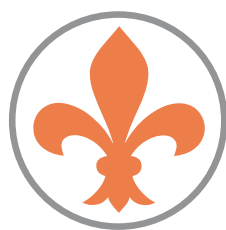




FLEURY



RISK MANAGEMENT

Model Safety Manual

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Model Workplace Safety and Health Policy

Safety is critical to our ability to provide municipal services to the community.

_____ (*Entity Name*) is committed to maintaining a safe and healthful workplace, and to protecting the public against potential hazards caused by our operations. It is up to each of us to ensure that safety is a routine part of our daily work.

Whereas the _____ (*Entity Name*) acknowledges that it has the responsibility to provide a safe work environment for its employees/members, and such an environment enhances the quality of life of the employee/member as well as the quality of services provided to our citizens.

Now, therefore, be it resolved that the _____ (*Name of the Board/Governing Body*) of the _____ (*Entity Name*) as follows:

It is the policy of the _____ (*Entity Name*) to make workplace safety and health a priority in all operations. It is the responsibility of the _____ (*Name of Board of Supervisors/Other Governing Body*) to establish policies and procedures and the responsibilities of the _____ (*Departmental Supervisors*) to carry out the safety and health policies and procedures that support safe working conditions. Such policies and procedures will:

- Establish safety standards for facilities, machinery, equipment, tools and work practices that are based on applicable New York PESH, OSHA and generally recognized safe work practices.
- Identify staff members who will be responsible for the administration of the policies and procedures.
- Establish one or more safety committees, which will be responsible for evaluating reported unsafe conditions, investigating accidents and making recommendations to reduce the potential for accidents and illnesses to the _____ (*Board of Supervisors/ Departmental Supervisors*).
- Provide staff time, and other necessary resources for the training of staff and administration of the policies and procedures.
- Provide a program of periodic safety inspections to help identify unsafe conditions and/or operations.
- Provide for investigation of all “accidents” to determine the root cause and provide recommended actions to reduce the potential for similar incidents.
- Provide periodic reports to the governing body on activities and results of the safety management program.
- Provide the governing body with a recommended annual budget supporting the workplace safety and health program.

Further, it is resolved that:

Employees are expected to follow established safety rules, procedures and programs to support a safe and healthy workplace.

Adopted the _____ day of _____ at _____.

NY HERO Act: Model Airborne Infectious Disease Exposure Prevention Plan

The purpose of this plan is to protect employees against exposure and disease during an airborne infectious disease outbreak. This plan goes into effect when an airborne infectious disease is designated by the New York State Commissioner of Health as a highly contagious communicable disease that presents a serious risk of harm to the public health. This plan is subject to any additional or greater requirements arising from a declaration of a state of emergency due to an airborne infectious disease, as well as any applicable federal standards.

Employees should report any questions or concerns with the implementation this plan to the designated contact.

This plan applies to all “employees” as defined by the New York State HERO Act, which means any person providing labor or services for remuneration for a private entity or business within the state, without regard to an individual’s immigration status, and shall include part-time workers, independent contractors, domestic workers, home care and personal care workers, day laborers, farmworkers and other temporary and seasonal workers. The term also includes individuals working for digital applications or platforms, staffing agencies, contractors or subcontractors on behalf of the employer at any individual work site, as well as any individual delivering goods or transporting people at, to or from the work site on behalf of the employer, regardless of whether delivery or transport is conducted by an individual or entity that would otherwise be deemed an employer under this chapter. The term does not include employees or independent contractors of the state, any political subdivision of the state, a public authority, or any other governmental agency or instrumentality.

As of the date of the publication of this document, while the State continues to deal with COVID-19 and a risk still exists, no designation is in effect at this time. Please check the websites of Departments of Health and Labor for up to date information on whether a designation has been put into effect, as any such designation will be prominently displayed. No employer is required to put a plan into effect absent such a designation by the Commissioner of Health.

Responsibilities

This plan applies to all employees of _____, and [all]/[the following work sites]:

This plan requires commitment to ensure compliance with all plan elements aimed at preventing the spread of infectious disease. The following supervisory employee(s) are designated to enforce compliance with the plan. Additionally, these supervisory employees will act as the designated contacts unless otherwise noted in this plan:

Name	Title	Location	Phone

Exposure Controls During a Designated Outbreak

Minimum Controls During an Outbreak

During an airborne infectious disease outbreak, the following minimum controls will be used in all areas of the worksite:

- General Awareness: Individuals may not be aware that they have the infectious disease and can spread it to others. Employees should remember to:
 - ◊ Maintain physical distancing;
 - ◊ Exercise coughing/sneezing etiquette;
 - ◊ Wear face coverings, gloves, and personal protective equipment (PPE), as appropriate;
 - ◊ Individuals limit what they touch;
 - ◊ Stop social etiquette behaviors such as hugging and hand shaking, and
 - ◊ Wash hands properly and often.
- “Stay at Home Policy”: If an employee develops symptoms of the infectious disease, the employee should not be in the workplace. The employee should inform the designated contact and follow New York State Department of Health (NYSDOH) and Centers for Disease Control and Prevention (CDC) guidance regarding obtaining medical care and isolating.
- Health Screening: Employees will be screened for symptoms of the infectious disease at the beginning of their shift. Employees are to self-monitor throughout their shift and report any new or emerging signs or symptoms of the infectious disease to the designated contact. An employee showing signs or symptoms of the infectious disease should be removed from the workplace and should contact a healthcare professional for instructions. The health screening elements will follow guidance from NYSDOH and CDC guidance, if available.

- **Face Coverings:** To protect your coworkers, employees will wear face coverings throughout the workday to the greatest extent possible. Face coverings and physical distancing should be used together whenever possible. The face covering must cover the nose and mouth, and fit snugly, but comfortably, against the face. The face covering itself must not create a hazard, e.g. have features could get caught in machinery or cause severe fogging of eyewear. The face coverings must be kept clean and sanitary and changed when soiled, contaminated, or damaged.
- **Physical Distancing:** Physical distancing will be followed as much as feasible. Avoid unnecessary gatherings and maintain a distance of at least six feet (or as recommended by the NYSDOH/CDC for the infectious agent) from each other. Use a face covering when physical distance cannot be maintained. In situations where prolonged close contact with other individuals is likely, use the following control methods (*Note to employer: Check off the controls you intend to use and add any additional controls not listed here*):
 - ◊ restricting or limiting customer or visitor entry;
 - ◊ limiting occupancy;
 - ◊ allowing only one person at a time inside small enclosed spaces with poor ventilation;
 - ◊ reconfiguring workspaces;
 - ◊ physical barriers;
 - ◊ signage;
 - ◊ floor markings;
 - ◊ telecommuting;
 - ◊ remote meetings;
 - ◊ preventing gatherings;
 - ◊ restricting travel;
 - ◊ creating new work shifts and/or staggering work hours;
 - ◊ adjusting break times and lunch periods;
 - ◊ delivering services remotely or through curbside pickup
 - ◊ _____
- **Hand Hygiene:** To prevent the spread of infection, employees should wash hands with soap and water for at least 20 seconds or use a hand sanitizer with at least 60% alcohol to clean hands BEFORE and AFTER:
 - ◊ Touching your eyes, nose, or mouth;
 - ◊ Touching your mask;
 - ◊ Entering and leaving a public place; and
 - ◊ Touching an item or surface that may be frequently touched by other people, such as door handles, tables, gas pumps, shopping carts, or electronic cashier registers/screens.

Because hand sanitizers are less effective on soiled hands, wash hands rather than using hand sanitizer when your hands are soiled.

- Cleaning and Disinfection: See Section V of this plan.
- “Respiratory Etiquette”: Because infectious diseases can be spread by droplets expelled from the mouth and nose, employees should exercise appropriate respiratory etiquette by covering nose and mouth when sneezing, coughing or yawning.
- Special Accommodations for Individuals with Added Risk Factors: Some employees, due to age, underlying health condition, or other factors, may be at increased risk of severe illness if infected. Please inform your supervisor or the HR department if you fall within this group and need an accommodation.

ADVANCED CONTROLS DURING AN OUTBREAK

For activities where the Minimum Controls alone will not provide sufficient protection for employees, additional controls from the following hierarchy may be necessary. Employers should determine if the following are necessary:

- Elimination: Employers should consider the temporary suspension or elimination of risky activities where adequate controls could not provide sufficient protection for employees.
- Engineering Controls: Employers should consider appropriate controls to contain and/or remove the infectious agent, prevent the agent from being spread, or isolate the worker from the infectious agent. Examples of engineering controls include:
 - ◊ Mechanical Ventilation:
 - » Local Exhaust Ventilation, for example:
 - * Ventilated booths (lab hoods);
 - * Kitchen Vents; and
 - * Vented biosafety cabinets.
 - ◊ General Ventilation, for example:
 - » Dedicated ventilation systems for cooking areas, malls, atriums, surgical suites, manufacturing, welding, indoor painting, labs, negative pressure isolation rooms;
 - » Increasing the percentage of fresh air introduced into air handling systems;
 - » Avoiding air recirculation;
 - » Using higher-efficiency air filters in the air handling system;
 - » If fans are used in the facility, arrange them so that air does not blow directly from one worker to another; and
 - ◊ Natural Ventilation, for example:
 - » Opening outside windows and doors to create natural ventilation; and
 - » Opening windows on one side of the room to let fresh air in and installing window exhaust fans on the opposite side of the room so that they exhaust air outdoors. (*Note: This method is appropriate only if air will not blow from one person to another.*)
 - ◊ Install automatic disinfection systems (e.g., ultraviolet light disinfection systems).
 - ◊ Install cleanable barriers such as partitions and/or clear plastic sneeze/cough guards.
 - ◊ Change layout to avoid points or areas where employees may congregate (e.g., *install additional timeclocks*).

Subject to changes based on operations and circumstances surrounding the infectious disease, engineering controls that are anticipated to be used are listed in the following table:

Engineering Controls Utilized/Location:

Note to Employer: One of the best ways to reduce exposure to infectious agents is to improve ventilation. The aim is to deliver more “clean air” into an occupied area and exhaust the contaminated air to a safe location. In some cases, the air may have to be filtered before it enters the work area and/or before it is exhausted. Direct the contaminated air away from other individuals and from the building’s fresh air intake ports. Consult your ventilation system’s manufacturer or service company to determine if improvements are possible for your system.

- Administrative Controls” are policies and work rules used to prevent exposure. Examples include:
 - ◊ Increasing the space between workers;
 - ◊ Slowing production speed to accommodate fewer workers at a time;
 - ◊ Disinfecting procedures for specific operations;
 - ◊ Not shaking out soiled laundry;
 - ◊ Employee training;
 - ◊ Identify and prioritize job functions that are essential for continuous operations;
 - ◊ Cross-train employees to ensure critical operations can continue during worker absence;
 - ◊ Limit the use of shared workstations;
 - ◊ Post signs reminding employees of respiratory etiquette, masks, handwashing;
 - ◊ Rearrange traffic flow to allow for one-way walking paths;
 - ◊ Provide clearly designated entrance and exits;
 - ◊ Provide additional short breaks for handwashing and cleaning;
 - ◊ Establishing pods or cohorts working on same shift;

Subject to changes based on operations and circumstances surrounding the infectious disease, the following specific administrative controls are anticipated to be used:

Administrative Controls Utilized/Location:

- Personal Protective Equipment (PPE) are devices like eye protection, face shields, respirators^{1,2}, and gloves that protect the wearer from infection. PPE will be provided, used and maintained in a sanitary and reliable condition at no cost to the employee. The PPE provided to an employee will be based on a hazard assessment for the workplace.

PPE Required - Activity Involved/Location:

¹ The use of respiratory protection, e.g. an N95 filtering facepiece respirator, requires compliance with the OSHA Respiratory Protection Standard 29 CFR 1910.134 or temporary respiratory protection requirements OSHA allows for during the infectious disease outbreak.

