
Luna
Community
College

Contents

Lock-out / Tag-out Data Sheet

Equipment Description			
Equipment	**Manufacturer**	**Model #**	**Serial #**

Equipment Actuation Control:

Step No.	Hazardous Energy		Isolation Device		Control Device		Additional Hardware Required
	Type	Magnitude	Type	Location	Lock & Tag	Tag Only	
	Additional Measures:						

Authorized Employees		

Document Control			
Verified By:	**Date**	**Issued:**	**Date**

Hazard Assessment Checklist & Selection Criteria for use of Personal Protective Equipment

Building _____ Department _____

Room Number _____ Supervisor _____

Task Evaluated _____ Performed By _____

Date _____ Title _____

Departments should use only PPE assessments that apply to their activities. If you have any questions about this form or performing a walk-through survey, please contact the Life/Safety Coordinator at ext. 1109.

Eye and Face Protection

Hazards to Consider	Required PPE
Splash / spatter / spray of chemicals or other harmful/irritant liquids	Chemical goggles, safety glasses with side shields or safety glasses covered by full-face shield
High pressure cleaning or spraying	Safety glasses with side shields or safety glasses covered by full-face shield
Grinding / Drilling – any flying particles or projectiles	Goggles or safety glasses with side shields
Power tools – air or electric	Safety glasses with side shields
Typical Laboratory – chemical splash	Chemical goggles, safety glasses with side shields or safety glasses covered by full-face shield
Acetylene welding, cutting, burning, molten metals	Cutting goggles with appropriate filter lens number (see Appendix C)
Arc Welding and cutting	Welding hood with appropriate filter lens number (see Appendix C)
Chipping, grinding or machining – flying particles	Goggles, safety glasses with side shields or full face shield (face shield required for heavy grinding)
Other identified hazards	Consult with Life/Safety Coordinator for assistance in identifying appropriate PPE

Head Preotection

Hazards to Consider	Required PPE
Work under elevated work platforms, suspended loads or low overhead clearance	Hard hats – ANSI compliant

Purpose of LCC Master Safety Plan

Luna Community College encourages and supports all programs which supports all programs which support safety, good health and well-being of the College community. This manual endorses efforts which ensure the quality of occupational and community environments while participating in college sponsored and work-related activities.

Intent of LCC Master Safety Plan

It is the intent of Luna Community College to promote good health, well-being and occupational safety for its faculty, employees, students and visitors. This plan endorses programs which:

1. Provide for a safe and healthy conditions and reduces injuries and illnesses to the lowest possible level.

2. Develop and ensure that those programs at Luna Community College comply with federal, state and municipal laws, codes, acts regulations and standards relating to health safety and the environment.

3. Provide information, training ad safeguards to faculty, staff and students regarding health and safety hazards, and to the surrounding community regarding environmental health hazards arising from operations and events at the college.

4. Provide appropriate personal protective equipment to all employees at the expense of the College when engineering controls are not adequate to minimize exposure.

5. Install and maintain facilities and equipment in accordance with recognized and accepted standards essential to reduce or prevent exposure to hazards by faculty, staff, students and visitors.

Responsibility and Accountability

This is a non-inclusive list of responsibility and accountability for environmental health and occupational safety issues at Luna Community College.

1. College President Responsibilities

Has the ultimate responsibility for establishing ad maintaining health and safety programs ad establishing a system for assessing safety performance for the College.

2. All Vice President's and Department Director's Responsibilities

Each Vice President and Department Director is responsible for the safety of employees under his/her direction, students participating in programs and activities, and community individuals on the Luna Community Campus.

a. Ensure facilities and equipment provided meets requirements for a safe work environment for activities being conducted or modify those activities accordingly to come into compliance with applicable rules, regulations and standards.

b. Ensure individuals under their management have the authority and support to implement environmental health and safety plans, practices and programs.

c. Ensure areas under their management are in compliance with College, state and federal environmental health and safety plans, practices and programs.

d. Establish priorities and committing resources for correction of environmental health and safety deficiencies.

e. Establish procedure for decimation of safety-related information.

f. Establish procedure to implement plan practices and programs.

g. Utilize systems which are established for assessing safety performance to evaluate their own area of responsibility and report findings back to central administration.

h. Alert Luna Life/Safety Coordinator when they become aware of a violation of any College, stare or federal environmental health or occupational safety rule or regulation, including any contact with the state and federal regulatory agencies.

3. Supervisor Responsibilities

Each supervisor is responsible for the safety of employees under his/her direction, students participating in programs and activities, and community individuals on the Luna Community Campus and the safe operation of machines and equipment within his/her area.

a. Ensure full compliance with all safety rules and procedures.

b. Ensure that ach employee is fully trained fore each task he/she is assigned including safety rules and procedures.

c. Maintain safe working conditions by conducting periodic inspections of equipment, tools, and the work site and correcting any deficiencies.

d. Investigate and report all accidents.

e. Conduct regular safety meetings and on-going on-the-job training documenting those meetings.

4. Employee Responsibilities

Each employee has the authority to prevent accidents and injuries to themselves and others.

a. Obey all safety rules, policies and regulations.

b. Report any unsafe condition or acts to their supervisor.

c. Report all injuries, no matter how minor.

d. Make their safety and health and safety of coworkers the primary responsibility in performing work duties.

e. Know how to operate all equipment and machinery used, and fully understand all safety and health requirements for all work tasks.

5. Life/Safety Coordinator

The Life/Safety Coordinator has a multifaceted job and must know the job responsibilities of each of the individuals responsible for proper execution of this safety plan.

a. Develop written plans and programs; perform a periodic review of those written plans to determine if revisions are necessary.

b. Provide guidance and technical assistance to departments.

c. Promote campus compliance with OSHA standards.

d. Conduct periodic compliance inspections.

e. Administer a means by which employees can direct suggestions, complaints and concerns regarding environmental health and safety issues.

EMERGENCY TELEPHONE NUMBERS

REMEMBER WHEN DIALING 911 FROM A LUNA COMMUNITY COLLEGE TELEPHONE, YOU MUST FIRST PRESS THE "OUTGOING" BUTTON

Agency/Office	Emergency Number	Non-Emergency Number
Fire	911	
Medical	911	
Police	911	
Fire Departments		
Gallinas Fire Department	911	505-425-6171
Las Vegas City Fire Department	911	505-425-6321
San Miguel Fire Department	911	505-425-2855
Ambulance Services		
Superior Ambulance Service	911	505-247-8840 (ABQ)
Law Enforcement		
NM State Police	911	505-425-6771
San Miguel County Sheriff	911	505-425-7589
Las Vegas City Police	911	505-425-7504
LCC Numbers		
(Ext # are used for on campus phones only)		
Office	Phone #	Extension
LCC Security	Cell-505-429-1159	
Director of Security	Cell-505-???-????	
President's Office	505-454-2555	1046
VP-Academics	505-454-5378	1013
VP-Finance	505-454-5328	1017
Physical Plant Director	505-454-2530	1611
LCC Operator	505-454-2500	1000
Other Telephone Numbers		
Alta Vista Medical Center		505-426-3500
Crime Victims Assistance		505-454-6746
Statewide Central Intake (SCI)		1-800-797-3260
National Runaway Switch Board		1-800-621-4000
Missing Children Hotline		1-800-843-5678
Poison Control		1-800-432-6866
Rape Crisis Ctr 24 hr Hotline		505-425-1048

EMERGENCY ACTION PLAN

ABBREVIATIONS USED IN THE EMERGENCY ACTION PLAN

CO	Chief Officer
DIC	Deputy Incident Commander
EAP	Emergency Action Plan
EMOG	Emergency Management Operations Group
IC	Incident Commander
ICS	Incident Command System
IO	Incident Officer
LCC	Luna Community College
LO	Liaison Officer
MACS	Multiple Agency Coordination System
OEM	Office of Emergency Management
SO	Safety Officer

1.0 General

The Emergency Action Plan (EAP) is a written document developed and implemented by Luna Community College (LCC) to provide procedures for events that are unusual to the campus environment.

These procedures apply to all College employees (full-time, part-time, regular and temporary) and students, as well as other community entities and individuals who may be using or participating in College campus activities.

The plan provides information for handing emergency events and seeding up the resumption of normal college operations.

Many disasters are caused by circumstances beyond anyone's control, but with proper preparation, the impact to the campus population can be minimized.

Under this plan, employees will be informed of:

- The plan's purpose,
- The Incident Command System (ICS) Structure), **(IS THIS A TRAINING THAT NEED TAUGHT)**
- Preferred means of reporting fires and other emergencies,
- Emergency escape procedures and route assignments,
- Procedures to be followed by employees who remain to control critical plant operations,
- Procedures to account for all employees after emergency evacuation has been completed,
- Rescue and medical duties for those employees who perform them,
- The alarm system and notification.

The Life/Safety Coordinator will review and update the plan annually. Copies of this plan will be maintained in the Security Office.

In no way can the EAP establish procedures for every situation. The EAP serves as a guide and is not intended to be strict policy and procedure for every emergency situation.

1.1 Emergency Defined

An emergency is defined as any unplanned event that can cause death or injury to employees, students or the public. An emergency is further defined to include an unplanned event that could require the campus to be closed, disrupt operations or cause physical or environmental harm.

These procedures do not cover every situation that might develop, and it may not always be possible to follow every procedural step.

1.2 Incident Command System (ICS)

During an emergency or large-scale event, LCC will utilize the Incident Command System (ICS) to control and manage operations. This system utilizes the principles of management by objective and is recognized and utilized by public safety services of the surrounding communities and by the State Office if Emergency Management.

A nationally recognized system, the ICS allows establishment f an integrated organizational structure tailored to the complexity and demands of single or multiple incidents. The ICS is proven effective in managing multiple agency and multiple jurisdiction incidents of any nature.

Related to the ICS organization is the concept if the Multiple Agency Coordination System (MACS). And is used to facilitate and coordinate emergency response operations and handle mutual aid situations. Under the MACS are four recognized levels of incidents, referred to as Modes. To avoid confusion, LCC will categorize incidents using the same technique. The MACS Modes as applied to LCC incidents are:

Mode Definitions to be used with ICS at LCC

Mode 1: The incident will be handled completely by LCC assets. Routine events (non-injury), vehicle accidents, minor campus security responses) are Mode 1 events requiring no mutual aid response from outside resources. Mode 1 may not require notifying the Life/Safety Coordinator.

Mode 2: The incident will require mutual aid but LCC retains Incident Command. Large routine events (baseball games), incidents requiring minimal mutual aid (injury accidents or minor fires), and incidents with prepared contingency plans may be mode 2 incidents. Mode 2 incidents may require notifying the Life/Safety Coordinator but usually such activities are of limited scope.
Special note-minor fire incidents on campus are handled as Mode 2 incidents even though Gallinas Volunteer Fire Department exercises incident command at the scene.

Mode 3: The incident requires significant mutual aid and LCC requests an outside agency assume Incident Command. A major incident (gas explosion or building collapse) on campus, and incident beyond the scope of LCC plans and capabilities (aircraft accident on campus), or an incident crossing the College property line (fire, hazardous material spill) could trigger a Mode 3 requirement. In a Mode 3 event, the Life/Safety Coordinator is notified, an LCC Emergency Operations Center activated and a full Incident Command System organization staffed. Joint command may be established.

Mode 4: The incident requires aid above and beyond San Miguel County, and State or Federal agency Incident Command is requested. A Mode 4 event is likely to be declared when a regional level incident occurs (severe storm, flooding) and the College and the County are brought under State or Federal involvement (terrorist incident). In Mode 4, the Emergency Operations Group and the Policy Group are activated, a University Emergency Operations Center is activated, and full Incident Command organization staffed and integrated into State or Federal Incident Command System structure.

The **Incident Commander (IC)** is responsible for the overall management of the incident. A Command Staff and a General Staff assist the Incident Commander. The Command Staff usually includes a Safety Officer, Information Officer (IO), and a Liaison Officer who report directly to the IC.

The General Staff usually includes Operations, Planning, Logistics and Finance/Adminstration Sections. Based on the complexity of the incident, the General Staff may report directly to the IC or to the Deputy IC (DIC).

The IC can be drawn from almost any department of the college or any supporting agency. In a fire incident or event involving the Gallinas Volunteer Fore Department as the principle responding agency, The IC will usually be the responding Chief Officer (CO) or other senior member that assumes command; the IC for a major athletic event could be a member of the Athletic Department staff. The IC may change during an incident due to changes in scope, duration or complexity of the incident.

The Command Staff may include Safety, Information and Liaison Officers.

The **Safety Officer (SO)** recommends measures to assure the safety of personnel responding to the incident. The SO should not be responsible for any other functions. Luna Community College, Facilities Management, or the IC's own organization will usually provide the SO. For Example, in an incident with the Gallinas Volunteer Fire Department Incident commander, the Safety Officer will usually come from the Fire Department. However, any principal college department could provide a Safety Officer based in the nature of the incident.

The **Information Officer (IO)**, referred to in older documents as the Public Information Officer, develops and releases information about the incident to the media, incident personnel and other appropriate agencies and organizations. The IO should be the only course of media releases and should manage all information flow to the agencies/organizations external to the incident. The IO should provide regular media releases and information briefings and should attend all operations briefings.

The **Liaison Officer (LO)** coordinates incident activities with assisting and cooperating agencies and serves as the College representative to the San Miguel County Office of Emergency Management or State Office of Emergency Management.

The General Staff consists of Incident Command System Sections directed by Section Chiefs. The size and composition of this staff is tailored to the scope and complexity of the incident and may include Operations, Logistics, Planning and Finance Sections.

The Emergency Management Operations Group (EMOG) and responding agencies may provide the personnel to fill key General Staff positions. Generally, for short duration or routine incidents (Mode 1 and Mode 2), the Command Staff and Operations Section of the General Staff are utilized. Other sections should be considered for incidents of increased complexity or duration, such as those lasting longer than 8-10 hours or more than one operational period.

The Operations Section manages tactical operations at the incident. The Operations Section Chief usually acts as principal deputy to the Incident Commander. In a fire type incident, the Operations Section Chief

may be provided from the Gallinas Volunteer Fire Department. For other types of incidents on capus, Luna Community Security Department may provide the Operations Section Chief. The Operations Section is usually composed of several critical branches and may include Staging, Law Enforcement, Fire, Medical, Public Works, Coroner, and Air Operations Branches. The New Mexico State Police will usually provide a Law Enforcement Branch Director, the county Ambulance provider will usually provide a Medical Branch Director.

NOTE-The Medical Branch Director in the Operations Section is responsible for medical planning, triage, evacuation and treatment of victims or casualties caused by the incident that are not incident personnel (i.e., not responding public safety personnel.).

The **Planning Section** manages all information relevant to the incident and provides the operational support required for long term incidents. The Planning Section prepares formal briefings, consolidates and disseminates Incident Action Plans, maintains records and manages demobilization. Planning Sections are usually required only for complex incidents expected to last beyond 8-10 hours. The Planning Section Chief could be drawn from the Department of Public Safety. The Planning Section may include Resource, Situation, and Documentation Units as well as technical specialists as required. The Resource and Situation Unit Leader could be provided by Facilities Management, the Documentation Unit Leader from a Copy Center or an administration office, and technical specialists from organizations as required.

The **Logistics Section** provides facilities, materials and services for the incident and is composed of a Service Branch and a Support Branch. The Logistics Section Chief and branch directors may be drawn from the organization most knowledgeable with the incident or best suited to service in a capacity to support the incident. For example, in an incident involving power or utilities, the Logistics Chief could be from Facilities Management. The Service Branch may include Communications, Medical and food units, which provide support to incident personnel. Usually the Communications Unit leader will be someone that is knowledgeable in communications operations, the Medical Unit leader may be drawn from the Ambulance provider, and the Food Unit Leader from Food Services.

The **Support Branch** may include Supply, Facilities/Shelter and Transportation Units, which provide support to the incident, both incident personnel and victims/casualties of the incident.

Usually the Supply Unit Leader will be provided by the Warehouse Center and the Transportation Unit Leader from the Transportation Center. The American Red Cross could be involved if the incident involves sheltering College Personnel off campus**. (AND THIS EFFECTS LCC HOW?)**

The **Finance Section** manages all financial aspects of the incident to include purchasing contract support. The Financial and Business Services Department will usually provide the Finance Section Chief and the Finance Section may include Time, Procurement, Compensation/Claims and Costs units. The Time Unit Leader could be drawn upon from Human Resources, the Claims Unit Leader from Risk Management, and the Cost Unit Leader from Financial or Business Services

While often not activated in routine or short-term incidents, this section is vital in complex incidents involving extensive recovery or cost recovery and, in such incidents, it is often the last section demobilized.

1.3 General Guidelines

The following guidelines apply to this EAP:

1. All personnel must be trained in safe evacuation procedures. Refresher training is required whenever the employee's responsibilities or designated actions under the plan change, and whenever the plan itself is changed.

2. The training may include use of floor plans and workplace maps which clearly show the emergency escape routes included in the EAP. Floor plans and maps should always be posted in main areas (i.e., stairwells, lobbies, elevator lobbies and exit corridors) of all buildings to provide guidance in an emergency.

3. Stairwells are the primary means of evacuation. Elevators are to be used only when authorized by a fire or police officer.

4. No employee is permitted to re-enter the building until advised by the Incident Commander whether college official or outside responding authority give permission for reentry.

This EAP will be coordinated with efforts in connected buildings. Mutually beneficial agreements can be reached regarding Designated Meeting Sites and shelter in the event of inclement weather.

1.4 Responsibilities

President or Designee:

1. Responsible for building, college closure or evacuation
2. Establish and coordinate College Incident Command/Command Post.
3. Communicate with governing board.
4. Communication with local, state, federal or private response agencies.
5. Authorization of press releases.
6. Procurement of emergency funds.

Physical Plant Director:

1. Coordinates the college response to critical incidents.
2. Coordinates efforts by various agencies to include college departments, local, state, federal or private agencies.
3. Maintains, coordinates and streamlines communication between the college's departments.
4. Establishes communication with emergency services and forwards information and direction to the sites affected.

5. Dispatches/assigns plant personnel as needed.

Health Science Director:

1. Coordinates health services and works with responding medical personnel.
2. Coordinates/assigns staff as necessary to assist a necessary within the scope of licensure.

The Life/Safety Coordinator is responsible for:

1. Obtaining and posting floor plans and route evacuation maps.
2. Overseeing the development, communication, implementation and maintenance of the overall EAP.
3. Ensuring the training of building occupants, Safety Monitors, and Critical Operations Personnel, and notifying all personnel of changes to the plan.
4. Maintaining up to date lists of building occupants, critical operations personnel and any other personnel with assigned duties under this plan. Lists are included as Appendix A as defined per site/building.
5. In the event of a fire or other emergency, relaying applicable information to emergency personnel, occupants and Safety Monitors.
6. Establishing Designated Meeting Sites for evacuees.

The Safety Monitors (Department Heads/Supervisor) are responsible for:

1. Familiarizing personnel with emergency procedures.
2. Acting as liaison between management and their work area.
3. Ensuring that occupants have vacated the premises in the event of an evacuation and for checking assigned areas.
4. Knowing where their Designated Meeting Site is and for communicating tis information to occupants.
5. Having a list of personnel in their area of coverage, so a head count can be made at their Designated Meeting Site.
6. Ensuring that disabled persons and visitors are assisted in evacuating the building.
7. Evaluating and reporting problems to the Life/Safety Coordinator after an emergency event.
8. Posting the “Area Evacuation Plan” (Appendix III) in their work areas, communicating plan to occupants, and updating the pan annually.

Food Service Manager:

1. In the event of a disaster, should the college be designated as an emergency shelter, staff will coordinate with government/private agencies to ensure that adequate food and water supplies are made available.
2. In the event of a disaster, should the college be required to “shelter in place” for an extended period, the food service staff may be required to provide food and water to students, staff and/or faculty.

