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I certify the Illness and Injury Prevention Program for the City of Cloverdale Public Works (Public Works) has been reviewed and revised as necessary.

\_\_\_\_\_  
Director of Public Works

\_\_\_\_\_  
Date Certified

### 1.0 PROGRAM REVIEW AND CERTIFICATION

The Injury and Illness Prevention Program (*IIPP*) will be reviewed and revised as necessary to ensure the program is current. All revisions are documented on Attachment A – Program Review and Certification Log.

## 2.0 PURPOSE AND POLICY STATEMENT

- 2.1 **PURPOSE:** To establish a Cal-OSHA mandated Employee Injury and Illness Prevention Program, in accordance with the California Code of Regulations, Title 8, Section 3203.
- 2.2 **POLICY:** The Public Works Department holds the safety of our employees, as well as that of the public we serve, as a high priority. The consideration of worker safety, and the safety of the general public, bears as high a priority as the decision to commit funds or complete a task and no function of Public Works is so critical as to require a compromise of safety.

Public Works is committed to providing a place of employment free from health and safety hazards, promoting safe working practices, and complying with all applicable federal, state and City safety requirements.

## 3.0 RESPONSIBILITIES

- 3.1 **Director of Public Works:** The Director of Public Works has the overall authority and responsibility for implementing the provisions of the Injury Illness Prevention Program for the City Public Works Department. Specific responsibilities include, but are not limited to:
- a. Ensuring that the program targets losses, exposures, and is in compliance with applicable government standards.
  - b. Providing active leadership & participation in the safety program.
  - c. Holding those in management or supervisory positions accountable for safety and loss control.
  - d. Establishing and supporting a safety committee, if established.
  - e. Ensuring adequate funding is made available for the successful implementation of this program.
  - f. Ensuring the safety program is fully implemented.
  - g. Ensuring policy and procedures are current.

### 3.2 **Safety Committee:**

The Public Works Safety Committee consists of all on-duty Public Works employees. The Safety Committee meets weekly after the Monday morning employee meeting. Their responsibilities include the following:

- a. Providing support regarding all safety related issues.
- b. Reviewing, revising, and/or developing safety policies and procedures in order to keep the safety program updated and in compliance with CalOSHA requirements.
- c. Developing, implementing, and maintaining an effective safety program to prevent accidents, injuries, and illnesses.
- d. Coordinating with those in management or supervisory positions in the activities required to meet the provisions of the safety program.
- e. Ensuring that a training schedule has been established to track and document that safety training and other CalOSHA safety requirements are scheduled and implemented.
- f. Ensuring documented tailgate meetings are occurring as required.
- g. Monitoring and coordinating safety training and events for compliance with the projected training schedule.
- h. Managing safety record keeping requirements.
- i. Participating in accident/incident investigations.
- j. Ensuring safety inspections are conducted and documented in accordance with this policy
- k. Conducting special safety inspections if new substances, job tasks, or equipment introduce new hazards to their employees
- l. Monitoring the effectiveness of the program and making recommendations to reduce risks and eliminate or control unsafe conditions in the work place.
- m. Ensuring that all new employees receive New Employee Safety Orientation
- n. Implementing systems to encourage employee participation in the safety program
- o. Encouraging employees to report unsafe conditions, practices, and near misses and ensuring

unsafe conditions or practices are evaluated and corrected in a timely manner.

- p. Discussing safety concerns and safe job procedures as part of safety committee meetings
- q. Ensuring employees have available, and been trained on, the necessary personal protective equipment needed to work safely.

- 3.3 **Responsible Person:** The Responsible Person is the person who has been designated as the lead on the various weekly projects. The Responsible Person is responsible for:
- a. Helping to develop a cooperative safety attitude by being an example to employees.
  - b. Completing their part of the New Employee Safety Orientation program in a timely manner for employees under their direct supervision.
  - c. Reporting & documenting all injuries, property damages, near misses, unsafe conditions and unsafe practices in accordance with this policy.
  - d. Ensuring employees receive prompt medical attention for all injuries/illnesses.
  - e. Ensuring that employees under their direct supervision know, understand and follow established safety guidelines.

- 3.4 **Employees:**  
It is the responsibility of each employee to follow safe working practices and comply with safety rules and regulations.

