

Yolo County Housing Yolo County, California

May 21, 2015

MINUTES

The Yolo County Housing met on the 21st day of May, 2015, in regular session in its Chambers in the Erwin W. Meier Administration Building, 625 Court Street, Woodland, California at 2:00 p.m.

Present: Cecilia Aguiar-Curry; Mark Johannessen; Helen Thomson; Karen Vanderford; Jennifer Wienecke-Friedman

Absent: Tom Stallard

Staff Present: Lisa Baker, CEO
Sonia Cortés, Agency Counsel
Janis Holt, General Services Director
Julie Dachtler, Clerk

Attendees: Robb Davis, Alternate, City of Davis

CALL TO ORDER

1. Pledge of Allegiance.
2. Consider approval of the agenda.

Minute Order No. 15-22: Approved agenda as submitted, noting that Agenda Item Nos. 4 and 5 will come after Agenda No. 8.

MOTION: Wienecke-Friedman. SECOND: Vanderford. AYES: Aguiar-Curry, Johannessen, Thomson, Vanderford, Wienecke-Friedman. ABSENT: Stallard.

3. Public Comment: Opportunity for members of the public to address the Housing Authority on subjects not otherwise on the agenda relating to Housing Authority business. The Board reserves the right to impose a reasonable limit on time afforded to any topic or to any individual speaker.

CEO Lisa Baker addressed the Board during Public Comment by showing a Powerpoint of a very grateful El Rio Villas Family who recently received furnishings for their apartment courtesy of YCH's partners.

PRESENTATIONS

4. Presentation, NAHRO Certificate of Proficiency for the Family Self-Sufficiency Program to Laura Uribe

General Services Director Janis Holt presented the NAHRO Certificate of Proficiency for the Family Self-Sufficiency Program to Laura Uribe.

5. Presentation Family Self Sufficiency Graduate John Gardner

Steven Flores and Laura Uribe presented Family Self Sufficiency Graduate John Gardner.

6. Presentation Pacific Southwest Regional Council of NAHRO – Hero of Assisted Housing to Brenda Gonzales

General Services Director Janis Holt presented the Pacific Southwest Regional Council of NAHRO - Hero of Assisted Housing to Brenda Gonzales.

7. Presentation of 2015 Year to Date Accomplishments

CEO Lisa Baker presented 2015 Year-to-Date Accomplishments.

8. Presentation of PSWRC NAHRO Case Study – Bridge to Housing

CEO Lisa Baker presented PSWRC NAHRO Case Study - Bridge to Housing.

CONSENT AGENDA

Minute Order No. 15-23: Approved Consent Agenda Item Nos. 9-11.

MOTION: Thomson. SECOND: Vanderford. AYES: Aguiar-Curry, Johannessen, Thomson, Vanderford, Wienecke-Friedman. ABSENT: Stallard.

9. Approval of the Minutes for the Meeting of April 16, 2015

Approved the minutes of the meeting of April 16, 2015 on Consent.

10. Review, Approve and Adopt YCH Bloodborne Pathogen Exposure Control Plan (Holt)

Approved recommended action on Consent.

11. Review, Approve and Adopt Updated YCH Heat Illness Prevention Plan (Holt)

Approved recommended action on Consent.

REGULAR AGENDA

12. Review, Approve and Adopt Updated Water Conservation Rules in Accordance with Governor's Executive Order dated April 1, 2015 (Chaudry)

Minute Order No. 15-24: Approved recommended action.

MOTION: Thomson. SECOND: Wienecke-Friedman. AYES: Aguiar-Curry, Johannessen, Thomson, Vanderford, Wienecke-Friedman. ABSENT: Stallard.

13. Receive Verbal Report from CEO YCH JPA formation

CEO Lisa Baker provided a verbal report on the YCH JPA formation. Resolutions and staff reports are going out to the cities for their review and the estimated timeline for completion of the JPA is expected in the Fall 2015.

14. Receive comments from CEO.

CEO Lisa Baker explained that by Jul 1, 2015, they will be in compliance with AB52, the accrual of sick leave for part-time non-benefited employees. Also, the State of California approached them to possibly run the Modoc County Migrant Center, which is only 30% occupied and receives funding from the Federal Government. Once YCH reviews the figures, they will decide if they go forward or not in assisting them with their request. They will be returning to the Board in the near future in regards to this request. They are also looking into the possibility of working with the Elica Health Centers in possibly providing street outreach in regards to medical components. They are working on the mechanics with them right now.

9. Receive verbal report on El Rio Villas West Well and Hexavalent Chromium 6 (Ichertz and Baker)

Fred Ichertz provided a report to the Board on this item. Of the five water wells the Housing Authority manages, all but one meets the Hexavalent Chromium 6 levels. This is the West Well, which serves 200 people. They have the necessary funding to replace the well this year and once this well is on-line, they anticipate they will re-hab the East Well. Projected replacement cost is \$250,000 to \$260,000.

10. Receive comments from CEO

CEO Lisa Baker noted the Davis Migrant Center opened today, April 16, 2015. There were some issues with the earlier opening, but they are working through them. Also spoke about smoke/smoke-free residences, which will be coming back to the Board at some future date for discussion.

11. Receive comments from Commissioners

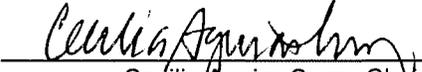
Commissioner Davis wondered if the Water Resources Association (WRA) contacted YCH regarding the Groundwater Sustainability Agency formation. CEO Lisa Baker responded that they had not been contacted. They do coordinate with them on the drought piece and they did receive notification of the new groundwater website for groundwater managers. Mr. Davis explained that the WRA, along with the Farm Bureau, have been chosen to be the representatives of the County to form the State mandated Groundwater Sustainability Agency. This doesn't mean they will be it, but that group has agreed to come together to form it. This is supposed to be a broad stakeholder engagement with water districts, as well as local jurisdictions and cities. Lisa Baker confirmed that they would like to be at the table for discussion.

ADJOURNMENT

Next meeting is scheduled for: May 21, 2015 at 2:00 p.m.

- On the bulletin board of Yolo County Housing, 147 West Main Street, Woodland, California.


Julie Dachtler, Clerk
Yolo County Housing


Cecilia Aguiar-Curry, Chair
Yolo County Housing

YOLO COUNTY HOUSING

AGENDA

REGULAR MEETING

May 21, 2015

2:00 p.m.



YOLO COUNTY HOUSING
HOUSING COMMISSION

CECILIA AGUIAR-CURRY
ROBB DAVIS
MARK JOHANNESSEN
TOM STALLARD
HELEN MACLEOD THOMSON
JENNIFER WIENECKE-FRIEDMAN
KAREN VANDERFORD

BOARD OF SUPERVISORS CHAMBERS
625 COURT STREET, ROOM 206
WOODLAND, CALIFORNIA 95695

LISA A. BAKER
CHIEF EXECUTIVE OFFICER

SONIA CORTES
AGENCY COUNSEL

Reminder: Please turn off cell phones.

CALL TO ORDER

1. Pledge of Allegiance.
2. Consider approval of the agenda.
3. Public Comment: Opportunity for members of the public to address the Housing Authority on subjects not otherwise on the agenda relating to Housing Authority business. The Board reserves the right to impose a reasonable limit on time afforded to any topic or to any individual speaker.

PRESENTATIONS

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5. Presentation Family Self Sufficiency Graduate John Gardner
6. Presentation Pacific Southwest Regional Council of NAHRO – Hero of Assisted Housing to Brenda Gonzales
7. Presentation of 2015 Year to Date Accomplishments
8. Presentation of PSWRC NAHRO Case Study – Bridge to Housing

CONSENT AGENDA

9. Approval of the Minutes for the Meeting of April 16, 2015
10. Review, Approve and Adopt YCH Bloodborne Pathogen Exposure Control Plan (Holt)
11. Review, Approve and Adopt Updated YCH Heat Illness Prevention Plan (Holt)

REGULAR AGENDA

12. Review, Approve and Adopt Updated Water Conservation Rules in Accordance with Governor's Executive Order dated April 1, 2015 (Chaudry)
13. Receive Verbal Report from CEO YCH JPA formation

14. Receive comments from CEO.
15. Receive comments from Commissioners.

CLOSED SESSION

16. Conference with Labor Negotiator: Lisa A. Baker, Chief Executive Officer; Janis R. Holt, General Managing Director; Sonia Cortés, Agency Counsel

Bargaining Units: General Unit
Management Unit

ADJOURNMENT

Next meeting is scheduled June 18, 2015 at 2:00 p.m.

