

ALTA VISTA ELEMENTARY SCHOOL



INJURY AND ILLNESS PREVENTION PROGRAM

Revised 11-5-20

*pending Board approval

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INTRODUCTION

Alta Vista Elementary School District has developed this formal Injury and Illness Prevention Program to ensure safe and healthful working conditions for all employees per the California Code of Regulations, Title 8, Sections 1509 and 3203 and Labor Code 6401.7. The program has been designed with the emphasis on the health and safety of all employees.

The Injury and Illness Prevention Plan is intended to establish a framework for Responsibilities, Compliance, Communication, Hazard Identification, Accident Investigation, Hazard Mitigation, Training, and Recordkeeping.

GOALS

Diligent implementation of this program will reap many benefits for the Alta Vista Elementary School District. Most notably it will:

1. Protect the health and safety of employees. Decrease the potential risk of disease, illness, injury, and harmful exposures to district personnel.
2. Reduce workers' compensation claims and costs.
3. Improve efficiency by reducing the time spent replacing or reassigning injured employees, as well as reduce the need to find and train replacement employees.
4. Improve employee morale and efficiency as employees see that their safety is important to management.
5. Minimize the potential for penalties assessed by various enforcement agencies by maintaining compliance with Health and Safety Codes.

RESPONSIBILITIES

The ultimate responsibility for establishing and maintaining effective environmental health and safety policies specific to district facilities and operations rests with the Superintendent. General policies, which govern the activities and responsibilities of the Injury & Illness Prevention Program, are established under his/her final authority.

It is the responsibility of Site Administrators, Supervisors and Managers to develop procedures, which ensure effective compliance with the Injury & Illness Prevention Program, as well as other health and safety policies related to operations under their control. Site Administrators, Supervisors and Managers are responsible for enforcement of this Program among the employees under their direction by carrying out the various duties outlined herein, setting acceptable safety policies and procedures for each employee to follow and ensuring that employees receive the general safety training. Each Site Administrator, Supervisor, and Manager must also ensure that appropriate job specific safety training is received, and that safety responsibilities are clearly outlined in the job descriptions, which govern the employees under their direction. Supervising others also carries the responsibility for knowing how to safely accomplish the tasks assigned each employee, for purchasing appropriate personal protective equipment, and for evaluating employee compliance.

Immediate responsibility for workplace health and safety rests with each individual employee. Employees are responsible for following the established work procedures and safety guidelines in their area, as well as those identified in this Program. Employees are also responsible for using the personal protective equipment issued to protect them from identified hazards, and for reporting any unsafe conditions to their supervisors.

The Superintendent is responsible for developing and managing this Injury & Illness Prevention Program.

COMPLIANCE

All workers, including Administrators, Directors, Managers, and Supervisors, are responsible for complying with safe and healthful work practices.

Our system of ensuring that all workers comply with the provisions of this program include, but are not limited to, one or more of the following practices:

- _____ Informing workers of the provisions of our IIPP.
- _____ Evaluating the safety performance of all workers.
- _____ Recognizing employees who perform safe and healthful work practices.
- _____ Providing training to workers whose safety performance is deficient.
- _____ Disciplining workers for failure to comply with safe and healthful work practices.

COMMUNICATION

All Administrators, Directors, Managers, and Supervisors are responsible for communicating with all workers about occupational safety and health in a form readily understandable by all workers. Effective two-way communication, which involves employee input on matters of workplace safety, is essential to maintaining an effective Injury & Illness Prevention Program.

To foster better safety communication, our communication system will include one or more of the following items:

- _____ New worker orientation including a discussion of safety, health policies and procedures.
- _____ Review of our IIPP.
- _____ Training Programs.
- _____ Regularly scheduled safety meetings.
- _____ Posted or distributed safety information.
- _____ A system for workers to anonymously inform management about workplace hazards.

Employees are encouraged to bring to the District's attention any potential health or safety hazard that may exist in the work area. The Report of Unsafe Conditions form can be used for this purpose. This form is available in the District Office. You may also submit your concern anonymously by placing it in the comment/suggestion box located in the Staff Lounge.

HAZARD ASSESSMENT

A health and safety inspection program is essential in order to reduce unsafe conditions, which may expose employees to incidents that could result in personal injuries or property damage. Periodic inspections shall be performed by a competent observer in all work sites owned and operated by the Alta Vista Elementary School District.

Scheduled Safety Inspections

_____ Upon initial implementation of this Program, inspection of all work areas will be conducted. All inspections will be documented using the attached forms (or equivalent) with appropriate abatement of any hazards detected.

Thereafter, safety inspections will be conducted at the frequency described below:

_____ Annual inspections of all office areas will be conducted to detect and eliminate any hazardous conditions that may exist.

_____ Monthly inspections of all potentially hazardous areas (shops, cafeterias, warehouses, gymnasiums, sheds, etc.) will be conducted to detect and eliminate any hazardous conditions that may exist.

