DEVELOPING AN AGribusiness Safety Program

Protect Your Business
Disclaimer

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Grinnell Mutual Reinsurance Company is aware that this booklet will not fit the operations of all companies. Applicable state/federal statutes must supersede any conflicting statements made or referred to in this booklet.

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Section I – Introduction

One of the most valuable assets any company has is its employees. This is true if the company is a small business, a large corporation, or government agency. Therefore, it follows that investing in a workplace injury and illness prevention program is one way of protecting your assets, both physical and human.

It is well known that the direct costs of work injuries are substantial. Also, there are many indirect or hidden costs of injuries, which are often three-to-four times greater than the direct costs. Many of these costs are associated with – productive time lost by an injured employee – productive time lost by employees and supervisors attending the accident victim – time and cost to start up operations interrupted by the accident – time and cost to hire or retrain other individuals to replace the injured worker until his/her return to work – time and cost for repair or replacement of any damaged equipment or materials – cost of continuing all or part of the employee’s wages, in addition to the incurred medical costs – reduced morale among your employees and perhaps lower efficiency – increased insurance premiums – administrative costs generated by the incidents – overtime costs – adverse publicity. By developing a Safety Program, it will enable you to avoid possible losses in the future.

A formal safety program will also assist your company in complying with Federal and State safety, health, and environmental laws. Lack of compliance with these laws can result in citations, fines, unfavorable publicity and, in some cases, civil suits.

Establishing a quality safety program at your place of business will take some time and involve some resources. However, you should be pleasantly surprised with the results. You will have happier employees, as they will know you are committed to safety on the job. The reward you receive will surely exceed the cost of your investment in safety protection.

The objectives of any safety program is to reduce the frequency and severity of accidents, to comply with State and Federal OSHA regulations, and to provide a safe and healthful workplace.

SAFETY POLICY STATEMENT

A company that attempts to prevent accidents without a definite guiding policy, one that is planned, publicized, and promoted, will find it difficult to prevent accidents. If Management wants acceptable safe performance, it must first write a safety policy statement. This policy statement should be brief, to the point, and define Management’s attitude.

In order for your safety policy statement to be effective, you must clearly communicate it to all your employees by both explanation and by example.

Your policy statement should be typed and displayed within your place of business at a prominent location for employees and the general public to observe.

The company policy statement should be reviewed with all employees, and they should sign a document indicating they have read and understand the company safety policy statement.

See Section II and Appendix A on Model Safety Policy Statement development.

SAFETY PROGRAM FOR THE ORGANIZATION

The safety policy statement is a beginning, but certainly not a complete program. A comprehensive Safety Program should be developed for your organization. Also, irregularly executed inspections or safety meetings and brief spurts of executive interest are no substitute for pro-active, consistent, and visible management support and leadership for a well planned and executed safety program.

Top management needs to lead and set a positive example. If the safety program is a "low priority" for the CEO, it will likely be a "low priority" for employees. Low priority will mean inadequate attention, and that will sooner or later result in an accident, or accidents that can disable, maim, or kill.

OSHA’s "General Industry Digest" notes that management commitment and employee involvement are "complimentary and form the core" of any safety program. The book provides several recommendations for achieving these two goals. Recommended actions that bear directly on drafting the safety policy include:

- Stating the worksite policies on safety and health clearly.
- Establishing and communicating safety goals and defining objectives to meet that goal.
- Assigning and communicating responsibility for all aspects of the program.
- Reviewing program operations at least once a year so that deficiencies can be identified and revised as necessary.

Make sure your program assigns responsibility and accountability to all employees in your organization. A good safety program makes it clear that every employee from you through the supervisory level to the line worker is responsible for his or her part in the program. You should make their safety and health duties clear and each of them should be held accountable for his or her safety and health related duties. Accountability should be built into job descriptions, performance reviews, and daily interaction in the workplace.

Management at all levels should accept responsibility for the organization's injury rate and should provide pro-active, visible leadership on safety management. They should also provide the resources required to design and implement a safety program that meets at least the legal requirements at the state and federal level.

- For employees, accountability should include adherence to safety rules and procedures, and prompt reporting of any hazard.

Employees must be involved in all aspects of the program from the beginning. They are the people most in contact with the potential and actual safety hazards at the worksite. They will have constructive input into the development of your safety program. The ultimate success will depend upon their support - support that will be more forthcoming for a program which they have had meaningful input.

Your safety policy should be tailored to fit your organization’s corporate philosophy, needs, and culture.

See Section II for Development of Safety Program.

SAFETY DIRECTOR

Management is ultimately responsible for ensuring that a safety program is implemented and maintained. Management needs to provide the commitment, leadership, and resources. However, it is common and practical to delegate some implementation duty to an appointed safety director, while maintaining overall control and monitoring the performance of the safety program.

The safety director or designee should meet the following criteria.
- conceptually committed to safety and health in the workplace
- has or is given the time to develop and implement the program
- has or is given sufficient authority to develop and implement the program
- is supported by adequate resources to develop and implement the program
- sincerely cares about employee welfare
- has a high degree of credibility with the employees

In some situations, the safety director function can be added to an existing position. In larger companies or companies with high accident frequencies or severities or inherently hazardous processes, a full-time person is often required.

The success of your program hinges on the success of the individual you choose, and he or she cannot succeed without your full cooperation and support. Remember, that when you appoint someone as your safety director and delegate the authority to manage the program, the ultimate responsibility for safety in your workplace rests with you.

See Section II – C-2 for Safety Director Program Responsibilities.

EMPLOYEE TRAINING

As an Owner or Manager you must ensure that all employees know about the material and equipment they work with, what known hazards are in the operation, and how you are controlling the hazards.

Each employee needs to know the following:
- No employee is expected to undertake a job until he or she has received job instructions on how to do it properly and has been authorized to perform that job.
- No employee should undertake a job that appears unsafe.
Combine safety training with other training, the result you want is everyone knowing what they need to know to keep themselves and fellow workers safe and healthy.

During employee orientation, they should be given a copy of the company’s Safety Policy Statement, and the company’s Safety Program should be discussed with them.

After the initial employee orientation, and for existing employees, your safety program can be communicated by a variety of techniques and methods. Regular meetings could be scheduled during which safety is openly discussed. Attendance should be required for all employees. If properly planned, effective safety meetings can be held in a 15-20 minute time frame. Other methods could be posters on bulletin boards, safety and health booklets, safety signs, newsletters, safety banners, safety films/videos, etc. See Appendix D for a list of safety films/videos.

As changes are made to your safety program, keep your employees informed. The more you do to keep them informed of the changes and improvements you are making, the greater are the chances for your success.

All safety training meetings should be documented. The date of the meeting, name of the instructor, subject discussed, and the names of the employees attending the meeting should be documented on an attendance form.

See Section III for an example of a New Employee Safety Checklist.

**EMERGENCY ACTION PLANNING**

Planning and training for an emergency is essential in order to minimize the harmful consequences of an emergency incident. If personnel are not thoroughly trained for emergencies so their response is immediate and precise, they may expose themselves and others to greater danger, rather than reduce their exposure. The types of emergencies that may arise at your work site depend on the nature of your operation and its geographical location. They could include fire, severe weather, chemical spills, earthquakes and bomb threats. The extent to which training and drills are needed will depend upon the potential severity and complexity of the emergency. You should have an emergency procedure for handling injuries, transporting ill or injured workers, and notifying medical facilities, with a minimum of confusion. The procedures for reporting injuries and illnesses should be understood by all employees.

Emergency phone numbers should be posted. They should include at least the fire department, hospital emergency room, ambulance, and law enforcement.

See Section IV – A for additional information on Emergency and Evacuation Procedures and see Appendix B for Planning for Emergencies Sample Checklist.

**ACCIDENT INVESTIGATION**

Management can gain valuable information from a thorough investigation of accidents, occupational health problems and near-miss incidents. Variances from or defects in present operating procedures, unsafe work practices, and even environmental hazards may be determined.

Determining the causes of accidents – and doing something about them – will reduce accident incidence, lower workers' compensation costs, and enhance employee morale, because workers will feel they are working with a management and company that cares and wants to correct hazards and unsafe work procedures.

REMEMBER, AN ACCIDENT INVESTIGATION IS NOT DESIGNED TO FIND FAULT OR BLAME, IT IS AN ANALYSIS TO DETERMINE CAUSES THAT CAN BE CONTROLLED OR ELIMINATED.

See Section V for assistance in developing an Accident Investigation Program and sample accident investigation forms.

**SELF INSPECTION/HAZARD IDENTIFICATION**

The assessment of your workplace should be conducted by the person responsible for the safety program and/or a professional safety and health consultant.

Conduct a comprehensive safety and health survey of your entire facility that is designed to identify any existing or potential safety and health hazards. This initial survey should focus on evaluating workplace conditions with respect to safety and health regulations and generally recognized safe and healthful work practices. It should include checking on the use of any hazardous materials, observing employee work habits and practices, and discussing safety and health problems with employees.
Create the systems and procedures necessary to **Prevent and Control the Hazards** that have been identified through your worksite analysis. These control procedures will be your basic means for preventing accidents. The OSHA standards that have been promulgated can be of great assistance to you since they address controls in order of effectiveness and preference. Where no standard exists, creative problem solving and consultant resources should help you create effective controls. The basic formula OSHA follows is, in order of preference:

1. **Eliminating the hazard** from the machine, the method, the material or the plant structure.
2. **Abating the hazard** by limiting exposure or controlling it at its source.
3. **Training personnel** to be aware of the hazard and to follow safe work procedures to avoid it.
4. **Prescribing personal protective equipment** for protecting employees against the hazard.

See Appendix C for Self-Inspection Checklist, to help you get a good start on creating this initial survey.
A. Company Safety Policy Statement

(Company Name) is dedicated to providing a safe and healthy work environment for all of our employees and customers. The Company shall follow operating practices that will safeguard employees, the public, and Company operations. We believe all accidents are preventable. Therefore, we will make every effort to prevent accidents and comply with all established safety and health laws and regulations. (For additional sample Safety Policy Statements, see Appendix A)

B. Management Commitment to Safety

Management is concerned about employee and guest safety. Accidents, unsafe working conditions, and unsafe acts jeopardize employees, customers, and Company resources. Injuries and illnesses result in discomfort, inconvenience and possibly reduced income for the employee. Costs to the Company include direct expenses (workers’ compensation premiums, damaged equipment or materials, and medical care) and indirect expenses (loss of production, reduced efficiency, employee morale problems, etc.). These indirect costs are reported to cost 4-10 times more than the insured costs of an accident. Accordingly, Management will provide sufficient staffing, funds, time, and equipment so that employees can work safely and efficiently.

C. Assignment of Responsibilities

Safety is everyone’s responsibility. Everyone should have a safe attitude and practice safe behavior at all times. To best administer and monitor our safety policies, the following responsibilities are delegated. This list should not be construed as all-inclusive and is subject to change as needed.

1. (Corporate President, Owner, or Manager) will:
   a. Provide sufficient staffing, funds, time, and equipment so that employees can work safely and efficiently.
   b. Demand safe performance from each employee and express this demand periodically and whenever the opportunity presents itself.
   c. Delegate the responsibility for a safe performance to the Manager, Supervisors, and employees, as appropriate.
   d. Hold every employee accountable for safety and evaluate performance accordingly.
   e. Periodically review the Safety Program effectiveness and results.

2. (Safety Director) will:
   a. Provide the resources, direction, and audits to integrate safety into the management system.
   b. Establish and maintain a safety education and training program.
   c. Periodically conduct safety surveys, meetings, and inspections.
   d. Advise Supervisors and employees on safety policies and procedures.
   e. Assure that all newly hired employees have been given a thorough orientation concerning the Company’s Safety Program.
   f. Prepare and maintain safety records, analysis, evaluations, and reports to improve the Company’s safety performance and comply with all government agencies, insurance carriers, and internal procedures.
   g. Work with management, supervisors and employees to maintain and implement new and ongoing safety programs and comply with recommendations provided by outside consultants, OSHA inspectors, and insurance companies.
   h. Make available all necessary personal protective equipment, job safety material, and first-aid equipment.
   i. Review all accidents with Management, Supervisors, and/or employees and ensure that corrective action is taken immediately.
   j. File all workers’ compensation claims immediately and work with the workers’ compensation carrier to ensure proper medical treatment is provided to injured workers and they are returned to work as quickly as medically possible.
3. Supervisors

Each employee who is in charge of a specific work area, supervises the work of others, or to whom an employee is assigned for a specific task or project, is responsible and accountable for their safety. Supervisors will:

a. Establish and maintain safe working conditions, practices, and processes through:
   (1) Safety Meetings
   (2) Safety Training

b. Observe work activities to detect and correct unsafe actions.

c. Ensure that all injuries are reported promptly and cared for properly. Make available first aid treatment.

d. Investigate all accidents promptly. Complete an accident report and provide it to the Manager or Supervisor the same day the accident occurs. Review all accidents with the employees and correct the causes immediately.

e. Assist in the review of employment applications and personnel files to determine physical qualifications for specified job classifications.

f. Consistently enforce safety rules/regulations, programs, and protective measures (i.e. use of personal protective equipment, machine guarding, proper clothing, etc.).

g. Post signs, notices, and instructions as needed or required.

h. Brief employees of any new hazards before they start work and weekly and/or monthly host brief safety meetings to discuss safety practices related to job hazards and general safe work behavior.

i. Work with top management and employees to maintain and implement new and ongoing safety programs and comply with recommendations provided by outside consultants, OSHA inspectors, and insurance companies.

4. Employees

Each employee is responsible for his/her own safety. No task should be completed unless it can be completed safely. Employees will:

a. Comply with all company safety programs, rules, regulations, procedures, and instructions that are applicable to his/her position with this organization.

b. Refrain from any unsafe act that might endanger him/her self or fellow workers.

c. Use all safety devices and personal protective equipment provided for his/her protection.

d. Report all hazards, incidents, and near-miss occurrences to their Manager or Supervisor, regardless of whether or not injury or property damage was involved.

e. Promptly report all injuries and suspected work related illnesses, however slight, to his/her immediate Supervisor or Manager.

f. Participate in safety meetings, training sessions, and surveys as requested and provide input into how to improve safety.

g. Notify the Manager or Supervisor immediately of any change in physical or mental condition or use of prescription drugs that would affect the employee’s job performance or the safety of him/her self or others.

h. Notify the Human Resources Manager or General Manager within five days of any serious driving, drug/alcohol, or criminal convictions.

i. Be a safe worker on (and off) the job. Help coworkers do their job safely. Come to work everyday with a safe attitude.

D. Accountability for Safety

Everyone is accountable for safety. The Corporate President/Owner will establish safety objectives and develop and direct accident prevention activities. All employees should strive to reach those objectives and will be evaluated accordingly. All Managers and Supervisors annual appraisals will include safety (results to objectives in their area and companywide) as well as an audit of their performance of their safety responsibilities. All employee salary reviews will be affected by the company’s safety performance record. Appraisals, which include safety records, will also be performed on all employees seeking a promotion.
E. Opinion Survey

The Company requests ongoing comments and feedback from all employees. In addition, annually, the company may request all employees’ opinions and input on the company’s safety program through an opinion survey. Be honest. You know your job better than anyone else does. Therefore, you can provide valuable input into performing the job safely. Changes to existing safety programs, rules, procedures, etc. may be influenced by your responses. Full cooperation of all employees is expected.

