University and College Insurance Consortium

ACCIDENT AND ILLNESS PREVENTION PROGRAM MANUAL

Muhlenberg College

Modified as of: 3/27/2012

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Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Policy Title:	**Safety Policy Statement (Accident and Illness Prevention)**	**Policy No. 1**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 2**
Statement:		

It is the mission of the Board of Trustees of the University & College Insurance Consortium to provide an active Accident and Illness Prevention Program, to promote and to provide at all times a safe and healthy environment for all Consortium member employees, students, and the general public.

Purpose:

(1) The University and College Insurance Consortium's (UCIC) Accident and Illness Prevention Program is dedicated to the reduction of occupational injury and disease**. Muhlenberg College,** as a member of the UCIC shall take every reasonable action to promote continuous safety awareness as an appropriate mode of behavior to minimize accidents and occupational injuries at all times. The Safety Program Policy Statement serves as the foundation for all program activities.

- **Muhlenberg College,** as a member of UCIC, recognizes that safety functions must be effectively managed to obtain the desired results.
- **Muhlenberg College**, as a member of UCIC, recognizes that all members share responsibility for occupational safety and injury prevention.

A Safety Committee has been implemented to facilitate the ongoing achievement of these objectives. **Muhlenberg College** recognizes that the responsibility for occupational safety and injury prevention are shared, and affirmatively aligned with **Muhlenberg College**'s overall accountability plan. **This is an inclusive process that involves all member schools of the University and College Insurance Consortium and their employees**. The scope of the UCIC Accident and Illness Prevention Program committee(s) shall include, but not be limited to:

- Implementation of any/all safety program(s) in compliance with applicable state and federal laws and/or mandates.

- **Muhlenberg College** Accident and Injury Prevention activities will involve representatives of all employee groups within **Muhlenberg College**

- College will publish the Accident and Illness Prevention Manual in such a manner that it is accessible for all employees.

- Safety Committee will continually review Accident and Illness Prevention program

- Review appropriate procedures and recommend changes and improvements as necessary.

- Review Accident Investigation/Incident Analysis and Reports of Occupational Injury with Human Resources Department, on an as-needed basis, and make recommendations for accident prevention.

Policy:

(1) **The Safety Committee is** responsible for the foundation and leadership of the Accident and Illness Prevention Program; for its effectiveness, growth and development as an integral part of the **Muhlenberg College** as a member of UCIC; and for providing the support required to ensure safe working conditions.
(2) Administrators and supervisors at **Muhlenberg College** are responsible for developing proper attitudes toward safety awareness and accident prevention in both them and in those they supervise, to ensure that all work activities are performed with the utmost regard for the safety and health of all personnel involved.
(3) **Muhlenberg College** employees are responsible for dedicated cooperation with all aspects of the Safety and Accident and Illness Prevention Program, compliance with all safety protocols and regulations, and continuously practice safe work behaviors during the performance of their assigned duties.
(4) Semi-annual reports including minutes, may be requested by the UCIC Board of Trustees, regarding the status of the **Muhlenberg College**'s safety program.
(5) UCIC Third Party Vendors shall be utilized as a service provider for the implementation of the above stated Mission and Purpose and will provide quarterly reports regarding the program status.
(6) UCIC expects each member and its individual employees to actively support and personally use safe work practices and to follow good accident prevention methods.

The success of the **Muhlenberg College**'s Accident and Injury Prevention Program depends on the commitment and cooperative effort of the entire organization. **Muhlenberg College** expects each individual employee to actively support and personally practice accident prevention.

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Policy Title:	**Safety Committee & Assignment of A&IP Program Responsibilities**	**Policy No. 2 & Policy No. 3, part 1**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 5**
Definition:		

Policy:
Like other **Muhlenberg College** management functions, safety must be effectively managed to obtain the desired results. Necessary planning, organizing, leading and controlling are required management actions. Since no one person can get the job done alone, this section outlines safety responsibilities.

Safety Committee Responsibilities

The Safety Committee has the duty to recognize and address issues relative to maintaining safe and healthful working conditions whether it is on the campus, out in the field, in the shop or in the office. Although personnel exposure to hazards varies widely from location to location, it is expected that an unrelenting effort will be directed toward controlling injuries, collisions, liabilities and waste of material. Therefore, the Safety Committee will:

1. Provide the positive direction essential in maintaining firm loss prevention policies as a prime consideration in all operations.
2. Call upon the Consortium's Manager of Safety & Loss Control for any assistance needed in promoting aggressive and effective loss control.
3. Consult with the Human Resources Department and provide assistance, when necessary, regarding preventable injuries, collisions and liabilities incurred by employees.
4. Continually monitor College activities to ensure proper implementation of AIPP.

Department Head's/Supervisor's Responsibilities

The Department Head and/or Supervisor will ensure that:

1. All personnel are briefed and fully understand safe work procedures and existing policies that enforce their use.
2. All employees, new and old are trained and retrained, when necessary, in the accepted way each hazardous job must be accomplished.

3. All employees are instructed in the use and need for protective equipment for specified hazardous jobs.
4. Necessary safety equipment and protective devices for each job are available, used and used properly.
5. Departmental meetings are conducted, whenever deemed necessary, to review accidents, analyze their causes and promote free discussion of hazardous work problems and possible solutions.
6. Employees under their direction are encouraged to provide safety suggestions and comments.
7. All lost-time or major medical incidents as well as any major near misses are thoroughly investigated, recorded and promptly reported to the Human Resources Office.
8. Prompt corrective action is taken wherever hazards are recognized or unsafe acts are observed.
9. The Safety Committee is consulted when assistance is needed in reviewing operations and implementing safety protocols.
10. All injured persons, regardless of how minor the injury, receive prompt medical treatment; the incident is promptly reported per the workers' compensation guidelines; circumstances causing injury are investigated and required accident reports are submitted and acted upon.
11. Employees have access to and are cognizant of where to access safety policies and procedures.
12. On the job training records along with established safety training records are to be maintained.
13. Ensure that tools and equipment are maintained in a safe and serviceable condition.
14. Ensure that untrained employees are permitted to operate any mechanical or electrical equipment under potentially hazardous conditions.
15. Instruct all employees regarding the need for prompt reporting of all accidents and the necessity for injured persons to receive basic first aid immediately.
16. Ensure that all employees are physically qualified to perform their assigned work.
17. Ensure that appropriate signage is displayed at all potentially hazardous areas.
18. Ensure that only qualified persons are permitted to enter hazardous work areas.

Employee Responsibilities

Employees are required, to exercise due care in the course of their work to prevent injuries to themselves and to their fellow workers and to conserve materials.

Each employee will:

1. Promptly report all unsafe conditions and acts to his / her supervisor.
2. Strive to keep himself/herself and fellow employees and equipment free from mishaps.
3. Keep work areas clean and orderly at all times.
4. Follow prescribed procedures during an emergency.
5. Report all accidents promptly to his /her supervisor, and follow the College's accident reporting procedure.
6. Be certain that he /she understand instructions completely before starting work.
7. Learn to lift and handle materials properly.
8. Learn and utilize proper ergonomic measures.
9. Avoid engaging in any horseplay and avoid distracting others.

10. Review the safety educational material posted on bulletin boards, web site or work areas.
11. Know how and where needed medical help may be obtained.
12. Not alter damage or destroy any warning or safety device or interfere in any way with another employee's use of them.

Each employee working at hazardous jobs will:

1. Obey all safety rules and follow published work instructions. If any doubt exists about the safety of doing a job, he / she will STOP and promptly get instructions from his supervisor before continuing work.
2. Operate only machine equipment that they have been trained for and authorized to operate by their supervisor.
3. Use only the prescribed equipment for the job and handle it properly.
4. Wear required personal protective equipment (PPE) when working in hazardous operation areas. Dress safely and sensibly.

Safety Committee Chair Responsibilities (And/or with Assistance from Risk Control Consultant)

Briefly, the Chair's Responsibilities are as follows:

1. Assist in the administration of the self-insurance programs.
2. Participate in the development, implementation and maintenance of comprehensive Consortium workplace safety and loss prevention program.
3. Provide guidance for the Safety Committee in implementing programs and updating Muhlenberg College safety procedures and manuals.
4. Coordination of Safety Committee activities.
5. Work with Safety Committee and Consortium's Manager of Safety & Loss Control to assist College Departments in organizing and securing certain safety training.
6. Facilitation of consultative processes regarding occupational health and safety issues between employees and the administration.
7. Provide leadership to Safety Committee in its quest to encourage the incorporation of safety practices and risk management techniques to reduce the frequency and severity of losses.
8. Provides assistance in the review of related insurance plans and programs, as assigned.
9. Serves as liaison between Muhlenberg College and governmental, community, and private sector safety agencies.

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Policy Title:	**Development-Implementation-Program Evaluation Methods**	**Policy No. 3, part 2**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 2**
Definition:		

Policy:

Reports of employee injuries and accidents are distributed to the Chair of the Safety Committee, Risk Manager, and the Human Resources Department. These reports are used to evaluate the overall effectiveness of the **Muhlenberg College**'s safety and health program, also referred to as the Accident & Illness Prevention Program.

Other methods that may be used to measure the effectiveness of our safety and health program include:

- Contracted Safety Consultation Services
- Employee Safety Suggestions
- Education/Training
- Safety Committee Review of Safety Policies and Procedures

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Additional Reference	**OSHA 1910.1-.18**	
Policy Title:	**Program Goals & Objectives**	**Policy No. 4**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 1**
Definition:		

Policy:

Muhlenberg College will develop annual safety and health program goals as agreed upon by the Safety Committee. These goals can either be results oriented, activity oriented or a combination of both. The goals should be attainable, measurable and managed effectively.

Goals need to be effectively communicated to those who will have input into attaining them.

Results also need to be shared with all appropriate parties so that any deficiencies can be identified and corrected.

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Additional Reference	**OSHA 1910.94; 1910.141-.145**	
Policy Title:	**Employee Involvement Methods & Safety Committee**	**Policy No. 5**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 4**
Definition:		

Policy:

Safety Committees are a key component of **Muhlenberg College's** overall efforts to maintain a safe and healthy workplace. The Safety Committee will focus on identifying workplace hazards and making suggestions for change or improvement.

Actions Required:

(1) Many factors can contribute to the success of the Safety Committee. Listed below are those that should be incorporated into the committee.

- The purpose, objectives and goals of the committee should be clearly defined.
- There should be a commitment between all involved to achieve accident prevention.
- Mutual trust, support and respect needs to be established.
- Establish effective communications.
- Establish an effective problem solving system.
- Establish a conflict resolution system, which is non-adversarial.
- Involve all member resources in the decision making process.

(2) The Safety Committee, at a minimum, should:

- Be composed of an equal number of administrative and labor representatives unless each side agrees differently.
- All committee decisions should be made by majority vote.
- The Committee should meet monthly. (Certified safety committees must meet once per month.) A written agenda should be prepared for each committee meeting.

    - Minutes should be taken, posted and maintained for each committee meeting.
    - Promote safety and health activities.
    - Monitor compliance activities.
    - Review all lost time accidents for causes and remedial steps.
    - Recognize outstanding safety and health performances.
    - Conduct periodic self-audits to determine committee effectiveness.

- Conduct periodic self-inspections of the campus.

(3) Sub-committees: Temporary

Temporary sub-committees may be appointed by the chairperson or by a majority vote of the members of the Safety Committee. The sub-committee(s) will meet monthly until the next safety committee's meeting at which time they shall furnish a written report to the committee. Any extension of a sub-committee appointment must be approved at each subsequent safety committee meeting.

(4) Sub-committees: Permanent

Permanent sub-committees may be authorized by a majority vote of the Safety Committee. If assistance is required, consult with the UCIC.

Documentation Required:

The following documentation must be maintained at each facility and made available for review upon request.

- Safety Committee meeting agendas for the past year.
- Safety Committee meeting minutes for the past year.
- Copies of self-audits.
- Copies of committee inspection reports.
- Copies of correspondence between the committee and the Administration in regard to committee suggestions for improvement.

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Policy Title:	**Employee Safety Suggestion Program**	**Policy No. 6**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 4**
Definition:		

This policy provides a means for all employees to forward workplace safety and health suggestions for improvement to **Muhlenberg College**'s administration for action.

Policy:

Muhlenberg College's employees have the opportunity to participate in the safety and health program through the Safety Suggestion Program. A copy should be forwarded to the Safety Committee. The Safety Committee shall be responsible for the implementation of this policy.

Responsibilities and Accountabilities:

The Safety Committee will regularly promote the Employee Suggestion Program and develop a response to all suggestions received via the program.

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Policy Title:	**Accident Investigation & Reporting & Recordkeeping**	**Policy No. 7**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 8**
Definition:		

When a work-related accident occurs, it is **Muhlenberg College**'s policy that the Employment and Benefits Manager, in conjunction with the applicable Supervisor or Department Head, conduct an accident investigation. This may also be referred to as an "Incident Analysis". Incident analysis is the newer terminology for accident investigation. The main purpose of an accident investigation is to collect facts. Based on the information collected, the investigators should draw conclusions to identify the causes of accidents and provide corrective action to prevent future accidents. The attachment displays **Muhlenberg College**'s Accident Investigation Form.

Policy:

Fact-finding:

It cannot be stressed enough that at **Muhlenberg College** accident investigation is the process of fact-finding and not fault-finding. The Employment and Benefits Manager, or designated person(s), shall be responsible for the implementation of this policy. Avoid general statements such as "employee was careless" or "employee should be more careful". These types of statements do not help prevent accidents and may be offensive and unfair to an injured employee. These terms lack definition and will not give much insight on how to prevent future accidents.

Reporting vs. Investigating:

There is a difference between simply reporting accidents and investigating accidents. To report an accident, one must collect information such as the injured employee's name, date and time of injury, department, the employee's address, social security number, and date of birth. All accidents should be reported promptly to the work comp claims administrator. To investigate an accident, the investigator must obtain more detailed information, including a description of the accident and its potential causes, and analyze all causes contributing to the accident. In other words, an accident investigation should answer the following questions: WHO, WHAT, WHERE, WHEN, WHY AND HOW.

Supervisor forms are available online. Supervisors should complete these forms and keep a copy for their records. Saving a copy may serve as a way to alert supervisor of a repeat offender or a potential safety problem. A link to the associated forms is as follows: http://www.muhlenberg.edu/mgt/humanres/WorkersCompPage.htm

Causal Factors:

To find out why and how an accident may have occurred, one should consider the task being performed, the equipment used, the surrounding environment, experience of the employee, and management policies that exist. Focusing on these areas helps investigators to resist the temptation to place blame on an injured employee.

Task performed at time of accident:

- Ergonomics Controls in place (or not in place)
- Safe Work Procedures in place (or not in place)
- Condition Changes
- Tools/Materials Used
- Safety Devices used (or needed)

Material and Equipment:

- Presence of and Equipment Failure
- Machinery Design Flaws
- Hazardous Substances
- Substandard Material

Environment:

- Weather Conditions/Temperature
- Housekeeping
- Noise Levels
- Lighting
- Air Contaminants Present
- Personal Protective Equipment Provided/in Use

Human Factors:

- Level of Experience
- Level of Training
- Length of Work Shift

Management Policies:

- Safety Policies in place (or not in place)
- Enforcement of Safety Policies (adequate or inadequate)
- Supervision (adequate or inadequate)
- Knowledge of Hazards

If deemed necessary, investigation reports should include photographs, sketches or other information to help clarify the circumstances of the accident. Reports should also contain statements from witnesses and detailed descriptions of how the accident occurred.

Plan of Action:

The final step in an accident investigation is developing a plan of action. This section should

contain the investigator's recommendations to management and the Safety Committee on how the accident could have been prevented. The Chairs of the Safety Committee, Risk Manager, Environmental Specialist and/or Safety Committee should be consulted when making these determinations.

About 95% of accidents are preventable, so there should almost always be a plan of action written. Sometimes a corrective plan of action requires some thought by the investigator and may not be obvious. When recommending corrective action, resist the temptation to generalize. For assistance, contact the Chair of the Safety Committee, Risk Manager, the Environmental Specialist and/or the Safety Committee.

Accident Reporting Procedures:

Muhlenberg College's guidelines for promptly reporting accidents must be followed to help employees receive treatment in a timely manner, and also to control Workers' Compensation costs.

Responsibilities:

Employees

- Report accidents to his/her supervisor promptly.
- After accident is reported: Follow procedure of **Muhlenberg College**
- Complete the Employee Accident Report. Unless it is an emergency, contact one of the physicians listed on the posted Panel to schedule an appointment.

Supervisors

- If emergency medical treatment is required call 911 or Campus Safety 3110.
- If not an emergency situation, make sure the employee completes the accident report and signs the appropriate forms. Complete section 2 of the accident report, and call the appropriate posted telephone number. This should be done within 24 hours, or sooner to report the occurrence.
- Instruct the employee of their obligation to treat with a Designated Health Care Provider (Panel Physician) for 90 days.
- If the injury results in medical treatment and/or lost time the supervisor must conduct an accident investigation. (Sometimes, it may take a few days to complete an investigation.)
- If there were any witnesses, attempt to interview or get a written statement.

Workers' Compensation Contact Person

Review all accident reports for completeness and forward a copy to the UCIC Workers' Compensation claims office. Do so promptly! An initial telephone call as soon as possible after the incident to alert the UCIC Claims Office is a preferred step.

Required Postings:

Workers' Compensation Rights and Responsibilities and the **Muhlenberg College**'s Designated Health Care Providers List should be posted in common areas for employee review.

