day-to-day functions, which do not contribute directly to response actions to an emergency, may be suspended for the duration of the emergency. The resources and efforts that would normally be required for those functions may be diverted to the accomplishment of emergency tasks by the department managing the use of those resources.
- C. The emergency management plan is concerned with all types of hazards which may develop in or around the school.

## **PLAN DEVELOPMENT AND MAINTENANCE**

- A. The contents of the plan must be known and understood by those people responsible for its implementation.
- B. NWTC Site Directors are responsible for the development and maintenance of their respective segments of this plan and the appropriate supporting Standard Operating Procedures.
- C. An annual review of this plan will be conducted by the NWTC Safety Committee.
- D. The plan will be tested at least once a year in the form of a simulated emergency exercise in order to provide practical, controlled experience to all employees.

## **DISTRIBUTION**

Copies of the Emergency Management Plan will be distributed to staff and to local and county emergency management agencies.

## **EMERGENCY PREPAREDNESS**

Listed below are possible emergency situations that might occur at or in the vicinity of Northwest Technology Center. These emergencies are defined and the steps of action are listed for each possible event.

All emergency notification procedures will come through the school's alarm, intercom system, and or and/or "All Call" systems

Examples of emergency notification are:

**Fire**.... A buzzing alarm with flashing lights and/or an announcement over the intercom system "There is a **Fire** in the Building EVACUATE THE BUILDING"

**Tornado**....A long continuous siren tone and/or an announcement over the intercom system "This is a **Tornado** Warning.... GO TO THE NEAREST TORNADO SHELTER"

**Lock Down**.... A warble tone at the Alva Campus and an announcement over the intercom system at the Fairview Campus "This is a campus wide **LOCK DOWN**.... LOCK DOWN ALL ROOMS AND BUILDINGS IMMEDIATELY"

**Evacuation**....An announcement over the intercom system "This is a campus wide **EVACUATION**.... EVACUATE ALL BUILDINGS"

**Shelter in Place**....An announcement over the intercom system "This is a campus wide **SHELTER IN PLACE ALERT**.... Close all windows and doors and turn off all HVAC systems.... Remain inside until the "All Clear" is given"

REMAIN IN THIS POSITION UNTIL THE "ALL CLEAR" IS GIVEN

**SECTION V**  
**SAFETY AND HEALTH TRAINING**

## **SAFETY AND HEALTH TRAINING**

All employees of Northwest Technology Center will participate in safety training each year. The minimum will be four (4) hours of training per year, one (1) hour per quarter. Some employees may require more training designed for their specific job tasks.

## **PROGRAM REVIEW**

An overall review of the NWTC Safety and Health Program will be conducted annually by the Superintendent, the Site Director(s), the Safety Facilitator, the Safety Compliance Officer(s), and the Safety Committee.

Each component of the safety program will be analyzed to determine what is working well and what changes are needed. The result of the program review will be communicated with all NWTC employees.



## Northwest Technology Center – Alva Campus Staff Quarterly Safety Training

All training will be from 11:30am-12:30pm in the Seminar Room unless announced otherwise. Training will be held quarterly with the dates and topics to be determined based on mandatory training topics, incidents reported, and recommendations by the Safety Committee.

- 1<sup>st</sup> Quarter     July, August, September - Dates to be determined and documented
- 2<sup>nd</sup> Quarter    October, November, December - Dates to be determined and documented
- 3<sup>rd</sup> Quarter     January, February, March - Dates to be determined and documented
- 4<sup>th</sup> Quarter     April, May, June - Dates to be determined and documented

### Quarterly Safety Topics to be determined

- |                               |                                    |
|-------------------------------|------------------------------------|
| Bloodborne Pathogens          | Positive Safety Attitudes          |
| Fire Extinguisher             | Ergonomics/Back Injury Prevention  |
| Hazardous Communications      | Office Safety                      |
| Emergency Evacuation Plan     | Housekeeping                       |
| Lockout/Tagout                | Slips, Trips, & Falls              |
| Personal Protective Equipment | Emergency Care                     |
| Electrical Awareness          | Recognizing Drug and Alcohol Abuse |

## Safety Training schedule for Northwest Technology Center - Fairview Campus

- 1<sup>st</sup> Quarter     July, August, September - Dates to be determined and documented
- 2<sup>nd</sup> Quarter    October, November, December - Dates to be determined and documented
- 3<sup>rd</sup> Quarter     January, February, March - Dates to be determined and documented
- 4<sup>th</sup> Quarter     April, May, June - Dates to be determined and documented

### Quarterly Safety Topics to be determined

- |                               |                                    |
|-------------------------------|------------------------------------|
| Bloodborne Pathogens          | Positive Safety Attitudes          |
| Fire Extinguisher             | Ergonomics/Back Injury Prevention  |
| Hazardous Communications      | Office Safety                      |
| Emergency Evacuation Plan     | Housekeeping                       |
| Lockout/Tagout                | Slips, Trips, & Falls              |
| Personal Protective Equipment | Emergency Care                     |
| Electrical Awareness          | Recognizing Drug and Alcohol Abuse |

**SECTION VI**  
**HAZARD COMMUNICATION PLAN**

Northwest Technology Center  
Hazard Communication Plan

I. Purpose

The Purpose of this plan is to ensure that our employees are informed of hazardous chemicals in the workplace, what the hazards of the chemicals are and effective means of avoiding the hazards. This plan is designed to meet the criteria established in **TITLE 380. Department of Labor, Chapter 45, Oklahoma Hazard Communication Standard**. It is available for review by employees upon request.

II. Hazard Evaluation

As a user of chemicals supplied by others, we will rely on the hazard determination indicated on Safety Data Sheet (SDS) supplied by the manufacturer.

III. **Chemical Inventory List**

A **Chemical Inventory List (CIL)** containing the common and trade names of all hazardous chemicals present in the workplace will be maintained. A **Master CIL** will be kept in the **Teachers' Work Room at the Alva Campus** and **Main Office at the Fairview Campus** and will be available for review by any employee. **CIL's** specific to work areas will be kept in **Individual Work Areas**. The **Master CIL** will be reviewed **annually by the Safety Facilitator**. A **master CIL shall be maintained in alphabetical order cross referenced to their chemical names**. **Any new hazardous chemical introduced into the**

**workplace shall be added to the CIL within 15 working days by the appropriate staff. This list shall be reviewed annually. A chemical exposure record shall be maintained for each employee who has had a chemical exposure documenting the type of exposure(s) received throughout their employment in the workplace. This documentation shall include the name(s) of the chemical(s), the date(s) of exposure(s) and any other pertinent information to adequately make any necessary medical determinations should medical problems arise in the future. This information shall:**

1. Be stored for not less than 40 years; or
2. Be provided to employees on a regular periodic basis, or upon termination in a form that includes the following statement.

“You should preserve this report for future references.”

Whenever an employer discovers that an employee has received a potentially hazardous exposure to any substance or agent covered under this Chapter, the employer shall immediately notify the employee of the exposure and take such steps as may be necessary to provide medical evaluation, monitoring, or treatment.

#### IV Definitions

The following words and terms, when used in this Chapter shall have the following meaning, unless the context clearly indicates otherwise:

“**Aggregate amount**” means any combination of hazardous material(s) as defined by this Chapter.

“**Article**” means a manufactured item other than a fluid or particle:

- (A) Which is formed to a specific shape or design during manufacture;

(B) Which has end use function(s) dependent in whole or in part upon its shape or design during end use; and

(C) Which under normal conditions of use does not release more than very small quantities, e.g., minute or trace amounts of a hazardous chemical and does not pose a physical hazard or health risk to employees.

**“Asbestos containing material”** means any material that has been determined by a competent laboratory facility to contain more than one percent (1%) asbestos by weight.

**“Chemical”** means any element, chemical compound or mixture of elements and/or compounds.

**“Chemical manufacturer”** means an employer with a workplace where chemical(s) are produced for use or distribution.

**“Chemical name”** means the scientific designation of a chemical in accordance with the nomenclature system developed by the International Union of Pure and Applied Chemistry (IUPAC) or the Chemical Abstract Service (CAS) rules of nomenclature or a name, which will clearly identify the chemical for the purpose of conducting a hazard evaluation.

**“Combustible liquid”** means any liquid having a flashpoint at or above 100 F (37.8 C), but below 200 F (93.3 C), except any mixture having components

**“Common name”** means any designation of identification, such as code name, code number, trade name, and brand name or generic name used to identify a chemical other than by its chemical name.

**“Compressed gas”** means:

- (A) A gas or mixture of gases having, in a container, an absolute pressure exceeding 40 psi at 70 F (21.1 C); or
- (B) A gas or mixture of gases having, in a container, an absolute pressure exceeding 104 psi at 130 F (54.4 C) regardless of the pressure at 70 F (21.1 C); or
- (C) A liquid having a vapor pressure exceeding 40 psi at 100 F (37.8 C) as determined by ASTM D-323-72.

“**Container**” means any bag, barrel, bottle, box, can, cylinder, drum, storage tank, reaction vessel, or the like that contains a hazardous chemical. For purposes of this section, pipes or piping systems, and engines, fuel tanks, or other operating systems in a vehicle, are not considered to be containers.

“**Distributor**” means a business other than a chemical manufacturer or importer, which supplies hazardous chemicals to other distributors or to employers.

“**Employee**” means a person permitted to work by an employer in employment.

“**Employee representative**” means any individual or organization to which an employee gives written authorization to exercise such employee’s rights under this rule. A recognized or certified collective bargaining agent shall be treated automatically as a designated representative without regard to written employee authorization.

“**Employer**” means any entity if the state and its political subdivisions, which has in its employ one or more individuals performing services for it in employment.

“**Explosive**” means a chemical that causes a sudden, almost instantaneous release of pressure, gas, and heat when subjected to sudden shock, pressure, or high temperature.

“**Exposure or exposed**” means that an employee is subjected in the course of employment to a level above that allowed by 29 CFR 1910 of a chemical that is a physical or health hazard and includes accidental or possible exposure.

“Subjected” in terms of health hazards include any route of entry (e.g., inhalation, ingestion, skin contact or absorption).

“**Facility**” means all buildings and other stationary items located on contiguous property under common ownership or control.

“**Fire department**” means any duly constituted fire department operating under the authority of Title 11 article XXIX fire departments or Title 19 Chapter 21 fire protection districts meeting the definition of employer. Industrial fire brigades are excluded from this definition. However, fire departments and industrial fire brigades are covered by regulations of other agencies.

“**Flammable**” means a chemical that falls into one of the following categories:

(A) “**Aerosol, flammable**” means an aerosol that, when tested by the method described in 16 CFR 1500.45, yields a flame projection exceeding 18 inches at full valve opening, or a flashback (a flame extending back to the valve) at any degree of valve opening.

(B) “**Gas, flammable**” means:

- a. A gas that, at ambient temperature and pressure, forms a flammable mixture with at a concentration of thirteen (13) percent by volume or less; or

- b. A gas that, at ambient temperature and pressure, forms a range of flammable mixtures with air wider than twelve (12) percent by volume, regardless of the lower limit.

(C) “**Liquid, flammable**” means any liquid having a flashpoint below 100 F (37.8 C), except any mixture having components with flashpoints of 100 F (37.8 C) or higher, the total of which make up ninety-nine (99) percent or more of the total volume of the mixture.

(D) “**Solid, flammable**” means a solid, other than a blasting agent or explosive as defined in 29 CFR 1910.109(a), that is liable to cause fire through friction, absorption of moisture, spontaneous chemical change, or retained heat from manufacturing or processing, or which can be ignited readily and when ignited burns so vigorously and persistently as to create a serious hazard. A chemical shall be considered to be a flammable solid if, when tested by the method described in 16 CFR 1500.44, it ignites and burns with a self-sustained flame at a rate greater than one-tenth of an inch per second along its major axis.

“**Flashpoint**” means the minimum temperature at which a liquid gives off a vapor in sufficient concentration to ignite when tested according to general industry standards. Organic peroxides, which undergo auto accelerating thermal decomposition, are excluded from any of the flashpoint determination methods specified above.

“**Foreseeable emergency**” means any potential occurrence such as, but not limited to, equipment failure, rupture of containers, or failure of control equipment, which could result in an uncontrolled release of a hazardous chemical into the workplace.

**“Hazardous chemical”** means any chemical, which is a physical hazard or a health hazard.

**“Hazard warning”** means any words, pictures, symbols, or combination thereof appearing on a label or other appropriate form of warning, which convey the specific physical and health hazard(s), including target organ effects, of the chemical(s) in the container(s). (See the definitions for “physical hazard” and “health hazard” to determine the hazards which must be covered.)

**“Health hazard”** means chemicals which are carcinogens, toxic or highly toxic agents, reproductive toxins, irritants, corrosives, sensitizers, hepatotoxins, nephrotoxins, neurotoxins, and agents which act on the hematopoietic system, and agents which damage the lungs, skin, eyes, or mucous membranes. 29 CFR 1910.1200 Appendix A provides further definitions and explanations of the scope of health hazards covered by this section, and Appendix B describes the criteria to be used to determine whether or not a chemical is to be considered hazardous for purposes of this standard.

**“Identity”** means any chemical substance or common name, which is indicated on the safety data sheet (SDS) or material safety data sheet (MSDS) for the chemical. The identity used shall permit cross-references to be made among the required list of hazardous chemicals, the label and the SDS or MSDS.

