# HEALTH AND SAFETY PLAN

This form presents relevant information regarding health and safety issues for ACPH-VMS staff and volunteers at the ACPH-VMC. The VMS Manager is responsible for the completion of this form during the initial phases of ACPH VMS activity.

<table>
<thead>
<tr>
<th>1. INCIDENT:</th>
<th>2. DATE/TIME PREPARED:</th>
<th>3. OPERATIONAL PERIOD (Date/Time)</th>
</tr>
</thead>
</table>

## 4. Hazard description

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## 5. Interventions (control efforts)

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## 6. Reporting Mechanism for illness/injury:

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## 7. Standard Safety Procedures:

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- 

## 8. Attach VMS 206 Medical Form

<table>
<thead>
<tr>
<th>9. Prepared by:</th>
<th>10. VMS Manager Signature:</th>
</tr>
</thead>
</table>
Arlington County Public Health
Volunteer Management System

Instructions for:
VMS 208 - Health & Safety Plan

This form presents relevant information regarding health and safety issues for ACPH-VMS staff and volunteers at the ACPH-VMC. The VMS Manager is responsible for the completion of this form during the initial phases of ACPH VMS activity. It is updated as indicated and included by Plans in the ACPH-VMS Action Plan for each operational period. Deployed volunteers are covered by the ICS/IMS Health & Safety Plan.

1. Section 1: Document the name given by ICS/IMS management to the name of the incident.
2. Section 2: Document the date and time at which the form is being prepared.
3. Section 3: Document the operational period the form applies to. For instance, if operating on a 12 hour cycle, then put 0700-1900 or 1900-0700 as appropriate. If operating on a 24 hour cycle, then 0700-0700 as appropriate.
4. Section 4: Provide a description of the main hazards facing ACPH volunteers.
5. Section 5: Provide a description of the interventions (control efforts) in place or required to manage the hazards.
6. Section 6: Describe the reporting mechanism defined by the ACPH VMS in the case of an illness or injury among ACPH VMS staff or volunteers.
7. Section 7: List the standard safety procedures associated with hazard control efforts and the management of illness or injury among ACPH VMS staff or volunteers.
8. Section 8: Review the VMS 206 Medical Form for additional details on the referral and treatment of injuries or illnesses encountered in ACPH VMS personnel or volunteers.
9. Section 9: Document the name of the ACPH VMS Staff responsible for preparing the plan.
10. Section 10: Insert the signature of the ACPH VMS Manager to indicate that the plan has been reviewed and approved.