REMEMBER - Prior to conducting an Incident Analysis, proper medical treatment should be given to the injured employee(s).

1. SECURING THE FACTS

a. Look at the Situation
b. Record General Information
c. If relevant, take photos or make a drawing
d. Collect Evidence
    1) Don't throw it away
    2) Put it in a plastic bag
    3) Tag and date it
    4) Lock or tag it out of service
    5) Try not to contaminate it
    6) A subrogation action might be possible,
    keep it until the insurance adjuster OK's its disposal.
        a) Dispose of it properly, so it can't be used again.
e. Interview Witnesses
f. Review Records of Past Claims

2. REVIEW THE FACTS TO FIND THE CAUSE

a. Review all Information
b. Clarify the Facts
c. Analyze Information
d. Examine Contributing Factors
e. List Possible Causes
f. Identify the "Root Cause"

3. TAKE CORRECTIVE MEASURES

- Short Term and Long Term
- Training, Engineering Controls, Personal Protective Equipment (PPE), Guarding Equipment, Installing New Process, New Building, Etc.

4. DOCUMENT FINDINGS AND ACTIONS

a. General Information
b. Description or Incident/Injury
c. Analysis
d. Preventive Corrective Actions
e. Dates for Completion

5. FOLLOW – UP

- Have Corrective Measures Been Implemented?

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Additional Reference	**OSHA 1910.1-.18**	
Policy Title:	**Site Surveys & Hazard Identification Methods**	**Policy No. 8**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 2**
Definition:		

Policy:

The College shall inspect all major academic, general administrative and operations buildings and all dormitories. Inspections will coincide with maintenance visits and visits to test fire detection equipment.

Actions Required:

(1) Each Building should be inspected regularly.

(2) Inspectors should have the following qualifications:
- Access to any data relative to the facilities accident experience
- Familiarity with accident potentials and related safety standards
- Understanding of how to make suggestions for corrective action(s)
- Diplomacy in handling personnel and situations
- Knowledge of facility operations.

(3) Review any available pertinent previous inspections for outstanding items to determine where failures in hazard control may exist

(4) Consider all changes in the working environment to include new facilities, processes, materials and equipment

(5) Whenever possible, speak to the employees in the area to gain their input

(6) Correct anything under your control immediately or take temporary precautions when correction is delayed

(7) Promptly report conditions beyond your authority and suggest solutions

(8) Maintain completed facility inspection reports for at least seven (7) years. Facility inspection reports will be maintained in the office of the Chair of the Safety Committee.

(9) Ensure that the hazards found are reported and assigned for correction. Ensure that a timetable is established.

(10) Follow up to determine items have been corrected.

Documentation Required:

A. Copies of inspection report(s) (copies to be sent to Campus Safety, Housing, and Plant Operations whenever deemed relevant)

B.. Correspondence related to hazard correction

Responsibilities and Accountabilities:

Muhlenberg College believes that safety and health is an integral part of operations, which makes compliance with this policy a responsibility of all departments. Organized accident & illness prevention/safety programs require a teamwork approach. No single department can do the job alone. Our teamwork approach means a proper division of responsibilities with every department doing what is necessary for our policies and procedures to be effective and rewarding.

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Policy Title:	**Analysis of the Causes of Accidents and Illnesses**	**Policy No. 9**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 2**
Definition:		

Policy:

Muhlenberg College's accident and illness trends need to be identified and corrective action taken to address those areas in order to prevent accident history from repeating itself. A review of employee injuries is mandatory. In addition, the Committee may wish to complete a review of non-mandatory items such as Property incidents (fires, windstorms, etc.), Liability (falls, pollution, etc.), Vehicle (auto accidents, mobile equipment accidents, etc.), Crime (building break-ins, assaults on employees/students/others, etc.) and other incidents (government inspections, OSHA, EPA, etc.). The Safety Committee or designated person(s) shall be responsible for the implementation of this policy.

1) Conduct a monthly review of all employee injury incidents, which caused lost-time, medical or record only incidents. Grouping data into department will permit focusing on the area developing adverse loss trends needing attention.

2) Conduct review of non-mandatory items (property, liability, vehicle, crime and other) on an as needed basis.

3) If feasible, conduct comparisons to prior years or prior periods to see if there have been changes.

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Additional Reference	**OSHA 1910.19**	
Policy Title:	**Industrial Hygiene Services**	**Policy No. 10**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 2**
Definition:		

Industrial hygiene is the art and science of anticipation, recognition, evaluation and control of those environmental factors or stresses arising in or from the workplace that may cause sickness, impaired health or significant discomfort among our employees, students or guests.

Policy:

Muhlenberg College will address any industrial hygiene exposure for the protection of employees, students and guests. Occupational health hazards may mean conditions that cause legally compensable illnesses, or it may mean any conditions in the workplace that impair the health of employees enough to make them lose time from work. Both are undesirable and both are preventable. Their correction is an ongoing responsibility of faculty and staff.

Actions Required:

To combat the four primary types of occupational health hazards (chemicals, physical, ergonomic and biological) central procedures will include the following:

1. Substitution of harmful or toxic materials with less dangerous ones.
2. Changing of work processes to eliminate or minimize work exposure.
3. Taking steps to address areas identified as having air quality issues.
4. Good housekeeping.
5. Provision and use of personal protective equipment.

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Additional Reference	**OSHA 1910.94; 1910.141-.145**	
Policy Title:	**Industrial/Occupational Health Services**	**Policy No. 11**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 2**
Definition:		

Policy:

Muhlenberg College will promptly respond to any known or reasonably suspected occupational disease exposure through appropriate testing for accurate measurement. Test results will help dictate the course of action taken that could include engineering control, administrative controls, use of personal protective equipment or an appropriate combination.

Known occupational disease exposures include but are not limited to:

☐ Asbestos ☐ Noise ☐ Radon ☐ Ergonomics ☐ Lead in Drinking Water

☐ Toxic Mold ☐ Indoor Air Quality ☐ Bloodborne Pathogens

Education:

Employees should receive briefing from their Supervisor and/or Department Head as needed in order to recognize and protect themselves from occupational disease related exposures.

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Policy Title:	**Accident & Illness Prevention Program Training**	**Policy No. 12**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 3**
Definition:		

Policy:

The following general subjects and job-specific subjects may be part of each **Muhlenberg College** individual employee's training.

General Subjects:

- Safety and Health Policy
- Employee Suggestions and Communication Procedures
- Emergency Action Plan
- Fire Safety
- Safe Lifting / Back Safety
- Substance Abuse
- How to report a workers' compensation claim, i.e., prompt reporting
- Accident Reporting and Investigation (also known as incident analysis)

Job-Specific Subjects:

- Bloodborne Pathogens
- Hazardous Materials
- Personal Protective Equipment
- Confined Space
- Lockout / Tagout
- Mobile Equipment / Vehicle / Forklift Safety
- Electrical Safety
- Construction Safety
- Hazard Control Measures
- Material Handling
- Excavations
- Machine Guarding
- Hand and Power Tool Safety
- Lab Safety
- All other applicable safe work practices

Actions Required:

1. New Employee Orientation:

Departments are responsible for making sure that new employees and job transfers understand relevant safety policies and practices. Each new employee should be treated as if he or she knows nothing about safety on the job. Also, job transfers should be treated as new employees until they are familiar with the new operations or equipment.

New employee orientation, at minimum should include our safety policy, accident reporting, general safe work practices and your department's safety programs and job-specific safe work procedures. Each supervisor should have a procedure for educating employees in their area. Cross training is recommended if your employees are temporarily transferred to other jobs often.

2. Supervisor Safety Meetings:

Supervisors are encouraged to conduct short safety meetings or "tool box talks" frequently with their employees. These meetings should allow time for employees to voice opinions, talk about recent situations and ask questions. Safety meetings may cover many topics, from fire safety to off-the-job safety. The Chairs of the Safety Committee, the Risk Manager, or the Safety Committee may be contacted to assist in selecting meeting topics.

3. Refreshers:

Refresher training will be necessary on an as needed basis for major safety programs. In this type of training, the main points of a subject, such as lockout/tagout, personal protective equipment, hazardous chemicals, confined space entry, forklift safety, bloodborne pathogens, electrical safety plus any others necessary should be covered.

Documentation Required:

Departments must keep records of all safety and health training conducted. Records must include dates, subjects covered and names/signatures of attendees and be retained for at least (7) seven years.

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Policy Title:	**Consultations Regarding Specific Safety & Health Problems & Hazard Abatement Programs & Techniques**	**Policy No. 13**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 2**
Definition:		

Policy:

Muhlenberg College, in the administration of its accident and illness prevention program, will, as needed, use qualified in-house individuals and/or outside consultants or consultant firms for assistance in certain risk control, loss control or loss prevention activities.

These consultants will provide proof of qualification when requested. These include qualifications in fields such as Occupational Medicine, Industrial Hygienist, Certified Safety Professional, Associate Safety Professional, Bachelor's – Master's – Doctoral Degrees in Safety – Science – Engineering, Occupational Health Nurse, Occupational Health and Safety Technologist, National Safety Council Advanced Safety Certificate, Associate in Loss Control Management, Associate in Risk Management, World Safety Organization Certified, Professional Ergonomist Certified or Qualified by the Commonwealth of PA - Department of Labor and Industry – Bureau of Worker's Compensation – Division of Safety and Health for safety assistance including safety committee training based on one of the above or based on past/prior experience. In addition, Industry – Specific Qualifications will be recognized as meeting this requirement.

The services of these various consultants shall include safety training, safety committee involvement, safety meetings, job site and facility surveys, assistance with accident investigation, claims/loss reviews and additional safety services. In addition assistance in securing audio –visual aids, payroll stuffers, wall posters, booklets, brochures, pamphlets, regulations, standards, sample forms or programs, awards and other safety materials.

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Policy Title:	**Pre-Operational Process Review**	**Policy No. 14**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 1**
Definition:		

Policy:

Any personnel requesting the purchase of new equipment must factor safety requirements and associated specifications into the decision-making process. The Chair of the Safety Committee, Risk Manager, Environmental Specialist, Safety Committee and/or reputable safety or risk control vendor may be consulted in order to help identify applicable safety requirements and equipment specifications. The Administration should consult with the employees who must do the job or use the equipment when making purchases or implementing change.

When new equipment or products are purchased where safety and health issues are involved, the Purchasing Department should consult with the Safety Committee, Consortium's Manager of Safety & Loss Control, Environmental Specialist and/or the Safety Committee to review applicable safety requirements.

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Additional Reference	**29 CFR 1910.212-213**	
Policy Title:	**Electrical and Machine Guarding**	**Policy No. 15-i**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 4**
Definition:		

I. Purpose

To protect employees from injury resulting from unguarded machinery.

II. Applicable Regulation

29 CFR 1910.212-213 Machine Guarding

III. General Requirement

Employees working with machinery or equipment requiring guarding shall observe the following guidelines:

a. Guards shall be affixed to machines in a manner that meets OSHA standards.
b. The guarding shall be designed and constructed to prevent the operator from having any part of his or her body in a danger zone during the operating cycle.
c. Equipment guards shall not be removed,
d. Machines designed for a fixed location shall be securely anchored to prevent "walking" or moving.
e. A mechanical or electrical power control shall be provided on each machine to make it possible for the operator to cut off the power from each machine without leaving his or her position at the point of operation.
f. On applications where injury to the operator might result if motors were to restart after power failures, provision shall be made to prevent machines from automatically restarting upon restoration of power.

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Additional Reference	**OSHA 1910.132-.138**	
Policy Title:	**Personal Protective Equipment (PPE)**	**Policy No. 15-ii**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 3**
Definition:		

Policy

Personal protective equipment including those for eyes, ears, face, head, and extremities, protective clothing, respiratory devices, protective shields and barriers shall be provided, utilized and maintained in a sanitary and reliable condition whenever deemed necessary by reason of hazards, processes or environment.

Scope

This policy applies to all employees who by nature of their job function have the potential to be exposed or come into contact with audio, chemical, physical, radiological or biological hazards which by this exposure can cause illness, injury or impairment in the function of any part of the body.

With the approval of the College Safety Committee, a department may propagate their own P.P.E. policy as long as it is in compliance with current OSHA regulations and requirements. Such approved policies must be submitted and attached to the College general policy for reference.

Authority and Responsibility

Immediate Supervisors are responsible for:

1. Ensuring personal protective equipment is available and providing personal protective
   equipment as required or upon request to all employees
2. Ensuring personal protective equipment is being used by each affected employee
   during all job tasks which require such protection.

Plant Operations is responsible for:

1. Assessing the workplace to determine if hazards are present, or are likely to be present, which necessitate the use of personal protective equipment.

2. Communicating selection decisions to each affected employee
3. Selecting personal protective equipment that properly fits each affected employee.
4. Documenting aforementioned hazard assessment components utilizing a Personal Protective Equipment Assessment

Employees are responsible for:

1. Wearing personal protective equipment upon the direction of their immediate supervisor.
2. Participating in training.

Considerations

Personal protective equipment devices alone shall not be relied on to provide protection against hazards, but shall be used in conjunction with guards, engineering controls, administration controls and sound manufacturing practices.

When selecting personal protective equipment, utilize the following considerations as a basic directive.

1. Application: What part of the body is being protected?
2. Chemical resistance: Will material maintain its structural integrity and protective qualities?
3. Strength: Is the material resistant to punctures, tears, and abrasions?
4. Flexibility: Do gloves provide the necessary flexibility?
5. Thermal Limits: Does clothing maintain its mobility and protective capacity in temperature extremes?
6. Cleanable: Can material be easily cleaned and reused?
7. Longevity: Will clothing resist aging?

Contact Plant Operations for personal protective equipment product recommendations.

Hand Protection

Hand protection shall be worn when hands are exposed to hazards such as those from skin absorption of harmful substances, severe cuts or lacerations, severe abrasions, punctures, chemical burns, thermal burns and harmful temperature extremes.

The type of hand protection used shall be based on the performance characteristics of the hand protection relative to the task(s) to be performed, conditions present, duration of use, and the hazards and potential hazards identified.

With respect to the selection of gloves for protection against chemical hazards:

1. The toxic properties of the chemical(s) must be determined; in particular, the ability of the chemical to cause local effects on the skin and/or to pass through the skin and cause systemic effects.
2. Generally, any “chemical resistant” glove can be used for dry powders.

3. For mixtures and formulated products (unless specific test data is available), a glove shall be selected on the basis of the chemical component with the shortest breakthrough time, since it is possible for solvents to carry active ingredients through polymeric materials.
4. Employees shall be able to remove the gloves in such a manner as to prevent skin contamination.

Head Protection

Head protection shall be worn in areas where there is a potential for injury to the head from impact, flying or falling objects (e.g., working below other workers who are using tools and materials which could fall through grates), or electrical shock and burns.

Helmets for protection against impact and penetration of falling objects shall comply with the "American national Standard for Personal protection – protective Headwear for Industrial Workers Requirements" (ANSI) Z89.1. Helmets for protection against electrical shock and burns shall comply with (ANSI) Z89.2-1971.

Hearing Protection

Protection against the effects of noise exposure shall be provided when the sound levels exceed those shown in Table 1 when measured on the A-scale of a standard sound level meter at slow response.

Table 1 – Permissible Noise Exposures

Duration per Day Hours	Sound Level dBA Slow Response
8	90
7	91
6	92
5	93
4	95
3	97
2	100
1½	102
1	105
½	110
¼ or less	115

The maximum permissible level for impact or impulse noise shall be 140 dB as measured with a sound level meter capable of indicating an instantaneous peak noise level. Impact and impulse noise are peaks or maxim of sound level, above the continuous background level, which have separation intervals greater than one sound. If peaks are done one second or less apart, the noise shall be considered continuous.

Employees whose noise exposures equal or exceed the action level shall be provided with the necessary hearing protection, and shall comply with the rules and procedures.

Eye/Face Protection

Suitable eye protection or face protection shall be worn when there is the potential for exposure to the eyes or face from flying particles, molten metal, liquid chemicals, acid or caustic liquids, chemical gases or vapors or potentially injurious light radiation. Side protection is required when there is a hazard potential from flying objects. Detachable side protectors (e.g., clip-on or slide-on shields) meeting the pertinent requirements are acceptable.
Eye protection shall be durable, comfortable and easy to clean. Persons who vision requires the use of corrective lens and who by nature of their job duties require eye protection shall wear goggles or a full face shield that can be worn over the prescription lenses.

There are four general classes of eye and face protection: safety glasses, face shields, goggles and welding helmets. The type of protection required shall be determined by the type and degree of the hazard and shall comply with ANSI Z87.1-1989 “American National Standard Practice for Occupational and Educational Eye and Face Protection”.

Safety glasses shall be worn at all times in the following locations:

1. Academic and research laboratories
2. Facilities Maintenance shops (e.g., welding, carpentry, automotive)
3. All areas where airborne materials are present
4. Clinics where invasive patient related tasks are conducted

Foot Protection

Foot protection shall be worn when there is the potential for injury to the feet from falling or rolling objects, objects piercing the sole of the foot, electrical hazards, hot surfaces and slippery surfaces.

Foot protection shall comply with ANSI Z-1991 “American national Standard for Personal protection – Protective Footwear”.

Respirators

Use of respirators shall be done in accordance with the Respiratory Protection policy.

Refer to Safety Issues and Policies.

Body Protection

Full body protection shall be worn when there is a potential for contamination or exposure to other parts of the body (e.g., legs, arms, back, chest) from heat, splashes from hot metals and liquids, impacts, cuts, chemicals and radiation.

