# INJURY AND ILLNESS PREVENTION PROGRAM

UNIVERSITY OF CALIFORNIA, DAVIS

**Entomology and Nematology** 



#### **UC Davis**

**Entomology and Nematology** 

#### INJURY AND ILLNESS PREVENTION PROGRAM

This Injury and Illness Prevention Program has been prepared by the University of California, Davis,

Department: Entomology and Nematology

This written program is in accordance with UC Davis Policy (<u>Policy and Procedures Manual Section 290-15: Safety Management Program</u>) and California Code of Regulations Title 8, Section 3203 (<u>8CCR§3203: Injury and Illness Prevention Program</u>).



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## **PREFACE**

**DEPARTMENT NAME:** Entomology and Nematology

**DEPARTMENT DIRECTOR:** Joanna Chiu

**DEPARTMENT ADDRESS:** 367 Briggs Hall

**DEPARTMENT TELEPHONE NUMBER: (530) 752-0492** 

#### BUILDINGS OCCUPIED BY DEPARTMENT

1. Building: Briggs Hall

Unit(s): Entomology and Nematology

Contact: Andrew Ross

Phone: (530) 752-2592

2. Building: Hutchison Hall

Unit(s): Entomology and Nematology

Contact: Andrew Ross
Phone: (530) 752-2592

3. Building: Storer Hall

Unit(s): Entomology and Nematology

Contact: Andrew Ross
Phone: (530) 752-2592

4. Building: Academic Surge

Unit(s): Entomology and Nematology

Contact: Andrew Ross
Phone: (530) 752-2592

#### ADDITIONAL BUILDINGS LIST FOR IIPP

5. Building: Everson Hall

Unit: Entomology and Nematology

Contact: Andrew Ross

Phone: 530 752-2592

6. Building: Bee Biology

Unit: Entomology and Nematology

Contact: Andrew Ross

Phone: 530 752-2592

7. Building: Orchard Park Headhouse 2 and 6

Unit: Entomology and Nematology

Contact: Andrew Ross

Phone: 530 752-2592



#### AUTHORITIES AND RESPONSIBLE PARTIES

The authority and responsibility for the implementation and maintenance of the Injury and Illness Prevention Program (IIPP) is in accordance with University Policy (<u>UCD Policy & Procedure Manual Section 290-15: Safety Management Program</u>) and California Code of Regulations (<u>8CCR, Section 3203</u>) and is held by the following individuals:

#### 1. Responsible Authority

Name: Joanna Chiu

Title: Department Chair

Authority: Authority and responsibility for **ensuring** implementation of this IIPP

DocuSigned by:

Signature: Date: 1/17/2024

#### 2. Department Designated Authority

Name: Andrew Ross

: Department Safety Coordinator

Authority: Given by Responsible Authority for implementation of this IIPP

DocuSigned by:

Signature: Andrew Ross Date: 1/17/2024

All Principal Investigators/supervisors/managers are responsible for the implementation and enforcement of this IIPP in their areas of responsibility in accordance with University Policy (<u>UCD Policy & Procedure Manual Section 290-15: Safety Management Program</u>).



#### II. SYSTEM OF COMMUNICATION

Effective communications with employees have been established using the following methods.
 Check all boxes that apply, list additional department methods in space provided.

Χ	Standard Operating Procedures Manual
Χ	Safety Data Sheets
	Monthly departmental operations meetings
Χ	Internal media (department intranet)
Х	EH&S Safety Nets
	Training videos
Χ	Safety Newsletter
	Handouts
Χ	Building Evacuation Plan
Χ	E-mail
	Posters and warning labels
Χ	Job Safety Analysis
X X	Departmental Website
Χ	Other (list): quarterly safety committee meetings

2. Employees are encouraged to report any potential health and safety hazard that may exist in the workplace. Hazard Alert/Correction Forms (Appendix A) are available to employees for this purpose. Forms are to be placed in the Safety Coordinator's departmental mail box or emailed to them. Employees have the option to remain anonymous when making a report.



## III. SYSTEM FOR ASSURING EMPLOYEE COMPLIANCE WITH SAFE WORK PRACTICES

Employees have been advised of adherence to safe work practices and the proper use of required personal protective equipment (PPE). Conformance will be reinforced by discipline for non-compliance in accordance with University policy (<u>UC Davis Personnel Policies for Staff Members- Section 62</u>, Corrective Action).