I declare under penalty of perjury that the foregoing agenda was posted Friday, May 15, 2015 by 5:00 p.m. at the following places:

- On the bulletin board at the east entrance of the Erwin W. Meier Administration Building, 625 Court Street, Woodland, California; and
- On the bulletin board outside the Board of Supervisors Chambers, Room 206 in the Erwin W. Meier Administration Building, 625 Court Street, Woodland, California; and
- On the bulletin board of Yolo County Housing, 147 West Main Street, Woodland, California.

I declare under penalty of perjury that the foregoing agenda will be posted no later than Monday, May 18, 2015 by 2:00 p.m. as follows:

- On the Yolo County website: www.yolocounty.org.

Julie Dachtler, Clerk
Yolo County Housing

NOTICE

If requested, this agenda can be made available in appropriate alternative formats to persons with a disability, as required by Section 202 of the Americans with Disabilities Act of 1990 and the Federal Rules and Regulations adopted in implementation thereof. Persons seeking an alternative format should contact the Clerk of the Board for further information. In addition, a person with a disability who requires a modification or accommodation, including auxiliary aids or services, in order to participate in a public meeting should telephone or otherwise contact the Clerk of the Board as soon as possible and at least 24 hours prior to the meeting. The Clerk of the Board may be reached at (530) 666-8195 or at the following address:

Clerk of the Yolo County Housing Board
625 Court Street, Room 204
Woodland, CA 95695

Yolo County Housing
Yolo County, California

To: Co. Counsel ✓
Yolo County Housing ✓

CONSENT CALENDAR

Excerpt of Minute Order No.15-23 Item No. 9, of the Yolo County Housing meeting of May 21, 2015.

MOTION: Thomson. SECOND: Vanderford. AYES: Aguiar-Curry, Johannessen, Thomson, Vanderford, Wienecke-Friedman. ABSENT: Stallard.

9

Approval of the Minutes for the Meeting of April 16, 2015

Approved the minutes of the meeting of April 16, 2015 on Consent.

Yolo County Housing Yolo County, California

April 16, 2015

MINUTES

The Yolo County Housing met on the 16th day of April, 2015, in regular session in its Chambers in the Erwin W. Meier Administration Building, 625 Court Street, Woodland, California at 2:00 p.m.

Present: Mark Johannessen; Tom Stallard; Karen Vanderford; Jennifer Wienecke-Friedman

Absent: Cecilia Aguiar-Curry; Helen Thomson

Staff Present: Lisa Baker, CEO
Sonia Cortés, Agency Counsel
Julie Dachtler, Clerk

Attendees: Robb Davis, City of Davis, Alternate

CALL TO ORDER

1. Pledge of Allegiance.
2. Consider approval of the agenda.

Minute Order No. 15-19: Approved agenda as submitted.

MOTION: Wienecke-Friedman. SECOND: Vanderford. AYES: Davis, Johannessen, Stallard, Vanderford, Wienecke-Friedman. ABSENT: Aguiar-Curry, Thomson.

3. Public Comment: Opportunity for members of the public to address the Housing Authority on subjects not otherwise on the agenda relating to Housing Authority business. The Board reserves the right to impose a reasonable limit on time afforded to any topic or to any individual speaker.

There was no public comment.

PRESENTATIONS

4. Presentation of Colleen Brock, Senior Management Analyst.

Lisa Baker presented Colleen Brock, Senior Management Analyst.

CONSENT AGENDA

Minute Order No. 15-20: Approved Consent Agenda Item Nos. 5 and 6.

MOTION: Stallard. SECOND: Wienecke-Friedman. AYES: Davis, Johannessen, Stallard, Vanderford, Wienecke-Friedman. ABSENT: Aguiar-Curry, Thomson.

5. Review and Approve Minutes for the Meeting of March 19, 2015

Approved the minutes for the meeting of March 19, 2015 on Consent.

6. Review, Approve and Adopt Resolution Setting Flat Rent Schedule in Conventional Housing (Chaudry and Baker)

Approved **Resolution No. 15-03** on Consent.

REGULAR AGENDA

7. Review and Approve Proposed Mid-Year Budget Revision (Gillette and Baker)

Minute Order No. 15-21: Approved recommended action.

MOTION: Wienecke-Friedman. SECOND: Davis. AYES: Davis, Johannessen, Stallard, Vanderford, Wienecke-Friedman. ABSENT: Aguiar-Curry, Thomson.

8. Receive and File Correspondence from USDA regarding Payout on the Davis Solar Homes Loan and Provide Direction to Staff (Baker)

Received and filed correspondence from the USDA. CEO Lisa Baker indicated this item will most likely be returning to the Board for its consideration in June, 2015.

9. Receive verbal report on El Rio Villas West Well and Hexavalent Chromium 6 (Ichertz and Baker)

Fred Ichertz provided a report to the Board on this item. Of the five water wells the Housing Authority manages, all but one meets the Hexavalent Chromium 6 levels. This is the West Well, which serves 200 people. They have the necessary funding to replace the well this year and once this well is on-line, they anticipate they will re-hab the East Well. Projected replacement cost is \$250,000 to \$260,000.

10. Receive comments from CEO

CEO Lisa Baker noted the Davis Migrant Center opened today, April 16, 2015. There were some issues with the earlier opening, but they are working through them. Also spoke about smoke/smoke-free residences, which will be coming back to the Board at some future date for discussion.

11. Receive comments from Commissioners

Commissioner Davis wondered if the Water Resources Association (WRA) contacted YCH regarding the Groundwater Sustainability Agency formation. CEO Lisa Baker responded that they had not been contacted. They do coordinate with them on the drought piece and they did receive notification of the new groundwater website for groundwater managers. Mr. Davis explained that the WRA, along with the Farm Bureau, have been chosen to be the representatives of the County to form the State mandated Groundwater Sustainability Agency. This doesn't mean they will be it, but that group has agreed to come together to form it. This is supposed to be a broad stakeholder engagement with water districts, as well as local jurisdictions and cities. Lisa Baker confirmed that they would like to be at the table for discussion.

ADJOURNMENT

Next meeting is scheduled for: May 21, 2015 at 2:00 p.m.

- On the bulletin board of Yolo County Housing, 147 West Main Street, Woodland, California.

Cecilia Aguiar-Curry, Chair
Yolo County Housing

Julie Dachtler, Clerk
Yolo County Housing

Yolo County Housing
Yolo County, California

To: Co. Counsel ✓
Yolo County Housing ✓

CONSENT CALENDAR

Excerpt of Minute Order No.15-23 Item No. 10, of the Yolo County Housing meeting of May 21, 2015.

MOTION: Thomson. SECOND: Vanderford. AYES: Aguiar-Curry, Johannessen, Thomson, Vanderford, Wienecke-Friedman. ABSENT: Stallard.

10.

Review, Approve and Adopt YCH Bloodborne Pathogen Exposure Control Plan (Holt)

Approved recommended action on Consent.



Yolo County Housing

147 W. Main Street
WOODLAND, CA 95695

Woodland: (530) 662-5428
Sacramento: (916) 444-8982
TTY: (800) 545-1833, ext. 626

DATE: May 21, 2015
TO: YCH Board of Commissioners
FROM: Lisa A. Baker, Chief Executive Officer
PREPARED BY: Janis Holt, Resource Administrator
SUBJECT: **Review and Approve the Yolo County Housing Bloodborne Pathogen Exposure Control Plan**

RECOMMENDED ACTION

That the Board of Commissioners:

1. Approve the Yolo County Housing Bloodborne Pathogen Exposure Control Plan; and
2. Authorize the CEO to implement.

BACKGROUND/DISCUSSION

In an effort to provide an optimally safe work environment, the Housing Commission and staff review and approve policies, procedures and plans to provide the Agency with updated safety guidelines and programs. The Housing Commission approved the revised YCH Injury Illness and Prevention Program (IIPP) in 2012 and the Workplace Violence prevention Program in 2013. The Agency is responsible for providing updated risk management and safety programs that fit with the growing and changing environment of the organization and to remain compliant with California Code of Regulations and Cal/OSHA guidelines. As a supplemental program to the IIPP, staff has developed the Bloodborne Pathogen Exposure Control Plan in collaboration with the Agency's worker's compensation carrier, California Housing Workers Compensation Authority (CHWCA).

