



# **Appalachian College of Pharmacy Safety Manual**

**Appalachian College of Pharmacy  
Safety Policies**

## Table of Contents

### Emergency Management Plan (EMP)

I.	Emergency Management Team.....	5
	A. President	
	B. Dean of the College of Pharmacy	
	C. Safety Director/Chair of Safety Committee	
II.	Emergency Command Center (ECC).....	6
III.	Communications.....	7
IV.	Responsibilities of Employees.....	7
V.	Building Wardens.....	8

### Emergency Procedures

I.	Classroom Emergency Procedures.....	10
	A. Activation of a Fire Alarm	
	B. Power Outage	
	C. Flood	
	D. Tornado	
	E. Earthquake	
II.	Evacuation Procedures.....	10
III.	Emergency Evacuation for Persons with Disabilities.....	11
	A. General	
	B. Evacuation Options	
	C. Disability Guidelines	
IV.	Building Access.....	13
	A. General	
	B. Access Procedure	
V.	Building Lockdown Procedures.....	14
	A. General	
	B. Definition	
	C. Incident Notification	
	D. Initiation of “Lockdown” Procedure	
	E. Lockdown Procedure	
VI.	Fire Procedures.....	15
	A. “RACE”	
	B. Major, Uncontrollable Fire	
	C. Fire Evacuation Rules	
	D. Fire Extinguishers	
	E. Fire Safety & Evacuation Procedures for Individuals with Disabilities	
	F. Fire Prevention	
VII.	Violent and Criminal Behavior.....	16
	A. General	
	1. Gunfire or Discharged Explosives	
	2. Bomb Threat	
	3. Suspicious Package	
	4. Evacuation	

VIII.	Psychological Crisis.....	18
	A. General	
	B. If a Psychological Crisis Occurs	
	C. For Unusual or Potentially Dangerous Situations	
	D. Survivors/Victim Services	
IX.	Medical Emergency.....	18
	A. General	
	B. Medical Emergency Requiring Medical Treatment	
	C. First Aid	
	D. Biomedical Hazards	
	1. Purpose	
	2. Responsibility for Compliance	
	3. Exposure Determination	
	4. Method of Compliance	
	5. Post-Exposure Evaluation and Follow Up	
	6. Communication about Hazards to Employees	
	7. Recordkeeping	
	8. Evaluation and Review	
	E. Attacks	
	1. Situation	
	2. Mission	
X.	Pandemic Flu.....	25
	1. Purpose	
	2. Procedures	
	3. Communication	
	4. The Pandemic Coordinator and Response Team	
	5. Responsibilities	
XI.	Hostage Situation Policy.....	27
	A. General	
	B. Procedure	
	C. General Guidelines For Survival If Taken Hostage	
<b>Equipment &amp; Facilities</b>		
I.	Power Tools.....	29
	A. Electric Tools	
	B. Stationary Power Tools	
	C. Electric Drills	
II.	Ladders, Platforms, and Barricades.....	29
	A. Ladders	
	B. Barricades	
	C. Guards	
III.	Key & Building Security.....	30
	A. Introduction	
	B. Policy	
	C. Issuance of Keys	
	D. Lost or Stolen Keys	
	E. Return of Keys	

	F. Loaning of Keys	
	G. Records Management	
	H. Maintenance of Locking Systems	
IV.	Motor Vehicles.....	32
	A. Driver’s License Requirements	
	B. Use of College Vehicles	
	C. Accident Reports	
V.	Lifting.....	33
	A. General	
	B. Lifting Procedures	
VI.	Office Safety.....	34
	A. Responsibility	
	B. Housekeeping	
	C. Chemicals	
	D. Fire Protection	
	E. General	
VII.	Traffic & Parking Regulations.....	35
	A. Policy	
	B. Purpose	
	C. Procedure	
VIII.	Parking Ticket Issuance & Vehicle Towing.....	36
	A. Policy	
	B. Procedure	
	<b>Personal Responsibilities for Safety</b>	
	I. Individual Responsibility.....	37
	<b>Discipline</b>	
	I. Disciplinary Action for violating safety policy.....	37

**Appendices**

A. Definitions – Exposure Control Plan	F. Information & Training Record for Employees with Potential Exposure to Bloodborne Pathogens
B. Exposure Determination Form	G. Lockdown Situation Report
C. Task and Procedures Record	H. Fire Incident Report
D. Exposure Incident Investigation Form	I. Employee’s Notice of Injury
E. Employee Medical Record Checklist	

# Emergency Management Plan (EMP)

I. **Emergency Management Team (EMT):** The following list identifies, by title, the members of the EMT:

- President
- Dean of the College of Pharmacy
- Safety Director/Chair of Safety Committee

## **Administrators-in-Charge as designated by the President**

1. Dean of the College of Pharmacy
2. Safety Director
3. Chief Financial Officer

The following are the duties and responsibilities of the members of the EMT:

### A. President

The President or his designee is responsible for the overall operation and management of the Emergency Plan.

- Only the President or the Administrator-in-Charge, designated by the President, can activate the Emergency Plan.
- Direct all activities in the management of the emergency.
- Stay in contact with the leaders of the emergency services agencies and the law enforcement agencies working with the emergency.
- Responsible for the preparation and release of all public announcements.

### B. Dean of the College of Pharmacy

- Inform students, faculty, and staff of an emergency and initiate and follow emergency and evacuation procedures, as outlined in this policy.
- Coordinate and maintain communication with students and faculty during the event of an emergency

### C. Safety Director/Chair of Safety Committee

- Provide necessary vehicles and operators required to support the impending or actual emergency. First priority will be given to college vehicles and equipment.
- Inspect building for signs of structural damage and, if necessary, recommend the building be evacuated and secured.
- Furnishes emergency power and lighting systems as required.
- Provide facilities for emergency generators fueled during emergency/disaster.
- Ensure that floor plans for each building are accessible to responders.

- Ensure that the building wardens are aware of the construction and unique features of the buildings to which they are assigned.
- Ensure all emergency equipment and supplies for operating the ECC are available and operational.
- Review all fire safety inspections and coordinate any necessary corrective actions.
- Educate students and employees concerning college emergency procedures as well as evacuation procedures for their building and/or activity. This information should be shared during orientation.
- Assure that persons with disabilities have the information they need.
- Provides and equips an alternate site for the Emergency Command Center.

## **II. Emergency Command Center (ECC)**

Within thirty (30) minutes the activation of the Emergency Plan by the President or the administrator-in-charge all activities shall be coordinated out of the ECC. The purpose of the ECC is to provide, regain and maintain control of all college functions during emergency events. The ECC will monitor all activity from its location; direct the necessary support to the site and any appropriate evacuation or protective action by campus personnel.

### ECC

The President or his designee during a potential or actual emergency situation will head the ECC. The ECC shall serve as the single point for monitoring and coordinating all response activities during the emergency. Personnel shall be informed of the location of the ECC upon notification of the activation of the Emergency Management Plan.

The ECC will be restricted to the following essential personnel or their designee:

- President
- Dean of the College of Pharmacy
- Safety Director/Chair of the Safety Committee
- Director of Information Technology
- Assistant Dean of Student & Alumni Affairs
- Associate Dean of Academic & Curricular Affairs
- Maintenance Supervisor
- Clerical staff as required.

### ECC Locations

- Primary – Conference Room off the Dean’s Office in McGlothlin Hall
- Secondary – Conference Room on second floor of Garden Hall
- Tertiary – Oakwood Volunteer Fire Department

## **III. Communications**

Upon activation of the emergency plan and establishment of the ECC, an information center will be organized and operated out of the ECC to provide information regarding any incidents on campus. Updates will be provided on the College's website and through the President or his or her designee.

Various forms of communication available to campus administration may be used to communicate with the College community and public during an emergency. The forms of communication include but are not limited to:

- Telephone
- Campus Email
- Radio
- Television
- One Call Notification System
- Alertus

#### **IV. Responsibilities of Employees**

A. Every employee that supervises other employees has the following duties and responsibilities:

1. Emergency Preparedness
  - Building evacuation information shall be distributed to all employees with follow-up discussions, on-the-job training, or explanation, as required.
  - Time shall be allotted to train employees in emergency techniques, such as fire extinguisher usage, first aid, C.P.R., AED, and building evacuation drills.
  - Orienting and informing visitors of procedures to be followed in case of a building alarm or emergency.
  - Follow-up on reported safety hazards to minimize accidents.
  - Participate in drills and training as required.
2. Emergency Situation
  - Inform all employees under their direction of the emergency condition.
  - Evaluate impact the emergency has on their activity and take appropriate actions. This may include ceasing operations and initiating building evacuation.
  - Maintain emergency telephone communications with officials from their own activity (or from an alternate site, if necessary).

- B. All faculty members shall have the following duties and responsibilities:
- Evaluate and survey their assigned building facilities or activities in order to determine the impact that an emergency could have on their facilities and during their activities.
  - Take responsible charge of the classroom following the announcement of an emergency and following emergency procedures for all building alarms and emergencies.
  - Participate in drills and training as required.
  - Report all safety hazards to the Safety Director or Vice-President.
- C. All employees have the responsibility to:
- Have knowledge of the college emergency procedures as well as evacuation procedures for their building/work areas.
  - Follow the college emergency procedures as well as the evacuation procedures.
  - Evaluate and survey their assigned work areas in order to determine the impact that an emergency could have on their area.
  - Participating in drills and training as required.
  - Report all safety hazards to their supervisor.