Unscheduled Safety Inspections

_____ Additional safety inspections will be conducted whenever new equipment or changes in procedures are introduced into the workplace that presents new hazards.

_____ The Site Administrator will conduct periodic unscheduled safety inspections of all potentially hazardous areas to assist in the maintenance of a safe and healthful workplace.

_____ Safety reviews will be conducted when occupational accidents occur to identify and correct hazards that may have contributed to the accident.

HAZARD CORRECTION

Unsafe or unhealthy work conditions, practices, or procedures shall be corrected in a timely manner based on the severity of the hazards. The District recognizes that hazards range from imminent dangers to hazards of relatively low risk. Hazards shall be corrected according to the following procedures:

1. When observed or discovered.
2. When an imminent hazard exists, which cannot be immediately abated without endangering employee(s) and/or property, we will remove all exposed workers from the area except those necessary to correct the existing condition. Workers who are required to correct the hazardous condition shall be provided with the necessary protection.

ACCIDENT REPORTING/INVESTIGATIONS

This investigation responsibility is assigned to the immediate Supervisor of the worker injured in the accident or exposed to the hazardous substance, or the report of a near-miss incident. Procedures for investigating workplace accidents and hazardous substance exposures include, but are not limited to the following:

1. Interviewing injured workers and witnesses;
2. Examining the workplace for factors associated with the accident/exposure;
3. Determining the cause of the accident/exposure;
4. Taking corrective action to prevent the accident/exposure from reoccurring;
5. Recording the findings and actions taken.

To ensure timely accounting for Workers' Compensation procedures, both employee and supervisor must complete their respective portions on the Supervisor's First Report of Injury/Illness/Accident available at the District Office or school site.

EMPLOYEE TRAINING

All workers, including Administrators, Directors, Managers, and Supervisors, shall have training and instruction on general and job-specific safety and health practices. Training and instruction are provided:

1. When the IIPP is first established.
2. To all new workers.
3. To all workers given new job assignments for which training has not been previously provided.
4. Whenever new substances, processes, procedures or equipment are introduced to the workplace and represent a new hazard(s).
5. Whenever the employer is made aware of a new or previously unrecognized hazard(s).
6. To supervisors to familiarize them with the safety and health hazards to which workers under their immediate direction and control may be exposed.
7. To all workers with respect to hazards specific to each employee's job assignment.

General workplace safety and health practices include, but are not limited to, the following:

1. Implementation and maintenance of the IIPP.
2. Proper and timely reporting of hazards and accidents to Supervisors.
3. Emergency Action and Fire Prevention Plan.
4. Provisions for medical services and first aid including emergency procedures.
5. The use of chairs, tables, file cabinets and other classroom or office furniture, as a climbing aid, is specifically forbidden.

EMPLOYEE TRAINING – cont'd

6. Prevention of musculoskeletal disorders, including proper lifting techniques.
7. Proper housekeeping, such as keeping stairways and aisles clear, work areas neat and orderly, and promptly cleaning up spills.
8. Prohibiting horseplay, scuffling, or other acts that could tend to adversely influence employee safety.
9. Proper storage to prevent stacking goods in an unstable manner and storing goods against doors, exits, fire extinguishing equipment and electrical panels.
10. Hazard communication, including worker awareness of potential chemical hazards, proper labeling of containers, and Blood Borne Pathogens exposure and prevention.
11. Proper storage and handling of toxic and hazardous substances; include, prohibiting eating or storing food and beverages in areas where they can become contaminated.

RECORDKEEPING

Many standards and regulations of Cal/OSHA contain requirements for the maintenance and retention of records for occupational injuries and illnesses, medical surveillance, exposure monitoring, inspections and other activities relevant to occupational health and safety.

To comply with these regulations, as well as to demonstrate that the critical elements of this Injury & Illness Prevention Program are being implemented, the following records will be kept on file in the District Office for at least the length of time indicated below:

1. Copies of all IIPP Safety Inspection Forms. Retain 5 years.
2. Copies of all Accident Investigation Forms. Retain 5 years.
3. Copies of all Employee Training Checklists and related Training Documents.
Retain for duration of each individual's employment.
4. Copies of all Safety Meeting Agendas. Retain 5 years.

RECORDKEEPING – cont'd

The District will ensure that these records are kept in their files and present them to Cal/OSHA or other regulatory agency representatives if requested.

A review of these records will be conducted by the Superintendent during routine inspections to measure compliance with the Program. A safe and healthy workplace must be the goal of everyone at Alta Vista Elementary School District, with responsibility shared by management and staff alike. If you have any questions regarding this Injury & Illness Prevention Program, please contact the District Office at 559-782-5700.