Head Security:

1. Coordinate security staff to assist in providing on-site security and/or traffic control.

2. Coordinate transportation in the even of a campus evacuation either by college buses or coordinate with private/government agencies to provide additional buses.

2. Fire Response

Persons discovering a fire, visible smoke or explosion should;

- Activate the nearest fire alarm pull station, the audible and visual alarms in the building will activate immediately.
- Alert people in the immediate area to begin evacuation. Assist those with disabilities.
- Do not use elevators.
- Close doors to confine the fire.
- Dial "OUTGOING" 911. Give your nae and provide location, telephone number and description of fire.
- Move to the designated assembly area away and upwind from the building.
- Have persons acknowledgeable about the incident and location assist emergency personnel.
- Report this incident to campus security, Director of Physical Plant/Safety Director and/or your supervisor as soon as possible.
- Complete an Incident/Accident Report within 24 hours.

Any pertinent information should be conveyed to the Fire Department, state your name, your location, and the nature of the call. Speak slowly and clearly. Wait for the dispatcher to hang up first. On occasion the dispatcher may need additional information or may provide you with additional instructions. Do not make the call from the area that is in danger.

Evacuation Procedures for building Occupants

1. When the fire alarm sounds, all personnel should ensure that nearby personnel are aware of the emergency, quickly shutdown operating equipment (i.e., compressed gas cylinders), close doors and exit the building.

2. All occupants should proceed to their Designated meeting Site ad await further instructions from their Safety Monitor.

3. All personnel should know where primary and alternate exits are located, ad be familiar with the various evacuation routes available.

4. Building occupants must not use elevators as an escape route in the event of fire.

Notes and Precautions:

Small fires can be extinguished **only if you are trained to use a fire extinguisher**. However, an immediate readiness to evacuation is essential.

- **All fires, even those that have been extinguished, must be reported to 505-454-2577 or ext. 1108 immediately.**
- Never enter a room that is smoke filled.
- Never enter a room if the door is warm to the touch. (when exiting, feel doors and door knobs that you suspect may be hot, the back of your hand is more sensitive)

Fire: (RACE)

R-Rescue: When you discover a fire, rescue people in immediate danger if you can do so without endangering yourself. Exit via fire exit. Never use elevators. Close doors to room if that ca be done safely.

A-Alarm: Sound the alarm by pulling a fire pull station and call 911 and 505-454-2577 or 505-660-0386, from a safe distance, notify security of precise location of fire. (NEED TO VERIFY NUMBERS and if we are calling a non-emergency number for fire)

C-Confine: Close all doors, windows and other openings.

E-Evacuate: Evacuate the building.

Disabled Occupants

If a disabled occupant is unable to exit the building unassisted, the Safety Monitor must notify the emergency response personnel of the person's location. Transporting of disabled individuals up or down stairwells should be avoided until emergency response personnel have arrived. Unless imminent life-threatening conditions exist in the immediate area occupied by a non-ambulatory or disabled person, relocation of the individual should be limited to a safe area on the same floor, in close proximity to an evacuation stairwell.

Wildland Fire:

LCC Campus borders a wooded area and the threat of a wildland fire is real. While LCC may not have an initial involvement should a fire occur there, it may result in a possible evacuation of all or part of the campus. The campus may also be used by responding agencies for other purposes such as a staging area or to gain access resulting in increased traffic in and around the campus.

3. Lockdown

Lockdown: The safety of students and staff is always first while apprehension of violators and weapon is second. Treat all weapon related information (rumor) to be accurate and plan appropriately, A lockdown will be implemented in the following circumstances:

- Shooting-in or near the school or school property
- Person with weapon
- Large group distribution or altercation
- Hostage situation

Immediate Action

1. All staff and students are to seek immediate shelter (hide), stay clear from windows, doors and out of plan view areas. Lock doors, close blinds, turn off the lights and remain quiet. **DO NOT OPEN DOOR FOR ANYONE.**

2. If outside, all persons are to seek shelter in the nearest buildings/classroom.

3. Notify LCC security at 505-629-8244 (look up number) or extension 1108.
   a. Director of Security Cell: 505-699-9883
   b. Head of Security Cell: 505-660-0386

4. Dial 911 (outgoing button then 911 if at an extension on campus), give dispatch as much information as possible, and remain on the line until the dispatch hangs up, State what is happening, where it is happening, are weapons involved, are people injured, how many people are involved, description of suspect, your name and call back number (do you really want the dispatch to call you back and make the phone ring if the shooter is near?)

5. Doors shall not be opened for anyone. Door will be opened by security or recognizable authority with own key. A security code will be issued when an "ALL CLEAR" is issued.

6. Do not attempt to stop suspect in flight. AVOID CONFRONTATION.

7. Any staff person may call a code blue if he/she deems necessary for the welfare of the students and staff.

Notification

The initial message of a "lock down" at which time everyone is to take immediate action as outlined above with further instructions to follow.

Message will be delivered via text and email messages (how about RAVE) throughout mass notification system. Secondly, over the campus wide telephone intercom system (How do you do that?)

4. Bomb Threat

BOMB THREAT MAY COME TO THE ATTENTION OF THE RECEIVER IN VARIOUS WAYS. It is important to compile as much information as possible. In the case of a written threat, the document is to be handled by as few people as possible as this is evidence that should be turned over to the New Mexico State Police Department. If the threat should come in by email, make sure to save the information in your computer. Most bomb threats are transmitted over the telephone; thus, the following instructions will be provided with that assumption:

1. Remain calm and immediately refer to the attached bomb threat checklist. If applicable, pay attention to your telephone display and record the information shown on the display window. When receiving a threat via on-campus phone, record the conversation by pressing INFINITY symbol followed by 385 (∞385).

2. The object is to try and keep the caller on the line as long as possible and attempt to gather as much information as possible. Try not to anger the caller, Pay attention to any background noise and distinctive sounds (i.e., machinery, traffic, other voices, music, television, etc.). Note characteristics of the callers voice (i.e., gender, age, education, accent, etc.).

3. Obtain information in the time of detonation, type of bomb, location of bomb,

4. Immediately after the caller has ended the call, notify LCC Security at Ext 1108 between 8AM-5:00PM
   a. Andrew Duran (phone Number) NEEDS TO BE CHANGED
   b. Ron Gonzales (phone number) NEEDS TO BE CHANGED

5. Notify the immediate supervisor in your area.

6. Staff will be notified of a bomb threat via verbal warning. The decision to evacuate will be made by the President or designee after an evaluation of the information available. Proper authorities will then be contacted by dialing 911 (i.e., police, fire, and medical).

7. **Do not lock doors, turn off lights or equipment. Do not use electronic devices or pull fire alarms.**

8. An all clear will be advised by the Security Officer or agency handling the incident.

Decision Making

The President or designee will determine if the threat is bona fide and requiring evacuation based on the information available, including but not limited to:

1. Nature of the threat.

2. The Specificity of location and time of detonation.

3. Circumstances related to the threat (I.e., political climate, series of events leading to threat, any relevant historical events/anniversaries)

TELEPHONE BOMB THREAT CHECKLIST

(DATE MIGHT BE GOOD TO KNOW)
TIME CALL RECEIVED: _____ Time Call Terminated:_____

Exact words of caller: (Use separate paper if necessary)

_____

_____

_____

GIVE COWORKER A SIGNAL TO LISTEN IN. ASK CALLER TO REPEAT STATEMENTS

Questions for caller:

1. What time is bomb set to explode? _____
2. Where is the bomb located? _____
3. What kind of bomb is it? _____
4. What does the bomb look like? _____
5. Why does the caller want to kill or injure innocent people? _____

VOICE DESCRIPTION

___Male ___Female ___Calm ___Nervous ___Old ___Young ___Middle-aged
___Refined ___Accent ___Laughter ___Crying ___Excited ___Rapid ___slow
___Normal ___Rough ___Throat clearing ___Cracking Voice ___Heavy Breather
___Hoarse ___Slurred ___Whispered ___Speech Impediment

BACKGROUND NOISE

___Music ___Traffic ___Bells ___Whistles ___Aircraft ___Machinery ___Quiet
___House noises ___Trains ___Engines Running

THREAT LANGUAGE

___Well-spoken ___Incoherent ___Foul ___Irrational ___Taped ___Message machine

ADDITIONAL INFORMATION:

Did caller indicate knowledge of the facility? YES NO
Describe: _____

Which line (number) received the call? _____ Did caller ID Display a number? YES NO

What number received the call? _____

_____ _____ _____

Printed Name Contact Number Date

5. Hazardous Material (HAZMAT) Incident

Hazardous materials come in the form of explosives, flammable and combustible substances, poisons and radioactive materials. These substances are most often released as a result of transportation accidents or because of chemical accidents. No chemicals should be brought onto the college property without the approval from the Director f the Physical Plant. Major spills or emergencies require emergency assistance from 24-hour emergency response agencies such as Fire Department, Police and Hazardous Materials Teams (Private or Government).

A Hazardous Materials emergency is defined as a spill that you and your co-workers in the area can't handle safely on your own, and you need special training and equipment to protect yourself from the chemicals.

Small Spill/Release-trained workers can handle small spills, especially small spills of less dangerous materials such as:

- A small spill of gasoline or diesel fuel, UNLESS it has been mixed with another chemical or is on fire.
- A small leak (propane cylinder), UNLESS it is a deadly chemical like chlorine.
- A spill of less than 55 gallons, UNLESS it is mixed with another chemical, or it is a deadly chemical.

Large Spill/Release-requires special training and equipment to clean up. (Outside resources, I.e., Hazmat Team).

- Spreads rapidly into the atmosphere or on the ground
- Endangers people and/or environment
- A spill is more than 55 gallons even if the material is not extremely dangerous
- You don't know what the chemical is

You will notify LCC Security at 505-660-0386 (CHECK NUMBER); Director of Security: 505-699-9883.

Immediate Action:

1. Small spills should be cleaned up by the person causing the spill if possible or follow Large Spill procedure.
2. Large Spills or emergencies:
   a. Call 911 and LCC Security Ext 1108, Ron Gonzales @ 505-699-9883, Andrew Duran @505-660-0386.
   b. Evacuate-assemble at a safe distance. IT is best to go in an up-wind and up-hill direction.
   c. Wait for and provide information to responders (what has spilled or released, where it is, does anyone need to be rescued, does anyone need medical attention.

d. IF anyone has been contaminated or exposed, keep them separated from other people. Provide basic medical care until ambulance arrives.

6. Mental Health Crisis

College can be a tremendously stressful time for students; stress is the biggest life issue that students say affect their studies. Attending colllege introduces new stressors. A student ma work, be involved in extracurricular activities, forcing them to balance these activities with homework. Students may also have problems with a roommate or exams. According to a 2000 poll, 85% of students report being stressed on a daily basis.

This is not to say staff embers or faculty members are not subject to similar stressors. In both cases, we should take a proactive approach and assist anyone that maybe be showing signs of stress.

If early signed are observed, you should contact the ACCESSA department staff for assistance, specifically of anyone is displaying systems you should contact Counselor Renee Maestas in room 111 in the ACCESS Center or by phone at 505-454-5455 or extension 1216.

IF you observe that the situation is progressing and you need immediate guidance, do not hesitate to contact the "Crisis Line (Crisis Line: 505-425-1048).

ACCESS DEPARTMENT		
NAME	Telephone #	Extension
Renee Maestas	505-454-5355	1216
Cindy Branch	505-454-	????
Janice Madrano	505-454-2546	????

Some warning signs to consider:

- Sadness or hopelessness
- Irritability, anger or hostility
- Tearfulness or frequent crying
- Withdrawal from friends and family
- Loss of interest in activities
- Restlessness and agitation
- Feeling of worthlessness and guilt
- Lack of enthusiasm and motivation
- Fatigue or lack of energy
- Difficulty concentrating

If emergency assistance is needed, do not hesitate to dial "outgoing" 911. This shall be considered if someone is in crisis or physically at risk. Through the information given to the dispatcher, police and/or ambulance, personnel may be dispatched. They will make the determination if the person needs to be transported to a medical facility.

Luna Community College vehicles and/or personnel vehicles should not be used to transport anyone in crisis.

Other Resources:

Crisis Line: 505-425-1048
Statewide Center Intake (SCI): 1-800-797-3260
1800-273-TALK (8255)
1-800-SUICIDE (1-800-784-2433

http://ulifeline.org/page/main/Home.html

7. Inclement Weather

Purpose:

The Luna Community College recognizes its responsibility for the safety and welfare of students, faculty and staff during school hours and realizes that occasionally situations of severe inclement weather exist or are predicted during the school day and that on certain occasions, may have to close schools and/or cancel transportation activities.

Procedures:

1. The Physical Plant Director or, in the absence of the Director, the Director's designee, shall have the authority to determine school closure and/or cancel transportation. (As opposed to Matt Griego?)

2. The decision to close or delay LCC classes shall be made by 6:00AM.

3. The Physical Plant Director shall implement the decision fr school closure and/or cancel transportation, including special transportation, and shall be responsible for its communication.

4. Radio/television stations will be informed of the decision to close or delay school as early as possible with the intent of giving early warning, weather conditions can change suddenly and may not always allow for early warning. (HOW ABOUT THE RAVE ANNOUCMENTS?)

5. Students, faculty and staff are excused from attendance at LCC main campus and any affected satellite campus. With the exception of Physical Plant, employees who are not exempt include ground maintenance, building maintenance, etc.

Before the Beginning of a School Day (Day and Evening Classes):

If school closure is possible, the Physical Plant Director will use various factors to determine if there will be a delay or closure to include but not limited to:

1. Local vicinity weather report.
2. Present weather repot as stated by National Weather Service.
3. Personal Contacts-that work or reside in out-laying areas.

It is the responsibility for the student, faculty and staff to listen to the radio/T.V. for the decision of school closure/delays. The following radio/television stations will broadcast information regarding any closures or delays:

	AM	FM	
Radio Las Vegas Area	KLVF 1230	KFUN 100.7	
	KNMX 540	Z96 96.7	
Radio Santa Rosa Area		KSSR 95.9	
Radio Raton Area	KRTN 1490	KRTN 93.9	
Television	KOB4	KOAT 7	KRQE 13

Other resources where students, faculty and staff can find information n closures. Delays are:

- Rave Alerts
- By calling the main LCC Number: 505-454-2500
- LCC website: www.luna.edu
- Facebook LCC page
- LCC e-mail

8. Infrastructure Failure and Critical Operations Shutdown

It is understood that from time to time the college campus may experience infrastructure problems that could render the work site unsafe or uninhabitable such as electricity, gas, water, telephone or computer failures.

Infrastructure Failure

If a failure is experienced relating to water, electricity or gas, contact:
a. LCC Maintenance Department at ext. 1106
b. Matt Cordova, Maintenance Director @ 505-???-????
c. Matt Griego, Life/Safety Coordinator @ 505-???-????
If failure is expereinced relating to the telphone system, contact:
a. LCC Computer Center at ext. 1207
b. Matt Bowie, IT Director @ ext. ????
If failure is experienced relating to the computer system, contact:
a. LCC Computer Center at ext 1207
b. Matt Bowie, IT Director @ ext. ????

Critical Operation Shutdown

Critical operations, including equipment that must be shut off and persons designated to complete these actions shall be identified in Table I of this EAP/ Procedures for rapid shutdown should be predetermined for life safety and loss control purposes as well as ensuring complete evacuations in a timely manner. The Critical operations Shutdown procedures to be followed by those employees who have bee assigned to care for essential building operations include:

UTILITY	NAME/JOB TITLE	CELL PHONE	TELEPHONE
Any Emergency		505-???-????	505-454-????
Electricity			
Water			
Gas			
Waste Water			
HVAC & Mechanical			
Custodial			
Fire Suppression/Alarm			
Computer Center/IT			

9. Accountability Procedures for Emergency Evacuation

Designated Meeting Sites:

Groups working together in the same area should meet outside the building in the prearranged Designated Meeting Site. A list of primary and alternate Designated Meeting Sites should be established but may not be feasible and good judgement shall be used to seek a safe meeting site.

Department Organizational List:

A roster of personnel to ensure that everyone has evacuated shall be developed by each of the departments. The list shall be updated whenever there is a personnel change.

Safety Monitors (department head, office manager, supervisor) will conduct head counts once evacuation has been completed. There is at least one Safety Monitor per floor or per twenty occupants to provide adequate guidance and instruction at the time of an emergency.

Safety Monitors are to be familiar with the complete workplace layout and the various primary and alternate escape routes from the workplace. All Safety Monitors shall be aware of employees with disabilities that may need extra assistance and of hazardous area to be avoided during emergencies. Before Leaving, the Safety Monitors are to check rooms and other enclosed spaces in the workplace for other employees who may be trapped or otherwise unable to evacuate the area and convey this information to emergency personnel.

Once each evacuated group of employees have reached their Designated Meeting Site, each Safety Monitor:

1. Assemble is/her group in the Designated Meeting Site

2. Takes head count of his/her group.

3. Assumes role of department contact to answer questions.

4. Instructs personnel to remain in area until further notice.

5. Reports status to Life/Safety Coordinator or Incident Commander through proper channels/Chain of command.

At times it may be necessary to relocate evacuees either to a facility on-site or off-site. The decision will be made by decision makers and information will be forwarded to the Safety Monitor. Upon decision being made, appropriate transportation arrangements will be made if evacuees are to be transported off-site.

10. Rescue and Medical Duties

- The Fire Department or Emergency Medical Technicians (EMT) will conduct all rescue and medical duties.
- Do not move injured persons unless leaving them in place may cause more harm. Keep them lying down, covered and warm when necessary until medical personnel arrive or the situation progresses, and it is in the best interest to move the victim(s).
- First Aid: Medical personnel are available at the Allied Health Services. Any personnel trained to provide basic first aid or CPR are valuable and should not hesitate in providing medical treatment within your scope of training.

11. Resource and Responsibility Lists

EAP Organization:

The list in Appendix A includes the names of employees, managers, staff or other personnel and their job titles, job positions and relative EAP collateral duties. The purposes served by the list are:

1. To tell employees who to see for additional information n the EAP.

2. To provide emergency response personnel with a list of department personnel which ay be needed in order to provide additional information about the fire, a chemical, a hazardous waste location, a shipment of chemicals, etc.

3. The lists should be updated by the Safety Monitor's on an as-needed basis.

Training and Communication

Each occupant should know that evacuation is necessary and what his/her role is in carrying out the plan. Employees should also know what is expected of them during an emergency to assure their safety. Training on the EAP's content is required by OSHA 20CFR 1910.38(a).

A method of training building occupants in the requirements of the emergency evacuation plan is to give all employees a thorough briefing and demonstration. The department will have all managers and supervisors present this plan to their staff in staff meetings.

A Training Attendance Record Sheet is included in Appendix B. This record should be maintained by the Life/Safety Coordinator for a period of five (5) years.