**V. Building Wardens**

Building One (Garden Hall)	Donnie Yates
Building One (Garden Hall)	Jason McGlothlin
Building Two (McGlothlin Hall)	Brent Gravelle
Building Two (McGlothlin Hall)	Michael Deel
Building Two (McGlothlin Hall)	

The Building Wardens shall have the following responsibilities:

- Be familiar with the emergency policies, procedures and other plans affecting buildings.
- Know where persons with disabilities are located in your building and what their alarm response will be in the event of an emergency.
- Coordinate with one another to avoid duplication of tasks.
- Walk over your primary and second evacuation routes at least once to familiarize yourself with emergency exits and routes to the re-assembly area.
- Attend training sessions and meetings to review procedures and duties, if necessary.
- Know where hazardous conditions or situations in your area may exist. Know the location of flammable, radioactive or other hazardous materials.
- Know where the pull stations are and HOW to turn in an alarm.
- Know how the alarm system responds.



- Coordinate with key building administrators on building occupation and operation issues. Silencing the alarm is not considered an all-clear signal.

# Emergency Procedures

## I. Classroom Emergency Procedures

If an emergency arises in the classroom the nearest fire alarm should be activated as soon as possible.

- A. Activation of a Fire Alarm
  - Everyone should calmly exit the classroom using the safest exit.
  - Know the location alternate exits.
  - Elevators CANNOT be used during an emergency.
- B. Power Outage
  - Remain calm and in your seat until it is determined whether the outage is temporary or long term.
  - If it is determined that the outage is long term then everyone should calmly exit the building via the nearest and safest exit.
- C. Flood
  - Remain calm and exit the building via an exit on the rear of the building.
  - Exit the property using the bridge directly across from McGlothlin Hall and assemble in the parking lot of the Oakwood Fire Department.
  - If water is covering the bridge or parking lot do not attempt to walk or drive through standing water, in this situation report to the second floor of the academic building.
- D. Tornado
  - Remain calm
  - Cover head with book or backpack.
  - Seek shelter on the first floor in interior hallways and restrooms.
  - Once the storm has passed exit the building using the nearest and safest exit and report to the assembly area.
- E. Earthquake
  - Drop and cover your head for protection from material that might be falling from the ceiling or walls.
  - After the earthquake, calmly exit the building via the nearest and safest exit and report to the assembly area.
- F. Intruder
  - Notify the Department of Safety Director and/or Security Guard
  - When calling the Department of Safety, be prepared to give a description of the person to include physical attributes, clothing, any weapons, last known location, and advise them of any unusual circumstance or situation that may have arisen.
  - If possible, ask the person to leave.
  - If the unauthorized person refuses, do not endanger yourself.
  - Be prepared to initiate a lockdown procedure, if necessary, to protect students and other in the area.

## II. Evacuation Procedures

### A. In the event of an emergency situation:

- Remain calm.
- Rescue persons in immediate danger if possible without injury to yourself.
- Activate manual pull station *and* call 911

### B. Evacuation Procedures

- Evacuate the building by way of the nearest and safest exit.
- Walk; do not run.
- Do not use elevators.
- Attempt to close but not lock all doors in your immediate area.
- Before exiting through any closed door, check for heat and the presence of fire behind the door by feeling the door with the back of your hand. If the door feels very warm or hot to the touch, advise everyone to proceed to another exit.
- In the event you are unable to exit the building:
  - Remain calm; do not panic
  - Signal for help from a window using a towel, clothing, sign etc.
- Upon exiting the building and proceed to the assembly area.
- **Assembly Area:** The student parking lot at the Garden Campus farthest from the campus building that fronts Route 624/Garden Creek Road. **Flooding Event Assembly Area:** In the event the bridge is passable the assemble area will be the Oakwood Fire Department parking lot. If the bridge is impassable then the assemble area will be second floor lecture hall of the academic building.
- Keep as far away as possible from all buildings, walls and overhangs.
- The cessation of an alarm is **not** an "all clear" to re-enter the building as corrective measures may still be in progress.
- Stay clear of the building until your appointed Building Warden has advised you to re-enter the building/area.
- Assist visitors during alarm/emergency situations.

## III. Emergency Evacuation for Persons with Disabilities

### A. General

1. All employees must be familiar with evacuation options for persons with disabilities.
  - Each disabled employee and student must be assigned an evacuation assistant who is an able-bodied full-time employee.
  - The Evacuation Assistants are responsible for assisting the individual to which they are assigned during an emergency.
  - Evacuation Assistants will be assigned by the Safety Director.

### B. Evacuation Options

1. Persons without disabilities must evacuate to the nearest exit.

### C. Disability Guidelines

1. Prior planning and practicing of emergency evacuation routes are important in assuring a safe evacuation.
2. Mobility Impaired – Wheelchair
  - Persons using wheelchairs should stay in place, or move to an area of refuge with their evacuation assistant when the alarm sounds. If the person with a disability is alone; he/she should phone emergency services at 9-911 and advise of their present location and the area of refuge they are headed too.
  - If they stair landing is chosen as the area of refuge, wheelchair users are advised to wait until the heavy traffic has passed before entering the stairway.
  - Stair evacuation of wheelchair users should be conducted by trained professionals. Only in situations of extreme danger should untrained people attempt to evacuate wheelchair users. Moving a wheelchair down stairs is never safe.
3. Mobility Impaired – Non-wheelchair
  - Persons with mobility impairments, who are able to walk independently, may be able to negotiate stairs in an emergency with minor assistance from their evacuation assistant. If danger is imminent, the individual should wait until the heavy traffic has cleared before attempting the stairs. If there is not immediate danger (detectable smoke, fire, or unusual odor), the person with a disability may choose to stay in the building, using other options, until the emergency personnel arrive and determine if evacuation is necessary.
4. Hearing Impaired
  - The fire alarms are equipped with strobe lights. Persons with hearing impairments may not hear audio instructions and will need to be alerted of emergency situations by their evacuation assistant or the nearest employee.
5. Visually Impaired
  - Most people with a visual impairment will be familiar with their immediate surroundings and frequently traveled routes. Since the emergency evacuation route is likely different from the commonly traveled route, persons who are visually impaired should exit with the assistance of their evacuation assistant. The assistant should offer their elbow to the individual with a visual impairment and guide him or her through the evacuation route. During the evacuation the assistant should communicate as necessary to assure safe evacuations.
6. Persons with disabilities have three basic evacuation options:
  - Stairway evacuation: using steps to reach ground level exits from the building.

- Stay in Place: unless danger is imminent, remaining in a room with an exterior window, a telephone, and a solid or fire-resistant door. With this approach, the person may keep in contact with emergency services by dialing 9-911 and reporting his or her location directly. Emergency services will immediately relay this location to on-site emergency personnel, who will determine the necessity for evacuation. If the phone lines fail, the individual can signal from the window by waving a cloth or other visible object.

**NOTE:** The Stay in Place approach may be more appropriate for sprinkler protected buildings or buildings where an “area of refuge” is not nearby or available. It may also be more appropriate for an occupant who is alone when the alarm sounds.

- Areas of Refuge: with an evacuation assistant, go to an area of refuge away from obvious danger. The evacuation assistant will then go to the building evacuation assembly point and notify the on-site emergency personnel of the location of the person with a disability. Emergency personnel will determine if further evacuation is determined.

#### **IV. Building Access**

##### **A. General**

1. The college operates on a building lockdown procedure at all times, which means that all access to the building is controlled by either badge access or the door intercom system. The procedure applies to and is followed by faculty, staff, students and the general public.

##### **B. Access Procedure**

1. During normal business hours, all doors on the College’s campus will be set to automatically lock.
2. Access is given to employees, students, and other institutional affiliates using the badge access system.
3. In the event that an individual, including employees, students and institutional affiliates, does not have their issued badge; the individual will be required to use the door intercom system for access using the following procedure:
  - The individual desiring to enter the building must press the intercom button and request entry to the building.
  - Individuals must identify themselves by name and respond to any questions asked of them by staff members operating the intercom.
  - The staff member answering the door intercom is required to verify the individual’s identity. The staff member may visually verify the individual’s identity using the security camera or matching the identity of the individual on the College’s photo charts or confirming with another employee that the individual is scheduled to be on campus. The staff member shall also confirm the

individual's intent or purpose for seeking admission to the premises.

- Upon confirmation of the individual's identity and purpose, the receptionist will use an electronic door switch that will allow the individual to open the door.
- Once the individual has entered the building, the receptionist will ensure that the door electronic switch is placed back in the lockdown position.
- If the individual is not an employee, student or affiliate of the institution the staff member will escort or contact the host of the individual to escort him or her to the appropriate office or location within the building.

