

Model Safety Manual

Disclaimer:

This Model Safety Manual is intended only to provide a guideline how firms can fulfill their responsibilities for the control of loss-producing situations involving their employees, premises, and/or operations. It is not intended to be a substitute for establishing ongoing loss control and accident prevention responsibilities. This Model Safety Manual is not intended and cannot possibly address every possible loss-producing situation. Furthermore, this Manual does not satisfy all applicable local, state, or federal health and safety laws or regulations.

Introduction:

One manual does not fit all companies. This manual was written for manufacturers and assumes the company has someone assigned responsibility for safety (referred to as Safety Director throughout manual). The Safety Director should carefully consider the terms of the Model Safety Manual and modify it to include existing company policies and programs. Some companies will not need all the programs provided in this Manual. Take these sections out of your company's manual. However, retain these sections for future use.

We encourage you to consult your JGS agent on changes made to this Model Safety Manual prior to release of the Manual to employees.

Remember, a safety manual alone does not constitute a safety program. A safety manual is only valuable if it is used. JGS can help you put an entire safety program in place, or any programs included in this Manual.

Telecommunication Industry:

You are encouraged to review OSHA Telecommunications Industry specific standards, 1910.268. (www.osha.gov)

Some specific standards but not all inclusive;

Work in or near vehicular traffic.

Overhead or buried electrical power lines.

Rubber insulating equipment.

Personal climbing equipment.

Pole or tower climbing.

Aerial lifts (bucket trucks)/elevating work platforms/ladders.

Off road driven equipment (backhoe, scraper, front-end loader, etc.)

Manholes and un-vented vaults.

Microwave transmission.

Tree trimming.

Harmful substances and animal, insect, or plant life.

Section 1. Policy	
A. Company Safety Policy	1
B. Management Commitment to Safety	1
C. Assignment of Responsibilities	1
D. Accountability for Safety	3
E. Opinion Survey	3
F. Employee Suggestions	4
Section 2. General Safety	
A. Emergencies, Evacuation	6
B. Safe Operating Procedures	
1. Rules	6
2. Housekeeping	7
3. Tools & Machinery	7
4. Machine Guarding	8
5. Materials Handling & Back Safety	8
6. Forklift Safety	9
7. Ladders	11
8. Office Safety	11
9. Clothing	11
Section 3. Continual Monitoring & Improvement	
A. Committees	13
B. Meetings/Training	17
C. Teams	19
D. Inspections	19
Section 4. Accident Management	
A. Accident & Near Misses Reporting Procedures	22
B. Accident Investigation	22
C. Return-to-Work Policy	26
Section 5. Workers' Comp	
A. Benefits	29
B. Workers' Comp Fraud	29
Section 6. Fleet Safety Program	31
Section 7. OSHA (Occupational Safety & Health Administration)	36
Section 8. Special Emphasis Programs	
A. Drug- & Alcohol-Free Workplace	40
B. Lock-Out/Tag-Out	43
C. Confined Space Entry	52
D. Hot Works	58
E. Hazard Communications	62
F. Personal Protective Equipment	69
G. Hearing Conservation	78
H. Respiratory Protection Program	80
I. Smoking Policy	82
J. Bloodborne Pathogen Control	83
K. Violence Prevention Program	89
Section 9. New Employee Safety	90
Section 10. Safety Violation	92
Section 11. Acknowledgment Form	94
Resource List	95

Section 1: Safety Policy

A. Company Policy

(Company Name) is dedicated to providing a safe and healthy work environment for all of our employees and customers. The Company shall follow operating practices that will safeguard employees, the public and Company operations. **We believe all accidents are preventable.** Therefore, we will make every effort to prevent accidents and comply with all established safety and health laws and regulations.

B. Management Commitment to Safety

Management is concerned about employee safety. Accidents, unsafe working conditions, and unsafe acts jeopardize both employees and Company resources. Injuries and illnesses result in discomfort, inconvenience and possibly reduced income for the employee. Costs to the Company include direct expenses (workers' compensation premiums, damaged equipment or materials, and medical care) and indirect expenses (loss of production, reduced efficiency, employee morale problems, etc.). These indirect costs are reported to cost 4-10 times more than the insured costs of an accident. Accordingly, Management will provide sufficient staffing, funds, time, and equipment so those employees can work safely and efficiently.

C. Assignment of Responsibilities

Safety is everyone's responsibility. Everyone should have a safe attitude and practice safe behavior at all times. To best administer and monitor our safety policies, the following responsibilities are delegated. This list should not be construed as all-inclusive and is subject to change as needed.

1. Management (will)
 - a. Provide sufficient staffing, funds, time, and equipment so that employees can work safely and efficiently
 - b. Demand safe performance from each employee and express this demand periodically and whenever the opportunity presents itself.
 - c. Delegate the responsibility for a safe performance to the Safety Director, Supervisors, and Employees, as appropriate.
 - d. Hold every employee accountable for safety and evaluate performance accordingly.
 - e. Periodically review the Safety Program effectiveness and results.

2. Safety Director _____ (name) _____ (will)
 - a. Provide the resources, direction, and audits to integrate safety into the management system.
 - b. Establish and maintain a safety education and training program.
 - c. Periodically conduct safety surveys, meetings, and inspections.
 - d. Advise supervisors, employees, and the safety committee on safety policies and procedures.
 - e. Assure that all newly hired employees have been given a thorough orientation concerning the Company's Safety Program.
 - f. Coordinate with Human Resources pre-employment physicals and maintain the company's drug-testing program.

- g. Prepare and maintain safety records, analysis, evaluations, and reports to improve the Company's safety performance and comply with all government agencies, insurance carriers, and internal procedures.
- h. Work with management, supervisors, safety committees and employees to maintain & implement new and ongoing safety programs and comply with recommendations provided by outside consultants, OSHA inspectors, and insurance companies.
- i. Make available all necessary personal protective equipment, job safety material, and first-aid equipment.
- j. Review all accidents with management, supervisors, the safety committee and/or employees and ensure that corrective action is taken immediately.
- k. File all workers' compensation claims immediately and work with the workers' compensation carrier to ensure proper medical treatment is provided to injured workers and they are returned to work as quickly as medically possible.

3. Supervisors

Each employee, who is in charge of a specific work area, supervises the work of others, or to whom an employee is assigned for a specific task or project, is responsible and accountable for their safety. Supervisors will:

- a. Establish and maintain safe-working conditions, practices, and processes through:
 - Job Safety Analysis (see Return to Work section for sample)
 - Job Inspections
 - Safety Meetings
 - Safety Training
- b. Observe work activities to detect and correct unsafe actions.
- c. Ensure that all injuries are reported promptly and cared for properly. Make available first aid treatment.
- d. Investigate all accidents promptly. Complete an accident report and provide it to the Safety Director the same day the accident occurs. Review all accidents with the Safety Director and employees and correct the causes immediately.
- e. Assist Human Resources in the review of employment applications, pre-employment physicals reports, and personnel files to determine physicals qualifications for specified job classifications.
- f. Seek out alternative work so that injured employees can return to work in a modified duty job.
- g. Consistently enforce safety rules/regulations, programs, and protective measures (i.e. use of personal protective equipment, machine guarding, proper clothing, etc.)
- h. Post signs, notices, and instructions as needed or required.
- i. Brief your employees of any new hazards before they start work and weekly host brief safety meetings to discuss safety practices related to job hazards and general safe work behavior.
- j. Work with management, the Safety Director, safety committees and employees to maintain & implement new and ongoing safety programs and comply with recommendations provided by outside consultants, OSHA inspectors, and insurance companies.

4. Employees

Each employee is responsible for his/her own safety. No task should be completed unless it can be completed safely. Employees will:

- a. Comply with all company safety programs, rules, regulations, procedures, and instructions that are applicable to his/her own actions and conduct.
- b. Refrain from any unsafe act that might endanger him/herself or fellow workers.
- c. Use all safety devices and personal protective equipment provided for his/her protection.
- d. Report all hazards, incidents, and near-miss occurrences to their immediate supervisor or Safety Director, regardless of whether or not injury or property damaged was involved.
- e. Promptly report all injuries and suspected work related illnesses, however slight, to his/her immediate supervisor or Safety Director.
- f. Participate in safety committee meetings, training sessions, and surveys as requested and provide input into how to improve safety.
- g. Notify the Safety Director immediately of any change in physical or mental condition or use of prescription drugs that would affect the employees job performance or the safety of him/herself or others.
- h. Notify the Human Resources Manager within five days of any serious driving, drug/alcohol, or criminal convictions.
- i. Be a safe worker on (and off) the job. Help coworkers do their job safely. Come to work everyday with a safe attitude.

D. Accountability for Safety

Everyone is accountable for safety. Management, the Safety Director, and/or the Safety Committee will establish safety objectives and develop and direct accident prevention activities. All employees should strive to reach those objectives and will be evaluated accordingly. All managers' and supervisors' annual appraisals will include safety (results to objectives in their area and company wide) as well as an audit of their performance of their safety responsibilities. All employees' salary reviews will be affected by the company's safety performance record. Appraisals, which include safety records, will also be performed on all employees seeking a promotion.

E. Opinion Survey

The Company requests ongoing comments and feedback from all employees. In addition, annually the company will request all employees' opinions and input on the Company's safety program through an opinion survey. Be honest. You know your job better than anyone else. Therefore you can provide valuable input into performing the job safely. Changes to existing safety programs, rules, procedures, etc. may be influenced by your responses. Full cooperation of all employees is expected.

F. Employee Suggestions

Safety suggestions from employees are welcomed and encouraged. To make a safety suggestion, complete the following form and provide it to the Safety Director. The Safety Committee at their next meeting will review the suggestion. Responses to suggestions will be discussed with the individual or posted along with the Safety Committee Minutes.

Employee's Safety Suggestion

Employee's Name (optional): _____ **Date:** _____

Supervisor's Name: _____

CURRENT PRACTICE OR CONDITION

SUGGESTION

BENEFITS EXPECTED FROM CHANGE

(FOR SAFETY COMMITTEE USE ONLY)

Year: _____ **Number:** _____

Suggestion Implemented? Yes - as submitted Yes - with changes No

Implementation Date: _____

Comments/Changes Made/Reason for change or not implemented: _____

Section 2: Standards

A. Emergencies & Evacuation

1. Emergency Procedures

Our goal is to provide prompt and immediate action in any emergency to protect life, property, and equipment. In case of an emergency, the employee nearest the stricken person should call 911 (or the emergency phone number posted in your area) and direct a fellow employee to:

- a. Notify the nearest supervisor to come to the scene
- b. Simultaneously dispatch available employees to quickly retrieve the first aid kit.
- c. An individual trained in first-aid should apply emergency rescue procedures until medical assistance arrives.

The Safety Director should be notified. The President or Safety Director (in that order) or their designees will decide whether or not to evacuate, inspect or shut down a facility.

2. Evacuation Procedures

- a. Each area will be assigned by the Safety Director a primary and alternate evacuation coordinator. They will be responsible for the effective evacuation of all persons. If neither are available, the supervisor is then responsible for evacuation.
- b. When alerted by alarm or by the Evacuation Coordinator(s) to evacuate, employees should:
 1. Properly secure all classified materials in your possession and assure all classified containers and areas are properly locked.
 2. **Proceed to the nearest exit and assemble in the designated area.** See the attached building layout with exit routes clearly marked. These are also posted throughout the building.
 3. Remain in the designated area until instructions are provided.

B. Safe Operating Procedures

All employees are responsible for safety. The following applies to all employees:

1. Rules

- a. Comply with all established safety rules, regulations, procedures, and instructions which are applicable to your own actions and conduct.
- b. Promptly report all accidents, hazards, incidents, and near-miss occurrences to your immediate supervisor, regardless of whether or not injury or property damage was involved.
- c. Do not visit, talk to, or distract another employee who is operating a machine, or who is engaged in a work activity where the possibility of injury exists.
- d. Do not participate in horseplay, scuffling, pushing, fighting, throwing things, or practical jokes.
- e. Observe all no-smoking signs and regulations.
- f. Do not run on Company premises.
- g. Use handrails on steps, elevated platforms, scaffolds, or other elevations.
- h. Assist others and ask for assistance in lifting and carrying heavy or awkward objects.
- i. Firearms, ammunition, and explosives are prohibited on Company premises.

- j. Personal stereos with headphones, i.e. Walkman, are not permitted to be worn in the workplace
- k. Alcohol and drug use and possession on Company property is prohibited.

2. Housekeeping

- a. Practice good housekeeping by keeping the work area, aisles, walkways, stairways, roads, or other points of egress clean and clear of all hazards.
- b. Store and/or return parts, materials, tools, and equipment so as not to create a tripping hazard.
- c. Clean-up scrap, nails, and other excess materials. Place trash and scrap in proper waste containers.
- d. Keep work area floors clean, dry, and free of oils, grease and liquids. Remove all spills immediately.
- e. Remove or bend down nails or sharp protrusions. Store parts, materials, or equipment with protruding sharp ends or edges where personnel can not accidentally bump into them.
- f. Materials and equipment are not to be stored in the aisles or near exits. Permission from the Safety Director must be obtained for temporary or permanent storage of any materials or equipment in aisles or near exits.

3. Tools, Machinery, & Equipment

- a. Inspect tools daily to ensure that they are in proper working order. Damaged or defective tools must be taken out of service and replaced immediately.
- b. Power saws, grinders, and other power tools must have proper guards in place at all times.
- c. Cords and hoses must be kept out of the walkways and off stairs and ladders. They must be placed so as not to create a tripping hazard or damaged from equipment or materials.
- d. Electrically powered tools and equipment should be double-insulated or grounded at all times when in use.
- e. Hand tools should be used for their intended purposes only. The design capacity of hand tools should not be exceeded by the use of unauthorized attachments.
- f. All fuel-powered tools must be shut down while being refueled or serviced. Smoking, welding, and other burning is prohibited during refueling.
- g. No one shall ride in or on any equipment not specifically designed or adapted for the transportation of employees.
- h. Do not operate or attempt to operate machines, tools, or equipment for which you are not authorized or trained.
- i. Do not stand, walk, or work under suspended loads or loads being moved by overhead equipment.

4. Machine Guarding

- a. It is the responsibility of the Supervisor to see that guards are installed on machines where needed.
- b. Employees should report any malfunctions of the guards to the Safety Director.
- c. The Safety Director should determine if the machine should be locked and tagged-out until the guard can be fixed or replaced.
- d. The guards increase safety on the machine. Machinery with the guards removed shall not be used by any employee without permission from the Safety Director.

5. Material Handling & Back Safety

- a. Know the approximate weight of your load and make certain your equipment is rated to handle it. (All powered equipment and rigging is rated as to safe working load. This rating is posted on the equipment. Never exceed the manufacturer's recommended safe working load).
- b. Lift heavy objects as instructed, with the leg muscles and not with the back. On average, do not manually lift over 50 pounds.
- c. Call for assistance as needed for handling heavy or bulky objects or materials.
- d. Use an appropriate, approved lifting device (i.e. special trucks, racks, hoists, and other devices) for lifting very heavy, bulky, large or unyielding objects.
- e. All ropes, chains, cables, slings, etc., and other hoisting equipment must be inspected each time before use.
- f. A load should never be lifted and left unattended.
- g. Wear safety gloves when handling materials.
- h. Properly stack and secure all materials prior to lifting or moving to prevent sliding, falling, or collapse.
- i. Protruding nails or staples must be bent or pulled away whenever stripping forms or opening materials.
- j. Avoid moving or lifting loads by hand whenever possible.

Tips for manual lifting:

- a. Get a good footing.
- b. Place feet about shoulder width apart.
- c. Bend at the knees to grasp the weight.
- d. Keep back as straight as possible.
- e. Get a firm hold.
- f. Lift gradually by straightening the legs.
- g. Don't twist your back to turn. Move your feet.
- h. When the weight is too heavy or bulky for you to comfortably lift - GET HELP.
- i. When putting the load down, reverse the above steps.

Note: If lifting stacked materials, materials should be carefully piled and stable. Piles should not be stacked as to impair your vision or unbalance the load. Materials should not be stacked on any object (i.e. floor, scaffold) until the strength of the supporting members have been checked.

6. Forklift & Heavy Equipment Safety

The following are the minimum safety practices for the operation of fork lifts and heavy equipment (cranes, bulldozers, backhoes, etc.):

- a. Only trained and authorized operators are permitted to operate a fork lift or heavy equipment. All operators will be trained by their Supervisors or the Safety Director. Every operator must participate in, at a minimum, annual forklift training.
- b. Prior to operating the forklift or equipment, the operator must test: the brakes, steering controls, warning light, clutch, horn, fluid levels, and other devices for safe and proper operation.
- c. Never check the engine while it is running.
- d. Document your inspection results and equipment defects using the attached Inspection Report Form. Report defects to your supervisor immediately. No defective equipment shall be used. Adjustments and repairs should be made by authorized personnel only.
- e. Wash the equipment whenever necessary. The equipment must be kept clean and free of oil and grease.
- f. Employees should operate the equipment/forklift with safe speed and within rated load capacity. Drive to the right. Do not exceed 10 miles per hour, or posted authorized speeds, on plant roads.
- g. Passengers are not permitted on forklifts or heavy equipment except for training purposes.
- h. Mobile equipment should never be left unattended without first shutting off power, neutralizing controls, setting brakes, and lowering forks or bucket. Do not park on an incline.
- i. All mobile equipment must have a functional fire extinguisher on board.
- j. Sound horn at exits, corners, cross aisles, intersections, and when approaching pedestrians. Do not use horn needlessly or at undue length.
- k. Always look in the direction equipment is traveling, looking backward when backing up, even for a short distance. Keep a clear view of the path. When forward vision is obstructed, drive in reverse.
- l. When traveling, with or without a load, keep forks or bucket as low as possible.
- m. Avoid following pedestrians or other vehicles too closely, especially when operating on inclines or in noisy areas.
- n. Ascend/descend all ramps and inclines slowly. Wait for passengers to exit the ramp before attempting to ascend/descend. When descending, always use low gear and the slowest speed control. Do not descend ramps with the load at the front of the fork lift. Never ascend in reverse. When ascending, loaded forklifts should be driven with the load upgrade.
- o. A man cage must be used when elevating personnel with a forklift. Attach the cage prior to use. Do not travel with passengers in the man cage.
- p. Personal protective equipment should be used as instructed. Hard hats should be worn where danger of falling objects exists.
- q. If the forklift is equipped with a seatbelt, the belt must be worn at all times.

