INJURY & ILLNESS PREVENTION PROGRAM

FOR

CALIFORNIA STATE UNIVERSITY AT LOS ANGELES

JUNE 2007

PROGRAM APPROVAL AND AUTHORIZATION

James M. Rosser, President

Date 6-27-07
TABLE OF CONTENTS

1.0 PURPOSE
2.0 ORGANIZATIONS AFFECTED
3.0 REFERENCES/STATUTORY AUTHORITY
4.0 POLICY
5.0 DEFINITIONS
6.0 RESPONSIBILITIES
7.0 PROCEDURES/PROGRAM
8.0 APPENDICES
  8.1 ERGONOMIC SUPPLEMENT
  8.2 HAZARD INCIDENT REPORT FORM
  8.3 EHS PROGRAM TRAINING SCHEDULE
  8.4 SUPERVISOR'S REPORT OF OCCUPATIONAL INJURY & ILLNESS
  8.5 EMPLOYEE'S REPORT OF OCCUPATIONAL INJURY & ILLNESS
  8.6 HEAT ILLNESS PREVENTION PROGRAM
1.0 PURPOSE

To establish a program for the protection of students, faculty, staff and visitors from potential hazards and/or conditions, which may compromise the safety and health of the campus community. An effective Injury & Illness Prevention Program (IIPP) strives to manage the working and educational environments in order to: identify existing hazards; minimize potential hazardous conditions; correct those identified conditions; and put procedures and/or practices into place to prevent the recurrence of those unsafe conditions.

The purpose of this document is to establish and maintain a written IIPP plan which conforms to California Code of Regulations (CCR) Title 8, Section 3203 standard and addresses the following eight elements:

- Responsibility
- Compliance
- Communication
- Hazard Assessment
- Accident/Exposure Investigation
- Hazard Correction
- Training and Instruction
- Recordkeeping

Proper development, implementation, and oversight by all responsible areas should ensure the effectiveness of this Program in achieving a safer and healthier university environment.

2.0 ORGANIZATIONS AFFECTED

All California State University, Los Angeles (CSULA) employees are directly affected by the program components contained herein. Non-state employees (UAS, Student Union, LA County High School for the Arts, etc...) residing on campus should refer to their organization’s IIPP. Elements of this program do pertain to non-state employees, student and visitor populations in that a mechanism exists to identify, report, and correct unsafe or potentially hazardous conditions at this University.

3.0 REFERENCES / STATUTORY AUTHORITY

Under California Labor Code Section 6401.7 (Chapter 1369, Statutes 1989) and the California Code of Regulations Title 8, Section 3203, there is regulatory authority requiring the development and implementation of this IIPP.
4.0 POLICY

It is the policy of California State University, Los Angeles, to maintain, insofar as is reasonably possible, a campus environment for faculty, staff, students, and the public (herein known as campus community) that will not adversely affect their health and safety nor subject them to avoidable risks of accidental injury and illness. No person will be required to perform any task, which he/she determines to be unsafe or unreasonably hazardous. To accomplish this, the University shall strive to maintain facilities and provide resources that allow for a safe and healthful working environment, meeting all Federal, State and local laws and regulations.

While the ultimate responsibility and accountability for campus health & safety resides with the President of the University, the implementation of and monitoring for workplace health and safety falls on every employee (faculty & staff) of the University. It is each individual's duty to react to an identified unsafe or potentially hazardous condition by correcting or reporting to the proper authority. Accordingly, students and visitors have a basic responsibility to conduct their activities or business in a manner supportive of the University's policies and guidelines for health & safety.

5.0 DEFINITIONS

5.1 Accident Investigation – A process by which a review of the circumstances of an event, the gathering of factual records and evidence, and the development of a final report describing the events as they transpired. Typically, the organizations conducting investigations at the University are Department Management, Public Safety, Human Resource Management and Environmental, Health & Safety.

5.2 Employee – Any person (student assistant, full/part-time faculty, staff or administrator) who works for the University and is subject to coverage under occupational standards as set forth by Cal/OSHA, or falls under the University’s workers’ compensation insurance.

5.3 Engineering Controls – Engineering measures employed to control workplace hazards (chemical, physical, biological or radiological). This methodology is preferred to the implementation of personal protective equipment as a means of personnel protection.

5.4 Imminent Hazard – Any condition or practice where there is reasonable certainty that a potentially hazardous condition exists which might cause serious injury or death to an individual, and/or irreversible damage to the University infrastructure.

