Employee Safety Manual
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000 Injury and Illness Prevention Program

It is the Tulare County Office of Education’s goal to provide a safe and healthy workplace for all employees and to eliminate occupational injuries and illnesses. The priority of workplace safety and health is of such importance that it is placed above operating efficiency and productivity whenever necessary.

To attain this goal, an Injury and Illness Prevention Program has been adopted in compliance with Labor Code Section 6401.7; General Industry Safety Order Section 3203; and other applicable local, state and federal laws. The program includes training and instruction concerning safe and healthy work practices applicable to the job as well as systems for investigating work-related injuries and illnesses, identifying and evaluating workplace hazards, and correcting unsafe conditions.

To be successful, the program requires cooperation in all safety and health matters, not only between supervisor and employee, but also between each employee and his/her co-worker. It is the obligation of every employee to comply with the requirements of the Injury and Illness Prevention Program at all times.

Tulare County Office of Education Employees who fail to adhere to job safety standards are subject to disciplinary action, including, but not limited to, verbal reprimands, written warnings, suspension, and/or immediate termination. The degree of discipline in any instance is at the sole discretion of management. Furthermore, no single disciplinary action shall set a precedent for any other disciplinary action relating to a safety or health violation that may be perceived to be of a like or similar nature. Nothing in our Injury and Illness Prevention Program, however, shall alter right of the employee or employer to terminate employment at any time.

Employees may contact the Administrator for General Services at (559-733-6601) with any questions regarding the Injury and Illness Prevention Program. The Injury and Illness Prevention Program – Plan Document is available on our website at: www.tcoe.org/HR/AnnualNotification/Safety/IIPP.pdf

010 Reporting Unsafe Work Condition

Employees have the OBLIGATION and the RIGHT to report unsafe conditions, unrecognized safety hazards, or safety violations of others. If you wish to make such a report, it may be made orally to your supervisor or to another member of management, or you may submit your concern in writing, either signed or anonymously. An Employee Report of Safety/Health Hazard form (see Form 020) may be used for this purpose. You also have the right to report any such matter to the California Division of Occupational Safety and
Health. Employees who report unsafe work conditions or practices are protected by law and may do so without fear of reprisal. All reports are considered, whether or not signed.

020 First Aid and Medical Attention

Proper treatment must be obtained for all injuries and illnesses, no matter how slight:

1. Basic first aid is ordinarily adequate treatment for minor cuts, abrasions, and similar injuries; more comprehensive emergency medical attention must be obtained in the case of more serious injuries or illnesses. The following actions should be taken as required by the extent of the injury:

   a. First aid should be administered if needed to control bleeding or prevent further injury. Persons who have broken bones should not be moved unless absolutely necessary. If the victim is in contact with a live electric current, the electricity should be turned off before rescue contact is made.

   b. The appropriate emergency response personnel (fire department, ambulance, etc.) must be notified immediately if on-site medical attention and/or transport to an emergency hospital is required because of the seriousness of the injury.

   c. If, because of the lesser degree of injury, emergency response personnel is not needed for transportation, the injured should be transported for treatment to an approved licensed medical professional and/or facility approved by management.

2. If a toxic or hazardous material comes in contact with the body, the applicable treatment must be administered in accordance with the Material Safety Data Sheet for the substance. While injury to the eyes or skin caused by chemical contact normally is best treated by flushing with water, there may be exceptions. MSDS instructions and professional medical advice must be followed.

030 Reporting Work-Related Injuries and Illness

All work-related injuries and illnesses, regardless of their type or seriousness, must be reported to management IMMEDIATELY.

If you are injured or become ill because of your job, you are entitled to workers’ compensation benefits, if applicable, because of the extent of the injury or illness. Except in the case of minor “first aid only” injuries, you must immediately complete the “Employee” section of an EMPLOYEE’S CLAIM
FOR WORKERS’ COMPENSATION BENEFITS (DWC Form 1) and give the form to your employer. You should keep the copy marked “Employee’s Temporary Receipt” until you receive a dated copy from your employer. You may contract our Administrator for Workers’ Compensation if you need help filling out the form or obtaining your benefits. An explanation of workers’ compensation benefits is included on the reverse of the form.

