



Beach Haven Borough Safety Manual

Revised 2014

1. Safety Policy

Statement of policy:

- A. The Borough will provide a safe and healthy work environment and shall comply with the Public Employees Occupational Safety and Health Act (PEOSHA). The Borough is equally concerned about the safety of the public. Consistent with this policy, employees will receive periodic safety training and will be provided with appropriate safety equipment.
- B. Employees are responsible for observing safety rules and using available safety devices including personal protective equipment. Failure to do so constitutes grounds for disciplinary action. Any occupational or public unsafe condition, practice, procedure or act must be immediately reported to the supervisor or department head. Any on-the-job accident or accident involving Borough facilities, equipment or motor vehicles must also be immediately reported to the supervisor or Department Head. Failure to do so constitutes grounds for disciplinary action. Any on-the-job injury must also be immediately reported to the supervisor or Department Head. Failure to do so constitutes grounds for disciplinary action.
- C. The Borough has appointed a Safety Committee that meets on a regular basis to discuss and recommend solutions to safety problems. Employees are encouraged to discuss safety concerns with their Safety Committee Representative.

2. Blood Borne Pathogens Control

A. Equipment

The following list represents the minimum equipment that shall be readily available for use by all designated employees:

- Disposable gloves (latex or vinyl and appropriately sized)
- Gowns or other outer protective clothing
- Eye protection (goggles, face shields, etc.)
- Face masks or other protective barriers
- Disposable over-booties
- Hand disinfectant
- Sterile water or saline solution
- Forms for reporting exposure incidents
- Sharps boxes
- Plastic zip-lock bags
- Medical waste disposable bags
- Exposure control plan

B. Training

Annual training shall be conducted for all designated employees as currently required by CFR 1910.1030 of the Occupational Safety and Health Act and the PEOSHA of the State of New Jersey.

Annual training shall include, but not be limited to:

- Understanding and use of the Exposure Control Plan
- Communicable disease
- Personal protective equipment and its proper use
- Avoiding contamination
- Decontamination procedures
- Proper disposal of medical wastes
- Recording of exposures
- Medical follow-up after exposure
- Hepatitis B vaccination
- Current regulations on blood-borne pathogens
- Engineering and work practice controls
- Signs, labels and hazard communications

Training records shall be maintained for a minimum of three (3) years from the date the training occurred. This record shall be maintained by the, Department Head, Trainer and Municipal Clerk.

C. Exposure Determination

For the purposes of this plan, job classifications in which any municipal employee has the potential for exposure to blood, blood-borne pathogens or other potentially infectious materials shall be named “**Designated Employee**” and shall include, but not be limited to:

- Police Department employees
- Fire Department employees
- Emergency Medical Technicians
- Public Works employees
- Beach Patrol employees
- Sewer Department employees

A list of all tasks and procedures in which the potential for occupational exposures to blood, blood-borne pathogens or other potentially infectious materials may occur is as follows, but not limited to:

- Suspect restraint
- Suspect and property search
- Accident investigation
- Emergency medical tasks
- Rescue operations
- Nursing tasks
- Solid waste removal
- Sewerage waste removal
- Disease investigations
- Environmental investigations
- Industrial investigations

D. Methods of Implementation of Personal Protection

1. Universal Precautions

Universal precautions shall be observed to prevent contact with blood-borne pathogens or other potential infectious materials.

All body fluids shall be considered blood-borne pathogens or other potentially infectious materials.

A. Disposable Gloves:

1. All employees with potential for exposure to blood, blood-borne pathogens or other potentially infectious materials shall be provided with an adequate supply of disposable gloves.
2. Gloves shall be worn whenever there is the possibility of exposure to blood-borne pathogens or other potentially infectious materials.

3. Two (2) pairs of gloves shall be worn when deemed appropriate by the designated employee, as per training.
4. All firefighters will wear disposable gloves under their leather gloves when operating at a motor vehicle accident or other incident where blood, blood-borne pathogens or other potentially infectious material are present.
5. Gloves shall be removed from the inside out to prevent immediate contact with the unprotected hand.
6. After removal, gloves that are contaminated (blood soaked) shall:
 7. Be sent to the hospital with the patient and left as medical waste, or
 8. Be placed in a red disposable plastic bag to limit the chance of secondary exposure. The bag shall then be dropped off and placed in the Rescue Squad's Medical Waste Can for future disposal.
 9. Contaminated gloves at a storage site (Police Headquarters, Fire Headquarters, Public Works Garage, Rescue Squad Garage) shall be bagged and removed to the Rescue Squad, when necessary for disposal. (see Medical Waste, Section VII)
10. Gloves that have been worn as a precaution but are not contaminated with blood, blood-borne pathogens or other potentially infectious materials can be discarded in the regular trash for disposal.
11. Hands shall be thoroughly washed with soap and warm water as soon as possible after removal of gloves. In the absence of soap and water, an appropriate hand cleaner shall be used until such time that soap and warm water can be obtained.

