

_____ County

Seatbelt Use Policy

PURPOSE

This policy is intended to protect county employees operating or riding in motor vehicles including construction equipment from the hazards of motor vehicle accidents.

APPLICABILITY

This policy is mandatory for all county employees operating motor vehicles and visitors riding on county-owned vehicles

This includes all county employees operating county-owned vehicles, passengers in county-owned vehicles, and all employees operating personal vehicles while engaged in county business, and employees riding as a passenger in a vehicle while on county business.

POLICY

All county-owned vehicles will be equipped with seatbelts. This includes the vehicle cab or operator's compartment, passenger seating area and jump seats.

Operators of tractors or other off-road vehicles equipped with Roll-Over Protection Structures (ROPS) will use seatbelts.

Vehicle passengers will be permitted to ride only in areas of the vehicle designed for that purpose.

Seatbelts shall be used by all employees riding in a vehicle while the vehicle is in motion.

There are no vehicle exemptions to this policy.

Violation of this policy may result in disciplinary action.

Employees who have a medical condition which may preclude wearing a seatbelt may carry a physician's note indicating a waiver for medical reasons.

Your signature below certifies your agreement to comply with this policy.

Employee Signature

Date

_____ County

Handheld Device Use Policy

At <insert county name>, we deeply value the safety and well-being of all employees. Due to the increasing number of crashes resulting from the use of cell phones while driving, we are instituting this policy.

Employees may not use handheld mobile electronic devices in vehicles while operating a motor vehicle under any of the following situations:

- When employee is operating a vehicle owned, leased or rented by the county.
- When the employee is operating a personal motor vehicle in connection with county business.
- When the cellular telephone or mobile electronic device is county owned, leased, or if the county provides stipend or other financial arrangement for the business use of a personal cell phone or mobile electronic device.

Employees are expected to follow this policy and may be subject to disciplinary action up to and including immediate dismissal.

Your signature below certifies your agreement to comply with this policy.

Employee Signature

Date



MODEL WRITTEN HAZARD COMMUNICATION PROGRAM

**For Public Employers in Texas
Subject to the Texas Hazard Communication Act**

Prepared by:

Texas Department of State Health Services
Division for Regulatory Services
Policy, Standards and Quality Assurance
Environmental Hazards Group
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Austin, TX 78714-9347

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I. General Information

- A. The Texas Hazard Communication Act (THCA), codified as Chapter 502 of the Texas Health and Safety Code (HSC), requires all public employers in Texas to provide their employees with information regarding hazardous chemicals to which employees may be exposed in their workplace. In order to comply with Section 502.009(b) of the THCA and Section 295.7(a) of the THCA Rules (Title 25 of the Texas Administrative Code (TAC), Section 295.1 – 295.13), the following written Hazard Communication Program has been established for (name of public employer).
- B. The master copy of the written hazard communication program will be maintained in (location). Copies of the written program will be modified as needed for each separate workplace where hazardous chemicals are used or stored and a copy maintained at each workplace. The written program will be available to all interested employees and their representatives upon request.
- C. To facilitate administration of and compliance with this Program, the following levels of responsibility have been established:
1. The (position/person) will have overall responsibility for administering and maintaining this program and ensuring that it meets all requirements of the THCA.
 2. Supervisors will be responsible for (enter text here).
 3. Individual employees will be responsible for (enter text here).

II. Exemptions

Per Section 502.004(f), the following chemicals are exempt from the requirements of the THCA and are outside the scope of this written program:

- A. Hazardous waste that is subject to regulation by the Texas Commission on Environmental Quality (TCEQ) and/or the U.S. Environmental Protection Agency
- B. A chemical in a laboratory under the direct supervision or guidance of a **technically qualified individual** if:
 - 1. Labels on incoming containers of chemicals are not removed or defaced
 - 2. This employer complies with Sections 502.006 and 502.009 of the THCA with respect to laboratory employees; and
 - 3. The laboratory is not used primarily to produce hazardous chemicals in bulk for commercial purposes
- C. Tobacco or tobacco products
- D. Wood or wood products
- E. Articles formed to a specific shape or design during manufacture and that do not release or otherwise result in exposure to a hazardous chemical under normal conditions of use
- F. Food, drugs, cosmetics or alcoholic beverages
- G. Consumer products or hazardous substances used in the workplace in the same manner as normal consumer use and if the use results in a duration and frequency of exposure that is not greater than exposures experience by a consumer
- H. Radioactive waste.

III. Definitions

- A. “**Appropriate Hazard Warning**” – Any words, pictures, symbols, or combination thereof appearing on a label or other appropriate form of warning which convey the health and physical hazards, including the target organ effects of the chemical(s) in the container(s).

- B. “**Categories of Hazardous Chemicals**” – A grouping of hazardous chemicals with similar properties.

- C. “**Container**” – Any bag, barrel, bottle, box, can, cylinder, drum, reaction vessel, storage tank, or the like that contains a hazardous chemical or contains multiple smaller containers of an identical hazardous chemical. The term “container” does not mean pipes or piping systems, nor does it mean engines, fuel tanks, or other operating systems in a vehicle. A **primary container** is one in which the hazardous chemical is received from the supplier. A **secondary container** is one to which the hazardous chemical is transferred after receipt from the supplier.

- D. “**Employee**” – A person who may be or may have been exposed to hazardous chemicals in the person’s workplace under normal operating conditions or foreseeable emergencies. Workers such as office workers or accountants who encounter hazardous chemicals only in non-routine, isolated instances are not employees for the purposes of this Act.

- E. “**Expose**” – Subjecting an employee to a hazardous chemical in the course of employment through any route of entry, including inhalation, ingestion, skin contact, or absorption. The term includes potential, possible, or accidental exposure under normal conditions of use or in a reasonably foreseeable emergency.

- F. **“Hazardous Chemical”** or **“Chemical”** – An element, compound, or mixture of elements or compounds that is a physical hazard or a health hazard.
- G. **“Health Hazard”** – A chemical for which acute or chronic health effects may occur in exposed employees and which is a toxic agent, irritant, corrosive, or sensitizer.
- H. **“Label”** – Any written, printed, or graphic material displayed on or affixed to containers of hazardous chemicals, and which includes the same name as on the Safety Data Sheet (SDS) or Material Safety Data Sheet (MSDS).
- I. **“Material Safety Data Sheet” (“MSDS”)** – A document containing chemical hazard and safe handling information for the hazardous chemical as determined by the chemical’s manufacturer.
- J. **“Physical Hazard”** – A chemical which is a combustible liquid, a compressed gas, explosive, flammable, an organic peroxide, an oxidizer, pyrophoric, unstable (reactive), or water-reactive.
- K. **“Personal Protective Equipment”** – Protective equipment provided to an employee by the employer which provides a level of protection to chemicals to which an employee may be exposed that will be adequate to ensure their health and safety based on current industry standards.
- L. **“Safety Data Sheet” (“SDS”)** – The Hazard Communication Standard (HCS) (29 CFR 1910.1200(g)), aligned with the GHS in 2012, requires that the chemical manufacturer, distributor, or importer provide Safety Data Sheets (SDSs) for each hazardous chemical to downstream users to communicate information on these hazards. Safety Data Sheets were formerly called Material Safety Data Sheets, or MSDSs. The information contained in the

SDS is largely the same as the MSDS, except now the SDSs are required to be presented in a consistent, user-friendly, 16 section format.

M. **“Stationary Process Container”** – A tank, vat, or other such container which holds different hazardous chemicals at different times.

N. **“Technically Qualified Individual”** – An individual with a professional education and background working in the research or medical fields, such as a physician or registered nurse, or an individual holding a minimum of a bachelor’s degree in a physical or natural science.

O. **“Work Area”** – A room, defined space, utility structure, or emergency response site in a workplace where hazardous chemicals are present, produced, or used, and where employees are present.

P. **“Workplace”** – A contiguous facility that is staffed 20 hours or more per week, unless such a facility is subdivided by the employer. Normally this subdivision would be a building, cluster of buildings or other structures, or a complex of buildings, but could be for a portion of a building if the employer chooses. Noncontiguous properties are always separate workplaces unless they are temporary workplaces, in which case they can be either work areas or a headquarters’ workplace or separate workplaces, which is at the discretion of the employer.

IV. Workplace Chemical List..... (HSC §502.005 and 25 TAC §295.4)

- A. The (name of employer or workplace) will develop and maintain a list of hazardous chemicals normally present in the workplace in excess of 55 gallons or 500 pounds. This Workplace Chemical List will be developed for each workplace where such quantities of hazardous chemicals are used or stored and will be available for review by employees and their designated representatives.
(Employers may use Attachment A, *Model Workplace Chemical List*, to comply with this requirement.)

- B. The (position/person) will be responsible for reviewing and updating the Workplace Chemical List(s) for the (name of employer or workplace) as necessary, but at least by December 31 of each year.

- C. The Workplace Chemical List will be maintained for at least 30 years.

- D. Further information on chemicals list on the Workplace Chemical List can be obtained by referring to the Safety Data Sheet (SDS) or Material Safety Data Sheet (MSDS) located in each workplace where these chemicals are used or stored.

**V. Safety Data Sheets and/or Material Safety Data Sheets
(HSC §502.006 and TAC §295.5)**

- A. The (name of employer or workplace) will maintain a current and appropriate Safety Data Sheet (SDS) or Material Safety Data Sheet (MSDS) for each hazardous chemical purchased.
- B. The (position/person) will be responsible for the SDS/MSDS system for (name of employer or workplace) and will ensure that:
1. Incoming SDSs/MSDSs are reviewed for new and significant health/safety information and that any new information is passed on to the affected employees.
 2. Hazardous chemicals received without an SDS or MSDS are withheld from use until a current SDS or MSDS is obtained.
 3. Missing SDSs or MSDSs are requested from an appropriate source (e.g. chemical manufacturer, distributor, or electronic database) within 30 days from receipt of the hazardous chemical.
 4. Affected employees are provided a description of any alternative system (such as electronic databases) being used in lieu of hard copy SDSs/MSDSs.
 5. As SDSs are received from hazardous chemical manufacturers and distributors, they replace the Material Safety Data Sheets on file. Training on both the old MSDSs and the new SDSs should continue throughout the transition period until employers no longer have any of the old MSDSs on site.