NOTE: Employees who report work-related injuries or illnesses are protected by law and may do so without fear of reprisal.

040 General Safety Rules

A good safety record is the result of safe working conditions combined with alertness to common sense, safe and healthy work practices. Compliance with the following general safety rules is important to accident prevention:

1. Sound judgment and safe practices must be exercised in the work habits of all employees.

2. No person shall knowingly be allowed on the job with illegal drugs in his/her system or if his/her ability to safely perform the assigned task is impaired by the use of alcohol or prescription drugs.

3. Personal safety protection equipment must be used, as required by management.

4. Equipment is only to be operated by those authorized as a result of their knowledge, training, and experience.

5. Guards and safety devices installed over a point of operation, moving parts, or electrical connections must be in place at all times.

6. Fire protection and prevention practices, including the clearance of passage aisles and doorways, proper storage of flammable materials, and control of open flames, must be observed at all times.

In addition to the general rules listed above and the practices listed in this Job Safety Handbook, other more specific safe and healthy work practices may apply to your assignment. If so, you are required to know and follow them carefully. All employees must comply with all laws, rules, and regulations concerning safe and healthy work practices as published by governmental agencies having jurisdiction over such matters.
Governmental regulations require that you have one easy reference for important information regarding hazardous substances in the workplace. This information is contained on labels and in a Material Safety Data Sheet (MSDS) for each such substance in your workplace. It includes:

1. The name of the substance and the name, address, and emergency telephone number of its manufacturer.

2. The substance’s hazardous components, chemical ID and common names, worker exposure limits, and other recommended safe exposure limits.

3. A description of the substance’s boiling point and melting point, vapor pressure, vapor density, and evaporation rate; solubility in water and specific gravity; and normal appearance and color.

4. The flash point, flammability levels, type of equipment needed to put out a fire, and special fire-fighting procedures to follow.

5. What happens if the substance is combined with other chemicals, air or water, and what conditions to avoid.

6. Possible health hazards, signs and symptoms of exposure, medical conditions generally aggravated by exposure, and emergency and first aid procedures.

7. What to do in case of a spill, leak, or any accidental release; waste disposal methods; and precautions to be taken in handling and storing.

8. Type of protective equipment and safe work practices to be used and followed when working with the substance.

You must review the MSDS before starting any job using a hazardous material about which you are not familiar. Read labels and the MSDS carefully, follow warnings and instructions, use the correct protective clothing and equipment when directed, learn emergency procedures, and practice safe work habits. If you have questions about a hazardous material, ask your supervisor for a complete explanation. Failure to comply with the requirements of a MSDS may result in disciplinary action up to and including immediate discharge.

This description of the hazard communications standards is provided as a summary only. Full details, including a list of the hazardous materials known to be used in this organization, are contained in the official Hazard Communications Program; a copy may be obtained from your supervisor.
060 Emergency Action Plan

An emergency action plan has been developed to designate the actions that must be taken to ensure employee safety from fire and other emergencies. It includes:

1. Emergency escape procedures and emergency route assignments.
2. Procedures to be followed by employees who remain to perform critical operations before they evacuate.
3. Procedures to account for all employees after emergency evacuation has been completed.
4. Rescue and medical duties for employees who are to perform them.
5. The preferred means of reporting fires and other emergencies;
6. Names or job titles of persons or departments who can be contacted for further information or explanation of duties under the plan.

The above information is posted in each work area. All employees have the obligation to make themselves familiar with the procedures applicable to their workstation.

070 Security

SUSPICIOUS PERSONS:
To safeguard the premises and the welfare of employees, you should be alert to persons whose presence appears to be of a suspicious nature not typically expected of an ordinary visitor. If you have doubts concerning the intentions of any person on the premises, quietly notify your supervisor and/or follow other established security procedures.

