INJURY & ILLNESS PREVENTION PROGRAM

FOR

CALIFORNIA STATE UNIVERSITY
AT
LOS ANGELES

MAY 2015

PROGRAM APPROVAL AND AUTHORIZATION

William A. Covino, President  Date

1
# 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 SUPERVISOR’S REPORT OF OCCUPATIONAL INJURY & ILLNESS  
8.4 EMPLOYEE’S REPORT OF OCCUPATIONAL INJURY & ILLNESS  
8.5 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 8.3). Ensure that all employee work-related injuries and illnesses are properly reported to Human Resources Management (HRM).

6.2.13. In case of serious injury or illness notify RM/EHS as soon as possible at:

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

   After hours, notify Public Safety Dispatch at:

   911 (on-campus line) or 323-343-3700

   A serious injury or illness occurs when an employee has inpatient hospitalization for a period in excess of 24 hours for other than medical observation or in which an employee suffers a loss of any member of the body or suffers any serious degree of permanent disfigurement.

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.

6.4. **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.

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

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 8.4).
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. Unsafe condition shall be reported using the Hazard/Incident Report form (Appendix 8.3) as a system for communicating unsafe and/or hazardous conditions within the University. Participation in this system 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 as shown in the University Safety Training Matrix of Administrative Procedure 430. Training in ergonomics (Appendix 8.1) and heat illness prevention (Appendix 8.5) are two required programs for those affected employees.

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, the RM/EHS Office should be notified by calling:

**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 determine if the compound poses a new risk. New risks will be mitigated where possible and incorporated into procedures and training to ensure the use is performed safely. The product’s Safety Data Sheet (SDS) 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 temporarily 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. A “Hazard/Incident 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. Requestors that provide their name will be updated as to the status of the corrective action, as appropriate. Anonymity shall bear no importance when considering the hazard.
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. The matrix of programs and associated training frequencies are contained in the Administrative Procedures Manual in AP 430.
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.
APPENDIX 8.1

ERGONOMIC SUPPLEMENT
Administrative Procedure Number: 425  
Effective: 8/2/2013

ERGONOMICS PROGRAMS

1.0. PURPOSE:

To establish the procedure for applying ergonomic principles in the workplace in an effort to improve employee well-being through the reduction of workplace discomfort and the identification and control of ergonomic hazards that may result in personal occupational injuries or illnesses. An ergonomically sound work environment maximizes employee comfort while minimizing the risk of undue physical and mental stress. Work-related musculoskeletal disorders (MSDs) can result when there is a mismatch between the physical capacity of workers and their equipment and the physical demands of their job. Ergonomics can provide a solution to many of these injuries.

2.0. ORGANIZATIONS AFFECTED:

All organizational units of the University, excluding Auxiliary organizations.

3.0. REFERENCES:

3.1. California Code of Regulations, Title 8, Section 5110

3.2. California Labor Code, Sections 6400, 6401, and 6401.7

3.3. California Code of Regulations (CalOSHA), Subchapter 7, General Industry Safety Orders, Group 15, Article 106. Ergonomics, 5110, Repetitive Motion Injuries


4.0. POLICY:

It is the policy of the University to provide all employees with a safe and healthy workplace by taking the necessary steps to reduce the severity of musculoskeletal disorders (MSDs). This program is a collaborative effort that includes managers, faculty, administrators and staff. Furniture and equipment purchased to specifically address an individual employee’s ergonomic needs shall be transferred with the employee in the event of transfer. Ergonomic studies should be permitted under these circumstances:

4.1. Reasonable Accommodation – when the Office for Equity and Diversity determines an ergonomic study is needed in order to help with a disability issue related to reasonable accommodation.

4.2. Workers’ Compensation – when the Workers’ Compensation office determines that an ergonomic study is needed to help mitigate against a potential workers’ compensation claim or an employee’s doctor provides a recommendation.

4.3. Employee’s Request – when an employee notifies his or her supervisor that an
ergonomic study will help improve working conditions to alleviate pain, discomfort or an unsafe condition.

4.4. Supervisor’s Request – when a supervisor feels that an employee’s work station can be improved in order to improve working conditions to alleviate pain, discomfort or an unsafe condition.