## **V. Building Lockdown Procedure**

### **A. General**

1. In the event of a police emergency, such as an active/intruder shooter, it may become necessary to lockdown a building or buildings on campus to protect occupants and minimize the overall exposure to danger. (Appendix G-Lockdown Situation Report)

### **B. Definition**

1. A lockdown is the temporary (30 minutes to several hours) sheltering technique, utilized to limit civilian exposure to an active shooter or similar incident.
2. When alerted, occupants of any building within the subject area will lock all doors and windows not allowing entry or exit to anyone until the all clear has been sounded.

### **C. Incident Notification**

1. If an employee observes or witnesses identifies a threat on campus he or she must notify local and campus authorities.
2. Call 911 and provide the following:
  - Your name;
  - Location of the emergency;
  - Telephone number from which you are calling; and
  - Type of emergency you are reporting (e.g., police, fire, or hazardous material spill)
4. Notify the President, Dean, Safety Director or other person in charge who will notify the Emergency Management Team (EMT).
5. All emergencies, e.g. police emergencies, fires or hazardous material spills must be reported to the Safety Director.

### **D. Initiation of Lockdown Procedure**

1. If an assessment determines the need to secure a building or buildings to protect the campus community and to prevent an escalation of the emergency, the President or administrator in charge will give the order to lockdown specific areas or the entire campus.

2. Notice that a lockdown that has been issued will be communicated to the campus using all forms of available communication.
- E. Lockdown Procedure
1. If a lockdown has been activated take the following action:
    - Follow instructions;
    - Try to remain calm;
    - Remain indoors, until advised otherwise;
    - Close, and lock all doors;
    - Turn off all lights;
    - Remain seated below window level, toward the middle of a room away from windows and doors;
    - Remain silent;
    - Silence cell phones;
    - If gunshots are heard lay on the floor using heavy objects, e.g. tables, filing cabinets for shelter;
    - Do not shelter in open areas such as hallways or corridors. Go to the nearest classroom, lecture hall, office, bathroom or auditorium that can be locked.
    - If outdoors seek nearby shelter, e.g. large trees, walls, mail boxes, and wait for additional instructions from the police.
    - Do not unlock doors or attempt to leave until instructed to do so by the police.

## VI. Fire Procedures

When reporting or extinguishing a fire, cautionary judgment and common sense should serve as the best guides. (Appendix H: Fire Incident Report)

- A. In the event of an alarm/fire employees should practice the procedures associated with the acronym “**RACE**”.

**R**--- **Remain calm** do not panic. Rescue persons in immediate danger.

**A**--- **Alarm** activate the nearest MANUAL PULL STATION *and* notify the Fire Department by dialing 9-911 (“I want to report a fire at...”); Inform the other occupants.

**C**--- **Contain** the fire at point of origin by closing all doors and windows.

**E**--- **Evacuate** the facility using established procedures. **Extinguish** fire by using a portable fire extinguisher (**Unless you have been properly trained, Never attempt to use a fire extinguisher**). Pull the fire alarm, report the fire, extinguish after. **Never attempt to extinguish a fire unless you can do so safely.**

- B. Major, Uncontrollable Fire

1. Pull the nearest fire alarm pull station.
2. If able, pull Campus Police button on outside of building.
3. Help evacuate students, employees, and visitors.

4. Emergency fire drills shall be conducted for each building at least once per year.
- C. Fire Evacuation Rules
1. NEVER use elevators to evacuate a burning building.
  2. Note the posted Evacuation Routes and follow to the nearest exit.
  3. Go immediately to the designated assembly area and wait for further instructions.
  4. Stay clear of emergency response personnel and equipment.
- D. Fire Extinguishers
1. All fire extinguishers shall be inspected on a monthly basis.
  2. Discrepancies such as low pressure, missing parts, or damaged supporting brackets shall be immediately reported to the Safety Director.
  3. Each fire extinguisher shall have unrestricted accessibility.
  4. Qualified personnel must hydrostatically test each fire extinguisher, in accordance with the manufacturer specifications.
  5. Personnel will be trained regarding location of fire extinguishers and the use of fire extinguishers.
- E. Fire Safety and Evacuation Procedures for Individuals with Disabilities
1. Plan ahead. Be prepared. Know what you are going to do before an emergency arises. Determine what your alternatives are.
  2. Faculty, staff, & students should become familiar with the buildings they occupy; look it over and locate the most available telephones, note horizontal exits and ramps, note exit signs, note rooms that would make good areas of refuge, and note the location of fire alarm pull stations.
  3. When an alarm sounds, it's important to determine the nature of the emergency and act accordingly.
  4. Elevators are not to be considered as an exit option unless directed so by Fire Department personnel.
- F. Fire Prevention
1. Multiple, UL approved outlet cords, equipped with internal surge protection are authorized for office and departmental use. Units without internal surge protection or overload cutout are not authorized.
  2. Waste must be stored and properly disposed of to prevent the creation of a fire and safety hazard.
  3. Flammable materials should be stored in properly labeled flame resistant cabinet.
  4. Do not overload outlets with multiple outlet cords or multiple plug adapters.
  5. Keep closets free of old rags, paper or other combustible odds and ends.
  6. Keep all walkways and stairwells free from obstructions at all times.
  7. The use of personal space heaters is discouraged.
  8. Fire Containment



9. Fire doors shall remain closed unless they are equipped with automatic closing devices. Ventilation systems controls shall be tested for activation when exposed to smoke or extreme heat.

## **VII. Violent and Criminal Behavior**

### **A. General**

1. Should gunfire or discharged explosives be a hazard on the campus, you should run away from the gunfire or building being affected, take cover immediately, using all available concealment and last resort if necessary fight to ensure safety. After the disturbance, seek emergency first aid if necessary.
  - Everyone is asked to assist in making the campus a safe place by being alert to suspicious situations and promptly reporting them.
  - If you are a victim or are a witness to any on-campus criminal offense, avoid risks call 9-911 immediately.
  - If you observe a criminal act or a suspicious person on campus, call 9-911 immediately.
  - When reporting an incident to a 911 operator, promptly include the following:
    - Nature of incident
    - Location of incident
    - Description of person(s) involved
    - Description of property involved
  - Assist the officers when they arrive by supplying them with all additional information and ask others to cooperate.
2. Bomb Threat

In the event of a bomb threat the following procedure will be followed:

  - Procedure
    - Remain calm and collect as much information from the caller as possible, using the bomb threat report form.
    - Keep the caller on the line as long as possible.
    - Ask him/her to repeat the message.
    - Ask the caller the location of the bomb or device.
    - Be alert for distinguishing background noises; such as traffic, music, voices, aircraft, church bells, etc.
    - Note distinguishing voice characteristic (gender, voice quality, impediments).
  - Incident Notification
    - Immediately notify the president or his designee.
    - The president or his designee shall notify other individuals and the authorities as soon as possible.
3. Suspicious Package
  - If a package is received or found within the College that appears suspicious, notify President or his designee.
  - Do not handle package.

- Clear the immediate area of students and personnel.
- 4. Evacuation
  - Evacuate only upon instruction from the President or his designee, police or fire department.
  - Follow Emergency Management Plan Evacuation Procedures

## VIII. Psychological Crisis

### A. General

1. A psychological crisis exists when an individual is threatening harm to him/herself or to others; or is out of touch with reality due to a severe drug reaction or psychotic break. A psychotic break may be manifested by hallucinations, uncontrollable behavior, or complete withdrawal.

### B. If a Psychological Crisis Occurs:

1. Contact the police – 9-911
2. The responsible Administrator should be informed.
3. The family of a minor will be notified in the event of hospitalization.
4. You may contact the Cumberland Mountain Community Services Crisis Hotline at 276-964-6702.

### C. For Unusual or Potentially Dangerous Situations:

1. **NEVER try to handle a situation on your own that you feel is dangerous.**
2. Assess your best resources for the situation.
3. Notify the police 9-911.
  - Clearly state that you need immediate assistance.
  - Give your name, the nature of the incident and location of incident.

### D. Survivors/Victim Services

1. The College shall establish families of victims and survivors services unit upon the incidence of any deaths or violent acts on campus.
2. The victims and survivors unit shall be activated within two (2) hours of the conclusion of any violent acts determined by authorities and the area ruled safe by authorities.
3. The unit shall be staffed by mental health professionals, health care professionals, College staff and qualified volunteers to assist victims, survivors and/or their families.
4. In the event of a criminal act resulting in death or casualties, short and long-term counseling shall be made available to College students and employees.

## IX. Medical Emergency

### A. General

1. If a serious injury or illness occurs on campus, immediately dial 9-911. Give your name describe the nature and severity of the medical problem and the campus location of the victim.

**NOTE:** There are several employees on campus that have various emergency medical training. In case of serious injury or illness, Emergency personnel should provide first aid treatment.

### B. Medical Emergency Requiring Medical Treatment

1. The person assuming responsibility should immediately summon medical help (be explicit in reporting suspected types of injury or illness, location of victim, and type of assistance required).
2. The names of persons in your area trained in CPR and First Aid shall be posted by all employee telephones. The number to call for medical emergencies (**9-911**) shall also be posted by your telephone.
3. Someone knowledgeable about the accident should always accompany the injured person to the medical facility and a copy of any appropriate MSDS(s) (in the event of chemical exposure) should accompany the victim.

