



Hazard

Right



Communications

to



**Employee
Manual**

Know



UNIVERSAL
Precautions



Useful Internet Sites

Poison Control Center: 1-800-222-1222

HEALTH/SAFETY/RISK MANAGEMENT WEBSITES

- Material Safety Data Sheets: <http://www.msdsonline.com>
- Health/Safety/Risk Management: <http://risk.capregbooces.org>
- Capital Region BOCES: <http://www.capregbooces.org>

Other Useful Internet Sites

U.S. Consumer Product Safety Commission (CPSC) – <http://www.cpsc.gov/>

U.S. Center for Disease Control and Prevention (CDC) – <http://www.cdc.gov/>

U.S. Occupational Safety and Health Administration (OSHA) – <http://www.osha.gov/>

U.S. National Institutes of Health (NIH) – <http://www.nih.gov/>

U.S. Environmental Protection Agency (EPA) – <http://www.epa.gov/>

Federal Emergency Management Agency (FEMA) – <http://www.fema.gov/>

New York State Education Department Facilities Planning –
<http://www.emsc.nysed.gov/facplan/>

New York State Emergency Management Office (SEMO) –
<http://www.semo.state.ny.us/>

New York State Department of Environmental Conservation (DEC or ENCON) –
<http://www.dec.ny.gov/>

New York State Department of Health (NYSDOH) –
<http://www.nyhealth.gov>

New York State Department of Labor Public Employee Safety and Health (NYSDOL/
PESH) – <http://www.labor.state.ny.us>

New York State Police (School and Community Outreach Programs) –
<http://www.troopers.state.ny.us/>

Association of Educational Safety and Health Professionals – <http://www.aeshp.org/>

American Society for Testing and Materials – www.astm.org/

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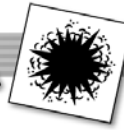


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Health/Safety/Risk Management serves over 50 school districts in eight counties. We also assist colleges, universities and municipalities on a fee-for-service basis. We offer a variety of asbestos training courses to schools and to the public.

INTRODUCTION

& PLAN LOCATIONS



This handbook is intended to alert the school district's employees to the potential hazards of the workplace and to identify the persons to contact and the procedures to follow if a problem should arise. Your supervisor will assist you in identifying the products and hazards appropriate to your specific work location.

By reading this booklet and by signing the enclosed acknowledgment form, the employee acknowledges he/she has been informed of their rights and that the district has fulfilled the requirements of the federal (OSHA) Hazard Communication Standard, Exposure to Bloodborne Pathogens Standard and the New York State (DOL) Right-to-Know Law.

Plan Locations

Hazard Communication Written Plan and NYS Right-to-Know Law

Responsible Person: _____

Location: _____

Chemical Product Inventory and Material Safety Data Sheets (MSDS)

Responsible Person: _____

Location: _____

Exposure Control Plan

Responsible Person: _____

Location: _____

School Safety Plans (SAVE)

Responsible Person for District-wide Plan: _____

Location: _____

Note: Building-level plans are confidential.



HAZARD

COMMUNICATIONS

The Hazard Communication program is written to fulfill the requirements of the Occupational Safety and Health Administration, 29CFR 1910.1200 and to fulfill the requirements of the New York State Official Compilations of Codes, Part 820 of Title 12. The Exposure Control Plan is written to fulfill the requirements of OSHA, 29CFR1910.1030.

5 Important Steps to Hazard Communication Compliance:

- 1** Establish a complete and accurate Hazard Communication Written Plan.
- 2** Establish a labeling procedure for all departments and monitor that labeling procedure to ensure that it has been implemented correctly.
- 3** Establish a standard emergency procedure for dealing with chemical related accidents.
- 4** Compile and maintain a complete inventory for all products and chemicals that are considered potentially harmful.
- 5** Inform employees at least once a year, and new employees upon hiring, of all aspects of the HAZCOM and Right-To-Know Standards.

HAZARD

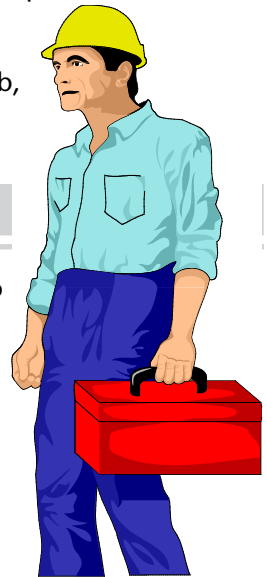
COMMUNICATIONS



New Chemical Products

When a new chemical product is introduced into your workplace, a few guidelines should be followed:

- ✓ Information in the form of a Material Safety Data Sheet should be made available to you before you use the product.
- ✓ All Material Safety Data Sheets should be sent to the person responsible for maintaining the MSDS's in your school.
- ✓ When you buy a product yourself for use on the job, you must obtain the MSDS, review it and send a copy to the person responsible.



Outside Contractors

If your school district hires an outside contractor to perform work in the school district, there are certain requirements that must be met:

- ✓ Before work begins, the contractor must supply copies of MSDS for any chemical products that they may bring into the school.
- ✓ The school district must inform the contractor of any dangerous chemicals or conditions that they may encounter in the area of the school where they will work. For example, if they are going to be welding, they should be informed if flammable chemicals are nearby. Those chemicals should be removed or the contractor's work procedures changed.

Recordkeeping

All training records and attendance sheets are to be kept on file for a period of forty (40) years.



Non-Routine Tasks

When an employee is asked to perform a task not ordinarily undertaken on that particular job and/or involving a chemical product not normally used, the employee:

- ✓ Has the right to be informed of the hazards and proper work practices regarding the chemical products being used.
- ✓ Has the right to be supplied with any protective gear necessary to use that chemical product safely.
- ✓ Should be provided with the MSDS on chemical products before they begin work.

