
**County of Sacramento
Policy and Program Regarding
Countywide Injury and Illness
Prevention**



**County of Sacramento
Department of Personnel Services
County Safety Office**

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All Forms and Checklists are available on the CSO website as Word form Fill / Print, E-Mail

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Countywide Injury and Illness Prevention Program

1. PURPOSE

This document has been created to communicate the regulatory requirements for providing an effective Countywide Injury and Illness Prevention Program (IIPP).

2. POLICY

It is the County's policy to provide for workplaces that are free from recognized hazards, the promotion of the health and wellbeing of its employees at all levels within the County, and the safeguarding of work activities to the extent that the nature of the work reasonably permits. The following Injury and Illness Prevention Program serves as the foundation for all County employee health and safety efforts, activities, programs and procedures.

3. AUTHORITY

California Labor Code, Division 5; Title 8 of the California Code of Regulations; and, County of Sacramento Code, Title 2, Chapter 2.09, Article 3, Sections 320 and 330. These foregoing citations shall be administered as they apply to specific places of County employment and occupations appurtenant thereto.

4. RESPONSIBILITIES

a. County Executive

- (1) The County Executive is responsible for the continuing implementation of this program in all County places of employment.

b. Deputy County Executives

- (1) Each Deputy County Executive is responsible for the continuing implementation of this program within their respective Service Area(s) under their direction and control.

c. Department/Office Directors & Elected Department Heads

- (1) Are responsible for the continuing implementation of this program within their respective Department/Office under their direction and control.
 - (A) Department/Office(s) may elect to implement, or may already have in place, an effective IIPP specific to their respective operation(s). In any case, the provisions of those programs shall be no less stringent than the requirements of this Policy in its full force and effect.

- (2) Shall appoint a Department/Office Safety Representative (SR) who shall be responsible for the administration of this program at the Department or Division level.
 - (A) SR's shall regularly attend the Quarterly Safety Representative meetings hosted by the County Safety Office.
 - (3) Shall designate a site specific person who shall be responsible for the daily administration of this program at the work site level, and coordinate this work with the Department/Office SR and County Safety Professionals as necessary.
 - (A) This person shall be in a position with the capacity to effect these program requirements at the workplace under their direction and control.
- d. County Safety Officer
- (1) Is responsible for the development and implementation of the Countywide employee health and safety compliance program.
 - (2) Shall administer all County employee health and safety programs.
 - (3) Shall coordinate the work of County Safety Professionals and Safety Representatives as necessary to effect a proactive program.
 - (4) Shall ensure that all County employee health and safety efforts are in compliance with applicable laws, standards and rules.
 - (5) Shall maintain adequate resources to effect the ready availability of media, information, training materials, forms and other things necessary to carry out the Countywide employee health and safety program campaign.
- e. Managers, Supervisors and Lead workers
- (1) Are responsible for carrying out the duties and responsibilities relative to occupational health and safety programs as they apply to the work being carried out within their respective areas of direction and control.
 - (2) Shall exercise due diligence in familiarizing themselves with the hazards associated with the conduct of work within their respective workplace(s).
 - (3) Shall pursue an active role in injury and illness prevention for workers under their direction and control.
 - (4) Shall ensure workers under their direction and control are provided with appropriate training, work aids, safeguards, equipment and resources to ensure health and safety in their work.

- (5) For purposes of this subsection, the term “worker” includes temporary staffing firm agents, interns, inmate workers and volunteers.
- f. Employees
 - (1) Are responsible for carrying out their work in a safe and healthful manner and as dictated by any writing, directive, program, policy, procedure or training they receive relative to the nature of their work and the conduct of their employment.
 - (2) For purposes of this subsection, the term “employees” includes temporary staffing firm agents, interns, inmate workers and volunteers.
 - g. Department/Office Safety Professionals
 - (1) Are responsible for assisting in the daily administration of the Countywide employee health and safety program at the Department/Office(s) or Division(s) to which they are assigned.
 - (2) Are responsible for implementing employment specific employee health and safety programs and procedures as applicable to their respective operations.
 - h. County Safety Office (CSO)
 - (1) Is responsible for assisting in the daily administration of the Countywide employee health and safety program.
 - (2) Shall carry out County employee health and safety programs and maintain a functional responsibility for health and safety activities within the County Department/Office(s) or Division(s) to which they are assigned.