5.0. DEFINITIONS:

5.1. Cumulative Trauma Disorders (CTDs) - The term for health disorders arising from repeated biomechanical stress on the body due to ergonomic hazards. CTDs are disorders of the muscles, tendons, and/or nerves that develop from or are aggravated by exertions or movement of the body of a repetitious nature. CTDs are also referred to as repetitive motion injuries, repetitive strain injuries, repetitive trauma disorders, and overuse injuries.

5.2. Ergonomics - The scientific study of people at work. The goal of ergonomics is to reduce physical and mental stress and eliminate injuries and disorders associated with the overuse of muscles, poor posture and repeated tasks.

5.3. Ergonomic Hazards - Workplace conditions that pose a biomechanical stress to the worker. Such hazardous workplace conditions include, but are not limited to, faulty workstation layout, improper work methods, improper tools, and job design problems that include aspects of workflow, speed, posture, inadequate lighting, force requirements, and work/rest cycles. They are also referred to as "stressors."

5.4. Musculoskeletal Disorders (MSDs) - Refers to conditions that involve the nerves, tendons, muscles, and supporting structures of the body.

5.5. Repetitive Motion Injury (RMI) - A disorder of the body’s soft tissue components that affect eyes, ears, wrists, arms, hands, joints, ligaments, tendons, and muscles individually or all at once. This is a musculoskeletal and nervous system disorder caused by repeated and frequent twisting, bending, and sustained awkward positioning, over an extended period of time. These illnesses include, but are not limited to, the following:
   a. Back Disorders
   b. Carpal Tunnel Syndrome (CTS)
   c. De Quervain’s disease
   d. Headaches associated with eye strain
   e. Hearing Loss
   f. Raynaud’s Syndrome
   g. Repetitive Motion Disorders
   h. Tendonitis
   i. Tenosynovitis
   j. Trigger Finger
   k. Environmental factors - cold or hot temperature extremes, lighting, noise

Tasks that contribute to RMI when accomplished over an extended period of time include, but are not limited to, the following:
a. Word processing  
b. Bending and lifting  
c. Hand tools or equipment use d. Pushing or pulling  
e. Computer screen use  
f. Poor work station design

5.6. Worksite evaluation - The breaking down of the complete working environment into components including personnel, workstation, workplace layout, equipment, supplies, and procedures for the purpose of identifying possible hazards and developing solutions for eliminating or controlling these hazards.

6.0. RESPONSIBILITIES:

6.1. Employees will:

6.1.1. Communicate ergonomic concerns to his/her supervisor. Employees may request a worksite evaluation by completing the Ergonomic/Worksite Evaluation Request form (Appendix 8.1.). If experiencing discomfort or pain that may be due to a repetitive motion injury, the evaluation should be requested as soon as possible.

6.1.2. Participate in the worksite evaluations.

6.1.3. Comply with ergonomic changes/recommendations.

6.1.4. Participate in training as provided.

6.2. Department Managers/Supervisors will:

6.2.1. Provide new and existing employees with a safe work environment.

6.2.2. Upon initial knowledge of a work-related cumulative trauma related disorder, initiate a workstation evaluation by contacting Risk Management & Environmental, Health & Safety (RM/EHS). Any recommendations from such an evaluation shall be implemented unless the employee can be accommodated otherwise.

6.2.3. Participate in worksite evaluations.

6.2.4. Order recommended equipment within thirty (30) days upon receipt of the ergonomic/worksite evaluation report from RM/EHS.

6.2.5. Ensure that ergonomic changes/recommendations are implemented and/or used appropriately.

6.3. Risk Management & Environmental, Health & Safety Office (RM/EHS) will:

6.3.1. Evaluate and monitor the ergonomic program including assessing the nature and extent of ergonomic hazards, recommending ways of minimizing or controlling these hazards.
6.3.2. Perform worksite evaluations of an employee’s work area upon request and make recommendations for improvements and purchase of appropriate equipment.

6.3.3. Provide ergonomic training to employees and management on the proper work practices necessary to maintain a safe and healthful working environment.

6.3.4. Evaluate all requests for worksite evaluations.

6.3.5. Follow up with the departments regarding purchasing of equipment.

6.3.6. Ensure that workstations are properly set up and employees are trained to properly adjust their furniture and equipment.