² Respirators with exhalation valves will release exhaled droplets from the respirators. Respirators are designed to protect the wearer. Surgical masks and face coverings, which are not respirators, are designed to protect others, not the wearer.

Exposure Control Readiness, Maintenance and Storage

The controls we have selected will be obtained, properly stored, and maintained so that they are ready for immediate use in the event of an infectious disease outbreak and any applicable expiration dates will be properly considered.

Housekeeping During a Designated Outbreak

Disinfection Methods and Schedules

Objects that are touched repeatedly by multiple individuals, such as door handles, light switches, control buttons/levers, dials, levers, water faucet handles, computers, phones, or handrails must be cleaned frequently with an appropriate disinfectant. Surfaces that are handled less often, or by fewer individuals, may require less frequent disinfection. The disinfection methods and schedules selected are based on specific workplace conditions.

The New York State Department of Environmental Conservation (NYSDEC) and the Environmental Protection Agency (EPA) have compiled lists of approved disinfectants that are effective against many infectious agents (see dec.ny.gov and epa.gov/pesticide-registration/selected-epa-registered-disinfectants). Select disinfectants based on NYSDOH and CDC guidance and follow manufacturer guidance for methods, dilution, use, and contact time.

Adjustments to Normal Housekeeping Procedures

Normal housekeeping duties and schedules should continue to be followed during an infectious disease outbreak, to the extent practicable and appropriate consistent with NYSDOH and/or CDC guidance in effect at the time. However, routine procedures may need to be adjusted and additional cleaning and disinfecting may be required.

Housekeeping staff may be at increased risk because they may be cleaning many potentially contaminated surfaces. Some housekeeping activities, like dry sweeping, vacuuming, and dusting, can re-suspend into the air particles that are contaminated with the infectious agent. For that reason, alternative methods and/or increased levels of protection may be needed.

Rather than dusting, for example, the CDC recommends cleaning surfaces with soap and water before disinfecting them. Conducting housekeeping during “off” hours may also reduce other workers’ exposures to the infectious agent. Best practice dictates that housekeepers should wear respiratory protection. See [cdc.gov](https://www.cdc.gov) for more guidance.

If an employee develops symptoms of the infectious disease at work, it is ideal to isolate the area in accordance with guidance issued by NYSDOH or the CDC, before cleaning and disinfecting the sick employee’s work area. This delay will allow contaminated droplets to settle out of the air and the space to be ventilated.

As feasible, liners should be used in trash containers. Empty the containers often enough to prevent overfilling. Do not forcefully squeeze the air out of the trash bags before tying them closed. Trash containers may contain soiled tissue or face coverings.

Infection Response During a Designated Outbreak

If an actual, or suspected, infectious disease case occurs at work, take the following actions:

- Instruct the sick individual to wear a face covering and leave the worksite and follow NYSDOH/CDC guidance.
- Follow local and state authority guidance to inform impacted individuals.

Training and Information During a Designated Outbreak

- _____ will verbally inform all employees of the existence and location of this Plan, the circumstances it can be activated, the infectious disease standard, employer policies, and employee rights under the HERO Act. (*Note: training need not be provided to the following individuals: any individuals working for staffing agencies, contractors or subcontractors on behalf of the employer at any individual work site, as well as any individual delivering goods or transporting people at, to or from the work site on behalf of the employer, where delivery or transport is conducted by an individual or entity that would otherwise be deemed an employer under this chapter.*)
- When this plan is activated, all personnel will receive training which will cover all elements of this plan and the following topics:
 - ◊ The infectious agent and the disease(s) it can cause;
 - ◊ The signs and symptoms of the disease;
 - ◊ How the disease can be spread;

- ◇ An explanation of this Exposure Prevention Plan;
- ◇ The activities and locations at our worksite that may involve exposure to the infectious agent;
- ◇ The use and limitations of exposure controls
- ◇ A review of the standard, including employee rights provided under Labor Law, Section 218-B.
- The training will be
 - ◇ Provided at no cost to employees and take place during working hours. If training during normal work hours is not possible, employees will be compensated for the training time (with pay or time off);
 - ◇ Appropriate in content and vocabulary to your educational level, literacy, and preferred language; and
 - ◇ Verbally provided in person or through telephonic, electronic, or other means.

Plan Evaluations During a Designated Outbreak

The employer will review and revise the plan periodically, upon activation of the plan, and as often as needed to keep up-to-date with current requirements. Document the plan revisions below:

Plan Revision History			
Date	Participants	Major Changes	Approved by

Retaliation Protections and Reporting of Any Violations

No employer, or his or her agent, or person acting as or on behalf of a hiring entity, or the officer or agent of any entity, business, corporation, partnership, or limited liability company, shall discriminate, threaten, retaliate against, or take adverse action against any employee for exercising their rights under this plan, including reporting conduct the employee reasonably believes in good faith violates the plan or airborne infectious disease concerns to their employer, government agencies or officials or for refusing to work where an employee reasonably believes in good faith that such work exposes him or her, other workers, or the public to an unreasonable risk of exposure, provided the employee, another employee, or representative has notified the employer verbally or in writing, including electronic communication, of the inconsistent working conditions and the employer's failure to cure or if the employer knew or should have known of the consistent working conditions.

Notification of a violation by an employee may be made verbally or in writing, and without limitation to format including electronic communications. To the extent that communications between the employer and employee regarding a potential risk of exposure are in writing, they shall be maintained by the employer for two years after the conclusion of the designation of a high risk disease from the Commissioner of Health, or two years after the conclusion of the Governor's emergency declaration of a high risk disease. Employer should include contact information to report violations of this plan and retaliation during regular business hours and for weekends/other non-regular business hours when employees may be working.

Recordkeeping

_____ (*Name of the responsible department such as Human Resources*) will maintain all records of safety and health training. Each training record will contain the following:

- Date of training
- Topic(s) covered
- Name of the trainer
- Signature of each employee attending
- Test or quizzes if any

Following each training the _____ (*Insert Department Manager/Supervisor here as appropriate*) will prepare, collect and forward the records to _____ (*Insert the same name as above*).

Sample Sexual Harassment Policy for NY Employers

More information on Sexual Harassment Training for NY Employers can be found on our website at: fleuryrisk.com/497-member (Case-sensitive password: **Group 497**).

Introduction

_____ (*Employer Name*) is committed to maintaining a workplace free from sexual harassment. Sexual harassment is a form of workplace discrimination. All employees are required to work in a manner that prevents sexual harassment in the workplace. This policy is one component of _____ (*Employer Name*)'s commitment to a discrimination-free work environment. Sexual harassment is against the law¹ and all employees have a legal right to a workplace free from sexual harassment and employees are urged to report sexual harassment by filing a complaint internally with _____ (*Employer Name*). Employees can also file a complaint with a government agency or in court under federal, state or local anti-discrimination laws.

Policy:

- _____ (*Employer Name*)'s policy applies to all employees, applicants for employment, interns, whether paid or unpaid, contractors and persons conducting business, regardless of immigration status, with _____ (*Employer Name*). In the remainder of this document, the term "employees" refers to this collective group.
- Sexual harassment will not be tolerated. Any employee or individual covered by this policy who engages in sexual harassment or retaliation will be subject to remedial and/or disciplinary action (*e.g., counseling, suspension, termination*).
- **Retaliation Prohibition:** No person covered by this Policy shall be subject to adverse action because the employee reports an incident of sexual harassment, provides information, or otherwise assists in any investigation of a sexual harassment complaint.

_____ (*Employer Name*) will not tolerate such retaliation against anyone who, in good faith, reports or provides information about suspected sexual harassment. Any employee of _____ (*Employer Name*) who retaliates against anyone involved in a sexual harassment investigation will be subjected to disciplinary action, up to and including termination. All employees, paid or unpaid interns, or non-employees² working in the workplace who believe they have been subject to such retaliation should inform a supervisor, manager, or _____ (*Name of Appropriate Person*). All employees, paid or unpaid interns or non-employees who believe they have been a target of such retaliation may also seek relief in other available forums, as explained below in the section on Legal Protections.

¹ While this policy specifically addresses sexual harassment, harassment because of and discrimination against persons of all protected classes is prohibited. In New York State, such classes include age, race, creed, color, national origin, sexual orientation, military status, sex, disability, marital status, domestic violence victim status, gender identity and criminal history.

- Sexual harassment is offensive, is a violation of our policies, is unlawful, and may subject _____ (*Employer Name*) to liability for harm to targets of sexual harassment. Harassers may also be individually subject to liability. Employees of every level who engage in sexual harassment, including managers and supervisors who engage in sexual harassment or who allow such behavior to continue, will be penalized for such misconduct.
- _____ (*Employer Name*) will conduct a prompt and thorough investigation that ensures due process for all parties, whenever management receives a complaint about sexual harassment, or otherwise knows of possible sexual harassment occurring. _____ (*Employer Name*) will keep the investigation confidential to the extent possible. Effective corrective action will be taken whenever sexual harassment is found to have occurred. All employees, including managers and supervisors, are required to cooperate with any internal investigation of sexual harassment.
- All employees are encouraged to report any harassment or behaviors that violate this policy. _____ (*Employer Name*) will provide all employees a complaint form for employees to report harassment and file complaints.
- Managers and supervisors are required to report any complaint that they receive, or any harassment that they observe or become aware of, to _____ (*Person or Office Designated*).
- This policy applies to all employees, paid or unpaid interns, and non-employees and all must follow and uphold this policy. This policy must be provided to all employees and should be posted prominently in all work locations to the extent practicable (e.g., *in a main office, not an offsite work location*) and be provided to employees upon hiring.

What Is “Sexual Harassment”?

Sexual harassment is a form of sex discrimination and is unlawful under federal, state, and (where applicable) local law. Sexual harassment includes harassment on the basis of sex, sexual orientation, self-identified or perceived sex, gender expression, gender identity and the status of being transgender.

Sexual harassment includes unwelcome conduct which is either of a sexual nature, or which is directed at an individual because of that individual’s sex when:

- Such conduct has the purpose or effect of unreasonably interfering with an individual’s work performance or creating an intimidating, hostile or offensive work environment, even if the reporting individual is not the intended target of the sexual harassment;
- Such conduct is made either explicitly or implicitly a term or condition of employment; or

² A non-employee is someone who is (or is employed by) a contractor, subcontractor, vendor, consultant, or anyone providing services in the workplace. Protected non-employees include persons commonly referred to as independent contractors, “gig” workers and temporary workers. Also included are persons providing equipment repair, cleaning services or any other services provided pursuant to a contract with the employer.

- Submission to or rejection of such conduct is used as the basis for employment decisions affecting an individual's employment.

A sexually harassing hostile work environment includes, but is not limited to, words, signs, jokes, pranks, intimidation or physical violence which are of a sexual nature, or which are directed at an individual because of that individual's sex. Sexual harassment also consists of any unwanted verbal or physical advances, sexually explicit derogatory statements or sexually discriminatory remarks made by someone which are offensive or objectionable to the recipient, which cause the recipient discomfort or humiliation, which interfere with the recipient's job performance.

Sexual harassment also occurs when a person in authority tries to trade job benefits for sexual favors. This can include hiring, promotion, continued employment or any other terms, conditions or privileges of employment. This is also called "quid pro quo" harassment.

Any employee who feels harassed should report so that any violation of this policy can be corrected promptly. Any harassing conduct, even a single incident, can be addressed under this policy.