These are examples of Non-Routine Tasks:

- ✓ Custodians who may be asked to help a chemistry teacher clean the chemical storage room.
- ✓ Teachers who assist the custodial staff during the summer or at any other time.

Hazard Awareness

You should:

- Be familiar with the materials you are working with and their hazards.
- Be aware of how to detect an accidental release of a hazardous chemical in your work area by sight, smell or monitoring devices.
- Refer to the MSDS.
- Use job instruction training.
- Avoid unnecessary exposure to all chemicals.
- Use protective equipment and clothing whenever needed.

HAZARD

COMMUNICATIONS



PHYSICAL HAZARDS

COMBUSTIBLE chemicals having flashpoints of more than 100° F (38° C). An example is mineral spirits.

COMPRESSED GASES are gases contained under pressure. These containers should be handled properly so as not to create a hazard from sudden release of pressure or gas. These gases may have inherent hazards in addition to being stored under pressure. Some compressed gases commonly found are acetylene, oxygen and carbon dioxide.

EXPLOSIVES are capable of suddenly producing large amounts of heat, gases, and pressure when subjected to sudden shock, pressure or high temperatures. Besides dynamite, TNT and nitroglycerine, other substances such as picric acid and lead azide are also explosive.

FLAMMABLE LIQUIDS have flashpoints of 100°F (38 °C) or less. Examples are acetone, gasoline, and toluene.

FLAMMABLE GASES are capable of burning under ambient conditions. Examples are acetylene, hydrogen and propane.

FLAMMABLE SOLIDS can be ignited readily and burn persistently. Phosphorus and lithium are two examples.

ORGANIC PEROXIDES are organic compounds containing the bivalent-OO-structure such as benzoyl peroxide. Organic peroxides can present an extreme risk of an explosion from exposure to shock, friction, flame, or other sources of ignition.

OXIDIZERS are chemicals that can initiate or promote combustion in other materials. Some examples include ammonium nitrate, calcium hypochlorite and nitric acid.

PYROPHORIC chemicals can ignite spontaneously in air at temperatures of 130°F (54.4° C) or below in the absence of added heat, shock, or friction. Examples are titanium dichloride and phosphorus.

UNSTABLE (REACTIVE) chemicals will vigorously polymerize, decompose, condense or become self-reactive when subjected to shocks, pressure, or certain temperatures. Examples are potassium hydride and vinyl chloride.

WATER –REACTIVE chemicals react with water to release products, which may be flammable or present a health hazard. Sodium and lithium are water reactive chemicals that are also flammable solids.



HEALTH HAZARDS

CARCINOGENS are chemicals that have been linked with cancer either as confirmed or potential human carcinogens. Benzene and chloroform are considered to be carcinogens.

CORROSIVE chemicals such as strong acids and alkalis are capable of destroying living tissue. Sulfuric acid and sodium hypochlorite (bleach) are corrosive.

IRRITANTS have reversible inflammatory effects on living tissue at the site of contact. Many solvents are irritants.

SENSITIZERS cause a substantial proportion of exposed people to develop an allergic reaction in exposed tissue after repeated exposure. Formaldehyde, nickel and azo dyes can sometimes cause allergic responses.

TOXIC/HIGHLY TOXIC chemicals are those whose chemical properties can lead to injuries or lethal effects on living organisms. All chemicals can be toxic in sufficient quantities.

TARGET ORGAN EFFECTS

Target Organ Effects occur when a chemical primarily affects one organ or system. The following are some examples.

HEPATOTOXINS are known to affect the liver. Some examples of chemicals that can cause this include carbon tetrachloride and nitrosamines.

NEPHROTOXINS are known to affect the kidneys. Examples of chemicals that can cause this damage include uranium and halogenated hydrocarbons.

REPRODUCTIVE TOXINS are known to affect the reproductive capabilities. The type of damage inflicted can be chromosomal damage (mutagens) and lead, and DBCP (1,2-dibromo-3-chloropropane). effects on the fetus (teratogens). The chemicals that can cause this include.

HEMATOPOIETIC AGENTS cause disorders in one's blood. Chemicals associated with this include carbon monoxide and cyanides.

NEUROTOXINS can cause problems with the central nervous system. Chemicals linked to this include mercury, and carbon disulfide.

HAZARD

COMMUNICATIONS



GENERAL CHEMICAL EMERGENCY PROCEDURES

- Get contaminated victims to a safety shower and/or eyewash (except with injuries involving alkali metals—use mineral oil instead).
- Remove victim's contaminated clothing and flush exposed areas for 15 minutes under running water.
- Shut doors to the spill area.
- Call 911 (or emergency number) to report accident or pull the nearest fire alarm.
- Evacuate the area, if necessary.
- Call appropriate school personnel, if necessary.

Never worry about being overcautious in a hazardous situation. No harm is done by leaving a questionable area or calling for assistance. Details of the exact chemical reaction or relative hazard can be discussed at length later; in fact, such review is useful in preventing future problems in similar situations. Taking immediate action is the key to limiting potential exposure and injury.

General First Aid Procedures

Be First Aid trained ahead of time!

BLEEDING – USE UNIVERSAL PRECAUTIONS! Apply direct pressure on the wound with a clean dressing. If bleeding continues and you do not suspect a fracture, elevate the wound above the victim's heart and continue to apply direct pressure. If bleeding continues, apply pressure at a pressure point. Maintain body temperature.