6.4. Human Resources Management (HRM) will:

6.4.1. Upon receipt of medical documentation, contact RM/EHS to perform a worksite evaluation.

6.4.2. Upon receipt of the worksite evaluation report from RM/EHS, the Workers’ Compensation unit or Office for Equity and Diversity will purchase the requested equipment as it relates to these areas.

6.4.3. Follow up with RM/EHS to ensure that the workstations are properly set up.

7.0. PROCEDURES:

7.1. Procurement and Contracts:

7.1.1. When developing plans or considering purchases that may not conform to University ergonomic standards, Procurement and Contracts will consult with the RM/EHS office.

8.0. APPENDICES:

8.1. Ergonomic/Worksite Evaluation Request
# Ergonomic/Worksite Evaluation Request

**Requested by:** Employee: ___________________________ **Supervisor:** ___________________________
**Department Administrator:** ___________________________ **Workers' Compensation:** ___________________________
**Equity & Diversity:** ___________________________

---

Upon completion, please return form to the Risk Management & Environmental, Health & Safety Office (RM/EHS). The information you submit will be treated confidential to the extent permitted. Please note under the Americans with Disabilities Act or Workers' Compensation cases only your request cannot be processed unless you attach medical documentation (requiring an ergonomic evaluation). For further information regarding ergonomic/worksite evaluations, contact the RM/EHS office @ 3-3531.

---

<table>
<thead>
<tr>
<th>Last, First Name:</th>
<th>Date of Request:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Contact Number:</th>
<th>Job Location:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Department:</th>
<th>Job Title:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Immediate Supervisor's Name:</th>
<th>Phone Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Reason(s) for request:**

- I am experiencing discomfort (associated with my workstation)
- I have a new workstation or I am new to the job
- I want to ensure my workstation is set up ergonomically correct
- Other (please specify) ____________________________

---

21
APPENDIX 8.2

HAZARD INCIDENT REPORT FORM
HAZARD / INCIDENT REPORT

To: Risk Mgmt. & EHS Office
Corporate Yard Room 244

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

SUPERVISOR’S REPORT OF OCCUPATIONAL INJURY/ILLNESS
# SUPERVISOR'S REPORT OF OCCUPATIONAL INJURY OR ILLNESS

California law requires any employee to report within five days any injury or occupational disease which will result in absence beyond the day of injury or which requires medical treatment other than first aid.

This report is required by the Third Party Administrator (TPA) and the Department of Industrial Relations. Each C19F-1794 to Human Resources Management (HRM) and the Workers' Compensation Coordination, Admin. 1996 (Mount Code 85140). HRM will prepare and forward the initial report to the TPA. The TPA shall submit a copy of the report to the TPA. Each report shall be submitted on an MC3-144 and shall be transmitted by telephone to Human Resources Management, who will then transmit it to the TPA and the Department of Industrial Relations as required by law. The Department of Public Safety is responsible for making these reports to the Division of Industrial Safety when Human Resources Management is closed.

If you have any questions, please call extension 432.

PLEASE REPORT ALL INJURIES (no matter how trivial) WITHIN ONE WORKING DAY TO YOUR EMPLOYER.

FILING THIS REPORT IS NOT AN ADMISSION OF LIABILITY

## Part A - PERSONAL INFORMATION

<table>
<thead>
<tr>
<th>Name of Injured</th>
<th>Employees ID Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Home Address (Number &amp; Street, City, Zip)</th>
<th></th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Home Phone Number</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Part B - EMPLOYEE STATUS

<table>
<thead>
<tr>
<th>Classification</th>
<th>Department</th>
<th>Start Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Supervisors</th>
<th>Sex</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Status: Full-Time</th>
<th>Part-Time</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Salary $</th>
<th>per month or $ per hour</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Status: Weekly</th>
<th>Daily</th>
<th>Weekly</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Part C - INJURY/ILLNESS

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Date Employee Reported Injury</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Witness (Name and Telephone Number)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
</tr>
<tr>
<td>2</td>
</tr>
<tr>
<td>3</td>
</tr>
<tr>
<td>4</td>
</tr>
</tbody>
</table>

Where did injury/illness occur?

Where were you working when injured?