REPORT OF UNSAFE CONDITIONS

DATE: ____/____/____

CONDITION(S) NOTED AT:

OFFICE: _____ **DEPARTMENT:** _____

SITE COORDINATOR: _____

DESCRIPTION OF UNSAFE CONDITION(S): _____

NAME (OPTIONAL): _____

ANALYSIS: _____

_____ **DATE:** _____

RECOMMENDATIONS: _____

_____ **DATE:** _____

ACTION(S) TAKEN: _____

_____ **DATE:** _____

RESPONSE TO SUGGESTION: _____

SUPERVISOR'S FIRST REPORT OF INJURY/ILLNESS/ACCIDENT

SCHOOLS OF TULARE COUNTY

SUPERVISOR'S FIRST REPORT OF INJURY/ILLNESS/ACCIDENT

(Note: Box Numbers Correspond with 5020 Report)

EMPLOYER/SCHOOL DISTRICT Alta Vista School District, 2293 E. Crabtree Ave., Porterville, CA 93257 (559) 782-5700			
1. SCHOOL/SITE NAME & ADDRESS (Number, Street, City, Zip) Alta Vista Elementary		1A. SITE PHONE NUMBER	
7. EMPLOYEE NAME		8. SOCIAL SECURITY NUMBER	9. DATE OF BIRTH (MM/DD/YY)
10. HOME ADDRESS (Number, Street, City, Zip)		10A. PHONE NUMBER	
11. SEX <input type="checkbox"/> M <input type="checkbox"/> F	12. Assigned Job Title - (NO Initials, abbreviations or numbers)		
17. DATE OF INJURY OR ONSET OF ILLNESS (MM/DD/YY)	18. TIME INJURY/ILLNESS OCCURRED A.M. P.M.	19. TIME EMPLOYEE BEGAN WORK A.M. P.M.	21. UNABLE TO WORK FOR AT LEAST ONE FULL DAY AFTER DATE OF INJURY? <input type="checkbox"/> YES <input type="checkbox"/> NO
22. DATE LAST WORKED (MM/DD/YY)	23. DATE RETURNED TO WORK (MM/DD/YY)	27. DATE OF SUPERVISORS KNOWLEDGE OF INJURY (MM/DD/YY)	24. IF STILL OFF WORK, MARK SPACE WITH CHECK MARK <input type="checkbox"/>
29. SPECIFIC INJURY/ILLNESS AND PART OF BODY AFFECTED, MEDICAL DIAGNOSIS IF AVAILABLE, e.g. second degree burns on right arm, tendonitis of left elbow, lead poisoning			
30. LOCATION WHERE EVENT OR EXPOSURE OCCURRED (No., Street, City) Alta Vista Elementary		10B. ON EMPLOYER'S PREMISES? <input type="checkbox"/> YES <input type="checkbox"/> NO	
31. DEPARTMENT WHERE EVENT OR EXPOSURE OCCURRED, e.g. shipping dpt., playground, lunchroom, classroom, restroom, etc.		12. OTHER WORKERS' INJURED/ILL IN THIS EVENT? <input type="checkbox"/> YES <input type="checkbox"/> NO PERSON	
33. EQUIPMENT, MATERIALS AND/OR CHEMICAL THE EMPLOYEE WAS USING WHEN EVENT OR EXPOSURE OCCURRED, e.g. Kitchen utensils, welding torch, scaffold			
34. SPECIFIC ACTIVITY EMPLOYEE WAS PERFORMING WHEN EVENT OR EXPOSURE OCCURRED e.g., mopping floors, loading food onto truck			
35. HOW INJURY/ILLNESS OCCURRED DESCRIBE SEQUENCE OF EVENTS, SPECIFY OBJECT OR EXPOSURE WHICH DIRECTLY PRODUCED THE INJURY/ILLNESS e.g. custodian went to inspect overflowing sinks and toilets in the restrooms. He/she slipped on wet floors. As he/she fell, he hit his head on the floor and cut head. (USE SEPARATE SHEET IF NECESSARY)			
DID EMPLOYEE GO TO DOCTOR? <input type="checkbox"/> YES <input type="checkbox"/> NO	16. IF YES, NAME AND ADDRESS OF PHYSICIAN/HOSPITAL Kaweah Delta Urgent		36A. PHONE #
SUPERVISOR'S COMMENTS/REQUEST FOR INQUIRY			
1. WERE THERE ANY WITNESSES TO INCIDENT? (Names)		1A. PHONE #	2. DATE DWC-1 GIVEN TO EMPLOYEE (MM/DD/YY)
3. WAS FIRST AID ADEQUATE TREATMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO	4. DID AN UNSAFE CONDITION CONTRIBUTE TO THE INCIDENT? <input type="checkbox"/> YES <input type="checkbox"/> NO	4A. DID AN UNSAFE ACTION CONTRIBUTE TO THE INCIDENT? <input type="checkbox"/> YES <input type="checkbox"/> NO	5. IF YES TO 4 OR 4A, PLEASE EXPLAIN:
6. WHAT CORRECTIVE ACTION HAS BEEN TAKEN TO AVOID SIMILAR INCIDENTS?		7. DOES EMPLOYEE HAVE ANY PRE-EXISTING INJURIES OR CONDITIONS? If yes, Explain:	
8. DOES EMPLOYEE HAVE ANY OTHER EMPLOYMENT? (Name & Address of other employer)			
9. COMMENTS			
SIGNATURES REQUIRED			
1. EMPLOYEE SIGNATURE/DATE		2. SUPERVISOR'S SIGNATURE/DATE	
COMPLETE SAME DAY OF INCIDENT		3. PRINT SUPERVISOR'S NAME	

