

 <p style="text-align: center;"><b>DIVISION OF ADULT INSTITUTIONS</b></p> <p style="text-align: center;"><b>POLICY AND PROCEDURES</b></p>	<b>DAI Policy #:</b> 300.00.76	<b>Page</b> 1 of 5
	<b>Original Effective Date:</b> 05/08/00	<b>New Effective Date:</b> 11/12/18
	<b>Supersedes:</b> 300.00.76	<b>Dated:</b> 03/05/15
	<b>Administrator's Approval:</b> Jim Schwochert, Administrator	
<b>Required Posting or Restricted:</b>		
<input type="checkbox"/> Inmate <input checked="" type="checkbox"/> All Staff <input type="checkbox"/> Restricted		
<b>Chapter:</b> 300 Administrative		
<b>Subject:</b> Safety Glasses		

## POLICY

The Division of Adult Institutions shall ensure facility staff, visitors, contractors and inmates exposed to hazards have access to required eye personal protective equipment in a uniform manner.

## REFERENCES

29 CFR Parts 1910.132, 133, 135, 136 and 138, OSHA Personal Protective Equipment. ANSI Z87.1-2003, ANSI Z87.1-1989 (R-1998), ANSI Z87.1-1989 – American National Standard Practice for Occupational and Educational Eye Protection  
Current State Purchasing Operational Bulletin for Safety Glasses and Eye Protection Devices  
Division of Management Services – Risk Management 204.601.004 – Personal Protective Equipment

## DEFINITIONS, ACRONYMS, AND FORMS

Affected Individual – Any person (staff, visitor, inmate, vendor, contractor, etc.) required to wear or working in an area of a DAI facility which requires the use of any type of PPE. If PPE for eyes is needed, it will be identified within a completed hazard assessment.

DAI – Division of Adult Institutions

DOC – Department of Corrections

DOC-2138 – Application for Employee Prescription Safety Glasses

DOC-2466 – Incident Report (WICS)

Hazard Assessment – An assessment of the workplace to determine if hazards are present, or are likely to be present, which necessitate the use of PPE. This assessment shall be completed for all DAI work locations. It shall be a written document which identifies the date, location and workplace evaluated and is signed by a qualified individual.

Periodic Tasks – Tasks that have the potential of needing prescription eyewear PPE, but are not more than 50% of a staff's tasks time to complete or as referenced in the job classification's position description.

<b>DAI Policy #:</b> 300.00.76	<b>New Effective Date:</b> 11/12/18	<b>Page</b> 2 of 5
<b>Chapter:</b> 300 Administrative		
<b>Subject:</b> Safety Glasses		

Personal Protective Equipment (PPE) – Equipment designed to protect an individual from hazards that cannot practically be removed from the work environment or eliminated by engineering controls. Examples include: non-prescription or prescription safety glasses, goggles, face shields and any other OSHA approved personal protective eye equipment, as identified in both 29 CFR Parts 1910.132 and American National Standard Practice for Occupational and Educational Eye Protection.

Qualified Individual – A person with specific training, knowledge and experience in the area for which the person has the responsibility and the authority to control. Examples may include but are not limited to; direct supervisor of the job location, job expert, staff who completed Job Hazard Assessment.

## **PROCEDURES**

### **I. General Guidelines**

- A. Complete a DOC-2138 and submit to immediate supervisor.
- B. Immediate supervisor shall review the request.
  1. Supervisor verifies a hazard assessment has been completed for this type of work/location and reviews what type of PPE is necessary.
  2. If a hazard assessment has not yet been completed, the supervisor shall work with the Health and Safety Committee to have one completed. This shall determine the proper PPE to make available to staff.
- C. Immediate supervisor is responsible for responding to staff.
  1. A request may be approved based on the completed hazard assessment.
  2. A request may be denied based on the completed hazard assessment, but other personal protective devices may be made available to staff for periodic tasks.
- D. Requests for prescription safety glasses shall be approved when both of the following criteria are met.
  1. Hazard assessment is completed and identifies the need for PPE.
  2. Tasks are performed for at least 50% of the employee's time, as identified by the classification's job duties and the position description.
- E. Requests for prescription safety glasses shall be denied when any of the following reasons exist:
  1. The hazard assessment does not support the need for this task.
  2. The task is deemed periodic in nature and not routine.
  3. The task is not completed more than 50% of the time, as identified by the job classification or the position description.
  4. There is the ability to assign or make non-prescription glasses or goggles available to be worn by staff. These would be worn alone or over a staff's existing personal eye glasses.
- F. Access to PPE for eyes for visitors, contractors or inmates.

