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Safety & Security Manual

(Cooper Campus)

(Updated August 2013)

Additional Information
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EMERGENCY CONTACTS
(Cooper Campus)

- **911** for ***Emergencies***

- **UKPD 859-257-1616**

- Security/Safety Operations Manager (Todd Gray):
  - ***859-246-6422***
  - ***859-753-8446 (cell)***

- Security/Safety Officer (Ray Sayre):
  - 859-227-5351 (cell)
  - 859-246-6794

- Michael Ball - 859-509-4556
  - *Maintenance and Operations*

- Rob Knight – 859-351-2060
  - *Dean of Operations*

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PURPOSE

The purpose of this manual is to provide an overview of the safety procedures in use at the Bluegrass Community & Technical College Cooper Campus. As part of the Memorandum of Agreement with the University of Kentucky, the Cooper Campus must follow the safety and security policies of UK, therefore, lab policies and security guidelines in this manual for Cooper Campus follow the UK protocols. *The Cooper Campus is also under the jurisdiction of the UK Police Department.*

PLAN FOR REGULAR EVALUATION OF PROCEDURES

The Security and Safety Committee is comprised of faculty and staff from various areas of the college. The Bloodborne Pathogens Officer and Chemical Hygiene Officer are also members of this committee. The Committee members will evaluate the Safety and Security Manual at the end of each academic year for safety and security policy correctness and revise it accordingly. In the interim, when a substantive change arises, it will be communicated college-wide via e-mail, and the manual will be updated. The Safety and Security Manual for Cooper Campus is located on the BCTC safety website:
http://www.bluegrass.kctcs.edu/en/Safety_and_Security.aspx
Each division on Cooper Campus should print a hardcopy of the updated Safety and Security Manual for immediate reference.

During the academic year, the Committee will review the situation and procedures used and recommend corrective measures, as needed, to avoid future occurrences. An electronic communication will be sent to all faculty and staff if procedures are amended. These amendments will also be incorporated in the revised Safety & Security Manual.

REPORTING A SAFETY HAZARD OR CONCERN

The Security and Safety Committee is charged with the review and recommendation of all policies concerning safety issues. A concern may be reported to the Operations Manager of Security and Safety or to any member of the Security and Safety Committee.

LOCATION OF EQUIPMENT

FIRST AID KIT - First aid kits at Cooper Campus are located in the Records Office, 203 Oswald Building, the Maintenance and Operations Office, 128 Oswald Building, and in all Division suites. Maintenance and Operations will check the kits and replenish first aid supplies as needed.

AED (Defibrillator) – The AED is located in the hallway across from 206, Oswald Building at Cooper Campus.

EYE WASH EQUIPMENT - Eye wash equipment is located in rooms 244, 245, 250, 302, 322, 324, 326, and 343 Oswald Building, Cooper Campus. This should be utilized if any individual experiences an accidental splash of a hazardous substance to the eye(s).

SAFETY SHOWER - Safety showers are located in rooms 244, 245, and 322 Oswald Building, Cooper Campus. These should be utilized if a hazardous chemical is accidentally splashed on parts of the body.

SPILL CONTROL PLAN - Each room that contains chemicals must have a Chemical Control Plan in the Chemical Hygiene Plan.

ACCIDENT AND EMERGENCY PROCEDURES

FOR NON-BCTC EMPLOYEES

1. General Guidelines
   a. If the emergency occurs in the classroom, the instructor of the class is responsible for carrying out the emergency procedures.
   b. If the emergency occurs outside the classroom, the first college employee on the scene is responsible for carrying out the emergency procedures.
   c. The emergency number is **911** Police, Fire, or EMS**.** UK Police should also be contacted directly at **257-1616**.
   d. A report of all accidents/emergencies, etc., should be filed on form FM84 within 24 hours and submitted to the Operations Manager of Security and Safety, 202-B Oswald Building. Report forms are available on the intranet, "The Point": https://thepoint.kctcs.edu/forms/Employee%20Forms/Forms/Facilities%20Management.aspx . Key in "kctcsacc\your User Name", then your password.
   e. Procedures apply to accidents, emergencies, etc., that occur on the Cooper Campus, including leased facilities and other BCTC campuses and extended campus sites.