Site Location: Complete Supervisor's Report of Injury, Fax, Followed-Up with Hard Copy to District Office
 District Office: Complete 5020 Report Online -FAX THIS FORM TO BUCKMAN-MITCHELL, INC. (KELLY) (559) 741-437
 MAIL TO KEENAN & ASSOCIATES, P.O. BOX 1538, RANCHO CORDOVA, CA 95741

Any person who makes or causes to be made any knowingly false or fraudulent material statement or material representation for the purpose of obtaining or denying Workers' Compensation benefits or payments is guilty of a felony.

GENERAL SAFETY INSPECTION CHECKLIST

LOCATION: _____ DATE: _____

DEPARTMENT: _____ INSPECTOR: _____

<u>N/A</u>	<u>S</u>	<u>FIRE PROTECTION</u>	<u>U – COMMENT/LOCATION</u>
<input type="checkbox"/>	<input type="checkbox"/>	Fire extinguishers properly located/installed	_____
<input type="checkbox"/>	<input type="checkbox"/>	Fire extinguishers clearly identified	_____
<input type="checkbox"/>	<input type="checkbox"/>	Fire extinguishers readily accessible	_____
<input type="checkbox"/>	<input type="checkbox"/>	Fire extinguishers fully charged	_____
<input type="checkbox"/>	<input type="checkbox"/>	Fire extinguishers tagged & current for service & inspection	_____
<input type="checkbox"/>	<input type="checkbox"/>	Fire alarms & alarm stations in proper operating condition	_____
<input type="checkbox"/>	<input type="checkbox"/>	Fire doors not blocked	_____

<u>N/A</u>	<u>S</u>	<u>LIFE SAFETY</u>	<u>U – COMMENT/LOCATION</u>
<input type="checkbox"/>	<input type="checkbox"/>	Number of exits are adequate	_____
<input type="checkbox"/>	<input type="checkbox"/>	Exits are unlocked during hours of operation	_____
<input type="checkbox"/>	<input type="checkbox"/>	Exits are not obstructed	_____
<input type="checkbox"/>	<input type="checkbox"/>	Exit doors & routes are clearly marked	_____
<input type="checkbox"/>	<input type="checkbox"/>	Exit aisles are clear & in good repair	_____
<input type="checkbox"/>	<input type="checkbox"/>	Carpets & rugs are secure	_____
<input type="checkbox"/>	<input type="checkbox"/>	Emergency lighting installed where necessary	_____
<input type="checkbox"/>	<input type="checkbox"/>	Emergency lighting in proper working condition	_____
<input type="checkbox"/>	<input type="checkbox"/>	Exit signs & lights in working order	_____
<input type="checkbox"/>	<input type="checkbox"/>	Emergency Evacuation Plans posted in each building or branch office	_____

S = Satisfactory
 U = Unsatisfactory
 N/A = Not applicable

GENERAL SAFETY INSPECTION CHECKLIST

<u>N/A</u>	<u>S</u>	<u>ELECTRICAL SAFETY</u>	<u>U – COMMENT/LOCATION</u>
<input type="checkbox"/>	<input type="checkbox"/>	Electrical wiring in good condition	_____
<input type="checkbox"/>	<input type="checkbox"/>	Extension cords not used for permanent wiring	_____
<input type="checkbox"/>	<input type="checkbox"/>	Circuit breaker panels clearly marked with voltage and “caution” warnings	_____
<input type="checkbox"/>	<input type="checkbox"/>	Machines & equipment properly grounded	_____
<input type="checkbox"/>	<input type="checkbox"/>	Breaker panels & control box covers closed	_____
<input type="checkbox"/>	<input type="checkbox"/>	Plugs & electrical outlets in good condition	_____
<input type="checkbox"/>	<input type="checkbox"/>	Circuits not overloaded	_____
<input type="checkbox"/>	<input type="checkbox"/>	Electrical wires not run under carpets	_____
<input type="checkbox"/>	<input type="checkbox"/>	No storage in front of electrical switch panels	_____
<u>N/A</u>	<u>S</u>	<u>MEDICAL/FIRST AID</u>	<u>U – COMMENT/LOCATION</u>
<input type="checkbox"/>	<input type="checkbox"/>	Medical facilities phone numbers clearly posted	_____
<input type="checkbox"/>	<input type="checkbox"/>	First aid supplies readily available	_____
<input type="checkbox"/>	<input type="checkbox"/>	First aid supplies kept replenished	_____
<u>N/A</u>	<u>S</u>	<u>HOUSEKEEPING/COMMON HAZARDS</u>	<u>U – COMMENT/LOCATION</u>
<input type="checkbox"/>	<input type="checkbox"/>	Work area is clean & orderly	_____
<input type="checkbox"/>	<input type="checkbox"/>	Excess paper & trash removed	_____
<input type="checkbox"/>	<input type="checkbox"/>	Floors are clean & dry	_____
<input type="checkbox"/>	<input type="checkbox"/>	Carpets & rugs are secure	_____
<input type="checkbox"/>	<input type="checkbox"/>	Carpets are free of large tears & holes	_____
<input type="checkbox"/>	<input type="checkbox"/>	Floors are free from protrusions, holes, & loose boards or tiles	_____
<input type="checkbox"/>	<input type="checkbox"/>	Aisles & passageways clear and in good repair	_____
<input type="checkbox"/>	<input type="checkbox"/>	Stairways are clear & in good repair	_____
<input type="checkbox"/>	<input type="checkbox"/>	Handrails are installed on all stairways having more than 3 steps	_____
<input type="checkbox"/>	<input type="checkbox"/>	Handrails are secure & in good repair	_____
<input type="checkbox"/>	<input type="checkbox"/>	Ramps have non-slip surface	_____
S	=	Satisfactory	
U	=	Unsatisfactory	
N/A	=	Not applicable	