Job duties associated with the majority of the job classifications within the Agency are at minimal risk to exposure to bloodborne pathogens according to Cal/OSHA guidance. Job classifications that perform tasks associated with unit turnover, cleaning, garbage collection, and repairs to residential housing have been identified as having some risk exposure. Examples of those risks are hypodermic syringes when removing items from a unit or disposing of items that have been exposed to blood or mucus.

The YCH Bloodborne Pathogen Exposure Control Plan provides staff with guidelines to prevent and minimize employees' occupational exposure to blood and other potentially infectious materials. This Plan provides addresses the following areas:

- Responsibility
- Exposure Determination
- Methods of Compliance
- Hepatitis B Vaccination
- Post Exposure Evaluation and Follow-up
- Communication of Hazards
- Information and Training
- Record Keeping

This Plan is consistent with the requirements of the Cal/OSHA Injury and Illness Prevention Program (IIPP). Annually management and safety committee members will gather feedback from employees, review the elements of the Plan, and make adjustments in accordance with Cal/OSHA guidance and regulations.

FISCAL IMPACT

Financial impact will be accounted for in the annual budget. The anticipated costs would be for Hepatitis B Vaccinations for job classifications with occupational exposure (\$152 per person) and supplies for maintenance vehicles and shops (\$100).

CONCLUSION

Staff recommends that the Commission approve the YCH Bloodborne Pathogen Exposure Control Plan.

Attachment: YCH Bloodborne Pathogen Exposure Control Plan



Yolo County Housing

Bloodborne Pathogen Exposure Control Plan

May 2015

Policy and Elements of the Plan

Yolo County Housing (YCH) provides a safe and healthful workplace for employees. Our agency's policy is to establish, implement, and maintain an effective exposure control plan as required by the blood borne pathogens (BBP) regulation in *California Code of Regulations, Title 8 (8 CCR), Section 5193*. This written plan is designed to prevent or minimize employees' occupational exposure to blood and Other Potentially Infectious Materials (OPIM). The plan is consistent with the requirements of the Cal/OSHA Injury and Illness Prevention Program (*8 CCR 3203*).

Our exposure control plan is made available upon request, for examination and copying, to our employees, the Chief of Cal/OSHA, and the National Institute for Occupational Health and Safety (or their respective designees) in accord with *8 CCR 3204*, "Access to Employee Exposure and Medical Records."

Our organization's written exposure control plan contains at least the following elements:

- Responsibility
- Exposure Determination
- Methods of Compliance
- Hepatitis B Vaccination
- Post Exposure Evaluation and Follow-up
- Communication of Hazards
- Information and Training
- Record Keeping

Exposure Determination

Employees of YCH have some occupational exposure to blood borne pathogens. *Occupational exposure* means reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or OPIM that may result from the performance of an employee's duties. *Parenteral contact* means piercing mucous membranes or the skin barrier through such events as needlesticks, human bites, cuts, and abrasions. OPIM includes various contaminated human body fluids, unfixated human tissues or organs (other than skin), and other materials known or reasonably likely to be infected with human immunodeficiency virus (HIV), hepatitis B virus (HBV), or hepatitis C virus (HCV) through cells, tissues, blood, organs, culture mediums, or solutions.

Our policy is to conduct exposure determinations throughout our facilities without regard to the use of personal protective equipment (PPE). We have lead person(s) or other individuals who conduct, evaluate, and periodically review exposure determinations. This process involves identifying all the job classifications, tasks, or procedures in which our employees may have occupational exposure to blood or OPIM.

Job Classifications in Which All Employees Have Occupational Exposure

No employees of YCH have been identified as having a **heightened** occupational exposure to bloodborne pathogens.

Job Classifications in Which Some Employees Have Occupational Exposure

The only individuals who have occupational exposure in the job classifications listed below are those who perform the tasks/procedures noted.

Job Classification	Tasks/Procedures in these Jobs that Have Occupational Exposure
1. Senior Maintenance Worker	Cleaning and repairing residential housing
2. Maintenance Worker II/I	Cleaning and repairing residential housing
3. Senior Migrant Center Coordinators	Cleaning and repairing residential housing

Methods of Implementation

Our agency has developed a schedule and methods of implementation for the applicable subsections (d) through (h) of 8 CCR 5193. We have determined which subsections are applicable to our organization and documented the pertinent information as follows:

Areas addressed in order to eliminate or minimize exposure to bloodborne pathogens include:

1. Universal Precautions (Total Body Substance Precautions)
2. Engineering and Work Practice Controls
3. Personal Protective Equipment (PPE)

1. Universal Precautions (Total Body Substance Precautions)

YCH requires the use of universal precautions in order to prevent contact with blood or OPIM. Universal precautions are an infection control practice. It means all human blood and certain body fluids are treated as if they are known to be infected with HBV, HCV, HIV, and other diseases carried and transmitted by blood.

We consider all human blood or OPIM as infectious regardless of the source.

2. Engineering and Work Practice Controls

YCH utilizes engineering and work practice controls to eliminate or minimize blood or OPIM exposure to employees. PPE will be utilized in conjunction with engineering controls. These engineering controls will be examined and updated on a regular schedule. We provide and enforce the use of the engineering and work practice controls, which could include:

- a. Prohibited Practices
 - b. Requirements for Handling Contaminated Sharps
 - c. Hand Washing
 - d. Regulated Waste
 - e. Other Controls
- a. Prohibited Practices
 - In work areas where there is a reasonable likelihood of exposure to a blood borne pathogen or OPIM, employees are not to eat, drink, apply cosmetics or lip balm, smoke, or handle contact lenses.

- If needles, syringes or any other contaminated sharp objects are found, they must be handled with caution and placed in a biohazard sharps container.
- Broken glass that may be contaminated with blood or OPIMs will not be directly handled with a gloved or bare hand. It will be handled by mechanical means (tongs, dustpan and broom). Contaminated broken glass will be placed in puncture-resistant containers and disposed of as biohazardous waste.

b. Requirements for Handling Contaminated Sharps

- A sharps container must always be readily available in areas where sharps waste may be generated, such as in maintenance or groundskeeping operations.
- Immediately, or as soon as possible, after contaminated sharps are found they must be placed in a sharps containers.
- Sharps containers are rigid, puncture resistant, leak proof on the sides and bottoms, portable and labeled with the universal biohazard symbol.
- The sharps containers must be closable. When closed, the containers must be leak resistant and incapable of being reopened without great difficulty.
- Sharps containers must be replaced before they are three-quarters full to prevent overfilling.
- Disposable sharps containers are not reopened, emptied, or accessed in any way.
- Sharps containers must be placed in a secondary container if leakage of the primary container is possible. The second container must be capable of being sealed and constructed to contain all contents and prevent leakage during handling, storage, transport, or shipping. The second container must be labeled or color-coded to identify its contents.
- To prevent exposures to the risk of percutaneous injuries (breaking skin), employees must not, under any circumstances, open, empty, or manually clean (or clean in any other manner) reusable containers.
- All other regulated waste must be placed in containers that are closeable and constructed to contain all the contents and prevent leakage of fluids during handling, storage, transportation, and shipping.

c. Hand Washing

YCH will ensure hand-washing supplies are available to those exposed to blood or OPIM. Cal/OSHA requires these facilities be readily accessible after incurring exposure. If hand-washing facilities are not feasible, we will provide either an antiseptic cleanser in conjunction with clean cloth/paper towels or antiseptic towelettes to remove the blood or OPIM. If these alternatives are used, the hands are to be washed with soap and running water as soon as feasible. We provide the following hand sanitizers for emergency hand-washing use until employees can have access to soap and water.

d. Regulated Waste

The agency will dispose of all regulated waste in accordance with applicable federal, state, and local regulations.

Regulated waste includes liquid or semi-liquid blood or infectious materials, items saturated with liquid blood or OPIM, items caked with dried blood or OPIM, contaminated sharps, and pathological and microbiological wastes containing blood or OPIM.