5.5 Inspection – The review and assessment of a university program, area, or practice for the purpose of identifying non-compliant activities, imminent hazards, and/or unsafe acts or conditions.
5.6 **Personal Protective Equipment (PPE)** – Personnel protection equipment designed to protect that individual from the identified hazards of the area he/she is exposed to. Examples of devices are: gloves, tyvek suits/protective clothing, respiratory devices, face shields, hard hats, safety glasses/goggles, shields, barriers, or other protective measures. This means of personnel protection is secondary to mechanical or engineering controls.

5.7 **Unsafe Act** – Performance of a task or execution of an action which threatens the personal health and safety of the primary individual and/or secondary bystanders. Examples are:

a) Operating a device without proper certification/authorization.
b) Lack of or improper use of PPE.
c) Failure to follow established safety guidelines.
d) Operating equipment in poor or unsafe condition.
e) Failure to warn others of an unsafe condition.
f) The intentional bypass or removal of safety devices.
g) Use of defective equipment.
h) Use of tools/equipment for other than their intended purpose.
i) Working in hazardous locations without adequate protection or warning.
j) Improper or incomplete repair of equipment/facilities.
k) Horseplay.
l) Wearing of unsafe clothing for task being performed.
m) Entering of a confined space without proper protection or equipment.
n) Food/beverage consumption in area where chemicals are used or stored.

5.8 **Unsafe Condition** – A feature in the workplace that is likely to cause injury or property damage. Examples are:

a) Inadequate supports or guards.
b) Defective tools, equipment, or supplies.
c) Congested conditions in the workplace.
d) Inadequate warning systems.
e) Potential fire, chemical, and explosion hazards.
f) Poor housekeeping.
g) Hazardous atmospheric condition.
h) Excessive noise.
i) Poor ventilation.
j) Inappropriate hygiene/personal grooming, long hair around machinery, beard with respirator use, etc.
6.0 RESPONSIBILITIES

6.1. **University President** – Has the responsibility for injury and illness prevention and compliance with the IIPP Plan. The President will meet this responsibility by providing institutional support toward the execution and administration of the University IIPP Plan. The actual administration of this Plan shall be delegated to the University Risk Management & Environmental, Health and Safety (RM/EHS) Office.

6.2. **Deans, Department Chairs, University Management** – Have the responsibility to implement the provisions of this IIPP Plan in their immediate work centers to promote a safe and healthful working environment. These duties shall include, but not be limited to, the following activities:

6.2.1. Review the University IIPP Plan on a periodic basis and provide the RM/EHS Office with program improvements, as appropriate.

6.2.2. Designate an area representative who serves as a focal point for safety and health related matters and disseminate that contact to all area personnel.

6.2.3. Conduct periodic workplace inspections so that unsafe acts and conditions can be identified and corrected.

6.2.4. Perform/implement the necessary corrective actions as indicated by inspections and employee communications at the department level.

6.2.5. Inform affected employees of unsafe conditions that cannot be immediately corrected, and/or post appropriate warnings in those affected areas.

6.2.6. Refer unsafe acts and conditions that cannot be corrected, or addressed, at the departmental level to the University RM/EHS Office.

6.2.7. Develop and implement an area specific training program designed to instruct employees in general safe work practices for their immediate area as well as instructions specific to their job duties. Such education and training shall take place prior to the employee being assigned potentially hazardous employment.

6.2.8. Develop a method of communication where unsafe acts and conditions can be reported by employees without fear of reprisal
and management can communicate safety information to employees.

6.2.9. Instruct employees in the recognition and avoidance of unsafe acts and conditions, including hazards associated with non-routine tasks and emergency operations.

6.2.10. Develop methods to assure employees adhere to safety procedures.

6.2.11. Develop a system of record keeping that documents internal training, inspections, unsafe acts and conditions, and complaints / grievances involving safety issues.

6.2.12. Submit a completed Supervisor’s Report of Occupational Injury or Illness to the University Workers’ Compensation Administrator within 24 hours of knowledge of the occurrence (See Appendix 8.4). Ensure that all employee work-related injuries and illnesses are properly reported to Human Resources Management (HRM).

6.3. **Risk Management and Environmental, Health & Safety (RM/EHS) Office** – Serves as the focal point for the entire IIPP Plan development, implementation and maintenance. Maintains the Cal/OSHA accident and injury reporting responsibility for the University. The RM/EHS Director, and/or his/her designee, shall:

6.3.1. Coordinate implementation of the IIPP Plan with all University work sites.

6.3.2. Provide assistance to departments, upon request, in complying with program requirements.

6.3.3. Review the IIPP Plan on an annual basis and revise as necessary.

6.3.4. Review all work-related injury and illness reports, determine the need for further investigation and conduct such investigations as necessary.