BREATHING PROBLEMS – Move victim to fresh air if smoke or dangerous gases are present. Otherwise, do not move victim. Ask victim "Are you choking?" If choking, perform abdominal thrusts (e.g., Heimlich maneuver). If victim loses consciousness, call 911 emergency number. Never enter a room with suspected toxic gases present—call 911 instead.





HAZARD

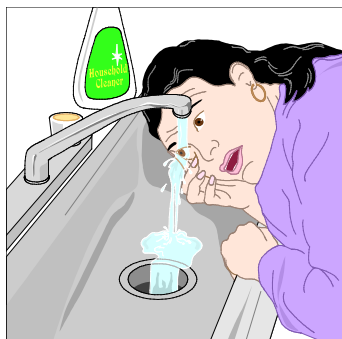
COMMUNICATIONS

UNCONSCIOUS VICTIM – Move victim to fresh air if smoke or dangerous gases exist. Begin rescue breathing. Never enter a room with suspected toxic gases present-call 911 (emergency number) instead.

CHEMICAL BURNS – Smother flames with a fire blanket or emergency shower. Call 911 (emergency number) or have someone else call 911. Have the victim remain under a safety shower or flush skin with any available water source for 15-30 minutes. Remove all contaminated clothing and jewelry. Cover burns with dry, loose dressings. Wash all clothing thoroughly before wearing it again. Chemical burns involving alkali metals should NOT be treated with water, but with mineral oil to clean the wounded skin.

CHEMICAL INGESTION – Call 911 (emergency number). Identify the chemical and follow the advice. Call the Poison Control Center. Do not give the victim any food or liquids without specific advice from a physician.

EYE INJURIES FROM CHEMICALS – Get the victim to a safety shower or eyewash immediately. Call 911 (emergency number). Flush eye for 15-30 minutes with both lids held open. Keep the injured eye lower than the uninjured eye. Keep the eyelids open-hold fingers at top and bottom of the eyeball. Wrap a bandage loosely around both eyes. Eye injuries involving alkali metals should NOT be treated with water, but with mineral oil to clean the eyes.



MATERIAL SAFETY

DATA SHEETS



The Material Safety Data Sheet

A typical Material Safety Data Sheet has eight sections, each outlining a different aspect of the product. It is required to be supplied by the manufacturer, with information that the manufacturer knows from testing or experience. Please be advised, not all MSDS sheets are set up the same. The Occupational Safety and Health Administration (OSHA) requires that certain information be contained on an MSDS sheet. However, the regulation does not mandate a certain format/layout to be followed.

The following information is required to be on an MSDS sheet:

IDENTIFICATION — Who made it, what it is called, what it does, and where to call in an emergency, or for more information.

INGREDIENTS — Lists hazardous components, their percentages, and exposure limits.

HEALTH HAZARDS — Indicates symptoms of exposure, and diseases that may be caused.

PHYSICAL HAZARDS — Indicates fire and explosion hazards, and other data on how the material behaves.

REACTIVITY — Warns of chemical incompatibility.

SPILL & DISPOSAL — Information on emergency clean up and environmentally responsible disposal.

PERSONAL PROTECTIVE EQUIPMENT — Indicates if gloves, goggles, respirators or other equipment are necessary for particular uses.

ADDITIONAL PRECAUTIONS — Usually highlights worst hazards, or particularly dangerous aspects of the material.

IDENTIFY Product Name Address Telephone #
INGREDIENTS TLV
HEALTH HAZARDS Skin Irritation
PHYSICAL HAZARDS Flammable

REACTIVITY Do not mix with bleach
SPILL, LEAK & DISPOSAL
PERSONAL PROTECTIVE EQUIPMENT Splash Goggles
ADDITIONAL PRECAUTIONS



Finding a Material Safety Data Sheet (MSDS)

If you are faced with the challenge of finding a material safety data sheet and can not find it in your Material Safety Data Sheet Book, Capital Region BOCES subscribes to an on-line MSDS search program that may help. This service is free to Risk Management customers.

How to find an MSDS:

Go to [http:// www.msdsonline.com](http://www.msdsonline.com)

Using this search:

To find a Material Safety Data Sheet on this site you will need a user name and password.

Username: capitalregion

Password: msds

After you enter your user name and password you will be directed to the MSDS search screen.

Searching for MSDS:

You can search for an MSDS by product type, manufacturer or both.

Product identifiers:

Example: crayons

Type what type of product you are looking for

Manufacturer or supplier:

Example: Binney & Smith

Name of company that makes product

A list of products will appear on the screen. Scroll down to find the MSDS sheet that you want.

Click on the PDF symbol next to the product name to view the MSDS sheet. You may also print the sheet from this screen.

Make sure you give a copy of the MSDS to your Safety Specialist/Coordinator to add to your inventory.

LABELING

REQUIREMENTS

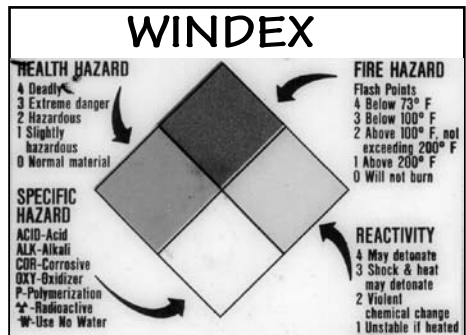


Labeling

The MSDS offers vital information about a product. It should be read before you use a product for the first time. The labeling requirements of the Hazard Communication Standard and the Right-to-Know law are quite simple. Labels are not expected to replace the MSDS, but to remind and warn people about the hazards.