**“Immediate use”** means that the hazardous chemicals will be under the control of and used only by the person who transfers it from a labeled container and only within the work shift in which it is transferred.

**“Label”** means any written, printed, or graphic material displayed on or affixed to containers of hazardous chemicals.

**“Laboratory”** means an educational or testing facility where relatively small quantities of hazardous chemicals are used in a non-production basis. This definition does not include research laboratories.

**“Manufacturer”** means a person or establishment where hazardous chemicals are produced, synthesized, extracted, imported, or otherwise made for use or distribution.

**“Mixture”** means any combination of two or more chemicals if the combination is not, in whole or part, the result of a chemical reaction.

**“Organic peroxide”** means an organic compound that contains the bivalent –O-O-structure and which may be considered to be a structural derivative of hydrogen peroxide where one or both of the hydrogen atoms have been replaced by an organic radical.

**“Oxidizer”** means a chemical other than a blasting agent or explosive as defined in 29 CFR 1910.109 (a), that initiates or promotes combustion in other materials, thereby causing fire either of itself or through the release of oxygen or other gases.

**“Physical hazard”** means a chemical for which there is scientifically valid evidence that it is a combustible liquid, a compressed gas, explosive, flammable, an organic peroxide, an oxidizer, pyrophoric, unstable (reactive) or water-reactive.

**“Proprietor”** means the owner, manager, or other person or organization, which has control over any location where hazardous chemicals are, present, and which is subject to the jurisdiction of employers subject to the provisions of this Chapter.

**“Produce”** means to manufacture, process, formulate, blend, extract, generate, emit, or repackage.

**“Pyrophoric”** means a chemical that will ignite spontaneously in air at a temperature of 130 F (54.4 C) or below.

**“Research Laboratory”** means a specifically designated area used primarily for research and/or development, and not primarily involved in the production of goods in which hazardous chemicals are used.

**“Responsible party”** means someone who can provide additional information on the hazardous chemical and appropriate emergency procedures, if necessary.

**“Safety Data Sheet”** (SDS) means written or printed material concerning a hazardous chemical, which is prepared in accordance with 29 CFR 1910.1200 (g).

**“Service contractor”** means any person, company, or corporation that provides a service to the employer with or without a written agreement.

**“Safety coordinator”** means an employee who has been designated by an employer to coordinate all safety programs of the employer. Employers may be designate more than one employee to assist by fulfilling specific functions, but the safety coordinator must have ultimate responsibility for implementing the safety programs.

**“Significant amount”** means any amount of hazardous material(s) meeting the criteria in 380:45-5-5©.

**“Specific chemical identity”** means the chemical name, Chemical Abstracts Service (CAS) Registry Number, or any other information that reveals the precise chemical designation of the substance.

**“Trade secret”** means any confidential formula, pattern, process, device, information or compilation of information that is used in an employer’s business, and that gives the employer an opportunity to obtain an advantage over competitors who do not know to use it. 29 CFR 1910.1200 Appendix D sets out of the criteria to be used in evaluating trade secrets.

**“Unstable (reactive)”** means a chemical, which in the pure state, or as produced or transported, will vigorously polymerize, decompose, condense, or will become self-reactive, under conditions of shocks, pressure or temperature.

**“Use”** means to package, handle, react, emit, extract, generate as a byproduct, or transfer.

**“Water-reactive”** means a chemical that reacts with water to release a gas that is either flammable or presents health liquids.

“**Wet floor**” means a floor, which is used on an occasional to routine basis to collect, contain, maintain, or transmit standing liquids.

**Work area**” means a room or defined space in a workplace where hazardous chemicals are produced or used and where employees are present.

“**Workplace**” means any location away from home, permanent or temporary, where any employee performs any work-related activity in the course of his/her employment. This includes any establishment, job site, or project at one geographical location containing one or more work areas. Included are all pertinent conditions, structures, machines, vehicles, apparatus, devices, equipment and materials therein.

#### V. Safety data sheets

SDS for hazardous chemical in the workplace will be obtained and will be kept in the “right to know station” or available through the Verisk 3E (800-4518346 or 760-602-8703).

When any new hazardous chemical is to be introduced into the workplace, the SDS shall be on file prior to beginning use of the chemical.

SDS will be used as an integral part of the employee-training program on hazardous chemicals and will be available for review at any time by employees. Employees purchasing hazardous chemicals are required to obtain SDS from suppliers or the Verisk 3E hotline (800-451-8346 or 760-602-8703) upon initial purchase or change in product. The Central Office Administrative Professional maintains the Master SDS Chemical Inventory List and SDS manuals for the Alva Campus. The Safety Compliance Officer, Maintenance Personnel and Program

Instructors are responsible for maintaining the Master SDS Chemical Inventory List and SDS manuals at the Fairview Campus. SDS will be available for review to authorized employees of ODOL upon request.

VI. Access to Written Records: Availability

- A. Upon request by an affected employee or employee representative, the employer shall assure access to copies to the CIL(s) and SDS(s) required by these regulations and shall ensure that they are readily accessible as soon as possible in reasonable time, place, and manner, but in no event later than one working day after the request for access is made.
- B. In addition, whenever any affected employee or employee representative requests a copy of the CIL and SDS, the employer shall, within fifteen days, assure that either a copy or a mechanical means to copy is provided. In case of a medical emergency, the information shall be provided immediately.

VII. Labels

Each container of hazardous chemicals must be labeled. Labels, tags or other markings on containers of hazardous chemicals in the facility must provide as a minimum the name of the hazardous chemical and the appropriate hazard warning, or alternatively words, pictures, symbols, or combination of, which provide at light general information regarding the hazard of the chemical(s) regarding the physical and health hazards of the hazardous chemical. Containers leaving the workplace must contain the name and address of the manufacturer. Pipes and portable containers of hazardous chemicals for immediate use of the employee need to be marked. Signs, placards or other such written material may be used in lieu of labels on individual stationary containers as long as they contain the same information and are readily accessible to employees. The label to be

used at this facility will be one on which a numerical value (0-4) is assigned to designate the type and degree of health, flammability, and /or reactivity hazards. Safety data sheets for each of these chemicals are to be on hand to further assess the hazardous characteristics and emphasize controls to be followed. Employees shall ensure that labels in containers are not defaced or removed.

#### VIII. Training

Employees shall be provided with information and training on hazardous chemicals in their work area at the time of their initial assignment and whenever a new hazard is introduced into their work area.

Employees will be advised of the requirements of the Hazard Communication Standard, any operation in their work area involving hazardous materials and the location of the Hazard Communication Plan. The plan will be available to employees for review upon request.

Training shall be provided which will include ways and means of detecting presence or release of hazardous material, what the hazard of the material is, protective measures to be used and what measures have been taken to reduce the chance of exposure. Training will also include an explanation of our labeling system and Safety data sheets. Employees will be taught how to read the SDS, what they mean and where they can be located.

All safety-training records will be kept in the **main office**. Hazard Communication training will be part of regularly scheduled safety meetings.

Miscellaneous

**Maintenance Department** will meet with contractors to ensure they are advised of potentially hazardous chemical exposures in areas in which their employees might be working. Safety data sheets will be provided to the contractor for use in training his employees. Similar arrangements will be made to ensure knowledge of exposures brought on the premises by the contractor.

IX. Fire Safety

The Safety Compliance Officer will provide a facility map to the local fire department(s).

X. Placarding

(A) NWTC shall comply with the sign posting requirements of 380:45-55(a)(2) if the building, structure, or locations within the building or structure contains a significant amount of the hazardous chemical as defined in 380:45-5-5(c). The National Fire Protection Association's standard system for identifying fire hazards of chemicals based on NFPA Standard 704 as currently published and as hereafter may be revised shall be adopted by incorporation. If a building or structure has a floor space of five thousand (5,000) square feet or less, a proprietor shall post a sign on every side of the outside, the proprietor shall post a sign at the place within the building where significant amounts of hazardous chemicals are permanently stored to identify the type of hazardous chemical. If hazardous chemicals are moved within the building, the proprietor shall also move the sign or post an additional sign at the location(s) where the

hazardous chemical is moved. This subsection applies to significant amounts of a hazardous chemical being moved. The subsection applies to significant amounts of hazardous chemical as defined in 380:45-5-5(c).

(B) Proprietor variance applications. A proprietor may make application to Commissioner for less stringent sign posting requirements.

a. The proprietor shall make written application for a variance.

### **EMPLOYEE RIGHTS AND RESPONSIBILITIES**

XI. Employee protection

(A) If any employee has requested information pursuant to 380:45-53-5 and has not received the information within the specified time period, the employee may then refuse to work with the substances or at the location for which the request was made. An employer may not discharge or initiate any adverse personnel action against any employee because the employee had exercised his/her right under this provision. An employer may not request or require any employee to waive any rights under these regulations and in any event such waivers are executed they shall be null, void, and unenforceable.

Disciplinary action

(B) Employee working in areas where exposure(s) to hazardous chemicals exist shall be required to perform their jobs in accordance with precautions communicated to them during training and information programs. Employers may take appropriate disciplinary action when an employee does not comply with the precautionary measures this Chapter mandates.

Hazardous exposure

- (C) An employee, upon receiving a potentially hazardous exposure to any substance or agent covered under this Chapter, shall immediately notify to employers of such exposure.

## XII. Enforcement

The provisions of these regulations shall be enforced pursuant to the provisions of Title 40, Chapter 10 Oklahoma Occupational Health and Safety Standards Act. Employers shall be in compliance with all provisions of this Chapter, October 1, 2000.

## XIII. Labeling

Pipes, boilers, storage vessels, structural members, or equipment with insulating material that might be removed, penetrated, damaged, or otherwise distributed by repair, remodeling, renovation, maintenance, or other activity, shall be labeled with cautionary labels. Such caution labels shall be printed in letters of sufficient size and contrast as to be readily visible and legible. Each room or area where the conditions requiring such labels exist shall have a minimum of one such label, and such additional labels as may be necessary to ensure ready visibility and legibility. Such equipment with asbestos containing material shall bear the following label:

DANGER  
CONTAINS ASBESTOS FIBERS  
AVOID CREATING DUST  
CANCER AND LUNG DISEASE HAZARD

## Asbestos notice

For facilities with asbestos containing material used as acoustical material on ceilings or walls, employers or their representatives having administrative jurisdiction over such facilities shall ensure that a notice is posted informing employees of the presence of asbestos in the workplace and which contains at least the following:

### NOTICE TO EMPLOYEES

This facility has been inspected for the presence of asbestos containing material.  
Asbestos containing material is present in this facility.  
Asbestos containing material may cause health problems.

## School inspections

Schools inspected pursuant to the Environmental Protection Agency's asbestos inspection program (40 CFR Part 763) and having complied with the notification requirement contained therein (40 CFR 763.6) shall be exempt from the requirements of 380:45-15-2.

## XIV. HAZARD COMMUNICATION COMMITTEE

Establishing a committee which will consist of Northwest Technology Center Safety Committee members.

In order to more effectively administer the Oklahoma State Hazard Communication (Right to Know) standard, the Commissioner of Labor may, when needed, establish a committee to study emergency response and hazard communication problems.

**SECTION VII**  
**RESPIRATORY PROGRAM**

NORTHWEST TECHNICAL CENTER  
RESPIRATOR PROGRAM

I. **INTRODUCTION**

In the control of occupational diseases caused by breathing air contaminated with gases or aerosols, the primary objective is to prevent harmful exposure. This is accomplished by accepted engineering control measures- (for example, general and local ventilation, enclosure or isolations, and substitution of less hazardous processes or materials). When effective engineering controls are not feasible, or while they are being instituted, appropriate respirators may be required.

II. **PURPOSE AND SCOPE**

Where respirators are required for health protection, general and specific procedures are essential to overcome potential deficiencies and to assure effectiveness.

The practices and procedures described here constitute the program under which respirators are effectively utilized at NWTC.

III. **RESPONSIBILITY**

A. Northwest Technology Center will be responsible for:

1. Provision of appropriate respirators.
2. Implement training and instruction programs.

3. Ensure that the standard operating procedures include the requirement for respirator use where necessary.
4. Technical assistance in determining the need for and selection of respirators for use in routine and emergency situations.
5. Institute monitoring and surveillance of work area conditions. B.

Northwest Technology Center is responsible for:

1. Ensuring that respirators are available as needed.
2. Insuring that employees wear respirators as required
3. Periodic inspection of individually assigned respirators. C. The

employees are responsible for:

1. Using the respirator supplied to him/her in accordance with instructions and training.
2. Reporting a respirator malfunction to supervision and/or the Safety Department.

#### **IV. RESPIRATOR SELECTION**

The Supervisors will select respirators. This choice is based on the physical, chemical, and physiological properties of the air contaminant, and on the concentration likely to be encountered. The quality of air and the nature of work being done also affect the choice of respirators. The capability of the respirators chosen is determined from appropriate governmental approvals, manufacturer's tests and actual experience with the respirators. The approvals, manufacturer's tests, and actual experience with the respirators. The respirators used are described in the attached "Respirator Selection Guide".

## V. CLASSIFICATION OF HAZARDS

### *Oxygen Deficiency Atmosphere:*

Normal air contains about 21% oxygen by volume. An atmosphere with less than 16% oxygen by volume is insufficient for human needs. Oxygen deficiency may result from:

#### I.

- A. Depletion of oxygen by combustion, chemical reaction or absorption.
- B. Displacement of air by other gases or vapors
- C. Use of inert atmospheres
- D. Re-breathing air in a confined space.

