

UNIVERSITY OF CALIFORNIA, DAVIS

Division of

TRANSPORTATION AND PARKING SERVICES (TAPS)

INJURY/ILLNESS PREVENTION PROGRAM TABLE OF CONTENTS

INJURY/ILLNESS PREVENTION PROGRAM

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Reviewed: March 2005

Step One: Establish the Injury and Illness Prevention Program in Writing and Designate Who is Responsible

Source of This Requirement

Statute

Every employer shall establish, implement, and maintain an effective injury prevention program. The program shall be written and shall include (1) Identification of the person or persons responsible for implementing the program..." (Labor Code §6401.7(a)).

Standard

Effective July 1, 1991, every employer shall, establish, implement, and maintain an effective Injury and Illness Prevention Program. The Program shall be in writing and shall (1) Identify the person or persons with authority and responsibility for implementing the program..." (8 CCR §3203(a)).

Implementation

Written Program

The employer's injury and illness prevention program must be a written document that must address in writing the minimum elements of the standard. Compliance with this requirement can be accomplished by use of a standard form similar to the one in Appendix I.

Designation of a Responsible Person or Persons

Both the statute and standard clearly require that the employer's injury and illness prevention program identify a responsible person (Department Manager). Given the express language, the program must designate an identifiable person with authority and responsibility for implementing the program. The apparent intent of the standard is to identify a person in management as the person responsible for the injury and illness prevention program.

Employers must consider this issue carefully and assure that whomever they designate as the responsible person understands the program, takes appropriate action to implement it, and monitors the program's effectiveness. Both the statute and the standard permit multiple responsible persons; accordingly, there is an opportunity to establish an implementor and management official to provide overall direction.

APPENDIX I

WRITTEN INJURY AND ILLNESS PREVENTION PROGRAM

Completion of this plan indicates that it is the policy of the employer to fully comply with Labor Code 6401.7 (SB 198) and General Industry Safety Order 3203, Injury and Illness Prevention Program.

DEPARTMENT INFORMATION

Division Name: Transportation and Parking Services

Department Director: Clifford A. Contreras

Address: UCD Transportation and Parking Services

Telephone Number: 752-5435

PERSON(S) WITH AUTHORITY AND RESPONSIBILITY FOR IMPLEMENTING THE INJURY AND ILLNESS PREVENTION PROGRAM;

Name (of Safety Coordinator): Randall Williams 754-2275

Name (Alternate): David Franklin 752-8229

PREVENTING OCCUPATIONAL SAFETY AND HEALTH HAZARDS INCLUDES THE FOLLOWING:

Review of applicable General Industry Safety Orders and other Safety Orders that apply to the operation. California Code of Regulations, Title 8 on file in Safety & Environmental Coordinator's Office.

Review of industry and general information (including Material Safety Data Sheets and Chemical Hygiene Plan for chemicals used) on potential occupational safety and health hazards. MSDS maintained in file inside shop office and Safety & Environmental Coordinator's Office.

Investigations of all accidents, injuries, illnesses, and unusual events that have occurred at this location. Reports filed in Safety & Environmental Coordinator's Office.

Periodic and scheduled inspections of general work areas and specific workstations. Results of inspections maintained in Safety & Environmental Coordinator's Office.

Evaluation of information provided by employees. Suggestion forms available on shop bulletin board, dispatch office, administration Office, and Safety & Environmental Coordinator's Office.

Step Two: Identifying Safety and Health Hazards Associated with the Occupations Employed

Source of This Requirement

Statute

The program shall include... (2) The employer's system for identifying and evaluating workplace hazards..." (Labor Code §6401.7(a)).

Standard

The program shall include... (4) Procedures for identifying and evaluating workplace hazards..." (8 CCR §3203(a)).

The injury and illness prevention program must include the methods used to identify the potential occupational safety and health hazards. The plan should specify those hazards identified for each work area. This requirement is the most technically challenging aspect of the standard for employers that do not have safety professionals on their staff. Appendix II provides a system and information to assist employers in identifying job hazards.

See attached health and safety considerations.

The system in this example uses the concept of job types to define discrete groups of employees with similar, if not identical, responsibilities. The hazards for each group can be identified and used to develop safe work practices to apply to training, employee communication, and inspections.

Hazards associated with the general work area, such as work surfaces, access points, fire prevention and emergency evacuation, can be identified and documented for the department as a whole.

The actual hazard identification process involves use of various sources of information, including but not limited to:

- + Review of EH&S required programs in place to satisfy standards that identify hazardous activities and prescribe how safety is assured.
- + Observation of work practices, work areas, and equipment looking for obviously or potentially unsafe conditions.

Accomplished daily by all personnel.

- + Evaluation of the employer's own records of Workers' Compensation claims, medical reports, and the OSHA Log 200 of recordable occupational injury and illness cases (maintained at EH&S).
- + Evaluation of worker safety suggestions or complaints.

