



*SARASOTA*  
*COUNTY SCHOOLS*



## **HEALTH & SAFETY PLAN**

REVISED: 1/23/2017

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## 1. Overview

The Suncoast Technical College (STC) administrative, instructional, and support staff is diligent in assuring a safe, orderly, and positive physical learning environment for the protection of the health and safety of students, staff, and guests. The Sarasota County Public Schools Policy and Procedures 8.11, Safety Program (available on the school district Web site), is implemented at all STC locations. To fulfill the goal of a safe and healthy environment on a daily basis, Sarasota County School Board (of which STC is a school) and STC policies, processes, and procedures relating to health and safety issues are in place, implemented, and regularly evaluated and revised with input from employees and students. In addition, a system for reporting and investigating accidents is followed by all staff.

The District has developed and promotes a comprehensive program to ensure the safety of its employees, students, and visitors. The safety program includes guidelines and procedures for responding to emergencies and activities to help reduce the frequency of accidents and injuries. To prevent or minimize injuries to employees, coworkers, and students and to protect and conserve School District equipment, employees must comply with the following requirements:

- Observe all safety rules
- Familiarize yourself with School District critical incident plans/procedures and emergency preparedness protocols
- Keep work areas clean and orderly at all times
- Immediately report all accidents to their supervisor
- Operate only equipment or machines for which they have training and authorization
- All employees must wear their employee ID card while on school district property per School board rule 6.19.

Employees with questions or concerns relating to safety programs and issues should contact their immediate supervisors or the Department of Safety & Security at 966-SAFE (7233).

### Visitors in the Workplace

All visitors are required to enter any district facility through the main entrance. Unless escorted by staff, school visitors must show proper identification and be screened through the schools visitor management system, receiving a temporary ID badge which must be worn while on campuses with Pre-K through 12 students present. Contractors and vendors on campus must display valid Level II identification issued by the district at all times while on campus. Employees who observe an unauthorized individual on the district premises should immediately direct him or her to the building office or contact the administrator in charge.

### Employees with Weapons

No employee of the school system shall have a weapon in his or her possession while on school property or at a school activity. Guns, whether operable or inoperable, loaded or unloaded, facsimile weapons or antique weapons may not be brought on to school property including the parking lot or to a school activity. Any weapon confiscated shall be immediately turned over to the principal/building administrator who shall turn the weapon over to the proper authorities. Authorized law enforcement officers, including School Resource Officers, may have weapons in their possession while on duty.

### Bullying and Harassment

It is the policy of the Sarasota County School district that all of its students and school employees have an educational setting that is safe, secure, and free from harassment and bullying of any kind. The district will not tolerate bullying and harassment of any type. Conduct that constitutes bullying and harassment is prohibited.

The following are general processes and procedures designed to assure students, staff, and guests that STC is a safe and healthy environment in which to teach and learn.

## **2. Accident Reporting System**

Suncoast Technical College follows district policies and procedures regarding the reporting of accidents to employees, students, or the public.

### EMPLOYEES

If an employee suffers work related injury/illness, the School Board of Sarasota County is committed to returning them to the same status of function they enjoyed previous to the injury/illness and bring them back to work as quickly as possible.

#### As an employee, you have a right to:

- Receive timely and appropriate medical care for injuries sustained during the course of, or arising out of, your employment.
- Receive timely and understandable information concerning your treatment including available alternatives and their potential effectiveness.
- Receive your treatment with dignity, courtesy, respect, privacy, and with all of the confidentiality specified within the workers' compensation laws.

- Select or change the Primary Care Physician (PCP) or Specialist Physician utilizing established procedures.
- Request a one-time independent medical examination.

As an employee, you are responsible to:

- Immediately report any injury received on the job to your supervisor or manager.
- Contact, or have your supervisor contact, the case manager prior to seeking medical care for an occupational injury that does not require emergency treatment.
- Obtain all medical care from providers authorized by the claims administrator.
- Follow your provider's instructions regarding your treatment.
- Keep all scheduled appointments.
- Return to active employment when released by your physician.

Claim Reporting System

In the case of injury or illness requiring services that are not an emergency (back pain, sprained ankle, etc.), the employee must notify his/her Supervisor who, in turn, will call Amtrust Group at 1-888-763-1450 to receive authorization prior to obtaining care. The injured employee must be available by telephone to discuss his/her injury status with the Triage Nurse Case Manager. ALL INJURIES SHOULD BE REPORTED THE SAME DAY THEY OCCUR WITHOUT DELAY.