Forklift Inspection Check List

Distribution: Copy to Safety Director Copy to Safety Committee Copy _____

Date: _____ **Inspector:** _____ **Title:** _____

Grade: 1 = Satisfactory, 2 = Needs some attention, 3 = Needs immediate action

<i>Item</i>	<i>Grade</i>	<i>Comments</i>
Operator Training		
Personnel operating the forklift properly trained.		
Condition of Forklift		
Brakes		
Steering controls		
Warning lights		
Horn		
Clutch		
Warning Lights		
Engine		
Overhead guard		
Capacity Sign posted		
Fire Prevention		
Fire extinguisher on board & functional		
Fluids		
Levels Adequate		
Fueling done to avoid spilling		
If spillage occurs, is fuel washed away completely from forklift and area and measures taken to control vapors before restarting engine?		
Personal Protective Equipment		
Hard hats provided & worn where danger of following objects exist		
General PPE rules on proper clothing & footwear followed		
Additional OSHA Requirements		
Are driving paths marked, in good condition, and clear?		
Repairs are conducted in designated areas		
Operating rules posted & enforced		
Batteries charged in properly vented rooms (no smoking)		
Are dust & fume exposures generated by the forklift through operation, fueling, or repair controlled?		
Seatbelt in forklift and worn while operating the forklift		
Other:		

Action Taken:

Repairs/Corrections must be completed by: (date) _____

Repairs/Corrections mentioned above have been done.

Supervisor _____ **Date:** _____

7. Ladders

- a. Inspect all ladders before use. Do not use any ladders with missing safety feet, missing or broken rungs, etc. Tag defective ladders with a “DO NOT USE” sign and report the defects immediately.
- b. Portable ladders should be placed so that the base is away from the horizontal plane by one-fourth the ladder length (i.e. 12’ ladder would be 3’ from the wall).
- c. Never climb a ladder that is unstable.
- d. Never place a ladder in front of a door, unless the door is locked, guarded or otherwise blocked.
- e. All ladders placed up against a stationary object must be tied off at the top to a secure point.
- f. Ladders must extend at least three feet beyond the step off point.
- g. Do not place a ladder close to live electrical wiring or against piping. Beware of overhead wires when moving an extended ladder. Do not use metal ladders near electrical power lines.
- h. Portable ladders must be equipped with non-slip bases.
- i. Face the ladder when ascending or descending.
- j. Never stand at the top rung of a step ladder.

8. Office Safety

- a. Practice good housekeeping throughout the office area. Do not leave materials or position telephone or electrical cords in the aisles.
- b. Report or correct any obvious hazards as soon as they are discovered.
- c. Install pencil sharpeners so as not to protrude beyond the ends of desks or tables.
- d. Do not carry articles weighing more than 20 pounds when ascending or descending stairs that rise more than 5 feet.
- e. Close files and desk drawers. Arrange contents in file cabinets prevent tipping when draws are open. Store heavier materials in the lower drawers. Do not open more than one draw at a time when tipping may occur. Secure cabinets to each other as necessary.
- f. Report damaged furniture and broken veneer surfaces immediately.
- g. Do not carry pointed or sharp objects in hand, pockets, or attached to clothing with points or blades exposed.
- h. Do not leave paper cutters with the blade in the open or upright position.
- i. Take precautions to prevent materials from falling from the top of file cabinets or desks.
- j. Do not stand on chairs, desks, boxes, waste baskets, or any other substitutes for an approved step-stand or stepladder.
- k. Report slippery floor surfaces to your supervisor immediately.
- l. Clean up spills on floors immediately.
- m. Position desks and files so that drawers do not extend into the aisle way when open.

9. Clothing

- a. **Clothing:** Wear safe and practical working apparel. Be sure that any clothing you wear is not highly flammable. Neckties and loose, torn or ragged clothing should not be worn while operating lathes, drill presses, reamers and other machines with revolving spindles or cutting tools.

- b. **Shoes:** Low-heeled, closed-toe shoes (or proper work boots) made of substantial leather or equivalent material with sufficient heavy soles must be worn in designated areas.
- c. **Jewelry:** Do not wear rings or any form of jewelry or ornamentation when working around machinery or exposed electrical equipment.

Section 3: Continual Monitoring & Improvement

A. Safety Committees

Managers, supervisors, union representatives, and employees will all be represented on the committee. The purpose is to bring workers and management together on a regular basis in a non-adversarial, cooperative effort to promote workplace safety.

The Safety Committee will not have more than 10 people on it at any one time. Members should remain on the Committee for a minimum of one year. Membership on the Committee includes:

Management: A Management representative with authority to act on all but major expenditures or procedural matters. The management representative will be familiar with corporate objectives and be aware of insurance costs and the need to control losses.

Safety Director: The Safety Director does not run the Safety Committee. He/she should attend all safety meetings and be an advisor to the Committee. The Safety Director shall select 3-4 supervisors to participate in the Safety Committee.

Supervisors: One supervisor shall chair all meetings. This is an elected position by the safety committee. The chairman should work with the Safety Director and other committee members to plan meeting agendas. One supervisor will be responsible for taking all minutes at the meetings. Minutes of the meetings should be provided to all committee members and field supervisory personnel within a reasonable time following meetings. Supervisors should solicit employees to volunteer to participate in the safety committee. Only employees working at least 1 year at the company may volunteer. 4-5 employees should be selected among the volunteers to participate on the committee.

Employees: Should solicit suggestions and concerns from coworkers and participate at the committee meetings. Employees must attend all committee meetings, unless a medical reason prohibits their attendance.

Union Representative: A union representative with authority to negotiate and agree to safety programs and policies should also be assigned to the safety committee.

The Committee should meet at least once a month for 1-2 hours at a time. A written agenda should be provided to all members by the committee chairman prior to the meetings. Minutes should be taken at all Committee meetings, distributed to members and supervisors, posted for employees, and retained for future audits. The attached form should be used for minutes (attach additional pages as needed).

The Safety Committee has many functions. Here is a list of responsibilities often assigned to the Safety Committee. Some responsibilities are also performed by managers and supervisors. In this case, the Safety Committee may audit the supervisor or simply assist:

- A. Planning, direction, and control of corporate loss control activities
- B Create, review, update, and implement areas of the safety manual and other safety programs
- C Review losses
- D Follow-up on employee suggestions
- E Conduct inspections and monitor safe behavior
- F. Implement Great American Loss Prevention Recommendations & Safety Programs
- G. Conduct Training Sessions
- H. Complete Job Analyses (JSA) on safety-sensitive and non-routine tasks
- I. Non-safety issues can be addressed: production, process, quality, etc.

Minutes of Safety Committee Meeting
TO BE POSTED FOR ALL EMPLOYEES' REVIEW

Date of Meeting: _____ **Time:** _____ **Next Meeting:** _____

COMMITTEE MEMBERS & GUESTS IN ATTENDANCE

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

PENDING BUSINESS

PRIOR RECOMMENDATIONS

Completed since last meeting: _____

Under Consideration: _____

Dropped (provide recommendation & reason dropped) _____

B. Safety Meetings/Training

Supervisors should hold a (minimum) 10 minute tool box safety talk every Monday at the beginning of the shift. All employees are required to attend. Supervisors should update employees on any changes in procedures, new equipment, and general safety issues. Emergency procedures should be periodically reviewed. Employees should be reminded to put safety first and look out for your fellow coworker. Employees and supervisors should offer comments and safety suggestions at this time and regularly throughout the day as needed.

Monthly safety training and/or meetings will be held to keep employees abreast of safety procedures and issues. Updates on the safety committee meetings will be provided at this time. Employees with outstanding safety records will be recognized during these meetings. All employees must attend. Quizzes and surveys may be administered after safety training or meetings.

The following form should be completed following every safety meeting/training and maintained by the Safety Director.

Safety Meetings/Training

Company Name: _____
Date of Meeting: _____ Instructor: _____

Attending Employees

	<u>Print Name</u>	<u>Signature</u>
1	_____	_____
2	_____	_____
3	_____	_____
4	_____	_____
5	_____	_____
6	_____	_____
7	_____	_____
8	_____	_____
9	_____	_____
10	_____	_____
11	_____	_____
12	_____	_____
13	_____	_____
14	_____	_____
15	_____	_____
16	_____	_____

Safety Topics Covered:

- | | |
|---|---|
| <input type="checkbox"/> WC Safety Manual | <input type="checkbox"/> Housekeeping |
| <input type="checkbox"/> Drug-Free Workplace Program | <input type="checkbox"/> Personal Protective Equipment |
| <input type="checkbox"/> Accident Reporting | <input type="checkbox"/> Materials Handling/Back Safety |
| <input type="checkbox"/> Injuries or Accidents Review | <input type="checkbox"/> Tools, Equipment, Machinery |
| <input type="checkbox"/> Safety Committee | <input type="checkbox"/> Hazardous/Flammable Materials |
| <input type="checkbox"/> Teamwork | <input type="checkbox"/> Confined Space |
| <input type="checkbox"/> Supervisor's Training | <input type="checkbox"/> Lockout/Tagout |
| <input type="checkbox"/> Accident Investigation | <input type="checkbox"/> Welding |
| <input type="checkbox"/> Job Safety Analysis | <input type="checkbox"/> Fire Protection |
| <input type="checkbox"/> First Aid Training | <input type="checkbox"/> Industrial Hygiene |
| <input type="checkbox"/> Emergency Procedures | <input type="checkbox"/> Driver Safety |
| <input type="checkbox"/> Violence-Free Workplace | <input type="checkbox"/> Forklift |
| <input type="checkbox"/> Other _____ | |

Comments: _____

C. Teams

Working in teams can improve safety, efficiency and decision making. Therefore, all employees will be assigned a team of coworkers by a supervisor. As a team player, employees are responsible for the following:

1. Look out for the safety of team members. Assist teammates, whenever a threat of injury exists (i.e. lifting heavy or bulky objects), so that they can work more safely..
2. Show empathy for injured teammates and assist supervisors in identifying modified-duty assignments for the injured worker so that he can get back to work quicker.
3. Work with new hires assigned to your team so that they can do their job more efficiently and safely.
4. Work as a team to reach any safety, production, or quality goals set by your team, supervisor, or management.
5. Cooperate in accident investigations & offer corrective actions.
6. Be a team player. Don't break team rules.
7. Cooperate with your elected team leader. Offer suggestions and feedback for the betterment of the team and company.
8. Attend team meetings and training sessions.
9. Conduct peer reviews as requested by the team leader, supervisor, or Safety Director.

Each team should give their team a name and elect a team leader. The leader will attend cross-team reviews, provide team suggestions to supervisors or the Safety Director, assign weeks to team members for peer review responsibilities, and perform other duties as assigned by the supervisors or Safety Director.

D. Inspections

Periodic inspections will be conducted to identify hazardous conditions and unsafe behavior. The Safety Director or Safety Committee will conduct inspections, along with insurance companies and OSHA, and may request employees or supervisors to participate. The inspector should look for unsafe practices and conditions that can cause an accident and take corrective action immediately.

Every month, the following inspection form should be completed and provided to the Safety Director. The Safety Director will review the report, take any corrective action needed, and maintain a file of inspections.

Periodically, supervisors, the Safety Director, Safety Committee, or designated employees will complete inspections on a safety-sensitive or non-routine job to ensure compliance with safety procedures. The Job Safety Analysis (JSA) worksheet will be completed and reviewed by the supervisor and/or Safety Director. Results of the JSA inspections will be charted to determine trends, along with production and quality. Additional training may be provided, as needed.

Self-Inspection Check List (page 1 of 2)

Distribution: Copy to Safety Director Copy to Safety Committee Copy _____
Date: _____ **Inspector:** _____ **Title:** _____

Grade: 1 = Satisfactory, 2 = Needs some attention, 3 = Needs immediate action

<i>Item</i>	<i>Grade</i>	<i>Comments</i>
<u>Housekeeping</u>		
General neatness of work area.		
Adequate and proper storage space for tools & materials		
Adequate sanitary & disposal facilities provided		
Waste material containers emptied regularly		
All spills immediately wiped up		
Storage & equipment rooms neat and orderly		
<u>Fire Prevention</u>		
Fire extinguisher checked & available		
No smoking signs posted & enforced		
Proper storage, use & handling of flammable & combustible materials		
Ventilation adequate		
<u>Tools, Machinery, & Equipment</u>		
Electrical tools properly grounded		
Electrical dangers posted		
Concealed electrical lines located and marked		
Machines guards in place		
Regular inspection & maintenance of tools		
Regular inspection & maintenance of machinery		
Lights, brakes, & warning signals operative		
<u>Cutting & Welding</u>		
Proper goggles, glasses, gloves & clothing worn		
Fire hazards removed & flammable materials protected		
Gas cylinders chained & upright		
Gas lines in good condition		
Gauges and anti-flashback devices operable		
Cylinders stored properly with caps used		
Welding shields used when necessary		
Hot works permit posted and enforced		
<u>Ladders</u>		
Ladders inspected and in good condition		
Properly secured to prevent slipping & falling		
Ladder side rail extends 3 feet above landing area		
Metal ladders not used around electrical hazards		
Step ladders fully open when in use		
Ladders located no more than 25 feet of travel		

Self-Inspection Check List (page 2 of 2)

Grade: 1 = Satisfactory, 2 = Needs some attention, 3 = Needs immediate action

<i>Item</i>	<i>Grade</i>	<i>Comments</i>
Material Handling		
Materials properly stored & stacked		
Stacks on firm footings and not too high		
Passageways provided and not blocked		
Personnel lifting loads proper		
Proper lifting techniques used		
Flammable Gases & Liquids		
All flammable waste disposed of properly		
Proper storage containers/cans used		
Fire hazards checked		
Proper type of fire extinguishers provided		
Instruction on proper use and handling on materials posted		
Personal Protective Equipment		
Proper eye, ear, face, head, and hand protection used		
Respirators & masks used when necessary		
Proper clothing worn		
Other		

Action Taken:

- Repairs/Corrections must be completed by: (date) _____
- Repairs/Corrections mentioned above have been done.

Supervisor _____ Date: _____

Section 4: Accident Management

A. Accident & Near Miss Reporting Procedures

If you have a near-miss situation while working, notify your supervisor immediately. The situation will be investigated and corrective action implemented to prevent future injury. Employees and witnesses must fully cooperate in the investigation.

If you are injured on the job:

- a. Contact your supervisor, or the nearest coworker (who should notify a supervisor) if you are unable to contact your supervisor due to the severity of your injury.
- b. The designated employee who is trained in first-aid and/or CPR should be immediately notified to assist in the situation.
- c. First aid kits, which are prominently displayed throughout the workplace, should be made available and medical supplies promptly refilled (by the Safety Director).
- d. If needed, the supervisor or his designee should transport the injured worker to the company's designated medical facility to receive appropriate medical attention. A post-accident drug and/or alcohol test will be conducted in accordance with the company's Drug-Free Workplace Policy.
- e. If rescue personnel are summoned, the supervisor should delegate an individual to wait for the rescue team and escort them to the injured employee.
- f. All witnesses to the accident should be available to speak with the Safety Director and/or supervisor and cooperate in all accident investigations.
- g. The Safety Director should immediately notify the insurance company of the accident and file a workers' compensation claim.

Every accident or near-miss situation should be reported immediately. Injured employees and witnesses to the accident will assist the supervisor in completing an accident investigation. Injured employees must comply with the medical treatment provided by the treating physician, cooperate with the insurance company and its designees, and abide by the company's return-to-work policy.

B. Accident Investigation

When an accident occurs, it is an indication that something has gone wrong. Accidents don't just happen, they are caused. The basic cause(s) of accidents are unsafe acts and/or conditions. The supervisor must investigate every accident to determine the cause and to initiate corrective action to assure that similar type accidents will not recur from the same causes.

Supervisors should complete the following accident investigation form and submit a copy to the Safety Director and Safety Committee for review. The Committee and/or Safety Director should evaluate the corrective action taken or suggested by the supervisor and instruct if additional changes should be made.

Tips on accident investigations:

1. Every accident is caused. Carelessness is not a cause, but the result of some deficiency. Telling employees to be more careful will not eliminate the real accident cause.
2. An accident investigation is not a trial to find fault or to place blame. Its purpose is to find accident causes so that corrective measures may be taken to prevent future accidents.
3. Most accidents result from a combination of human error (unsafe behavior) and a physical hazard (unsafe condition). Do not overlook the possibility of multiple errors and hazards.
4. Don't stop at the obvious answer. For instance, a missing machine guard does not cause an accident. The accident happened because the operator entered the point of operation. Determine why the operator did this and why the guard was off the machine. Only by correcting both problems can you prevent future accidents.
5. The accident investigation should be conducted as soon after the accident as possible. Facts should be gathered while the accident is fresh in the minds of those involved. If possible, question every employee who was involved, or witnessed, the incident. Delay interviewing injured employees until after medical treatment has been received.
6. Other employees who did not witness the accident but work in the area may contribute information regarding the injured workers' activities prior to the accident and conditions at the time of the accident.
7. The accuracy and completeness of the information received from the injured worker(s) and witnesses depends on how well the interview is conducted. Supervisors should:
 - a. Put employees at ease.
 - b. Ask what happened and how it happened.
 - c. Permit employees to answer without interruptions.
 - d. Show concern.
 - e. Remember, nothing is gained with criticism or ridicule.
 - f. Ask why questions only to clarify the story.
 - g. Repeat the story as you understand it.
 - h. Give the employee the chance to correct any misunderstandings that you have.
 - i. Photographs of the conditions as they exist immediately following the accident, including photos of the damaged equipment, are very helpful.
 - j. Damaged equipment should be removed or secured for future testing and used as evidence.
 - k. Take immediate action to correct any obvious unsafe conditions. Determine the basic accident causes and correct or recommend action to prevent recurrence.