Although it is unlikely, when regulated waste is generated YCH will send all of its regulated waste to Woodland Health Clinic or the Yolo County Department of Health for proper disposal.

e. Other Controls

Cleaning and Decontamination of the Worksite

- Decontaminate all contaminated work surfaces with an approved germicide after completion of procedures and immediately or as soon as feasible after any spill of blood or OPIM.
- Inspect and decontaminate all bins, pails, cans, and similar receptacles after each exposure.
- Advise employees to not pick up contaminated broken glass directly with their hands or with gloves. Provide brooms and dustpans or other tools to avoid contact.

Laundry

Handle clothing or laundry contaminated with blood or OPIM as little as possible. Sort and place in appropriately marked (biohazard labeled or color-coded red) bags at the location where it was found. If the contaminated laundry is wet and likely to soak through the original red bag or container, transport the laundry in a second bag or container that prevents leakage.

However unlikely, if needed, YCH will send contaminated laundry to an approved laundry facility for cleaning. Other clothing or laundry that is not intended to be cleaned will be disposed of in the appropriate manner.

3. Personal Protective Equipment (PPE)

YCH will ensure the following PPE requirements are met:

- a. PPE and training in the appropriate use of PPE is provided to employees who are at risk of some occupational exposure to blood borne pathogens.
- b. PPE is provided at no cost to the employee, in appropriate sizes, and includes but is not be limited to:

- Gloves, including glove liners, and hypoallergenic gloves
 - Eye protection, such as goggles
- c. Cleaning, disposal, repair, and replacement of PPE are provided at no cost to the employee.
- d. PPE is considered appropriate if it does not permit blood or OPIM to pass through to the employee's work clothes, street clothes, or undergarments; skin; eyes or other mucous membranes under normal working conditions and for the duration of time that PPE will be used.

PPE is located on all maintenance vehicles and in the maintenance shop.

- e. All garments that are penetrated by blood will be removed immediately or as soon as feasible. All PPE is removed prior to leaving the work area. When PPE is removed, it is placed in an appropriately designated area or container for storage, washing, decontamination, or disposal.
- f. Affected employees are required to wear gloves where it is reasonably anticipated they will have hand contact with blood, OPIM, non-intact skin, and mucous membranes (first aid, CPR, clean up of body fluids visibly contaminated with blood).

Disposable gloves are not to be washed or decontaminated for reuse and are to be replaced as soon as practical when they become contaminated or as soon as feasible if they are torn or punctured or when their ability to function as a barrier is compromised. Non-latex gloves will be provided to employees with latex allergies.

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

Note: Leather gloves are to be discarded if grossly contaminated. They are not to be used as PPE against blood borne pathogens. Therefore, if exposure is possible, latex or nitrile gloves should be worn under the leather gloves.

- g. Employees who are exposed to splashes of blood or OPIM to the eyes are required to wear eye and face protection. Masks in combination with eye protection devices, such as goggles or glasses with solid side shield or chin length face shields, will be required to be worn whenever splashes spray, splatter, or droplets of blood or OPIM may be generated and eye, nose, or mouth contamination can reasonably be anticipated.

Hepatitis B Vaccination

A safe and effective vaccine is available to protect employees from HBV. The vaccine is generally well tolerated and has not been associated with serious side effects. Immunization requires three injections of vaccine into the muscle of the upper arm over a six-month period.

YCH offers the HBV vaccine to all current employees who are at risk of some occupational exposure to blood borne pathogens and within 10 working days of hire or reassignment to a job or tasks that places the employee at risk. The vaccination is:

1. Provided at no cost to the employee;
2. Made available at reasonable times during normal work hours and at accessible locations;
3. Performed by or under supervision of a licensed physician or by another licensed health care professional; and
4. Provided according to current recommendations of the U.S. Public Health Service.

There is no current recommendation for booster doses. Should booster doses be recommended in the future, they will be offered to the employee based on medical determination of need.

The following exemptions are appropriate for any employee and will be documented in the employee's health record when:

1. The employee has previously received a complete series of HBV vaccinations; or
2. Antibody testing has revealed the employee is immune; or
3. The vaccine is contraindicated for medical reasons; or
4. The employee has declined vaccination and that refusal is documented.

All employee blood drawn for serological testing will be sent to an accredited laboratory for testing at the organization's expense.

Pre-screening before receiving the HBV vaccination is not mandatory and is not routinely performed.

If the employee initially declines the HBV vaccination but at a later date while still covered under the standard decides to accept the vaccination, the vaccination will be provided to the employee at that time and at no cost to the employee.

Any employee who declines the HBV vaccination must sign the declination statement in the forms section of this document.

Communication of Hazards

Labels and Signs

1. We will provide warning labels incorporating the universal biohazard sign and require the words "biohazard," "biohazard waste," or "sharps waste" to be printed on or affixed to biohazardous waste items that employees are required to remove.
2. The labels are fluorescent orange or orange-red with lettering or symbols in a contrasting color.
3. Labels are affixed as securely as possible to the container, preferably by adhesive or by wire, string, or other method to prevent loss or unintentional removal.
4. Red bags or red containers may be substituted for labels as in sharps containers or regulated waste red bags.

Biohazard Signs

1. All holding areas have a sign posted at the entrance to each area that:
 - a. incorporates the universal biohazard symbol; and
 - b. lists any special requirements for entering the area.

Training

YCH will provide training to all employees who are at risk for exposure to blood borne pathogens or OPIM. This training is provided at no cost to the employee and during work hours. With the consent of the employee, training may occur during non-work hours.

Training is given as follows:

1. At the time of initial assignment to tasks where occupational exposure may take place as soon as possible for currently employed workers;
2. At least annually after the initial training;
3. When there is introduction of new engineering, administrative, or work practice controls and whenever modifications of current tasks may affect the potential occupational exposure to blood borne pathogens.

Information and training of individuals who are not our employees (contract worker, registry, student, etc.) will be provided by the affected outside agency or as specified in the contract. We will monitor the outside agency for compliance with the information and training requirement.

Training will be appropriate in content and vocabulary to educational level, literacy, and language of employees.

Our training program includes information and explanations of at least the following:

- Epidemiology, symptoms, and modes of transmission of blood borne diseases
- Exposure control plan we have implemented and how to obtain a copy of the written plan
- Appropriate methods for recognizing tasks and activities that may involve exposure to blood or OPIM
- Use and limitations of methods that will prevent or reduce exposures, including appropriate engineering, administrative or work practice controls, and PPE

The basis for selection of PPE

- Types, proper use, location, removal, handling, decontamination, and disposal of PPE
- HBV vaccination series, including its efficacy, safety, method of administration, benefits, and the fact that the vaccination will be offered to employees free of charge
- Appropriate actions to take and persons to contact in an emergency involving blood or OPIM
- Procedure to follow if an exposure incident occurs, including the:
 - Method of reporting the incident
 - Medical follow-up that will be made available
 - Procedure for recording the incident in the sharps injury log

- Post-exposure evaluation and follow-up that will be made available to employees
- Signs, labels, and/or color codings that are used

In addition to the above-mentioned information, we provide to all employees a copy of 8 CCR 5193, "Bloodborne Pathogens," and an explanation of its content.

The person conducting the training will be knowledgeable of the standard, our exposure control plan and HBV, HCV, and HIV and be able to relate the requirements to employee exposures and concerns.

Record Keeping

Medical Records

1. YCH will establish and maintain an accurate record for each employee with occupational exposure. This employee's record will include:
 - a. The name of employee and number;
 - b. A copy of the employee's HBV vaccination status including the dates of all HBV vaccinations, declination statements, and medical records relative to the employee's ability to receive vaccinations;
 - c. A copy of all results of examinations, medical testing, evaluation, and follow up of exposure incidents;
 - d. A copy of the health care professional's written opinion as required following and exposure incident.
2. YCH will ensure employee medical records are kept confidential and are not disclosed or reported without the employee's written consent to any person within or outside the workplace except as required by this standard and by law.
3. Employee health records, as required by this section, will be maintained for at least the duration of employment plus 30 years, meaning during the entire employment period and 30 years after the last date of work.