GENERAL SAFETY INSPECTION CHECKLIST

<u>N/A</u>	<u>S</u>	<u>OFFICE SAFETY CHECKLIST</u>	<u>U – COMMENT/LOCATION</u>
<input type="checkbox"/>	<input type="checkbox"/>	Bookshelves are not overloaded	_____
<input type="checkbox"/>	<input type="checkbox"/>	Heavy storage shelves secured	_____
<input type="checkbox"/>	<input type="checkbox"/>	File cabinets are secured	_____
<input type="checkbox"/>	<input type="checkbox"/>	File cabinet drawers do not open into high traffic areas	_____
<input type="checkbox"/>	<input type="checkbox"/>	Large, heavy file cabinets are secured to prevent tip over when the top drawers are opened	_____
<input type="checkbox"/>	<input type="checkbox"/>	Free space is left in file drawers to allow ease of removing or replacing files	_____
<input type="checkbox"/>	<input type="checkbox"/>	File drawers are kept closed	_____
<input type="checkbox"/>	<input type="checkbox"/>	Only one file drawer open at one time	_____
<input type="checkbox"/>	<input type="checkbox"/>	Adequate trash containers are available & emptied regularly	_____
<input type="checkbox"/>	<input type="checkbox"/>	Traffic areas are clear of all wiring	_____
<input type="checkbox"/>	<input type="checkbox"/>	All electrical equipment & appliances are properly grounded	_____
<input type="checkbox"/>	<input type="checkbox"/>	Paper cutter blade guards are installed	_____
<input type="checkbox"/>	<input type="checkbox"/>	Paper cutter blades are kept down	_____
<input type="checkbox"/>	<input type="checkbox"/>	Paper cutter blade springs in good condition	_____

<u>N/A</u>	<u>S</u>	<u>SUPPLY/COPY ROOM SAFETY CHECKLIST</u>	<u>U – COMMENT/LOCATION</u>
<input type="checkbox"/>	<input type="checkbox"/>	Aisles have adequate clearance to assure safe movement & handling of materials	_____
<input type="checkbox"/>	<input type="checkbox"/>	Tiered materials are stacked in a manner to assure stability	_____
<input type="checkbox"/>	<input type="checkbox"/>	Storage racks are secured	_____
<input type="checkbox"/>	<input type="checkbox"/>	Materials are protected from falling during an earthquake	_____
<input type="checkbox"/>	<input type="checkbox"/>	NO SMOKING signs are clearly posted	_____

<u>N/A</u>	<u>S</u>	<u>OTHER ITEMS</u>	<u>U – COMMENT/LOCATION</u>
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

COMMENTS: _____

Alta Vista Classroom Safety Inspection Checklist

Check all boxes. If not OK – mark current date and write details on back.

Date of Inspection:

	Fire Extinguisher Condition	Fire Extinguisher Access	Switches and Outlets Access	Extension Cords	Chemicals	Decorative Material	Cabinet top Storage and bookshelves	Air flow HVAC restrictions	Evacuation Map Williams Act Posters	Access to Electric Panels and gas valves	Doorways and Windows	Other
Utility												
FSC												
Kitchen												
Cafeteria												
Lounge												
Office												
Library												
1												
2												
3												
5												
6												
7												
8												
9												
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11												
12												
15												
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17												
18												
19												
20												
21												
22												
31												
M1												
M2												
M3												
M4												
M5												
M6												
M7												
CHOICES/Resource 23												
Conference Center												
Stage												
Preschool												

EMPLOYEE SAFETY TRAINING ATTENDANCE

DATE: _____ LOCATION: _____

SUBJECT: _____

INSTRUCTOR: _____

EMPLOYEE NAME

EMPLOYEE SIGNATURE

DEPARTMENT

[illegible]

REVIEWED BY:

SITE ADMINISTRATOR

DATE _____

**CC: DEPARTMENT MANAGER
ADMINISTRATIVE SERVICES/HUMAN RESOURCES**

NOTE: Each Site Supervisor is to retain a copy of all training records involving his/her personnel.