6.3.5. Conduct safety audits and inspections to verify program compliance.

6.3.6. Record each occupational injury on the OSHA 300 Log and Summary of Occupational Injuries and Illnesses (Form 300A).

6.3.7. Prepare a supplementary record of the occupational injuries and illnesses on OSHA Form 301, or Employer’s Report of Injury or Illness (Form 5020).
6.3.8. Prepare an annual summary of the OSHA Form 300, post it no later than February 1st and keep it posted at the designated Health & Safety bulletin board where employees can see it until March 1st.

6.3.9. The Workers’ Compensation Coordinator is responsible for the reporting of work-related injuries to the University third party administrator.

6.4. **Human Resources Management (HRM)** – is responsible for:

6.4.1. The scheduling of new employee orientation where the RM/EHS Office shall provide an overview of the University program with contact information.

6.4.2. Receipt and retention of the Supervisor’s Safety Orientation Checklist.

6.5. **All University Employees (Staff & Faculty)** – Have the responsibility for their own safety and the safety of their fellow co-workers, and this shall include but not be limited to:

6.5.1. Reading and complying with established RM/EHS procedures and guidelines provided by the University.

6.5.2. Attending scheduled training sessions and complying with all applicable safety requirements.

6.5.3. Asking their supervisors questions when there is concern about an unknown or potentially hazardous situation.

6.5.4. Immediately reporting unsafe conditions or acts to their supervisor, Department Head/Chair, or the RM/EHS Office.

6.5.5. Immediately reporting work related injuries or illnesses to their direct supervisor and to the University Workers’ Compensation Coordinator using approved campus documentation (See Appendix 8.5).

7.0 **PROCEDURES / PROGRAM**

7.1. IDENTIFICATION OF AUTHORIZED REPRESENTATIVES
As mentioned under Section 6.0, the University President has delegated the safety and health program responsibilities to the University RM/EHS Office. Therefore, the University RM/EHS Director and/or his/her designee is the primary University contact for employees (staff & faculty).

There are additionally three other Safety Officers at the University who control responsibility for their respective programs. The University Radiation Safety Officer has primary responsibility for all issues and matters pertaining to CSULA’s utilization of radioactive isotopes and their respective storage, handling and disposal. The University Biological Safety Officer has primary responsibility for activities and matters pertaining to the safe use, handling and disposal of infectious, animal, and biological agents. Finally, the University Chemical Safety Officer has primary responsibility for the development and management of the Chemical Hygiene Plan (CHP), review and oversight of laboratory practices, and general awareness training related to hazardous materials management.

7.1.1. The University Health & Safety Coordinator shall serve as a secondary responsible person when the primary individual is unavailable for whatever reason.

7.1.2. At the departmental level, Department Chairs are appropriate contact personnel when questions arise pertaining to the program’s local implementation.

7.1.3. Finally, the University employs a building approach to safety and accident prevention. There are assigned building coordinators for each structure on campus. These personnel perform routine inspections, handle area trouble calls, and generally respond to safety matters under their building responsibility, as appropriate.

7.2. COMPLIANCE WITH SAFE & HEALTHY WORK PRACTICES

7.2.1. The University guidelines stipulate that it is every employee’s responsibility to adhere to the guidelines established for compliance with health and safety standards. In addition, employees are encouraged to achieve a “beyond compliance” workplace by proactively getting involved with their working environments.

7.2.2. All employees shall adhere to safe and healthy work practices as defined by established campus and departmental safety and health guidelines. Failure to do so will result in the initiation of disciplinary measures as defined in the University’s progressive discipline policy.
7.2.3. The University shall recognize employees who take proactive
measures in promoting or implementing effective safety and health
practices annually, or upon recognition of a particular activity, as
appropriate. This recognition can be any means as determined
appropriate and/or fiscally responsible by the department and/or
RM/EHS Office.

7.2.4. Training on this Injury and Illness Prevention Program (IIPP) shall
be administered at the department level, through a training
supplement provided by the RM/EHS Office. This training shall
be performed annually, or as new employees enter a department.
Such training can be accomplished utilizing various media
including RM/EHS bulletins, notices or electronic references.

7.2.5. Those employees whose performance can be documented as
deficient in the areas of safety and health shall receive refresher
training on the area(s) in which the deficiency occurred.

