

INJURY & ILLNESS PREVENTION PROGRAM
FOR
SAN JOSÉ - EVERGREEN COMMUNITY COLLEGE DISTRICT

January 18, 2017

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INTRODUCTION

In order to maintain a safe and healthful work environment San José-Evergreen Community College District has developed this Injury & Illness Prevention Program (IIPP) for all employees to follow. This document describes the goals, statutory authority, and the responsibilities of all employees under the Program, as well as the District's responsibility as an employer to provide a safe and healthful work environment. The program includes, but is not limited to, the following: Hazard Identification and Correction, Steps taken to assure Employee Compliance, Injury Incident and Near Miss Investigations, Employee Safety Training, Safety Communication, and Program Documentation. By making employee workplace safety a high priority for every administrator, supervisor and employee, the District will work together to reduce injuries and illnesses, increase productivity, and promote a safe and healthy environment for all individuals at San José-Evergreen Community College District.

GOALS

Implementation of this program will accomplish several notable goals for San José-Evergreen Community College District. Most notably it will:

1. Protect the health and safety of employees and decrease the potential risk of disease, illness, injury, and harmful exposures to District personnel.
2. Reduce workers' compensation claims and costs.
3. Improve efficiency by reducing the time spent replacing with substitutes or reassigning injured employees to temporary modified duty, as well as reduce the need to find and train replacement employees for those employees who may no longer be able to return to work.
4. Improve employee morale and efficiency as employees see that their safety is important to management.
5. Minimize the potential for penalties assessed by various enforcement agencies by maintaining compliance with Health and Safety Codes and Cal/OSHA standards.
6. San José-Evergreen Community College District recognizes that as an employer it bears the responsibility for maintaining a safe and healthful work environment for all of its employees. The District takes this responsibility seriously and will do all it can to meet this requirement.

STATUTORY AUTHORITY

- ◆ California Labor Code Section 6401.7.
- ◆ California Code of Regulations Title 8, Sections 1509 and 3203.

This manual is intended to provide each department at San José-Evergreen Community College District with the information and guidance necessary to comply with the regulations. Following is a brief summary of the required activities to comply with these laws.

- A Program Coordinator will be responsible for the implementation and maintenance of this program. Any questions can be directed to the Program Coordinator's attention.
- San José-Evergreen Community College District has developed through its negotiated collective bargaining process, disciplinary procedures and processes with regard to employee compliance with safety rules and safe work practices. It will be the responsibility of managers and supervisors to ensure that the safety rules and work practices are implemented in a fair and non-discriminating manner, as well as offering positive reinforcement and recognition for employees who do an exemplary job of promoting a safe work environment by both example and who communicate to peers on safety issues.
- Managers and supervisors are required to ensure that safety and health information is communicated to the employees within their supervision. There are suggested methods to follow in the manual; however, methods may be expanded as special circumstances related to their area dictate.
- Injury and illness hazards in the workplace must be identified. A formal self-inspection program and an equipment evaluation system have been developed to meet this requirement.
- The immediate supervisor of the employee must investigate each work-related injury or illness. Forms and procedures for this investigation are included in the Appendices of this manual.
- Deficiencies or hazards identified during a self-inspection or in an Injury Incident/Near Miss investigation must be corrected. Supervisors/managers must ensure that employees adhere to the correction. The priority of the correction of the hazardous condition should be commensurate with the hazard. **Documentation is required.** Copies of documentation must be kept in each department as well with the coordinator.
- All employees should receive appropriate training in identifying and guarding against injury and illness hazards associated with their work. Documentation is required detailing the date of the training, the topic, presenters, and the signatures of those employees in attendance. Copies of training documentation must be kept in each department as well as with the Program Coordinator or designee.

Cooperation and support are important elements in making this a successful program. Your positive, cooperative attitude is appreciated.

PROGRAM MANAGEMENT

RESPONSIBILITY

STANDARD:

The person with the authority and responsibility to implement and manage the Injury & Illness Prevention Program (IIPP) is identified as the Program Coordinator. All levels of the District administration have been informed and accept that the Program Coordinator has the authority to enforce the elements of this program, regardless of position of stature within the organization.

REQUIRED ACTIVITIES:

1. The **Vice Chancellor of Administrative Services** is identified as the Injury and Illness Program Coordinator for the District and is responsible for administering the requirements of the Program per section 3203 of Title 8 of the California Code of Regulations Industrial Safety Orders.
2. The Program Coordinator or designee will maintain overall control of the required activities, which have to occur at various intervals throughout the year. All managers and supervisors will implement the required Program activities for their respective area of responsibilities.
3. Failure on the part of managers and supervisors to implement required Program activities will result in appropriate disciplinary action.
4. The Program Coordinator, designee, or the appropriate area Manager/Supervisor will be available to answer technical questions involving self-inspections, employee training, and other aspects of the administration of this IIPP.
5. Some aspects of the IIPP will have to be implemented as appropriate at the time an Injury Incident/Near Miss occurs. For example, if an employee violates a work rule, a verbal warning should be given at the time; or if a work related injury occurs, an Injury Incident/Near Miss Investigation Report should be completed immediately.
6. Department managers and supervisors must assure that all purchase requisitions for chemicals or products containing hazardous materials include a request for Safety Data Sheets (SDS). The Purchasing Department will request from vendors Safety Data Sheets for any and all chemicals as directed by specific departments. Department managers and supervisors must ensure that SDS are received and retained by the department.
7. The Purchasing Department will also request that all tools and equipment purchased for use by District employees meet the American National Standards Institute safety standards. The ANSI standards are the guidelines used by Cal OSHA as the benchmark for its enforcement group.