2. Specific Procedures
   a. The faculty/staff member should call **911.** UK Police should also be contacted directly at **257-1616.** Cooper Security should also be contacted at **246-6422** or **227-5351** to advise of the emergency location so that Police and Fire Departments can be directed accordingly.
      - Stay with the victim until emergency treatment personnel arrive. Employees are advised not to transport the victim under any circumstances.
      - Determine the identity of victim and provide data to emergency personnel and/or the Cooper Security Officer.
   b. If individual does not want to be taken by ambulance, call the Cooper Security and Safety Officer at 246-6422, who will work with Records & Registrar, and they will contact family or relatives of the victim and arrange for transportation as needed.
   c. A report of all accidents/emergencies, etc., should be filed on form FM84 within 24 hours and submitted to the Operations Manager of Security and Safety, 202-B Oswald Building. Report forms are available on the intranet, "The Point": https://thepoint.kctcs.edu/forms/Employee%20Forms/Forms/Facilities%20Management.aspx . Key in "kctcsacc\your User Name", then your password.

FOR BCTC EMPLOYEES

KCTCS procedures are followed for reporting occupational injuries that occur in the workplace. ***In order to qualify for Workers' Compensation, a call must be made to (888) 860-0302, Monday-Friday, 8:00 a.m. – 4:30 p.m., within 24 hours of the incident.***

To have medical care paid for in a work-related injury; the employee ***must*** *immediately notify his/her supervisor-- when possible notice should be in writing. Employee's failure to notify his/her supervisor could result in denial of benefits. The employee may select the physician or medical facility to render care.*

For any questions relative to Workers Compensation, call toll free (502) 546-6846 between 8 a.m. and 4:30 p.m. Monday – Friday or contact BCTC Human Resources.

To report work related incidents:

1. Employee should contact his/her supervisor immediately on the day the incident occurs. The supervisor for a faculty member is his/her division Assistant Dean.
2. Supervisor should call (888) 860-0302 to report injury within the first 24 hours of the incident. ***If injury occurs in the evening hours or on the weekend, the injury must be reported at the beginning of the next working day.***
3. Supervisor should complete the injury report form FM84 within 24 hours of the incident. The form is available on the intranet, "The Point": https://thepoint.kctcs.edu/forms/Employee%20Forms/Forms/Facilities%20Management.aspx . Key in "kctcsacc\your User Name", then your password.
4. Supervisor or employee should contact BCTC Human Resources to obtain Worker's Comp forms.

EMERGENCY EVACUATION PLAN

1. Emergency exit plans are posted on the doors of each room. Instructors should make students aware of this plan at the beginning of each semester, pointing out the exit door that applies to that location and the proper method in which to exit the room. Instructors need to review, every semester, the evacuation procedures for disabled students as described in the next section.
2. When the fire alarm rings continuously, everyone should immediately stop all activity and prepare to leave the building.
3. Faculty and staff should turn off all lights and equipment and close windows and doors. The last person out of classrooms should be the instructor. If possible, the instructor should take a head count of students. As time allows, lock office doors.
4. All restrooms are to be physically checked by the safety monitors before exiting the building.
5. Everyone should walk single file to the designated exit. Elevators should not be used. After leaving the building, all persons must be at least 40 feet from the building (80 feet for two-story buildings).
6. An "all clear," two (2) short blasts of the bullhorn or verbal clearance, will be given by *Crisis Management Team* (CMT) members.