F. Employee Suggestions

Safety suggestions from employees are welcomed and encouraged. To make a safety suggestion, complete the employee safety suggestion form on the following page and provide it to your immediate superior. The suggestion(s) will be reviewed by management personnel at the next Manager’s meeting. Responses to suggestions will be discussed with the individual and posted where applicable on the company’s bulletin board.
EMPLOYEE SAFETY SUGGESTION FORM

Employee Name (optional): _________________________________________ Date: __________________________

Supervisor Name: __________________________________________________________________________________

Current Practice Or Condition
__________________________________________________________________________________________
__________________________________________________________________________________________

Suggestion
__________________________________________________________________________________________
__________________________________________________________________________________________

Benefits Expected From Change
__________________________________________________________________________________________
__________________________________________________________________________________________

(FOR SAFETY COMMITTEE USE, If applicable)

Year:_____________ Number:_____________

Suggestion Implemented?  □ Yes – as submitted       □ Yes - with changes       □ No

Implementation Date: __________________

Comments/Changes Made/Reason for change or not implemented:
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
A. New Employee Safety

The Business Owner or Manager should provide safety training to all newly hired employees. Each new employee will be given a copy of the safety manual.

1. General safety orientation containing information common to all employees should be reviewed, **before beginning their regular job duties**. Recommendations include (at a minimum):
   a. Review the Safety Manual, with extra time spent on: accident and hazard reporting procedures, emergency procedures, first aid, and special emphasis programs which are included within this program.
   b. Encourage and motivate employee involvement in safety. Make each employee accountable for their safety and the safety of their coworkers.
   c. Review any known workplace hazards.
   d. Conduct training on any topics that are not scheduled to be addressed within a reasonable timeframe and are relevant to the employee’s job.

2. Job-specific training provided before performing the task should include:
   a. Specific safety rules, procedures, hazards, and special emphasis programs (Chemical Handling Procedures/Hazard Communication Program, Personal Protective Equipment, Smoking Policy, Violence Prevention Program, Confined Space Program, Auto, Lockout/Tagout) that will impact them as they complete their job with the organization.
   b. Identify employee’s and employer’s responsibilities.

Continual training should be provided to new hires. Each new hire should be assigned to work with an experienced employee for at least 6 months. The senior employee should act as a mentor and ensure that the new employee is working safely and exhibits a positive safe attitude.

The Business Owner or Manager should complete the New Employee Safety Checklist for each new employee during their safety training.

B. Safety Meetings/Training

Supervisors should hold a minimum of `<insert appropriate number here>` safety meetings per month. Safety meetings will begin at `<insert time and day of month>`.

1. All employees are required to attend safety training meetings if they are present at work the day of the meeting. Exceptions should be cleared in writing with your immediate Supervisor the first full workday preceding the day of the safety meeting. Employees and Supervisors should offer comments and safety suggestions at the safety meeting and regularly throughout the work week as needed.

2. Safety training will be conducted on a topic announced in advance of the meeting.

3. Supervisors should update employees on any changes in procedures, new equipment, and general safety issues.

4. Emergency procedures will be periodically reviewed.

5. Employees are reminded to put safety first and look out for their coworker.

6. Employees with outstanding safety records will be recognized during these meetings. Quizzes and surveys may be administered after safety training or meetings.

7. Supervisors should provide a summary of the safety issue(s) discussed and verbally review the information with all employees that may have been absent from that month’s safety meeting.

8. The Safety Training Log should be completed following every safety meeting/training session and maintained by the Manager or the Department Supervisor.
NEW EMPLOYEE SAFETY CHECKLIST

Employee Name: ________________________________________________________ ID: _______________________
Date Employed: ______________________________ Date Checklist Completed: _______________________
Checklist completed by: _____________________________________________________________________________
Department Assigned: ______________________________ Type of Work: _________________________________
Summary of Work Experience: ________________________________________________________________________
Supervisor: _______________________________________________________________________________________

Ask Employee: Do you have any physical conditions or handicaps which might limit your ability to perform this job?
If so, what reasonable accommodation can be made by us?
_______________________________________________________________________________________________

Did the employee have a pre-employment drug test? Yes No
Physical? Yes No
Any work restrictions indicated from the physical?
_______________________________________________________________________________________________

The Business Owner or Manager and new employee should review the following safety concerns. Check and
discuss all that apply. Provide the employee with a copy of the Safety Manual.

- Company safety policies and programs
- Safety rules (general and specific to job)
- Safety rule enforcement
- Materials handling
- Accident and Hazard Reporting Procedures
- Housekeeping
- Special hazards of the job
  - Emergency Procedures
  - Employee Responsibilities/Accountability
  - Hazardous materials
- Location of First Aid Kits
- Where to go for medical treatment
- Other: _______________________________________________________________________________________

Employee shall receive additional training from: _______________________________________________________

Probationary period is from __________ to __________

Performance (including safety) will be reviewed formally on ________________

Employee agrees to cooperate fully with the safety efforts of the employer, follow all safety rules, and use good judgment
concerning safe work behavior. Yes No

Comments: _______________________________________________________________________________________
_______________________________________________________________________________________________

Signed: _________________________________________ Signed: ______________________________
Trainer Employee
SAFETY TRAINING LOG

Company Name: __________________________________________________________________________________

Date of Meeting: ________________________ Instructor: ________________________________________________

Attending Employees

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Safety Topics Covered:
- Housekeeping
- Accident Reporting
- Injuries or Accidents Review
- Accident Investigation
- Emergency Procedures
- Materials Handling/Back Safety
- Fire Protection
- Other ________________________________________________________________________________________

Comments:
________________________________________________________________________________________
Section IV – General Safety

A. Emergency and Evacuation Procedures

Our goal is to provide prompt and immediate action in an emergency to protect life, property, and equipment.

1. Emergency Procedures

In case of emergency, the employee nearest the stricken person should call 911 (or the emergency phone number posted in your area) and direct a fellow employee to:

a. Notify the nearest Supervisor to come to the scene; and

b. Simultaneously dispatch available employees to quickly retrieve the first aid kit.

c. An individual trained in first-aid should apply emergency rescue procedures until medical assistance arrives.

The Manager or the Department Supervisor should be notified. The President, Manager or the Department Supervisor (in that order) or their designees will decide whether or not to evacuate, inspect or shut down a facility.

2. Evacuation Procedures

a. Each area will be assigned a primary and an alternate Evacuation Coordinator by the Manager or the Department Supervisor. They will be responsible for the effective evacuation of all persons. If neither is available, the Supervisor is then responsible for evacuation.

b. When alerted by alarm or by the Evacuation Coordinator(s) to evacuate, employees should:

1. Properly secure all classified materials in your possession and assure all classified containers and areas are properly locked. These may be production records, breeding records, etc.

2. Proceed to the nearest designated area of safety (i.e. fire – exit building, tornado – interior corridor – away from exterior windows and/or lowest level at the building) and assemble in the designated area.

3. Remain in the designated area, until instructions are provided.

See Appendix B for a Sample Checklist – Planning for Emergencies.

B. Safe Operating Procedures

All employees are responsible for safety. The following safe operating procedures apply to all employees working within this organization.

1. Rules/Regulations

a. Emergency telephone numbers should be posted on at least one telephone on each level within the building. Emergency phone numbers would include: ambulance service, local hospital/medical facility, fire, law enforcement, poison control center, etc.

b. Comply with all established safety rules, regulations, procedures, and instructions which are applicable to you as a member of this organization.

c. Promptly report all accidents, hazards, incidents, and near-miss occurrences to your immediate supervisor, regardless of whether or not injury or property damage was involved.

d. Do not visit, talk to, or distract another employee who is operating equipment, or who is engaged in a work activity where the possibility of injury exists.

e. Do not participate in horseplay, scuffling, pushing, fighting, throwing things, or practical jokes.

f. Observe all no-smoking signs and regulations.

g. Do not run on company premises.

h. Use handrails on steps, elevated platforms, scaffolds, or other elevations.

i. Assist others and ask for assistance in lifting and carrying heavy or awkward objects.

j. Firearms, ammunition, and explosives are prohibited on company premises.

k. Personal stereos with headphones are not to be worn in the workplace.

l. Alcohol and drug use and possession on company property of these substances are strictly prohibited.
m. Seat belts must be worn at all times while operating or riding in a company vehicle, or in a vehicle (employee owned or company owned) when on company property or when traveling within a vehicle (employee owned or company owned) on company business off company property.

2. Housekeeping
   a. Practice good housekeeping by keeping the work area, aisles, walkways, stairways, roads, or other points of egress clean and clear of all hazards.
   b. Store and/or return parts, materials, tools, and equipment so as not to create a tripping hazard.
   c. Clean-up scrap materials, debris, and other excess materials. Place oil soaked rags, trash, and scrap in proper waste containers.
   d. Keep work area floors clean, dry, and free of oils, grease and liquids. Clean up all spills immediately.
   e. Store parts, materials, or equipment with protruding sharp ends or edges where personnel can not accidentally bump into them.
   f. Materials and equipment are not to be stored in the aisles or near exits. Permission in writing from your immediate supervisor must be obtained for temporary or permanent storage of any materials or equipment in aisles or near exits.

3. Material Handling and Back Safety
   a. Know the approximate weight of your load and make certain any material handling equipment you may operate to move materials is rated to handle the weight of the load. (Never exceed the manufacturer’s recommended safe working load for any material handling equipment. Doing so increases the probability of equipment failure, dumping of the load, personal injuries and/or damage to materials, the facility, etc).
   b. Lift heavy objects as instructed, with the leg muscles and not with the back. On average, do not manually lift over 50 pounds.
   c. Call for assistance as needed for handling heavy or bulky objects or materials.
   d. Use an appropriate, approved lifting device (i.e. special trucks, racks, hoists, and other devices) for lifting very heavy, bulky, large or unyielding objects, such as dead livestock.
   e. All ropes, chains, cables, slings, etc., and other hoisting equipment must be inspected prior to each use.
   f. A load should never be lifted and left unattended.
   g. Wear safety gloves when handling materials that pose cutting exposures.
   h. Properly stack and secure all materials prior to lifting or moving to prevent sliding, falling, or collapse.
   i. Avoid moving or lifting loads by hand whenever possible.

Tips for manual lifting:
(1) Get a good footing.
(2) Place feet about shoulder width apart.
(3) Bend at the knees to grasp the weight.
(4) Keep back as straight as possible.
(5) Get a firm hold.
(6) Lift gradually by straightening the legs.
(7) Don’t twist your back to turn. Move your feet.
(8) When the weight is too heavy or bulky for you to comfortably lift - GET HELP.
(9) When putting the load down, reverse the above steps.

Note: If lifting stacked materials, materials should be carefully piled and stable. Piles should not be stacked as to impair your vision or unbalance the load. Materials should not be stacked on any object (i.e. floor, shelving units, ladders, scaffolds, etc.) until the strength of the supporting members has been checked.
4. Office Safety
   a. Practice good housekeeping throughout the office area. Do not leave materials or position telephone or electrical cords in the aisles.
   b. Report or correct any obvious hazards as soon as they are discovered.
   c. Do not carry articles weighing more than 20 pounds when ascending or descending stairs that rise more than 5 feet.
   d. Close files and desk drawers. Arrange heavy or large files in the rear of file cabinet drawers to prevent tipping when draws are open. Always store heavy materials in the lower drawers and light objects on upper shelves. Do not open more than one drawer at a time, as tipping of the cabinet or desk may occur. Secure cabinets to each other and/or to building structural members to improve stability.
   e. Report damaged furniture and broken veneer surfaces immediately.
   f. Do not carry pointed or sharp objects in hand, pockets, or attached to clothing with points or blades exposed.
   g. Remove, secure, or arrange material on file cabinets and desks to prevent materials from falling from office furniture.
   h. Do not stand on chairs, desks, boxes, wastebaskets, or any other furniture or object. These items are not be used as substitutes for an approved step-stand or stepladder.
   i. Report slippery floor surfaces to your Supervisor immediately.
   j. Clean up spills on floors immediately.
   k. Position desks and files so that drawers do not extend into the aisle or walkway when open.

5. Clothing
   a. Clothing: Wear safe and practical working apparel. Be sure that any clothing you wear is not highly flammable. Neckties and loose, torn or ragged clothing should not be worn while operating machines with revolving spindles or cutting tools.
   b. Shoes: Low-heeled, closed-toe shoes, or proper work boots with sufficient heavy soles must be worn in areas where foot/toe injuries are likely to occur.
   c. Jewelry: Do not wear rings or any form of jewelry or ornamentation when working around machinery or exposed electrical equipment.

6. Fire Prevention
   a. Good housekeeping is the first rule of fire prevention. Oily rags, paper shavings, trim, and miscellaneous scrap materials should be cleaned up and placed in trash receptacles.
   b. All flammable liquids should be stored in an approved manner and dispensed from a UL Listed or Factory Mutual Approved portable flammable liquid safety containers.
   c. Liquefied Petroleum (LP) Gas presents special fire and explosion hazards. Only qualified persons are to handle LP gas. LP gas equipment should be inspected daily for leaks, etc.
   d. Open fires of any kind are not permitted.
   e. Combustible materials or equipment in combustible containers should be stored properly.
   f. Fire extinguishers should be located near an exit door.
   g. Fire extinguishers should be recharged and inspected regularly. A tag indicating the date the unit was recharged should be affixed to each extinguisher.
   h. Access to fire hydrants should be maintained at all times. Fire hydrants should never be blocked or obstructed in any way.
   i. All combustible waste materials, rubbish, and debris should be disposed of daily.
   j. Smoking is prohibited in any hazardous area and “No Smoking” signs should be posted in these areas.
   k. Compressed gas cylinders should be transported and stored in an upright position.
   l. Compressed gas fuel cylinders should be separated from oxygen cylinders by at least 20 feet or by a 5 foot high ½-hour fire rated wall.
   m. No material should be stored within 3 feet of an electrical panel, outlet, or fire suppression equipment.
RESERVED FOR FUTURE USE
Section V – Accident Management

A. Accident and Near Miss Reporting Procedures

If you or a customer has a near-miss situation while working, notify your Supervisor immediately. The situation will be investigated and corrective action implemented to prevent future injury. Employees and witnesses must fully cooperate in the investigation.

If you are injured on the job:

1. Contact your Supervisor, or the nearest coworker (who should notify a Supervisor) if you are unable to contact your Supervisor due to the severity of your injury.
2. The designated employee who is trained in first-aid and/or CPR should be immediately notified to assist in the situation.
3. First aid kits, which are prominently displayed throughout the workplace, should be made available and medical supplies promptly refilled (by the Manager).
4. If needed, the Supervisor or his/her authorized representative should transport the injured worker to the company’s designated medical facility to receive appropriate medical attention.
5. If rescue personnel are summoned, the Supervisor should delegate an individual to wait for the rescue team and escort them to the injured employee.
6. All witnesses to the accident should be available to speak with the Management and/or Supervisor and cooperate in all accident investigations.
7. The Manager or immediate Supervisor should immediately notify the insurance company of the accident and file a workers’ compensation claim.

Every accident or near-miss situation should be reported immediately. Injured employees and witnesses to the accident will assist the Supervisor in completing an accident investigation. Injured employees must comply with the medical treatment provided by the treating physician and cooperate with the insurance company and its designees.

B. Accident Investigation

When an accident occurs, it is an indication that something has gone wrong. Accidents don’t just happen, they are caused. The basic cause(s) of accidents are unsafe acts and/or conditions. The Supervisor must investigate every accident to determine the cause and to initiate corrective action to assure that similar type accidents will not reoccur from the same causes.