MOTIVATION AND DISCIPLINE

COMPLIANCE

STANDARD:

A system should be in place to ensure that employees comply with safe and healthy work practices. This may include the use of incentives, training or retraining, and disciplinary action.

REQUIRED ACTIVITIES:

1. To encourage safe behavior on the job, first line supervisors should acknowledge their employees for performing work safely. This provides positive affirmation and encourages cooperation with the program.
2. Department managers and supervisors are encouraged to recognize employees making an exceptional contribution to the Safety Program with a brief letter (with a copy to the employee's personnel file).
3. If a supervisor observes an employee performing in an unsafe manner, he/she should determine the reason. If disciplinary action is required, the procedure identified in item # 4 below should be used. If a lack of knowledge is involved, appropriate training should be provided.
4. When an employee is uncooperative and deliberately does not support the Program or does not follow safe work practices, disciplinary action in accordance with the collective bargaining agreement should be exercised.
5. All employees will receive copies of the District General Safe Work Practices and Job Specific Safe Work Practices, upon hire and when a new job assignment is undertaken.

COMMUNICATION

REQUIRED ACTIVITIES:

1. When conducting employee meetings for any purpose, subjects relating to on-the-job safety and health issues should be included as appropriate. Examples include:
 - An injury within the department could serve as an instructional topic.
 - An identified hazard and how to work with or around it to prevent injury.
 - An unsafe work behavior observed during normal work activities.
 - The directive for everyone to observe, identify, and report defects that could cause injury to themselves or to others.
2. If an employee is exposed to a new work activity that could cause problems either immediately or in the future, a hazard specific training program should be conducted. Training could either take place at the work site under the guidance of the supervisor or it could require an off-site program.
3. Employees can often benefit by information posted in the work area. This includes safety posters, instructional visual aids, warning signs, and other media directed at employee health and safety.
4. Other written communications on subjects which may be of importance can be provided to employees directly. (Example: earthquake preparedness, fire evacuation, how to handle bomb threats, and other appropriate subjects).
5. Consider having an employee “Suggestion Box” in the work area as a way to enhance two way communication and reinforce the safety program. The Safety Recommendation Form in Appendix G. to this IIPP is available on the on the Risk Management web page of the District Services’ website.
6. Records or minutes should be kept of all meetings, training programs, postings, and other required activities in which safety issues are discussed. Copies should be sent to the Program Coordinator or designee.

HAZARD IDENTIFICATION

REQUIRED ACTIVITIES:

1. A workplace Self-Inspection Checklist has been developed for general work areas and laboratory spaces within the San José-Evergreen Community College District.
2. At a minimum of semi-annual intervals, workplace safety inspections should occur at each work area. The inspection forms can be obtained from the Program Coordinator or designee. A knowledgeable, interested employee should be selected to perform the semi-annual self-inspection. Extra checklists should be kept in the Appendix section.
3. Prior to conducting the semi-annual safety inspection, the selected employee should review general and specific safe work practices for their department.
4. The safety inspection should be a continuous, uninterrupted activity designed for the sole purpose of identifying unsafe work conditions and practices. Whenever possible, immediate corrective action should be taken to remove hazards and correct unsafe work practices.
5. Once immediate corrective actions have been taken, a copy of the Self-Inspection Checklist should be forwarded to the Program Coordinator or designee for review and appropriate filing. The Program Coordinator may submit a work order request to the Maintenance Department to address specific corrective actions. A copy should also be provided to the department manager/supervisor for the purpose of documentation for follow-up on both completed and uncompleted items.
6. All conditions determined to be deficient should be corrected within a reasonable period of time. The corrections should be done in order of importance in relation to potential injury severity, most serious identified hazards first.
7. If for some valid reason a condition is not corrected or it is postponed to some future date, proper documentation of the reason for not taking corrective action or for postponement should be included in the record.
8. The Program Coordinator or designee will follow-up to ensure that all unsafe conditions and unsafe work practices have been corrected. Records should be retained for three years.
9. New equipment, tools, and materials to be used by District employees should first be evaluated for work related injury and illness hazards by the Department Manager or Supervisor. Identified hazards should be documented and addressed in a timely manner.

INJURY INCIDENT/NEAR MISS INVESTIGATIONS

REQUIRED ACTIVITIES:

1. All employees should know and understand that they are to report all work-related injuries, illnesses or near misses to their supervisor immediately at the time the injury, illness or near miss takes place. A near miss is defined as an activity or event in which an injury could have occurred, but did not (for example a tool falls from an elevated platform and narrowly misses an unprotected worker below). Please see Near Miss Reference Guide & Checklist in Appendix B.
2. As soon as possible following a work-related injury or illness (or after first aid treatment has been administered), the manager/supervisor should complete the Supervisor's Report of Employee Injury/Incident form and send it to the Benefits Analyst within two (2) business days of the injury/incident. The manager/supervisor should conduct a comprehensive investigation of the injury/incident by using the Injury Incident Reference Guide & Checklist in Appendix B. The focus of the investigation should be to identify unsafe conditions or work practices that may have caused the injury or illness. A completed Supervisor's Injury/Incident Investigation Report form should be sent to the Benefits Analyst in Human Resources within five (5) business days. The Benefits Analyst should send a copy to the Program Coordinator or designee. Worker's Compensation forms (DWS-1 and Form 5020) should not be delayed pending completion of the above forms.
3. Whenever practical and necessary, corrective action should be identified. Corrective action can and should include training, retraining, physical alterations of the work place, and in some cases disciplinary action.
4. The Program Coordinator or designee will maintain a log for all Injury Incident Investigation Reports so that a follow-up can be made to ensure that corrective action was taken. The log shall include the date reported, the location of the incident, a brief description of the incident, any action taken and the date such action is taken, and whether the matter is resolved.
5. The Supervisor's Injury/Incident Investigation Report form and Supervisor's Injury/Incident Investigation Report form for San José-Evergreen Community College District can be found in Appendix A of this Injury & Illness Prevention Program. The Injury Incident Investigation Quick Reference Guide & Checklist and Near Miss Quick Reference Guide & Checklist can be found in Appendix B.