Body protection includes the following:

1. Lab coats
2. Boot covers
3. Aprons
4. Bouffant caps
5. Tyvek suits
6. Coveralls

Electrical Protective Devices

Rubber insulating equipment shall be used/worn to protect employees from shocks/burns while working on "live" electrical systems.

Rubber insulating equipment shall comply with the following American Society for testing and materials (ASTM) standards:

1. Specification for Rubber Insulating Gloves (D120-87)
2. Specification for Rubber Insulating Matting (ASTM D178-93 or D 178-88)
3. Specification for Rubber Insulating Blankets (ASTM D1048-93 or D 1048-88a)
4. Specification for Rubber Insulating Covers (ASTM D 1049-93 or D 1049-88
5. Specification for Rubber Insulating Line Hose (ASTM D 1050-90)
6. Specification for Rubber Insulating Sleeves (ASTM D 1051-87)

All electrical protective equipment shall be subject to periodic electrical tests conducted in accordance with appropriate voltages identified by ASTM standards to reliably indicate whether the insulating equipment can withstand the voltage involved. Insulating equipment failing to pass inspections or electrical tests shall NOT be used by employees.

Rubber insulating equipment test intervals shall occur as follows:

1. Rubber insulating line hoses shall be tested upon indication that the insulating valve
   is suspect.
2. Rubber insulating covers shall be tested upon indication that the insulating valve
   is suspect.
3. Rubber insulating blankets shall be tested before first issue and every twelve months thereafter.
4. Rubber insulating gloves shall be tested before first issue and every six months thereafter.
5. Rubber insulating sleeves shall be tested before first issue and every twelve months thereafter.

Note: If the insulating equipment has been electrically tested but not issued for service, it shall not be placed into service unless it has been electrically tested within the previous twelve months.

All departments using rubber insulating equipment shall make the appropriate arrangements for testing of such equipment.

Maintenance Schedules

Personal protective equipment shall be inspected, cleaned and maintained at regular intervals so that the personal protective equipment can be discarded, changed and/or decontaminated as deemed necessary. At a minimum, all personal protective equipment shall be discarded when it has become contaminated, worn, torn or has other integrity problems.

Personal protective equipment provides the requite protection. It is important to ensure that contaminated personal protective equipment, which cannot be decontaminated, is disposed in a manner that protects employees from exposure to hazards.

Note: Inspect personal protective equipment before each use for tears, punctures, holes, cuts, cracks, embedded foreign objects and texture changes (e.g., swelling, softening, hardening, becoming sticky or inelastic).

Training

Initial Training

Plant Operations or the appropriate department shall provide initial training for each employee who is required to use personal protective equipment. Each employee shall be trained in at least the following:

1. When personal protective equipment is necessary.
2. What personal protective equipment is necessary.
3. How to properly don, doff, adjust, and wear personal protective equipment.
4. The limitations of the personal protective equipment.
5. The proper care, maintenance, useful life and disposal of the personal protective equipment.

Each affected employee shall demonstrate an understanding of the aforementioned training and the ability to use personal protective equipment properly before being allowed to perform work requiring the use of personal protective equipment.

Retraining

When there is reason to believe that any affected employee who has already been trained does not have the understanding and skill as required above, Plant operations or the affected department shall retrain each such employee. Circumstances where retraining is required include, but are not limited to, situations where:

1. Changes in the workplace render previous training obsolete.
2. Changes in the types of personal protective equipment to be used render previous training obsolete

3. Inadequacies in an affected employee's knowledge or use of assigned personal protective equipment indicate that the employee has not retained the requisite understanding or skill.

Recordkeeping:

Plant Operations shall verify that each affected employee has received and understood the required training through a written certification containing the name of each employee trained, the date(s) of training and the subject of the certification.

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Additional Reference	**OSHA 1910.147**	
Policy Title:	**Lockout/Tagout Program**	**Policy No. 15-iii**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 3**
Definition:		

Policy:

I. Purpose

This procedure establishes the minimum requirements for the lockout of energy isolating devices whenever maintenance or servicing is done on machines or equipment in which the *unexpected* energization of start up of the machine or equipment, or release of stored energy could cause injury to employees. It shall be used to ensure that the machine or equipment is stopped, isolated from all potentially hazardous energy sources and locked out before employees perform any servicing or maintenance where the unexpected energization or start-up of the machine or equipment or release of stored energy could cause injury.

II. Compliance

A. General

All employees are required to comply with the restrictions and limitations imposed upon them during the use of lockout. The authorized employees are required to perform the lockout in accordance with this procedure. All employees, upon observing a machine or piece of equipment which is locked out to perform servicing or maintenance shall not attempt to start, energize or use that machine or equipment. Compliance to this procedure is mandatory any and all individuals who are found not to be following the recommended guidelines are subject to disciplinary action.

B. Maintenance

The Maintenance Supervisor shall be responsible to train all employees who perform lockout/tagout procedures. Each new or transferred employee shall be instructed as part of their initial training.

C. Other Departments

Each Department Supervisor shall be responsible to train all employees whose work operations are in an area where the lockout/tagout procedure is used.

III. Sequence of Lockout

The basic format that is used to conduct a lockout/tagout procedure is as follows:

1. *Prepare For Shutdown* - As an authorized employee, they are instructed of each type of energy source a machine uses, potential hazards and methods or means to control

any hazards. Notify affected employees that work requiring lockout/tagout will be performed.

2. *Shutdown* - Shut the system down by using its operating controls. Follow the standard operating procedure(SOP) for shutting down the respective machine or equipment.
3. *Isolation* - Operate all energy isolating devices so that the machine or equipment is isolated from its energy sources. Be sure to isolate all energy sources--secondary power as well as the main power source.
4. *Control Stored Energy* - Relieve, disconnect or restrain any residual hazardous energy that could be present. Inspect the machine or equipment to make sure that all moving parts have stopped. If stored energy can re-accumulate, monitor it to make sure it stays below hazardous levels.
5. *Apply Lockout/Tagout Device* - Attach lock or tag that holds operating controls in an "off" or "safe" position. By attaching a lock or tag device to the energy isolating device it prevents someone from restoring the flow of energy to the machine or equipment. All locks and tags must meet 1910.147 (c) (5) (i) through (c) (5) (iii) standardization requirements.
6. *Equipment Isolation Verification* - Verify proper isolation and/or de-energization by testing the start button to assure the machine will not operate. Make sure to push the stop button after activating the start button.

IV. Restoring Equipment to Service

When the servicing or maintenance is completed and the machine is ready to return to normal operating condition, the following steps shall be taken.

1. Inspect the machine or equipment and the immediate area, in addition inspect the machine or equipment to ensure that nonessential items have been removed and that the machine or equipment components are operationally intact.
2. Check the work area to ensure that all employees have been safely positioned or removed from the area.
3. Verify that the controls are in neutral.
4. Remove the lockout devices and re-energize the machine or equipment.
5. Notify affected employees that the servicing or maintenance is completed and the machine or equipment is ready for use.

V. Energy Control Procedure

This section delegates that procedures shall be developed, documented and utilized for the control of potentially hazardous energy when employees are engaged in activities dealing with lockout or tagout. A documented procedure is not required for a machine or piece of equipment when all of the following elements exist:

- The machine or equipment has no potential for stored or residual energy or re-accumulation of stored energy after shut down which could endanger employees.
- The machine or equipment has a single energy source which can be readily identified and isolated.
- The isolating and locking out of that energy source will completely de-energize and deactivate the machine or equipment.
- The machine or equipment is isolated from that energy source and locked out during servicing or maintenance.
- A single lockout device will achieve a locked-out condition.
- The lockout device is under exclusive control of the authorized employee performing the servicing or maintenance.

- The servicing or maintenance does not create hazards for other employees.
- The employer, in utilizing this exception, has had no accidents involving the unexpected activation or re-energization of the machine or equipment during servicing or maintenance.

This procedure shall be clear and specifically outline the scope, purpose, authorization, rules, and techniques to be utilized for the control of hazardous energy, and the means to enforce compliance includes:

- A specific statement of the intended use of the procedure.
- Specific procedural steps for shutting down, isolating, blocking and securing machines or equipment to control hazardous energy.
- Specific procedural steps for the placement, removal and transfer of lockout or tagout devices and the responsibility for them.
- Specific requirements for testing a machine or equipment to determine and verify the effectiveness of lockout devices, tagout devices, and other energy control measures.

VI. Energy Types

A. General

There are many sources of energy present in your work area. The various energy sources in the work place can be broken down into two types of energy, which are kinetic energy and potential energy. By defining and giving examples of the separate types of energy you can start to understand what kind of energy sources are either kinetic or potential energy hazards.

B. Kinetic Energy

Is the actual movement or force behind a moving mass. For example, kinetic energy is found in blades, belts and flywheels.

C. Potential Energy

Is stored gravitational energy. Some examples include springs, actuators, counterweights and raised loads.

VII. Energy Sources

This section will outline the basic definitions of various energy sources and all the energy sources that are present at the College.

A. Energy Groups

1. *Electrical Energy:* is present in power transmission lines, transformers, circuit breakers and motors, to name a few. Electrical energy can be either direct or indirect. An example would be an Air Handling Unit.
2. *Hydraulic Energy:* is fluid under pressure. For example, powered industrial trucks and cylinders are run by hydraulic energy. An example would be a forklift.
3. *Pneumatic Energy:* is air under pressure. Pneumatic systems require faster cycles of operation than hydraulic energy. An example would be air hose.
4. *Thermal Energy:* includes steam or water present in pipes and supply lines, storage tanks and vessels used to create energy. An example would be the boilers.
5. *Chemical Energy:* includes chemicals present in pipes and supply lines, storage tanks and vessels used to create energy.

B. Energy Sources Present at the College

- Compressed Air up to 100 psi; Pneumatic
- Up to 12,000 Volt 3 Phase; Electrical
- Cold Water up to 90 psi; Thermal
- Hydraulic
- Hot Water up to 90 psi; Thermal
- Hot Water 180 ^{0}F; Thermal
- Steam up to 80 psi; Thermal
- Pressurized Vessels

VIII. Multiple Energy Sources

Any machine or piece of equipment that is supplied with more than one source of energy is considered to have multiple energy sources. In order to maintain a uniform level of safety there are mandatory procedures that shall be followed to insure the safety of all affected associates.

IX. Sources That Can Not Be Locked Out

After reviewing our practices and machinery located at Muhlenberg College. All machines or practices can be locked out by any one of the acceptable means.

X. Other Requirements/ Special Situations

This section serves as a guideline for lockout/ tagout procedures that shall be followed as they occur in the workplace.

A. Testing or Positioning of Machines, Equipment or Components Thereof

In situations in which lockout or tagout devices must be temporarily removed from the energy isolating device and the machine or equipment energized to test or position the machine, equipment or component thereof, the following step by step procedure shall be followed:

1. Clear the machine or equipment of tools and all other nonessential items to ensure that the machine or equipment's components are operationally intact.
2. Remove employees from the machine or equipment area to ensure that all employees are safely positioned.
3. Remove the lockout or tagout devices from each energy isolating device by the employee who applied the device.
4. Energize and proceed with testing or positioning until the task is completed.
5. De-energize all systems and reapply energy control measures following basic lockout/ tagout procedure guidelines and continue servicing and/ or maintenance.

B. Outside Personnel (Contractors, etc.)

Whenever outside servicing personnel are to be engaged in activities involving lockout/ tagout, the on-site employer and the outside employer shall inform each of their respective lockout or tagout procedures. Furthermore the on-site employer shall ensure that his/ her employees understand and comply with the restrictions and prohibitions of the outside employer's lockout/ tagout program.

C. Group Lockout or Tagout.

When servicing and/ or maintenance is performed by a crew, craft, department or other group, they shall utilize a procedure that affords the employees a level of protection equivalent to that provided by a personal lockout or tagout device. Group lockout or tagout devices shall meet the requirements for energy control, but it is not limited to the requirements of energy control and the following specific requirements:

- Primary responsibility is vested in an authorized employee for a set number of employees working under the protection of a group lockout or tagout device.
- Provisions for the authorized employee to ascertain the exposure status of individual group members with the regard to the lockout or tagout of the machine or equipment.

- When more than one crew, craft, department, etc. is involved, assignment of overall job-associated lockout or tagout control responsibility to an authorized employee designated to coordinate affected work forces and ensure continuity of protection.
- Each authorized employee shall affix a personal lockout or tagout device to the group lockout device, group lock box, or comparable mechanism when he or she begins work, and shall remove those devices when he or she stops working on the machine or equipment being serviced or maintained.

D. Shift or Personnel Changes
This specific procedure was created and shall be utilized during shift and personnel changes to ensure the continuity of lockout or tagout protection between off-going and oncoming personnel to minimize exposure to hazards from the unexpected energization or start-up of the machine or equipment, or the release of stored energy.

E. Lock or Tag Removal For an Absent Person(s)
Whenever it is necessary to remove a lock or tag when one or more authorized individuals who have locked out or tagged out a machine or equipment is absent or in case of an emergency, the following procedure shall be followed:

- The crew leader or shift supervisor must make all possible attempts to locate the person(s). This includes the following techniques: paging the person, checking the break rooms, rest rooms or work stations; looking outside; telephoning the person's home; contacting the person's supervisor.
- If these attempts fail, the person's supervisor or lead person are the only individuals who can give the permission to remove the person's lock or tag.
- Once the permission has been granted to remove the lock or tag the crew leader, maintenance supervisor or shift supervisor shall inspect the machine or equipment to ensure that no one will be injured by the energization of the machine or equipment.
- When removing a lock or tag a supervisor must be present to witness the act for accountability measures. Once the lock or tag has been removed the necessary action for the situation can be taken, an example of the recommended can be found on page 48 of this document.
- The absent or affected person(s) shall be notified as soon as possible that their lock or tag has been removed before they enter the work area or return to work.
- Lockout/Tagout of cord and plug connected equipment.
- Our lockout policy applies to ALL service and maintenance work performed on cord and plug connected equipment.
- Plug lockout devices will be used to lockout plug cord equipment.

XI. Definitions
This section describes and defines common phrases or words often used for lockout/ tagout procedures.

A. Affected Employee
An employee whose job requires him/ her to operate or use a machine or equipment on which servicing or maintenance is being performed under lockout or tagout, or whose job requires him/ her to work in an area in which such servicing or maintenance is being performed.

B. Authorized Employee
A person who locks out or tags out machines or equipment in order to perform servicing or maintenance on that machine or equipment. An affected employee becomes an authorized employee when that employee's duties include performing servicing or maintenance.

C. Capable of Being Locked Out
An energy isolating device is capable of being locked out if it has a hasp or other means of attachment to which, or through which, a lock can be affixed, or it has a locking mechanism built into it. Other energy isolating devices are capable of being locked out, if lockout can be achieved without the need to dismantle, rebuild, or replace the energy isolating device or permanently alter its energy control capability.

D. Energized
Connected to an energy source or containing residual or stored energy.

E. Energy Isolating Device
A mechanical device that physically prevents the transmission or release of energy, including but not limited to the following: A manually operated electrical circuit breaker; a disconnect switch; a manually operated switch by which the conductors of a circuit can be disconnected from all ungrounded supply conductors, and in addition, no pole can be operated independently; a line valve; a block; and any similar device used to block or isolate energy. Push buttons, selector switches and other control circuit type devices are not energy isolating devices.

F. Energy Source
Any source of electrical, mechanical, hydraulic, pneumatic, chemical, thermal, or other energy.

G. Hot Tap
A procedure used in the repair, maintenance and services activities which involves welding a piece of equipment (pipelines, vessels, or tanks) under pressure, in order to install connections or appurtenances. It is commonly used to replace or add sections of pipeline without the interruption of service for air, gas, water, steam, and petrochemical distribution systems.

H. Lockout
The placement of a lockout device on an energy isolating device that ensures the energy isolating device and the equipment being controlled cannot be operated until the lockout device is removed.

I. Lockout Device
A device that utilizes a positive means such as a lock, either key or combination type, to hold an energy isolating device in a safe position and prevent the energizing of a machine or equipment. Included are blank flanges and bolted slip blinds.

J. Normal Operations
The utilization of a machine or equipment to perform its intended function.

K. Servicing and/or Maintenance
Work place activities such as constructing, installing, setting up, adjusting, inspecting, modifying, and maintaining and/ or servicing machines or equipment. These activities include lubrication, cleaning or un-jamming of machines or equipment and making adjustments or tool changes, where the employee may be exposed to the *unexpected* energization or startup of the equipment or release of hazardous energy.

L. Setting Up
Any work performed to prepare a machine or equipment to perform its normal production operation.

M. Tagout
The placement of a tagout device on an energy isolating device, in accordance with an established procedure, to indicate that the energy isolating device and the equipment being controlled may not be operated until the tagout device is removed.

N. Tagout Device
A prominent warning device, such as a tag and a means of attachment, which can be securely fastened to an energy isolating device to indicate that the energy isolating device and the equipment being controlled may not be operated until the tagout device is removed.

XII. Materials & Hardware

A. Purpose
This section lists many of the protective materials and hardware that are needed to properly lockout/ tagout machines or equipment. Requirements and guidelines for materials and hardware are defined according to OSHA 29 CFR 1910.147 standards.