APPRENDIX A

DEPARTMENT EMPLOYEE LIST

Fiscal Office

Martinez	Francina	Comptroller-Fiscal Office
Abeyta	Ursula	Accounts Payable-Fiscal Office
Baca	Georgia	Fiscal Analyst-Fiscal Office
Valdez	Ida	Cashier-Fiscal Office
Duran	Ronald	Bookstore Manager (75%) Copy Ctr (25%)Fiscal Office

PHYSICAL PLANT DIRECTOR

Cordova	Mathew	Physical Plant Director

CUSTODIANS

Bachicha	Marie	Custodian 1 (.75FTE) Santa Rosa
Barboa	Mathew	Custodian 1-Physical Plant
Martinez	Mathew	Custodian I-Physical Plant
Salazar	Estevan	Custodian I-Physical Plant
Benavidez	Louie	Custodian 2-Physical Plant
Maestas	Joe	Custodian 2 Physical Plant
Maestas	Marvin	Custodian 2-Physical Plant
Maestas	Nazario	Custodian 2-Physical Plant
Valdez	Manuel	Custodian 2-Physical Plant

GENERAL MAINTENENACE

Arrellin	Robert	General Maintenance 1-Springer
Maestas	Patricio	General Maintenance I-Physical Plant
Vigil	Lawrence	General Maintenance I-Physical Plant
Berrego	Mathew	General Maintenance I-Physical Plant
Dehererra	George	General Maintenance 2-Physical Plant

Jaramillo	Michael	General Maintenance 3-Physical Plant
Sena	Norman	Technical Electrician

ACADEMIC DIRECTORS

Apodaca	Francisco	STEM Director/Acting AH Director
Bernal	Lita	School of Business Director
Castillo	Geno	Vocations Director
Hughes	Ruth Maxine	Nursing Director
Ortega	Brenda	Early Childhood Director
Roybal	Anita	Humanities Director
Bustos	Don	Sm Bu Dev Ctr Director

NON-ACADEMIC DIRECTORS

Bowie	Mathew	IT Director
Bustos	Don	Sm Bu Dev Ctr Director
Montano-Baca	Brianna	Associate Director-SM Bus Dev Bur
Chavez	Carolyn	HR Director
Cordova	Mathew	Physical Plant Director
Luna	Elaine	AHEC Director
Maestas	Renee	Student Success Center Director
Montoya	Michael	Financial Aid Director-Financial Aid
Salazar	Linda	Learning Resource Center Manager-LRC

ADMINSTRATIVE ASSISTANTS

Apodaca	Belanna	Administrative Assistant 2-Early Education
Baca	Germaine	Administrative Assistant 1 (,50FTE)-HR

Duran	Mary	Executive Administrative Assistant-Dr. Patterson
Garcia	Estelle	Administrative Assistant 2-Allied Health
Gallegos	Tina	Office Manager 2-Springer
Herrera-Gabaldon	Andrea	Administrative Assistant 2-Vocations
Lucero	Amanda	Administrative Assistant 2-Humanities
Montano	Elaine	Administrative Assistant 2-Nursing
Montoya	Stacy	Office Manager-Mora
Pina	Yvonne	Administrative Assistant I-Nursing
Schweid	Catherine	Administrative Assistant 2-Physical Plant
Tapia-Benavidez	Amanda	Administrative Assistant 2-STEM
Ulibarri	Emily	Administrative Assistant (.75)-Santa Rosa
Velasquez	Vanessa	Administrative Assistant 2-School of Business
Yara	Sheryl	Executive Administrative Assistant-President

OTHER ADMINISTRATIVE ASSISTANTS

Segura	Nash	Administrative Assistant 1-Admissions/Recruit
Montoya	Denise	IT Technical Administrative Assistant-IT
Montoya	Evelyn	Executive Administrative Assistant-Fin & Admin
Flores	Jessica	Office Manager-Athletics
Pacheco	Gloria	Dental Program Administrator-Allied Health

HUMAN RESOURCES

Apodaca	**Belanna**	**Administrative Assistant 2-Early Education**

Chavez	Carolyn	HR Director
Archuleta	Leticia	Payroll Administrator-Human Resources
Rivera	Sandra	HR Administrator-Human Resources

DEPARTMENT ADVISORS (Including Faculty/Advisor)

Baca	Richard (Rick)	Faculty/Advisor-Humanities
Cordova	Melissa	School of Business Advisor
Jackson	Tycie	Early Childhood Advisor
Torrez	Vanessa	Advisor-Allied Health
Varela	Janice	STEM Advisor
Wezwick	Karen	Vocations Advisor
Fernandez	Sierra	Student Success Coach-Nursing

OTHER ADVISORS

Medrano	Janice	Student Services Advisor-Student Suc Ctr
Quintana	Suzanne	Career Services Advisor-Admissions/Recruit

WELLNESS CENTER

Vigil	Carl	Wellness Center Administrator
Arguello	Angelique	Performance Assistant I-Wellness Center

ATHLETICS

Nusser	Timothy	Head Baseball Coach-Athletics
Estep	Harry	Assistant Baseball Coach-Athletics

Wallace	Steven	Head Softball Coach-Athletics
Royder	Thomas	Assistant Softball Coach-Athletics
Flores	Jessica	Office Manager-Athletics

FULL TIME FACULTY VOCATIONS

Castillo	Geno	Vocations Director
Baca	Anthony	Full time Instructor-Vocations
Bonney	Clarice	Full time Instructor-Vocations
Sandoval	Eugene	Full time Instructor-Vocations
Sandoval	Germaine	Full Time Instructor-Vocations

FULL TIME FACULTY HUMANITIES

Baca	Kim	??Humanities-Sociology
Baker	Nathan	Full time Faculty-Humanities (Developmental)
Fields	Larry	Full time Instructor-Humanities
Goodyear	Sherry	Full time Instructor-Humanities
Killian	Jason	Full time Instructor-Humanities (CJ)
Kuhlman	Patricia	Full time Instructor-Humanities

FULL TIME FACULTY NURSING

Hughes	Ruth Maxine	Nursing Director
Sena	Kimberly	Full time Instructor-Nursing
Shrum	Irma Joy	Full Time Instructor-Nursing
Gomez-Vaughan	Lucia	Part Time Instructor-Nursing
Groman	Susan	Full time Instructor-Nursing
Romero-Arguello	Jacqueline	Full time Instructor-Nursing

FULL TIME FACULTY SCHOOL OF BUSINESS

Coca	Reyes	Full time Faculty-School of Business

FULL TIME FACULTY STEM

Lucero	Rachel	Full time Instructor-STEM
Collins	Nicole	Full time Instructor-STEM
Sanchez	Betsy	Full time Instructor-STEM
Surdi	Rita	Full Time Instructor-STEM

PROCUREMENT SPECIALIST

Baca	Levitt	Procurement Specialist-Purchasing

FRONT DESK INFORMATION SPECIALIST

Baca	Raymond	Information Specialist Administration (Desk)

ADULT EDUCATION

Bentson	Lisa	Faulty Staff-Adult Education (73%)

STUDENT SUCCESS CENTER

Maestas	Renee	Student Success Center Director
Medrano	Janice	Student Services Advisor-Student Suc Ctr
Branch	Cynthia	Student Services Counselor-Student Success

REGISTRARS

Romero	Henrietta	Registrar

Chacon	Alicia	Student Specialist 2-Registrars Office

IT

Montoya	Denise	IT Technical Administrative Assistant-IT
Paiz	Larry	Instructional Designer-IT
Gibson	Denise	SIS/ERP Administrator-IT
Ortiz	Shannon	IT Generalist I-IT
Romero	Julio	IT Generalist 2-IT

WAREHOUSE TECHNICIAN

Chavez	Chris	Warehouse Technician-Physical Plant

VP-FINANCE CHIEF FINANCE OFFICER

Flores-Medina	Donna	CFO-Chief Financial Officer-Fin/Admin

PUBLIC RELATIONS

Gallegos	Jesse	Public Relations Coordinator-Admin
Kavanaugh	David	Comm/Mkt Specialist-Public Relations

LEARNING RESOURCE CENTER

Salazar	Linda	Learning Resource Center Manager-LRC
Hartshorne	Sergio	Part-time Media Technician .50FTE-Learning Resource Center
Lopez	June	Learning Resource Center Assistant-LRC

ADMISSIONS/RECRUITMENT

Marquez	Moses	Admissions/Recruitment Manager
Quintana	Suzanne	Career Services Advisor-Admissions/Recruit

Segura	Nash	Administrative Assistant 1-Admissions/Recruit
Garcia	Martin	Specialist-Admissions/Recruitment

FULL TIME FACULTY ALLIED HEALTH

Gould	Breanna	Full time Instructor-Allied Health
Pacheco	Gloria	Dental Program Administrator-Allied Health
Rivera	Chantel	Full time Instructor-Allied Health

FINANCIAL AID

Montoya	Michael	Financial Aid Director-Financial Aid
Mueller	Rochelle	Financial Aid Analyst-Financial Aid
Cantu	Sarah	Veterans Coordinator-Financial Aid

LIFE SAFETY/SECURITY

Griego	Mathew	Security Supervisor-Life Safety/Security
Salazar	Michael	Security Officer-Life Safety/Security

BARISTA-COFFEE SHOP

Romero	Brianna	Barista-Coffee Shop

DUEL CREDIT/TRANSFER COODINATOR

Saavedra	Geraldine	Duel Credit/Transfer Coordinator-Duel Credit

FULL TIME INSTRUCTOR SANTA ROSA

Quintana	Andrew	Full time Instructor-Santa Rosa

EARLY CHILDHOOD

Salazar	Marcella	Early Childhood Teacher 2-Early Childhood
Trujillo	Martha	Early Childhood Teacher 3-Early Childhood

ACE LAB COORDINATOR

Varela	Raymond	ACE Lab Coordinator-ACE

APPRENDIX B

Luna Community College Sign-In Sheet

See next page

LUNA COMMUNITY COLLEGE SIGN-IN SHEET

PROJECT:	**MEETING DATE/TIME:**
FACILITATOR:	**PLACE/ROOM:**

NAME:	**DEPARTMENT:**

APPRENDIX C

AREA EVACUATION PLAN

(Post and update Annually)

DEPARTMENT/AREA:

_____

DATE: _____ COMPLETED BY:_____

1. Each work area should establish, in advance, a primary ad a secondary evacuation route (In case the primary route is blocked) in the even of fire, flood, blackout, earthquake, etc. Do not use elevators to evacuate. Do not block stairwells.

PRIMARY EVACUATION ROUTE:

_____

_____

SECONDARY EVACUATIO ROUTE:

_____

_____

2. Establish a outdoor meeting place where evacuees, out of harm's way, can account for all staff and visitors. A short distance from the building, on the same block, should suffice.

DESIGNATED MEETING SITE:

_____

_____

3. Designate a position/alternate who will take charge in the event of fire or other emergency.

SAFETY MONITOR:

_____

ALTERNATE SAFETY MONITOR: _____

APPRENDIX D

Checklist of responsibilities for Safety Monitor

1. Ensure that R.A.C.E is followed if smoke or flame is discovered in your work area:
R-Rescue A-Alarm C-Close all doors E-Evacuate
(IF time and distance permits, call 505-454-2577 ext 1108)

2. “Sweep” every room in your area to make sure that everyone has evacuated.

3. Ensure that people follow the appropriate evacuation route, and that they are directed to a safe, post-evacuation meeting place.

4. Account for all staff and visitors at the Designated Meeting Site.

5. Identify your self as the Safety Monitor for your work area to the Emergency Coordinator and emergency responders.

6. Notify Emergency Coordinator ad emergency responders of any personnel who remain trapped in the building, are performing critical operations shutdown or are unaccounted for.

SPECIAL NEEDS:

Be aware of impaired staff and visitors who may need to be alerted or assisted.

Laboratories & Maintenance Areas

Prepare to shut of piped gasses and compressed gas cylinders at the valve, which may feed a fire.

BLOODBORN E PATHOGENS

EXPOSURE CONTROL PLAN

Bloodborne Pathogens Exposure Control Plan

In accordance wit the OSHA Bloodborne Pathogens standard 1910.1030, the following exposure control plan has been developed.

1. Exposure Determination

Designated employees that may come into contact with human blood or other potentially infections material. (OPIM).

a. A list of all job classifications I which all employees in those job classifications have occupational exposure:

Health Care Workers

Dental

b. A list of all job classifications in which some employees have occupational exposure:

Custodians

Maintenance Workers

Day Care Providers

2. Methods of Compliance

Universal precautions shall be observed to prevent contact with blood or other potentially infectious materials. Under circumstances in which differentiation between body fluid types is difficult or impossible all body fluids shall be considered potentially infectious materials.

3. Engineering and Work Practice Controls

Engineering and work practice controls hall be used to eliminate or minimize employee exposure. Where occupational exposure remains after institution of these controls, personal protective equipment shall be used.

a. Hand washing facilities will be readily accessible for employees. Hen provisions of hand washing facilities is not feasible, the employer shall provide an appropriate antiseptic hand cleanser in conjunction with clean cloth/paper towels. When antiseptic hand cleansers are used, hands shall be washed with soap and running water as soon as feasible.

b. Employers shall ensure that employees wash hands and any other skin with soap and water, or flush mucous membranes with water immediately or as soon as feasible following contact of such body areas with blood or other potentially infectious materials.

c. Contaminated needles and other contaminated sharps shall not be bent, recapped or removed unless the employer can demonstrate that no alternative is feasible or that such action is required by a specific medical or dental procedure.

d. Bending, recapping or needle removal must be accomplished through the use of a mechanical device or a one-handed technique.

e. Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in work ears where there is a reasonable likelihood of occupational exposure.

f. If professional medical is required, a local ambulance will be the first choice; a personal car will be the second. If a personal car is taken, a impervious material should be used to prevent contamination of the vehicle.

g. New Employees or employees being transferred to other sections will receive training about ay potential exposure from their supervisor.

4. Personal Protective Equipment

When there is occupational exposure, the employer shall provide, at not cost to the employee, appropriate personal protective equipment. Personal protective equipment will be s=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 membranes under normal conditions of use and for the duration of time which the protective equipment will be used.

The employer shall repair or replace personal protective equipment as needed to maintain its effectiveness, at no cost to the employee. All personal protective equipment is removed prior to leaving the work area. When personal protective equipment is removed, it shall be placed in an appropriately designated area or container for storage, washing, decontamination or disposal.

Masks, Eye Protection, and face Shields. Masks in combination with eye protection devise, such as goggles, or glasses with solid side shields, or chin-length face shields, shall be worn whenever splashes, spray, spatter, or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth continuation can be reasonably anticipated.

5. Housekeeping

Maintaining our work areas in a lean and sanitary condition is an important part of the LCC Bloodborne Pathogens compliance Program.

Employees must decontaminate working surfaces and equipment with an appropriate disinfectant after completing procedures involving blood or other potentially infectious materials.

a. Contaminated work surfaces shall be decontaminated with an appropriate disinfectant after completion of procedures; immediately or as soon as feasible when surfaces are overtly contaminated or after ay spill of blood or other potentially infectious materials; and at the end of the work shift if the surface may have become contaminated since the last cleaning.

b. Broken glassware which may be contaminated shall not be picked up directly with the hands. It shall be cleaned up using mechanical means, such as a brush ad dust an, tongs, or forceps.

c. A freshly prepared bleach solution ca be used to disinfect, using household bleach ad tap water at a ration of 1:100 (1/4 cup bleach tap 1-gallon tap water).

6. Disposal of Contaminated Items-Regulated Waste

Regulated waste should be placed in appropriate containers, labeled, and disposed of in accordance with applicable regulations of the United States. States and Territories, and political subdivisions of States and Territories.

a. Container of sharps will be picked up by a qualified Hazardous Waste Management firm designated by the college or delivered to the New Mexico Behavioral Health Institute in Las Vegas, NM, which will assume responsibility for legal disposal.

b. Employees will be warned of biohazardous waste with proper labeling in accordance with paragraph (6)(e).

c. Contained sharps shall be discarded immediately or as soon as feasible in containers that are: puncture resistant, leak proof on sides and bottom, and Labeled or color-coded n accordance with paragraph (6)(e) of this standard.

d. Containers shall be constructed to contain all contents and prevent leakage during handling, storage, transport or shipping.

e. 

These labels shall be fluorescent orange o orange-red or predominantly so, with lettering ad symbols in a contrasting color. Labels shall be affixed as close as feasible to the container by string, wire, adhesive, or other method that prevents their loss or unintentional removal. Red tags or red containers may be substituted for labels.

7. Hepatitis B Vaccination and Post-Evaluation and Follow-up

The employer shall make available the hepatitis B vaccine and vaccination series to all employees who have occupational exposure, and post exposure evaluation and follow up to all employees who have had an exposure or incident.

The employer shall ensure that all medical evaluations and procedures including the hepatitis B vaccine and vaccination series and post exposure evaluation and follow-up, including prophylaxis, are:

a. made available at not cost to the employee.

b. Made available to the employee

c. Performed by or under the supervision of a licensed physician or by or under the supervision of another licensed healthcare professional.

Hepatitis B Vaccination

Hepatitis B vaccination shall be made available after the employee has received the training required in paragraph (8) ad within 10 working days of initial assignment to all employees who have occupational exposure unless the employee has previously received the complete hepatitis B vaccination series, antibody resting has revealed that the employee is immune, or the vaccine is contraindicated for medical reasons.

The employer shall not make participation in a prescreening program a prerequisite for receiving hepatitis B vaccination.

If the employee initially declines hepatitis B vaccination but at a later date while still covered under the standard decides to accept the vaccination, the employer shall make available hepatitis B vaccination at that time.

If a routine booster dose(s) of hepatitis B vaccine is recommended by the U.S. Public Health Service at a future date, such booster does(s) shall be made available in accordance with this section.

Post-exposure Evaluation ad Follow-up.

Following a report of an exposure incident, the employer shall make immediately available to the exposed employee a confidential medical evaluation and follow-up, including at least the following elements:

a. Documentation of the route(s) of exposure, ad the circumstances under which the exposure incident occurred;

b. Identification and documentation of the source individual, unless the employer can establish that identification is infeasible or prohibited by state or local law.

c. The source individual's blood shall be tested as soon as feasible and after consent if obtained in order t determine HBV and HIV infectivity. If consent cannot be obtained, the employer shall establish that

legally required consent cannot be obtained. When the source individual's consent is not required by law, the course individual's blood, if available, shall be tested and the results documented.

d. When the course individual is already known to be infected with HBV or HIV, testing for the source individual's known HBV or HIV status need not be repeated.

e. Results of the source individual's testing shall be made available to the exposed employee, and the employee shall be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.

f. Collection and testing of blood for HBV and HIV serological status; The exposed employee's blood shall be collected as soon as feasible ad tested after consent is obtained.

If the employee consents to baseline blood collection but does not give consent at that time for HIV serologic testing, the sample shall be preserved for at least 90 days. If, whining 90 days of the exposure incident, the employee elects to have the baseline sample tested, such testing shall be done as soon as feasible.

Post-exposure prophylaxis, when medically indicated, as recommended by the U.S. Public Health Service, Counseling ad Evaluation of reported illnesses.

8. Information and Training

The employer shall train each employee with occupational exposure in accordance with the requirements of this section. Such training must be provided at no cost to the employee and during work hours. The employer shall institute a training program ad ensure employee participation in the program.

The training program shall contain at a minimum the following elements:

a. An accessible copy of the regulatory text of this standard and an explanation f its contents.

b. A general explanation of the epidemiology of bloodborne diseases.

c. An explanation of the modes of transmission of bloodborne pathogens.

d. An explanation of the employer's exposure control plan and the means by which the employee can obtain a copy of the written plan.

e. An explanation of the appropriate methods for recognizing tasks ad other activities that may involve exposure to blood and other potentially infectious materials.

f. An explanation of the use and limitations of methods that will prevent or reduce exposure including appropriate engineering controls, work practices, ad personal protective equipment.

g. Information on the types, proper use, location, removal, handling, decontamination and disposal of personal protective equipment.

h. An explanation f the basis for selection of personal protective equipment.

i. Information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine and vaccination will be offered free of charge.

j. Information on the appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious materials.

k. An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available.

l. Information on the post-exposure evaluation and follow-up that the employer is required to provide for he employee following a exposure incident.

m. An explanation of the signs ad labels and/or color coding required by paragraph (e); and

n. An opportunity for interactive questions and answers with the person conducting the training session.

The person conducting the training shall be knowledgably I the subject matter covered by the elements contained in the training program as it relates to the workplace that the training will address.