6. Emergency responders are provided SDSs/MSDSs as soon as practical upon request.

C. SDS and MSDS files for (name of employer or workplace) will be kept in (location).

D. SDSs/MSDSs will be readily available for review by employees or their designated representatives upon request.

VI. Chemical Container Labels.....(HSC §502.007 and TAC §295.6)

- A. All containers of hazardous chemicals used or stored by (name of employer or workplace) will be appropriately labeled.
- B. The (position/person) will be responsible for the hazardous chemical labeling system and will verify that:
1. All **primary containers** of hazardous chemicals are clearly labeled to include:
 - a. The identity of the chemical as it appears on the SDS/MSDS
 - b. The appropriate hazard warnings
 - c. The name and address of the manufacturer
 2. All **secondary containers** of hazardous chemicals are clearly labeled to include:
 - a. The identity of the chemicals as it appears on the SDS/MSDS
 - b. The appropriate hazard warnings
 3. A description of alternative labeling systems, if used, is provided to employees. Examples of alternative labeling systems are the National Fire Protection Association (NFPA) 704m Standard and the Hazardous Materials Information Systems (HMIS) Standard
- C. The (name of employer or workplace) will rely on the chemical manufacturers or distributors to provide labels which meet the above requirements for primary containers of all hazardous chemicals purchased, and will re-label containers only when the label is illegible or otherwise does not meet the above requirements.

VII. Employee Training Program.....(HSC §502.009 and 25 TAC §295.7)

A. The (name of employer or workplace) will provide an education and training program to all employees who routinely use or handle hazardous chemicals in their workplace.

B. The (position/person) will be responsible for the employee training program and will ensure that:

1. Appropriate training is provided to all covered employees and includes:
 - a. The use of information provided on SDSs/MSDSs and chemical container labels
 - b. The location of hazardous chemicals present in the employee's' work areas
 - c. The physical and health effects of exposure
 - d. Proper use of personal protective equipment
 - e. Safe handling of hazardous chemicals
 - f. First aid treatment for exposure to hazardous chemicals
 - g. Safety instruction on clean-up and disposal of hazardous chemicals
2. Required training records are maintained and include:
 - a. The date of the training session

- b. A legible list of all employees attending the training session
 - c. The subjects covered
 - d. The name of the instructors (Employers may use either Attachment B, *Employee Training Roster*, or Attachment C, *Employee Training Sheet*, to comply with this requirement)
3. All covered employees are identified and incorporated into the training program.
 4. Employees are provided information concerning the hazardous chemicals to which they may be exposed during the performance of non-routine tasks.
 5. New employees are trained prior to their being required to use or handle a hazardous chemical.
 6. The need and frequency for periodic/refresher training is assessed.
- C. Employees subject to these training requirements will sign an attendance roster for each training session attended, verifying that they received and understood the information.

VIII. Reporting Employee Deaths and Injuries...(HSC §502.012 and 25 TAC §295.9)

- A. The (name of employer or workplace) will notify the Texas Department of State Health Services, Division for Regulatory Services, Policy, Standards & Quality Assurance Unit, Environmental Hazards Group, of any employee accident that involves a hazardous chemical exposure or asphyxiation, and that is fatal to one or more employees or results in the hospitalization of five or more employees.
- B. The (position/person) will be responsible for reporting all such accidents to the Texas Department of State Health Services, Division for Regulatory Services, Policy, Standard & Quality Assurance Unit, Environmental Hazards Group, within 48 hours after their occurrence. Notifications will be made either orally or in writing to:

Texas Department of State Health Services
Division for Regulatory Services Policy,
Standards & Quality Assurance Unit
Environmental Hazards Group
PO Box 149347, MC 1987
Austin, TX 78714-9347

Phone: (512) 834-6787

Fax: (512) 834-6726

- C. Employees will be responsible for reporting all accidents involving a hazardous chemical to their supervisor.
- D. Supervisors will be responsible for reporting all accidents involving a hazardous chemical to (position/person).

IX. Posting the *Notice to Employees*...(HSC §502.0017 and 25 TAC §295.12)

- A. The (position/person) will post and maintain in all workplaces where hazardous chemicals are used or stored the most current version of the THCA *Notice to Employees*, informing employees of their rights under the THCA. (See attachment D, *Notice to Employees*)
- B. The *Notice to Employees* shall be clearly posted and unobstructed at all locations in the workplace where notices are normally posted, and with at least one location in each workplace.
- C. In workplaces where employees that have difficulty reading or understanding English may be present, a copy of the *Notice to Employees*, printed in Spanish, will be posted together with the English version. (See attachment E, *Notice to Employees*, Spanish version (*Aviso Al Empleado*))
- D. Additional copies of the *Notice to Employees*, in both English and Spanish, are available on the Worker Right-To-Know website at <http://www.dshs.state.tx.us/tiertwo/publications.shtm#notice> or on request from the Policy, Standards & Quality Assurance Unit, Environmental Hazards Group, at the address or telephone number listed on the cover page of this written program.

X. Personal Protective Equipment...(HSC §502.017 and 25 TAC §295.12)

- A. The (name of employer or workplace) will provide appropriate personal protective equipment (PPE) to all employees who use or handle hazardous chemicals.

- B. The (position/person) will assume overall responsibility for the PPE program and will ensure that appropriate equipment and training are provided, to include:
 - 1. Proper selection of PPE based on:
 - a. Routes of entry
 - b. Permeability of PPE material
 - c. Duties being performed by the employee
 - d. Hazardous chemicals present
 - 2. Proper fit and functionality of PPE as described by the manufacturer's specifications
 - 3. Appropriate maintenance and storage of PPE

XI. Maintaining Employee Rights.....(HSC §502.017 and TAC §295.12)

- A. The (name of employer) shall not discipline, harass, or discriminate against any employee for filing complaints, assisting inspectors of the Texas Department of State Health Services, participating in proceedings related to the Texas Hazard Communication Act, or exercising any rights under the Act.

- B. Employees cannot waive their rights under the Texas Hazard Communication Act. A request or requirement for such a waiver by an employer is a violation of the Act.

The Division for Regulatory Services, Policy, Standards & Quality Assurance Unit, Environmental Hazards Group welcomes your questions or comments regarding this Model Written Hazard Communication Program, the Texas Hazard Communication Act, or any aspect related to the administration and enforcement of the Act. You may contact the Texas Department of State Health Services, Policy, Standards & Quality Assurance Unit, Environmental Hazards Group, at:

Texas Department of State Health Services
Division for Regulatory Services Policy,
Standards & Quality Assurance Unit
Environmental Hazards Group
PO Box 149347, MC 1987
Austin, TX 78714-9347

Phone: (512) 834-6787

Fax: (512) 834-6726

XII. Attachments

- A. Workplace Chemical List
- B. Employee Training Roster
- C. Employee Training Sheet
- D. *Notice to Employees* (English version)
- E. *Notice to Employees* (Spanish version)

Workplace Chemical List

Name of Workplace, Work Area, or Temporary Workplace:

Identity Used on the Safety Data Sheet & Container Label	Work Area	Quantity (optional)	Unit Size (optional)

Workplace Chemical List Prepared By: _____

Name (Printed)

Signature (Required)

Date of Preparation (This form must be revised annually): _____

Employee Training Roster (continued)

A. Per Sections 502.009(c) and (g) of the Texas Hazard Communication Act (THCA), the following subject(s) were covered in this training:

- Reading and interpreting chemical container labels
- Reading and interpreting alternative labeling systems, if such labeling systems are being used by the employer
- Reading and interpreting Safety Data Sheets (SDSs) and/or Material Safety Data Sheets (MSDSs)
- Location of hazardous chemicals in the workplace
- Physical and health effects of exposure
- Proper use of personal protective equipment
- First aid treatment for exposure
- Safety instruction on handling, cleanup and disposal procedures

B. Per Section 502.009(g) of the THCA, training was conducted based on:

- Categories of hazardous chemicals
- Individual hazardous chemicals

C. This hazard communication training was provided as:

- Initial training per Section 502.009(a) and (f) of the THCA
- Periodic/refresher training per Section VII(B)(6) of this Written Hazard Communication Program

EMPLOYEE TRAINING SHEET
Texas Hazard Communication Act, Section 502.009(g)

Department/Work Area: _____

Instructor: _____ Date: _____

Per Sections 502.009(c) and (g) of the Texas Hazard Communication Act (THCA), the following subject(s) were covered in this training:

- Reading and interpreting chemical container labels
- Reading and interpreting alternative labeling systems, if such labeling systems are being used by the employer
- Reading and interpreting Safety Data Sheets (SDSs) and/or Material Safety Data Sheets (MSDSs)
- Location of hazardous chemicals in the workplace
- Physical and health effects of exposure
- Proper use of personal protective equipment
- First aid treatment for exposure
- Safety instruction on handling, cleanup and disposal procedures

Per Section 502.009(g) of the THCA, training was conducted based on:

- Categories of hazardous chemicals
- Individual hazardous chemicals

This hazard communication training was provided as:

- Initial training per Section 502.009(a) and (f) of the THCA
- Periodic/refresher training per Section VII(B)(6) of this Written Hazard Communication Program

Employee: _____ Date: _____
(Printed)

Employee: _____
(Signature)

Instructor: _____
(Signature)

NOTICE TO EMPLOYEES

The Texas Hazard Communication Act, codified as Chapter 502 of the Texas Health and Safety Code, requires public employers to provide employees with specific information on the hazards of chemicals to which employees may be exposed in the workplace. As required by law, your employer must provide you with certain information and training. A brief summary of the law follows.

HAZARDOUS CHEMICALS

Hazardous chemicals are any products or materials that present any physical or health hazards when used, unless they are exempted under the law. Some examples of more commonly used hazardous chemicals are fuels, cleaning products, solvents, many types of oils, compressed gases, many types of paints, pesticides, herbicides, refrigerants, laboratory chemicals, cement, welding rods, etc.

WORKPLACE CHEMICAL LIST

Employers must develop a list of hazardous chemicals used or stored in the workplace in excess of 55 gallons or 500 pounds. This list shall be updated by the employer as necessary, but at least annually, and be made readily available for employees and their representatives on request.

EMPLOYEE EDUCATION PROGRAM

Employers shall provide training to newly assigned employees before the employees work in a work area containing a hazardous chemical. Covered employees shall receive training from the employer on the hazards of the chemicals and on the measures they can take to protect themselves from those hazards. This training shall be repeated as needed, but at least whenever new hazards are introduced into the workplace or new information is received on the chemicals which are already present.

SAFETY DATA SHEETS

Employees who may be exposed to hazardous chemicals shall be informed of the exposure by the employer and shall have ready access to the most current Safety Data Sheets (SDSs) or Material Safety Data Sheets (MSDSs) if an SDS is not available yet, which detail physical and health hazards and other pertinent information on those chemicals.

LABELS

Employees shall not be required to work with hazardous chemicals from unlabeled containers except portable containers for immediate use, the contents of which are known to the user.