- 3.4.1 Specific responsibilities include, but are not limited to:
- a. Actively contributing to the success of the overall safety program.
  - b. Accomplishing their duties using safe work practices.
  - c. Reporting unsafe conditions and practices in accordance with Section 6.0 Hazard Assessment.
  - d. Conducting safety inspections of their respective work areas and/or equipment when requested.
  - e. Correcting any observed unsafe conditions or practices, when and where appropriate.
  - f. Immediately reporting all imminent and/or serious safety conditions/practices to their supervisor Maintaining good housekeeping duties pertaining to their work assignments.
  - g. Reporting all injuries to a supervisor as soon as possible.
  - h. Protecting themselves from hazardous exposures/conditions by using the proper engineering controls, administrative controls, and /or personal protective equipment when required or necessary.
  - i. Maintaining safety equipment in good condition with all safety guards in place when in operation.
  - j. Advising management when there is a need for job specific training.
  - k. Coaching fellow employees on safe work practices, whenever appropriate.
  - l. Participating on the Safety Committee when requested.
  - m. Taking the initiative to temporary suspend any work activity or unsafe conditions that they believe is an imminent or serious hazard (I.e. is immediately dangerous to life and health)

- 3.4.2 Employee rights include, but are not limited to:
- a. A safe and healthful working environment.
  - b. Receive information and training in general safety and job specific work practices.
  - c. Refuse work that would violate a health and safety standard or order where such violation would pose a real and apparent hazard to his/her safety and health.
  - d. To not perform a job until they have received instructions and training on the proper and safe work procedures.
  - e. Contact CalOSHA about unsafe or unhealthful working conditions. Such complaints are strictly confidential per CalOSHA policy.
  - f. Have an employee representative accompany CalOSHA on an inspection and to talk privately to the CalOSHA representative during an inspection

#### 4.0 COMPLIANCE

- 4.1 All employees, including managers and supervisors, are responsible for complying with safe and healthful work practices. Public Works system of ensuring that all employees comply with these practices includes one or more of the following practices:
- a. Informing workers of the provisions of the Injury Illness Prevention Program.
  - b. Evaluating the safety performance of all workers.
  - c. Recognizing employees who perform safe and healthful work practices.
  - d. Providing training to workers whose safety performance is deficient.
  - e. Disciplining workers for failure to comply with safe and healthful work practices in accordance with the City's disciplinary procedures.

#### 5.0 COMMUNICATION

Public Works recognizes that open, two-way communication between management and employees on health and safety issues is essential to an injury-free, productive workplace. The following systems of communication at Public Works are designed to facilitate a continuous flow of safety and health information between management and employees in a form that is readily understandable.

- 5.1 NEW EMPLOYEE ORIENTATION: Safety Orientations will be conducted at the time of hire and include a discussion of safety and health policies relevant to their position and stresses the importance of safety in the workplace. Safety orientation is a combined effort of the Safety Representative (or designee) and the employee's Supervisors and is documented using the *Employee Safety Orientation Form* (Attachment F), and the *Job Safe Practice Orientation Form* (Attachment G).
- 5.2 REQUIRED SAFETY TRAINING: Employees will receive job specific training in accordance with the tasks they are required to perform, the hazards posed and regulatory requirements. This training will be provided either at time of hire as part of the New Employee Orientation, prior to performing the activity or being exposed to the hazard. All safety training will be documented on Attachment B: *Safety Meeting & Training Attendance Form*.
- 5.3 EQUIPMENT SAFETY TRAINING: Equipment safety training will be provided on all new equipment where training is necessary to prevent employee, coworker or third-party injury or property damage. This training will be documented on Attachment B: *Safety Meeting & Training Attendance Form*.
- 5.4 SAFETY POSTINGS: All appropriate and required safety information will be posted on the Safety Bulletin Board or in other locations that are highly visible and accessible to all employees.
- 5.5 REPORTING OF UNSAFE CONDITIONS OR PRACTICES:
- 5.6.1 Attachment C: *Report of Unsafe Condition or Practice* will be used to report any unsafe conditions, practices, or near misses they may have observed or experienced. Completed forms are given to the Safety Committee. Employees may submit completed forms anonymously, if they so choose. The Safety Committee will review all reports of unsafe conditions and determine the necessary actions needed to correct hazardous conditions in accordance with Section 8.0 Hazard Correction.
- 5.6.2 If employees wish to report unsafe conditions anonymously, they may place the completed form in the "Safety Committee Box" located in Public Works Office lobby.
- 5.6 SPECIAL SAFETY MEETINGS: As appropriate, supervisors or managers will hold special safety meetings to review and discuss safety issues arising out of any unusual working conditions such new job activities, new equipment, on-site contractor activities, or other non-routine working conditions.