Supervisors should complete the Supervisors Accident Investigation Report and submit a copy to the (Insert appropriate top management title here such as Corporate President, Owner, Manager, General Manager) for review. The (insert title of person mentioned in prior sentence here) should evaluate the corrective action(s) taken or suggested by the Supervisor and instruct if additional changes should be made.

Tips on accident investigations:

1. Every accident is caused. Carelessness is not a cause, but the result of some deficiency. Telling employees to be more careful will not eliminate the real accident cause.
2. An accident investigation is not a trial to find fault or to place blame. Its purpose is to find accident causes so that corrective measures may be taken to prevent future accidents.
3. Most accidents result from a combination of human error (unsafe behavior) and a physical hazard (unsafe condition). Do not overlook the possibility of multiple errors and hazards.
4. Don’t stop at the obvious answer. For instance, a fall on greasy floor surface does not happen because someone slipped. The accident happened because the grease was allowed to remain on the floor and the worker walked onto it. Determine why the operator did this and why the grease was not cleaned up. Only by correcting both problems can you prevent future accidents.
5. The accident investigation should be conducted as soon after the accident as possible. Facts should be gathered while the accident is fresh in the minds of those involved. If possible, question every employee who was involved, or witnessed, the incident. Delay interviewing injured employees until after medical treatment has been received.
6. Other employees who did not witness the accident, but work in the area, may contribute information regarding the injured worker’s activities prior to the accident and conditions at the time of the accident.
7. The accuracy and completeness of the information received from the injured worker(s) and witness(es) depends on how well the interview is conducted. Supervisors should:
   a. Put employees at ease.
   b. Ask what happened and how it happened.
   c. Permit employees to answer without interruptions.
   d. Show concern.
   e. Remember, nothing is gained with criticism or ridicule.
   f. Ask “why” questions, only to clarify the story.
   g. Repeat the story, as you understand it.
   h. Give the employee the chance to correct any misunderstandings that you may have.
   i. Photographs of the conditions as they exist immediately following the accident, including photos of the damaged equipment, are very helpful.
   j. Damaged equipment should be removed or secured for future testing and used as evidence.
   k. Employees should not be permitted, under any circumstances, to operate machines or equipment that was damaged in an accident until all necessary repairs have been completed and all damaged parts have been repaired or replaced.
   l. Take immediate action to correct any obvious unsafe conditions. Determine the basic accident causes and correct or recommend action to prevent reoccurrence.
SUPERVISOR’S ACCIDENT INVESTIGATION REPORT  
(Completed by Supervisor of Injured Employee)

Company | Address
---|---

### Name of Injured Employee | Dept | Position | How long in position?
---|---|---|---

### Date of Accident | Time of Accident | Nature of Injury
---|---|---

Injury Resulted in:  
- [ ] Injury  
- [ ] Fatality  
- [ ] Property Damage (specify)

### Medical Treatment
- [ ] None  
- [ ] First Aid  
- [ ] EMT or Paramedic  
- [ ] Doctor or Clinic  
- [ ] Hospital  

### Days Lost Time?

### Drug Tested?  
- [ ] Yes  
- [ ] No

### Alcohol Tested?  
- [ ] Yes  
- [ ] No

What was the injured employee doing at the time of the accident?

How did the accident occur (brief description)?

What environmental factors (unsafe conditions) contributed to the accident? (See next page for examples)

What behavioral factors (unsafe acts) contributed to the accident? (See next page for examples)

What corrective actions can be taken to prevent recurrence? (See next page for examples)

What corrective actions have been taken to prevent recurrence?

Names of Witnesses

### Supervisor | Date | Reviewed by: | Date
---|---|---|---
Supplemental Information for completing the Accident Investigation Report

Note: Each accident will involve at least one of the following conditions as a contributing factor.

### Environmental Factors (Unsafe Conditions)

<table>
<thead>
<tr>
<th>Conditions</th>
<th>Definition of Condition</th>
<th>Suggested Corrective Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unsafe procedures</td>
<td>Hazardous Process. Management failed to make adequate plans for safety.</td>
<td>A. Formulation of safe working procedures</td>
</tr>
<tr>
<td>Improperly guarded</td>
<td>Work areas, machines, or equipment that are unguarded or inadequately guarded.</td>
<td>A. Inspection&lt;br&gt;B. Checking plans, blueprints, purchase orders, contracts, and materials for safety&lt;br&gt;C. Include guards in original design, order, and contract&lt;br&gt;D. Provide guards for existing hazards</td>
</tr>
<tr>
<td>Defective through use</td>
<td>Buildings, machines, or equipment that have become rough, slippery, sharp edged, worn, cracked, broken, or otherwise defective through use or abuse.</td>
<td>A. Inspection&lt;br&gt;B. Proper Maintenance</td>
</tr>
<tr>
<td>Defective through design</td>
<td>Failure to provide for safety in the design, construction, and installation of buildings, machinery, and equipment. Too large, too small, not strong enough.</td>
<td>A. Source of supply must be reliable&lt;br&gt;B. Checking plans, blueprints, purchase orders, contracts, and materials for safety&lt;br&gt;C. Correction of defects</td>
</tr>
<tr>
<td>Unsafe clothing or personal protective equipment</td>
<td>Management’s failure to provide or specify the use of goggles, respirators, safety shoes, hard hats, and other articles of safe dress or apparel.</td>
<td>A. Provide safe apparel or personal protective equipment.&lt;br&gt;B. Specify the use or non-use of certain apparel or protective equipment on certain jobs.</td>
</tr>
<tr>
<td>Unsafe housekeeping facilities</td>
<td>Unsuitable layout or lack of equipment necessary for good housekeeping (i.e. shelves, boxes, bins, aisle markers, etc.)</td>
<td>A. Provide suitable layout and equipment necessary for good housekeeping.</td>
</tr>
<tr>
<td>Improper ventilation</td>
<td>Poorly or not ventilated area</td>
<td>A. Improve ventilation</td>
</tr>
<tr>
<td>Improper illumination</td>
<td>Poorly or not illuminated area</td>
<td>A. Improve illumination</td>
</tr>
</tbody>
</table>

### Behavioral Factors (Unsafe Acts)

<table>
<thead>
<tr>
<th>Factor</th>
<th>Definition of Factor</th>
<th>Suggested Corrective Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of knowledge or skill</td>
<td>Unaware of safe practice; Unskilled. Not properly instructed or trained.</td>
<td>A. Job training&lt;br&gt;B. Improved hiring practices</td>
</tr>
<tr>
<td>Improper attitude</td>
<td>Worker was properly trained and instructed, but failed to follow instructions.</td>
<td>A. Supervision&lt;br&gt;B. Discipline&lt;br&gt;C. Improved hiring practices</td>
</tr>
<tr>
<td>Physical Deficiencies</td>
<td>Worker has impaired eyesight or hearing, heart trouble, hernia, previous injuries, etc.</td>
<td>A. Pre-employment physicals&lt;br&gt;B. Periodic physicals&lt;br&gt;C. Proper placement of workers&lt;br&gt;D. Identification of workers with temporary physical deficiencies</td>
</tr>
<tr>
<td>Substance Abuse</td>
<td>Worker was under the influence of (illegal or prescribed) drugs or alcohol while completing task</td>
<td>A. Drug-Free Workplace Policy with drug/alcohol testing&lt;br&gt;B. Discipline&lt;br&gt;C. Rehabilitation</td>
</tr>
</tbody>
</table>
Prior to implementing any employee disciplinary procedure, the entire program including the actions that will be taken should the employee violate safety related policies, should be reviewed with your company’s legal counsel.

Should any employee commit an unsafe act, intentional or not, this action should be addressed by the immediate supervisor and reviewed by the Business Owner or Manager. The Company reserves the right to use disciplinary actions, depending upon the seriousness of the violation and the impact of the violation upon the conduct of Company business. It is not required to complete all steps of the disciplinary procedure in every case. Discipline may begin at any step appropriate to the situation. Discipline includes, but is not limited to:

1. **Verbal Reprimand**
2. **Written Reprimand**
3. **Suspension**
4. **Termination of Employment**

The “Safety Violation Notice” form should be completed for all written reprimands. A copy should be maintained in the employee’s personnel file and submitted to the Manager, if corrective action(s) is required.
SAFETY VIOLATION NOTICE

Employee Name: __________________________________________________________________________________

Department: _____________________________________ Violation Date: ____________________________________

A safety and health survey of your operation has revealed non-compliance of certain safety rules, procedures, programs, and/or local, state, or federal regulations. As a condition of the company’s safety policy, you are required to maintain a safe work environment and to prevent unsafe actions of yourself, co-workers, and/or your employees.

This warning is for your protection and safety. The violation(s) noted and corrective action(s) are indicated below.

<table>
<thead>
<tr>
<th>Rule Violated</th>
<th>Violation Description</th>
<th>Corrective Action Required*</th>
</tr>
</thead>
<tbody>
<tr>
<td>1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Corrective Action Required*

1 = Cease operation until corrective action is complete
2 = Warn personnel and instruct them on proper safety procedures
3 = Provide proper personal protective equipment
4 = Change procedure/work method
5 = Initiate and complete corrective action (include date)
6 = Other (specify above)

Comments: _______________________________________________________________________________________

Disciplinary Action Imposed

Verbal Reprimand along with this notice
Written Reprimand with a last chance warning
Suspension (from _______________ to _______________ )
Termination of Employment

Date: ___________________________ Supervisor: ______________________________________________________
Section VII – Special Emphasis Programs

A. Chemical Handling Procedures/Hazard Communications Program

1. Purpose:

   To ensure that information about the dangers of all chemicals/hazardous materials used by the Company are known by all affected employees. A secondary purpose is to comply with the requirements of the OSHA Hazard Communication Standard and corresponding state laws.

2. Responsibility:

   All employees of the company will participate in the hazard communication program and comply with all provisions of this policy. The Business Owner or Manager is responsible for maintaining this program and ensuring compliance with all local, state, and federal laws.

3. Scope:

   This program covers container labeling, material safety data sheets, employee training and information, hazardous non-routine tasks, list of hazardous chemicals (i.e. cleaning chemicals, re-fueling chemicals, lawncare chemicals, office chemicals, etc.), chemicals in unlabeled pipes and safety procedures.

4. Program:

   a. Container Labeling

      (1) The Business Owner or Manager will verify that all containers received for use will be clearly labeled with the following: 1) contents, 2) the appropriate hazard warning (i.e. flammable, toxic, etc.), and 3) the name and address of the manufacturer. Existing labels will not be removed or defaced on incoming containers.

      (2) All materials on site are to be stored in their original container with the label attached.

      (3) Any material with a label missing or illegible should be reported to the Supervisor immediately for proper labeling and/or disposal in accordance with the Material Safety Data Sheet.

      (4) Stationary, secondary, or portable containers should be clearly labeled with either an extra copy of the original manufacturer's label or with generic labels which have a block for identification and blocks for the hazard warning.

      (5) Signs, placards, or other written materials that convey specific hazard information may be used in place of individual container labels if there are a number of stationary process containers within a work area which store similar materials.

      (6) Portable containers do not need to be labeled if the chemicals are transferred to labeled containers and used by the employee making the transfer during that shift. No unmarked containers of any size shall be left unattended in the work area.

   b. Material Safety Data Sheets (MSDS)

      (1) Any product having a hazardous warning on its label requires a MSDS.

      (2) The manufacturer, distributor, or vendor shall provide the MSDS for the hazardous product.

      (3) All MSDS’s shall be forwarded to the Business Owner or Manager and reviewed by this individual and employees using the product to determine safe work practices and to determine what if any personal protective equipment may be needed. The MSDS’s will be maintained and kept at the following location: ________________________________ .

      (4) The MSDS provides:

         (a) chemical information

         (b) hazardous ingredients

         (c) physical data, such as the potential for fire, explosion, and reactivity

         (d) health hazards

         (e) spill or leak procedures
b. Employee Training and Information

(1) The Business Owner or Manager will provide training to employees when hired, prior to handling chemicals for the first time within work area (i.e. due to chemical substitution, job reassignment) and routinely thereafter on the hazardous nature of chemical products. Training will include:

(a) The Hazard Communication Policy
(b) Chemicals present in workplace operations
(c) Physical and health effects of the hazardous chemicals
(d) Appropriate work practices and controls when using chemicals
(e) Emergency and first-aid procedures
(f) How to read labels and review an MSDS to obtain appropriate hazard information
(g) Location of the MSDS file and written hazard communications program

(2) After attending the training class, each employee will sign a form to verify that they attended the training, received the written materials, and understand the company's policies on Hazard Communication. See the Training Documentation for Chemical Handling Procedures/Hazard Communication Program.

c. Hazardous Non-Routine Tasks

(1) Periodically, employees are required to perform hazardous non-routine tasks.

(2) Prior to starting work on such projects, each affected employee will be given information by the Business Owner or Manager about the hazardous chemical he/she may encounter during such an activity. This information will include specific chemical hazards, protective safety measures the employee can use, and measures the company has taken to lessen the hazards including ventilation, respirators, presence of other employees, and emergency procedures.

d. Informing Contractors and Others

(1) The Business Owner or Manager shall advise contractors that may work at our facility and other clients of our Hazard Communication Program.

(2) Copies of the MSDS’s for all materials brought onto the site will be made available upon request to each client, contractor or visitor to the facility by the Business Owner or Manager.

(3) The Business Owner or Manager will also obtain chemical information from contractors that may expose our employees to hazardous chemicals which they bring into our workplace.

e. List of Hazardous Chemicals

Attached is a list of all known hazardous substances presently being used (see sample form “List of Hazardous Chemicals”). Listed chemicals are denoted as EX for explosive, HT for highly toxic, C-R for corrosive or irritant, and CAR for proven or suspected carcinogen-mutagen in humans or animals. Further information on each chemical can be found by reviewing the MSDS sheet on that chemical.

f. Safety Procedures and Recommendations

(1) Work Habits

(a) Never work alone, eat, drink or use tobacco products within an area where chemicals are handled or within a chemical storage room. Do not store food or beverages in such an area.

(b) Wash hands before and after working within a chemical handling area, and after spill cleanups.

(c) Restrain loose clothing, long hair, and dangling jewelry.

(d) Never leave heat sources unattended.

(e) Never place reactive chemical containers near the edge of a table, bench, etc. where they may fall and break, thus releasing chemical vapors into the room and/or come into contact with other chemicals causing an unsafe reaction.
(f) Obtain and read the MSDS for each chemical before handling/dispensing any chemicals.

(g) Analyze new chemical handling procedures in advance to pinpoint hazardous areas.

(h) Analyze accidents to prevent repeat performances.

(i) Protection should be provided for not only the employees working within the chemical handling/processing room, but also for any visitors to the area.

(j) Do not mix chemicals in the sink drain.

(k) Always inform co-workers of plans to carry out hazardous work.

(l) Carry out regular fire or emergency drills with critical reviews of the results.

(m) Have actions pre-planned in case of an emergency, gas shut-off, escape routes posted, meeting places.

(2) Safety Wear

(a) ANSI approved eye or face protection should be worn at all times within those work areas where eye injuries could be expected due to the work being performed within that area if appropriate eye protection is not worn.

(b) Gloves, which will resist penetration by the chemical being handled and have been checked for pin holes, tears, or rips, should be worn.

(c) Wear a lab jacket or apron.