B. Washing Procedures:

1. If unprotected hand or any other skin comes in contact with blood or bloody fluids, employees shall immediately wash the area of contact thoroughly with soap and warm water.

2. When provisions for hand washing are not available, the employees shall thoroughly clean the area of contact with an approved antiseptic hand cleanser or towelettes.
3. An adequate supply of antiseptic hand cleanser or towelettes shall be maintained in all designated employee's vehicles at all times for use when hand washing facilities are not readily available.
4. The area of contact shall be thoroughly washed with soap and warm water as soon as possible, even after the use of antiseptic hand cleaner or towelettes.
5. Employees shall wash their hands thoroughly with soap and warm water as soon as possible, even after removing gloves or other personal protective equipment.

C. Eye and/or Mucous Membrane Exposure Protection:

1. Masks and eye protection shall be used whenever there is a possibility of blood, blood-borne pathogens or other potentially infectious materials splashing.
2. In the event of an accidental contact of such body areas with blood, blood-borne pathogens or other potentially infectious materials, the following actions shall be taken:
3. Thoroughly flush the area with sterile water, saline solution or water immediately.
4. Immediately report the incident to your Supervisor, Department Safety Officer, and/or Borough Manager as Safety Coordinator.
5. Completely fill out an Exposure Incident Report Form (see Appendix II) and have your supervisor sign it, giving a copy to your supervisor, department head and Safety Coordinator.
6. The Supervisor or Safety Coordinator is to first, call the hospital emergency room where the patient was transported and request that blood be drawn and tested because of the exposure and second, FAX a copy of the Documentation and Identification of Source Individual Form and the cover letter (see Appendixes IV-A and IV-B) to back up the telephone request.

7. Participate in a confidential medical evaluation and follow-up as a result of the exposure if recommended. (In the event that this medical evaluation and follow-up is declined, a Medical Evaluation Declination Form must be completed).

Copies of all records are to be placed in employee's file in the Municipal Exposure Control File.

D. Needles and Other Sharps:

1. All needles or sharps, regardless of condition, shall be considered potentially infectious materials.
2. Contaminated needles or sharps shall not be bent or recapped.
3. All needles or sharps collected for evidence purposes should be immediately placed in hard plastic puncture-resistant needle/syringe keepers to prevent accidental exposure or puncture.
4. Designated employee's vehicles shall be equipped with an adequate supply of puncture-resistant sharps containers.
5. Puncture resistant sharps containers shall be maintained as near as possible to all areas designated for sharps use.
6. Each department within the municipality who has employees with the potential for exposure to sharps shall maintain an adequate supply of puncture resistant sharps containers.
7. In the event of an accidental needle stick, the following actions shall be taken:
8. Cause the area to bleed. Squeeze or milk the area of the wound to increase blood release.
9. Immediately wash and sanitize the area of puncture.
10. Immediately report the incident to your Supervisor, Department Safety Officer and Safety Coordinator.

11. Completely fill out an Exposure Incident Report Form (see Appendix II) and have your Supervisor sign it, giving a copy to your Supervisor, Department head and Safety Coordinator.
12. The Supervisor or Safety Coordinator is to first, call the hospital emergency room where the patient was transported and request that blood be drawn and tested because of the exposure and second, FAX a copy of the Documentation and Identification of Source Individual Form and the cover letter (see Appendixes IV-A and IV-B) to back up the telephone request.
13. Participate in a confidential medical evaluation and follow-up as a result of the exposure if recommended. (In the event that this medical evaluation and follow-up is declined, a Medical Evaluation Declination Form must be completed).
14. In the event the exterior of a sharps container becomes contaminated with blood, blood-borne pathogens, or other potentially infectious materials, the container shall be placed in a zip-lock bag, or other appropriate plastic container, to prevent leakage and subsequent exposure during handling and transport.
15. All sharps no longer needed as evidence or for an investigation, shall be given to the rescue squad in a sealed sharps container for proper disposal. (see Medical Waste, Section VII)
16. Sterile needles intended for future use shall be kept in an area distinctly separate from used or potentially contaminated needles or sharps.
17. Mirrors shall be used, if possible, to search for fallen or lost sharps. Mirrors shall also be used, if possible, to search those areas not easily accessible.
18. Patients or suspects shall empty their own pockets rather than have employees empty them.