- 5.7 TAILGATE SAFETY MEETINGS: If job activities involve construction activities (i.e. alterations, painting, repairing, construction maintenance, renovation, removal, or wrecking of any fixed structure or its part) tailgate meetings will be held every 10 days as required by the CalOSHA Construction Standard. Topics will be relevant to the job activity and associated job hazards. Other tailgate meetings are held as needed, or whenever a new job activity, work procedure, hazardous substance or any other unusual working condition exists. All Tailgate Safety Meetings will be documented on Attachment B: *Safety Meeting & Training Attendance Form*.
- 5.8 LABOR/MANAGEMENT SAFETY COMMITTEE: Public Works uses a labor/management safety committee (*Safety Committee*) that meets monthly, at a minimum. The Committee consists of PW Supervisors and all employees who are on-duty and able to attend. Minutes of Safety Committee meetings are posted in the Public Works Crew Office. The Committee performs the following activities:
- a. Prepares written records of the safety and health committees meetings.
  - b. Reviews results of the periodic scheduled inspections.
  - c. Reviews investigations of incidents and exposures and makes suggestions to management for the prevention of future incidents.
  - d. Reviews reports of unsafe conditions and determines if corrective actions are necessary.
  - e. Submits recommendations to assist in the evaluation of employee safety suggestions.

## 6.0 HAZARD ASSESSMENT

Hazard assessment and correction activities include the following programs:

- 6.1 PERIODIC INSPECTIONS: Public Works will conduct documented safety inspections of the worksite and job activities in accordance with the following schedule in order to identify, evaluate, and correct workplace hazards and unsafe work practices.
- a. When the IIPP is first established.
  - b. Periodically, but not less than biannual (twice a year).
  - c. When new substances, processes, procedures or equipment that present potential new hazards are introduced into our workplace.
  - d. When new, previously unidentified hazards are recognized.
  - e. When occupational injuries and illnesses occur.
  - f. When employees are hired and/or reassigned to a process or work task for which a hazard evaluation has not been previously conducted.
  - g. Whenever workplace conditions warrant an inspection.
- 6.2 SAFETY INSPECTION DOCUMENTATION AND TRACKING:
- 6.2.1 All safety inspections and safety hazards discovered will be documented using Attachment D-1: *Safety Inspection Report Summary of Findings*.
- 6.2.2 Unresolved unsafe conditions will be recorded on Attachment D-2 *Unsafe Condition Exception Report*.
- 6.2.3 The Safety Committee will review all completed inspection and exception reports. Hazards and unsafe conditions will be prioritized for correction by the Safety Committee in accordance with Section 8.0 Hazard Correction.
- 6.2.4 The Safety Committee will continue to monitor the status of these hazards and unsafe conditions until they have been corrected. When hazards have been corrected, the date will be logged onto the corresponding exception report.

6.2.5 A copy of the Unsafe Condition Exception Report will be routed to the Director of Public Works monthly.

- 6.3 **SPECIAL SAFETY INSPECTIONS:** Special safety inspections will also be performed whenever:
- New substances, processes, or equipment are introduced to the workplace that represents a new occupational safety and health hazard.
  - Public Works is made aware of a new or previously unrecognized hazard.

## 7.0 ACCIDENT, INCIDENT AND NEAR MISS REPORTING AND INVESTIGATION

Employees are to report all work related injuries and illnesses to their immediate supervisor in accordance with Section 7.1. A thorough investigation will be performed depending upon the seriousness of the incident and/or injury as outlined in Section 7.2.

### 7.1 OCCUPATIONAL INJURY AND ILLNESS REPORTING PROCEDURES:

7.1.1 **First Aid Injury:** If the injury or illness is a minor first aid injury, the employee will report the injury or illness to the Responsible Person the day of the incident, or as soon as they are aware of the injury or illness. In accordance with Attachment I, the *Accident, Incident and Near Miss Investigation Procedure Flow Chart*, the Responsible Person, or designee, will log this information on REMIF's Accident/Incident Report form the day they are notified.

7.1.1.1 Examples of minor first aid injuries include (but are not limited to) minor cuts, abrasions, or other injuries that only require flushing, cleansing, applying ointments, or require a covering such as a bandage, Band-Aid, or gauze pad.

7.1.1.2 The purpose of recording these types of injuries is to ensure that all minor injuries & illnesses are dated in the event the injury/illness requires medical attention and/or becomes recordable (i.e. on the CalOSHA 300 Log) at a later date.

7.1.2 **Recordable Injury:** If the injury is beyond first aid (e.g. requires outside medical attention) the employee and the Responsible Person will follow REMIF Workers' Compensation claims procedures.

7.2 **INVESTIGATION:** Public Works will perform internal investigations of accidents, incidents and near misses in accordance with ATTACHMENT I: *Accident, Incident and Near Miss Investigation Procedure*. The main objective in conducting an investigation is to identify the root cause(s) of the accident or incident and make any changes necessary to prevent the accident or incident from occurring again.

7.2.1 **Purpose of the Investigation:** The main objective in conducting an investigation is to identify the root cause and any other factors that contributed to the incident so that steps can be taken to prevent the incident from occurring again.