EMPLOYEE RIGHTS

Employees have rights to:

- access copies of SDSs (or an MSDS if an SDS is not available yet)
- information on their chemical exposures
- receive training on chemical hazards
- receive appropriate protective equipment
- file complaints, assist inspectors, or testify against their employer

Employees may not be discharged or discriminated against in any manner for the exercise of any rights provided by this Act. A waiver of employee rights is void; an employer's request for such a waiver is a violation of the Act. Employees may file complaints with the Texas Department of State Health Services at the telephone numbers provided below.

EMPLOYERS MAY BE SUBJECT TO ADMINISTRATIVE PENALTIES AND CIVIL OR CRIMINAL FINES RANGING FROM \$50 TO \$100,000 FOR EACH VIOLATION OF THIS ACT

Further information may be obtained from:

Texas Department of State Health Services
Division for Regulatory Services
Policy, Standards, & Quality Assurance Unit
Environmental Hazards Group
PO Box 149347, MC 1987
Austin, TX 78714-9347

(800) 452-2791 (toll-free in Texas)

(512) 834-6787

Fax: (512) 834-6726

TXHazComHelp@dshs.texas.gov



Worker Right-To-Know Program
Publication# E23-14173
Revised 03/2014

AVISO AL EMPLEADO

La Ley de Comunicación sobre Peligros de Texas, codificada como el capítulo 502 del Código de Salud y Seguridad de Texas, exige que los empleadores públicos le provean a los empleados información específica sobre los peligros de los químicos a los que los empleados podrían estar expuestos en el centro de trabajo. Según exige la ley, su empleador debe proveerle cierta información y capacitación. A continuación presentamos un breve resumen de la ley.

QUÍMICOS PELIGROSOS

Los químicos peligrosos son cualquier producto o material que represente algún peligro físico o de salud al ser usado, a menos que este quede exento bajo la ley. Como ejemplos de químicos peligrosos más comúnmente usados están los combustibles, los productos de limpieza, los solventes, muchos tipos de aceite, los gases comprimidos, muchos tipos de pintura, los pesticidas, los herbicidas, los refrigerantes, los químicos de laboratorio, el cemento, las varillas de soldadura, etc.

LISTA DE QUÍMICOS EN EL CENTRO DE TRABAJO

Los empleadores deben desarrollar una lista de los químicos peligrosos usados o almacenados en el centro de trabajo que sobrepasen los 55 galones o las 500 libras. El empleador debe renovar la lista de ser necesario, y al menos anualmente, y debe ponerla a fácil disposición de los empleados y de sus representantes al esta ser solicitada.

PROGRAMA DE INSTRUCCIÓN DEL EMPLEADO

Los empleadores deben proveerle capacitación a los empleados recién asignados antes de que los empleados trabajen en un área de trabajo que contenga químicos peligrosos. Los empleados contemplados en la ley deben recibir capacitación del empleador sobre los peligros de los químicos y sobre las medidas que ellos mismos pueden tomar para protegerse de dichos peligros. La capacitación debe repetirse de ser necesario, y al menos cuando se introduzcan nuevos peligros en el centro de trabajo o se reciba nueva información sobre los químicos que ya están presentes.

HOJAS DE DATOS DE SEGURIDAD

El empleador debe informar de la exposición a los empleados que pudieran estar expuestos a químicos peligrosos y ellos deben tener acceso fácil a las hojas de datos de seguridad (SDS) o las hojas de datos de seguridad del material (MSDS) más recientes si es que todavía no hay una SDS disponible, las cuales detallan los peligros físicos y de salud y cualquier otra información pertinente sobre dichos químicos.

ETIQUETAS

No se requerirá que los empleados trabajen con químicos peligrosos provenientes de contenedores que no están etiquetados con excepción de los contenedores portátiles de uso inmediato, el contenido de los cuales el usuario conoce.

DERECHOS DEL EMPLEADO

Los empleados tienen derecho a:

- acceder a copias de las SDS (o una MSDS si es que todavía no hay una SDS disponible)
- la información sobre sus exposiciones químicas
- recibir capacitación sobre los peligros químicos
- recibir el equipo protector apropiado
- presentar quejas, asistir a los inspectores y testificar en contra de su empleador

No se despedirá a los empleados ni se les discriminará de ninguna manera por ellos ejercer cualquiera de los derechos que esta ley estipula. Las renunciaciones de derechos del empleado no tienen ninguna validez; el que el empleador solicite ese tipo de renuncia infringe esta ley. Los empleados pueden presentar sus quejas ante el Departamento Estatal de Servicios de Salud de Texas llamando al teléfono sin costo provisto abajo.

LOS EMPLEADORES PODRÍAN ESTAR SUJETOS A SANCIONES ADMINISTRATIVAS Y A MULTAS CIVILES O PENALES QUE VAN DESDE LOS \$50 HASTA LOS \$100,000 DÓLARES POR CADA INFRACCIÓN DE ESTA LEY

Puede obtener mayor información en:
Texas Department of State Health Services
Division for Regulatory Services
Policy, Standards, & Quality Assurance Unit
Environmental Hazards Group
PO Box 149347, MC 1987
Austin, TX 78714-9347



(800) 452-2791 (llamada gratuita dentro de Texas)

(512) 834-6787

Fax: (512) 834-6726

TXHazComHelp@dshs.texas.gov

Worker Right-To-Know Progra
Publication # E23-14173
Revised 03/2014



COUNTY

CDL DRUG AND ALCOHOL TESTING
POLICY AND PROCEDURES

INTRODUCTION

Drivers are an extremely valuable resource for _____ County's operations. Their health and safety is a serious concern. Drug or alcohol use may pose a serious threat to driver health and safety. It is, therefore, the policy of _____ County to prevent substance use or abuse from having an adverse effect on our drivers. The county maintains that the work environment is safer and more productive without the presence of alcohol, illegal or inappropriate drugs in the body or on county property. Furthermore, drivers have a right to work in an alcohol and drug-free environment and to work with drivers free from the effects of alcohol and drugs. Drivers who abuse alcohol or use drugs are a danger to themselves, their co-workers and the county's assets.

The adverse impact of substance abuse by drivers has been recognized by the federal government. The Federal Motor Carrier Safety Administration (FMCSA) has issued regulations, which require the county to implement a controlled substance testing program. The county will comply with these regulations and is committed to maintaining a drug-free work place. All drivers are advised that remaining drug-free and medically qualified to drive are conditions of continued employment with the county.

Specifically, it is the policy of _____ County that the use, sale, purchase, transfer, possession or presence in one's system of any controlled substance (except medically prescribed drugs) by any driver while on county premises, engaged in county business, while operating county equipment, or while under the authority of the county is strictly prohibited. FMCSA stated that mandatory testing must apply to every person who operates a commercial motor vehicle in interstate or intrastate commerce and is subject to the CDL licensing requirement.

The execution and enforcement of this policy will follow set procedures to screen body fluids (urinalysis) conduct breath testing, and/or search all driver applicants for alcohol and drug use, and those drivers suspected of violating this policy who are involved in a U.S. Department of Transportation (DOT) reportable accident or who are periodically or randomly selected pursuant to these procedures. These procedures are designed not only to detect violations of this policy, but to ensure fairness to each driver. Every effort will be made to maintain the dignity of drivers or driver applicants involved.

Neither this policy nor any of its terms are intended to create a contract of employment or to contain the terms of any contract of employment. _____ County retains the

sole right to change, amend or modify any term or provision of this policy without notice. This policy is effective (month, day, year), and will supersede all prior policies and statements relating to alcohol or drugs for CDL drivers.

This policy outlines the responsibilities of employees, supervisors and managers with regard to drug and alcohol testing of employees in safety-sensitive positions in accordance with U.S. Department of Transportation regulations, issued under the Omnibus Transportation Employee Testing Act of 1991.

SAMPLE

POLICY STATEMENT

It is the policy of _____ County to comply fully with the regulations mandating pre-employment, random, reasonable suspicion and post-accident drug and alcohol testing in accordance with regulations issued by the U.S. Department of Transportation. This policy applies to employees whose job requires them to obtain and retain a Commercial Drivers' License (CDL) and operate a Commercial Motor Vehicle (CMV). Positions and employees covered by this Policy shall be referred to herein as CDL positions and CDL employees respectively.

This policy contains the requirements of the regulations, except where indicated that a particular provision is based on the authority of _____ County, as follows:

- The performance of safety-sensitive functions is prohibited by CDL employees having a breath alcohol concentration of 0.04 percent or greater as indicated by an alcohol breath test; by employees using alcohol or within four hours after using alcohol; and by employees in the possession of any medication containing alcohol unless the package seal is unbroken. In addition, _____ County prohibits the performance of any safety-sensitive function by an employee with a breath alcohol concentration of .02 percent or greater.
- Use of controlled substances by CDL employees covered by the Policy is prohibited and is in accordance with the regulations issued by the U.S. Department of Transportation.
- A CDL employee is performing a safety-sensitive function at the following times:
 - All time on county property, public property, or other property waiting to be dispatched to drive,
 - All time inspecting, servicing or conditioning any CMV at any time,
 - All CMV driving time,
 - All time other than driving time in or upon any CMV,
 - All time loading or unloading a vehicle, supervising or assisting in the loading or unloading, attending a vehicle being loaded or unloaded, remaining in readiness to operate the vehicle, or in giving receipts for shipments loaded or unloaded,
 - All time spent performing driver requirements relating to accidents, and
 - All time repairing, obtaining assistance, or remaining in attendance upon a disabled vehicle.

DEFINITIONS

Accident: An accident is defined as an incident involving a commercial motor vehicle in which there is either a fatality, an injury treated away from the scene, or a vehicle being required to be towed from the scene.

Alcohol means the intoxicating agent in beverage alcohol, ethyl alcohol, or other low molecular weight alcohol including methyl and isopropyl alcohol.

Alcohol concentration (or content) means the alcohol in a volume of breath expressed in terms of grams of alcohol per 210 liters of breath as indicated by an evidential breath test under this part.

Breath Alcohol Technician (BAT): A person who instructs and assists individuals in the alcohol testing process and operates an evidential breath testing device (EBT).

Collection site means a place where individuals present themselves for the purpose of providing breath, body fluid to be analyzed for alcohol or specified controlled substances. The site must possess all necessary personnel, materials, equipment, facilities and supervision to provide for the collection, security, temporary storage and transportation of shipment of the samples to a laboratory.