Describe the nature of the injury/illness:

[Answer]
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 see a doctor:

- [ ] N.Y. State Health Center
- [ ] U.S. Head, Neck, Spine Medical Group

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 No

What type of work did the employee return to? Regular Modified

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

Temporary modified work for __________ days beginning on __________

Part F - ACCIDENT PREVENTION

Describe the workplace and conditions which may have contributed to the injury/illness and disability sustained:

What reasonable actions would you suggest which may prevent the condition/objective described from occurring in the future?

Supervisor’s Signature: ____________________________

Supervisor’s Name or print: ______________________

Employee’s Signature: __________________________

Employee’s Name or print: ______________________

Date: ____________________

New Use Only

Pretrauma Notice: __________________________

Salary: __________________________

Date: __________________________

TRW-PSDM/RR/REV 1/94

26
APPENDIX 8.4

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 LA.

2. Obtain medical care from:
   - Cal State LA Student Health Center or
   - U.S. HealthWorks Medical Group or
   - Your personal physician (authorized only if you have submitted a Designation of Physician form to Human Resources Management before your date of injury).

3. Within one working day, 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
   - Human Resources Management

Upon receipt of the appropriate forms, Human Resources Management 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 worker's compensation coordinator at extension 3885.

---

**Part A - PERSONAL INFORMATION**

<table>
<thead>
<tr>
<th>Name of Injured</th>
<th>Social Security Number</th>
</tr>
</thead>
</table>

| Home Address (Number and Street, City, Zip) |

| Home Phone Number | Birth Date |

---

**Part B - EMPLOYEE STATUS**

| Classification | Department |

| Supervisor | Hire Date |

| Salary $ | per month $ | per hour |

| Sex | Male □ | Female □ |

---

**Part C - INJURY/ILLNESS**

| Date | Time | a.m./p.m. | Date Employee Reported Injury |

| Witness/Observer and Telephone Number |  |

| 1 |  |

| 2 |  |

| 3 |  |

| 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
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

Columbia Student Health Center

US HealthWorks Medical Group

Hospital Name __________________________
Address __________________________________

Other Name __________________________

Accepted Medical Care

Part E - RETURN TO WORK

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

Did you return to work? Yes (date 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 used? __________________________________________________________________________

Part F - ACCIDENT PREVENTION

Describe the workplace and conditions which may have contributed to the injury and unsafe work practices

________________________________________________________________________

What recommendations would suggest which may correct the conditions and prevent future occurrences of this type?
________________________________________________________________________

________________________________________________________________________

Employer's Signature: ___________________________ Employee's Name (patent) ___________________________

Working Date: ___________ Instruction: ___________ Date: ___________

**HR USE ONLY**

Position: ___________________________ Valley: ___________ HR Date: ___________

HR Reference: (HR-001)
APPENDIX 8.5

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.

1.2 The purpose of this program is to establish guidelines and procedures in accordance with the State of California Heat Illness Prevention Standard CCR, Title 8, Section 3395.

2.0. ORGANIZATIONS AFFECTED

2.1. The primary affected departments are Facilities Services, Public Safety and Housing, and the area with the greatest susceptibility to heat-related illnesses is the Grounds & Maintenance area within Facilities Services.

2.2. All workers that primarily have outdoor duties are subject to this program.

2.3. 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 to establish.

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, after the injury/illness occurs but no later than 24 hours from the date of the incident.

4.1.2. An employee should attend the prescribed training on heat illness prevention and apply the elements of this program 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 on a campus phone, or by calling University Police at (323) 343-3700.

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. **All Departments with Field Activities shall:**

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 North Field; areas South of Circle Drive; Lot 5; and Lot 7. 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).

6.0. PROGRAM PROCEDURES

6.1. Program Implementation

6.1.1. The designated personnel for primary responsibility in implementing the protocols of this program are the supervisors for those employees with primary duties in the field. Personnel on academic-related field trips should consult with these procedures and apply those which are relevant to the temperatures for which they will be subject to. The faculty in charge of those field activities are the responsible party to implement heat illness prevention procedures.

6.1.2. The program oversight and training shall be coordinated through the EHS Office Health & Safety Coordinator, and the aforementioned department administrators in 6.1.1.
6.2. Procedures for Provision of Water

6.2.1. Drinking water containers will be brought to the work site so that at least one quart per employee per hour is available at the start of the shift. All workers whether working individually or within a crew will have access to drinking water.