<b>DAI Policy #:</b> 300.00.76	<b>New Effective Date:</b> 11/12/18	<b>Page</b> 3 of 5
<b>Chapter:</b> 300 Administrative		
<b>Subject:</b> Safety Glasses		

1. Visitors/Contractors shall be provided non-prescription protective eyewear to be worn if determined hazards are present, or are likely to be present, which necessitate the use of PPE. Equipment shall be returned following each use.
2. Inmates with facility assignments which require PPE eyewear shall be provided PPE eyewear if determined hazards are present, or are likely to be present, which necessitates the use of PPE. Equipment shall be returned following each use/shift of work.

## **II. Ordering Safety Glasses**

- A. Each DAI facility shall develop procedures to further direct staff on the local ordering of prescription/non-prescription safety glasses.
- B. DAI staff eye exams for prescription safety glasses are covered by the State of Wisconsin Group Health Insurance Plan for eligible State employees. A copay of up to 10% shall be paid by DAI facilities.
- C. For staff covered under another's insurance plan and a vision test is not a covered benefit, facilities shall cover the cost of the exam, limited to the vision test charges.

## **III. Limitations on Prescription Safety Glasses**

- A. One pair of industrial safety glasses may be obtained during a 12 month period, if the prescription warrants a change in prescription safety glasses.
- B. Eligible expenses
  1. Frames – No more than high fashion plastic frames with spring hinges.
  2. Lens – Plano Lens.
  3. Lens – Single Vision Polycarbonate.
  4. Bifocals polycarbonate.
  5. Trifocals polycarbonate.
  6. Side Shields – Permanent (required).
  7. Dispensing fee – costs.
- C. Any cost greater than what has been identified above shall be the staff responsibility. Facilities shall only pay for up to the maximum amounts stated in each category listed above.
- D. Progressive lenses, coatings, tints, polarized or photochromic lenses are available only if staff member is willing to pay the cost with few exceptions.
- E. Staff shall pay his/her portion of the costs to the DOC prior to ordering the glasses through their respective DAI facility.
- F. Frame choices are limited to styles listed in the current State Purchasing Operational Bulletin.

<b>DAI Policy #:</b> 300.00.76	<b>New Effective Date:</b> 11/12/18	<b>Page</b> 4 of 5
<b>Chapter:</b> 300 Administrative		
<b>Subject:</b> Safety Glasses		

1. Some listed frames are available at extra cost to the staff person.
2. Only frames listed in the bulletin are allowed even if the staff person is willing to pay the cost.

**IV. Damage or Replacement of Prescription Safety Glasses**

- A. Complete DOC-2466 if eyeglasses are broken due to a work related incident.
  
- B. New frames shall not be ordered unless:
  1. The glasses are more than 24 months old.
  2. The glasses are irreparable.
  3. Prescription change requires frame change.

**Administrator's Approval:** \_\_\_\_\_ **Date Signed:** \_\_\_\_\_  
Jim Schwochert, Administrator

**DIVISION OF ADULT INSTITUTIONS FACILITY IMPLEMENTATION PROCEDURES**

<b>Facility:</b> Name		
<b>Original Effective Date:</b>	<b>DAI Policy Number:</b> 300.00.76	<b>Page</b> 5 of 5
<b>New Effective Date:</b> 00/00/00	<b>Supersedes Number:</b>	<b>Dated:</b>
<b>Chapter:</b> 300 Administrative		
<b>Subject:</b> Safety Glasses		
<b>Will Implement</b> <input type="checkbox"/> As written <input type="checkbox"/> With below procedures for facility implementation		
<b>Warden's/Center Superintendent's Approval:</b>		

**REFERENCES**

**DEFINITIONS, ACRONYMS, AND FORMS**

**FACILITY PROCEDURE**

- I.
  - A.
    - 1.
      - a.
  - B.
  - C.
- II.
  - A.
  - B.
  - C.