

DISTRICT/CHARTER: \_\_\_\_\_

## **INJURY AND ILLNESS PREVENTION PROGRAM**

The District maintains a written Injury and Illness Prevention Program. The program includes the following elements:

1. All employees shall be trained in the safe practices that relate to their assigned job duties. Providing safety training to employees is the obligation of the supervisor, who shall provide the training or arrange for the employee to attend in-services training sessions.
  - a) All employees shall receive training in "Body Mechanics for Safe Lifting" and the "Disaster Preparedness Plan" for their worksite.
  - b) All employees whose job duties include the use of chemicals (maintenance workers, custodians, print shop employees, specified teachers and instructional aides) are provided "Chemical Safety" training to comply with OSHA's Hazard Communication Standard. All employees required to wear a respirator are provided "Respirator Fit Testing and Training."
  - c) "Infection Control" training is provided to all employees whose job duties include a potential for contact with the body fluids of another person. Universal precautions are stressed as a means to control the transmission of bloodborne pathogens as well as other diseases. All employees whose job duties indicate a reasonable anticipation of exposure to the blood of another person will be offered the hepatitis B vaccine at no cost to themselves.
  - d) Other safety topics are covered as necessary. Some common topics are "Computer Workstation Design," "Stress Management," "First Aid/CPR" and specific training designed for disaster preparedness teams.
2. Wherever appropriate, personal protective equipment is provided. When provided, the employee is required to use it.
3. Periodic safety inspections are conducted. All employees are encouraged to report any safety hazards.
4. All work injuries shall be reported to the supervisor immediately. Work injuries are covered by Workers' Compensation. The supervisor shall investigate each injury, prepare the necessary reporting forms, and ensure that appropriate medical attention is provided. Employees should not arrange medical care themselves, unless approval to do so has been prearranged.
5. Safety hazards identified by employee reports, safety inspections, or accident investigations will be corrected promptly.
6. The Safety Committee meets at least quarterly. Employees who wish to bring a topic to the meeting may do so by contacting the Superintendent.
7. Employees who violate safe work practices may be subject to disciplinary action up to and including termination.

My signature below signifies that the Injury and Illness Prevention Program has been explained to me. I have been given the opportunity to ask questions and all my questions have been answered. I understand that all work injuries must be reported to my supervisor immediately. If I have questions or concerns about this program or job safety in general, I can speak with my supervisor, or the Superintendent.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Job Title/Worksite