The following methods are used to reinforce conformance with this program:

- 1. Distribution of Policies
- 2. Training Programs
- 3. Safety Performance Evaluations

Performance evaluations at all levels must include an assessment of the individual's commitment to and performance of the accident prevention requirements of his/her position. The following are examples of factors considered when evaluating an employee's safety performance.

- Adherence to defined safety practices.
- · Use of provided safety equipment.
- · Reporting unsafe acts, conditions, and equipment.
- Offering suggestions for solutions to safety problems.
- · Planning work to include checking safety of equipment and procedures before starting.
- Early reporting of illness or injury that may arise as a result of the job.
- Providing support to safety programs.
- 4. Statement of non-compliance will be placed in performance evaluations if employee neglects to follow proper safety procedures, and documented records are on file that clearly indicate training was provided for the specific topic, and that the employee understood the training and potential hazards.
- 5. Corrective action for non-compliance will take place when documentation exists that proper training was provided, the employee understood the training, and the employee knowingly neglected to follow proper safety procedures. Corrective action includes, but is not limited to, the following: letter of warning, suspension, or dismissal.

Does your department use any additional methods for assuring employee compliance with safe work practices?

YES x NO

annual refresher training, annual self inspections of work areas, annual inspections by EHS of work areas



#### IV. HAZARD IDENTIFICATION, EVALUATION AND INSPECTION

Job Hazard Analyses and worksite inspections have been established to identify and evaluate occupational safety and health hazards.

#### 1. Job Safety Analysis:

Job Safety Analysis (JSA) identifies and evaluates employee work functions, potential health or injury hazards, and specifies appropriate safe practices, PPE, and tools/equipment. JSA's can be completed for worksites, an individual employee's job description, or a class of employees' job description. Completed JSA's are located in Appendix B.

The following resources are available for assistance in completing JSA's:

- Laboratory personnel, please refer to the <u>Laboratory Hazard Assessment Tool</u>
- Non-Laboratory personnel, please refer to the <u>JSA/PPE Certification Forms</u>
   (Example JSAs are located in Appendix B1 and Appendix B2 of this template)

#### 2. Worksite Inspections

Worksite inspections are conducted to identify and evaluate potential hazards. Types of worksite inspections include both periodic scheduled worksite inspections as well as those required for accident investigations, injury and illness cases, and unusual occurrences. Inspections are conducted at the following worksites:

1) Location: Briggs Hall

Frequency: Annual

Responsible Person: Andrew Ross

Records Location: online in Inspect program at: https://ehs.ucop.edu

2) Location: Hutchison Hall

Frequency: Annual

Responsible Person: Andrew Ross

Records Location: online in Inspect program at: https://ehs.ucop.edu

3) Location: Storer Hall

Frequency: Annual

Responsible Person: Andrew Ross

Records Location: online in Inspect program at: https://ehs.ucop.edu

#### ADDITIONAL WORKSITE INSPECTION LOCATIONS LIST FOR IIPP

5. Building: Everson Hall

Unit: Entomology and Nematology

Contact: Andrew Ross

Phone: 530 752-2592

6. Building: Bee Biology

Unit: Entomology and Nematology

Contact: Andrew Ross

Phone: 530 752-2592

7. Building: Orchard Park Headhouse 2 and 6

Unit: Entomology and Nematology

**Contact: Andrew Ross** 

Phone: 530 752-2592



#### **Worksite Inspections Continued**

4) Location: Academic Surge

Frequency: Annual

Responsible Person: Andrew Ross

Records Location: online in Inspect program at: https://ehs.ucop.edu

#### Worksite Inspection Forms

• C1 - General Office (Available in Appendix C)

• C2 – <u>Laboratory</u>



#### V. ACCIDENT INVESTIGATION

University Policy requires that work-related injuries and illnesses be reported to Workers' Compensation within 24 hours of occurrence and state regulation requires all accidents be investigated.

Employees will immediately notify their supervisor when occupationally-related injuries and illnesses occur, or when employees first become aware of such problems.