Commercial Driver's License (CDL): A special license required of drivers who drive Commercial Motor Vehicles which meets the following criteria:

- Meets or exceeds 26,001 lbs. gross vehicle weight; or
- Transports 16 or more passengers, including the driver; or
- Transports hazardous materials as determined by the Hazardous Materials Act, 49 USC 5101, and are required to placard the vehicle under the Hazardous Materials Regulations, 49 CFR chapter I, subchapter C.

Commercial Motor Vehicle (CMV): Any self-propelled or towed vehicle used on a highway, any roadway or passage which may be available to public transportation at any time, whether on private or public property, in interstate or intrastate commerce to transport passengers or property when the vehicle:

- Has a gross vehicle weight rating or gross combination weight rating of 26,001 lbs. or more, whichever is greater, inclusive of a towed unit(s) with a gross vehicle weight rating or gross vehicle weight of more than 10,000 pounds; or
- Is designed to transport 16 or more passengers, including the driver; or
- Is of any size and is used in the transportation of hazardous materials as determined by the Hazardous Materials Transportation Act, 49 USC 5101, and which require the motor vehicle to be placarded under the Hazardous Materials Regulations, 49 CFR chapter I, subchapter C.

Confirmation Test: For alcohol testing, a second test, following a screening test with a result of 0.02 grams or greater of alcohol per 210 liters of breath, that provides quantitative data of alcohol concentration. For controlled substances testing, a second analytical procedure to identify the presence of a specific drug or metabolite which is independent of the screen test in order to ensure reliability and accuracy.

Controlled substance has the meaning assigned by 21 U.S.C. 802 and includes all substances listed on Schedule I through V as they may be revised from time to time (21 CFR 1308).

Designated Employer Representative (DER): An employee authorized by the county to take immediate action(s) to remove employees from safety-sensitive duties, or cause employees to be removed from these covered duties, and to make required decisions in the testing and evaluation processes. The DER also receives test results and other communications for the county, consistent with the requirements of 40.3. Service agents cannot act as DERs.

Driver means any person who operates a commercial motor vehicle. This includes, but is not limited to: full time, regularly employed drivers: casual, intermittent or occasional drivers; leased drivers and independent, owner-operator contractors who are directly employed by or under lease to the county or who operate a commercial motor vehicle at the direction of or with the consent of _____ County. For the purposes of pre-employment/pre-duty testing only, the term driver includes a person applying for a position with _____ County, which requires a CDL to drive a commercial motor vehicle.

Drug means any substance (other than alcohol) that is a controlled substance as defined in this section and 49 CFR Part 40.

Evidential Breath Testing device (EBT): A device approved by the National Highway Traffic Safety Administration (NHTSA) for the evidential testing of breath at the 0.02 and 0.04 alcohol concentrations, placed on NHTSA's Conforming Products List of Evidential Breath Measurement Devices (CPL), and identified on the CPL as conforming with the model specifications available from NHTSA's Traffic Safety Program.

Medical Review Officer (MRO): A licensed physician responsible for receiving and reviewing laboratory results generated by the county's drug testing and for evaluating medical explanations for certain drug test results.

On duty time means all time from the time a driver begins to work or is required to be in readiness to work until the time he/she is relieved from work and all responsibility for performing work. On duty time shall include:

- All time on the county's premises, at a carrier or shipper plant, terminal or facility, or other property, or on any public property, waiting to be dispatched, unless the driver has been released from duty by the county.
- All time inspection, servicing, or conditioning any commercial motor vehicle at any time;
- All driving time;
- All time, other than driving time, in or upon any commercial motor vehicle except time spent resting in a sleeper berth;
- All time loading or unloading a vehicle, supervising, or assisting in the loading or unloading, attending a vehicle, or in giving or receiving receipts for shipments loaded or unloaded;
- All time spent performing the driver requirements relating to accidents;
- All time repairing, obtaining assistance, or remaining in attendance upon a disabled vehicle.

Performing a Safety-Sensitive Function: Any period in which the driver is actually performing, ready to perform, or immediately able to perform any safety-sensitive functions.

Safety-Sensitive Function: Any of the seven on-duty functions set forth in 395.2, On-duty time, listed below:

- All time at a carrier or shipper plant, terminal, facility, or other property, waiting to be dispatch, unless the driver has been relieved from duty by the employer.
- All time inspecting equipment as required by the Federal Motor Carrier Safety Regulations, or otherwise inspecting, servicing, or conditioning any commercial motor vehicle at any time.
- All time spent at the driving controls of a commercial motor vehicle.
- All time, other than driving time, spent on or in a commercial motor vehicle.
- All time loading or unloading a commercial motor vehicle, supervising, or assisting in the loading or unloading, attending a vehicle being loaded or unloaded, remaining in readiness to operate the vehicle, or in giving or receiving receipts for shipments loaded or unloaded.
- All time spent performing the driver requirements associated with an accident.
- All time repairing, obtaining assistance, or remaining in attendance upon a disabled vehicle.

Screening test:

- In alcohol testing it means an analytical procedure to determine whether a driver may have a prohibited concentration of alcohol in his or her system.
- In controlled substance testing it means an immunoassay screen to eliminate negative urine specimens from further consideration.

Substance Abuse Professional (SAP): A person who evaluates employees who have violated a DOT drug and alcohol regulation and makes recommendations concerning evaluation, treatment, follow-up testing, and after-care.

RESPONSIBILITIES

_____ **Office or Person:** (Person, Position or Office) is responsible for the following Drug and Alcohol Screening compliance activities:

- Ensure each employee required to have a CDL participates in an appropriate drug and alcohol testing program in accordance with DOT regulations. All results will be kept and maintained on file by _____ pursuant to county policy.
- Review all driver qualification forms and documents for completeness and compliance.
- Maintain Driver Qualification files includes mandatory drug testing information (for drivers operating a vehicle with a GVWR of 26,001 lbs. or more' a vehicle requiring a placarding for hazardous materials; or a vehicle designed to transport 16 or more passengers including the driver)

Supervisor/Department: The duties of the driver's supervisor or his/her department include:

- Active participation in the hiring process for employees who drive CMVs, which includes:
 - Ensuring all offers of employment shall be contingent upon successful conformation of prior employment, driving record, completion of physical, drug and alcohol testing, and other DOT requirements for drivers.
 - Ensuring the post-offer applicant obtains his/her physical, road test, and CDL drug and alcohol testing.
- Informing and requiring CDL drivers to submit a urine sample for drug/alcohol testing at the designated medical and/or collection facility when the supervisor suspects that the driver is under the influence of drugs or alcohol, pursuant to DOT regulations and county policy, and
 - Contact Human Resources as soon as possible following the incident, and
 - Complete the Supervisors Reasonable Suspicion Form.
- Compliance with DOT regulations

Driver: The responsibilities of a driver include:

- Avoid the use of non-prescribed drugs and alcohol while conducting safety-sensitive activities, and to comply at all times with county policy.

- Submit a sample for drug or alcohol testing when called upon to do so by his/her supervisor, including random testing for CDL drivers, pursuant to county policy (see Refusal to Submit Form).

SAMPLE

SUBSTANCE PROHIBITED/PRESCRIPTION MEDICATIONS

Alcohol use means the consumption of any beverage, mixture, or preparation, including any medications containing alcohol which, when consumed causes an alcohol concentration of 0.04 or greater.

Controlled Substance: In accordance with FHWA rules, urinalyses will be conducted to detect the presence of the following substances:

- Marijuana
- Cocaine
- Opiates
- Amphetamines
- Phencyclidine (PCP)

Prescription Medications: Drivers taking legally prescribed medication issued by a licensed health care professional familiar with the driver's work-related responsibilities must report such use to their immediate supervisor, and may be required to present written evidence from the health care professional which describes the effects such medications may have on the driver's ability to perform his/her tasks.

In the sole discretion of the Alcohol and Drug Program Administrator, a driver may be temporarily removed, with pay, from a safety-sensitive position if deemed appropriate.

PROHIBITIONS

Alcohol Prohibitions:

- The new alcohol rule prohibits any alcohol misuse that could affect performance of a safety-sensitive function, including:
 - Use while performing safety-sensitive functions.
 - Use during the 4 hours before performing safety-sensitive functions.
 - Reporting for duty or remaining on duty to perform safety-sensitive functions with an alcohol concentration of 0.04 or greater.
- Possession of alcohol, unless the alcohol is manifested and transported as part of a shipment. This includes the possession of medicines which contain alcohol (prescription or over-the-counter), unless the packaging seal is unbroken.
- Use during 8 hours following an accident or until he/she undergoes a post-accident test.
- Refusal to take a required test.

NOTE: A driver found to have an alcohol concentration of 0.02 or greater but less than 0.04 shall not perform, on or be permitted to perform, safety-sensitive functions for at least 24 hours. The other consequences imposed by the regulations and discussed below do not apply. However, documentation of this test constitutes written warning that county policy has been violated, and could result in disqualification of a driver.

Drug Prohibitions:

The regulations prohibit any drug use that could affect performance of safety-sensitive functions, including:

- Use of any drug, except by doctor's prescription, and then only if the doctor has advised the driver that the drug will not adversely affect the driver's ability to safely operate the CMV;
- Testing positive for drugs; and
- Refusing to take a required test.

All drivers will inform the Alcohol and Drug Program Administrator of any therapeutic drug use prior to performing a safety-sensitive function.

PROCEDURES

Types of Tests

To the extent practicable, all tests will be conducted during employees' normally scheduled work hours. All testing required by this policy will be conducted in accordance with the Omnibus Transportation Employee Testing Act of 1991 and drug testing guidelines and regulations issued by the Department of Transportation. The following tests are required:

- **Pre-employment.** All applicants for employment in CDL positions, or candidates for transfer or promotion to such positions are subject to screening for improper use of controlled substances. (Pre-employment alcohol testing is optional) **Note:** A pre-employment drug test may be required for an existing employee who was removed from the random testing program for more than 30 days.
- **Post-Accident.** Conducted after accidents on CDL employees in county vehicles whose performance could have contributed to the accident, as determined by a citation for a moving traffic violation, and for all fatal accidents even if the driver is not cited for a moving traffic violation.
 - Alcohol tests should be conducted within 2 hours, but in no case more than 8 hours, after the accident.
 - CDL employees must refrain from all alcohol use until the test is complete.
 - Post-accident drug tests must be conducted within 32 hours.
- **Reasonable Suspicion.** Conducted when a trained supervisor or manager observes behavior or appearance that is characteristic of alcohol or illicit drug misuse.
 - If a CDL employee's behavior or appearance suggests alcohol or drug misuse, a reasonable suspicion test must be conducted.
 - If a test cannot be administered, the driver must be removed from performing safety-sensitive duties for at least 24 hours.
 - Testing for alcohol abuse must be based upon suspicion which arises just before, during or just after the time when the employee is performing safety-sensitive duties.
 - Testing for substance abuse may occur at any time upon suspicion.