5. COMPLIANCE

- a. All County employees are expected to comply with the provisions of this and any other applicable employee health and safety program(s), procedure(s) or directive(s) as a condition of employment.
 - (1) Any employee who willfully disobeys employee health and safety program(s), procedure(s) or directive(s) may be subject to progressive discipline in accordance with civil service rules and established personnel procedures.
- b. County Department/Office(s) are encouraged to utilize the County Employee Recognition program to recognize employees who continually strive to meet or exceed employee health and safety expectations.
- c. County Department/Office(s) are encouraged to utilize any other reasonable and proactive means to ensure employee compliance with safe and healthful work practices as their personnel resources and budgets permit.

6. COMMUNICATION/ACCESS

- a. The County encourages all employees to communicate known or perceived hazards to their immediate chain-of-command, without fear of reprisal.
 - (1) For this purpose the County has established a Safety Suggestion / Hazard Observation program, wherein employees are encouraged to fill out the appropriate form and submit the form to their chain-of-command. These forms are readily available throughout the County. Employees can also submit the form with anonymity, if so desired. **(See Addendum I)**
- b. The County has established a quarterly forum wherein Safety Representatives (SR's) from each County Department/Office meet to discuss general and specific employee health and safety issues, conduct SR's health and safety training and otherwise disseminate associated information for discussion or distribution.
- c. The County has established a quarterly forum wherein the Safety Advisory Group (SAG), whose members consist of Safety Professionals throughout the County. The SAG is involved with the preparation of employee health and safety Policy and related issues for County Senior Management's consideration and approval. Further, the SAG engages in professional development training, determining the efficacy of injury and illness prevention program efforts and otherwise discusses and contemplates Countywide operational issues associated with employee health and safety.
- d. In addition to the foregoing, the County maintains clear and open lines of communication throughout its organization. These lines of communication are established by the continuous implementation of media including but not limited to various newsletters, postings, continuous enrollment employee health and safety training programs, and unlimited access to websites, telephone, e-mail and written correspondence where employees can openly consult with health and safety professionals.
- e. Employee and their representatives have a right to and can access this Injury and Illness Prevention Program via the Sacramento County intranet, from where it can be read, printed, and emailed. To access this IIPP, go to the County intranet site inside.saccounty.gov, click on "For Employees," go down to "Safety" and click on "Countywide and Departmental Safety Offices," then click on "County Safety Office," scroll down to "Policy Links" and click on "Countywide IIPP."

7. HAZARD EVALUATION

- a. County Department/Office(s) are responsible for ensuring a system of identifying and evaluating workplace hazards are in place at each workplace, in an affirmative effort to identify unsafe conditions and/or work practices.
 - (1) General, scheduled, periodic inspection areas include:
 - (A) Low hazard office settings, annually. **(See Addendum II)**

- (B) Moderate hazard, warehouse, and storage facilities, semi-annually. **(See Addendum III)**
- (C) High hazard and equipment use areas quarterly or more frequently as determined by the nature of the specific operation and as prescribed by applicable Law(s) and Standard(s). **(See Addendum IV)**
- (2) In addition to scheduled inspections, a Job Hazard Analysis (JHA), or equivalent means, shall be conducted whenever;
 - (A) new substances, processes, procedures, or equipment are introduced to a work place that represents a new hazard. And,
 - (B) when the County is made aware of a new or previously unrecognized hazard. **(See Addendum V)**

8. ACCIDENT/EXPOSURE INVESTIGATION

- a. County Department/Office(s) are responsible for investigating occupational injury and illness in accordance with established procedures within the County Workers' Compensation unit of the Department of Personnel Services in Administrative Services. **(See Addendum VI)**

9. HAZARD ABATEMENT

- a. When observed or discovered, by whatever means, unsafe or unhealthful work conditions or practices or procedures shall be abated as soon as reasonably feasible given the severity of the hazard. A County Safety Professional shall be consulted in the resolution of the issue. The County Safety Professional shall, as necessary, recommend appropriate control measures pending final abatement.
 - (1) In any situation requiring hazard abatement, a Hazard Abatement Plan shall be developed and maintained so as to demonstrate weighted progress toward the end means and provide for proper documentation of the occurrence. **(See Addendum VII)**
 - (2) In the event an imminent hazard is identified or observed, it shall be immediately abated or otherwise made safe. If this is not possible, all personnel shall be removed from the affected area or operation or procedure until it can be made safe.