Supplemental Information for completing the Accident Investigation Report

Note: Each accident will involve at least one of the following conditions as a contributing factor.

<i>Environmental Factors (Unsafe Conditions)</i>		
Conditions	Definition of Condition	Suggested Corrective Action
Unsafe procedures	Hazardous Process. Management failed to make adequate plans for safety.	A. JSA (Job Safety Analysis) B. Formulation of Safe Procedures
Improperly guarded	Work areas, machines, or equipment that are unguarded or inadequately guarded.	A. Inspection B. Checking plans, blueprints, purchase orders, contracts, & materials for safety C. Include guards in original design, order, & contract D. Provide guards for existing hazards
Defective through use	Buildings, machines, or equipment that have become rough, slippery, sharp edged, worn, cracked, broken, or otherwise defective through use or abuse.	A. Inspection B. Proper Maintenance
Defective through design	Failure to provide for safety in the design, construction, and installation of buildings, machinery, & equipment. Too large, too small, not strong enough.	A. Source of supply must be reliable B. Checking plans, blueprints, purchase orders, contracts, & materials for safety C. Correction of defects
Unsafe clothing or personal protective equipment	Management's failure to provide or specify the use of goggles, respirators, safety shoes, hard hats, & other articles of safe dress or apparel.	A. Provide safe apparel or personal protective equipment. B. Specify the use or non-use of certain apparel or protective equipment on certain jobs.
Unsafe housekeeping facilities	Unsuitable layout or lack of equipment necessary for good housekeeping (i.e. shelves, boxes, bins, aisle markers, etc.)	A. Provide suitable layout and equipment necessary for good housekeeping.
Improper ventilation	Poorly or not ventilated area	A. Improve ventilation
Improper illumination	Poorly or not illuminated area	A. Improve illumination

<i>Behavioral Factors (Unsafe Acts)</i>		
Factor	Definition of Factor	Suggested Corrective Action
Lack of knowledge or skill	Unaware of safe practice; Unpracticed or unskilled. Not properly instructed or trained.	A. Job training B. Improved hiring practices
Improper attitude	Worker was properly trained and instructed, but failed to follow instructions.	A. Supervision B. Discipline C. Improved hiring practices
Physical Deficiencies	Worker has impaired eyesight or hearing, heart trouble, hernia, previous injuries, etc.	A. Pre-employment physicals B. Periodic physicals C. Proper placement of workers D. Identification of workers with temporary physical deficiencies
Substance Abuse	Worker was under the influence of (illegal or prescribed) drugs or alcohol while completing task	A. Drug-Free Workplace Policy with drug/alcohol testing B. Discipline C. Rehabilitation

C. Return-to-Work Policy

It is the Company's policy to return injured workers to productive work, although not necessarily to their pre-injury duties, as early as possible during their recovery. This type of work is often referred to as "modified-duty work." The Company has adopted this policy because employees who remain off work for long periods of time not only affect the Company's productivity and workers' compensation costs, they often experience slow healing and a loss of self-esteem. Within the requirements of their treating medical providers, the limitations of the law, and the economic and physical limitations of our own properties, the Company will make every effort to provide meaningful work wherever and whenever possible. Any recovering employee who is offered a physician-approved, modified-duty position will be required to accept the offer.

As part of the supervisor's responsibilities, and in conjunction with the Safety Director and/or Safety Committee, a Job Safety Analysis (JSA) will be completed for all safety-sensitive and non-routine tasks. A copy of the completed JSA on the employee's regular duties should be provided to the treating physician, along with the following Job Physical Assessment form. The Safety Director or Supervisor should request the treating medical provider complete this form. The supervisor should identify a modified-duty position to offer the employee that is within their physician's restrictions.

Job Physical Assessment

Company Name: _____

Injured Worker: _____

Claim Number: _____

Supervisor: _____

Phone: _____

Modified Duty Job Available: _____

The Job Physical Assessment is an objective evaluation, completed by the treating physician. Please consider category below and objectively circle the appropriate measurement for the activity by our injured employee. Company will then locate a modified-duty position that is within the restrictions detailed below. A copy of the required to completed this modified-duty position will be provided back to the physician.

Action	Total Hours									
Sitting:	0	1	2	3	4	5	6	7	8	
Standing:	0	1	2	3	4	5	6	7	8	
Walking:	0	1	2	3	4	5	6	7	8	

Consecutive Hours									
0	1	2	3	4	5	6	7	8	
0	1	2	3	4	5	6	7	8	
0	1	2	3	4	5	6	7	8	

Action	Repetitions					Time Limit
Bending:	0	1-15	16-30	31-60	61+	
Twisting:	0	1-15	16-30	31-60	61+	
Squatting:	0	1-15	16-30	31-60	61+	
Climbing:	0	1-15	16-30	31-60	61+	
Crawling:	0	1-15	16-30	31-60	61+	
Reaching:	0	1-15	16-30	31-60	61+	
Pushing:	0	1-15	16-30	31-60	61+	

Action	Weights (lbs)	Repetitions			Time
Lifting:	0	1-15	16-30	31-60	61+
Carrying:	0	1-15	16-30	31-60	61+
Arm/both:	0	1-15	16-30	31-60	61+
Left Arm:	0	1-15	16-30	31-60	61+
Right Arm:	0	1-15	16-30	31-60	61+
Hand/both:	0	1-15	16-30	31-60	61+
Left Hand:	0	1-15	16-30	31-60	61+
Right Hand:	0	1-15	16-30	31-60	61+

Other restrictions: _____

In consideration of the above restrictions, the patient is: (circle one)

Disabled

Released for restricted work

Released for full regular work

Patient will be seen again for re-evaluation on : _____

Remarks: _____

Physician Name

Physician Signature

Date

Section 5: Workers' Compensation

By law our company is required to obtain workers' compensation insurance. The company pays for this insurance. Our insurance premiums are not government funded in any way. Because workers' compensation is a substantial cost of doing business, our goal is to prevent and manage accidents.

A. What benefits are you entitled to?

When an employee is injured during the course of employment, workers' compensation insurance provides payments to the injured worker or the treating physician(s) for medical treatment, disfigurement, death benefits, and indemnity (lost wages) payments. **The scope and amount of these payments are determined by state law.** Attorneys are not needed for you to get what you are entitled to. Attorneys, when hired, typically earn one-third of your benefits. If you report injuries immediately to your supervisor and cooperate with your treating physician and the insurance company, the system will work with you to get you healthy and back to work.

All workers' compensation insurance payments may be denied if: 1) the employee tests positive for drugs or alcohol following the accident, 2) a pre-existing injury or non-work related injury was the cause of the accident, or 3) fraud exists.

Medical treatment: Medical care, services, and supplies as necessary to cure or relieve the effects of an injury sustained on-the-job.

Disfigurement: Additional compensation is paid to an injured worker for permanent disfigurement from a work-related injury (i.e. scars, discoloration, disfigurement, etc.)

Indemnity Payments: Wage replacement while recovering from an industrial injury.

Death Benefits: Weekly payments to the surviving spouse and dependent children of a worker whose work-related injury results in death. Burial and funeral expenses are also paid.

B. Workers' Compensation Fraud

Filing false workers' compensation claims is punishable with a substantial fine and imprisonment. **Any employee who knows of a coworker who is abusing the workers' compensation system or has filed a false workers' compensation claim should call 1-800-241-5689.** You will not be asked to identify your name and the call will not be recorded. This is an anonymous call to our insurance company.

The insurance company has many red flags to identifying workers' compensation fraud and will investigate any accident they suspect may be fraudulent. They can deny or reduce benefits whenever they suspect a fraudulent claim was filed or an employee is abusing the workers' compensation system.

The following is considered workers' compensation fraud or abuse:

1. Faking an accident or injury.
2. Exaggerating the seriousness of an accident or injury.
3. Taking more time off than is really needed to recover.
4. Attempting to collect benefits for an injury that is not job-related.
5. Submitting false or exaggerated medical bills for payment.
6. Working at another, equally demanding job while collecting workers' compensation benefits.
7. Conspiring with, or being persuaded by, another person to do any of the above.

When people abuse workers' compensation benefits, we all pay. Your company is charged higher insurance premiums, which increases our expenses and lowers profitability. The best way to safeguard against fraud is to prevent accidents from happening. If you are aware of fraud, speak up by calling the Fraud Hotline.

Section 6: Fleet Safety Program

Motor Vehicles Rules

All employees who drive a company car or delivery vehicle must abide by the following safety rules:

1. Employees are required to inspect their assigned vehicle (before taking it on the road) to ensure that it is in proper driving condition. The attached inspection form should be used.
2. Any defects in the company vehicle should be reported promptly.
3. Employees are required to obey all state, local, and company traffic regulations.
4. Engines are to be stopped and ignition keys removed when parking, refueling, or leaving the company vehicles.
5. Employees are not permitted to use personal cars or motorcycles for company business, unless specifically authorized by the supervisor.
6. Passengers not employed by the company are not permitted unless authorized by the supervisor.
7. Employees should drive safely. Defensive driving must be practiced by all employees.
8. Seat belts and shoulder harnesses are to be worn at all times.
9. Vehicles must be locked when unattended to avoid criminal misconduct.
10. Vehicles must be parked in legal spaces and must not obstruct traffic.
11. Employees should park their vehicles in well-lighted areas at or near entrances to avoid criminal misconduct.
12. Employees should keep their headlights on at all times when driving a vehicle.
13. A vehicle when loaded with any material extending 4 feet or more beyond its rear shall have a red flag or cloth 12 inches square attached by day, or a red light visible for 300 feet by night, on the extreme end of the load.
14. Articles, tools, equipment, etc. placed in cars or truck cabs are to be hung or stored in such a manner as not to impair vision or in any way interfere with proper operation of the vehicle.
15. When you can not see behind your vehicle (truck), the driver shall walk behind the truck prior to backing.
16. Personal use of vehicles is not permitted without approval of management. Children are prohibited from using company vehicles.
17. Operating a company vehicle while under the influence of alcohol and other drugs is prohibited. Violators are subject to termination of employment.
18. Every accident should be reported to the Safety Director via the attached Vehicle Accident Report Form. The Safety Director should investigate all accidents and review them with the Safety Committee.

Commercial Drivers License (CDL)

Drivers who operate a commercial vehicle, as defined below, are required to obtain a commercial drivers license.

1. A vehicle with a gross vehicle weight rating of 26,001 or greater pounds, or
2. A vehicle designed to transport 15 or more passengers (including the driver) or
3. A vehicle of any size transporting hazardous material in sufficient quantities meeting the hazardous materials transportation regulations posting requirements.

Drivers must meet the following requirements:

1. All commercial drivers must be in good health and pass a DOT physical. The doctor will provide the driver a medical examiner's certificate that must be carried at all times when driving. The certificate must be renewed every 2 years.
2. All commercial drivers must comply with the Company's Drug and Alcohol-Free Workplace Policy and consent to testing as defined by DOT and the Company.
3. Be at least 21 years of age.
4. Speak and read English well enough to do his/her job and respond to official questions.
5. Have a valid driver's license and pass a commercial driver's road test.
6. Take a DOT written exam for drivers.
7. Not be disqualified to drive a commercial motor vehicle.
8. Be able to determine whether the vehicle is safely loaded and know how to block, brace, and tie down cargo.

Motor Vehicles Records (MVR)

1. All prospective and current employees will undergo annual motor vehicle record checks.
2. Violations (gathered from MVRs) are categorized as follows:

TYPE A VIOLATION: Includes, but is not limited to, DWI/DUI/OWI/OUI, refusing a drug/alcohol test, reckless driving, manslaughter, hit & run, eluding a police officer, any felony, drag racing, license suspension, and driving while under license suspension. Any driver with these types of violations is a major concern and could be subject to removal of driving privileges and/or termination of employment.

TYPE B VIOLATION: Includes all vehicle accidents, regardless of fault.

TYPE C VIOLATION: Includes all moving violations not classified as Type A or B (i.e. speeding, improper lane change, failure to lead, running red lights or stop signs, etc.)

TYPE D VIOLATION: Includes all non-moving violations (i.e. parking, vehicle defects, etc.)

3. The following disciplinary action will apply:

Termination of Employment, Refusal to hire, or Reassignment to a non-driving position (if available):

- ≥ 1 Type A violation in preceding 36 months
- ≥ 2 Type B violations in preceding 36 months
- ≥ 3 Type C violations in preceding 36 months
- 1 Type B violation and 2 Type C violations in preceding 36 months

Probation (6 months):

- 1 Type B violation in preceding 36 months
- 2 Type B violations in preceding 36 months
- 1 Type C violation and 2 Type D violations in preceding 36 months
- 3 Type D violations in preceding 36 months

Driver Qualification File

The company will maintain the appropriate qualification files for each regularly employed drivers.

Accident Reporting

Driver Conduct at the Scene of the Accident

1. Take immediate action to prevent further damage or injury.
 - Pull onto the shoulder or side of the road.
 - Activate hazard lights (flashers) and place warning signs promptly.
 - Assist any injured person, but don't move them unless they are in danger of further injury.
2. Call the Police
 - If someone is injured, request medical assistance.
 - If you are nearby a phone, write a note giving the location and seriousness of the accident and give it to a "reliable-appearing" motorist and ask the him/her to contact the police.
3. The vehicle should not be left unattended, except in an extreme emergency.
4. Exchange identifying information with the other driver. **Make no comments about assuming responsibility.**
5. Secure names, addresses, and phone numbers of all witnesses, or the first person on the scene if no one witnessed the accident.
6. Call the company immediately and report the accident to the Safety Director.

Complete the Vehicle Accident Report Form

1. Complete the Vehicle Accident Report Form (a copy can be obtained from the Safety Director) and provide it to the Safety Director. Write legibly. Answer all questions completely or mark "not known." Use additional sheets of paper as needed to provide pertinent information.

Inspection Records & Preventative Maintenance

All drivers must regularly inspect, repair, and maintain their company vehicle. All vehicle parts and accessories must be in a safe and proper working order at all times. The following rules apply:

1. All truck drivers must complete the vehicle inspection report at the end of each day. Drivers of company cars should complete the vehicle inspection report semi-annually. Notify the Safety Director of any unsafe conditions or defective parts immediately.
2. Before the vehicle is driven again, any safety defects must be repaired.
3. A copy of the last vehicle inspection report must be kept in the vehicle for at least 3 months.
4. Quarterly preventative maintenance must be conducted on each vehicle.
5. Maintenance and inspection records must be kept at the company for 1 year or for 6 months after the vehicle leaves the company's ownership.

Vehicle Inspection Report

(Use your safety belt)

Date: _____

Company
Driver Name

Location (city)

ST
Driver Name

Vehicle Number

Driver Signature

Driver Signature

Instructions: Drivers will perform necessary inspections. A (√) indicates satisfactory condition. An (X) indicates unsafe or improper conditions. An (O) indicates condition does not apply. Corrected deficiencies should be circled by management certifier.

INSIDE

- Parking brake (apply)
- Release trailer emergency brakes
- Apply service brake (air loss should not exceed 3 psi/min on single vehicles, 4 psi/min on combinations)

START ENGINE

- Oil Pressure (light or gauge)
- Air Pressure or Vacuum (gauge)
- Low air or vacuum warning device (air pressure below 40 psi check on pressure build-up. Air pressure above 60 psi deplete air until warning device works. Vacuum below 8 inches Hg, check on build-up. Above 8 inches Hg. Deplete vacuum until device works.
- Instrument panel (telltale lights, buzzer, gauges)
- Horn
- Windshield Wiper and Washer
- Heater-defroster
- Mirrors
- Steering wheel (excess play)
- Apply trailer brakes in EMERGENCY
- Turn on all lights including 4-way flasher
- Starts properly

EMERGENCY EQUIPMENT

- Fire extinguishers
- Flags, standards, warning lights
- Spare fuses
- Spare bulbs
- Chains in season
- First-aid kit

FRONT

- Headlights
- Clearance lights
- Identification lights
- Turn signals and 4-way flasher
- Tires and wheels-lugs and serviceability

Start time:

Mileage:

Remarks/Other Defects:

Defects corrected (initial)
 Yes No

Defect correction unnecessary (initial)

SIDE (Left Right)

- | | |
|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> Fuel Tank and Cap |
| <input type="checkbox"/> | <input type="checkbox"/> Sidemarkers lights |
| <input type="checkbox"/> | <input type="checkbox"/> Reflectors |
| <input type="checkbox"/> | <input type="checkbox"/> Tires and wheels-lugs and serviceability |
| <input type="checkbox"/> | <input type="checkbox"/> Cargo tie-downs or doors |

REAR

- Tail lights
- Stop light
- Turn signals and 4-way flasher
- Clearance lights
- Identification lights
- Reflectors
- Tires and wheels, lugs and serviceability
- Rear end protection (bumper)
- Cargo tie-downs/doors

MECHANICAL OPERATION

- Engine knocks, misses, overheats, etc.
- Clutch skips, grabs, other
- Transmission noisy, hard shifting, jumps out of gear, other:
- Axles - noisy, other:
- Steering loose, shimmy, hard, other:
- Air, oil, water, leaks
- Springs broken, other:
- Brakes noisy, pulls soft, other:
- Speedometer, tachometer
- Tachograph, speed control devices

ON COMBINATIONS

- Hoses, connections
- Couplings (fifth wheel, tow bar, safety chains, locking devices)

OTHER

- _____
- _____
- Equipment inspection enroute (yes, no)
- Cargo securing devices (yes, no)

End time:

Mileage:

Certified by:

Date

Preventative Maintenance Report

Date/Time	Company	Location	
Inspected by:		Employee I.D. Number	
Vehicle License		Vehicle Number	
		Satisfactory	Needs Attention
Brakes: Brake adjustment: Left Right Brake hoses Brake drums Brake shoes Parking brake Brake pedal travel			
Steering Steering suspension Change in steering action Steering components			
Tires Wear/Defect Overloading Groove depth 2/32" minimum Wheels Cracks Loose Nuts Rims			
Windows Windows & Windshields Wipes & Washers			
Lights Head lights Tail lights Turn signals Reflectors			
Mirrors			
Horn			
Instruments/Gauges			
Seat belts			
Battery			
Radiator & Hoses			
Exhaust system			
Suspension			
Fuel system			
Oil/Water leaks			
Oil level			
Water level			
Transmission			
Engine performance			
General condition of body & interior			
Comments:			

Section 7: OSHA (Occupational Safety & Health Administration)

A. OSHA (Records) Requirements

Copies of required accident investigations and certification of employee safety training shall be maintained by the Safety Director. A written report will be maintained on each accident, injury or on-the-job illness requiring medical treatment.