Appendix II

A. HAZARD EVALUATIONS HAVE BEEN CONDUCTED FOR THE FOLLOWING JOB TYPES OR SPECIFIC INDIVIDUALS

1. Job Type: _____ See Personnel List located in Managers Office
Individuals: _____

2. Job Type: _____
Individuals: _____

3. Job Type: _____
Individuals: _____

4. Job Type: _____
Individuals: _____

5. Job Type: _____
Individuals: _____

6. Job Type: _____
Individuals: _____

For each job type or specific individual noted, supply a narrative description of the specific hazards associated with the job. See Facilities Inspection Form III(a) for assistance in identifying hazards. Phone EH&S at 2-1493 if you need assistance with a Job Safety Analysis.

B. The Occupational Safety and Health Hazards Identified are Documented in the Following Manner:

+ Hazard evaluation form for general work areas and specific job types, which are maintained at the following location: Administrative Office

OR + Other Documentation: _____

Maintained at the following location: _____

C. Safe Working Conditions, Work Practices, and Protective Equipment Requirements are Documented and Communicated in the Following Manner:

+ Safe work practices have been developed for general and/or specific job types or work stations and are maintained at the following location: (includes manuals, safetynets, etc.): Administrative Office, Shop, and Safety & Environmental Coordinator's Office.

OR + Other Documentation: _____

Maintained at the following location(s): _____

TAPS WORK AREA HAZARD AND REQUIRED PPE		
WORK AREA	HAZARD	REQUIRED PPE
<p>Offices: There are several office areas within The Division of TAPS: Fleet Services Administration, TAPS Administration, Services, Operations, Parts (office and warehouse), Bus Trailer, North and South Entry Parking Structures, University Airport Office, South Gate Kiosk and North Gate Kiosk.</p>	<p>Working in and around the office areas and equipment has its own hazards. There are trip, fall, and fire hazards to mention a few. Although office areas are not an industrial environment, caution must be used while working around file cabinets, using extension cords, reaching for items above the eye level, storing on shelves, etc. to minimize personal injury or damage to equipment.</p>	<p>There are no special requirements for Personal Protective Equipment (PPE) around the office areas. General awareness, common sense, and practical use (i.e. using a ladder instead of a chair or a box) will provide for a safe work area and operation.</p>
<p>Airport: Since early 1950, University of California has been operating an airport facility on the grounds of its Davis campus as a utility airport. Providing service to campus employees and means to transport agricultural samples between the University's research stations and the campus. In addition, the airport benefits from a local Flying Club, a privately operated maintenance facility, and several storage facilities.</p>	<p>Airport operation and operating (working) on airport presents unique hazards. It is important to remember that aircraft movement has priority and right-of-way at all times. In the absence of a visible circle of safety around the aircraft, an imaginary 10 feet clearance must be maintained around the aircraft. All vehicles must park in front of the nose of the aircraft with driver side toward the nose of the aircraft.</p>	<p>There are no requirements for PPE.</p>

<p>General-Purpose and Heavy-duty shops: General-Purpose Vehicle technicians perform minor and major maintenance on cars, trucks, vans, etc. Heavy Duty shop technicians also perform maintenance on buses, heavy or specialized vehicles and equipment.</p>	<p>Technicians working in maintenance shops are exposed to numerous hazards associated with working in an industrial environment. Some of those include: compressed air, hydraulic lifts, power tools, pressurized lubricating dispensers and equipment, chemical compounds (may be pressurized, cleaners, solvents, degreasers, corrosive, etc.), pressurized vehicle systems (A/C systems, heating/cooling, power steering, etc.), heat (generated by engines, transmissions, exhaust systems, heat/cooling systems, welding,...), proximity to rotating machinery, test equipment, or components (dynamometer, lathe, engines, drive shafts, etc.) and noise.</p>	<p>Eye Protection (Safety glasses while in the performance of their duties (see note 1). Face shield as required (i.e. operating lathe, parts washer). Hearing protection as required. Safety toe shoes while in the performance of their duties (see note 2). Apron as required (i.e. using grinding/wire wheel). Gloves as required (i.e. working/handling hot, sharp objects or components). Note 1: Visitors to these areas require eye protection (safety glasses). Note 2: Visitors to these areas do NOT require safety toe shoes.</p>
WORK AREA	HAZARD	REQUIRED PPE
<p>Wash Rack Area (outside): Fleet Services technicians use this area to clean vehicles prior to or after maintenance using a pressure washer.</p>	<p>Hazards associated with using high pressure washer include: high water pressure and heat (0-120 degrees F if used in conjunction with heating element), flying debris, grease, dirt, and chemicals (solvents, detergents), residual fuel, oil and other lubricating fluids, as well as trip, and slip hazard.</p>	<p>Eye Protection, while using the equipment. Face Shield, while using the equipment to enhance protection against flying debris, dirt and chemical to exposed facial areas. Apron, while using the equipment to keep water and dirt away from clothing and exposed areas of body. Gloves, as required.</p>
<p>Wash Rack (inside): Fleet Services provides an indoor automatic car wash used by outside customers as well as its own employees in the performance of their duties. This area also houses a hot enclosed caustic cleaner (Jet Clean) for use by technicians only.</p>	<p>Associated hazards in this area include: rotating brushes, moving apparatus, detergents, wet floor (slip hazard due to water, residue/waste from cars and bird waste), heat and caustic material of Jet Clean.</p>	<p>There are NO PPE required to use the indoor wash rack, however, persons must be cognizant of their surroundings. Eye protection, face shield, and gloves are required while using Jet Clean.</p>