HAZARD CORRECTION FORM

This form should be used in conjunction with the "General Safety Inspection Checklist" as appropriate to track the correction of identified hazards.

All hazards should be corrected as soon as possible, based on the severity of the hazard. If a serious imminent hazard cannot be immediately corrected, evacuate personnel from the area and restrict access until the hazard can be addressed.

INSPECTION CONDUCTED BY

NAME: _____ **PHONE:** _____

ADMINISTRATOR/DESIGNEE

SIGNATURE: _____ **DATE:** _____

Description and Location of Unsafe Condition	Date Discovered	Required Action and Responsible Party	Completion Date	
			Projected	Actual

ALTA VISTA ELEMENTARY SCHOOL DISTRICT INJURY AND ILLNESS PREVENTION PROGRAM COVID-19 ADDENDUM

Purpose

California employers are required to establish and implement an Injury and Illness Prevention Program (IIPP) to protect employees from all worksite hazards, including infectious diseases.

Cal/OSHA's regulations require protection for workers exposed to airborne infectious diseases such as the 2019 novel coronavirus disease (COVID-19). This interim guidance provides employers and workers with information for preventing exposure to the coronavirus (SARS-CoV-2), the virus that causes COVID-19. Employers and employees should review their own health and safety procedures as well as the recommendations and standards detailed below to ensure workers are protected.

It is the policy of the Alta Vista Elementary School District to ensure a safe and healthy environment for employees, staff, and students. Communicable and infectious diseases such as COVID-19 are minimized by providing prevention, education, identification through examination, surveillance, immunization, treatment and follow-up, isolation, and reporting.

Due to the widespread of COVID-19 in the community, the Alta Vista Elementary School District has implemented the following infection control measures, including applicable and relevant recommendations from the Centers for Disease Control and Prevention (CDC) and our state and local guidelines.

Introduction

What is COVID-19?

On February 11, 2020, the World Health Organization announced an official name for the disease that is causing the 2019 novel coronavirus outbreak first identified in Wuhan, China. The new name of this disease is Coronavirus Disease 2019, abbreviated as COVID-19. In COVID-19, 'CO' stands for 'corona,' 'VI' for 'virus,' and 'D' for disease. Formerly, this disease was referred to as "2019 novel coronavirus" or "2019-nCoV". There are many types of human coronaviruses including some that commonly cause mild upper-respiratory tract illnesses. COVID-19 is a new disease caused by a new coronavirus that has not previously been seen in humans. There is currently no vaccine to prevent COVID-19.

What are the Symptoms of COVID-19?

Symptoms may appear 2-14 days after exposure to the virus. People with these symptoms may have COVID-19:

- Cough
- Shortness of breath or difficulty breathing
- Fever
- Chills
- Muscle pain
- Sore throat
- New loss of taste or smell

Procedures to Help Prevent the Spread of COVID-19

Protect Yourself

Older adults and people who have severe underlying medical conditions like heart or lung disease or diabetes seem to be at higher risk for developing serious complications from COVID-19 illness.

How Does It Spread?

The best way to prevent illness is to avoid being exposed to this virus.

- The virus is thought to spread mainly from person-to-person.
- Between people who are in close contact with one another (within about 6 feet).
- Through respiratory droplets produced when an infected person coughs, sneezes, or talks.
- Through respiratory droplets that can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.

Some recent studies have suggested that COVID-19 may be spread by people who are not showing symptoms.

Germs can spread from other people or surfaces when:

- Touching eyes, nose, and mouth with unwashed hands.
- Prepare or eat food and drinks with unwashed hands.
- Touch a contaminated surface or objects.
- Blowing nose, coughing, or sneezing into hands and then touching other people's hands or common objects.

Hand Hygiene

To prevent the spread of respiratory infections from one person to the next, frequent hand washing is recommended.

Hand hygiene procedures include the use of alcohol-based hand rubs and hand washing with soap and water. Washing hands with soap and water is one of the most effective ways to prevent the spread of germs. If soap and water are not readily available, use an alcohol-based hand sanitizer (containing at least 60% ethanol alcohol).

Properly hand wash with soap and water by:

- Wet hands first with water.
- Apply soap to hands.
- Rub hands vigorously for at least 20 seconds, covering all surfaces of hands and fingers.
- Rinse hands with water and dry thoroughly with paper towel.
- Use paper towel to turn off water faucet.

Alcohol-based hand rub is an ideal method for decontaminating hands, except when hands are visibly soiled (e.g., dirt, blood, body fluids), and may not remove harmful chemicals from hands like pesticides and heavy metals, in which case soap and water should be used. Hand hygiene stations should be strategically placed to ensure easy access.