HAZARD CORRECTION

REQUIRED ACTIVITIES:

1. All employees, especially managers and supervisors, have the responsibility to observe, identify, and report unsafe conditions as part of their responsibilities.
2. Identifying and correcting unsafe work practices and conditions is a required activity within this program and must be taken seriously. No employee will be disciplined, retaliated against, or discriminated against for reporting an unsafe condition.

When an unsafe condition or equipment is reported, the supervisor or manager shall prepare a written statement of the condition and correct it immediately, if appropriate, or notify the proper Department for corrective action. Assuring correction or replacement of unsafe equipment and/or conditions is the responsibility of the department administrator to which the condition/equipment belongs. Records of the correction of the unsafe condition/equipment, such as work orders, shall be maintained by the Department. The department administrator is responsible for assuring that a semi-annual Safety Inspection Report is completed each semester using the appropriate Self-Inspection Checklist found in Appendix C.

3. The Injury/Incident Investigation Form shall be maintained by the Program Coordinator or designee for future reference. This documentation should include the corrective action to be taken or the decision not to take any action. Documentation should be retained for at least three years or as required by state and federal law.
4. When an imminent hazard exists which cannot be immediately abated without endangering employee(s) and/or property, remove all exposed personnel from the area except those necessary to correct the existing condition. Employees necessary to correct the hazardous condition shall be provided with the necessary safeguards.

TRAINING

REQUIRED ACTIVITIES:

1. The Safe Work Practices, which apply to job categories throughout the District, have been developed by managers and supervisors. Safe Work Practices are intended to be the core of the safety and health training at San José-Evergreen Community College District.
2. Each existing employee shall receive a copy of the Safe Work Practices that applies to his/her job upon hire and the adoption/update of the IIPP. The employee is required to read and understand the material and then sign the Orientation Checklist Form as indication of receipt of a copy of the IIPP and Safe Work Practices for the specific job.
3. It should be the responsibility of the immediate supervisor to provide each employee with a copy of the Safe Work Practices, at which time the supervisor should determine whether or not the employee has a complete understanding of the material. Questions and discussion of the Safe Work Practices are encouraged. Supervisors are required to be familiar with the job hazards of all employees for whom they are responsible.
4. Each new hire or existing employee assigned to a new department or job should receive a copy of the Safe Work Practices prior to beginning work. The procedure should be similar to that discussed above (item 3); it is a requirement of this program that no employee actually perform any on-the-job activity without receiving a copy of the Safe Work Practices, and having the opportunity for discussion and receiving proper safety training.
5. General workplace safety and health practices include, but are not limited to:
 - Implementation and maintenance of the IIPP Program.
 - Implementation and maintenance of the District's Emergency Operations Plan.
 - Provisions for medical services and first aid including emergency procedures.
 - Prevention of musculoskeletal disorders, including proper lifting techniques.
 - Proper housekeeping, (ex., keeping stairways and aisles clear, work areas neat and orderly, and spills promptly cleaned up.
 - Prohibiting horselplay, scuffling, or other acts that tend to adversely influence safety.
 - Proper storage to prevent stacking goods in an unstable manner and storing goods against doors, exits, fire extinguishing equipment and electrical panels.
 - Proper reporting of hazards and accidents to supervisors.
 - Hazard communication, including worker awareness of potential chemical hazards, and proper labeling of containers.
 - Proper food storage and handling of toxic and hazardous substances.

6. The following methods are available for providing safety and health training to our employees.

- Safe Work Practices – for all employees
- Safety Meetings
- Operator Certification Training for specific equipment
- Outside Seminars – In select situations
- Guest Speakers – Effective training for large groups
- Video recordings – Effective training medium available from varied sources in the area
- Safety Newsletters – Available through Keenan Safe Colleges

Record keeping is a very important aspect of the IIPP. Training is one of the subjects that require very accurate documentation and record keeping.

Each department is responsible to document training of its employees.

Training documentation must contain:

- Name of Employee
- Date of Training
- Topic Covered
- Source or Provider
- Training records should be retained for at least three years or as required by state and federal law

7. A sample training documentation form is included in Appendix to the IIPP.

DOCUMENTATION

Many standards and regulations of Cal/OSHA contain requirements for the maintenance and retention of records for occupational injuries and illnesses, medical surveillance, exposure monitoring, inspections, and other activities relevant to occupational health and safety. To comply with these regulations, as well as to demonstrate that the critical elements of this Injury & Illness Prevention Program are being implemented, the following records will be kept on file in the District Office or school site for at least the length of time indicated below:

1. Copies of all Self-Inspection Checklists should be retained for 1 year.
2. Copies of all Injury Incident/Near Miss Investigation Forms should be retained for 5 years.
3. Copies of individual Employee Training Checklists and related Training Documents should be retained for at least three years, or for the duration of each individual's employment, whichever is greater.
4. Copies of all Safety Meeting Attendance Sheets should be retained for 1 year.
5. The General Training Documentation forms for San Jose-Evergreen Community College District can be found in Appendix D of the Injury & Illness Prevention Program.