10. EMPLOYEE TRAINING AND INSTRUCTION

- a. All employees new to the County shall be provided information on the role and responsibility of the CSO as well as the services provided.
 - (1) Employees shall be provided an up-dated Departmental/Office SR's list and contact information.
 - (2) New employees shall receive instruction on County policies relative to employee health and safety, including injury and illness prevention, workplace violence prevention, ergonomics, vehicle safety, general Countywide safety rules and an overview of the County Workers' Compensation, and California Occupational Safety and Health Administration (Cal/OSHA) programs.
 - (3) The instruction shall also refer employees to Department/Office specific programs such as; ergonomics, building emergency procedures, lifting safety and bloodborne/airborne pathogens, reporting workplace injury or illness to their supervisor and direct the new employee to consult with their new supervisor regarding Department/Office worksite specific procedures.
- b. Supervisors shall provide, as soon as reasonably feasible, specific job safety training and instruction to their new employees as well as any employee with a new job assignment who has not previously received training.
 - (1) For this purpose a new employee checklist has been established and is available throughout the County. **(See Addendum VIII)**
 - (2) Supervisors shall also ensure that all new employees are given a copy of and read and understand the General Safety Rules for ALL County Employees. **(See Addendum IX)**
- c. Training and or retraining shall also be conducted, as soon as reasonably feasible, for employees and supervisors whenever new substances, processes, procedures or equipment are introduced to the workplace and represent a new hazard and whenever the employer is made aware of a new or previously unrecognized hazard.
 - (1) This training shall be derived from the information obtained from the JHA conducted on the new substance, process, procedure or equipment, or new or previously unrecognized hazards as required in section 7. a. (2). **(See Addendum V)**
- d. Supervisors should attend the County Training Office's "Supervisory Development Training Series" or Department/Office equivalent, wherein they will complete a course module on supervisor's workplace safety responsibilities, fundamentals of accident prevention and accident investigation, Cal/OSHA overview, the Countywide IIPP, office safety, ergonomics, emergency preparedness and an introduction to industrial hygiene.

- (1) This course module emphasizes the importance of supervisors maintaining an active role in injury and illness prevention and using due diligence in understanding exposure and control measures for the hazards to which employees under their direction and control may be exposed.

11. RECORDKEEPING REQUIREMENTS AND RETENTION

- a. Records of scheduled and periodic inspections, as required in Sections 7 and 8, shall identify the following; the person conducting the inspection or JHA and the date, the unsafe condition or work practice and the steps taken to mitigate the hazard or practice.
 - (1) Records in this section shall be maintained.

- b. Employee health and safety training records, as required in Section 9, shall identify the following for each employee; name or other identifier, training date(s) attended, the type of training attended and the training provider.
 - (1) Records in this section shall be maintained.
 - (A) Department/Office Training Coordinators shall record all employee health and safety training in the County COMPASS system or equivalent system designed to comply with the provisions of this section.

ADDENDUM I
COUNTY OF SACRAMENTO
SAFETY SUGGESTION/HAZARD OBSERVATION FORM

To: _____ **Date:** _____

From: _____ Write "Anonymous" if you wish to remain anonymous.
(Optional)

Phone: _____

Please describe your SAFETY SUGGESTION or the HAZARDOUS CONDITION and/or ACT that was observed. Be specific:

Location: _____

Description: _____

RECOMMENDED CORRECTIVE ACTION(S): *(To be completed by Supervisor. The Department/Office Safety Representative shall complete if no specific work area was indicated.)*

Supervisor: _____ **Date:** _____

Supervisors shall retain the original of this form and forward copies, with recommended corrective action(s) taken, to the Department Safety Representative for confirmation of corrective action(s).

CONFIRMATION OF CORRECTIVE ACTION(S): *(To be completed by Department/Office Safety Representative. List other corrective action(s) required, if necessary, on the reverse side of this form.)*

Department Safety Representative: _____

Date: _____

A response to each safety suggestion or observation of a hazardous condition/act shall be conspicuously posted on the nearest Safety Bulletin Board in an area frequented by affected employees.