(d) Footwear should cover feet completely; no open-toed shoes or sandals.

(3) Facilities and Equipment

(a) Have separate container for trash and broken glass.

(b) Never block any escape routes, and plan alternate escape routes.

(c) Never block a fire door open.

(d) Never store materials in storage aisles.

(e) All moving belts and pulleys should have safety guards.

(f) Ensure that eye-wash fountains will supply at least 15 minutes of water flow.

(g) Regularly inspect safety showers and eye-wash fountains and keep records of inspections.

(h) Keep up-to-date emergency phone numbers posted next to the phone.

(i) Place fire extinguishers near an escape route, not in a "dead end" corridor.

(j) Regularly maintain fire extinguishers, maintain records, and train personnel in the proper use of extinguishers through actual fire situations.

(k) Acquaint personnel with the meaning of "Class A fire", "Class B fire", etc., and how they relate to fire extinguisher use.

(l) Secure all compressed gas cylinders when in use and transport them secured on a hand truck.

(m) Install chemical storage shelves with lips, and never use stacked boxes in lieu of shelves.

(n) Replace appropriate equipment and materials for spill control when they become dated.

(4) Chemical Storage

(a) Do not store materials on the floor.

(b) Separately store organic and inorganic chemicals.

(c) No above eye level chemical shelf storage should be permitted.

(d) Shelf assemblies should be firmly secured to walls.

(e) Store acids, poisons, and flammable liquids in separate dedicated cabinets.
(5) Purchasing, Use, and Disposal
(a) If possible, purchase chemicals in class-size quantities only. Label all chemicals accurately with date of receipt, or preparation, initialed by the person responsible, and pertinent precautionary information on handling.
(b) Follow all directions for disposing of residues and unused chemicals.
(c) Properly store flammable liquids in small quantities in containers with a provision for bonding to receiving vessels when the liquid is transferred.
(d) Have a Material Safety Data Sheet on hand before using a chemical.
(e) Prepare a complete list of chemicals of which you wish to dispose.
(f) Classify each of the chemicals on the disposal list into a hazardous or non-hazardous waste chemical. (Check with the local environmental agency office for details.)

(6) Substitutions
(a) Reduce risk by diluting substances instead of using concentrates.
(b) When conducting training involving chemical handling, use handouts, films, videotapes, and other methods rather than experiments involving hazardous substances.
(c) Undertake all substitutions with extreme caution.
I have received training and understand how to read the Materials Safety Data Sheets (MSDS) and container labels regarding hazardous products.

I have received general training on the hazardous chemicals in which I might be exposed.

I understand that I am required to review MSDS’s for any material I am using for the first time.

I know where the MSDS’s for my work area are kept and understand that they are available for my review.

I understand that I am required to follow the necessary precautions outlined in the Chemical Handling Procedures/Hazard Communication Program and MSDS’s, including use of personal protective equipment and/or apparel.

I know the location of emergency phone numbers, the location and method of operating communications systems (i.e. cell phone, 2-way radio system, etc), the location of medical, fire, and other emergency supplies.

I am aware of my right to obtain copies of the Hazardous Chemical list, written Chemical Handling Procedures/Hazard Communication Program, and MSDS’s at my request.

Employee Name: __________________________________________________________________________________

Signature: ______________________________________________________________________________________ Date: ____________________________________________________________________
LIST OF HAZARDOUS CHEMICALS

The following is a list of known hazardous chemicals used by our employees. Further information on each chemical can be found by reviewing the MSDS's.

<table>
<thead>
<tr>
<th>CHEMICAL NAME</th>
<th>EX (Explosive)</th>
<th>HT (Highly Toxic)</th>
<th>C-R (Corrosive/Irritant)</th>
<th>CAR (Proven/Suspected Carcinogen)</th>
<th>OTHER</th>
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B. Personal Protective Equipment

1. Purpose
   To provide guidelines concerning the proper use of Personal Protective Equipment and to comply with OSHA standards outlined in Title 29, Code of Federal Regulations (CFR), parts 1900-1999.

2. Definition
   PPE includes clothing and other accessories designed to create a barrier between the user and workplace hazards. It should be used in conjunction with engineering, work practice and/or administrative controls to provide maximum employee safety and health in the workplace.

3. Responsibility
   All employees should use protective equipment described by local, state, federal, and company rules and regulations to control or eliminate any hazard or other exposure to illness or injury.

4. Training
   Proper employee training on the correct usage of PPE will likely eliminate many accidents and injuries from occurring. Before performing any work that requires the use of PPE, the Business Owner or Manager, or his/her delegate, must train employees on the following:
   a. When and what types of PPE are necessary;
   b. How the PPE is to be used;
   c. What the PPE’s limitations are; and
   d. How PPE should be handled, maintained and stored in accordance with the PPE manufacturer’s recommendations.

   In many cases, more than one type of PPE will provide adequate protection. In such cases, employees should have their choice of which type of protection they would like to use.

   The company is required to document in writing that training has been performed and that employees understand all trained materials. Written certifications should contain the names of all employees trained, the date(s) of training, and the PPE requirements.

   An example of Training Documentation for Personal Protective Equipment follows.

5. Types of Protection
   a. Eye and Face Protection – Safety glasses with side shields should be provided by Manager or Supervisor and use of such equipment should be mandatory for all employees and visitors in those areas where eye injuries are likely to occur if appropriate eye protection is not worn.
      (1) All construction areas require 100% eye protection at all times. Minimum eye protection includes approved safety glasses with side shields or mono-goggles meeting the standards specified in ANSI Z87.1-1968.
      (2) Additional eye and face protection should be used by employees when:
         (a) Welding, burning, or using cutting torches
         (b) Using grinding equipment
         (c) Operating saws, drills, cutting tools
         (d) Working with any materials subject to scaling, flaking, or chipping
         (e) Sanding or water blasting
         (f) Working with compressed air or other gases
         (g) Working with chemicals or other hazardous materials
         (h) Working near any of the above named operations
      (3) Selection
         There are different types of eye and face protection designed for particular hazards. In selecting protection, consider type and degree of hazard. Where a choice of protection is given, worker comfort should be the deciding factor in selecting eye protection.
Employees who use corrective eye glasses should wear face shields, goggles, or spectacles of one of the following types:

(a) Spectacles with protective lenses providing optical correction;

(b) Goggles or face shields worn over corrective spectacles without disturbing the adjustment of the spectacles; or

(c) Goggles over contact lenses. (Exception: If handling chemicals and the Material Safety Data Sheet on the chemical indicates "contact lenses should not be worn when handling this chemical", employee should be required to follow (a) or (b) above.

(4) Fit

Skilled persons should fit all employees with goggles or safety spectacles. Prescription safety glasses should be fitted by qualified optical personnel.

(5) Inspection and Maintenance

Eye protection lenses should be kept clean at all times. Continuous vision through dirty lenses can cause eye strain. Daily inspection and cleaning of eye protection with hot, soapy water is also recommended. Pitted lenses should also be replaced immediately as they can be a source of reduced vision. Deeply scratched or excessively pitted lenses are also more likely to break. Employees are responsible for taking care of their eye protection. They are also responsible for turning in eye protection that is in poor shape to their immediate supervisor.

b. Respiratory Protection – Respiratory protection devices, approved by the U.S. Bureau of Mines, should be worn by employees exposed to hazardous concentrations of toxic or noxious dust, fumes or mists as required by OSHA. The Hazard Communications Program should include respiratory protection programs.

c. Foot and Leg Protection – Workshoes/boots are to be worn by all employees handling heavy materials which are likely to cause foot/toe injuries if dropped. Tennis shoes, sandals, docksiders, hush puppies, steel toed sneakers and bare feet are prohibited.

d. Glove and Hand Protection – Gloves provided by the Company should be worn when handling objects or substances that could cut, tear, burn, or otherwise injure the hand. Gloves should not be used when operating machinery.

e. Clothing – Wear safe and practical working apparel. Be sure that any clothing you wear is not highly flammable. Neckties and loose, torn or ragged clothing should not be worn while operating tools or equipment. Jewelry of any kind should not be worn when working around machinery or exposed electrical equipment.

f. Other Personal Protective Equipment – Other required equipment to be used under unusual circumstances such as high temperature work, handling corrosive liquids, etc., not specifically covered in this section should be reviewed by the Business Owner or Manager and furnished by the Company when required.

A sample Hazard Assessment Form to assist you in determining the PPE needed by your employees follows.
HAZARD ASSESSMENT FORM

Date: ____________________ Location: _______________________________________________________________
Assessment Conducted By: __________________________________________________________________________
Specific Tasks Performed at this Location: ______________________________________________________________
________________________________________________________________________________________________

HAZARD ASSESSMENT AND SELECTION OF PERSONAL PROTECTIVE EQUIPMENT

I. Overhead Hazards –

Hazards to consider include:
• Suspended loads that could fall
• Overhead beams or loads that could be hit against
• Energized wires or equipment that could be hit against
• Employees work at elevated site who could drop objects on others below
• Sharp objects or corners at head level

Specific Hazards Identified at this location which require Head Protection: ________________________________

Head Protection

Hard Hat Needed: □ Yes □ No

If yes, type:
□ Type A (impact and penetration resistance, plus low-voltage electrical insulation)
□ Type B (impact and penetration resistance, plus high-voltage electrical insulation)
□ Type C (impact and penetration resistance)

II. Eye and Face Hazards –

Hazards to consider include:
• Chemical splashes
• Dust
• Smoke and fumes
• Welding operations
• Lasers/optical radiation
• Bioaerosols
• Projectiles

Specific Hazards at this location identified which require eye and/or face protection: _________________________

Eye Protection

Safety glasses or goggles needed? □ Yes □ No

Face shield needed? □ Yes □ No

III. Hand Hazards –

Hazards to consider include:
• Chemicals
• Sharp edges, splinters, etc.
• Temperature extremes
• Biological agents
Hazards to consider include: (Cont’d)

- Exposed electrical wires
- Sharp tools, machine parts, etc.
- Material handling
- Needle sticks

Specific hazards identified at this location which require Hand Protection: ________________________________

______________________________

**Hand Protection**

Type of Gloves Needed? ☐ Yes ☐ No
- ☐ Chemical resistant
- ☐ Temperature resistant
- ☐ Abrasion resistant
- ☐ Other (Explain) ______________________________________________________________________________

**IV. Foot Hazards** –

Hazards to consider include:

- Heavy materials handled by employees
- Sharp edges or points (puncture risk)
- Exposed electrical wires
- Unusually slippery conditions
- Wet conditions
- Construction/demolition
- Stepped on by livestock

Specific hazards identified at this location which require foot protection: ________________________________

______________________________

**Foot Protection**

Safety shoes ☐ Yes ☐ No

Type Needed based on Hazards Identified
- ☐ Toe protection
- ☐ Puncture resistant
- ☐ Electrical insulation
- ☐ Other (Explain) ______________________________________________________________________________

**V. Other Identified Safety and/or Health Hazards:**

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<tr>
<th>Hazard</th>
<th>Recommended Protection</th>
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I certify that the above inspection was performed to the best of my knowledge and ability, based on the hazards present on

__________________________________________________________

__________________________________________________________

(Signature)
TRAINING DOCUMENTATION FOR PERSONAL PROTECTIVE EQUIPMENT

I have received training on the details of my company’s Personal Protective Equipment Program.

I understand that I am required to follow all necessary precautions outlined in the Personal Protective Equipment Program.

I know the location of emergency phone numbers and communications systems, and the location of medical, fire, and other emergency supplies.

Employee Name: __________________________________________________________

Signature: __________________________________________ Date: ________________
C. Smoking Policy

1. Purpose
   To establish guidelines whereby the company provides a smoke-free work environment for our employees and is in compliance with all federal and state Indoor Clean Air Acts.

2. Scope
   This policy applies to all employees, vendors, visitors, and contractors.

3. Policy
   a. Smoking is **prohibited throughout the building**, unless clearly posted as a “Smoking Permitted” area.
   b. Employees will refrain from smoking in any company vehicle.

4. Discipline
   All employees share in the responsibility for adhering to and enforcing the policy. In all cases, the right of the non-smoker to protect his/her health and comfort will take precedence over an employee’s desire to smoke. Employees who violate this policy will be subject to the company’s Disciplinary Action Program.

D. Violence Prevention Program

1. Purpose
   To establish guidelines to protect employees against workplace violence.

2. Policy
   Nothing is more important to the Management of this company than the safety and well being of our employees. Threats, threatening behavior, or acts of violence against employees, visitors, guests, or other individuals by anyone on company property will not be tolerated. Violations of this policy will lead to disciplinary action, which may include dismissal, arrest, and prosecution.

   Any person who makes substantial threats, exhibits threatening behavior, engages in violent acts, or brings a weapon onto company property shall be removed from the premises as quickly as safety permits and shall remain off premises pending the outcome of an investigation. The company will initiate an appropriate response, including but not limited to suspension, reassignment of duties, termination of employment and/or business relationship, and/or criminal prosecution of the person(s) involved.

   No existing policy, practice, or procedure should be interpreted to prohibit decisions designed to prevent a threat from being carried out, a violent act from occurring, or a life-threatening situation from developing.

   All company personnel are responsible for notifying their supervisor or the management representative(s) designated below of any threats that they have witnessed, received, or have been told that another person has witnessed or received. Even without an actual threat, personnel should also report any behavior they have witnessed which they regard as threatening or violent, when that behavior is job related or might be carried out on company property. Employees are responsible for making this report regardless of the relationship between the individual initiating the threat or threatening behavior and the person(s) receiving the threat, including domestic problems which they fear may result in violent acts against them or a coworker.

   All individuals who apply for or obtain a protective or restraining order which lists the company locations as protected areas must provide a copy of the petition used to obtain the order, as well as a copy of the protective or restraining order which was granted, to their immediate supervisor or the designated representative(s) listed below.

   The company understands the sensitivity of the information requested and has developed confidentiality procedures that recognize and respect the privacy of the reporting employee(s).

   The designated management representative(s):

   Name: ___________________________________________________________________________________________

   Title: ___________________________________________ Dept: ____________________________________________

   Location: ________________________________________ Telephone: _______________________________________

   THIS IS A SAMPLE ONLY. YOUR LEGAL COUNSEL SHOULD REVIEW YOUR POLICY AND ACKNOWLEDGEMENT FORM PRIOR TO DISTRIBUTION.
E. Lockout/Tagout

1. Purpose

To establish a procedure to protect and prevent personnel from injury by 1) accidental activation of any powered or damaged equipment, and 2) the uncontrolled release of electrical energy. A secondary purpose is to remain in compliance with OSHA regulations, 29 CFR 1910.147.

2. Responsibility

The Manager is responsible for compliance. The Manager shall train Supervisors on proper lockout/tagout procedures, audit and/or oversee the application of the procedures, ensure corrective actions are taken when problems arise, and conduct an annual inspection/evaluation. Supervisors are responsible for training effected and authorized employees on the purpose and use of these procedures. The Manager should periodically monitor training activities and assist, as required, to ensure compliance with OSHA regulations and company goals. All effected and authorized employees involved in lockout/tagout procedures must receive annual training. A list of authorized, trained individuals will be maintained by the Manager. (See the attached List of Authorized Lockout/Tagout Individuals form.)

3. Scope

This procedure applies to all Company personnel and contract employees. Lockout/tagout procedures will be enforced during installation, cleaning, servicing, maintenance, or inspection work performed on any powered equipment. This procedure does not apply to adjustment or other activities, which require the equipment to be operating at the time of service. Other protective measures must be in place to protect employees during adjustment or "inching" work.