A record of each such injury or illness is recorded on OSHA Log of Work-Related Injuries and Illnesses, Form 300 according to its instructions (revised 1-1-2004). Supplemental records of each injury are maintained on OSHA Form 301.

Every year, a summary of all reported injuries or illnesses is posted from February 1, to April 30, on OSHA Summary of Work-Related Injuries and Illnesses, Form 300A. These records are maintained for five years from the date of preparation. Reference: www.osha.gov

B. OSHA Checklist

To avoid safety violations and remain in compliance with OSHA standards, the Safety Director should complete the following OSHA checklist on a monthly basis. Deficiencies should be immediately corrected. If problems persist, the Safety Director should contact our Loss Prevention consultant at our workers' compensation carrier to conduct a comprehensive OSHA inspection.

OSHA Inspection Check List (Short Version)

Distribution: Copy to Insurance Carrier Copy to Safety Committee Copy _____

Inspector: _____ **Title:** _____ **Date:** _____

Grade: 1 = Satisfactory, 2 = Needs some attention, 3 = Needs immediate action

<i>Item</i>	<i>Grade</i>	<i>Comments</i>
Housekeeping		
General neatness of work area, lunchrooms, restrooms. Housekeeping maintained		
Aisles are properly marked, clear & in good condition Aisle widths maintained		
Mats, gratings, etc. used when drainage is needed Floor openings & holes marked and protected		
Fire Prevention		
Fire extinguisher available & functional, where required No smoking signs posted & enforced		
Ventilation adequate Exposures from dust, fumes, vapors, etc. controlled		
Flammable Gases & Liquids, Batteries		
Proper storage, use & handling of flammable & combustible materials in approved cans and/or cabinets Proper handling of compressed gases & materials		
Storage drums for flammable liquids properly grounded & bonded Batteries are charged in a properly vented room		
No open flames exist in the battery charging room Fuel tanks are always filled when the equipment engine is off		
Tools, Machinery & Equipment		
Electrical & portable tools and outlets properly grounded Covers in place on all electrical fuse & outlet boxes		
Approved machines guards in place at points of operation & over foot treadles Only authorized tools are used to place & remove materials from machinery		
Proper guarding of gears, pulleys, conveyors, chains, etc. Machines firmly anchored to prevent moving		
Weight of load does not exceed equipment (i.e. scaffolding) rating to handle it Mobile equipment equipped with a horn, capacity sign & overhead guard		

OSHA Inspection Check List (Page 2)

Grade: 1 = Satisfactory, 2 = Needs some attention, 3 = Needs immediate action

<i>Item</i>	<i>Grade</i>	<i>Comments</i>
<u>Ladders</u>		
Ladders inspected, in good condition, and free from sharp edges & splinters		
Ladders have proper safety feet		
Cages & wells used as required (on fixed ladders only)		
Step ladders do not exceed 20 feet in length		
<u>Stairs & Exits</u>		
Stair handrails are 30-34 inches above surface		
A handrail is in place on every stairway with at least 4 risers (steps)		
Risers conform to proper height and are uniform		
Standard railings are in place on open sides of exposed stairs		
Building exits are marked & adequate		
Exits are not blocked		
Lighting on exit signs conform to government standards (5 foot candles)		
<u>General Work Environment & Personal Protective Equipment</u>		
Noise levels conform to government standards		
Compressed air for cleaning under 30 PSI		
Separate lunch rooms provided when toxic materials are present		
Number of restroom facilities available conforms to federal standards		
Separate restroom facilities provided for men & women		
Personnel trained in first aid & first aid kits are available		
Personal protective equipment provided & used		
Proper respirators & masks used when necessary		
<u>OSHA Postings & Records</u>		
Accidents recorded on OSHA forms 200 & 101		
OSHA poster is properly displayed		
Capacity signs posted through-out the building		

C. OSHA Inspection: What you can expect during an OSHA inspection

1. Arrival of the Compliance Officer (OSHA Inspector)

- a. Request to see credentials.
- b. Record his name, identification number, the name of his/her supervisor, and office location.
- c. Notify the Safety Director. If the Safety Director is not available, ask the Officer to wait until the Safety Director arrives. If he/she cannot wait or the Safety Director will not be available, a Safety Committee member should accompany the Officer.
- d. Do not volunteer any information, only answer questions.

2. Opening Conference

- a. The scope of the inspection will be discussed.
- b. The Officer will explain the reason for the inspection (i.e. employee complaint, scheduled inspection, etc.)
- c. If the reason for the inspection is an employee complaint, request a copy of the complaint.
- d. Take comprehensive notes and request to record the meeting and walk-around.

3. The Walk-Around (inspection)

- a. The Company representative should accompany the Compliance Officer throughout the inspection.
- b. The Officer may ask to interview employees. Employees should cooperate. The Company representative should attempt to participate in the interview.
- c. The Company representative should be prepared to show the Officer: 1) the Safety Manual, 2) Hazard Communication Program, 3) OSHA poster, 4) OSHA 200 Log
- d. If at all possible, correct any violations immediately that the Officer points out.
- e. Take photographs of the same items or areas that are photographed by the Compliance Officer.
- f. Take notes. Write down every possible violation, standards cited, corrective action needed, and a deadline date.

4. Closing Conference

- a. The Compliance Officer will review any violations discovered during the inspection. Compare these to the notes you took during the inspection. Point out any discrepancies and areas already corrected.
- b. Be polite. Do not argue or get defensive with the Compliance Officer.
- c. If you are not clear on something, ask questions.
- d. This is a good opportunity to produce records of compliance efforts and other safety practices.

5. Citations & Penalties

- a. Our goal is to provide a safe and healthy work environment. If the company is cited for OSHA violations, corrective action will be completed before the deadline provided by OSHA and as quickly as possible. It will be management's decision to appeal any citations.

Section 8: Special Emphasis Programs

A. Drug-Free Workplace Policy

Purpose

Company Name ("Company") values its employees and recognizes their need for a safe and healthy work environment. Furthermore, employees abusing drugs and alcohol are less productive and are often a risk to the safety, security and productivity of our Company. The establishment of a Substance-Abuse Policy is consistent with the Company's desired culture and is in the best interest of the Company.

Policy

It is the policy of The Company to maintain a workplace free from the use and abuse of drugs and alcohol. Compliance with this policy is a condition of continued employment. It supersedes any other Company policy or practice on this subject. At any time, The Company may unilaterally, at its discretion, amend, supplement, modify, or change any part of this policy. The policy does not represent an expressed or implied contract, and it does not affect your status as an at-will employee. If you have any questions about this policy, please direct them to (designated person).

To maintain a Drug and Alcohol-Free Workplace, The Company has established the following policy effective (DATE) with regard to the use, possession, and sale of drugs and alcohol. Drug and alcohol testing practices will be adopted to identify employees or applicants using drugs and/or alcohol.

Drug and Alcohol Prohibitions

"Illegal Drug" means: any drug (1) which is not legally obtainable, or (2) which is legally obtainable but has not been legally obtained, or (3) which is a controlled substance. The term includes prescribed drugs not legally obtained and prescribed drugs not being used for prescribed purposes.

1. Any employee involved in any of the following activities at any time during the hours between the beginning and end of the employee's work day, whether or not on Company business, premises or property, is in violation of Company policy and subject to disciplinary action:
 - a) bringing illegal drugs onto Company premises or property, including Company owned or leased vehicles, or customer premises;
 - b) having possession of or being under the influence of illegal drugs; or
 - c) using, consuming, transforming, distributing or attempting to distribute, manufacturing or dispensing illegal drugs.
2. In addition, the Company strictly prohibits the abuse of alcohol or prescription drugs.
3. Any employee refusing to cooperate with or submit to questioning, medical or physical tests or examinations, when requested or conducted by the Company or its designee, is in violation of Company policy and subject to disciplinary action.

Drug and Alcohol Testing

The Company asserts its legal right and prerogative to test any employee for drug and/or alcohol abuse. Employees may be asked to submit to a medical examination and/or submit to urine, saliva, breath, and/or hair testing for drugs or alcohol. Any information obtained through such examinations may be retained by the Company and is the property of the Company.

In particular, the Company reserves the right, in its discretion and within the limits of federal and state laws, to examine and test for the presence of drugs and alcohol (as stated above) in situations such as, but not limited to, the following:

1. **Post Job Offer:** All offers of employment will be made subject to the results of a drug test. Applicants will be required to voluntarily submit to a urinalysis test and sign a consent agreement which will release the Company from liability. The Company will not discriminate against applicants for employment because of past drug abuse. It is the current abuse of drugs which prevents employees from properly performing their jobs.
2. **Post-Accident:** An incident occurring while on Company business that results in injury (requiring medical treatment) to an employee or others and/or damage to Company property will require a drug and/or alcohol test. Failure to report any accident which meets the post-accident testing criteria is in violation of Company policy and subject to disciplinary action. Employees testing positive, under certain state laws, may be ineligible for workers' compensation benefits.
3. **Random:** For the added safety and health of the Company employees, as well as the direct impact on the Company's profitability, image and reputation as a drug-free organization, all employees are subject to random, unannounced drug tests at any time the Company deems necessary to ensure a Drug-Free Workplace.
4. **Reasonable Suspicion:** Current employees may be asked to submit to a drug and/or alcohol test if cause exists to indicate that their health or ability to perform work may be impaired. Although reasonable suspicion testing does not require certainty, mere "hunches" are not sufficient to meet this standard. Therefore, a reasonable suspicion test will only be conducted after careful consideration.
5. **Return-to-Duty:** Any employee who has been removed voluntarily or otherwise from his or her job assignment due to drug or alcohol abuse must agree to be tested on a random and discretionary basis anytime for up to 24 months from the return to work date.

Employee Assistance

A fundamental purpose of the Company's Substance-Abuse Prevention Program is to assist employees and family members who suffer from drug or alcohol abuse. If you need confidential help with a drug or alcohol problem, contact (Drug Program Coordinator). If eligible, you will be granted a medical leave of absence for rehabilitation. If you are enrolled in the Company Medical Plan, your health care benefits may pay a portion of your rehabilitation costs. Any additional costs are the employee's responsibility.

It is the employee's responsibility to seek assistance before drug or alcohol abuse leads to disciplinary action. The employee's decision to seek prior assistance from the EAP will not be used as the basis for disciplinary action. Contacting (the Drug Program Coordinator) will not be a defense to avoid disciplinary action where the facts proving a violation of this policy or giving rise to other disciplinary action are obtained outside of this consultation.

Disciplinary Actions

The Company reserves the right to use disciplinary actions, up to and including termination of employment, depending upon the seriousness of the violation, the employee's present job assignment, the employee's record with the Company, and other factors, including the impact of the violation upon the conduct of Company business.

Consent. As a condition of continued employment, employees must sign the attached consent form.

Drug-Free Workplace Program: Consent Form

I hereby acknowledge receipt of the Company's Substance-Abuse Policy regarding drugs and alcohol.

My signature acknowledges my understanding and concurrence with the procedures outlined in the above referenced policy. It is my consent to submit to medical testing, including but not limited to giving urine, breath, blood, and/or saliva sample(s) to be used for drug and alcohol analysis under the conditions outlined in the policy.

In connection with and consistent with the provisions of the Substance-Abuse Policy:

(1) I authorize the release of any urine, breath, blood, and/or saliva sample(s) and the results of any tests and examinations performed thereon to the Company and any doctor, medical personnel, hospital, medical center, clinic, etc., or any representatives with whom they may choose to consult regarding the sample tests or examination results. I will be given an opportunity to explain a positive test result to the Medical Review Officer before the test result is reported to the Company as a verified positive test result.

(2) I understand that the test results may be released by the Company to applicable state unemployment agencies and to the Company's workers' compensation insurer(s), where permitted or required by law. I understand that if I test positive for drugs or alcohol following an on-the-job accident I may be ineligible for workers' compensation benefits.

(3) I understand that refusal to submit to any test required by this policy, a positive test result, or refusal to authorize the release of the results is grounds for disciplinary action up to and including termination of employment.

I recognize that the Company's policy on drugs and alcohol does not constitute an expressed or implied contract of employment.

EMPLOYEE NAME _____ SOCIAL SECURITY NO. _____
(Printed)

EMPLOYEE SIGNATURE _____ DATE _____

WITNESS SIGNATURE _____ DATE _____

B. Lock-Out/Tag-Out

Purpose

To establish a procedure to protect and prevent personnel from injury by 1) accidental activation of any powered or damaged equipment, and 2) the uncontrolled release of electrical energy. A secondary purpose is to remain in compliance with OSHA regulations, 29 CFR 1910.147.

Responsibility

The Safety Director is responsible for compliance. The Safety Director shall train supervisors on proper lockout/tagout procedures, audit and/or oversee the application of the procedures, ensure corrective actions are taken when problems arise, and conduct an annual inspection/evaluation. Supervisors are responsible for training effected and authorized employees on the purpose and use of these procedures. The Safety Director should periodically monitor training activities and assist as required to ensure compliance with OSHA regulations and company goals. All effected and authorized employees involved in lockout/tagout procedures must receive annual training. A list of authorized, trained individuals will be maintained by the Safety Director (see the attached log).

Scope

This procedure applies to all Company personnel and contract employees. It will be enforced during installation, cleaning, servicing, maintenance, or inspection work is performed on any powered equipment and/or processes in which the activation of such could injure an employee or cause property damage. This procedure does not apply to adjustment or other activities which require the equipment be operating at the time of service, provided other protective measures are employed.

Definitions

Lockout:

The application of a lock, chains, or other appropriate apparatus, and a danger identification tag to de-energize electrical equipment and/or process system to ensure that the equipment or system can not be activated. Note: OSHA regulations require that locks be used to secure equipment whenever possible. Chains can be wrapped around valve handles and then locked in such a way that the valve cannot be operated. Tags alone can be used when it is not possible to use a lock.

Tagout:

The application of a danger identification tag when a physical lockout or de-energizing is not feasible or a lock has already been applied. Tags should bear the name of the employee applying the tag, the date of application, and a brief description of the work needed.

Energy Source:

The switch or valve through which energy is controlled to the unit (e.g. motor control center (disconnect) switches, (circuit) breaker panel switches, valves, locking pins, etc.). This energy may come be: 1) electric power, 2) mechanical power, 3) hydraulic power, 4) pneumatic energy, 5) chemical system, or 6) thermal energy.

Authorized Employees:

A person who locks out or tags out machines or equipment in order to perform servicing or maintenance on that machine or equipment.

Effected Employees:

An employee whose job requires him/her to operate or use a machine or equipment on which servicing or maintenance is being performed under lockout or tagout, or whose job requires him/her to work in an area in which such servicing or maintenance is being performed. An effected employee becomes an authorized employee when the effected employees' duties include servicing or maintenance.

Lockout/Tagout Procedures

1. Each piece of equipment or system must be evaluated to identify all energy sources to be locked or tagged out. The evaluation should be done periodically by a supervisor or an authorized employee with familiarity with the equipment/system, using the attached energy source determination checklist.
2. If the machine is determined by OSHA that formal lockout/tagout procedures are required, this should be done by an authorized employee and logged on the attached form titled "List of Lockout & Tagout Procedures." These procedures should then be followed. If no specific procedures are required, or provided by the equipment manufacturer, complete the following tasks.
3. Deactivate (turn off) and secure the equipment/system at the energy source. Relieve pressure, release stored energy from all systems, and restrain or block them. (Operators must tag the appropriate switches or controls inside the control room as part of this step).
4. Attach a lock to each isolation device and a tag to the lock. Sign and date the tag, along with providing pertinent information.
5. Check to ensure that no personnel are exposed to the equipment/system, then attempt to activate the normal operating controls to ensure proper lockout/tagout. (A voltmeter can check the switch)
CAUTION: Always return the operating control to the "neutral" or "off" position after completing this test.
6. The equipment/system is now locked and tagged out.

Lockout/Tagout Removal Procedures

1. After installation, servicing, maintenance, inspection, or cleaning is complete, verify that all tools have been removed, all guards have been reinstalled, the area is clean and orderly, and the equipment is safe to operate.
2. Ensure that employees are not exposed to the equipment and all employees are aware of the removal of the lock and tag.
3. The locks and tags should be removed only by the employee who applied them, the supervisor or the Safety Director. The supervisor or Safety Director should only remove the locks and tags after a reasonable effort is made to contact the employee and notify him of the removal. The tags should be signed and dated and submitted to the Safety Director.
4. Activate energy source as required.

Procedures involving more than one person

If more than one individual is required to lockout or tagout equipment, each shall use his/her own assigned lockout/tagout device on the energy source. When the energy source cannot accept multiple locks or tags, a multiple lockout/tagout device (hasp) should be used. A single key should be used to lockout the equipment/system, with the key being placed in a lockout box or cabinet. This cabinet or lockout box must allow multiple locks to secure it. Each employee will then use his/her own lock to secure the box or cabinet. As each person no longer needs to maintain the lockout protection, that person will remove his/her lock from the cabinet. Proper removal procedures should be followed.

Lockout/Tagout Annual Inspection/Evaluation Report

Date of Evaluation: _____

Evaluation was made by: _____

Policy has been reviewed: Yes No

Comments on policy: _____

The following procedures have been reviewed: _____

The following procedures were modified: _____

The following procedures were added: _____

A review of the OSHA log 200, associated accident reports, and OSHA Form 101 were conducted? : Yes No

The following injuries resulted from lockout/tagout:

Injury	Procedure Number for Applicable Equipment	Process or Machinery
--------	---	----------------------

Comments:

Signature

Date

Lockout/Tagout Procedure Checklist

Energy Source Determination

Date: _____ Company Name: _____

Instructions: In order to determine all energy sources for each piece of equipment, all questions must be answered. If the question does not apply, write N/A.