ADDENDUM II
COUNTY OF SACRAMENTO
Inspection Form / Office and/or Storage Areas

Inspector Name: _____ Date: _____

Area Inspected: _____ Dept./Div: _____

<input checked="" type="checkbox"/>	Inspection Item(s)	Pass	Fail	Corrective action(s)
<input type="checkbox"/>	Are the required postings (OSHA postings, emergency plan, caution microwave), safety data sheets and codes of safe practices kept up-to-date and made easily accessible to all affected employees?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are first aid kits easily accessible, fully stocked and replenished as needed? Are eyewash stations available in areas which store corrosive or other hazardous materials? Are highly visible signs conspicuously posted to direct persons to emergency equipment?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are fire extinguisher(s) free from obstruction, maintained with an adequate charge and annually serviced? Are any materials being stored or stacked higher than 18" below any overhead fire sprinkler heads?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are all exits adequately marked and illuminated by a reliable light source?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are all work areas, aisles and hallways clean, orderly and free of obstruction(s), trip hazards and sharp corners or objects? Is adequate aisle space maintained to ensure proper material handling without hazardous obstruction or blockage?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are all hazardous materials properly stored, labeled and kept away from sources of ignition? Is there a Safety Data Sheet (SDS) for each type of hazardous material being stored or available for use?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Do all work areas have adequate lighting?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are all kitchen, toilet facilities and appliances kept in a sanitary condition and are measures taken to prevent slipping on wet surfaces?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are all electrical panel doors kept closed and are they readily accessible and free from obstructions?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are all electrical equipment, appliances, tools and cords in good repair and effectively grounded or double insulated?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are multiple plug adapters prohibited unless protected by ground fault circuit interrupt (gfc)?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Is adequate mechanical ventilation maintained to prevent the build-up of hazardous fumes, vapors and/or solid aerosols?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Have employees received training in the following: emergency plan and fire prevention; prevention of work related musculoskeletal disorders; proper housekeeping; proper material storage; chemical hazard communication, proper use of hazardous chemicals and chemical hygiene; IIPP, injury and hazard reporting requirements; job specific hazards?	<input type="checkbox"/>	<input type="checkbox"/>	

comments: _____

ADDENDUM III
COUNTY OF SACRAMENTO
Inspection Form / Warehouse Areas

Inspector Name: _____ Date: _____

Area Inspected: _____ Dept./Div: _____

✓	Inspection Item(s)	Pass	Fail	Corrective Action(s)
<input type="checkbox"/>	Are the required postings (OSHA postings, emergency plan, caution microwave), safety data sheets and codes of safe practices kept up-to-date and made easily accessible to all affected employees?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are first aid kits easily accessible, fully stocked and replenished as needed? Are eyewash stations available in areas which store corrosive or other hazardous materials? Are highly visible signs conspicuously posted to direct persons to emergency equipment?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are fire extinguisher location sign(s) posted? Are fire extinguisher(s) free from obstruction, maintained with an adequate charge and annually serviced? Are any materials being stored or stacked higher than 18" below any overhead fire sprinkler heads?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are all exits adequately marked and illuminated by a reliable light source?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are all work areas, aisles and hallways clean, orderly and free of obstruction(s), trip hazards and sharp corners or objects? Is adequate aisle space maintained to ensure proper material handling without hazardous obstruction or blockage?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are all hazardous materials properly stored, labeled and kept away from sources of ignition? Is there a Safety Data Sheet (SDS) for each type of hazardous material being stored or available for use?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are all electrical panel doors kept closed and are they readily accessible and free from obstructions?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are all electrical tools and cords in good repair and effectively grounded or double insulated?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are multiple plug adapters prohibited unless protected by ground fault circuit interrupt (gfcj)?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Is adequate mechanical ventilation maintained to prevent the build-up of hazardous fumes, vapors and/or solid aerosols?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Is equipment, machinery clean and free from grease, oil and/or dust build-up? Are appropriate guards and sign(s) in place for equipment, machinery that starts without warning? Are all machine(s), equipment equipped with an operational emergency shut-off?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Is material handling equipment in good operating condition?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are only trained personnel allowed to operate industrial trucks? Are industrial truck rules posted in conspicuous places and enforced? Where internal combustion trucks are operated indoors is there adequate ventilation to prevent the build-up of harmful gasses and/or fumes?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are gloves required to be worn where there is a possibility of hand injury from a puncture, laceration and/or chemical contact?	<input type="checkbox"/>	<input type="checkbox"/>	

