Exhibit A, Safety Committee Guidelines

I. Purpose
This section outlines the policy for the UC Davis Safety Management Program. This document also outlines the procedures and responsibilities to implement the Safety Management Program. UCDHS departments refer also to applicable policies in UCDHS Hospital Policies & Procedures Manual Section 1600-1699, Environmental Health and Safety.

II. Policy
A. The University provides a safe workplace and minimizes the risks posed by potential hazards to employees, students, and visitors through its Safety Management Program.

B. The Safety Management Program sets a standard for maintaining a safe workplace.
1. It is the responsibility of every department head and supervisor to assure that appropriate information and training are provided to employees.
2. Likewise, it is the responsibility of all employees to follow safe work practices and procedures as specified in written protocols and policies.

III. Procedures and Responsibilities
A. Departments
1. Department heads:
   a. Appoint the Department/Unit Safety Coordinator and assign the appropriate amount of time to ensure roles and responsibilities of the position can be achieved (see III.A.3, below).
   b. Implement the Safety Management Program.
   c. May establish a Department/Unit Safety Committee (see Exhibit A).
   d. Pay fines resulting from citations as a result of action or failure of department to comply with health/safety or environmental laws and regulations.
   e. Review the effectiveness of the departmental Safety Management Program at least annually, document the review process, update the program, and implement changes to the program as necessary.
   f. Review departmental illnesses, accidents, and injuries, and implement prevention measures to prevent their recurrence.
   g. Assure that employees and students comply with mandated medical surveillance programs and are aware of voluntary programs.
   h. Provide appropriate resources necessary to support the Safety Management Program.
   i. Establish and implement the departmental Emergency Action Plan.
      1) Update the plan at least annually and provide the documents to all supervisors
for their use during annual training.

2) Submit plan annually to Emergency Manager.

j. Establish and implement a Hazard Communication Plan.
k. If applicable, ensure all chemical inventories are updated in a timely manner, at least annually.

2. Principal investigators/supervisors:
   a. Assure the effective implementation and enforcement of the Safety Management Program requirements in their areas.
b. Evaluate and identify workplace hazards.
c. Implement measures to prevent or control workplace hazards.
d. Assure employees, postdoctoral fellows, visiting scientists, and students are fully trained on workplace hazards.
e. Document and maintain employee training records (see Section 290-27).
f. Review standard operating procedures and update as required.
g. Review the effectiveness of the Safety Management Program and its implementation at least annually, document the review process, and update the plan as necessary.
h. Pay fines resulting from citations as a result of action or failure to comply with health/safety or environmental laws and regulations.
i. Assure that the storage, consumption, or use of food, beverages, medicines, tobacco, chewing gum, or the application of cosmetics or handling of contact lenses are not allowed in areas where hazardous chemical, biological, or radiological materials are used or stored.
   1) New laboratory buildings require employee eating areas to be incorporated in the building design.
   2) Existing campus buildings must identify suitable areas for employees to eat or store items outside of laboratories where hazardous chemical, biological, or radiological materials are used or stored.

3. Department/Unit Safety Coordinators:
   a. Disseminate health and safety information to department/unit.
b. Act as liaison between the Department/Unit Safety Committee and staff, faculty, and students.
c. Coordinate Facility Inspection Audits, gather data, and if applicable, transmit results to the Department/Unit Safety Committee for review.
d. Assist in review of the effectiveness of department/unit Safety Management Program.
e. Complete or coordinate the annual Injury and Illness Prevention Program (IIPP) self-inspection.
f. Develop or coordinate the development of the Emergency Action Plan (EAP) including the following:
   1) Update the plan at least annually.
   2) Provide the documents to all supervisors for their use during annual training.
3) Submit EAP Template annually to Safety Services Emergency Manager for review.

g. Provide guidance or assists laboratories and shops with the Chemical Inventory System (CIS) reporting and completion of the CUPA self-audit.
   1) Accompany EH&S and the Certified Unified Program Administrator (CUPA) auditor when inspecting areas under their purview.
   2) Verify successful completion of any identified needed remedial action.

h. Participate in the annual Fire Prevention Inspection.

i. Develop and coordinate an effective monthly eyewash/shower testing program.

j. Develop and coordinate an effective monthly fire extinguisher check program. (At UCDMC this is function is performed by UCDHS Fire Prevention).

4. Employees/students:
   a. Support and assist in the implementation of the Safety Management Program.
   b. Follow standard operating procedures.
   c. Use safety equipment provided and wear required personal protective equipment.
   d. Report unsafe or hazardous situations immediately to supervisor or instructor.
   e. Report all injuries, accidents, and near-misses to supervisor.
   f. Participate in mandated medical surveillance programs. (Voluntary programs are also available.)

B. Office of Environmental Health & Safety

The Office of Environmental Health & Safety (EH&S) is responsible for assisting departments in implementing the UCD Safety Management Program and other health and safety programs. Assistance includes, but is not limited to, assessing hazards, conducting safety training, performing audits, developing generic safety documents, documenting safety training as required, and investigating reports of unsafe conditions.