- Supervisors will investigate all accidents, injuries, occupational illnesses, and near-miss incidents to
  identify the causal factors or attendant hazards. Appropriate repairs or procedural changes will be
  implemented promptly to mitigate the hazards implicated in these events. Injury reporting procedures
  can be found at the Safety Services Website: Injury Reporting.
- 2. The <u>Injury and Illness Investigation Form</u> (see Appendix D) shall be completed to record pertinent information and a copy retained to serve as documentation. It can be completed by either the supervisor or the Department Safety Coordinator.
- 3. Departments must notify EH&S immediately if there is any possibility an employee has been seriously injured. Please refer to EH&S SafetyNet 121 for further information.
  - Immediately: As soon as practically possible, but no longer than eight hours after the
    employer knows, or with diligent inquiry, would have known of the death of serious
    injury or illness
  - Serious injury or illness: Any injury or illness occurring in a place of employment, or in
    connection with employment, which required inpatient hospitalization for other than
    medical observation or diagnostic testing, or in which an employee suffers and
    amputation, the loss of an eye, or any serious degree of permanent disfigurement, but
    does not include any injury, illness, or death caused by an accident on a public street
    or highway, unless the accident occurred in a construction zone.



#### VI. HAZARD CORRECTION

Hazards discovered either as a result of a scheduled periodic inspection or during normal operations must be corrected by the supervisor in control of the work area, or by cooperation between the department in control of the work area and the supervisor of the employees working in that area. Supervisors of affected employees are expected to correct unsafe conditions as quickly as possible after discovery of a hazard, based on the severity of the hazard.

Specific procedures that can be used to correct hazards include, but are not limited to, the following:

- Tagging unsafe equipment "Do Not Use Until Repaired," and providing a list of alternatives for employees to use until the equipment is repaired.
- Stopping unsafe work practices and providing retraining on proper procedures before work resumes.
- Reinforcing and explaining the need for proper PPE and ensuring its availability.
- Barricading areas that have chemical spills or other hazards and reporting the hazardous conditions to appropriate parties.

Supervisors should use the <u>Hazard Alert/Correction Report (Appendix A)</u> to document corrective actions, including projected and actual completion dates.

If an imminent hazard exists, work in the area must cease, and the appropriate supervisor must be contacted immediately. If the hazard cannot be immediately corrected without endangering employees or property, all personnel need to leave the area except those qualified and necessary to correct the condition. These qualified individuals will be equipped with necessary safeguards before addressing the situation.

Does your department have any additional Hazard Correction Procedures?

YES NO X



#### VII. HEALTH AND SAFETY TRAINING

Health and safety training, covering both general work practices and job-specific hazard training is the responsibility of:

#### Joanna Chiu

and immediate Supervisor(s) as applicable to the following criteria:

- 1. Supervisors are provided with training to become familiar with the safety and health hazards to which employees under their immediate direction and control may be exposed.
- 2. All new employees receive training prior to engaging in responsibilities that pose potential hazard(s).
- 3. All employees given new job assignments receive training on the hazards of their new responsibilities prior to actually assuming those responsibilities.
- 4. Training is provided whenever new substances, processes, procedures or equipment (which represent a new hazard) are introduced to the workplace.
- 5. Whenever the employer is made aware of a new or previously unrecognized hazard, training is provided.

The <u>Safety Training Attendance Record</u> form is located in <u>Appendix E</u>.



#### VIII. RECORDKEEPING AND DOCUMENTATION

Documents related to the IIPP are maintained in/at/on:

#### 371 Briggs Hall

The following documents will be maintained within the department's IIPP Binder or accessible online folder for at least the length of time indicated below:

- 1. Hazard Alert/Correction Forms (Appendix A form). Retain for three years.
- 2. Employee <u>Job Safety Analysis form</u> (Example JSA's in Appendix B).
- 3. Worksite Inspection Forms (Appendix C form). Retain for three years.
- 4. Injury and Illness Investigation Forms (see Appendix D). Retain for three years.
- 5. Employee Safety Training Attendance Records (Appendix E form). Retain for three years.