E. Linen, Clothing and Outer Garments:

1. General work clothes (i.e. uniforms, pants, shirts, blouses) are not intended to function as protection against a hazard and are not considered to be personal protective equipment.
2. Gowns and other protective outer clothing shall be worn whenever there is the possibility of exposure. (This includes any time there is the possibility of splashing).
3. Any clothing contaminated with blood, blood-borne pathogens, or other potentially infectious materials shall be removed as soon as possible. Care should be taken to keep unprotected hands from coming in contact with contamination.
4. Soiled linens, clothing and garments shall be bagged at the exposure site in leak-proof plastic bags. These bags must be tagged and clearly labeled.
5. Clothing and garments that are not disposable shall be thoroughly washed with hot water, at least 160 degrees Fahrenheit for 25 minutes. Clothing and garments may also be dry-cleaned. (Note that manufacturer's recommendations should be followed when supplied).

These items are NOT to be washed at home.

1. Clothing and garments that are disposable can be disposed of as medical waster in a red biohazard bag.
2. Boots and shoes should be cleaned in a 10:1 water/bleach solution.

When cleaning linens or garments:

1. Wear gloves
2. Wear gowns and protective clothing when there is a possibility of splashing.
3. Wear eye protection when there is a possibility of splashing.
4. Gloves must be worn whenever there is contact with contaminated linens, clothing or garments.

F. Human Bites:

1. Human bites (a bite inflicted by one human to another) have the potential of transmitting blood, blood-borne pathogens, or other potentially infectious materials including, but not limited to, viruses and bacteria.
2. These types of pathogens are not always blood-borne, but may also be found in saliva and/or other body fluids.

Upon occurrence of a human bite, the following procedures shall be taken:

3. Immediately wash the affected area with soap and warm water.
4. When hand-washing facilities are not readily available the employee shall thoroughly clean the area of the bite with an approved antiseptic cleanser.
5. The area of the bite shall still be washed with soap and warm water as soon as possible after the bite, even if the area was cleaned with antiseptic cleanser.
6. Immediately report the incident to your Supervisor, Department Safety Officer and/or Safety Coordinator.
7. Completely fill out an Exposure Incident Report Form (see Appendix II) and have your Supervisor sign it, giving a copy to your Supervisor, department head and Safety Coordinator
8. The Supervisor or Safety Coordinator is to first, call the hospital emergency room where the patient was transported and request that blood be drawn and tested because of the exposure and second, FAX a copy of the Documentation and Identification of Source Individual form and the cover letter (see Appendixes IV-A and IV-B) to back up the telephone request.
9. Participate in a confidential medical evaluation and follow-up as a result of the exposure if recommended. (In the event that this medical evaluation and follow-up is declined, a Medical Evaluation Declination Form must be completed).

G. Other Equipment:

1. Vehicle and other associated equipment that become contaminated with blood, blood-borne pathogens, or other potentially infectious materials shall be thoroughly washed and sanitized with 10:1 water/chlorine bleach solution or other approved disinfecting agent.
2. Equipment shall be decontaminated by following manufacturer's recommendations. In the event there are no recommendations available use a 10:1 water/chlorine bleach solution or other approved disinfectant.
3. If at all possible, do not apply mouth-to-mouth resuscitation to any victim.
4. Whenever possible, use a Bag Valve Mask (BVM) or positive pressure resuscitator to administer artificial respirations to a patient. As a last resort, use a facemask or other protective barrier with a one-way valve to administer artificial respirations.
5. Each police vehicle and emergency response vehicle shall be supplied with a supply of facemasks or other protective barriers with one-way valves and latex gloves for the purpose of administering artificial respirations.
6. After using any of the equipment, decontaminate it according to the manufacturer's recommendations or procedures outline in Section H. In the event the equipment cannot or should not be decontaminated, place it in a leak-proof plastic bag and dispose of it as regulated medical waste.
7. Mouth pipetting/suctioning of blood, blood-borne pathogens, or other potentially infectious material is prohibited.

H. Medical Waste Disposal

1. Medical waste shall be disposed of in accordance with N.J.A.C. 7:26-3A et seq. "Special Medical Waste".
2. Whenever possible, leave all contaminated and potentially contaminated materials with the ambulance that is transporting the patient so it can be disposed of at the medical facility they are going to.
3. Blood and bloody fluids may be disposed of by pouring them down a drain connected to a sanitary sewer. Personal protective equipment shall be worn to prevent exposure.
4. All contaminated gloves may be disposed of through the rescue squad, following the guidelines previously outlined in this document under Section VI-E.
5. All needles and sharps may be disposed of through the rescue squad, following guidelines previously outlined in this document under Section VI-E.