The District or College will ensure that these records are kept in their files, and present them to Cal/OSHA or other regulatory agency representatives if requested. A review of these records will be conducted by the Program Coordinator or designee during routine program reviews to measure compliance with the Program.

A safe and healthy workplace must be the goal of everyone at San Jose-Evergreen Community College District, with responsibility shared by management and staff alike. If you have any questions regarding this Injury & Illness Prevention Program, please contact the District Office Risk Manager at (408) 270-6440.

RECORDKEEPING

We are a local governmental entity (county, city, district, or and any public or quasi-public corporation or public agency) and we are not required to keep written records of the steps taken to implement and maintain our IIP Program. Public agencies including Community College Districts are not required to maintain OSHA 300 logs as long as an alternative method is available to review injury history, upon request. That resource is available through the NCCC Pool WC JPA.

APPENDIX A

**SUPERVISOR'S REPORT OF EMPLOYEE INJURY/ILLNESS
SUPERVISOR'S INJURY/INCIDENT INVESTIGATION REPORT**

supervisor's report of employee injury/illness



To Be Completed by Supervisor to Describe an Incident that Resulted in an Employee Injury:

EMPLOYEE'S FIRST & LAST NAME: _____ EMPLOYEE ID# _____

DATE OF INJURY/INCIDENT: _____ DATE REPORTED: _____

TIME OF INCIDENT: _____ *a.m.* _____ *p.m.* DATE/TIME REPORTED: _____ *a.m.* _____ *p.m.*

INCIDENT LOCATION: SJCC EVC DO MILP OTHER _____ BUILDING/AREA: _____

TYPE OF INJURY: _____

WAS CAMPUS POLICE CONTACTED: YES NO UNKNOWN/NOT AT THIS TIME

DID EMT/FIRE DEPARTMENT RESPOND: YES NO Check here if employee was transported to hospital

DID EMPLOYEE LEAVE WORK: YES NO UNKNOWN/NOT AT THIS TIME

WAS MEDICAL ATTENTION NECESSARY: YES NO UNKNOWN/NOT AT THIS TIME

DID EMPLOYEE CONTINUE WORKING: YES NO

1. DESCRIBE HOW THE INCIDENT OCCURRED: _____

2. DESCRIBE WHAT STEPS HAVE BEEN/WILL BE TAKEN TO PREVENT SIMILAR INCIDENTS: _____

Completed by: _____
Please Print

Supervisor's Signature _____ Date _____

**MAIL THIS COMPLETED FORM TO THE BENEFITS ANALYST IN HUMAN RESOURCES
OR YOU MAY FAX IT TO 408.239.8804**

supervisor's injury/incident investigation report



Information contained in this form is to be kept **CONFIDENTIAL**. It is to be completed by the supervisor and provided to the Benefits Analyst in Human Resources when a workers' compensation claim is filed.

NAME OF INJURED EMPLOYEE: _____

JOB TITLE: _____

DATE OF INJURY/ILLNESS: _____ **DATE REPORTED:** _____

_____ **DATE/TIME REPORTED:** _____ a.m.
p.m.

INCIDENT LOCATION: EVC SJCC DO **BUILDING/AREA:** _____
 MILP OTHER

WITNESSES (Name, Phone Number): 1. _____
2. _____
3. _____

TIME REPORTED: _____ a.m. **TIME ON SCENE:** _____ a.m. **TIME OFF SCENE** _____ a.m.
p.m. p.m. p.m.

FIELD INVESTIGATION:

EXACT LOCATION OF INCIDENT: _____
 EVC SJCC DO **BUILDING/AREA:** _____
 MILP OTHER

Completely describe the location of the incident including lighting, walking surface, weather, measurements, and any other condition that could have contributed to or prevented the incident:

Describe injuries/illnesses which you observed or which were described to you:

Describe demeanor of person(s) involved and include statements made as "Excited Utterances":

Describe shoes, physical appearance or any other characteristics that would contribute to understanding how the accident occurred:

APPENDIX B

**QUICK REFERENCE GUIDE FOR INJURY/INCIDENT INVESTIGATION
INJURY/INCIDENT INVESTIGATION CHECKLIST
NEAR MISS INVESTIGATION CHECKLIST**

QUICK REFERENCE GUIDE For INJURY/INCIDENT INVESTIGATION

This quick REFERENCE GUIDE IS INFORMATION FOR Supervisors and Managers to use while investigating work related injuries and illnesses. Remember that prior to investigation an accident; employees should be trained to report injuries to their supervisor, no matter how minor it may be. “Near-accidents” should also be reported and investigated by the supervisor. Please follow these 4 easy steps when investigating work related injuries:

- Step 1:**
- A.** Act at once. Talk with the injured employee immediately if possible (one on one is best). Use fact-finding, not fault-finding questions to determine what occurred. Ask the injured person or a witness to show you how the accident happened. Use the Accident Investigation Checklist (attached) for a list of sample questions that you may need to ask during an investigation.
 - B.** Review physical causes, such as poor housekeeping, improper guards, improper apparel (such as a lack of properly soled shoes or safety shoes, eye, hand or head protection), defective equipment, slippery floors, or other working conditions. Completely describe location of incident; including lighting, walking surface, weather measurements, and any other condition that could have contributed to or prevented the incident.
 - C.** Review personal causes, such as dangerous practices, inability, inexperience, poor judgement, and disobeying rules.
 - D.** Trace down each item of information to find every contributory cause. Decide the necessary preventative measures to prevent similar accidents in the future. Report any defective equipment to the person responsible.
 - E.** Non-injury accidents (an accident that nearly caused an injury of any severity) should also be investigated.
- Step 2:** Complete a Supervisor’s Injury/Incident Investigation Report (Appendix A) form within 24 hours of the incident. Describe how the incident occurred; state facts, contributing factors, cite witnesses, and support evidence. Keep a copy for your records and send the original to the Benefits Analyst in Human Resources.
- Step 3:** Provide injured employee with a “Claim Packet for Injured Worker (all forms)” which includes the form DWC-1 to file a claim **within 24 hours of your knowledge of the injury/illness**. If immediate medical attention was necessary notify the Benefits Analyst in Human Resources to discuss alternate ways to provide the packet to the injured/ill worker.
- Step 4:** Follow-up with the employee after he or she receives treatment to find out if they are doing well. In addition, ensure contributing factors to the accident, if any, are fixed (work orders sent), and all exposed employees are aware of the contributing causes of the accident.

INJURY/INCIDENT INVESTIGATION CHECKLIST

When you are involved in an injury/incident investigation, the notes you take will be important to determine what happened and to give clues for avoiding future incidents. The information that you record should focus on **who, what, when, where, how, and why** facts of the incident. This list of sample questions is to be asked during an investigation to help you document the many aspects of the injury/incident scene.

Who...

- Was involved in the incident?
- Was injured?
- Witnessed the incident?
- Reported the incident?
- Notified Campus Police?

What...

- Happened?
- District property was damaged
- Evidence was found?
- Was done to secure the incident scene?
- Was done to prevent the recurrence of the incident?
- Level of medical care did the employee require?
- Was being done at the time of the incident?
- Tools were being used?
- Was the employee told to do?
- Machine was involved?
- Operation was being performed
- Instructions had been given?
- Precautions were necessary?
- Protective equipment should have been used?
- Did others do to contribute to the incident?
- Did witnesses see?
- Safety rules were violated?
- Safety rules were lacking?
- New safety rules or procedures are needed?

When...

- Did the incident happen?
- Was it discovered?
- Was the incident reported?
- Did the employee begin the task?
- Were the hazards pointed out to the employees?
- Did the supervisor last check the employee's progress?

Where...

- Did the accident happen?
- Was the employee's supervisor when the incident occurred?
- Were co-workers when the incident occurred?
- Were witnesses when the incident occurred?
- Does this condition exist elsewhere in the facility?
- Is the evidence of this investigation going to be kept?

How...

- Did the incident happen?
- Was the incident discovered?
- Were employees injured?
- Was the equipment damaged?
- Could the incident have been avoided?
- Could the supervisor have prevented the incident from happening?
- Could co-workers avoid similar incidents?

Why...

- Did the incident happen?
- Were employees injured?
- Did the employee(s) behave that way?
- Was protective equipment not used?
- Weren't specific instructions given to the employee?
- Was the employee in that specific position or place?
- Was the employee using that machine or those tools?
- Didn't the employee check with the supervisor?
- Was the supervisor not there at the time?

NEAR MISS INVESTIGATION CHECKLIST

When you are involved in an investigation of a *near miss* incident, the notes you take will be important to avoid future incidents. The information that you record should focus on *who, what, when, where, how*, and *why* facts of the *near miss* incident. This list of sample questions is to be asked when investigating a near miss incident to assist you with documenting the many aspects of the incident to avoid recurrence which could include injury and/or loss of property and equipment.

Who...

- Was involved in the incident?
- Was almost injured?
- Witnessed the incident?
- Reported the incident?
- Notified Campus Police, if needed?

What...

- Happened?
- District property was damaged?
- Evidence was found?
- Was done to secure the incident scene?
- Was done to prevent the recurrence of the incident?
- Was being done at the time of the incident?
- Tools were being used?
- Was the employee told to do?
- Machine was involved?
- Operation was being performed
- Instructions had been given?
- Precautions were necessary?
- Protective equipment should have been used?
- Did others do to contribute to the incident?
- Did witnesses see?
- Safety rules were violated?
- Safety rules were lacking?
- New safety rules or procedures are needed?

When...

- Did the incident happen?
- Was it discovered?
- Was the incident reported?
- Did the employee begin the task?
- Were the hazards pointed out to the employees?
- Did the supervisor last check the employee's progress?

Where...

- Did the incident happen?
- Was the employee's supervisor when the incident occurred?
- Were co-workers when the incident occurred?
- Were witnesses when the incident occurred?
- Does this condition exist elsewhere in the facility?
- Is the evidence of this investigation going to be kept?

How...

- Did the incident happen?
- Was the incident discovered?
- Was the equipment damaged?
- Could the incident have been avoided?
- Could the supervisor have prevented the incident from happening?
- Could co-workers avoid similar incidents?

Why...