#### IX. RESOURCES

- 1. UC Office of the President: Management of Health, Safety and the Environment, 10/28/05
- 2. UC Davis Policy and Procedure Manual, <u>Section 290-15</u>, Safety Management Program
- 3. California Code of Regulations Title 8, Section 3203, (<u>8CCR §3203</u>), Injury and Illness Prevention Program
- 4. Personnel Policies for Staff Members, Corrective Action, <u>UC PPSM 62</u>
- 5. UC Davis Environmental Health & Safety

Safety Services Website

EH&S SafetyNets

Safety Data Sheets

Campus COVID-19 Prevention Plan

6. Does your department have any additional resources?

YES NO X





## X. COMPLETED TASKS

All tasks are required to be addressed in order to submit this E-IIPP for approval:						
JSA Reviewed:	YES	Х	NO			
Annual Worksite Inspection completed:	YES	x	NO			
IIPP Reviewed:	YES	Х	NO			
Annual IIPP Training completed:	YES	Х	NO			

Approve Well done Andy!



Instructions:

1. Select assessment category.

- 2. List tasks/activities: Develop a list of activities, tasks, equipment/tools (group similar tasks/activities).
- 3. Identify and list potential hazards: for each task, activity or equipment/tools, list and describe the potential hazards.
- 4. Identify and list controls: for each task, activity, equipment/tools, document controls (i.e. training, equipment, written procedures,

Specify location: Briggs, Hutchison, Storer, Academic Surge,

- 5. If PPE is required, complete Part II- PPE Hazard Assessment and Certification.
- 6. Train affected employees on the final assessment and document the training.

Repeat assessment when new hazards are identified or introduced into the workplace or at least every three (3) years. Laboratory workers must use the online Laboratory Hazard Assessment Tool (LHAT) for PPE hazard assessment.

l am	△ A worksite		Everson, Bee Biology, Orchard Park									
reviewing (check the	☐ A single emplo	ο'ς	Name of employee:	renara rank								
appropriate	job description	•	Position title:									
box)												
	☐ A job descripti		Position titles:									
	class of emplo	yees	Location:									
	Hazard Evaluator		Signature/Date:									
TASI	K/ACTIVITY	PC	TENTIAL HAZARD	CONTROL	PPE Required? Y/N							
Cor	nputer use	Ergonon	nic injuries, carpel tunnel,	Ergonomics for computer users	N							
		eye	strain, arthritis, other	safety training and evaluation								
		wris	st/neck/back injuries	strongly recommended, ergonomic								
				key boards/chairs/etc. provided								
				upon individual requests								
Filing, stap	oling, writing, etc.	Repe	etitive motion injuries	Ergonomics training and	N							
				evaluation strongly recommended,								
				ergonomic equipment provide								
				upon request								
Gener	al office work	Slips, t	rips, falls, falling objects	Safety Training required. Never	N							
		, ,		under any circumstance stand on a								
				chair or other piece of furniture.								
				Always use a step stool of ladder to								
				retrieve items from high locations.								
				Keep floors clear of debris and								
				liquid spills. If a spill can't be								
				cleaned immediately, use the "wet								
				floor" sign to warn others of the								
				potential hazard. Keep furniture,								
				boxes, etc. from blocking								
				doorways, halls and walking space.								
				Do not store heavy objects								
				overhead. Do not top-load filing								
				cabinets, fill from bottom to top.								
				Do not open more than one file drawer at a time. Brace tall								
				bookcases and tall file cabinets to								
				walls. Refer to EH&S SafetyNet #								
				46 and 83.								
Gener	al office work		Electrical hazards	Safety Training required. Never use	N							
Gener	ai office work		Liceti icai iiazai us	2 to 3 prong adapters in electrical	IV							
				outlets, all large appliances								
				(refrigerators, microwaves ovens,								
				etc.) are plugged directly into an								

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		outlet Never everlead outlets or	1
		outlet, Never overload outlets or	
		daisy chain extension cords/power	
		strips, keep electrical cords away	
		from walk paths, UCD facilities	
		department or MCB shop	
		technicians address all electrical	
		problems (replacing light bulbs,	
		replacing ballasts, cracked or	
		frayed wires, etc.), annual	
		inspections performed by the fire	
		marshal or lab safety professional	
		with EH&S, refer to safety nets #	
		20 & 109N	
Handling/moving heavy items	Back/lifting injuries	Use lift cart or ask for assistance	N
		whenever possible, proper lifting	
		procedures followed as per safety	
		net #46, Back injury prevention	
		training required for anyone who	
		lifts heavy objects regularly.	
General workplace	Physical injuries due to fires,	Annual training on Departmental	N
·	earthquakes, workplace violence,	Emergency Action Plan (EAP), EAP	
	etc.	followed by all employees, copy of	
		EAP available for all employees in	
		mailroom on 3rd floor of Hutchison	
		Hall, workplace violence training	
		available from UCD police	
		department	
		5.5p 5	

