

# VOLUNTEER SAFETY ORIENTATION INFORMATION

This handout is provided to assist you with understanding the Department of Corrections' expectations for working safely while you are conducting state business. The Department is concerned for your safety and asks your assistance to ensure your valuable time spent with us is safe and beneficial.

## **BLOOD AND BODY FLUIDS PRECAUTIONS**

Because of the potential hazard of contracting hepatitis B and/or the Human Immunodeficiency Virus (HIV), which are transmitted by blood or other body fluids, you are to refrain from assisting in any situation which may lead to contact with blood and/or body fluids. Please notify an employee in case of emergency.

## CHEMICAL HAZARD COMMUNICATION (HAZCOM) INFORMATION

You have a right to know if any chemical substances you come in contact with are hazardous to you. Notify an employee if you have questions regarding chemical substances you may be exposed to. They will explain if there are hazards associated with the use of those chemicals.

## HOW TO REPORT WORKPLACE ACCIDENTS

Contact your supervisor or notify an employee on duty and complete an online <u>DOC 03-133 Accident/</u> <u>Injury Report</u> located on the Department's internal website within 24 hours.

## **REPORTING UNSAFE WORKING CONDITIONS**

Contact your supervisor or other employee if you have identified a workplace hazard or condition that may affect your or another's ability to work safely. Your supervisor may request you fill out <u>DOC 03-151 Hazard Report</u>. This form is also available at the work site.

## ACKNOWLEDGEMENT

I acknowledge I have read this handout and the contents have been explained to me. I realize that any willful neglect on my part to abide by the safety rules of the Department of Corrections may be cause for disciplinary action.

Volunteer name	Signature	Date
Volunteer Specialist	Signature	Date
The contents of this document may be eligible will be redacted in the event of such a request.		

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