6.2.2. If containers are not specified for an individual’s personal use, then paper cone rims or disposable cups will be made available to workers and will be kept clean until used.

6.2.3. As part of the Effective Replenishment Procedures, the water level of all containers will be checked periodically to ensure that water levels in containers that drop below 50% are replenished as needed.

6.2.4. Water containers will be placed as close as possible to the workers, noting the working conditions and layout of the site, to encourage the frequent drinking of water. If terrain prevents the water from being placed as close as possible to the workers, bottled water or personal water containers will be made available, so that workers can have drinking water readily accessible.

6.2.5. Bulk water containers will be relocated to follow along with the working crew, so drinking water will remain readily accessible.

6.2.6. Water containers will be kept in sanitary condition.

6.2.7. On a daily basis, workers will be reminded of the location of the water coolers and of the importance of drinking water frequently. When the temperature exceeds or is expected to exceed 90 degrees Fahrenheit, brief “tailgate” or “safety” meetings will be conducted each morning by the Supervisor or Leadperson to review with employees the importance of drinking water and staying hydrated, the number and schedule of water and rest breaks, and the signs and symptoms of heat illness.

6.2.8. As appropriate, notices on the University radio system will be used to remind employees to remain hydrated during remote work assignments.

6.2.9. When the temperature equals or exceeds 95 degrees Fahrenheit or during a heat wave, the number of water breaks will be increased, and workers will be reminded throughout the work shift to remain hydrated.

6.3. Procedures for Access to Shade
6.3.1. When working conditions equal or exceeding 80 degrees Fahrenheit, supplementary shade structures will be utilized and placed as close as practical to the workers, if site conditions do not allow for appropriate shade protection. Shade means protection from the sun and other sources of radiated heat and sufficient natural or artificial ventilation to allow cooling. The interior of a vehicle may not be used to provide shade unless the vehicle is air-conditioned and the air conditioner has effectively cooled the interior.

6.3.2. Shade opportunities/structures will be available at the site to accommodate all employees of the shift as needed. Workers will be informed of the location of the shade opportunities/structures.

6.3.3. Workers will be encouraged to take preventative cool-down rest period lasting a minimum of five (5) minutes in the shade. Workers should not wait until they feel symptoms of heat illness to take preventive cool-down rest breaks. Additionally, workers needing additional rest periods will be granted them. Workers showing signs of heat illness while taking a cool-down rest break will not be allowed to return to work until recovered.

6.3.4. In the event the conditions or work activity prevent the aforementioned actions to provide shade safely and efficiently, then the Supervisor or Leadperson shall develop alternative cooling measures that provide an equivalency of shade protection.

6.4. Procedures for Monitoring Weather Conditions

6.4.1. The Supervisor and/or Leadperson shall be trained and directed to check in advance for remote work activity the current and extended weather forecast. Weather forecasts can be check using a variety of resources that should include any one of the following:

6.4.1.1. Review of the internet http://www.nws.noaa.gov for the area in question;
6.4.1.2. Review of the Weather Channel TV Network; or
6.4.1.3. Calling the National Weather service at (805) 988-6610 (#1)(#1)(#1) for the Los Angeles Downtown area.

6.4.2. Supervisors/Leadpersons shall review prior to each work day, the forecasted temperature and humidity for the worksite and compare against the National Weather service Heat Index shown in Section 5.2. Determination will be made of whether or not workers will be exposed at a temperature and humidity characterized as either "extreme caution" or "extreme danger" for heat illnesses. It is important to note that the temperature at which these warnings occur must be lowered as much as 15 degrees if the workers under consideration are in direct sunlight for the work shift.
6.4.3. The weather information and conditions determined in Sections 6.4.1. and 6.4.2. above will be taken into consideration to determine when it will be necessary to make modifications to the work schedule, such as stopping work early, rescheduling the job assignment, working at night or during the cooler hours of the day, and in increasing the number of water and rest/shade breaks.

6.4.4. Consistent monitoring of the jobsite for sudden increases in temperature will be employed through the means noted in 6.4.1. or by use of an on-site thermometer.