### C. First Aid

1. Following any first aid provided on campus, the employee or student should seek medical treatment from their physician or health care provider.
2. Each laboratory should have at least one person trained in basic first aid and cardiopulmonary resuscitation.
  - All injuries occurring on campus should always be reported to a supervisor and recorded.

**ALL WORK RELATED INJURIES MUST BE REPORTED TO THE EMPLOYEE'S IMMEDIATE SUPERVISOR AS SOON AS POSSIBLE AFTER THE INJURY. (Appendix I: Employee's Notice of Injury Report)**

### D. Biomedical Hazards

- Any accidents in which employees come in contact with blood should be reported to the Safety Director immediately.
1. Purpose
    - The purpose of this Bloodborne Pathogens Exposure Control Plan is to protect the health and safety of all employees who can reasonably be expected, as the result of performing their job duties, to be exposed to blood or potentially infectious materials and comply with the OSHA Standard 29 CFR 1910.1030 Bloodborne

Pathogens Exposure Control. Definitions of terms relating to this exposure control plan are found in Appendix A.

- This plan applies to all employees who engaged in activities that involve exposures to blood or other body fluids. Students are required by clinical contract to comply with the Bloodborne Pathogens Exposure Control Plan, policies, and practices of each clinical hospital site.

## 2. Responsibility for Compliance

- The development and administration of this Bloodborne Pathogens Exposure Control Plan will be the responsibility of the Safety Director. These responsibilities will include:
  - Developing written procedures for cleaning and handling contaminated materials, and for disposing of hazardous waste generated within all buildings and facilities.
  - Providing appropriate personal protective equipment that is readily accessible to identified employees.
  - Providing warning labels or color-coded containers for use with hazardous waste.
  - Developing written procedures for meeting the requirements for medical record keeping.
  - Conducting an annual review of the effectiveness of this exposure control plan and updating the plan as needed.

## 3. Exposure Determination

- The College will determine which employees can reasonably be expected to be exposed to blood or other body fluids containing blood in the course of their work. These employees, for the purposes of compliance with this standard, may include (1) designated first aid providers, i.e. those employees whose primary job assignment would include rendering first aid; and (2) those employees who might render first aid only as a collateral duty.
- These exposure determinations may be performed by a qualified person or qualified persons with appropriate education, experience and/or training. All decisions relating to bloodborne exposure by job classification will be documented using the form found in Appendix B.

## 4. Method of Compliance

- Universal Precautions
  - Universal precautions will be used in order to prevent contact with blood and or potentially infectious materials (OPIM). Under circumstances in which differentiation among body fluid types is difficult or impossible, all body fluids will be considered potentially infectious materials.
- Exposure Incident Investigation
  - An exposure incident is defined as contact with blood or other potentially infectious materials on an employee's non-intact skin, eye, mouth, other mucous membrane or by

piercing the skin or mucous membrane through such events as needle sticks.

- An exposure incident investigation form will be completed each time an exposure incident occurs (See Appendix D).
- Handwashing
  - The College will provide handwashing facilities, which are readily accessible to employee, or when provision for handwashing facilities are not feasible, the college will provide either an appropriate antiseptic hand cleanser in conjunction with clean cloth/paper towels or antiseptic towelettes.
  - Employees will wash their hands immediately or as soon as feasible after removal of gloves or other personal protective equipment. When antiseptic hand cleaners or towelettes are used, hands will be washed with soap and running water as soon as feasible. Do not reuse gloves.
- Housekeeping and Waste Procedures
  - Contaminated sharps, broken glass, plastic or other sharp objects will be placed into appropriate sharps containers. The sharps containers will be closeable, puncture resistant, leak proof, and labeled with a biohazard label. Containers will be maintained in upright positions. Containers will be easily accessible to staff and located as close as feasible to the immediate area where sharps are used or can be reasonably anticipated to be found. If an incident occurs where there is contaminated material that is too large for a sharps container, the Maintenance Contractor will be contacted immediately to obtain an appropriate biohazard container for this material.
  - A contaminated sharps container is located in the laboratories.
  - All procedures involving blood or other potentially infectious materials will be performed in such a manner as to minimize splashing, spraying, splattering, and generating droplets of these substances. Mouth pipetting/suctioning of blood or OPIM is prohibited; e.g., sucking out snakebites.
- Personal Protective Equipment
  - Where the potential of occupational exposure remains after institution of engineering and work controls, personal protective equipment will be used.
  - Gloves will be worn when it can be reasonably anticipated that the employee may have hand contact with blood, other potentially infectious materials, mucous membranes, and non-intact skin; and when handling or touching contaminated items or surfaces.

- Disposable gloves will be replaced as soon as practical when contaminated or as soon as feasible if they are torn, punctured or when the ability to function as a barrier is compromised.
  - Disposable gloves will not be washed or decontaminated for re-use.
  - Supervisors will ensure that their employees use the appropriate personal protective equipment. If an employee temporarily and/or briefly declines to use personal protective equipment because the equipment in his/her judgment, in that particular instance, would have imposed an increased hazard to the employee or other, the college will investigate and document the circumstances in order to determine whether changes can be instituted to prevent such occurrences in the future.
5. Post-Exposure Evaluation and Follow Up
- Exposure Incidents
    - a. Following a report of an exposure incident, the Safety Director will ensure that a confidential medical examination and follow-up is immediately available to the exposed employee and will include at least the following elements (See Appendix E).
      - Documentation of the route(s) of exposure, and the circumstances under which the exposure incident occurred;
      - Identification and documentation of the source individual, if possible, or unless the college can establish that identification is infeasible or prohibited by state or local law.
      - The source individual's blood will be tested as soon as feasible and after consent is obtained in order to determine HBV and HIV infectivity. If consent is not obtained, we will establish that legally required consent cannot be obtained.
      - Results of the source individual's testing will be made available to the exposed employee only after consent is obtained, and the employee will be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.
    - b. For post-exposure prophylaxis, the most current USPHS/CDC guidelines will be followed.
    - c. Counseling will be made available at no cost to the employee on the implications of testing and post-exposure prophylaxis.
    - d. An evaluation of any reported illnesses will be conducted.
    - e. Medical Evaluations
      - The college will ensure that all medical evaluations and procedures, including prophylaxis, are made available at no cost and at a reasonable time and place to the employee. All

medical evaluations and procedures will be conducted by one of the Workers' Compensation Panel Physicians.

6. Communication about Hazards to Employees

- Warning labels
  - a. Will be affixed to containers of regulated waste, refrigerators, and freezers containing blood or other potentially infectious material; and other containers used to store, transport or ship blood or other potentially infectious materials. **Exception:** Red bags or red containers may be substituted for labels.
- Information and Training
  - a. The Safety Director is responsible for training and will ensure that all current and new employees with potential for occupational exposure participate in an initial and annual training program at no cost to employees. Training will occur upon employment.
  - b. Students will receive such training through the experiential curriculum.

7. Recordkeeping

- Training Records (See Appendix F) are the responsibility of the Safety Director.
  - a. Training records will include:
    - Date(s) of the training session
    - The contents or a summary of the training sessions
    - Name(s) and qualifications of person(s) conducting the training
    - Name and job titles of all persons attending the training session
    - Training records will be maintained for 3 years from the date the training occurred.
  - b. Availability of Records
  - c. All records required to be maintained by this standard will be made available upon request for examination and copying to VOSH.

8. Evaluation and Review

- The Safety Director will conduct evaluation and review of the effectiveness of this exposure control plan and will coordinate corrective action and update the plan as needed.
  - a. The review and update will include:
    - New and modified tasks and procedures that affect occupational exposure.
    - New and revised employee positions with occupational exposure.
    - Changes in technology to eliminate and reduce exposure.

- Annual consideration and implementation of appropriate and safer medical devices designed to eliminate exposures.

## E. Attacks

### 1. Situation

- In the event of an attack against the United States, Appalachian College of Pharmacy could sustain damage. To avoid needless loss of life and provide the resources for support for damage control and mission continuity, it is essential that a plan be developed for maximum survival and minimum damage.

### 2. Mission

- This policy covers the responsibility and procedure for preparing Appalachian College of Pharmacy for attack. Action is directed toward minimizing casualties and loss of resources, mission continuity, and maximizing the retention of operational capability. Required actions are considered in three phases:

#### a. Execution

- Pre-attack (notification) actions include evacuation and preparation.
- Trans-attack (response) action is required for mission continuity.
- Post-attack (recovery) action is dictated by the degree of damage sustained and resources that remain.

#### b. Pre-Attack Tasks

- The President decides when to close the college.
- The Emergency Command Center will be responsible for notifying students, staff, and local communication mediums of closure.
- The Dean will oversee the preparation of building and ground for an attack. (This may include securing gas lines, closing heating and air conditioning systems, securing buildings, deployment of personnel and security and any other measure deemed appropriate by the President, The Emergency Command Center).

#### c. Trans-Attack Tasks

- As the college will be closed during the trans-attack or wartime phase, the Emergency Command Center will monitor the security of campus buildings and property.

#### d. Post-Attack Tasks

- President
  - Decides when the college will reopen.
  - Oversees damage assessment and recovery procedures.
  - Isolates disposal areas for contaminated waste and provides for decontamination of facilities and equipment.