Step Three: Implement a System of Periodic Inspections, Investigation of Incidents and Correcting Deficiencies

Source of This Requirement

Statute

The Program shall include...(2) The employer's system for identifying and evaluating workplace hazards, including scheduled periodic inspections to identify unsafe conditions and work practices; (3) The employer's methods and procedures for correcting unsafe and unhealthy conditions and work practices in a timely manner. (Labor Code §6401.7(a). The employer shall correct unsafe and unhealthy conditions and work practices in a timely manner based on the severity of the hazard. (Labor Code §6401.7(b)).

Standard

The program...shall...(4) include procedures for identifying and evaluating workplace hazards, including periodic inspections to identify unsafe conditions and work practices. Inspections shall be made to identify and evaluate hazards: (A) When the program is first established, Exception: Those employers having in place on July 1, 1991, a written injury and illness prevention program complying with previously existing Section 3203.

(B) Whenever new substances, processes, procedures or equipment are introduced that present new occupational safety and health hazards, and (C) Whenever the employer is made aware of a new previously unrecognized hazard

The program...shall... (5) include a procedure to investigate occupational injury or occupational illness.

The program...shall. (6) include methods and/or procedures for correcting unsafe or unhealthy conditions, work practices, and work procedures in a timely manner based on the severity of the hazard (A) when observed or discovered, and (B) when an imminent hazard exists which cannot be immediately abated without endangering employee(s) and/or property, remove all exposed personnel from the area except those necessary to correct the existing conditions. Employees necessary to correct the hazardous condition shall be provided with the necessary safeguards." (General Industry Safety Order (GISO) §3203(a)).

(1) Records of scheduled and periodic inspections required by subsection (a)(4) to identify unsafe conditions and work practices, including person(s) conducting the inspection, the unsafe conditions and work practices that have been identified and action taken to correct the identified unsafe conditions and work practices. These records shall be maintained for three (3) year.

Implementation

An inspection program meeting the statutory and regulatory requirements must be established. Minimum requirements for the inspection program are:

- + Inspections must be scheduled on a periodic (Quarterly) basis, or as needed to investigate new potential hazards or incidents;
- + The program must be designed to identify unsafe workplace conditions and practices;
- + Correction of deficiencies must be accomplished on a timely basis depending on the severity of the hazard and;
- + Inspections and correction of deficiencies must be documented.
(Quarterly Safety Inspections are followed up with corrective actions and plans.)

Because neither the statute nor the standard specifies the frequency of inspections, the decision of how often to inspect is left to the employer's discretion. Employers must exercise care in complying with this type of "performance standard" to assure that the frequency of inspections is consistent with the severity and probability of injury and illness potential in the workplace. Existing EH&S mandated programs may require a set inspection frequency for certain activities to satisfy specific standards (i.e., radiation use, Proposition 65, etc.).

The goal is that departments do not duplicate efforts based on existing safety programs previously mandated.

Appendix III will help departments design an inspection program that is consistent with the hazard potential of the operation. The key is to make the requirements for inspections self-implementing by using a standard checklist based on the departments' hazard identification listings for specific job types and locations.

APPENDIX III

INSPECTIONS ARE CONDUCTED TO VERIFY COMPLIANCE WITH CODES OF SAFE PRACTICES AND OTHER SAFETY REQUIREMENTS TO IDENTIFY ADDITIONAL HAZARDS AND TO INVESTIGATE ACCIDENTS, INJURY, ILLNESS CASES, AND UNUSUAL OCCURRENCES:

Frequency and Responsibility for Inspections:

Area/Job Title **TAPS Facility Office**
Frequency of Scheduled Inspections Quarterly
Person(s) Responsible EH&S/Fire Dept.

Area/Job Title **University Airport Office**
Frequency of Scheduled Inspections Quarterly
Person(s) Responsible EH&S/Fire Dept.

Area/Job Title **Storage Containers**
Frequency of Scheduled Inspections Quarterly
Person(s) Responsible EH&S/Fire Dept.

Area/Job Title **North Entry Parking Structure**
Frequency of Scheduled Inspections Quarterly
Person(s) Responsible EH&S/Fire Dept.

Area/Job Title **South Entry Parking Structure**
Frequency of Scheduled Inspections Quarterly
Person(s) Responsible EH&S/Fire Dept.

Area/Job Title **North Gate Kiosk**
Frequency of Scheduled Inspections Quarterly
Person(s) Responsible EH&S/Fire Dept.