When a manufacturer is labeling a product. The label must have:

Product's Name
Manufacturer's Name
& Address
Hazard Warnings



In order to save money, and prevent waste, school districts often buy products in large quantities. However, these large containers are not always convenient for immediate use. Therefore, workers will put the product in a more convenient container such as a 5-gallon bucket or a spray bottle.

OSHA states that unless a product is intended for one-time use, with no product remaining in the container, the product must be labeled.

An In-house label at a minimum must contain:

Product Name

Hazard Warning

In addition to the Hazard Communication Standard and the Right-to-Know law, there are additional labeling requirements for **foods, drugs and pesticides**. Foods are required to have nutritional information, drugs to have dosage and prescription information, and pesticides to have detailed usage information and EPA registration information. Of course, because the labels are so convenient to use, it is sometimes better to have more information on them.

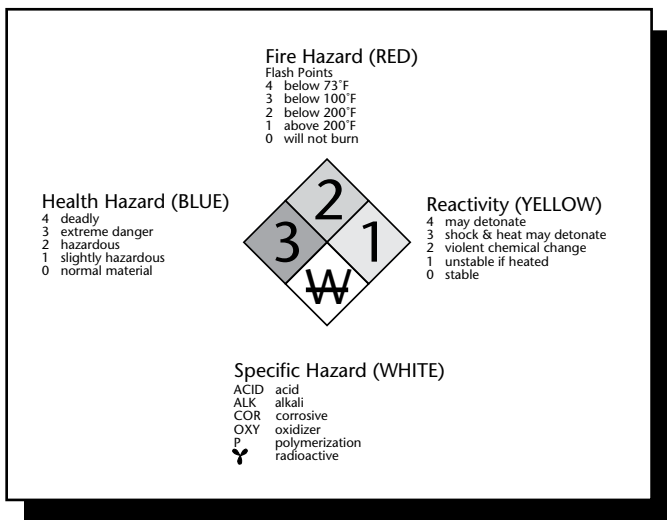
LABELING

REQUIREMENTS



NFPA Diamond

This is why some employers use labeling systems like the **NFPA diamond** (National Fire Protection Association), which gives information on health hazards, reactivity, fire hazard, and incompatibilities at a glance. One weakness is that it was designed for use by firefighters, and thus the information is slanted towards how the material reacts in a fire.



HMIS

HMIS (Hazardous Material Identification System) is another quick reference labeling system designed with daily use considerations. Instead of chemical incompatibilities, it gives a code for personal protective equipment to be used.

2	FIRE HAZARD
4	HEALTH HAZARD
0	REACTIVITY
G	PROTECTION

Poisonings & Reactions



Routes of Entry:

A chemical cannot be harmful to the body unless it enters the body. The simplest way to prevent poisonings or reactions is to keep it away from yourself.

Eye or Skin Contact: Some chemicals can cause damage directly to the skin or eyes. Acids or corrosives are an example. Other materials may penetrate the skin and attack other parts of the body. Petroleum distillates are an example.

Inhalation: All airborne materials; vapors, dusts, fumes, gases, mists are easily inhaled. Inhalation is a very common route of entry for all people.

Ingestion: Liquids and solids can be ingested. Children who put things in their mouths usually come to mind. However, adults can also ingest materials by not washing their hands before they eat, or by smoking while they work.

Personal Protective Equipment (PPE):

Personal Protective Equipment or PPE may be required for using many of the products in your building. In general, your employer is required to provide proper PPE at no expense to you, but there are exceptions. Steel toe boots may be an employee expense depending on your facility's uniform agreement. PPE can include:

Gloves: Gloves generally protect the hands. When working with chemicals it is important to select the correct gloves for the job. Latex gloves are vulnerable to penetration by petroleum based solvents, but work well for first aid. Nitrile gloves resist many chemicals well, but may be difficult to perform detailed work. Thick cloth or leather gloves may be appropriate for handling hot objects, but may allow penetration by chemicals.



Personal Protective

Equipment

Personal Protective Equipment (PPE):

(CONTINUED)

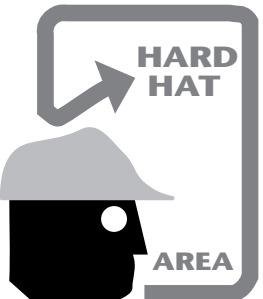
Glasses and Goggles: Can prevent eye injury if proper protection is used. Safety glasses are meant to withstand impact from flying objects. An approved set will have an ANSI (American National Standards Institute) Z 87 stamped on it. Splash goggles which are approved safety glasses will also have the Z 87 stamp, and are also designed to inhibit liquids from penetrating through a vent, or around its edge.



Face Shields: Face Shields are designed to protect the face from splashes of chemicals. If one is used, splash goggles must be worn underneath the shield, as the primary protection.



Respirators: Respirators protect the user from airborne contaminants. Although they may appear simple, they are actually a complex piece of equipment. In order to use a respirator at work, the employee must be trained in selecting correct filters and operating the respirator. The person must also be fit tested for the respirator, and have a medical exam conducted annually to ensure that he or she is medically able to use a respirator.



Other PPE:

Hearing Protection comes in two forms, inserts or ear muffs. Inserts are not desirable for people with ear infections. Hard Hats are required in areas where objects may fall on an employees head. Steel Toe Boots may be required in areas where damage to the feet may occur. Welding Helmets are required for welding operations. CPR shields should be available to people who are required to perform mouth to mouth resuscitation.