KEYS:
Keys to the premises, buildings, offices, or storage units must be kept where they are securely in your possession at all times; they should not be loaned to others and may not be duplicated.

100 General Work Environment

005 All work areas must be kept clean and orderly.

010 When meals are eaten on the premises, they must be eaten in areas where there is no exposure to toxic materials or other health hazards.
015 All spilled materials or liquids must be cleaned up immediately. Work surfaces must be kept dry or appropriate means taken to assure that surfaces are slip-resistant.

025 Toilets and washing facilities must be kept clean and sanitary.

110 Fire Prevention

005 NO SMOKING is permitted in any Tulare County Office of Education building or on the grounds.

010 Fire extinguishers must be used as directed by the manufacturers’ instructions. Standard classes are as follows:

- Class A – Ordinary combustible mater fires
- Class B – Flammable liquid, gas or grease fires
- Class C – Energized-electrical equipment fires

120 Lifting

005 Back injuries can happen as quickly as one wrong move. Lifting and carrying objects can be safer if:

1. When lifting items from below arm level, bend your knees, not your back, to lower your body to the object.

2. Bring the load as close as possible to the body before lifting.

3. Grip firmly with your hands (not just fingers) and keep your arms and elbows tucked in for more strength.

4. Lift by letting your legs push you up, not your back.

5. Be sure you can see where you are going and move slowly enough to avoid bumping into other objects.

6. Do not twist your body while carrying heavy objects; twisting is a major cause of injury. If you need to change directions, move your feet in that direction first.

Lifting is the safest when you keep your back straight and your stomach muscles tight. Staying in good physical condition and getting proper exercise are also important.
Loads should be broken down to movable weights, routes planned, and legs used to do the work. If an object is too heavy, help should be obtained or a handcart or device used.

**130 Ergonomics**

005 Work should be performed in a position that eliminates eyestrain and/or glare.

010 Work should be performed so that prolonged raising of the arms is not required and that the neck and shoulders do not have to stoop to view the task.

015 Equipment should be positioned so that tasks can be performed comfortably; furniture should be adjusted and arranged to minimize strain on all parts of the body.

020 Work should be performed in a way that eliminates pressure points on parts of the body (wrists, forearms, back of thighs, etc.)

**131 Video Display Terminals and Keyboards**

005 VDT screens (computer monitors) should be placed approximately 12 to 18 inches from the operators face with the top line of the display just below eye level. Positioning the screen to eliminate backlight and glare is helpful in eliminating eyestrain. A document holder should be positioned at the same height as the screen.

010 Keyboards should be tilted to a comfortable angle that allows access to all keys. Wrists should be as straight as possible and elbows at a 90-degree angle so that the operator’s hands and lower arms are parallel to the floor.

015 Chairs should be adjusted so that keyboard operators sit with the back straight and head level. Feet should be on the floor or on a footrest. The backs of the knees should be at a 90-degree angle and slightly higher than the chair seat. The lower back should be supported to allow for a natural inward curve.

020 Before and periodically during VDT and keyboard use, the operator should stretch and exercise the hands and forearms.

**140 Personal Protection Equipment and Clothing**

005 Personal protective equipment and clothing must be maintained in a sanitary condition and ready for use. Interchanging personal protective
clothing or equipment between employees is prohibited unless it has been properly cleaned.

010 Approved safety glasses must be worn at all times in areas where there is a risk of eye injuries, such as punctures, abrasions, contusions, or burns. Protective goggles or face shields must be worn where there is any danger of flying particles or corrosive materials.

015 Protection against the effects of occupational noise exposure (ear plugs, etc.) must be used when sound levels exceed those of the CalOSHA noise standard.

020 Hard hats must be worn where danger of falling objects exists; they should be inspected periodically for damage to the shell and suspension system.