3. Hepatitis B Vaccination

- Hepatitis B vaccination series shall be offered to all designated employees at no cost to the employee.
- Hepatitis B vaccinations shall be offered to all designated employees within ten (10) working days of their designation as employees who have potential for exposure to blood, blood-borne pathogens, or other potentially infectious materials as a result of job duties.
- All Hepatitis B vaccinations will be performed by, or under the supervision of a licensed Healthcare Professional.
- All Hepatitis B vaccinations shall be provided according to the recommendations of the U.S. Public Health Service in practice at the time the vaccinations were given.
- **Employees who decline to accept Hepatitis B vaccinations offered by the municipality shall sign a waiver statement. (see Appendix I) The signed waiver shall be placed in the employee's file in the Municipal Exposure Control File held by the Personnel Clerk.**

- **Employees who have previously completed a Hepatitis B vaccination series or have completed antibody testing that reveals the employee is immune shall submit written proof or may sign the waiver that will be provided to the Personnel Clerk for permanent placement in the employee's medical file.**
- Any designated employee, who initially declines Hepatitis B vaccination but later decides to accept the vaccination, shall be provided the vaccination series at no charge provided the employee is still a designated employee.
- If a routine booster dose(s) of Hepatitis B is recommended by the U.S. Public Health Service or the New Jersey State Department of Health, all designated employees shall be offered the booster vaccination.

A. Reporting:

1. The following reporting procedure shall be adhered to following any exposure or potential exposure to blood, blood-borne pathogens, or other potentially infectious materials.
2. Immediate notification shall be made to the Supervisor in charge, Department Safety Officer and/or Safety Coordinator.
3. A full, written incident report that outlines the exposure and all other appropriate forms shall be completed and signed by the employee(s) involved in the incident. (see Appendix II)
4. A copy of the incident report shall be forwarded to the Personnel Clerk or Safety Coordinator, by the next business day, for notification and review, and for follow-up and placement in the Municipal Exposure Control File.
5. A full entry regarding all exposures shall be made in the PEOSHA Injury Log.
6. All reports of incident shall be kept confidential. Information on documented exposures will not be released without prior written consent of the employees involved.

B. Follow-Up:

1. Follow-up of all reported incidents shall be performed by the employee's Supervisor and the Safety Coordinator.
2. A confidential medical evaluation and follow-up shall be offered to the employee(s) involved in an exposure incident, at no cost to the employee.
3. If the employee(s) involved elect to receive the evaluation, it shall include the following elements:
 4. Documents on the routes of exposure and how exposure occurred.
 5. Identification and documentation on the source individual (see Appendix IV-A and IV-B) unless the employer can establish that identification is infeasible.
 6. Obtain consent and test source individual's blood as soon as possible to determine HIV or HBV infectivity and document the source's blood test results.
 7. The Supervisor or Safety Coordinator is to first, call the hospital emergency room where the patient was transported and request that blood be drawn and tested because of the exposure and second, FAX a copy of the Documentation and Identification of Source Individual Form and the cover letter (see Appendix IV-A and IV-B) to back up the telephone request.
 8. If the source individual is known to be infected with either HIV or HBV, testing will need to be repeated to determine the known infectivity.
 9. Provide the exposed employee with the source individual's test results and information about applicable disclosure laws and regulations concerning the source identity and infectious status.
 10. After obtaining consent, collect exposed employee's blood as soon as feasible after the exposure incident and test blood for HIV and HBV serological status.
 11. If the employee does not give consent for HIV serological testing during the collection of blood for baseline testing, the baseline blood sample will be preserved for at least 90 days.

12. In the event an employee refuses the offer for medical follow-up, a signed "Medical Follow-up Declination form" Shall be obtained and placed with all pertinent information pertaining to the exposure. (see Appendix III)

13. The Borough Safety Committee, consisting of the Safety Coordinator and his/her appointees, will review the circumstances of the exposure incident to determine if procedures, protocol and/or training need to be revised.

C. Communications Hazards:

1. The Borough shall offer annual training to all designated employees, as outline in Section IV, during the employee's working hours.
2. All designated employees shall be provided with a copy of this Exposure Control Plan.
3. All new employees deemed designated employees shall be trained, as per Section IV, within ten (10) working days of their designation as an employee who has the potential for exposure to blood, blood-borne pathogens, or other potentially infectious materials.
4. Warning labels shall be affixed to all containers of regulated medical waste.
5. If the container is not read or does not contain a red biohazard bag, it must be labeled with an orange or orange-red biohazard label.
6. Written material on the hazards of exposure to blood, blood-borne pathogens, or other potentially infectious materials will be made available to all designated employees.
7. The Safety Coordinator shall be available, either during regular work hours, or on an emergency basis, to answer any questions regarding this Exposure Control Plan, infectious diseases and agents, and the potential for exposure to blood, blood-borne pathogens, or other potentially infectious materials.