- Did the incident happen?
- Did the employee(s) behave that way?
- Was protective equipment not used?
- Weren't specific instructions given to the employee?
- Was the employee in that specific position or place?
- Was the employee using that machine or those tools?
- Didn't the employee check with the supervisor?
- Was the supervisor not there at the time?

APPENDIX C

SELF-INSPECTION CHECKLIST

SAN JOSE-EVERGREEN COMMUNITY COLLEGE DISTRICT
OFFICE SAFETY INSPECTION CHECKLIST

Date: _____ Locations: _____ Phone: _____

Supervisor: _____ Department: _____

Inspector: _____ Job Title: _____

ADMINISTRATION AND TRAINING

- | YES | NO | N/A | |
|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Does the department have a written injury & Illness Prevention Plan? Are all departmental safety records maintained in a centralized file for easy access? Is it current? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Have all the employees attended an IIPP training class? If not, what percentage has received training? _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Does the department have a completed Emergency Action Plan? Percentage completed? _____ Is training being provided to employees on its contents? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Are chemical products used in the office? (Are Safety Data Sheets maintained?) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. Are the CalOSHA Information Poster, Workers' Compensation Bulletin, Annual Accident Summaries (when required), and Emergency Response Guide flipchart posted? Is the Safety Briefs newsletter being sent to the area? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6. Are annual workplace inspections being performed? Are records being maintained? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 7. Has there been any employee accidents from this department? Are there Supervisor's Injury/Incident Investigation Reports (Appendix A) completed for each accident? |

GENERAL SAFETY

- | | | | |
|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8. Are all exits, fire alarms, pull boxes, extinguishers, sprinklers, and fire notification devices clearly marked and unobstructed? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 9. Are all aisles/corridors unobstructed to allow unimpeded evacuations? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 10. Is a clearly identified, charged, currently inspected and tagged, wall-mounted fire extinguisher available within 75 feet of all work areas? (no empty wall hooks, charge needles in the red, missing plastic pin tabs or extinguishers on the floor?) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 11. Are ergonomic issues being addressed for administrative personnel using computers? |

SAN JOSE-EVERGREEN COMMUNITY COLLEGE DISTRICT

GENERAL SAFETY (Continued)

- | YES | NO | N/A | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 12. Is a fully stocked first-aid kit available? Do all employees in the area know its location? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13. Are all cabinets, shelves, or furniture above 5 feet in height secured to prevent toppling during an earthquake? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 14. Are all books and supplies stored so as not to fall during an earthquake? (Store heavy items low to the floor, shelf lips on shelves above work areas.) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 15. Is the office kept clean of trash and other recyclable materials removed promptly? |

ELECTRICAL/MECHANICAL SAFETY

- | | | | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 16. Are all plugs, cords, electrical panels, and receptacles in good condition (no exposed conductors or broken insulations)? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 17. Are all circuit breaker panels accessible with each breaker appropriately labeled? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 18. Are fused power strips being used in lieu of receptacle adapters? Are additional outlets needed in some areas? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 19. Is lighting adequate throughout the work environment? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 20. Are extension cords being used correctly? (They must not be run through walls, doors, ceilings; not represent a trip hazard running across aisle ways; not to be used as a permanent source of electrical supply--use fused outlet strips or have additional outlets installed; not be linked together. No "thin" zip cords.) |

COMMENTS

SAN JOSE-EVERGREEN COMMUNITY COLLEGE DISTRICT

LABORATORY SAFETY INSPECTION CHECKLISTS

Building: _____ **Department:** _____ **Date:** _____

Inspector: _____ **Room:** _____

Job Title: _____ **Phone Number:** _____

HEALTH AND SAFETY MANAGEMENT

- | YES | NO | N/A | |
|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Is there a Chemical Hygiene Program present? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Are personnel trained in chemical health/physical hazards and laboratory safety? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Do lab personnel have access to and are familiar with the use of Safety Data Sheets? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Have personnel using biohazards, toxins, and regulated carcinogens been given documented special training? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. Are personnel instructed in emergency procedures (exits, location, and use of fire extinguishers, medical)? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6. Have personnel been instructed on how to respond in the event of a chemical spill? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 7. Are complete training records and comments available for review by Human Resources, Risk Management and outside agencies? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8. Have all hazards identified by the annual survey been abated? (Actions records must be retained.) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 9. Do laboratory personnel perform semi-annual lab inspections? (PI must retain records.) |

GENERAL SAFETY

- | | | | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 10. Are rooms and cabinets containing regulated carcinogens, biohazards, and radioactive materials labeled? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 11. Are work areas clean and uncluttered? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 12. Do employees know the location of the first aid kit and is it accessible? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13. Is equipment greater than 5 feet tall seismically secured to prevent tipping during an earthquake? |

SAN JOSE-EVERGREEN COMMUNITY COLLEGE DISTRICT

GENERAL SAFETY (Continued)

YES	NO	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	14. Do shelves have lips, wires, or other seismic restraints to prevent items from falling?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	15. Are food and beverages kept away from work areas and out of laboratory refrigerators or cabinets?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	16. Are fire extinguishers accessible and charged? (If not please call the Maintenance Department.)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	17. Are sinks labeled, "Industrial Water - Do Not Drink"?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18. Have personnel been instructed on the hazards of wearing contact lenses in the laboratory?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	19. Are protective gloves available and worn for laboratory procedures where skin absorption/irritation may occur?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	20. Are safety glasses or other eye protection available and worn in the laboratory?