025 Protective gloves, aprons, shields, or other means must be used as needed to protect against cuts, corrosive liquids, and chemicals.

030 Appropriate foot protection is required where there is a risk of foot injuries from hot, corrosive, or poisonous substances; falling objects; or crushing or penetrating actions.

035 Approved respirators must be used for regular or emergency use where needed.

040 Eye wash facilities or a quick drench shower must be used when there is exposure to injurious corrosive materials unless otherwise directed by the MSDS for a particular material.

200 Exits and Egress

005 All exit doors and passages must be clear and free of obstruction.

010 Exit signs, and their illuminating light source, must be kept clear of obstruction and in place at all times.

210 Walkways

005 Aisles and passageways must be kept clear of obstruction.

010 Materials spilled in walkways must be cleaned up immediately.

015 When present, marking son aisles and walkways must be observed.
Materials or equipment must be stored in such a way that sharp projectiles will not interfere with walkways.

**220 Stairs and Stairways**

005 Handrails on stairways must be used to prevent falling; steps should be taken one at a time.

010 Slip resistant material applied on the surface of steps must not be removed.

015 Where stairs or stairways exit directly into any area where vehicles must be operated, barriers and warnings must be observed to prevent stepping into the path of traffic.

**240 Floor Openings**

005 Floor openings and pits must be covered or otherwise protected by a guardrail or equivalent on all sides (except at the entrance to stairways or ladders.)

010 Grates or other covers over floor drains, manholes, and similar openings must be kept in place.

**250 Electrical**

005 All employees are required to report, as soon as practical, any obvious hazard to life or property observed in connection with electrical equipment or lines. Preliminary inspections and/or appropriate tests must be made to determine what conditions exist before starting work on electrical equipment or lines.

010 All machines, equipment, appliances, portable electrical tools, and extension cords must be grounded or have a grounding conductor, as applicable. Multiple plug adaptors are prohibited.

015 In wet or damp locations, electrical tools and equipment must be appropriately protected.

020 The location of electrical power lines and cables (overhead, underground, under floor, other side of wall, etc.) must be determined before digging, drilling, or similar work is begun.

025 Metal measuring tapes, ropes, hand lines or similar devices with metallic thread woven into the fabric are prohibited where they could come in contact with energized parts of equipment or circuit conductors.
030 The use of metal ladders is prohibited in areas where the ladder or the person using the ladder could come in contact with energized parts of equipment, fixtures, or circuit conductors.

300 Vehicle Safety

005 Because vehicle accidents are a leading cause of work-related injuries and deaths, vehicle operation while in the course of your employment must demonstrate safe driving habits and not reflect exhibitions of speed or recklessness.

You should drive defensively at all times by continually watching for hazardous conditions, understanding how to defend against them, and taking action in time to avoid problems. Keep your eyes and attention on the road and others, and adjust your speed and driving to changing weather and traffic conditions.

010 DRIVER’S LICENSES AND DRIVING RECORDS: All employees who, as a part of their duties, have need to operate vehicles on public roads, must hold a valid, properly-classed driver’s license and possess a driving record acceptable to management. Failure to do so may result in loss of driving privileges, change of assignment, or disciplinary action up to and including discharge.

015 SEAT BELTS: Employees are required to wear seatbelts at all times when operating or riding in an employer-owned vehicle and/or when operating or riding as a passenger in any other vehicle during the course of their employment.

020 ALCOHOL AND DRUGS: The consumption of alcohol or drugs (even over-the-counter medications and prescriptions) can slow reactions, blur vision, reduce ability to determine distance, and impair judgment. It is, therefore, a violation of our safety policy for any employee to operate a vehicle with illegal drugs in his/her system or while impaired by alcohol, prescription drugs, or over-the-counter medications.

301 Transportation of Employees

005 When seven or more employees are regularly transported in a van, bus or truck, the operator’s license must be appropriate for the class of vehicle being driven.