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#### **Training Record**

**Designated Trainer**: (signature is required)

I have read and acknowledge the contents, requirements, and responsibilities outlined in this document:

Name	Signature	Date

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Specify location: Bee Biology, Orchard park, or off campus field sites

Instructions:

1. Select assessment category.

A worksite

- 2. List tasks/activities: Develop a list of activities, tasks, equipment/tools (group similar tasks/activities).
- 3. Identify and list potential hazards: for each task, activity or equipment/tools, list and describe the potential hazards.
- 4. Identify and list controls: for each task, activity, equipment/tools, document controls (i.e. training, equipment, written procedures, PPF...).
- 5. If PPE is required, complete Part II- PPE Hazard Assessment and Certification.
- 6. Train affected employees on the final assessment and document the training.

Repeat assessment when new hazards are identified or introduced into the workplace or at least every three (3) years. Laboratory workers must use the online <u>Laboratory Hazard Assessment Tool (LHAT)</u> for PPE hazard assessment.

reviewing	☐ A single emplo	yee's	Name of employee:		
(check the	job description	1	Position title:		
appropriate box)	☐ A job descripti	on for a	Position titles:		
DOX	class of emplo		Location:		
	Hazard Evaluator	-	Signature/Date:		
TAG	//A CTI) //TV		TENTIAL HAZADO	CONTROL	PPE Required?
TASK/ACTIVITY		PO	TENTIAL HAZARD	CONTROL	Y/N
	ransportation (car,		on or traffic accident	Registered UC Davis employee	No
truck,	bicycle, etc.)	related	injuries (crushes, cuts,	with valid driver's license	
		scrapes,	sprains, strains, breaks,	required, successful completion	
			burns, etc.)	of the UCD safe driver	
				awareness training program	
				strongly recommended (access	
				course at:	
				http://lms.ucdavis.edu/)	
Transportati	on (walking, hiking,	Falls, trips, slips (cuts, scrapes,		Appropriate field attire	No
	etc.)	sprains,	breaks, strains, bruises,	required (i.e.: closed toe/closed	
			bumps, etc.)	heel shoes, long pants, no	
				sandals, no shorts, no bare	
				shoulders, no bare midriffs), tri-	
				annual field safety training	
				required	
	ent use (pumps,		or to severe injuries	Standard Operating Procedures	Yes
	actors, chain saws,		hes, cuts, abrasions,	(SOP's) required for any	
pru	ners, etc.)		ins, strains, breaks,	hazardous equipment use,	
		ele	ctrical shock, etc.)	documented training on	
				equipment required through UC	
				Davis Learning Management	
				System (LMS) (Ex: hand and	
				power tool training course for	
				anyone who uses a chain saw),	
				all equipment must be in good	
				working order with all safety	
				controls in place (EX: chain	
				break and guard on chain saw,	
				etc.)	

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Environmental hazards (climate, weather, animals, insects, plants, etc.)	Exposure or contact related injuries (heat illness, heat stress, cold stress, bee stings, poison oak, bites, allergies, etc.)	Annual heat illness prevention training required, tri-annual field safety training required	No
Chemical, biological, or pesticide application (fertilizer, bio-control agents, fungicides, insecticides, herbicides, etc.)	Exposure related injuries (ingestion, inhalation, burns, poisoning, rash, irritation, allergy, etc.)	Qualified applicator certificate required for insecticide use, hazardous communications training or UC fundamentals of lab safety course and laboratory hazard assessment tool training required, triannual field safety training required	Yes
Lifting, climbing, repetitive motion	Back injuries, falls from ladders, repetitive motion injuries, etc.	Appropriate safety training required for task (i.e.: ladder safety training for persons who climb ladders, ergonomics training for repetitive motion activities, etc.)	No
Power tools and equipment hazards (welders, drill presses, table saw, grinders, hand drills, circular saws, radial arm saw, etc.)	Minor, severe, to fatal injuries (crushes, cuts, abrasions, sprains, strains, breaks, electrical shock, etc.)	All person using equipment or tools must be trained on the safe use and operation of that tool prior to using, All PPE's are provided by the department to ensure the safety of operators. PPE's must be worn by power tool or equipment operators at all times	Yes