6.5. Procedures for Handling a Heat Wave

6.5.1. During an identified heat wave or heat spike, the Supervisor/Leadperson of personnel in the field must address this abnormal condition and reassign, reschedule, or in some manner alter the worker schedule to avoid prolonged exposure to excessive heat conditions. Supervision shall also conduct briefings and safety trainings at the beginning of the work shift to address and mitigate any adverse exposure to impacted workers.

6.5.2. During periods of significant heat exposure Supervisors shall assign work in pairs to allow for the “buddy” system to exist. Each employee will be on the lookout for signs and symptoms of heat illness for the other worker they are with.

6.6. Procedures During Periods of High Heat (Temperature Equals or Exceeds 95 degrees Fahrenheit)

6.6.1. Effective communication with field personnel is readily available through university issued radios, cell phones or other communication devices. For periods of high heat, the Supervisor/Leadperson will maintain contact throughout the work day to ensure personnel are aware of the hydration requirements and that they maintain full awareness of the conditions.

6.6.2. Fellow employees assigned to work in pairs will be briefed on their responsibilities to each other in observing and identifying signs of heat related illness. Upon identification, they will be thoroughly trained on the actions to take in such event.

6.6.3. New employees will be closely supervised for the first 14 days of employment to ensure their complete understanding of the university heat illness prevention guidelines.

6.7. Procedures for Acclimatization
6.7.1. The Supervisor and/or Leadperson will monitor the weather for sudden heat waves, or increases of temperature that the field personnel have not been accustomed to for several weeks or longer. During such a dramatic shift in weather conditions the university will employ means and methods to reduce or eliminate the heat-related exposure to field personnel, which may include the re-assignment to indoor or other non-threatening duties.

6.7.2. The Supervisor and/or Leadperson will be extra-vigilant with new employees and stay alert to the presence of heat related symptoms. For the first 14 day period in heat intense periods work load reductions or other mitigating measures will be documented for new employees.

6.7.3. Supervisors and/or Leadpersons will be trained on the importance of acclimatization, how it is developed and how university procedures address it.

6.8. Procedures for Emergency Response and Handling a Sick Employee

6.8.1. Workers’ assignments are within the boundaries of the university and therefore their precise work location is clearly understood by field personnel and first responders.

6.8.2. Upon the onset of any employee demonstrating symptoms of possible heat illness, steps will be taken by co-workers to keep the stricken employee cool and comfortable until emergency service responders have arrived.

6.8.3. Upon the onset of symptoms related to heat illness, the University Police shall be contacted through the university radio network, or by telephone to (323) 343-3700 [ask for Dispatch] or on a campus phone dial 911. University Police are trained in first aid and CPR and are qualified to render initial medical assistance until paramedics arrive.

6.8.4. The University Student Health Center (SHC) is also available to assist and treat employees stricken by a heat related illness. Employees must be able to get to the SHC on their own accord; otherwise they are to stay in the field until first responders arrive. Never allow an employee exhibiting symptoms of heat related illness to leave the site on their own.

6.8.5. The Supervisor and/or Leadperson shall notify the University EHS Office and the Workers’ Compensation Coordinator upon the identification and diagnosis of an employee suffering symptoms or exposure to a heat-related illness. This notification should occur as soon as is practical but no later than 24 business hours from the medical event.
6.9. Procedures for Employee and Supervisory Training

6.9.1. Supervisors and/or Leadpersons will be trained annually, prior to the start of the heat related period, preferably in March to May of the calendar year, on the provisions found within these procedures for which they are to be accountable for and responsible to implement.

6.9.2. Employees subject to the heat illness prevention program guidelines and procedures shall be trained annually during the period between April and June of each calendar year, on the provisions found within these procedures.

6.9.3. All new employees of the university shall receive a synopsis of these written procedures that shall be incorporated into the new employee safety orientation sequence of training.

6.9.4. On an annual basis electronic messages on the heat illness prevention program shall be distributed to the campus community as a whole to increase awareness for those persons who do not have direct work assignments in the field.

6.9.5. When the temperature exceeds 95 degrees Fahrenheit safety tailgate meetings and/or employee briefings will be held to review the weather conditions, to reinforce provisions in the heat illness prevention program, ensure communications, and to provide awareness on, and encourage remaining hydrated during periods of extreme heat.