#### II. TOXIC AND NUISANCE ATMOSPHERES

Air contaminants include particulate matter in the form of individual particles of solids or liquids, gaseous material, or a combination of both. Types of particulate matter are classified as mist, dust, fog fumes, smoke, and living organisms. Types of gaseous contaminants is classified as inert gas, acid gas, alkaline gas, organic compounds, and metallic compounds.

#### III. TYPES OF RESPIRATORS

##### A. Air Purifying

Air purifying respirators remove contaminants from the atmosphere.

Chemical cartridge respirators remove specific gases and vapors in low concentration from the atmosphere. Mechanical filter respirators are used for non-volatile dust, mist, or metal fumes. Air purifying respirators are used only in atmospheres containing a minimum of 19.5% oxygen and where the concentration, toxicity, or particle size does not exceed the limitations of the particular respirator protection device.

B. Supplied Air

Supplied air respirators deliver breathing air through a supply hose connected to the user's face piece or hood. These devices must not be used in atmospheres immediately dangerous to life.

C. Self-contaminated Breathing Apparatus

These respirators provide protection in H<sub>2</sub>S, ammonia, gaseous or oxygen deficient atmospheres. The user breathes with a system that admits no outside air and is, therefore, independent of the surrounding atmosphere.

D. Available Respirators at NWTC

1. Air Purifying Respirators
2. Supplied Air Respirators

**IV. LIMITATIONS OF AIR PURIFYING RESPIRATORS:**

- A. The respirator does not supply oxygen and may be used only in the workplace.
- B. The respirators shall not be used in atmospheres that are immediately dangerous to life.
- C. The respirator is never to be altered or modified.

The respirators shall be used strictly in accordance with labels, instructions, and limitations pertaining to it.

**V. RESPIRATORY CLEARANCE CERTIFICATION**

Employees who are assigned to work, which requires the wearing of respirator equipment, must be physically able to perform the work and use the equipment. The Respirator User's Medical Status (Respiratory Clearance Certification) will be reviewed periodically to assure that the user is physically able to perform the work and use respiratory equipment.

## **VI. STORAGE**

After inspection, cleaning, and necessary repairs, respirators are stored to protect against dust, sunlight, heat, cold, moisture, or damaging chemicals.

Individually issued respirators are to be returned to their designated locations for storage.

Emergency respirators are to be returned to their designated locations for storage.

## **VII. TRAINING**

Every employee who may have to wear a respirator will be trained in the proper use of the respirator. Both the employee and his supervisor receive this training.

The training program outline is as follows:

- A. Instruction on respiratory hazards at facility.
- B. Description, intended use, and limitations of the respirator.
- C. Inspection and maintenance procedures.
- D. Cleaning and storage methods.
- E. Practical training—proper wearing, adjustment, and testing for fit

(See appendix B)

This training is repeated as necessary (semi-annually) to ensure that employees remain familiar with the proper use of respiratory protection. The training program is evaluated at least annually by the Safety Facilitator to determine its continued effectiveness.

## VIII. RECORDS

*The following records are maintained by the Safety Facilitator:*

- A. The number and types of respirators in use.
- B. A record of employee training and fit testing programs
- C. Inspection and maintenance records for emergency respirators.
- D. Medical certification that employee is capable of wearing a respirator under his work conditions.

**SECTION VIII**  
**RESPIRATORY PROGRAM**  
**APPENDIX A**

NORTHWEST TECHNOLOGY CENTER  
RESPIRATORY PROGRAM  
APPENDIX A

I. Introduction

The terms “respiratory protective devices” and “respirators,” as used throughout this appendix, include self-contained breathing apparatus, chemical cartridge respirators, and airline respirators, mechanical filter respirators, and combination mechanical filter-chemical cartridge respirators. Information in this Appendix will help in the proper selection of the appropriate kinds for specific operations, and in the development of the “Respirator Selection Guide” for the written respirator program.

II. Classes of Respiratory Protective Devices

A. Air Purifying Devices

1. This type removes contaminants from the atmosphere by filtration or absorption and can be used in atmospheres containing sufficient oxygen to sustain life (not less than 19.5%). Each respirator of this type has specific concentration limits for which it can safely be used. These devices are not to be used in atmospheres immediately dangerous to life/death.

The basic types are:

1. Mechanical Filter Respirators - For removal of particulate matters such as nonvolatile dusts, mists, or metal fumes.

Selection is based on the type, toxicity, and particle size of the particulate matter.

2. Chemical Cartridge Respirators- For gas and vapor concentrations not over 0.1% by volume.
3. Combination of Chemical Cartridge and Mechanical Filter Respirator- Provide protection against a mixture of particulate and gaseous matter.

#### B. Issuance of Respirators

1. Management reserves the right to determine if a respirator is needed.

#### C. Training Program

A training program will contain:

1. Instruction in the nature of hazard, and an appraisal of what may result if the respirator is not used.
2. An explanation of why engineering controls are not immediately possible, and that effort is being made to eliminate the need for respirators.
3. An explanation of why this is the proper type of respirator for the particular hazard.
4. An explanation of the care and cleaning program.
5. A discussion of the respirator's capabilities and limitations.
6. Fit testing- See Appendix C
7. Instruction and practical training in actual use, and close and frequent supervision to assure proper use.
8. Any other emergency or special instructions.

### III. Operating Procedures for Respirators

- A. NWTC will provide facilities for the proper storage and cleaning of respirators. They will be cleaned and disinfected daily, or after each individual use by the user.
- B. Respirators must be stored in a designated area when not being used.
- C. Whenever respirators are not in use, they must be stored in a clean plastic bag in which they were issued or in a suitable substitute.
- D. Respirators may not be worn when conditions prevent a good face seal such as growth of beard or missing dentures.
- E. Before and after using a respirator, the employee or immediate supervisor must make an inspection of tightness of connections and the condition of the face piece, head band, valves, filter holders and filters. Any questionable items must be corrected.
- F. To assure proper protection, the wearer before use must check the face piece seal.
  - 1. Positive pressure test: Close off the exhalation valve with your hand. Breathe air into the mask. The face seal is satisfactory if some pressure can be built up inside the mask without any air leaking out between the mask and the face of the wearer.
  - 2. Negative pressure test: Close off the inlet openings of the cartridge with the palm of your hand. Some masks may require that the filter holder be removed to seal off the intake valve.  
  
Inhale gently so that a vacuum occurs within the face piece. Hold your breath for 10 seconds. If the vacuum remains, and no inward leakage are detected, the respirator is properly adjusted.

#### IV. Maintenance and Care of Respirators

##### A. Inspection

1. All respirators shall be inspected routinely before and after each use.
2. A record shall be kept of inspection dates and findings for respirators maintained for emergency use.
3. Respirator inspection shall include:
  - a. Check of the tightness of connections and the condition of the face piece.
  - b. Check of the headbands.
  - c. Check of the valves.
  - d. Check of the connecting tube and canisters.
  - e. Rubber or elastomer parts shall be checked for pliability and deterioration.

##### B. Cleaning and Disinfections

1. Respirators shall be cleaned after each use.

##### C. Cleaning Procedure

1. Remove any filters, cartridges, headbands, and disassemble the major respirator parts.
2. Wash all respirator parts (except cartridges and elastic headbands) in a cleaner- disinfectant solution. Use a hand brush to remove dirt. Rinse completely in clean, warm water.
3. Air dry in a clean area.
4. Inspect all parts; replace defective parts.

5. Reassemble the respirator and insert new filters or cartridges.  
Make sure the seal is tight.
6. Disinfect all facial contact areas by spraying the respirator with an approved type of disinfectant.
7. Place the respirator in a new plastic bag and seal it for storage.
8. Disposable type respirators need no cleaning and disinfecting.

Follow the manufacturer's instruction on length and services.

#### D. Repair of Respirators

1. Only qualified persons shall do repair or replacement with parts designed for the respirators.
2. No attempt shall be made to replace components or to make adjustment or repair beyond the manufacturer's recommendation.
3. All respirator valves and regulators shall be returned to the manufacturer or to a trained technician for adjustment or repair.
4. Respirator components must not be mixed.

#### E. Storage of Respirators

1. After inspection, cleaning, and necessary repairs, respirators shall be stored to protect against dust, sunlight, heat, extreme cold, excessive moisture or damaging chemicals.
2. Individually assigned respirators, such as duct respirators, may be placed in plastic bags.
3. Individually assigned respirators shall not be placed in lockers or toolboxes.

4. All respirators shall be packed or stored so that the face piece and exhalation valve will rest in a near normal position.

V. Control and Evaluation of Respirator Program

In order to maintain an effective respiratory protection program, control and feedback on how the program is functioning are necessary. In this manner, improvements can be made and deficiencies eliminated. To evaluate the program, the following should be examined.

A. Wearer Acceptance

1. Comfort
2. Ability to breathe without objectionable effort
3. Adequate visibility under all conditions
4. Provisions for wearing prescription glasses
5. Ability to perform all tasks without undue interference
6. Confidence in the face piece fit.

B. Examination of Respirators in Use- Even though a respirator is worn conscientiously, the protection provided is not better than the condition of the respirator in use. Frequent inspections shall be conducted by a qualified individual to assure that respirators are properly selected, used, cleaned and maintained.

**SECTION IX**  
**RESPIRATORY PROGRAM**  
**APPENDIX B**

NORTHWEST TECHNOLOGY CENTER  
RESPIRATORY PROGRAM TRAINING OUTLINE  
APPENDIX B

I. Introduction and Hazard Review

- A. Explain why a respiratory policy is in the interest of their welfare.
- B. Discuss hazards of toxic material used at NWTC.
- C. Explain what would happen if respirators were not used.
- D. Discuss areas in the campus where exposure could exist.
- E. Discuss engineering controls and why they are sometimes not feasible.

II. Description, Intended Use and Limitations of Respirators

- A. Audiovisual programs may be utilized for training and general information sessions.
- B. Review types of respirators in use at NWTC. (Show different types used at NWTC.)
  - 1. Air purification types (dust masks, etc.).
- C. Discuss why the respirators NWTC have are suitable for exposure.
  - 1. NIOSH approvals
  - 2. Capabilities of masks- point out limitations of canisters in terms of ppm of contaminant.
  - 3. Discuss capabilities and limitations (19.5% O<sub>2</sub> does not provide oxygen, etc.).
  - 4. Discuss policy on facial hair, long hair, and importance of good respirator facial seal.

5. Operating procedures for respirators. (Follow manufacturer's instructions.)

III. Maintenance and Inspection- Discuss How to Perform

IV. Cleaning and Storage

(Follow manufacturer's instructions.)

V. Practical Training for Students

A. Have each student put on equipment.

B. Show proper method for fitting and testing-use attached fir test procedure.

C. Show eyeglass adapters.

VI. Discuss Any Other Emergencies, Special Instructions, or Handle Questions

**SECTION X**

**RESPIRATORY PROGRAM**

**QUANTITATIVE FIT TEST**

**PROTOCOLS**

**APPENDIX C**

**NORTHWEST TECHNOLOGY CENTER**  
**QUANTITATIVE FIT TEST PROTOCOLS**

**APPENDIX A SECTION 1910.134**

I. Northwest Technology Center will fit test its employees using either the Portacount Fit Test Method or the Controlled Negative Pressure (CNP) Quantitative Fit testing method.

**A. Portacount Fit Test Method**

1. Ambient aerosol condensation nuclei counter (CNC) quantitative fit testing protocol.

The ambient aerosol condensation nuclei counter (CNC) quantitative fit testing (Portacount™) protocol quantitatively fit tests respirators with the use of a probe. The probed respirator is only used for quantitative fit tests. A probed respirator has a special sampling device, installed on the respirator, that allows the probe to sample the air from inside the mask. A probed respirator is required for each make, style, model, and size that the employer uses and can be obtained from the respirator manufacturer or distributor. The CNC instrument manufacturer, TSI Inc., also provides probe attachments (TSI sampling adapters) that permit fit testing in an employee's own respirator. A

minimum fit factor pass level of at least 100 is necessary for a half-mask respirator and a minimum fit factor pass level of at least 500 is required for a full facepiece negative pressure respirator. The entire screening and testing procedure shall be explained to the test subject prior to the conduct of the screening test.

2. Portacount Fit Test Requirements.

- a. Check the respirator to make sure the sampling probe and line are properly attached to the facepiece and that the respirator is fitted with a particulate filter capable of preventing significant penetration by the ambient particles used for the fit test (e.g., NIOSH 42 CFR 84 series 100, series 99, or series 95 particulate filter) per manufacturer's instruction.
- b. Instruct the person to be tested to don the respirator for five minutes before the fit test starts. This purges the ambient particles trapped inside the respirator and permits the wearer to make certain the respirator is comfortable. This individual shall already have been trained on how to wear the respirator properly.
- c. Check the following conditions for the adequacy of the respirator fit: Chin properly placed; Adequate strap tension, not overly tightened; Fit across nose

bridge; Respirator of proper size to span distance from nose to chin; Tendency of the respirator to slip; Self-observation in a mirror to evaluate fit and respirator position.