Location: _____ Work Center: _____

Equipment Name: _____ Equipment #: _____

Serial: _____ Lockout/Tagout Procedure #: _____

1. Does this equipment have:

a. **Electric power** (including battery)? Yes No N/A

If yes, Motor Control Center (MCC) or power panel & breaker number: _____

Does it have a lockout device? Yes No N/A

Battery location: _____

Battery disconnect location: _____

b. **Mechanical power?** Yes No N/A

Mark each type of energy source that applies:

1. Engine driven Yes No N/A

If yes, switch or key location: _____

Is lockout device installed? Yes No N/A

If no, method of preventing operation: _____

2. Spring loaded? Yes No N/A

If yes, is there a method of preventing spring activation? Yes No

If no, how can spring tension be safely released or secured? _____

3. Counter weight(s)? Yes No N/A

If yes, is there a method of preventing movement? Yes No

If yes, can it be locked? Yes No

If no, how can it be safely secured? _____

4. Flywheel? Yes No N/A

If yes, is there a method of preventing movement? Yes No

If yes, can it be locked? Yes No

If no, how can it be safely secured? _____

Lockout/Tagout Procedure Checklist (page 2)

1. Does this equipment have (continued):

c. **Hydraulic Power?** Yes No N/A

If yes, location of main control/shut-off valve: _____

Can control/shut-off valve be locked in the "OFF" position? Yes No

If no, location of closest manual shut-off valve: _____

Does manual shut-off valve have a lockout device? Yes No

If no, what is needed to lock valve closed? _____

Is there a bleed or drain valve to reduce pressure to zero? Yes No

If no, what will be required to bleed off pressure? _____

d. **Pneumatic Energy?** Yes No N/A

If yes, location of main control/shut-off valve: _____

Can control/shut-off valve be locked in the "OFF" position? Yes No

If no, location of closest manual shut-off valve: _____

Does manual shut-off valve have a lockout device? Yes No

If no, what is needed to lock valve closed? _____

Is there a bleed or drain valve to reduce pressure to zero? Yes No

If no, what will be required to bleed off pressure? _____

e. **Chemical System?** Yes No N/A

If yes, location of main control/shut-off valve: _____

Can control/shut-off valve be locked in the "OFF" or closed position? Yes No

If no, location of closest manual shut-off valve: _____

Is there a bleed or drain valve to safely reduce system pressure and drain system of chemicals? Yes No

If no, how can the system be drained and neutralized? _____

What personal protective clothing or equipment is needed for this equipment? _____

f. **Thermal Energy?** Yes No N/A

If yes, location of main control/shut-off valve: _____

Can control/shut-off valve be locked in the "OFF" or closed position? Yes No

If no, location of closest manual shut-off valve: _____

Does manual shut-off valve have a lock valve? Yes No

Is there a bleed or drain valve to safely reduce system pressure & temperature and drain system chemicals? Yes No

If no, how can the system be drained and neutralized? _____

What personal protective clothing or equipment is needed for this equipment? _____

Lockout/Tagout Procedure Checklist (page 3)

Special precautions not noted above (i.e. fire hazards, chemical reactions, required cool down periods, etc.): _____

Recommendations or Comments: _____

Completed by: _____

Reviewed by: _____

Approved by: _____

C. Confined Space Entry

Purpose

To establish a procedure to protect personnel and prevent injury when entering and working in confined spaces. A secondary purpose is to remain in compliance with OSHA regulations, 1910.146.

Responsibility

Safety Director: The Safety Director is responsible for identifying all confined spaces and compliance with the procedures for space entry. The Safety Director shall 1) train supervisors & employees (entrants, attendants, and rescue personnel) annually on identifying existing & potential hazards, confined space procedures, the use of permits, and equipment, 2) audit and/or oversee the confined space entry, and 3) ensure corrective actions are taken when problems arise. The Safety Director should periodically monitor training activities of the supervisors and assist as required to ensure compliance with OSHA regulations and safe confined space entry.

Supervisors are responsible for training employees on the purpose and use of these procedures. (All employees involved in confined space entry must receive annual training.) Supervisors shall verify that all preparations have been completed to allow for safe entry. The supervisor shall sign and post the permit. They will confirm the availability of all rescue service and terminate entry & cancel the permit when the job is completed, there is a change of work crews, or an emergency occurs. The supervisor ensures acceptable entry conditions are maintained during the operation and that all unauthorized entrants are removed.

Entrants: Entrants are the individuals who enter the confined space to work. They must know the hazards associated with the space and properly use all required safety and work equipment. The entrant must communicate with the attendant throughout entry by any effective means. They must immediately exit the space whenever they discover a problem, an emergency occurs, or there are instructed to exit by the attendant, supervisor, or Safety Director.

Attendant: The attendant monitors the space and surrounding areas for any problems that might effect the safety of the entrant. They will remain in continuous contact with entrant. The attendant will not enter the confined space. They will be trained in the confined space procedures and aware of the behavioral effects of exposures on the entrants. They will monitor oxygen, toxics, and flammables/explosive levels every 15 minutes. The attendant will summon emergency assistance when needed and may perform non-entry rescue (if properly trained). The attendant will have rescue equipment and a first-aid kit available. They shall prevent unauthorized personnel from entering the confined space. Attendants may not be assigned any duties which could conflict with their primary responsibility of monitoring entrant safety.

Definitions

Confined Space:

A confined space isn't necessarily a small, crowded area. A confined space has 1) limited or restricted means of entry or exit, 2) unfavorable natural ventilation, 3) not been designed for continuous human occupancy. Examples include: storage tanks, silos, kettles, vault, hopper, pit, trench, boilers, sewers, degreasers, vessels, sumps, diked areas, process tanks & equipment, and pipelines.

Permit Required:

A permit is required if one of the following hazards are present: 1) hazardous atmosphere, 2) potential for engulfment, 3) internal configuration hazard, or 4) other recognized serious safety or health hazards.

Hazards

Conditions in a confined space can change over time; therefore so can the hazards. Hazards include:

- 1) Oxygen-deficient atmosphere. An oxygen content of less than 19.5% is considered hazardous.
- 2) Oxygen-enriched atmosphere. An oxygen content of more than 23.5% is considered hazardous.
- 3) Flammable or combustible atmosphere. A concentration of a chemical in excess of 10% of its lower explosive, flammable, or combustible limit (LEL) is considered hazardous.
- 4) Toxic atmosphere. Any chemical exposure in excess of its permissible exposure limit (PEL) is considered hazardous.
- 5) Engulfment or structural entrapment. Employees can become trapped in liquid or granular material. Inwardly converging walls or floors that taper to a smaller cross-section can trap or asphyxiate an entrant.
- 6) Energy sources. These include electrical, mechanical, hydraulic, or compressed air. Uncontrolled sources are hazardous.
- 7) Other hazards. i.e. Slips & Falls, Radiation, Heat Stress, Internal configuration, Combustible dust, etc.

Procedures

1. Identify and evaluate the hazards in a space before entry. The evaluation should be done by a supervisor, the employee to enter the confined space, and the attendant stationed outside the confined space. The evaluation form following these procedures should be completed prior to entry. If a confined space is identified, the confined space must be appropriately labeled.
2. Determine if a permit is needed. When in doubt, a permit should be completed. Use the permit provided following these procedures when required.
3. The supervisor should inform all employees and contractors of the existence, location of, and danger posed by these spaces. A sign should be posted to indicate that personnel are in the confined space.
4. All equipment in the confined space shall be locked out/tagged out if an accidental energizing of the equipment creates a hazard. If lockout/tagout fails to de-energize the equipment, fuses should be removed from the associated power source.
5. Prior to entry, the confined space should be isolated to preclude entry of all materials. This shall be done by the insertion of a 1/8 inch TFE blank or suitable pressure blank between the flanges nearest the confined space, or the line to the confined space must be disconnected and blanked. All other valves or transfer lines shall be 'closed & tagged' at the valve closest to the confined space, if a connecting vessel contains hazardous chemicals. The Safety Director is responsible for verifying blanking or disconnecting.
6. Prior to entry, the Safety Director must assure that the confined space is clean, ventilated, and decontaminated to the extent consistent with the hazard. The Safety Director must approve any cleaning or ventilating procedures.

7. The confined space shall be thoroughly ventilated. This should be done mechanically by blowing air into the space or by draft fan venting. Ventilation shall continue until work is complete in the confined space.
8. If an assessment (testing) of the atmosphere indicates contamination is present, the cause/source of the contamination must be determined. Furthermore, it must be determined if contamination will increase during entry. Testing should include:
 - a) Oxygen Atmosphere Testing. Testing should be done with a calibrated direct-reading oxygen indicator. The oxygen shall contain 19.5-21% oxygen by volume. Measurements should be taken at the top and bottom of the space. Measurements will be taken every 15 minutes by the attendant. Tests must be repeated after a stoppage exceeding 30 minutes. Results should be documented in the permit. Entry is not permitted if the oxygen level is less than 19.5% or greater than 21.0%
 - b) Toxic Atmosphere Testing. If it is determined that any of the following toxins (Toluene, Solvent, Isopropyl Alcohol, H₂S or any material that is capable of generating H₂S, or any material that has a ceiling PEL (permissible exposure limit) or LEL (lower exposure limit)) were previously contained in the space, testing with color detection tubes (i.e. Drager tubes), chlorine detector, or the biosystems H₂S Detector should be conducted. If atmospheric contamination exceeds 10% of the PEL, the space should be ventilated until the level is below 10%. Safety Director should be contacted if the contamination is immediately dangerous to life of health (IDLH). Entry is not permitted, except for emergency procedures approved by the Safety Director, if toxic gases at an IDLH level exists. Measurements will be taken every 15 minutes by the attendant.
 - c) Flammable Atmosphere Testing. If the space previously contained or may contain flammable vapors, testing with a combustible gas indicator to determine the concentration of flammable gases and vapors must be conducted. If the concentration of flammable gas or vapors exceeds 5% of the lower flammability limit, the space should be ventilated until the concentration is below 5%. Entry is not permitted if the concentration exceeds 5%. Measurements will be taken every 15 minutes by the attendant.
9. Employees shall wear personal protective equipment such as respiratory protection (i.e. SCBA), gloves, boots, rubber suits, goggles, and harnesses as determined by the Safety Director. Respiratory protection must be worn if 1) there are unknown contaminants in the space, 2) the level of contaminants can not be determined, 3) the potential for IDLH exists, 4) an emergency rescue is being performed, or 5) the potential exists to contaminate the atmosphere while in the space.
10. Portable power tools must be inspected and grounded. Cylinders for cutting and welding torches **shall not** be taken into the confined space. Ladders must be secured at the top.
11. All personnel shall conduct additional responsibilities as documented under Responsibilities above.

Rescue Equipment & Procedures

Equipment

The Safety Director will require the following equipment to be on hand prior to confined space entry:

1. Self-contained breathing apparatus or air-line respirator
2. Harness and lifeline
3. Mechanical retrieval equipment
4. Alarm horn
5. Oxygen/Explosive Meter
6. 12" wide confined space or rope ladder
7. Protective Clothing & equipment
8. Chain/Sling
9. Mechanical Ventilation

Rescue Procedures

1. Procedures outlined above are followed. (i.e. Atmospheric tests shall be performed prior to and during entry and documented on the permit, etc.)
2. The attendant is equipped with an alarm horn prior to entry.
3. Any entrant into a vertical exit confined space must wear a parachute type harness. Horizontal exit confined space requires a life line be worn in addition to the harness.
4. Life lines must be attached to a fixed object outside of the confined space.
5. All confined spaces with vertical exits will be equipped with means to attach a lifting winch (i.e. crank with handle, hoist, hauling apparatus with a rope, etc.) for victim rescue (where tripod use is impossible).

Training

Employees who perform tasks covered by the confined space entry policy (e.g. enter into confined spaces, measure atmospheric conditions in confined spaces, or perform rescue in a confined space) will be trained annually on site procedures and the use of permits and equipment.

Confined Space Evaluation Form

Date of Survey	Confined Space #	Permit Required <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, space must be labeled.								
Location of Space										
Description of Space										
Possible atmospheric hazards										
Possible content hazards										
Configuration of space										
Unusual hazards										
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"> 1. Space can be bodily entered? <input type="checkbox"/> Yes <input type="checkbox"/> No </td> <td style="width: 50%; border: none;"> 4. Hazardous atmosphere? <input type="checkbox"/> Yes <input type="checkbox"/> No </td> </tr> <tr> <td style="border: none;"> 2. Limited or restricted entry? <input type="checkbox"/> Yes <input type="checkbox"/> No </td> <td style="border: none;"> 5. Potential for engulfment? <input type="checkbox"/> Yes <input type="checkbox"/> No </td> </tr> <tr> <td style="border: none;"> 3. Not designed for continuous human occupancy? <input type="checkbox"/> Yes <input type="checkbox"/> No </td> <td style="border: none;"> 6. Internal configuration hazard? <input type="checkbox"/> Yes <input type="checkbox"/> No </td> </tr> <tr> <td style="border: none;"></td> <td style="border: none;"> 7. Other serious safety hazards? <input type="checkbox"/> Yes <input type="checkbox"/> No </td> </tr> </table>			1. Space can be bodily entered? <input type="checkbox"/> Yes <input type="checkbox"/> No	4. Hazardous atmosphere? <input type="checkbox"/> Yes <input type="checkbox"/> No	2. Limited or restricted entry? <input type="checkbox"/> Yes <input type="checkbox"/> No	5. Potential for engulfment? <input type="checkbox"/> Yes <input type="checkbox"/> No	3. Not designed for continuous human occupancy? <input type="checkbox"/> Yes <input type="checkbox"/> No	6. Internal configuration hazard? <input type="checkbox"/> Yes <input type="checkbox"/> No		7. Other serious safety hazards? <input type="checkbox"/> Yes <input type="checkbox"/> No
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2. Limited or restricted entry? <input type="checkbox"/> Yes <input type="checkbox"/> No	5. Potential for engulfment? <input type="checkbox"/> Yes <input type="checkbox"/> No									
3. Not designed for continuous human occupancy? <input type="checkbox"/> Yes <input type="checkbox"/> No	6. Internal configuration hazard? <input type="checkbox"/> Yes <input type="checkbox"/> No									
	7. Other serious safety hazards? <input type="checkbox"/> Yes <input type="checkbox"/> No									
Reasons for entering space & typical activities										
Who usually enters space										
Frequency of entry										
Number of entry points										
External connections to space										
Survey completed by: (print & sign)										

Confined Space Entry Permit

Confined Space #	Permit Expires	Date/Time Began	Date/Time Finished
Hot Works Permit #			
Location		Job Description	
Entrants		Attendants	
Supervisor		Safety Approval by:	
Atmospheric Testing & Monitoring			
	Limits	Time/Results	Time/Results
Oxygen (19.5% - 23.5%)			
Flammables (< 10%)			
Explosive Gases (< LEL)			
Chemicals (list) (< PEL)			
Instrument:		Calibration:	
Hazards in Space			
Contents: <input type="checkbox"/> Flammable <input type="checkbox"/> Irritant <input type="checkbox"/> Corrosive <input type="checkbox"/> Toxic <input type="checkbox"/> Dust <input type="checkbox"/> Asbestos <input type="checkbox"/> Solid <input type="checkbox"/> Liquid <input type="checkbox"/> Gas	Configuration: <input type="checkbox"/> Slippery or <input type="checkbox"/> sharp surfaces <input type="checkbox"/> vertical drop <input type="checkbox"/> low overhead <input type="checkbox"/> High or <input type="checkbox"/> Low temperature <input type="checkbox"/> Sloped	Nature of Work: <input type="checkbox"/> Welding <input type="checkbox"/> Cutting <input type="checkbox"/> Grinding <input type="checkbox"/> Chipping <input type="checkbox"/> Scraping <input type="checkbox"/> Spray cleaning	Previous Content: Other:
Isolation of Space			
Electrical: <input type="checkbox"/> Lockout <input type="checkbox"/> Tagout	Mechanical: <input type="checkbox"/> Block linkage <input type="checkbox"/> Disconnect	Piping: <input type="checkbox"/> Lockout <input type="checkbox"/> Tagout <input type="checkbox"/> Blank <input type="checkbox"/> Block & Bleed	Other:
Hydraulic: <input type="checkbox"/> Lockout <input type="checkbox"/> Tagout <input type="checkbox"/> Disconnect Lines <input type="checkbox"/> Lock Pump & Bleed		Pneumatic: <input type="checkbox"/> Lockout <input type="checkbox"/> Tagout <input type="checkbox"/> Disconnect Lines <input type="checkbox"/> Lock Comp & Bleed	
Equipment Required			
Respiratory Protection <input type="checkbox"/> SCBA <input type="checkbox"/> Sup. Air. <input type="checkbox"/> ABA <input type="checkbox"/> Pow. Air Cartridge resp: <input type="checkbox"/> Full <input type="checkbox"/> Half		Cartridge <input type="checkbox"/> Organic vapor <input type="checkbox"/> Acid Gas <input type="checkbox"/> Ammonia <input type="checkbox"/> Organic vapor/acid gas <input type="checkbox"/> HEPA <input type="checkbox"/> Dust/Mist	
PPE <input type="checkbox"/> Coveralls <input type="checkbox"/> Hard-hat <input type="checkbox"/> Safety goggles <input type="checkbox"/> Safety shoes <input type="checkbox"/> Leather gloves <input type="checkbox"/> Ear plugs/muffs <input type="checkbox"/> Welding hood <input type="checkbox"/> Welding jacket <input type="checkbox"/> Splash suit <input type="checkbox"/> Chemical gloves <input type="checkbox"/> Faceshield			
Lighting <input type="checkbox"/> Flashlight <input type="checkbox"/> Handlight <input type="checkbox"/> Light sticks <input type="checkbox"/> Cord lights <input type="checkbox"/> Cords <input type="checkbox"/> Portable lights <input type="checkbox"/> Generator			
Ventilation <input type="checkbox"/> Ventilator <input type="checkbox"/> 10' sections of duct <input type="checkbox"/> 20' sections of duct <input type="checkbox"/> Saddlevent <input type="checkbox"/> CFM Required			
For Entry <input type="checkbox"/> Body Harness <input type="checkbox"/> Retrieval device <input type="checkbox"/> Tripod <input type="checkbox"/> Anchor point <input type="checkbox"/> Access ladder <input type="checkbox"/> Emergency Signal <input type="checkbox"/> Communications <input type="checkbox"/> Personal alert device			
For Rescue <input type="checkbox"/> Body Harness <input type="checkbox"/> Retrieval device <input type="checkbox"/> Tripod <input type="checkbox"/> Anchor point <input type="checkbox"/> Access ladder <input type="checkbox"/> Alarm horn <input type="checkbox"/> Emergency signal <input type="checkbox"/> Communications <input type="checkbox"/> Personal alert device <input type="checkbox"/> SCBA <input type="checkbox"/> ABA <input type="checkbox"/> Rescue harness <input type="checkbox"/> Escape mask <input type="checkbox"/> Wristlets			
Other			
Supervisor Signature:			

D. Hot Works Program

Purpose:

To establish a procedure for the control of hazards associated with welding, cutting or the use of spark producing tools for the prevention of fire or subsequent injury to personnel.