Emergency Care:

- If it is a true emergency, have someone call 911 or take you to the nearest emergency room
- A supervisor will call Amtrust Group at 1-888-763-1450
- Any additional medical care that is needed will be coordinated through them.

After Care Hours

Medical care is available 24 hours a day, seven (7) days a week (including holidays). If for some reason the employee should go to the Emergency Room or Urgent Care facility, the employer and/or the employee must call the Amtrust Group case manager immediately, or no later than, the next business day to report such visits.

Traveling Employee

Except in emergency situations, employees who are injured outside of the service area must call Amtrust Group at 1-888-763-1450 prior to treatment. Unless prior authorization is received for non-emergency care outside of the service area, the employee could be held responsible for payment.

STUDENTS

If a student suffers work related injury/illness, a Student Accident Report (*Addendum A*) should be completed on the same day of the incident and

submitted to the Director's secretary that day. The Director's Secretary will retain a copy for STC's files and submit the form to the district's Risk Management department for filing and/or action.

#### **PUBLIC**

If a non-district employee or student suffers work related injury/illness, a Public Incident Report (*Addendum B*) should be completed on the same day of the incident and submitted to the Director's secretary that day. The Director's Secretary will retain a copy for STC's files and submit the form to the district's Risk Management department for filing and/or action.

### **3. Accident Investigation System**

The STC Director completes a Supervisor Investigation Report (*Addendum C*) as necessary and submits the report to the district Risk Management office before the end of the working day on which the incident is reported. A Public Incident Report or Student Accident Report submitted to the district Risk Management office is investigated through their department procedures.

### **4. Site Emergency Plan**

Every STC classroom and lab area has a copy of the Sarasota County Schools Site Emergency Plan (red flip book). Every year at the first staff meeting of the school year, the plan is reviewed with staff. The plan is designed as a quick reference resource for the classroom and is part of the school district's Emergency Operations Plan. It provides essential information to assist staff in responding to a wide range of threats and hazards that may affect the school. The school district's Emergency Operations Plan considers lessons learned from prior school incidents to highlight the importance of preparing for any hazard or emergency. The school district's Emergency Operations Plan is aligned with the emergency planning practices at national, state, and local levels – and includes the five phases of emergency preparedness: Prevention, Protection, Mitigation, Response, and Recovery.

Part of the school district's Emergency Operations Plan requires each school site to conduct regular drills for various scenarios (fire, bomb threat, severe weather,

lockdowns, limited lockdowns, directional evacuations, etc.) in order for staff, students, and visitors to be prepared during critical incidents. The Site Emergency Plan has easy-to-follow directions, scripts, and staff responsibilities for each critical incident.

Signals or codes identify the nature of the threat or danger. Each classroom has an emergency evacuation map posted that instructors discuss with their classes. The school has monthly fire drills and two practice drills for each (Code Red, White, and Yellow) as well as tornado during the school year. Drills are conducted so that students and personnel can react quickly and appropriately to an actual incident. All occupants of the school must participate. During the drills, administrative and selected staff members check every building according to a detailed schedule that is reviewed and revised annually or more frequently if needed.

## **5. Crisis Response Plan**

The STC Crisis Response Plan (red 3-ring binder), part of the district's Emergency Operations Plan, provides the school sites with a guide for effective response to a critical incident. The plan is divided into five sections including Hazard Analysis, Method of Operations, Emergency Management Goals and Objectives, Appendices and Annexes. The plan utilizes the National Incident Management System (NIMS) and establishes the Incident Command System (ICS) in crisis response to ensure Sarasota County School District sites will be adequately prepared to deal with an emergency. Roles and responsibilities will be outlined to aid in the organization of preparation, response and recovery from a threatened or actual emergency.

This emergency response plan is developed according to established school board policy. The School Board of Sarasota County district policy 8.19. states *"All district schools shall develop and implement a school security program..."* Florida State Statute 100.7 district school board duties relating to student school safety, section (4) (a) states that *"the district board shall establish model emergency management and preparedness procedures."*

A Crisis Response Team (CRT) is the group of individuals who work together to manage the emergency response of a critical incident at the school site. The CRT is comprised of both on site staff and administration. There will be one CRT at each school site. It is recommended that CRT members complete CPR training. A CRT is established every August for each school site.