B. Requirements & Guidelines
Various devices can be used during a lockout/ tagout procedure as long as these lockout/tagout devices meet the requirements of 1910.147 (c) (5) (i) through (c) (5) (iii). Lockout devices shall not be used for other purposes then what they are designed for. The following list cites several examples of approved protective materials and hardware that are used as energy isolating devices: locks, tags, chains, wedges, key blocks, adapter pins, self-locking fasteners or other hardware can be used to ensure energy isolating or blocking of machines or equipment from an energy source is achievable. Lockout/ tagout devices shall be singularly identified and these materials or hardware shall be delegated as the only devices used for controlling energy sources shall meet the following requirements:

- Durable - To ensure durability of a lockout/ tagout device shall be capable of withstanding the environment to which they are exposed for the extent of the lockout/ tagout procedure. In addition, tagout devices shall be constructed and printed so that exposure to any weather condition or degree of moisture will not cause the tag to deteriorate or the message on the tag to become illegible. Furthermore, tags shall not deteriorate when used in or around corrosive environments or chemicals.
- Standardization - Standardization of lockout/ tagout is required within our facilities to ensure all affected and authorized employees are aware of the lockout/ tagout procedure in an area. OSHA requires that at least one of the following criteria must

be met to adhere to the standardization requirement; Color, shape or size. In addition when tagout devices are being used as an energy isolating device the print and format of the tagout devices shall be standardized. By standardizing the lockout/ tagout devices in our facilities the necessary precautionary methods and warning signs concerning lockout/ tagout procedures will be easily identified by all affected and authorized associates.

- Substantial - Lockout devices shall be substantial enough to prevent removal without the use of excessive force or unusual techniques, such as the use of bolt cutters, blow torches or other metal cutting tools. Tagout devices including and their means of attachment shall be substantial enough to prevent accidental removal. The tagout attachment device shall be of a non-reusable type, attachable by hand, self-locking and non-releasable with a *minimum* unlocking strength of no less than 50 pounds. The general design of the tagout attachment device must have the basic characteristics of being equivalent to a one-piece all-environment-tolerant nylon cable tie.
- Identifiable - All lockout/ tagout devices shall indicate the identity of the employee(s) applying the energy isolating device. Tagout devices shall warn against hazardous conditions if the machine or equipment is energized and shall include a legend such as the following: Do Not Start, Do Not Open, Do Not Energize, Do Not Operate and so on.

C. Material & Hardware Issued

Each authorized associate will be issued the necessary materials and hardware to perform a lockout/tagout. Each associate receiving the proper hardware is required to sign-off verifying that they have received the necessary equipment. Each associate will be issued the following basic equipment (some job classifications are issued additional equipment):

- 1 Lock
- 1 Key
- 2 Tags
- 1 Group Hasp

XIII. Safe Practices

The following section outlines 10 basic guidelines that will ensure the safety of all associates affected by lockout/tagout procedures:

1. Prepare- prepare for shutdown by notifying all affected employees in the area.
2. Shutdown - press all stop buttons or controls.
3. Isolate - turn the power off at the lockout switch.
4. Inspect - inspect the machine or equipment that all moving parts have stopped.
5. Lockout/Tagout - lock the lock, remove the key & position two tags.
6. Test - test the equipment press start buttons and depress the stop button again.
7. Perform- perform the necessary work or duties.
8. Safeguard check - Inspect the machine for tools, parts, etc.
9. Notify - alert all affected employees in the area of start-up.
10. Remove- each person is to remove their own lockout/tagout devices.

XIV. Auditing

To adhere to OSHA requirements of 1910.147 all authorized employees can be audited at any time. Random auditing of each authorized employee may be conducted by the Safety Manager. The auditing process can be conducted at any time and is designed to correct any deviations or inadequacies of the lockout/tagout procedure. This auditing process documentation will identify

the equipment or machine on which the authorized employee utilized the process, the identity of the authorized employee, the date of the audit, the identity of the associate who conducted the audit and other vital information. An example of an auditing form is supplied at the end of this procedure on page 49.

XV. Training

A. Authorized Employees

Training shall be conducted annually to ensure your knowledge of the lockout/tagout procedure, energy sources present in the workplace, periodic audits of energy control procedures and your knowledge of the procedures. Authorized employees are required to be retrained every year and can be audited at any time. The training and retraining process includes the following training measures:

- Define lockout/ tagout and its presence in the workplace.
- Define the energy sources in the workplace.
- Viewing of an instructional lockout/ tagout video.
- When to use lockout/ tagout.
- Define basic lockout/tagout process and steps.
- Define auditing process and its purpose.
- Review and illustrate the auditing process.
- Lockout/ tagout written test.
- Review the lockout/ tagout written test.
- Things to remember about lockout/ tagout.

XVI. Personal Protective Equipment (PPE)

There is not any additional PPE required for lockout/tagout procedures. Each associate is required to wear the designated PPE for the task the are completing as defined by their specific job requirements.

XVII. Review

A. Causes

Failure to control hazardous energy sources is a leading cause for some of the most severe injuries in maintenance operations. Many of the hazardous energy injuries can be traced to one or more of the following reasons:

- Failure to stop machine or equipment.
- Failure to disconnect the machine or equipment from the power source.
- Failure to dissipate residual energy.
- Accidental re-energization, start-up or release of stored energy to the machine or equipment.
- Failure to clear work areas before reactivating.

B. Things To Remember About Lockout/Tagout

It is a good idea to remember some of the many important rules for controlling hazardous energy or when working around hazardous energy. The following lists states several general rules or ideas to keep in mind when performing a lockout/ tagout procedures.

- Always lock the lock and remove the key.
- Never ignore someone else's lock or tag.
- Always lock or tag a machine or equipment before any type of work is started.
- Follow all lockout/tagout installation and removal steps.

- Never remove anyone else's lock or tag.
- Report lost keys to your supervisor immediately and have the lock destroyed.
- Your actions affect other associates, by protecting yourself you also protect those associates around you.

XVIII. Forms

All mandatory forms that are required for the lockout/tagout procedure are supplied at the end of the procedure. All completed forms are to be sent to the Plant Operations Department where they will be kept on file for auditing and accountability purposes.

- Lockout/Tagout Removal Form For Absent Person(s) or Emergency Situations
- Lockout/Tagout Auditing Form

LOCKOUT/TAGOUT REMOVAL FORM FOR ABSENT PERSON(S) OR EMERGENCY SITUATIONS

****

DATE REMOVED: _____

LOCK REMOVED BY: _____

TITLE OF INDIVIDUAL: _____

SIGNATURE: _____

SOCIAL SECURITY #: _____

WITNESS: _____

WITNESS'S TITLE: _____

SIGNATURE: _____

SOCIAL SECURITY #: _____

****

EQUIPMENT DESCRIPTION: _____

LOCK #: _____

ASSOCIATE'S NAME: _____

****

REASON OR COMMENTS: _____

_____

_____

****

ASSOCIATE NOTIFIED: _____

TIME NOTIFIED: _____

LOCK RETURNED: _____

DATE RETURNED: _____

All completed forms are to be forwarded to the Plant Operations Department.

LOCKOUT/TAGOUT AUDIT FORM

AUDITOR:	ASSOCIATE:
TITLE:	TITLE:
DATE:	CLOCK #:
EQUIPMENT:	DEPARTMENT:

1. Was the machine locked out or tagged out?	YES	NA	NO
2. Was the associate documenting the lockout/tagout?	YES	NA	NO
3. Did the associate notify all affected employees?	YES	NA	NO
4. Did the associate press all the stop buttons?	YES	NA	NO
5. Did the associate isolate all the energy sources present?	YES	NA	NO
6. Did the associate inspect the machine for moving parts?	YES	NA	NO
7. Did the associate lock the lock?	YES	NA	NO
8. Did the associate remove the key from the lock?	YES	NA	NO
9. Did the associate position two tags over the operating controls?	YES	NA	NO
10. Did the associate test the equipment by pressing any start buttons?	YES	NA	NO
11. Did the associate know the next step was to perform the work?	YES	NA	NO
12. Did the associate conduct a safeguard check for tools, parts, etc.?	YES	NA	NO
13. Did the associate notify all affected employees of the start-up?	YES	NA	NO
14. Did the associate remove the lock and all tags?	YES	NA	NO

COMMENTS: _____

_____

_____

_____

_____

AUDITOR'S SIGNATURE: _____

ASSOCIATE'S SIGNATURE: _____

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Additional Reference	**OSHA 1910.101-.126; 1910.1000-.1052; 1910.1200-.1450**	
Policy Title:	**Hazardous Material & Waste Program**	**Policy No. 15-iv**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 9**
Definition:		

Purpose: The purpose of this policy is to provide guidelines for the proper and safe storage and disposal of hazardous waste in a manner that minimizes risks to humans and their environment. Individual departments may have their own written hazardous waste policies provided they adhere to these broader guidelines.

Definition:
Hazardous wastes include substances defined as hazardous under the Code of Federal Regulations (CFR) Title 40: Protection of Environment. This includes materials on the following lists found in 40 CFR 261 Subpart D:

- non-specific source wastes
- specific source wastes
- commercial chemical products

And/or materials that exhibit the following characteristics as defined in 40 CFR 261 Subpart C

- ignitable
- corrosive
- reactive
- toxic

Purpose: The purpose of this policy is to provide guidelines for the proper and safe storage and disposal of hazardous waste in a manner that minimizes risks to humans and their environment. Individual departments may have their own written hazardous waste policies provided they adhere to these broader guidelines.

Overall Guidelines:

- Production of hazardous waste should be minimized wherever possible by sufficient planning, avoidance of ordering more than strictly necessary, and use of alternate substances whenever possible
- All applicable federal, state, and local regulations shall be followed

- The Director of Campus Safety is responsible for keeping abreast of applicable laws and regulations and notifying other departments of changes when necessary

General Guidelines for Departmental Accumulation Areas:

- Hazardous waste containers must be clearly labeled according to the following criteria:
    1. The words hazardous waste must appear on the label whenever a substance meets the EPA's definition as a characteristic waste or is listed in 40 CFR 261 Subpart D
    2. All contents must be listed using either names or descriptive phrases. Formulas, acronyms, and structural diagrams are unacceptable
    3. The characteristic(s) that makes the waste hazardous must be listed. In addition the label should indicate if any of the contents are carcinogens, inhalation hazards, or lachrymators.
    4. Display the accumulation start date
- Containers must be:
    1. In good condition with no leaks, corrosion, buckling, or bulging
    2. Compatible with their contents
    3. Kept closed except when adding or removing waste
    4. In secondary containment, if a leak would have the potential for reaching a sink or drain. The containment must be compatible with the stored wastes and large enough to hold the contents of the largest bottle or jar therein
- All waste should be transported from satellite accumulation sites to the department's central accumulation site as soon as they become full.
- Adequate aisle space will be maintained to allow for the unobstructed movement of personnel, fire protection equipment, and spill control equipment
- Each accumulation site will have the following equipment nearby:
    1. Fire extinguisher
    2. Fire alarm
    3. Telephone
    4. Spill control material
- Regular inspections will ensure all containers and safety equipment are in good condition and properly labeled

Guidelines for Central Campus Accumulation Areas:

As required by Muhlenberg's Small Quantity Generator status no hazardous waste may remain on campus longer than 180 days from the accumulation start date. All hazardous materials will be packed and transported within this time frame with frequency dictated by the physical limits of accumulation sites.

- The limits of a particular site will be defined by:
    1. The amount of shelf space available
    2. The ability to adequately separate incompatible substances
    3. The ability to read labels and inspect contents without having to move containers
- Containers will be inspected upon arrival to ensure they meet the labeling guidelines

- The accumulation area will have the following information posted: location of fire extinguisher; location of spill control material; location of the fire alarm; and emergency number for campus security
- The accumulation area will be have the following equipment available in a nearby location:
    1. Fire extinguisher
    2. Fire alarm
    3. Telephone
    4. Spill control material
- Regular inspections will ensure all equipment is in good condition and all containers are properly labeled
- Adequate aisle space will be maintained to allow for the unobstructed movement of personnel, fire protection equipment, and spill control equipment
- Local emergency responders (police, fire department, hazardous materials clean-up) should be made aware of the location and unique hazards present in accumulation areas

Disposal/Shipping Procedures:

- The contracted transporter will remove hazardous waste from the central accumulation areas and ensure that:
    1. Waste is packaged in accordance with Department of Transportation regulations 49 CFR Parts 172, 178, and 179
    2. Waste containers are labeled in accordance with 49 CFR Part 172
    3. The transportation vehicle is properly placarded

Recordkeeping:

- Records will be maintained by the Director of Campus Safety
- The Director will inspect manifests for legibility and retain copy #6
- Ensure manifest copy #3 is returned to the college within 30 days
- The college will retain manifest copies (#3 and #6) for a minimum of 3 years
- Records of test results, waste analysis, and other characterizations of hazardous waste will be maintained by Campus Safety

Emergency Procedures:

The designated emergency coordinator is the Director of Campus Safety and s/he will be on the premises or on call to coordinate emergency response

- Each accumulation area will have the following information posted: location of fire extinguisher; location of spill control material; and emergency number for campus security
- Each accumulation area will be equipped with spill control material and be near a telephone, a fire alarm, and a fire extinguisher
- Employees and students who handle or come into contact with hazardous materials must be trained by their respective department regarding all applicable safety and emergency procedures
- In the event of a chemical waste spill or radioactive waste spill:

1. Call the Campus Safety Office at 3110 or 3112 and give the following information:
   A. Type of incident (chemical spill, radiation hazard, etc.)
   B. Type of chemical, if known.
   C. Whether or not students are injured.
   D. Extent of injuries.
   E. Location of incident.
   F. Name and title of caller (student, technician, professor, etc.)
2. Notify those in the area and if necessary evacuate the building.

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Additional Reference	**OSHA 1910.146**	
Policy Title:	**Confined Spaces Entry Program**	**Policy No. 15-v**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 5**
Definition:		

Purpose:

To define the Muhlenberg College policy on Permit-Required Confined Spaces.

II. Applicable Regulation
29 CFR 1910.146, Permit-Required Confined Spaces for General Industry.

III. Workplace Evaluation
The College has determined that it may contain permit-required confined spaces. A list of confined spaces on the College campus shall be kept on file at the Office of Campus Safety and the Office of Plant Operations. No College employees will be allowed to enter permit-required confined spaces. All work in these areas will be sub-contracted to companies approved for such work as set forth by the Occupational Safety and Health Administration (OSHA).

IV. Contractors
When contractors are required to enter College permit-required confined spaces, the following policies apply:

1. The Office of Plant Operations shall inform the contractor that the campus contains permit spaces and that permit space entry is allowed only through compliance with a permit space program.
2. The Office of Plant Operations shall apprise the contractor of any hazards identified, the College's experience with the space, and what classifies it as a permit space.
3. The Office of Plant operations shall coordinate entry operations with the contractor if College personnel or other contractor personnel are working near the confined space being entered. If employees of more than one employer are working simultaneously as "Authorized Entrants" in a confined space, procedures to coordinate entry operations are to be developed and implemented.
4. The Office of Plant Operations shall debrief the contractor at the conclusion of the entry operations on the permit space program followed and any hazards confronted or created in permit spaces during entry operations.

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Additional Reference	**OSHA 1910.155-.165**	
Policy Title:	**Fire Prevention and Protection Program**	**Policy No. 15-vi**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 2**
Definition:		

Policy:
Fire safety is of primary importance to the Department of Campus Safety and to all members of the campus community. Campus Safety and Plant Operations Staff receive training in the use of on campus fire equipment. Campus Safety conducts fire drills regularly in all residence facilities and all residence halls are equipped with some detectors and other emergency fire equipment. At the beginning of each academic year, there is a review of all fire safety and security procedures. Safety and security awareness programs, including fire safety, are made available to students. In addition, the Allentown Fire Department regularly inspects campus facilities to assure fire code compliance. An outside contractor to ensure proper function checks all fire alarm systems on campus on a regular basis.
It is important to know the location of emergency exits when you enter a facility. When entering a facility you should plan your evacuation route using emergency exits should an emergency arise. There are fire safety instructions and egress charts posted inresidence rooms in all major (large) residential facilities providing directions to follow. Read these notices and be familiar with the instructions. Be sure you have these items on your door. If they are not there call Campus Safety at extension 3110. Whenever there is an activation of a fire alarm, you should always evacuate the building unless on-scene emergency personnel advise you otherwise.
Know where the extinguishers and alarm pull stations are located in your facility and how to use them. Most extinguishers are located near the exit doors. Never play with the extinguisher or tamper with alarm systems. In addition to having extinguishers available in a fire emergency, most major facilities also have sprinkler systems available.
A complete list of fire rules and regulations is in the student handbook . The following is a list of items prohibited in the residence halls.

1. Candles
2. Hot Plates/Foreman Grills
3. Toaster Ovens
4. Popcorn Poppers
5. Heating Devices
6. Coffee Pots
7. Electric Fry Pans
8. Air Conditioners
9. Halogen/Multi-Arm Lamps
10. Incense
11. Gasoline
12. Charcoal
13. Propane
14. Fireworks
15. Explosives

Grills and hookahs may be used; however, their use is restricted to the outside of any college facility. Grills may not be stored within any college facility. Disposal of the charcoal is very

important. Charcoal must be disposed of in the appropriately marked red containers; they are located in various locations around campus. There is a $300.00 fine assessed for the following violations:

1. Intentional activation of a fire alarm for non-emergency/fire situations.
2. Intentional discharge of an extinguisher in a non-fire incident.
3. Tampering with, removing, and/or relocating smoke detectors and/or fire extinguishers.
4. Removing egress plans from back of door.
5. Breaking glass on pull stations or extinguisher cabinets.
6. Failing to evacuate building when alarm sounds.