Training Records and Sharps Injury Logs

1. Training records will include the:
 - a. Dates of the training session;
 - b. Contents or a summary of the training session;
 - c. Names and qualifications of persons conducting the training sessions;
 - d. Names and job titles of persons attending the training.
2. Training records will be maintained for three years from the date the training occurred. It is a best practice to maintain them as part of the permanent personnel file.
3. Copy of employee's individual training record will be placed in his/her personnel file at the conclusion of each calendar year and kept for the duration of employment.
4. Sharps injury reports and logs will be maintained five years from the date of the incident (same as Cal/OSHA Form 300 Log).

5. Accessibility

- a. Employee training records and the sharps injury logs will be made available upon request to employees, employee representatives, and Cal/OSHA.
- b. Employee medical records will be made accessible to the employee, anyone having the written consent of the employee, and Cal/OSHA.

Provisions for the Initial Reporting of Exposure Incidents

YCH reports all exposure incidents as soon as possible (and in no case later than the end of the work shift during which they occurred) regardless of whether first aid was rendered. An *exposure incident* means specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or OPIM that results from the performance of an employee's duties. All employees (including designated first aid providers who provide first aid regularly and those who render first aid only as a collateral duty) receive training about our policy.

The following individuals are designated by our organization to receive reports of exposure incidents:

Contact persons:	Janis Holt	Contact number: 530-669-2211
	Fred Ichtertz	Contact number: 530-669-2240
	Lisa Baker	Contact number: 530-669-2219

After-hours contact person: Janis Holt Contact number: 707-430-7209

The exposure incident report includes at least the following:

- The names of all employees involved in the exposure incident (including all first aid providers who have rendered assistance regardless of whether PPE was used)
- A description of the exposure or first aid incident, including:
 - The time and date
 - A determination of whether an exposure incident occurred. This determination is necessary to ensure the proper post-exposure evaluation is conducted and prophylaxis and follow-up are made available immediately if an exposure incident has occurred.
 - Person receiving the report
 - Contact number

Hepatitis B Vaccination Series for Unvaccinated Employees

YCH strongly encourages HBV vaccination and make the vaccination series available to all employees who have occupational exposure to blood or OPIM. Included are collateral first aid providers who have rendered assistance in *any* situation involving the presence of blood or OPIM regardless of whether an actual exposure incident has occurred. The vaccination series is provided to collateral first aid providers as soon as possible but no later than 24 hours after the employee has rendered assistance.

Post-Exposure Evaluation and Follow-up

In the event of an exposure incident, the employee will be offered a confidential medical evaluation and follow-up. All post-exposure follow-up will be performed at the designated occupational health clinic.

Woodland Health Care	After Hours - Woodland Memorial Hospital
632 West Gibson Road	1325 Cottonwood Street
Woodland, CA 95695	Woodland, CA 95695
530-668-2600	530-662-3961

That evaluation and follow-up will include the following:

1. Documentation of the route(s) of exposure and the circumstances under which the exposure occurred (to include details of the use or non-use of engineering controls, work practice controls, or PPE);
2. When a source is identifiable, that individual's blood will be tested as soon as feasible and after consent is obtained to determine HIV, HBV, and HCV infectivity. If consent is not obtained, we will establish that consent cannot be legally obtained. When the source individual's consent is not required by law, that individual's blood, if available, may be tested and the results documented.
 - a. Consultation and testing of the source individual will be done at the request of the exposed employee through the source's private physician.
 - b. If the source individual is known to be infected with HIV, HBV, or HCV, testing to determine such status need not be repeated.
 - c. Results of the source individual's testing will be made available to the exposed employee and the employee will be informed of laws/regulations regarding the privacy rights of the source individual. The results of the source individual's blood test and employee's blood test are confidential and will be known only to the health care provider and the exposed employee.
3. The exposed employee's blood will be collected as soon as it is feasible and tested for HIV, HBV, and HCV serological status, only after signed consent has been obtained.

Employee Testing & Treatment

Counseling and other features of post exposure evaluation will be offered whether or not the employee elects to have baseline HIV/HBV/HCV serological testing. If the employee consents to baseline blood collection but does not give consent to HIV serological testing, the sample will be preserved for at least 90 days. If within 90 days of the exposure incident, the employee gives written consent to have serologic testing performed on the baseline sample, testing will be ordered by the health care provider as soon as it is feasible.

Post-exposure prophylaxis (hepatitis B immune globulin for hepatitis B) will be provided when medically indicated according to the recommendations of the U.S. Public Health Service current at the time prophylaxis is administered. The costs of tests, treatment, and prophylaxis of employees will be borne by the organization. Cost of tests, treatment, and prophylaxis of

individuals who are not our employees (contract worker, registry, student, etc.) will be borne by the affected outside agency or as specified in the contract between our organization and the outside agency. The outside agency/individual will be responsible for compliance with the post-exposure evaluation and follow-up treatment.

Additional collection and testing will be made available as recommended by the U. S. Public Health Service.

Information Provided to the Health Care Professional

We will provide the health care professional responsible for the employee's HBV vaccination program and/or post-exposure evaluation with the following information:

1. A copy of *CCR, Title 8, Section 5193*;
2. A written description of the exposed employee's duties as they relate to the exposure incident;
3. Written documentation of the route of exposure and circumstances under which exposure occurred;
4. Results of the source individual's blood testing, if available; and
5. All medical records relevant to the appropriate treatment of the employee including vaccination status.

Health Care Professional's Written Opinion

The agency will obtain and provide the employee with a copy of the evaluating health care professional's written opinion within 15 days of the completion of the evaluation.

The health care professional's written opinion for HBV vaccination will be limited to whether HBV vaccination is indicated for an employee and if the employee has received such vaccination.

The health care professional's written opinion for post exposure follow-up will be limited to the following information:

- A statement that the employee has been informed of the results of the evaluation
- A statement that the employee has been told about any medical conditions resulting from exposure to blood or OPIM that require further evaluation or treatment.

Note: All other findings or diagnoses will remain confidential and will not be included in the written report.

First Aid and Exposure Incident Report

The agency will investigate and document on a first aid and exposure incident report form incidents involving the presence of blood or OPIM. Investigations will include the following information:

1. Names of all first aid providers who rendered assistance, regardless of the use of PPE;
2. Description of the incident that must include a determination of whether or not, in addition to the presence of blood or OPIM, an occupational exposure incident occurred;
3. Time and date of incident (include location);

4. Offer of HBV to all unvaccinated first aid providers who rendered assistance within 24-hours of the incident.

Sharps Injury Reporting

All parenteral contacts (piercing or lacerations) that occur in the workplace are reported on the sharps injury log and recorded within 14 days of the incident. The data recorded includes the following information, if known or reasonably available:

1. Date and time of the exposure incident;
2. Type and brand of the sharp involved;
3. The procedure the exposed employee was performing at the time of the incident;
4. How the incident occurred;
5. The body part involved in the incident;
6. If the sharp had engineered sharps injury protection, whether the mechanism was activated and whether the injury occurred before the protective mechanism was activated, during activation of the mechanism, or after activation of the mechanism, if applicable;
7. If the sharp had no engineered sharps injury protection, the employee's opinion as to whether and how such a mechanism could have prevented the injury and the employee's opinion about whether any other engineering, administrative, or work practice control could have prevented the injury.
8. The employee's opinion about whether any other engineering, administrative, or work practice control could have prevented the injury.

The required information is recorded on the sharps injury log, and all exposure incidents involving sharps are also recorded on the Cal/OSHA 300 Log in accordance with the requirements of the "Employer Records of Occupational Injury or Illness" regulation, known as the California record keeping standard.

Periodic determinations are made on the frequency of use and the types, models, or brands of sharps involved in the exposure incidents documented on our sharps injury log.

Identification of Engineering Controls

The agency's policy is to select appropriate and effective engineering controls to prevent or minimize exposure incidents. Engineering controls means controls (e.g., sharps disposal containers, needleless systems, and sharps with engineered sharps injury protection) that isolate or remove the blood borne pathogens hazard from the workplace.