7.2.2 **Conditions to Investigate:** All occupational incidents will be evaluated and documented using REMIF's Accident/Incident Report Forms. REMIF's Accident/Incident Investigation Procedures will establish whether the accident/incident requires an investigation.

7.2.3 **Procedure and Documentation:** In addition to REMIF's investigation procedures and documentation forms, Attachment E, *Incident Data Gathering Form* will be used internally by the PW Responsible Persons to identify the root cause and any contributing factors so that a preventive action plan can be developed and implemented. This information will be

provided to REMIF as requested.

7.2.4 **When to Investigate:** The Responsible Person will complete Attachment E as soon as possible after they become aware that an incident has occurred

7.3 REPORTING TO CAL OSHA (in accordance with Title 8, Sections 330(h) and 342)

7.3.1 For any serious occupational injury or illness, or death, the Director of Public Works, or designee, will immediately make a telephone report to the Sacramento District office of the Division of Occupational Safety and Health at **(916)263-2800**.

- **Immediately** means as soon as practically possible but not longer than 8 hours after Public Works knows or with diligent inquiry would have known of the death or serious injury or illness.
- **Serious injury or illness** means any injury or illness occurring in a place of employment or in connection with any employment which requires inpatient hospitalization for a period of 24 hours for other than medical observation or in which an employee suffers a loss of any member of the body or suffers any serious degree of permanent disfigurement.

7.3.2 The following information must be given in the report, if available:

- a. Time and date of accident.
- b. Employer's name, address and telephone number.
- c. Name and job title, or badge number of person reporting the accident.
- d. Address of site of accident or event.
- e. Name of person to contact at site of accident.
- f. Name and address of injured employee(s).
- g. Nature of injury.
- h. Location to where injured employee was moved.
- i. List and identity of other law enforcement agencies present at the site of accident.
- j. Description of accident and whether the accident scene instrumentality has been altered.

## 8.0 HAZARD CORRECTION

Whenever possible, workplace hazards and unsafe work practices will be corrected as soon as they are identified. If not corrected the day of discovery, a target date for correction will be established based upon the following criteria:

8.1 **IMMINENT HAZARD:** Imminent hazards are those conditions or practices that pose an immediate threat to the life or health of employees, public, or others who may be exposed. If not corrected, this activity or condition will likely cause a serious injury, serious illness, or fatality. If an imminent hazard is present, employees should stop activity and take immediate corrective action. If employees are unable or unsure what action to take, they will notify the Responsible Person who will take immediate corrective action, if possible. In either case, the employee shall document these condition(s) using Attachment C: *Report of Unsafe Condition or Practice*. If it is necessary for employees to enter the area to correct the hazardous condition, they will be provided with the necessary protection and will be trained to perform these duties. If the imminent hazard cannot be corrected, the hazard area shall be declared "off-limits" until the hazard is corrected.

- 8.2 **SERIOUS HAZARD:** Serious hazards are hazards that indicate substantial probability that an employee, public, or others will suffer physical harm. If a serious hazard is present, employees should stop activity and notify the Responsible Person. Serious hazards shall be corrected as soon as possible or shall be declared off limits until the hazard is corrected. The employee shall document these condition(s) using Attachment C: *Report of Unsafe Condition or Practice*.
- 8.3 **GENERAL HAZARD:** General hazards are those that may affect the safety and health of employees. General Hazards are brought to the attention of the Safety Committee using Attachment C: *Report of Unsafe Condition or Practice*. General Hazards will be corrected as appropriate.
- 8.4 **REGULATORY HAZARD:** A regulatory hazard pertains to permits, posting, record keeping, reporting requirements, or procedure deficiencies not directly affecting the safety and health of the employees. These deficiencies are noted on Attachment C: *Report of Unsafe Condition or Practice* for further review by the Safety Committee and is corrected as appropriate.

## 9.0 TRAINING AND INSTRUCTION

All employees, including managers and supervisors, shall have training and instruction on general and job-specific safety and health practices. Training and instruction shall be provided as follows and documented using Attachment B: Safety Meeting/Training Attendance Record, or equivalent:

- a. When the IIP Program is first established.
- b. To all new employees.
- c. To all employees given new job assignments for which training has not previously provided.
- d. Whenever new substances, processes, procedures or equipment are introduced to the workplace and represent a new hazard.
- e. Whenever the employer is made aware of a new or previously unrecognized hazard.
- f. To supervisors to familiarize them with the safety and health hazards to which workers under their immediate direction and control may be exposed.
- g. To all employees with respect to hazards specific to each employee's job assignment.

## 10.0 RECORD KEEPING

The following safety records will be kept on file with Public Works for a minimum of 3 years.