9. Record Keeping

The employer shall establish and maintain an accurate record for each employee with occupational exposure, in accordance with 29CFR 1910.1020.

This record shall include:

a. The name and social security number of the employee.

b. A copy of the employee's hepatitis B vaccination status including the status of all the hepatitis B vaccinations and any medical records relative to the employee's ability to receive vaccination.

c. A copy of all results of examination, medical testing, ad follow-up procedures as required.

d. The employers copy of the healthcare professional's written opinion.

e. A copy of the information provided to the healthcare professional.

Confidentiality

The employer shall ensure that employee medical records required by paragraph (9) are kept confidential and not disclosed or reported without the employee's express written consent to ay person within or outside the workplace except as required by this section or as may be required by law.

The employer shall maintain the records for at least the duration of employment plus 30 years in accordance with 29 CFR 1910.1020.

APPENDIX A
Important Information About Hepatitis B and Hepatitis B Vaccine

What is Hepatitis B?

Hepatitis B is a contagious live disease that ranges in severity from a mild illness lasting a few weeks to a serious, lifelong illness. It results from infection with the hepatitis B virus. Hepatitis B can either be "acute" or "chronic".

Acute hepatitis B virus infection is a short-term illness that occurs within the first 6 months after someone is exposed to the hepatitis B virus. Acute infection can-but does not always lead to chronic infection.
Chronic hepatitis B virus infection is a long-term illness that occurs when the hepatitis B virus remains in a person's body.

Statistics

How common is acute hepatitis B in the United States?
In 2007, there were an estimated 4,,000 new hepatitis B virus infections in the United States. However, the official number of reported hepatitis B cases is much lower. Many people don't know they are infected or may not have symptoms and therefore never seek the attention of medical or public health officials.

Has the number of people in the United States with acute hepatitis B been decreasing?
Yes, rates of acute hepatitis B in the United States has declined by approximately 82% since 1990. At that time, routine hepatitis B vaccination of children has implemented and has dramatically decreased the rates of the disease in the United States, particularly among children.

How common is chronic hepatitis B in the United States?
In the United States, an estimated 800,000 to 1.4 million persons have chronic hepatitis B virus infection.

How common is chronic hepatitis B outside the United States?
Globally, chronic hepatitis B affects approximately 350 million people and contributes to an estimated 620,000 deaths worldwide each year.

Transmission/Exposure

How likely is it that acute hepatitis B will become chronic?
The likelihood depends upon the age at which someone becomes infected. The younger a person is when infected with hepatitis B virus, the greater his or her chance of developing chronic hepatitis B. Approximately 90% of infected infants will develop chronic infection. The risk goes down as a child gets older. Approximately 25%-50% of children infected between the ages of 1 and 5 years develop chronic hepatitis. The risk drops to 6%-10% when a person is infected over 5 years of age. Worldwide, the most people with chronic hepatitis B were infected at birth or during early childhood.

How is Hepatitis B spread?

Hepatitis B is spread when blood, seen or other body fluid infected with the hepatitis B virus enters the body of a person who is not infected. People can become infected with the virus during activities such as:

- Birth (spread from an infected mother to her baby during birth)
- Sex with an infected person
- Sharing needles, syringes or other drug injection equipment
- Sharing items such as razors or toothbrushes with an infected person
- Direct contact with the blood or open sores of an infected person
- Exposure to blood from needle sticks or other sharp instruments

Symptoms

Does acute hepatitis B cause symptoms?
Sometimes, although a majority of adults develop symptoms from acute hepatitis B virus infection, many young children do not. Adults and children over the age of 5 years are more likely to have symptoms. Seventy percent of adults will develop symptoms from the infection.

What are the symptoms of acute hepatitis B?

Symptoms of acute hepatitis B, if they appear, can include:

Fever	Fatigue	Loss of Appetite	Nausea	Vomiting
Abdominal pain	Dark urine	Clay colored bowel movements		Joint pain

Jaundice (yellow color in the skin or the eyes)

Treatment
How is acute hepatitis B Treated?

There is no medication available to treat acute hepatitis B. During this short-term infection, doctors usually recommend rest, adequate nutrition and fluids, although some people may need to be hospitalized.

How is chronic hepatitis B treated?

It depends; people with chronic hepatitis B virus infection should seek the care or consultation of a doctor with experience treating hepatitis B, This can include some internists or family medicine practitioners as well as specialists such as infectious disease physicians, gastroenterologists, or hepatologists (liver specialists). People with chronic hepatitis B should be monitored regularly for signs of liver disease and evaluated for possible treatment. Several medications have been approved for hepatitis B treatment, and new drugs are in development. However, not every person with chronic hepatitis B need to be on medication, and the drugs may cause side effects in some patients.

What can people with chronic hepatitis B do to take care of their liver?

People with Chronic hepatitis B should be monitored regularly by a doctor experienced in caring for people with hepatitis B. They should avoid alcohol because it can cause additional liver damage. They also should check with health professionals before taking any prescription pills, supplements, or over-the-counter, as these can potentially damage the liver.
Who should get vaccinated against hepatitis B?

Hepatitis B vaccination is recommended for:

All infants, starting with the first dose of hepatitis B vaccine at birth
All children and adolescents younger than 19 years old of age who have ot been vaccinated
People whose sex partners have hepatitis B
Sexually active persons who are not in a long-term, mutually monogamous relationship
Persons seeming evaluation or treatment for a sexually transmitted disease
Men who have sexual contact with other men
People who share needles, syringes or other drug-injection equipment
People who have close household contact with someone infected with the hepatitis B virus
Healthcare and public safety workers at risk of exposure to blood or blood-contaminated body fluids on the job
People with end-stage renal disease including pre-dialysis, hemodialysis, peritoneal dialysis ad home dialysis patients
Residents ad staff of facilities for developmentally disabled persons
Travelers to regions with moderate or high rates of hepatitis B
People with chronic liver disease
People with HIV infection
Anyone who wishes to be protected from hepatitis B virus infection

In order to reach individuals at risk for hepatitis B vaccination is also recommended for anyone in or seeking treatment from the following:

Sexually transmitted disease treatment facilities
HIV testing and treatment facilities
Facilities providing drug-abuse treatment and prevention services
Healthcare settings targeting services to injection drug users
Healthcare settings targeting services to men who have sex with men
Chronic hemodialysis facilities and end-stage renal disease programs
Institutions and nonresidential day care facilities for developmentally disabled persons

Is the hepatitis vaccine safe?

Yes, the hepatitis B vaccine is safe. Soreness at the injection sire is the most common die effect reported. As with any medication, there are very small risks that a serious problem could occur after getting the vaccine. However, the potential risks associated with hepatitis B are much greater than the risks the vaccine poses. Since the vaccine became available in 1982, more than 100 million people have received hepatitis B vaccine in the United States and no serious side effects have been reported.

Pregnancy and Hepatitis B

Are pregnant women tested for hepatitis B?

Yes. When a pregnant woman comes in for prenatal care, she will be given a series of routine blood tests including ne that checks for the presence of hepatitis B virus infection. This test is important because women infected with this virus can pass hepatitis B to their babies during birth. But this can be prevented by giving the infant HBIG and the first hepatitis B vaccine at birth, and then completing the series.

What if a pregnant woman has hepatitis B?

If a pregnant woman has hepatitis B, she can pass the infection to her baby during birth. But this can be prevented through a series of vaccinations and HBG for her baby beginning at birth. Without vaccination, babies born to women with hepatitis B virus infection can develop chronic infection, which can lead to serious health problems.

How does a baby get hepatitis B?

A baby can get hepatitis B from and infected mother during childbirth.

Can a baby be protected from getting hepatitis B from his or her mother during birth?

Yes, almost all cases of hepatitis B can be prevented if a baby born to an infected woman receives the necessary sots at the recommended times. The infant should receive a shot called hepatitis B immune globulin (HBIG) and the first dose of hepatitis B vaccine within 12 hours of birth. Two or 3 additional shots of vaccine are needed over the next 1-15 months to help prevent hepatitis B. The timing and total number of shots will be influenced by several factors, including the type of vaccine and the baby's age and weight. In addition, experts recommend that the baby be tested after completion of the vaccine series to make sure he or she is protected from the disease. To best protect your baby, follow the advice of his or her doctor.

Do babies need the hepatitis B vaccine even if a pregnant woman des not have hepatitis B?

Yes. The hepatitis B vaccine is recommended for all infants. CDC recommends that the infant get the first shot before leaving the hospital.

Why is the hepatitis B vaccine recommended for all babies?

Hepatitis B vaccine is recommended for all babies so that they will be protected from a serious but preventable disease. Babies and young children are at much greater risk for developing a chronic infection if infected, but the vaccine ca prevent this.

APPENDIX B

Hepatitis B Vaccination Documentation Form

I have read or have had explained to me the information n this form about hepatitis B and hepatitis B vaccine. I have had a chance to ask questions which were answered to my satisfaction. I believe I understand the benefits and risks of the hepatitis B vaccine ad request that it be given to me or to the person named below for whom I am authorized to make request.

Employees Name (Print)

_____ _____ _____

Last Name First Name MI

Address

_____ _____ _____ _____

Number City State Zip Code

Social Security Number: _____-_____-_____ College Phone #:_____

Position: _____

_____ _____

Signature of person receiving vaccine Date

Series	Date	Received By	Administered By	Lot Number
Inoculation 1				
Inoculation 2				
Inoculation 3				

Note: Maintain this record for the duration of employment plus 30 years

APPENDIX C

SEE NEXT PAGE

Refusal of Hepatitis B Vaccination Form

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

Employees Name (Print)

_____	_____	_____
Last Name	First Name	MI

Address

_____	_____	_____	_____
Number	City	State	Zip Code

Social Security Number: _____-_____-_____ College Phone #:_____

Position: _____

_____	_____
Signature of person receiving vaccine	Date

_____	_____
Witness	Date

Note: Maintain this record for the duration of employment plus 30 years

FIRE PREVENTION PLAN

1. OBJECTIVE

The purpose of this Fire Prevention Plan is to eliminate the causes of fire, prevent loss of life and property by fire, and to comply with the Occupational Safety and Health Administration's (OSHA) standard on fire prevention, 29 CFR 1910.39. It provides employees with information and guidelines that will assist them in recognizing, reporting ad controlling fire hazards.

2. BACKGROUND

LCC is committed to minimizing the threat of fire to employees, visitors, and protery. LCC complies with all applicable laws, regulations, codes, and good practices, pertaining to fire prevention. LCC
S separate Emergency Action Plan spells out the procedures for responding to fires. This Fire prevention Plan serves to reduce the risk of fires at Luna Community College I the following ways:

a. identifies materials that are potential fire hazards and their proper handling and storage procedures
b. distinguishes potential ignition sources and the proper control procedures of those materials
c. describes fire protection equipment and/or systems used to control fire hazards
d. identifies persons responsible for maintaining the equipment and systems installed to prevent or control ignition of fires
e. identifies persons responsible for the control and accumulation of flammable or combustible material
f. describes good housekeeping procedures necessary to ensure the control of accumulated flammable and combustible waste material and residues to avoid a fire emergency and
g. provide training to employees with regard to fire hazards to which they may be exposed

3. ASSIGNMENT OF RESPONSIBILITY

Fire safety is everyone's responsibility. All employees should know how to prevent and respond to fires and are responsible for adhering to company policy regarding fire emergencies.

a. Management

Management will provide adequate controls to provide a safe workplace and will provide adequate resources and training to its employees to encourage fire prevention and the safest possible response in the event of a fire emergency.

b. Plan Administrator

The Life/Safety Coordinator shall manage the Fire Prevention Pan for Luna Community College and shall maintain all records pertaining to the plan. The Plan Administrator shall also:

1. Develop and administer the LCC fire prevention training program
2. Ensure that fire control equipment and systems are properly maintained
3. Control fuel source hazards
4. Conduct fire risk surveys (See Appendix A) and make recommendations

c. Supervisors

Supervisors are responsible for ensuring that employees receive appropriate fire safety training and for notifying the Life/Safety Coordinator when changes in operation increase the risk of fire. Supervisors are also responsible for enforcing fire prevention and protection policies.

d. Employees

All employees shall:

1. Complete all required training before working without supervision
2. Conduct operations safely to limit the risk of fire
3. Report potential fire hazards to their supervisors
4. Follow fire emergency procedures

4. PLAN IMPLEMENTATION

GOOD HOUSEKEEPING'

'To limit the risk of fires, employees shall take the following precautions:

1. Minimize the storage of combustible materials
2. Make sure that doors, hallways, stairs, and other exit routes are kept free of obstructions
3. Dispose of combustible waste in covered, airtight, metal containers
4. Use and store flammable materials in well-ventilate areas away from ignition sources
5. Use only nonflammable cleaning products
6. Keep incompatible (i.e. chemically reactive) substances away from each other
7. Perform "hot work" (i.e. welding or working with an open flame or other ignition sources) in controlled and well-ventilated areas.
8. Keep equipment I good working order (i.e. inspect electrical wiring and appliances regularly and keep motors and machine tools free of dust and grease
9. Ensure that heating units are safeguarded
10. Report all gas leaks immediately. Maintenance Personnel shall ensure that all gas leaks are repaired immediately upon notification
11. Repair and clean up flammable liquid leaks immediately
12. Keep work areas free of dust, lint, sawdust, scraps, and similar material
13. Do not rely on extension cords if wiring improvements are needed and take care not to overload circuits with multiple pieces of equipment
14. Turn off electrical equipment when not in use

Maintenance

The Life/Safety Coordinator, Maintenance Tech and Electrician will ensure that equipment is maintained according to manufacturer's specifications. Luna Community College will also comply with requirements of the National Fire Protection Association (NFPA) codes for specific equipment. Only properly trained individual shall perform maintenance work.

The following equipment is subject to the maintenance, inspections and testing procedures:

1. equipment installed to detect fuel leaks, control heating, and control pressurized systems
2. portable fire extinguishers, automatic sprinkler systems, and fixed extinguishing systems
3. detection systems for smoke, heat, or flame
4. fire alarm systems
5. emergency backup systems and the equipment they support

5. TYPES OF HAZARDS

The following sections address the major workplace fire hazards at Luna Community College facilities and the procedures for controlling the hazards.

A. Electrical Fire Hazards

Electrical system failures and the misuse of electrical equipment are leading causes of workplace fires. Fires can result from loose ground connections wiring with frayed insulation, or overloaded fuses, circuits, motors, or outlets.

To prevent electrical fires, employees shall:

a. Make sure that worn wires are replaced
b. Use only appropriate rated fuses
c. Never use extension cords as substitutes for wiring improvements
d. Use only approved extension cords (i.e. those with the Underwriters Laboratory (UL) or Factory Mutual (FM) label).
e. Check wiring in hazardous locations where the risk of fire is especially high.
f. Check electrical equipment to ensure that it is either properly grounded or double insulated
g. Ensure adequate spacing while performing maintenance

B. Portable Heaters

All portable heaters shall be approved by Matt Cordova, Facilities Director. Portable electrical heaters shall have tip-over protection that automatically shuts off the unit when it is tipped over. There shall always be adequate clearance between the heater and combustible furnishings or other materials.

C. Office Fire Hazards

Fires in offices have become more likely because of the increased use of electrical equipment, such as computers and fax machines. TO prevent office fires, employees shall:

a. Avoid overloading circuits with office equipment
b. Turn off nonessential electrical equipment at the end of each workday
c. Keep storage areas clear of rubbish
d. Ensure that extension cords are not placed under carpets

e. Ensure that trash and paper set aside for recycling is not allowed to accumulate

D. Cutting, Welding, and open Flame Work

Trades Director/Faculty will ensure the following:

a. Cutting and welding are done by authorized personnel in designated cutting and welding areas whenever possible
b. Adequate ventilation is provided
c. Torches, regulators, pressure-reducing valves, and manifolds are UL listed or FM approved
d. Oxygen-fuel gas systems are equipped with listed and/or approve backflow valves and pressure-relief devices
e. Cutters, welders, and helpers are wearing eye protection and protective clothing as appropriate
f. Cutting or welding is prohibited in sprinklered areas while sprinkler protection is out of service
g. Cutting or welding is prohibited in areas where explosive atmospheres of gases, vapors, or dusts could develop from residues or accumulations in confined spaces
h. Confined spaces such as tanks are tested to ensure that the atmosphere is not over ten percent of the lower flammable limit before cutting or welding in or on the tank
i. Small tanks, piping or containers that cannot be entered are cleaned, purged, and tested before cutting or welding on them begins
j. Fire watch has been established

E. Flammable and Combustible Materials

The Life/Safety Coordinator shall regularly evaluate the presence of combustible materials at Luna Community College. (Appendix C)

Certain types of substances can ignite at relatively low temperatures or pose a risk of catastrophic explosion if ignited. Such substances obviously require special care and handling.

1. Class A combustibles

These include common combustible materials (wood, paper, cloth, rubber and plastics) that can act as fuel and are found in non-specified areas such as offices.

To handle Class A combustible's safely:

a. Dispose of waste daily
b. Keep trash in metal-lined receptacles with tight-fitting covers (metal wastebaskets that are emptied everyday do not need to be covered
c. Keep work areas clean and free of fuel paths that could allow a fire to spread
d. Keep combustibles away from accidental ignition sources, sch as hot plates, soldering irons, and other heart-or spark-producing devices
e. Store paper stock in metal cabinets
f. Store rags in metal bins with self-closing lids
g. Do not order excessive amounts of combustibles

h. Make frequent inspections to anticipate fires before they start

Water and multipurpose dry chemical (ABC) are approved fire extinguishing agents for Class A combustibles.

2. Class B combustibles

These include flammable and combustible liquids (oils, greases, tars, oil-bases paints, and lacquers) flammable gasses, and flammable aerosols.

To handle Class B combustibles safely:

a. Use only approved pumps, taking suction from the top, to dispense liquids from tanks, drums, barrels, or similar containers (or use approve self-closing valves or faucets)
b. Do not dispense Class B flammable liquids into containers unless the nozzle and container are electrically interconnected by contact or by a bonding wire. Either the tank or container must be grounded.
c. Store, handle and use Class B combustibles only in approved locations where vapors are prevented from reaching ignition sources such as heating or electrical equipment, open flames, or mechanical or electrical sparks.
d. Do not use a flammable liquid as a cleaning agent inside a building (the o exception is a closed machine approved for cleaning with flammable liquids)
e. Do not use, handle, or store Class B combustibles near exits, stairs or a other areas normally used as exits.
f. Do not weld, cut, grind, or use unsafe electrical appliances or equipment near Class B combustibles.
g. Do not generate heat, allow an open flame, or smoke near Class B combustibles.
h. Know the location and how to use the nearest portable fire extinguisher rated for Class B fire.

Water should not be used to extinguish Class B fires caused by flammable liquids. Water can cause the burning liquid to spread, make the fire worse. To extinguish a fire caused by flammable liquids, exclude the air around the burning liquid.
The following fire extinguishing agents are approved for Class B combustibles: carbon dioxide, multi-purpose dry chemical (ABC).

3. Class C combustibles
Fires that involve energized electrical equipment.

4. Class D combustibles
Fires in combustible metals such as magnesium, titanium, zirconium, sodium, lithium and potassium.

5. Class K combustibles
Fires in cooking appliances that involve combustible cooking media such as vegetable and animal oils and fat.

F. SMOKING

Smoking is prohibited in all Luna Community College buildings. Certain outdoor areas may also be designated as no smoking areas, The areas in which smoking is prohibited outdoors are identified by O SMOKING signs.