## **X. Pandemic Influenza or Other Infectious Diseases**

### **1. Purpose**

- The college's plan will address life safety, protection of property, preservation of financial stability, crisis communications; and identify and appoint those who will serve in a "command and control" function.

### **2. Procedures**

- The College will work in conjunction with the Department of Health facilities in Buchanan County; and follow established guidelines developed by the Virginia Department of Health for the schools. The College will close its campus if the pandemic influenza incapacitates the college to function properly.
- The College will participate in communication bulletins presented by the Center for Disease Control (CDC) and monitor data provided by them on how to decrease the spread of a pandemic influenza.
- Employees that feel sick, exhibit symptoms, or have sick family members at home will be encouraged to remain at home so as to limit exposure to co-workers and students. The key areas of the college that need to remain accessible include: payroll, public relations, maintenance, housekeeping, and information technology. Maintenance and housekeeping employees will be required to be on-campus to perform the essential services.
- Employees and Students that are on campus only are suggested to stay home until at least 24 hours after their fever is gone, without using fever reducing medicines.
- Employees and Students that have clinical sites and rotations in healthcare facilities which includes but is not limited to Nursing Home, Hospital, Pharmacy's and Clinics will observe the CDC's recommendation of seven (7) days after symptoms began or until all symptoms are gone, whichever is longer.

### **3. Communication**

- Pamphlets will be circulated in advance among employees and students concerning the influenza virus and how to best protect themselves and everyone around them.
- By daily communication with the members of the Emergency Operations Center, the Dean would be able to remain in contact with all forms of media via e-mail, telephone, or fax.
- Rapid communication between the staff and faculty is critical in implementing the college's response to a pandemic influenza outbreak. The college's web site, e-mail, telephone and other means will be used to inform staff, faculty and the general public of current actions the college is implementing as the situation develops.

### **4. The Pandemic Coordinator and Response Team**

- The Pandemic Coordinator and Response Team have the overall responsibility of reviewing and updating this policy. Additionally, the pandemic coordinator and response team will recommend to the President, or his designee, of the actions to take in the event of a pandemic influenza. Members of this team include the following: President, Safety Director, and Dean.
- The College's response to a pandemic influenza must be flexible and have the ability to rapidly change to meet the type of emergency that is present. In order to accomplish this, the college's response is divided into three different response Levels. Definitions of the Levels are as follows:

**Level 1** – Pre planning up to and including confirmed cases of human-to-human transmission of influenza or other infectious diseases

**Level 2** – Suspected case(s) on Campus or suspected/confirmed cases in Southwest Virginia.

**Level 3** – Confirmed case(s) on Campus. The Campus will remain open until the Response Team deems necessary to close due to availability of essential employees.

#### 5. Responsibilities

- Safety Director/Chair of Safety Committee
  - As part of preparedness planning in Level 1, the Emergency Coordinating Officer will provide flu prevention information to students, staff and faculty primarily through the college's web site.
  - The Emergency Coordinating Officer will develop a web page specifically dedicated to the influenza. Influenza updates from all departments will be placed on this web page. The goal is for students, staff and faculty to go to one page to get the latest information on the influenza and what actions the college has implemented. Students, staff and faculty will be instructed to check the college's influenza web page for the latest information. Other means of rapidly disseminating information will be used such as e-mails, open forums, flyers, etc.
  - The Safety Director/Chair of Safety Committee will serve as a department that collects information on individuals that have flu like symptoms and report this information to the President or his/her designee through the Emergency Coordinating Officer. Also, the Safety Director/Chair of Safety Committee will maintain contact with the Cumberland Plateau Health Department. As policies and procedures are implemented at the state Level, local actions regarding pay and benefits will be implemented.

- The Safety Director/Chair of Safety Committee will closely coordinate and work with the Cumberland Plateau Health Office and the Virginia Department of Health (VDH) to insure the college receives up-to-date information. As stated above, current information will be transmitted to students, staff and faculty primarily through the college's web site.
- Designated Members of the Building and Grounds Staff
  - Essential Buildings and Grounds personnel will be on duty to perform essential maintenance tasks, assist in the cleaning/disinfection of buildings and control the heating and ventilation systems to provide ventilation in infected areas.
- President or Designee
  - The President will have access to all the information that the Response Team gathers and will disseminate it as appropriate to local media. The President will also be responsible for maintaining Pandemic information on the College of Pharmacy's web site.
- Dean
  - The Dean will notify the President of the number of students absent and of the number of flu cases that he/she has been notified of from student contacts.
- Business Office Manager
  - The Business Office Manager will provided essential Business Office functions including payment to vendors and employees and coordination of insurance benefits.
- Information Technology Supervisor
  - The Information Technology Supervisor (IT) will assure that all vital records are stored and safe. In addition, this position will ensure that network operations are maintained to allow for communication between the college and the community.
  - The Information Technology Department will provide the latest information available concerning the pandemic influenza via the college's website.

**If the college is closed for normal operations, Appalachian College of Pharmacy must be prepared to resume normal operations after the influenza threat has subsided.**

## **XI. Hostage Situation Policy**

### **A. General**

1. In the event that ACP personnel are involved in a situation in which a hostage is taken or believed that there is a potential for being taken hostage or for violence to erupt, notification to law enforcement shall be made immediately. The law enforcement agency will take charge of the investigation and resolution of the situation.

### **B. Procedure**

1. The following guidelines will be used if possible:
  - Personnel dial **“9-911”** to notify Law Enforcement Agency. Tell the operator the location. If possible, stay on the line without jeopardizing yourself and give as many details as possible, including:
    - Physical description
    - Location of person
    - Weapons
    - Number of people involved
  - Notify the President or his/her designee.
  - The President or his/her designee will notify the EMT and determine whether to activate the EMP.
  - EMT will meet incoming police officers, set up command center and work with police to monitor the situation.
  - The EMT will prepare an expected occupant list of employees, visitors, and students present in the building and census count for involved room or section of the building if applicable.
  - Remain calm and observant. Hostage situations are extremely volatile and dangerous in the first 5 to 10 minutes.
  - If possible, leave the area and report to assembly area.

### **C. General guidelines for survival if taken hostage**

1. Remain calm
2. Do what you are told
3. At times, it may be appropriate to ask for medication (nitro, insulin, etc.). Some hostage takers may release sick hostages.
4. If released, cooperate with police and Emergency Management Team.
5. Expect noise and light if rescue attempt is made. Get on the floor immediately and stay down until told to move.
6. After the incident, report to Assembly Area for stress debriefing and law enforcement interviews.

# Equipment & Facilities

## I. Power Tools

### A. Electric Tools

1. Eye protection must be used when operating any grinding, cutting, drilling, or power driven tools.
2. Only ground carrying (three-wire) extension cords approved by Underwriter's are to be used.
3. Laboratories that are in good condition shall be used. Worn or frayed cords and broken plugs shall be removed from service and repaired or replaced.
4. When operating portable electric equipment and a 3-wire receptacle is not available, the ground wire on the 3-prong/2-prong plug must be used. The ground wire must be connected before inserting the plug in the receptacle. Two-wire/two-pronged plugs on double insulated tools are acceptable.
5. Any problems, failures or disrepair of electrical tools or outlets should be reported to the maintenance and repair office.

### B. Stationary Power Tools

1. All tools, equipment, safety guards, safety chains, and safety devices shall be inspected at regular intervals and shall be kept in proper working condition.
2. Gloves should not be worn while operating drill presses, power saws, and similar equipment. Loose clothing on upper portion of body must be worn and long sleeves must be rolled up.

### C. Electric Drills

1. Oversized bits shall not be ground down to fit small electric drills. Proper size drill should be used.

## II. Ladders, Platforms, and Barricades

### A. Ladders

1. Portable, straight, or extension ladders shall be used only for their designed purpose.
2. Before using, they should be inspected carefully for any visual defects.
3. All straight or extension ladders shall be equipped with approved safety feet. Where safety feet do not overcome the hazard of slipping, the ladder should be secured by other adequate means.
4. Ladders shall be inspected periodically and removed from service if found defective and shall be destroyed if proper repairs cannot be made.
5. When ladders are used near a door or aisle through which there is traffic, warning signs shall be set up or other appropriate precautions taken to prevent potential accidents.

B. Barricades

1. Barricades shall be used to ensure the safety of others when hazardous conditions are created by the work performed, such as material dropping, flying or spraying, and uneven or slippery footing.

C. Guards

1. Gears, sprockets, chains, shafts, pulleys, belts, and other apparatus of this nature shall be provided with appropriate guards.
2. Guards shall be removed only as necessary to maintain the machine, then immediately reset.
3. Before any maintenance work is done on tools or equipment, the power source shall be shut down or disconnected.

III. Key & Building Security Policy

A. Introduction

1. In an educational institution there is a need to balance the accessibility and use of facilities with the need to provide a safe and secure environment. Convenience must sometimes be compromised in order to maintain security. Each college community member must share in the responsibility to assure security for all members and property.