- a. Incident investigations.
- b. Safety Inspections.
- c. Safety training records including the date of the training, the name of the person conducting the training, and a description of training contents.
- d. Staff safety meetings including the names of attendees, the date and any safety items discussed.
- e. Unsafe Condition or Practice Reports and corrective actions taken





**ATTACHMENT B**

**Safety Meeting/Training Attendance Record**

TRAINING TOPIC: \_\_\_\_\_ DATE: \_\_\_\_\_

TRAINING LOCATION: \_\_\_\_\_

TRAINER: 

Print:	Sign:
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TRAINING SUMMARY  
 (attach training  
 handouts, fliers, etc):  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

NAME (please print)	SIGNATURE	DEPT.
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
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18.		
19.		
20.		

**ATTACHMENT C  
Report of Unsafe Condition or Practice**

Describe below the unsafe working condition, work practice, activity or equipment that you feel may result in injury or illness, workflow interruption or property damage. Forward the completed report to the Safety Committee. Please keep a copy for your records. Unsafe practices should also be reported to the Responsible Person who will take immediate action if necessary

\_\_\_\_\_ **CHECK HERE IF YOU BELIEVE IMMEDIATE ACTION IS REQUIRED.**

<b>Name of Person Submitting This Report: (Optional)</b>		<b>Date:</b>
<b>Location of Concern:</b>		<b>Building/Room:</b>
<b>Description of Unsafe Condition or Practice</b> (If an injury, illness or work-flow interruption has resulted from this, please include details.):		
<b>Diagram of Situation</b> (if applicable):		
<b>Suggested Remedial Action:</b>		
<input type="checkbox"/> <b>Received by Safety Committee</b> <input type="checkbox"/> <b>Received anonymously</b>		<b>Date:</b>
<b>Reviewed by Safety Committee:</b> <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>		<b>Date:</b>
<b>Referred to for remedial action (Name):</b>		<b>Date:</b>
<b>Remedial Action Taken:</b>		
When completed file in Public Works Safety Files		



**Attachment D-2  
Unsafe Condition Exception Report**

		<b>Imminent Hazard - Class #1</b> Immediate threat to life or health. Serious injury or fatality likely. Requires immediate corrective action. Hazard area "off-limits" until corrected.	<b>Serious Hazard - Class #2</b> Potential threat to life or health. Serious injury or fatality not likely. Requires corrective action in 2 weeks. Hazard area "off-limits" until corrected.	<b>General Hazard - Class #3</b> Low Risk hazard that may affect safety & health. Possibility of minor injury. Includes regulatory deficiencies. Corrective action as appropriate.		
Inspection Date	Unsafe Condition	Recommended Action and/or Comments		Hazard class	Completion Target date	Date Completed

1. This Safety Exception Report has been reviewed by:

Safety Committee      Date \_\_\_\_\_

2. Acting Safety Committee Chair will:

- Route a copy of the latest Exception Report to the Director of Public Works
- File the original

3. Safety Committee will track unsafe conditions until completed



**ATTACHMENT E**

Incident Data Gathering Form (page 2)

**Step 4: Summarize the root cause that contributed most significantly to this incident.**

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**Step 5: Corrective Actions:**

A. Taken: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B. Planned: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Step 6: Routing:** Route completed incident review and investigation package to Safety Committee for processing.

**Step 7: Processing**

Acting Safety Committee Chair will process the incident investigation per Attachment F **“Accident, Incident and Near Miss Investigation Procedures Flow Chart”**

- Attachments to this Report:**
1. REMIF’s Supervisor’s Incident Report (required)
  2. REMIF’s Employee’s Incident Report (required)
  3. Photos (optional)
  4. Witness Statements (optional)