4. Definitions

a. Lockout: The application of a lock, chains, or other appropriate apparatus, and a danger identification tag to de-energize electrical equipment and/or process system to ensure that the equipment or system cannot be activated. **Note:** OSHA regulations require that locks be used to secure equipment whenever possible. Chains can be wrapped around valve handles and then locked in such a way that the valve cannot be operated. Tags alone can be used when it is not possible to use a lock.

b. Tagout: The application of a danger identification tag when a physical lockout or de-energizing is not feasible or a lock has already been applied. Tags should bear the name of the employee applying the tag, the date of application, and a brief description of the work needed.

c. Energy Source: The switch or valve through which energy is controlled to the unit (e.g. motor control center disconnect switches, circuit breaker panel switches, valves, locking pins, etc.). This energy may be: 1) electric power, 2) mechanical power, 3) hydraulic power, 4) pneumatic energy, 5) chemical system, or 6) thermal energy.

d. Authorized Employees: A person who locks out or tags out machines or equipment in order to perform servicing or maintenance on that machine or equipment.

e. Effected Employees: An employee whose job requires him/her to operate or use a machine or equipment on which servicing or maintenance is being performed under lockout or tagout, or whose job requires him/her to work in an area in which such servicing or maintenance is being performed. An effected employee becomes an authorized employee when the effected employees’ duties include servicing or maintenance.

5. Lockout/Tagout Procedures

a. Each piece of equipment or system must be evaluated to identify all energy sources to be locked or tagged out. The evaluation should be done periodically by a Supervisor or an authorized employee with familiarity with the equipment/system, using the attached Energy Source Determination Checklist.

b. If the machine is determined by OSHA that formal lockout/tagout procedures are required, this should be done by an authorized employee and logged on the attached form List of Lockout/Tagout Procedures. These procedures should then be followed. If no specific procedures are required, or provided by the equipment manufacturer, complete the following tasks:

   (1) Deactivate (turn off) and secure the equipment/system at the energy source. Relieve pressure, release stored energy from all systems, and restrain or block them. (Operators must tag the appropriate switches or controls inside the control room as part of this step).

   (2) Attach a lock to each isolation device and a tag to the lock. Sign and date the tag, along with providing pertinent information.
(3) Check to ensure that no personnel are exposed to the equipment/system, then attempt to activate the normal operating controls to ensure proper lockout/tagout. A voltmeter can be used to check the switch.  

**CAUTION:** Always return the operating control to the “neutral” or “off” position after completing this test. The equipment/system is now locked and tagged out.

6. **Lockout/Tagout Removal Procedures**
   a. After installation, servicing, maintenance, inspection, or cleaning is complete, verify that all tools have been removed, all guards have been reinstalled, the area is clean and orderly, and the equipment is safe to operate.
   b. Ensure that employees are not exposed to the equipment and all employees are aware of the removal of the lock and tag.
   c. The locks and tags should be removed only by the employee who applied them, the Supervisor, or the Manager. Locks and tags may be removed by the Supervisor or Manager only after receiving approval from the employee who locked out/tagged out, and/or confirmation that the necessary repair has been completed. The tags should be signed and dated and submitted to the Manager.
   d. Activate energy source as required.

7. **Procedures Involving More Than One Person**
   If more than one individual is required to lockout or tagout equipment, each shall use his/her own assigned lockout/tagout device on the energy source. When the energy source cannot accept multiple locks or tags, a multiple lockout/tagout device (hasp) should be used. A single key should be used to lockout the equipment/system, with the key being placed in a lockout box or cabinet. This cabinet or lockout box must allow multiple locks to secure it. Each employee will then use his/her own lock to secure the box or cabinet. As each person no longer needs to maintain the lockout protection, that person will remove his/her lock from the cabinet. Proper removal procedures should be followed.

8. **Annual Inspection/Evaluation of Lockout/Tagout Program**
   The Lockout/Tagout Program should be reviewed on an annual basis to determine if changes in the program are needed. These changes may be due to additions of machinery/equipment, revisions in the way specific machines are locked out or tagged out, machinery has been removed from the premises, etc. The attached Lockout/Tagout Annual Inspection/Evaluation Report form may be of assistance in completing this very important procedure.

9. **Training Documentation**
   All lockout/tagout training should be properly documented. Documentation forms should be kept on file within each Manager or Supervisor’s office. Updated training should be provided when lockout/tagout procedure changes occur. Training documentation forms should be updated following each lockout/tagout training class. The attached Training Documentation for Lockout/Tagout Program form should assist you in maintaining proper documentation of your training procedures.
## LIST OF AUTHORIZED LOCKOUT/TAGOUT INDIVIDUALS

<table>
<thead>
<tr>
<th>Work Center</th>
<th>Lock Number</th>
<th>Name</th>
<th>Mechanical (yes/no)</th>
<th>Electrical (yes/no)</th>
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**LOCKOUT/TAGOUT ANNUAL INSPECTION/EVALUATION REPORT**

Date of Evaluation: ________________________________

Evaluation was made by: ____________________________________________________________

Policy has been reviewed:  □ Yes  □ No

Comments on policy: _______________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________

The following procedures have been reviewed: ___________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________

The following procedures were modified: ________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________

The following procedures were added:  _________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________

A review of the OSHA log 300, associated accident reports, and OSHA Form 301 were conducted?  □ Yes  □ No

The following injuries resulted from lockout/tagout:

<table>
<thead>
<tr>
<th>Injury</th>
<th>Procedure Number for Applicable Equipment</th>
<th>Process or Machinery</th>
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Comments: _______________________________________________________________________________________
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_______________________________________________________________   ___________________________
Signature               Date
**ENERGY SOURCE DETERMINATION CHECKLIST**

Date: __________________________ Company Name: __________________________________________________

**Instructions:** In order to determine all energy sources for each piece of equipment, all questions must be answered. If the question does not apply, write N/A.

Location: _______________________________ Work Center: ____________________________________________

Equipment Name: _______________________________ Equipment #: _____________________

Serial: ______________________________________ Lockout/Tagout Procedure #: ____________________________

1. Does this equipment have:
   a. **Electric power** (including battery)?  □ Yes  □ No  □ N/A
      
      If yes, Motor Control Center (MCC) or power panel and breaker number: ________________________________
      
      Does it have a lockout device?  □ Yes  □ No  □ N/A
      
      Battery location: __________________________________________________________
      
      Battery disconnect location: _________________________________________________
     
   b. **Mechanical power**?  □ Yes  □ No  □ N/A
      
      Mark each type of energy source that applies:

      (1) Engine driven?  □ Yes  □ No  □ N/A
          
          If yes, switch or key location: __________________________________________________________
          
          Is lockout device installed?  □ Yes  □ No  □ N/A
          
          If no, method of preventing operation: __________________________________________________
          
          (2) Spring loaded?  □ Yes  □ No  □ N/A
              
              If yes, is there a method of preventing spring activation?  □ Yes  □ No
              
              If no, how can spring tension be safely released or secured? __________________________
              
          (3) Counter weight(s)?  □ Yes  □ No  □ N/A
              
              If yes, is there a method of preventing movement?  □ Yes  □ No
              
              If yes, can it be locked?  □ Yes  □ No
              
              If no, how can it be safely secured? ________________________________________________
              
          (4) Flywheel?  □ Yes  □ No  □ N/A
              
              If yes, is there a method of preventing movement?  □ Yes  □ No
              
              If yes, can it be locked?  □ Yes  □ No
              
              If no, how can it be safely secured? ________________________________________________
ENERGY SOURCE DETERMINATION CHECKLIST (Page 2)

1. Does this equipment have: (continued)
   
c. **Hydraulic Power?** □ Yes □ No □ N/A
      If yes, location of main control/shut-off valve: ________________________________________________
      
      Can control/shut-off valve be locked in the “OFF” position? □ Yes □ No
      If no, location of closest manual shut-off valve: ________________________________________________
      
      Does manual shut-off valve have a lockout device? □ Yes □ No
      If no, what is needed to lock valve closed? ________________________________________________
      
      Is there a bleed or drain valve to reduce pressure to zero? □ Yes □ No
      If no, what will be required to bleed off pressure? ____________________________________________
      
   d. **Pneumatic Energy?** □ Yes □ No □ N/A
      If yes, location of main control/shut-off valve: ________________________________________________
      
      Can control/shut-off valve be locked in the “OFF” position? □ Yes □ No
      If no, location of closest manual shut-off valve: ________________________________________________
      
      Does manual shut-off valve have a lockout device? □ Yes □ No
      If no, what is needed to lock valve closed? ________________________________________________
      
      Is there a bleed or drain valve to reduce pressure to zero? □ Yes □ No
      If no, what will be required to bleed off pressure? ____________________________________________
      
   e. **Chemical System?** □ Yes □ No □ N/A
      If yes, location of main control/shut-off valve: ________________________________________________
      
      Can control/shut-off valve be locked in the “OFF” or closed position? □ Yes □ No
      If no, location of closest manual shut-off valve: ________________________________________________
      
      Is there a bleed or drain valve to safely reduce system pressure and drain system of chemicals? □ Yes □ No
      If no, how can the system be drained and neutralized? ________________________________________
      
      What personal protective clothing or equipment is needed for this equipment? ____________________
      ________________________________________________
      
GMRC 1177 7-05
f. **Thermal Energy?**  ☐ Yes  ☐ No  ☐ N/A

If yes, location of main control/shut-off valve: ______________________________________________________

Can control/shut-off valve be locked in the “OFF” or closed position?  ☐ Yes  ☐ No

If no, location of closest manual shut-off valve: ______________________________________________________

__________________________________________________________________________________________

Does manual shut-off valve have a lock valve?  ☐ Yes  ☐ No

Is there a bleed or drain valve to safely reduce system pressure and temperature and drain system chemicals?  ☐ Yes  ☐ No

If no, how can the system be drained and neutralized? _____________________________________________

__________________________________________________________________________________________

What personal protective clothing or equipment is needed for this equipment? _________________________

__________________________________________________________________________________________

Special precautions not noted above (i.e. fire hazards, chemical reactions, required cool down periods, etc.): ______

__________________________________________________________________________________________

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Recommendations or Comments: ________________________________________________________________

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Completed by: _____________________________________________________________________________

Reviewed by: _____________________________________________________________________________

Approved by: _____________________________________________________________________________
<table>
<thead>
<tr>
<th>PROCEDURE NUMBER</th>
<th>EQUIPMENT, MACHINERY OR PROCESS</th>
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TRAINING DOCUMENTATION FOR LOCKOUT/TAGOUT PROGRAM

I have received training and understand all rules and regulations regarding the lockout/tagout program.
I understand that I am required to follow the necessary precautions outlined in the lockout/tagout program.
I know the location of emergency phone numbers and communications systems, and the location of medical, fire, and other emergency supplies.

Employee Name: __________________________________________________________________________________

Signature: ________________________________________________________ Date: ___________________________

Department _______________________________________________________________________________________
F. Confined Space Entry

1. Purpose
To establish a procedure to protect personnel and prevent injury when entering and working in any confined space. Another purpose is to remain in compliance with OSHA regulations, 1910.146.

2. Responsibility
The Company is responsible for ensuring adherence to the elements of this procedure where confined space entry may be required. These elements should include the following:
   a. Identification of tasks which may involve worker entry into a confined space, and insures all proper permits are obtained as contained with this procedure.
   b. Assurance that a current classification file of all confined spaces, which may be potentially occupied throughout the course of the project, are maintained.

3. Manager or the Department Supervisor
   The Manager or the Department Supervisor is responsible for overseeing the technical aspects of this procedure. These technical aspects include the following:
   a. Classifying each confined space relative to the need for an entry permit.
   b. Training supervisors and competent persons relative to their responsibilities and duties in connection with the confined space entry program.
   c. Reviewing and approving the selection of all personal protective equipment and instrumentation.
   d. Audit confined space entry program execution to confirm that the procedures listed within this program are properly instituted.

4. Competent Person
   A competent person is one who is capable of identifying existing and predictable hazards in a working space. The responsibilities assumed by the competent person are those related to the actual execution of the task. As such, this individual’s principal duties include the following:
   a. Prior to entry, evaluate each confined space for existing and potential hazards.
   b. Monitor the atmosphere of the confined space with an acceptable analyzer. Ensure that instruments are properly maintained and calibrated.
   c. Notify Manager or the Department Supervisor of any tasks to be performed within a confined space which could create a hazardous atmosphere.
   d. Obtain an entry permit.
   e. Prior to entry, review provisions of the entry permit with employees entering the confined space.
   f. Instruct employees and direct the execution of the confined space entry according to established procedures.
   g. Assure that proper personal protective equipment is provided and used, as required.
   h. Designate a trained attendant for each confined space.
   i. Train all personnel involved in confined space entry and emergency rescue.
   j. When the entry has been completed, verify that all personnel and equipment have been removed from the confined space and signify that the space can be prepared for return to service.

5. Attendant
   An attendant is a person assigned to remain immediately outside the entrance of the confined space during the time the space is occupied. The attendant is to maintain visual and/or voice contact with persons in the confined space at all times. The attendant must also have an immediate and direct means of communication by which rescue or other emergency assistance may be summoned. The attendant is not to enter the confined space unless appropriately trained and another qualified attendant is present. The attendant’s responsibilities include:
   a. Ensuring that the confined space is never entered without proper authorization.
   b. Ensuring that all safety and personal protective equipment is used in accordance with the provided training.
6. Definitions

a. **Confined Space** – A confined space is any enclosure that is not designed for normal occupancy by humans, contains an actual or potential safety and/or health hazard, and restricts egress to such an extent that personnel would have difficulty escaping in the event of an emergency. Examples of spaces fitting this description include: animal confinement pits, storage tanks and bins, air handling units, piping, boilers, ducts, vaults, trenches, and manholes.

No authorization is to be given for entry into confined spaces that are considered immediately dangerous to life and health or where the potential exists for the generation of such. Examples of a confined space include:

1. An area where there is potential of a non-respiratory atmosphere.
2. An area where there is potential of an engulfment by loose particles or liquids.
3. An area where there is potential of an explosive, flammable or toxic atmosphere.
4. An area where an entrance and/or exit is restricted (limited access or egress).
5. An area where welding, cutting, burning, painting, chemical handling, or any type of work which would create a toxin or non-respiratory atmosphere constitutes a confined space.

b. **Entry Permit** – The confined space entry permit provides a checklist of pre-entry precautions that must be taken. Documentation of monitoring and authorization of entry should be provided by the Manager or the Department Supervisor. A copy of the permit should be conspicuously posted at the site of entry. The permit should contain a record of the date of entry, monitoring requirements, relative location of entry and a description of the work to be performed. Permits are issued for 8-hour shifts only and must be reevaluated before each new shift begins working.

c. **Site Contact Person** – The superintendent, foreman, or other assigned employee who is the main contact person on the site and who is responsible for the compliance with these rules.