010 Each van, bus, or truck used regularly to transport employees must be equipped with an adequate number of seats and seatbelts.
When employees are transported by truck, safeguards must be provided to prevent their falling from the vehicle.

Vehicles used to transport employees must be equipped with lamps, brakes, horn, mirrors, windshields and turn signals in good repair.

A fully-charged fire extinguisher, in good condition, with at least a 4B-C rating must be maintained in each employee transport vehicle.

Employees are prohibited from riding on top of any load which can shift, topple, or otherwise become unstable.

### Fueling

It is prohibited to fuel an internal combustion engine with a flammable liquid while the engine is running. NO SMOKING IS ALLOWED in the vicinity of fueling operations or in Tulare County Office of Education-owned vehicles.

Fueling operations must be done in such a manner that likelihood of spillage will be minimal. When spillage occurs during fueling operations, the spilled fuel must be washed away completely, evaporated, or other measures taken to control vapors before restarting the engine.

Fuel tank caps must be replaced and secured before starting the engine.

In fueling operations, there always must be metal contact between the container and the fuel tank.

Gasoline may not be handled or transferred to open containers.

Open lights, open flames, or sparking or arcing equipment are prohibited new fueling or transfer of fuel operations.

Fueling operations are prohibited in building or other enclosed areas that are not specifically ventilated for this purpose.

### Material Handling

Motorized vehicles and mechanized equipment used for loading, moving, and unloading material must be inspected daily prior to its first use.

Vehicles should be shut off and brakes set prior to loading or unloading.
Hand Tools

All hand tools and equipment (both employer- and employee-owned) used by employees at the workplace must be in good condition. Worn or bent tools must be replaced. Broken or fractured handles on any hand tool must be replaced promptly. Appropriate handles must be used on files and similar tools. Tool handles must be wedged tightly in the head of all tools. Tool cutting edges must be kept sharp so the tool will move smoothly without binding or skipping.

Appropriate safety glasses, face shields, etc. must be used while using hand tools or equipment that might produce flying materials or be subject to breakage.

HAMMERS: The appropriate hammer must be used for the job – one hammer must never be used to strike a second hammer in order to gain additional striking power. Hammers should be grasped firmly, close to the end of the handle; objects should be struck with the full face of the hammer. Broken or fractured handles must be replaced promptly. Hammers with loose heads must be repaired before use; those with chipped or mushroomed faces should be discarded.

PLIERS / CUTTERS / PRYBARS: Plastic or vinyl-covered plier handles are not intended to act as insulation; they must not be used on live electrical circuits. Pliers or cutters should be used for cutting hardened wire only if they were designed for that purpose. Cuts should always be made at right angles. Prybars must never be used as a chisel, punch, or hammer.

WRENCHES: The proper wrench must be used for the job; a pipe is never to be used as an extension on a wrench handle. If possible, always pull toward you with the wrench handle and adjust your stance to prevent a fall if something lets go; never cock a wrench. Never use a hammer on any wrench (other than a “striking face” wrench) or use a pipe wrench to bend, raise, or lift a pipe. Discard any wrench with broken or battered points.

SOCKETS AND RATCHETS: Select the right size socket for the job; never cock any wrench or socket. Sockets should be kept clean and those showing cracks or wear should be discarded. Only “impact sockets” should be used with air or electric impact wrenches; “hand sockets” must not be used on power or impact wrenches. Approved eye protection must be worn when using power or impact sockets.

PUNCHES / CHISELS: A punch or chisel with a chipped or mushroomed end must not be used; mushrooms should be redressed.
with a file. Punches and chisels should be held with a tool holder, if possible. When using a chisel on a small piece, the piece should be clamped firmly in a vise and the chipping made toward the stationary jaw.

040 SCREWDRIVERS: The proper type of screwdriver must be used for the job and the tip matched to the fastener. Pozidriv, Phillips, and Reed and Prince screwdrivers should not be interchanged. Screwdrivers must not be used for prying, punching, chiseling, scoring, or scraping. Screwdriver handles are not intended to act as insulation and must not be used on live electrical circuits. Screwdrivers with rounded edges should be redressed with a file.