- d. Have the person wearing the respirator do a user seal check. If leakage is detected, determine the cause. If leakage is from a poorly fitting facepiece, try another size of the same model respirator, or another model of respirator.
- e. Follow the manufacturer's instructions for operating the Portacount and proceed with the test.
- f. The test subject shall be instructed to perform the exercises in section I. A. 14. of this appendix.
- g. After the test exercises, the test subject shall be questioned by the test conductor regarding the comfort of the respirator upon completion of the protocol. If it has become unacceptable, another model of respirator shall be tried.

### 3. The Portacount Test Instrument

- a. The Portacount will automatically stop and calculate the overall fit factor for the entire set of exercises. The overall fit factor is what counts. The Pass or Fail message will indicate whether or not

the test was successful. If the test was a Pass, the fit test is over.

- b. Since the pass or fail criterion of the Portacount is user programmable, the test operator shall ensure that the pass or fail criterion meet the requirements for minimum respirator performance in this Appendix.
- c. A record of the test needs to be kept on file, assuming the fit test was successful. The record must contain the test subject's name; overall fit factor; make, model, style, and size of respirator used; and date tested.

**B. Controlled Negative Pressure (CNP) Quantitative Fit Testing Protocol**

- 1. The CNP protocol provides an alternative to aerosol fit test methods.

The CNP fit test method technology is based on exhausting air from a temporarily sealed respirator facepiece to generate and then maintain a constant negative pressure inside the facepiece. The rate of air exhaust is controlled so that a constant negative pressure is maintained in the respirator during the fit test. The level of pressure is selected to replicate the mean inspiratory pressure that causes leakage into the respirator under normal use conditions. With pressure held constant, air flow out of the respirator is equal to air flow into the respirator. Therefore, measurement

of the exhaust stream that is required to hold the pressure in the temporarily sealed respirator constant yields a direct measure of leakage air flow into the respirator. The CNP fit test method measures leak rates through the facepiece as a method for determining the facepiece fit for negative pressure respirators. The CNP instrument manufacturer Occupational Health Dynamics of Birmingham, Alabama also provides attachments (sampling manifolds) that replace the filter cartridges to permit fit testing in an employee's own respirator. To perform the test, the test subject closes his or her mouth and holds his/her breath, after which an air pump removes air from the respirator facepiece at a pre-selected constant pressure. The facepiece fit is expressed as the leak rate through the facepiece, expressed as milliliters per minute. The quality and validity of the CNP fit tests are determined by the degree to which the in-mask pressure tracks the test pressure during the system measurement time of approximately five seconds. Instantaneous feedback in the form of a realtime pressure trace of the in-mask pressure is provided and used to determine test validity and quality. A minimum fit factor pass level of 100 is necessary for a half-mask respirator and a minimum fit factor of at least 500 is required for a full facepiece respirator. The entire screening and testing procedure shall be explained to the test subject prior to the conduct of the screening test.

## 2. CNP Fit Test Requirements.

- a. The instrument shall have a non-adjustable test pressure of 15.0 mm water pressure.
- b. The CNP system defaults selected for test pressure shall be set at -- 15 mm of water (-0.58 inches of water) and the modeled inspiratory flow rate shall be 53.8 liters per minute for performing fit tests.

(**Note:** CNP systems have built-in capability to conduct fit testing that is specific to unique work rate, mask, and gender situations that might apply in a specific workplace. Use of system default values, which were selected to represent respirator wear with medium cartridge resistance at a low to moderate work rate, will allow inter-test comparison of the respirator fit.)

- c. The individual who conducts the CNP fit testing shall be thoroughly trained to perform the test.
- d. The respirator filter or cartridge needs to be replaced with the CNP test manifold. The inhalation valve downstream from the manifold either needs to be temporarily removed or propped open.
- e. The employer must train the test subject to hold his or her breath for at least 10 seconds.
- f. The test subject must don the test respirator without any assistance from the test administrator who is conducting the CNP fit test. The respirator must not be adjusted once the fit-test exercises begin. Any adjustment voids the test, and the test subject must repeat the fit test.
- g. The QNFT protocol shall be followed according to section I. C. 1. of this appendix with an exception for the CNP test exercises.

### 3. CNP Test Exercises.

- a. Normal breathing. In a normal standing position, without talking, the subject shall breathe normally for 1 minute. After the normal breathing exercise, the subject needs to hold head straight ahead and hold his or her breath for 10 seconds during the test measurement.
- b. Deep breathing. In a normal standing position, the subject shall breathe slowly and deeply for 1 minute, being careful not to hyperventilate. After the deep breathing exercise, the subject shall hold his or her head straight ahead and hold his or her breath for 10 seconds during test measurement.
- c. Turning head side to side. Standing in place, the subject shall slowly turn his or her head from side to side between the extreme positions on each side for 1 minute. The head shall be held at each extreme momentarily so the subject can inhale at each side. After the turning head side to side exercise, the subject needs to hold head full left and hold his or her breath for 10 seconds during test measurement. Next, the subject needs to hold head full right and hold his or her breath for 10 seconds during test measurement.
- d. Moving head up and down. Standing in place, the subject shall slowly move his or her head up and down for 1 minute. The subject shall be instructed to inhale in the up position (i.e., when looking toward the ceiling). After the moving head up and down exercise, the subject shall hold his or her head full up and hold his or her breath for 10 seconds

- during test measurement. Next, the subject shall hold his or her head full down and hold his or her breath for 10 seconds during test measurement.
- e. Talking. The subject shall talk out loud slowly and loud enough so as to be heard clearly by the test conductor. The subject can read from a prepared text such as the Rainbow Passage, count backward from 100, or recite a memorized poem or song for 1 minute. After the talking exercise, the subject shall hold his or her head straight ahead and hold his or her breath for 10 seconds during the test measurement.
  - f. Grimace. The test subject shall grimace by smiling or frowning for 15 seconds.
  - g. Bending Over. The test subject shall bend at the waist as if he or she were to touch his or her toes for 1 minute. Jogging in place shall be substituted for this exercise in those test environments such as shroud-type QNFT units that prohibit bending at the waist. After the bending over exercise, the subject shall hold his or her head straight ahead and hold his or her breath for 10 seconds during the test measurement.
  - h. Normal Breathing. The test subject shall remove and re-don the respirator within a one-minute period. Then, in a normal standing position, without talking, the subject shall breathe normally for 1 minute. After the normal breathing exercise, the subject shall hold his or her head straight ahead and hold his or her breath for 10 seconds during the test measurement. After the test exercises, the test subject shall be questioned by the test conductor regarding the comfort of the respirator upon completion of the protocol. If it has become unacceptable, another model of a respirator shall be tried.

#### 4. CNP Test Instrument

- a. The test instrument must have an effective audio-warning device, or a visual-warning device in the form of a screen tracing, that indicates when the test subject fails to hold his or her breath during the test. The test must be terminated and restarted from the beginning when the test subject fails to hold his or her breath during the test. The test subject then may be refitted and retested.
- b. A record of the test shall be kept on file, assuming the fit test was successful. The record must contain the test subject's name; overall fit factor; make, model, style and size of respirator used; and date tested.

#### 5. Controlled negative pressure (CNP) REDON quantitative fit testing protocol.

- a. When administering this protocol to test subjects, employers must comply with the requirements specified in paragraphs (a) and (c) of Part I.C.4 of this appendix ("Controlled negative pressure (CNP) quantitative fit testing protocol"), as well as use the test exercises described below in paragraph (b) of this protocol instead of the test exercises specified in paragraph (b) of Part I.C.4 of this appendix.
- b. Employers must ensure that each test subject being fit tested using this protocol follows the exercise and measurement procedures, including the order of administration, described below in Table A-1 of this appendix.

Table A-1. -- CNP REDON Quantitative Fit Testing Protocol

Exercises <sup>(1)</sup>	Exercise procedure	Measurement procedure
Facing Forward	Stand and breathe normally, without talking, for 30 seconds.	Face forward, while holding breath for 10 seconds.
Bending Over	Bend at the waist, as if going to touch his or her toes, for 30 seconds.	Face parallel to the floor, while holding breath for 10 seconds
Head Shaking	For about three seconds, shake head back and forth vigorously several times while shouting.	Face forward, while holding breath for 10 seconds.
REDON 1	Remove the respirator mask, loosen all facepiece straps, and then redon the respirator mask.	Face forward, while holding breath for 10 seconds.
REDON 2	Remove the respirator mask, loosen all facepiece straps, and then redon the respirator mask again.	Face forward, while holding breath for 10 seconds.

<sup>1</sup> Exercises are listed in the order in which they are to be administered.

After completing the test exercises, the test administrator must question each test subject regarding the comfort of the respirator. When a test subject states that the respirator is unacceptable, the employer must ensure that the test administrator repeats the protocol using another respirator model.

## RESPIRATOR TRAINING RECORD

Unit: \_\_\_\_\_ Date \_\_\_\_\_

Employee Name: \_\_\_\_\_

Employee Number: \_\_\_\_\_ SSN# \_\_\_\_\_

Type of Respirator: \_\_\_\_\_

Comments:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ITEM	CHECK WHEN COMPLETE
1. Review proper selection of respirators using Table 2- "Guide for Selection of Respirators" from ANSI Z88.2 (copy attached).	
2. Explained the use of the respirator verbally and demonstrated its use. (For Scot Air Pak: Reviewed Procedure).	
3. Employee wore respirator and demonstrated that he/she understood its use.	
4. Reviewed procedures for inspecting before use, cleaning and disinfecting, storage, and what to do if repair is required.	
5. Employee tested face-piece-to-face seal by Negative Pressure Test.	
6. Employee passed Quantitative Fit Test for selected respirator.	

Signature of Trainer \_\_\_\_\_

Signature of Employee \_\_\_\_\_

**SECTION XI**  
**RESPIRATORY PROGRAM**  
**APPENDIX D**

NORTHWEST TECHNOLOGY CENTER  
RESPIRATORY PROGRAM TRAINING OUTLINE  
APPENDIX D

OSHA RESPIRATOR MEDICAL EVALUATION QUESTIONNAIRE (MANDATORY)

**To the employer:** Answers to questions in Section 1, and to question 9 in Section 2 of Part A, do not require a medical examination.

**To the employee:** Can you read (circle one):..... Yes No

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

**Part A. Section 1. (Mandatory)** The following information must be provided by every employee who has been selected to use any type of respirator (please print).

1. Today's date: \_\_\_\_\_

2. Your name: \_\_\_\_\_

3. Your age (to nearest year): \_\_\_\_\_

4. Sex (circle one): Male/Female

5. Your height: \_\_\_\_\_ ft. \_\_\_\_\_ in.

6. Your weight: \_\_\_\_\_ lbs.

7. Your job title: \_\_\_\_\_

8. A phone number where you can be reached by the health care professional who will review this questionnaire (include the Area Code):

\_\_\_\_\_ 9. The best time to phone you at this number:

\_\_\_\_\_

10. Has your employer told you how to contact the health care professional who will review this questionnaire (circle one): .....Yes No

11. Check the type of respirator you will use (you can check more than one category):

a. \_\_\_\_\_ N, R, or P disposable respirator (filter-ask, non-cartridge type only).

b. \_\_\_\_\_ Other type (for example, half- or full-face piece type, powder-air purifying, supplied air, self-contained breathing apparatus).

12. Have you worn a respirator (circle one):.....Yes No

If “yes” what type(s):

**PART A SECTION 2 (Mandatory)**

Questions 1 through 9 below must be answered by every employee who has been selected to use any type of respirator (please circle “yes” or “no”).