Environmentally Sensitive Cleaning and Maintenance Products (Green Cleaning)

The New York State Office of General Services (OGS) Green Cleaning Guidelines (revised 3/27/2007) state, "Environmentally sensitive cleaning and maintenance products are defined as cleaning and maintenance products that minimize adverse impacts on children's health and the environment, while cleaning effectively, as determined by the OGS Commissioner." The terms "green cleaning products" and "green cleaning" are synonymous with environmentally sensitive cleaning products and environmentally preferred cleaning products. Green cleaning is more than simply switching to green cleaning products. Green cleaning uses a holistic approach to facility cleaning and maintenance that includes green cleaning products, defined roles and responsibilities for all building occupants, a comprehensive custodial training program, and green cleaning policies and procedures.

Frequently Asked Questions:

What regulations address Green Cleaning and who has to comply?

- * Chapter 584 of the Laws of 2005 (School Green Cleaning Product Law) amends Education Law 409-i and State Finance Law 163-b.
- * This law covers all public and nonpublic elementary and secondary schools including charter schools, BOCES, private and parochial schools (including schools for students with disabilities) and state-supported schools for the deaf and blind.

When did this law go into effect?

- * The law was effective on September 1, 2006. Schools must phase out inconsistent products and practices and incorporate a transition to green cleaning products and practices.

How will I know if a product is a green cleaning product?

- * The product will be listed on OGS's website of Approved Green Cleaning Products List.
- * The five OGS-approved products are: 1) Cleaning Products (composed of Glass Cleaners, General Purpose Cleaners, Carpet Cleaners and Bathroom Cleaners); 2) Floor Finish Products; 3) Floor Finish Stripper Products; 4) Hand Soaps; and 5) Vacuum Cleaners. Products are noted with "Preferred Source" or "State Contract and Contract Information" when such information is available.
- * Characterization of a product as green by vendors, third-party organizations, or others does not mean that the products will satisfy the requirements of the Law, or that such a product is on OGS's acceptable products list.
- * Ecologo (formerly known as Environmental Choice) and Green Seal are two organizations that certify some of the green cleaning products found on the OGS Green Products List page.

What about disinfectants?

- * The Guidelines for Green Cleaning do not specifically address disinfectants, because they are not considered cleaners.
- * Schools must continue to meet NYS DOL Law and NYS Sanitation Codes for keeping bathrooms, food service areas, nurse's office, swimming pools, etc. sanitary.
- * OGS recommends that school districts establish a policy to explain when and under what circumstances the use of disinfectants is necessary.

Websites to bookmark:

- * <http://www.ogs.state.ny.us/ProductSiteSecure/bldgAdmin/environmental/Product/default.aspx>
- * <http://www.greenseal.org>
- * <http://www.ecologo.org/en/greenproducts/professional>



Employee Rights

The overall intent of “Right-to-Know” legislation is to provide employees with information about the known and suspected health hazards that may result from working with toxic substances. The employees have a legal right to this information. This assists them in making knowledgeable and reasoned decisions with respect to any personal risks of their employment and the need for corrective action.

Employees have the right to:

1. Have access to information, including the HAZCOM written plan, inventory and MSDS file.
2. Make photocopies of that information to keep on hand in their department.
3. Be informed of the hazardous products used in their jobs by reviewing the inventory.
4. Be informed of the potentially hazardous ingredients found in those products (see MSDS).
5. Be informed of the hazards associated with overexposure to those ingredients (including health hazards, fire hazards, etc.).
6. Be informed of the specific proper procedures for handling those products containing potentially harmful ingredients.
7. Be provided with protective gear, ventilation and proper equipment when needed.
8. Refuse to work with a toxic substance if they have not been provided with the MSDS. In the event the employer does not possess an MSDS for a specific substance for which a good faith effort has been made to secure an MSDS, the employee and the employer must agree on safe handling procedures or replace the product with a safer alternative.
9. File a complaint, as a last resort, with the Department of Labor if the above conditions have not been met. The employee should first try to solve the problem with the school district before filing a complaint.
10. Be protected from discrimination as a result of their use of any of these rights under the HAZCOM Standard.

School SAFETY

PLANS (SAVE)



SAVE: Safe Schools Against Violence in Education

SAVE: Safe Schools Against Violence in Education Act is a New York State Education Department regulation requiring multi-faceted approaches in the prevention of violence through preparedness, intervention, education and training. It includes areas such as:

- Background Checks for New Employees
- Security Procedures
- Violence Prevention Training
- Character Education
- Code of Conduct
- Crisis Intervention
- Emergency Planning at both the School District and School Building Levels (School Safety Plans)
- Emergency Drills (may include drills for fire, lockdown, lockout, shelter-in-place, early dismissal, or duck & cover)

School Safety Plans

(Effective July 1, 2001)

- District-wide School Safety Plans: A public document submitted to NYSED.
- Building-level School Safety Plans include: School Safety Team, Emergency Response Team and Post-incident Response Team. Building-level Plans are confidential and are protected from FOIL. They are sent to local and State Police as required.
- Together, these plans are intended to define how each school district and all the buildings in the district will respond to acts of violence and other disasters through prevention, intervention, emergency response and management.

One required element for School Safety Plans is the use of the **Incident Command System, (ICS)**. It is a management system designed for situations where quick response and coordination of multiple resources is required. It was developed in Southern California when multiple agencies were fighting wildfires and coordination was needed among multiple fire departments, EMS, police, federal, state and local governments. ICS outlines responsibilities of various functions for dealing with emergency situations and is expandable and adaptable to multiple situations. It also uses a common terminology that all emergency responders (fire, police, EMS) will recognize during an emergency response.