7.3. SAFETY COMMUNICATION

7.3.1. Committee(s)

7.3.1.1. Once a month, the University Risk Management & Safety
Committee meets to discuss campus-wide issues related to
health and safety. The membership is comprised of each of the
bargaining units, the Campus Safety Officers
(RM/EHS, Chemical, Biological and Radiation), several
support organizations (Public Safety and Facilities), and the
University RM/EHS Director who serves as the
chairperson. This Committee, by charter, reports directly
to the University President with recommendations on
improvements to Environmental, Health & Safety Office on
campus. An annual report on the RM/EHS Program is
submitted to the President.

7.3.1.2. There is also the Facilities Safety Committee, which is
chaired by the Unit 6 safety representative and meets at the
discretion of Unit 6. The Unit’s membership, Facilities
Management, Public Safety and the RM/EHS Office are
routinely in attendance. The issues discussed relate directly
to concerns associated with facilities-related matters.

7.3.1.3. Each department shall include on their normal staff
meeting agenda environmental, health and safety concerns
or general topics pertinent to those employees represented.
Any issues shall be communicated to the University RM/EHS Office for follow-up and action.

7.3.2. Publication(s)

7.3.2.1. The RM/EHS Office shall publish an Employee Safety Handbook that will serve to heighten awareness and insight into environmental, health and safety issues on campus. This document shall be reviewed every two years for currency and updated accordingly. Distribution of this handbook shall be to all employees initially, to new employees through orientation, and available on the RM/EHS website for immediate access.

7.3.2.2. In addition, on an as needed basis, the RM/EHS Office shall publish bulletins, notices or other related guidance documents to communicate immediate environmental, health and safety concerns to the campus community. The method of distribution can be through the campus e-mail system, RM/EHS website, or by direct mail to the departments.

7.3.3. Report of Unsafe Condition(s)

7.3.3.1. A system for communicating unsafe and/or hazardous conditions shall exist within the University and participation will be encouraged through departmental briefings and publications. In addition, the University’s electronic mail system will serve as a conduit for communications related to unsafe work conditions.

7.3.3.2. All reports of unsafe or hazardous conditions shall be investigated by the RM/EHS Office in a reasonable period and a follow-up report sent to the requestor (if identified) effecting closure to the report.

7.3.4. Training

7.3.4.1. All University faculty, staff and, if necessary, auxiliary employees who perform work at or for the University, shall receive appropriate training necessary to protect their health and safety. This training shall include information regarding job hazards, possible health effects, and required work practices and procedures. The training constitutes communication of safe and healthful work guidelines to employees. Independent contractor management is
responsible for the safety and health training of their employees.

7.3.4.2. Training shall be provided on a frequency required for the specific topic being addressed, annual, refresher, quarterly, one-time, etc.

7.4. IDENTIFICATION OF WORKPLACE HAZARDS

7.4.1. Every employee has the responsibility of maintaining a safe and healthful working environment for themselves and their fellow workers. To that end, any unsafe condition shall be immediately reported to the proper authority. For instances where personnel's health and safety may be immediately compromised, then a call to the RM/EHS Office should be made at:

Ext. 3-3527, 3-3549, or 3-3531

If the situation is a nuisance and does not pose an immediate risk of personnel injury or death then contact either the department supervisor or the Facilities Services Work Control directly at:

Ext. 3-3440

7.4.2. The RM/EHS Office shall perform annual inspections of the University facilities to evaluate their compliance to campus safety procedures, regulatory standards, and best management practices. This review shall be a pre-scheduled, announced, activity generally with the building coordinator or area supervisor in attendance.

7.4.3. In addition, the RM/EHS Office may conduct unannounced inspections of operations on campus to ensure that daily activities meet all applicable standards.

7.4.4. All chemical purchases must receive RM/EHS Office approval prior to being authorized for purchase. The RM/EHS Office will compare the compound against existing personal protective equipment and area health and safety infrastructure to ensure that the application and use is done safely. The product’s Material Safety Data Sheet (MSDS) shall be the primary resource for verification of hazards about a particular substance. Additional considerations include inventory management and special hazards or designation review.
7.4.5. The RM/EHS Office, prior to incorporation onto the campus, shall review any significant change in equipment, machinery, or other health and safety sensitive infrastructure. If the change involves a process rather than equipment modification and has health and safety implications, then the RM/EHS Office shall be informed to the intended action prior to implementation.

7.5. INVESTIGATION OF OCCUPATIONAL INJURY/ILLNESS

7.5.1. Upon an occupational injury report to the University Workers’ Compensation Coordinator, the RM/EHS Office shall be contacted to perform an accident investigation of the incident. At times, when the Supervisor conducts the preliminary investigation, this may be reviewed for accuracy and utilized if the conditions warrant. This decision shall be made by the RM/EHS Office. The written accident investigation shall be submitted to the Workers’ Compensation Coordinator and all other relevant persons. If corrective measures are required, a firm schedule for closure must be identified.