Students should refer to the Student Policy and Resource Handbook and/or housing agreement for the full policy. Campus personnel (Residential Services, Plant Operations, and Campus Safety Personnel) will periodically check for violations. In non-residential facilities, individuals or departments, violating the above matters, are subject to the same fines.
Individuals who identified as being responsible for intentionally activating the fire alarm and causing a false fire alarm are subject to a $300.00 fine, immediate interim suspension pending a judicial hearing, and/or criminal prosecution.

SOME TIPS

Know your emergency exists. There are fire safety instructions and egress charts posted on the back of every residence room door providing directions to follow. Read these notices and be familiar with the instructions. Be sure you have these items on your door. If they are not there, notify the Campus Police Department at Ext. 3110. If you work within a facility, plan your own evacuation route utilizing the closest exits to where you work and planning secondary routes using other exits as well.

Know where the extinguishers and alarm pull stations are in your facility and how to use them. Never play with extinguishers or tamper with the alarm system. Lives depend on these devices functioning properly.

Unattended open flames, heating devices or improper use of electrical cords, most often cause fires on college campuses. To be safe, see the list of restricted devices above and NEVER run an extension cord under a rug or use a frayed or worn cord.

Again, misuse of or tampering with fire equipment is a serious offense and subject to disciplinary action or criminal charges. More importantly, when someone pulls a false alarm they place lives in danger. A false alarm is ignorant and they make people complacent. When an actual incident does occur, people will not even realize what is happening. If that does not do it for you, how about this... IT IS A FELONY!!!!!

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Policy Title:	**Substance Abuse Awareness and Prevention**	**Policy No. 15-vii**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 4**
Definition:		

Please follow the following link to obtain information with regard to the College's policy regarding drugs and alcohol.

http://www.muhlenberg.edu/mgt/humanres/pdf/Drugpol.pdf

Additional information relative to Drugs and Alcohol may be found at the following link

http://www.muhlenberg.edu/mgt/police/drugalcohol.html#alcohol

Student policies relative to drugs and alcohol may be found at the following links:

http://www.muhlenberg.edu/mgt/deanst/studentguide.pdf#alcohol

http://www.muhlenberg.edu/mgt/deanst/studentguide.pdf#drugs

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Additional Reference	**OSHA 1910.1030**	**PA Department of Health BPP Guidelines**
Policy Title:	**Bloodborne Pathogen Exposure Control**	**Policy No. 15-viii**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 3**
Definition:		

Occupational Exposure to Bloodborne Pathogens
EXPOSURE CONTROL PLAN

POLICY

Muhlenberg College shall establish a program to protect all personnel who, in the course of their work could reasonably be expected to come into contact with blood, body fluids, or other potentially infectious material. Each work area within the organization shall assure that their personnel are in compliance with the provisions of the college's **Occupational Exposure to Bloodborne Pathogens Exposure Control Plan** as specified.

SCOPE

This plan applies to employees and other members of the Muhlenberg College Community who have a potential to exposure of Bloodborne Pathogens as a result of performing assigned tasks.

DEFINITIONS

Bloodborne Pathogens - Pathogenic microorganisms present in human blood which can cause disease in humans. These pathogens include, but are not limited to the Hepatitis B Virus, (HBV), and the Human Immunodeficiency Virus (HIV), which causes Acquired Immune Deficiency Syndrome (AIDS).

Engineering Controls - a method of control which isolates or allows the removal of bloodborne pathogens hazard from the workplace. Examples include sharp disposal systems, self sheathing needles, etc.

Personnel - Includes but is not limited to employees, students, faculty, and others engaged in any activities at the college where the potential for a blood/body fluid exposure exists.

Personal Protective Equipment (PPE) - Specialized clothing or equipment worn by an employee for protection against a hazard. General work clothes i.e. uniforms, pants, skirts, blouses not intended to function as protection against a hazard are not considered to be personal protective equipment.

Regulated Waste - Liquid or semi-liquid blood or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed: items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling; contaminated sharps; pathological and microbiological wastes containing blood or other potential infectious materials.

Work Practice Controls - Controls that reduce the likelihood of exposure by altering the manner in which a task is performed, i.e. recapping a needle.

PURPOSE

One of the major goals of the Occupational Safety and Health Administration (OSHA) is to regulate facilities where work is carried out in a fashion that safe work practices are promoted. The promotion of these practices will minimize the incidence of illness and injury experienced by employees. Relative to this goal, OSHA has enacted the Bloodborne Pathogens Standard, codified as **29 CFR 1910.1030.** The purpose of the Bloodborne Pathogens Standard is to reduce occupational exposure to Hepatitis B Virus (HBV), Human Immunodeficiency Virus (HIV) and other bloodborne pathogens that employees may encounter in their workplace.

In compliance with this standard, the administrative staff at Muhlenberg College has designed and implemented this Exposure Control Plan to meet the letter and intent of the OSHA Bloodborne Pathogens Standard. The objective of this plan is to protect our employees from the health hazards associated with bloodborne pathogens and provide appropriate treatment and counseling should an employee be exposed to bloodborne pathogens.

RESPONSIBILITY

The categories responsible for the effective implementation of the Exposure Control Plan include the Safety Committee and its Chairperson, Department Managers and Supervisors, Educational/Training personnel and employees.

Safety Committee and Chairperson

The Safety Committee and Chairperson will be responsible for overall management and support of our College's Bloodborne Pathogens Program. Activities delegated to this group include:

- Overall responsibility of implementing the Exposure Control Plan

- Looking for ways to improve the Exposure Control Plan, as well as revise and update it as necessary.
- Knowing current legal requirements concerning bloodborne pathogens
- Acting as liaison during OSHA inspections

Department Managers and Supervisors
Department Managers and Supervisors are responsible for exposure control plans in their respective areas. They work with the Safety Committee and our employees to ensure that proper exposure control procedures are followed. They are also responsible for notifying the Education/ Training personnel of any changes in personnel.

Education/Training
Our Education/Training Personnel will be responsible for providing information and training to all employees who have potential for exposure to bloodborne pathogens. Activities falling under the direction of this group include:

- Developing suitable education/training programs
- Scheduling periodic training seminars for employees
- Maintaining appropriate training documentation, such as "Sign-up Sheets", Quizzes, etc.

Health Services has been selected to coordinate the College's Education/ Training program.

Employees
Our employees have the most important role in our bloodborne pathogens compliance program, for the ultimate execution of much of our Exposure Control Plan rests in their hands. In this role, they must do things, such as:

- Know what tasks they perform that have occupational exposure
- Attend the bloodborne pathogens training sessions
- Plan and conduct all operations in accordance with our work practice controls
- Develop good personal hygiene habits

REFERENCES

Occupational Safety and Health Administration (OSHA) Blood Pathogens Standard, 29 CFR 1910.1030.

AVAILABILITY OF THE EXPOSURE PLAN TO EMPLOYEES

The Muhlenberg College **Occupational Exposure to Bloodborne Pathogens Exposure Plan** is available to our employees at any time. Employees are advised of this availability during their education/training sessions. Copies of the plan are kept in the following offices:

- Health Center
- Campus Safety
- Plant Operations

- Human Resources
- Athletics
- Chemical Hygiene Officer
- Office of the Chairperson, Safety Committee
- Office of the Director, Campus Safety

REVIEW AND UPDATE OF THE PLAN

The College reserves the right to unilaterally revise, modify, review, rescind, or alter the terms and conditions of the policy within the constraints of the law, providing reasonable notice. The plan will be reviewed at least annually, or whenever new or modified tasks and procedures are implemented which affect occupational exposure of our employees.

PROCEDURE

Exposure Control Plan

- Establish a written Exposure Control Plan in accordance with The Occupational Safety and Health Administration's **Bloodborne Pathogen Standard 29 CFR1910.1030.** Identify personnel with "reasonably anticipated" exposure to blood and/or body fluids. Specify how affected personnel are protected and trained.

- Review and update the plan at least annually, and when any new or modified task might impact personnel exposure.

- Insure a copy of the plan is accessible to personnel and OSHA Representative upon request for examination and copying.

Methods of Compliance

There are a number of areas that must be addressed in order to effectively eliminate or minimize exposure to bloodborne pathogens at our College. Five areas that we deal with in this plan are:

- The use of Standard or Universal Precautions
- Establishing appropriate Engineering Controls
- Implementing appropriate Work Practice Controls
- Using necessary Personal Protective Equipment
- Implementing appropriate Housekeeping Procedures

Standard Precautions

In our College, we have observed the practice of "Standard Precautions" to prevent contact with blood and other potentially infectious materials. As a result, we treat all human blood and the following body fluids as if they are known to be infectious for Hepatitis B Virus, HIV, and other bloodborne pathogens:

- Semen
- Vaginal Secretions

- Cerebrospinal Fluid
- Synovial Fluid
- Pleural Fluid
- Pericardial Fluid
- Peritoneal Fluid
- Amniotic Fluid
- Saliva

In circumstances where it is difficult or impossible to differentiate body fluid types (i.e., blood tinged fluids), we assume all body fluids to be potentially infectious.

Engineering Controls

We use engineering controls to eliminate or minimize employee exposure to bloodborne pathogens.

The following engineering controls are used, when needed throughout the College:

Hand washing Facilities

The College will provide hand washing facilities where feasible. When hand washing facilities are not feasible, one of the following will be provided:

- an appropriate antiseptic hand cleanser and clean cloth or paper towels
- antiseptic towelettes until it is possible to wash hands with soap and running water

Containers for contaminated sharps have the following characteristics:

- Puncture resistant
- Color-coded or labeled with biohazard warning label
- Leak-proof on the sides and bottom
- Sharps containers must be replaced periodically, (i.e., when they are approximately ¾ full)

Specimen Containers which are:

- Leak-proof
- Color-coded or labeled with biohazard warning label
- Puncture resistant when necessary

Work Practice Controls

In addition to engineering controls, our College uses a number of Work Practice controls to help eliminate or minimize employee exposure to bloodborne pathogens. These work practice controls include the following:

- Following any contact of body areas with blood or any other infectious material, employees wash hands and any other exposed skin with soap and water as soon as possible. They also flush exposed mucous membranes with water.
- Employees wash their hands immediately, or as soon as feasible, after removal of gloves or other personal protective equipment

- In the event of an exposure, employees should contact the Health Center for further direction. If the Health Center is closed, contact Campus Safety for the On-Call Person or for direction for treatment and follow-up.
- Contaminated Needles and other Contaminated Sharps are not bent, recapped, or removed unless:
    - It can be demonstrated that there is no feasible alternative
    - The action is required by a specific medical or research project
    - In the two situations above, the recapping or needle removal is accomplished through the use of a mechanical device or one-handed scoop technique.
- Contaminated sharps are placed in appropriate containers immediately, or as soon as possible after use. Containers should be disposed of when approximately ¾ full
- Eating, drinking, smoking, applications of cosmetics/lip balm, and the handling of contact lenses is prohibited in areas where there is reasonable likelihood of occupational exposure.
    - Assure food and drink is not stored in refrigerators, freezers, shelves, cabinets, countertops, or bench tops where blood or other potentially infectious materials are present.
    - Label refrigerators where storage of food and beverage is intended **FOOD ONLY.**
    - Perform all procedures involving blood or other potentially infectious materials in a manner minimizing splashing, spraying, spattering, and generation of droplets.
- Mouth pipetting/ suctioning of blood or other potentially infections materials is prohibited.
- All procedures involving blood or other infectious materials minimize splashing, spraying, or other actions generating droplets of these materials.
- Specimens of blood or other materials are placed in designated leak-proof containers, appropriately labeled for handling and storage
- If outside contamination of a primary specimen container occurs, that container is placed in a second leak-proof container, appropriately labeled for handling and storage. If the specimen can puncture the primary container, the secondary container must be puncture resistant as well.
- Equipment which becomes contaminated is examined prior to servicing or shipping, and decontaminated as necessary unless it can be demonstrated that decontamination is not feasible
    - An appropriate biohazard warning label is attached to any contaminated equipment identifying the decontaminated portions.
    - Information regarding the remaining contamination is conveyed to all affected employees, the equipment manufacturer, and the equipment service representative prior to handling, shipping, or servicing

Personal Protective Equipment (PPE)

The College provides personal protective equipment to our employees at no cost to them, to protect themselves against bloodborne pathogens exposures

- Appropriate PPE includes but may not be limited to:
    - gloves
    - gowns
    - laboratory coats
    - face shields
    - masks
    - eye protection
    - mouthpieces
    - resuscitation bags
    - pocket masks
    - ventilation devices
    - hoods
    - shoe covers
- Hypoallergenic gloves are readily available to employees who are allergic to the gloves our College normally provides
- Consider PPE appropriate only if it meets the requirements specified in OSHA'S Bloodborne Pathogen Standard.
- Assure appropriate use of PPE, unless one of the following is demonstrated:
    - the affected person temporarily and briefly declined to use PPE based on the seriousness of the individual's condition and the personnel's professional judgment.
    - the equipment's use in specific situations would have prevented the delivery of health care or public safety services.
    - would have posed an increased hazard to the safety of the co-worker.
- Cleaning, Laundering and Disposal of PPE
    - The cleaning, laundering and proper disposal of PPE is done at no cost to the employee.
    - Remove immediately, or as soon as feasible, equipment or garments penetrated by blood or other potentially infectious materials.
    - Personnel clothing should be decontaminated and washed within a proper fashion.
    - Muhlenberg College will replace/repair PPE as needed to maintain its effectiveness at no cost to the employee.
    - Gloves will be worn when it can be reasonably anticipated that the employee may have had contact with blood, or other potentially infectious materials, mucus membrane and non-intact skin. Disposable (single use) gloves will be replaced as soon as practical when contaminated, torn or punctured. Disposable gloves are **never** washed or decontaminated for re-use.

General Housekeeping Principles

- Muhlenberg College shall ensure that the worksite is maintained in a clean and sanitary condition by following a schedule and method of decontamination based upon the location in the facility, type of soil present, and the procedure being performed in the area.

- All equipment and environmental surfaces shall be cleaned and decontaminated after contact with blood or other potentially infectious materials.

- Contaminated work surfaces shall be decontaminated with household bleach (Sodium Hypochlorite) in a dilution of 1:10 or 1:100 with water or other appropriate solution. The decontamination shall occur after completion of the procedure, immediately or as soon as feasible when surfaces are overtly contaminated or after any spill of blood or other potentially infectious material.

- Protective coverings used to cover equipment and environmental surfaces shall be removed and replaced as soon as feasible when contaminated.

- Bins, pails, cans, and similar receptacles intended for reuse which have a reasonable likelihood for becoming contaminated with blood or other potentially infectious materials shall be inspected and decontaminated on a daily basis and cleansed as soon as feasible upon visible contamination.

- Broken glassware which is considered contaminated shall not be handled directly with the individual's hands. Contaminated glassware shall be cleaned up with mechanical means, i.e. brush and dust pan, tongs, forceps, etc.

- Splatters or spills of blood or other infectious agents on the floor, sides of benches or elsewhere are immediately decontaminated

Regulated Waste

- Contaminated sharps shall be discarded immediately in closeable, leak-proof, puncture resistant containers. The containers will be easily accessible to personnel in clinical areas where phlebotomy and other related procedures are performed. The red colored containers or identifiers will be maintained in an upright position and are replaced before becoming filled. The containers are sealed prior to transport to the storage area. Red bag waste is placed in a designated freezer within the Health Center where it is packed and prepared for pick-up by a governmentally approved waste management company.

- Other regulated waste shall be placed in red bags that are closable and leak-proof. The infectious waste will be collected from the labeled trash receptacles by the housekeeping staff and placed in the designated freezer. A member of the

housekeeping staff and/or Health Center staff will place the bags in a fiberboard container on a regular basis for pick-up in accordance with governmental regulations.

Hepatitis B Vaccination, Post Exposure Evaluation and Follow-Up

Vaccination Program

- Muhlenberg College will provide the Hepatitis B Vaccine series to employees who are considered at high risk for the exposure of blood and body fluids unless the employee has previously received the completed Hepatitis B vaccination series, antibody testing has revealed immunity or the vaccine is contraindicated for medical reasons. The vaccination will be available upon completion of the education program.
- The vaccination will be available at no cost to the employees that have occupational exposure to bloodborne pathogens. Included are employees in the College Health Center, Campus Safety and Security Officers, Housekeepers, and the Athletic Training Staff who have occupational exposure to blood borne pathogens. The college will consider the provision of the administration to individuals in other departments as deem necessary.
- Participation in a pre-screening program is not a prerequisite for receiving the vaccination.
- If the employee initially declines the vaccination, however decides at a later date to accept it, the doses will be administered.
- Employees who decline the vaccination must sign a statement documenting the refusal.
- The Health Services office is responsible for operating the vaccination program

Post Exposure Evaluation and Follow-up

- In occurrences in which an employee is involved in an incident where bloodborne pathogen exposure has occurred, the College addresses the following:
    - Making sure that the employee receives appropriate medical consultation and treatment (if required) as quickly as possible
    - Investigating the circumstances surrounding the exposure

- *Immediate Treatment:* Affected employee should wash area thoroughly with soap and water. For eye splashes, flush copiously with water

- Post exposure evaluation will be provided to employees who have a documented exposure incident.