8. A copy of this Exposure Control Plan shall be accessible to all designated employees in accordance with 29 CFR 1910.20 (e) in the following areas:

- Police Headquarters
- Fire Headquarters
- Public Works Garage
- Rescue Squad Building
- Beach Patrol Office
- Sewer Authority Office
- Municipal Clerk's Office

9. The Exposure Control Plan will be reviewed annually or more often if needed, and amended as necessary.

D. Record Keeping:

1. Record keeping shall be maintained as noted in Section VIII and Section IX.

2. All training records shall be maintained for a minimum of three (3) years following the training date.

3. All exposure records shall be maintained permanently in the exposed or potentially exposed employee's personnel file and in the Municipal Exposure Control File for a period of thirty (30) years after employment.

4. **All records regarding Hepatitis B vaccinations shall be maintained permanently in the exposed or potentially exposed employee's medical file and in the Municipal Exposure Control File for a period of thirty (30) years after employment.**

4. Confined Space Entry and Awareness Training

A. Definitions

Confined Space- A space, which has limited openings for entry and exit, but is still large enough for an employee to enter and perform work; lacks natural ventilation which could contain or produce hazardous air contaminants and which is not intended for continuous employee occupancy.

B. Policy

Confined Space entry is prohibited by any employee of the Borough of Beach Haven.

C. Awareness Training:

- Designated employees, as regulated by OSHA 1910.146, will be provided with training annually on ways to identify confined spaces and to avoid entry.

5. Emergency Operations Plan

This plan is an all hazards approach to emergency management and covers natural disasters, technological disasters and national security crisis.

A. OPERATION AND CONTROL

1. The following is the chain of command for emergency actions within the Municipal Complex is:
 - a) The Safety Coordinator
 - b) The Council Liaison
 - c) The Emergency Management Coordinator or designee
 - d) The Chief of Police
 - e) The Municipal Clerk
2. During any emergency that affects the Municipal Complex or the employees within the complex, the following people will be notified:
 - a) Borough Manager
 - b) Council Liaison
 - c) Municipal Clerk
 - d) Police Chief or his designee
 - e) Emergency Management Coordinator or designee
 - f) Municipal Department Heads
 - g) The Long Beach Island Health Department
 - h) The Beach Haven Fire Company
 - i) The Beach Haven First Aid Squad
 - j) Other agencies with emergency functions as needed
 - k) The Ocean County Office of Emergency Management
3. At this time the Municipal Complex does not have a kitchen, backup generator or phone transfer system. Emergency Management Resources will oversee the logistics to provide support for the emergency, including essentials, fuel, etc.
4. The Complex has an approved “fire evacuation plan” to efficiently evacuate personnel. Municipal Vehicles are stored in adjacent parking lots and can easily be moved to other municipal property. All DPW vehicles are stored at the Public Works Garage located 1 blocks south.

5. The Borough Employees have received in-service training with respect to warning signals and what to do in an emergency. A reverse 911 call-in system is in place for emergencies that occur outside of normal work hours to inform employees of any closings of municipal services. All employees also receive RERP training annually.
6. There are limited activities that take place in the Municipal Complex after regular business hours. Land Use Board Meetings and other municipal related meetings may take place, at which municipal employees are involved and are familiar with warning signals and appropriate actions to take place.
7. The dissemination of emergency information for any visually and hearing impaired or non-English speaking persons will be provided as needed on an individual basis. The notification procedure process already in effect in the Alert Warning and Communication Annex will be used as needed.

B. RESPONSIBILITIES

1. The Chief of Police or his designee in conjunction with the Emergency Management Coordinator is responsible for directing the emergency response.
2. The Emergency Management Coordinator or designee is responsible for maintaining recall rosters for all emergency functions.
3. The Borough Clerk is responsible for safeguarding essential records.
4. The Safety Coordinator or designee is responsible for the preparation and distribution of employee emergency guidance materials.
5. The Safety Coordinator or designee is responsible to brief new employees on the emergency plan and the response roles they are assigned.
6. The Municipal Clerk in conjunction with the Emergency Management Coordinator, the CERT Coordinator, and the Ocean County Office of Emergency Management is responsible for developing, scheduling, and presenting training in disaster education safety measures for all employees. This broad based training addresses the hazards that are likely in the Borough of Beach Haven.
7. The Mayor or their designee is responsible for the logistical preparations and support detailed in Basic Plan VII.
8. The Safety Coordinator is the Public Information Officer for the Borough of Beach Haven and would be the official media contact during an emergency, unless or until another spokesperson was assigned as the PIO specific to the emergency. Procedures to authenticate information are included in the Public Information Officer Annex within the Borough of Beach Haven Emergency Operations Plan.