Examples of Sexual Harassment

The following describes some of the types of acts that may be unlawful sexual harassment and that are strictly prohibited:

- Physical acts of a sexual nature, such as:
 - ◊ Touching, pinching, patting, kissing, hugging, grabbing, brushing against another employee's body or poking another employee's body;
 - ◊ Rape, sexual battery, molestation or attempts to commit these assaults.
- Unwanted sexual advances or propositions, such as:
 - ◊ Requests for sexual favors accompanied by implied or overt threats concerning the target's job performance evaluation, a promotion or other job benefits or detriments;
 - ◊ Subtle or obvious pressure for unwelcome sexual activities.
- Sexually oriented gestures, noises, remarks or jokes, or comments about a person's sexuality or sexual experience, which create a hostile work environment.
- Sex stereotyping occurs when conduct or personality traits are considered inappropriate simply because they may not conform to other people's ideas or perceptions about how individuals of a particular sex should act or look.
- Sexual or discriminatory displays or publications anywhere in the workplace, such as:
 - ◊ Displaying pictures, posters, calendars, graffiti, objects, promotional material, reading materials or other materials that are sexually demeaning or pornographic. This includes such sexual displays on workplace computers or cell phones and sharing such displays while in the workplace.

- Hostile actions taken against an individual because of that individual's sex, sexual orientation, gender identity and the status of being transgender, such as:
 - ◊ Interfering with, destroying or damaging a person's workstation, tools or equipment, or otherwise interfering with the individual's ability to perform the job;
 - ◊ Sabotaging an individual's work;
 - ◊ Bullying, yelling, name-calling.

Who Can Be a Target of Sexual Harassment?

Sexual harassment can occur between any individuals, regardless of their sex or gender. New York Law protects employees, paid or unpaid interns, and non-employees, including independent contractors, and those employed by companies contracting to provide services in the workplace. Harassers can be a superior, a subordinate, a coworker or anyone in the workplace including an independent contractor, contract worker, vendor, client, customer or visitor.

Where Can Sexual Harassment Occur?

Unlawful sexual harassment is not limited to the physical workplace itself. It can occur while employees are traveling for business or at employer sponsored events or parties. Calls, texts, emails, and social media usage by employees can constitute unlawful workplace harassment, even if they occur away from the workplace premises, on personal devices or during non-work hours.

Retaliation

Unlawful retaliation can be any action that could discourage a worker from coming forward to make or support a sexual harassment claim. Adverse action need not be job-related or occur in the workplace to constitute unlawful retaliation (e.g., threats of physical violence outside of work hours).

Such retaliation is unlawful under federal, state, and (where applicable) local law. The New York State Human Rights Law protects any individual who has engaged in "protected activity."

Protected activity occurs when a person has:

- made a complaint of sexual harassment, either internally or with any anti-discrimination agency;
- testified or assisted in a proceeding involving sexual harassment under the Human Rights Law or other anti-discrimination law;
- opposed sexual harassment by making a verbal or informal complaint to management, or by simply informing a supervisor or manager of harassment;
- reported that another employee has been sexually harassed; or
- encouraged a fellow employee to report harassment.

Even if the alleged harassment does not turn out to rise to the level of a violation of law, the individual is protected from retaliation if the person had a good faith belief that the practices were unlawful. However, the retaliation provision is not intended to protect persons making intentionally false charges of harassment.

Reporting Sexual Harassment

Preventing sexual harassment is everyone's responsibility. _____

(*Employer Name*) cannot prevent or remedy sexual harassment unless it knows about it. Any employee, paid or unpaid intern or non-employee who has been subjected to behavior that may constitute sexual harassment is encouraged to report such behavior to a supervisor, manager or _____ (*Person or Office Designated*). Anyone who witnesses or becomes aware of potential instances of sexual harassment should report such behavior to a supervisor, manager or _____ (*Person or Office Designated*).

Reports of sexual harassment may be made verbally or in writing. A form for submission of a written complaint is attached to this Policy, and all employees are encouraged to use this complaint form. Employees who are reporting sexual harassment on behalf of other employees should use the complaint form and note that it is on another employee's behalf.

Employees, paid or unpaid interns or non-employees who believe they have been a target of sexual harassment may also seek assistance in other available forums, as explained below in the section on Legal Protections.

Supervisory Responsibilities

All supervisors and managers who receive a complaint or information about suspected sexual harassment, observe what may be sexually harassing behavior or for any reason suspect that sexual harassment is occurring, are required to report such suspected sexual harassment to _____ (*Person or Office Designated*).

In addition to being subject to discipline if they engaged in sexually harassing conduct themselves, supervisors and managers will be subject to discipline for failing to report suspected sexual harassment or otherwise knowingly allowing sexual harassment to continue. Supervisors and managers will also be subject to discipline for engaging in any retaliation.

Complaint and Investigation of Sexual Harassment

All complaints or information about sexual harassment will be investigated, whether that information was reported in verbal or written form. Investigations will be conducted in a timely manner, and will be confidential to the extent possible.

An investigation of any complaint, information or knowledge of suspected sexual harassment will be prompt and thorough, commenced immediately and completed as soon as possible. The investigation will be kept confidential to the extent possible. All persons involved, including complainants, witnesses and alleged harassers will be accorded due process, as outlined below, to protect their rights to a fair and impartial investigation.

Any employee may be required to cooperate as needed in an investigation of suspected sexual harassment. _____ (*Employer Name*) will not tolerate retaliation against employees who file complaints, support another's complaint or participate in an investigation regarding a violation of this policy.

While the process may vary from case to case, investigations should be done in accordance with the following steps:

- Upon receipt of complaint, _____ (*Person or Office Designated*) will conduct an immediate review of the allegations, and take any interim actions (e.g., instructing the respondent to refrain from communications with the complainant), as appropriate. If complaint is verbal, encourage the individual to complete the "Complaint Form" in writing. If he or she refuses, prepare a Complaint Form based on the verbal reporting.
- If documents, emails or phone records are relevant to the investigation, take steps to obtain and preserve them.
- Request and review all relevant documents, including all electronic communications.
- Interview all parties involved, including any relevant witnesses;
- Create a written documentation of the investigation (such as a letter, memo or email), which contains the following:
 - ◊ A list of all documents reviewed, along with a detailed summary of relevant documents;
 - ◊ A list of names of those interviewed, along with a detailed summary of their statements;
 - ◊ A timeline of events;
 - ◊ A summary of prior relevant incidents, reported or unreported; and
 - ◊ The basis for the decision and final resolution of the complaint, together with any corrective action(s).
- Keep the written documentation and associated documents in a secure and confidential location.
- Promptly notify the individual who reported and the individual(s) about whom the complaint was made of the final determination and implement any corrective actions identified in the written document.
- Inform the individual who reported of the right to file a complaint or charge externally as outlined in the next section.

Legal Protections And External Remedies

Sexual harassment is not only prohibited by _____ (*Employer Name*) but is also prohibited by state, federal, and, where applicable, local law.

Aside from the internal process at _____ (*Employer Name*), employees may also choose to pursue legal remedies with the following governmental entities. While a private attorney is not required to file a complaint with a governmental agency, you may seek the legal advice of an attorney.

In addition to those outlined below, employees in certain industries may have additional legal protections.

State Human Rights Law (HRL)

The Human Rights Law (HRL), codified as N.Y. Executive Law, art. 15, § 290 et seq., applies to all employers in New York State with regard to sexual harassment, and protects employees, paid or unpaid interns and non-employees, regardless of immigration status. A complaint alleging violation of the Human Rights Law may be filed either with the Division of Human Rights (DHR) or in New York State Supreme Court.

Complaints with DHR may be filed any time within one year of the harassment. If an individual did not file at DHR, they can sue directly in state court under the HRL, within three years of the alleged sexual harassment. An individual may not file with DHR if they have already filed a HRL complaint in state court.

Complaining internally to _____ (*Employer Name*) does not extend your time to file with DHR or in court. The one year or three years is counted from date of the most recent incident of harassment.

You do not need an attorney to file a complaint with DHR, and there is no cost to file with DHR.

DHR will investigate your complaint and determine whether there is probable cause to believe that sexual harassment has occurred. Probable cause cases are forwarded to a public hearing before an administrative law judge.

If sexual harassment is found after a hearing, DHR has the power to award relief, which varies but may include requiring your employer to take action to stop the harassment, or redress the damage caused, including paying of monetary damages, attorney's fees and civil fines.

DHR's main office info is: NYS Division of Human Rights, One Fordham Plaza, 4th Floor, Bronx, NY 10458; call (718) 741-8400; or visit: www.dhr.ny.gov. Contact DHR at (888) 392-3644 or visit dhr.ny.gov/complaint for filing a complaint. This website has a complaint form that can be downloaded, filled out, notarized and mailed to DHR. It also contains contact info for DHR's regional offices.

Civil Rights Act of 1964

The United States Equal Employment Opportunity Commission (EEOC) enforces federal anti-discrimination laws, including Title VII of the 1964 federal Civil Rights Act (*codified as 42 U.S.C. § 2000e et seq.*). An individual can file a complaint with the EEOC anytime within 300 days from the harassment. There is no cost to file a complaint with the EEOC. The EEOC will investigate the complaint, and determine whether there is reasonable cause to believe that discrimination has occurred, at which point the EEOC will issue a Right to Sue letter permitting the individual to file a complaint in federal court.

The EEOC does not hold hearings or award relief, but may take other action including pursuing cases in federal court on behalf of complaining parties. Federal courts may award remedies if discrimination is found to have occurred. In general, private employers must have at least 15 employees to come within the jurisdiction of the EEOC.

An employee alleging discrimination at work can file a "Charge of Discrimination." The EEOC has district, area, and field offices where complaints can be filed. Contact the EEOC by calling 1-800-669-4000 (TTY: 1-800-669-6820), visiting their website at www.eeoc.gov or via email at info@eeoc.gov. If an individual filed an administrative complaint with DHR, DHR will file the complaint with the EEOC to preserve the right to proceed in federal court.

Local Protections

Many localities enforce laws protecting individuals from sexual harassment and discrimination. An individual should contact the county, city or town in which they live to find out if such a law exists. For example, employees who work in New York City may file complaints of sexual harassment with the NYC Commission on Human Rights. Contact their main office at Law Enforcement Bureau of the NYC Commission on Human Rights, 40 Rector St, 10th Floor, New York, NY; call 311 or (212) 306-7450; or visit www.nyc.gov/html/cchr/html/home/home.shtml.

Contact the Local Police Department

If the harassment involves unwanted physical touching, coerced physical confinement or coerced sex acts, the conduct may constitute a crime. Contact the local police department.

Workplace Violence

Employer Name: _____ Date: _____

Every employer shall provide each employee with information and training on the risk of workplace violence in their workplace or workplaces at the time of the employee's initial assignment and at least annually thereafter.

Any substantial change to the workplace violence program must be communicated to employees.

Upon completion of the workplace violence prevention program, all employees must be provided information and training on:

- Requirements of the regulation (*12NYCRR Part 800.6*)
- Risk factors specific to the workplace that were identified in the risk evaluation and determination
- Measures that employees can take to protect themselves from the identified risks including specific procedures that the employer has implemented such as
- Incident alert and notification procedures
- Appropriate work practices
- Emergency procedures
- Use of security alarms and other devices
- Procedures to report incidents of workplace violence
- Location of the written workplace program and how to obtain a copy²

Note: Information otherwise kept confidential for security reasons does not have to be disclosed to all employees. Examples of confidential information include but are not limited to information that would interfere with law enforcement investigations or judicial proceedings, would deprive a person of a right to a fair trial, would identify a confidential source or disclose confidential information relating to a criminal investigation, would reveal criminal investigative techniques or procedures except routine techniques and procedures, or would endanger the life or safety of any person.

² This part of the training requirements only applies to employers with 20 or more full-time permanent employees.

Sample Workplace Violence Incident Report

Workplace Violence Incident Report

- Date of Incident: _____
- Time of day/shift when the incident occurred: _____
- Workplace Location where the incident occurred: _____
- Provide a detailed description of the incident including:
 - ◊ Events leading up to the incident and how the incident ended:

 - ◊ Names and job title of involved employee(s):

 - ◊ Name or other identifier of other individuals involved:

 - ◊ Nature and extent of injuries arising from the incident:

 - ◊ Name of witness(es):

Date: _____

Name of Employee Reporting the Incident (*Optional*): _____

Accident Investigation

All accidents and illnesses are investigated to identify the root cause(s) and to determine what changes can be made to reduce the potential for a similar situation to reoccur.