ASSISTING PEOPLE WITH DISABILITIES FROM BUILDINGS IN AN EMERGENCY

At the beginning of every semester, instructors in classrooms should:

- Identify all students in his/her classes who are mobility impaired (students who would have difficulty responding quickly in an emergency).
- Obtain the names of 4-6 classmates who agree to assist the mobility-impaired student in the event of an emergency. This will ensure that someone will be available on any given day.
- Make sure the mobility-impaired student knows who will assist him/her in the event of an emergency.

Evacuation Procedures

- The mobility-impaired student should be assisted outside.
- If not on an exit floor, the mobility-impaired student should be assisted to the *nearest stairwell*. (Do not use an elevator.) At least one person should remain with this student. Another person should find an emergency official (fireman or policeman) to actually do the evacuating.

EMERGENCY EVACUATION SITUATIONS

FIRE

A faculty or staff member who comes upon a fire or causes a fire should use his/her judgment and act accordingly.

- Pull the nearest fire alarm to evacuate the area.
- Do not attempt to extinguish the fire unless you have been trained.
- *Crisis Management Team* members will normally assist emergency personnel upon their arrival. If this is not the case, then be prepared to meet emergency personnel and provide the necessary details.

If the fire occurs in a laboratory, the faculty or staff member present and in charge of the lab should be prepared to deal with it. The correct type or types of fire extinguishers should be present in all laboratories.

- Assess the situation and only attempt to extinguish the fire if it is small and you have been trained or
- Confine fire by closing the lab doors and windows.
- Turn off equipment and gas if possible.
- Activate the fire alarm and evacuate the building.
- *Crisis Management Team* members will normally assist emergency personnel upon their arrival. If this is not the case, meet emergency personnel and provide details of the fire and indicate substances that are involved, etc.

BOMB THREATS

A faculty or staff member receiving a bomb threat should ascertain as much information as possible about the bomb and its location:

- What is the exact location of the bomb?
- When is the bomb going to explode?
- What does the bomb look like?
- What kind of bomb is it?
- Why was it placed?
- Who is speaking? (note caller's gender, voice characteristics, background noises, and type of language). ***Note: all telephones have a Caller ID; therefore, note and record the phone number and name of caller, and time of call on the display screen.***
- Is there any message from the caller?
- Call the Cooper Security Office at **246-6422** and **55911** to report bomb threat (Crisis Management Team will be activated and will contact UK Police).
- Do not touch any suspicious objects. Evacuation of the building will be decided by Police or Fire Department officials on the scene. The alarm to evacuate the building will be 2 blasts of the bullhorn, which will be continuous until the building is totally evacuated or activation of the fire alarm system per the judgment of emergency services. *Leave the building immediately, and go to a location as far away from the building as possible; otherwise use discretion.*

Follow emergency evacuation plan.

TORNADO PLAN

In the event of a tornado, the goal is for people to go to the safest location in the buildings away from glassed areas. The safest location is the center of the lower level of the buildings. In these areas, there is less danger of flying debris and building collapse.

Crisis Management Team members will *give short blasts* of the emergency siren in the event of a tornado, and/or the verbal command to take shelter. All students, faculty and staff must:

- Turn off lights.
- Close doors.
- Seek shelter in an internal office or hallway.
- Avoid areas with glass if at all possible.
- Sit with backs directly against the wall.
- Cover heads with hands.
- Follow the directions of the Incident Commander and Crisis Management Team.

An “all clear” announcement over the bullhorn, will be given by the Incident Commander among the Crisis Management Team.

EARTHQUAKES

During an earthquake, action should be taken at the first indication of ground shaking. Faculty, staff, and students should:

1. ***If indoors***, stay inside. Move away from windows, shelves, heavy objects and furniture that may fall. Take cover under a table or desk or in a strong doorway (it is important to anticipate that doors may slam shut during an earthquake.)

    - In halls, stairways, or other areas where no cover is available, move to the interior wall. Turn away from windows, kneel alongside the wall, bend head close to knees, cover sides of head with elbows, and clasp hands firmly behind neck.