7.5.2. For events, which result in minor first aid or other non-reportable treatments (including near-miss events), the area administrator shall document the event and contact the RM/EHS Office for investigation. The RM/EHS Office will report back to area management and document the event.

7.6. CORRECTING UNSAFE OR UNHEALTHY CONDITIONS

7.6.1. As mentioned in Section 7.4 of this procedure, following identification of an unsafe or unhealthful condition that poses an immediate threat, a call shall be placed to the RM/EHS Office. A representative of the RM/EHS Office shall initiate corrective actions to alleviate the condition or secure it such that no one is threatened. This may consist of placing warning tape around the condition to prevent and warn unwary pedestrians, or other action(s) as deemed appropriate.

7.6.2. The Facilities Services work request line at extension 3-3440 places a priority on each request based on the requestor’s description and health and safety implications. Those determined to be a health and safety concern are given greater priority.

7.6.3. An “EHS Hazard Report” (See Appendix 8.2) form may be submitted to the RM/EHS Office at any time to report an unsafe or hazardous condition, and under anonymity if desired. The requestor will be updated as to the status of the corrective action,
as appropriate. Although other means of reporting an unsafe condition can be exercised by the campus community.

7.7. TRAINING

7.7.1. Any RM/EHS related training should either be developed by, or reviewed and approved by the RM/EHS Office prior to presentation to employees. At no time shall direction be given which has failed to allow sufficient RM/EHS Office review.

7.7.2. Safety training begins at new employee orientation, and involves a general awareness of the RM/EHS programs on campus, significant points-of-contact, proper hazard reporting protocols, general safety guidelines, and recent employee notifications. The RM/EHS Director and/or his/her designee shall attend the new employee orientation briefings on a monthly basis, or as conducted by HRM.

7.7.3. The RM/EHS Program requires area managers/supervisors to provide training to each employee on how to perform specific job duties in a safe and correct manner. The RM/EHS Office, upon request, shall provide the appropriate assistance necessary to achieve this goal. A Supervisor’s Safety Orientation Checklist shall be completed by the department and submitted to HRM for retention in the employee file.

7.7.4. The RM/EHS Office shall provide annual training to employees on the University’s Injury & Illness Prevention Program (IIPP). This training shall be made available and it is the responsibility of each employee to attend. The full IIPP Training is only required initially during the employee’s employment, and further highlights and updates are conducted through University communications and/or department briefings.

7.7.5. The majority of the University’s health and safety programs are site or user specific, and the RM/EHS Office shall make available training resources and/or provide direct/indirect training to those personnel impacted by the standard. A matrix of programs and associated training frequencies are attached for reference (See Appendix 8.3).

7.8. RECORD KEEPING FOR ALL ASPECTS OF IIPP

7.8.1. The California State University, Los Angeles, RM/EHS Office shall maintain all records related to scheduled and periodic inspections required to identify unsafe or hazardous conditions for
a period of at least three (3) years. These records should document the individual performing the inspection, the unsafe conditions and work practices noted, and the action taken to correct the condition or practice identified.

7.8.2. All records related to health and safety training shall be maintained by the department, which conducted said training. This may either be the individual’s own department, Public Safety, HRM, or the RM/EHS Office. In addition, outside training shall be documented similarly and maintained in a centralized location for review. All training documents shall include the employee’s name, date(s) and type(s) of training provided, and the name of the person conducting the training. This documentation shall be maintained for at least three (3) years.
ERGONOMIC SUPPLEMENT

1.0. PURPOSE

1.1 The purpose of this program is to effectively eliminate or control work related cumulative trauma disorders by providing University leadership and employee involvement in the identification and intervention of hazards posed by poor work practices and/or poorly designed workstations.

1.2 Ergonomics as defined in this context is the science of fitting jobs and workstations to people. The person’s physical abilities, personal attributes, and limitations are all factors, which contribute to the human characteristics that are relevant to job design. Good ergonomic design makes the most efficient use of a worker’s capabilities while ensuring that job demands do not exceed those capabilities.

2.0. RESPONSIBILITY

2.1 Employee:

2.1.1. Each employee has the individual responsibility to report any work-related injury or illness to their immediate supervisor, and to the University Workers’ Compensation Coordinator.

2.1.2. An employee with an ergonomically designed workstation is expected to utilize those features to minimize and/or eliminate the likelihood for cumulative trauma related disorders. Failure to do so will constitute a breach of that employee’s commitment to implement a safe and healthful working environment.