9. The Safety Coordinator or designee is responsible for updating the Municipal Complex Emergency Operations Plan and its related appendixes.
10. The Safety Coordinator or designee in conjunction with the Emergency Management Coordinator or his designee shall be responsible for exercising the plan.
11. The Safety Coordinator shall be the primary point of contact with local government. This shall include the Borough Council and the neighboring local governments.
12. The Safety Coordinator would continue to oversee all departments and insure continuation of government services as well as provide resources to aid in the emergency as needed. The Municipal Clerk would continue with their responsibilities and aid in the emergency as needed and referenced in the Emergency Operations Plan.
13. Each department head and or person responsible for an emergency function will keep accurate detailed records of actions taken during an emergency and forward reports of these actions to the Emergency Management Coordinator who is responsible for records and reports received from or passed to the county or higher levels of government and for starting and maintaining a significant events log of the emergency. Each department head is responsible for maintaining records of the department's expenditures and for ensuring that these expenditure records are forwarded to the Borough Chief Financial Officer for processing. The Emergency Management Coordinator is responsible for the record of expenditures associated with the general operation of the Office of Emergency Management.

ANNEX	RESPONSIBLE AGENT BY TITLE	MAJOR TASKS ASSIGNED
Alert, Warning Communications	Chief of Police or designee	*Alert Emergency Personnel *Warn Community *Supervise Scene
Facility Shutdown	Borough Manager	*Supervise shutdown of equipment & utilities *Provide Damage Control *Facility Protection
Evacuation	Chief of Police Or his designee	*Evacuation of Occupants *Relocation of Property *Scene Security

Shelter	Emergency Management Coordinator	*Direct Shelter Tasks *Coordinate safe shelter
Emergency Services	Chief of Police or designee	*Coordinate Fire & Rescue *Scene Security *Criminal Investigations

6. Hazardous Communication and Right To Know.

A. Definitions:

Chemical hazard: Any chemical that poses a threat to man, health and/or environment.

Training: The Borough will provide training by a qualified person, to every employee who is exposed or potentially exposed to hazardous chemicals in the workplace.

B. Responsibility of the Borough:

- 1) The Borough has the responsibility to inform employees of potential health and safety risks of hazardous substances.
- 2) The Borough will maintain a written record of training provided to the employees.
- 3) The Borough will maintain a Central file containing:
 - Completed Right To Know Survey for the Borough
 - Hazardous Substance Fact Sheets
 - Material Safety Data Sheets
 - The Right To Know Hazardous Substance list.
- 4) The Borough will make all information accessible to employees upon request; display a Department of Health Right To Know poster in every work area; and ensure that all hazardous substances are clearly labeled and in proper containers.

7. Energy Control Plan/ Lock out Tag out

Lock out/ Tag out- neutralization of energy sources by methods such as:

- Locking out
- Blanking and bleeding
- Disconnecting
- Securing
- Cribbing and bracing

Potentially Hazardous Energy:

- Kinetic (conveyors, auger, pulleys, wheels)
- Electrical
- Stored (hydraulic, pneumatic, thermal, springs, process lines)

Authorized employee: Employee in charge of maintenance and service of Borough owned machines and equipment.

A. Procedures:

- 1) Training in energy control procedures will be provided to authorized Borough employees.
- 2) Authorized employees will use all energy isolating devices as needed for the lockout/tagout program.
- 3) Authorized employees will ensure that equipment and machines are maintained and serviced in accordance with the manufacturer's specifications.
- 4) Authorized employees should notify the department head if energy isolating devices need to be replaced.
- 5) The Borough will provide retraining for all authorized employees whenever an inspection or the Borough believes that there are inadequacies in the energy control procedure.
- 6) The department heads will keep record of employee training.

8. Fire Prevention

Fire Extinguisher- holds extinguishing agent such as water or chemicals and is labeled/ symbolized according to what classes of fire it can control or extinguish.

Classes:

- Class A- Normal combustibles such as wood, cloth, paper, rubber and plastics.
- Class B- Flammable and combustibles such as liquids, gases and greases.
- Class C- Energized electrical source.
- Class D- Combustible metals, such as magnesium, titanium, zirconium and sodium.