Responsibility:

It is the responsibility of all employees/supervisors/managers who will either perform or oversee the operation or employee, to adhere to the requirements of the Hot Works Permit Program. The Safety Director should designate a Hot Works Coordinator. It will be the responsibility of the Coordinator to evaluate all jobs prior to the work beginning to assess hazards and necessary controls required **before** any work will begin.

Scope:

This procedure applies to any hot work performed by any employee or contractor. This procedure does not apply to hot work performed in designated Safe Work areas.

Definitions:

Hot work

Work involving the use of open flame or spark producing tools such as, but not limited to, welding, cutting, burning, grinding, and heat related producing jobs that could ignite combustibles.

Safe Work Areas

These areas which have been designated-designed specifically for cutting, welding, grinding activities. The Hot Work Coordinator is responsible for designating all Safe Work Areas once he is assured of proper protection against combustibles.

Procedures:

1. A Hot Work Permit must be issued prior to initiating any hot work outside of a designated Hot Work Area. This site will be evaluated for potential fire and safety hazards by the Coordinator prior to starting the job. The Coordinator should carefully review activities to determine if a less hazardous mechanical method such as cutting with a hack saw can be used instead of more heat and spark producing methods.
2. Safe work permits are issued by the Safety Director. The permit remains active for the duration of the work shift.
3. Where practical, all flammable and combustible materials shall be relocated at least 35 feet from the work area. Where relocation is impractical, combustibles and flammables shall be protected with flame proof covering or otherwise shielded with metal or flameproof curtains.
4. The person conducting the hot work will have a readily available fire extinguisher rated at a minimum of 2A:40BC.
5. Where potential for flammable or combustible vapors or gases might be present in the area, these concentrations must be determined before work begins. The Hot Works

Coordinator will determine the concentration of the vapors or gases, and this measurement recorded.

6. Hot works **shall not** be permitted if the concentration reaches 5% of the lower explosive limit (LEL). If combustibles gas meter indicates any concentration of flammable vapor, the hot works permit shall not be approved until the person approving the permit:
 - a. Understands the source of the flammable-combustible vapors.
 - b. Can assure that concentration will not increase to a dangerous level while work is underway.
7. When performing hot work overhead, if combustibles could inadvertently be moved into the area, or people enter the area, the area below must be roped off and posted.
8. Where possible, noncombustible barriers should be placed around and under hot works area to confine sparks.
9. A fire watch is a necessary step to implement whenever work is conducted, such as:
 - a. All work in buildings and storage sheds;
 - b. An appreciable amount of combustible material in building construction, contents or insulation is closer than 35 feet to the point of operation;
 - c. An appreciable amount of combustible materials are more than 35 feet away from work but can easily be reached by sparks, embers, etc.;
 - d. Wall or floor openings are within 35 feet of work, including concealed spaces in walls or floors; and/or
 - e. Combustible materials are adjacent to the opposite side of metal partitions, walls, ceilings or roofs and are likely to be ignited by conduction or radiation of heat.
10. Open drains which lead to underground drainage systems, which could contain flammable or combustible vapors, should:
 - a. have testing for the presence of any flammable or combustible vapors done before starting work;
 - b. have drains covered with fire blanket or similar protection to prevent access to sparks even if the atmosphere is safe; and/or
 - c. if determined to contain flammable or combustible vapors, the system must be purged with nitrogen to below 5% lower explosive limit (LEL).
11. In areas immediately hazardous to life, hose masks, hose masks with blowers, or a self-contained breathing apparatus should be used in addition to suitable rescue equipment for confined space entry situations. All breathing equipment should be approved by US Bureau of Mines, NIOSH, or similar approval authority.
12. Employees are required to wear the proper personal protective equipment, such as coveralls, safety goggles, faceshield, welding hood, welding jacket, etc., as demanded by the type of work completed and required by the Hot Work Coordinator and/or Safety Director.

Fire watch:

Having the appropriate extinguishing equipment ready and available and having the individual trained in its use are very important. As a minimum, an extinguisher with a rating of 2A:40BC

should be provided. For those jobs where a significant amount of combustibles are present within the 35-foot area, a hose stream up to 1" should be considered by the Safety Director. The fire watch shall be familiar with all equipment for sounding an alarm in event to a fire, and any additional procedures necessary to summon aid.

They should watch for fires in all exposed areas, and try to extinguish them only when within the capacity of the equipment available. If the fire is of such magnitude that it is beyond the capacity of the fire watch to extinguish, the fire watch should summon aid (911).

The watch should be maintained until after the risk of fire has passed. This period should be at least 30 minutes after the completion of the job.

Contractors:

Contractors are required to follow plant hot works procedures as outlined. The Safety Director is responsible for ensuring that all procedures are followed.

Contractual language between the Company and contractors can also help transfer exposures generated by having contractors work on premises. A hold harmless agreement signed by the contractor in our favor and being named as additional named insured within the contractors insurance policy helps maintain a degree of protection should an incident occur. The contractors policy limits should be at least equal to your total exposure to economic loss from a disastrous fire, at a minimum, this would include the full replacement cost of all your property plus your business interruption costs.

Hot Works Permit

Permit #	Permit Expires	Date/Time Job Began	Date/Time Job Finished
Building		Department	
Employee Completing Job		Supervisor	
Fire Watch Inspector		Hot Works Coordinator	
Location of work to be completed			
Description of work to be completed			
Equipment Required: <input type="checkbox"/> Fire Extinguisher <input type="checkbox"/> Hand hose <input type="checkbox"/> SCBA <input type="checkbox"/> ABA <input type="checkbox"/> Coveralls <input type="checkbox"/> Gas Detection Instrument <input type="checkbox"/> Safety Goggles <input type="checkbox"/> Faceshield <input type="checkbox"/> Welding Hood <input type="checkbox"/> Welding Jacket			
Safety Precautions			
<input type="checkbox"/> Job can be completed in the maintenance shop <input type="checkbox"/> Job can be completed mechanically <input type="checkbox"/> Flame/Spark-producing equipment inspected <input type="checkbox"/> Sprinklers operable & will not be taken out of service <input type="checkbox"/> Work confined to area/equipment specified in permit		<input type="checkbox"/> Floor/Wall openings within 35 feet are tightly covered <input type="checkbox"/> Surrounding floors swept clean & wet down (if needed) <input type="checkbox"/> Personnel protective equipment worn as required <input type="checkbox"/> Fire watch assigned for at least ½ hour after job is completed <input type="checkbox"/> Fire extinguishers recharged after job is completed	
Combustibles			
<input type="checkbox"/> There are no combustible fibers, dusts, vapors, gases, or liquids in the area. <input type="checkbox"/> A combustible gas detection instrument was used to verify the absence of gases or vapors <input type="checkbox"/> Combustibles relocated 35 feet from operation and protected with noncombustible shields or flame-proofed curtains/covers <input type="checkbox"/> Continuous monitoring of surrounding pipes, equipment, and tanks which may leak during			
Signature of Hot Works Coordinator			
Signature of Fire Watch Inspector			

E. Hazard Communications

Purpose:

To ensure that information about the dangers of all hazardous materials used by the Company are known to all affected employees and contractors. A secondary purpose is to comply with the requirements of the OSHA Hazard Communication Standard and corresponding state laws.

Responsibility:

All employees of the company will participate in the hazard communication program and comply with all provisions of this policy. The Safety Director is responsible for maintaining this program and ensuring compliance with all local, state, and federal laws.

Scope:

This policy covers container labeling, material safety data sheets, employee training and information, hazardous non-routine tasks, contractors, list of hazardous chemicals, chemicals in unlabeled pipes and safety procedures.

Policy:

Container Labeling

1. The Safety Director will verify that all containers received for use will be clearly labeled with the following: 1) contents, 2) the appropriate hazard warning (i.e. flammable), and 3) the name and address of the manufacturer. Existing labels will not be removed or defaced on incoming containers unless containers are to be immediately marked with required information.
2. All materials on site are to be stored in their original container with the label attached.
3. Any material with a label missing or illegible should be reported to the supervisor immediately for proper labeling.
4. Stationary, secondary, or portable containers should be clearly labeled with either an extra copy of the original manufacturer's label or with tile "central stores" generic labels which have a block for identification and blocks for the hazard warning.
5. Signs, placards, or other written materials that convey specific hazard information may be used in place of individual container labels if there are a number of stationary process containers within a work area which store similar contents.
6. Portable containers do not need to be labeled if the chemicals are transferred to labeled containers and used by the employee making the transfer during that shift. No unmarked containers of any size shall be left unattended in the work area.

Material Safety Data Sheets (MSDS)

1. Any product having a hazardous warning on its label requires a MSDS.
2. The manufacturer, distributor, or vendor shall provide the MSDS for the hazardous product.

3. All MSDS's shall be forwarded to the Safety Director and reviewed by the Safety Director and employee using the product to determine safe work practices and personal protection, as needed. The MSDS's will be maintained and kept at the following location: _____.
4. The MSDS provides 1) chemical information, 2) hazardous ingredients, 3) physical data, such as the potential for fire, explosion, and reactivity, 4) health hazards, 5) spill or leak procedures, 6) special protection and precautions, 7) personal protective equipment needed, and 8) name, address, and phone of MSDS preparer or distributor

Employee Training and Information

1. The Safety Director will provide training to employees when hired and routinely thereafter on the hazardous nature of chemical products. Training will include:
 - The Hazard Communication Policy
 - Chemicals present in their workplace operations
 - Physical and health effects of the hazardous chemicals
 - Appropriate work practices and controls when using chemicals.
 - Emergency and first-aid procedures
 - How to read labels and review an MSDS to obtain appropriate hazard information
 - Location of the MSDS file and written hazard communications program
2. After attending the training class, each employee will sign a form to verify that they attended the training, received the written materials, and understand the company's policies on Hazard Communication.

Hazardous Non-Routine Tasks

1. Periodically, employees are required to perform hazardous non-routine tasks. Examples of non-routine tasks performed by employees of this company are as follows: Confined space entry, tank cleaning, and painting reactor vessels.
2. Prior to starting work on such projects, each affected employee will be given information by the Safety Director about the hazardous chemical he/she may encounter during such an activity. This information will include specific chemical hazards, protective safety measures the employee can use, and measures the company has taken to lessen the hazards including ventilation, respirators, presence of other employees, and emergency procedures.

Informing Contractors and Others

1. The Safety Director shall advise contractors and other clients of our Hazard Communication Program.
2. Copies of the MSDS's for all materials brought onto the site will be made available upon request to each contractor from the Safety Director.
3. The Safety Director will also obtain chemical information from contractors that may expose our employees to hazardous chemicals which they bring into our workplace.

List of Hazardous Chemicals

Attached is a list of all known hazardous substances presently being used. Listed chemicals are denoted as EX for explosive, HT for highly toxic, C-R for corrosive or irritant, and CAR for proven or suspected carcinogen-mutagen in humans or animals. Further information on each chemical can be found by reviewing the MSDS's.

Chemicals in Unlabeled Pipes

1. Work activities are often performed by employees in areas where chemicals are transferred through unlabeled pipes.
2. Prior to starting work in these areas, the employee shall contact the Safety Director for information regarding:
 - The chemical in the pipes.
 - Potential hazards.
 - Safety precautions which should be taken.

Safety Procedures & Recommendations

Work Habits

- Never work alone in a science laboratory or storage room.
- Never eat, drink, chew gum or tobacco in a science laboratory or storage room. Do not store food or beverages in the lab environment.
- Wash hands before and after work in a science lab, and after spill cleanups
- Restrain loose clothing, long hair, and dangling jewelry.
- Never leave heat sources unattended.
- Do not store reagents and/or apparatus on lab bench, and keep lab shelves organized.
- Never place reactive chemical containers near the edge of a lab bench.
- Use a fume hood when working with volatile substances.
- Never lean on a fume hood.
- Do not use the fume hood as a storage area.
- Obtain and read the MSDS for each chemical before beginning any experiment.
- Analyze new lab procedures in advance to pinpoint hazardous areas.
- Analyze accidents to prevent repeat performances.
- Protection should be provided for not only the lab worker but also the lab partner working nearby.
- Do not mix chemicals in the sink drain.
- Always inform co-workers of plans to carry out hazardous work.
- Record who worked with what, when, and how long in order to allow meaningful retrospective contamination studies.
- Inform lab occupants about the alarm bell and what to do if it sounds.
- Carry out regular fire or emergency drills with critical reviews of the results.
- Have actions pre-planned in case of an emergency, gas shut-off, escape routes, meeting places.
- Lab personnel should have recent training in first aide, CPR etc.

Safety Wear

- ANSI approved eye or face protection should be worn continuously.
- Gloves should be worn which will resist penetration by the chemical being handled and have been checked for pin holes, tears, or rips.
- Wear a lab jacket or apron.
- Footwear should cover feet completely: no open-toes shoes or sandals.

Facilities and Equipment

- Have separate container for trash and broken glass.
- Never block any escape routes, and plan alternate escape routes.
- Never block a fire door open.
- Never store materials in lab or storage aisles.
- All moving belts and pulleys should have safety guards.
- Instruct lab personnel in the proper use of the eye-wash fountain, emphasizing rolling of the eyeballs, and turning eyelids "inside-out."
- Ensure that eye-wash fountains will supply at least 15 minutes of water flow.
- Sample breathing air space for measurement of possible contaminants, and keep good records.
- Regularly inspect fire blankets for rips and holes and keep good records of the inspections. Regularly inspect safety showers and eye-wash fountains and keep records of inspections.
- Keep up-to-date emergency phone numbers posted next to the phone.
- Place fire extinguishers near an escape route, not in a "dead end".
- Regularly maintain fire extinguishers, maintain records, and train personnel in the proper use of extinguishers through actual fire situations.
- Acquaint personnel with the meaning of "Class A fire", "Class B fire", etc., and how they relate to fire extinguisher use.
- Regularly check hood for proper draft also verify that exhaust air from an external hood vent is not re drawn into room air.
- Secure all compressed gas cylinders when in use and transport them secured on a hand truck. install chemical storage shelves with lips, and never use stacked boxes in lieu of shelves.
- Only use an explosion-proof refrigerator for lab storage.
- Have appropriate equipment and materials available for spill control replaced when it becomes dated.

Chemical Storage

- Do not store materials on the floor.
- Separately store Organic and Inorganic chemicals.
- No top or above eye level chemical shelving storage .
- Shelf assemblies are firmly secured to walls, preferred material is wood.
- Store acids, poisons, and flammable liquids in separate dedicated cabinets, suggested shelf storage pattern.

Purchasing, Use, and Disposal

- If possible, purchase chemicals in class-size quantities only. Label all chemicals accurately with date of receipt, or preparation, initialed by the person responsible, and pertinent precautionary information on handling.
- Generally, bottles of chemicals should not remain unused on shelves in the lab for more than one week, in the store room near the lab unused for more than one month, or in the main stockroom unused for more than one year.
- Follow all directions for disposing of residues and unused portions of reagents.
- Properly store flammable liquids in small quantities in containers with a provision for bonding to receiving vessels when the liquid is transferred.
- Never open a reagent package until the label has been read and completely understood. Have a Material Safety Data Sheet on hand before using a chemical.
- Prepare a complete list of chemicals of which you wish to dispose.

- Classify each of the chemicals on the disposal list into a hazardous or non-hazardous waste chemical. (Check with the local environmental agency office for details.)
- Unlabeled bottles (a special problem) must be identified to the extent that they can then be classified as hazardous or non-hazardous wastes. Some landfills will analyze a mystery bottle for a fee, if it is shipped to the landfill in a separate package, labeled as a sample, and accompanied by a letter also identifying it as a sample, with instructions to analyze the contents sufficiently to allow proper disposal.

Substitutions

- Reduce risk by diluting substances instead of using concentrates.
- Use films, videotapes, and other methods rather than experiments involving hazardous substances.
- Undertake all substitutions with extreme caution.

Training Documentation for Hazard Communication Program

I have received training and understand how to read the Materials Safety Data Sheets (MSDS) and container labels regarding hazardous products.

I have received general training on the hazardous chemicals in which I might be exposed.

I understand that I am required to review MSDS's for any material I am using for the first time.

I know where the MSDS's are for my work area are kept and understand that they are available for my review.

I understand that I am required to follow the necessary precautions outlined in the Hazard Communication Policy and MSDS's, including use of personal protective equipment and/or apparel.

I know the location of emergency phone numbers and communications systems, and the location of medical fire, and other emergency supplies.

I am aware of my right to obtain copies of the Hazardous Chemical list, written Hazard Communication Policy, and MSDS's at my request.

Employee Name: _____

Signature: _____ Date: _____

Job Location: _____

List of Hazardous Chemicals

The following is a list of known hazardous chemicals used by our employees. Further information on each chemical can be found by reviewing the MSDS's.