2.1.3. It is the responsibility of every employee to communicate to management any medical restrictions imposed by a doctor.

2.2 Management/Supervision:

2.2.1. The management of a given department has the responsibility to ensure the working conditions within that area provide a safe and healthful working environment.

2.2.2. If an employee reports symptoms or an actual injury related to a cumulative trauma disorder, management is required to instruct that employee to report such an occurrence to the University Workers’ Compensation Coordinator.
2.2.3. Upon initial knowledge of a work-related cumulative trauma related disorder, management shall initiate a workstation evaluation by contacting the RM/EHS Office. Any recommendations from such an evaluation shall be implemented unless the employee can be accommodated otherwise.

2.2.4. If an employee returns to work with a doctor’s notice of restrictions, then management must not allow that employee to work in a manner, which exceeds those medical limitations. If management cannot accommodate the employee’s restricted activity, then a meeting with the University Workers’ Compensation Coordinator is required.

2.3 RM/EHS Office:

2.3.1. Shall evaluate all management requests for workstation evaluations resulting from employee complaints or workers’ compensation claims.

2.3.2. Shall provide ergonomic training to employees and management on the proper work practices necessary to maintain a safe and healthful working environment.

2.3.3. Shall review the OSHA 300 Log entries to track any trends of cumulative trauma-type disorders and initiate the training and workstation corrections necessary to alleviate recurrences.

2.3.4. Shall periodically review and revise the University Ergonomic Program as technical and/or regulatory advances dictate.
APPENDIX 8.2

HAZARD INCIDENT REPORT FORM
CALIFORNIA STATE UNIVERSITY
LOS ANGELES

HAZARD / INCIDENT REPORT

To: Risk Mgmt. & EHS Office
ADM 301, Mail Code 8570-05

Date: ___________

From: Name ______________________ (Optional)
Dept./Area ______________________
Extension ______________________ (Optional)

Type of Hazard/Incident & Location:

Description of Hazard/Incident:

Additional Comments: (Related historical actions, requests, or experiences)

Investigator’s Signature: ___________________________ Date: ___________
(RM/EHS Staff Only)

Corrective Action(s) Taken:

Signature of Closure Validation: ___________________________ Date: ___________
(RM/EHS Staff Only)
APPENDIX 8.3

EHS PROGRAM
TRAINING SCHEDULE
RM/EHS TRAINING SCHEDULE

Requiring Initial Employee Training:

- Brief Overview of Environmental Management
  (Water Quality, Air Quality, and Hazardous Materials & Waste)
- Injury & Illness Prevention Program
- Hazard Communication Program
- Fire Extinguisher & Equipment
- Ergonomics Program

Requiring Annual Employee Training (Affected Personnel Only):

- Forklift/Industrial Vehicle Safety Program
- Bloodborne Pathogens Program
- Personal Protective Equipment Program
- Confined Space Entry Program
- Machine & Powered Tool Safety Program
- Electrical Safety Program
- Lockout & Tagout Program
- Proper Lifting & Back Safety
- Laboratory Safety
- Defensive Driver Training (if applicable)

Monthly Employee Awareness Training:

- New Employee Orientation General RM/EHS Awareness
APPENDIX 8.4

SUPERVISOR’S REPORT OF OCCUPATIONAL INJURY/ILLNESS
Supervisor's Report of Occupational Injury or Illness

California law requires an employer to report within five days every injury or occupational illness which: (1) results in time lost beyond the day of injury or (2) requires medical treatment other than first aid. This report is required by the TPA and the Department of Industrial Relations. Send one copy to Environmental, Health & Safety (EHS), Attn: Workers' Compensation Coordinator, Bungalow D (Mail Code 8570-05). EHS will prepare and submit the official report to the TPA. Make and retain a copy of the report for your file. FATAL or SERIOUS injuries/illnesses must be reported IMMEDIATELY by telephone and on this form to Environmental, Health & Safety, which will then report to the TPA and the Division of Industrial Safety as required by law. The Department of Public Safety is responsible for making these reports to the Division of Industrial Safety when Environmental, Health & Safety is closed.

If you have any questions, please call extension 3657.

Please report all injuries (no matter how trivial) within 24 hours to your employer.

Filing this report is not an admission of liability.