7. Operating Procedures

a. Determine any unusual conditions which may require special procedures unique to the area or task to be conducted (i.e., welding).

b. Purge, drain and/or evacuate process materials, chemicals and air.

c. Isolate the confined space from all external piping, process systems, affluent systems, utilities, and ducts that could cause materials to enter the confined space. This can be accomplished by inserting blanks and skillets, disconnection and capping of lines, double blocking and bleeding valves and/or physical disconnection of equipment.

d. Immobilize all mechanical services such as agitators, mixer paddles, fan blades, etc., through recognized lockout procedures and/or through physical disconnection of the drive mechanism from the power source.

e. If an assessment (testing) of the atmosphere indicates contamination is present, the cause/source of the contamination must be determined. Furthermore, it must be determined if contamination will increase during entry. Testing should include:

1. **Oxygen Atmosphere Testing**: Testing should be done with a calibrated direct-reading oxygen indicator. The oxygen should contain at least 19.5% but less than 23.5% oxygen by volume. Measurements should be taken at the top and bottom of the space. Measurements should be taken every 15 minutes by the attendant. Tests must be repeated after a stoppage exceeding 30 minutes. Results should be documented in the permit. Entry is not permitted if the oxygen level is less than 19.5% or greater than 23.5%.

2. **Lower Explosive Level (LEL)**: Potentially explosive vapors and dust should be at 10% below the lower explosive level before personnel may enter the proposed work area, ensuring the appropriate PPE is being worn.
(3) Toxic Atmosphere Testing: If it is determined that any of the following toxins: Tolulene, Isopropyl Alcohol, or any material that is capable of generating any material that has a ceiling PEL (Permissible Exposure Limit) or LEL (Lower Explosive Level) were previously contained in the space, testing with color detection tubes (i.e. Dragger tubes), chlorine detector, or the Bio-systems Detector should be conducted. If atmospheric contamination exceeds 10% of the PEL, the space should be ventilated until the level is below 10%. The Manager or the Department Supervisor should be contacted if the contamination is IDLH (Immediately Dangerous to Life or Health). Entry is not permitted, except for emergency procedures approved by the Manager or the Department Supervisor, if toxic gases at an IDLH level exist. Measurements should be taken every 15 minutes by the attendant.

(4) Flammable Atmosphere Testing: If the space previously contained or currently contains flammable vapors, testing with a combustible gas indicator to determine the concentration of flammable gases and vapors must be conducted. If the concentration of flammable gas or vapor exceeds 5% of the lower flammability limit, the space should be ventilated until the concentration is below 5%. Entry is not permitted if the concentration exceeds 5%. Measurements should be taken every 15 minutes by the attendant.

f. The following safety equipment is needed during confined space entry:
   (1) Body harness with attached connections for chain or rope hoist.
   (2) Self Contained Breathing Apparatus (SCBA), two units minimum.
   (3) 20 LB ABC fire extinguisher when flammable materials are involved.
   (4) Emergency escape breathing apparatus. Requirements for use should be determined on a case-by-case basis.
   (5) Equipment (hoist, hand lines, etc.) for removing an incapacitated individual during an emergency.
   (6) Access ladder.
   (7) Atmospheric monitoring instrumentation.

g. When the use of special protective equipment (respirators, gloves, clothing, eye protection, etc.) is required, their use should be specified in the entry permit and all associated training requirements should be met.

8. Entry Procedures

  a. No person should enter a confined space until all preparations for entry have been completed, the permit has been approved, all conditions of this Entry Procedure have been met, and the entry is authorized.
  b. No person should enter a confined space unless an attendant is on duty. The attendant must maintain visual and/or voice contact at all times with personnel in the confined space.
  c. All personnel entering confined spaces and all attendants for entry should receive annual confined space entry and emergency rescue training.
  d. Personnel using monitoring equipment should be trained in its use and calibration.
  e. All electrical shock hazards should be protected by use of low voltage systems and/or ground fault protector.
  f. Explosion-proof electrical equipment is required for entry into spaces where potential fire and/or explosion exists.
  g. If conditions in the confined space change, personnel should be removed, the changes investigated, lock-outs re-verified, and the area re-monitored.
  h. If confined space work continues past the initial shift, the Site Contact Person should sign the permit, re-verify the lock-outs, re-monitor the atmosphere and record the data on the permit, verify that all other requirements of this procedure have been met, and inherit all of the responsibilities associated with the entry. This process should be repeated at the beginning of each subsequent shift.
  i. When the job has been completed, the competent person should verify that all personnel and equipment have been removed from the confined space by signing the permit. This completed permit should then be retained by the Site Contact Person for the duration of the job.
j. No one should enter confined spaces without a permit. Violations are grounds for dismissal. The Manager or the Department Supervisor should identify all confined spaces by sign, placard or other appropriate means. He should also identify the “permitter.” Only authorized permitters can issue a permit. The permitter should personally inspect, examine and evaluate the confined space and should assure that all hazards have been identified before allowing entry.

(1) The permitter should discuss the following with all personnel:

(a) Emergency procedures.

(b) What the emergency – standby person must do.

(c) All permits are null and void in case of an emergency.

(d) How to request a re-check of the permit.

(e) What the permit does and does not authorize.

(f) The duration of the permit – one shift (or the duration of the entry, whichever is shorter).

(g) Permit postings. The permitter should post the permit as follows:

(i) The original - at the point of entry.

(ii) The second copy – Site Contact Person’s office.

(iii) The third copy – in the Department Supervisor’s office.

(h) The following work rules are unconditionally and automatically the requirements for confined space entry procedures:

(i) Ventilation should be of adequate volume to safely maintain the airflow within the confined space. (It is the responsibility of the Company to prove the calculations of the airflow volume).

(ii) It is the responsibility of the Site Contact Person to immediately report unsafe conditions.

(iii) A flashlight should be carried by each person entering a confined space.

(iv) Lighting used must be explosion proof, 12 volt system or flashlight.

(v) Welding, cutting, brazing, and purging operations require specific requirements – consult with the permitter.

(vi) Chemicals used or transported inside the confined space require specific requirements – consult with the permitter.

10. Rescue Equipment and Procedures

a. Equipment: The Manager or the Department Supervisor should require the following equipment to be on hand prior to confined space entry:

(1) Lifelines

(2) Safety belts

(3) Self-contained breathing apparatus

(4) Airline respirators

(5) Rescue harness and ropes

(6) Tripod

(7) Ropes, pulleys, and other rescue equipment

(8) Horns, whistles, telephones, radios, etc. for communication

(9) Fire fighting equipment

(10) Explosion proof lighting and electrical equipment

(11) 12" wide confined space or rope ladder
b. Rescue Procedures

(1) Procedures outlined above are followed, (i.e. atmospheric tests should be performed prior to and during entry and documented on the permit, etc.).

(2) The attendant is equipped with an alarm horn prior to entry.

(3) Any entrant into a vertical exit confined space must wear a parachute type harness. Horizontal exit confined space requires a life line be worn in addition to the harness.

(4) Life lines must be attached to a fixed object outside of the confined space.

(5) All confined spaces with vertical exits should be equipped with means to attach a lifting winch (i.e. crank with handle, hoist, hauling apparatus with a rope, etc.) for victim rescue where tripod is impossible.

10. Training

Employees who perform tasks covered by the confined space entry policy (e.g. enter into confined spaces, measure atmospheric conditions in confined spaces, or perform rescue in a confined space) should be trained annually on site procedures and the use of permits and equipment.
# CONFINED SPACE EVALUATION FORM

<table>
<thead>
<tr>
<th>Date of Survey</th>
<th>Confined Space #</th>
<th>Permit Required</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>□ Yes, □ No</td>
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<td>If yes, space must be labeled.</td>
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</tbody>
</table>

Location of Space

Description of Space

Possible atmospheric hazards

Possible content hazards

Configuration of space

Unusual hazards

1. Space can be bodily entered? □ Yes □ No
2. Limited or restricted entry? □ Yes □ No
3. Not designed for continuous human occupancy? □ Yes □ No
4. Hazardous atmosphere? □ Yes □ No
5. Potential for engulfment? □ Yes □ No
6. Internal configuration hazard? □ Yes □ No
7. Other serious safety hazards? □ Yes □ No

Reasons for entering space and typical activities

Who usually enters space

Frequency of entry

Number of entry points

External connections to space

Survey completed by: (print and sign)
## CONFINED SPACE ENTRY PERMIT

<table>
<thead>
<tr>
<th>Confined Space #</th>
<th>Permit Expires</th>
<th>Date/Time Began</th>
<th>Date/Time Finished</th>
<th>Location</th>
<th>Job Description</th>
<th>Entrants</th>
<th>Attendants</th>
<th>Supervisor</th>
<th>Safety Approval by:</th>
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### Atmospheric Testing and Monitoring

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<tr>
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<th>Limits</th>
<th>Time/Results</th>
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<tr>
<td>Oxygen</td>
<td>(19.5% – 23.5%)</td>
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<td>Flammables</td>
<td>(&lt; 10%)</td>
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<td>Explosive Gases</td>
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<tr>
<td>Chemicals</td>
<td>(list) (&lt; PEL)</td>
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### Hazards in Space

- **Contents:**
  - [ ] Flammable
  - [ ] Irritant
  - [ ] Corrosive
  - [ ] Toxic
  - [ ] Dust
  - [ ] Asbestos
  - [ ] Solid
  - [ ] Liquid
  - [ ] Gas

- **Configuration:**
  - [ ] Slippery or sharp surfaces
  - [ ] Vertical drop
  - [ ] Low overhead
  - [ ] High or Low temperature
  - [ ] Sloped

- **Nature of Work:**
  - [ ] Welding
  - [ ] Cutting
  - [ ] Grinding
  - [ ] Chipping
  - [ ] Scraping
  - [ ] Spray cleaning

### Previous Content:
- **Other:**

### Isolation of Space

- **Electrical:**
  - [ ] Lockout
  - [ ] Tagout

- **Piping:**
  - [ ] Lockout
  - [ ] Tagout
  - [ ] Blank
  - [ ] Block and Bleed

- **Hydraulic:**
  - [ ] Lockout
  - [ ] Tagout
  - [ ] Disconnect Lines
  - [ ] Lock Pump and Bleed

- **Mechanical:**
  - [ ] Block linkage
  - [ ] Disconnect

### Equipment Required

- **Respiratory Protection:**
  - [ ] SCBA
  - [ ] Sup. Air
  - [ ] ABA
  - [ ] Pow. Air
  - [ ] Cartridge resp:
    - [ ] Full
    - [ ] Half
  - [ ] Cartridge:
    - [ ] Organic vapor
    - [ ] Acid Gas
    - [ ] Ammonia
    - [ ] Organic vapor/acid gas
    - [ ] HEPA
    - [ ] Dust/Mist

- **PPE:**
  - [ ] Coveralls
  - [ ] Hard-hat
  - [ ] Safety goggles
  - [ ] Safety shoes
  - [ ] Leather gloves
  - [ ] Ear plugs/muffs
  - [ ] Welding hood
  - [ ] Welding jacket
  - [ ] Splash suit
  - [ ] Chemical gloves
  - [ ] Faceshield

- **Lighting:**
  - [ ] Flashlight
  - [ ] Handlight
  - [ ] Light sticks
  - [ ] Cord lights
  - [ ] Cords
  - [ ] Portable lights
  - [ ] Generator

- **Ventilation:**
  - [ ] Ventilator
  - [ ] 10’ sections of duct
  - [ ] 20’ sections of duct
  - [ ] Saddlevent
  - [ ] CFM Required

- **For Entry:**
  - [ ] Body Harness
  - [ ] Retrieval device
  - [ ] Tripod
  - [ ] Anchor point
  - [ ] Access ladder
  - [ ] Emergency Signal
  - [ ] Communications
  - [ ] Personal alert device

- **For Rescue:**
  - [ ] Body Harness
  - [ ] Retrieval device
  - [ ] Tripod
  - [ ] Anchor point
  - [ ] Access ladder
  - [ ] Alarm horn
  - [ ] Emergency signal
  - [ ] Communications
  - [ ] Personal alert device
  - [ ] SCBA
  - [ ] ABA
  - [ ] Rescue harness
  - [ ] Escape mask
  - [ ] Wristlets

- **Other:**

- **Supervisor Signature:**

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GMRC 1181 7-05 50
TRAINING DOCUMENTATION FOR CONFINED SPACE

I have received training and understand all details concerning the confined space requirements.
I understand that I am required to follow the necessary precautions outlined in the confined space program.
I know the location of emergency phone numbers and communications systems, and the location of medical fire, and other emergency supplies.

Employee Name: __________________________________________________________________________________

Signature: ___________________________________________ Date: ___________________________

Address of Location where confined space exists: ____________________________________________
_________________________________________________________________________________________
G. Fleet Safety Rules/Regulations

The following Sample Fleet Safety Rules/Regulations may not all apply to your operation. Please add any formal or informal motor vehicle rules/regulations your organization may have in place to this list and delete those that do not apply to your operations. Developing a Fleet Safety Program unique to your organization's operations should be much more effective in helping you to control frequent/severe motor vehicle losses.

1. All employees who drive a company car or delivery vehicle must abide by the following safety rules:
   a. Employees are required to inspect their assigned vehicle (before taking it on the road) to ensure that it is in safe working condition. This includes properly working brakes, horns, and back-up alarms. The attached inspection form should be used.
   b. Any defects in the company vehicle should be reported promptly.
   c. Employees are required to obey all state, local, and company traffic regulations.
   d. Engines are to be stopped and ignition keys removed when parking, refueling, or leaving the company vehicles.
   e. Employees are not permitted to use personal cars or motorcycles for company business, unless specifically authorized by the supervisor. If personal vehicles are driven on company business, proof of personal auto coverage (i.e. copy of personal auto Declarations Page or copy of the Insurance Card from the vehicle) will be requested on an annual unannounced basis from all employees that operate their own vehicles on company business. Those unable to supply proof of insurance within 24 hours of the time requested, will not be permitted to drive their own vehicle on company business in the future.
   f. Passengers not employed by the company are not permitted, unless authorized by the supervisor.
   g. Employees should drive safely. Defensive driving must be practiced by all employees.
   h. Seat belts and shoulder harnesses are to be worn at all times.
   i. Vehicles must be locked when unattended to avoid criminal misconduct.
   j. Vehicles must be parked in legal spaces and must not obstruct traffic.
   k. Employees should park their vehicles in well-lighted areas at or near entrances to avoid criminal misconduct.
   l. Employees should keep their headlights on at all times when driving a vehicle.
   m. A vehicle, when loaded with any material extending 4 feet or more beyond its rear, shall have a red flag or cloth 12 inches square attached by day or a red light visible for 300 feet by night on the extreme end of the load.
   n. Articles, tools, equipment, etc. placed in cars or truck cabs are to be hung or stored in such a manner as not to impair vision or in any way interfere with proper operation of the vehicle.
   o. When you can not see behind your vehicle (truck), the driver should walk behind the truck prior to backing.
   p. Personal use of company vehicles is not permitted without written approval from the Management of this organization. Family members of employees that are provided with a company vehicle are prohibited from driving a company vehicles at any time unless prior written approval has been obtained from the Manager of your department. (Exception: in case of an emergency where the employee is not able to operate the company vehicle, no prior written approval is required). Violation of this policy may result in disciplinary action which may include termination of employment.
   q. Operating a company vehicle while under the influence of alcohol and other drugs is prohibited. Violators are subject to termination of employment.
   r. Every accident should be reported to <insert title of individual within the company that monitors motor vehicle accidents such as the Manager, Human Resources Manager, Supervisor, Fleet Manager or Safety Director>. The <individual listed in prior sentence> should investigate all accidents and review them with the Supervisor and employees.
   s. All subcontractor personal vehicles must be parked in areas designated as contractor parking.
   t. When operating vehicles within company parking areas or at job sites, speeds must not exceed 5 M.P.H.
2. Accident Reporting
   a. Driver Conduct at the Scene of the Accident
      (1) Take immediate action to prevent further damage or injury.
          (a) Pull onto the shoulder or side of the road.
          (b) Activate hazard lights (flashers) and place warning signs promptly.
          (c) Assist any injured person, but don’t move them unless they are in danger of further injury.
      (2) Call the Police
          (a) If someone is injured, request medical assistance.
          (b) If you are near a phone, write a note giving the location and seriousness of the accident and give it to a “reliable” motorist and ask him/her to contact the police.
      (3) The vehicle should not be left unattended, except in an extreme emergency.
      (4) Exchange identifying information with the other driver. **Make no comments about assuming responsibility.**
      (5) Secure names, addresses, and phone numbers of all witnesses, or the first person on the scene if no one witnessed the accident.
      (6) Call the company immediately and report the accident to the Manager or Supervisor.
   b. Complete the Vehicle Accident Report Form
      Complete the Vehicle Accident Report Form. A copy can be obtained from the **insert title of person responsible for fleet safety within your organization here such as Manager, Supervisor, Fleet Manager or Safety Director, Human Resources Manager, etc.** and provide it to the **insert title of person listed that should receive completed Accident Report Form here**. Write legibly. Answer all questions completely or mark “not known.” Use additional sheets of paper as needed to provide pertinent information.