The Crisis Response Plan is distributed to each school site. Local law enforcement, fire, and emergency management agencies will receive updated copies each August. Up-to-date USB devices will be forwarded to local first responders for emergency planning/response purposes through the school district's Safety and Security/Emergency Management office.

## **6. Material Safety Data Sheets**

All school site Material Safety Data Sheets (MSDS) are maintained and available to all staff through the district's online SharePoint website: [msdsonline.com](http://msdsonline.com). In addition, MSDS sheets are maintained by teachers in some program areas. The MSDS sheets contain information on the composition of chemical substances and provide guidance on the use, storage, spill clean-up and first aid, and disposal of substances.

## **7. Photo Identification/Key-Card Badges**

To properly identify those persons who are authorized to be on the main campus, STC has developed a system of color-coded photo identification badges that are issued to secondary and postsecondary students in technical programs, students in ESOL and GED classes upon registration, and to staff each year at no cost. Part-time adult and those registered in short-term or continuing education classes are issued a temporary student identification badge. All visitors must report to the Student Services office in Building 2 to receive a visitor's identification name tag. Students, staff, and guests must wear their badge in a visible location at all times to ensure campus safety. The badges also act as key-card access to proximity boxes at most doors on the main campus. Access levels are zoned and are determined by job needs or program of enrollment.

## **8. Jessica Lunsford Act**

On June 20, 2007, Governor Charlie Crist signed into law Senate Bill 988, Relating to High Risk Offenders. The bill, effective on July 1, 2007, requires specific notations on the driver's licenses of sexual predators, and established



standards and procedures related to the background screening of individuals who provide contracted non-instructional services to Florida public schools or districts. All persons who will have direct contact with students must have completed level 2 screening requirements as described in Florida Statute 1012.32.

This pertains to school district employees, volunteers, interns, mentors, contractors, vendors, coaches, and sports officials. Guests to the campus must report to the Student Services office in Building 2 and present a valid driver's license to be registered and are issued a temporary visitor's badge after being checked through RAPTOR, a rapid check system that identifies sex offenders listed in the State of Florida database.

## **9. School Resource Officer & Campus Security**

Clearly visible on campus on foot or in a golf cart are a School Resource Officer (SRO) and at least one security monitor during the day and one contracted private security officer during the evening. The extension campuses also have a security officer on duty during the evening.

They have contact via radio, cell phones and land lines to administrators at all times. SROs are fully certified law enforcement officers working as an extension of the school principal's office. SRO's wear uniforms in order to be visible to staff, students, parents, and the community. Security aides hired by the school wear a different identifiable uniform.

School district personnel monitor campus security 24 hours a day, 7 days a week. Intruder alarm systems are maintained and inspected for all buildings by a contracted security company. Maintenance of all fire extinguishers and the fire alarm system is contracted to a licensed service company.

## **10. Evaluation & Revision**

STC's health and safety written plan is reviewed annually by STC's School Advisory Council (SAC) and the Shared Decision Making Team (SDMT) to ensure compliance with school district policies and procedures as well as adequacy.

Addendum A

THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA  
RISK MANAGEMENT DEPARTMENT

STUDENT ACCIDENT REPORT

**Instructions:** This form is printed and submitted to the Risk Management Department in the original form. It should not be filed to non-school board personnel. It will be used to express concern and written directly from Risk Management.

Student **Name** ----- Gender  Male  Female Age -----

Home **Address** ----- , ----- ' -----

School ----- Grade/Special Program -----

Date of **Accident** ----- Time of Accident ----- O AM O PM

Nature of Injury (e.g., abrasion, laceration, fracture, cut) Be **specific** -----

Part of Body Injured -----

Cause of Injury (e.g., struck object, fall from elevator) Be **specific** -----

Location of Accident (e.g., Building No., Room No., playground, gym, cafeteria) Be **specific** -----

What was the student's activity at the time of the accident? (e.g., classroom instruction, field trip, P.E., sports) Be **specific** -----

Was the student's activity **supervised**?  -----

What is the name and title of the supervising employee? -----

Was student's behavior a factor in the accident?  Yes  No If Yes, **describe** -----

Was district-owned equipment or property a factor in the accident?  Yes  No If Yes, **describe** -----

Description (Give a detailed word picture of the accident, explaining Who, what, where, when, why and how) -----

Name of Person Completing Report ----- Title ----- Date -----

Principal Signature ----- Date -----

Distribution: Original - Risk Management Yellow - Site  
The School Board of Sarasota County, Florida complies with State Statutes on Veterans' Preference and Federal Non-discrimination on the basis of race, color, sex, religion, national origin, age, disability, marital status or sexual orientation.