    - In the Library, immediately move away from where books and bookshelves may fall and take appropriate cover.

    - In laboratories, extinguish all burners and turn off the main gas valve before taking cover. Stay clear of hazardous chemicals that may spill.

    - Follow the verbal directions of the Crisis Management Team.

2. ***If outdoors***, move to an open space, away from buildings and overhead power lines. Lie down or crouch to the ground. Continue to observe and be aware of dangers that may demand movement.

Workplace Violence Policy

The Bluegrass District Colleges provides a safe workplace for all employees. To ensure a safe workplace and to reduce the risk of violence, all employees should review and understand all provisions of this Workplace Violence Policy. Refer to the KCTCS Workplace Violence Policy 3.3.25 – 3.3.25.4 at http://legacy.kctcs.edu/employee/policies/volumeII/section3.cfm for a more detailed explanation of what constitutes violence in the workplace. That policy is most instructive in stating the KCTCS position of zero tolerance for workplace violence, defining the responsibilities of all KCTCS employees in dealing with workplace violence and preventing workplace violence.

Prohibited Conduct

Any type of workplace violence committed by or against employees, students, or any individuals on College premises will not be tolerated. Employees, students, and any individuals on College premises are prohibited from making threats or engaging in violent activities.

The following list of behaviors, while not inclusive, provides examples of conduct that are prohibited.

- Causing physical injury to another person;
- Making threatening remarks;
- Aggressive or hostile behavior that creates a reasonable fear of injury to another person or subjects another individual to emotional distress;
- Intentionally damaging College property or property of another employee;
- Possession of a weapon while on College property or while on College business;
- Committing acts motivated by, or related to, sexual harassment or domestic violence.

Reporting Procedures

Any potentially dangerous situations must be reported immediately to a supervisor. Reports can be made anonymously, and all reported incidents will be investigated by appropriate officials including the Operations Manager for Security and Safety. Reports or incidents warranting confidentiality will be handled appropriately and information will be disclosed to others only on a need-to-know basis. All parties involved in a situation will be counseled, and the results of investigations will be discussed with them. The College will actively intervene at any indication of a possibly hostile or violent situation.

Terrorist Intruder in the Building

- Remain calm
- Take cover in a room and lock the door if possible, otherwise place heavy furniture against the door, stay clear of the doorway
- Stay away from the windows and stay out of sight
- If other people are in the room, delegate one person to call **911** and report pertinent information to law enforcement authorities
- Wait to be released from the room until you get clear instructions from proper law enforcement authorities
- If the crisis is a hostage situation, follow the instructions of the assailant, do not antagonize him/her, and try to remain calm

(If you are outside, go to the closest building and go to a room, and follow above steps.)

Counseling will be made available to students, faculty, and staff in emergency situations.

SHELTER-IN-PLACE (BIOLOGICAL & CHEMICAL AGENTS)

Shelter-in-Place is a tool to protect students, faculty and staff from exposure to biological and chemical agents released into the atmosphere. The release may be accidental or intentional in the form of a weapon of mass destruction**.** Defense against chemical attacks is straight forward, because the symptoms are acute (quickly noticed) in the community. Defense against biological attacks is difficult because awareness of such attacks usually doesn't take place until days or weeks after they occur. **Typically conditions will be worse outside than inside.**

If biological or chemical agents are released outside one of the Cooper Drive Campus buildings:

- Notify UK Police—Dial **911** or, if calling on cell phone, **257-1616**
- Shut down all HVAC units
- Close all doors and windows
- Move to central location
- Do not leave the building unless instructed to do so by the UK Police Department and/or Fire Department.

TRAINING REQUIREMENTS

Many faculty and staff positions require employees to have additional training in various areas to ensure the safety of all employees. Employees should be aware of any training they need and should ask their direct supervisor if there is any additional training they require for their position. Three specific areas covered by OSHA standards are explained below. However, this is not necessarily a complete list of training requirements. It is expected that employees who work off campus, such as at clinical sites, receive the appropriate training for that site.