    - The college will ensure that all medical evaluations and procedures including the Hepatitis B vaccine and post-exposure evaluation(s) including follow-up care include:
        - no cost provision for employee
        - made available at a reasonable time and place

- performed by or under the supervision of a licensed physician or by or under the supervision of another licensed healthcare professional
- provided in accordance to the recommendations of the U.S. Public Health Service current at the time of the event
- laboratory studies will be conducted at no cost to the employee

Post Exposure Evaluation and Follow-up Procedure

- Following exposure to a bloodborne pathogen, a report will be written to include:
  - When the incident occurred (date and time)
  - Where the incident occurred
  - What potentially infectious materials were involved
    - Type of fluid (i.e., blood)
  - The route(s) of exposure
  - The circumstances under which the exposure incident occurred (type of work being done)
  - How the incident was caused
    - Accident
    - Unusual circumstance (equipment malfunction, etc.)
    - Description of the device being used
  - Identification and documentation of the source individual, unless the employer can establish that identification is infeasible or prohibited by state or local law
    - HIV and HBV status of the source, if known
- Following a report of an exposure incident, Muhlenberg College will make available to the employee a confidential medical evaluation and follow-up through a health care provider on the workman's compensation panel.
- Through the workman compensation evaluation: the source individual's blood shall be tested as soon as feasible and after consent is obtained in order to determine HBV and HIV infectivity. If consent is not obtained, the employer shall establish that legally required consent cannot be obtained. When the source individual's consent is not required by law, the source individual's blood, if available, shall be tested and the results documented.
- When the source individual is already known to be infected with HBV or HIV, testing for the source individual's known HIV or HBV status need not be repeated.
- Results of the source individual's testing shall be made available by the workman compensation healthcare provider to the exposed employee, and the employee shall be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.
- Through the workman compensation provider, the exposed employee's blood shall be collected as soon as feasible and tested after consent is obtained for HBV and HIV serologic status. The employee may decline this.
- Post-exposure prophylaxis, when medically indicated, as recommended by the US Public Health Service, Counseling, and evaluation of reported illness will be determined and managed by the workman compensation healthcare provider

Information to be Provided to the Health Care Professional

To assist the workman compensation healthcare provider, the College will forward any documentation that is requested, including:

1. Employee's hepatitis B vaccination
2 A copy of this plan
3. A description of the exposed employee's duties as they relate to the exposure incident
4. Documentation of the route(s) of exposure and circumstances under which exposure occurred
5. Results of the source individual's blood testing, if available
6. All medical records relevant to the appropriate treatment of the employee including vaccination status

HealthCare Professional's Written Opinion

After the evaluation, the workman compensation healthcare provider provides the College with a written opinion evaluating the exposed employees' situation. In keeping with this process, emphasis on confidentiality, the written opinion will contain only the following information:

1. Whether the Hepatitis B Vaccination is indicated for the employee
2. Whether the employee has received the Hepatitis B Vaccine
3. Confirmation that the employee has been informed of the results of the evaluation
4. Confirmation that the employee has been told about any medical condition resulting from the exposure incident which requires further evaluation or treatment

All other findings will remain confidential and will not be included in written report.

Medical Records

Muhlenberg College shall establish and maintain an accurate record for each employee with occupational exposure. The record shall include:

- Name and date of birth of the employee
- Copy of the employee's hepatitis B vaccination status including the dates of all the hepatitis B vaccinations (if given at the College) and any medical records relative to the employee's ability to receive the vaccination
- A copy of results of examination, medical testing, and follow-up procedures
- The employers copy of the healthcare professional's written opinion

The Availability of Records is ensured by the staff at Muhlenberg College and will be made available on request to the appropriate governmentally approved individuals in compliance with regulations. Written consent of the employee is required for requests for medical records (except as required by law).

TRAINING

- Muhlenberg College shall ensure that all employees with occupational exposure to bloodborne pathogens (College Health Center, Campus Safety and Security Officers, Housekeepers, and the Athletic Training Staff) participate in training program which must be provided at no cost to the employee during working hours.
- Training shall be provided at least annually.
- Muhlenberg College shall provide additional training when changes such as modification of tasks or procedures or institution of new tasks or procedures affect the employee's occupational exposure. The additional training may be limited to addressing the new exposure created.
- The training may be accomplished by one of the following methods:
  - Classroom type atmosphere with personal instruction
  - Video programs
  - Training manuals or employee handouts
- The training program shall contain the minimum following elements:
  - An accessible copy of the regulatory text of this standard and an explanation of its contents
  - A general explanation of the epidemiology of symptoms of bloodborne diseases
  - An explanation of the modes of transmission of bloodborne pathogens
  - An explanation of the College's Exposure Control Plan and the means by which the employee can obtain a copy of the written plan
  - An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and other potentially infectious materials
  - An explanation of the use and limitations of methods that will prevent or reduce exposure including appropriate engineering controls, work practices, and PPE
  - An explanation of the basis for selection of PPE
  - Information on the Hepatitis B vaccine
  - Information on the appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious material
  - An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available
  - Information on post-exposure evaluation and follow-up that the employer is required to provide for the employee following an incident
  - An explanation of the signs and labels and/ or color coding system
  - An opportunity for interactive questions and answers with the person conducting the training
  - The person conducting the training shall be knowledgeable in the subject matter covered by the elements in the training program as it relates to the workplace that the training will address

Training Records:

Training Records shall include the following information:

- The dates of the training sessions
- Contents or summary of the training session
- The names and qualification of the persons conducting the training
- The names and job titles of all persons attending the sessions
- Training records shall be maintained for three years from the dates on which the training occurred

Labels and Signs

The most obvious warning of possible exposure to bloodborne pathogens is biohazard labels and red color-coded containers.

The following items in our College are labeled appropriates

- Containers of regulated waste
- Refrigerators/ freezers containing blood or other potentially infectious materials
- Sharps disposal containers
- Other containers used to store, transport, or ship blood or other infectious materials
- Contaminated equipment

Sharps Injury Log

Muhlenberg College shall establish and maintain a sharps injury log for the recording of percutaneous injuries from contaminated sharps. The information in the sharps injury log shall be recorded and maintained in such a manner as to protect the confidentiality of the injured employee. The log shall contain at minimum:

- The type and brand of device involved in the incident
- The department or work area where the exposure incident occurred
- The explanation of how the incident occurred

Revised – 02/14/12
Reviewed – Safety Committee –

Name:	**Supervisor:**
Department:	**Position:**
Date	**Phone #:**

Consent to Vaccinate:
I have requested Muhlenberg College Health Services to provide me with the Hepatitis B Vaccine. I understand that, as in the use of any vaccine, there is no guarantee that I will become immune or that I will not experience any adverse side effects from the vaccine. I also understand that the benefits of the vaccine and have had the opportunity to ask questions. I am aware that the course of vaccination requires one month and six month interval injections to confer immunity and that I am responsible to report to Health Services for the vaccination.

My potential on the job exposure to human blood or body fluids is most likely from (check all that apply)
□ Having the responsibility to clean up blood spills
□ Working in a lab with human cells, or tissue, or blood, or body fluids, etc.
□ Providing first aid to students or individuals at the College
□ Other (please specify) _____

_____ _____
Signature of Employee Date

*Individuals allergic to yeast or who are pregnant need to be counseled by their physician and have their physician's documentation of approval to receive the vaccine

Hepatitis B Vaccine
Dose 1. Date: _____ Site _____ Lot # _____ Given By _____

Dose 2. Date: _____ Site _____ Lot # _____ Given By _____

Dose 3. Date: _____ Site _____ Lot # _____ Given By _____

HEPATITIS B VACCINE DECLINATION

Name: _____Date of Birth: _____

SSN: _____Department and Job Title: _____

If you have already received the series of three Hepatitis B

Vaccines, please sign here:

_____ _____

Employee Signature Date

_____ _____

Witness Date

Complete this section if you do not want the Hepatitis B Vaccine.

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

Employee Signature: _____ Date: _____

Witness: _____ Date: _____

Bloodborne Pathogens Exposure Report Form

Employee _____ DOB _____

1. When the incident occurred (date and time) _____
2. Where the incident occurred_____
3. What potentially infectious materials were involved - Type of fluid (i.e., blood)

   _____
4. The route(s) of exposure _____

   _____
5. The circumstances under which the exposure incident occurred (Type of work being done)

   _____

   _____
6. How the incident was caused (Accident, Unusual circumstance (equipment malfunction, etc.), Description of the device being used)

   _____

   _____

   _____
7. Identification and documentation of the source individual, unless the employer can establish that identification is infeasible or prohibited by state or local law (HIV and HBV status of the source, if known)

   _____

   _____

Bloodborne Pathogens Educational Training Record

Date:	**Presenter** (including qualifications):
Training Summary: See attached	**Format** (i.e., video, classroom lecture, handouts, etc.):

Attendees

Name	**Job Title**

Muhlenberg College Sharps Injury Log

Date of Incident	Department or work area where the exposure incident occurred	Location of Stick (i.e., arm, leg, finger, etc.)	Type and Brand of Needle/ Device Used	Explanation of how the Incident Occurred

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Additional Reference	**OSHA 1910.134**	
Policy Title:	**Respiratory Protection Program**	**Policy No. 15-ix**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 4**
Definition:		

Policy:

No employee of Muhlenberg College shall be issued or required to wear a respirator. Any hazards requiring the use of a respirator will be contracted to a non-College company. Any contractor will be approved for such use under the criteria set forth by the Occupational Safety and Health Administration (OSHA).

Permissible Practice

In the control of those occupational diseases caused by breathing air contaminated with harmful dusts, fogs, fumes, mists, gases, smokes, sprays or vapors, the primary objective shall be to prevent atmospheric contamination. This shall be accomplished as far as feasible by accepted engineering control measures (e.g., enclosure or confinement of the operation, general and local ventilation) or administrative control measures (e.g., substitution of less toxic materials).

Also permitted is the use of NIOSH 42 CFR 84 standard approved particular respirators under the conditions as recommended for use up to ten times the Permissible Exposure Limit (PEL) or the appropriate standard.

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Additional Reference	**OSHA 1926.500-.503**	
Policy Title:	**Fall Protection Program**	**Policy No. 15-x**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 3**
Definition:		

Policy:

Muhlenberg College recognizes that "falls" or being hit by falling materials can be dangerous, even potential lethal to employees. Because of a commitment to provide a safe and healthful work place, and to comply with OSHA safety standards (29 CFR 1926.500-503), this Fall Protection Plan is implemented as college policy.

I. General Requirements

A. The following is a list of fall protection guidelines:
B. All fall protection equipment shall meet or exceed the appropriate American National Standards Institute (ANSI)n standard.
C. Ladders, walkways, work platforms, and open-sided floors shall comply with OSHA regulations or fall protection must be used.
D. All personnel exposed to a potential free fall from six feet or higher, must receive fall protection training.
E. Safety approved aerial lifts may be used for working at heights, however, all operators must wear approved fall protection and be secured by a lanyard when the working height is six feet or higher.
F. Lanyards must be attached to prevent a free fall of six feet.
G. Approved attached points shall be established and marked in areas where lifelines and lanyards are used regularly. Lifeline attached points shall be capable of supporting a load of 5,400 pounds.
H. All fall protection equipment shall be visually inspected for defects prior to each use. If there is evidence of excessive equipment wear or deterioration or if mechanical malfunction is detected, the item shall be removed from service.
I. Fall protection equipment and assemblies shall be inspected according to the manufacturer's recommendations. Each belt and lanyard shall bear manufacturer identification marks.
J. Safety belts or lanyards that have been subjected to an impact load shall be destroyed. Load testing shall not be performed on fall protection equipment
K. Personnel requiring the use of fall protection equipment shall employ the "Buddy System" or have an observer to render assistance when and if required. A trained observer must be present when personnel are performing work involving confined space entry.

II. Protection from falling objects

When an employee is exposed to falling objects, the employer shall have each employee wear a hard hat and shall implement one of the following measures.

A. Erect toeboards, screens, or guardrail systems to prevent objects from falling from higher levels; or
B. Erect a canopy structure and keep potential fall objects far enough from the edge of the higher level so that those objects would not go over the edge if they were accidentially displaced; or
C. Barricade the area to which objects could fall, prohibit employees from entering the barricaded area, and keep objects that may fall far enough away from the edge of a higher level so that those objects would not go over the edge if they were accidentally displaced.

III. Training

Muhlenberg College shall provide training for all employees at risk from fall hazards.

A. Training must be conducted by a qualified person.
B. Written certification records of all employee training must be maintained.
C. Employee retraining should take place whenever changing circumstances require it, or there is reason to believe an employee does not understand the requirements.

Muhlenberg College's fall protection programs will be implemented to protect employees where the possibility of an employee falling from a height of four feet or more above a lower level exists

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Additional Reference	**PA Department of Agriculture Act 36**	
Policy Title:	**Integrated Pest Management Policy**	**Policy No. 15-xi**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 4**
Philosophy:		

I. Purpose

Structural and landscape pests pose significant problems to people, property, and the environment. Pesticides can also pose risks to people, property, and the environment. It is therefore the policy of Muhlenberg College to incorporate Integrated Pest Management (IPM) procedures for control of structural and landscape pests.

II. What is Integrated Pest Management

IPM is an effective and environmentally sensitive approach to pest management that relies on a combination of common-sense practices. IPM programs use current, comprehensive information, in combination with the available pest control methods, is used to manage pest damage by the most economical means, and with the least possible hazard to people, property, and the environment. IPM programs take advantage of all pest management options possible including, but not limited to, the judicious use of pesticides. Understanding pest needs is essential to implementing an IPM effectively. Pests seek habitats that provide basic needs such as air, moisture, food, and shelter. Pest populations can be prevented or controlled by creating inhospitable environments, by removing some of the basic elements pests need to survive, or by simply blocking their access into buildings. Pests may also be managed by other methods such as traps, vacuums, housekeeping procedures, or pesticides. An understanding of what pests need in order to survive is essential before action is taken.

III. What are pests

Pests are populations of living organisms (animals, plants, or microorganisms) that interfere with use of the College for human purposes. Strategies for managing pest populations will be influenced by the pest species and whether that species poses a threat to people, property, or the environment. Pests will be managed to:

- Reduce any potential human health hazard or to protect against a significant threat to public safety
- Prevent loss of or damage to College structures or property

- Prevent pests or diseases associated with the pests from spreading into the community, or to plant and animal populations beyond the campus
- Enhance the quality of life for the campus community

IV. IPM Procedures

IMP procedures will determine when to control pests and whether to use mechanical, physical, chemical, cultural, or biological means. IMP practitioners depend on current, comprehensive information on the pest and its environment and the best available pest control methods. Applying IMP principles prevents unacceptable levels of pest activity and damage by the most economical means and with the least possible hazard to people, property, and the environment.

The choice of using a pesticide will be based on a review of all other available options and a determination that these options are not acceptable or are not feasible. Selected non-chemical pest management methods will be implemented whenever possible to provide the desired control. It is the policy of Muhlenberg College to utilize IMP principles to manage pest populations adequately. The full range of alternatives, including no action, will be considered.

When it is determined that a pesticide must be used in order to meet important pest management goals, the least hazardous* material will be chosen. The application of pesticides is subject to the Federal Insecticide, Fungicide, and Rodenticide Act (7 United States Code 136 et seq.) Muhlenberg College policies and procedures, Environmental Protection Agency regulations in 40 Code of Federal Regulations, Occupational Safety and Health Administration, Pennsylvania State, Lehigh County, and City of Allentown regulations.

V. Record Keeping

Records of pesticide use shall be maintained in the Plant Operations office to meet the requirements of College policies and governmental regulatory agencies.

VI. Pesticide Storage and Purchase

Pesticide purchases will be limited to only approved** registered [available to State certified pest control operators] or unregistered [available to the general public] products. Pesticides will be stored and disposed of in accordance with the EPA-registered label directions and all Federal and State regulations. Pesticides will be stored in appropriate, secure sites, not accessible to unauthorized personnel. Pesticides utilized by any Muhlenberg College authorized*** contractors will be brought on campus, applied, and removed from the campus on the day of use.

VII. Pesticide Applicators

Pesticide applicators must be educated and trained in the principles and practices of IPM and the use of pesticides approved by the Muhlenberg College IPM program and they must follow regulations and label precautions.

*Precautionary statements are required on all pesticide labels. Signal words indicate the level of acute toxicity; the hazard to humans posed by the pesticide product and the "caution" level of acute toxicity pesticides/herbicides is the preferred level for campus use. Every label bears the child hazard warning: "Keep Out of Reach of Children".

**Approved registered or unregistered products will have been reviewed by Muhlenberg College Plant Operations staff. and approved for use on campus in accordance with all Federal, State, County and City regulations.

***An authorized contractor will have been investigated by Muhlenberg College Plant Operations. State certification, business licenses and appropriate insurance will have been verified and the contractor must maintain all appropriate certifications, licenses and insurance to remain authorized.

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Additional Reference	**OSHA 1926.650-.652**	
Policy Title:	**Excavation, Trenching and Underground Utility Lines**	**Policy No. 15-xii**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 4**
Definition:		

Policy:

This policy shall serve as a guide to safely handle installations, such as sewer, telephone, fuel, electric, data, water lines, or any other underground installations that reasonably may be expected to be encountered during excavation work at Muhlenberg College. This shall include work being done onsite, which are considered as "private" lines and the proper marking of those lines prior to work commencement. See OSHA, 29 CRF 1926.651-652. Utility companies or owners shall be contacted using the Pennsylvania "One-Call" system and advised of proposed work, and asked to establish the location of the utility underground installations prior to the start of actual excavation within the time period required by state law.

II. Scope

This policy applies to any College employee or contractor, who is performing work inside an excavation or trench that is four (4) feet or deeper. These requirements only apply to excavations less than twenty (20) feet in depth. Any excavation exceeding 20' in depth must have an approved protective system designed by a registered professional engineer.

III. General Requirement

Muhlenberg College personnel or contractor engaged in excavation or trenching work shall be protected from hazards associated with this work through the application of shoring, sloping, or other methods as approved by OSHA standards.