1. Do you currently smoke tobacco, or have you smoked tobacco in the last month: Yes No
2. Have you ever had any of the following conditions?
  - a. Seizures (fits): Yes No
  - b. Diabetes (sugar disease): Yes No
  - c. Allergic reactions that interfere with your breathing: Yes No
  - d. Claustrophobia (fear of closed-in places): Yes No
  - e. Trouble smelling odors: Yes No
3. Have you ever had any of the following pulmonary or lung problems:
  - a. Asbestos: Yes No
  - b. Asthma: Yes No
  - c. Chronic bronchitis: Yes No
  - d. Emphysema: Yes No
  - e. Pneumonia: Yes No
  - f. Tuberculosis: Yes No
  - g. Silicosis: Yes No
  - h. Pneumothorax (collapsed lung): Yes No
  - i. Lung cancer: Yes No
  - j. Broken ribs: Yes No
  - k. Any chest injuries or surgeries: Yes No
  - l. Any other lung problem that you have been told about: Yes No
4. Do you currently have any of the following symptoms of pulmonary or lung illness? Yes No
  - a. Shortness of breath: Yes No
  - b. Shortness of breath when walking fast on level ground or walking up a slight hill or incline: Yes No

- c. Shortness of breath when walking with other people at an ordinary pace on level ground: Yes No
- d. Have to stop for breath when walking at your own pace on level ground: Yes No
- e. Shortness of breath when washing or dressing yourself: Yes No
- f. Shortness of breath that interferes with your job: Yes No
- g. Coughing that produces phlegm (thick sputum): Yes No
- h. Coughing that wakes you early in the morning: Yes No
- i. Coughing that occurs mostly when you are lying down: Yes No
- j. Coughing up blood in the last month: Yes No
- k. Wheezing: Yes No
- l. Wheezing that interferes with your job: Yes No
- m. Chest pain when you breathe deeply: Yes No
- n. Any other symptoms that you think may be related to lung problems:  
Yes No
5. Have you ever had any of the following cardiovascular or heart problems?
- a. Heart attack: Yes No
- b. Stroke: Yes No
- c. Angina: Yes No
- d. Heart failure: Yes No
- e. Swelling in your legs or feet (not caused by walking): Yes No
- f. Heart arrhythmia (heart beating irregularly): Yes No
- g. High blood pressure: Yes No
- h. Any other heart problem that you've been told about: Yes No
6. Have you ever had any of the following cardiovascular or heart symptoms?
- a. Frequent pain or tightness in your chest: Yes No
- b. Pain or tightness in your chest during physical activity: Yes No
- c. Pain or tightness in your chest that interferes with your job: Yes No
- d. In the past two years, have you noticed your heart skipping or missing a beat: Yes No
- e. Heartburn or indigestion that is not related to eating: Yes No

- f. Any other symptoms that you think may be related to heart or circulation problems: Yes No
7. Do you currently take medication for any of the following problems:
- a. Breathing or lung problems: Yes No
- b. Heart trouble: Yes No
- c. Blood pressure: Yes No
- d. Seizures (fits): Yes No
8. If you've used a respirator, have you ever had any of the following problems? (If you've never used a respirator, check the following space \_\_\_\_\_ and go to question 9):
- a. Eye irritation: Yes No
- b. Skin allergies or rashes: Yes No
- c. Anxiety: Yes No
- d. General weakness or fatigue: Yes No
- e. Any other problem that interferes with your use of a respirator: Yes No
9. Would you like to talk to the health care professional who will review this questionnaire about you answers to this questionnaire: Yes No

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

10. Have you ever lost vision in either eye (temporarily or permanently): Yes No
11. Do you currently have any of the following vision problems:
- a. Wear contact lenses: Yes No
- b. Wear glasses: Yes No
- c. Color blind: Yes No
- d. Any other eye or vision problem: Yes No
12. Have you ever had an injury to your ears, including a broken ear drum:  
Yes No
13. Do you currently have any of the following hearing problems? Yes No

- |     |  |     |    |
|-----|--|-----|----|
|     | a. Difficulty hearing:   | Yes | No |
|     | b. Wear a hearing aid:   | Yes | No |
|     | c. Any other hearing or ear problem:   | Yes | No |
| 14. | Have you ever had a back injury?   | Yes | No |
| 15. | Do you currently have any of the following musculoskeletal problems?             |     |    |
|     | a. Weakness in any of your arms, hands, legs, or feet:                           | Yes | No |
|     | b. Back pain:  | Yes | No |
|     | c. Difficulty fully moving your arms and legs:                                   | Yes | No |
|     | d. Pain or stiffness when you lean forward or backward at the waist:             | Yes | No |
|     | e. Difficulty fully moving your head up and down:                                | Yes | No |
|     | f. Difficulty fully moving your head side to side:                               | Yes | No |
|     | g. Difficulty bending at your knees:   | Yes | No |
|     | h. Difficulty squatting to the ground:   | Yes | No |
|     | i. Climbing a flight of stairs or a ladder carrying more than 25 lbs.:           | Yes | No |
|     | j. Any other muscle or skeletal problem that interferes with using a respirator: | Yes | No |

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

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

- b. Silica (e.g., in sandblasting):
- c. Tungsten/cobalt (e.g., grinding or welding this material)      Yes    No
- d. Beryllium:      Yes    No
- e. Aluminum:      Yes    No
- f. Coal (for example)      Yes    No
- g. Iron:      Yes    No
- h. Tin:      Yes    No
- i. Dusty environments:      Yes    No
- j. Any other hazardous exposures:      Yes    No

4. If “yes” describe these exposures: \_\_\_\_\_  
 \_\_\_\_\_

5. List any second jobs or side businesses you have: \_\_\_\_\_  
 \_\_\_\_\_

6. List your previous occupations: \_\_\_\_\_  
 \_\_\_\_\_

7. List your current and previous hobbies: \_\_\_\_\_  
 \_\_\_\_\_

8. Have you been in the military services?      Yes    No  
 If “yes”, were you exposed to biological or chemical agents (either in training or combat):      Yes    No

9. Have you ever worked on a HAZMAT team?      Yes    No

10. Other than medications for breathing and lung problems, heart trouble, blood pressure, and seizures mentioned earlier in this questionnaire, are you taking any other medications for any reason (including over-the-counter medications): Yes No

If “yes” name the medications if you know them: \_\_\_\_\_

11. Will you be using any of the following items with your respirator(s)?

- a. HEPA filters:      Yes    No

b. Canisters (for example, gas masks): Yes No

c. Cartridges: Yes No

12. How often are you expected to use the respirator(s)? (Circle “yes” or “no” for all answers that apply to you)?

a. Escape only (no rescue): Yes No

b. Emergency rescue only: Yes No

c. Less than 5 hours per week: Yes No

d. Less than 2 hours per day: Yes No

e. 2 to 4 hours per day: Yes No

f. Over 4 hours per day: Yes No

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

a. Light (less than 200 kcal per hour): Yes No

If “yes”, how long does this period last during the average shift: \_\_\_\_\_ hrs \_\_\_\_\_ mins.

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

b. Moderate (200 to 350 kcal per hour): Yes No

If “yes”, how long does this period last during the average shift: \_\_\_\_\_ hrs \_\_\_\_\_ mins.

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

c. Heavy (above 350 kcal per hour): Yes No

If “yes”, how long does this period last during the average shift: \_\_\_\_\_ hrs \_\_\_\_\_ mins.

Examples of heavy truck work are lifting a heavy load (about 350 lbs.) from the floor to your waist or shoulder; walking on a loading dock; shoveling; standing while bricklaying or chipping castings; walking up an 8-degree grade about 2 mph; climbing stairs with a heavy load (about 50 lbs.)

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

If "yes" describe this protective clothing and/or equipment \_\_\_\_\_

15. Will you be working under hot conditions (temperature exceeding 77 deg. F):  
Yes No

16. Will you be working under humid conditions: Yes No

17. Describe the work you'll be doing while you're using your respirator(s): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_

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

Name of the first toxic substance: \_\_\_\_\_

Estimated maximum exposure level per shift: \_\_\_\_\_

Duration of exposure per shift: \_\_\_\_\_

Name of the second toxic substance: \_\_\_\_\_

Estimated maximum exposure level per shift: \_\_\_\_\_

Duration of exposure per shift: \_\_\_\_\_

Name of the third toxic substance: \_\_\_\_\_

Estimated maximum exposure level per shift: \_\_\_\_\_

Duration of exposure per shift: \_\_\_\_\_

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

\_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_

## **SECTION XII**

# **CONTROL OF HAZARDOUS ENERGY SOURCES (LOCKOUT/TAGOUT)**

CONTROL OF HAZARDOUS ENERGY SOURCES  
(LOCKOUT/TAGOUT)

**PURPOSE**

This policy addresses practices and procedures that are necessary to disable machinery or equipment and prevent the release of potentially hazardous energy prior to and while maintenance and servicing activities are being performed.

**DEFINITIONS**

1. Energy Isolating Device- A mechanical device that physically prevents the transmission or release of energy. Examples would be slip blinds, circuit breakers, disconnect switches, block valves, slide gates, and similar devices.
2. Lockout Device- A device that uses a positive means, such as a lock, to hold an energy isolating device in a safe position to prevent the energizing of a machine or a piece of equipment. Includes a multiple lockout device (hasp, see Attachment A).
3. Tag out Device- a warning device, such as a tag, which is attached to an energy isolating device or multiple lockout devices, to indicate that the equipment being controlled may not be operated until the tag out device is removed. An example would be a tag reading: "Do Not Operate".

I. **LOCKOUT/TAGOUT PROCEDURES**

1. Combination Driver (Electric, Steam, Gas Turbine, or Hydraulic) and Pump. (Centrifugal, Reciprocating Compressor, Rotary, etc.)
  - A. Maintenance personnel or program instructor (electrical) are responsible for shutting down, blocking-in and/or de-energizing equipment prior to lockout/tag out. This includes bleeding down or de-pressuring when pump side is to be worked on.
  - B. The responsible maintenance personnel or program instructor will install the unit lock and multiple lockout devices to each energyisolating device. A "Do Not Close" tag (Attachment B) is to be attached to each valve opened to de-pressure or bleed down a pump or driver. The unit lock is the first to go on and the last to be removed. (Note: a chain(s) can be used for attachment of lockout devices for valves.)

- C. After installation of unit lockout device(s) maintenance personnel or program instructor will try to start the electric driver, at each start location, to ensure the energy source has been disconnected.
  - D. The responsible maintenance personnel or program instructor (electrical) will complete the unit's "HAZARDOUS ENERGY LOCKOUT LOG" (Attachment C), for equipment locked out.
  - E. Each supervisor and/or person responsible for workers assigned to their crew, after checking in with the responsible maintenance personnel or program instructor (electrical) to obtain permission to proceed with the job and determining the location of each energy isolating device, will attach his/her individual lock and "Do Not Operate" tag (Attachment D), to each multiple lockout device.
  - F. Each worker/student will sign each tag installed by his/her respective supervisor prior to actual work.
  - G. At the end of the work shift, each maintenance worker (if their portion of the job is not completed) will remove their respective lock(s). Locks will be re-installed prior to resuming their job on subsequent shifts. Tags will be left on the hasp.
2. Electrical Isolation (table saws, grinders, or any other related electric powered equipment).
- A. The responsible person and/or instructor will de-energize the equipment at the main disconnect and install the unit lock and multiple lockout device.
  - B. After lockout, then try to energize the electric driver/equipment at each start or energizing location to ensure the energy source has been disconnected.
  - C. Complete the departments "HAZARDOUS ENERGY LOCKOUT LOG" for equipment locked.
  - D. Each worker will sign each tag as described above in I.1.F.
  - E. Remove lock(s) as described above in I.1.G.
3. Lockout of Other Energy Sources, i.e., plant air, nitrogen. Stationery electric powered equipment.
- A. The responsible person and/or instructor will shut down and block-in necessary valving or energy isolating devices(s) and bleed down or de-pressure.
  - B. Install lockout device(s) or chain, and lock(s) to valves or energy isolating device. Install a "Do Not Close" tag to a valve(s) opened to de-pressure the equipment.
  - C. Complete the "HAZARDOUS ENERGY LOCKOUT LOG" for equipment locked.
  - D. Each worker will sign each tag as described above in I.1.F.
  - E. Remove lock(s) as described above in I.1.G.
4. Testing or Positioning Equipment
- A. Clear the immediate area of personnel, tools, and miscellaneous materials.

- B. Install necessary guards and line out equipment according to applicable procedure or practice.
  - C. Each responsible person (ie., instructor or maintenance personnel) will remove their lock(s), lockout devices and tags.
  - D. Proceed with energizing, testing, or positioning.
  - E. If additional work is required, repeat necessary procedure to lockout.
5. Release/Completion of Lockout
- A. When maintenance personnel or a program instructor has completed their job, task or portion of the job, he/she will advise the responsible person and/or supervisor initial the appropriate section of the unit's work order prior to removing their lock(s) and tag(s). Advise workers signed on their tag(s) of removal.
  - B. When all workers have completed their work and removed their locks and tags, the responsible supervisor will verify the job is complete and the equipment is free of obstructions, tools, trash, etc. After verifying, the unit lock(s) and lockout device(s) can be removed and equipment energized.
  - C. Note completion information on "HAZARDOUS ENERGY LOCKOUT LOG".
6. Removing Absent Employee's Lock
- A. After establishing a person is not on site, the worker's supervisor can remove the absent worker's lock(s) and tag(s) and will make a reasonable effort to contact the worker to inform him that his lock(s) and tag(s) have been removed.
  - B. If contact was not made, the worker, and the other workers signed on the tag(s) are to be notified when they return to work of the removal.
- II. Contractors
- A. Contractor and their NWTC representative will advise the Safety Facilitator of the contractor's program
  - B. The Safety Facilitator will assess the compatibility of the two programs. If changes are required, all affected personnel will be trained prior to start of work.
  - C. If contractor does not have acceptable lockout/tag out devices available, such devices may be obtained from the NWTC and Maintenance Department.
  - D. During group lockout or tag out activities, contractor employees will be given a chance to verify isolation and/or the contractor's representative(s) can sign-on the applicable blind list(s). Isolation removal cannot start until it is verified that the contractor's
  - E. Representative has signed-off and his personnel are not working on the equipment.
- V. Periodic Inspection and Review
- A. Annually the Maintenance Department will perform an audit to ensure this procedure and all requirements of the Federal Standard "Control of Hazards Energy (lockout/tag out)" are being followed.

- B. Results from this audit will be documented. Any changes to be made will be done immediately to ensure continuity if the policy. If changes are made, all affected employees will receive training on the changes. All training will be documented.