COMMENTS

Biosafety Cabinet: Date last inspected? _____

Types of regulated carcinogens: _____

Types and quantity of compressed gasses: _____

Gallons of flammable liquids: _____

Types of personnel protective equipment: _____

SAN JOSE-EVERGREEN COMMUNITY COLLEGE DISTRICT

LABORATORY EQUIPMENT

- | YES | NO | N/A | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 21. Have chemical fume hoods been tested within the past year? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 22. Is storage in hoods kept to a minimum and is it placed so it does not impede proper airflow? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 23. Does fume hood draw air (test with a tissue on hood edge) and is alarm installed and working? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 24. Is the lab ventilation negative with respect to corridors and offices? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 25. Are rotating or moveable parts and belts guarded with screens having less than 1/4 inch opening? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 26. Are refrigerators and freezers, which are used for storage of flammables, spark proof and properly labeled? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 27. Are non-spark proof refrigerators labeled as "Unsafe for Flammable Storage"? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 28. Are all gas cylinders restrained to prevent tipping or falling? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 29. Are valves of gas cylinders capped when not in use? |

HAZARDOUS MATERIALS

- | | | | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 30. Are chemicals labeled to identify contents and hazards? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 31. Are regulated carcinogens handled safely to reduce employee exposure? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 32. Are chemicals separated by hazard class and stored to prevent spills (acids, bases, oxidizers, flammables, etc.)? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 33. Are chemicals inventoried (chemical name, quantity on hand, amount used per year)? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 34. Are chemical wastes properly segregated and stored with Waste Pick-Up Tags attached to the containers? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 35. Are all hazardous waste disposed of and not poured into the sewer system? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 36. Is a plumbed emergency eyewash station available within 100 feet of all areas where chemicals may splash onto an employee's body? |

SAN JOSE-EVERGREEN COMMUNITY COLLEGE DISTRICT

HAZARDOUS MATERIALS (Continued)

- | YES | NO | N/A | |
|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 37. Is a plumbed emergency eyewash station available within 100 feet of all areas where chemicals may splash or mechanical hazards such as grinding? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 38. Are either and other peroxide formers dated? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 39. Are sharps stored in puncture-proof containers and labeled appropriately (infectious waste or hazardous waste)? |

FIRE AND ELECTRICAL SAFETY

- | | | | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 40. Are fire doors unobstructed and readily closeable? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 41. If greater than 10 gallons of flammables are stored, is an approved flammable storage cabinet used? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 42. Are flammable liquids stored in less than 10gallon quantity or kept in less than 2-gallon safety cans? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 43. Are flammable liquids limited to 60 gallons per fire area? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 44. Are plugs, cords, and receptacles in good condition (no splices or frayed cords?) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 45. Is all equipment properly grounded? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 46. Are extension cords used? (These are not to be used in place of permanent wiring, running through walls, ceilings, doors, etc.) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 47. Are all electrical boxes, panels, receptacles, and fittings covered to protect against electrical shock? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 48. Are control switches, circuit breakers, electrical panels, and emergency power cabinets free of obstructions? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 49. Are circuit breakers labeled to indicate what equipment is served by each? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 50. Have all outlet adapters been removed? (Install additional outlets or use fused power strips if current demand is within the strip's rating.) |

COMMENTS

SAN JOSE-EVERGREEN COMMUNITY COLLEGE DISTRICT

FACILITY SAFETY INSPECTION CHECKLISTS

Building: Department: Date:

Inspector: Room:

Job Title: Phone Number:

ADMINISTRATION AND TRAINING

- YES NO N/A 1. Have all employees received General Safety Training (fire, earthquake, VDTs, lifting, emergency evacuation, etc.)? 2. Are all employees familiar with the use of Safety Data Sheets (SDS)? 3. Have all employees been instructed on how to operate the equipment they are required to use? 4. Have all employees been trained on how to protect themselves from the hazards identified in their work area? 5. Are all employees current on any specialized training (lockout, confined space, respirators, etc.,) needed? 6. Are all training records up to date for each employee? 7. Do all employees have access to the Departmental Emergency Action Plan and know their responsibilities? 8. Is the CalOSHA information poster, Workers' Compensation Bulletin and Annual Injuries & Illness Summaries posted?

FIRE SAFETY

- 9. Are all fire exits clearly marked and unobstructed? 10. Is trash, debris, and oily rags removed from the shop daily? Are metal cans available for storage of oily rags? 11. Are all aisles cleared for at least a 44-inch pathway and building exit corridors completely clear for safe egress?

SAN JOSE-EVERGREEN COMMUNITY COLLEGE DISTRICT

FIRE SAFETY (Continued)

- | YES | NO | N/A | |
|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 12. Are all flammable solvents in excess of 10 1-gallon containers stored in approved flammable storage cabinets? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 13. Are spray-painting operations, which employ flammable materials, conducted inside spray booths? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 14. Are flammable and combustible materials stored at least 25 feet away from heat or ignition sources? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 15. Are flammable gas cylinders are stored at least 25 feet away from oxygen cylinders or ignition sources? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 16. Are fire separators intact (no holes in firewalls, no doors to exit corridors propped open, etc.)? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 17. Are charged, wall-mounted fire extinguishers (of the appropriate type) available within 75 feet of all workstations? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 18. Are employee workstations arranged to be comfortable without unnecessary strain on backs, arms, necks, etc.? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 19. Is there an inspection card attached to each fire extinguisher and are monthly inspections properly documented? |