ADDENDUM IV
COUNTY OF SACRAMENTO
Inspection Form / Equipment Use Areas

Inspector Name: _____ Date: _____

Area Inspected: _____ Dept./Div: _____

✓	Inspection Item(s)	Pass	Fail	Corrective Action(s)
<input type="checkbox"/>	Do pressure vessels have a valid Cal/OSHA operating permit posted on the pressure tank?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are the required postings (OSHA postings, emergency plan, caution microwave), safety data sheets and codes of safe practices kept up-to-date and made easily accessible to all affected employees?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are first aid kits easily accessible, fully stocked and replenished as needed? Are eyewash stations available in areas which store corrosive or other hazardous materials? Are highly visible signs conspicuously posted to direct persons to emergency equipment?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are fire extinguisher location sign(s) posted? Are fire extinguisher(s) free from obstruction, maintained with an adequate charge and annually serviced? Are any materials being stored or stacked higher than 18" below any overhead fire sprinkler heads?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are all exits adequately marked and illuminated by a reliable light source?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are all work areas, aisles and hallways clean, orderly and free of obstruction(s), trip hazards and sharp corners or objects? Is adequate aisle space maintained to ensure proper material handling without hazardous obstruction or blockage?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are all hazardous materials properly stored, labeled and kept away from sources of ignition? Is there a Safety Data Sheet (SDS) for each type of hazardous material being stored or available for use?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are all electrical panel doors kept closed and are they readily accessible and free from obstructions?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are all electrical tools and cords in good repair and effectively grounded or double insulated?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are multiple plug adapters prohibited unless protected by ground fault circuit interrupt (gfcı)?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Is adequate mechanical ventilation maintained to prevent the build-up of hazardous fumes, vapors and/or solid aerosols?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Is equipment, machinery clean and free from grease, oil and/or dust build-up? Are appropriate guards and sign(s) in place for equipment, machinery that starts without warning or is otherwise required to be guarded? Are all machine(s), equipment equipped with an operational emergency shut-off?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Is material handling equipment in good operating condition?	<input type="checkbox"/>	<input type="checkbox"/>	

✓	Inspection Item(s)	Pass	Fail	Corrective Action(s)
<input type="checkbox"/>	Are employees required to wear foot protection where there is the possibility of injury resulting from puncture, crushing or penetrating action, chemical contact or who are required to work in an abnormally wet location?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are employees required to wear eye and face protection where there is a risk of contact with flying particles, sprays and/or splashes of chemicals?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are employees required to wear head protection in areas where there is a danger of falling and/or protruding objects?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are machinery, tools or equipment required to be locked out or tagged out of service or otherwise blocked to prevent movement or prevent energizing while being serviced or performing routine maintenance or changing die , blades, disks or any other perishable component? Are only qualified electricians authorized to repair electrical equipment or machinery?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are employee(s) trained specifically in the safe operation of the machinery or equipment they are required to operate?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are handheld power tools in safe operating condition and provided with adequate guards?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are all stationary machinery and equipment permanently mounted to prevent inadvertent movement, tip over and/or walking?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are measures taken to ensure that persons near hazardous operations are protected from sparks, slag, flying particles and/or other flying substances?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Have employees received training in the following: emergency plan and fire prevention; prevention of work related musculoskeletal disorders including proper lifting; proper housekeeping; proper material storage; chemical hazard communication, proper use of hazardous chemicals and chemical hygiene; IIPP, injury and hazard reporting requirements; job specific hazards and Personal Protective Equipment (PPE).	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are gloves required to be worn where there is a possibility of hand injury from a puncture, laceration and/or chemical contact?	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	Are only trained personnel allowed to operate industrial trucks? are industrial truck rules posted in conspicuous places and enforced? Where internal combustion trucks are operated indoors is there adequate ventilation to prevent the build-up of harmful gasses and/or fumes?	<input type="checkbox"/>	<input type="checkbox"/>	

comments:

ADDENDUM V
COUNTY OF SACRAMENTO
Job Hazard Analysis Form

	Task _____		
	Effective Date _____	Page ____ of ____	
	Department _____		
Prepared By: Date:	Reviewed By: Date:	Approved By: Date:	
1. Equipment Operated			
2. Environmental Conditions			
Inside	Outside	Cold	Heat
Noise	Vibration	Other _____	
3. Primary Job Functions & Position			
Lifting	Grasping	Pushing	Sitting
Kneeling	Standing	Pulling	Squatting
			Other _____
4. Physical Demands		Continuously (C) 67-100%	Occasionally (O) 1-33%
		Frequently (F) 34-66%	Not Applicable (N) 0%
Standing _____	Walking _____	Sitting _____	Pushing _____
Pulling _____	Climbing _____	Stooping _____	Bending _____
Kneeling _____ Reaching _____ Carrying (_____ lbs. _____ distance)			
5. Potential Hazards		Controlled By	
Impact	PPE	Procedure	Training
Chemical Contact	PPE	Procedure	Training
Caught on or between	PPE	Procedure	Training
Fall or Slip	PPE	Procedure	Training
Over Exertion	PPE	Procedure	Training
Cumulative Trauma	PPE	Procedure	Training
Other	PPE	Procedure	Training
6. List of Specific Hazards			
7. Chemical List			
8. Personal Protective Equipment			
Face	Hand		Foot
Eye	Head		Clothing
Respiratory	Other		Other
9. Procedure - step by step - record on Next Page			

Job Hazard Analysis Worksheet

9. Job Hazard Analysis Procedure Worksheet		
Job:		
Analysis By:	Reviewed By:	Approved By:
Date:	Date:	Date:
Tasks & Sequence of Steps	Potential Accidents or Hazards*	Controls

ADDENDUM VI
COUNTY OF SACRAMENTO
SUPERVISOR'S CHECKLIST
WHEN AN EMPLOYEE REPORTS AN INJURY OR ILLNESS:

USE THIS CHECKLIST ONLY IF YOUR DEPARTMENT DOES NOT HAVE AN ESTABLISHED PROCEDURE

**When a supervisor receives notice or has knowledge of a work related injury/illness,
he/she must:**

1. Determine the worker's immediate medical needs and arrange for treatment. Administer first aid, if required, or IN CASES OF A SERIOUS ACCIDENT OR INJURY: 1) DIAL 9-911 to dispatch emergency medical personnel and 2) contact the Workers' Compensation Office at 876-5251. If calling after 5 pm or before 7 am, contact the County Operator, 875-6900, and request that they notify the on-duty workers' compensation supervisor of the serious accident or injury.
2. Immediately notify the County Safety Office (876-5026) and the injured worker's relatives or emergency contact person if the injury is serious. The County Safety Office may need to notify Cal-OSHA if the injury/illness meets certain reporting criteria.
3. If non – emergency medical treatment is required, refer the employee to the nearest Med-Clinic, Kaiser Occupational Medicine or to their designated physician if there is a "*Physician Designation Form*" on file. Employees must have this form on file **PRIOR** to the injury or illness in order to be transported to their personal physician.
 - The employee must provide his/her supervisor with written documentation from the treating physician (i.e. completed return to work/modified duty slip).
4. Anytime an employee is absent from work for a full day or more due to a work-related injury or illness, or returns to work after a work related injury or illness (including a light or modified duty assignment), you must send an e-mail and/or fax (include any return to work slips the employee has provided you from his or her physician) to the County Workers' Compensation Office.

Notification must be made on the first day the employee is absent ***and*** again on the day that the employee returns to work.

5. Identify the cause of the injury or illness and take the necessary steps to secure the workplace to avoid further injury.
6. If equipment was involved in the injury (broken chair, ladder, machinery, vehicle, etc.), take necessary steps to secure the evidence.

FIRST AID INJURY:

If the injury or illness required only first aid treatment and there was no medical treatment required or anticipated, the supervisor must:

7. **Complete only the Supervisor's Report of Illness/Injury Form (WC 9) within 24 hours** of the injury and forward the completed form to the County Workers' Compensation Office.