Area/Job Title **South Gate Kiosk**
Frequency of Scheduled Inspections Quarterly
Person(s) Responsible EH&S/Fire Dept.

Area/Job Title **Dispatch**
Frequency of Scheduled Inspections Quarterly
Person(s) Responsible EH&S/Fire Dept.

Area/Job Title **Islands**
Frequency of Scheduled Inspections Quarterly
Person(s) Responsible EH&S/Fire Dept.

Area/Job Title **Shops**

Frequency of Scheduled Inspections Quarterly
Person(s) Responsible EH&S/Fire Dept.

Area/Job Title **Parts**

Frequency of Scheduled Inspections Quarterly
Person(s) Responsible EH&S/Fire Dept.

Area/Job Title **Administration**

Frequency of Scheduled Inspections Quarterly
Person(s) Responsible EH&S/Fire Dept.

Documentation of Inspections

Periodic scheduled inspections are documented on a form similar to Form III (a), which include methods and correction of hazards identified.

These forms are maintained at the following location: Administrative Office and the Environmental and Safety Coordinator's Office.

Other forms of documentation (describe)

Accident and Injury/Illness Investigation

Inspections (investigations) are conducted as soon as possible after an accident, occupational injury or illness, hazardous or unusual occurrence is reported. These investigations are documented on a form. These forms are maintained at the following location: Administrative Office and Safety & Environmental Coordinator's Office.

FACILITIES INSPECTION REPORT

Building: _____	Room No: _____
Department: _____	
Contact Person: _____	Telephone: _____

I. Office Safety

	Yes	No	N/A
(1) All wiring (electrical, telephone, computers, etc.) is either located overhead or covered to eliminate the possibility of trips and falls.	()	()	()
(2) Floors, carpets, and other walkways are in good repair and free of tripping hazards.	()	()	()
(3) The office fire alarm is adequate and in good working condition.	()	()	()
(4) Fire extinguishers are available and easy to locate.	()	()	()
(5) Trash containers are available and are emptied regularly.	()	()	()
(6) File cabinets are placed so that drawers do not open into high traffic areas.	()	()	()
(7) Cabinets are secured to prevent them from tipping over when heavy top drawers are opened.	()	()	()
(8) Free space is left in file drawers so that employees do not have to struggle to insert or extract files.	()	()	()
(9) Proper first aid supplies are available and easy to locate.	()	()	()
(10) Proper floor cleaners and waxes are used to eliminate slippery surfaces.	()	()	()
(11) Wet floors are quickly cleaned up.	()	()	()
(12) Warning signs are used to alert employees to wet floors.	()	()	()
(13) Traffic areas are clear and unobstructed by boxes, cartons, or other materials.	()	()	()
(14) Potentially hazardous office chemicals are properly handled and stored.	()	()	()
(15) Material Safety Data Sheets (MSDS) are posted or available for all potentially hazardous office chemicals.	()	()	()
(16) Employees receive periodic training in office safety.	()	()	()
(17) Ergonomic considerations to fixed position and repetitive motion work have been considered in workplace design.	()	()	()

Form III(a)

II. General Laboratory Safety

	Yes	No	N/A		Yes	No	N/A
(1) Chemical Hygiene Plan	()	()	()	<u>Smoking, Eating, Drinking</u>			
				(19) Clean Areas Identified	()	()	()
<u>Housekeeping</u>				(20) Storage of Food/Drink	()	()	()
(2) Cluttered/Messy	()	()	()	(21) Mouth Pipetting	()	()	()
(3) 28" Exit Width	()	()	()	(22) Equip./Materials in Clean Area	()	()	()
(4) 24" Walkway/Aisle	()	()	()				
				<u>Protective Clothing and Equipment</u>			
<u>Postings</u>				(23) Lab coats	()	()	()
(5) Notice to Employees	()	()	()	(24) Gloves	()	()	()
(6) Right to Know	()	()	()	(25) Eye Protection	()	()	()
(7) MSDS Locations	()	()	()	(26) Respirators	()	()	()
(8) RAM Handling Guidelines	()	()	()	(27) Footwear	()	()	()
(9) Rooms/Doors	()	()	()	(28) Hearing Protection	()	()	()
(10) Industrial Water	()	()	()	(29) Prot. Equip./Cloth in Public Areas	()	()	()
(11) Acc. Prev. Signs & Tags	()	()	()				
				<u>Work Areas</u>			
<u>Safety Equipment and Supplies</u>				(30) Defined	()	()	()
(12) Emergency Shower	()	()	()	(31) Use of Absorbent Paper	()	()	()
(13) Emergency Eyewash	()	()	()	(32) Container Labelling	()	()	()
(14) Emg. Shr & E.W. Accessibility	()	()	()	(33) Shielding	()	()	()
(15) Emg. Shr & E.W. Tested/Usable	()	()	()	(34) Illumination	()	()	()
(16) First Aid Kit	()	()	()				
(17) Absorbent Material Available	()	()	()				
(18) Injury/Illness Prev. Plan	()	()	()				