Part A - Personal Information
Name of injured: _____________________________ Social Security Number: _____________________________
Home Address (Number and Street, City, Zip): ______________________________________________________
Home Phone Number: _____________________________ Birth Date: _____________________________

Part B - Employee Status
Classification: _____________________________ Department: _____________________________
Supervisor: _____________________________ Hire Date: _____________________________
Status: Full-Time Part-Time
Salary: $ ______ per month or $ ______ per hour. Hours Worked: Daily Weekly

Part C - Injury/Illness
Date: _____________________________ Time: _______ a.m./p.m. Date Employee Reported Injury: _____________________________
Witnesses (Names and Telephone Numbers):
1 _____________________________ 3 _____________________________
2 _____________________________ 4 _____________________________

Where did injury/illness occur?

What was employee doing when injured?

How did the injury/illness occur?

Describe the nature of the injury/illness.

Please answer all questions (Over)
Part - C (Continued)

Describe the part(s) of the body injured.

Was another person responsible? Yes No If yes, explain.

Part D - MEDICAL TREATMENT

Where did employee receive treatment

___ CSULA Student Health Center
___ Huntington Memorial Hospital, Center for Occupational Health, 800 S. Fairmount Avenue, Suite 312, Pasadena, CA 9110
___ Hospital: Name _____________________________
     Address __________________________________
___ Other: Name ________________________________

__ Declined Medical Care

Part E - RETURN TO WORK

Did employee lose at least one (1) full day of work after the date of injury/illness? ___ Yes ___ No

Did the employee return to work? ___ Yes (returned to work on ___________) ___ No

What type of work did the employee return to: ___ Regular ___ Modified

If employee was unable to perform full duty, what type of temporary-modified work was made available?

Arranged temporary-modified work for ___ day(s) beginning on ____________

Part F - ACCIDENT PREVENTION

Describe the work place and conditions which may have contributed to the injury/illness and safety devices present:

What recommendations would you suggest which may correct the condition(s) and/or prevent future injuries/illnesses of this type?

Supervisor’s Signature: ___________________________ Date: __________

Position Title: ___________________________ Extension: __________

EHS USE ONLY

Position Number: ___________________________ Salary: $ _______ Hire Date: __________

EHS/SUPVREPT (REV 11/02)
APPENDIX 8.5

EMPLOYEE'S REPORT OF OCCUPATIONAL INJURY/ILLNESS
EMPLOYEE'S REPORT OF OCCUPATIONAL INJURY OR ILLNESS

1. Notify your immediate supervisor as soon as possible of any injury/illness sustained during the course of your work with Cal State L.A.

2. Obtain medical care from:
   - Cal State L.A. Student Health Center; or
   - Huntington Memorial Hospital Center for Occupational Health (800 S. Fairmont Ave, Suite 312, Pasadena, CA 91105) or
   - Your personal physician (authorized only if you have submitted a Designation of Physician form to Environmental, Health & Safety before your Date of Injury).

3. Within 24 hours, complete and return to your immediate supervisor:
   - Employee’s Report of Occupational Injury/Illness

4. Continue with medical treatment as prescribed by the treating medical provider. After each medical visit, submit a copy of your medical status documents to:
   - Your immediate supervisor, and
   - Environmental, Health & Safety

Upon receipt of the appropriate forms, Environmental, Health & Safety will coordinate the claim processing with the University’s insurance provider, the employing department, the medical provider and the employee. Should you require further assistance with this form, please contact your Workers’ Compensation Coordinator at extension 3657.

Part A - PERSONAL INFORMATION

Name of injured: __________________________ Social Security Number: __________________________

Home Address (Number and Street, City, Zip): __________________________________________________________

Home Phone Number: __________________________ Birth Date: __________________________

Part B - EMPLOYMENT STATUS

Classification: __________________________ Department: __________________________

Supervisor: __________________________ Hire Date: __________________________

Part C - INJURY/ILLNESS

Date: __________________________ Time: _______ a.m./p.m. Date Employee Reported Injury: __________________________

Witnesses (Names and Telephone Numbers):

1. ____________________________________________ 3. ____________________________________________

2. ____________________________________________ 4. ____________________________________________

Where did injury/illness occur? ____________________________________________

What were you doing when the injury/illness occurred? ____________________________________________

How did the injury/illness occur? ____________________________________________

Describe the nature of the injury/illness. ____________________________________________

(Over)
Part C (Continued)

Describe the part(s) of the body injured.

Was another person responsible? Yes No If yes, explain.