The following conditions are signs of possible alcohol or drug use (not all-inclusive):

- Abnormally dilated or constricted pupils
 - Glazed stare - redness of eyes (sclera)
 - Flushed face
 - Change of speech (i.e. faster or slower)
 - Constant sniffing
 - Increased absences
 - Redness under nose
 - Sudden weight loss
 - Needle marks
 - Change in personality (i.e. paranoia)
 - Increased appetite for sweets
 - Forgetfulness-performance faltering-poor concentration
 - Borrowing money from co-workers or seeking an advance of pay or other unusual display of need for money
 - Constant fatigue or hyperactivity
 - Smell of alcohol
 - Slurred speech
 - Difficulty walking
 - Excessive, unexplained absences
 - Dulled mental processes
 - Slowed reaction rate
- **Random:** Conducted on a random, unannounced basis just before, during or after performance of safety-sensitive functions for alcohol or at any time for drugs.
 - Each year, the number of random alcohol tests conducted by the county must equal at least 10% of all the safety-sensitive CDL employees.
 - Random drug tests conducted by the county must equal at least 25% of all CDL employees. Note: These percentages are subject to change. The FMCSA Administrator's decision to increase or decrease the minimum annual percentage rate for random alcohol and controlled substances testing will be applicable starting January 1 of the calendar year following publication in the **Federal Register**.

- **Return to Duty and Follow-up.** Conducted when an individual who has violated the prohibited alcohol or drug standards returns to performing safety-sensitive duties.
 - Follow-up tests are unannounced and at least six (6) tests must be conducted in the first twelve (12) months after a driver returns to duty.
 - Follow-up testing may be extended for up to sixty (60) months following the return to duty.

Conducting Tests

- **Alcohol:** DOT rules require breath testing using evidential breath testing (EBT) devices.
 - Two breath tests are required to determine if a person has a prohibited alcohol concentration.
 - A screening test is conducted first. Any result less than 0.02 alcohol concentration is considered a negative test. If the alcohol concentration is 0.02 or greater, a second, confirmation test must be conducted
- **Drugs:** Drug testing is conducted by analyzing a driver's urine specimen, and must be conducted through a U.S. Department of Health and Human Services certified facility.
 - Specimen collection procedures and chain of custody requirements ensure that the specimen's security, proper identification and integrity are not compromised.
 - DOT rules require a split specimen procedure.
 - Each urine specimen is subdivided into two bottles labeled as primary and split.
 - Both bottles are sent to the laboratory.
 - Only the primary specimen is opened and used for the urinalysis.
 - The split specimen remains sealed at the laboratory.
 - If the analysis of the primary specimen confirms the presence of illegal controlled substances, the driver has 72 hours to request that the split specimen be sent to another DHHS certified laboratory for analysis.
 - All urine specimens are currently analyzed for the following drugs:
 - Marijuana (THC metabolite)
 - Cocaine
 - Amphetamines
 - Opiates (including heroin), and
 - Phencyclidine (PCP)

- Testing is conducted using a two-stage process.
 - First, a screening test is performed.
 - If the test is positive for one or more of the drugs, a confirmation test is performed for each identified drug.
 - Sophisticated testing requirements ensure that over-the-counter medications or preparations are not reported as positive results.
- All drug tests are reviewed and interpreted by a physician designated as a Medical Review Officer (MRO) before they are reported to the county.
 - If the laboratory reports a positive result to the MRO, the MRO will contact the driver and conduct an interview to determine if there is an alternative medical explanation for the drugs found in the urine specimen.
 - For all the drugs listed above, except PCP, there are some limited, legitimate medical uses that may explain a positive test result. The MRO will take into consideration when the use is pursuant to the instructions of a physician who has advised the driver that the substance does not adversely affect the driver's ability to safely operate a commercial motor vehicle.
 - If the MRO determines that the drug use is legitimate, the test will be reported to the Designated Employer Representative, the Director of HR Services, as a negative result.

Refusal to Submit to an Alcohol or Drug Test and the Consequences

Refusal to submit to an alcohol or controlled substances test means that a CDL employee:

- Fails to provide adequate breath for testing without a valid medical explanation after he or she has received notice of the requirement for breath testing in accordance with the provisions of this policy,
- Fails to provide adequate urine for controlled substances testing without a valid medical explanation after he or she has received notice of the requirement for urine testing in accordance with the provisions of this policy,
- Refuses to wash his or her hands after being directed to do so during collection of a urine sample,
- Admits to the collector of a urine sample that he or she has adulterated or substituted their specimen,
- On observed collection of a urine sample, fails to follow the observer's instructions to raise his or her clothing above the waist, lower clothing and

underpants, and to turn around to permit the observer to determine if he or she has any type of prosthetic or other device that could be used to interfere with the collection process,

- Possesses or wears a prosthetic or other device that could be used to interfere with the collection process, or
- Behaves in a confrontational way that disrupts the collection process or otherwise engages in conduct that clearly obstructs the testing process.

CDL employees who refuse to submit to an alcohol or drug test are not allowed to perform safety-sensitive functions. Pursuant to the county's authority, CDL employees who refuse to submit to a test will be subject to discipline, up to and including discharge.

Consequences of Alcohol/Drug Misuse

- CDL employees who have any alcohol concentration, defined as 0.02 or greater, who are tested just before, during or just after performing safety-sensitive functions must be removed from performing such duties for a minimum 24 hours.
- Disciplinary action may be imposed upon an employee whose alcohol test reveals any alcohol concentration, between 0.02 and 0.04.
- CDL employees who engage in prohibited alcohol or drug conduct, or CDL employees who test positive for alcohol use greater than 0.04 or drug use, must be immediately removed from safety-sensitive functions for a period of time determined by the county at its' sole discretion.
 - Disciplinary action, up to and including termination, may be imposed upon a CDL employee who engages in prohibited alcohol or drug conduct, CDL employees who test positive for alcohol use greater than 0.04 or drug use.
- If a CDL employee tests positive for alcohol use greater than 0.04 or drug use for a second time within the five year period immediately following his/her first positive test, he/she will be terminated.
- A CDL employee in his/her probationary period who tests positive for any alcohol concentration (defined as 0.02 or greater) or drug use, shall be terminated.
- A CDL employee who tests positive for alcohol use greater than 0.04 or drug use, but is not terminated must be evaluated by a substance abuse professional and comply with any treatment recommendations to assist them with his/her alcohol or drug problem.

- The payment for any recommended treatment will be strictly at the expense of the employee (or his/her health insurance program, if applicable).
- Employees may be placed on sick leave or leave without pay status during the treatment period, whichever is appropriate.
- CDL employees who have been evaluated by a substance abuse professional, who comply with any recommended treatment, who have taken a return to duty test with a result less than 0.02, and who are then subject to unannounced follow-up tests at the employees' expense, may return to work.
- Once an employee successfully completes rehabilitation, he/she shall be returned to his/her regular duty assignment or an equivalent position. Employee assignments during treatment shall be based on each individual's circumstances. As a condition of employment, the employee must comply with prescribed follow-up care.

Information/Training

- All current and new employees will receive written information about the testing requirements and how and where they may receive assistance for alcohol or drug misuse.
- All employees must receive a copy of this policy and sign the Confirmation of Receipt – see attachments.
- All personnel responsible for supervising and managing CDL employees must attend at least two hours of training on alcohol and drug misuse symptoms and indicators used in making determinations for reasonable suspicion testing.
 - Supervisors and managers will be instructed on the detection of abuse problems and the enforcement of the testing policy. Periodic, on-going training will also occur after implementation of the policy.
- This policy will be posted on employee bulletin boards and will be available to all employees.
- Educational information will be made available periodically which will focus on the potentially dangerous effects of drug and alcohol use and abuse, the procedures associated with pre-employment drug screening and reasonable suspicion testing, the effects on job performance measured in loss of productivity, and the potential safety hazards presented to the individual employee, other employees and the public.

- All recruitment advertising will include the statement Drug/alcohol screening is a condition of employment at the bottom of the advertisement/posting with the EEO statement.
- All final candidates for employment will be given a copy of this policy, and be given the opportunity to read the policy in its entirety.

APPEAL OF TEST RESULTS

- A. Alcohol and drug abuse may not only threaten the safety and productivity of all employees of _____ County, but causes serious individual health consequences to those who use them. Appendix A outlines several personal consequences which may result after abuse of controlled substances. Any confirmed actions prohibited by Part IV above, while performing a safety-sensitive function or refusing to take a breath test, will be grounds for termination. Refusal may be defined as not providing a breath sample or urine as directed, neglecting to sign appropriate control forms, using alcohol within 8 hours of an accident, or engaging in conduct that clearly obstructs the testing process.
- B. Any driver testing positive for the presence of a controlled substance will be contacted by the county's MRO. The driver will be allowed to explain and present medical documentation to explain any permissible use of a drug. All such discussions between the driver and the MRO will be confidential. The county will not be a party to, or have access to matters discussed between the driver and the MRO. If medically supportable reasons exist to explain the positive result, the MRO will report the test result to the county as a negative.
- C. Within 72 hours after the driver has been notified of a positive test result for drugs he/she may request a retest at their expense of the split sample. This signed request will be provided to the MRO in writing, who will then initiate the new laboratory analysis. If a different result is detected by the subsequent laboratory, the test will be voided by the MRO, and the county's Alcohol and Drug Program Administrator will be notified. A retest may be initiated as appropriate.

VIII. CONFIDENTIALITY

Under no circumstance, unless required or authorized by law, will alcohol or drug testing information or results for any employee or applicant be released without written

request from the applicable employee.

Drivers are entitled, upon written request, to obtain copies of any records pertaining to the driver's use of alcohol or controlled substances, including any records pertaining to his/her alcohol or controlled substance tests. Copies will be provided within 5 days.

Collection of breath and urine samples must always be documented and sealed with a tamper-proof sealing system in the presence of the driver, to insure that all tests can be correctly traced to the driver. Drug test analysis from the DHHS approved laboratory will be forwarded directly to the Medical Review Officer assigned by the Alcohol and Drug Program Administrator.

Alcohol test results will be forwarded by the MRO to the Alcohol and Drug Program Administrator for confidential record keeping.