3. Inspection Records and Preventive Maintenance
   All drivers must regularly inspect, repair, and maintain their company vehicle. All vehicle parts and accessories must be in a safe and proper working order at all times. The following apply:
   a. All truck drivers must complete the vehicle inspection report at the end of each day. Drivers of company cars should complete the vehicle inspection report semi-annually. Notify the **insert title of individual that monitors fleet maintenance program here** of any unsafe conditions or defective parts immediately.
   b. Before the vehicle is driven again, any safety defects must be repaired.
   c. A copy of the last vehicle inspection report must be kept in the vehicle for at least 3 months.
   d. Quarterly preventive maintenance must be conducted on each vehicle.
   e. Maintenance and inspection records must be kept at the company for 1 year or for 6 months after the vehicle leaves the company’s ownership.
   f. All vehicles are subject to a search at any time.
VEHICLE INSPECTION REPORT
(Use your safety belt)

Date: ___________________________

Company __________________ Location (City, State) ________________ Vehicle Number ________________

Driver Name _______________________________ Driver Signature ________________________________

Instructions: Drivers will perform necessary inspections. A (✓) indicates satisfactory condition. An (X) indicates unsafe or improper conditions. An (O) indicates condition does not apply. Corrected deficiencies should be circled by management certifier.

INSIDE
☐ Parking brake (apply)
☐ Release trailer emergency brakes
☐ Apply service brake (air loss should not exceed 3 psi/min on single vehicles, 4 psi/min on combinations)

START ENGINE
☐ Oil Pressure (light or gauge)
☐ Air Pressure or Vacuum (gauge)
☐ Low air or vacuum warning device (air pressure below 40 psi check on pressure build-up. Air pressure above 60 psi deplete air until warning device works. Vacuum below 8 inches Hg, check on build-up. Above 8 inches Hg. Deplete vacuum until device works.
☐ Instrument panel (telltale lights, buzzer, gauges)
☐ Horn
☐ Windshield Wiper and Washer
☐ Heater-defroster
☐ Mirrors
☐ Steering wheel (excess play)
☐ Apply trailer brakes in EMERGENCY
☐ Turn on all lights including 4-way flasher
☐ Starts properly

EMERGENCY EQUIPMENT
☐ Fire extinguishers
☐ Flags, standards, warning lights
☐ Spare fuses
☐ Spare bulbs
☐ Chains in season
☐ First-aid kit

FRONT
☐ Headlights
☐ Clearance lights
☐ Identification lights
☐ Turn signals and 4-way flasher
☐ Tires and wheels-lugs and serviceability

SIDE
☐ (Left) ☐ (Right)
☐ Fuel Tank and Cap
☐ Sidemarker lights
☐ Reflectors
☐ Tires and wheels-lugs and serviceability
☐ Cargo tie-downs or doors

REAR
☐ Tail lights
☐ Stop light
☐ Turn signals and 4-way flasher
☐ Clearance lights
☐ Identification lights
☐ Reflectors
☐ Tires and wheels, lugs and serviceability
☐ Rear end protection (bumper)
☐ Cargo tie-downs/doors

MECHANICAL OPERATION
☐ Engine knocks, misses, overheats, etc.
☐ Clutch skips, grabs, other
☐ Transmission noisy, hard shifting, jumps out of gear, other:
☐ Axles – noisy, other:
☐ Steering loose, shimmy, hard, other:
☐ Air, oil, water, leaks
☐ Springs broken, other:
☐ Brakes noisy, pulls soft, other:
☐ Speedometer, tachometer
☐ Tachograph, speed control devices

ON COMBINATIONS
☐ Hoses, connections
☐ Couplings (fifth wheel, tow bar, safety chains, locking devices)

OTHER

☐ Equipment inspection enroute (☐ yes ☐ no)
☐ Cargo securing devices (☐ yes ☐ no)

Start time: __________ Mileage: __________ End time: __________ Mileage: __________

Remarks/Other Defects:
Defects corrected (initial) ☐ Yes ☐ No
Defect correction unnecessary (initial)

Certified by: _______________________________ Date __________________

GMRC 1183 2-09 54
## PREVENTIVE MAINTENANCE REPORT

<table>
<thead>
<tr>
<th>Date/Time</th>
<th>Company</th>
<th>Location</th>
</tr>
</thead>
</table>

**Inspected by:** ____________________________  **Employee I.D. Number** ____________________________

<table>
<thead>
<tr>
<th>Vehicle License</th>
<th>Vehicle Number</th>
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<tr>
<th>Satisfactory</th>
<th>Needs Attention</th>
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### Brakes:
- Brake adjustment: [ ] Left  [ ] Right
- Brake hoses
- Brake drums
- Brake shoes
- Parking brake
- Brake pedal travel

### Steering:
- Steering suspension
- Change in steering action
- Steering components

### Tires
- Wear/Defect
- Overloading
- Groove depth 2/32" minimum

### Wheels
- Cracks
- Loose Nuts
- Rims

### Windows
- Windows and Windshields
- Wipers and Washers

### Lights
- Headlights
- Taillights
- Turn signals
- Reflectors

### Mirrors
- Horn
- Instruments/Gauges
- Seat belts
- Battery

### Radiator and Hoses
- Exhaust system
- Suspension
- Fuel system
- Oil/Water leaks
- Oil level
- Water level
- Transmission
- Engine performance

### General condition of body and interior

**COMMENTS:**

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GMRC 1184  07-11  55
SUPERVISOR’S MOTOR VEHICLE ACCIDENT INVESTIGATION REPORT

<table>
<thead>
<tr>
<th>DRIVER</th>
<th>VEHICLE</th>
<th>DATE OF ACCIDENT</th>
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<thead>
<tr>
<th>LOCATION OF ACCIDENT</th>
<th>TIME OF ACCIDENT</th>
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</table>

DESCRIPTION OF ACCIDENT: (What happened?)

SEAT BELT WORN?

CAUSES OF ACCIDENT: (Why did it happen?)

RECOMMENDATIONS FOR PREVENTION OF A RECURRENCE: (What should be done?)

FOLLOW UP: (What actions were taken? Were they effective?)

- INDICATE WITH DIAGRAM WHAT HAPPENED
- SHOW POSITION OF VEHICLES
- INDICATE DIRECTION (NORTH, SOUTH, EAST, WEST) WITH ARROWS

CLASSIFICATION OF ACCIDENT REVIEW

- PREVENTABLE
- NON-PREVENTABLE

ACCIDENTS USUALLY PREVENTABLE
- Intersection
- Backing
- Hit Other in Rear
- Skidded
- Cut In or Out
- Pulled from Curb
- Hit Stationary Object
- Hit Pedestrian

ACCIDENTS USUALLY NON-PREVENTABLE
- Hit in Rear
- Hit When Properly Parked

_____________________________________________   ____________________________________________
Investigating Supervisor’s Signature                      Manager’s Signature

_____________________________________________   ____________________________________________
Date Of Report                                          Date

Reviewed By Manager

GMRC 1186  7-05  57
Animal Handling Safety Considerations

David E. Baker and Rusty Lee
Department of Agricultural Engineering

Few farmers view livestock as a source of danger. Yet animal-related accidents cause numerous deaths and serious injuries each year. A recent National Safety Council study ranked beef cattle farms second and dairy operations third among all farming enterprises in injuries per hours of work. Seventeen percent of all farm injuries involved animals. This equaled the percentage of injuries caused by farm machinery.

Removing hazards brings you one step closer to a safe work environment. Whether you are operating equipment or working with animals, taking a few precautions and observing safety rules can save you precious time, prevent injury, or even save your life.

General considerations

Anyone who works with livestock knows each animal has its own personality. Animals sense their surroundings differently than humans. Their vision is in black and white, not in color. They also have difficulty judging distances. And differences exist between the vision of cattle, swine and horses. For example, cattle have close to 360-degree panoramic vision (Figure 1). A quick movement behind cattle may "spook" them.

![Cattle have a panoramic field of vision](image)

Animals have extremely sensitive hearing and can detect sounds that human ears cannot hear. Loud noises frighten animals, and research proves that high-frequency sounds actually hurt their ears. These factors explain why animals are often skittish and bulky, particularly in unfamiliar surroundings.

Watching animals for signs of aggressiveness or fear alerts you to possible danger. Warning signs may include raised or pinned ears, raised tail or hair on the back, bared teeth, pawing the ground or snorting.

Although handling methods may vary greatly for different types of livestock, there are some generally accepted rules for working with any animal:

- Most animals will respond to routine; be calm and deliberate.
- Avoid quick movements or loud noises.
- Be patient; never prod an animal when it has nowhere to go.
- Respect livestock — don't fear it!
- Move slowly and deliberately around livestock; gently touch animals rather than shoving or bumping them.
- Always have an escape route when working with an animal in close quarters.

Facilities

Many livestock handling injuries are directly related to equipment or building structures. Poor facilities and equipment can also cause injuries to animals. This can mean considerable economic loss at market time.

Tripping hazards such as high door sills, cluttered alleyways and uneven walking surfaces can cause serious injury and a considerable amount of lost work time. Studies have found that falls account for 18 percent of all animal-related accidents.

http://muextension.missouri.edu/explore/agguides/agengin/g01931.htm
Concrete floors are best for livestock. The finish on concrete floors should be roughened to prevent slips under wet conditions. High traffic areas, such as alleyways, should be grooved. Floors should allow water to drain easily. Slatted floors often are used to keep animals dry in a confinement system.

Fencing and gates should be strong enough to contain crowded livestock. A variety of materials are available, but the key is strength and durability. A protruding piece of lumber, a nail or a bolt can cause painful and infectious injuries. If backed or pushed into, one of these objects can cause a serious back injury.

Alleys and chutes should be wide enough to allow animals to pass, but not wide enough to allow them to turn around. A width of 30 inches is recommended for a cow-calf operation. For cattle in the range of 800 to 1,200 pounds, a 26-inch width is recommended. Solid wall chutes, instead of fencing, will lower the number of animals that balk in the chute.

Lighting should be even and diffused. Bright spots and shadows tend to make animals more skittish, especially near crowding or loading areas. Animals move more readily from dark areas into light, but avoid layouts that make them look directly into the sun.

Handling equipment can speed up livestock confinement work operations, reduce time and labor requirements, cut costs, and decrease the risk of injury.

**Animal health and hygiene**

Hygiene is vital to good livestock management, particularly in confinement systems where diseases can spread quickly. Maintaining a clean, dry environment is obviously important, but other factors also are crucial.

Ventilation should minimize dust. Various molds that can cause respiratory as well as digestive problems may be present in feed. All feeds should be carefully checked before they are fed to livestock. Deal only with reliable feed dealers and have suspect feed tested.

**Animal diseases affecting people**

All animals, domesticated or wild, can be a source of human illness and parasitic infestation. Diseases that can be transmitted between animals and people are referred to as zoonoses.

**Rabies** is a deadly virus that affects the central nervous system. It can be transmitted by saliva from an infected animal through a bite, open wound or sore. Although widespread pet inoculation has greatly reduced the threat of rabies, rural people are at greater risk due to their proximity to wild animals. A veterinarian should be called to examine animals observed acting abnormally. Seek immediate medical attention if you are bitten by an animal that you suspect is rabid.

**Lyme Disease (LD),** while only a remote possibility in Missouri, is another potential threat. Although the tick species known to transmit LD are not present in the state, the organisms that cause LD have been found in the Lone Star tick, which is found in Missouri. It is not known at present whether this tick transmits LD to humans. It may transmit LD to animals, but is known to do so only in its nymphal stage when it is usually found on rodents, birds and feral animals such as deer.

If LD occurs, its symptoms may develop within 2 to 30 days of the tick bite. A small red bump appears near the bite and enlarges into a spreading red ring. This is followed by a general sickness, including fever, chills, headaches and backache. Some may experience palpitations, dizziness and shortness of breath.

LD responds well to antibiotics in its early stages, but if left untreated, it may advance into a chronic stage involving rheumatoid arthritis or cardiac problems.

**Brucellosis (Bovine Disease)** affects cattle, goats and swine. It can be transmitted to people in unprocessed milk, infected carcasses, or by an aborted fetus or afterbirth from an affected animal. Good sanitation practices reduce the chances that herds will be infected. Animals should be tested periodically for this disease.

**Trichinosis,** caused by tiny parasites, can be painful and sometimes fatal to humans. It is transmitted by consumption of uncooked or partially cooked pork. Trichinosis has nearly been eradicated in North America. Thorough cooking is the best prevention.

**Salmonella** organisms are found in poultry and in wild and domestic animals. They can be transmitted to people through contaminated food or water. The disease can cause severe gastrointestinal distress and fever. Prevention includes proper storage and cooking of animal-derived foods. Good sanitation procedures when handling food reduce the risk of salmonella poisoning.

Other zoonoses also exist. However, preventive measures such as keeping animal facilities clean, testing and immunizing, and using sanitary practices in handling animals and their products minimize the danger.

http://muextension.missouri.edu/explore/agguides/agjen/g01931.htm
Manure pit gases

Toxic gases, especially in confined spaces such as manure pits, silos and grain bins, can pose hazards to humans and animals. Four gases of major concern can be found in manure pits. They are hydrogen sulfide (H₂S), ammonia (NH₃), carbon dioxide (CO₂) and methane (CH₄).

The primary health hazards of these gases are:

- Toxic or poisonous reactions that can occur in people or animals. Hydrogen sulfide is the most toxic of these gases.
- Oxygen depletion, which can result in asphyxiation. Hydrogen sulfide, ammonia and carbon dioxide gases are all heavier than air. During agitation of the pit and under conditions of poor ventilation, these gases will replace the oxygen in the air.
- Explosions that can occur when oxygen mixes with the gases. This is primarily a problem with methane.