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#### **Training Record**

**Designated Trainer**: (signature is required)

I have read and acknowledge the contents, requirements, and responsibilities outlined in this document:

Name	Signature	Date

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# PPE Hazard Assessment & Certification (Part II)

Instructions:

- 1. Select assessment category.
- 2. List tasks/activities: List tasks identified in Part I (or any other JSA document) that require PPE and list the activity on the form.
- 3. Identify body parts that may be injured.
- 4. Identify and list specific *required PPE*.
- 5. Provide necessary PPE to employee.
- 6. Train affected employees on the final assessment, PPE specific training and document the training.

Repeat assessment when new hazards are identified or introduced into the workplace or at least every three (3) years.

Laboratory workers must use the online <u>Laboratory Hazard Assessment Tool (LHAT)</u> for PPE hazard assessment/certification.

I am 🗵 A wor		ite			Specify location: Bee Biology shop								
reviewing	☐ A single	employ	/ee's jo	b	Name of employee:								
(check the	descript	ion			Position title:								
appropriate box)	☐ A job de	scriptic	n for a	class	Position titles:								
·	of emplo	oyees			Locatio	n:							
Took / A et is situ		Head	Ears*	Eyes	Face	Lungs	Trunk	Whole	Arms	Hands	Knees	Feet	Doguirod DDC
Task/Activity		ricud	Luis	Lycs	racc	*	Trank	Body	Aiiiis	Harias	Kilees	1000	Required PPE
Band Saw - R		no	no	yes	no	no	no	no	no	no	no	no	safety glasses
model 10-30													
14090112450													
Drill Press – J		no	no	yes	no	no	no	no	no	no	no	no	safety glasses
JDP-17DX, S/													
Radial Arm/N		no	no	yes	no	no	no	no	no	no	no	no	safety glasses
Ridgid mode													
MS1290LZA,	•												
U140851848		20	20	1100		20	20	20	20		20	20	<b>.</b>
Table Saw – I	_	no	no	yes	no	no	no	no	no	no	no	no	safety glasses
model R4512 EM14416140													
Miscellaneou		no	no	yes	no	no	no	no	no	no	no	no	safety glasses
power tools				,									salety glasses
saw, chain sa													
gun, etc.)	, 50. 011												
<u> </u>													



# PPE Hazard Assessment & Certification (Part II)

I certify the above hazard assessment was performed to the best of my knowledge and ability, based on the hazards									
present on this date. C	present on this date. Compliance reference-8 CCR §3380.								
<b>Evaluator Name:</b>	Andrew Ross	Department: Entomology and Nematology							
<b>Evaluator Signature:</b>	andrew ross	Date: 10/18/23							

<sup>\*</sup>Note: Protection of ears and lungs are covered under <u>8 CCR §5097</u> and <u>8 CCR §5144</u>, respectively, but are listed in this document for inclusion purposes. See specific program details for employees who are required to participate in <u>Hearing Conservation</u> or <u>Respiratory Protection Program</u>.

In addition to the required PPE outlined in this document, the Entomology Department provides the following PPE for voluntary use in the Bee Biology shop:

- Ear plugs or ear muffs
- Dust masks

As listed on the shop safety plan section 3, policies and procedures, when working in the shop area and around powered equipment.

- No loose clothing, jewelry, etc.
- Long hair should be tied back and secured



# PPE Hazard Assessment & Certification (Part II)

Training Red	0	rd
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**Designated Trainer**: (signature is required)

I have read and acknowledge the contents, requirements, and responsibilities outlined in this document. I have been provided the necessary PPE and have received training on the proper selection, use and maintenance of PPE:

Name	Signature	Date

## **HAZARD ALERT / CORRECTION FORM**

Alert Identification No Department:		
•	ı	
I. Unsafe Condition or Hazard		
Name: (optional)	Job	): <u> </u>
Title: (optional)		-
Location of Hazard:		_
Building:	Floor:	Room:
Date and time the condition or hazard	was observed:	
Description of unsafe condition or haz	zard:	
What changes would you recommend	to correct the condition or ha	nzard?
Employee Signature: (optional)		
II. Management/Safety Committee	Investigation	
Name of person investigating unsafe c		
Results of investigation (What was for sheets if necessary.)	und? Was condition unsafe or	r a hazard?): (Attach additional
Proposed action to be taken to correct Correction Report)	hazard or unsafe condition: (	Complete and attach a Hazard
Signature of Investigating Party:		
Date:		

IIPP-Appendix A January 2022 Completed copies of this form should be routed to the appropriate supervisor and department Safety Coordinator, and must be maintained in department files for at least three years.