III. Engineering Controls and Ventilation

<u>Fume Hoods</u>				<u>Glove Box</u>			
(35) Annual Check	()	()	()	(42) Charcoal/HEPA/Combo	()	()	()
(36) Adequate Face Velocity	()	()	()	(43) Flow Indicator	()	()	()
(37) Flow Indicator	()	()	()	(44) Annual Check	()	()	()
(38) Sash Missing/Damaged	()	()	()	(45) Filtration Exchange Freq.	()	()	()
(39) Hood Overloaded	()	()	()				
(40) Charcoal/HEPA/Combo	()	()	()	<u>Biological Safety Cabinet</u>			
(41) Filtration Exchange Freq.	()	()	()	(46) Charcoal/HEPA/Combo	()	()	()
				(47) Flow Indicator	()	()	()
				(48) Annual Check	()	()	()
				(49) Filtration Exchange Freq.	()	()	()

Fume Hood Information:

Location	Date Last Inspected	Flow Rate (lfm)	Primary Chemical Used or Stored	Radionuclide Used or Stored	Frequency Used	Volatile/ NonVolatile	Type of Hood

IV. Electrical Safety

	Yes	No	N/A		Yes	No	N/A
(50) Ungrounded 2-wire	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(57) Multiple Outlets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(51) Extension Cords/Waber Strips	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(58) Panels Clear & Identified	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(52) Damaged/Worn Cords/Plugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(59) Damaged/Worn Switches/ Receptacles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(53) Grounding Bypass Devices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(60) UL Approved Equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(54) Exposure to Chem. or Hi Temps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(61) Broken Cover Plate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(55) Frig/Freez/Equip Grounding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(62) Free-Lance Repairs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(56) Electrophoresis Interlocks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

V. Compressed Gas Cylinders

(63) Physical Appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(67) Away from Heat Sources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(64) Identification Label	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(68) Protection Cap in Place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(65) Secured Properly & Upright	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(69) Incompatibles Separated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(66) Wrench Available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

VI. Fire Safety

(70) Extinguisher Charged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(74) Door Closure Modified	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(71) Extinguisher Tagged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(75) Ext. Visible & Accessible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(72) Extinguisher Mounted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(76) Wall Damaged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(73) Extinguisher Checked	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

VII. Biohazards

(77) Autoclave Facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(81) Insect/Rodent Control Prg.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(78) Control of Aerosols	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(82) Disinfectant Usage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(79) Controlled Access during Exp.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(83) Decontamination Proc. Followed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(80) Handwashing Facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(84) SOP's Available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

VIII. Facility Monitoring for Radioactive Materials

(85) Storage Areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(90) Appropriate Instrumentation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(86) Work Areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(91) Calibrated Instrumentation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(87) Equipment Used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(92) RAM in Cold Waste Containers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(88) Frequency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(93) Contamination Found	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(89) Decontamination Doc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(94) Excessive Radiation Fields Present	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

IX. Inventories

(95) Radioactive Materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(98) Chemicals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(96) Chemical Carcinogens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(99) MSDSs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(97) Biological Agents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(100) Alcohol (Tax Free)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				(101) Controlled Substances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

X. Transportation of Materials

(102) Proper Containment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(105) Transfer Records	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(103) Proper Handling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(106) Infectious Materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(104) Proper Labelling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

Form III(a)

XI. Waste and Storage Areas

	Yes	No	N/A		Yes	No	N/A
(107) Shielding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(114) Free from Ignition Sources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(108) Packaging	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(115) Adequate Ventilation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(109) Legible Labelling and Contents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(116) Isolation of Fuming Subst.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(110) Secondary Containers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(117) Sharps Containers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(111) Adequate Segregation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(118) Flam. Liq. Stor. Cab. Required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(112) Storage Area Security	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(119) Flam. Liq. Stor. Cab. Labelled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(113) Infectious Waste Autoclaved	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(120) Sufficient Storage Space	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

XII. Chemical Safety

(121) Properly Labelled and Legible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(126) Flam. Liq. < 10 gals. (In Open)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(122) Incompatibles Separated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(127) Spill Procedures Available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(123) Outdated Chemicals Present	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(128) Storage Shelf Restraints	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(124) Dated Peroxide Formers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(129) Safety Cans Used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(125) Safety Cans Used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

XIII. Comments

Form III(b)

**ACCIDENT, INJURY AND ILLNESS
INVESTIGATION FORM**

Employer _____

Person(s) Conducting Investigation _____

Title(s) _____

Date of Accident/Injury/Illness _____

Name(s) of Affected Employee(s) _____

Work Area/Job Title of Affected Employee(s) _____

Nature of Accident/Injury/Illness _____

Part(s) of Body Affected _____

What Workplace Condition, Work Practice or Protective Equipment Contributed to the Incident _____

Was a Protocol of Safe Practice Violated? _____

If So, Which One? _____

What Corrective Actions Will Prevent Another Occurrence? _____

Will an Additional Protocol of Safe Practice Be Needed? _____

If So, State It _____

Was the Unsafe Condition, Practice or Protective Equipment Problem Corrected Immediately?