**Incident Data Gathering Form (page 3)  
Identifying Contributing Factors**

<p><b>A. Equipment &amp; Tools Considerations:</b></p> <ol style="list-style-type: none"> <li>1. Was the employee using the required safety equipment and using it properly?</li> <li>2. Was the employee using the correct tools and using them properly?</li> <li>3. Did the equipment and tools function as designed?</li> <li>4. Was employee operating equipment without authority?</li> <li>5. Did employee fail to secure equipment?</li> <li>6. Were all guards in place?</li> <li>7. Did employee ignore equipment defects or bypass safety controls?</li> <li>8. Was equipment or tools unsafe to use due to poor maintenance and improper care?</li> <li>9. Did Incorrect equipment labeling or identification contribute?</li> </ol> <p><b>B. Personal Protection Equipment Considerations:</b></p> <ol style="list-style-type: none"> <li>1. Was the employee wearing the appropriate level of PPE?</li> <li>2. Was PPE inadequate (i.e. a higher level needed than required)</li> <li>3. Did the PPE malfunction?</li> <li>4. Was PPE damaged and/or poorly maintained?</li> </ol> <p><b>C. Procedural Considerations:</b></p> <ol style="list-style-type: none"> <li>1. Is there a written procedure for performing this job?</li> <li>2. Was the procedure being followed?</li> <li>3. Is the procedure insufficient (not technically correct or impractical to implement)?</li> <li>4. Is there an inconsistency between the written procedure and actual practices?</li> <li>5. Did the employee have adequate hands-on experience performing this procedure?</li> </ol> <p><b>D. Training Considerations:</b></p> <ol style="list-style-type: none"> <li>1. Was the employee trained on this task or procedure?</li> <li>2. Should this activity or procedure require training (or additional training) for employees who perform it?</li> <li>3. Was the employee performing this task according to the training they received?</li> <li>4. Is additional training needed for this employee on this job task?</li> </ol>	<p><b>E. Did Employee's Physical Conditions Contribute?</b></p> <ol style="list-style-type: none"> <li>1. Emotional stress</li> <li>2. Fatigue</li> <li>3. Medication or a medical condition</li> <li>4. The task exceeded the employee's physical capabilities</li> <li>5. Physical limitation (e.g. hearing, sight)</li> </ol> <p><b>F. Did Environmental Considerations Contribute?</b></p> <ol style="list-style-type: none"> <li>1. Temperature (cold or heat) or hazardous weather conditions</li> <li>2. Slippery or wet conditions</li> <li>3. The work area/task had a design issue</li> <li>4. Defective raw materials</li> <li>5. Poor lighting or ventilation</li> <li>6. Noise or poor communications</li> <li>7. Congestion</li> <li>8. Hot surfaces</li> <li>9. Poor storage practices</li> <li>10. Soil conditions</li> </ol> <p><b>G. Other Considerations:</b></p> <ol style="list-style-type: none"> <li>1. Failure to warn co-workers</li> <li>2. Risk taking behaviors (e.g. driving at high speeds)</li> <li>3. In a hurry/ deadline pressures</li> <li>4. Distracted/inattention</li> <li>5. Suspected substance use or abuse</li> <li>6. Horseplay</li> <li>7. Peer pressure</li> <li>8. Lack of pre-job briefing or inspection</li> <li>9. Lack of supervision</li> <li>10. Inadequate management of this task</li> <li>11. Previously identified hazard was not abated or interim safety measures not implemented</li> </ol> <p><b>Other:</b></p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
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**Attachment F  
New Employee Safety Orientation Form**

**CITY OF CLOVERDALE IIPP FORM 1  
EMPLOYEE SAFETY ORIENTATION**

NAME: \_\_\_\_\_ DATE EMPLOYED: \_\_\_\_\_

DEPARTMENT/DIVISION ASSIGNED: \_\_\_\_\_

JOB ASSIGNMENT: \_\_\_\_\_

The following items shall be discussed during orientation:

\_\_\_\_\_ City of Cloverdale safety policies and programs – employees to be given a copy of the Injury and Illness Prevention Program and be required to read it.

\_\_\_\_\_ Safety rules, both general and specific to job assignment.

\_\_\_\_\_ Safety rule enforcement (disciplinary procedures).

\_\_\_\_\_ Where, when and how to report injuries.

\_\_\_\_\_ Where, when and how to report unsafe conditions.

\_\_\_\_\_ Review of fire and emergency evacuation plan.

\_\_\_\_\_ Location and use of fire extinguishers.

\_\_\_\_\_ Requirements for safe work clothing and footwear.

\_\_\_\_\_ Importance of housekeeping (spills, orderliness, etc.)

\_\_\_\_\_ Special job hazards (chemicals, special precautions, etc.)

\_\_\_\_\_ Assignment and use of personal protective equipment

\_\_\_\_\_ Proper lifting procedures (include demonstration)

\_\_\_\_\_ Employee is certified in the following: \_\_\_\_\_

ADDITIONAL TRAINING REQUIREMENTS:

\_\_\_\_\_

IMPORTANT: If employee is transferred to another job, a new safety orientation form shall be completed.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_  
Employee