The agency has procedures for identifying and selecting appropriate and effective engineering controls when appropriate, which may include:

- Setting up a process
- Defining needs
- Gathering information
- Testing and selecting products
- Using new products
- Conducting follow up

Plan Review and Update

The agency's exposure control plan is reviewed and updated at least annually (and whenever necessary) to include:

- New or modified tasks or procedures that affect occupational exposure
- Progress in implementing the use of needleless systems and sharps with engineered sharps injury protection
- New or revised job position(s) that involve occupational exposure
- Reviews and evaluations of exposure incidents that have occurred since the previous update
- Reviews and responses to information indicating the existing exposure control plan is deficient in any area

All employees are encouraged to provide suggestions on improving the procedures they perform. Employees contribute to the review and update of the exposure control plan by:

- Participating as members of committees (e.g., safety and health, labor-management, infection control, product evaluation and selection, purchasing of equipment)
- Attending meetings to discuss safety and health issues and improvements
- Reporting issues or potential problems to supervisors
- Providing ideas, recommendations, or suggestions
- Filling out reports, questionnaires, or other documents

Yolo County Housing

Hepatitis B Vaccine Consent/Declination

Date: _____

CONSENT - RECORD OF CONSENT FOR HEPATITIS "B" VACCINATION
(This Section is OPTIONAL)

I have attended the in-service training on the blood borne pathogens program regarding HIV, hepatitis B, and the hepatitis-B vaccine. I have also read the in-service training literature and have had an opportunity to ask questions and understand the benefits and risks of hepatitis B vaccination. I understand I must have at least three doses of vaccine over a six month period to confer immunity. However, as with any medical treatment, there is no guarantee that I will become immune or that I will not experience an adverse side effect from the vaccine. *You must complete the whole series within the six months.*

I request that it be administered to me.

Print Name: _____

Employee Signature: _____

Social Security #: _____ Department _____

Employer Representative: _____

DECLINATION - RECORD OF HEPATITIS "B" VACCINE DECLINATION
(This Section is MANDATORY)

Date: _____

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

Print Name: _____

Employee Signature: _____

Social Security #: _____ Department: _____

Employer Representative: _____

Yolo County Housing

FIRST AID INCIDENT REPORT FOR BLOODBORE PATHOGENS

Date of incident: _____ Time: _____ a.m. p.m.

Date incident reported: _____ Time: _____ a.m. p.m.

Describe the first-aid incident:

Was there blood or other body fluids present? Yes No

Did an exposure incident occur? Yes No

If yes, please describe it.

(Cal/OSHA – “An exposure incident means a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of one’s duties.”)

Did the first aid providers use PPE? Yes No

Print names of persons who provided first aid:

If there was an exposure incident as defined by Cal/OSHA, were they **immediately** referred for post-exposure evaluation and follow-up? Yes No

Was there blood or other body fluids present? Yes No

If unvaccinated, were they offered the hepatitis B vaccination? Yes No

Supervisor’s Signature: _____ Date: _____

Yolo County Housing

SHARPS INJURY LOG

Supervisors: Complete for each employee exposure incident involving a sharp. This form is to be completed with the employee but not by the employee. Fill in the most appropriate boxes. A sharp includes, but is not limited to, needles, needle devices, scalpels, lancets, Exacto blades, and broken glass.

Injury ID No. _____ Date/Time of Exposure Incident: _____
(Not Employee Name)

Job Classification/Title: _____ Department/Location: _____

Where Exposure Occurred:

Regular Department #: _____ Location (Bldg./Room #): _____

What procedure was being performed when the incident occurred?

Check all body parts that were involved

Finger Hand Arm Face/Head Torso Leg

Other _____

Did the exposure incident occur:

During use of sharp Disassembling After use and before sharps container

While putting sharp into sharps container Sharp left, inappropriate place

Other _____

Identify sharp object involved:

Type: _____ Brand: _____ Model: _____

Was sharp injury protection device attached? Yes No

Was protective mechanism activated? Yes No

Did the exposure occur: Before During After activation

If the sharp had no engineered sharps injury protection, do you feel that such a mechanism could have prevented the injury? Yes No

What other engineering, administrative, or work practice controls could have prevented this injury?

Attach this form to the accident investigation form. Send both originals to the Chief Executive Officer within 24 hours of the incident.

Yolo County Housing
Yolo County, California

To: Co. Counsel ✓
Yolo County Housing ✓

CONSENT CALENDAR

Excerpt of Minute Order No.15-23 Item No. 11, of the Yolo County Housing meeting of May 21, 2015.

MOTION: Thomson. SECOND: Vanderford. AYES: Aguiar-Curry, Johannessen, Thomson, Vanderford, Wienecke-Friedman. ABSENT: Stallard.

11.

Review, Approve and Adopt Updated YCH Heat Illness Prevention Plan (Holt)

Approved recommended action on Consent.



Yolo County Housing

147 W. Main Street
WOODLAND, CA 95695

Woodland: (530) 662-5428
Sacramento: (916) 444-8982
TTY: (800) 545-1833, ext. 626

DATE: May 21, 2015
TO: YCH Board of Commissioners
FROM: Lisa A. Baker, Chief Executive Officer
PREPARED BY: Janis Holt, General Managing Director
SUBJECT: **Review and Approve the Yolo County Housing Heat Illness Prevention Plan**

RECOMMENDED ACTION

That the Board of Commissioners:

1. Approve the Yolo County Housing Heat Illness Prevention Plan; and
2. Authorize the CEO to implement.

BACKGROUND/DISCUSSION

Since 2009, YCH employees are provided training annually on the types and dangers of heat illness and are provided with a fact sheet of how to prevent heat illness in their daily work. Job classifications that require employees to perform a portion of their duties in outdoor environments include:

- Maintenance Workers (Senior, Maintenance II/I)
- Housing Specialist II (Property Managers)
- Resident Managers
- Housing Inspectors
- Senior Migrant Center Coordinators

The Occupational Safety and Health Standards Board adopted additional changes to the California heat illness prevention regulations that include having a Heat Illness Prevention Plan in place to address accommodations when temperatures rise above 80 degrees Fahrenheit and added requirements for temperatures above 95 degrees.

In collaboration with California Housing Workers Compensation Authority (CHWCA), YCH has developed the proposed Heat Illness Prevention Plan providing management a detailed outline to follow in the event that temperatures are forecasted to meet or exceed 80 and 95 degrees. The written program outlines the following key steps, most of which are already common agency practice:

- Identifying outdoor work environments and conditions
- Monitoring weather conditions
- Monitoring employee acclimatization for working outdoors in the heat
- Providing clean drinking water
- Providing adequate shade
- Addressing high-heat procedures
- Handling an ill employee and initiating emergency procedures
- Providing supervisor and employee training

Due to the small number of staff working in the field and the necessity for staff to work autonomously, many of the key components of a successful heat illness prevention plan must be thought out. This includes such items for the Agency to consider as incorporating monitoring weather conditions, assigning work orders and tasks that reduce or eliminate the employees' exposure to high heat conditions, training staff on preventative measures when required to work in high heat including short exposures to the elements, and implementing a "check in" or "buddy" system to ensure that staff are safe during work hours.

In preparing the Heat Illness Prevention Plan, management met with field staff to discuss ideas for successful implementation of these procedures and alternative work options in the event of high heat conditions. As a result, in addition to the updated policy, management will be considering input which may result in a change of work schedules or assignments during the high heat months in Yolo County (July, August and September).

The Heat Illness and Prevention Plan will be a supplemental program to the Housing Commission approved the revised YCH Injury Illness and Prevention Program (IIPP).

Management, field staff and safety committee members will gather ongoing feedback from employees during the 2015 summer months, review the elements of the Heat Illness Prevention Plan, and make adjustments in accordance with Cal/OSHA guidance and regulations.

FISCAL IMPACT

There is no anticipated financial impact.

CONCLUSION

Staff recommends that the Commission approve the YCH Heat Illness Prevention Plan.

Attachment: YCH Heat Illness Prevention Plan



Yolo County Housing



Heat Illness Prevention Plan

May 2015

Written Program

This program is in place to protect all Yolo County Housing (YCH) employees from heat hazards posed by working in the outdoor environment, as required by the heat illness prevention regulation (Title 8 CCR 3395). We are committed to preventing heat-related illnesses that can occur to employees working outdoors by implementing the following key steps:

- Identifying outdoor work environments and conditions
- Monitoring weather conditions
- Monitoring employee acclimatization for working outdoors in heat
- Providing clean drinking water
- Providing adequate shade
- Addressing high-heat procedures
- Handling an ill employee and initiating emergency procedures
- Providing supervisor and employee training

Identifying Outdoor Work Environments and Conditions

The following positions have been identified as working in outdoor environments that could potentially expose employees to illnesses associated with high heat.