When an employee is injured on the job, the _____ (*Name of Responsible Individual or Department*) will make every effort to facilitate prompt medical care, arrange transport to a medical facility if necessary, and assist you in your treatment plan so that you may return to work as quickly as possible. We will process the necessary paperwork, stay in touch with your medical service providers, and if appropriate, arrange for short-term limited duty to ease your transition back into full-time work. You and your supervisor will be required to complete an Incident Report form, and your supervisor will conduct an accident investigation and file a report on that investigation. The purpose of the investigation is to determine why and how the accident happened and to take steps to reduce the potential for a re-occurrence of that type of accident.

Accident investigations are to be conducted as soon after the incident as possible after all immediate safety and health situations have been resolved at the accident scene. The Supervisor of the employee will lead the investigation and work cooperatively with others who were on-site and have observations to contribute to the fact-finding. Upon completion of the incident investigation form is provided to _____ (*insert here the specific departments such as Human Resources and the Safety Committee*). The ultimate goal of the accident investigation is to identify the conditions responsible for the incident and to develop the recommendations that may result from the incident investigation.

Injury Response: Procedures at the Time of the Incident

In the event of an accident or injury to an employee, injury to a citizen by employer operations, or damage to property related to our operations, the _____ (*Responsible individual or Department Name*) is to be notified by the supervisor or department head immediately.

Employees involved in the incident and/or in the follow-up are expected to remain calm and cooperative with authorities, make the necessary requests for emergency assistance, and collect vital information so that an effective accident investigation can take place. Emergency assistance is obtained by calling 911 or _____.

Sample Incident Investigation Report

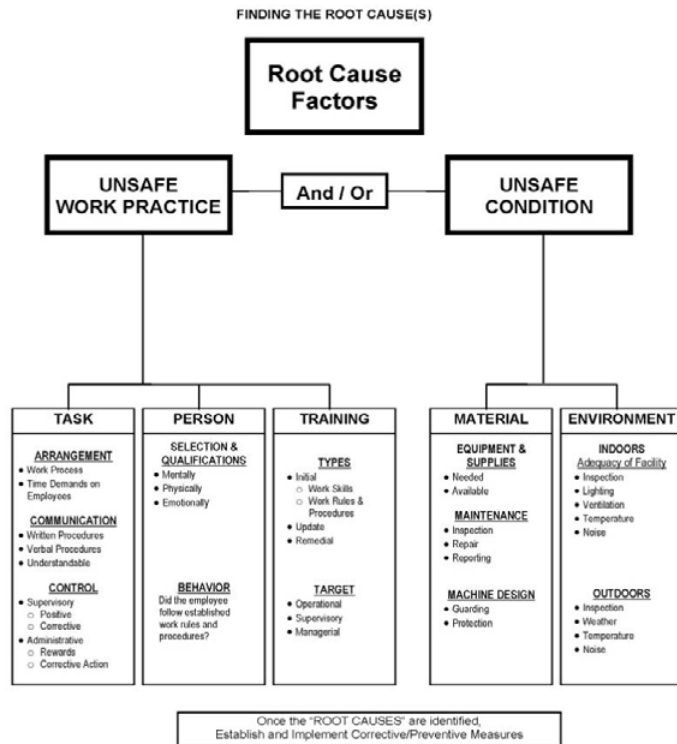
Incident Investigation

Name	Company	Time	Date
Department – Shift	Job	How long on job?	

What was the employee doing? *Describe the activity, equipment, materials, people, and environmental conditions involved in the incident.*

What happened? Indicate in detail what took place. *Describe the Incident, the type of injury, whether the employee was wearing appropriate safety equipment, etc.*

What caused the incident? *Explain in detail the condition, act, malfunction, etc.—or combination of factors—that is the incident. See flow chart on next page.*



Corrective action recommended:

Investigated by

Date

Reviewed by

Date

Safety Committee

It is the policy of the _____ (*Entity Name*) to provide a workplace and an environment as free as possible from recognized hazards that could cause injury or illness to our employees. A safety committee is established to enlist the participation of employees in the _____ (*Entity Name*) workplace safety and health program.

The Safety Committee will be responsible for designing, evaluating and monitoring safety performance for all _____ (*Entity Name*) operations. The Safety Committee includes representatives of management, labor and various departments who have specialized knowledge of the municipal operations. Meetings will be held on _____ (*Insert common time frame e.g., first Tuesday of each month*) at _____ (*Location*).

Membership

- The Safety Committee will be composed of _____ (*Number of members*) members who will be selected on the basis of their ability to recognize hazards, ability to communicate, and work experience.
- The _____ (*Responsible Individual*) will act as an advisor to the committee and be available to provide technical assistance.
- The Committee chairperson will be elected by the committee and will be responsible for assuring that an agenda is developed for each meeting and that minutes are prepared.
- Department heads and other experts may be called upon to assist the committee with specific problems or proposals for changes in operational procedures.
- All members on the committee are expected to prepare for meetings, attend and participate.

Responsibility

- The Safety Committee will meet on a regular schedule (*at least quarterly*), with other meetings scheduled as needed.
- The Committee will:
 - ◊ Review existing safety and health rules and procedures; make sure that these rules are current, realistic, and implemented.
 - ◊ Review accident and injury reports to determine the root cause, and to conditions that may have caused the accidents.
 - ◊ Review any and all safety inspection reports.
 - ◊ Involve all employees, not just the committee, in furthering the cause of accident prevention through open channels of communication to and from the committee to both employees and management.
 - ◊ Assist in the identification of unsafe conditions and practices.

- ◇ Develop plans and recommend actions to remedy and prevent unsafe conditions and practices.
- ◇ Discuss and formulate safety and health policies and employee safety.
- ◇ Identify or develop handbooks, and/or relevant safety education materials and recommend their distribution by management.
- ◇ Publicize and promote the implementation of the policies.
- ◇ Review safety training needs.
- ◇ Review and provide safety and health recommendations to management.
- ◇ Prioritize and publicize the actions of the safety committee and the overall workplace safety and health program.

Self Inspections

Ongoing, periodic safety inspections are conducted in-house so that new or previously missed hazards and system failures can be identified.

These hazard assessments are conducted as follows:

- By members of the Safety Committee on a _____ (*insert the frequency of the hazard assessments*) basis.
- By Department Managers or Supervisors as follows:
 - ◊ Prior to beginning a construction job.
 - ◊ On a _____ (*Insert the frequency*) basis within the department.
 - ◊ Whenever unsafe or non-routine conditions are identified.

All observations are recorded, and a copy is sent to the Safety Committee including any recommendations to reduce workplace hazards.

On the next two pages is a Sample Office Safety Inspection Checklist.

Sample Office Safety Inspection Checklist

Facility Location: _____ Evaluated by: _____ Date: _____

	YES	NO	CORRECTIVE ACTION	PERSON RESPONSIBLE	DUE DATE
HOUSEKEEPING/STORAGE					
Are all stairways, aisles, and access ways kept clear of trip hazards and not used for storage?					
Are walkways in each room, office, cubicle, and hallway free of trip hazards such as cords, boxes and files?					
Is lighting adequate in stairways, walkways, storage rooms, closets, and housekeeping areas to prevent a trip/fall?					
Is general housekeeping in good order? <i>(Look for unnecessary debris, trip hazards, loose carpet, excessive accumulations of dust, standing water, other spilled liquids, etc.)</i>					
Are file cabinets loaded properly to avoid being too top heavy creating a tipping hazard?					
Are materials stored properly to avoid falling? Are heavy materials stored between knee and chest height to prevent shoulder/back strains?					
Are parking lots, sidewalks, or other exterior walking surfaces free from defects that could cause a trip/fall?					
WINTER HOUSEKEEPING					
Are walkways leading to and from the facility adequately maintained to minimize slips and falls from ice and snow?					
Are entryways maintained to minimize slips and falls from water and melted ice or snow?					
Are the building's gutters, downspouts, and ice melting cords in proper condition and adequate to draw water and ice accumulation away from walkways?					

Facility Location: _____ Evaluated by: _____ Date: _____

	YES	NO	CORRECTIVE ACTION	PERSON RESPONSIBLE	DUE DATE
WINTER HOUSEKEEPING (CONT'D)					
Is ice melt or sand readily available near exits that are likely to accumulate ice?					
EMERGENCY PREPAREDNESS/FIRE PROTECTION					
Are building evacuation drawings that indicate exit routes and staging areas for assembly outside the building up to date and posted near doorways?					
Are all fire doors to storage, telephone equipment, and power rooms in working order, unobstructed, and closed? <i>(Open fire doors increase the speed at which fire spreads and allow smoke to circulate more freely, causing an increased risk to both occupants and equipment.)</i>					
Are doors and passageways that may be mistaken for emergency exits marked " NOT AN EXIT " to minimize possible confusion?					
Are fire extinguishers installed in appropriate locations? Are extinguishers clearly marked and unobstructed by equipment or materials? <i>ABC-rated dry chemical extinguishers are appropriate in most areas. Extinguishers should be distributed to limit employee travel distance to 75 ft or less.</i>					
Are hand-held extinguishers mounted on walls as opposed to being stored on the ground or in file cabinets? <i>OSHA requires portable fire extinguishers to be mounted on a wall.</i>					
Are wall, floor, and ceiling penetrations for cables, wires, pipes, and mechanical systems such as ductwork, sealed to prevent the spread of fire and smoke? <i>Penetrations can be sealed with drywall, fire retardant pipe seal or fire stop pillows.</i>					

Back Safety and Safe Lifting

Guidelines for Lifting, Carrying and Moving Things Safely

Safe lifting can keep you from hurting your back. A few simple safety measures can go a long way toward preventing back injuries, strains and cuts.

Preventing Back Injury

It is easy to strain your back by lifting improperly. Bending at the waist puts a great strain on the back muscles. Using your weaker back muscles instead of your stronger leg muscles requires you to use more energy to lift. This can hurt your back. A painful back injury can last a lifetime! Don't lift from your waist. It takes 10 times the effort to lift that way! For example, lifting a 10-pound object puts 100 pounds of pressure on your lower back.

Safe Lifting Basics

- Think about the lift ahead of time. Know where you will place the item once it's lifted and make sure that there's a clear path to that spot. Size up the object and determine how to handle it. Wear gloves if necessary.
- Know your limits and get help when necessary. Understand that a back injury can last a lifetime. It's worth asking for assistance.
- Plan the lift: Test the weight by attempting to pick up a corner.
- Determine your walking path. Remove any obstructions or slip, trip or falling hazards from the walkway.
- Take a balanced stance with your feet shoulder- width apart. Squat down to lift and get as close as you can to the load.
- Get a secure grip and hug the load. Lift gradually using your legs, keeping the load close to your chest and keeping the back and neck straight.
- Once standing, change direction by pointing your feet and turn your whole body. Avoid twisting at your waist. To put the load down, use these guidelines in reverse. In tight quarters, use a series of lifts to change position

Keep These Safety Tips in Mind When Lifting:

- Use labor-saving devices to avoid carrying and lifting. Dollies, hand trucks, pallet jacks and forklifts can eliminate the need for potentially dangerous lifts.
- Avoid lifting and carrying by keeping frequently-used items close at hand.
- Use caution when carrying items on stairways and ladders. Do not exceed rated load capacity.

Things to Avoid

- Heavy lifting – especially repetitive lifting over a long period of time.
- Twisting at the waist while lifting or holding a heavy load. This frequently happens when placing items such as boxes in and out of storage racks.
- Reaching and lifting over your head, across a table, or out of the back of a truck.
- Lifting or carrying objects with awkward or odd shapes.
- Working in awkward, uncomfortable positions.
- Sitting or standing too long in one position or sitting with poor posture. These can be very hard on the lower back.