If No, What Has Been Done to Assure Correction? _____

Until Corrected, What Actions Have Been Taken to Prevent Recurrence in the Interim? _____

This form may be used as a supplement to the Departmental Injury/Illness Worksheet provided by Benefits and Risk Management.

Step Four: Implement a Training Program for All Employees

Source of Requirement

Statute

The program...shall...include...(4) an occupational safety and health training program designed to instruct employees in general safe and healthy work practices and to provide specific instruction with respect to hazards specific to each employee's job assignment." (Labor Code §6401.7(a)).

The employer shall train all employees when the training program is first established, all new employees, and all employees given a new job assignment, and shall train employees whenever new substances, processes, procedures or equipment are introduced to the workplace and represent a new hazard, and whenever the employer receives notification of a new or previously unrecognized hazard. (Labor Code §6401.7(c)).

Standard

The program...shall...(7) provide training and instruction: (A) when the program is first established.

(B) to all new employees, (C) to all employees given new job assignments for which training has not previously been received, (D) whenever new substances, processes, procedures or equipment are introduced to the workplace and represent a new hazard, (E) whenever the employer is made aware of a new or previously unrecognized hazard, and (F) for supervisors to familiarize them with the safety and health hazards to which employees under their immediate direction and control may be exposed. (GISO §3203(a))

Records of the steps taken to implement and maintain the Program shall include...(2) Documentation of safety and health training required by subsection (a)(7) for each employee, including employee name or other identifier, training dates, type(s) of training and training providers. This documentation shall be maintained for three (3) years.

Exception: Training records of employees who have worked for less than one (1) year for the department need not be retained beyond the term of employment if they are provided to the employee upon termination of employment. (GISO §3203(b)).

Implementation

The department must establish a training program that satisfies the standard's requirements. This training program must be provided to employees when the program is first established except where employees have been previously trained as a component of an EH&S mandated

program established prior to the effective date of the current standard. All other employers and those unable to adequately document training must present to all current employees a training program focusing on:

- + The general occupational hazards affecting employees in this workplace and how to minimize exposures to the hazards; and
- + The specific occupational hazard associated with certain tasks and/or job titles to which the employee is assigned.

Training also will be required when new employees are hired and upon the reassignment of an existing employee to a new job. Training also must be conducted in the event new hazards are identified.

Communications with employees must be "readily understandable." This requirement indicates that employers with non-English-speaking employees must provide training in a language understandable to these employees. The method of providing training described in this guide by using codes of safe practices is essentially the same type of "log of instructions" as specified in the exception. An exception exists to provide limited relief from the one-year record maintenance requirement of the standard for employees terminating within a year of hire date (§3203(b)(2)). However, if training records were maintained for groups of employees, it would be impractical to take advantage of this limited exception.

Appendix IV describes a means to efficiently meet this training requirement and how to dovetail any overlapping training required to comply with other more specific existing EH&S programs fulfilling Cal/OSHA standards; for example, radiation safety training, chemical exposures in laboratories, and chemical-specific standards.

Appendix IV

DEPARTMENT SAFETY TRAINING IS PROVIDED INITIALLY OR IN THE FOLLOWING CIRCUMSTANCES:

- + Initial training for all current employees upon establishment of this employer's program or prior to July 1, 1991. See Health and Safety considerations.
- + New employees are provided initial training upon hiring prior to assignment.
- + Employees are provided training when assigned to a new task for which training has not been received.
- + Supervisors are trained on hazards and safe practices in their area of responsibility.
- + Training includes general area safety and specific assignment or job title training, and the potential occupational safety and health hazards and the Code of Safe Practices for the area.
- + Documentation of training is maintained on Form IV (a) for individual initial training and/or Form IV (b) for group training session. This documentation is maintained at the following location(s): Supervisor's Office_____
- + Refresher training is provided at the following frequency: As Required_____

OR

- + Equally effective alternative training has been provided in the manner described below or on the attached page (include EH&S required courses) N/A_____
-

OCCUPATIONAL HEALTH AND SAFETY CORE TRAINING MATRIX

TOPIC	JOB CLASSIFICATION	FREQUENCY		CONTENT
		Initial	Annual	
Injury & illness Prevention (3202)	All employees	X	X	IIPP, specific job hazards, safe work practices, supervisory training. Include: General office safety, General work area safety, Ergonomics training, Manual material handling, lifting guidelines and personal Protective Equipment (PPE) use.
Emergency Action Plan (3220)	All employees	X		Evacuation procedures, safe practices in emergencies.
Fire Prevention Plan (3221)	All employees	X	*	Evacuation and safe practices in fires, fire prevention and response duties. * Annual training for portable fire extinguisher use.
Hazard communication (5194)	All employees	X		HazCom program, chemical hazards in work area, safe practices during use and emergencies, MSDS use.