MEDICAL TREATMENT INJURIES/ILLNESS:

If the injury or illness results in lost time beyond the date of injury, requires medical treatment beyond first aid, involves an injury to the head, neck or back, or is identified as work-induced stress, the supervisor must do the following **within one working day of notice or knowledge of an employee's injury or illness:**

8. Complete line 1 and the employer section with the exception of line 13 of the "*Workers' Compensation Claim Form (DWC-1)*". Provide the employee with the "*Workers' Compensation Claim Form*" along with an "*Authorization to Release Records*" form, a "*Benefit Election*" form. These forms may be delivered to the employee personally or by first class mail. Completion of the remainder of the "*Workers' Compensation Claim Form*" is the responsibility of and at the discretion of the employee up to one calendar year from the date of the original injury/illness.
9. If the employee doesn't complete the "*Workers' Compensation Claim Form (DWC-1)*" right away or if you mail it to them:
 - Remove the goldenrod copy (acknowledgment copy for the Workers' Compensation Office).
10. If and when the employee does provide you with their completed "*Workers' Compensation Claim Form (DWC-1)*", **within one working day (24 hours) of receiving the form:**
 - Make sure the employee has removed or that you have provided the employee with the pink copy ("Employee's Temporary Receipt").
 - Complete line 13 of the employer section and provide the yellow copy to the employee ("Employee's Copy").
 - Forward the remaining white (original) copy to the Workers' Compensation Office.
11. **NEVER wait to complete and hand in all of the required forms listed below. An injured or ill employee or their authorized representative must be provided with form DWC-1 within one working day (24 hours) of knowledge of an employee's injury or illness and/or receipt of the completed forms.** Send the originals to the County Workers' Compensation Office, Inter Office Mail Code 58-600:
 - Goldenrod copy of "*Workers' Compensation Claim Form (DWC-1)*" OR the original (white) and goldenrod copies of the "*Workers' Compensation Claim Form (DWC-1)*" if the employee has already completed it.
 - "*Authorization to Release Records*"
 - "*Benefit Election*"
 - "*Supervisor's Report of Illness / Injury*" (WC-9) -- Collect all information about the injury. Note when, where and how the incident occurred and names of witnesses. Make sure to obtain the employee's account of the incident.

The County Workers' Compensation Office will type the State of California "*Employer's Report of Occupational Injury or Illness*" (Form 5020). Forward originals of the entire accident report package to the Workers' Compensation Office (58-600).

12. **FAX** all written documentation from an employee's treating physician (Functional Limitations/Capabilities Form, Return to Work Authorization) to the County Workers' Compensation Office.

ON-GOING:

Communication is a key to controlling workers' compensation costs and assuring timely recovery from work injuries.

13. Contact the employee a few days after the injury to answer questions and determine any special needs or problems.
14. Maintain contact with the injured worker and the claims adjuster regarding the status of the claim.
15. Provide reasonable job modifications to the injured worker based on any physician-recommended work restrictions. Please coordinate job modifications via the Early Return To Work (ERTW) program with the County Workers' Compensation Office.
16. Remember this procedure you had to go through when your employee was injured and avoid it in the future by preventing injury and illness at work.

ADDENDUM VII
COUNTY OF SACRAMENTO
Hazard Abatement Plan / Project Tracking (optional form)

1. Type of Hazard and Date Identified:	2. Affected Agency	3. Date Plan Opened:
4. Opened By:	5. Affected Department/Office	6. Due Date:
7. Department Safety Rep.	8. Priority Category: High (Serious risk of death or permanent injury) Moderate (High likelihood of injury or illness) Low (May cause minor injury or illness)	9. Status:

10. Description of Hazard(s):
11. Citation of Specific Cal/OSHA Standard(s) or Policy Violation(s):
12. Description of Interim Control Measure(s) and Date Implemented:
13. Description of Proposed Corrective Action(s):
14. Is Cal/OSHA Involved & What are their concerns, if any?

Action Items Required by Other County Entities

Responsible Party:	Priority:	Status:	Due Date:
1.			
2.			
3.			
4.			

Contributors' Contact Information

Name:	Department/Office	E-Mail Address	Telephone Number
1.			
2.			
3.			
4.			

ADDENDUM VIII
COUNTY OF SACRAMENTO
New Employee Checklist

This form is to be completed by the Supervisor and the new employee.