045 TOOL STORAGE UNITS: Not more than one loaded drawer should be open at a time; each drawer should be closed before opening the next. Lids should be closed and drawers locked before storage units are moved; they should be moved by pushing, no pulling. Once in place, the brakes on locking casters must be set.

510 Portable Power Tools

005 Power tools must be used with the correct shield, guard, or attachment as recommended by the manufacturer.

030 All cord-connected, electrically operated tools and equipment must be effectively grounded or the approved double insulated type.

040 Portable fans must be guarded with grates or screens having openings of ½ inch or less.

520 Portable Ladders

005 All ladders must be maintained in good condition; joints between steps and side rails tight; all hardware, fittings, and non-slip safety feet securely attached; and movable parts operating freely without binging or undue play.

010 Ladder rungs and steps must be free of grease and oil.

015 Ladders may not be placed in front of doors opening toward the ladder except when the door is blocked open, locked, or guarded.

020 Ladders may not be placed on boxes, barrels, or other unstable bases to obtain additional height.

025 Ladders must be faced when ascending or descending.
Ladders that are broken, missing steps, rungs, or cleats or have broken side rails or other faulty equipment may not be used.

The top step of an ordinary stepladder must not be used as a step.

When portable rung ladders are used to gain access to elevated platforms, roof, etc., the ladder must always extend at least three feet above the elevated surface.

Extension ladders must only be adjusted while standing at the base, not while standing on the ladder or from a position above the ladder.

### 600 Lockout / Blockout Procedures

All machinery or equipment capable of movement must be de-energized or disengaged and blocked or locked out during cleaning, servicing, adjusting, or setting up operations. The main power must be locked out, not just a control circuit; stored energy (mechanical, hydraulic, air, etc.) must be released or blocked.

All employees who are working on locked out equipment must be identified by their locks or accompanying tags and must keep control of their keys while their safety locks are in use. Only the employee exposed to the hazard is permitted to place or remove a safety lock during a lockout / blockout procedure.

The employee exposed to the hazard should check the safety of the lockout by attempting a start-up after making sure no one is exposed.

In the event that equipment or lines cannot be shut down, locked out, and tagged, a safe procedure directed by management for that particular situation must be followed.

The control circuit stop button should be pushed prior to re-energizing the main power switch.

### 860 Housekeeping Assignments

Lights should be turned on before entering a dark room.

The contents of wastebaskets should be emptied into rubbish receptacles or onto open newspaper for careful disposal. Hands should not be put into a wastebasket.
015  Broken glass, razor blades, or other sharp objects should not be picked up with bare hands; a broom and a pan should be used. Soap dishes should be checked for razor blades before cleaning.

025  To avoid electric shock, hands should be dry before switching on lights or handling electric appliances.

030  Mops, brooms, buckets, etc. must be stored in safe places; they are not to be left in halls, passageways, or on stairs where they may cause falling accidents.
APPENDIX

ACKNOWLEDGEMENT OF RECEIPT AND UNDERSTANDING

I have received a copy of the Job Safety Handbook for the Tulare County Office of Education. I acknowledge my obligation to read, understand, and comply with its contents and directives. The Handbook contains the following sections:

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Name (Print):

Signature: Date: / / 

FORM 000
SAFETY TRAINING CHECKLIST

Employee Name: ____________________________ Employee Number: ____________________________

Position: ________________________________

Reason for Training (Check One)
   _____ New Employee
   _____ Transfer to new assignment / position having new exposure