Standards reference sections of California Code of Regulations Title 8 (CCR T8). Initial and annual training requirements are mandatory. Periodic training refers to the employer determination of frequency based upon maintaining adequate training levels. New job assignments involving a change in location or job duties and the introduction of new equipment or hazardous substances into the work area will trigger periodic refresher training.

Form IV(b)

**INDIVIDUAL EMPLOYEE TRAINING DOCUMENTATION
INITIAL TRAINING**

Name of Trainer _____

Training Subject _____

Training Materials Used _____

Name of Employee _____

Date of Hire/Assignment _____

I, _____ hereby certify that I received training as described above in the following areas:

- ◆ The potential occupational hazards in general in the work area and associated with my job assignment.
- ◆ The safe work practices which indicate the work conditions, practices, and personal protective equipment required for my job title.
- ◆ The hazards of any chemicals to which I may be exposed and my right to information contained on material safety data sheets for those chemicals, and how to understand this information.
- ◆ My right to ask any questions, or provide any information to the employer on safety either directly or anonymously without any fear of reprisal.
- ◆ Disciplinary procedures the employer will use to enforce compliance with safe work practices.

I understand this training and agree to comply with safe work practices for my work area.

Employee Signature

Date

Step Five: Establish a System for Communicating with Employees on Safety Matters

Source of This Requirement

Statute

The program...shall...include...(5) The employer's system for communicating with employees on occupational health and safety matters, including provisions designed to encourage employees to inform the employer of hazards at the worksite without fear of reprisal; (6) The employer's system for ensuring that employees comply with safe and healthy work practices, which may include disciplinary action." (Labor Code §6401.7(a))

Standard

The Program...shall...include a system for ensuring that employees comply with safe and healthy work practices. Substantial compliance with this provision includes recognition of employees who follow safe and healthful work practices, training and retraining programs, disciplinary actions, or any other such means that ensures employee compliance with safe and healthful work practices.

Include a system for communicating with employees in a form readily understandable by an affected employee on matters relating to occupational safety and health, including provisions designed to encourage employees to inform the employer of hazards at the worksite without fear of reprisal. Substantial compliance with this provision includes meetings, training programs, postings, written communications, a system of anonymous notification by employees about hazards, labor/management safety and health committees, or any other means that ensures communication with employees.

Department Safety Coordinators or Departmental Health and Safety Committees shall be presumed to be in substantial compliance with subsection (a)(3) if they:

- 1. Meets regularly, but not less than quarterly, to discuss departmental safety matters;*
- 2. Prepare and make available to affected employees, written records of the safety and health issues discussed at the committee meetings; Minutes filed in Admin Office and Safety & Environmental Coordinator's Office*
- 3. Reviews results of the periodic, scheduled worksite inspections;*
- 4. Reviews investigations of occupational accidents and causes of incidents resulting in occupational injury, occupational illness, or exposure to hazardous substances, and where appropriate, submits suggestions to management for the prevention of future incidents; Safety Committee*
- 5. Reviews investigations of alleged hazardous conditions brought to the attention of the Departmental Safety Coordinator or committee member. When determined*

necessary, the DSC or the committee may conduct its own inspection and investigation to assist in remedial solutions;

6. *Submits recommendations to assist in the evaluation of employee safety suggestions.*

Implementation

In response to these statutory and standard requirements, the department must devise a system for communicating with employees on safety and health issues that also affords employees the opportunity for meaningful and reprisal-free input into the employer's program. The department's communication program must address the following objectives:

Explain the departmental method for ensuring employee compliance with safe work practices, including recognition for compliance and corrective actions for violations; these items are a part of the annual appraisal system.

Communicate safety rules and other information on occupational hazards in an understandable manner (this requirement applies to both clarity and language if non English-speaking employees are in the workforce); and

Encourage employees to inform the employer about workplace hazards.

Methods that the employer may use include, but are not limited to:

Meetings;

Training programs;

Written communications;

A system of anonymous notifications (complaints or suggestion box); and

A labor/management safety and health committee.

However, if the department elects to use a labor/management safety and health committee, the committee must meet certain operating conditions to satisfy the following requirements to be deemed adequate to meet the standard's communication element:

Meet as required: Meets January, April, July and October of each year as required.

Keep written records of meetings and make them available to affected employees; Filed in Admin. Office and Safety & Environmental Coordinator's Office.

Review results of inspections conducted by the EH&S/Fire Dept.

Review investigations of accidents and cases of injury and illness, and may make suggestions regarding prevention;

Submit recommendations in response to employee safety suggestions.

The decision to establish a labor/management safety committee will be based on whether a labor contract and other factors mandate a committee. In any event, the department must review existing committees to determine whether they meet these criteria.

Step-by-step Guide

Appendix V describes a number of means of establishing an effective employee communications program. It provides additional discussion of the considerations involved in establishing a labor/management safety committee if the employer is not committed to one by contract or practice.

