

HEALTH & SAFETY PLAN GUIDE SHEET

- **SAFETY POLICY STATEMENT** – A signed copy should be framed and posted on each campus within the district.
- **FILLING IN *ITALICIZED, UNDERLINED, BOLD BLANKS***- In order to avoid constant revision and changes, it is recommended to use titles and/or positions in lieu of names.
- **TIME FREQUENCIES** – Use terms such as *weekly, monthly, quarterly, or even periodically, i.e. monthly or quarterly* safety meetings or *periodic* inspections.
- **DISTRICT SAFETY COORDINATOR** – This is optional, i.e. it is not mandatory for a district to name or denote a *District Safety Coordinator*.
- **ACCIDENT INVESTIGATION FORM** – This form should be used in follow-up of all work related claims. The AR Form I and Form N are Claim Reporting forms, not formal investigation forms.
- **SAFETY HAZARD REPORT FORM** – Again, this is a “Best Practice” for any employer. You may use this form, or if you are currently using a form generated in “School Dude”, you may continue using that work order protocol. It is not necessary to use both.
- **CAFETERIA/KITCHEN CHECKLIST FORM** – This form or one similar should be used by the Food Service Manager or their designee at each cafeteria on a quarterly basis at minimum.
- **RETURN-TO-WORK PROGRAM** – Similar to the Health and Safety Plan itself, *this does not require the review and approval of the School Board*, as it is **NOT A POLICY**. It is designed to prevent or reduce the number of lost time claims which are the primary driver of your workers’ compensation insurance premiums as well as the primary factor in the Rule 32 formula.
- **HEALTH & SAFETY PLAN ANNUAL REVIEW**- Once a year, all parties concerned should meet to review the Plan, determine its’ effectiveness, and propose any changes.

For assistance, contact Dwayne Mc Anally @ 501-492-4807 or dmcanally@arsba.org