BY TRAINING ACTIVITIES: (Initial completion of all applicable)
   _____ Review Job Safety Handbook (General)
   _____ Review Handbook Supplement: _____________________________
   _____ Review Handbook Supplement: _____________________________
   _____ Review Handbook Supplement: _____________________________
   _____ Review Handbook Supplement: _____________________________
   _____ Review Handbook Supplement: _____________________________
   _____ Review Handbook Supplement: _____________________________
   _____ Review Handbook Supplement: _____________________________
   _____ Review of Fire Prevention Plan
       Poster Location for this position: _____________________________
   _____ Review of Emergency Action Plan
       MSDS Location for this position: _____________________________
   _____ Copy of valid driver’s license received Class: ___________ Expiration Date: ________
   _____ Driving record approved by: ___________ Date: ______________
   _____ Issuance of personal protective equipment listed below:
   _____________________________
   _____________________________
   _____________________________
   _____________________________
   _____________________________
   _____________________________
   _____________________________
   _____________________________
   _____________________________
   _____________________________

   _____ Workers’ compensation information notice given to new employee
   _____________________________
   _____________________________
   _____________________________
   _____________________________

Supervisor Signature: ____________________________ Date: / /

Employee Signature: ____________________________ Date: / /

FORM 005
**REPORT OF INJURY ACCIDENT**

- **Employee Name:**
- **Employee Number:**

- **Date of Injury / Illness:** / / **Time of Day:** a.m. / p.m.
- **Name(s) of Witnesses:**

What was employee doing when injured? (Be specific, identify material, tools, or equipment the employee was using.)

How did the accident or exposure occur? (Describe all events that resulted in the injury or occupational disease. Explain what happened and how it happened.)

What object or substance directly injured the employee? (e.g., the machine the employee struck against or struck against him/her; the vapor or poison inhaled or swallowed; the chemical that irritated the skin, in cases of strain, the object that was being lifted, pulled, etc.)

Describe the injury or illness: (i.e. fracture, cut, strain, rash)

What part of the body was affected? (e.g., back, left wrist, etc.)

Was another person responsible for the cause of injury? **YES** **NO**

Name and address of the attending physician:

If hospitalized, name and address of the hospital:

Report by: **Date:** / /  

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**FORM 010**  

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ACCIDENT INVESTIGATION REPORT

Description of accident:              Accident date: 

If injury accident, attach copy of accident report for further details:

What condition of tools, equipment, job site, building, etc. caused or contributed to the accident?

What did the employee do or fail to do that caused or contributed to the accident?

What action has been taken or will be taken to prevent recurrence?

Name of person responsible for planned corrective action:  To be completed by: 

All parties involved with the corrective action so notified:

YES     NO

Investigation / Report By:              Date: 

FORM 015
EMPLOYEE REPORT OF SAFETY / HEALTH HAZARD

Description of hazard: (As applicable, include a description of the condition of any tools, equipment, job site, building, etc. that may cause or contribute to the hazard.)

Date hazard was first recognized: 

Location of hazard:

Seriousness of the hazard: (Describe what may occur if the hazard is not corrected.)

What steps are needed to correct the hazard?

Reported by: (optional) 

Employees who report unsafe work conditions or practices are protected by law. This report may be submitted without fear of reprisal. All reports will be considered whether or not signed.

Received by: 

FORM 020
# HAZARD CORRECTION ACTION PLAN

## Description of Hazard:

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<tr>
<th>Date discovered:</th>
<th>/ /</th>
<th>Plan Number:</th>
<th>Other:</th>
</tr>
</thead>
<tbody>
<tr>
<td>How was hazard discovered?</td>
<td>Inspection:</td>
<td>Reported:</td>
<td></td>
</tr>
<tr>
<td>Specific step / task required:</td>
<td>Person Assigned</td>
<td>Projected Completion Date</td>
<td>Actual Completion Date</td>
</tr>
<tr>
<td>Approved by:</td>
<td></td>
<td>Continued:</td>
<td>YES NO</td>
</tr>
</tbody>
</table>

FORM 025
<table>
<thead>
<tr>
<th>Specific step / task required:</th>
<th>Person Assigned</th>
<th>Projected Completion Date</th>
<th>Actual Completion Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Continued:

Approved by: [Signature]

Approved by: [Signature]

YES

NO

Date: / / 

FORM 026
**DISCIPLINARY NOTICE – SAFETY VIOLATION**

<table>
<thead>
<tr>
<th>Employee Name:</th>
<th>Employee Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of violation: / /</td>
<td>Time of day: a.m. / p.m.</td>
</tr>
<tr>
<td>Where did violation occur?</td>
<td></td>
</tr>
</tbody>
</table>

**Description of violation?** (Be specific, list safe practice group / item numbers from the job safety handbook / supplements where applicable.)