F. Personal Protective Equipment (PPE)

Purpose

To provide guidelines concerning the proper use of Personal Protective Equipment and to comply with OSHA standards outlined in Title 29, Code of Federal Regulations (CFR), parts 1900-1999.

Definition

PPE includes clothing and other accessories designed to create a barrier between the user and workplace hazards. It should be used in conjunction with engineering, work practice and/or administrative controls to provide maximum employee safety and health in the workplace.

Responsibility

The Safety Director is responsible for complying with all OSHA requirements, including maintenance of all equipment. The Safety Director is also responsible for training both current and new employees on the proper usage of such equipment, or designating the appropriate supervisors to conduct training. The Safety Director, or his/her delegate, must also perform a hazard assessment whenever conditions change to determine if hazards exist that require the use of PPE. If hazards are found, the Safety Director, or his/her delegate, must either eliminate them or provide employees with proper protection from them. The Safety Director must document in writing that a workplace hazard assessment has been performed. The following form should be completed whenever performing a hazard assessment.

Training

Proper employee training on the correct usage of PPE will likely eliminate many accidents and injuries from occurring. Before performing any work that requires the use of PPE, the Safety Director, or his/her delegate, must train employees on the following:

- When and what types of PPE are necessary;
- How the PPE is to be used; and
- What the PPE's limitations are.

In many cases, more than one type of PPE will provide adequate protection. In such cases, employees should have their choice of which type of protection they would like to use.

The company is required to document in writing that training has been performed and that employees understand all trained materials. Written certifications should contain the names of all employees trained, the date(s) of training, and the PPE requirements.

Hazard Assessment Form

Facility:			Assessor:		
Area:			Date of Assessment:		
Task or Job Function:					
SECTION 1. Hazards (Check the appropriate box)			SECTION 2. Describe Specific Eye Hazards	SECTION 3. Identify type of PPE required for those eye hazards outlined in Section 2	
Eye Hazard	YES	NO			
Impact					
Penetration					
Chemical					
Heat					
SECTION 1. Hazards (Check the appropriate box)			SECTION 2. Describe Specific Head Hazards	SECTION 3. Identify type of PPE required for those hazards outlined in Section 2. Check one. No head protection is needed	
Head Hazard	YES	NO			
Burn					
Electric Shock					
Impact					
Penetration					
SECTION 1. Hazards (Check the appropriate box)			SECTION 2. Describe Specific Foot Hazards	SECTION 3. Identify type of PPE required for those foot hazards delineated in Section 2.	
Foot Hazard	YES	NO			
Chemical					
Compression					
Impact					
Penetration					
SECTION 1. Hazards (Check the appropriate box)			SECTION 2. Describe Specific Hand Hazards	SECTION 3. Identify type of PPE required for those hand hazards delineated in Section 2.	
Hand Hazard	YES	NO			
Burn					
Electric Shock					
Impact					
Penetration					
SECTION 1. Hazards (Check the appropriate box)			SECTION 2. Describe Specific Respiratory Hazards	SECTION 3. Type of Respirator Needed Circle One	
Respiratory Hazard	YES	NO			
Gas					
Vapor					
Fumes					
Dust					
Mist					
Asphyxia					
Particulates					
SECTION 1. Other Hazards (Fill in those that apply)			SECTION 2. Describe Other Hazards	SECTION 3. Identify type of PPE needed for other hazards.	

Training Documentation for Personal Protective Equipment

I have received training on the details of my company's Personal Protective Equipment Program.

I understand that I am required to follow all necessary precautions outlined in the Personal Protective Equipment Program.

I know the location of emergency phone numbers and communications systems, and the location of medical, fire, and other emergency supplies.

Employee Name: _____

Signature: _____ Date: _____

Job Location: _____

Types of Protection

A. Head Protection

Prevention of head injuries and wearing the proper protection is a very important component of this company's safety program. A recent survey by the Bureau of Labor Statistics showed that in most head injury cases employers had not required employees to wear proper head protection.

Typical head injuries are usually caused by falling objects and/or by bumping the head against fixed objects. To properly protect against head injuries, head protection must do two things: 1) resist penetration and 2) absorb the blow's shock.

Helmet Selection

Proper helmet selection is critical in preventing head injuries from occurring. Each type and class of helmet is intended to protect against specific hazards. The Safety Director, or his/her delegate, is responsible for making sure employees select and wear the proper helmet.

The following types and classes of protective helmets are available:

- Type 1 - helmets with full brim, not less than 1¼ inches wide;
- Type 2 - brimless helmets with a peak extending forward from the crown.

For industrial purposes, three classes are recognized;

- Class A - general service, limited voltage protection;
- Class B - utility service, high-voltage protection; and
- Class C - special service, no voltage protection.

Helmets under Class A are intended for protection against impact hazards. They are predominately used in manufacturing, construction, shipbuilding, tunneling, lumbering and mining industries.

Class B utility service helmets protect against impact and penetration from falling objects and from high-voltage shock and burn. They are used mostly by electrical workers.

Class C helmets are designed specifically for lightweight comfort and impact protection. They are typically manufactured from aluminum and offer no dielectric protection. Class C helmets are often used in construction and manufacturing occupations, oil fields, refineries, and chemical plants.

All helmets should be water-resistant and made of slow burning material when exposed to heat. The helmet type should be located inside the shell along with the manufacturer's name, ANSI designation, and class.

Helmet Fit

A properly fitting helmet should be snug on the head. The helmet's headband should be adjusted accordingly to receive the proper fit. When the headband is adjusted properly, it provides sufficient clearance between the shell and headband.

Helmet Inspection and Maintenance

Manufacturer's specifications should be followed with regard to the proper cleaning methods. Helmets should be cleaned by dipping them in hot, soapy water. They should then be scrubbed and rinsed in clear, hot water. After rinsing, the shell should be carefully inspected for signs of damage. It is the employee's responsibility to keep their helmet clean.

All components, shells, suspensions, headbands, sweatbands, and accessories should be inspected daily for dents, cracks, penetration, or any other damage that might reduce the original degree of safety. Damaged helmets should be replaced immediately.

B. Eye and Face Protection

OSHA requires eye and face protection whenever the potential for injury exists. The company must provide, and employees must use, protection that is suitable for the work being performed. Supervisors, management, and visitors must also follow these requirements. Proper eye and face protection must meet the following requirements:

- Provide adequate protection against the particular hazards for which they were designed;
- Be reasonably comfortable when worn under the designated conditions;
- Fit tightly without interfering with the movements or vision of the wearer;
- Be durable;
- Be capable of being disinfected;
- Be easily cleaned; and
- Be kept clean and in good repair.

To protect from injurious light radiation, all affected employees should use equipment with filter lenses. The following chart outlines appropriate shade numbers for various operations.

Filter Lenses for Protection Against Radiant Energy

Operation	Electrode Size (1/32)	Amps	Minimum Protective Shade*
Shielded metal arc welding	Less than 3/32	Less than 60	7
	3/32-5/32	60-160	8
	5/32-8/32	160-250	10
	More than 8/32	250-500	11
Gas metal and flux cored arc welding		Less than 60	7
		60-160	10
		160-250	10
		250-500	10
Gas tungsten arc welding		Less than 50	8
		50-150	8
		150-500	10
Air carbon	Light	Less than 500	10
Arc cutting	Heavy	500-1000	11
Plasma arc welding		Less than 20	6
		20-100	8
		100-400	10
		400-800	11
Plasma arc cutting	Light**	Less than 300	8
	Medium**	300-400	9
	Heavy**	400-800	10
Torch soldering			2
Torch brazing			3
Carbon arc welding			14
Gas Welding:			
Light	Under 1/8	Under 3.2	4
Medium	1/8-1/2	3.2-150	5
Heavy	Over 1/2	Over 12.7	6
Oxygen Cutting:			
Light	Under 1	Under 25	3
Medium	1-6	25-50	4
Heavy	Over 6	Over 50	5

*In selecting eye and face protection, start with a shade that is too dark to see the weld zone. Then, without going below the minimum, go to a lighter shade which gives sufficient view of the weld zone. In oxyfuel gas welding or cutting where the torch produces a bright yellow light, it is recommended that a filter lens be used to absorb the yellow or sodium line in the visible light of the (spectrum) operation.

**These values apply where the actual arc is clearly seen. Experience has shown that lighter filters might be used when the arc is hidden by the workpiece.

Selection

There are different types of eye and face protection designed for particular hazards. In selecting protection, consider type and degree of hazard. Where a choice of protection is given, worker comfort should be the deciding factor in selecting eye protection.

Employees who use corrective eye glasses should wear face shields, goggles, or spectacles of one of the following types:

- Spectacles with protective lenses providing optical correction;
- Goggles or face shields worn over corrective spectacles without disturbing the adjustment of the spectacles; or
- Goggles that incorporate corrective lenses mounted behind the protective lenses.

Fit

Skilled persons should fit all employees with goggles or safety spectacles. Prescription safety glasses should be fitted by qualified optical personnel.

Inspection and Maintenance

Eye protection lenses should be kept clean at all times. Continuous vision through dirty lenses can cause eye strain. Daily inspection and cleaning of eye protection with hot, soapy water is also recommended. Pitted lenses should also be replaced immediately as they can be a source of reduced vision. Deeply scratched or excessively pitted lenses are also more likely to break. Employees are responsible for taking care of their eye protection. They are also responsible for turning in eye protection that is in poor shape to their immediate supervisor.

C. Hearing Protection

Exposure to high noise levels can cause hearing loss or impairment and can create physical and psychological stress. There is no cure for noise-induced hearing loss, so the prevention of excessive noise exposure is the only way to avoid hearing damage. Specifically designed protection is required, depending on the type of noise encountered and the auditory condition of each employee.

The Safety Director, or his/her delegate, is responsible for providing appropriate hearing protection to employees. Pre-formed or molded earplugs are the best form of hearing protection. They should be individually fitted by a professional. Waxed cotton, foam, or fiberglass wool earplugs can also be used as hearing protection. When used properly, they work as well as most molded earplugs. Disposable earplugs should be discarded after usage. For proper protection, non-disposable earplugs should be cleaned after each use. Plain cotton should not be used as it does not effectively protect against hazardous noises.

Refer to Section 8 in this manual for more information on hearing protection.

D. Respiratory Protection

The company is required to provide respirators that are applicable and suitable for the intended purpose. Respirators must be used under the following circumstances:

- Where exposure levels exceed the PEL, during the time period necessary to install or implement feasible engineering and work practice controls;
- In maintenance and repair activities, and during brief or intermittent operations where exposures exceed the PEL and engineering controls are not regulated;

- In areas where the company has implemented feasible engineering and work practice controls and such controls are not sufficient to reduce exposures to or below the PEL;
- In emergencies.

Refer to Section 8 in this manual for more information on Respiratory Protection.

E. Arm and Hand Protection

The Safety Director, or his/her delegate, is responsible for determining appropriate hand protection. Work activities of employees should be studied to determine the degree of dexterity required and the duration, frequency, and degree of exposure to hazards. It is also important to know the hand protection's performance characteristics relative to the specific hazard. Examples include exposure to chemicals, heat, and flames.

Certain occupations require special protection. For example, electricians need special protection from shocks and burns. Rubber is the best insulator from these hazards. Rubber protective equipment for electrical workers must conform to the requirements established in ANSI as specified in the following list:

ITEM	STANDARD
Rubber insulating gloves	ASTM D 120-87
Rubber matting for electrical equipment	ASTM D 178-88 or 178-93
Rubber insulating blankets	ASTM D 1048-93 or 1048-88A
Rubber insulating hoods	ASTM D 1048-88 or 1049-93
Rubber insulating line hose	ASTM D 1050-90
Rubber insulating sleeves	ASTM D 1051-87

F. Foot Protection

According to a Bureau of Labor Statistics survey, most workers who suffered foot injuries were not wearing proper foot protection. Furthermore, most of their employers didn't require them to wear proper protection. This company takes foot protection seriously and requires all employees to wear proper protection.

The Safety Director, or his/her delegate, is responsible for determining appropriate foot protection needs. Proper foot protection protects the foot and leg from: 1) falling, rolling or sharp objects, 2) molten metal, and 3) hot or slippery surfaces. Leggings should also be used, whenever necessary, to protect the lower legs and feet from molten metal or welding sparks. In some cases, aluminum alloy, fiberglass, or galvanized steel footguards may be worn over workshoes as further protection. However, caution must be taken as they can cause tripping to occur.

G. Miscellaneous Body Parts

Torso - Many hazards can threaten the torso, including heat, splashes from hot metals and liquids, impacts, cuts, acids and radiation. A variety of PPE is available to protect from such hazards: vests, jackets, aprons, coveralls, and full body suits are a few examples.

Wool and specially treated cotton are two natural fibers that provide good torso protection. They are fire-resistant and adapt well to changing temperatures. Heat-resistant material, such as leather, is often used in protective clothing to guard against dry heat and flames. Rubber, neoprene, and plastics provide protection against acids and chemicals. The Safety Director, or his/her delegate, is responsible for ensuring that employees have appropriate torso protection.

Other - A Coast Guard-approved life jacket or buoyant work vest should be used when working near water. For emergency rescue operations, boats and ring buoys with at least 90 feet of line must be used.

G. Hearing Conservation

Purpose

Provide adequate safeguards for the hearing of our employees and to ensure compliance with regulatory requirements.

Responsibility

Safety Director. The Safety Director is responsible for compliance. The Safety Director shall train supervisors and employees on the proper wearing of hearing protective equipment, participate in sound level surveys and analysis, assist in efforts to reduce noise levels, purchase needed hearing protection, refer employees to the company physician, as needed, and monitor the program and retain records as required by law.

Supervisors. Supervisors shall ensure that employees receive hearing examinations as scheduled and wear their hearing protective equipment as required, participate in training, and maintain a work environment that ensures maximum employee safety and health. Supervisors should also ensure visitors abide by the hearing conservation program.

Employees. Employees must comply with this program and report any changes in conditions which create high noise problems to their supervisors.

Scope

This program stipulates that protection against the effects of occupational noise exposure shall be provided to any affected employees when sound levels are in excess of an 85 dB time-weighted average.

Procedures

1. Employees will be notified in writing 24 hours in advance of a hearing examination.
Employees must avoid high noise areas both on and off the job for 24 hours prior to their examination. If this is not possible, hearing protection must be worn from the start of the employees' shift until the time of testing.
2. Testing will be in accordance with OSHA regulations.
3. A base line audiogram will be established for each employee working in a high noise area. A job and future audiogram will be compared with the baseline to determine if a significant threshold shift has occurred.
4. An employee who has a significant threshold shift will be:
 - a. Informed in writing within 21 days of the determination of the existence of a significant threshold shift
 - b. Refitted with hearing protectors and retrained in their use
 - c. Referred for a clinical audiological evaluation or an otological examination, as appropriate, if additional testing is required or if medical pathology of the ear is caused or aggravated by the wearing of hearing protectors.
5. The Safety Director will notify employees of their need for an examination if a medical pathology of the ear is suspected which is unrelated to the use of hearing protectors.

6. Employees exposed to noise that equals or exceeds an 8 hour, time-weighted average of 85 dB will receive an annual evaluation.
7. As required by OSHA, an audiologist or qualified physician shall review the audiogram. The Company will provide the following information to the physician:
 - a. A copy of the OSHA requirements for Hearing Conservation
 - b. A copy of the baseline audiogram and most recent audiogram of each employee to be evaluated.
 - c. Measurements of background sound pressure levels in the audiometric test room and booth.
8. The following preparation to the audiometer and examination room will be done prior to the employee testing. A record of results will be maintained.
 - a. Functional audiometer check
 - b. Biological audiometer check
 - c. Measure background sound pressure levels in audiometric test room and booth
9. Audiograms are mandatory for the following categories of personnel:
 - a. New hires: Within 50 days after hire, all new employees required to work in jobs designated as 'high noise'
 - b. Termination: Employees working in 'high noise' jobs who leave any department for any reason and have not had a company audiogram within 90 days of their departure date
 - c. Recalls: Former employees called back to work in 'high noise' jobs who have not had a company audiogram within the past 6 months

H. Respiratory Protection Program

Purpose:

To establish a procedure that ensures the protection of all employees from respiratory hazards through the proper use of respirators and engineering control.

Responsibility:

Management is responsible for installing and operating any necessary pollution control or ventilation systems and operating procedures required to ensure the safety of employees and exposure levels remain below government established threshold limit values (TLV). However, when these engineering controls are not feasible or during emergencies, employees, contractors, and supervisors must adhere to the procedures outlined in this Respiratory Protection Program. The Safety Director is responsible for respiratory protection program compliance and the purchase of proper equipment to ensure respiratory safety. The Safety Director will train employees and supervisors on the proper use and limitations of respirators.

Procedures:

1. Respirators will be selected based on hazards to which the employee is exposed. Selection will be made by the Safety Director. The respirators must meet all government standards and requirements and be approved by the Safety Director.
2. Employees will be trained in the proper use of respirators and their limitations. Hands-on training will also include:
 - a. instructions on how to fit, inspect, adjust, clean, and care for the respirators;
 - b. directions on selecting the proper respirator based on present conditions; and
 - c. wearing of the respirator in a test atmosphere under observation by the Safety Director
3. OSHA regulations state that respirators should not be worn when conditions prevent a good face seal. These conditions include: a growth of beards, sideburns, a skull cap that projects under the facepiece, a or temple pieces of glasses. To comply with these regulations, no employee required to wear respiratory equipment may wear a beard or goatee. Mustaches and sideburns must be trimmed in such a manner as not to touch the internal or external sealing edges of the respirator. Furthermore, the absence of one or more dentures can affect the fit of a facepiece. The facepiece should be checked by the wearer with each use to ensure proper fit.
4. Where practical, respirators will be assigned to individual workers for their exclusive use.
5. Respirators shall be kept clean and maintained by the person to whom they are assigned. The respirator must be clean after each day's use, or more often if necessary. Shared equipment must be thoroughly cleaned and disinfected after each use. The Safety Director will routinely inspect the respirators during cleaning.
6. The central respirator cleaning and maintenance facility will restore respirators in a clean and sanitary location.
7. The employee is responsible for the proper working order of his respirator. The employee should inform the Safety Director of any missing, defective, or worn part so that the parts can be replaced.