A. Procedures in event of a fire:

- 1) Warn others, sound the fire alarm and call the fire department;
- 2) Follow the proper procedures for evacuating the building;
- 3) Be familiar with the location of exits, fire extinguishers, escape routes, and fire alarms;
- 4) Store all flammable or combustible liquids in approved, labeled containers;
- 5) Store all oily rags and waste in covered metal containers;
- 6) Observe all “No Smoking” rules.
- 7) Procedures for using a portable fire extinguisher:
 - Pull the pin
 - Aim the extinguisher nozzle at the base of the fire
 - Squeeze or press the handle
 - Sweep from side to side at the base of the fire until it goes out

9. Hearing Conservation

A. Responsibility:

The Borough will provide hearing protection, training and annual hearing test to all employees working with or in an area with equipment that have noise levels equal to or exceeding an eight- hour time-weighted average sound limit of 85 decibels.

B. Procedures:

- 1) Noise monitoring will be conducted by the department head with sound level meters at the discretion of the Borough Manager.
- 2) Department heads will notify the Safety Coordinator when there is a change of equipment or alteration of the building structure.
- 3) Affected employees will be required to attend training on the proper use and wearing of hearing protection.
- 4) Training will consist of:
 - how noise affects hearing and hearing loss;
 - review of OSHA hearing protection standard;
 - explanation of audiometric testing;
 - rules and procedures;
 - locations within Borough property where hearing protection is required;

- how to use and care for hearing protectors.
- 5) Training records will be maintained in the Borough Clerk's office.
 - 6) Managers, supervisors and employees are required to wear the prescribed hearing protection while working in any area that is designated as a high noise area.
 - 7) The Borough will provide hearing protection at no cost to employees, who perform tasks having a high noise exposure, and replace as necessary. The supervisor is responsible for requiring employees to wear hearing protection when noise levels reach or exceed 85 dBA. Personal stereos or "Walkmen" are not approved hearing protection devices.
 - 8) Signage is required in areas that necessitate hearing protection.
 - 9) Prefomed earplugs and earmuffs should be washed periodically and stored in a clean area. Foam inserts should be discarded after each use.
 - 10) The department head will keep a log of the areas and job tasks designated as requiring hearing protection and the personnel affected.
 - 11) Borough employees who have time weighted average noise exposures of 85 DBA or greater for an (8) hour work shift will be required to have both a baseline and annual audiogram performed by institutions prescribed by the Borough. Audiograms will be performed annually and is the responsibility of the employee to schedule.
 - 12) If an annual audiogram shows that an employee has suffered a standard threshold shift, the employee will be retested within (30) days after. If the retest confirms the threshold shift, the employee will be notified in writing within (21) days of the confirmation and be refitted with hearing protection.

10. Hot Work

Hot work- gas or electric welding, cutting, burning, brazing or any task that may produce sparks heat or slag capable of causing a fire.

A. Procedures:

- 1) Borough employees are responsible for the safe handling and use of hot work tools.
- 2) Borough employees will determine if combustible materials or hazardous areas are present or can be impacted by hot work.

- 3) Before beginning work, Borough employees will:
- Move hot work to a location free from combustibles;
 - If work can not be moved, move combustibles to a safe distance from the hot work or use a combustible shield;
 - When performing hot work outside of designated area, secure authorization from a supervisor;
 - Have a fire watch available during the work and have the area inspected after work is done;
 - Have fire extinguishing equipment located near the site of hot work.
- 4) Employee Protective Equipment Requirements:
- Fire resistant clothing
 - Fire resistant gauntlet gloves
 - Flame resistant aprons
 - Flame resistant leggings
 - Ankle length shoes with safety toe cap
 - Working overhead use a shoulder cape and flame resistant skull cap
 - Use ear plugs for noisy jobs
 - Helmets with appropriate shade lens
 - Goggles – when using gas welding or oxygen cutting operations
 - Local exhaust hoods and/ or sufficient natural or mechanical ventilation at the site of the welding or cutting operation.

11. Indoor Air Quality

- A. The Safety Coordinator will be responsible for the Borough's compliance with the IAQ standard and will receive employee concerns/complaints about indoor air quality, conduct investigations, facilitate repairs and review the program annually.
- B. The Borough will follow manufacturer's specifications to replace heating, ventilation and air conditioning systems in the work place. Damaged and inoperable components will be repaired or replaced as needed.
- C. The Borough Clerk will retain records of documentation of maintenance and repairs to the ventilation systems for at least 3 years.
- D. IAQ compliance documents will be made available to employees and PEOSH through the Borough Clerk's office, these documents include:
- 1) As-built construction documents
 - 2) HVAC system commissioning reports
 - 3) HVAC systems testing, adjusting and balancing reports

- 4) Operations and maintenance manuals
- 5) Water treatment logs
- 6) Operator training materials