I. WORKPLACE HAZARD COMMUNICATION/RIGHT TO KNOW

Purpose

The Workplace Hazardous Communications Act was enacted to ensure that all workers have readily available health and safety information regarding any hazardous materials they work with.

Material Safety Data Sheets (MSDS)

All hazardous substances are required by law to have an associated MSD sheet. The MSDS contains information, including the reactivity of the substance, personal protective equipment to be worn when using the material, chronic and acute health effects and first aid procedures.

All employees should have access to the MSD sheets for any material that they use. There are various sources for these sheets:

- The supplier. If they are not sent with your order you may request them from the company.

- The collection of MSD sheets in the Operations Manager of Security and Safety office, 241 Moloney Building.

- The World Wide Web. There are several sources on the World Wide Web from which MSD sheets can be downloaded and printed. Many of the best sites can be accessed from the following web site**:** http://www.ilpi.com/msds/index.html

The Chemical Hygiene Officer, Rae Ann Gill, ext. 56458, is available to advise employees about specific information on MSD sheets.

Training

In order to ensure that employees understand the health and safety information listed on labels and MSD sheets, all part-time and full-time employees are required to have basic MSDS training. This training describes some basic concepts about exposure to hazardous materials, explains the federal regulation concerning the "right to know" and also explains the codes and use of protective equipment. This training may be provided in a live session by the Chemical Hygiene Officer or by viewing a video recording. Documentation of each employee's MSDS training will be kept in the Human Resources Office.

II. BLOODBORNE PATHOGENS

Purpose

The purpose of the bloodborne pathogen standard is to safeguard the employees within the college and to eliminate or reduce employee occupational exposure to human blood and/or certain body fluids, which may contain infectious bloodborne pathogens. A comprehensive Bloodborne Pathogen Exposure Control Manual has been written for the College in accordance with OSHA Bloodborne Pathogen standard 29 CFR Section 1910.1030.

Exposure Control Manual

The purpose of the Exposure Control Manual is to provide a written description of the Exposure Control Plan in effect at the College so all individuals who might have occupational exposure to bloodborne pathogens will know and understand the infection control program.

The written Exposure Control Plan of the College will provide the specific components, information, and training required to protect all employees who have occupational exposure to potentially infectious bloodborne pathogens. The program consists of the following main components:

¨The Exposure Determination
¨Methods of Compliance
¨Engineering & Work Practice Controls
¨Medical & Training Records
Hepatitis B Vaccination Program
Use of Personal Protective Equipment
¨ Reporting & Managing Exposure Incidents
¨Labeling & Waste Management

Training

All employees who have occupational exposure to bloodborne pathogens must complete the OSHA-required annual training and confidential recordkeeping forms. A copy of the Exposure Control Manual is made available to all employees with occupational exposure and is updated by the Bloodborne Pathogens Officer, Constance Yeager, ext. 56876.

III. THE LAB STANDARD AND CHEMICAL HYGIENE PLAN TRAINING

Purpose

The purpose of the lab standard and chemical hygiene plan training is to ensure all laboratory workers are protected from the health and safety hazards associated with

hazardous chemicals with which they work. In 1990 OSHA instituted the "Occupational Exposures to Hazardous Chemicals in Laboratories" standard 29 CFR 1910.1450, generally referred to as the "Lab Standard." Although the standard applies specifically to paid employees, it is University policy that its principles apply to students in laboratories as well.