SAMPLE

MODEL BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN



Rick Perry, Governor

David L. Lakey, M.D., Commissioner, Department of State Health Services

June 2012

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BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN

CHAPTER 81, HEALTH AND SAFETY CODE

SUBCHAPTER H

MINIMUM STANDARD

This exposure control plan (plan) is adopted as the minimum standard to implement the Bloodborne Pathogens Exposure Control Plan required in Health and Safety Code, §81.304.

Applicability

These minimum standards apply to a governmental unit that employs employees who: provide services in a public or private facility providing health care related services, including a home health care organization; or otherwise have a risk of exposure to blood or other potentially infectious material (OPIM).

Purpose

The Bloodborne Pathogens Exposure Control Plan is to reduce or eliminate occupational exposure to bloodborne pathogens and OPIM.

Guidance

This plan is provided by the department to be analogous with Title 29 Code of Federal Regulation §1910.1030, Occupational Safety and Health Administration (OSHA), Bloodborne Pathogens Standard as specified in Health and Safety Code, §81.304. Employers should review the plan for particular requirements as applicable to their specific situation. Governmental units may modify the plan appropriately to their respective practice settings. Employers will need to include provisions relevant to their particular facility or organization in order to develop an effective, comprehensive exposure control plan.

Review

Employers review annually the exposure control plan, update when necessary, and document when accomplished.

INSTRUCTIONS

When parentheses are noted, specific details for modification are present in instruction form.

BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN

Facility Name: _____

Date of Preparation: _____

In accordance with Health and Safety Code, Chapter 81, Subchapter H, and analogous to OSHA Bloodborne Pathogens Standard, the following exposure control plan exists:

1. EXPOSURE DETERMINATION

The Texas Department of State Health Services (department) Bloodborne Pathogens Exposure Control Plan (plan) requires employers to perform an exposure determination for employees who have occupational exposure to blood or other potentially infectious materials. The exposure determination is made without regard to the use of personal protective equipment. This exposure determination is required to list all job classifications in which employees have occupational exposure, regardless of frequency. The following job classifications apply:

(List the job titles appropriate to this facility or organization; for example, nurse, fireman, etc.)

- 1) _____
- 2) _____
- 3) _____
- 4) _____

The job descriptions for the above employees encompass the potential occupational exposure risks to bloodborne pathogens.

2. IMPLEMENTATION METHODS AND CONTROLS

The department's plan outlines a schedule and method of implementation for the various elements of the exposure control plan.

Universal Precautions

Universal precautions are observed to prevent contact with blood or other potentially infectious materials. All blood or OPIM are considered infectious regardless of the perceived status of the source individual.

Engineering and Work Practice Controls

Engineering and work practice controls are used to eliminate or minimize exposure to employees. Where occupational exposure remains after institution of these controls, personal protective

equipment is used. Examples include safety design devices, sharps containers, needleless systems, sharps with engineered sharps injury protection for employees, passing instruments in a neutral zone, etc.

Supervisors and workers examine and maintain engineering and work practice controls within the work center on a regular schedule.

Hand Washing

Handwashing facilities are available to the employees who may incur exposure to blood or other potentially infectious materials. The department's plan requires that these facilities be readily accessible.

If handwashing facilities are not feasible, the employer is required to provide either an antiseptic cleanser in conjunction with a clean cloth/paper towels, antiseptic towelettes or waterless disinfectant. If these alternatives are used, then the hands are to be washed with soap and running water as soon as feasible.

After removal of personal protective gloves, employees wash hands and any other potentially contaminated skin area immediately or as soon as feasible with soap and water. If employees incur exposure to their skin or mucous membranes, then those areas are washed with soap and water or flushed with water as appropriate as soon as feasible following contact.

Needles

Contaminated needles and other contaminated sharps are not bent, recapped, removed, sheared, or purposely broken. The department's plan allows an exception to this if no alternative is feasible and the action is required by a specific medical procedure. If such action is required, then the recapping or removal of the needle must be done by the use of a device or a one-handed technique.

Contaminated Sharps Discarding and Containment

Contaminated sharps are discarded immediately or as soon as feasible in containers that are closable, puncture resistant, leakproof on sides and bottom, and biohazard labeled or color-coded. During use, containers for contaminated sharps are easily accessible to personnel; located as close as is feasible to the immediate area where sharps are being used or can be reasonably anticipated to be found (e.g., laundries); maintained upright throughout use; are not allowed to overfill; and replaced routinely.

Work Area Restrictions

In work areas where there is a reasonable likelihood of exposure to blood or other potentially infectious materials, employees are not to eat, drink, apply cosmetics or lip balm, smoke, or handle contact lenses. Food and beverages are not to be kept in refrigerators, freezers, shelves, cabinets, or on counter/bench tops where blood or other potentially infectious materials are present.

Mouth pipetting/suctioning of blood or other potentially infectious materials is prohibited.

All procedures are conducted in a manner to minimize splashing, spraying, splattering, and

generation of droplets of blood or other potentially infectious materials.

Collection of Specimens

Specimens of blood or other potentially infectious materials are placed in a container, which prevents leakage during the collection, handling, processing, storage, transport, or shipping of the specimens. The container used for this purpose is labeled with a biohazard label or color-coded unless universal precautions are used throughout the procedure and the specimens and containers remain in the facility. Specimens of blood and other potentially infectious body substances or fluids are usually collected within a hospital, doctor's office, clinic, or laboratory setting. Labeling of these specimens should be done according to the agency's specimen collection procedure. This procedure should address placing the specimen in a container, which prevents leakage during the collection, handling, processing, storage, transport, or shipping of the specimens. In facilities where specimen containers are sent to other facilities and/or universal precautions are not used throughout the procedure, a biohazard or color-coded label should be affixed to the outside of the container.

If outside contamination of the primary container occurs, the primary container is placed within a secondary container, which prevents leakage during the handling, processing, storage, transport, or shipping of the specimen. The secondary container is labeled with a biohazard label or color-coded.

Any specimen, which could puncture a primary container, is placed within a secondary container, which is puncture proof.

Contaminated Equipment

Equipment which may become contaminated with blood or other potentially infectious materials is examined prior to servicing or shipping and decontaminated as necessary unless the decontamination of the equipment is not feasible. Employers place a biohazard label on all portions of contaminated equipment that remain to inform employees, service representatives, and/or the manufacturer, as appropriate.

Personal Protective Equipment

All personal protective equipment used is provided without cost to employees. Personal protective equipment is chosen based on the anticipated exposure to blood or other potentially infectious materials. The protective equipment is considered appropriate only if it does not permit blood or other potentially infectious materials to pass through or reach the employee's clothing, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of the time which the protective equipment is used. Examples of personal protective equipment include gloves, eyewear with side shields, gowns, lab coats, aprons, shoe covers, face shields, and masks. All personal protective equipment is fluid resistant.

All personal protective equipment is cleaned, laundered, and disposed of by the employer at no cost to employees. All repairs and replacements are made by the employer at no cost to employees.

All garments which are penetrated by blood are removed immediately or as soon as feasible and

placed in the appropriate container. All personal protective equipment is removed prior to leaving the work area and placed in the designated receptacle.

Gloves are worn where it is reasonably anticipated that employees will have hand contact with blood, other potentially infectious materials, non-intact skin, and mucous membranes. Latex sensitive employees are provided with suitable alternative personal protective equipment.

Disposable gloves are not to be washed or decontaminated for re-use and are to be replaced as soon as practical when they become contaminated or as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised.

Utility gloves may be decontaminated for re-use provided that the integrity of the glove is not compromised. Utility gloves are discarded if they are cracked, peeling, torn, punctured, exhibit other signs of deterioration, or when their ability to function as a barrier is compromised.

Masks in combination with eye protection devices, such as goggles, glasses with solid side shield, or chin length face shields, are required to be worn whenever splashes, spray, splatter, or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can reasonably be anticipated.

Surgical caps or hoods and/or fluid resistant shoe covers or boots are worn in instances when gross contamination can reasonably be anticipated.

Housekeeping

Employers shall ensure that the worksite is maintained in a clean and sanitary condition. The employer shall determine and implement an appropriate written schedule for cleaning and method of decontamination based upon the location within the facility, the type of surface to be cleaned, type of soil present, and tasks or procedures being performed in the area.

All contaminated work surfaces are decontaminated after completion of procedures, immediately or as soon as feasible after any spill of blood or other potentially infectious materials, and at the end of the work shift.

Protective coverings (e.g., plastic wrap, aluminum foil, etc.) used to cover equipment and environmental surfaces are removed and replaced as soon as feasible when they become contaminated or at the end of the work shift.

All bins, pails, cans, and similar receptacles are inspected and decontaminated on a regularly scheduled basis.

Any broken glassware which may be contaminated is not picked up directly with the hands.

Regulated Waste Disposal

All contaminated sharps are discarded as soon as feasible in sharps containers located as close to the point of use as feasible in each work area.

Regulated waste other than sharps is placed in appropriate containers that are closable, leak resistant, labeled with a biohazard label or color-coded, and closed prior to removal. If outside contamination of the regulated waste container occurs, it is placed in a second container that is also closable, leak proof, labeled with a biohazard label or color-coded, and closed prior to removal.

All regulated waste is properly disposed of in accordance with federal, state, county, and local requirements.

Laundry Procedures

Although soiled linen may be contaminated with pathogenic microorganisms, the risk of disease transmission is negligible if it is handled, transported, and laundered in a manner that avoids transfer of microorganisms to patients, personnel, and environments. Rather than rigid rules and regulations, hygienic and commonsense storage and processing of clean and soiled linen is recommended. The methods for handling, transporting, and laundering of soiled linen are determined by the agencies written policy and any applicable regulations.

Laundry is cleaned at: (designate onsite or name offsite facility).

3. HEPATITIS B VACCINE

All employees who have been identified as having occupational exposure to blood or other potentially infectious materials are offered the hepatitis B vaccine, at no cost to the employee, under the supervision of a licensed physician or licensed healthcare professional. The vaccine is offered after bloodborne pathogens training and within 10 working days of their initial assignment to work unless the employee has previously received the complete hepatitis B vaccination series, antibody testing has revealed that the employee is immune, or that the vaccine is contraindicated for medical reasons. Employees receive the vaccine at (state location, such as Employee Health Services, Immunization Clinic, etc.)

Employees who decline the Hepatitis B vaccine sign a declination statement (See appendix A of this exposure control plan).

Employees who initially decline the vaccine but who later elect to receive it may then have the vaccine provided at no cost.