E. Investigating Complaints:

- 1) Borough employees that experience health symptoms that they believe are related to poor indoor air quality should notify the Safety Coordinator to investigate their concerns.
- 2) If the Borough receives written notification from PEOSH that an employee complaint has been filed with PEOSH, the Borough will conduct an inquiry into the allegations. The findings of the inquiry and the corrective action to be taken will be provided in writing to PEOSH within 15 working days of receipt and copies will be retained by the Borough Clerk's office.
- 3) The Safety Coordinator will notify employees at least 24 hours in advance, immediately in emergency situations, of work to be performed on a building that may release air contaminants into their work area.
- 4) Borough Employees should notify the Safety Coordinator immediately if there is evidence of water intrusion so that corrective action can be taken.
- 5) The Safety Coordinator will identify the location of outside air intakes and identify potential contamination sources nearby. Periodic inspections will be conducted to ensure that the intakes remain clear of contaminants. If contamination occurs the Safety Coordinator will make arrangements to relocate the intake.
- 6) The Safety Coordinator will identify and remedy point sources of contaminants in the building through exhaust ventilation. Exhaust fans will be periodically inspected.

F. Renovation and Construction Projects

- 1) During renovations and construction projects that have the potential to expel dust, stone and other small particles, toxic gases or other potentially harmful substances into work areas in quantities hazardous to health, will be controlled in order to minimize employee exposure in the following ways:
 - a) Obtain Material Safety Data Sheets for all products to be utilized in the project and maintain on site throughout the project;
 - b) Choose the least toxic product that is economically feasible;
 - c) Consider performing the project when the building is least occupied;
 - d) Consider temporarily relocating employees in affected area;

- e) Notify potentially affected employees at least 24 hours prior to the project;
- f) Isolate the work area from occupied areas;
- g) Use mechanical ventilation and local exhaust ventilation to maintain a negative pressure gradient between the work area and occupied areas.

2) If the work is being done by an outside contractor, the Safety Coordinator will make sure they comply with the all requirements of PEOSH and IAQ standard.

3) Borough Employees that are concerned about potential exposure during or after a renovation/ construction should notify their supervisor. All exposures should be reported to the immediate supervisor.

G. Job Hazard Analysis

The Borough requires that each department head conduct a written workplace hazard assessment of their work area annually.

H. Respiratory Protection

- 1) The Borough will require supervisors and employees who are exposed to respiratory hazards, to conduct an assessment of tasks and possible airborne hazards.
- 2) The Borough will provide exposed employees with appropriate respirators. The employee must be medically approved as fit prior to use of a respirator.

I. Traffic Control Procedure:

- 1) Unless deemed an emergency, work requiring the closure of any route of travel should be scheduled with the Beach Haven Police Department.
- 2) In the event of an emergency and/or conditions beyond the control of the Borough, lane closings may take place at anytime.
- 3) When possible, closings should be scheduled at least 24 hours in advanced.
- 4) When a work zone encroaches into any route of traffic, that route should be closed.
- 5) All work zones shall be established as required by the traffic control plan and in consideration of advice from the Beach Haven Police Department
- 6) All traffic control and traffic protection devices shall comply with the Manual on Uniform Traffic Control Devices (MUTCD).
- 7) Unless necessary, no more than one lane in a route of traffic should be closed at any one time.

- 8) The closing and reopening of all lanes should include the assistance of the Beach Haven Police Department.
- 9) Vehicles setting up lane or shoulder closings must always unload and place the equipment traveling in the direction of traffic.
- 10) When removing traffic control and traffic protection devices, equipment will be removed backing against the traffic.
- 11) Amber flashers must be operated during all these operations until normal speed is allowed.
- 12) When necessary, the Beach Haven Police Department should provide traffic control during the installation and removal of all traffic control and traffic protection devices.
- 13) Traffic cones should have 2 reflective collars and must be placed neatly and accurately.
- 14) Whenever signs are not being used for traffic control or traffic protection purposes, it must be concealed from traffic.
- 15) Traffic control or traffic protection signs, cones and lights should be placed in advance of road work.
- 16) Whenever any equipment occupying the shoulder will be positioned or operated within 3 feet of traveled lane, the lane adjacent to the shoulder shall also be closed.
- 17) Right lane closing interfering with entry and exit drives and cross streets must arrange cones or signs in a way as to not impede the flow of traffic.
- 18) Unless deemed an emergency, lane closings are not permitted in inclement weather.
- 19) Complete closing of a roadway must be done with the assistance of the Beach Haven Police Department.
- 20) All employees in the work zone have the right-of-way and will wear retro reflective vests.
- 21) If it is necessary to walk around the work zone, walk facing the direction of traffic behind the protection afforded by the traffic control devices.