Incident Command SYSTEM

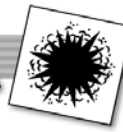
Common ICS Language

- **Incident Commander (IC):** is responsible for decision making. The IC gets information from the people on the staff and makes command decisions based on that information. Since the ICS system is flexible, the Incident Commander may or may not be a principal or superintendent. It should be the person most capable of making decisions in that situation while remaining stationed in the Command Post. The IC is “the boss.”
- **Command Post (CP):** the location at which the primary command functions are executed. The CP may be consolidated with the base or with other incident facilities for a Unified Command Post.
- **Operations:** responsible for implementing the decisions of the IC. Responsible for all tactical operations at the incident. Operations staff are “the doers.”
- **Logistics:** responsible for providing all resources (personnel, equipment, transportation, facilities, services, etc.) required for incident resolution. Logistics staff are “the getters.”
- **Planning and Intelligence:** responsible for collecting, evaluating and disseminating the information needed by the IC to measure the size, scope and seriousness of an incident and to plan an appropriate response. Planning & Intelligence staff are “the thinkers.”
- **Public Information Officer (PIO):** a member of the Command Staff responsible for compiling and releasing information regarding an incident to the news media, appropriate agencies, personnel and/or school community. All information given out by the PIO is always reviewed and approved of by the Incident Commander prior to release.
- **Liaison:** serves as the point of contact for responding agencies (police, fire, EMS, utilities, etc.) and other school districts that may be involved in the incident.
- **Safety:** responsible for observing the situation to make sure that the decisions of the IC does not put anyone at unnecessary risk.
- **Administration and Finance:** the section responsible for all incident costs and financial considerations. Possible positions in an expanded ICS organization include Time unit, Procurement unit, Compensation/Claims unit and Cost unit. All activity must follow the district’s typical financial approval procedures unless directed by the District IC to do otherwise.
- **Incident Log/Script:** responsible for keeping a written log of all incident events and updating appropriate command post personnel on significant developments.

If you notice, or are involved in an emergency, notify your supervisor or principal immediately. This may be done in several ways depending on the incident (i.e., intercom, fire alarm, in person, etc.). Make sure you know your district's policies for emergency notification and procedures.

Incident Command

SYSTEM



What is NIMS?

National Incident Management System Compliance (NIMS)

School districts that receive federal preparedness funds must require that the appropriate personnel complete the IS-700 NIMS (National Incident Management System) introductory course by September 30, 2006, in order to receive FY 2007 preparedness grants. It would also be useful for all faculty and staff likely to be involved in emergency activities to take the IS-700 NIMS introductory course, including those districts that do not currently receive preparedness funding. This free on-line course may be accessed at www.training.fema.gov/EMIWeb/IS/is700.asp.

According to the NIMS Integration Center (www.fema.gov/emergency/nims/nims.shtm), school districts are required to be NIMS compliant. Since school districts are an integral part of the local community, the use of NIMS should be achieved in close coordination with other areas of the community. School districts are not traditional response organizations and more typically are recipients of first responder services provided by fire and rescue, emergency medical and law enforcement agencies. This relationship should be integrated within the local municipality's plan for NIMS compliance. School district participation in the community's NIMS preparedness program is essential to ensure that first responder services are delivered to schools in a timely and effective manner.

Incident Command System for Schools

New York State Commissioner's Regulation 155.17(e) (2) requires that building-level emergency plans delineate the school's chain of command during an emergency response in a manner consistent with the Incident Command System (ICS). The FEMA IS-100-SC course, which follows the National Incident Management System (NIMS) guidelines, was developed to promote school safety by familiarizing school staff with ICS principals in a school setting. Additionally, the course was developed to prepare school employees for collaborating with local emergency responders during an event.

This free on-line course was designed for individuals employed in elementary and secondary schools. See: <http://training.fema.gov/EMIWeb/is/is100sc.asp>

ADDITIONAL INFORMATION ON NIMS, ICS, AND FEDERAL SCHOOL EMERGENCY PLANNING GRANT PROGRAMS IS AVAILABLE AT:

<http://www.security.state.ny.us/training>

<http://www.fema.gov/emergency/nims/index.shtm>

<http://training.fema.gov/EMIWeb/IS/IS100SCA.asp>

<http://training.fema.gov/EMIWeb/IS/IS700a.asp>

<http://www.ed.gov/admins/lead/safety/emergencyplan/index.html>

UNIVERSAL PRECAUTIONS



Universal Precautions are hygiene procedures used to prevent blood or Other Potentially Infectious Materials (OPIM) exposure. All tasks with a potential for exposure require the use of Universal Precautions to eliminate or minimize the possibility of exposure. Whenever possible, encourage individuals to tend to their own injury. If blood or OPIM is present, all “hands-on” employees must observe Universal Precautions.

- Wear gloves
- Use disposable towels
- Put all contaminated items in plastic bag
- Clean & disinfect contaminated areas
- Remove gloves carefully & correctly
- Wash hands thoroughly

Reporting Incidents of Exposure

All incidents of potential exposure to bloodborne pathogens must be reported to the health office. An occupational exposure occurs when someone else’s blood or body fluid gets through your skin or in your eyes, nose or mouth. Confidential medical evaluation and counseling are available to any exposed employee. Post exposure evaluation by a Health Care Professional may include recommendation for post-exposure vaccination, testing and/or counseling.

EXPOSURE

CONTROL PLAN



The Exposure Control Plan is a written program developed by the school district to identify, educate and protect employees who may have occupational exposure to bloodborne pathogens. It explains implementation of the Bloodborne Pathogens Standard within the school district, and, most importantly, it describes methods to eliminate or minimize employee exposure. The Exposure Control Plan has an overall administrator to oversee its implementation. A copy of your school district's Exposure Control Plan can be obtained by contacting the plan administrator.