Part D - MEDICAL TREATMENT

Where did you receive treatment:

CSULA Student Health Center
Huntington Memorial Center for Occupation Health, 812 S. Fairmount Avenue, Suite 312, Pasadena, CA 91105

Hospital: Name ___________________________
Address ___________________________

Other: Name ___________________________

Declined Medical Care

Part E - RETURN TO WORK

Did you lose at least one (1) full day of work after the
date of injury/illness? Yes No

Did you return to work? Yes (returned to work on ____________) No

What type of work did you return to:

Regular Modified

If you were unable to perform full duty, what type of temporary-modified work was made available to you

My supervisor arranged temporary-modified work for _______ days beginning on ____________

Part F - ACCIDENT PREVENTION

Describe the work place and conditions which may have contributed to the injury/illness and safety devices present:

What recommendations would you suggest which may correct the condition(s) and/or prevent future injuries/illnesses of this type?

Additional Comments:

Employee's Signature ___________________________ Date: ____________

Position Title: ___________________________ Extension: ____________

EHS USE ONLY

Position Number: ___________________________ Salary: $ _______ Hire Date: ____________

EHS/EEREPT (REV 11/02)
APPENDIX 8.6

HEAT ILLNESS PREVENTION PROGRAM
HEAT ILLNESS PREVENTION PROGRAM

1.0. PURPOSE

1.1 The purpose of this program is to effectively eliminate or control heat illnesses while at work.

2.0. ORGANIZATIONS AFFECTED

2.1. The primary affected department is Facilities Services, and the area within Facilities with the greatest susceptibility to heat-related illnesses is Grounds.

2.2. Workers of non-University employers or volunteer groups are not the responsibility of CSULA, and the application of this heat illness prevention standard should be the responsibility of the parent organization and/or employer.

3.0. REFERENCES/STATUTORY AUTHORITY

3.1. California Code of Regulations (CCR), Title 8, Section 3395.

4.0. RESPONSIBILITIES

4.1. Employee:

4.1.1. Each employee has the responsibility to report any work-related injury or illness to their immediate supervisor, and to the University Workers’ Compensation Coordinator.

4.1.2. An employee should attend the prescribed training on heat illness prevention and apply the elements to his/her work assignment.

4.1.3. It is the responsibility of every employee to immediately communicate to management, directly or through the employee’s Supervisor, symptoms or signs of heat illness in themselves, or in co-workers.

4.2. Management/Supervision:

4.2.1. The management of a given department has the responsibility to ensure the working conditions within that area provide a safe and healthful working environment. Methods of heat illness prevention can be accomplished through monitoring of weather conditions, proper employee training on heat illnesses, early
morning scheduling of outdoor work, proper hydration and access to water/shade, appropriate staffing for the assignment, and/or methods of communication for remote site work.

4.2.2. If an employee reports symptoms or an actual injury related to a heat-related illness, they should be immediately transported to the University Student Health Center or paramedics summoned by dialing 911.

4.2.3. Upon initial knowledge of a work-related heat disorder, management shall communicate with the RM/EHS Office. Any recommendations made by the RM/EHS Office shall be immediately implemented.

4.3. **Facilities Services Department:**

4.3.1. Ensure that adequate water is available to employees working in remote locations where water is not available for extended periods of time in conditions of extreme heat and/or humidity. The water should be placed in a central point for access by employees during normal working hours, at minimum water shall be stocked in quantities of one-quart per employee per hour of work outside.

4.3.2. Ensure that those employees identified as being required to work outdoors where potential heat illness can occur receive the training on the Heat Illness Prevention Program.

4.3.3. Employees should be encouraged to find shelter or other shade upon the initial symptoms of heat illness, and be observant of their fellow workers’ health. Clearly identified emergency procedures should be established and understood with workers in the field prior to the need for medical care.

4.4. **RM/EHS Office:**

4.4.1. Shall provide heat-related illness prevention training to employees and management on the proper work practices necessary to maintain a safe and healthful working environment.

4.4.2. Shall review the OSHA 300 Log entries to track any trends of heat-related disorders and initiate the training and workstation corrections necessary to alleviate recurrences.

4.4.3. Shall periodically review and revise the University Heat Illness Prevention Program as technical and/or regulatory advances dictate.
5.0. **KEY PROGRAM DEFINITIONS**

5.1. **Remote Worksites:** These areas are identified on campus as being within University property West of Paseo Rancho Castilla (PRC); in/on Fiasco Field; areas South of Circle Drive; Lot F; and Lot G. All other areas have sufficient access to buildings or infrastructure of the campus to provide adequate shade and/or potable water.

5.2. **Heat Index Chart:** Is the measure of air temperature to relative humidity (RH) with the corresponding heat disorder symptoms, as prescribed by the American Red Cross. This may be utilized by the University as a guideline in applying the Cal/OSHA standard (See Below).