B. Policy

1. Appalachian College of Pharmacy shall maintain a locking system for the protection of its community members, facilities, property, and information. All locks, keys, electronic access cards and access codes are the sole property of the College and will be issued to students and employees based on their need for access. The College reserves the right to change locks, keys, and access codes as needed.
2. All facilities will be locked whenever possible, depending on use and scheduling.
3. No one may place a lock on a college facility, interior or exterior, or transfer their keys to another person without the express permission of the President, or their designee.
4. All keys and electronic access cards must be returned to the College upon termination of employment or enrollment.

C. Issuance of Keys

1. ACP employees will be issued keys based upon their need for access. Employee key requests shall be made in writing to the Dean and state clearly the basis or reason for needing access to the desired area.
2. Outside contractors and vendors who are operating on a multi-year contract with the College may be issued keys for the duration of their contract. Outside contractors and vendors are subject to the same key issuance requirements as employees.
3. Adjunct faculty will be issued office keys only. Building keys may be issued with the written authorization of the Dean once it has been determined that "after hours" access is necessary.

D. Lost or Stolen Keys

1. All lost or stolen keys must be reported to the Dean and Safety Director as soon as possible.
2. The request to replace lost or stolen keys shall be accompanied by a written explanation describing the facts surrounding the loss, particularly the location of the loss, what identifying marks were on the keys, and what doors the keys open. Based on the factors involved, the Dean and Safety Director will make a decision to replace the keys or have the locks re-keyed. The individual whose keys were lost shall assume the cost of replacement keys.
3. The fees for key replacement will increase with subsequent losses by the same individual.

#### E. Return of Keys

1. At the end of their employment with the College, all employees must return their issued keys to their immediate Supervisor or Dean. The keys should then be returned to the Director of Safety.

#### F. Loaning of Keys

1. College employees and students shall not transfer issued keys, access cards, or access codes. Anyone found in possession of another keys, card, or code shall have the keys or card confiscated.
2. Return of the keys or card to the owner will be at the discretion of the College.
3. Individuals violating the policy on the loaning of keys will be subject to disciplinary action.

#### G. Records Management

1. The office of the Dean/or Safety Director shall maintain a database containing records of all keys and codes issued for the College facilities.
2. The Information Technology Department shall maintain a record of access cards and card access codes distributed for all ACP facilities.

#### H. Maintenance of Locking Systems

1. Maintenance and installation of key and combination locking systems is the responsibility of Maintenance & Repair and the Information Technology Department. Requests for repair or replacement of locks should be made by submitting a Work Order to the Maintenance Office.
2. Emergency repair requests must be made by phone to the Maintenance Office, (ext. 5249) between the hours of 8 AM to 5 PM.
3. Maintenance of the card access system is the responsibility of the Safety Director and Information Technology Department. Requests for repair should be made to them by phone.

#### IV. Motor Vehicle

##### A. Driver's License Requirements

1. No employee of the college shall be permitted to operate a college vehicle unless he/she possesses a valid driver's license.
2. If an employee who is required to drive a college vehicle has had driving privileges suspended or license revoked, the employee must report this condition to the supervisor immediately.

##### B. Use of College Vehicles

1. Employees have responsibility to always operate a college vehicle in conformance with the applicable motor vehicle laws, all local ordinances, and within the guidelines of this manual.
2. It is the driver's basic responsibility to make sure the vehicle is in safe operating condition before starting each trip. The employee shall check all lights, horn, windshield wipers and washers, brakes, tires, gas, rearview mirrors, seat belts, and windows for clear visibility. In winter, a windshield scraper will be available.
3. Seat belts and shoulder harnesses shall be worn by the driver and all passengers in college vehicles whenever the vehicle is in motion.
4. The driver shall ensure that the number of passengers does not exceed the designed capacity of the vehicle. The number of passengers should be considered in determining an appropriate load and excessive loading must be avoided. Luggage/cargo carried inside a van should be packed as close to the floor as possible and may not be stacked above the level of the seat backs. No loading may be done on the roof of the vehicle.
5. When the College is closed due to inclement weather, college-owned vehicles are not available for use. Neither are employees authorized to rent or lease vans in lieu of college vehicle availability during times when the College is closed or to return to campus from out-of town destinations in college-owned vans when road conditions have caused the college to close. Safety of passengers is the first concern in all college-related travel.
6. A driver shall not drive for more than four consecutive hours without taking a twenty-minute break or relief from driving.
7. Drivers must report needed repairs or suspected problems to the Physical Plant.

##### C. Accident Reports

1. Any accident, regardless of the extent of damage, involving a college vehicle, should be investigated by a Police Officer with jurisdiction in the area.
2. The President is also to be informed of any accident.
3. Any employee who is in a motor vehicle accident in a College-owned vehicle may be subject to a mandatory drug screening.



## V. Lifting

### A. General

1. Even with mechanical lifting aids, certain things must be lifted manually. In order to avoid back strains, items must be lifted properly.
2. Many lifting injuries are caused by INCORRECT LIFTING.
3. The employee must THINK BEFORE LIFTING.
4. Solid footing is essential whenever an object of any substantial weight is lifted.
5. If the load is too heavy, help should be obtained.

### B. Lifting Procedures

1. The employee should STAND CLOSE TO THE LOAD to eliminate excessive strain on the back muscles. The direction the load will be moved after lifting, and the feet should be positioned to allow this movement without twisting the trunk of the body.
2. The employee should place one foot alongside the object to be lifted and the other slightly behind the object with the heels flat, not raised. This provides a wider, more stable base from which to lift.
3. The employee should bend his/her knees and squat down, keeping the back erect.
4. The employee should take a firm grip from underneath the object. Hands, gloves, or the surface of the object should not be slippery. The employee should keep arms straight allowing his/her shoulder muscles to help lift the load.
5. The employee should straighten his/her legs gradually from the squatting to an erect position. JERKING when lifting is as dangerous as setting down a load TOO QUICKLY.
6. The employee should carry the load close to his/her body, as near the center of balance as possible. The BACK should be kept ERECT. Loads should be carried in such a way as to permit an unobstructed view ahead.
7. If the employee should have to turn, he/she should do so with his/her whole frame, not just with the trunk. The employee should avoid twisting the body because this motion places the load outside the center of balance and puts a terrific strain on muscles not normally used in lifting.
8. To set the load down, the employee should simply reverse the lifting operation. With the back erect, legs should be bent at the knees to a squatting position and the hands should be withdrawn from the object.
9. When raising an object shoulder height or higher, the employee should first lift to about the waist height, rest one end of the object on a bench or ledge and then, if necessary, shift the position of the hands to accomplish the lift to the higher level. The process should be reversed when lowering objects.

10. The employee should KEEP HIS/HER CHIN UP. If the chin is up, the back is likely to be straight and the chance of avoiding back injury while lifting is greatly improved.

## VI. Office Safety

### A. Responsibility

1. Employees will immediately report any unsafe conditions or defective equipment to their supervisors.
2. If any injury should occur, employees will notify their supervisor immediately, and in no case later than the end of their work shift on the day of the accident.
3. No one shall use equipment for other than its intended purpose. Improper use may result in accident, injuries, or maintenance problems.

### B. Housekeeping

1. Good housekeeping is a sign of good workmanship and provides safe working conditions. Good housekeeping will prevent accidents caused by tripping, stumbling, slipping, stepping on, or bumping into equipment, materials, or other objects.

### D. Chemicals

1. Employees handling flammable liquids or chemicals of any type are to wear appropriate protective clothing and to comply with safety instructions on the containers.
2. Chemicals and materials with toxic fumes are to be used only in well-ventilated areas unless approved respirators are used.

### E. Fire Protection

1. Employees will maintain free and unobstructed access to fire extinguishers/equipment, fire doors, and exits in the area in which they work. Burning candles is prohibited on campus.

### F. General

1. Offices should be locked whenever the employee leaves, even if he/she will be gone only a few minutes. Purses, wallets, and other valuables should be kept in a secure container such as a locked desk or filing cabinet.
2. Any suspicious person loitering in the area should be reported to a Dean immediately.
3. All crimes should be reported to the police and Safety Director no matter how minor.
4. Handrails should be used when going up or down stairs.
5. Water, oil, or other liquids or excessive dust, dirt, or any other debris spilled on floors represents a serious hazard and shall be cleaned up immediately upon observation.
6. Offices shall be arranged to allow ample passageways with no exposed cords or outlets, and furniture or fixtures should not be placed near entryways or around corners.

7. Employees should not lean back or sideways on chairs or stools to a point when all four legs or castors are not in contact with the floor.
8. Broken glass, sharp objects, and pressurized containers require special handling and disposal. They shall not be put in wastebaskets.
9. Cords for electrical equipment shall not be strung across walkways or aisles where people may trip over them.

## VII. Traffic and Parking Regulations

### A. Policy

1. The Safety Director shall be responsible for enforcement the College Traffic and Parking Regulations as indicated in the following guidelines
2. This enforcement shall apply to moving and stationary vehicles.

### B. Purpose

1. To detail the traffic and parking regulations of the ACP and the enforcement thereof.
2. All employees and students are responsible for following all parking regulations set forth herein.