Verify affected positions

- Maintenance Workers (Senior Maintenance Worker, Maintenance Worker II/I)
- Housing Specialist II (Property Managers)
- Resident Managers
- Housing Inspector
- Senior Migrant Center Coordinators

Monitoring the weather

Weather forecast

When environmental risk factors create the possibility for heat illness, management will monitor the 10-day forecast for the work area. Management will review the forecasted temperature and humidity for the worksite and compare it against the National Weather Service Heat Index to evaluate the risk level for heat illness. It is important to keep in mind that the temperature at which these warnings occur must be lowered as much as 15 degrees if the workers under consideration are in direct sunlight.

Weather information will be obtained by accessing the National Weather Service at www.weather.gov, calling the local National Weather Service office, or monitoring local radio or television weather forecasts. Work schedules will be planned in advance, based on the forecast. Modifications will be made accordingly, especially if a heat wave is expected. This monitoring will take place all summer long.

Weather monitoring prior to workday during times of risk

Prior to each workday, management will be responsible for monitoring the weather using www.weather.gov, local weather forecasts or with the aid of a simple thermometer at the worksite. This weather information will be taken into consideration to determine when it will be

necessary to make modifications to the work schedule and assigned tasks (rescheduling the work orders, working on outdoor tasks during the cooler hours of the day, assigning indoor work orders, increasing the number of water and rest breaks).

If schedule modifications are not possible and workers have to work outdoors during a heat wave, management will provide a tailgate meeting to reinforce heat illness prevention with emergency response procedures and review the weather forecast with the workers. In addition, management will provide workers with an increased number of water and rest breaks. Management will institute a check in system via phone call, text or email to ensure workers take these breaks and find shade and cooling areas and respond to any signs of heat illness. When feasible, management will assign each employee a buddy to watch for signs of heat illness and ensure emergency procedures are initiated when someone displays signs of heat illness.

Management will be responsible for periodically checking the temperature to monitor for sudden increases. Once the temperature exceeds 80° Fahrenheit (F), employees will be required to use available shade areas that are accessible to the workers at each job location. Once the temperature equals or exceeds 95° F, additional preventive measures such as the high-heat procedures are implemented.

Monitoring employee acclimatization for working outdoors in heat

Management will watch for sudden heat waves early in the season or increases in temperatures to which employees are unaccustomed for several weeks or longer. When necessary, the workday and tasks will be re-assigned to reduce exposure to working outside or in direct sunlight. In addition, during the summer months, the work shift and assignments may change to reduce exposure to heat and to allow accessibility to management staff. During any heat wave, we will observe all employees closely (or maintain frequent communication via phone, text or email) and watch for possible signs of heat illness.

For new employees, management will try to find ways to lessen the intensity of work during a two-week break-in period. Steps taken to lessen the intensity of the workload for new employees will be documented. Management will:

- Stay alert to the presence of heat-related symptoms
- Assign new employees a buddy or experienced coworker to watch for discomfort or signs of heat illness

Providing clean drinking water

Management will provide access to potable drinking water at the beginning of each work shift so each employee can remain hydrated throughout the workday. Water is available in the central office located in the break room and in the maintenance shop areas. Management will remind employees to drink sufficient amounts of water, at least one quart (4 cups) per hour, when the work environment is hot, and employees are likely to be sweating more than usual in the course of their duties.

When employees do not have access to plumbed or otherwise continuously supplied water, and we cannot readily replenish the water during the shift, management will provide enough water at the start of the shift so each employee has access to one quart of water or more per hour.

Providing adequate shade

When the outdoor temperature in the work area exceeds 80° F, management will provide and maintain one or more areas with shade at all times while employees are present. These areas will either be open to the air or provided with ventilation or cooling. We will also provide shade when an employee specifically requests it, even when the temperature does not exceed 80° F. Employees will be allowed and encouraged to take a cool-down rest in the shade for a period of no less than five minutes anytime they feel the need to protect themselves from overheating.

Depending on the worksite, shade will most commonly be provided by trees or buildings. When natural shade is not available, other acceptable means of shade such as umbrellas, tents, canopies, etc., will be provided to block the sunlight. Employees will be re-assigned work duties to work in buildings or units with HVAC. Employees may use their A/C in their work vehicles if required.

Addressing high-heat procedures

When the outdoor temperature equals or exceeds **95° F**, management will:

- Be available so employees at the work site can contact them when necessary; if a cell phone is used, reception must be validated
- Be extra vigilant with observing and staying in contact with employees for alertness and signs of heat illness
- Remind employees to drink plenty of water throughout the work shift
- Closely supervise new employees for the first 14 days of employment, unless the employee indicates at the time of hire that he or she has been doing similar outdoor work for at least 10 of the past 30 days for four or more hours per day

Handling an ill employee and emergency procedures

When an employee displays possible signs of heat illness (refer to Attachment B for a detailed list of heat illnesses) a supervisor or designated employee will:

- Immediately call 911
- Move the employee to a cooler/shaded area
- Remove excess layers of clothing
- Fan and mist the worker with water
- Apply ice (ice bags or ice towels)
- Provide cool drinking water, if able to drink

A supervisor or designated employee will remain with the sick employee until emergency help arrives. If the area is remote, management will have a map along with clear and precise directions (such as streets or road names, distinguishing features, and distances to major roads) of the site to clearly communicate the location to emergency medical services. Management will designate someone to physically go to the nearest road or highway where emergency responders can see them.

Prior to assigning staff to a particular worksite, management will:

- Identify the work locations for all employees on duty to avoid a delay of emergency medical services
- Verify all staff carry cell phones or other means of communication to ensure emergency medical services can be called
- Ensure all communication devices are functional at the worksite prior to each shift

Providing supervisor and employee training

Employees

All employees are required to attend a health and safety training session prior to beginning work that should be reasonably anticipated to result in exposure to the risk of heat illness. The following information will be provided:

- The environmental and personal risk factors for heat illness, as well as the added burden of heat load on the body caused by exertion, clothing, and personal protective equipment
- Our procedures for complying with the requirements of the heat illness prevention regulation
- The importance of frequent consumption of small quantities of water
- The importance of acclimatization
- The different types of heat illness and the common signs and symptoms of heat illness
- The importance of employees immediately reporting symptoms or signs of heat illness for themselves and co-workers
- Our specific procedures for responding to possible heat illness, including how emergency medical services will be provided should they become necessary
- Our specific procedures for contacting emergency medical services and, if necessary, for transporting employees to a point where they can be reached by an emergency medical service provider
- Our procedures for designating a person to be available to ensure emergency procedures are invoked when appropriate
- Our specific procedures for ensuring clear and precise directions to the work site will be provided as needed to emergency responders

Supervisors

In addition to obtaining the training required for employees listed above, supervisors will be trained before performing work that could be reasonably anticipated to result in exposure to heat illness. Training will include:

- All information provided during employee training
- Procedures for preventing heat illness, including monitoring weather reports and how to respond to hot weather advisories
- Information about how to identify heat illness
- Steps to take for emergency response to heat illness

Attachment A - Heat Illness Employee Training Handout

Yolo County Housing

DEPARTMENT: **Facilities**

We have developed a training program to increase employee awareness of the occurrence of exposures to heat illnesses when working outdoors and to motivate employees to protect themselves.

Overview of Heat Illness Prevention Regulation

The heat illness prevention regulation is intended to ensure both employers and employees understand the dangers associated with working in heat in outdoor workplaces. The following information is a review of the specific requirements of a heat illness prevention program, including water, shade, high-heat procedures, and training.

Written Heat Illness Prevention Program

We have a written program that outlines how we provide information on and control exposures that can result in heat illness while performing outdoor work in the heat. This program is available to you during our training or during your work shift from **Fred Ichtertz** at the Yolo County Housing Administrative Office.

Work Environment and Conditions in Our Workplace

Our written program includes the identification of work that is performed outdoors when the weather is hot. This list is not all inclusive and when other types of work or conditions are identified, we will update our program and our training. The most important element is to realize that when it is hot outside and you are working, take precautions to protect yourself.