Using Alcohol-based Hand Rub (follow manufacturer's directions):

- Dispense the recommended volume of product.
- Apply product to the palm of one hand, and
- Rub hands together, covering all surfaces of hands and fingers until they are dry (no rinsing is required). This should take around 20 seconds.

Hand washing facilities will be maintained to provide adequate supply of hand washing soap and paper towels.

Coughing and Sneezing Etiquette

Covering coughs and sneezes and keeping hands clean can help prevent the spread of serious respiratory illnesses.

To help stop the spread of germs:

- Cover mouth and nose with a tissue when coughing or sneezing.
- Throw used tissues in the trash.
- If a tissue is not available, cough or sneeze into the elbow – not in hands.
- Immediately wash hands with soap and water for at least 20 seconds. If soap and water are not readily available, clean hands with a hand sanitizer that contains at least 60% ethanol alcohol.

Avoid Close Contact – Distancing

Physical distancing is an effective method that can help stop or slow the spread of an infectious disease by limiting the contact between people. For COVID-19, the recommended distance is at least 6 feet. To help prevent the spread of respiratory disease, employees should avoid close contact with people outside their household or those who are sick within their household.

Each site will have a plan in place to ensure social distancing at their location. The plan will include, but is not limited to the following:

- Implementing flexible work hours by rotating or staggering shifts to limit the number of employees on site at the same time.
- Increasing physical space between employees by modifying the workspace.
- Avoiding shared workspaces (desks, offices, and cubicles) and work items (phones, computers, other work tools, and equipment) when possible. If they must be shared, following the Cleaning and Disinfecting the Building and Facility Guidelines to clean and disinfect shared workspaces and work items before and after use.
- Increasing physical space between employees and public by offering drive-through service or physical barriers such as partitions.
- Using signs, tape marks, or other visual cues on the floor, placed 6 feet apart, to indicate where to stand when physical barriers are not possible.
- Close or limit access to common areas where employees are likely to congregate and interact.
- Delivering services and holding meetings remotely by phone, video, or Internet.
- Limiting any unnecessary travel with passenger(s) from one site to another in work vehicles and personal employee vehicles.
- Eliminating all non-essential and non-related services, such as entertainment activities.
- Using videoconferencing or teleconferencing when possible for work-related meetings and gatherings.
- Canceling, adjusting, or postponing large work-related meetings or gatherings that can only occur in-person in accordance with state and local regulations and guidance.
- When videoconferencing or teleconferencing is not possible, holding meetings in open, well-ventilated spaces continuing to maintain a distance of 6 feet apart and wear cloth face coverings.

Employees will also be asked to practice social distancing outdoors including, but not limited to the following:

- When working in sports fields, playgrounds, assembly areas, and/or other outdoor areas.
- Before starting the work shift.
- After the work shift.
- Coming and going from vehicles.
- Entering, working, and exiting physical buildings or other structures.
- During breaks and lunch periods.

Cloth Face Coverings

Unless otherwise directed by your supervisor, all employees should cover their mouth and nose with a cloth face cover when around others and follow any state, county, or local mandates/ guidelines.

- You could spread COVID-19 to others even if you do not feel sick.
- Everyone should wear a [cloth face cover](#).
 - Cloth face coverings should not be placed on anyone who has trouble breathing or is unconscious, incapacitated, or otherwise unable to remove the mask without assistance.
- The cloth face cover is meant to protect other people in case you are infected.
- Do NOT use a face mask meant for a healthcare worker.

Continue to keep at least 6 feet between yourself and others. The cloth face cover is not considered personal protective equipment. It is not a substitute for social distancing but when used in conjunction, it may help prevent infected persons without symptoms from unknowingly spreading the disease.

If an Employee is Sick

Employees will be asked to monitor their health each day and are asked to notify their supervisor before their scheduled shift and prior to arriving at the site, if they have been exposed to someone with COVID-19 or they have a temperature of 100.4 or more, tiredness, chills, shortness of breath, difficulty breathing, nausea, vomiting, diarrhea, sore throat, loss of taste or smell, cough, or muscle pain.

If an employee is not feeling well and is exhibiting symptoms that may be attributed to COVID-19, such as acute respiratory symptoms or a fever, the Alta Vista Elementary School District will:

- Immediately send employees with acute respiratory illness symptoms home or to medical care as soon as possible.
- Actively encourage sick employees to stay home.
- If an employee goes home because they are sick, follow the cleaning and disinfecting the building and facility guidelines to disinfect the area/room/office where the person worked, the tools and equipment they used prior to use by others.
- Employees who are well but who have a sick family member at home with COVID-19 should notify their supervisor and follow CDC-recommended precautions (Quarantine for fourteen (14) days following exposure to COVID-19 or Negative COVID-19 test).
- Ensure employees who are out sick with fever or acute respiratory symptoms do not return to work until all of the following occur:
 - At least twenty-four (24) hours with no fever (without the use of fever-reducing medication: Tylenol, Advil) and much improvement in respiratory symptoms.
 - If the employee is out longer than three (3) work days, a note from the Medical doctor clearing him/her to return to work is required.
 - Encourage employees to seek COVID-19 testing to rule out COVID-19 and safely return to school.
- Ensure employees who return to work following an illness promptly report any recurrence of symptoms.