TRAINING

The Life/Safety Coordinator shall prevent basic fire prevention training to all employees up employment and shall maintain documentation for the training, which includes:

1. review of 29 CFR 1910.38 including how it can be accessed
2. this Fore Prevention Plan including how it can be accessed
3. good housekeeping practices
4. proper response and notification in the event of a fire
5. instructions on the use of portable fire extinguishers (as determined by company policy in the Emergency Action Plan) and recognition of potential fire hazards

Supervisors shall train employees about the fire hazards associated with the specific materials and processes to which they are exposed and will maintain documentation of the training. Employees will receive this training:

1. at their initial assignment
2. annually; and
3. when changes in work processes necessitate additional training

PROGRAM REVIEW

Life/Safety Coordinator shall review this Fire Prevention Plan at least annually for necessary changes.

Appendix A
General Fire Prevention Checklist

Use this checklist to ensure fire prevention measures conform to the general fire prevention requirements found in OSHA standards.

☐ YES ☐ NO Is the local fire department acquainted with yir facility, its location and specific hazard?

☐ YES ☐ NO If you have a fire alarm system, it is tested at last annually?

☐ YES ☐ NO If you have interior standpipes and valves, are they inspected regularly?

☐ YES ☐ NO If you have private fire hydrants, are they on a routine preventive maintenance schedule and flushed at least once a year?

☐ YES ☐ NO Are fire doors and shutters in good operating condition?

☐ YES ☐ NO Are fire doors and shutters unobstructed and protected against obstructions, including their counterweights?

☐ YES ☐ NO Are automatic sprinkler system water control valves, air pressure and water pressure checked weekly or periodically?

☐ YES ☐ NO Has responsibility for the maintenance of automatic sprinkler systems been assigned to an employee or contractor?

☐ YES ☐ NO Are sprinkler heads protected by metal guards?

☐ YES ☐ NO Is proper clearance maintained below sprinkler heads?

☐ YES ☐ NO Are portable fore extinguishers mounted in readily accessible locations?

☐ YES ☐ NO Are fire extinguishers recharged regularly with the recharge date noted on an inspection tag?

☐ YES ☐ NO Are employees periodically instructed in the use of extinguishers and fire protection procedures?

NOTE: Use of fire extinguishers is based on company policy regarding employee fire fighting in your Emergency Action Plan and local fire code)

Completed by: _____ Date: _____

Appendix B
Exits Checklist

☐ YES ☐ NO Is each exit marked with an exit sign and illuminated by reliable light source?

☐ YES ☐ NO Are the direction to exits, when not immediately apparent, marked with visible signs?

☐ YES ☐ NO Are doors, passageways or stairways that are neither exits not access to exits and which could be mistaken for exits, marked “NOT AN EXIT” or other appropriate marking?

☐ YES ☐ NO Are exit doors side hinged?

☐ YES ☐ NO Are all exits kept free of obstructions?

☐ YES ☐ NO Are there at least two exit routes provided from elevated platforms, pits or rooms where the absence of a second exit would increase the risk of injury from hot, poisonous, corrosive, suffocating, flammable or explosive substances?

☐ YES ☐ NO Is the number of exits from each floor of a building and from the building itself appropriate for the building occupancy? (NOTE: Do not count revolving, sliding, or overhead doors when evaluation whether there are sufficient exits)

☐ YES ☐ NO Are exit stairways that are required to be separated form other parts of a building enclosed by at least one-hour fire resistant walls (or at least two-hou fire resistant walls in buildings over four stories high)?

☐ YES ☐ NO Are the slopes of ramps used as part f emergency building exits limited to one foor vertical and 12 foot horizontal?

☐ YES ☐ NO Are glass doors or storm doors full tempered, and do they meet the safety requirements for human impact?

☐ YES ☐ NO Can exit doors be opened from the direction of exit travel without the use of a key or any specific knowledge or effort?

☐ YES ☐ NO Are doors on cold storage rooms provided with an inside release mechanism that will release the latch and open the door even if it’s padlocked or otherwise?

☐ YES ☐ NO Where exit doors directly onto any street, alley or other area where vehicles may be operated, are adequate barriers and warnings provided prevent employees from stepping into the path of traffic?

☐ YES ☐ NO Are doors that swing in both directions and are located between rooms where there is frequent traffic equipped with glass viewing panels?

Completed by: _____ Date: _____

Appendix C
Flammable and Combustible Material Checklist

Use this checklist to evaluate LCC's compliance with OSHA's standard o flammable combustible materials:

☐ YES ☐ NO Are combustible scrap, debris and waste material such as oily rags stored n covered metal receptacles and removed from the worksite promptly?

☐ YES ☐ NO Are Approved containers ad tanks used for the storage and handling of flammable and combustible liquids?

☐ YES ☐ NO Are all connections on drums ad combustible liquid piping vapor and liquid tight?

☐ YES ☐ NO Are metal drums of flammable liquids electrically grounded during dispensing?

☐ YES ☐ NO Do storage rooms for flammable and combustible liquids have appropriate ventilation systems?

☐ YES ☐ NO Are NO SMOKING signs posted on liquified petroleum gas tanks?

☐ YES ☐ NO Are all solvent wastes ad flammable liquids kept I fire resistant covered containers until they are removed from the worksite?

☐ YES ☐ NO Is vacuuming used whenever possible rather than blowing or sweeping combustible dust?

☐ YES ☐ NO Are fuel gas cylinders and oxygen cylinders separated b distance or fire-resistant barriers while in storage?

☐ YES ☐ NO Are fire extinguishers appropriate for the materials in the areas where they are mounted?

☐ YES ☐ NO Are appropriate fire extinguishers mounted within 75 feet of outside areas containing flammable liquids and within 10 feet of ay inside storage area for such materials?

☐ YES ☐ NO Are extinguishers free from obstructions or blockage?

☐ YES ☐ NO Are all extinguishers serviced, maintained and tagged at least once a year?

☐ YES ☐ NO Are all extinguishers fully charged and in their designated places?

☐ YES ☐ NO Where sprinkler systems are permanently installed, are the nozzle heads directed or arranged so that water will not be sprayed into operating electrical switchboards and equipment?

☐ YES ☐ NO Are NO SMOKING signs posted in areas where flammable or combustible materials are used or stored?

☐ YES ☐ NO Are safety cans utilized for dispensing flammable or combustible liquids at the point of use?

☐ YES ☐ NO Are all spills of flammable or combustible liquids clean up properly?

☐ YES ☐ NO Are storage tanks adequately vented to prevent the development of an excessive vacuum or pressure that could result from filling, emptying or temperature change?

NOTE: Use of fire extinguishers is based on company policy regarding employee firefighting in your Emergency Action Plan and local fire code)

Completed by: _____ Date: _____

HAZARD COMMUNICATION PLAN

1. Introduction and Purpose

The primary goal of the standard is to assure employees and employers are adequately informed of chemical hazards in the workplace and are provide with information on how to protect themselves while using hazardous chemicals.

The main objective of the Luna Community College (LCC) Hazard Communications Plan (HCP) is to minimize employee exposure to hazardous chemicals in the workplace. The HCP ensure that employees are informed of the potential hazards in their workplace ad also the appropriate means to protect themselves. When chemicals are used by LCC employees in the performance of their duties, these activities shall be conducted in accordance with the provisions of at the HCP. The written HCP shall be readily available to all employees, employee representatives and appropriate regulatory agencies upon request.

2. Scope and Application

LCC is classified as a non-manufacturing employer where employees use a variety of hazardous chemicals (in smaller quantities compared to industry) during their employment, therefore, the Hazard Communication Standard ("Employee Right-To-Know") applies to appropriate LCC facilities. It is the responsibility of LCC to provide a safe workplace for its employees.

The LCC Hazard Communication Program covers all use of hazardous materials on campus except the following:

Laboratory Reagents
Hazardous waste (for procedures applicable to hazardous waste, refer to the LCC Hazardous Waste Management Plan)
Biological Hazards
Ionizing and nonionizing radiation
Asbestos
Tobacco or Tabacco products
Wood or wood products
Foods, drugs, or cosmetics intended for personal consumption by employees while in the workplace
Pesticides; or
Work operations where employees only handle substances in seal containers that are not opened

3. Responsibilities

Life/Safety Coordinator

The Department of Life/Safety is charged with the overall responsibility to develop ad implement a Hazard Communication Program. The HCP ensure regulatory compliance and provides employees with the information and training needed to protect themselves while using hazardous chemicals.

The Life/Safety Coordinator will:

Maintain training records

Report all accidents ad injuries to Human Resources
Maintain all accident and injury reports
Maintain master MSDS inventory for the Department
Review accident and injury reports and provide recommendations for improvement

Directors and Supervisors

Establish and implement a department information and training program
Conduct annual review and evaluation to determine the effectiveness of the HCP

Employees

Know the location and use the information provided in the MSDS
Ensure proper labeling of hazardous chemicals
Attend initial ad follow-up hazard communication training as required
Report potential hazards, accidents and near misses to supervise immediately
Assist supervisor in implementing recommendations for improving safety and
Provide feedback on the effectiveness of the HCP

Vendors, Contractors ad Visitors

Understand potential hazards in the area they are working or visiting at LCC
Have all necessary personal protective equipment provided for them by the department or by contractor's management
Contractors must inform the department of any hazardous chemical(s) they may be using during the performance of their work

4. Identification of Hazardous Materials

The responsibility for determining whether a chemical is hazardous lies with the chemical manufacturer or importer of a chemical. End-users and/or supervisors may rely on the evaluation received from these suppliers, in the form of MSDSs and warning labels. A chemical inventory shall include a list of chemicals, including compressed gas cylinders, used in the workplace covered by the HCP and can be prepared by documenting the names of chemicals that have a warning label indicating a potential hazard (e.g., flammable or corrosive). In addition to chemicals in containers, other substances generated in work operations such as welding fumes and some dusts shall also be listed in the inventory.

All identified chemicals must have a corresponding MSDS available in a binder. The binder must be identified with the acronym MSDS on the spine and be located in an area accessible to all employees at all times regardless of work shift.

Inventory of Hazardous Materials

Departments that employ individuals who may be exposed to hazardous chemicals in the course of their job duties shall prepare a chemical inventory. The designated department safety coordinator (supervisor)

shall maintain a current chemical inventory. A copy of the prepared chemical inventory shall be forwarded to the Life/Safety Coordinator at least annually. Life/Safety shall compile and maintain the Master Chemical Inventory for LCC. An example hazardous chemical inventory form can be found as Appendix A.

In order to maintain a accurate inventory, all newly introduced and discontinued chemical shall be noted on the department chemical inventory and the information shall be forwarded to the Life/Safety Coordinator. In addition, to adequately track chemical use and storage, a hazardous chemical survey form should be competed for each chemical. An example ca be found as Appendix B.

Chemical inventories shall be placed with a copy of the written Hazard Communication Plan and stored in the Material Safety Data Sheet binder(s). This information should always be accessible to all employees .

The following list identifies, but is not limited to, some types of potentially hazardous chemicals that may be present in the workplace:

Acids	Adhesives	Aerosols	Battery Fluids
Bleach	Catalysts	Caustics	Cleaning Agents
Coatings	Compresses gases	Degreasing Agents	Dusts
Etching Agents	Flammables	Foaming Resins	Fungicides
Gasoline	Glues	Greases	Herbicides
Industrial Oils	Inks	Insecticides	Janitorial Supplies
Kerosene	Lacquers	Lye	Paints
Pesticides	Plastics	Process Chemicals	Resins
Sealers	Shellacs	Solders	Solvents
Surfactants	Thinners	Varnishes	
Water Treatment Chemicals			

5. Labels and Other Warnings

Department supervisors are responsible for identifying hazardous chemicals in the workplace and effectively communicating information available from the manufacturer's MSDSs and labels or other cautionary warning to employees.

All hazardous chemical containers in the workplace must clearly identify, in English, the hazardous contents of the container. The supervisor has the responsibility to ensure that all hazardous chemical container labels are affixed, legible and contain the appropriate information.

All portable container(s) shall use the Hazardous Materials information System (HMIS) label or manufacturers label of the appropriate size for the container. Supervisors will ensure that appropriate labels are available. IF a manufacturer's label is unavailable, the appropriate information should be copied from the MSDS to a blank HMIS label (refer to Appendix C). If it is not practical to label a container, the proper chemical hazard information may be placed on a sign ear the container, which is clearly visible to employees.

Containers of hazardous chemicals at LCC must be received with a label that provides the appropriate identification and the hazards associated with the chemical. The label is to be supplied by the

manufacturer, importer or distributor of the chemical. If the container arrives without a label, an HMIS label will be affixed to the container as outlined:

Identify of chemicals (chemical or common name on the Material Safety Data Sheet
Name and address of the chemical manufacturer or distributor
Appropriate hazard warning (Designated by the chemical manufacturer or distributor

Labels will not be removed unless the container is immediately re-labeled or the chemical in the container is emptied, cleaned, and/or a new type of chemical is placed in the container, and the chemical container re-labeled with the identity of the new chemical.

The HMIS labeling system operates on the same principle as the NFPA diamond. Blue indicates a health hazard, red indicates flammability, yellow indicates reactivity and special information (such as what personal protective equipment to wear) will be provided in the white section. IT also uses a numerical system from 0-4 to indicate the severity of the hazard. Refer to the chart in Appendix C as a reference.

6. Material Safety Data Sheets

Chemical manufacturers and distributors are required by OSHA to provide Material Safety Data Sheets (MSDS) to consumers. An MSDS is provided to ensure the end-user of chemical products are informed of the hazards associated with the se of the chemical and what safety precautions should be utilized. The MSDS ma be used for several chemicals if they have similar hazards ad contents. Updated or new MSDSs will be distributed immediately upon receipt.

Each department must maintain a complete and accurate MSDS for each chemical used in the workplace upon purchase of a chemical. When new and significant information becomes available concerning the hazards of a chemical or improved method of protection for employees, the chemical manufacturer, importers or distributors must provide an MSDS with the updated information with the next shipment or within three months to the end-users.

IF the manufacturers, importers or distributors fail to send an MSDS with a shipment labeled as a hazardous chemical, the department must obtain one from the chemical manufacturer, importer or distributor as soon as possible. Similarly, if the MSDS is incomplete or unclear, the department should contact the manufacturer, importer or distributor to get clarification or obtain the missing information (see Appendix D for sample letters requesting an MSDS, or additional information for an MSDS). No chemical shall be used by any LCC employee unless a current MSDS is available.

MSDSs will usually be made up of at least 10 sections if they comply with the voluntary American National Standards Institute (ANSI) standard Z400.1, with each section describing a specific detail about the product. There may be up to 6 additional sections if information about a product for these sections is available. (Note: Currently there is no mandated standard format for an MSDS; the format may vary depending on the manufacturer, importer, or distributor.

Chemical product and company identification
Composition and/or information on hazardous ingredients
Hazards identification, including emergency overview
First aid measures

Fire-fighting measures
Accidental release measures
Handling and storage
Exposure controls and personal protection
Physical and chemical properties
Stability and reactivity

Additional sections may include information on toxicological, ecological, transport, disposal and regulatory information as well as any other information ot covered in the above mentioned sections.

An MSDS binder will be in a designated work area. It is recommended that a brightly colored (red) binder with the acronym MSDS on the spine be used. All employees shall be informed of the location of the binder. In addition, the binder will always be readily available to all employees regardless of their work shift. The Department Supervisor will forward new and updated MSDSs to the area Director. The Supervisor will request additional information f the MSDS is unclear. The supervisor will maintain the MSDS in alphabetical order. IF the MSDS replaces a older edition, the replacement will be kept in the back of the binder or forward it to the Department Supervisor to file in an archive MSDS binder.

Copies of the MSDS will be made available for ay designated representative of the employee, or OSHA officer upon their request. The safety coordinator and/or supervisor will be notified if a non-employee requests a copy of the MSDS.

Maintenance of Material Safety Data Sheets

The Department Director will maintain a department MSDS master chemical file. Upon receipt of a new MSDS, the Supervisor will update the master file. The College Life/Safety Coordinator will assist in performing an annual MSDS audit to ensure MSDSs for all chemicals listed in the chemical inventory are available in the workplace.

Supervisors will maintain the MSDS file and ensure the MSDS file is available for all employees to review at any time, all new MSDS received are filed, ad that employees are aware of any new chemical introduced to the workplace. Supervisors will notify the Department Director if a listed chemical is no longer used or stored and will archive the MSDS from the file and update the chemical inventory.

Resources for Obtaining MSDSs
MSDSs ca be obtained by contacting the chemical distributor director or via websites.

7. Employee Information and Training

Deparrments shall have a written training and information program for all employees. Employee training shall be provided when employees are initially hired and when a ew chemical hazard is introduced into the workplace. The workplace supervisor wll ensure that employees are trained in the specific topics covered in the HCP and rovide further training relative to th specific hazardous chemicals emloyees will use in the performance of their duties.

At a minimum, employees shall be informed of:

Requirements of OSHA's Hazard Communication Standard

The physical and heal hazards of chemical used in their workplace

Methods and observations that may be used to detect the presence or release of a hazardous chemical in the workplace

How to adequately protect themselves to minimize their exposure

Location of the chemical inventory and MSDS binder in the workplace

Details of LCC's HCP, including an explanation of the labeling system and the MSDSs and how employees can obtain and use the appropriate hazard information and location and availability of the written HCP

8. Trade Secrets

The chemical manufacturer, importer or employer may withhold the specific chemical identity including the chemical name and other specific identification of a hazardous chemical, form the material safety data sheet provided that:

The claim that the information withheld is a trade secret can be supported

Information contained in the MSDS concerning the properties ad effects of the hazardous chemical is disclosed.

The MSDS indicates that the specific chemical identify is being withheld as a trade secret; and

The specific representatives in accordance in accordance with the applicable provisions of this paragraph.

9. Emergency Procedures

Each department must develop emergency procedures specific to their operation and all affected employees must be aware of these procedures. This plan should include (but not limited to) actions or contingencies for:

Evacuation due to fires, chemical spills, and other situations

First Aid

Shut down lock out during evacuations and

Location of emergency equipment (fire extinguishers, fire alarm pull stations, showers, eyewashes, etc)

Faculty, staff and student who discover or are involved in a hazardous chemical emergency are responsible for taking appropriate action to protect themselves and the college community by notifying the appropriate authorities and following established protocol.

10. Accident Reporting

Employees shall report accidents and injuries to their supervisor immediately. Supervisors shall submit a report to Human Resources for any accident, injury or ear miss associated with the employees' use of hazardous chemicals. All employees will be free from ay reprisals for reporting accidents. Accident

reporting will assist Human Resources in providing corrective procedures to avoid a recurrence of the accident.

11. Program Evaluation

A program evaluation shall be conducted annually. Program evaluation will be based ipon audit, accident, injury, inspection reports, and training records.

12. Record Keeping

Mandated documentation and records shall be maintained to demonstrate compliance with the Hazard Communication Standard, 29 CFR 1910.1200. Human Resources, individual departments, supervisors and safety coordinators shall maintain the following records required by the standard:

Chemical Inventory
Material Safety Data Sheets and
Employee Training Records

Records shall be made available to employees and/or their representatives.