Chemical Hygiene Plan

As part of the BCTC compliance with the Lab Standard, a Model Chemical Hygiene Plan was written and is updated annually. The Chemical Hygiene Plan includes such topics as "standard operating procedures; criteria to determine and implement specific control measures information and training requirements; circumstances under which a particular laboratory function will require prior approval; provisions for medical consultation and medical exams; designation of a chemical hygiene officer and additional precautions for work with select carcinogens, reproductive toxins and extremely toxic substances." (BCTC Chemical Hygiene Plan:
http://bluegrass.kctcs.edu/Safety_and_Security.aspx

In addition to the model plan, every laboratory must have written guidelines for procedures that are specific to that laboratory. These procedures should include, but are not limited to, waste disposal procedures, spill control measures, and location and use of personal protective equipment.

Required Training for all BCTC employees who work with chemicals:

All employees who work in a laboratory with chemicals in an experimental manner must obtain the appropriate training **prior** to beginning work in that laboratory. The Lab Standard requires that

(i) There are three general classes which are required by Bluegrass Community & Technical College:

1. OSHA Laboratory Standard (Chemical Hygiene Plan) Training (DVD)
2. Hazardous Waste Training (class offered by the Chemical Hygiene Officer or Power point presentation with quiz)
3. Fire Extinguisher Use (Click and Train CD)

The OSHA Laboratory Standard will be available in the library on reserve. It can be checked out at any time.
Hazardous Waste Training will be offered by the Chemical Hygiene Officer on an annual basis. Notification of class and times will be made available to all who is required to complete this training. Otherwise, if an employee cannot attend the training, a power point presentation is available to view and then a quiz must be completed.

All participants will receive a certificate after they complete the session(s). After completing the quizzes for each training session, please send the signed and dated copy of the quiz to the BCTC Chemical Hygiene Officer and certificates will be generated and sent to HR and/or to supervisors to keep copies in the laboratory safety binder in each lab in which they will be working.

(ii) In addition, all employees must receive **lab specific training** from the lab supervisor. This training must be documented by having the employee and supervisor sign the form in Appendix III of the Chemical Hygiene Plan. Lab specific training must include:

- The location and availability of the OSHA Lab Standard, the laboratory's Chemical Hygiene Plan, chemical reference materials (such as material safety data sheets), and permissible exposure limits for applicable chemicals;

- The signs and symptoms associated with exposure to the hazardous chemicals with which employees work;

- Detection methods and observations that may be used to detect the presence or release of a hazardous chemical in the lab (e.g. odor, monitoring equipment, or visual appearance);

- The physical and health hazards of the chemicals with which employees work;

- Work practices, personal protective equipment and emergency procedures to be used to ensure protection from overexposure to the hazardous chemicals with which employees work;

- How to use personal protective equipment and limitations of personal protective equipment; and,

- How to properly use safety showers, eye wash stations and other safety equipment that is present in the laboratory space.

In addition to the training provided by the Laboratory Supervisor, it is the employee's responsibility to request information and training when unsure how to handle a hazardous chemical or laboratory procedure and to follow all health and safety rules while working in the lab.

HAZARDOUS MATERIALS HANDLING

1. Labeling and Storage:

Each container of a hazardous material is required to have a label indicating its fire, health, reactivity and protective clothing rating, its mode of entry into the body, its target organ(s) and the worst possible effects of exposure. The information can be obtained from its MSDS or an empty container with a completed label. If there is any uncertainty, the MSDS Coordinator should be contacted.

Most of the recently acquired hazardous materials are shipped with appropriate labels. Provided the labels remain intact and are not defaced, further information does not need to be added.

A larger container may hold smaller containers of the substance. The smaller container does not need a separate label with all the above information if it will be used by one employee during one eight-hour work period. However, it remains the employee's responsibility to read and use wisely the information on the label of the larger container.

Chemical Storage Chemicals should be stored by compatibility, not simply by alphabetical arrangement. Oxidizers should be separated from organics, air/water

reactives must be kept dry and cyanides should be stored away from acids. (See Appendix V in the BCTC Chemical Hygiene Plan at http://bluegrass.kctcs.edu/Safety_and_Security.aspx for examples of incompatible chemicals).