Ways It Is Also Possible to Injure Your Back

- Slipping on a wet floor or ice
- Falling down a flight of steps
- Attempting to catch an object that falls from your grasp
- Failing to get assistance when needed

Labor-Saving Devices

Manual and motorized devices, including forklifts and similar machines, are useful in reducing and eliminating strains from lifting heavy items. These machines must be used properly. OSHA has a specific standard concerning the safe use of motorized forklifts.

The OSHA P.I.T. standard includes training and skills evaluation, recordkeeping, usage guidelines and maintenance. Proper training and enforcement of safe-operation rules are critical, because unsafe acts (*human error*) are the leading cause of forklift accidents.

Personal Protective Equipment (PPE)

Personal protective equipment (PPE) including protection of the eyes, face, head, extremities and respiratory system are provided to employees. The purpose of the PPE is to protect the employee from identified hazards or environments. PPE is available at _____ (*Where PPE is stored*) or by contacting _____ (*Person responsible for providing the PPE to employees*).

The _____ (*Entity or department name*) PPE program includes the following:

- Work tasks have been assessed to determine what hazards are likely to be present that may need employees to use PPE.
- PPE has been selected that is appropriate for protection of the hazards identified.
- A stock of PPE in varying sizes is maintained and readily available for employees through the location and individuals identified above.
- All employees performing tasks that require the use of PPE are trained in the following:
 - ◊ When PPE is needed
 - ◊ What PPE is necessary
 - ◊ How to put on (don) and take off (doff) the PPE
 - ◊ How to adjust and wear the PPE
 - ◊ Limitations of PPE
 - ◊ Proper use, care, maintenance useful life and disposal of the PPE
- Employees are expected to use the PPE and Supervisors are expected to encourage and require the use of PPE by the employees.
- If respirators are required, a separate respiratory protection program has been developed to provide more detailed guidance.

On the next two pages is a sample PPE Hazard Assessment checklist.

Personal Protective Equipment (PPE) Hazard Assessment

Company Name	Location	Job Task(s)	
HAZARD	SELECTION OF PPE	HAZARD SEVERITY	MISHAP PROBABILITY
<u>EYE/FACE</u> ___ Flying Objects ___ Splash (Metals) ___ Dusts ___ Mists ___ Gas Welding (Shade 4-8) ___ Cutting/Torch (Shade 3-6) ___ Brazing (Shade 3-4) ___ Weld/Electric (Shade 10-14) Other: _____	___ Spectacle ___ Spectacle with Side Shield ___ Face Shield ___ Goggles ___ Sealed Goggles ___ Welding Helmet ___ Welding Shield Other: _____	___ CAT I: Catastrophic Hazard may cause death ___ CAT II: Critical May cause severe injury, severe illness or disability ___ CAT III: Marginal May cause minor injury or minor illness ___ CAT IV: Negligible Probably would not cause injury or minor illness	___ A) Likely to occur immediately or within a short period of time ___ B) Probably will not occur in time ___ C) May occur in time ___ D) Unlikely to occur

HAZARD	SELECTION OF PPE	HAZARD SEVERITY	MISHAP PROBABILITY
<u>HEAD</u>			
<input type="checkbox"/> Falling Objects	<input type="checkbox"/> Class A (<2,000 volts)	<input type="checkbox"/> CAT I: Catastrophic	<input type="checkbox"/> A)
<input type="checkbox"/> Electrical Shock	<input type="checkbox"/> Class B (>2,000 volts)	<input type="checkbox"/> CAT II: Critical	<input type="checkbox"/> B)
	<input type="checkbox"/> Class C (Conductive)	<input type="checkbox"/> CAT III: Marginal	<input type="checkbox"/> C)
		<input type="checkbox"/> CAT IV: Negligible	<input type="checkbox"/> D)
<u>FOOT</u>			
<input type="checkbox"/> Falling Object	<input type="checkbox"/> Safety Tip Shoes	<input type="checkbox"/> CAT I: Catastrophic	<input type="checkbox"/> A)
<input type="checkbox"/> Rolling Object	<input type="checkbox"/> Safety Shoes with Metatarsal Protection	<input type="checkbox"/> CAT II: Critical	<input type="checkbox"/> B)
<input type="checkbox"/> Piercing Sole		<input type="checkbox"/> CAT III: Marginal	<input type="checkbox"/> C)
<input type="checkbox"/> Electrical Hazard	Other: _____	<input type="checkbox"/> CAT IV: Negligible	<input type="checkbox"/> D)
<input type="checkbox"/> Metatarsal Protection			
<u>HAND</u>			
<input type="checkbox"/> Chemical Sorption	<input type="checkbox"/> Leather Gloves	<input type="checkbox"/> CAT I: Catastrophic	<input type="checkbox"/> A)
<input type="checkbox"/> Chemical Burns	<input type="checkbox"/> Kevlar Gloves	<input type="checkbox"/> CAT II: Critical	<input type="checkbox"/> B)
<input type="checkbox"/> Abrasions	<input type="checkbox"/> Cryogenic Gloves	<input type="checkbox"/> CAT III: Marginal	<input type="checkbox"/> C)
<input type="checkbox"/> Punctures	<input type="checkbox"/> Chemical Gloves Material: _____	<input type="checkbox"/> CAT IV: Negligible	<input type="checkbox"/> D)
<input type="checkbox"/> Thermal Burns			
<input type="checkbox"/> Temperature Extremes	Other: _____		
	(Cloth gloves are also acceptable)		

Model Emergency and Evacuation Plan

Types of Emergencies

In our entity some potential emergencies that can realistically be expected to occur from natural and man-made situations include:

(List those that apply and include others specific to your facilities)

- Flooding
- High winds impacting facilities
- Fire in buildings
- Vehicle accidents
- Chemical releases
- Unruly or violent citizen or employee
- Others

Key Individuals

Key personnel and their contact information are listed below:

(List those that apply and include others specific to your facilities)

- Internal staff
- Main administrative desk
- Human resources
- Building/facility management
- Building/facility fire wardens
- Police
- Fire
- EMS
- Hazmat Contractors

Reporting Emergencies and Alerting Employees in an Emergency

- Dial 911
- Call internal numbers to inform others of the situation
- Initiate alarms and/or evacuation as necessary

Evacuation Policy and Escape Routes

- When in doubt initiate alarms and evacuate
 - ◊
 - ◊
- Evacuation routes have been posted in the hallways and main rooms of the facility
- First-aid stations are located at:
 - ◊

- Identify the types of actions expected of different employees for the various types of potential emergencies, and insert below:

◇

◇

Chain of Command and Maintenance of Operations

The following individual _____ (list the staff person responsible and contact information here) is authorized to:

- Order an evacuation or shutdown of operations.
- Coordinate and communicate with emergency responders.
- Control the overall emergency response until command is clearly handed over to the police or emergency responders.
- Establish immediate priorities including the safety of responders, other emergency workers, bystanders, and people involved in the incident.
- Approve the implementation of the written or oral Incident Action Plan.
- Brief Command Staff and Section Chiefs.
- Assess the situation and/or obtain a briefing from the prior Incident Commander.
- Review meetings and briefings.
- Approve the use of trainees, volunteers, and auxiliary personnel.
- Stabilize the incident by ensuring life safety and managing resources efficiently and cost effectively.
- Authorize release of information to the news media.
- Ensure that adequate safety measures are in place.
- Coordinate with key people and officials.
- Approve requests for additional resources or for the release of resources.
- Keep municipal officials informed of incident status.
- Ensure an incident evaluation is completed and forwarded to appropriate higher authority.
- Order the demobilization of the incident scene when appropriate.

Responsibilities of the Fire Wardens and Alternates

- Instruct everyone to leave the building immediately, using designated exits.
- Search your designated area, including all offices and restrooms. Be the last person to leave the area.
- Help any person needing assistance to evacuate including those with disabilities or who do not speak English.
- Close all doors that lead into the main hallway. Do not lock doors; leave all lights on.
- Report to the Incident Commander in the parking lot that your area is all clear.
- Taking attendance.
- Join your assembled group in its designated area.
- Await instructions on return to the building.

- After completion of the drill/incident, offer feedback and suggestions.

Personal medical and emergency contact information on employees can be obtained in an emergency through contact with _____ *(list the staff person responsible and contact information here)*.

Utility and System Locations

The locations where utilities and other systems can be shut down for all or part of the facility are noted below *(list the type of critical systems and locations below including items such as gas supply, electrical, sprinklers, chlorine gas, etc.)*.

Employee Training and Drills

All employees upon hire are trained by _____ *(insert human resources or management name)* in the following:

- Contents of the emergency action plan include:
 - ◊ Individual roles and responsibilities
 - ◊ Specific hazards of their building or facility
 - ◊ Threats, hazards, and protective actions
 - ◊ Notification, warning, and communications procedures
 - ◊ Emergency response procedures
 - ◊ Evacuation, shelter, and accountability procedures
 - ◊ Location and use of common emergency equipment
 - ◊ Emergency shutdown procedures.

Emergency evacuation drills will be conducted _____ *(insert frequency here depending upon local regulations)*.

- Following each drill management and employees will evaluate the effectiveness of the drill. Identify the strengths and weaknesses and make changes as appropriate.
- Employees will be re-trained in the following circumstances:
 - ◊ Following an actual emergency to review relevant observations and any changes to the plan.
 - ◊ When there are changes to the facility or building that impact the communication, design, layout and hazards.
 - ◊ Whenever the emergency plan is revised.
- Depending upon the responsibilities of staff identified in the plan, you may also need to provide additional training to your employees *(i.e., first-aid procedures, portable fire extinguisher use, etc.)*.

In the Event of an Alarm

- Follow the evacuation plan and routes identified.
- Assure that you are accounted for after leaving the building.
- Secure all monies, checks or other funds or instruments; take only your outer clothing and personal valuables ONLY if they are easily accessible.
- Listen to any special instructions given and follow them.
- Descend stairwells in a calm, orderly manner. Walk; do not run. Keep moving and keep conversation at a minimum.
- Proceed to the designated meeting point. Assemble and await further instructions.
- Remain in the assembly area until a physical determination can be made that everyone has left the premises.
- Any employee who requires assistance in evacuation due to a physical condition or limitation should notify their supervisor so that special arrangements can be made.

Hazard Communication – Right-To-Know Sample Program

A written copy of the _____ (Entity Name) Right-to-Know program is available in each Department and in the _____ (Human Resource Department/Other Responsible Department). The program is intended to educate employees and establish procedures for evaluating, and controlling the exposure to chemicals used in the workplace.

Employee Rights

The New York State Right-to-Know Law provides explicit rights to employees. These include:

- An employee and/or his/her representative may request, and must receive upon request, information about a hazardous substance in their workplace.
- An employee may refuse to work with a toxic substance if they have requested information about it and the written reply is not received back by the employee within 72 working hours of receipt of request by the employer.
- An employee may exercise any right pursuant to the pertinent laws without fear of any discrimination.
- An employee cannot be required to waive rights under the pertinent laws as a condition of employment.
- An employee may file a complaint against the Employer with the PESHRA representative at the NYS Department of Labor Attorney General's Office if the employee has been discriminated against in violation of the law.

Employer Responsibilities

The entity will:

- Inform employees of their rights under the law by posting a sign in the workplace that informs employees that they have a right to information about the hazards found in the workplace.
- Provide written information to employees upon request concerning the toxic effects of hazardous materials the employee may be exposed to. Specifically, the information to be provided includes:
 - ◊ Name or names of the material, including the generic or chemical name
 - ◊ The trade name of the chemical
 - ◊ The level at which exposure to the material is hazardous, if known
 - ◊ The acute and chronic effects of exposure at hazardous levels
 - ◊ The symptoms of such effects
 - ◊ The potential for flammability, explosion, and reactivity of the material
 - ◊ Appropriate emergency procedures
 - ◊ Proper conditions for safe use and exposure to the material
 - ◊ Procedures for clean-up of leaks and spills

Training

Employees working with hazardous materials will be trained in the use of materials, equipment, and controls to support their safety and health. All employees will receive “general program” training. In addition, those employees who work with hazardous materials on a regular basis will receive “job-specific” training relative to those materials.