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_  
Supervisor/Manager

ORIGINAL: Employee Personnel File

**Attachment G  
Job Safe Practice Form**

***CITY OF CLOVERDALE IIPP FORM 2***

**JOB SAFE PRACTICE ORIENTATION  
PRINT ALL INFORMATION**

Employee Name \_\_\_\_\_

Job Title \_\_\_\_\_  New Hire  Transfer/Change

Department/Division Name \_\_\_\_\_

Date Orientation Started \_\_\_\_\_ Supervisor/Manager \_\_\_\_\_

**SECTION I - FACILITY DISCUSSION**

- |  |                          |  |                          |
|--|--------------------------|--|--------------------------|
| 1. Safety Bulletin Boards/Posters.....     | <input type="checkbox"/> | 7. Storage of Supplies/Materials.....          | <input type="checkbox"/> |
| 2. Exits, Stairs and Signs.....            | <input type="checkbox"/> | 8. Disposal of Hazardous Materials.....        | <input type="checkbox"/> |
| 3. Fire Extinguishing Equipment/Alarm..... | <input type="checkbox"/> | 9. Disposal of Trash/Waste.....                | <input type="checkbox"/> |
| 4. First Aid Supplies/Room.....            | <input type="checkbox"/> | 10. High Risk, Hazardous, Dangerous Areas..... | <input type="checkbox"/> |
| 5. Emergency Evacuation Procedures.....    | <input type="checkbox"/> | 11. Location of MSDS Binders....               | <input type="checkbox"/> |
| 6. Storage of Hazardous Materials.....     | <input type="checkbox"/> |  | <input type="checkbox"/> |

Date Completed \_\_\_\_\_ Supervisor's Signature \_\_\_\_\_

**SECTION II - PERSONAL SAFETY DISCUSSION**

- |  |                          |   |                          |
|--|--------------------------|---|--------------------------|
| 1. Eye Glasses, Goggles, Face Shields..... | <input type="checkbox"/> | 5. Hard Hats / Caps.....                      | <input type="checkbox"/> |
| 2. Shoes, Boots.....                       | <input type="checkbox"/> | 6. Protective Leggings, Aprons, Clothing..... | <input type="checkbox"/> |
| 3. Gloves.....                             | <input type="checkbox"/> | 7. Respirators, Masks.....                    | <input type="checkbox"/> |
| 4. Ear Plugs, Muffs.....                   | <input type="checkbox"/> | 8. Decontamination Procedures.....            | <input type="checkbox"/> |

Date Completed \_\_\_\_\_ Supervisor's Signature \_\_\_\_\_

**Attachment G  
Job Safe Practice Form**

**SECTION III - TOOLS, MACHINES AND EQUIPMENT INDOCTRINATION**

In addition to a thorough discussion of safety rules, regulations and practices, Supervisors/Managers are required to conduct "hands on" demonstrations on the safe use of all power tools, machines and equipment to be used by the employee. Special instruction and emphasis will be given on guards and safety devices and mandatory use of them by the employee.

	<u>TOOL, MACHINE OR EQUIPMENT NAME</u>	<u>NUMBER/ I.D.</u>	<u>DATE</u>	<u>SUPERVISOR'S MANAGER'S INITIALS</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____

Date Completed \_\_\_\_\_

Supervisor's/Manager's Signature \_\_\_\_\_

I have received demonstrations on the safe use of the tools, machines and equipment listed above and am aware that use of guards and safety devices is mandatory.

I understand that I will be subject to discipline if I operate any tool, machine or equipment with guards or safety devices removed, disconnected or otherwise made inoperable. Also, I understand that I will be subject to discipline if I attempt to operate any tool, machine or equipment that is locked-out, tagged-out, being repaired or is otherwise designated as "out-of-service."