Flammable liquids shall be limited to 10 gallons per 100 ft2. Half that amount must be in a flammable liquid storage cabinet. Please review fact sheet at http://ehs.uky.edu/fire/flstpol1.html
Storage of flammables in a refrigerator is prohibited unless it is approved for such storage. Such refrigerators are designed not to spark inside the refrigerator. If refrigerated storage is needed, choose either a flammable-safe or explosion-proof refrigerator. More information about the different types of refrigerators can be found at the following Web page, http://ehs.uky.edu/ohs/refrigerators.pdf

Peroxide forming chemicals shall be labeled when opened and disposed of by manufacturer's recommendation or within specified time as discussed at http://ehs.uky.edu/ohs/peroxide.htm or whichever time is shorter.

2. Hazardous Waste Disposal:

Chemical Hazardous Waste

All persons who generate hazardous chemical waste must attend the hazardous waste training class given by the BCTC Chemical Hygiene Officer or watch the Hazardous Waste Training power point and complete a quiz – Please see Training Requirements. The general procedures for disposing of chemical hazardous waste are outlined below.

• Place all waste to be disposed of in one central, secure location.

• Waste must be placed in an appropriate container with a secure cap/seal. The container must carry a label, which states it is hazardous waste and lists all the contents without abbreviations or chemical symbols.

• A waste tag must be completed for each container in the University of KY's E-Trax system. A copy of the E-Trax waste tag must be kept for each tag generated. Please make a file to keep all copies of waste tags submitted for pick-up by the University of Kentucky Environmental Management Group (UKEM).

• The waste will be picked up UKEM. Ensure that a contact person is available to assist in the pickup and to answer any questions.

Biohazardous Waste

- Swabs, wipes, etc. are to be placed in leak-proof plastic trash bags, tightly sealed and disposed of as regular trash, i.e. landfill.

- Needles and syringes are to be disposed of through the Office of Environmental Health and Safety by incineration.

- Any measurable volume of human body fluids must be autoclaved and disposed of through the Office of Environmental Health and Safety.

"Autoclaving is a commonly used procedure for treating bio-hazardous (infectious) waste. The following bags are recommended for autoclaving infectious materials: clear or orange (do not use red, see below) polyethylene plastic bags that are strong, pliable, lead and puncture resistant and have a clearly visible biohazard symbol itself) which darkens to show proper autoclaving temperature has been reached.

See the UK Bio-safety Manual for infectious waste guidelines and for a list of materials, which must be rendered non-infectious by autoclaving. Do not place needles, broken glass or other sharp objects in autoclave bags. Following autoclaving, these bags will be picked up by the custodial staff and disposed of with the regular trash. Treated waste is considered solid waste and may be safely land-filled. If waste cannot be treated it must be incinerated (see the UK Bio-safety Manual for proper use of Red Bags
http://ehs.uky.edu/env/fs_biohaz_0001.php

WARNING: Red Bags must not be used for autoclaving!!!

UK uses Red Bags to designate infectious waste that must be incinerated. Red Bags should not be used for any other purpose. Do not use Red Bags for autoclaving infectious material and, regardless of their contents, do not place Red Bags in the regular trash for disposal. If Red Bags are dumped at the landfill, facility operators will call UK to come and get them. Since landfilling infectious waste is against the law, this practice can result in regulatory action, fines, and even loss of landfill privileges.