The employees will receive training:

- Before initial assignment or
- When transferred to a new position if exposure has changed.
- Anytime the exposure to a hazardous material is altered.

General Program Training

All employees will receive training on the Written Hazard Communication Program which includes:

- Employee Rights
- Employer Responsibilities
- Concepts in Toxicology
- Emergency Response/Evacuation Plans
- How to Read and Use SDS
- Labeling Requirements
- Overview of Chemical Classification Definitions information sources
- The location of the Hazard Communication Program
- The location of SDS's and Inventory

Job Specific Training

- Employees regularly exposed to hazardous materials will receive more in-depth training beyond the topics listed above including:
 - ◊ The location of hazardous materials to which the employee may be exposed
 - ◊ The labeling requirements.
 - ◊ The name(s) of the hazardous materials, including the generic or chemical name(s).
 - ◊ The trade name of the chemical and any other commonly used name.
 - ◊ Hazardous chemical properties including visual appearance, odor, and methods that can be used to detect the presence or release of hazardous chemicals.
 - ◊ The acute and chronic effects of exposure at hazardous levels.
 - ◊ The symptoms of effects of the exposure at hazardous levels.
 - ◊ The potential for flammability, explosion and reactivity of such substance.
 - ◊ Procedures to protect against hazards (engineering controls, personal protective equipment, work practices, emergency procedures).
 - ◊ Appropriate emergency treatment.
 - ◊ Proper handling procedures for each chemical classification of hazardous material.

- ◇ Procedures for clean-up of leaks and spills of hazardous materials.

List of Hazardous Chemicals

The _____ (*insert name or department position responsible*) will maintain a list of all hazardous chemicals used in the department. This list will be updated when new hazardous chemicals are brought into the department. The list of hazardous chemicals is maintained with the safety data sheets (SDS's).

Safety Data Sheets (SDS's)

The _____ (*insert name or department position responsible*) will maintain an SDS files covering the list of hazardous chemicals. The SDS's will be readily available for employee use and will be located at _____ (*Location of SDS for each Department*).

_____ (*Insert name or department position responsible*) is responsible for acquiring and updating SDS's that are received in the Department either prior to or at the same time of the first shipment of the new chemical being used. It may be necessary to discontinue procurements from vendors failing to provide SDS's in a timely manner.

Labels and Other Warnings

The _____ (*Department Manager*) is designated to ensure that all hazardous chemicals in the department are properly labeled.

- Labels should list at least the chemical identity, appropriate hazard warnings, and the name and address of the manufacturer, importer, or other responsible party.
- The corresponding SDS will be used to verify label information.
- All chemicals will be stored in their original or approved containers with a proper label attached, except small quantities for immediate use. Any container not properly labeled should be given to the Supervisor for labeling or proper disposal.
- All in-house containers must be labeled with the identity of the product and the hazard warning. The manufacturer's label should be used as a guide.
- Employees may dispense chemicals from the original container only in small quantities intended for immediate use. Any chemical left after work is completed must be returned to the original container or the supervisor for proper handling.
- No unmarked containers of any size are to be left in the work area unattended.
- The entity will rely on manufacturer-applied labels whenever possible and will ensure that these labels are maintained.

Contractors

The _____ (*Department Manager or Project Supervisor*) will advise outside contractors of any chemical hazards which may be encountered in the normal course of their work on municipal projects, provide copies of appropriate SDS's for the contractors use, and will inform the contractor of the labeling system used in the workplace.

Each contractor bringing chemicals on-site must provide the entity _____
(*Department Manager or Project Supervisor*) with the appropriate hazard information on these substances, including the labels used and the precautionary measures to be taken in working with these chemicals.

Non-Routine Tasks

Anyone contemplating a non-routine task (*e.g., boiler repair, entry into a confined space, etc*) will consult with _____ (*Department Manager or Project Supervisor*) to ensure that employees are informed of chemical hazards associated with the performance of these tasks and the appropriate protective measures. This will be accomplished by a meeting of supervisors and affected employees before such work begins.

Additional Information

Further information on this hazard communication program and applicable SDS's are available by contacting the _____ (*Department Manager and/or the Human Resources Department*).

Assignment of Responsibilities

It will be the responsibility of the _____ to coordinate training upon initial assignment, transfer, annual and new hazardous material training takes place.

It will be the responsibility of the _____ to conduct General Program training.

It will be the responsibility of the _____ to conduct Job-Specific training programs.

Administrative Responsibility

Employee Exposure Records
Employee Training Records
Inventory of Chemical Materials
Determination that material is hazardous
Labeling of hazardous materials
Maintaining MSDS/SDS

Person Responsible

Chemical Inventory

[illegible]

Bloodborne Pathogens Model Exposure Control Plan

Program Administration

_____ (Name of responsible person or department) is/are responsible for implementation of the Exposure Control Plan (ECP).

_____ (Name of responsible person or department) will maintain, review, and update the ECP at least annually, and whenever necessary to include new or modified tasks and procedures. More information can be obtained from: _____
(Insert Contact location/phone number).

Those employees who are determined to have occupational exposure to blood or other potentially infectious materials (OPIM) are to follow the procedures and work practices outlined in this ECP.

_____ (Name of responsible person or department) provides and maintains all necessary personal protective equipment (PPE), engineering controls (e.g., sharps containers, labels, and red bags).

_____ (Name of responsible person or department) will stock adequate supplies of the equipment so it is available in the appropriate sizes. (Insert contact location/phone number: _____.)

_____ (Name of responsible person or department) will be responsible for overseeing that all medical actions required by the standard are performed and that appropriate employee health and NYPESH/OSHA records are maintained. (Insert contact location/phone number: _____.)

_____ (Name of responsible person or department) will be responsible for training, documentation of training, and making the written ECP available to employees, NYPESH, OSHA, and NIOSH representatives. (Insert contact location/phone number: _____.)

Employee Exposure Determination

The following is a list of all job classifications in which employees may have occupational exposure:

Job Title

Department/Location

(Example: Ambulance Crew or EMS; use as many lines as necessary)

The following is a list of job classifications in which some employees may have occupational exposure. Included is a list of tasks and procedures, or groups of closely related tasks and procedures, in which occupational exposure may occur for these individuals:

Job Title Department/Location Task/Procedure

(Example: Ambulance Crew/Onsite at Residence/Clearing Airway; use as many lines as necessary)

Note: Part-time, temporary, contract, and per diem employees are covered by the Bloodborne pathogens standard. The ECP should describe how the standard will be met for these Employees.

Methods of Implementation and Control

All employees will utilize universal precautions.

Exposure Control Plan

Employees covered by the Bloodborne pathogens standard receive an explanation of this ECP during their initial training session. It will also be reviewed in their annual refresher training. All employees can review this plan at any time during their work shifts by contacting _____ (Name of responsible person or department). If requested, we will provide an employee with a copy of the ECP free of charge and within 15 days of the request.

_____ (Name of responsible person or department) is responsible for reviewing and updating the ECP annually or more frequently if necessary to reflect any new or modified tasks and procedures that affect occupational exposure and to reflect new or revised employee positions with occupational exposure.

Engineering Controls and Work Practices

Engineering controls and work practice controls will be used to prevent or minimize exposure to bloodborne pathogens. The specific engineering controls and work practice controls used are listed below (e.g., Use of gloves, safety eyewear, and respiratory protection):

Sharps disposal containers are inspected and maintained or replaced by _____ (Name of responsible person or department) every _____ (frequency) or whenever necessary to prevent overfilling.

The entity departments covered by this ECP identify the need for changes in engineering controls and work practices through _____ (e.g., EMS de- briefs, employee interviews, safety committee accident reviews, etc.).

We evaluate new procedures and new products regularly by _____ (Describe the process, literature reviewed, supplier info, products considered).

Both front-line workers and management officials are involved in this process in the following manner _____ (Describe employees' involvement).

_____ (Name of responsible person or department) is responsible for ensuring that these recommendations are implemented.

Personal Protective Equipment (PPE)

PPE is provided to our employees at no cost to them. Training in the use of the appropriate PPE for specific tasks or procedures is provided by _____ (Name of responsible person or department). The types of PPE available to employees are as follows (e.g., gloves, eye protection, etc.): _____.

PPE is located at _____ (location) and may be obtained through _____ (Name of responsible person or department, and specify how employees will obtain PPE and who is responsible for ensuring that PPE is available.)

All employees using PPE must observe the following precautions:

- Wash hands immediately or as soon as feasible after removing gloves or other PPE.
- Remove PPE after it becomes contaminated and before leaving the work area.
- Used PPE may be disposed of in _____ (*List appropriate containers for storage, laundering, decontamination, or disposal*).
- Wear appropriate gloves when it is reasonably anticipated that there may be hand contact with blood or OPIM, and when handling or touching contaminated items or surfaces; replace gloves if torn, punctured, or contaminated, or if their ability to function as a barrier is compromised.
- Utility gloves may be decontaminated for reuse if their integrity is not compromised; discard utility gloves if they show signs of cracking, peeling, tearing, puncturing, or deterioration.
- Never wash or decontaminate disposable gloves for reuse.
- Wear appropriate face and eye protection when splashes, sprays, spatters, or droplets of blood or OPIM pose a hazard to the eye, nose, or mouth.
- Remove immediately or as soon as feasible any garment contaminated by blood or OPIM, in such a way as to avoid contact with the outer surface.

The procedure for handling used PPE is as follows:

_____ (*Refer to specific procedure and include how and where to decontaminate face shields, eye protection, resuscitation equipment*).

Housekeeping

Regulated waste is placed in containers that are closable, constructed to contain all contents and prevent leakage, appropriately labeled or color-coded (*see the following section "Labels"*), and closed prior to removal to prevent spillage or protrusion of contents during handling.

The procedure for handling sharps disposal containers is:

The procedure for handling other regulated waste is:

Contaminated sharps are discarded immediately or as soon as possible in containers that are closable, puncture-resistant, leak proof on sides and bottoms, and appropriately labeled or color-coded. Sharps disposal containers are available at _____ (*these must be easily accessible and as close as feasible to the immediate area where sharps are used*).

Bins and pails (*e.g., wash or emesis basins*) are cleaned and decontaminated as soon as feasible after visible contamination.

Broken glassware that may be contaminated is only picked up using mechanical means, such as a brush and dustpan.

Laundry

Laundrying will be performed by _____ (*Name of responsible person, or department, or contractor*) at _____ (*time and/or location*).

The following laundrying procedures are used:

- Handle contaminated laundry as little as possible, with minimal agitation.
- Place wet, contaminated laundry in leak-proof, labeled, or color-coded containers before transport. Use (*specify either red bags or bags marked with the biohazard symbol*) for this purpose.
- Wear the following PPE when handling and/or sorting contaminated laundry (*List appropriate PPE below*):

Labels

The following labeling methods are used:

- Equipment to be labeled: _____
- Label Includes: _____
(*Insert here examples: specimens, contaminated laundry, etc. with red bag, biohazard label*)

_____ (*Name of responsible person or department*)
is responsible for ensuring that warning labels are affixed or red bags are used as required if regulated waste or contaminated equipment is brought into the facility.

Employees are to notify _____ (*Name of responsible person or department*) if they discover regulated waste containers, refrigerators containing blood or OPIM, contaminated equipment, etc., without proper labels.

Hepatitis B Vaccination

_____ (*Name of responsible person or department*) provides training to employees on hepatitis B vaccinations, addressing safety, benefits, efficacy, methods of administration, and availability.

The hepatitis B vaccination series is available at no cost after initial employee training and within 10 days of initial assignment to all employees identified in the exposure determination section of this plan.