Appendix V

EFFECTIVE COMMUNICATIONS WITH EMPLOYEES HAVE BEEN ESTABLISHED WHICH INCLUDE THE FOLLOWING METHODS TO MEET THE STANDARD'S REQUIREMENTS:

- + Communication of safe working conditions, practices, and required personal protection equipment is included in initial and all subsequent training.
- + Other forms of employer-to-employee communications on safety topics include (specify posters, letters, meetings, etc.) On-going
- + Employees have been advised by the following method: individual counseling
That safe work conditions, practices, and required personal protective equipment are mandatory and will be enforced by the following: Management and Supervisors
- + Recognition for compliance/good safety records Issue of annual safe worker certificates,
- + Discipline for non-compliance in keeping with University personnel policy to include letters of warning when appropriate.
- + This employer's method to solicit safety-related information from employees includes Employee safety information form

And anonymously by same
- + Form V has been made available for this purpose. Located on shop bulletin board, dispatch office and administrative office.
- + Employees have been advised there will be no reprisals or other job discrimination for expressing any concern, comment, suggestion or complaint about a safety-related matter.

Form V

EMPLOYEE SAFETY INFORMATION FORM

This form is for use by employees who wish to provide a safety suggestion or report an unsafe workplace condition or practice.

Description of Unsafe Condition or Practice _____

Causes or Other Contributing Factors _____

Employee's Suggestion for Improving Safety _____

Has This Matter Been Reported to the Area Supervisor? Yes _____ No _____

Employee Name (Optional) _____

Department _____ Date _____

Employees are advised that use of this form or other reports of unsafe conditions or practices are protected by law. It would be illegal for the employer to take any action against an employee in reprisal for exercising rights to participate in communications involving safety.

The employer will investigate any report or question as required by the Injury and Illness Prevention Program Standard (8 CCR §3203) and advises the employee who provided the information or the workers in the area of the employer's response.

Step Six: Comply with Recordkeeping Requirements for Injury and Illness Prevention Program

Source of This Requirement

Statute

The employer shall keep appropriate records of steps taken to implement and maintain the program." (Labor Code §6401.7(b)).

Standard

Records of the steps taken to implement and maintain the Program shall include:

(1) Records of scheduled and periodic inspections required by subsection (a)(4) to identify unsafe conditions and work practices, including person(s) conducting the inspection, the unsafe conditions and work practices that have been identified and action taken to correct the identified unsafe conditions and work practices. These records shall be maintained for one (1) year; and

(2) Documentation of safety and health training required by subsection (a)(7) for each employee, including employee name or other identifier, training dates, type(s) of training, and training providers. This documentation shall be maintained for one (1) year.

Exception: Training records of employees who have worked for less than one (1) year for the employer need not be retained beyond the term of employment if they are provided to the employee upon termination of employment. (GISO §3203(b)).

Implementation

Recordkeeping as a means of demonstrating compliance will be essential. Employers with established safety programs will need to evaluate whether existing practices meet the Recordkeeping requirements of the standard. Employers establishing a safety program in response to the standard should attempt to devise an implementation plan that self-documents by using inspection and training forms as evidence of compliance.

The system utilized by this guide is based on a self-documenting concept that should dramatically simplify the documentation burden on employers, especially those with small workforces or relatively uncomplicated or less hazardous workplaces.

Appendix VI

RECORDKEEPING REQUIREMENTS OF 8 CCR §3203(D) WILL BE ADHERED TO, INCLUDING:

- + Maintenance of all written records for one year.
- + Maintenance of training records for employees who have worked less than one year may be terminated, if the former employee receives a copy of such record.

Appendix VIII

REVIEW AND APPROVAL

This Injury and Illness Prevention Program is hereby approved.

Signature

Date

Title: Department Director, TAPS

Department Safety Coordinator Signature indicates that a copy of the program has been provided and responsibility to implement the program is understood.

DSC Signature

Date

Title

DSC/Alternate Signature

Date

Title

BIBLIOGRAPHY

1. California Code of Regulations, Title 8. General Industry Safety Order (GISCO §3203).
2. SB 198, Illness/Injury Prevention, B. Green, Chapter 1369, Labor Code §6401.7.
3. SB 198 Handbook, The Injury/Illness Prevention Program. California Chamber of Commerce, Sacramento, California. Adapted with permission.

WRITTEN PROGRAMS OR DOCUMENTS THAT ALREADY EXIST

University Policy on Environmental Health and Safety Office of the President -- October 1986.

UC Davis Policy and Procedure Manual -- Section 290

EH&S:

Hazardous Waste Chemical Management Procedures
Radiation Safety Manual
Chemical Carcinogen Safety Manual
Respiratory Protection Manual
Biological Safety Manual
Biosafety in Microbiological and Biomedical Laboratories
CDC.NIH Publication
SafetyNets Available -- Latest Listed Dated 1/31/91
List of Signs Available -- Latest List Dated 9/28/89
Material Safety Data Sheets
Training Materials Available