RET: Uaator, 4AV; GS72 Dupl., OSA 032'64-FIN-BUS Rev. 8-11FS012

Addendum B

THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA  
RISK MANAGEMENT DEPARTMENT

PUBLIC INCIDENT REPORT

Instructions This form is to be used for incidents involving individuals who are **NOT** district employees or students. Note - This form is privileged and is completed pursuant to instructions from our attorneys in anticipation of litigation. It should not be disclosed to non-schoolboard personnel without express consultation and written direction from Risk Management staff.

1. Name of Individual \_\_\_\_\_
2. Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_
3. School/District Site \_\_\_\_\_ 4. Sex  Male  Female 5. Age \_\_\_\_\_
6. Date of Incident \_\_\_\_\_ 7. Time of Incident \_\_\_\_\_  AM  PM
8. Nature of Injury (e.g., abrasion, contusion, fracture, cut) Be **specific**.-----  
\_\_\_\_\_
9. Part of Body **Injured**-----  
\_\_\_\_\_
10. Cause of Injury (e.g., struck object, fall from elevator) Be specific. -----  
\_\_\_\_\_
11. Location of Incident (e.g., Building No., Room No., playground, gym, cafeteria) Be **specific**.-----  
\_\_\_\_\_
12. What was the individual's activity at the time of the incident? (e.g., visiting campus, delivery) Be specific. \_\_\_\_\_  
\_\_\_\_\_
13. Was there a witness to the incident?  Yes  No
14. What is the name, address, and phone number of the **witness**?-----  
\_\_\_\_\_
15. Was the individual's behavior a factor in the incident?  Yes  No If Yes, describe. \_\_\_\_\_  
\_\_\_\_\_
16. Was district-owned equipment or property a factor in the incident?  Yes  No If Yes, describe. (e.g., furniture, playground equipment, sidewalk, parking **lot**)-----  
\_\_\_\_\_
17. Description (Give a detailed word picture of the incident, explaining who, what, where, when, why and **how**)-----  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Name of Person Completing Report Title Date

\_\_\_\_\_  
Principal or Site Administrator Signature Date  
Distribution: Original - Risk Management Copy - Site

The School Board of Sarasota County, Florida complies with State Statutes on Veterans' Preference and Federal Statute on non-discrimination on the basis of race, color, sex, religion, national origin, age, disability, marital status or sexual orientation.  
RET: Master, 4AY, GS1-SL 241 Dupl., OSA 043-87-FIN-BUS Rev. 4-1-2013

THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA  
RISK MANAGEMENT

SUPERVISOR INVESTIGATION REPORT

**Instructions:** Supervisor is to complete and submit this form before the end of the working day on which the incident is reported. Retain a copy of the completed form for cost accounting documentation. Forward original to Risk Management Office, 1960 Landings Blvd, Sarasota, FL 34231. Phone 927-9000 for assistance.

Employee Name \_\_\_\_\_ Employee Phone \_\_\_\_\_  
Cost Center Name \_\_\_\_\_ Cost Center Number \_\_\_\_\_  
Incident occurred Date \_\_\_\_\_ Time \_\_\_\_\_ AM \_\_\_\_\_  
Shift \_\_\_\_\_ Day of week \_\_\_\_\_  
Employee Job Title \_\_\_\_\_ How long at position \_\_\_\_\_  
Was first aid given?  Yes  No If yes, what type and by whom? \_\_\_\_\_

Was employee sent to the hospital emergency room?  Yes  No If yes, where? \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_  
Witness(es) \_\_\_\_\_

Where did incident occur (exact property location)? \_\_\_\_\_

If injury occurred, describe fully \_\_\_\_\_

Was the employee wearing the District issued protective safety equipment when the injury occurred? \_\_\_\_\_

If not, was it a factor in the employee's injury? \_\_\_\_\_  
Equipment/action involved \_\_\_\_\_

Describe incident \_\_\_\_\_

Reason(s) for incident occurring \_\_\_\_\_

Corrective action(s) to prevent recurrence \_\_\_\_\_

Was working time lost as a result of this incident?  Yes  No

Supervisor Name \_\_\_\_\_ Supervisor Signature \_\_\_\_\_ Date \_\_\_\_\_