Employee Name _____ Employee I.D. Number _____
 Date Employed/Assigned _____ Date Checklist Completed _____
 Department/Office Assigned _____ Job Title _____

The following items have been discussed and are understood. ✓ where appropriate:

	1. Department/Office safety policies and programs
	2. Code of safe practices
	3. Employee compliance with safe and healthful work practices
	4. Employee responsibility for accident prevention
	5. When and how to report work-related injuries/illnesses
	6. Review workers' compensation law that applies to work-related injuries/illnesses only
	7. County policy on medical treatment for work-related injuries/illnesses
	8. When and how to report unsafe conditions/work practices
	9. Review of emergency evacuation and fire procedures
	10. Importance of housekeeping
	11. Location of hazardous materials and training on Material Safety Data Sheets
	12. Special hazards of job
	13. Personal Protective Equipment (where applicable)
	14. Proper lifting procedures (including demonstration and use of specific lifting equipment)
	15. Proper use and guarding of equipment and tools
	16. Use of County or personal vehicle for County business
	17. Employee agrees to fully cooperate with safety efforts of the employer, follow all safety rules and use good judgment concerning safe work behavior.

Additional comments and notes

Signed _____
 SUPERVISOR

 EMPLOYEE

Distribution: Original – Department/Office Safety Representative
 Copy – Employee

Copy – Supervisor

ADDENDUM IX
COUNTY OF SACRAMENTO
General Safety Rules for All County Employees

1. All employees are expected to carry out their work in a safe and healthful manner and follow all recognized safe practices and procedures applicable to their work.
2. Employees must report all accidents, injuries, illnesses, or unsafe conditions, immediately to your supervisor. Supervisors are responsible for reporting this information to the Department/Office Safety Representative or other appropriate person and ensure that any necessary corrective actions are taken to prevent further incident and to properly document the occurrence.
3. Work areas shall be maintained in a neat, orderly manner. Trash and refuse materials are to be placed in proper containers.
4. Fire extinguishers and electrical panel access shall be kept clear of obstructions at all times.
5. Exits shall be kept clear of obstructions and be well lighted.
6. Employees shall not store excessive combustibles (paper, greasy rags, etc.) near heat generating equipment.
7. Aisles, hallways, stairways and work areas and areas around equipment or machinery, shall be kept clear of obstructions at all times.
8. Files and supplies shall be stored in such a manner as to preclude damage to the supplies or injury to personnel when they are moved. Heaviest items shall be stored closest to the floor and lightweight items stored above.
9. Material shall be stacked securely when on, in, or on top of file cabinets, shelving, racks or other places. Storage racks, file cabinets, bookshelves and the like, five feet or greater in height, shall be secured in such a manner as to prevent from tipping.
10. Always use the proper lifting technique. Never attempt to lift or push an object which is too heavy. Use appropriate material handling equipment and/or ask for help.
11. When carrying material, caution shall be exercised in watching for and avoiding any obstructions, loose material, etc.
12. Equipment, tools and work aids shall be used for their intended purposes only and shall not be misused. Misuse can cause damage to the equipment and possible injury to the user.

13. Coffee, water, soda pop, or other liquid spills, shall be wiped up promptly. Chemical spills shall be handled per appropriate precautionary measures.
14. Appliances, tools and work aids shall be kept in good working order and inspected for signs of wear, heat or fraying of cords, etc.
15. Cleaning solvents and flammable liquids shall be stored in appropriate containers and places designed for such storage.
16. Permanently mounted extension cords or multi-plug adapters are never permitted. Plugging several power strips together is also never permitted.
17. Smoking is not permitted inside any County vehicle, leased or owned facility or within 20 feet of any building entrance or opened window.
18. Employees must consider the effects on others in the work area before using or displaying items such as: personal fans, radios, pollinating plants or plants that emanate an odor, strong colognes or perfumes, air fresheners, etc.
19. Employees must not use a chair or table in place of a ladder or step stool to reach high objects.
20. Prior to operating any County vehicle, industrial truck or equipment the operator shall ensure that all warning devices, signals and safety devices are operational and the vehicle, industrial truck or equipment appears to be capable of operating safely. When operating County vehicles, industrial truck, equipment or a personal vehicle on County business the operator shall, at all times, operate that vehicle or equipment in a safe and courteous manner and shall not engage in any activity that can distract the operator. The operator shall also properly use operator safety restraint systems prior to moving the vehicle or equipment. Further, the operator shall ensure that any passengers or cargo are properly restrained or secured prior to moving the vehicle or equipment when appropriate.