Only Medical Center and Hospital custodians are trained to pick up Red Bags and take them to the Hospital incinerator room. Other Red Bags on Lexington campus must be picked up by Hazardous Materials Management. Community colleges should have Red Bags picked up by approved vendors (as an alternative, trained staff may take Red Bags to cooperating hospitals for disposal). If Red Bags are observed in the regular trash, please notify Hazardous Materials Management immediately at 323-6280."[1]

Glass and Sharp Objects

- "Needles, Syringes and Other Sharps**:** Used needles, syringes and other sharps must be placed into rigid, red plastic sharps containers. Needles should not be removed from syringes. Do not cut, bend or recap needles. This policy applies to ALL needles and syringes, whether (a) used or unused, (b) used together or separately, (c) used with blood or (d) used for any other purpose. Approved sharps containers may be obtained from several vendors. When the container is full, secure the lid. (Don't overfill containers and risk getting stuck!) Containers must be disposed of as medical waste—whether contaminated or not--and never placed in the regular trash. Contact Hazardous Materials Management if you need assistance disposing of medical waste in your area."[2]

- Broken Glass and Laboratory Glassware: "ALL broken glass must be placed into a separate waste container. Never place broken glass into the regular trash container. The waste glass container itself will be disposed of along with the broken glass. Acceptable containers

for broken glass include small (1 to 2 cu. ft.) cardboard boxes with plastic liners, empty plastic paint cans, or any similar puncture-proof, leak-resistant containers. Cardboard boxes made especially for broken glass may be obtained from several vendors. Waste glass containers should be labeled "Caution--Broken Glass." When full, put the top on the container and secure with tape. Custodians will place the whole container into the general waste stream.

ALL laboratory glassware--whether broken or unbroken--must be disposed of as for broken glass above. This applies to all glass items from medical, research and teaching labs including containers, pipettes, tubing, glass slides and cover slips, etc.

Glassware which may be contaminated with infectious agents should first be autoclaved or chemically disinfected, and then disposed of as above. Alternatively, contaminated glassware may be put into sharps containers without disinfecting."[2]

- Fluorescent Light Bulbs: Because fluorescent light bulbs contain mercury, they must be disposed of properly. Ask maintenance and operations to replace and/or remove fluorescent bulbs. They will send them to the University of Kentucky for proper disposal.

Batteries

Do not put batteries into the regular trash. All spent batteries are to be given to M&O for disposal or placed in the red Battery Recycling buckets that are available in the following areas at the Cooper Campus:

Oswald Building
OB234 Office Suite
Oswald Building Atrium – 2nd Floor
M&O Office—Room OB128
Library – Learning Resource Center

AT Building
2nd Floor Copy Room – AT205

Moloney Building
2nd Floor Copy Room
Student Computer Labs – Rooms MB110 and MB112
MB226 – 238 Suite

[1] Fact Sheet: Biohazard Autoclave Bags. University of Kentucky Office of Environmental Health and Safety.
http://ehs.uky.edu/env/fs_biohaz_0001.php

[2] Fact Sheet: Disposal of Needles, Syringes, Other Sharps and Broken Glass. University of Kentucky Office of Environmental Health and Safety.
http://ehs.uky.edu/env/fs_disposal_0001.php

[3] Fact Sheet: Management of Spent Batteries. January, 2011. University of Kentucky Office of Environmental Health and Safety. http://ehs.uky.edu/docs/pdf/emm_era_2011_01.pdf

Emergency Call Numbers

- ***Fire/Police/Medical***—Call ***911***
- UK Police - **257-1616**.
- Cooper BCTC Security & Safety Officer:
    - **Ray Sayre 859-227-5351**

- *Work-related injury*, **call Workers' Compensation at *(888) 860-0302, Monday-Friday, 8:00 a.m. – 4:30 p.m., within 24 hours of the incident.* *(If injury occurs in the evening hours or on the weekend, the injury must be reported at the beginning of the next work day.)***

- ***Injury to students & non-BCTC employees***, call ***911*** *and* Cooper BCTC Security and Safety. **R**eport the incident to the Operations Manager of Security and Safety, 246-6422 or the Cooper Security/Safety Officer Ray Sayre 859-227-5351. In the evening, attending BCTC faculty or staff should take name and phone number of injured and provide a brief report of injury by completing an Accident Report Form FM84 within 24 hours of incident. Submit the Accident Report Form FM84 to the Operations Manager of Security and Safety, 202-B Oswald Building.