ELECTRICAL SAFETY

- | | | | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 20. Are all plugs, cords, panels, and receptacles in good condition (no exposed or broken insulation?) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 21. Are all circuit breaker panels accessible with labels identifying each switch's function? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 22. Are plug adapters banned? (Install additional outlets or properly rated fused power strips in lieu of plug adapters.) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 23. Is permanent building wiring installed away from public contact (in conduit, raceways, or walls)? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 24. Are Ground Fault Circuit Interrupters available for use in wet areas? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 25. Are the wheels on rolling files or other mobile equipment free from binding when rolled? |

SAN JOSE-EVERGREEN COMMUNITY COLLEGE DISTRICT

ELECTRICAL SAFETY (Continued)

- | YES | NO | N/A | |
|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 26. Are extension cords in use? (These are not to be run through walls, ceilings, or doors, and are not safe for permanent equipment. Unplug extension cords daily or replace with fused power strips if current demand is within the strip's rating; otherwise, install additional outlets to reach equipment. Do not link extension cords together.) |

MECHANICAL SAFETY

- | | | | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 27. Is defective equipment promptly repaired? (If defects pose an imminent danger, then remove out of service.) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 28. Are all the machine guards for belts, gears, and points of operation in place and adjusted properly? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 29. Are machine and tool switches safe (easy access to disengage, stay off if de-energized and re-started)? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 30. Are gas welding torches equipped with flashback arrestors? Are arc welders properly grounded with safe wiring? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 31. Are air tanks greater than 1.5 cubic feet (11.22 gal.) capacity inspected as evidence by a current posted CalOSHA permit? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 32. Are cranes, slings, ropes, hoists, jacks, jack stands, etc., inspected prior to each use and used safely? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 33. Are floors maintained clean, spills wiped up promptly, and anti-slip materials used where moisture is prevalent? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 34. Are all cabinets, shelves, and equipment greater than 5 feet high secured to prevent injury to custodial personnel? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 35. Are cutting blades disposed of in rigid containers to prevent injury to custodial personnel? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 36. Are guardrails installed around floor openings and lofts, along catwalks, etc., to prevent employee falls? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 37. Are potable water, soap, and towels available for hand washing? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 38. Are all plumbing fixtures served by Industrial Water labeled to prohibit drinking? |

SAN JOSE-EVERGREEN COMMUNITY COLLEGE DISTRICT

MECHANICAL SAFETY (Continued)

- | YES | NO | N/A | |
|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 39. Are forklifts inspected frequently for defects, equipped with proper safety devices and operated safely? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 40. Are excessive noise levels adequately controlled? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 41. Is an approved first aid kit available and its location known to all employees? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 42. Are stacked and shelved items stored to prevent falling during an earthquake? (Advise installing 2 inch shelf lips or other means of restraining items, especially above exits and employee workstations.) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 43. Are cross-connections between potable water and sewer inlets promptly abated (remove hoses which extend into sinks or down drains), and leaking backflow protection devices promptly repaired? |

HAZARDOUS MATERIALS/PERSONAL PROTECTION

- | | | | |
|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 44. Are chemicals stored to prevent spills? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 45. Are carcinogens handled safely to reduce employee exposure? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 46. Are chemicals separated by Hazard Class (acids, bases, oxidizers, flammables, etc.)? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 47. Are chemicals inventoried with copies provided to the Risk Management Office? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 48. Are chemical wastes properly segregated and stored with Waste Pickup Tags attached to the containers? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 49. Are all hazardous wastes disposed of and not poured into the sewer system? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 50. Is a plumbed emergency shower available within 100 feet of all areas where chemicals may splash onto an employee's body? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 51. Are gloves suitable for the hazard warranting protection (chemicals, heat, friction, etc.) available? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 52. Is eye protection suitable for the hazard warranting protection (welding, chemicals, particulates, etc.) available? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 53. Is a plumbed emergency eyewash station available within 100 feet of all chemical splash or mechanical hazards such as grinding operations? |

SAN JOSE-EVERGREEN COMMUNITY COLLEGE DISTRICT

HAZARDOUS MATERIALS/PERSONAL PROTECTION (Continued)

YES	NO	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	54. Is hearing protection suitable for the hazards warranting protection available?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	55. Are safety shoes available for those employees subject to falling objects and other foot impact hazards?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	56. Are hard hats available for employees subject to falling objects, low overhead obstructions, etc.?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	57. Are aprons or other suitable clothing available for employees subject to chemicals, oils, grease, etc.?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	58. Are lockout locks and tags available for employees who work on equipment served by hazardous energy sources?

COMMENTS

APPENDIX D

EMPLOYEE SAFETY TRAINING DOCUMENTS

TRAINING ATTENDANCE SHEET

DATE: _____ TIME: _____ INSTRUCTOR: _____

COURSE: _____

LOCATION: _____

SIGNATURE

NAME (PRINTED)

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APPENDIX E

DEPARTMENT/STAFF SAFETY MINUTES

APPENDIX F

EMPLOYEE SAFETY RECOMMENDATION FORM

Employee Safety Recommendation Form

Location:

Department:

Supervisor:

Date:

Identification of Safety or Health Hazard

Suggestion for Abatement of the Safety or Health Hazard

DO NOT WRITE BELOW THIS LINE

Date complaint was investigated:

Investigated by:

Action Taken:

Date Action was reported to the employee:

Comments:

Please send completed form to the attention of the Risk Manager in District Services