Included in the Plan is the following information:

school district's

EXPOSURE CONTROL PLAN

- ▶ copy of the OSHA standard
- ▶ exposure determination
- ▶ post-exposure evaluation & follow-up
- ▶ Hepatitis B vaccination information
- ▶ methods of compliance
- ▶ employee training and information record keeping

Exposure determination analyzes job tasks for their potential for blood or OPIM exposure. Included in this is the identification of employees who are at occupational risk for exposure to blood or OPIM. At risk employees have to perform tasks that might involve exposure to blood in the course of performing their job duties. A school nurse's duties clearly carry the inherent risk of exposure. This is different from an employee who may assist another staff member or student as a "Good Samaritan." The Good Samaritan may choose to help someone with a bleeding injury even though it is not a part of their job duties.

Whether at occupational risk or as Good Samaritans, all employees should follow Universal Precautions whenever there is a reasonably anticipated risk of exposure. All school staff and students should take precautions against the transmission of disease by using proper techniques and good hygiene to prevent the spread of infection and to protect themselves. There should be no distinction between those having symptomatic or asymptomatic disease. Thorough hand washing is a basic and effective way to maintain good hygiene and infection control.

BLOODBORNE

PATHOGENS:

Human Immunodeficiency Virus (HIV),
Hepatitis B (HBV) and Hepatitis C (HCV)

HIV/AIDS:

- The human immunodeficiency virus (HIV) is the virus that causes AIDS (Acquired Immune Deficiency Syndrome). People who have HIV in their bodies are said to have HIV infection or to be HIV-positive. HIV damages the body's immune system, which normally protects the body from disease. HIV is a disease with many stages. An HIV-infected person can range from being healthy to being sick.
- AIDS is the stage when an HIV-infected person's immune system gets very weak. When this happens, other diseases and infections can enter the body. These "opportunistic" diseases cause the high fatality rates among AIDS patients.

HEPATITIS B:

- Hepatitis B is a serious disease caused by a virus that attacks the liver. The virus, which is called hepatitis B virus (HBV), can cause lifelong infection, cirrhosis (scarring) of the liver, liver cancer, liver failure and death.
- Hepatitis B vaccine is available for all age groups to prevent hepatitis B virus infection. In New York State, all students entering kindergarten and seventh grade are required to have this vaccine. Only the designated school employees listed in the Exposure Control Plan are offered this vaccine through the school district.

HEPATITIS C:

Hepatitis C is a disease of the liver caused by the hepatitis C virus (HCV). You may be at risk for hepatitis C and should contact your medical care provider for a blood test if you:

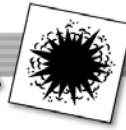
- were notified that you received blood from a donor who later tested positive for hepatitis C.
- have ever injected illegal drugs, even if you experimented a few times many years ago
- received a blood transfusion or solid organ transplant before July 1992
- received a blood product for clotting problems produced before 1987
- have ever been on long-term kidney dialysis
- have evidence of liver disease (e.g., persistently abnormal ALT levels)

Hepatitis C is serious for some persons, but not for others. Most persons who get hepatitis C carry the virus for the rest of their lives. Most of these people have some liver damage but many do not feel sick from the disease. Some persons with liver damage due to hepatitis C may develop cirrhosis (scarring) of the liver and liver failure, which may take many years to develop.

INJECTION DRUG USE

CDC estimates that injection drug use accounts for 60% of all new cases of hepatitis C and is a major risk factor for infection with hepatitis B virus.

BLOODBORNE



PATHOGENS:

Human Immunodeficiency Virus (HIV),
Hepatitis B (HBV) and Hepatitis C (HCV)

QUESTION:

How can a person protect themselves from getting diseases spread by contact with human blood (Bloodborne Pathogens)

- Don't ever shoot drugs. If you shoot drugs stop and get into a treatment program. If you can't stop, never reuse or share syringes, water, or drug works, and get vaccinated against hepatitis A and hepatitis B.
- Do not share toothbrushes, razors or other personal care articles. They might have blood on them.
- If you are a healthcare worker, always follow routine barrier precautions and safely handle needles and other sharps. Get vaccinated against hepatitis B.
- Consider the health risks if you are thinking about getting a tattoo or body piercing: You can get infected if:
 - the tools that are used have someone else's blood on them.
 - the artist or piercer doesn't follow good health practices, such as washing hands and using disposable gloves.

Transmission of Bloodborne Pathogens

HIV, HBV and HCV are all bloodborne pathogens that can be transmitted by blood and by other potentially infectious materials (OPIM). OSHA defines OPIM as: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids where it is difficult or impossible to differentiate between body fluids are OPIM.

Transmission occurs when the blood, semen, vaginal fluids or breast milk (not for HCV) with the infectious virus from one person (source individual) is able to enter the bloodstream of another person (exposed individual) through an open wound, abraded skin, or mucous membranes. Possible ways in which transmission can occur are: needle sticks, sharing of needle/syringe by IV drug user, unprotected sexual intercourse, mother to baby, getting cut by a sharp object which is contaminated, or any situation where there is direct blood/OPIM to blood or mucous membrane contact. In the school setting, the potential for exposure probably occurs most often when a staff member is responding to an injury.



TRENDS & STATISTICS

HIV/AIDS

Unless otherwise noted, the following data is from the CDC HIV/AIDS Surveillance Report of 2005.

HIV Estimate

- At the end of 2003, an estimated 1,039,000 to 1,185,000 persons in the United States were living with HIV/AIDS, with 24-27% undiagnosed and unaware of their HIV infection.