Personal Protective Equipment

While engineering and administrative controls are considered more effective in minimizing exposure to COVID-19, PPE may also be needed to prevent certain exposures. While correctly using PPE can help prevent some exposures, it should not take the place of other prevention strategies. Examples of PPE include: gloves, goggles, face shields, face masks, and respiratory protection, when appropriate. During an outbreak of an infectious disease, such as COVID-19, recommendations for PPE specific to occupations or job tasks may change depending on geographic location, updated risk assessments for workers, and information on PPE effectiveness in preventing the spread of COVID-19.

The District will conduct a hazard assessment to determine if hazards are present in the workplace that necessitate the use of PPE. If the District identifies COVID-19 as a workplace hazard, it will select and provide exposed employees with properly fitting PPE that will effectively protect employees. The District will stress hand hygiene before and after handling all PPE.

Washing Facilities

Notify your supervisor if any washing facilities do not have an adequate supply of suitable cleansing agents, water, and single-use towels or blowers.

Cleaning and Disinfecting

The Alta Vista Elementary School District will establish routine schedules to clean and disinfect common surfaces and objects in the workplace. This includes, but is not limited to, classroom technology devices, containers, counters, tables, desks, chairs, benches, door handles, knobs, drinking fountains, refrigerators, vending machines, restroom and bathroom surfaces, and trash cans.

The process of disinfecting includes providing disinfecting products that are EPA approved for use against the virus that causes COVID-19 and following the manufacturer's instructions for all cleaning and disinfection products (e.g., safety requirements, PPE, concentration, contact time).

Coronaviruses on surfaces and objects naturally die within hours to days. Warmer temperatures and exposure to sunlight will reduce the time the virus survives on surfaces and objects. Normal routine cleaning with soap and water removes germs and dirt from surfaces. It lowers the risk of spreading COVID-19 infection.

Disinfectants kill germs on surfaces after cleaning, that can further lower the risk of spreading infection. Employees will need to follow the District's approved disinfecting products and procedures when using disinfectants. Disinfecting procedures include:

- Some surfaces only need to be cleaned with soap and water. For example, surfaces and objects that are not frequently touched should be cleaned and do not require additional disinfection.
- Clean and disinfect frequently touched surfaces daily and shared workspaces and work items before and after use.
- Store and use disinfectants in a responsible and appropriate manner according to the label.
- Keep all disinfectants out of the reach of children. Disinfectants should typically not be applied on items used by children, especially any items that children might put in their mouths. Many disinfectants are toxic when swallowed.
- Do not overuse or stockpile disinfectants or other supplies.

- Always wear gloves appropriate for the chemicals being used when you are cleaning and disinfecting. Additional personal protective equipment (PPE) may be needed based on setting and product.
- Areas unoccupied for 7 or more days need only routine cleaning.
- Outdoor areas generally require normal routine cleaning and do not require disinfection.

Electronics

For electronics, such as tablets, touch screens, keyboards, remote controls, and ATM machines:

- Consider putting a wipeable cover on electronics.
- Follow manufacturer's instructions for cleaning and disinfecting.
- If no guidance, use alcohol-based wipes or sprays containing at least 70% alcohol. Dry surface thoroughly.

Cleaning and Disinfecting Building or Facility if Someone is Sick:

- Close off areas used by the sick person.
- Open outside doors and windows to increase air circulation in the area.
 - Wait 24 hours before you clean or disinfect.
 - If 24 hours is not feasible, wait as long as possible.
- Clean and disinfect all areas used by the sick person, such as offices, bathrooms, common areas, shared electronic equipment like tablets, touch screens, keyboards, and remote controls.
- Always wash immediately after removing gloves and after contact with a sick person.
- If more than 7 days since the sick person visited or used the facility, additional cleaning and disinfection is not necessary.
- Continue routine cleaning and disinfection

Employee Training

The Alta Vista Elementary School District will provide regular training for employees on the following topics:

- What is COVID-19 and how is it spread.
- Signs and symptoms of COVID-19.
- When to seek medical attention if not feeling well.
- Prevention of the spread of COVID-19 if you are sick.
- Physical and social distancing guidelines.
- Importance of washing hands with soap and water or use of hand sanitizer if soap and water are not readily available.
- Reminders and methods to avoid touching eyes, nose, and mouth.
- Coughing and sneezing etiquette.
- Safely using cleansers and disinfectants.

Compliance

This addendum will be reviewed regularly and according to federal, state, and local requirements. These guidelines and written addendum are subject to change as information is received and the situation evolves.