<table>
<thead>
<tr>
<th>Did violation result in injury to this employee?</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did violation result in injury to another employee / person?</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>Did violation result in damage to property or equipment?</td>
<td>YES</td>
<td>NO</td>
</tr>
</tbody>
</table>

**Name(s) of witnesses:**

**Statement of the employee:**

**Prior violations / past reprimands:** (List safety violations and related reprimands for this employee during the past twelve months.)

**Disciplinary action for this violation:**

**Issued By:**

<table>
<thead>
<tr>
<th>Date: / /</th>
</tr>
</thead>
</table>

**Employee Signature:**

<table>
<thead>
<tr>
<th>Date: / /</th>
</tr>
</thead>
</table>

**FORM 030**
SAFETY MEETING MINUTES

Leader:                                            Date:  /  /

Part A: Persons Present

Continued on supplemental sheet:  Yes  No

Part B: Progress in Correcting Previously Reported Hazards

Continued on supplemental sheet:  Yes  No

Part C: Accidents Reviewed and Recommended Prevention

Continued on supplemental sheet:  Yes  No

Part D: New Unsafe Conditions/Hazards Reported

Continued on supplemental sheet:  Yes  No

Part E: General Discussion

Continued on supplemental sheet:  Yes  No

Prepared By:                                      Date:  /  /

FORM 040
EMERGENCY ACTION PLAN

Location:          Date:    /    /

Emergency Escape Routes for This Location:

Critical Operations to be Performed Before Evacuation:

Procedures to Account for All Employees After Evacuation:

Rescue and Medical Duties of Employees Assigned to Perform Them:

Means of Reporting Fires and Other Emergencies:

Names/Job Titles of Persons to be Contacted for Further Information:

FORM 050
### GENERAL HAZARD EVALUATION WORKSHEET

**Area/Site Evaluated:**

<table>
<thead>
<tr>
<th>Potential Hazard</th>
<th>Safe Practice/Protection Required</th>
<th>Listed Practice Session</th>
<th>In: Inspection Group</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Prepared By:**

**Date:** / / 

**Continued:**

**Yes** **No**

**Date:** / / 

**FORM 060**
<table>
<thead>
<tr>
<th>Potential Hazard</th>
<th>Safe Practice/Protection Required</th>
<th>Listed Practice Session</th>
<th>In: Inspection Group</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Prepared By:**

**Continued:**

**Yes**  **No**

**Date:** / /

**FORM 061**
**SPECIFIC HAZARD EVALUATION SHEET**

Title: (Job category, work area/site, machinery, or process)

Location:

Check “A” or “B” as applicable. Enter appropriate data if “B”.

A _____ Safe practices/inspection items listed in various sections/groups.

B _____ Safe practices listed in section _____

(_____ General     _____ Supplement)

Inspection items listed in group _____

(_____ General     _____ Supplement)

<table>
<thead>
<tr>
<th>Step/Task</th>
<th>Potential Hazard</th>
<th>Safe Practice/Protection</th>
</tr>
</thead>
</table>

Prepared By:  
Continued: Yes No  
Date: / / 

FORM 065
<table>
<thead>
<tr>
<th>Step/Task</th>
<th>Potential Hazard</th>
<th>Safe Practice/Protection</th>
</tr>
</thead>
</table>

**Title:**

**Prepared By:**

**Date:** / / 

**Continued:** Yes No

**Date:** / / 

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FORM 066