Appendix A

Hazardous Chemical Inventory Form

Department: _____

Building: _____ Room: _____

Completed By: _____ Date: _____

Chemical Product Name	Quantity	MSDS On-site Y or N	MSDS Forwarded to Dpt Coordinator Y or N

Appendix B
Hazardous Chemical Survey Form

Department:_____

Supervisor/Contact: _____

Telephone:_____

Chemical Product Location: _____

Survey Date: _____

Chemical Product Information

Chemical Product Name: _____

Stock Number: _____

Labeled as:

Flammable Yes No Combustible Yes No Corrosive Yes No Toxic Yes No

Carcinogens Yes No

Other: _____

Quantity in Stock:

Unit of measure: _____ Minimum Amount: _____Maximum Amount: _____

MSDS available on site: YES NO

Vendor Information

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____

Manufacturer Information

Name: _____

Address: _____

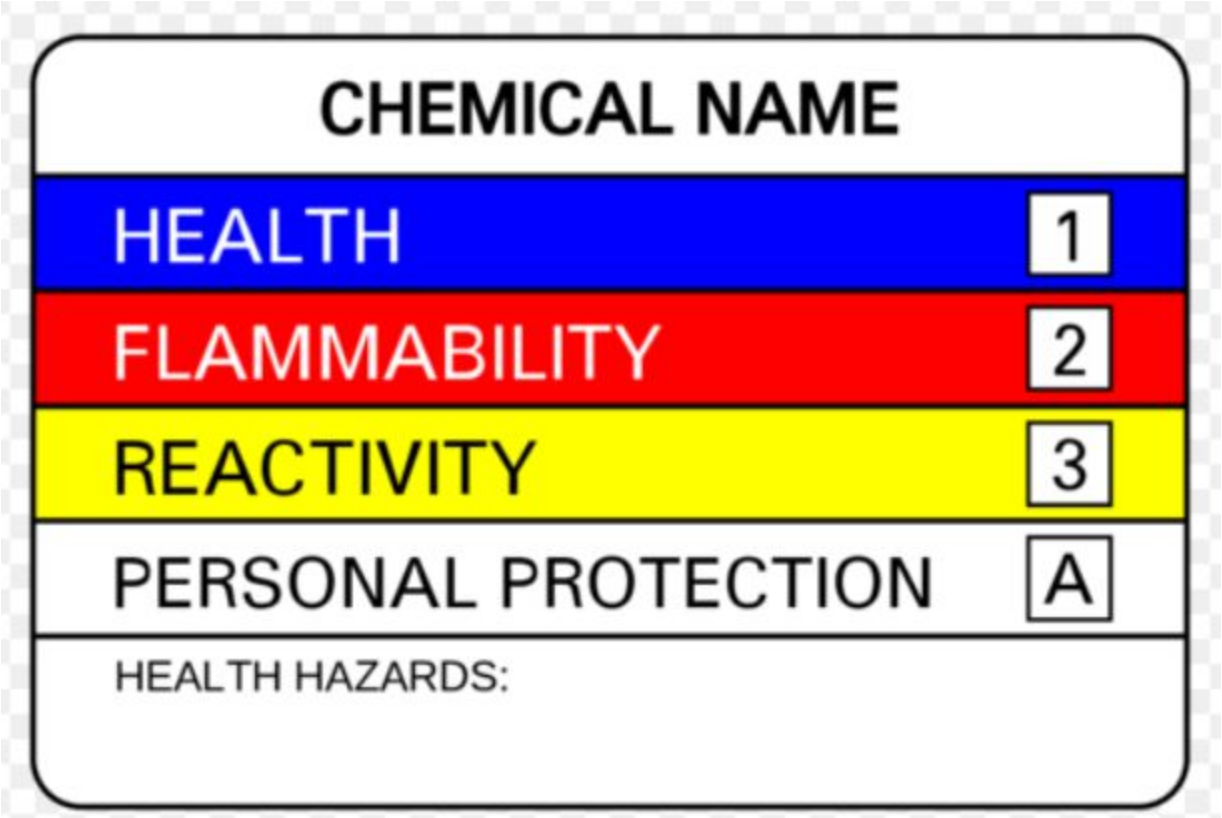
City: _____ State: _____ Zip Code: _____

Telephone: _____

Appendix C

HMIS Labeling System

Example of the HMIS Label



Blue (Health)

The Health section conveys the health hazards of the material. In the latest version of HMIS, the Health bar has two spaces, one for an asterisk and one for a numeric hazard rating. If present, the asterisk signifies a chronic health hazard, meaning that long-term exposure to the material could cause a health problem such as emphysema or kidney damage. According to NPCA, the numeric hazard assessment procedure differs from that used by NFPA.

- **4.** Life-threatening, major or permanent damage may result from single or repeated overexposures (e.g., hydrogen cyanide).
- **3.** Major injury likely unless prompt action is taken and medical treatment is given.
- **2.** Temporary or minor injury may occur (e.g., diethyl ether).
- **1.** Irritation or minor reversible injury possible.
- **0.** No significant risk to health.

Red (Flammability)

For HMIS I and II, the criteria used to assign numeric values (0 = low hazard to 4 = high hazard) are identical to those used by NFPA. In other words, in this category, HMIS I & II are identical

to NFPA. For HMIS III, the flammability criteria are defined according to OSHA standards (which add elevated flammability ratings for aerosols).[5] (HMIS II descriptions, excluding the new aerosol criteria, are shown below)

- **4.** Flammable gases, or very volatile flammable liquids with flash points below 73 °F (23 °C), and boiling points below 100 °F (38 °C). Materials may ignite spontaneously with air (e.g., propane).
- **3.** Materials capable of ignition under almost all normal temperature conditions. Includes flammable liquids with flash points below 73 °F (23 °C) and boiling points above 100 °F (38 °C), as well as liquids with flash points between 73 °F and 100 °F.
- **2.** Materials which must be moderately heated or exposed to high ambient temperatures before ignition will occur. Includes liquids having a flash point at or above 100 °F (38 °C) but below 200 °F (93 °C) (e.g., diesel fuel).
- **1.** Materials that must be preheated before ignition will occur. Includes liquids, solids and semi solids having a flash point above 200 °F (93 °C) (e.g., canola oil).
- **0.** Materials that will not burn (e.g., Water).

Yellow/Orange (Reactivity/Physical Hazard)

Reactivity hazards are assessed using the OSHA criterion of physical hazard. Seven such hazard classes are recognized: Water Reactives, Organic Peroxides, Explosives, Compressed gases, Pyrophoric materials, Oxidizers, and Unstable Reactives. The numerical ratings are very similar to NFPA's yellow "Reactivity/Instability" rating according to the publicly available data, which is limited to "hazard statements" intended to accompany each rating (as shown below).[6] However, HMIS is a proprietary system, and without referring to the actual criteria for each rating, it is not clear how similar they are.

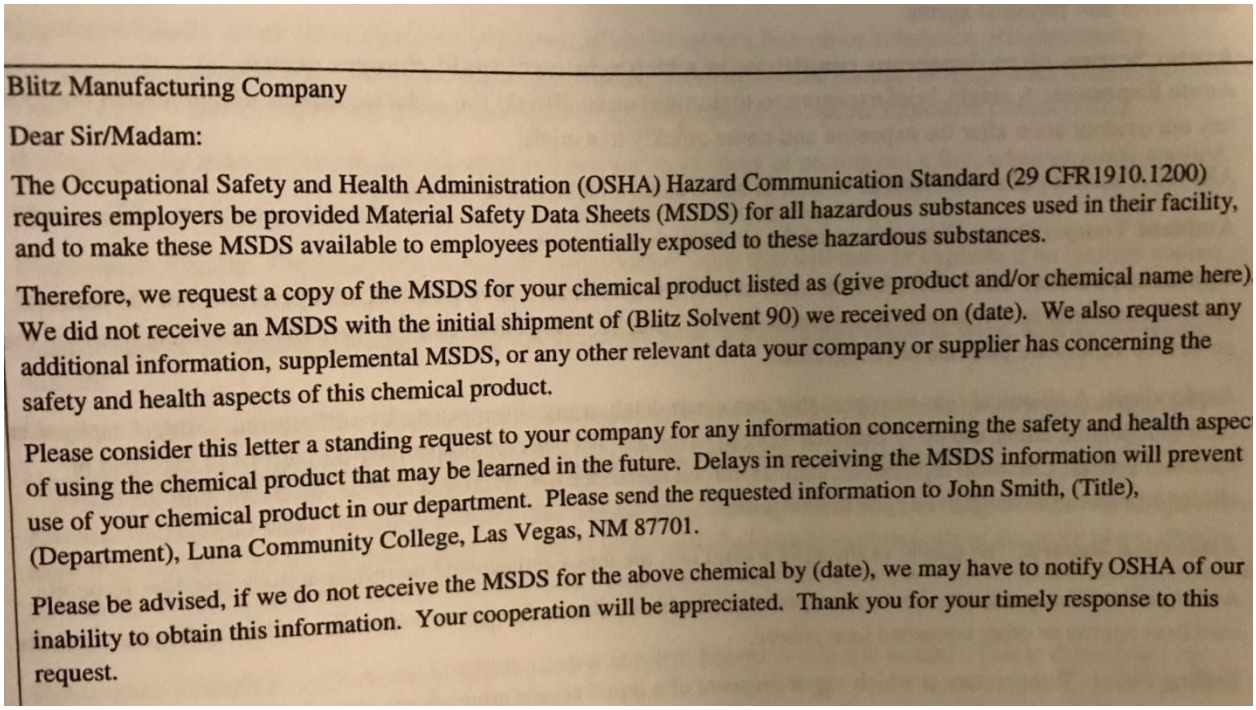
- **4.** Materials that are readily capable of explosive water reaction, detonation or explosive decomposition, polymerization, or self-reaction at normal temperature and pressure (e.g., chlorine dioxide, nitroglycerin).
- **3.** Materials that may form explosive mixtures with water and are capable of detonation or explosive reaction in the presence of a strong initiating source. Materials may polymerize, decompose, self-react, or undergo other chemical change at normal temperature and pressure with moderate risk of explosion (e.g., ammonium nitrate).
- **2.** Materials that are unstable and may undergo violent chemical changes at normal temperature and pressure with low risk for explosion. Materials may react violently with water or form peroxides upon exposure to air (e.g., potassium, sodium).
- **1.** Materials that are normally stable but can become unstable (self-react) at high temperatures and pressures. Materials may react non-violently with water or undergo hazardous polymerization in the absence of inhibitors (e.g., propene).
- **0.** Materials that are normally stable, even under fire conditions, and will not react with water, polymerize, decompose, condense, or self-react. Non-explosives (e.g., helium).

White (Personal Protection)

This is by far the largest area of difference between the NFPA and HMIS systems. In the NFPA system, the white area is used to convey special hazards whereas HMIS uses the white section to indicate which personal protective equipment (PPE) should be used when working with the material.

Appendix D
Sample Letters

Sample Letter Requesting an MSDS



Blitz Manufacturing Company

Dear Sir/Madam:

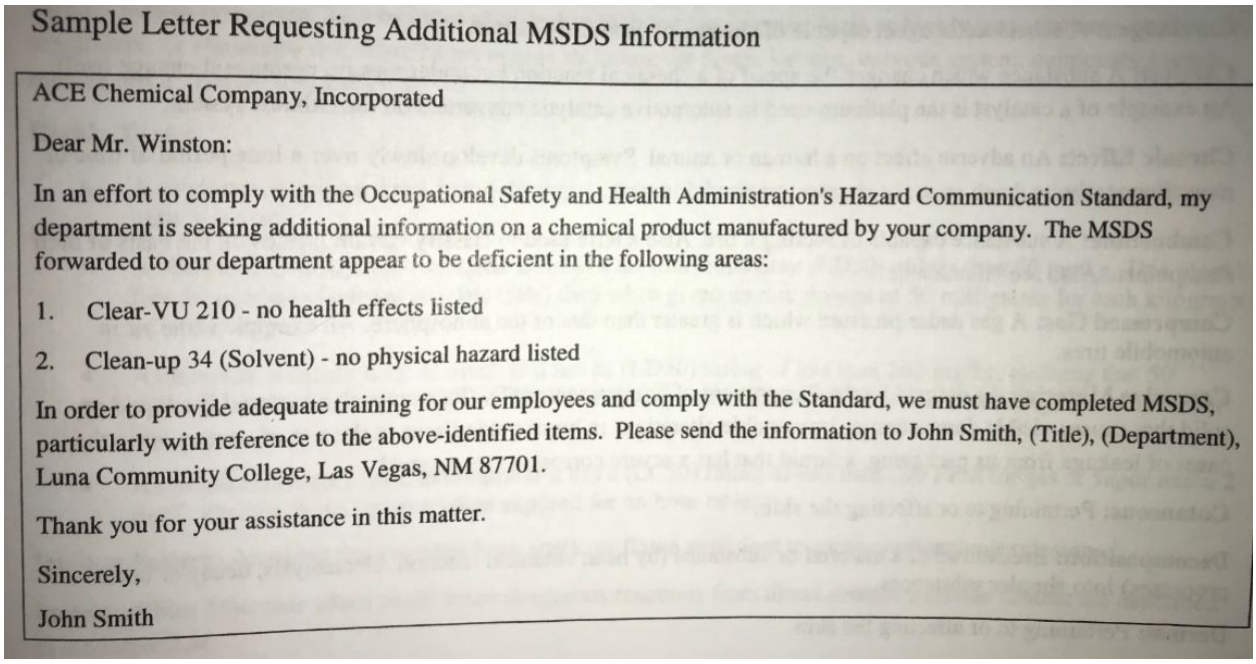
The Occupational Safety and Health Administration (OSHA) Hazard Communication Standard (29 CFR1910.1200) requires employers be provided Material Safety Data Sheets (MSDS) for all hazardous substances used in their facility, and to make these MSDS available to employees potentially exposed to these hazardous substances.

Therefore, we request a copy of the MSDS for your chemical product listed as (give product and/or chemical name here). We did not receive an MSDS with the initial shipment of (Blitz Solvent 90) we received on (date). We also request any additional information, supplemental MSDS, or any other relevant data your company or supplier has concerning the safety and health aspects of this chemical product.

Please consider this letter a standing request to your company for any information concerning the safety and health aspec of using the chemical product that may be learned in the future. Delays in receiving the MSDS information will prevent use of your chemical product in our department. Please send the requested information to John Smith, (Title), (Department), Luna Community College, Las Vegas, NM 87701.

Please be advised, if we do not receive the MSDS for the above chemical by (date), we may have to notify OSHA of our inability to obtain this information. Your cooperation will be appreciated. Thank you for your timely response to this request.

Sample Letter Reque
sting Additional MSDS Information



Sample Letter Requesting Additional MSDS Information

ACE Chemical Company, Incorporated

Dear Mr. Winston:

In an effort to comply with the Occupational Safety and Health Administration's Hazard Communication Standard, my department is seeking additional information on a chemical product manufactured by your company. The MSDS forwarded to our department appear to be deficient in the following areas:

1. Clear-VU 210 - no health effects listed
2. Clean-up 34 (Solvent) - no physical hazard listed

In order to provide adequate training for our employees and comply with the Standard, we must have completed MSDS, particularly with reference to the above-identified items. Please send the information to John Smith, (Title), (Department), Luna Community College, Las Vegas, NM 87701.

Thank you for your assistance in this matter.

Sincerely,

John Smith

HAZARDOUS WASTE MANAGEMENT PLAN

1. Policy

The Hazardous Waste Management Plan (HWMP) was developed for Luna Community College fill and part-time and staff who may generate, handle or store hazardous chemical wastes. This is to ensure protection for all faculty, staff, students as well as other community entities and individuals who may be using or participating in College campus activities.

2. Purpose

It is the purpose of this plan to provide guidance in the safe and proper storage, handling ad disposal of hazardous waste. This document doesn't cover all regulatory requirements regarding hazardous materials but shall be considered minimal requirements in order to comply with regulations which affect the management of hazardous materials.

3. Responsibilities

Luna Community College is registered with the NMED/HWB as a small quantity generator (SQG) of hazardous waste. IT becomes the responsibility of each employee to identify any possible hazardous waste that he/she might be producing and to assume that the waste is handled in a manner consistent with these guidelines. LCC will contract all waste collections with a company that has a valid Environmental Protection Agency (EPA) ID number.

Life/Safety Coordinator

a. Maintain the HWMP, based on regulatory changes and the needs of the GWU community.
b. Assist in the implementation of the HWMP on campus.
c. Be the central repository for record keeping of all documents related to the accumulation, transportation, storage, treatment, and disposal of hazardous wastes.
d. Maintain names, job titles and job descriptions for all personnel managing ad handling hazardous wastes.

Department Head of Hazardous Waste Generators

a. Ensure that no chemicals are abandoned in place.
b. Ensure this plan is implemented with the department.
c. Become familiar with the HWMP.

Generators

a. Become familiar with the HWMP.
b. Identify or deem chemical waste as hazardous waste.
c. Work with their supervisor to properly label, date, segregate, and store hazardous wastes.
d. Develop and implement an active waste minimization program by investigating material substitution, scale reduction, chemical exchange, and purchase control.

4. Definitions

Hazardous Materials-any material or substance, which if improperly handled, can be damaging to the health and well-being of humans and the environment.

Solid Waste-Solid wastes are materials that are not longer used, unwanted and are set aside for disposal. Solid wastes include abandoned items, materials that are ready to be disposed, or those that are ready to be recycled. Solid wastes may be a solid, liquid, or gas. EPA's regulations on waste also automatically exempt certain sold wastes from being considered hazardous (20 DCMR 4100.2). Among those subject to exemptions are agricultural wastes that are returned to the ground as fertilizer.

"Inherently Waste Like" materials-Chemicals no longer suitable for use are considered "inherently waste like" materials and are subject to hazardous waste regulations. Some examples include:

Chemicals that are no longer used, e.g., past the expiration date
Chemicals with obliterated labels, e.g., corroded, faded, or smeared
Chemicals wit no labels, e.g., sample vials, jars, or beakers; or
Samples that cannot be identified

Hazardous Waste-a solid waste thar because of its quantity, concentration; or physical, chemical or infectious characteristics may cause or significantly contribute to an increase in serious; irreversible or incapacitating, reversible illness or pose a substantial present or potential hazard to human health, safety, or welfare to the environment when improperly treated, stored, transported, used, or disposed of or otherwise managed.

5. Identifying Hazardous Waste

The Environmental Protection Agency's Resource Conservation and Recovery Act (RCRA) establishes authority over the handling and disposal of all solid biological and chemical waste and discarded liquids and gases in containers. All generators or RCRA regulated waste are required to determine if the waste is hazardous. This is accomplished by determining if any of the constituents of the waste are specifically "listed" hazardous waste constituents' or if the waste has a regulated characteristics of hazardous waste.

"Listed" Chemical Waste

A solid waste is a listed hazardous waste if it is not excluded from regulation and it is identified on ay of the lists in 20DCMR 2109, incorporating by reference 40 CFR 261 Subpart D. These lists include:

"K" listed waste from a specific source
"F" listed waste from a non-specific source
"U" listed waste from off-spec or discarded commercial chemicals
"P" listed waste from off-spec or discarded commercial chemicals which have been designated as Acutely Hazardous.

Characteristics

A solid waste is a hazardous waste if it exhibits ay of the following characteristics:
Ignitability Corrosivity Reactivity Toxicity

Ignitability-A solid waste that has ay of the following properties displays the characteristics of ignitibility and is considered a hazardous waste:

A liquid, other than an aqueous solution containing less than 24% alcohol by volume, with a flash point below 60 degrees C (140 degrees F).

A non-liquid, capable under standard temperature and pressure, of causing fire through friction, absorption of moisture or spontaneous chemical changes, and when ignited burns so vigorously and persistently that it creates a hazard.

An ignitable compressed gas, which includes gases that form flammable mixtures at a concentration of 13% or less in air

A oxidizer, such as permanganate, inorganic peroxide, or nitrate that readily stimulates combustion of organic materials.

Corrosivity-A solid waste that has any of the following properties displays the characteristics of corrosivity and is considered a hazardous waste:

Is aqueous and has a pH less than or equal to 2 or greater than or equal to 12.5, using EPA specified or approved test methods

Is a liquid and corrodes steel (SAE 1020) at a rate greater than 6.35 mm (0.25 inch) per year at a test temperature of 55 degrees C (130 degrees F).