## **HAZARD ALERT / CORRECTION REPORT**

Alert Identification No						
Department:						
This form should be used in conjunction with the "Hazard Alert Form" as appropriate, to track the correction of identified hazards.						
All hazards should be corrected as soon as possible, based on the severity of the hazard. If a serious imminent hazard cannot be immediately corrected, evacuate personnel from the area and restrict access until the hazard can be addressed.						
Supervisor/Safety Coordinator Name: Telephone:						
Supervisor/Safety Coordinate	Date:					
Description and Location of Unsafe Discount		Required Action and	Completion Date			
Condition	Discovered	Responsible Party	Projected	Actual		

IIPP–Appendix A January 2022 Completed copies of this form should be routed to the department Safety Coordinator and kept in department files for at least three years.

#### **WORKSITE INSPECTION FORM**

#### General Office Environment

Location	ration: Date:					
Inspector	Inspector: Phone:					
Department:						
Administration and Training						
Yes 🗆	No		NA		1.	Are all safety records maintained in a centralized file for easy access? Are training records current?
Yes 🗆	No		NA		2.	Have all employees attended Injury & Illness Prevention Program training? Has the training been documented?
Yes 🗆	No		NA		3.	Does the department have a completed Emergency Action Plan? Are employees trained on its contents and training documented?
Yes 🗆	No		NA		4.	Are chemical products used in the office being purchased in small quantities? Are Safety Data Sheets available/accessible?
Yes 🗆	No		NA		5.	Are mandatory employment notices and posters posted: https://www.hr.ucdavis.edu/supervisors/posters-required-by-law?
Yes $\square$	No		NA		6.	Are annual workplace inspections performed and documented?
General Safety						
Yes $\square$	No		NA		7.	Are exits, fire alarms, pullboxes clearly marked and unobstructed?
Yes 🗆	No		NA		8.	Are aisles and corridors unobstructed to allow unimpeded evacuations?
Yes 🗆	No		NA		9.	Is a clearly identified, unobstructed, charged, currently inspected and tagged, wall-mounted fire extinguisher available as required by UC Davis Fire?
Yes 🗆	No		NA		10.	Are ergonomic issues being addressed for employees using computers or at risk of repetitive motion injuries?
Yes 🗆	No		NA		11.	Is a fully stocked first-aid kit available? Is the location known to all employees in the area?
Yes 🗆	No		NA		12.	Are cabinets, shelves, and furniture over five feet tall secured to prevent toppling during earthquakes?
						Are books and heavy items and equipment stored on low shelves
Yes 🗆	No		NA		13.	and secured to prevent them from falling on people during earthquakes?
Yes $\square$	No		NA		14.	Is the office kept clean of trash and recyclables promptly removed?
Electrical Safety						
Yes 🗆	No		NA		15.	Are plugs, cords, electrical panels, and receptacles in good condition? No exposed conductors or broken insulation?
Yes $\square$	No		NA		16.	Are circuit breaker panels accessible and labeled?
Yes 🗆	No		NA		17.	Are surge protectors being used? If so, they must be equipped with an automatic circuit breaker, have cords no longer than 15 feet in length, and be plugged directly into a wall outlet.
Yes $\square$	No		NA		18.	Is lighting adequate throughout the work environment?
Yes 🗆	No		NA		19.	Are extension cords being used correctly? They must not run through walls, doors, ceiling, or present a trip hazard.
Yes 🗆	No		NA		20.	Are portable electric heaters being used? If so, they must be UL listed, plugged directly into a wall outlet, and located away from combustible materials.

IIPP-Appendix C1-Office January 2022 Completed copies of this form should be routed to the department Safety Coordinator and must be maintained in department files for at least three years.

## IIPP – Appendix D

Please access the **Injury Reporting Procedure** page on the Safety Services website.

http://safetyservices.ucdavis.edu/article/injury-reporting-procedure

Complete the electronic **Employer's First Report** as soon as practicable.