| **RESPONSIBILITIES** | AUG | SEPT | OCT | NOV | DEC | JAN | FEB | MAR | APR | MAY | JUNE | JULY |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Review Exposure Control Plan - July/Aug |  |  |  |  |  |  |  |  |  |  |  |  |
| Provide input for School Safety Plan - July/Aug |  |  |  |  |  |  |  |  |  |  |  |  |
| Update Policy Book - July/Aug |  |  |  |  |  |  |  |  |  |  |  |  |
| Review existing protocols; collaborate with School Medical Director on new protocols as needed - July/Aug |  |  |  |  |  |  |  |  |  |  |  |  |
| Review First Aid Protocols - July/Aug |  |  |  |  |  |  |  |  |  |  |  |  |
| Contact – for medical supplies – Aug/Dec |  |  |  |  |  |  |  |  |  |  |  |  |
| Assess # of Good Samaritan Kits for fall – order supplies as needed - Aug/May |  |  |  |  |  |  |  |  |  |  |  |  |
| Distribute Good Samaritan Kits to staff at Faculty Meeting - Sept/Jan |  |  |  |  |  |  |  |  |  |  |  |  |
| Blood Borne Pathogen refresher training for staff -Oct/Mar |  |  |  |  |  |  |  |  |  |  |  |  |
| Provide health related inputs to newsletter -Quarterly |  |  |  |  |  |  |  |  |  |  |  |  |
| Inspect building and grounds for health & safety hazards - Quarterly or as needed |  |  |  |  |  |  |  |  |  |  |  |  |
| Schedule CPR, if applicable - Quarterly |  |  |  |  |  |  |  |  |  |  |  |  |
| Review needs for staff training and provide as needed (Epi, Glucagon, Naloxone) – Sept/Jan/May  |  |  |  |  |  |  |  |  |  |  |  |  |
| Letter to parents regarding picking up children’s medication - June |  |  |  |  |  |  |  |  |  |  |  |  |