### C. Procedure

1. Permission to enter or remain on the grounds of the College may be revoked at any time by the President and/or Dean of the ACP or his/her authorized agents.
2. Speed Limits:
  - In no case greater than 5 miles per hour.
3. Pedestrians are required to:
  - Use crosswalks and sidewalks where provided.
  - Walk on the side of the driveway which faces oncoming traffic, where there is no sidewalk.\* The operator of any vehicle must obey all instructions of any traffic control device, or any officer of a law enforcement agency or fire department.
4. Barriers, fences, or posts:
  - May be placed at any point deemed necessary for safety or convenience at the discretion of the College.
  - May not be removed, except in emergencies, without authorization from the President and/or Dean of the College or his/her authorized agents.
5. No vehicle is to be driven on or parked in any area, which is not designated for such purpose.
6. Vehicle parking:
  - Must be in accordance with posted signs or markings on the pavement.
  - Must not occupy more than one parking space.
7. Parking lots are restricted for various purposes and:
  - Will be posted as being restricted.

- May be equipped with devices such as gates to keep out unauthorized vehicles.
  - May be restricted in emergencies, on special occasions, or for repairs and maintenance as specified by ACP Administration.
8. No vehicles may be parked in any of the following locations:
    - On a sidewalk or grass.
    - Within an intersection or roadway.
    - Within 20 feet of a fire hydrant.
    - On or over a crosswalk.
    - In any RED zone or posted no parking area.
    - In any YELLOW zone for longer than loading or unloading of passengers or freight not to exceed 30 minutes.
    - In a BLUE handicapped zone unless displaying an authorized state handicapped parking permit or a special permit issued by Administration for that purpose.
  9. Vehicles may be towed away at the owner's expense which:
    - Are parked in "TOW AWAY" zones.
    - Have had the appropriate number of warnings placed on them.

## VIII. Parking Ticket Issuance and Vehicle Towing

### A. Policy

- The College will ensure efficient use of parking lots and enforce parking and other violations to provide a safe environment for visitors, students, employees and faculty.

### B. Procedure

1. The College will issue parking tickets to all vehicles illegally or improperly parked on property.
2. A ticket or notice shall be placed on the windshield of the vehicle in violation and the College will monitor a record of the tag number and physical description of the vehicle.
3. Each ticket shall be accompanied by a fine of ten dollars (\$10.00).
4. After the third ticket the vehicle shall be subject to towing at the owner's expense.
5. A student with an outstanding parking ticket will not be permitted to progress through the curriculum, including graduation, until the fine is remitted to the College.
6. Cars parked in marked handicap spaces will be subject to immediate towing at the owner's expense.
7. Personnel and students who are cited for repeated violations will have copies of the violations forwarded to their respective department heads, academic advisors and legal counsel for corrective actions.
8. If there is no correction in the offending action on part of the personnel or student, then an administrative decision for disciplinary action can result in having the offending vehicle towed.

# Personal Responsibilities for Safety

## I. Individual Responsibility

### A. Individual Responsibility

1. No safety rule is a complete substitute for common sense, nor can safety rules be devised to cover every situation experienced on the job. For these reasons, good judgment must be used in every work situation.
2. Individuals are responsible for following the approved practices and procedures outlined in this manual or standards that apply to any work performed for the college.
3. Any condition that might injure any person or damage any property should be reported to a supervisor or the employee in charge. The hazard should also be pointed out to any employee exposed to the hazard to correct or to avoid the hazard before an accident occurs.
4. Any injury that occurs at work, no matter how slight, or any accident that causes damage to property shall be reported immediately to the person in charge. All personnel policies must be followed as published. All minor injuries shall be properly treated and reported to the employee's supervisor by the end of the work period. The employee's supervisor should report injuries to the Safety Director.
5. Employees will follow the college's policies concerning consumption of alcoholic beverages.
6. Any violations of the safety policies or practices will follow the disciplinary policy set forth in the Personnel Policies Procedure handbook.

# Discipline

## I. Disciplinary Action

A. Appalachian College of Pharmacy may take disciplinary action, up to and including termination, against any employee for failing, in the employer's sole discretion, to adhere to certain standards of behavior. Ignorance of work rules is not an acceptable excuse for a violation of the rules of conduct, it is each employee's responsibility to learn and abide by these rules. Although employment may be terminated at-will by either the employee or Appalachian College of Pharmacy at any time, without following any formal system of discipline or warning, Appalachian College of Pharmacy may exercise discretion to utilize forms of discipline that are less severe than termination. Disciplinary action can take any one of the following forms:

Verbal warning;  
Written warning;  
Suspension; and  
Dismissal.

## Appendix A

### Definitions for the Purposes of Exposure Control Plan

Antibody	a substance produced in the blood of an individual that is capable of producing a specific immunity to a specific germ or virus
Amniotic Fluid	the fluid surrounding the embryo in the mother's womb
Antigen	any substance which stimulates the formation of an antibody
Assistant Secretary	the Assistant Secretary of Labor for Occupational Safety and Health, or designated representative
Biohazard Label	a label affixed to containers of regulated waste, refrigerators/freezers and other containers used to store, transport or ship blood and other potentially infectious materials. The label must be fluorescent orange-red in color with the biohazard symbol and the word biohazard on the lower part of the label.
Blood	human blood, human blood components, and products made from human blood
Bloodborne Pathogens	pathogenic (disease producing) microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV).
Cerebrospinal Fluid	a clear, colorless fluid surrounding the brain and spinal cord. It can be withdrawn by performing a spinal puncture
Clinical Laboratory	a workplace where diagnostic or other screening procedures are performed on blood or other potentially infectious materials
Contaminated	the presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface
Contaminated Laundry	laundry which has been soiled with blood or other potentially infectious materials or may contain sharps
Contaminated Sharp	any contaminated object that can penetrate the skin including, but not limited to needles, scalpels, broken glass, capillary tubes, and the exposed ends of dental wires
Decontamination	the use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use or disposal
Engineering Controls	controls (i.e., sharps disposal containers, self-sheathing needles, safer medical devices such as sharps with engineered sharps injury protection and needleless systems)

	that isolate or remove the bloodborne pathogens hazard from the workplace
Exposure Control Plan	a written program developed and implemented by the employer, which sets forth procedures, engineering controls, personal protective equipment, work practices and other methods that are capable of protecting employees from exposures to bloodborne pathogens, and meets the requirements spelled out by the OSHA Bloodborne Pathogens Standard
Exposure Determination	how and when occupational exposure occurs and which job classifications and/or individuals are at risk of exposure without regard to the use of personal protective equipment
Exposure Incident	a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee's duties
Handwashing Facilities	a facility providing an adequate supply of running potable water, soap and single use towels, medicated towelettes
HBV	hepatitis B virus
HIV	human immunodeficiency virus
Licensed Health Care	Professional a person who's legally permitted scope and practice allows him or her to independently perform the activities required by paragraph (f) of the standard: hepatitis B vaccination and post exposure evaluation and follow-up.
Medical Consultation	a consultation which takes place between an employee and a licensed healthcare professional for the purpose of determining the employee's medical condition resulting from exposure to blood or other potentially infectious materials, as well as any further evaluation or treatment that is required.
Mucus	a thick liquid secreted by glands, such as those lining the nasal passages, the stomach and intestines, the vagina, etc.
Mucous Membranes	a surface membrane composed of cells, which secrete various forms of mucus, as in the lining of the respiratory tract and the gastrointestinal tract, etc.
Occupational Exposure	a reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties.
OSHA	the Occupational Safety and Health Administration of the U.S. Department of Labor; the Federal agency with safety and health regulatory and enforcement authority for most U.S. industry and business.
Other Potentially (1)	the following human body fluids: semen, vaginal

Infectious Materials (OPIM)	secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids; (2) any unfixed tissue or organ (other than intact skin) from a human (living or dead); and (3) HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.
Parenteral	piercing mucous membranes or the skin barrier through such events as needlesticks, human bites, cuts, and abrasions
Pathogen	a bacteria or virus capable of causing infection or disease
Pericardial Fluid	fluid from around the heart
Pericardium	the sheath of tissue encasing the heart
Peritoneal Fluid	the clear straw-colored serous fluid secreted by the cells of the peritoneum
Peritoneum	the lining membrane of the abdominal (peritoneal) cavity. It is composed of a thin layer of cells
Personal Protective Equipment	specialized clothing or equipment worn by an employee for protection against a hazard. General work clothes (i.e., uniforms, pants, shirts or blouses) not intended to function as protection against a hazard are not considered to be personal protective equipment. Personal protective equipment may include, but is not limited to, gloves, gowns, laboratory coats, face shields or masks and eye protection equipment, and mouthpieces, resuscitation bags, pocket masks, or other ventilation devices. Personal protective equipment will be considered "appropriate" only if it does not permit blood or other potentially infectious materials to pass through, to, or reach the employee's work clothes, street clothes, undergarments skin, eyes, mouth, or other mucous membrane under nominal conditions of use and for the duration of time which the protective equipment is used.
Pleural	the membrane lining the chest cavity and covering the lungs. It is made up of a thin sheet of cells.
Pleural Fluid	fluid from the pleural cavity
Production Facility	a facility engaged in industrial-scale, large-volume or high concentration production of HIV or HBV
Prophylaxis	the measures carried out to prevent diseases
Regulated Waste	liquid or semi-liquid blood or other potentially infectious materials; contaminated items that release blood or other



Research Laboratory	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; and pathological and microbiological wastes containing blood or other potentially infectious materials. a laboratory producing or using research-laboratory-scale amounts of HIV or HBV. Research laboratories may produce high concentrations of HIV or HBV but not in the volume found in production facilities.
Serous Fluids	liquids of the body, similar to blood serum, which are in part secreted by serous membranes.
Source Individual	any individual, living or dead, whose blood or other potentially infectious materials may be a source of occupational exposure to the employee. Examples include, but are not limited to hospital and clinic patients; clients in institutions for the developmentally disabled; trauma victims; clients of drug and alcohol treatment facilities; residents of hospices and nursing homes; human remains; and individuals who donate or sell blood or blood components.
Sterilize	the use of a physical or chemical procedure to destroy all microbial life including highly resistant bacterial endospores.
Synovial Fluid	the clear amber fluid usually present in small quantities in a joint of the body (i.e., knee, elbow).
Universal Precautions	an approach to infection control. According to the concept of Universal Precautions, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens.
Vascular	pertaining to or composed of blood vessels
Work Practice Controls	controls that reduce the likelihood of exposure by altering the manner in which the task is performed.