4. POST EXPOSURE EVALUATION AND FOLLOW UP

When the employee incurs an exposure incident, the employee reports to (state location, as Employee Health Services, or designated person as Employee Health Nurse). All employees who incur an exposure incident are offered a confidential medical evaluation and follow up as follows:

1. Documentation of the route(s) of exposure and the circumstances related to the incident.
2. Identification and documentation of the source individual, unless the employer can establish that identification is infeasible or prohibited by state or local law. After obtaining consent, unless law allows testing without consent, the blood of the source individual should be tested for HIV/HBV infectivity, unless the employer can establish that testing of the source is infeasible

or prohibited by state or local law.

3. The results of testing of the source individual are made available to the exposed employee with the employee informed about the applicable laws and regulations concerning disclosure of the identity and infectivity of the source individual.
4. The employee is offered the option of having his/her blood collected for testing of the employee's HIV/HBV/HCV serological status. The blood sample is preserved for at least 90 days to allow the employee to decide if the blood should be tested for HIV serological status. If the employee decides prior to that time that the testing will be conducted, then testing is done as soon as feasible.
5. The employee is offered post exposure prophylaxis in accordance with the current recommendations of the U.S. Public Health Service.
6. The employee is given appropriate counseling concerning infection status, results and interpretations of tests, and precautions to take during the period after the exposure incident.
7. The employee is informed about what potential illnesses can develop and to seek early medical evaluation and subsequent treatment.
8. The following person(s) _____ is(are) designated to assure that the policy outlined here is effectively carried out and maintains records related to this policy.

Interaction with Healthcare Professionals

A written opinion is obtained from the healthcare professional who evaluates employees of this facility or organization after an exposure incident. In order for the healthcare professional to adequately evaluate the employee, the healthcare professional is provided with:

1. a copy of the (facility's or organization's) exposure control plan;
2. a description of the exposed employee's duties as they relate to the exposure incident;
3. documentation of the route(s) of exposure and circumstances under which the exposure occurred;
4. results of the source individual's blood tests (if available); and,
5. medical records relevant to the appropriate treatment of the employee.

Written opinions are obtained from the healthcare professional in the following instances:

1. when the employee is sent to obtain the Hepatitis B vaccine, or
2. whenever the employee is sent to a healthcare professional following an exposure incident.

Healthcare professionals are instructed to limit their written opinions to:

1. whether the Hepatitis B vaccine is indicated;
2. whether the employee has received the vaccine;
3. the evaluation following an exposure incident;
4. whether the employee has been informed of the results of the evaluation;
5. whether the employee has been told about any medical conditions resulting from

exposure to blood or other potentially infectious materials which require further evaluation or treatment (all other findings or diagnosis shall remain confidential and shall not be included in the written report); and,

6. whether the healthcare professional's written opinion is provided to the employee within 15 days of completion of the evaluation.

5. COMMUNICATION ABOUT HAZARDS TO EMPLOYEES

Use of Biohazard Labels

Agencies should have a procedure that determines when biohazard-warning labels are to be affixed to containers or placed in color-coded bags. The procedure should include the types of materials that should be labeled as biohazard material. These materials may include but are not limited to, regulated waste, refrigerators and freezers containing blood or other potentially infectious materials, and other containers used to store, transport, or ship blood or other potentially infectious materials.

Training

Training for all employees is conducted prior to initial assignment to tasks where occupational exposure may occur. All employees also receive annual refresher training. This training is to be conducted within one year of the employee's previous training.

Training for employees is conducted by a person knowledgeable in the subject matter and includes an explanation of the following:

1. Chapter 96. Bloodborne Pathogen Control
2. OSHA Bloodborne Pathogen Final Rule;
3. epidemiology and symptomatology of bloodborne diseases;
4. modes of transmission of bloodborne pathogens;
5. (this facility's or organization's) exposure control plan (i.e., points of the plan, lines of responsibility, how the plan will be implemented, where to access plan, etc.);
6. procedures which might cause exposure to blood or other potentially infectious materials at this facility;
7. control methods which are used at the facility to control exposure to blood or other potentially infectious materials;
8. personal protective equipment available at this facility (types, use, location, etc.);
9. hepatitis B vaccine program at the facility;
10. procedures to follow in an emergency involving blood or other potentially infectious materials;
11. procedures to follow if an exposure incident occurs, to include U.S. Public Health Service Post Exposure Prophylaxis Guidelines;
12. post exposure evaluation and follow up;
13. signs and labels used at the facility; and,
14. an opportunity to ask questions with the individual conducting the training.

6. RECORDKEEPING

According to OSHA's Bloodborne Pathogens Standard, medical records are maintained by: (list name or department responsible for maintaining medical records).

7. ANNUAL REVIEW

This employer shall annually review the exposure control plan (see Appendix B for a sample form). The review shall include:

1. a list of new tasks that affect occupational exposure;
2. modifications of tasks and procedures;
3. evaluation of available engineering controls including engineered-safer needle devices;
4. a list of new employee positions with potential for occupational exposure, and
5. solicited and documented input from non-managerial employees responsible for direct patient care for engineering and work practice controls.

Signature _____ Date _____

APPENDIX A

HEPATITIS B VACCINE DECLINATION STATEMENT

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

Signature _____ Date _____

APPENDIX B

ASSESSMENT TOOL

	YES	NO
1. The exposure control plan is located in each work center		
2. Employees at occupational risk for bloodborne pathogens exposure are identified		
3. Employees comply with universal precautions when performing duties		
4. Employees appropriately use engineering controls in the work center		
5. Employees employ safe work practices in performance of duties		
6. Handwashing facilities are readily accessible in the work centers		
7. Employees regularly wash their hands, especially after glove removal		
8. Employees deposit contaminated sharps in biohazard containers immediately after use		
9. Employees change filled biohazard containers when full		
10. Employees do not eat, drink, apply cosmetics or lip balm, smoke, or handle contact lenses in the work area		
11. Food and beverages are not kept in close proximity to blood or bodily fluids		
12. Employees do not mouth pipette/suction blood or bodily fluids		
13. Employees place specimens in leak resistant containers after collection		
14. Employees place specimens in biohazard leakproof containers for shipment		
15. Employees properly decontaminate equipment before servicing or shipping for repairs or place a biohazard label to inform others the equipment remains contaminated		
16. Employees wear the designated fluid resistant personal protective equipment/attire appropriate for the task at hand		
17. Employees place the contaminated personal protective equipment in the appropriate receptacles		
18. Employees maintain a clean environment at all times		
19. Employees use an EPA approved germicide properly to decontaminate and clean the facility and equipment		
20. Employees know the safe procedure for contaminated, broken glass clean up		
21. Employees demonstrate knowledge of the agency's policies regarding disposal and transport of regulated waste by placing regular waste, special waste, and/or biohazard waste in appropriate containers and transporting the waste according to policy		
22. Employees place wet laundry in leak resistant bags or containers and transport used laundry in biohazard leakproof containers		
23. Each employee knows his documented hepatitis B vaccine status		
24. Employees know where and to whom to report exposure incidents		
25. An employee occupational exposure protocol is practiced in accordance with U.S. Public Health Service		
26. Employees are oriented and receive annual training to the exposure control plan		
27. Recording and reporting occupational exposures are conducted in accordance with OSHA's Bloodborne Pathogens Standard		
28. Medical and training records are maintained in accordance with OSHA's Bloodborne Pathogens Standard		

APPENDIX C

DEFINITIONS

Amniotic fluid — the fluid surrounding the embryo in the mother's womb.

Antibody — a substance produced in the blood of an individual which is capable of producing a specific immunity to a specific germ or virus.

Antigen — any substance which stimulates the formation of an antibody.

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), hepatitis C virus (HCV) and human immunodeficiency virus (HIV).

Bulk blood and body fluids — bulk quantities (dripping, pourable) or items saturated with whole blood and blood components, blood specimens, semen, vaginal secretions, cerebrospinal fluid (CSF), synovial fluid, amniotic fluid, peritoneal fluid, peritoneal dialysate, pericardial fluid, pleural fluid, and other body fluids visibly contaminated with blood. Collection devices or reservoirs not emptied prior to disposal should also be treated as infectious waste.

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 infected 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 — include all control measures that isolate or remove a hazard from the workplace, such as sharps disposal containers, self-sheathing needles, and needleless systems.

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 exposure 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 classification 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.

Hand-washing facilities — a facility providing an adequate supply of running potable water, soap, and single-use towels, medicated towelettes, or hot air drying machines.

HBV— hepatitis B virus

HCV — hepatitis C virus

HIV — human immunodeficiency virus.

Human tissue — recognizable human tissue. It must be buried, incinerated, or rendered completely unrecognizable. Nonhuman tissues are only considered infectious if they are known or suspected to contain pathogens with sufficient virulence and quantity so that exposure to the waste by a susceptible human host could result in an infectious disease.

Infectious waste — solid waste which contains pathogens with sufficient virulence and quantity so that exposure to the waste by a susceptible host could result in an infectious disease. The following are *not* included in the definition of infectious waste but should be placed in containers such as a plastic bag prior to disposal to contain the waste.

- 1) items soiled (not saturated) with body fluids (for example, bandages, tampons, sanitary napkins)
- 2) items soiled with body fluids not included in the definition of infectious waste (for example, diapers)
- 3) intravenous tubing with needles detached

Medical consultation — a consultation which takes place between an employee and a licensed health-care 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.

Microbiological lab wastes — cultures and lab equipment that have come in contact with infectious agents.

Mucous membranes — a surface membrane composed of cells that secrete various forms of mucus, as in the lining of the respiratory tract and the gastrointestinal tract.

Mucus — a thick liquid secreted by glands lining the nasal passages, the stomach and intestines, the vagina, and so forth.

Needleless systems — devices which provide an alternative to needles for various procedures to reduce the risk of injury involving contaminated sharps. Examples include IV medication systems which administer medication or fluids through a catheter port using non-needle connections and jet injection systems which deliver liquid medication beneath the skin or through a muscle.

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 infectious materials (OPIM) — (1) the following human body fluids: semen, vaginal secretions, menstrual blood, vomit, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid visibly contaminated with blood, and all body fluids in situations in which 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; 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, 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 (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 can 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 normal 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, 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 measure carried out to prevent diseases.

Regulated waste — liquid or semi-liquid blood or other potentially infectious materials in a liquid or semi-liquid state if compressed; items that are caked with dried blood or other potentially infectious

materials and are capable of releasing these materials during handling; contaminated sharps; and pathological and microbiological wastes containing blood or other potentially infectious materials.

Research laboratory — 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.

Sharps — medical or laboratory articles, including those that are potentially infectious and that may cause punctures or cuts. Examples include, but are not limited to, hypodermic needles, syringes, pasteur pipettes, and scalpel blades.