Vaccination is encouraged unless:

- documentation exists that the employee has previously received the series;
- antibody testing reveals that the employee is immune; or
- medical evaluation shows that vaccination is contraindicated.

However, if an employee declines the vaccination, the employee must sign a declination form.

Employees who decline may request and obtain the vaccination at a later date at no cost.

Documentation of refusal of the vaccination is kept at _____ (Location).

Vaccination will be provided by _____ (List health care professional responsible for this part of the plan) at _____ (Location).

Following the medical evaluation, a copy of the health care professional's written opinion will be obtained and provided to the employee within 15 days of the completion of the evaluation. It will be limited to whether the employee requires the hepatitis vaccine and whether the vaccine was administered.

Post-Exposure Evaluation and Follow-Up

Should an exposure incident occur, contact _____ (Name of Responsible Person) at the following number: _____.

An immediately available confidential medical evaluation and follow-up will be conducted by _____ (Name of licensed health care professional).

Following initial first aid (*clean the wound, flush eyes or other mucous membrane, etc.*), the following activities will be performed:

- Document the routes of exposure and how the exposure occurred.
- Identify and document the source individual (unless the employer can establish that identification is infeasible or prohibited by state or local law).
- Obtain consent and make arrangements to have the source individual tested as soon as possible to determine HIV, HCV, and HBV infectivity; document that the source individual's test results were conveyed to the employee's health care provider.
- If the source individual is already known to be HIV, HCV, and/or HBV positive, new testing need not be performed.
- Assure that the exposed employee is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g. laws protecting confidentiality).
- After obtaining consent, collect exposed employee's blood as soon as feasible after exposure incident, and test blood for HBV and HIV serological status.

- If the employee does not give consent for HIV serological testing during the collection of blood for baseline testing, preserve the baseline blood sample for at least 90 days; if the exposed employee elects to have the baseline sample tested during this waiting period, perform testing as soon as feasible.

Administration of Post-Exposure Evaluation and Follow-Up

_____ (Name of responsible person or department) ensures that health care professional(s) responsible for employee's hepatitis B vaccination and post-exposure evaluation and follow-up are given a copy of OSHA's Bloodborne pathogens standard.

_____ (Name of responsible person or department) ensures that the health care professional evaluating an employee after an exposure incident receives the following:

- a description of the employee's job duties relevant to the exposure incident
- route(s) of exposure
- circumstances of exposure
- if possible, results of the source individual's blood test
- relevant employee medical records, including vaccination status

_____ (Name of responsible person or department) provides the employee with a copy of the evaluating health care professional's written opinion within 15 days after completion of the evaluation.

Procedures for Evaluating Circumstances Surrounding an Exposure

_____ (Name of responsible person or department) will review the circumstances of all exposure incidents to determine:

- engineering controls in use at the time
- work practices followed
- a description of the device being used (*including type and brand*)
- protective equipment or clothing that was used at the time of the exposure incident (*gloves, eye shields, etc.*)
- location of the incident (*O.R., E.R., patient room, etc.*)
- procedure being performed when the incident occurred
- employee's training

_____ (Name of Responsible Person) will record all percutaneous injuries from contaminated sharps in a Sharps Injury Log. If revisions to this ECP are necessary,

_____ (Responsible person or department) will ensure that appropriate changes are made. (*Changes may include an evaluation of safer devices, adding employees to the exposure determination list, etc.*)

Employee Training

All employees who have the potential for occupational exposure to Bloodborne pathogens receive initial and annual training conducted by _____ (*Name of responsible person or department - Attach a brief description of their qualifications*).

All employees who have occupational exposure to Bloodborne pathogens receive training on the epidemiology, symptoms, and transmission of Bloodborne pathogen diseases. In addition, the training program covers, at a minimum, the following elements:

- a copy and explanation of the OSHA Bloodborne pathogen standard
- an explanation of our ECP and how to obtain a copy
- an explanation of methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure incident
- an explanation of the use and limitations of engineering controls, work practices, and PPE
- an explanation of the types, uses, location, removal, handling, decontamination, and disposal of PPE
- an explanation of the basis for PPE selection
- info on the hepatitis B vaccine, including its efficacy, safety, method of administration, benefits of being vaccinated, and that the vaccine will be offered free of charge
- info on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM
- an explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available
- info on post-exposure evaluation and follow-up the employer is required to provide for the employee following an exposure incident
- an explanation of the signs and labels and/or color coding required by the standard and used at this facility
- an opportunity for interactive questions and answers with the person conducting the training session.

Training materials are available at _____ (*Location*).

Recordkeeping

Training records are maintained for each employee upon completion of training. These documents are kept for at least three years at _____ (*Location of records*).

The training records include:

- the dates of the training sessions
- the contents or a summary of the training sessions
- the names and qualifications of persons conducting the training
- the names and job titles of all persons attending the training sessions

Employee training records are provided upon request to the employee or the employee's authorized representative within 15 working days. Such requests should be addressed to _____ (Name of responsible person or department).

Medical Records

Medical records are maintained for each employee with occupational exposure in accordance with 29 CFR 1910.1020, "Access to Employee Exposure and Medical Records."

_____ (Name of responsible person or department) is responsible for maintenance of the required medical records. These confidential records are kept in _____ (List location) for at least the duration of employment plus 30 years.

Employee medical records are provided upon request of the employee or to anyone having written consent of the employee within 15 working days. Such requests should be sent to _____ (Name of responsible person or department and address).

OSHA Recordkeeping

An exposure incident is evaluated to determine if the case meets OSHA's Recordkeeping Requirements (29 CFR 1904). This determination and the recording activities are done by _____ (Name of responsible person or department).

Sharps Injury Log

In addition to the 1904 Recordkeeping Requirements, all percutaneous injuries from contaminated sharps are recorded in a Sharps Injury Log. All incidences must include at least:

- date of the injury
- type and brand of the device involved (*syringe, suture needle*)
- department or work area where the incident occurred
- explanation of how the incident occurred.

This log is reviewed as part of the annual program evaluation and maintained for at least five years following the end of the calendar year covered. If a copy is requested by anyone, it must have any personal identifiers removed from the report.

Hepatitis B Vaccine Declination (Mandatory)

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

Signed: _____ Date: _____

Sample Respiratory Protection Program

AS PER 29CFR1910.134 RESPIRATORY PROTECTION STANDARD

The sample respiratory protection program is intended to serve as an example written respiratory protection program which is required by the Respiratory Protection Standard. A central component of the requirements of the standard is the development of a written program.

The intent of this sample program is to provide municipal employers with a format for developing a written respiratory protection program. Each municipality will need to adjust or adapt the sample program for their specific use.

The information contained in this publication is not considered a substitute for the OSHA Act or any provisions of the OSHA and NYPESH standards. It provides general guidance on a particular standard-related topic but should not be considered a definitive interpretation for compliance with OSHA requirements. The reader should consult the OSHA standards in its entirety for specific compliance requirements.

Purpose

The purpose of this respirator program is to establish standard operating procedures to provide the protection to employees from respiratory hazards through proper selection and use of respirators. This program applies to all employees who are required to wear respirators during normal operations, non-routine tasks, or emergency operations such as a spill of a hazardous substance.

Responsibilities

Program Administrator Duties

_____ (*Entity Name*) has designated
_____ (*Name of Responsible Individual*) as the program administrator to oversee the respiratory protection program. Duties of the program administrator include:

- Identifying work areas, processes or tasks that require workers to wear respirators, and evaluating hazards.
- Selection of respiratory protection options.
- Monitoring respirator use to ensure that respirators are used in accordance with their certifications.
- Arranging for and/or conducting training.
- Ensuring proper storage and maintenance of respiratory protection equipment.
- Conducting or arranging for fit testing.
- Administering the medical surveillance program.
- Maintaining records required by the program.
- Evaluating the program.
- Updating written program as needed.

Supervisors Duties

Supervisors are responsible for ensuring that the respiratory protection program is implemented in their particular departments. In addition to being knowledgeable about the program requirements for their own protection, supervisors must also ensure that the program is understood and followed by the employees under their charge. Duties of the supervisor include:

- Ensuring that employees under their supervision (including new hires) have received appropriate training, fit testing, and medical evaluation.
- Ensuring the availability of appropriate respirators and accessories.
- Being aware of tasks requiring the use of respiratory protection.
- Enforcing the proper use of respiratory protection when necessary.
- Ensuring that respirators are properly cleaned, maintained, and stored according to the respiratory protection plan.
- Ensuring that respirators fit well.

- Continually monitoring work areas and operations to identify respiratory hazards.
- Coordinating with the program administrator on how to address respiratory hazards or other concerns regarding the program.

Employees Duties

Each employee has the responsibility to wear his or her respirator when and where required and in the manner in which they were trained. Employees must also:

- Care for and maintain their respirators as instructed and store them in a clean sanitary location.
- Inform their supervisor if the respirator no longer fits well, and request a new one that fits properly.
- Inform their Supervisor or the Program administrator of any respiratory hazards that they feel may not be adequately addressed in the workplace and of any other concerns that they have regarding the program.

Program Elements

Respirator Selection

Respirators are selected on the basis of the hazards to which the employees are exposed and in accordance with OSHA and NYPESH requirements. Only NIOSH certified respirators will be selected and used.

The Program Administrator will conduct a hazard evaluation for each operation process, or work area where airborne contaminants may be present in routine operations or during an emergency. The hazard evaluation will include:

- Identification of the hazardous substances used in the workplace, department, work site or work process;
- Review of work processes to determine where potential exposures to these hazardous substances may occur; and
- Exposure monitoring to quantify potential hazardous exposures.

The results of the hazard evaluation are located _____
(Insert location/department) for employee review.

The program administrator will revise and update the hazard assessment as needed
(i.e., any time work process changes which may potentially affect exposure).

General Requirements

- The employer selects and provides an appropriate respirator based on the respiratory hazard(s) to which the worker is exposed and workplace and user factors that affect respirator performance and reliability.
- The employer selects a NIOSH-certified respirator. The respirator is to be used in compliance with the conditions of its certification.
- The employer identifies and evaluates the respiratory hazard(s) in the workplace; this evaluation includes a reasonable estimate of employee exposures to respiratory hazard(s) and an identification of the contaminant's chemical state and physical form. Where the employer cannot identify or reasonably estimate the employee exposure, the employer shall consider the atmosphere to be immediately dangerous to life and health (IDLH).
- The employer selects respirators from a sufficient number of respirator models and sizes so that the respirator is acceptable to, and correctly fits, the user.

Respirators for Immediately Dangerous to Life and Health (IDLH) Atmospheres

The employer provides the following respirators for employee use in IDLH atmospheres:

- A full facepiece pressure demand SCBA certified by NIOSH for a minimum service life of thirty minutes, or
- A combination full facepiece pressure demand supplied-air respirator (SAR) with auxiliary self-contained air supply.
- Respirators provided only for escape from IDLH atmospheres shall be NIOSH-certified for escape from the atmosphere in which they will be used.
- All oxygen-deficient atmospheres shall be considered IDLH.
 - ◊ Exception: If the employer demonstrates that, under all foreseeable conditions, the oxygen concentration can be maintained within the ranges specified in Table II of 29 CFR 1910.134(d), i.e., for the altitudes set out in the table], then any atmosphere-supplying respirator may be used.

Respirators for Atmospheres That Are Not IDLH

The employer provides a respirator that is adequate to protect the health of the employee and ensure compliance with all other OSHA statutory and regulatory requirements, under routine and reasonably foreseeable emergency situations.

NIOSH Certification

All respirators must be certified by the National Institute for Occupational Safety and Health (NIOSH) and shall be used in accordance with the terms of that certification. Also, all filters, cartridges, and canisters must be labeled with the appropriate NIOSH approval label. The label must not be removed or defaced while it is in use.