A. All surface encumbrances that create a hazard to employees and other affected persons shall be removed or supported, as necessary, to safeguard persons in the area.
B. All trenches must have means of egress from excavations. These means of egress include:
    1. stairways
    2. ladders
    3. ramps
        - these egress devices are required whenever the trench exceeds 4' in depth
        - the ladders or egress can not be spaced greater than 25' apart

4. trenches must be protected from vehicular traffic by any or a combination of the following
    - police officer or flag person
    - barricades, fences or other approved device deemed acceptable
5. in certain instances, trenches and other excavations are considered confined spaces, see Muhlenberg College Confined Space Policy
6. water entering a trench must be controlled and proper protection implemented before employees enter
7. If adjoining buildings, walls, structures or similar are endangered by excavation operations, support systems such as bracing, shoring or underpinning shall be provided for the protection of the structure and the employees entering the trench
8. Excavations below the level of a building or footing is prohibited, unless a structural engineer has determined that it can and has been made structurally sound.

9. A support system, such as underpinning, shall be provided for the safety of the employees and the stability of the structure; or
    - The excavation is in stable rock
    - A registered professional engineer has approved the determination that the structure is sufficiently removed from the excavation so as to be unaffected by the excavation activity, or
    - A registered professional engineer has approved the determination that such excavation work will not pose a hazard to employees
10. Sidewalks, paving and other similar structures shall not be undermined unless a support system or another method of protection is provided to adequately protect employees from possible collapse of the structures
11. If loose soil poses a possible hazard to the employees, adequate protection must be incorporated into the excavation. Protection shall include scaling to remove loose material, installation of protective barricades at intervals, as necessary on the face to stop and contain falling material; or other means that provide equivalent protection
12. Employees shall be protected from excavated or other material or equipment that could pose a hazard by falling or rolling into excavations. Protection shall be provided by placing and keeping material or equipment at least 3 feet from the edge of the excavation.
13. Adequate barriers must enclose the trench or excavation to prevent unauthorized entry and demarcation. Trench covers shall be used at the discretion of the Project Manager
    - The contractor responsible for the site shall make sure that the fencing is adequate and properly erected, without opening, before leaving the site.
    - If the fence has fallen, collapsed, or has opened up after the contractor has left, the contractor will be called back (at the discretion of Muhlenberg College) at their expense to re-erect the fencing
14. Excavations shall be protected against cave-in, except when;

- The excavation is in stable rock
- The excavation is less than 4’ in depth and there is no potential for cave-in
- Protective systems such as trench boxes, sloping and shoring have been installed that are intended to properly and adequately protect the employees in the trench
    - If sloping is used as the method of employee protection, then it shall be done in accordance with the following requirements stipulated in the OSHA requirements, 29 CFR 1926.651 and subpart P of OSHA, appendix A-F, or as designated by a registered professional engineer
        - If trench boxes or shoring is used, it shall be installed by manufacturers specifications. If deviation from the manufacturers specification must be performed, the contractor shall receive (in writing) from the manufacturer that the deviation is permissible and that the employees safety will be maintained.

        - If the excavation has been designed and approved by a registered professional engineer, a copy of the approval must be received by the contractor and the Muhlenberg College Project Manager

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Policy Title:	**Working in Adverse Weather**	**Policy No. 15-xiii**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 2**
Definition:		

Policy:

As a residential college it is the policy of Muhlenberg College to remain in operation and to continue services and schedules regardless of adverse weather conditions, transportation or utility problems, or general emergency situations. Exceptions to the policy may be made on a case by case basis and can include decisions to reduce services and/or staff levels.

II. Scope

There is a wide variation in where individuals live and work and in the need for their being at work at any particular time. Staff members and the College share, however, an interest and concern both for getting the work done and protecting the well-being of those performing the work..

III. Adverse Weather Conditions for certain activities

- When working at heights or lifting objects to heights when wind speeds are in excess of 20 mph
- When relative humidity is at 60% or great and air temperature is at 95°F/35°C or greater
- When wind speeds are 20 mph or greater and air temperature of 10°F/-12°C or lower (even higher wind and temperature levels can cause employees to be overcome)

IV. Recommendations

- Employees should dress appropriately to the weather conditions.
- Employees should pace their physical activity appropriate to extreme hot or cold weather due to potential health problems due to exertion.

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Additional Reference	**OSHA 1910.151-.152**	
Policy Title:	**Availability of First Aid and CPR**	**Policy No. 15-xiv**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 2**
Definition:		

Policy:

It is the policy of Muhlenberg College to create and maintain a safe and healthful work place free from recognized hazards that may cause harm to faculty, employees, students and visitors.

II. Scope
The College encourages departments to make first aid kits available to employees for treatment of minor cuts and scratches. The availability of first aid supplies is not to be used as a substitute for obtaining treatment.

Employees of the College have readily available access to medical treatment through the College Health Center, the College EMS unit or designated, approved worker's compensation health care facilities.

Emergency medical treatment, including CPR treatment by qualified personnel, is available through College Health Center, College EMS, and Office of Campus Safety.

III. Responsibility
Each College employee is required to comply with occupational safety and health regulations, departmental policies and procedures that apply to their own actions and conduct on the job, and to report accidents, injuries, and unsafe conditions to his or her supervisor. Faculty and staff are also responsible for the safety of students and employees under their supervision.

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Policy Title:	**Safety Rules and Enforcement Procedures**	**Policy No. 15-xv**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 3**
Definition:		

Policy:
Written safety rules are defined in multiple campus documents such as Standard Operating Procedures, essential functions, job descriptions, contracts, resident life programs and policies, Health and Safety policies, Human Resource programs and policies, specific department programs and policies, Finance and Administration programs and policies, and College programs and policies.

All employees are required to follow these written safety procedures.

Corrective action processes are instituted to enforce policies, procedures or goals. Refer to the pertinent employee handbook for additional information regarding disciplinary measures and protocol. All handbooks are accessible via the College website. Follow the intralink to Policies and Procedures. Each handbook can be found under the heading Faculty and Staff. Most relevant sections of each handbook are as follows:

Handbook for Faculty: Section 3.9.1.2
Handbook for Staff: Section 1.8
Trustees handbook for managers: Section 3.4

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Additional Reference	**OSHA 1910.33-.39**	
Policy Title:	**Emergency Action Plan**	**Policy No. 15-xvi**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 6**
Definition:		

Policy:

CRISIS RESPONSE

The information provided are risk reduction strategies but they are not foolproof. There are no guarantees and nothing works all the time. It is our hope that these tips be used by you as a preparatory step towards your overall safety and in formulating your individual safety plan. While all scenarios cannot be covered these are some we feel could be helpful to you.

FIRE AND/OR EXPLOSION

In the event of a fire or explosion:

A. Sound any available fire alarms.
B. Immediately call Campus Safety at 3110 or 3112. Give your name, location, and the extent of the problem.
C. If the fire is small, attempt to extinguish it with a fire extinguisher.
D. If the fire is large, evacuate the building via the nearest fire exit. *

Additional suggestions:

A. Do not panic.
B. Do not run or use excited motions.
C. Use stairways. Do not attempt to use elevators; they will shut down during a fire.
D. Know in advance the locations of at least two fire exit routes.
E. Be on the lookout for signs of smoke and fire.
F. Know the locations of fire extinguishers and how to use them.
G. Prevent fires through good housekeeping habits.
H. If you use a fire extinguisher remember **P-A-S-S**:

Pull the pin
Aim the nozzle towards the fire
Squeeze the handle
Sweep the base of the fire

I. Never turn your back on what you extinguished walk away backwards
J. Notify Campus Safety – even if the fire is extinguished

* Upon evacuation of academic buildings, building occupants should gather in the following areas:

If the academic building is on the North side of Chew St. (College Center, Seegers Union, etc.), occupants should gather on the Front Lawn.

If the academic building is on the South Side of Chew St. (Trexler Library, Center for the Arts, Trexler Pavilion), occupants should gather on the lawn area to the east of the Library.

INJURY OR ILLNESS

Do not move an injured or ill person unless it appears to be a life-threatening situation.

Call or, if possible, have another person call the Campus Safety Office at 3110 or 3112. Provide the dispatcher with as much information as possible regarding the nature of the injury or illness, and state whether or not the victim is conscious, etc. The Campus Safety Office will arrange for an ambulance if required and will also notify the Student Health Center and/or other emergency agencies.

Return to the victim. Administer first aid or CPR if you are knowledgeable and you have such training. Keep the victim as comfortable as possible.

Remain with the victim until the Campus Safety Officer arrives.

CRIME IN PROGRESS / CIVIL DISTURBANCE

Do not attempt to apprehend or interfere with the criminal except for self-protection.

Telephone Campus Safety at 3110 or 3112. Give your name, location and department. Advise the dispatcher of the situation and, if you are safe, remain where you are until contacted by an officer.

If safe to do so, attempt to get a good description of the criminal. Note height, weight, sex, ethnic origin, approx. age, clothing, method and direction of travel, and name if known. All of this takes only a few seconds to notice and is of utmost help to the investigating officers. If the individual enters a vehicle, note the license number, make and model, color and any other noticeable characteristics.

In the event of civil disturbance continue with your routine as much as possible. If the disturbance is outside, stay away from doors and windows. Unless threatened with physical harm, do not leave your work location until advised by a College official and/or their designee.

Do not interfere with those creating the disturbance or with law enforcement authorities on the scene.

EARTHQUAKE

If you are in a building, move away from windows and try to position yourself in a doorway or under a desk or table.

When the tremors cease, or they are very slight, * evacuate the building in an orderly fashion.

Use stairways - not elevators - during evacuation.

If possible, Campus Safety personnel will assist in the evacuation of building occupants into open areas.

Avoid positioning yourself under or next to objects that may topple, such as utility poles, trees, etc.

Reassemble in a location as directed by your supervisor or by a Campus Safety Officer. Attendance will be taken to assure that all personnel are accounted for outside of your facility.

Should you require evacuation assistance, please telephone the Campus Safety Office at 3110 or 3112.

* Upon evacuation of an academic building, building occupants should gather in the following areas:

If the academic building is on the North side of Chew St. (College Center, Seegers Union, etc.), occupants should gather on the Front Lawn.

If the academic building is on the South Side of Chew St. (Trexler Library, Center for the Arts, Trexler Pavilion), occupants should gather on the lawn area to the east of the Library.

CHEMICAL OR RADIATION SPILL

Call the Campus Safety Office at 3110 or 3112 and give the following information:

A. Type of incident (chemical spill, radiation hazard, etc.)
B. Type of chemical, if known.
C. Whether or not students are injured.
D. Extent of injuries.
E. Location of incident.
F. Name and title of caller (student, technician, professor, etc.)

*** Pull the alarm and evacuate the building.**

Should the spill occur outside your building:

A. Notify the Campus Safety Office of the incident and type of chemical, if known.
B. Remain in your building unless ordered by Campus Safety to evacuate.
C. Close all windows and turn off all outside air intake vents or fans.
D. Leave your building only when told to do so, and travel away from the spill and in an upwind direction, if possible.

*** Upon evacuation of an academic building, building occupants should gather in the following areas:**

If the academic building is on the North side of Chew St. (College Center, Seegers Union, etc.), occupants should gather on the Front Lawn.

If the academic building is on the South Side of Chew St. (Trexler Library, Center for the Arts, Trexler Pavilion), occupants should gather on the lawn area to the east of the Library.

BOMB THREAT

Whenever a bomb threat is received over the phone, remain calm and write down the following information:

A. The exact words of the caller.

B. Location of the bomb.
C. When the bomb is supposed to go off.
D. Type of bomb, how it will detonate and who placed it, if stated.

Write down a description of the caller's voice:

A. Male, female, child or adult?
B. Any background noise?
C. Particular accent or inflection in the caller's voice.
D. Your mental picture of the caller.

Notify the Campus Safety Office, as quickly as possible, by phoning 3110 or 3112.

Evacuation procedure:

A. Unless you perceive the situation as life threatening, in which case you should evacuate immediately, wait for Campus Safety to arrive at the building. **DO NOT** activate the fire alarm to evacuate the building

B. Take note of "suspicious" items as you exit the building but to not touch or move them if they do not belong to you.

C. If an entire building is to be evacuated, Campus Safety normally will enter each classroom, lab, or work area and verbally inform occupants of the situation and ask them to evacuate in an orderly fashion. Remove only Items that belong to you and do not turn on or off any devices or lights. Do not pull the fire alarm to evacuate the building.

C. Assemble in a location outside your building as assigned by your work supervisor or the Campus Safety Officers.

Responsibility of individuals in classroom or lab:

A. If directed by Campus Safety, ask room occupants to pick up all of their belongings and leave in an orderly fashion. Remove only items that belong to you and do not turn on or off any devices or lights. Do not pull the fire alarm to evacuate the building.

B. Make a survey or the room before leaving it to detect any piece of equipment, article or object, which is not ordinarily there, making certain not to touch the unknown object.

C. Relay this information to Campus Safety after leaving the building.

SHOOTING PROTOCOL

If you witness any armed individual on campus at any time, immediately contact Muhlenberg College Department of Campus Safety at extension 3110. If the individual is acting in a hostile or belligerent manner, contact 911 and then call the Department of Campus Safety. There are no easy answers for what to do if confronted by a shooter. However it is suggested that you do not provoke the individual, avoid making eye contact with them, avoid making any sudden movements or gestures, and create space between you and them but don't just turn and run. If you find yourself confronted by the shooter remain calm and talk in a low tone of voice.

If the shooter is outside the building:

A. Move to a room in the building if safe to do so and remain there until an "all clear" instruction is given by an authorized known voice.

B. Turn off all the lights and close and lock all windows and doors. If the door does not have a lock attempt to barricade the door shut and take shelter inside the room as most active shooters will choose a path of least resistance. Stay clear of windows and keep out of the line of site of windows especially those doors with windows. If you can do so safely, get on the floor and out of the line of fire.

C. If the staff or students do not recognize the voice that is giving instruction, they should not change their status.

D. Unknown or unfamiliar voices may be false and designed to give false assurances.

If the shooter is inside the building:

A. If it is possible to flee the area safely and avoid danger, do so.
B. Contact 911 and Security (3110) with your location if possible.

C. If flight is impossible, lock all doors and secure yourself in your space. If the door does not have a lock attempt to barricade the door shut and take shelter inside the room as most active shooters will choose a path of least resistance. Stay clear of windows and keep out of the line of site of windows especially those doors with windows.

D. Get down on the floor or under a desk and remain silent.
A. Get students on the floor and out of the line of fire.
B. Wait for the "all clear" instruction.

If the shooter comes into your class or office - there is no one procedure the authorities can recommend in this situation. Some suggestions are:

A. If you are seated remain seated as standing may be perceived as a threat.
B. Attempt to get the word out to other staff if possible, and call 911 if that seems practical.
C. Use common sense. If hiding or flight is impossible, attempt to negotiate with the individual.
D. Attempting to overcome the individual with force is a last resort that should only be initiated in the most extreme circumstances.
E. . Remember, there may be more than one active shooter.
F. Wait for the "all clear" instruction.
G. In a shooting situation, the Muhlenberg College Department of Campus Safety is in charge until Allentown Police officers are on the scene.
H. Be careful not to make any changes to the scene of the incident since law enforcement authorities will investigate the area later.
I. In case you must flee, do not go to the normal gathering site for your building. Get as far away from the shooting scene as possible and then contact authorities.
J. Regardless of the location of a shooter incident, response personnel (i.e. Campus Police and other law enforcement agencies) will be charged with neutralizing the situation. This means that the response personnel must bypass anyone who is not the shooter. If you encounter response personnel do not approach them and engage in physical contact or

request assistance in providing aid to an individual as this action will slow the response of law enforcement to neutralize the situation so aid can be rendered to all, it creates more stress to the responders and others present, and it could cause an accidental discharge. When you see law enforcement responding to a shooter situation move to the side, if in a hall get close to the walls, and put your hands where they can be seen. If you have information about the shooter (i.e. description, identity, location, and number of shooters) advise the responding officers that you have information and provide it to the police as quickly and accurately as possible.

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Policy Title:	**Automated External Defibrillator (AED)**	**Policy No. 16**
Prepared by:	**Insurance Program Manager**	**Date: September 2005**
Applies to:	**All Locations**	**Page 1 of 2**
Definition:		

Policy:
An automated external defibrillator (AED) is used to treat victims who experience sudden cardiac arrest (SCA). It is only to be applied to victims who are unconscious, without a pulse and not breathing. The AED will analyze the heart rhythm and advise the operator if a shockable rhythm is detected. If a shockable rhythm is detected, the AED will charge to the appropriate energy level and advise the operator to deliver a shock.

System Owner: Muhlenberg College Safety Committee
Responsibilities:

- Coordination of training for emergency responders within the following departments:
  - Campus Safety
  - Health Services
  - Athletics
  - Muhlenberg College EMS
- Coordinating equipment and accessory maintenance
- Revision of this procedure as needed
- Monitoring the effectiveness of this system

Applicable documents:

- Muhlenberg College Occupational Exposure to Bloodborne Pathogens Exposure Control Plan
- Muhlenberg College AED procedure

Medical Control
The medical advisor of the AED program is responsible for:

- Providing medical direction for use of AED(s)
- Writing a prescription for AED(s) if applicable
- Reviewing and approving guidelines for emergency procedures related to use of AED(s)

AED users
The AED may be used by:

- Members of Muhlenberg College EMS, Campus Safety, Health Services, and Athletics Department who have successfully completed training
- Any individual (volunteer responder) in accordance with Volunteer Responder Responsibilities.