Reactivity-A solid waste that has any of the following properties displays the characteristics of reactivity and is considered a hazardous waste:

Is normally unstable ad readily undergoes violent change without detonation

Reacts violently with water

Forms potentially explosive mixtures with water

When mixed with water, generates toxic gases, vapors, or fumes in a quantity enough to present a danger

Is a cyanide or sulfide bearing waste that generates toxic gases, vapors, or fumes at a pH between 2 and 12.5

Is capable of detonation or explosive reaction when subject to a strong initiating source or if heated in confinement

Is readily capable of detonation, explosive decomposition, or reaction at stand temperature and pressure

Is an explosive, as defined in 49 CFR Sections 173.51, 173,53 or 173. 88

Toxicity-Toxicity Characteristics Leaching Procedure (TCLP) toxic chemicals are waste in which extracts contain high concentrations of heavy metal or pesticides that could be released into the ground.

6. Labeling

A chemical container must be labeled as hazardous waste at the time its content is designated as a hazardous waste. When a hazardous waste is added to a container, it must also be labeled as a hazardous waste at the time the first drop of hazardous waste is added to it. This is referred to as the First Drop Rule.

Sample Label:

7. Packaging

Waste storage muse be non0leaking, chemical compatible, safe ad clearly labeled. All Hazardous materials must be kept in appropriate, closed containers. All containers must remain closed at all times except when adding or removing material.

- Use a leak proof container that wills safely contain the contents
- Do not over fill the container with liquid waste. Allow an empty space of approximately 5% of the container volume to allow for thermal expansion
- Be suspicious of any pressure build-up inside the container
- Old cans of either, picric acid and other peroxide forming, or shock sensitive items are to be left in place and not disturbed until safety personnel have evaluated the condition of the container
- Do not mix incompatible chemicals
- Loose solid materials must be placed in a sealed container or in a covered cardboard box lined wit two polyethylene bags.
- Do not leave funnels in the collection container

8. Oil Collection

Used Oil-Any oil that has been refined from crude oil or an synthetic oil that has been used and as a result is contaminated by physical or chemical impurities. New oil is never considered "used oil".

Examples of substances that are considered used oil. (This is not an all-inclusive list)

- Spent oil from gasoline and diesel engines
- Spent refrigerant lubricating oil
- Spent lubricating oil from aircraft reciprocating ad jet engine
- Spent hydraulic fluid
- Spent hear transfer fluids
- Spent transmission fluid
- Spent refrigeration oil

Example of materials that are not used oil

- Spent antifreeze
- Spent brake fluid
- Solvents of any kind
- Unused motor oil
- Vegetable and animal oil, even when used as a lubricant

The following area stores used oil in designated containers:

Vocational Education (Automotive)

Do not mix oil with any other materials, keep materials properly labeled and sealed. Maintain adequate aisle space between containers to facilitate material transfer, close used oil containers between filling or emptying. All containers, tanks, drums and receptacles of used oil will be clearly marked "USED OIL".

9. Batteries

Listed below are some types of batteries used and proper disposal methods. If you have batteries that are not included below, please contact the Physical Plant for disposal instructions. (Appendix A will list some resources for recycling).

ALKALINE (AA, AAA, C, D 9V, Carbon Zinc (Heavy Duty AA, AAA, C, D, 9V):
These are typical non-rechargeable batteries that most people use. They are classified as non-hazardous and can be disposed of with regular trash.

Button Batteries (Size Vary)
These are typically found in hearing aids, watches, greeting cards, and shall be disposed of as hazardous waste. Maintenance shop will store batteries for proper disposal (recycle).

Sealed Lead Acid Batteries (Rechargeable):
These are typically found in video camera, camera, power tools, clocks and are considered hazardous waste and shall be disposed (recycled) of properly.

Lead Acid Batteries (Vehicle Batteries):
Used in cars and motorcycles are considered hazardous waste and shall be disposed of properly. Most retail locations that sell these batteries will accept old batteries for disposal (recycle).

Nickel-cadmium Ni-Cad (Rechargeable):
Typically found in items such as flashlights, toys, cell phones, an computer packs and are considered hazardous waste and shall be disposed of properly. Maintenance will have an area for storage until disposal arrangements can be made.

Nickel Metal Hydride (Rechargeable):
Typically found in items such as flashlights, toys, cell phones and computer packs and are not considered hazardous waste and can be disposed of with regular trash.

10. Toner Cartridges

Used printer cartridges are to be recycled in the pre-paid packages supplied by the manufacturer. These cartridges will be delivered to shipping and receiving which will make arrangements for pick up.

11. Cooking Oil

Used oil is sored in a drum outside the Instructional Program Center (IPC); this container is picked p on a regular basis by an appropriate company.

12. Sharps

All sharps are to be disposed of in a appropriate sharps container; these containers are red in color and have the biohazard symbol on them. They are made of puncture resistant plastic and have a lid.

Sharps include, but not limited to, any item that may cause puncture or cur; discarded hypodermic needles, syringes, pipettes, broken medical/contaminated glassware, razor blades, scalpels, slides and cover-slips. Even if not infectious, may of these items can be physically dangerous and be treated as medical sharps.

Sharps containers and other biological waste will be picked up by a qualified hazardous waste management firm designated by LCC or delivered to the New Mexico Behavioral Health Institute which will assume responsibility for legal disposal.

13. Anti-Freeze

Used anti-freeze will be stored in approximately marked until picked up for recycyling or legally disposed of. DO NOT mix anti-freeze with other wastes.
Anti-freeze barrels are located at Vocational Education (automotive)

14. Parts Washer Solvent

Parts washing machines on campus should use a parts washing solvent with a flash point of 140 degrees. The machines will be contracted to be cleaned and solvent recycled on an as needed basis. DO NOT Use other solvents (Gunk, Carburetor Cleaner, thinner, etc.) in the parts machine.

15. Paint and Paint Related Materials

Most paints fall into one of two categories: water-based or oil-bases. Water-based formulas are sometimes referred to as latex, vinyl or acrylic; oil-based formulas are sometimes referred to as alkyd, polyurethane or varnish. Paints may be regulated as a "Hazardous waste" when disposing of depending on the formulation.

Oil based paints are regulated due to their flammability and the presence of regulated solvents such as xylene and toluene. Water-based paints are generally not regulated since they are non-0flammabe. However, paints, both water- and oil-based, that contain certain metallic pigments or fortifiers are regulated as hazardous waste when being disposed. These regulated metals include the following: Cadmium, chromium, lead, silver, barium, mercury, arsenic, and selenium. Information concerning the presence of regulated materials and the type of formulation can be obtained from the label, MSDS or the Manufacturer.

- Water-based Paint-disposal of water-based that does not contain regulated metal can be accomplished by spreading the paint on a piece of plastic or cardboard and allowing it to dry completely. When completely dry it can be disposed of with regular trash. When washing paint brushes, pans, etc. always use a drain that is connected to a sanitary sewer.
- Oil-based Paint-when possible, substitute water-based point for oil-based. If oil-based paint must be used, follow the instructions for use. Excess oil-based paints, since they contain regulated materials cannot be dried but must be collected. If paints have missing or deteriorated labels, write the contents on the can in some permanent manner. Include manufacturer, product name, product number, and chemical constituents.
- Paint Thinners and Mineral Spirits-must be collected and stored in appropriately marked containers until full. Once the container is full, company contracted by LCC will be contacted for pick-up.

16. Aerosol Cans (spray paint, etc.,)

Used cans until empty. Do not puncture the empty cans; dispose of in regular trash. IF the cans stil contain aerosol and are not used, handle as hazardous waste.

17. Photo Developing Chemicals

All photography chemicals will be stored in properly labeled containers. The MSDS of the chemicals will be used to determine how to properly disposal. The following are options for proper disposal:

- Return it to the company that sells the phot processing chemicals.
- Buy or lease a treatment unit to reclaim fixer. Be sure treated fixer meets the limits set by the City of Las Vegas sewer utility. Wastewater with silver at concentrations greater than 5ppm is considered hazardous waste; the City of Las Vegas may have stricter guidelines. If purchasing a treatment unit; two chemical recovery cartridges in series are needed.

18. Computer Monitors

Monitors that are broken and can o longer be used should be deemed as hazardous waste. They will be stored, and arrangements made for an authorized company to pick-up and dispose of or recycle properly.

19. Housekeeping

Suggestions:

- Inspect equipment such as pumps, pipes, storage tanks, valves and material handling equipment for signs of corrosion, support or foundation failure or other deterioration. Remove, repair, or replace defective tanks or containers.
- Stock cleaning and spill response materials where they are readily available.
- Provide instructions n securing containers.

Responding to Spills:

- Spill kits should be located in areas that store oil and chemicals.
- Construct dikes around material storage areas to contain spills.
- Do not allow spills into floor drains, dike if necessary
- For large spills, contact the Physical Plant Director, who will coordinate the safe control and cleanup of the spill

20. Wastes That Do Not Fall Under HWMP

Biomedical Waste:

Sharps, needles, broken glass or biohazard material. These items must be disposed of through an independent contractor.

Infectious waste boxes are the carboard boxes with the red plastic liners that are used for the disposal of research materials that are contaminated with hazardous biological agents or chemicals to include: tissue samples, animal cadavers, animal organs, slides, broken lab glassware, absorbent pads, pharmaceuticals, and small quantities of chemicals. Sharps should be collected in the red puncture resistant collection containers. The red puncture resistant sharps collection containers are purchased by each department.

Following are instructions for the infectious waste boxes:

- The boxes are delivered constructed (from Housekeeping).
- All sharps must be placed in a puncture resistant collection container inside of the infectious waste box.
- Do not pour liquids in the boxes or over pack-weight limit is 40lbs.
- Use only the infectious waste boxes provided.

- Do not deliver the boxes to the loading dock of Shipping and Receiving.
- Do not use for disposal of non-hazardous material.

21. Training

Faculty and staff that perform work at or for Luna Community College will receive appropriate training necessary to protect their health and perform in a safe and environmentally sound manner, Training must include information about jo hazards, possible health effects and required work practices ad procedures. Safety training is designed to meet the requirements of federal, state, and local regulatory laws.

To accomplish this, departments will provide training programs that satisfy all federal, state and local (where applicable) safety related laws and regulations, and will promulgate appropriate policies, standards and procedures for governing departmental safety training programs.

Job Specific Training:

Job duties must often be supplemented with additional safety training that is specific to operations, task, and facilities. Department Heads and Supervisors are generally more knowledgeable in this regard; as such, this job specific training is the responsibility of the department and direct supervisor. This can include on-the-job training, formal mentoring, hazard specific training or training given off site by another facility or organization.

On-the-job training is conducted and evaluated in the work environment. It is designed to teach the employee specifics of a task or operation and is often used to supplement general safety training.

Appendix A
Examples of Recycling Centers

Recycle Center	Location	Recyclable Items Accepted
*Radio Shack	607 Mills Ave	NiCad Batteries/Rechargeable Batteries
Capitol City Scrap	702 Railroad Ave	Car Batteries/Aluminum/Nonferrous Metals
*Oriley's Auto	2514 7th Street	Car Batteries/Used Oil

***May not accept items form a commercial Source**

CONTROL OF HAZARDOUS ENERGY

Lock-Out/Tag-Out

Control of Hazardous Energy
Lock-out/Tag-out

1. POLICY

It is the policy of Luna Community College to implement and maintain a successful Lock-out/Tag-out program in order to protect our people, property and processes.

2. PURPOSE

To establish a program and utilize procedures for affixing appropriate lock-out/Tag-out devices and to otherwise disable machines or equipment from unexpected energization, start-up or release of stored energy in order to prevent needless deaths or serious injuries.

3. SCOPE

Employees can be seriously or fatally injured if machinery they service or maintain unexpectedly energizes, starts-up or release stored energy. This program covers the servicing and maintance of machines and equipment I which the unexpected energization or release of stored energy could cause injury to employees or outside personnel. Servicing and/or maintenance which takes place during normal production operations are covered by this standard if:

a. An employee is required to remove a guard or bypass a guard or other safety device.
b. An employee is required to place any part of his or her body into an area on a machine or piece of equipment where work is actually performed upon the material being processed (point of operation) or where an associated danger zone exists during a machine operations cycle.

Note: The exception to paragraph (b) is: Minor tool changes and adjustments, and other minor servicing activities, which take place during normal production operations, are not covered by this program if they are routine, repetitive and integral to the use of the equipment for production, provided that the work is performed using alternative measures which provide effective protection.

This program does not apply to the following:

a. Work in cord or plug connected electrical equipment for which exposure to the hazard of unexpected energization is controlled by the unplugging of the equipment from the energy source and by the plug being under the exclusive control fo the employee performing the servicing or maintenance.

b. Hot tap operations involving the transmission and distribution of substances such as gas, steam, water or petroleum products when they are performed on pressurized pipelines.

4. GENERAL PROCEDURES

Separate procedures are relevant for the application of control devices and removal of control devices. These procedures are defined in more detail below.

5. APPLICATION OF CONTROL PROCEDURE

Energy isolation and llock-out/Tag-out are to be applied only by trained employees authorized to perform service or maintenance. The goal of this control, procedure is to achieve “Zero Energy State” and “Zero Mechanical State”. The 8=step control procedure listed must be followed:

1. NOTIFICATION-Notify all affected employees that servicing, or maintenance is required on a machine or piece of equipment and that the machine or equipment must be shit down and locked out to perform the servicing.

2. PREPARATION-Authorized employees shall be knowledgeable of and use the energy isolation procedures to prepare for shutdown. This procedure includes the identification of all energy sources (types, magnitudes), the hazards of the energy to be controlled, and the method (energy isolation devices) to control energy.

3. EQUIPMENT SHUTDOWN-Shut down the system by using the proper shutdown procedure. Ensure that no personnel are endangered during the shutdown.

4. EQUIPMENT ISOLATION-De-activate the energy isolating device(s) so that the machine or equipment is isolated from the energy source(s). Be sure to isolate all energy sources including secondary power sources. Energy can come from many different sources including electrical, mechanical, hydraulic, pneumatic, chemical and thermal.

5. ISOLATION DEVICES-All energy isolation devices are to be locked out with the ise of an attached lock, and tag. The tag must display the authorized person’s name. Only standardized devices supplied by the company are to be utilized. More than one employee can lock out a single energy device by using a multiple-lock hasp. Use an appropriately designed lock out providing “attachment device” if a lock can be placed directly on the energy control. The authorized employee that applied the lock shall maintain the key (to the lock) in his or her possession during the time the lockout is under their control. The MAINTENANCE SUPERVISOR shall be responsible for the integrity of the lockout, I the event of shift or personnel changes. The integrity of the lock-out/Tag-out protection must not be interrupted!

6. STORED ENERGY-All potentially hazardous stored or residual energy shall be dissipated and restrained. *This includes stored energy in capacitators, springs, elevated machine members, rotating flywheels, hydraulic systems, and air, gas steam or water pressure, etc. The dissipation process shall include methods such as grounding, repositioning, blocking, bleeding down, etc.*

7. VERIFICATION-ensure that the equipment is disconnected from the energy source(s) by first checking that no personnel are exposed, then verify the isolation of the equipment by operating the push button or other normal operating control(s) or by testing to make certain the equipment will not operate. This process is otherwise known as the “Tryout”. ***Caution: Return operating controls to neutral or “off” position after verifying the isolation of the equipment.***

8. SUCCESSFUL VERIFICATION-The machine or equipment is now effectively locked out.

6. RELEASE FROM CONTROL PROCEDURE

When the servicing or maintenance is completed and he machine or equipment is ready to reurn to normal operating condition, the following 5 steps must be taken:

1. AREA SURVEY-Check the machine or equipment and he immediate area around the machine or equipment to ensure that nonessential items have been removed and that the machine or equipment components are operationally intact.

2. PREPARATION-Check the work area to ensure that all employees have been safely positioned or removed from the area.

3. VERIFICATION-Verify that the controls are in neutral or off position.

4. DEVICE REMOVAL-Remove the lock-out devices and reenergize the machine or equipment. Removal of the lock-out device shall be removed from each energy isolation device by the employee who applied the device. When the authorized employee who applied a lock-out device is not available to remove it, that device may be removed only under the agreement and direction of the Maintenance Supervisor (ideally list two management representatives). IT is also necessary to adhere to all the following minimum criteria:

   a. Verification that the authorized employee who applied the device is not at the facility.
   b. Making all reasonable efforts to contact the authorized employee to inform him/her that his/her lock-out has been removed.
   c. Ensuring that the authorized employee has this knowledge before he/she resumes work at that facility. NOTE: The removal of some forms of blocking may require re-energizing of the machine before safe removal.

5. NOTIFICATION-Notify all affected employees that the servicing or maintenance is completed, and the machine or equipment is ready for use. (Energy must not be restored to any equipment, until this notification has been successfully completed.)

7. SPECIFIC PROCEDURES

The general procedures listed (in the previous section) are supplemented, where applicable, with equipment or machine specific procedures listed on a separate Lock-out/Tag-out Data Sheet (see Appendix A for Example).

Note: Equipment or machine specific procedures are not required or provided when all of the following exist:

1. The machine or equipment has no potential for stored ro residual energy or re-accumulation of stored energy after shut down which could endanger employees.

2. The machine or equipment has a single energy source which can be readily identified and isolated.

3. The isolation and locking out of that energy source will completely deenergize and deactivate the machine or equipment.

4. The machine or equipment is isolated from that energy course and locked out during servicing or maintenance.

5. A single lock-out device will active a lock-out condition

6. The lock-out device is under the exclusive control of the authorized employee performing the servicing or maintenance.

7. The servicing or maintenance does not create hazards for other employees.

8. In utilizing this exception, no accidents have occurred involving the unexpected activation or re-energization of the machine or equipment during servicing or maintenance.

8. TRAINING & RETRAINING

Training shall be provided to ensure that the purpose and function of the energy control program are understood by employees and that he knowledge and skills required for the safe application, usage and removal of the energy controls are acquired by employees. All training and retraining requirements shall be conduced and fulfilled by Maintenance Supervisor and/or Life safety Coordinator.

Training shall include the following:
a. Each authorized employee shall receive training in the recognition of applicable hazardous energy sources, the type and magnitude of the energy available in the workplace and the methods and means necessary for energy isolation and control.

b. Each affected employee shall be instructed in the purpose and use of the energy control procedure.'

c. All other employees whose work operations are or may be in an area where energy control procedures may be utilized, shall be instructed about the procedure, and about he prohibition relating to attempts to restart or reenergize machines or equipment which are locked out or tagged out.

d. Supervisors shall receive training on their supervisory responsibilities.

Retraining shall include the following:
a. Retraining shall be provided for all authorized and affected employees whenever there is a change in theor job assignments, a change in machines, equipment or process that present a new hazard or when there is a change in the energy control procedures.

b. Additional retraining shall also be conducted whenever a periodic inspection reveals or there is reason to believe that there are deviations from or inadequacies in the employees' knowledge or use of the energy control procedure.

c. The retraining shall reestablish employee proficiency and introduce new or revised control date. The certification shall contain each employee's name and dates of training.

d. The trainer shall certify that employee training has been accomplished and is being kept up to date. The certification shall contain each employee's name and dates of training.

9. ENFORCEMENT

Enforcement is necessary to make sure workers do their pat in protecting their own safety.

a. In additional to the required annual inspections, informal or random inspections will be conducted regularly as a part of the supervisory responsibility of the Life/Safety Coordinator. Theses inspections shall verify that energy control procedures are being carried out.

b. Enforcement of safety rules shall be fair and uniform.

c. The penalties for failure to comply with our energy control procedures will result in disciplinary steps taken against the non-complying employee, (up to and including immediate termination).

10. PROGRAM EVALUATION AND MAINTENENACE

At least annually, a review of the complete energy control program and an inspection of all equipment or machine lock-out/tag-out procedures shall be conducted by the Life/Safety Coordinator ***(This person must be someone other than the authorized person who normally performs the lock-out)***

When additions or modifications are made with regard to facilities, equipment or machinery it shall be the responsibility of the Facilities Director to provide or update the Lock-out/Tag-out Date Sheet, where applicable, and ensure that timely and accurate information is provided before releasing the equipment or machine into service.