Voluntary Respirator Usage

_____ (Entity Name) will provide respirators to employees for voluntary usage for the following work processes (Insert tasks below that involve work where employees may want to use respirators for comfort. This is typically limited to dust masks):

- _____
- _____
- _____

The Program Administrator will provide all employees who voluntarily choose to wear either of the above respirators with a copy of Appendix D of the standard. (Appendix D details the requirements for voluntary use of respirators by employees.) Employees choosing to wear a half facepiece air purifying respirators (APR) must comply with the procedures for medical evaluation, respirator use, and cleaning, maintenance and storage.

The Program Administrator will authorize voluntary use of respiratory protective equipment as requested by all other workers on a case-by-case basis, depending on specific workplace conditions and the results of the medical evaluations.

Respirator Filter & Canister Replacement/Change Schedule

An important part of the Respiratory Protection Program includes identifying the useful life of canisters and filters used on air purifying respirators. Each filter and canister shall be equipped with an end-of-service-life indicator (ESLI) certified by NIOSH for the contaminant.

If there is no ESLI appropriate for conditions, change schedule for canisters and cartridges that is based on objective information or data that will ensure that canisters and cartridges are changed before the end of their service life.

Cartridges/Filters shall be changed based on the most limiting factor below:

- Prior to expiration date
- Manufacturer's recommendations for use and environment
- After each use
- When requested by employee
- When restriction to air flow has occurred as evidenced by increased effort by user to breathe normally

Employees who are required to wear respirators must be medically evaluated before being permitted to wear a respirator on the job. Employees are not permitted to wear respirators until a physician has determined that they are medically able to do so.

A licensed health care professional at _____ (*Insert Name of healthcare provider*) will provide the medical evaluation to employees. Medical evaluation procedures are as follows:

- The medical evaluation will be conducted using medical questionnaire provided in Appendix C of 29 CFR 1910.134 Respiratory Protection Standard.
- _____ (*Name of responsible person or department*) will provide a copy of this questionnaire to all employees requiring medical evaluation.
- To the extent feasible, the company will assist employees who are unable to read the questionnaire. When this is not possible the employee will be sent directly to the health care professional for assistance and medical evaluation.
- All affected employees will be given a copy of the medical questionnaire to fill out, along with a stamped and addressed envelope for mailing the questionnaire to the health care professional. Employees will be permitted to fill out the questionnaire on company time.
- Follow up medical exams will be provided to employees as required by the OSHA standard, and/or as deemed necessary by the health care professional.
- All employees will be allowed the opportunity to speak with the health care professional about their medical evaluation if they so request.
- The program administrator will provide the health care professional with a copy of this program and a copy of OSHA's respiratory protection standard. For each employee requiring evaluation, the health care professional will be provided with information regarding the employee's work area or job title, proposed respirator type and weight, length of time required to wear the respirator, expected physical work load (*light, moderate, or heavy*), potential temperature and humidity extremes, and any additional protective clothing required.
- After an employee has received clearance to wear a respirator, additional medical evaluations will be provided under any of the following circumstances:
 - ◊ The employee reports signs and/or symptoms related to their ability to use a respirator, such as shortness of breath, dizziness, chest pains, or wheezing;
 - ◊ The health care professional or supervisor informs the Program Administrator that the employees needs to be reevaluated;
 - ◊ Information from this program, including observations made during fit testing and program evaluation, indicates a need for reevaluation; and
 - ◊ A change occurs in workplace conditions that may result in an increased physiological burden on the employee.

Note: All examinations and questionnaires are to remain confidential between the employee and the physician.

Fit Testing Procedures

_____ (*Name of responsible person or department*) will ensure that fit-test will be administered using an OSHA-accepted qualitative fit test (QLFT) or quantitative fit test (QNFT) protocol. The OSHA-accepted QLFT and QNFT protocols are contained in Appendix A of the Respiratory Standard(1910.134).

_____ (*Entity Name*) requires employees to be fit tested at the following times and with the same make, model, style, and size of respirator that they will be using.

- Before being allowed to wear any respirator with a tight-fitting facepiece and at least annually thereafter;
- Whenever a different respirator facepiece (size, style, model, or make) is used;
- Whenever a visual observation of changes in the employee's physical condition that could affect respirator fit. Such conditions include, but are not limited to, facial scarring, dental changes, cosmetic surgery, or an obvious change in body weight; and
- Upon employee notification that the fit of the respirator is unacceptable.

The _____ (*Insert name of responsible department*) has established a record of the fit tests administered to employees including:

- The name or identification of the employee tested;
- Type of fit test performed;
- Specific make, model, style, and size of respirator tested;
- Date of test; and
- The pass/fail results.

Use Of Respirators

General Use Procedures

- Employees will use their respirators under conditions specified by this program, and in accordance with the training they receive on the use of each particular model. In addition, the respirator shall not be used in a manner for which it is not certified by NIOSH or its manufacturer.
- All employees are to conduct user seal checks each time that they wear their respirator. Employees are to use either the positive or negative pressure check (depending on which test works best for them) specified in Appendix B-1 of the Respiratory Protection Standard.
- All employees are permitted to leave the work area to maintain their respirator for the following reasons: to clean their respirator if the respirator is impeding their ability to work, change filters or cartridges, replace parts, or to inspect respirator if it stops functioning as intended. Employees are to notify their supervisor before leaving the area.

- Employees are not permitted to wear tight fitting respirators if they have any condition, such as facial hair, facial scars, or missing dentures that prevents them from achieving a good seal. Employees are not permitted to wear headphones, jewelry, or other articles that may interfere with the facepiece to face seal.

Emergency Procedures

The following work areas, tasks and job sites have been identified as having foreseeable emergencies (*Insert any areas that apply*):

- _____
- _____
- _____

Emergency escape respirators are located: _____ (*Insert Location*).

Immediately Dangerous to Life or Health (IDLH) Procedures

The Program Administrator has identified the following area(s) as presenting the potential for IDLH conditions (*Insert any areas that apply*):

- _____
- _____
- _____

Respirator Malfunction

For any malfunction of a respirator (*e.g., such a breakthrough, facepiece leakage, or improperly working valve*), the respirator wearer should inform his or her supervisor that the respirator no longer functions as intended, and go to a safe area to maintain the respirator. The supervisor must ensure that the employee receives the needed parts to repair the respirator, or is provided with a new respirator.

Maintenance and Care Procedures

In order to ensure continuing protection from the respirators being used, it is necessary to establish and implement proper maintenance and care procedures and schedules. The respirators may not deliver the assumed protection unless they are kept in good working order.

Cleaning & Disinfecting

_____ (*Entity Name*) provides each respirator user with a respirator that is clean, sanitary, and in good working order. Respirators are cleaned and disinfected _____ (*Indicate Frequency, e.g., Daily, Weekly, etc.*) or as often as necessary to be maintained in a sanitary condition. Respirators are cleaned and disinfected using the procedures specified in Appendix B of the standard or manufacturer's recommendations.

Respirators are cleaned and disinfected:

- As often as necessary when issued for the exclusive use of one employee;
- Before being worn by different individuals;
- After each use for emergency use respirators; and
- After each use for respirators used for fit testing and training.

Storage

Storage of respirators must be done properly to ensure that the equipment is protected and not subject to environmental conditions that may cause deterioration. Respirators are stored to protect them from damage, contamination, dust, sunlight, extreme temperatures, excessive moisture, and damaging chemicals. They are packed and stored in _____
(Indicate methods used for storage and location), in accordance with any applicable manufacturer's instructions.

Emergency respirators are stored:

- To be accessible to the work area;
- In compartments marked as such; and
- In accordance with manufacturer's recommendations.

Respirator Inspection

All respirators will be inspected after each use and at least monthly. Should any defects be noted, the respirators will be taken to the program administrator or supervisor. Damaged respirators will be either repaired or replaced.

Respirators are inspected as follows:

- All respirators used in routine situations are to be inspected before each use and during cleaning;
- All respirators maintained for use in emergency situations are to be inspected at least monthly and in accordance with manufacturer's recommendations, and are checked for proper function before and after each use; and
- Emergency escape-only respirators are inspected before being carried into the workplace for use.

Respirator inspections include the following:

- A check of respirator function, tightness of connections, and the condition of the various parts including, but not limited to, the facepiece, head straps, valves, connecting tube, and cartridges, canisters or filters; and
- Check of elastomeric parts for pliability and signs of deterioration.

The following checklist will be used when inspecting respirators:

- Facepiece:
 - ◊ Cracks, tears, or holes
 - ◊ Facemask distortion
 - ◊ Cracked or loose lenses/face shield
- Headstraps:
 - ◊ Breaks or tears
 - ◊ Broken buckles
- Valves:
 - ◊ Residue or dirt
 - ◊ Cracks or tears in valve material
- Filters/Cartridges:
 - ◊ Approval designation
 - ◊ Gaskets
 - ◊ Cracks or dents in housing
 - ◊ Proper cartridge for hazard
- Air Supply Systems:
 - ◊ Breathing air quality/grade
 - ◊ Condition of supply hoses
 - ◊ Hose connections
 - ◊ Settings on regulators and valves

Training

_____ (Name of responsible person or department) will be responsible to provide training to respirator users and their supervisors on the contents of the Respiratory Protection Program and their responsibilities under it, and on the OSHA Respiratory Protection Standard. Employees will be trained prior to using a respirator in the workplace. Supervisors will also be trained prior to using a respirator in the workplace or prior to supervision of employees that must wear respirators.

The training will cover the following topics:

- The _____ (Entity or Department) Respiratory Protection Program
- The OSHA Respiratory Protection Standard
- Respiratory hazards encountered and their health effects
- Proper selection and use of respirators
- Limitations of respirators
- Respirator donning and user seal (fit) checks
- Fit testing
- Emergency use procedures
- Maintenance and storage
- Medical signs and symptoms limiting the effective use of respirators

Employees will be retrained annually or as needed (*e.g., if they need to use a different respirator*). Employees must demonstrate their understanding of the topics covered in the training utilizing a hands-on exercise and a written test. Respirator training will be documented by the Program Administrator and the documentation will include the type, model, and size of respirator for which each employee has been trained and fit tested.

Program Evaluation

The program administrator will conduct periodic evaluations of the workplace to ensure that the provisions of this program are being implemented. The evaluation will include regular consultations with employees who use respirators and their supervisors, site inspections, air monitoring and review of records.

Identified problems will be noted and addressed by the Program Administrator. These findings will be reported to management, and the report will list plans to correct deficiencies in the respirator program and target dates for the implementations of those corrections.

Documentation and Recordkeeping

A written copy of this program and the OSHA standard is kept in the Program Administrator's office and is available to all employees who wish to review it. Also maintained in the Program Administrator's office are copies of training and fit test records. These records will be updated as new employees are trained, as existing employees receive refresher training, and as new fit tests are conducted.

The Program Administrator will also maintain copies of the medical records for all employees covered under the respirator program. The completed medical questionnaire and the physician's documented findings are confidential and will remain at _____ (*Location, e.g., clinic*). The entity will only retain the physician's written recommendation regarding each employee's ability to wear a respirator.

Sample Required Respirator Use Log

(Entity Name)

Voluntary And Required Respirator Use	
RESPIRATOR	DEPARTMENT/PROCESS
<i>Example: Filtering facepiece (dust mask)</i>	<i>Voluntary use when mowing</i>
<i>Example: Half-facepiece APR or PAPR with P100 filter</i>	<i>Voluntary use for maintenance workers when cleaning spray booth walls or changing spray booth filter</i>

Sample Hazard Assessment

(Entity Name)

Date: _____

Department	Contaminants	Exposure Level (8 hrs TWA)	PEL/TLV	Controls
Example: Mowing Park Areas	General dust, soil	2.5 - 7.0 mg/m ³	15 mg/m ³ (Total Particulate) (TLV = 10mg/m ³)	Direct mower chute downwind when possible. Select mower cutting route mower to allow dust to drift out of area before mowing thru the airborne dust cloud. Avoid cutting on dry windy days.