Sharps with engineered sharps injury protections — include non-needle sharps or needle devices containing built-in safety features that are used for collecting fluids or administering medications or other fluids, as well as other procedures involving a risk of sharps injury.

Source individual — any individual, living or dead, whose blood or other potentially infectious materials may be a source of occupational exposure to an 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 (for example, the knee or elbow).

Universal precautions — an approach to infection control. According to the concept, all human blood and certain human body fluids are treated as if we know them to be infectious for HIV, HBV, HCV, 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. An example would be prohibiting the recapping of needles using a two-handed technique.

Safety and Health Committee Charter

Mission Statement

The _____ County Safety and Health Committee is to develop and promote a healthy and safe environment for employees and visitors through education, communication and safe work practices.

Activities

The health and safety activities of the committee will include, but are not limited to, the following:

- Identify unsafe work practices, conditions and to suggest appropriate remedies;
- Appoint an inspection team of at least one employee representative and one employer representative;
- Conduct safety and health inspections of both operations and facilities;
- Identify safety hazards and recommend corrective action;
- Make a written report of hazards discovered during inspections;
- Review corrective measures and make written recommendations to correct the hazard and submit it to management for timely response;
- Establish procedures for workplace inspections to identify safety and health hazards;
- Review accident/incident reports for causes, trends and recommend corrective action;
- Obtain and analyze available data on past injuries and illnesses to identify trends and recommend corrective action;
- Assist in the development and implementation of effective safety- and health-awareness programs;
- Encourage feedback from all individuals with regard to safety- and health-related ideas, problems and solutions;
- Provide support and serve as a resource in the development, implementation and maintenance of a comprehensive safety, loss prevention and loss control program;
- Develop written programs to ensure compliance with safety and health regulations of the Texas Department of Insurance Workers' Compensation Division;
- Serve as an advisory body to management on safety and health issues; and

- Make recommendations to implement supervisor and employee accountability for safety and health.

Members

Committee members shall be volunteers from various departments to include both supervisory and labor. Volunteers shall serve at least two years at which time they may elect to continue service at the discretion of the department head.

Officers

The officers of the committee will serve a two-year term (excluding the safety specialist). The officers will consist of a chairperson, a co-chairperson, the safety specialist, law enforcement officer, medical officer, fire marshal and a secretary. The chairperson and co-chair will be elected by the committee membership in October of each year to begin their tenure the following January.

Management's Responsibilities

- Establish procedures for management's review and response to minutes;
- Submit written recommendations for health/safety improvement/changes and response;
- Evaluate county safety and health policies and procedures;
- Respond in writing to safety committee recommendations;
- Review corrective action taken by management;
- Actively promote safety and health;
- Allow time for committee representative participation in meetings and assigned responsibilities;
- Allocate the funds/resources necessary to implement safety and health committee activities;
- Support committee decisions; and
- Perform the initial investigation of all injuries, incidents and near misses.

Chairperson's Responsibilities

- Actively promote safety and health;
- Schedule and develop an agenda for meetings based on member input;
- Arrange program;
- Set time schedule for next meeting;
- Review previous minutes and material for meeting;
- Act as communication liaison between management and the committee;

- Facilitate the health and safety committee meetings;
- Coordinate the assignment of activities to committee members;
- Establish necessary deadlines based on member input;
- Follow up on assigned responsibilities;
- Prepare an annual report of the committee's accomplishments;
- Prepare a report of the committee's objectives for next calendar year;
- Introduce new members; and
- Ensure the effectiveness of the meeting by directing discussion to meet mission and objectives.

Co-Chairperson's Responsibilities

- Actively promote health and safety;
- Facilitate the meetings in the absence of the chairperson;
- Serve as a member of the various project teams or sub-committees;
- Facilitate meeting agendas and monitor meeting times; and
- Assist with development of the agenda.

Safety Specialist Responsibilities

- Actively promote safety and health;
- Serve as a resource to the committee on safety and health issues;
- Review all accident investigations reports;
- Conduct safety and health inspections and prepare reports; and
- Assist with the development of the agenda.

Secretary's Responsibilities

- Actively promote safety and health;
- Ensure the meetings minutes are recorded, completed and distributed in a timely fashion;
- Distribute the agenda to committee members one week prior to each scheduled meeting;
- Take and record attendance;
- Make arrangements for the meeting room;
- Notify members of the meeting;
- Distribute correspondence and/or directives development by the committee; and
- Develop and maintain files of meetings and correspondence.

Law Enforcement Responsibilities

- Actively promote safety and health;

- Make recommendations to the committee regarding employee awareness services;
- Monitor county accidents/incidents reports for possible trends, specifically motor vehicle injuries resulting from employee “at fault” and provide possible corrective action to prevent recurrence;
- Recommend activities for National Alcohol Awareness Month in April of every year;
- Recommend activities for National Drive Safe Month in June of every year;
- Provide input for the Annual Training Plan; and
- Provide the committee with a draft budget in support of employee training by May 31 of each year.

Medical Officer

- Actively promote safety and health;
- Make recommendations to the committee regarding employee awareness services;
- Monitor county accidents/incidents reports for possible trends, specifically injuries resulting from employee “at fault”;
- Coordinate the county’s medical resources, nursing staff, equipment, etc. in support of the Annual Training Plan, specifically, AED, first aid, CPR and bloodborne pathogen training;
- Provide input for the Annual Training Plan; and
- Provide the committee with a draft budget in support of employee training by May 31 of each year.

Fire Marshal

- Actively promote health, safety, and fire prevention;
- Make recommendations to the committee regarding fire prevention services;
- Provide, conduct and coordinate required annual training with respective departments;
- Provide input for the Annual Training Plan;
- Conduct annual fire inspections of all XYZ County buildings, to include those located within the city limits of City A, City B, City C, City D and City E;
- Conduct annual fire/environmental inspections of all parks, transfer stations, and precinct maintenance barns/yards;

- Provide a report to the committee of findings and recommendations for corrective action;
- Recommend activities for Fire Prevention Month in October of every year; and
- Provide the committee with a draft budget in support of employee training by May 31 of each year.

Committee Member Responsibilities

- Actively promote safety and health;
- Attend all safety and health meetings on time or arrange for an alternate to attend;
- Report unsafe conditions and practices;
- Report all accidents or near misses;
- Review injury accidents, illnesses and death investigations;
- Communicate committee activities to his or her department;
- Make or assist in inspections;
- Serve on appointed project teams or sub-committees;
- Bring health or safety concerns to committee meetings and/or to the attention of the affected employee's supervisor;
- Assist with the development of the agenda upon request; and
- Serve as an example by following all safety rules and work practices.

Employee Responsibilities

- Actively promote safety and health;
- Bring safety and health concerns to his or her supervisor or committee representatives immediately;
- Learn and follow all safety and health rules and procedures; and
- Attend all safety and health training courses relevant to his/her job classification.

Safety/Health Training for Committee Members

- Identify and make accessible applicable Texas Department of Insurance, Division of Workers' Compensation standards and other codes that apply;
- Provide specific training on his or her type of business activity. Include at a minimum, hazard identification of the workplace and how to perform effective accident/incident investigation;
- Identify the location of safety procedures provided with appropriate equipment and inform employees of their location; and

- Recommend training for new employees and refresher training on county, departmental and work-location safety practices, procedures and emergency response.

SAMPLE



Meetings

- Establish procedures for employee input, i.e. to receive suggestions, report hazards, and other pertinent safety and health information;
- Include employee input on agenda for safety committee meetings;
- Include in the meeting minutes all recommendations;
- Develop and make available a written agenda for each meeting;
- Meetings will initially be held monthly, preferably on the first Thursday of each month from 9–11 a.m. After six (6) months, regular meetings of the committee will be held every other month;
- Special meetings of the committee may be called by the chairperson upon his or her initiative, or upon the request of at least five (5) members;
- Special meetings will be counted as regular meetings when being applied toward quarterly meeting commitments; and
- The minutes of the meeting will be provided to each committee member, elected official and department head, and posted on bulletin boards throughout the county.

Quorum

A quorum for the conduct of business at each meeting shall be a simple majority of the committee members.

Sample Agenda

1. Call to order by the chairperson
2. Roll call of members
3. Introduction of visitors
4. Read/review minutes of last meeting
5. Approval of last meeting minutes
6. Discussion of unfinished business
 - Reports on matters held over from last meeting
 - Correction recommendations
 - Safety suggestions
7. Discussion of new business
Report of injured or ill workers—follow-up welfare

Accident or illness investigation
 - What was the accident or illness?
 - What conditions contributed to the accident or illness?
 - Why did the conditions exist?
 - What can be done to mitigate another such incident?
8. Report on Safety incidents
Follow up action taken by management and/or committee
9. Committee Reports
10. Suggestion Box
 - Discussion of submitted suggestions
 - Assignment of suggestions for action
11. Miscellaneous
Monthly, quarterly, annual inspection reports, special speakers, etc.
12. Announcement of next meeting date

13. Adjourn

SAMPLE

RESOLUTION

RESOLUTION
IN RE:
SAFETY

PROCEEDINGS BEFORE THE
COMMISSIONER'S COURT
DATE: _____

The Commissioners' Court of _____ County Texas, meeting in regular session on the ____ day of _____, 20__, among other proceedings considered the following resolution:

WHEREAS, the County Judge, County Sheriff, County Commissioners and other County officials are concerned with the safety of employees and the public; and

WHEREAS, these safety efforts have a direct and positive impact on the cost of operations and employee morale for _____ County and

WHEREAS, implementation of this plan should minimize unnecessary accidents and control Workers' Compensation costs for the future; and

WHEREAS, the County can utilize the free services of the safety staff of the Texas Association of Counties to assist in the implementation of such a plan,

NOW, THEREFORE, BE IT RESOLVED, that the _____ County Commissioners' Court, _____ County Texas, in joint resolution with the other undersigned County officials, hereby proclaim their support on behalf of the County to implement an effective accident prevention plan in agreement with the Texas Association of Counties, and the Commissioners' Court hereby prevails upon and challenges other elected and appointed County officials to support this safety initiative, and work in a cooperative effort to develop and implement these accident prevention plans.

DONE IN OPEN COURT, this _____ day of _____, 20** upon motion by _____, seconded by _____, and _____ members of the Court being present and voting "aye".

-
Hon. (name) County Judge

Hon. (name)
Commissioner, Precinct 1

Hon. (name)
Commissioner, Precinct 2

Hon. (name)
Commissioner, Precinct 3

Hon. (name)
Commissioner, Precinct 4

Office:

Office:

Office:

Office:

Office:

Office:

ATTEST:

APPROVED AS TO FORM: _____

SAMPLE