AIDS Cases

- In 2005, the estimated number of diagnoses of AIDS in the United States and dependent areas was 45,669. Of these 44,198 were in the 50 states and District of Columbia and 1,096 were in the dependent areas.
- The cumulative estimated number of diagnoses AIDS through 2005 was 988,376. The estimated number of persons living with AIDS in the United States and dependent areas was 437,982.
- In 2005, the cumulative estimated number of deaths from AIDS in the United States and dependent areas was 17,011. The cumulative estimated number of deaths of persons with AIDS, through 2005, was 550,394.

Hepatitis B

- Number of new infections per year has declined from an average of 450,000 in the 1980's to about 60,000 in 2004.
- The highest disease rate occurs in 20-49 year olds.
- Greatest decline has happened among children and adolescents due to routine Hepatitis B vaccination.
- Estimated 1.25 million chronically infected Americans, of whom 20-30% acquired their infection in childhood.

Hepatitis C

- Number of new infections per year has declined from an average of 240,000 in the 1980's to about 26,000 in 2004.
- Most infections, as high as 60%, are due to illegal injection drug use.
- Transfusion-associated cases occurred prior to blood donor screening now occurs in less than one per million transfused units of blood.
- Estimated 4.1 million (1.6%) Americans have been infected with HCV, of whom 3.2 million are chronically infected.

Statistical information obtained from the Center for Disease Control (CDC)

PANDEMIC

INFLUENZA



PANDEMIC INFLUENZA

WHAT IS PANDEMIC INFLUENZA?

A novel or new virus for which there is no immunity. Characterized by rapid, global spread from human to human.

SEASONAL FLU VS. PANDEMIC INFLUENZA

The Seasonal Flu peaks December thru March in North America. Death rates are highest in the elderly, very young and individuals with certain chronic illness. Pandemic Influenza has no seasonal preference and comes in waves during a time period of a year or more. A pandemic flu may result in millions of deaths because there is no immunity.

WHAT CAUSES A PANDEMIC INFLUENZA?

A flu pandemic occurs when a new influenza virus emerges for which people have little or no immunity and for which there is no vaccine. The disease spreads easily person-to-person, causes serious illness, and can sweep across the country and around the world in very short time. An influenza pandemic may be caused by either swine (pig) or avian (bird) flu viruses.

There are currently cases of human infection with H1N1 throughout the world, including the United States. Health professionals are concerned about this virus for the following reasons:

- It is a never-before seen combination of human, swine, and avian influenza viruses.
- It is being spread from human to human.
- The age group most affected is healthy, young adults (unlike seasonal flu)
- Like other influenza viruses, it continues to evolve.

HOW INFLUENZA SPREAD?

Transmission is predominantly spread from the droplets from a sneeze. People either have direct contact with droplets or they pick them up from surfaces where they have settled. Your eye, mouth and nasal openings are points of entry and inoculation for virus particles.

PREVENTION-UNDERSTAND AND BEGIN PRACTICING PERSONAL PROTECTIVE BEHAVIOR NOW

- Cover your mouth & nose with a tissue when coughing and sneezing. Throw out tissue in a waste basket and wash your hands.
- If you don't have a tissue, don't cough or sneeze into your hand. Instead, cough or sneeze into the crook of your arm so you won't get germs on your hands and spread them to others.
- Wash your hands often with soap and water. When hand washing is not possible, use antiseptic hand gels that contain alcohol.
- Stay home when you are sick and keep your children home from school or daycare when they are sick.
- Learn more about the importance of a good home preparedness plan.
- Stay informed.

New York State Department of Health

<http://www.nyhealth.gov/diseases/communicable/influenza/>

<http://www.nyhealth.gov/diseases/communicable/influenza/pandemic/>

Centers for Disease Control and Prevention

<http://www.cdc.gov/h1n1flu/>

United States Department of Health and Human Services

<http://www.pandemicflu.gov/>

World Health Organization

<http://www.who.int/csr/disease/swineflu/en/index.html>



Employee Record

Record of Right to Know Hazard Communication / Universal Precaution Information Received by the Employee

- I have received information on the OSHA Hazard Communication Standard and the New York State Right to Know Law.
- I have been informed of my rights and responsibilities as an employee under these regulations.
- I have been made aware of the availability of Material Safety Data Sheets, the school's product/chemical inventory, the MSDS file and the personal protective equipment (gloves, etc) available to minimize exposure to possible bloodborne pathogens.
- I know who to contact for more information on chemical safety, bloodborne pathogens and who to contact and procedures to follow in case of an emergency.
- I have been given additional information on specific areas such as science laboratories, art classrooms, etc., where appropriate.

Employee Signature

Date

Department(s)

District

Return to:

BOCES Health/Safety/Risk Management, (518) 464-5115, can assist with:

- * Art and Science Classroom Safety
- * Asbestos and AHERA
- * Bloodborne Pathogens & Universal Precautions
- * Bulk Storage Tanks
- * Chemical Inventory Control
- * Confined Space
- * Emergency Planning & School Safety Plans (SAVE)
- * EPA Safe Drinking Water Act
- * Fire and Building Code
- * Indoor Air Quality
- * Lead Poisoning Prevention Awareness & OSHA/EPA Lead Regulations
- * NYS Department of Health Courses in Asbestos for DOL Certification
- * NYS Pollutant Discharge Elimination Regulations
- * OSHA Compliance
- * Pesticide Application & Neighbor Notification Regulations
- * Playground Safety
- * Radon
- * Respirator Use/Medical Surveillance
- * Right-To-Know and Hazard Communication
- * Risk Management Services
- * Safety Committees
- * Structural Safety Inspection
- * Transportation Safety
- * Underground Injection Control
- * Water Quality
- * Workplace Hazard Assessments



*This publication was
produced in cooperation
with the Capital Region BOCES
Communications Service.
(Revised 8/09)*