11. OUTSIDE PERSONNEL

Whenever outside servicing personnel (contractors, etc.) are to be engaged in activities covered by the scope and application of this program, Luna Community College and the outside employer shall inform each other of their respective lock-out or tag-out procedures. The outside employer shall meet the minimum requirements set forth by Luna Community College. Of deviations in our normal procedures are approved, adequate communication of such changes must occur with all employees affected, prior to initiating the lock-out procedure.

Appendix A
Lock-out/Tag-out Data Sheet

Lock-out / Tag-out Data Sheet

Equipment Description			
Equipment	**Manufacturer**	**Model #**	**Serial #**

Equipment Actuation Control:

Step No.	Hazardous Energy		Isolation Device		Control Device		Additional Hardware Required
	Type	Magnitude	Type	Location	Lock & Tag	Tag Only	

Additional Measures:

Authorized Employees		

Document Control			
Verified By:	**Date**	**Issued:**	**Date**

Lock-out / Tag-out Data Sheet

Equipment	Equipment Description		
	Manufacturer	Model #	Serial #
Automatic Drill Press	*Clausing*	*CL - 2500*	*CSN – 5658745*

Equipment Actuation Control: *Single button (operator controlled) Actuation switch on the control panel. A "limit switch" is used as an automatic end of cycle and return to top*

Step No.	Hazardous Energy		Isolation Device		Control Device		Additional Hardware Required
	Type	Magnitude	Type	Location	Lock & Tag	Tag Only	
1	*Elec.*	*120 volt*	*Elec. Disc.*	*Labeled ED1*	*X*		
2	Pneumatic	50 psi	3 way valve	Tagged Pv1	X		
	Additional Measures:						
2	*When closed the 3 way valve releases all stored energy from the equipment*						

Authorized Employees	*John Doe*	*Jane Doe*
Frank Smith		

Document Control			
Verified By:	Date		Date
John Doe	*10/31/09*	Issued:	
Frank Smith	*10/31/09*		

PERSONAL PROTECTIVE EQUIPMENT

Personal Protective Equipment (PPE) PLAN

1. PURPOSE

Luna Community College through various safety plans, has taken a proactive approach on providing a safe working environment by offering personal protective equipment that has been deemed necessary through a hazard assessment process at no cost to the employee.

2. SCOPE

Protective equipment, including personal protective equipment for eyes, face, head, ad extremities, respiratory devices and protective shields and barriers shall be provide, used, ad maintained in a sanitary and reliable condition whenever it is necessary by reason of hazards assessment or environment, chemical hazard, radiological hazards or mechanical irritants encountered in a manner capable of causing injury or impairment in the function of any part of the body through absorption, inhalation or physical contact.

3. RESPONSIBILITY

Department Director/Supervisor

Shall ensure that a hazard assessment has been completed to determine if hazards exist and necessitate that personal protective equipment will be used by employees before work is started.

a. The hazard assessment shall include at minimum:
    1. that a required workplace hazard assessment has been performed
    2. identifies the workplace evaluated
    3. person completing the evaluation
    4. the date) (s) of the hazard assessment

b. Shall ensure that proper training has occurred and covers the appropriate material;
    1. When PPE is necessary
    2. What PPE is necessary
    3. How to properly don, doff, adjust and wear PPE
    4. The limitations of the PPE
    5. The proper care, maintenance, useful life and disposal of PPE

c. Shall be responsible for accurate training documentation that includes the minimum information:
    1. The name of each employee trained
    2. The date(s) of training
    3. Identifies the subject of the training

d. Forward a copy of training records to the Life/Safety Coordinator

Employees

It will be the responsibility of each employee that s required the use personal protective equipment in their job operations to do so as they have been trained in its use. PPE shall be maintained as per training or manufacturer recommendations.

Life/Safety Coordinator
Assist Department Directors/Supervisors in completing anu f the required documents or in conducting training and finding training materials/resources. Keep a back-up copy of training records provided by each department.

Employer
Select and have each affected employee use the types of PPE that will protect the affected employee from the hazards identified in the hazard assessment.

When the employer has reason to believe that any affected employee who has already been trained does not have the understanding and kill required, the employer shall retrain each such employee.

Circumstances where retraining is required include but is not limited to where:

a. Changes in the workplace render training obsolete.
b. Changes in the types of PPE to be used render previous training obsolete.
c. Inadequacies in an affected employee's knowledge or use of assigned PPE indicate that the employee has not retained the requisite understanding or skill.

The employer is not required to pay for non-specific safety-toes protective footwear (including steel-toe shoes or steel-toe boots) and non-specialty prescription safety eyewear, provided that the employer permits such items to be worn off the job-site.

The employer is not required to pay for:

a. Everyday clothing such as long sleeve shirts, long pants, street shoes and normal work boots.

b. Ordinary clothing, skin cremes, or other items, used solely for protection from weather, such as winter coats, jackets, gloves, parkas rubber boots, hats, raincoats, ordinary sunglasses and sunscreen.

PPE Devices alone should not be relied on to provide protection against hazards but should be used in conjunction with guards, engineering controls, and sound manufacturing practices.

Appendix A
Hazard Assessment

Hazard Assessment Checklist & Selection Criteria for use of Personal Protective Equipment

Building _____ Department _____

Room Number _____ Supervisor _____

Task Evaluated _____ Performed By _____

Date _____ Title _____

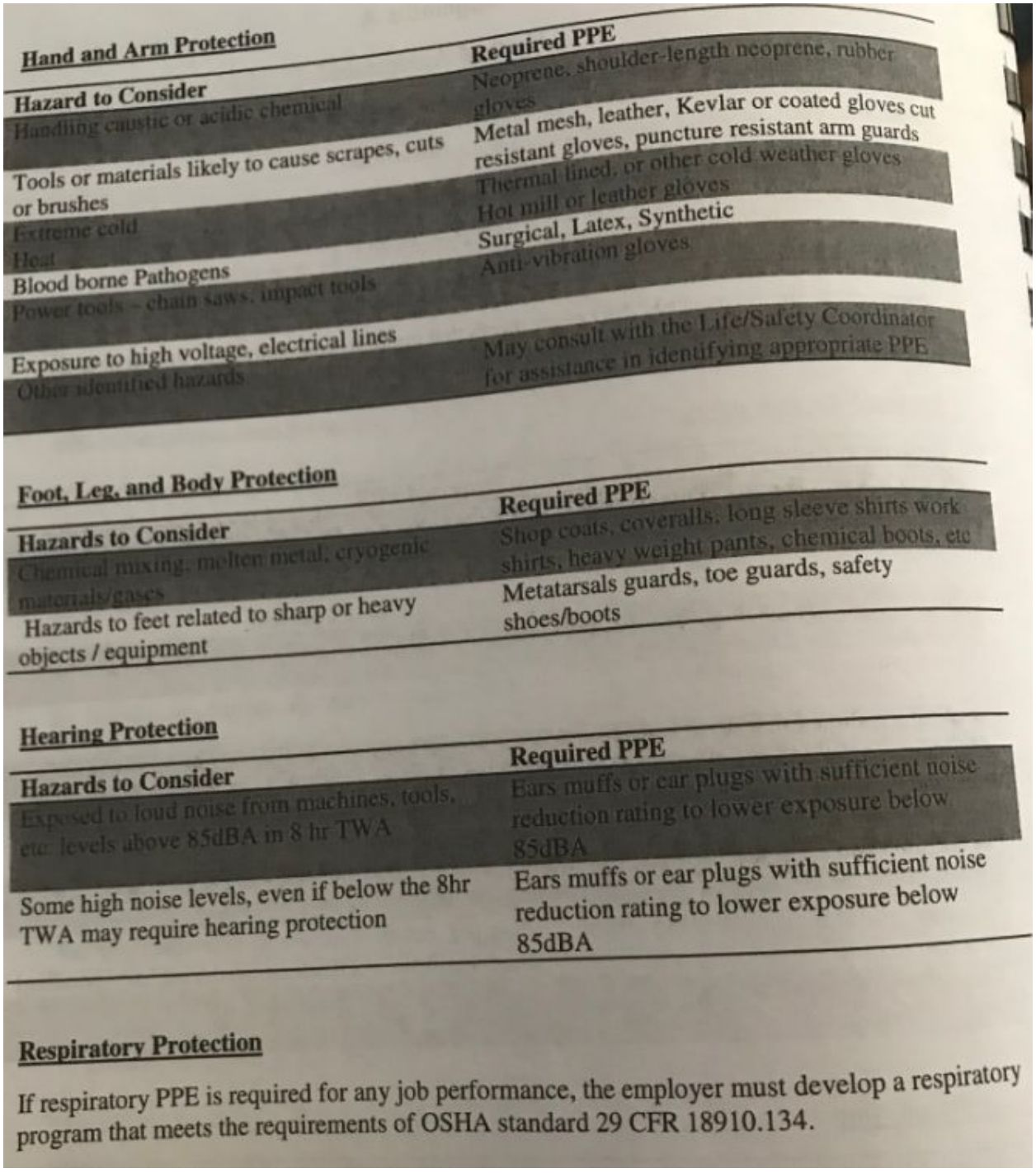
Departments should use only PPE assessments that apply to their activities. If you have any questions about this form or performing a walk-through survey, please contact the Life/Safety Coordinator at ext. 1109.

Eye and Face Protection

Hazards to Consider	Required PPE
Splash / spatter / spray of chemicals or other harmful/irritant liquids	Chemical goggles, safety glasses with side shields or safety glasses covered by full-face shield
High pressure cleaning or spraying	Safety glasses with side shields or safety glasses covered by full-face shield
Grinding / Drilling – any flying particles or projectiles	Goggles or safety glasses with side shields
Power tools – air or electric	Safety glasses with side shields
Typical Laboratory – chemical splash	Chemical goggles, safety glasses with side shields or safety glasses covered by full-face shield
Acetylene welding, cutting, burning, molten metals	Cutting goggles with appropriate filter lens number (see Appendix C)
Arc Welding and cutting	Welding hood with appropriate filter lens number (see Appendix C)
Chipping, grinding or machining – flying particles	Goggles, safety glasses with side shields or full face shield (face shield required for heavy grinding)
Other identified hazards	Consult with Life/Safety Coordinator for assistance in identifying appropriate PPE

Head Preotection

Hazards to Consider	Required PPE
Work under elevated work platforms, suspended loads or low overhead clearance	Hard hats – ANSI compliant



Hand and Arm Protection

Hazard to Consider	Required PPE
Handling caustic or acidic chemical	Neoprene, shoulder-length neoprene, rubber gloves
Tools or materials likely to cause scrapes, cuts or brushes	Metal mesh, leather, Kevlar or coated gloves cut resistant gloves, puncture resistant arm guards
Extreme cold	Thermal lined, or other cold weather gloves
Heat	Hot mill or leather gloves
Blood borne Pathogens	Surgical, Latex, Synthetic
Power tools – chain saws, impact tools	Anti-vibration gloves
Exposure to high voltage, electrical lines	May consult with the Life/Safety Coordinator for assistance in identifying appropriate PPE
Other identified hazards	

Foot, Leg, and Body Protection

Hazards to Consider	Required PPE
Chemical mixing, molten metal, cryogenic materials/gases	Shop coats, coveralls, long sleeve shirts work shirts, heavy weight pants, chemical boots, etc
Hazards to feet related to sharp or heavy objects / equipment	Metatarsals guards, toe guards, safety shoes/boots

Hearing Protection

Hazards to Consider	Required PPE
Exposed to loud noise from machines, tools, etc. levels above 85dBA in 8 hr TWA	Ears muffs or ear plugs with sufficient noise reduction rating to lower exposure below 85dBA
Some high noise levels, even if below the 8hr TWA may require hearing protection	Ears muffs or ear plugs with sufficient noise reduction rating to lower exposure below 85dBA

Respiratory Protection

If respiratory PPE is required for any job performance, the employer must develop a respiratory program that meets the requirements of OSHA standard 29 CFR 18910.134.

NOTE: Follow this link for more in-depth information regarding PPE:

file:///C:/Users/LGBER/AppData/Local/Microsoft/Windows/INetCache/IE/7NEZ9WJY/05%20OPF%20Safety%20Program%20Manual%20-%20Personal%20Protective%20Equipment.pdf

Appendix B
Verification of Training for Personal Protective Equipment

VERIFICATION OF TRAINING FOR PERSONAL PROTECTIVE EQUIPMENT

I, (Print) _____ have received and understand the material presented concerning a job hazard assessment and personal protective equoipent requirement for protection, My training included a discussion that covered the following topics:

1. What PPE must be worn in the workplace.
2. When PPR must be worn.
3. How to inspect PPE for wear ad damage prior to use.
4. How to properly don, doff, adjust, and wear PPE.
5. The limitations of PPE
6. The proper care, maintenance useful life and disposal of the PPE.

I have been afforded the opportunity to ask questions about the use of PPE ad I have had a “hands on” exercise using the PPE properly.

Department: _____

Employee Signature: _____

Supervisor/Facilitator: _____

Date: _____

HEARING CONSERVATION PLAN

HEARING CONSDERVATIO PROGRAM

1. INTRODUCTION

Hearing conservation is an important aspect of the overall safety and health program. Workplace noise can cause hearing loss, create physical and psychological stress, and contribute to accidents by making it difficult to communicate. An estimated 14 million employees throughout the United States are exposed to hazardous noise.

Fortunately, noise exposure can be controlled. Every effort is made to use quieter processes, machinery ad equipment. When feasible, engineering controls do no reduce the noise level to or below the OSHA permissible exposure limit (PEL) of 90dB, proper hearing protectors are used. Also, all employees exposed to noise levels above 85dB are included in a hearing conservation program. There are many reasons for providing an effective hearing conservation program including protecting the organization's most important resource-employees, providing a safe and healthful workplace and complying with governmental regulations.

Management, supervisory and employee commitment to hearing conservation and positive attitudes are important aspects of the overall hearing conservation program. The key elements of the organization's hearing conservation program are:

- Noise exposure measurements
- High exposure areas or jobs
- Audiometric testing and follow-up
- Employee education
- Engineering and administrative noise exposure control
- Personal hearing protection
- Recordkeeping

2. NOISE EXPOSURE MEASUREMENT

The success of the company's hearing conservation program depends on an accurate knowledge of the existing noise environment. Accurate surveys define areas within acceptable guidelines for noise exposure and these areas where potentially harmful noise exposure exists. Effective noise exposure measurement prevents possible loss of hearing by detecting work areas where employees must wear hearing protectors and must be tested.

As a rule of thumb, if an individual's voice has to be raised to converse at a distance of three feet, the noise level probebaly exceeds 85dBA. If this or any other indicators suggest that the noise might exceed the permissible level, initial monitoring is to be performed.

*NRR-Example worker exposed to 100dBA TWA-in calculating NRR, it is important to consider the following:

If the original TWA exposure was arrived at with a noise measuring instrument reading in C scale, then subtract the NRR (26) from the 100dBA. This result is 74dBA TWA.

When A Scale is used for initial measurement, 7dBA must first be subtracted from the hearing protection NRR when this number is subtracted from the employee exposure. Example: NRR26-7dBA=19NRR, 100dBA-19NRR=81dBA TWA

3. HIGH EXPOSURE AREAS OR JOBS

4. AUDIOMETRIC TESTING

The objective of this hearing conservation program is the preservation of the hearing of employees. In order to achieve this goal, an effective audiometric testing program has been implemented. Testing will be established for all employees where exposures equal or exceed the 85dBA TWA. Testing will be provided at no cost to the employee. Tests must be performed by a licensed or certified audiologist, physician or technician certified by the Council of Accreditation in Occupational Hearing Conservation (employees will not be exposed to noise for 14 hours prior to examination).

This program includes:

- Audiograms at time of hire for all employees working in “High Exposure” areas or jobs.
- Baseline audiograms for existing work force working in “:High Exposure” areas or jobs.
- Annual audiograms for all employees working in “High Exposure” areas or jobs.

The success of the hearing conservation program with regard to each individual employee is evaluated by comparing annual audiograms to the baseline audiogram. This procedure, among others, helps to determine the effectiveness of the hearing protection program, and, as a result, ensures the protection of employee’s hearing.

The Life/safety Coordinator is responsible for reviewing the recommendations of the audiologist or physician.

5. EMPLOYEE TRAINING

All employees working in “High Exposure” areas or jobs are trained before initial assignment and at least annually on the following topics:

- Effects of noise on hearing.
- Purpose fo hearing protectors.
- Advantages and disadvantages of various types of hearing protectors.
- Proper use, selection, fit, and care of hearing protectors.
- Purpose and procedures of audiometric testing.
- Company requirements for “High Exposure” jobs or areas.
- Use of specific hearing protectors provided by the company

Department Director or Supervisor is responsible for scheduling this training on an annual basis. The employees Department Director or Supervisor is responsible for conducting the training and providing documentation to the Life/Safety Coordinator.

Ear Plugs

a. Instruct the employee to insert the plugs by first pulling the ear back and up.

b. The ear plugs must be reseated from time to time throughout the work day as normal body movement will cause them to work loose.

c. IF not disposable, the employee shall wash the plugs every few days with warm soapy water-skin irritation is caused by poor hygiene.

d. The ear plugs may become hard or shrink employees shall inform the supervisor to make arrangement for a new pair.

Earmuffs

a. Earmuffs must be fitted so they form a complete seal around the ear. If there are leaks, the earmuffs are ineffective.
b. Follow manufacturers recommendations for care and cleaning.
c. If the earmuffs become damaged through normal wear, employees shall inform the supervisor to make arrangement for a new set.

6. ENGINEERING ANS ADMINSTRATIVE NOISE CONTROLS

Luna Community College recognizes the desirability of controlling the existing noise levels by engineering and/or administrative controls. Therefore, the feasibility of such controls is carefully considered including possible redesign of existing machinery, the building of partial or total enclosures and other engineering noise control procedures for reducing the existing noise levels. Due to the complexity of some machinery used by LCC and in view of economics limitations, some noise levels cannot currently be reduced to below acceptable limits.

Within the limitations of work schedules and employee skills, administrative controls have also been considered. Where feasible, over-expose employees are rotated to other areas or jobs having noise levels below the required levels. In addition, operational procedures are modified as necessary so that during any one 24-hour period, the allowed exposure times will not be exceeded. Engineering and administrative controls are being considered and implemented where feasible on a continuing basis.

7. PERSONAL HEARING PROTECTION

Until such time as engineering and/or administrative controls reduce the amount of noise exposure to or below the allowed limits, appropriate personal hearing protective devices are made available and issued to employees working in “High Exposure” jobs or areas. IT is recognized that the use of these devices is considered a temporary solution to the problem of overexposure until feasible control are provided.

The wearing of hearing protection in the areas or jobs listed in the “High Exposure” Areas or “JOBS” Table is Mandatory.

In addition, hearing protection is mandatory in ALL “High Exposure” areas for any employee who has incurred a standard threshold shift as reported by the Life/Safety Coordinator.

All supervisor shall properly enforce hearing protection requirements. Continued failure of an employee to properly wear the protection provided, could result in the termination of employment with LCC.

Depaetment Supervisor is responsible for issuing and fitting hearing protection.
NOTE: Employers are required to make at least two “TYPES” of hearing protectors available to employees. Types include self-molding, custom molded and ear miffs.

8. RECORD KEEPING

The Life/Safety Coordinator is responsible for maintaining exposure measurement records. These records will be appended to this written program as APPENDIX A ad maintained for a minimum of two years from the measurement date.

The Life/Safety Coordinator is responsible for maintaining audiometric test results for all employees working in “High Exposure” jobs or areas. These records will be maintained for the duration of the employment of the affected employee. All records related to this program will be provided upon request to employees, former employees, or representatives designated by the individual employee.