8. Respirators for emergency use, such as a self-contained breathing apparatus (SCBA), will be thoroughly inspected at least once a month and after each use by the Safety Director or his designee. Inspection of SCBA breathing gas pressure will be performed weekly.
9. Employees will not be assigned to tasks requiring use of respirators unless it has been determined that they are physically able to perform the work and use the equipment. The Company physician will determine what health and physical conditions are pertinent. The employee's medical status will be reviewed annually.
10. The Safety Director will make frequent inspections of all areas where respirators are used to ensure compliance with this program.

I. Smoking Policy

Purpose

To establish guidelines whereby the Company provides a smoke-free work environment for our employees and is in compliance with all federal and state Indoor Clean Air Acts.

Scope

This policy applies to all employees, vendors, visitors, and contractors.

Policy

1. Smoking is **prohibited throughout the building** unless clearly posted as “Smoking Permitted” area.
2. Employees will refrain from smoking in any company vehicles with non-smokers in the vehicle.

Discipline

All employees share in the responsibility for adhering to and enforcing the policy. In all cases, the right of the non-smoker to protect his/her health and comfort will take precedence over an employees desire to smoke. Employees who violate this policy may receive a written safety violation notice and may be disciplined, up to and including termination of employee, based on the severity of the violation.

J. Bloodborne Pathogen Exposure Control

Purpose

To establish guidelines to protect employees who, in response to medical emergencies, may be potentially exposed to blood and/or body fluids.

Scope

This policy covers employees qualification, compliance methods, vaccinations, training, and recordkeeping.

Policy:

Employee Qualification

1. All employees should follow the precautions provided in this policy. Some employees may have more potential for exposure. These employees must take additional precautions, such as wearing personal protective equipment. The following job classifications fall in this category:

Physicians/Nurses/Medical Examiners
Pathologists
Medical Technologists
Applicable Maintenance Personnel
Applicable Housekeepers
Laundry Workers
Firefighters

Dentists/Dental Workers
Laboratory Personnel
Emergency Medical Technicians
Emergency Response Personnel
First Aid/CPR Volunteers
Funeral Service Personnel
Police Personnel

Compliance Methods

Three compliance methods will be observed in order to prevent contact with blood or other potentially infectious materials. All blood or other potentially infectious material (i.e. body fluids) will be considered infectious regardless of the perceived status of the source individual.

These compliance methods include: 1) engineering & work practice controls, 2) housekeeping, and 3) personal protective equipment.

A. Engineering & Work Practice Controls:

1. Controls should be in place to minimize or eliminate exposure (i.e. sharps disposable containers, self sheathing needles, etc.). Contaminated sharps should be placed immediately, or as soon as possible after use, into appropriate containers. The containers are closable, puncture resistant, leakproof, and labeled with a biohazard label. Contaminated needles should not be bent, recapped, removed, sheared, or intentionally broken.
2. All employees will wash hands using soap, running water, and friction if potential exposure exists. Handwashing should be done (at a minimum):
 - a. At the beginning and the end of a work shift
 - b. Prior to physical contact with an employee, patient, etc.
 - c. Immediately after or as soon as feasible following contact with blood or other potentially infectious materials.
 - d. Immediately after or as soon as feasible after removal of gloves or other personal protective equipment.

Handwashing facilities are readily accessible to employees and are located throughout the facility.

3. Procedures involving blood or other potentially infectious materials should be performed as to minimize splashing, spraying, spattering, aerosolization, and generation of droplets.
4. In work areas where there is a reasonable likelihood or potential exposure to blood or other infectious materials, employees are not to eat, drink, smoke, apply cosmetics or lip balm, handle contact lenses, or use hand lotions. Food and beverages are not to be kept in refrigerators, freezers, shelves, cabinets, or on counter or bench tops where blood or other infectious materials are present.
5. Specimens of blood or other infectious materials will be placed in a container which prevents leakage during the collection, handling, processing, storage, and transport of the specimens. The containers will be labeled and color coded in accordance with OSHA standards. The container must be closed prior to storage, transport, and shipping. If outside contamination of the primary container occurs, the primary container shall be placed within a secondary container which prevents leakage during the handling, processing, storage, transport, and/or shipping of the specimen. The secondary container may be a zip-lock or other sealable plastic bag.
6. Equipment which has become contaminated with blood or other infectious materials shall be examined prior to servicing or shipping and shall be decontaminated as necessary unless the decontamination of the equipment is not feasible.

B. Housekeeping:

1. Contaminated work surfaces will be decontaminated with an appropriate disinfectant immediately or as soon as feasible. An appropriate disinfectant is registered with the EPA as HIV- and HBV-effective (i.e. a solution of 5.25% sodium hypochlorite (household bleach) diluted between 1:10 and 1:100 = 1 cup bleach per 2 gallons of water)
2. A blood and body fluid spill kit will be retained at each nurses station for use in the case of a spill of blood or other potentially infectious material. The kit should contain: 1) a pair of vinyl or latex gloves, 2) two pieces of absorbent material, such as a cloth or paper towel, 3) a small bucket or spray bottle, 4) two plastic bags, 5) disinfectant.
3. If floor or other surfaces has been contaminated with blood other potentially infectious material, the employee should do the following:
 - a. Put on gloves
 - b. Lay out a bag in an open fashion
 - c. Dampen first piece of absorbent material and mop up spill.
 - d. Deposit material in bag. Avoid touching outside of bag.
 - e. If outside of bag is contaminated, put contaminated bag into second bag.
 - f. Dampen second piece of absorbent material and clean floor or surface. Deposit into bag.
 - g. Tie bag snugly.
 - h. Dispose of bag in common waste container.
 - i. Return buck or spray bottle to storage area. Restock used items in spill kit.
 - j. Wash hands after removing gloves.
4. Regulated waste shall be placed in approved properly labeled containers and disposed according to established regulatory procedures.
5. Laundry, which includes linens and reusable personal protective equipment, should be handled as little as possible and with minimum agitation, bagged, and containerized. Contaminated laundry will not be sorted or rinsed in the location of use. Whenever laundry is wet, the laundry shall be placed and transported in bags or containers designed to prevent soak through and/or leakage. Employees handling soiled laundry shall wear disposable or

utility gloves and gowns. The facility shall wash contaminated laundry according to recommendations outlined by the Center for Disease Control (i.e. wash with detergent and water at 160°F for 25 minutes).

C. Personal Protective Equipment:

1. Personal protective equipment will be provided to employees, based on anticipated exposures. The protective equipment will be considered appropriate only if it does not permit blood or other potentially infectious materials to pass through or reach the employees' clothing, skin, eyes, mouth under normal conditions of use and for the duration of time which the protective equipment will be used. The following protective equipment is available and should be used, cleaned, laundered and/or disposed of as appropriate.
 - a. Disposable gloves, gown/apron, shoe covers, surgical mask/cap, and breathsaver resuscitator
 - b. Eye/Face protection device
 - c. Lab coats, clinic jacket
2. Gloves, gowns (or aprons, lab coats, or clinic jackets), shoe covers, and masks/caps must be worn when it is reasonably anticipated that the employee may have direct contact with blood or other potentially infectious materials. Disposable breathsaver resuscitators provide emergency breathing capability to the victim without direct mouth-to-mouth contact. Eye/face protection devices, such as surgical masks and caps, goggles, glasses with solid side shields, or chin-length face shields, must be worn whenever splashes, spray, spatter, droplets of blood, or other potentially infectious materials may be generated.

Vaccinations & Evaluations

- A. All employees who have been identified as having exposure to blood or other potentially infectious materials will be offered the Hepatitis B vaccine, at no cost to the employee. The vaccine will be offered within 10 working days of their initial assignment, involving the potential for occupational exposure to blood or other potentially infectious materials. Employees who previously had the vaccine may submit to anti-body testing which shows the employee to have sufficient immunity.
- B. Post-exposure evaluations and follow-ups are provided for an employee who has been exposed to an incident involving the release of blood or potentially infectious materials
- C. The Maintenance Record Form (at the end of this Plan) includes a record of vaccinations, evaluations, and follow-ups, or an employee's signed statement declining these services. The completed form shall be retained by the personnel department.

Training

All applicable employees shall be trained in conjunction with applicable requirements for certification (e.g. EMT, CPR, First Aid). Where independent training is not available, company-sponsored training will be offered. Annual retraining will also be made available in accordance with OSHA standards. A record of training shall be included on the Maintenance Record Form.

Additional training will include:

1. OSHA standards for bloodborne pathogens
2. Exposure Control Plan review
3. Procedures at this facility which may cause exposure to blood or other potentially infectious materials
4. Control methods which will be used at the facility
5. Personal Protective Equipment available
6. Hepatitis B Vaccination program
7. Post exposure evaluation & follow-up
8. Signs & labels used at the facility

Recordkeeping

The Maintenance Record Form maintains the following information in accordance with OSHA requirements. The completed form shall be maintained by the Personnel Department. The Safety Director shall maintain a summary log of employees' training, vaccinations, and issued Personal Protective Equipment. A sample is provided following the Maintenance Record Form.

Employee Name & Social Security Number (SS #)	Record of Post-Exposure Evaluations & Follow-ups
Company Name, Department, & Location	Personal Protective Equipment Provided
Hepatitis B Vaccination Record	Training Record
Employee Signature	

Bloodborne Pathogen Exposure Control Maintenance Record

Distribution: Copy to Personnel Copy to Employee Copy Supervisor Copy _____

Employee Name: _____ SS #: _____

Company Name: _____

Dept: _____ Location: _____

Hepatitis B Vaccination Record*

Date: _____ Physician: _____

Date: _____ Physician: _____

Date: _____ Physician: _____

Post-Exposure Evaluation/Follow-up

Date: _____ Incident: _____

Date: _____ Incident: _____

Date: _____ Incident: _____

*I have been offered the opportunity to receive a Hepatitis B vaccination and hereby decline this opportunity. Signature: _____

Personal Protective Equipment Record

I have received the following equipment and maintain it in good condition:

	Date of Issue and Reissue	
Disposable Gloves		
Surgical Mask & Cap		
Eye/Face Protection		
Gown, Apron, Shoe Cover		
Breathsaver Respirator		
Other:		

Training Record

Type(s) of Certification: _____

Initial Training:

Subject: _____ Date: _____ By Whom: _____

Annual Retraining:

Subject: _____ Date: _____ By Whom: _____

Subject: _____ Date: _____ By Whom: _____

Subject: _____ Date: _____ By Whom: _____

Confirmation of Policy Receipt and Review

I have received a copy of the Bloodborne Pathogen Exposure Control Plan. I have reviewed the Plan, understand it, and agree to abide by it.

Employee's Signature: _____ Date: _____

Supervisor's Signature: _____ Date: _____

Bloodborne Pathogen Summary Log

Completed and Maintained by the Safety Director

Instructions: Enter the appropriate information for each employee participating in the Bloodborne Pathogen Exposure Control Plan. Revised dates for retraining and recertification shall be entered upon completion of applicable requirements.

<u>Employee</u>	<u>Certification</u>	<u>Training</u>	<u>Vaccination</u>	<u>PPE</u>
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K. Violence Prevention Program

Purpose

To establish guidelines to protect employees against workplace violence.

Policy

Nothing is more important to the Company than the safety and well-being of its employees. Threats, threatening behavior, or acts of violence against employees, visitors, guests, or other individuals by anyone on Company property will not be tolerated. Violations of this policy will lead to disciplinary action which may include dismissal, arrest, and prosecution.

Any person who makes substantial threats, exhibits threatening behavior, or engages in violent acts on Company property shall be removed from the premises as quickly as safety permits and shall remain off premises pending the outcome of an investigation. The Company will initiate an appropriate response, including but not limited to suspension, reassignment of duties, termination of employment and/or business relationship, and/or criminal prosecution of the person(s) involved.

No existing policy, practice, or procedure should be interpreted to prohibit decisions designed to prevent a threat from being carried out, a violent act from occurring, or a life-threatening situation from developing.

All Company personnel are responsible for notifying their supervisor or the management representative(s) designated below of any threats that they have witnessed, received, or have been told that another person has witnessed or received. Even without an actual threat, personnel should also report any behavior they have witnessed which they regard as threatening or violent, when that behavior is job related or might be carried out on at a Company site. Employees are responsible for making this report regardless of the relationship between the individual initiating the threat or threatening behavior and the person(s) receiving the threat, including domestic problems which they fear may result in violent acts against them or a coworker.

All individuals who apply for or obtain a protective or restraining order which lists the Company locations as protected areas must provide a copy of the petition used to obtain the order, as well as a copy of the protective or restraining order which was granted, to their immediate supervisor or the designated representative(s) listed below.

The Company understands the sensitivity of the information requested and has developed confidentiality procedures that recognize and respect the privacy of the reporting employee(s).

The designated management representative(s):

Name: _____
Title: _____ Dept: _____
Location: _____ Telephone: _____

Name: _____
Title: _____ Dept: _____
Location: _____ Telephone: _____

Section 9: New Employee Safety

The Safety Director should provide safety training to all newly hired employees. Each new employee will be given a copy of the safety manual.

General safety orientation containing information common to all employees should be reviewed, ***before beginning their regular job duties.*** Recommendations include (at a minimum):

- Review the Safety Manual, with extra time spent on: Accident & hazard reporting procedures, emergency procedures, first aid, personal protective equipment, and special emphasis programs (Drug-Free Workplace Policy, Return-to-Work Policy, Incentive Programs, etc.)
- Encourage & motivate employee involvement in safety. Make each accountable for their safety and the safety of their coworkers.
- Explain the workers' compensation system and fraud prevention
- Review any known workplace hazards.
- Conduct training on any topics that are not schedule to be addressed within a reasonable timeframe and are relevant to the employee's job.

Job-specific training ***provided before performing the task*** should include:

- Review completed JSA's (Job Safety Analysis - see Level 2)
- Specific safety rules, procedures, hazards, and special emphasis programs (Machine Guarding, Welding, Lockout/Tagout, etc.) to complete their job
- Identify employee's or employer's responsibilities

Continual training should be provided to new hires. Each new hire should be assigned to work with an experienced worker for at least 6 months. The senior employee should act as a mentor and ensure that the employee is working safely and exhibits a positive safe attitude.

The Safety Director should complete the attached new employee safety checklist for each new employee during their safety training.

New Employee Safety Checklist

Employee Name: _____ ID: _____
Date Employed: _____ Date Checklist Completed: _____
Checklist completed by: _____

Department Assigned: _____ Type of Work: _____
Summary of Work Experience: _____
Supervisor: _____

Ask Employee: *Do you have any physical conditions or handicaps which might limit your ability to perform this job? If so, what reasonable accommodation can be made by us?* _____

Did the employee have a pre-employment drug test? Yes No physical? Yes No
Any work restrictions indicated from the physical? _____

The Safety Director and new employee should review the following safety concerns. Check & discuss all that apply. Provide the employee with a copy of the Safety Manual.

- Company safety policies & programs _____
- Safety rules (general & specific to job) _____
- Safety rule enforcement _____
- Use of tools & equipment _____
- Proper guarding of equipment _____
- Proper clothing & personal protective equipment _____
- Materials handling _____
- Accident & Hazard Reporting Procedures _____
- Housekeeping _____
- Special hazards of the job _____
- Emergency Procedures _____
- Employee Responsibilities/Accountability _____
- Overview of workers' compensation _____
- Hazardous materials _____
- Location of First Aid Kits _____
- Vehicle Safety _____
- Where to go for medical treatment _____
- Other: Drug-Free Workplace, Return-to-Work, Teams, Incentives, Lock-Out/Tag-Out, etc.

Employee shall receive additional training from: _____

Probationary period is from _____ **to** _____

Performance (including safety) will be reviewed formally on _____

Employee agrees to cooperate fully with the safety efforts of the employer, follow all safety rules, and use good judgment concerning safe work behavior. Yes No (Have employee sign for manual)

Comments: _____

Signed: _____ Signed: _____
Trainer Employee

Section 10: Safety Violation

Should any employee commit an unsafe act, intentional or not, this action should be addressed by the immediate supervisor and reviewed by the Safety Director. The Company reserves the right to use disciplinary actions, depending upon the seriousness of the violation and the impact of the violation upon the conduct of Company business. It is not required to complete all steps of the disciplinary procedure in every case. Discipline may begin at any step appropriate to the situation. Discipline includes, but is not limited to:

Verbal Reprimand

Written Reprimand

Suspension

Termination of Employment

The attached “*Safety Violation Notice*” should be completed for all written reprimands. A copy should be maintained in the employee’s personnel file and submitted to the Safety Committee, if corrective action(s) is required.

Safety Violation Notice

Employee Name: _____
Department: _____ Violation Date: _____

A safety and health survey of your operation has revealed non-compliance of certain safety rules, procedures, programs, and/or local, state, or federal regulations. As a condition of the company's safety policy, you are required to maintain a safe work environment and to prevent unsafe actions of yourself, co-workers, and/or your employees.

This warning is for your protection and safety. The violation(s) noted and corrective action(s) are indicated below.

Rule Violated	Violation Description	Corrective Action Required*
---------------	-----------------------	-----------------------------

1)

2)

3)

Corrective Action Required*

- 1 = Cease operation until corrective action is complete
- 2 = Warn personnel and instruction them on proper safety procedures
- 3 = Provide proper equipment necessary
- 4 = Change procedure/work method
- 5 = Initiate and complete corrective action (include date)
- 6 = Other (specify above)

Comments: _____

Disciplinary Action Imposed

Verbal Reprimand along with this notice

Written Reprimand with a last chance warning

Suspension (from _____ to _____)

Termination of Employment

Date: _____ Supervisor: _____

Section 11: Acknowledgment Form

The rules, programs, and procedures stated above in the Company's safety manual are not intended to cover all the possible situations you will be faced with on the job. The Company encourages you to act in a safe and responsible manner at all times, both on and off the job.

I have read the Company's Safety Manual, understand it, and agree to abide by it. I understand that violation of these rules may lead to dismissal.

Print Name: _____

Signature: _____

Date: _____