IV. **General Requirements**

- A. In each department, the owner's lock is the first on and the last off.
- B. In shops, offices, laboratories, and other similar areas, the supervisor is responsible for having the equipment de-energized and installing his/her lockout device, lock and tag. Workers assigned to a Maintenance Facilitator will sign-on his tag.
- C. When a chain or similar device is used to isolate a valve or energy source, a multiple lockout device (hasp) is to be used for installation of multiple locks and tags.
- D. Maintenance personnel responsible for installing a tag will print their name on the front of the tag.
- E. Permanent type markers should be used for signing or printing names on tags.
- F. When a piece of equipment cannot be locked out adequately, contact your supervisor in order that appropriate precautions may be taken prior to start of work.
- G. If a question arises regarding whether a lockout is not proper, contact your supervisor.
- H. Locks, tags, and lockout devices will be issued to personnel from their supervisor.
- I. Maintenance persons will be issued individual keyed locks. Their supervisor(s) will have a master key to their personnel's locks. J. Lock color identification:  
RED-ELECTRICAL
- K. Approved locks, tags, and lockout devices are to be used. Plastic ties, used to attach tags to locks, lockout devices, valves etc., shall be capable of withstanding a minimum pull of 50 lbs.
- L. Employee's lockout/tag out devices represents a personnel protective device. Locks, keys, tags, and lockout devices shall not be altered, tampered with, loaned to another employee, or removed by another employee. All personnel shall respect the intent of this policy.
- M. Willful Violation of an employee's lockout/tag out can result in immediate and positive disciplinary action.

**ATTACHMENT A**

**Multiple Lockout Device Hasp**



**ATTACHMENT B**

**Equipment Lockout Out**



The image shows a standard equipment lockout tag. It features a red and white diagonal striped border. At the top, there is a hole for a lock. The tag contains the following text and fields:

No. **32004**      DATE \_\_\_\_\_

**DANGER**

**EQUIPMENT LOCKED OUT**

REASON \_\_\_\_\_

THIS TAG AND LOCK TO BE REMOVED ONLY BY  
PERSON NAMED BELOW

**EQUIPMENT LOCKED OUT**

**No. 32004**

Equipment I.D. \_\_\_\_\_

Location \_\_\_\_\_

Problem \_\_\_\_\_

Signed By \_\_\_\_\_ Date \_\_\_\_\_



Attachment D

Do Not Close Valve



**SECTION XIII**

**BLOODBORNE PATHOGEN  
EXPOSURE CONTROL PLAN**

## **BLOODBORNE PATHOGEN EXPOSURE CONTROL PLAN**

This plan delineates specific rules and procedures relating to protecting employees of the technology center from occupational exposure to bloodborne pathogens (e.g., Hepatitis B Virus ("HBV"), Human Immunodeficiency Virus ("HIV"), etc.) as required by law.

Employees who are occupationally exposed to bloodborne pathogens include those who are reasonably anticipated to have skin, eye, mucous membrane or parenteral contact with blood or other potentially infectious materials during the performance of their duties. Other infectious materials include: (1) the following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid and any body fluid that is visibly contaminated with blood or where it is difficult or impossible to differentiate between body fluids; (2) any unfixed tissue or organ from a human, living or dead; (3) HIV-containing cell or tissue culture, organ culture and HIV-or HBV-containing culture medium or other solutions; and blood, organs or tissues from experimental animals infected with HIV or HBV. Any exposure to feces, nasal secretions, breast milk, sputum, sweat, tears, urine, vomitus or saliva, which is not visibly contaminated with blood, does not routinely constitute a risk of transmission of HBV or HIV. Saliva, if injected through a human bite, may pose a risk of HBV transmission.

This Exposure Control Plan delineates rules and procedures to be followed by employees to comply with the OSHA Bloodborne Pathogens Regulation previously cited. Appendix A defines the terms used throughout this Plan.

## **Employee Exposure Determination**

The likelihood of exposure to bloodborne pathogens among employees of the technology center varies among divisions and job classifications. Most job classifications within the technology center have no increased potential for occupational exposure to blood or potentially infectious materials as defined by the OSHA Bloodborne Pathogens Regulation.

Appendix B lists all technology center employee exposures to bloodborne pathogens by job classification and specific groups of occupational tasks. All potential exposures to blood and potentially infectious materials listed in the tasks shown in Appendix B are based upon risks incurred without the use of personal protective equipment. Based upon this analysis, the technology center has determined that the following groups of employees are likely to have occupational exposure to bloodborne pathogens: custodians and instructors of health care related clinic. These employees will receive the training and will be offered the Hepatitis B vaccinations as required by the OSHA Bloodborne Pathogens Regulation. The technology center will review this Exposure Control Plan and the exposure potential for specific jobs and occupational tasks shown in Appendix B annually or when new or modified tasks or procedures for job positions within the technology center alter potential occupational exposures.

## **Methods of Compliance with Regulation**

Because some tasks present the potential for employee exposure to blood and other potentially infectious materials, a number of engineering and work-practice controls have been adopted to minimize such exposures. Universal precautions are observed throughout the technology center to prevent contact with potentially infectious materials.

Employees should consider all body fluids as potentially infectious because it is often difficult to differentiate between body fluid types. Where occupational exposure exists despite compliance with engineering and work practice controls, the use of appropriate personal protective equipment is required, which varies with the specific work tasks involved.

Engineering controls, including handwashing facilities, are maintained and replaced appropriately to insure their effectiveness. Any employee who observes an ineffective or malfunctioning control item or equipment should take immediate appropriate action to replace, discontinue use of and/or seek repair of the item or equipment.

### **Handwashing**

Handwashing by all exposed employees is required. The importance of handwashing as the primary prevention of contamination cannot be overemphasized. It is the single most important means of preventing the spread of infection. Handwashing facilities are interspersed throughout each technology center building.

All employees of the technology center who have routine occupational exposure are provided with antiseptic hand cleaner for disinfection purposes when handwashing is not immediately feasible. However, hand cleaners are not provided with the intent of substituting for handwashing. Employees should wash hands with soap and water as soon as possible following use of such antiseptic hand cleaners. Employees are also required to wash their hands immediately after removing gloves or other personal protective equipment. Employees must ensure that hands and any other skin which becomes contaminated with blood or other potentially infectious material are immediately washed

with soap and water and that any mucous membrane exposed to blood or other potentially infectious material is flushed with water as soon as possible.

### **Protection of Food, Drink, Etc.**

Eating, drinking, smoking, applying cosmetics or lip balm and handling contact lenses is prohibited in work areas of the technology center where any risk of occupational exposure exists. The storage of food and drink in refrigerators, freezers or cabinets or on shelves, countertops or benchtops where blood or other potentially infectious materials are present is also prohibited.

### **Personal Protective Equipment**

The technology center provides appropriate personal protective equipment, including gloves, gowns and other appropriate devices, at no cost to any employee with occupational exposure. Appropriate personal protective equipment is that equipment which does not permit blood or other potentially infectious materials to pass through to the employee's work clothes, street clothes, skin, eyes, mouth or other mucous membranes under normal use and for the duration of time the protective equipment is in use.

All occupationally exposed employees of the technology center are required to use appropriate personal protective equipment. The only exception to this requirement allowed by the OSHA Bloodborne Pathogens Regulation might occur when the employee temporarily and briefly declines use of the equipment when "under rare and extraordinary circumstances, it [is] the employee's professional judgment that in the specific instance its use would have prevented the delivery of health care or public safety service or would have posed an increased risk to the safety of the worker or co-worker." When such a judgment

is made, the circumstances will be investigated and documented to determine whether changes should be instituted to prevent future recurrence.

Personal protective equipment appropriate for the work tasks in each division are readily accessible at the work site for all employees. Cleaning and laundering of reusable personal protective equipment is provided by the technology center through an outside vendor. Contaminated laundry is disposed of in the appropriate biohazard laundry containers provided by that vendor. Disposable personal protective equipment (e.g., disposable gloves) are discarded in sealed plastic bags.

If a garment becomes penetrated by blood or other potentially infectious materials during the course of its use, it should be removed immediately, or as soon as feasible, and disposed of appropriately. All personal protective equipment must be removed prior to leaving the work area.

### **Gloves**

Latex or vinyl gloves will be worn when it is reasonably anticipated that the employee will have hand contact with blood or other potentially infectious materials, mucous membranes, or non-intact skin and when touching contaminated items or surfaces. Disposable (single use) gloves must be replaced as soon as practical when contaminated or when they are torn, punctured or their ability to function as a barrier is compromised. Disposable gloves are not to be washed or decontaminated for reuse.

Utility gloves, such as those used in housekeeping, sterilization, and clean-up activities, may be decontaminated for reuse if the integrity of the glove is not compromised, but they must be discarded if they are cracked, torn, punctured or exhibit signs of deterioration. Hypoallergenic gloves or glove liners or powderless gloves are provided to employees who

are allergic to the gloves normally provided. Employees with contact dermatitis caused by gloves may find protective skin creams helpful in preventing further irritation.

### **Protective Body Clothing**

Appropriate body clothing must be worn in occupational exposure situations. The types and characteristics of the protective clothing depend upon the task and degree of exposure anticipated. The need for protective body clothing will be rare in the school environment.

### **Masks, Eye Protection and Face Shields**

Because no employees engage in occupational activities in which splashes, spray, splatter or droplets of blood or other potentially infectious materials are likely to be generated and eye, nose or mouth contamination can be reasonably anticipated, masks, eye protection and face shields are not provided.

### **Housekeeping**

Worksites which are subject to contamination by blood and other potentially infectious materials are maintained in clean and sanitary condition by the designated custodial staff who have cleanup responsibility. Appendix C presents the written cleaning and decontamination schedules for the nurse's office.

All equipment, environmental and working surfaces are cleaned and decontaminated after contact with blood or other potentially infectious materials upon completion of procedures and immediately, or as soon as feasible, when surfaces are overtly contaminated or following any spill of blood or other potentially infectious materials. All work surfaces are cleaned and decontaminated at the end of each work shift if the surfaces have become contaminated since the last cleaning. One or more of the following solutions are to be used in disinfection of work surfaces, countertops and equipment: commercially prepared germicidal disinfectants; commercially prepared disinfectants with an isopropyl alcohol content of 40% to 70%; commercially prepared disinfectants with a hydrogen peroxide content of 3%; or an individually prepared solution of one part chlorine bleach to ten parts water. Cleaning and disinfection of floors and walls may be accomplished using commercial cleaning formulations containing quaternary ammonia.

Bins, pails, cans, and other similar receptacles intended for re-use that have a potential for becoming contaminated with blood or other potentially infectious materials are inspected and decontaminated on a regular basis and immediately, or as soon as feasible, upon visible contamination.

### **Spill Cleanup**

Spill cleanup requires the use of appropriate protective equipment including gloves, as appropriate. Spills are cleaned up by the individual responsible for the spill in most cases. Appendix D details specific procedures for biological spills cleaning and decontamination.

Broken glassware which may be contaminated is not picked up directly with the hands. Cleanup is affected using mechanical means such as a brush and dustpan. Contaminated broken glassware is discarded in sealed plastic bags.

### **Waste Disposal**

Disposal of waste contaminated with blood or other potentially infectious materials is in sealed plastic bags with the technology center's other non-regulated waste.

### **Laundry**

All contaminated laundry generated by exposed employees of the technology center is bagged or containerized at the location where it is used in appropriately labeled containers. Heavily soiled laundry is bagged in leak-proof plastic bags before being placed in laundry containers, if appropriate. The technology center contracts with an offsite commercial laundry company for laundry services. Laundry is not sorted, rinsed or processed in any other manner on site. Employees who have contact with contaminated laundry wear protective gloves and other appropriate personal protective equipment.

### **Hepatitis B Vaccination**

Each technology center employee who has occupational exposure is offered the Hepatitis B vaccine series within ten (10) days of initial work assignment and after he or she has received the required training unless the employee has previously received the vaccination series, antibody testing has revealed immunity, or the vaccination is contraindicated for medical reasons. The technology center will provide the health care professional responsible for the employee's Hepatitis B vaccination with a copy of the OSHA

Bloodborne Pathogens Regulation. Vaccinations are performed by or under the supervision of a licensed physician or by or under the supervision of another licensed health care professional in accordance with U.S. Public Health Service recommendations during normal working hours, at a reasonable location and at no cost to the employee. Participation in a prescreening program is not a prerequisite for receiving the Hepatitis B vaccination. Employees who decline to accept the Hepatitis B vaccination are required to sign the declination statement included as Appendix E to this Plan.

Any employee who initially declines the Hepatitis B vaccination, but at a later date decides to accept the vaccination, is provided the vaccination at that time without cost. Any future recommended routine booster, dose or doses of Hepatitis vaccine recommended by the U.S. Public Health Service will also be provided to exposed employees without cost.

The Hepatitis B vaccination record or signed declination statement is maintained in each employee's confidential medical record in the office of the superintendent (see Recordkeeping-Medical Records).

### **Post-Exposure Evaluation and Follow-Up**

All technology center employees who experience an occupational exposure incident will complete the Incident Report attached as Appendix F immediately after the exposure, or as soon thereafter as feasible.

Each exposed employee is provided a confidential medical evaluation and follow-up, including prophylaxis, at no cost to the employee, by a licensed health care professional of the technology center's choice. As part of the post-exposure evaluation and follow-up, the routes of exposure and the circumstances under which the incident occurred is documented, including identification and documentation of the source individual, unless infeasible or prohibited by law, and testing of the source individual's blood and the exposed employee's blood is completed, as soon as feasible and after consent is obtained. Completion of the Record of Occupational Exposure to Blood or Potentially Infectious Body Fluids included as Appendix G to this Plan satisfies the Regulation's documentation requirements.