Muhlenberg College Campus Safety, EMS, Health Services, & Athletic Trainers Responsibilities:

- Activating the internal emergency response system and providing prompt basic life support including AED and first aid according to training and experience
- Understanding and complying with the requirements of this procedure

Volunteer Responder Responsibilities:

- Anyone can, at their discretion, provide voluntary assistance to victims of medical emergencies. The extent to which these individuals respond shall be appropriate to their training and experience. These responders are encouraged to contribute to emergency response only to the extent that they are comfortable. The emergency medical response of these individuals may include CPR, AED or medical first aid.

Equipment

The AED and first aid emergency care kit will be brought to all medical emergencies. The AED should be used on any person who is at least 8 years of age and displays ALL the symptoms of cardiac arrest. The AED will be placed only after the following symptoms are confirmed:

- Victim is unconscious
- Victim is not breathing
- Victim has no pulse and/or shows no signs of life

Location of AED(s)

The AEDs are located in:

- #1: Life Sports Center: East end of the Solar Corridor on the North Wall
- #2: Life Sports Center: Third Floor – West end by the Cardiovascular Room
- #3, #4, #5: Life Sports Center: Lower Level – Athletic Training Room. There are three units housed here which are considered “mobile units”
- #6: Life Sports Center Health Services Office Treatment Room
- #7: Campus Safety Patrol Vehicle
- #8: MC EMS first response vehicle during the Fall and Spring Semesters. During summer, this AED unit is housed in the Campus Safety Patrol Vehicle #3
- #9: East end of walkway that connects Baker Center for the Arts and the Trexler Pavilion for Theatre and Dance
- #10: Main Lobby of Moyer Hall
- #11: Fireside Lounge area of Seegers Union

Each AED will have one set of defibrillation electrodes and one spare set of electrodes with the AED. One resuscitation kit will be included with the AED. This kit contains two pair latex-free gloves, one razor, one set of trauma shears, and one facemask barrier device.

Training

- Campus Safety, Athletic Trainers, Health Center Nurses and Medical Emergency Responders will renew CPR and AED training at least once every 2 years.

Medical Response Documentation

Post Event Documentation: It is important to document each use of the medical emergency response system. This information will be maintained in the patient's confidential medical file.

- An AED data sheet shall be completed by an emergency responding member for each event requiring use of the AED.
- AED use electronic information will be downloaded by the responding ambulance service.

Equipment Maintenance

All equipment will be inspected and maintained at least annually by an appropriate licensed contracted service

System Verification and Review

The medical emergency response system is ultimately successful if necessary medical assistance is provided to victims in a timely and safe manner. Since actual use of this system procedure is expected to be very infrequent, other measures of effectiveness are required.

Monthly System Check

- The Muhlenberg College Lead Electrician or designee will check the AEDs. Original records will be maintained in the Lead Electrician's Office, with duplicate copies sent to the Director of Health Services for review and retention of records.

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Policy Title:	**Emergency Egress**	**Policy No. 17**
Prepared by:	**Insurance Program Manager**	**Date: May 2005**
Applies to:	**All Locations**	**Page 1 of 2**
Definition:		

Purpose

Provide clear, exit access for students, faculty, and staff to safely exit campus buildings in case of fire or other emergency. Minimize the hazards to firefighters when doing search and rescue or trying to reach and extinguish fires within College buildings.

Program

The following policy is an effort to mitigate the fire safety concerns in campus building.

1. No storage of any type will be allowed in any part of the means of egress of buildings.
2. No storage or furniture of any type will be allowed in exit stairwells.
3. Corridor storage is limited to items used in daily operations or non-combustible items stored in appropriate storage cabinets or shelving.
4. Egress paths are to be kept fully available at all times with no hindrances permitted in exit aisles, exit corridors, on doors or any other travel route.
5. The minimum clear width of aisles shall be sufficient to provide egress capacity in accordance with the National Fire Prevention Association Life Safety Code 12.2.5.6.1-3 but shall not be less than the following:
    a. 42" for level or ramped aisles having seating on both sides or 36" where the
    aisle does not serve more than 50 seats.
    b. 36" for level or ramped aisles having seating on only one side.
6. Storage should not obstruct safety showers, eyewashes, fire extinguishers, exit doors, fire alarm pull stations, electrical panels, or any other safety feature of Muhlenberg College buildings.
7. Flammable liquids or other hazardous material storage will not be permitted in any means of egress including corridors and exit stairwells.
8. All equipment/storage in any corridor should be clearly labeled with the owners name, campus address and campus phone number. This information will assist College personnel in the event of an emergency in the building.
9. Questions and requests for guidance concerning this policy should be directed to the Campus Safety office and/or the Campus Safety Committee.

Monitoring Procedures

Campus safety personnel will conduct periodic surveys of all means of egress components. Items stored in means of egress areas contrary to this policy will be addressed in the following manner.

1. Items found to be stored contrary to the means of egress policy will be tagged as a
   fire hazard. Every effort will be made to contact the owner of the item(s). Owners of the items will have a period of time to properly store the items according to the following schedule.
   a. combustible or non-combustible trash – 2 days
   b. flammable liquids or other hazardous material – 2 days
   c. surplus equipment – 7 days

Any items encroaching on the minimum required egress path (44") will be moved immediately. Similarly, any item found to be either hazardous or blocking a safety feature will be move immediately. Notices and inventories of removed items will be provided to the appropriate College department/office.

2. Disposition of equipment, other than trash, that is not properly stored after the established grace period will be discussed with the appropriate representatives of the department/office involved.
   a. Trash will be disposed of.
   b. Surplus equipment will be stored or disposed of as appropriate.
   c. Hazardous materials will be moved to an appropriate storage area.

Office, Corridors and Emergency Egress

In order to provide a safe and orderly environment for all of the College Community and to meet the requirements of the Commonwealth of Pennsylvania Fire safety Code, Campus safety conducts annual inspections of all occupied College facilities. These walk throughs are used to identify potential areas of concern relating to fire and general safety. It is the goal of the College to provide and maintain safe work areas and means of egress. The survey looks for the following items:

1. Exit doors unobstructed
2. No storage in corridors and exits
3. Stairs not blocked
4. Fire extinguishers and fire alarm pull stations accessible
5. Stairways and corridors adequately lighted
6. Tripping hazards
7. Blockage of fire extinguishing equipment
8. Overloading of electrical duplex outlets
9. Use of electrical extension cords
10. Covered or disconnected fire and smoke alarms

Muhlenberg College

ACCIDENT & ILLNESS PREVENTION PROGRAM POLICY

Policy Title:	**Aerial and Lift Safety**	
Prepared by:	**Insurance Program Manager**	**Date: February 2012**
Applies to:	**All Locations**	**Page 1 of 7**
Definition:		

Introduction:

Aerial / Scissor lifts pose a serious safety hazard if not used properly. It is the policy of Muhlenberg College to train employees on the hazards of operating aerial / scissor lifts and to ensure such equipment is safely maintained.

Purpose:

This program has been established to ensure the safe operation of aerial and scissor lifts. ensure that employees understand and comply with safety standards related to all lifts.

Scope & Applicability:

This program applies to all employees of Muhlenberg College and covers every type of aerial / scissor lift used by employees of Muhlenberg College.

Policy:

1. All potential lift operators must be trained and certified prior to operating and aerial lift as part of their duties as an employee of the College.

2. Operators shall review and follow the manufacturer's operating manual. A copy of the manual must be located on the equipment.

3. Only certified operators shall operate an aerial / scissor lift.

4. Every aerial/scissor lift must undergo a pre-use inspection prior to use on each shift.

5. Pre-use inspections must be documented using an appropriate checklist for the aerial/scissor. Refer to the manufacturer's inspection requirements for complete inspection details.

6. Completed checklists will be kept on file for a period not less than a year.

7. The pre-use inspection will identify conditions that could affect the safe use of the aerial/scissor lifts. If any unsafe conditions exist, the aerial/scissor lift shall be removed

from service. In order to remove an aerial/scissor lift from service, the operator shall remove the keys and place an "Out of Service" tag near the operator control panel.

8. Operators must immediately report any unsafe aerial/scissor lift conditions to their supervisor. When an aerial/scissor lift has been removed from service, the operator must give the keys to the supervisor for safekeeping. The supervisor is then responsible for ensuring the necessary arrangements are made for repair.

9. Only authorized personnel or service providers shall perform aerial/scissor lift repairs and adjustments. All replacement parts shall be the same design as the original or an equivalent design as designated by the manufacturer.

10. Battery Charging, Filling and Fueling:

    a. Charging is permitted only in designated areas.

    b. Warning signs shall be posted at battery charging locations that state "Caution-battery charging station, No Smoking or Open Flames" (or equivalent).

    c. Adequate ventilation must be present to avoid the build-up of hydrogen gas during battery charging.

    d. A 10 lb ABC fire extinguisher must be located within 20 feet.

    e. A means to protect the charging apparatus from damage from trucks must be provided.

    f. When filling the water level of batteries the following personal protective equipment (PPE) at a minimum must be worn: Safety goggles or face shield w/ safety glasses, acid resistant gloves and acid resistant apron.

    g. A properly equipped battery filling station shall have:

        i. An eyewash able to provide a 15 minute flow. The eyewash shall be located within 10 seconds walking distance of all battery filling areas.

        ii. A phone or other means of communication in the event of an emergency.

    h. Signs shall be posted at fueling locations that state: "Danger – Propane, No Smoking or Open Flames" (or equivalent).

    i. Liquid Petroleum (LP) cylinders shall only be stored outside in a secured and protected designated rack or storage area.

    j. When removing and attaching the connection to the LP cylinder, the following PPE (at a minimum) must be worn: Safety glasses and work gloves (leather or equivalent).

    k. LP cylinders shall be secured to the forklift before operating.

l. LP cylinder connections shall be checked for leaks by the sound or smell of escaping gas.

11. Fall protection equipment must be used as follows when operating aerial/scissor lifts:

12. Operators shall be secured to the anchor point provided by the equipment manufacturer by either a self-retracting lanyard or by a lanyard short enough to prevent the employee from being ejected.

13. Operators must follow manufacturer's recommendations as to which fall protection system to use.

14. Scissor lift – The guardrail system provides fall protection. If the manufacturer has installed an anchorage point, a fall protection system (restraint, positioning, personal fall arrest system) as designated by the manufacturer's instructions must be utilized.

15. Tying a lanyard off to an adjacent pole, structure, or equipment while working from an aerial lift shall not be permitted.

16. Other types of personal protective equipment (PPE), such as head, eye and hand protection, shall be worn according to the task specific personal protective equipment hazard assessment.

17. Training:

    a. Training must be completed prior to any use of the aerial/scissor lift. Certification of aerial/scissor lift operators at PSU is a three-step process consisting of classroom instruction, hands-on training and hands-on evaluation.

    b. Classroom instruction, hands-on training and hands-on evaluation can be conducted by either a competent trainer in the work unit, equipment manufacturer, safety consultant and/or a vendor who specializes in aerial/scissor lift training.

    c. Hands-on training and hands-on evaluation portions of the training can also be conducted by an employee in the department/work unit who is experienced and competent with the aerial/scissor lift. This person could be a certified operator, supervisor/manager or safety officer.

    d. EHS must approve trainers.

    e. Training must be specific to the type of aerial/scissor lift being used.

    f. Training must cover the following:

        i. The purpose and use of the equipment manuals.

        ii. That operating manuals are an integral part of the lift and must be properly stored on the vehicle.

iii. A pre-start inspection.

iv. Responsibilities associated with problems or malfunctions affecting the operation of the lift.

v. Factors affecting stability.

vi. The purpose of placards and decals.

vii. Workplace inspection.

viii. Applicable safety rules and regulations.

ix. Authorization to operate.

x. Operator warnings and instructions.

xi. Proper use of personal fall protection equipment.

xii. Hands-on operation.

18. Employees shall not be allowed to operate rented equipment unless they have been previously certified on similar equipment. Operators are also required to review the owner's manual and shall be given ample time to become familiar with the equipment and its controls before operation is permitted. The vendor is required to review equipment with the user when the user is not familiar with the type of aerial/scissor lift.

19. Trainees must successfully complete hands-on training and a hands-on evaluation before being allowed to operate an aerial/scissor lift independently. Trainees will be given adequate supervision and time to learn basic operating skills.

20. Initial operator hands-on evaluations must be completed using the checklist provided by Plant Operations.

21. Documented re-evaluation of each aerial/scissor lift operator will be completed at least once every three years using Appendix D or equivalent.

22. Re-evaluations can be conducted by an employee in the department/work unit who is experienced and competent with the aerial/scissor lift. This person could be a certified operator, Supervisor/Manager or safety officer.

23. Refresher training in relevant topics will be provided to an aerial/scissor lift operator when any of the following occur:

    a. The operator has been observed to be using the aerial/scissor lift in an unsafe manner.

    b. The operator has been involved in an accident or a near-miss incident.

c. The operator has received an evaluation that reveals the operator is not using the aerial/scissor lift safely.

d. The operator is assigned to operate a different type of equipment.

e. A condition in the workplace changes in a manner that could affect safe operation of the equipment.

24. Maintenance:

a. The manufacturer's instructions regarding maintenance must be followed. (Such instructions are typically included in the owner's manual for the aerial/scissor lifts).

b. An annual inspection is required and must be conducted by an authorized person qualified as a mechanic on the type of aerial / scissor lift or one having similar design characteristics.

c. Any aerial/scissor lift with an identified safety issue will be immediately removed from service.

d. Maintenance performed by certified aerial/scissor lift operators will be limited to replacing/disconnecting/connecting batteries, changing fuel cylinders, adding water to batteries, replacing light bulbs and replacing stickers and decals.

e. No aerial/scissor lift with a leak in the fuel system will be operated until the leak has been eliminated. Repairs to the fuel and ignition system that involve fire hazards will be conducted in a location (non-flammable) designated for such repairs.

f. Any aerial/scissor that emits hazardous sparks or flames from the exhaust system will be immediately removed from service and not returned to service until the cause has been eliminated.

g. Only replacement parts equivalent to the original parts are to be used.

25. Recordkeeping:

a. Each work unit is responsible for maintaining the following records in order to meet the requirements of this program:

b. A listing of all aerial/scissor lifts owned by the work unit.

c. A record of training which includes:

i. Name of operator.

ii. Date of classroom training.

iii. Date of hands-on training.

iv. Date of hands-on evaluation.

v. Identity of the person(s) performing the training and/or evaluation.

vi. Make and model of aerial/scissor lift.

vii. Copies of all pre-use inspection records for one year after completion.

viii. Copies of annual inspection records for at least four years.

ix. Copies of repair records for at least four years.

x. EHS is responsible for maintaining the following records in order to meet the requirements of this program:

xi. EHS will retain training records for training they have provided indefinitely.

26. Contractors are required to follow all applicable OSHA regulations and manufacturer's instructions. Contractors are not permitted to use any aerial/scissor lifts owned or rented by Muhlenberg College.

27. **Definitions**

Aerial Lifts: Any powered, mobile, vehicle-mounted device that may elevate, telescopically extend, articulate and may (or may not) rotate around a substantial axis in order to raise and support personnel to elevated job sites.

Aerial lifts include extendible boom platforms; vehicle-mounted aerial ladders; articulating, rotating boom platforms; vertical self-elevating towers; cherry pickers; bucket trucks and any other equipment built in accordance with either ANSI-A92.2 (1990), Vehicle-Mounted Elevating and Rotating Aerial Devices, or ANSI-A92.5 (1992), Boom Supported Elevating Work Platforms.

Scissor Lifts: Any powered, mobile device that has a personnel work platform which is mechanically raised vertically above the carriage by means of controls on the work platform.

This equipment is designed and fabricated according to either ANSI-A92.6 (1990), Self-Propelled Elevating Work Platforms, or ANSI-A92.3 (1990), Manually Propelled Elevating Aerial Platforms.

Anchorage: A secure point of attachment to be used with personal fall protection equipment.

Certified Operator: Certification of aerial/scissor lift operators at PSU is a three-step process consisting of classroom instruction, hands-on training and hands-on evaluation. Once the employee has successfully completed all three steps they are considered to be a certified operator.

Competent Trainer: An employee who has successfully completed a Train–the–Trainer or equivalent type of training program and is familiar with the type of

aerial/scissor lift in their work unit. A contractor or equipment vendor who has experience training aerial/scissor lift safety and operation and is familiar with the equipment is also permitted to be a Competent Trainer.

Competent Evaluator (Hands-on): An employee in the department/work unit who is experienced and competent with the aerial/scissor lift. An employee must be familiar with the equipment and its safe operation. In order to be considered competent in regards to conducting the evaluation portion of the aerial/scissor lift training, an employee must have successfully completed the classroom portion of aerial/scissor lift training. This employee could be but is not limited to a certified operator, supervisor/manager or safety officer.

Familiarization: Providing information regarding the control functions and safety devices for the aerial /scissor lift to an operator of the equipment.

Insulated Platform: A platform designed and tested to meet the specific electrical insulation ratings consistent with the manufacturer's identification plate.

Outriggers: Devices that increase the stability of the aerial lift platform and that are capable of lifting and leveling the aerial / scissor lift platform.

Rated Work Load: The designated capacity of the aerial platform as specified by the manufacturer.

Stabilizers: Devices that increase the stability of the aerial lift platform but are not capable of lifting or leveling the aerial / scissor lift platform.

References:

OSHA Standard - Vehicle-mounted elevating and rotating work platform – 29 CFR 1910.67
OSHA Standard - Aerial lifts – 29 CFR 1926.453
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