Employee's Signature \_\_\_\_\_

Date \_\_\_\_\_

ORIGINAL: Employee Personnel File

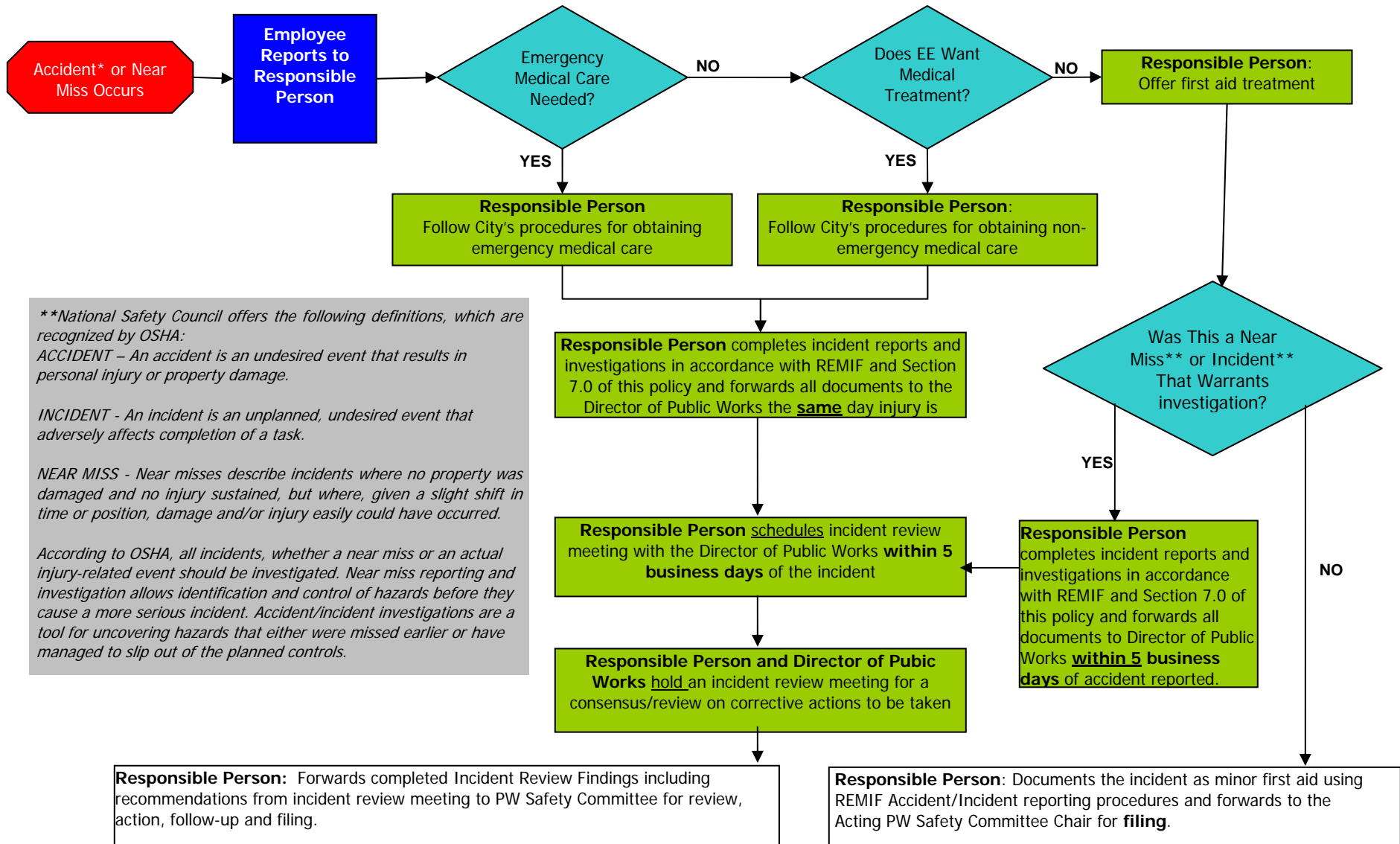
Attachment H

Safety Committee Agenda Form

Meeting Date: _____		
<u>TOPICS</u>		COMPLETION DATE
<b>1.0</b>	<b>Policy Reviews/Updates – Due or Completed</b>	
<b>2.0</b>	<b>Safety Training</b>	
2.1	<b>Quarterly Projection of upcoming Safety Training:</b>	
2.2	<b>Training Topics Completed:</b>	
2.3	<b>Upcoming Tailgates/Assignments</b>	
2.4	<b>New Employee (or Promotions) Safety Training Needed:</b>	
<b>3.0</b>	<b>Safety Events</b>	
3.1	<b>Quarterly Projection of upcoming Safety Events</b>	
3.2	<b>Safety Events Completed</b>	

TOPICS		COMPLETION DATE
<b>4.0</b>	<b>Safety Inspections</b>	
4.1	Review Safety Inspection report findings:	
4.2	Review all outstanding Unsafe Condition <i>Exception Report</i> items:	
<b>5.0</b>	<b>Unsafe Condition Reports</b>	
	<i>Report of Unsafe Conditions or Practices</i> submitted verbally or on Attachment C:	
<b>6.0</b>	<b>ACCIDENT REVIEW – Lost time injuries, illness &amp; near hit incidents. Unsafe conditions, acts, and behaviors.</b>	
<b>7.0</b>	<b>New Safety Issues</b>	

**ATTACHMENT I:  
Accident, Incident and Near Miss Investigation Procedure**



*\*\*National Safety Council offers the following definitions, which are recognized by OSHA:*  
**ACCIDENT** – An accident is an undesired event that results in personal injury or property damage.  
**INCIDENT** - An incident is an unplanned, undesired event that adversely affects completion of a task.  
**NEAR MISS** - Near misses describe incidents where no property was damaged and no injury sustained, but where, given a slight shift in time or position, damage and/or injury easily could have occurred.  
 According to OSHA, all incidents, whether a near miss or an actual injury-related event should be investigated. Near miss reporting and investigation allows identification and control of hazards before they cause a more serious incident. Accident/incident investigations are a tool for uncovering hazards that either were missed earlier or have managed to slip out of the planned controls.