The technology center will provide the licensed health care professional who evaluates the exposed employee with the following information: a copy of the OSHA Bloodborne Pathogens Regulation; a description of the exposed employee's duties as they relate to the exposure incident; documentation of the route(s) of exposure and circumstances under which exposure occurred; results of the source individual's blood testing, if available; and all medical records relevant to the appropriate treatment of the employee, including vaccination status, that are the technology center's responsibility to maintain.

The licensed health care professional's written opinion of the post-exposure evaluation is to be provided to the employee within fifteen (15) days of completion of the evaluation and is to be limited to the following: whether Hepatitis B vaccination is indicated for the employee and if the employee has received such vaccination, that the employee has been informed of the results of the evaluation and that the employee has been told about any

medical condition resulting from exposure to blood or other potentially infectious materials that require further evaluation or treatment. All other findings or diagnoses are to remain confidential and are not to be included in the written report.

Confidential medical records relating to post-exposure evaluation and follow-up are maintained in the office of the superintendent (see Recordkeeping -Medical Records).

### **Labels and Signs**

To the extent required, the technology center uses red color coding and/or fluorescent orange or orange-red biohazard labels to mark all hazardous items. The standard biohazard label and symbol is used for this purpose. Items contaminated with blood or other potentially infectious body fluids which are color coded or posted with biohazard labels include the following: contaminated laundry.

### **Recordkeeping**

1. Medical Records. Confidential medical records are kept on all technology center employees with occupational exposure to blood or other potentially infectious materials in the office of the superintendent. Each record includes the employee's name, Social Security number, Hepatitis B vaccination record (or declination form), copies of all results of examinations, medical testing and follow-up procedures relating to any exposure incidents and a copy of the health care professional's consultation and written opinion relating to any exposures.

All employee medical records are kept for the duration of employment, plus thirty (30) years in accordance with the OSHA Bloodborne Pathogens Regulation.

2. Training Records. Records documenting the provision of information and training relating to occupational exposure to bloodborne pathogens are maintained for three (3) years from the date of training by the technology center's training coordinator. These records include the dates of training sessions, a summary of the training session, names and qualifications of the persons conducting the training sessions and the names and job titles of all persons attending the training sessions. An outline of the technology center's Bloodborne Pathogens Training Program is included as Appendix H to this Plan. A Training Record form is attached as Appendix I.

### **Information and Training**

Information and training pertaining to bloodborne pathogens is provided to all technology center employees with occupational exposure without cost and during normal working hours. This training is provided within ten (10) days of initial assignment to tasks where occupational exposures occur and annually thereafter or whenever modifications of tasks or procedures or the institution of new tasks or procedures affect an employee's occupational exposure to the extent that additional training is indicated and appropriate. Routine training of new employees is arranged on an as-needed basis through the technology center's training coordinator. Training is presented by qualified staff members.

Training material is appropriate in content and vocabulary to the educational level, literacy and language of employees. The training program is designed to fulfill the requirements for bloodborne pathogen training outlined in the OSHA Bloodborne Pathogens Regulation. A detailed outline of the training program is kept on file with the technology center's training coordinator.

**Northwest Technology Center**  
**Bloodborne Pathogens Exposure Control Plan**  
**Exhibit A – Definition of Terms**

**BIOSAFETY LEVEL (BL)** Associated risks with microorganisms (e.g., BL1 minimal disease in healthy adults such as *Bacillus subtilis*, BL2 moderate risk associated with human diseases such as hepatitis B virus, BL3 microorganisms that may cause serious diseases such as *Mycobacterium tuberculosis* and BL4 microorganisms that are high risk and considered lethal such as Lassa fever virus).

**BLOOD** Human blood, human blood components and products made from human blood.

**BLOODBORNE PATHOGENS** Microorganisms that are present in human blood and that can cause disease in humans. These pathogens include hepatitis B virus (HBV) and human immunodeficiency virus (HIV).

**CONTAMINATED** Marked by the presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.

**CONTAMINATED LAUNDRY** Laundry that has been soiled with blood or other potentially infectious materials or that may contain sharps.

**CONTAMINATED SHARPS** A contaminated object that can penetrate the skin, including, but not limited to, broken glass.

**DECONTAMINATION** The use of physical or chemical means to remove, inactivate or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use or disposal.

**ENGINEERING CONTROLS** Devices or equipment for isolating or removing hazards from the workplace.

**EXPOSURE INCIDENT** A specific eye, mouth, other mucous membrane, non-intact skin or parenteral contact with blood or other potentially infectious materials that results from an employee performing his or her duties.

**HANDWASHING FACILITIES** Locations that provide an adequate supply of running potable water, soap and single-use towels or hot-air drying machines.

**HBV** Hepatitis B Virus.

**HIV** Human Immunodeficiency Virus.

**LICENSED HEALTH CARE PROFESSIONAL** A person whose legally permitted scope of practice allows him or her to independently perform the activities required for hepatitis B vaccination and post-Exposure evaluation and follow-up.

**OCCUPATIONAL EXPOSURE** Reasonably anticipated skin, eye, mucous membrane or parenteral contact with blood or other potentially infectious materials that may result from employees performing their duties.

**OTHER POTENTIALLY INFECTIOUS MATERIALS**

1. The following body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures and any body fluid that is visibly contaminated with blood.
2. Any unfixed tissue or organ (other than intact skin) from a human (living or dead).
3. HIV-containing cell or tissue cultures, organ cultures and HIV- or HBV contaminated culture media or other solutions; and blood, organs or other tissues from experimental animals infected with HIV or HBV.

**PARENTERAL** Exposure occurring as a result of piercing the skin barrier (e.g., subcutaneous, intramuscular, intravenous routes) through such events as needlesticks, bites, cuts and abrasions.

**PERSONAL PROTECTIVE EQUIPMENT** Specialized clothing or equipment worn by an employee to protect against a hazard.

**SHARPS** Any object that can penetrate the skin, including, but not limited to, broken glass.

**SOURCE INDIVIDUAL** A an individual whose blood or other potentially infectious materials may be a source of occupational exposure to the employee.

**STERILIZE** To use a physical or chemical procedure to destroy all microbial life, including highly resistant materials endospores.

**UNIVERSAL PRECAUTIONS** An approach to infection control in which all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV and other bloodborne pathogens.

**WORK PRACTICE CONTROLS** Mandated procedures or policies that reduce the likelihood of exposure by altering the manner in which a task is performed.

**Northwest Technology Center**  
**Bloodborne Pathogens Exposure Control Plan**  
**Exhibit B – Exposure by Job Classification & Tasks**

<b>Job Classification</b>	<b>Surface Decontamination And Cleaning</b>	<b>Medical Instruments And Equipment</b>	<b>Student Physical Assessment</b>	<b>Waste Disposal</b>	<b>Student Personal Care</b>
<b>Administrative</b>					
Certified					
Superintendent					
Directors					
<b>Instructional</b>					
Program instructor					
Program instructor					
Program instructor					
Program instructor					
Program instructor					
Other					
<b>Support</b>					
Custodial					
Clerical					
Regular Classroom					
Special Classroom					
Transportation					
Food service					

**Northwest Technology Center**  
**Bloodborne Pathogens Exposure Control Plan**  
**Exhibit C –Cleaning & Decontamination Schedule (Nurse)**

(Delete if no designated school nurse or EMTs)

	<b>Room(s)</b>	<b>Item/Surface</b>	<b>Frequency (Time, Day or Month)</b>	<b>Method/ Disinfectant</b>	<b>Responsible Party</b>
Instruments/ Handpieces	Exam Room	Stethoscope and all other items used in examination	After each use	See Plan	School Nurse
Pans, Pails, Trays	Exam Room	Counters Exam tables	When contaminated or end of day	See Plan	School Nurse
Protective Coverings	Exam Room	Exam Tables Cots	Changed after each use	See Plan	School Nurse
Floors/Walls	Exam Room	Floor	Swept daily	See Plan	Custodial Staff
Equipment/ Appliances	Where located	Equipment/ Appliances	After each use	See Plan	Custodial Staff School Nurse

**Northwest Technology Center**  
**Bloodborne Pathogens Exposure Control Plan**  
**Exhibit D – Biological Spills Cleaning**

*Work and Equipment Surface*

1. Wearing gloves, clean visible blood and body fluid spills from all equipment surfaces, cabinets and work surfaces with (detergent) and water or 1:10 bleach solution at the end of each workday.
  - a. Household bleach solutions are less effective as disinfectants in the presence of high concentrations of protein. It is very important to remove as much body fluid as possible before decontamination.
2. Wipe down equipment and work area at the end of each day with 1:10 dilution of household bleach or an approved disinfectant solution.
3. Rinse with water to prevent damage when bleach is used.

*Decontamination of Moist Spills*

1. Wearing gloves, absorb the spill with disposable towels.
2. Using a detergent solution or approved disinfectant solution, clean the spill site of all visible blood or body fluid.
3. Wipe down the area with 1:10 dilution of household bleach.
4. Place all disposable materials used to decontaminate the spill into a plastic bag and close tightly.

*Decontamination of Dry Spills*

1. If a surface or medical device is contaminated with dried blood or body fluid, wearing gloves, remove all of it before disinfection with a 1:10 dilution of household bleach or an approved disinfectant solution.
2. If complete removal is not possible, expose the surface to a diluted 1:10 household bleach solution or an approved disinfectant solution for a longer time (20-30 minutes may be necessary).
3. Place all disposable materials used to decontaminate the spill into a plastic bag and close tightly.

**Northwest Technology Center**  
**Bloodborne Pathogens Exposure Control Plan**  
**Exhibit E – Statement for Employee Signature**

I understand that due to my occupational exposure to blood or other potentially infectious materials, I may be at risk of acquiring hepatitis B virus infection. I have been given the opportunity to be vaccinated with hepatitis B vaccine, at no charge to myself. However, I decline hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series at no charge to me.

---

Employee

---

Date



**Northwest Technology Center**  
**Bloodborne Pathogens Exposure Control Plan**  
**Exhibit G – Occupational Exposure**

*The filing of this report and all information entered on it are to be held in strictest confidence in conformance with OKLA. STAT. tit. 63, §§ 1-502.1 et seq.*

**Exposed Employee Section**

Full Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Job Title: \_\_\_\_\_

Exposure Date: \_\_\_\_\_ Time: \_\_\_\_\_ .m.  
Location: \_\_\_\_\_

Number of Hepatitis B vaccinations previously received: \_\_\_\_\_

Describe Incident – use additional pages as needed

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Source Individual Section**

Full Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_  
\_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_ Phone Number: \_\_\_\_\_  
\_\_\_\_\_

**Physician or Designee Statement**

This was / was not an exposure which has the potential for transmission of a communicable disease such as HIV/HBV.

In my judgment, employee \_\_\_ does / does not have contraindications to receiving hepatitis B vaccine.

\_\_\_\_\_  
Physician / Designee Signature

\_\_\_\_\_  
Date



HIV (12 months)

Positive/Negative

Not done/Refusal

Date drawn: \_\_\_\_\_

Explanation: \_\_\_\_\_

**Employee Treatment**

HBIG

Yes

No

Date given: \_\_\_\_\_

Explanation: \_\_\_\_\_

Hepatitis B Vaccine

Dose 1

Yes

No

Date given: \_\_\_\_\_

Explanation: \_\_\_\_\_

Dose 2

Yes

No

Date given: \_\_\_\_\_

Explanation: \_\_\_\_\_

Dose 3

Yes

No

Date given: \_\_\_\_\_

Explanation: \_\_\_\_\_

**Other Medical Treatment**

---

---

---

---

---

**Comments**

---

---

---

---

---

**Northwest Technology Center Bloodborne Pathogens Exposure Control  
Plan  
Exhibit H – Training Program**

Training sessions are held on an as-needed basis for new employees in job classifications with occupational exposure. Training is provided within ten (10) days of initial assignment to tasks where occupational exposures occur and annually thereafter or whenever modifications of tasks or procedures or the institution of new tasks or procedures affect an employee's occupational exposure to the extent that additional training is indicated and appropriate.

Each employee who attends a training session receives a copy of the OSHA Bloodborne Pathogens Regulation along with a copy of the Employee Training Program Outline.

A trained representative of the School District is present at the end of the training session to answer participants' questions and to provide additional clarification, if needed.