Water

We will provide enough fresh drinking water so you have access to at least one quart of water per hour and actively encourage you to drink it. Refrain from alcoholic beverages or beverages that contain caffeine, such as soft drinks, coffee, and tea.

Shade

Our goal is to provide shade so everyone who needs it has access to it to cool off when the weather is hot. If infeasible or unsafe to provide shade, we will provide other means to help keep you cool.

High-Heat Procedures

When the outside temperature reaches or exceeds 95° F, additional precautions, to the extent they are feasible, will be taken to ensure your safety and health. This includes good communication, close supervision if you have not recently worked outdoors in the heat for four or more hours per day, observing you, and reminding you to drink plenty of water.

Training

All employees and supervisors who have potential heat exposures receive the same training so everyone understands our policy and procedures for keeping everyone safe when working outdoors. Training addresses how to acclimate to the heat, how much water to drink, the signs and symptoms of heat illness, the importance of reporting symptoms to your supervisor, and how to get help in an emergency.

You can read the California heat illness prevention regulation for additional information on any specific program element at <http://www.dir.ca.gov/DOSH/HeatIllnessInfo.html>.

Attachment B - Types of Heat Illness

Heat illness is a serious medical condition resulting from the body's inability to cope with a particular heat load and includes heat cramps, heat exhaustion, heat syncope, and heat stroke.

Heat Stroke

The most life-threatening heat-related illness; heat stroke happens when the body can no longer control its temperature. The body's temperature rises fast. The body cannot sweat and is unable to cool itself. Warning signs include red, hot, dry skin; very high body temperature; dizziness; nausea; confusion; strange behavior or unconsciousness; rapid pulse or throbbing headache. Heat stroke can cause death or disability if treatment is not given.

Heat Exhaustion

Heat exhaustion is a milder illness that happens when the body has lost too much water and salt in sweat. Warning signs include heavy sweating, cramps, headache, nausea or vomiting, paleness, tiredness, weakness, dizziness, and fainting. If heat exhaustion is not treated, it can turn into heat stroke. Get medical assistance if the symptoms are severe or if the victim has heart problems or high blood pressure.

Heat Syncope

Heat syncope is a fainting (syncope) episode or dizziness that usually occurs with prolonged standing or sudden rising from a sitting or lying position. Factors that may contribute to heat syncope include dehydration and lack of acclimatization. Symptoms of heat syncope include light-headedness, dizziness, and fainting.

Heat Cramps

Heat cramps are muscle pains and spasms due to heavy activity. They usually involve the stomach muscles or the legs. It is generally thought that the loss of water and salt from heavy sweating causes the cramps. If you have heart problems or are on a low-sodium diet, get medical attention for heat cramps.

Heat Rash

Heat rash is a skin irritation caused by excessive sweating during hot, humid weather. Symptoms include red cluster of pimples or small blisters. Heat rash is more likely to occur on the neck and upper chest, in the groin, under the breasts, and in elbow creases.

Sunburn

Sunburn is when skin becomes red, painful, and unusually warm after being in the sun. Sunburn should be avoided because it damages the skin and could lead to more serious illness.

Yolo County Housing
Yolo County, California

Meeting Date: May 21, 2015

To: County Counsel ✓
Yolo County Housing ✓

12.

Review, Approve and Adopt Updated Water Conservation Rules in Accordance with Governor's Executive Order dated April 1, 2015 (Chaudry)

Minute Order No. 15-24: Approved recommended action.

MOTION: Thomson. SECOND: Wienecke-Friedman. AYES: Aguiar-Curry, Johannessen, Thomson, Vanderford, Wienecke-Friedman. ABSENT: Stallard.



Yolo County Housing

147 W. Main Street
WOODLAND, CA 95695

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TTY: (800) 545-1833, ext. 626

DATE: May 21, 2015
TO: YCH Board of Commissioners
FROM: Lisa A. Baker, Chief Executive Officer
PREPARED BY: Masud Chaudry, Real Estate Services Supervisor
SUBJECT: **Review, Approve and Adopt Updated Emergency Water Conservation Rules for Residents**

RECOMMENDED ACTIONS:

That the Board of Commissioners:

1. Review, approve and adopt the Emergency Water Conservation Rules for Residents, and
2. Authorize the CEO to implement.

BACKGROUND / DISCUSSION

Governor Edmund G Brown Jr. declared a drought emergency for California in January 2014 and called on residents to reduce water use by 20 percent.

In March 2014, YCH drafted and implemented Water Conservation Rules for Residents to reduce water usage by 20% throughout its portfolio.

April 2015 - Per the State of California Executive Orders B-26-14, B-28-14, and B-29-15 Governor Edmund G Brown Jr. signed the Executive Order on April 1, 2015 that the State Water Resource Board shall impose restrictions to achieve a statewide 25% reduction in potable urban water usage through February 28, 2016.

On April 1, 2015 YCH staff revised the Emergency Water Conservation Rules for Residents to reflect the new water restrictions and to implement Emergency Water Conservation Rules throughout its portfolio for a 25% reduction in water usage.

Staff recommends that the Commission adopt the Emergency Water Conservation Rules.

FINANCIAL IMPACT

None anticipated.

Working together to provide quality affordable housing and community development services for all

Attachment: revised Emergency Water Conservation Rules



Yolo County Housing

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EMERGENCY WATER CONSERVATION RULES FOR RESIDENTS

Dear Residents;

As many of you know, 2015 is the fourth dry year in a row in California. As a result, the Governor of California has declared a drought emergency and signed an Executive Order to reduce water use by 25% in State of California to prevent a water shortage. Lack of rain means our State has less groundwater to pump. This makes pumping water for delivery to homes and business more costly and water is more scarce than ever. As you know, we have been on water restriction since the notice we originally sent you in March 2014.

Currently, water use is unmetered for many residents living in YCH owned properties and the water bill is paid by YCH. Although most of our residents are water conscious, we have noticed some residents continue to waste water and are not drought conscious. To help ensure that our developments meet the additional targeted 25% reduction, Yolo County Housing will be enforcing the lease to address the following;

- Excessive water use or water waste **will** result in lease violations, including notices of violation and 30 day notices to vacate for repeated multiple violations.

As a reminder; Your Residential Public Housing Lease agreement states the following;

(c) **Tenant Responsibilities:** Tenant agrees not to waste the utilities provided by YCH and to comply with any applicable law, regulation, or guideline of any governmental entity regulating utilities or fuels. [966.4 (f) (8)]

To help everyone get started on being “water wise,” we have attached a list of the **Mandatory Water Conservation Rules**; and we’ve added helpful recommendations for overall water conservation. We thank everyone for doing their part by conserving water.

EMERGENCY WATER CONSERVATION RULES FOR RESIDENTS

Mandatory Requirements;

From the effective date of the adoption of these emergency water conservation rules until

further notice, the following rules shall apply to water usage by all residents.

1. Watering of landscaping, lawns or outside plants may be done **only one time per week**, and for **no longer than 10 minutes** on each landscaping, lawn or planter area.
2. Trees can be watered once per week for up to 10 minutes.
3. Hoses or sprinkler systems shall not be left running unattended.
4. Water hoses **must have a shut-off nozzle** on the end of the hose.
5. Water **shall not** be allowed to escape landscaped or planted areas and **run off into sidewalks, driveways or gutters**.
6. Residents **shall report any leaking water fixture** in their unit immediately to site management or maintenance staff.
7. Residents **shall not remove, disable or replace any flow restriction** shower head, faucet or other conservation device on interior or exterior unit plumbing.
8. **Use of wading pools is suspended** during drought restrictions.
9. **Water shall not be used to clean walkways, porches, and patios**.

Recommendations:

Residents are encouraged to conserve water within their units by:

- a. Turning off running water when not being used. Turn off the faucet while brushing teeth. Fill the sink or a wash basin with water and do not run the water constantly while washing dishes.
- b. Capturing in a bucket, water left on to “warm up” water for a shower, tub or sink and reusing the captured water for washing, flushing toilets, watering plants or other appropriate uses.
- c. Combining small loads of laundry to reduce the total number of loads and water used.
- d. Use a broom or brush to clean walkways.