IV. Safety Management Program Requirements

A. Injury and illness prevention program (written).

   1. Designation of responsibility for implementing the program.
      - Department head.
      - Principal Investigator/supervisor.
      - Department Safety Coordinator(s).

   2. System for ensuring compliance with safety requirements.
      - Disciplinary action.
      - Retraining.
      - Safety incentive or recognition plan (optional).

   3. System for identifying unsafe conditions and work practice, evaluating workplace hazards, and investigating and preventing occupational injuries.

   4. Training program requirements.
      - Initial (new employees).
• Annual (refresher for employees).
• After a change in processes or assignment.
• When the department becomes aware of new or unrecognized hazards.
• Documentation of training.

5. Hazard communication system.
• Departmental meetings.
• Laboratory or staff meetings.
• Formal training.
• Written communications.
• Methods to be used for employees to inform supervisors of hazards.
• Anonymous notification (complaint or suggestion box).
• Department Safety Committee.

6. Annual review of effectiveness of the safety program for research laboratories. The annual review should verify that all program elements are effectively implemented. This should include verification of the following:
• Implementation and documentation of disciplinary action taken for employee safety procedures violation.
• Safety inspections have been performed and documented, and findings have been corrected in a timely manner.
• Injuries and accidents have been investigated.
• Near-misses have been discussed within the laboratory group.
• Unsafe conditions have been corrected.
• Training has been given and documented.


C. Hazardous chemicals communication program (see Section 290-27).
• Hazardous chemicals inventory.
• Safety Data Sheets on hazardous chemicals.
• Labeling of hazardous chemical containers.
• Training of employees.

D. Fire prevention plan (see Section 390-40).

E. Emergency action plan (see Section 390-10).

F. Disruptive behavior in the workplace (see Section 390-30).

G. Hazardous Operations (see Section 290-86)

H. Departments with hazardous materials: Hazardous waste disposal and transportation program (see Section 290-65).

I. Departments with laboratories (as needed): Chemical Hygiene Plan (see the EH&S Chemical

2. Standard operating procedures.
3. Use of engineering controls, (e.g., chemical fume hood, other local exhaust).
4. Periodic self-inspection of laboratories (at least annually)
5. Personal protective equipment (see Section 290-50 and Personnel Policies for Staff Members, UC Policy 35 and UCD Procedure 35).
6. Employee information and training.
7. Hazardous material inventory.
8. Material Safety Data Sheets.
9. Record keeping (e.g., training documentation).

J. Biosafety (see Section 290-55).

K. Radiation safety (see Section 290-75).


M. Specialty laboratories are those that perform unusual or highly specialized laboratory tests for clients both inside and outside the University system, e.g., hospitals. To be fully accredited, the following may apply, depending on the certification requirements:
   1. Joint Commission for Accreditation of Healthcare Organizations (JCAHO) requirements.
   2. College of American Pathologists (CAP) requirements.

N. Departments with industrial-type shops: Machine shop safety.
   1. Hazardous material handling procedures.
      • Use.
      • Storage.
      • Inventory.
      • Waste disposal.
   2. Exposure prevention and control provisions (ventilation, machine guards).
      • Engineering controls.
      • Personal protective equipment (see Section 290-50 and Personnel Policies for Staff Members, UC Policy 35 and UCD Procedure 35).
   3. Licenses/permits.
      • Pressure tanks.
      • Air Quality Management District permit (e.g., dust collectors).

V. References
1. Injury and Illness Prevention Program. [8 CCR 3203.]
2. Chemical Hygiene Program. [8 CCR 5191.]
3. Hazard Communication Program. [8 CCR 5194.]
5. Bloodborne Pathogen Program. [8 CCR 5193.]
6. Biohazardous (Medical) Waste Management Program. [California Health and Safety Code, Division 20, Chapter 6.1.]
7. Chemical Carcinogen Safety Program. [8 CCR 5200-5220.]
8. Hazardous Waste Disposal and Transportation. [26 CCR, Division 4, Cal/OSHA; Division 21.5, Health & Welfare (Prop. 65); Division 22, Department of Health Services; 49 CFR, Parts 100-177 and 350-399, Department of Transportation.]
9. Radiation Safety Program. [17 CCR, Division 1, Chapter 5, Subchapter 4, Radiation; 10 CFR, Standards for Protection Against Radiation, Parts 19, 20, and 35; 21 CFR, Food and Drug Regulations.]

B. University Policy on Management of Health, Safety, and the Environment (http://policy.ucop.edu/doc/3500506/MgmtHealthSafetyandEnvironment)).

   2. Section 390-10, Campus Emergency Policy.
   3. Section 390-30, Disruptive Behavior in the Workplace.

D. UCD EH&S Safety Manuals (http://safetyservices.ucdavis.edu/):

E. UCD EH&S Safety Nets (http://safetyservices.ucdavis.edu/).