## TASK AND PROCEDURES RECORD

Facility: \_\_\_\_\_

Location: \_\_\_\_\_

\_\_\_\_\_  
 Type of Bodily Fluid/Substance to Which Exposure is Likely:

- |   |                                    |            |
|---|------------------------------------|------------|
| 1. Blood<br>containing cell or tissue cultures                  | 6. Unfixed human tissues or organs | 11. HIV-   |
| 2. Semen<br>cultures  | 7. Amniotic Fluids                 | 12. Organ  |
| 3. Vaginal Secretions<br>HBV-containing culture media           | 8. Synovial Fluids                 | 13. HIV-or |
| 4. Cerebrospinal Fluids<br>solutions                            | 9. Saliva in dental procedures     | or         |
| 5. Pericardial Fluids<br>Fluids visibly contaminated with blood | 10. Peritoneal Fluids              | 14. Body   |

Job Classification	Task/Procedure	Type(s) of Exposure (See Code)	Protective Procedure(s)	Protective Barrier(s) (Gloves, Gown, Apron, Mask, Eyeware etc.)
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				

## EXPOSURE INCIDENT INVESTIGATION FORM

**Date of Incident:** \_\_\_\_\_ **Time of Incident:** \_\_\_\_\_

**Location:** \_\_\_\_\_

**Person(s) Involved:**

\_\_\_\_\_

**Potentially Infectious Materials Involved:**

**Type:** \_\_\_\_\_ **Source:** \_\_\_\_\_

**Circumstances (what was occurring at the time of the incident):** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**How was the incident caused: (accident, equipment malfunction, etc.) List any tool, machine, or equipment involved:** \_\_\_\_\_

\_\_\_\_\_

**Personal protective equipment being used at the time of the incident:**

\_\_\_\_\_

\_\_\_\_\_

**Actions Taken (decontamination, clean-up, reporting, etc.)** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Recommendations for avoiding repetition of incident:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## EMPLOYEE MEDICAL RECORD CHECKLIST

**NAME:** \_\_\_\_\_

**SOCIAL SECURITY NUMBER:** \_\_\_\_\_

**LOCATION:** \_\_\_\_\_

**JOB CLASSIFICATION:** \_\_\_\_\_

Attach a copy of the employee's hepatitis B vaccination record or declination form.  
Attach any additional medical records relative to hepatitis B.

Brief Description of Exposure Incident: \_\_\_\_\_

---

**Log and attach copy of: (Check all that apply)**

- The information provided to the health care professional
- The Exposure Incident Investigation Report
- The results of the source individual's blood testing, if consent for release has been obtained and results are available
- The health care professional's written opinion

Brief Description of Exposure Incident: \_\_\_\_\_

---

**Log and attach a copy of: (Check all that apply)**

- The information provided to the health care professional
- The Exposure Incident Investigation Report
- The results of the source individual's blood testing, if consent for release has been obtained and results are available
- The health care professional's written opinion

**INFORMATION AND TRAINING RECORD FOR  
EMPLOYEES WITH POTENTIAL EXPOSURE  
TO BLOODBORNE PATHOGENS**

**Date(s) of training:** \_\_\_\_\_

**Trainer(s) name and qualifications:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Names and Job Titles of all employees attending this training: (See Attached)**

**Agenda and/or materials presented to participants included:**

- An accessible copy of the text of the OSHA Standard.
- A general explanation of the epidemiology and symptoms of bloodborne diseases.
- An explanation of the modes of transmission of bloodborne pathogens.
- An explanation of the exposure control plan and the means by which employees can obtain a copy of the written plan.
- An explanation of the appropriate methods for recognizing tasks/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: i.e., engineering controls, work practices, and personal protective equipment.
- Information on the types, proper use, location, removal, handling, decontamination, and disposal of personal protective equipment or other contaminated items.
- An explanation of the basis for selection of personal protective equipment.
- Information on the HBV vaccine, its efficacy, safety, method of administration, benefits of vaccination, and provision at no cost to the employee.
- Information on the appropriate actions to take and persons to contact in an emergency involving blood and other potentially infectious materials.
- An explanation of the procedure to follow if an exposure incident occurs, the Method of reporting, and the medical follow-up that is available.
- Information on the post-exposure evaluation and follow-up that is provided.
- An explanation of the signs, symbols, and color-coding of biohazards.
- A question and answer session between the trainer(s) and employee(s).
- List of contacts within the health community that can be resources to the employees if they have questions after training.

**Signature of Training Coordinator:** \_\_\_\_\_

Appendix G

**LOCKDOWN SITUATION REPORT**

Location including building name and street address:

---

---

---

1. Name of person reporting \_\_\_\_\_

2. Number of person(s) sheltered and injuries: minor \_\_\_\_\_ serious \_\_\_\_\_

3. Number of handicapped: wheelchair \_\_\_\_\_ mobility impaired \_\_\_\_\_  
hearing \_\_\_\_\_ vision \_\_\_\_\_

4. Sighting of subject: \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_ Clothing \_\_\_\_\_

5. Last seen \_\_\_\_\_

6. Direction of travel \_\_\_\_\_

## FIRE INCIDENT REPORT

Building \_\_\_\_\_

Date \_\_\_\_\_ Time \_\_\_\_\_ a.m. \_\_\_\_\_ p.m.

Immediate location of fire (such as wastebasket or trash container, mattress, curtains, decorations, electrical appliance, etc.) \_\_\_\_\_  
\_\_\_\_\_

Area location of fire (such as resident's room, classroom, kitchen, office, stairwell, etc.) \_\_\_\_\_  
\_\_\_\_\_

Cause of fire (such as overloading electrical circuits, smoking in bed, ignition from candle flame or hot grease, etc.) \_\_\_\_\_  
\_\_\_\_\_

If possible that fire was deliberately set, explain \_\_\_\_\_  
\_\_\_\_\_

Person responsible for fire \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_

Who reported fire \_\_\_\_\_  
Address \_\_\_\_\_

Witnesses \_\_\_\_\_ Address \_\_\_\_\_

Witnesses \_\_\_\_\_ Address \_\_\_\_\_

How fire was extinguished \_\_\_\_\_

By whom \_\_\_\_\_ Address \_\_\_\_\_

Fire reported to \_\_\_\_\_ Physical Plant \_\_\_\_\_

Local Fire Department \_\_\_\_\_ Other (explain) \_\_\_\_\_  
\_\_\_\_\_

Did fire alarm sound? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ not applicable  
Was building evacuated? \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ not applicable

Person making this report \_\_\_\_\_  
Title \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_



Appendix I

## Employee's Notice of Injury

Name \_\_\_\_\_ ID Number \_\_\_\_\_

Home Mailing Address \_\_\_\_\_  
Street City State Zip County

Home Phone Number \_\_\_\_\_ Date of Birth \_\_\_\_\_  
mm/dd/yy

Marital Status \_\_\_\_\_ Number of Dependent Children \_\_\_\_\_

Supervisor's Name \_\_\_\_\_

Date of Injury \_\_\_\_\_ Time of Injury \_\_\_\_\_ am \_\_\_\_\_ pm

Location where injury occurred \_\_\_\_\_  
\_\_\_\_\_

How did the accident happen? \_\_\_\_\_  
\_\_\_\_\_

What part of your body was affected? \_\_\_\_\_  
\_\_\_\_\_

Nature of the injury (sprain, break, bruise, etc.) \_\_\_\_\_  
\_\_\_\_\_

Witnesses, if any \_\_\_\_\_

Have you been to a doctor or hospital? \_\_\_\_\_ yes \_\_\_\_\_ no

Doctor's or Hospital's Name \_\_\_\_\_

Doctor's or Hospital's Phone \_\_\_\_\_

Doctor's or Hospital's Address \_\_\_\_\_  
Street City State Zip

Person Reporting Injury \_\_\_\_\_ Date \_\_\_\_\_