**Northwest Technology Center Bloodborne Pathogens Exposure Control  
Plan**  
**Exhibit I – Training Record**

Date of Session: \_\_\_\_\_

Summary of Session: *See Employee Training Program Outline.*

Name/Qualifications of Person(s) Conducting Session: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SEMINAR PARTICIPANTS**

Name	Job Title
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

# **Employee Training Program**

## **OSHA Regulation on Bloodborne Pathogens**

### **Review of Final OSHA Standard on Bloodborne Pathogens**

1. Basis for OSHA Rule - Preventing occupational exposure to other potentially infectious materials (e.g., infectious body fluids), which could result in transmission of HIV or HBV infection to employees
  - a. Regulation effective March 6, 1992
    - Various sections to be complied with by March 5, June 4 and July 6, 1992
    - Regulation fully in force at this time.
  - b. Regulation requires three major intervention strategies
    - Engineering controls
    - Work practices
    - Personal protective equipment

### **Major Requirements of Bloodborne Pathogens Rule**

1. Identification of job classifications which have occupational exposure
2. Written exposure control plan
3. Methods of compliance (How exposures are prevented)
4. Personal protective equipment
5. Housekeeping - spill cleanup including written schedule
6. Infectious waste disposal
7. Contaminated laundry
8. Identifying labels and signs
9. Hepatitis B vaccination
10. Post exposure follow-up and prophylaxis
11. Record keeping

## **Epidemiology of HIV/AIDS Infection**

1. HIV/AIDS description of virus and testing
  - a. HIV-(H)uman (I)mmunodeficiency (V)irus
  - b. Not very infectious - millions of particles to infect
  - c. Weak, non-viable within a few hours - won't live outside human body
  - d. Dry spot non-infectious
  - e. HIV blood test - produce antibodies within six months - virus is not self-limiting - eventually results in infection - within ten years
  
2. Transmission
  - a. Body Fluids
    - Blood
    - Semen
    - Vaginal fluids
    - Others
  - b. Blood Exposure
    - Per cutaneous - needle stick, cut
    - Non-intact skin
    - Mucous membrane - other than blood - probably non-existent
  - c. Sexual contact
  - d. Mother to baby - all babies HIV positive at birth - one-third will develop AIDS
  
3. Incidence and progression of disease
  - a. Number infected with symptoms
  - b. Self protection
  - c. New diagnostic criteria after election

## **Epidemiology of Hepatitis B (HBV) infection**

1. Description of virus
  - a. Very infectious, hardy and environmentally stable
  - b. Example
  - c. Infects liver - jaundice, dark urine
  - d. Incubation period
  - e. Carriers
2. Transmission
  - a. Blood exposure
  - b. Mother to baby (Nine out of ten infected)
  - c. Sexual contact
  - d. Human bites
3. Testing
  - a. HBsAG+ ' infectious (If negative, will not transmit disease).
  - b. Anti-HBs+ ' immunity (Not infectious, has antibodies).
4. Spectrum of illness
  - a. Seventy-five percent asymptomatic
  - b. If symptomatic, percentage who will have fulminant disease
  - c. Number of adults who become carriers (whether or not they are symptomatic)
  - d. Number of babies who become carriers
  - e. Carriers most likely did not have symptoms when initially infected

5. Consequences of HBV infection
  - a. Immunity
  - b. Acute fulminant disease
  - c. Cirrhosis/Liver cancer

### **Occupational risks for HIV and HBV**

1. Incidence of occupational exposures
  - a. HIV
  - b. HBV
2. How risk exposures occur

### **Management of exposure**

1. Reporting exposures
  - a. Notify the supervisor immediately
  - b. Fill out Incident Report and Occupational Exposure to Blood and Potentially Infectious Body Fluids form
  - c. Consult with physician
2. Treating exposures
  - a. HBV
    - HBIG + Hepatitis B vaccine
    - Effectiveness
  - b. HIV
    - Check for antibodies at time of exposure
    - Repeat
    - During testing period for HIV antibodies or if source is high risk, observe behavioral guidelines

## **Prevention of exposures**

1. Universal precautions  

Treat all blood or potentially infectious material as if infected
2. Hepatitis B vaccinations  

Offer to all potentially exposed employees or declination statement signing required
3. Engineering controls (What you do your work with)  

Hand washing facilities
4. Personal protective equipment
  - a. Gloves - disposable and utility
  - b. Body protective clothing
5. Work practice controls (How you do your work)
  - a. Hand washing - ASAP - after removing gloves
  - b. Materials - handle in manner as not to splash or spray. Wear gloves
  - c. Do not eat, drink, smoke, apply cosmetics, apply lip balm or handle contact lenses, in area of possible exposure: No food storage in specimen cabinets or refrigerators
  - d. Equipment - clean and disinfect appropriately
  - e. Routine cleaning - adhere to written schedule
  - f. Spills – clean up ASAP
  - g. Broken glass - use broom and dustpan

## **School district exposure control plan**

1. Written plan
  - a. All administrators have copy
  - b. Employee may request a copy

- c. Identifies employee job classification with occupational exposures to bloodborne pathogens
  - d. Delineates specific work practices and engineering controls and required personal protective equipment for School District
2. Specific personal protective equipment
- a. Gloves
  - b. Body Protective Clothing
3. Contaminated laundry
- a. Contaminated laundry should be separated from laundry which is not contaminated
  - b. Contaminated laundry should be handled with gloves
4. Cleaning
- a. Immediate spill cleanup with gloves and appropriate materials
  - b. No hand handling of broken glass
  - c. Written cleaning schedule.
    - Reusable pans, pails
    - Floors, walls, counter tops
    - Equipment
  - d. Bleach solution recommended for most cleaning and decontamination - after removal of as much body fluid as possible.

**SECTION XIV**

**POWERED INDUSTRIAL TRUCK  
(FORKLIFT) PROGRAM**

## POWERED INDUSTRIAL TRUCK (FORKLIFT) PROGRAM

**The person responsible for this program is the Safety Facilitator.**

### **I. INTRODUCTION**

As an employee of **Northwest Technology Center**, you can be reasonably expected to perform materials handling operations during your daily work routine. Some of these materials though, will be too heavy or bulky for individual or tandem movement, and a powered industrial truck will be needed for safe movement. **If trained and authorized as an operator** of a forklift, you are ultimately responsible for your own safety as well as the safety of coworkers. By recognizing potential dangers and making correct decisions, you will help ensure the safety of yourself and those around you.

To facilitate the necessary movement, storage and handling of heavy, palletized, containerized, or large shaped items, **Northwest Technology Center** has provided powered industrial forklifts **for only those employee's use who are certified, qualified, trained forklift drivers**. These employees are required to meet the guidelines established in **OSHA Regulation 29 CFR 1910.178**, prior to using the provided equipment:

(**NOTE:** under normal operating conditions, it is not reasonably expected that forklift operating employees of **Northwest Technology Center** will encounter concentrations of explosive or ignitable mixtures or an unstable gas that could be considered a hazard potential.)

### **II. EQUIPMENT PROVISIONS AND INSPECTION**

Employees will be made aware of the forklift equipment provisions and their daily inspection and documentation requirements. An operational check will be conducted by each individual employee assigned to perform work utilizing a powered industrial forklift. (See attached inspection form).

**Northwest Technology Center** Management will be informed of any hazards found by the inspecting employee, which would render that equipment unsafe to operate. The equipment will be "tagged out of service" and the keys removed from use, until authorized maintenance services correct the identified hazard(s).

Items for inspection are to include checking for the following:

- A. secure overhead guard (roll cage)
- B. load engaging device (uneven forks or cracks in heel)
- C. mast cylinder hydraulics, attachment bolts and tight mast chains
- D. operational warning horn or backup alarm
- E. legible capacity plate (load limit data plate)
- F. operational directional lighting (forward or reverse)
- G. efficient braking mechanisms (foot and hand-operated parking)

- H. tire conditions, secure lug nuts
- I. fuel and power supply (connections, leaks, warning signals)
- J. directional movement controls (gears, clutch, inching)
- K. tilt, lift and side-shift controls operability
- L. steering maneuvers (tight, firm control)
- M. appropriate fluid levels (hydraulic, oil, brake, transmission, fuel)

### **III. GENERAL OPERATING GUIDELINES**

While operating a forklift at **Northwest Technology Center** facilities, employees can expect to encounter many possible hazards, including rough and irregular driving surfaces, blind spots, vehicular traffic, pedestrian traffic, and general warehouse obstacles. Safe operating procedures must be adhered to by observing the following guidelines:

- A. Always look in the direction you are traveling.
- B. Keep to the right whenever possible, never pass in an intersection.
- C. Always drive with a load only as high as necessary to clear ground obstacles.
- D. Arms and legs are never to be extended beyond the cab or sides of the vehicle or into the lift uprights.
- E. Always keep an eye out for overhead obstructions, other vehicles, pedestrians, vision obstructions, non-standard driving surfaces, loose objects on the ground, and changing environmental conditions.
- F. Avoid sudden starts and stops by driving under control always.
- G. Know the equipment load handling capacity and never exceed it or utilize additional weight as a counterbalance.  
(NOTE \* you can determine weight loads by asking your Supervisor, more experienced coworkers, or checking the bill of lading or shipping manifest papers. **DO NOT ATTEMPT** to elevate the load to determine if counterbalance is adequate.)
- H. Determine the nature of your load, make sure it is secure, and adjust the forks appropriately to fit the maximum width of the pallet or load.
- I. Always check vehicle clearance before you turn to make sure there is enough room to clear the forks and rear-sway of your vehicle.
- J. Observe posted facility speed limits at all times.
- K. Always sound the horn when backing up or approaching pedestrians, other vehicles, and at cross aisles or any time vision is obstructed.
- L. Maintain a “3-truck length” safe following distance from other trucks, and follow established driving lanes or routes as marked.

- M. If your load is causing a vision obstruction, drive the vehicle backwards.
- N. Do not allow bystanders when stacking loads or when dealing with elevated loads.
- O. Riders are never allowed on your vehicle, in the cab or on the forks.
- P. The lift truck is never approved for personnel lifting by the forks.
- Q. Never allow anyone to pass underneath the elevated portion of the truck, either loaded or unloaded.
- R. Always secure your load against the load backrest and lower it to a safe ground clearance before changing directional movement or turning.
- S. Drive defensively, pedestrians always have the right of way.
- T. When parking your vehicle, always come to a smooth gradual stop, set the parking brake, fully lower the forks, and place all directional controls in neutral. (You will be required to turn the vehicle off if you move to where the vehicle is not in your direct view or you will be further than 25 feet away from the vehicle.)
- U. Unauthorized repair of lift trucks is a federal law violation, mechanical breakdowns must be reported, and repairs made by authorized personnel.
- V. Refueling and propane bottle exchange areas are designated non-smoking locations.
- W. Stunt driving, horseplay, and speeding will not be tolerated.
- X. When loading or unloading trucks, ensure the parking brake on the trailer is set or the wheels chocked to prevent movement, and the bed of the trailer is in satisfactory condition to receive an intended load.

Understand that the previously mentioned items are general guidelines and safe operating rules to be followed at all times. However, **this does not constitute our formal forklift operator training program.** This training will consist of classroom instruction performed by contract safety services to include discussion, video presentation, course material review, written test, followed by a driving skills test performed on the facility grounds of each Department. Successful completion of these course requirements will license the approved operator for a period of 2 (two) years. Certificates will be maintained in the employee safety file.

#### IV. INITIAL TRAINING

Formal forklift training will consist of a review and understanding of:

- A. Characteristics of the fork-truck(s) to be operated
- B. Similarities to and differences from an automobile operation
- C. Controls/instrumentation location, how they work, where they are
- D. Power plant operation and maintenance
- E. Steering and maneuvering
- F. Visibility
- G. Fork or attachment adaptation, operation, limitations of use
- H. Vehicle capacity
- I. Vehicle stability
- J. Vehicle service brake and parking brake requirements
- K. Vehicle inspection and maintenance
- L. Refueling and recharging batteries
- M. Operational limitations
- N. Driving surfaces, ground conditions, obstacles
- O. Load manipulation, stacking and unstacking
- P. Pedestrian traffic
- Q. Potentially hazardous environmental operating conditions
- R. Ramps or sloped surface concerns on fork-truck stability
- S. Operating in closed environments with insufficient ventilation
- T. Narrow aisle and restricted place operation

## V. CONCLUSION

Forklift accidents can cause tremendous damage to people and property. Much of this damage potential results from the approximate 8 ton combined lift truck and load mass weights. If you run into physical structures, other personnel or product, extensive damage is likely to occur. Even though property is replaceable, your coworkers are not! Product damage or injuries are to be reported immediately to your Department Supervisor.

It is the intent of **Northwest Technology Center** Management to eliminate or at the very least, minimize all accident potentials by requiring all forklift operators to complete the required training and at all times to perform in a safe operating manner while using powered industrial fork trucks. Follow the rules of the road by obeying all traffic regulations as if you are operating an automobile. Use extreme caution and be alert to changing conditions or situations as they present themselves.

Non-compliance by any **Northwest Technology Center** employee with any part of this described program will result in disciplinary action.

**SECTION XV**  
**ASBESTOS HAZARD EMERGENCY**  
**RESPONSE ACT (AHERA)**

SEE:

Asbestos Hazard Emergency Response Act (AHERA) on Management Plan is on file in the Superintendent's office.

**SECTION XVI**  
**PANDEMIC PROCEDURES**

## **NORTHWEST TECHNOLOGY CENTER**

### **PANDEMIC PROCEDURES**

In the event that Northwest Technology Center is notified by the proper authorities that a Pandemic situation existing within our community and/or in the communities of one of our sending schools, NWTC's policy would be to consider school closure.

If school closes all rooms ie., seminar rooms, meeting rooms, classroom, and offices be cleaned and disinfected prior to reopening. Personal Protective Equipment (PPE) consisting of face masks and rubber gloves would be required for all custodial and maintenance personnel engaged in all aspects of cleaning the school. All air condition/heating unit filters would be replaced at the same time.

## **SECTION XVII - CAMPUS SAFETY:**

Campus Safety is provided by county and state law enforcement agencies.

## **SECTION XVIII - VISITORS:**

Any visitor coming onto NWTC Campus will be required to check in with the main office.

## **SECTION XIX - BUILDING SECURITY:**

All doors will be locked after 9:00 pm - Monday through Thursday and on Friday at 4:00 pm with the exception of those that need to be left unlocked in order to facilitate the evening classes. Upon the class being over the doors will be secured by the employee who is charged with that responsibility.