Characteristics

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<th>Hydrogen sulfide:</th>
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<td>- Most dangerous gas associated with waste decomposition.</td>
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<td>- Distinct rotten egg smell; heavier than air.</td>
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<td>- After breathing this gas a short time, sense of smell becomes fatigued and you may no longer be able to detect any odor.</td>
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<tr>
<td>- Gives a false sense of security. At low concentrations the gas irritates the eyes and respiratory tract; at moderate levels, causes headaches, nausea and dizziness; at high concentrations, death will occur.</td>
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<th>Ammonia:</th>
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<td>- Distinct, sharp, penetrating odor detectable at very low concentrations.</td>
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<td>- Heavier than air.</td>
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<tr>
<td>- At moderate levels of concentration, can irritate eyes and respiratory tract; at high concentrations, can cause ulceration to the eyes and severe irritation to the respiratory tract.</td>
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<th>Carbon dioxide:</th>
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<td>- Odorless, heavier than air, difficult to detect.</td>
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<td>- Primarily replaces oxygen in air and acts as an asphyxiant. At moderate concentrations, shortness of breath and dizziness can occur.</td>
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<td>- A major contributing factor to animal deaths by asphyxiation in confinement buildings, which often occurs during ventilation failure.</td>
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<th>Methane:</th>
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<td>- Odorless and lighter than air, so it tends to accumulate near the tops of manure pits.</td>
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<tr>
<td>- Considered an asphyxiant at extremely high concentrations. Main hazard is its inflammable, explosive nature.</td>
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Prevention

Under normal conditions in a well-designed, properly constructed building with good ventilation, you should not have many problems with gas accumulation. But serious problems can occur if the proper precautions are not followed.

- Provide as much ventilation as possible in the pit and building during agitation of the waste. Although pits are agitated only a few times a year, most human and livestock deaths or illnesses occur at those times.
- No workers should be near the pit or in the building during agitation. If possible, remove all animals from the building.
- Avoid entering a manure pit at any time, if at all possible. Even if the pit has been emptied, it still may be lacking in oxygen or have high concentrations of toxic gases.
- Always keep at least one foot of space between the highest manure level and the slats. This protects the animals who lie on the slats and inhale the gases that will accumulate at the surface of the pit.

Silo gases

Grain, particularly corn, can accumulate high amounts of nitrates. During the first 24 to 48 hours of fermentation, significant amounts of nitrogen dioxide (NO₂) can be released. When this gas is inhaled by silo workers, it can cause a severe chemical pneumonitis known as "silo filler's disease."

http://muextension.missouri.edu/explore/agguides/agengineer/g01931.htm
Nitrogen dioxide is one of the most hazardous lung irritants. It has a pungent, sweetish odor, even in low concentrations of 5 parts per million (ppm). It has a reddish-brown color, visible only when concentrations reach a dangerous level (75-150 ppm). It is heavier than air and can settle at the bottom of enclosed spaces.

Any concentration over 25 ppm can be hazardous. The effect on the lungs is often so subtle that the victim may not realize the serious nature of the exposure until too late. Inhalation of 50 to 75 ppm for 30 to 60 minutes can cause bronchitis; 50 to 100 ppm causes chemical pneumonia; 150 to 200 ppm, a severe fibrosis type of pneumonia; 300 to 400 ppm, severe lung damage, fatal in 2 to 10 days; over 500 ppm, acute pulmonary edema, fatal in less than 48 hours.

Prevention

- Do not allow anyone to enter the silo during the filling process until the blower has run for at least 30 minutes. The height of the chute doors should be kept as close as practical with the silage level. This allows heavier-than-air gases to be blown down the chute.
- Do not for any reason allow anyone to enter the silo for 7 to 10 days after the filling process is completed. It is during this time that the fermentation process is occurring and producing the toxic gases.
- Provide good ventilation around the base of the silo during the fermentation process so that the gases will be carried away.
- Provide fencing to prevent children and animals from straying into any spaces adjoining a silo during this dangerous period.
- When the silo is opened, the blower again should run for a minimum of 30 minutes before entry. Given a proper fermentation, no further gas production should occur.
- Never enter a silo without someone on the outside monitoring your activity.

For information about grain storage, see MU publication G1969, Safe Storage and Handling of Grain.

Dusts

Dusts are the most common danger in the air when working around livestock. Some types of dust are more dangerous than others. But all dust can cause serious health problems to an individual, depending on the amount, type and length of exposure.

Some dust carries antigens that cause severe irritation to the respiratory tract and lungs. This often results in lung damage. The most common form is known as "farmer's lung." It results from breathing moldy forage or grain, normally hay. Farmer's lung is one of the most disabling diseases among dairy farmers.

Farmer's lung symptoms often are not noticed until several hours after exposure to the dust. Symptoms often are mistaken for bronchitis or pneumonia. If the disease is not diagnosed early, irreversible lung damage and sometimes death can result.

Farmer's lung will limit the amount of work a farmer can do because shortness of breath will require frequent rest periods.

"Nuisance dust" is the term for other forms of dust that are often inhaled while working with livestock. Breathing dusty air of this type for long periods will cause areas of your lungs to become hardened and inelastic, and your capacity to take in needed oxygen will be reduced. Furthermore, your susceptibility to respiratory diseases like pneumonia may increase.

Prevention

- Store only dry, well-cured forage or grain. Mold develops from the heat generated by moist or wet stored forage and grain.
- Burn moldy grain or hay.
- Keep livestock areas as clean as possible to prevent dust from collecting.
- Wear a dust mask in dusty work areas to keep harmful dust out of your lungs.

Personal protective equipment

Foot injuries are frequent in all types of livestock facilities. Wear safety shoes or boots. Composition and type of sole configuration also are important to combat the problems of uneven and wet footing.

If you must enter a manure pit or silo without a self-contained breathing apparatus, turn on all forced ventilation equipment for a minimum of 30 minutes.

Wear a harness or tie a rope around your waist and have at least one person holding the lifeline. If you are overcome by the gas, this lifeline is your only means of rescue without endangering other people.

http://muextension.missouri.edu/explore/agguides/agengin/g01931.htm
A self-contained breathing apparatus is recommended, but its high cost may make it impractical to have this equipment readily available on most farms.

**Safety reminders for livestock handling**

Liquid manure holding facilities should be secured against entry. Outdoor lagoons and ponds should be fenced.

Good housekeeping is essential, not only for your personal safety, but also for the health and well being of your stock.

Keep children away from animals, particularly in livestock handling areas.

Most male animals are dangerous. Use special facilities for these animals and practice extreme caution when handling them.

Be calm and deliberate when working with animals. Always leave yourself an "out" when working in close quarters.

Respect all animals. They may not purposely hurt you, but their size and bulk make them potentially dangerous.

Most animals tend to be aggressive when protecting their young; be extra careful around newborn animals.

Stay clear of animals that are frightened or "spooked." Be extra careful around strange animals.

Monitor entry into your operation; sales and service personnel could bring diseases from other farms.

Keep facilities in good repair. Chutes, stalls, fences and ramps should be maintained regularly.

**Partial funding for this guide sheet was provided by the University of Missouri-Columbia/National Institute for Occupational Safety and Health Cooperative Agricultural Promotions Agreement.**

*Updated 9/12/05*

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**University of Missouri Extension**

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Section VIII – Inspections

Periodic inspections will be conducted to identify hazardous conditions and unsafe behavior. The Manager or Supervisor within each department will conduct inspections and may request employees to participate. The inspector should look for unsafe practices and conditions that can cause an accident and take corrective action immediately. Other individuals, not employed by our company, such as OSHA representatives, insurance companies, local fire department representative, etc. may decide to make an inspection of our facility. All employees of our company are asked to treat these onsite visitors with the same courtesy, cooperation, and respect as you would any visitor to our company.

Every month, a facility inspection should be completed and provided to the \textless insert Manager/Supervisor or appropriate title of person within your company \textgreater. The \textless title of person mentioned in previous sentence should be inserted here\textgreater will review the report, take any corrective action needed, and maintain a file of inspections.

Periodically top management, supervisors and/or designated employees will complete inspections on a safety-sensitive or non-routine job to ensure compliance with safety procedures. If unsafe acts or unsafe conditions are detected within an area of the organization, additional training may be provided, as needed.

Examples of the Self-Inspection Checklist can be found in Appendix C.
A. OSHA Records Requirements

Copies of required accident investigations and certification of employee safety training shall be maintained by the Manager. A written report will be maintained on each accident, injury, or on-the-job illness requiring medical treatment. A record of each such injury or illness is recorded on OSHA Log and Summary of Occupational Injuries Form 300. Supplemental records of each injury are maintained on OSHA Form 301. Every year, a summary of all reported injuries or illnesses is posted no later than February 1, for two months, until April 1, on OSHA Form 300. These records are maintained for five years from the date of preparation.

A copy of the OSHA 300 Log, the OSHA 300A Summary Form, and the OSHA 301 Injury and Illness Report Forms, and instructions on how to complete these forms, can be obtained by double clicking on:


B. OSHA Inspection: What you can expect during an OSHA inspection

1. Arrival of the Compliance Officer (OSHA Inspector)
   a. Request to see credentials.
   b. Record his name, identification number, the name of his/her supervisor, and office location.
   c. Notify the Manager or your immediate Supervisor. If neither individual is available, ask the OSHA Compliance Officer to wait until the Manager or Supervisor arrive. If he/she cannot wait, the lead person at the property should accompany the Compliance Officer on his/her inspection.
   d. Do not volunteer any information, only answer questions.

2. Opening Conference
   a. The scope of the inspection will be discussed.
   b. The Officer will explain the reason for the inspection (i.e. employee complaint, scheduled inspection, etc.)
   c. If the reason for the inspection is an employee complaint, request a copy of the complaint.
   d. Take comprehensive notes and request to record the meeting and walk-around.

3. The Walk-Around (inspection)
   a. The Company representative should accompany the Compliance Officer throughout the inspection.
   b. The Officer may ask to interview employees. Employees should cooperate. The Company representative should attempt to participate in the interview.
   c. The Company representative should be prepared to show the Officer: 1) the Safety Manual, 2) Hazard Communication Program, 3) OSHA poster, 4) OSHA 300 Log.
   d. If at all possible, correct any violations immediately as the Compliance Officer points them out.
   e. Take photographs of the same items or areas that are photographed by the Compliance Officer.
   f. Take notes. Write down every possible violation, standards cited, corrective action needed, and a deadline date.

4. Closing Conference
   a. The Compliance Officer will review any violations discovered during the inspection. Compare these to the notes you took during the inspection. Point out any discrepancies and areas already corrected.
   b. Be polite. Do not argue or get defensive with the Compliance Officer.
   c. If you are not clear on something, ask questions.
   d. This is a good opportunity to produce records of compliance efforts and other safety practices.
5. **Citations and Penalties**

a. Our goal is to provide a safe and healthy work environment. If the company is cited for OSHA violations, corrective action will be completed before the deadline provided by OSHA and as quickly as possible. It will be Management’s decision to appeal any citations.
OSHA
Forms for Recording
Work-Related Injuries and Illnesses

What's Inside...

In this package, you'll find everything you need to complete
OSHA's Log and the Summary of Work-Related Injuries and Illnesses
for the next several years. On the following pages, you'll find:

▼ An Overview: Recording Work-Related Injuries and Illnesses —
General instructions for filling out the forms in this package
and definitions of terms you should use when you classify
your cases as injuries or illnesses.

▼ How to Fill Out the Log — An example to guide you in filling
out the Log properly.

▼ Log of Work-Related Injuries and
Illnesses — Several pages of the Log
(but you may make as many copies of
the Log as you need.) Notice that the
Log is separate from the Summary.

▼ Summary of Work-Related Injuries and
Illnesses — Removable Summary pages
for easy posting at the end of the year.
Note that you post the Summary only,
not the Log.

▼ Worksheet to Help You Fill Out the Summary — A worksheet for
figuring the average number of employees who worked for
your establishment and the total number of hours worked.

▼ OSHA's 301: Injury and Illness Incident
Report — Several copies of the OSHA 301
to provide details about the incident. You
may make as many copies as you need or
use an equivalent form.

Take a few minutes to review this package. If you have any
questions, visit us online at www.osha.gov or call your local OSHA office.
We'll be happy to help you.
An Overview: Recording Work-Related Injuries and Illnesses

The Occupational Safety and Health Act of 1970 requires certain employers to prepare and maintain records of work-related injuries and illnesses. Use these definitions when you classify cases in the Log. OSHA's recordkeeping regulation (29 CFR Part 1904) provides more information about the definitions below.

The Log of Work-Related Injuries and Illnesses (Form 300A) is used to classify work-related injuries and illnesses and to note the extent and severity of each case. When an incident occurs, use the Log to record specific details about what happened and how it happened. The Summary — a separate form (Form 300A) — shows the totals for the year in each category. At the end of the year, post the Summary in a visible location so that your employees are aware of the injuries and illnesses occurring in their workplace.

Employers must keep a Log for each establishment or site. If you have more than one establishment, you must keep a separate Log for each physical location that is expected to be in operation for one year or longer.

Note that your employees have the right to review their injury and illness records. For more information, see 29 Code of Federal Regulations Part 1904.35, Employee Involvement.

Cases listed on the Log of Work-Related Injuries and Illnesses are not necessarily eligible for workers' compensation or other insurance benefits. Listing a case on the Log does not mean that the employer or worker was at fault or that an OSHA standard was violated.

When is an injury or illness considered work-related?

An injury or illness is considered work-related if an event or exposure in the work environment caused or contributed to the condition or significantly aggravated a preexisting condition. Work-relatedness is presumed for injuries and illnesses resulting from events or exposures occurring in the workplace, unless an exception specifically applies. See 29 CFR Part 1904.5(b)(2) for the exceptions. The work environment includes the establishment and other locations where one or more employees are working or are present as a condition of their employment. See 29 CFR Part 1904.5(b)(1).

Which work-related injuries and illnesses should you record?

Record those work-related injuries and illnesses that result in:
- death,
- loss of consciousness,
- days away from work,
- restricted work activity or job transfer, or
- medical treatment beyond first aid.

You must also record work-related injuries and illnesses that are significant (as defined below) or meet any of the additional criteria listed below.

You must record any significant work-related injury or illness that is diagnosed by a physician or other licensed health care professional. You must report any work-related case involving cancer, chronic irreversible disease, a fractured or cracked bone, or a punctured eardrum. See 29 CFR 1904.7.

What are the additional criteria?

You must record the following conditions when they are work-related:
- any needlestick injury or cut from a sharp object that is contaminated with another person's blood or other potentially infectious material;
- any case requiring an employee to be medically removed under the requirements of an OSHA health standard;
- tuberculosis infection as evidenced by a positive skin test or diagnosis by a physician or other licensed health care professional after exposure to a known case of active tuberculosis.

What is medical treatment?

Medical treatment includes managing and curing a patient for the purpose of combating disease or disorder. The following are not considered medical treatments and are NOT recordable:
- visits to a doctor or health care professional solely for observation or counseling;
- diagnostic procedures, including administering prescription medications that are used solely for diagnostic purposes; and
- any procedure that can be labeled first aid.

How to work with the Log

1. Identify the employee involved unless it is a privacy concern case as described below.
2. Identify when and where the case occurred.
3. Describe the case, as specifically as you can.
4. Classify the seriousness of the case by recording the most serious outcome associated with the case, with column J (Other recordable cases) being the least serious and column C (Death) being the most serious.
5. Identify whether the case is an injury or illness. If the case is an injury, check the injury category. If the case is an illness, check the appropriate illness category.
What is first aid?

If the incident required only the following types of treatment, consider it first aid. Do NOT record the case if it involves only:

- using non-prescription medications at non-prescription strength;
- administering tetanus immunizations;
- cleaning, flush, or soak wounds on the skin surface;
- using wound coverings, such as bandages, Band-Aids®, gauze pads, etc., or using Steri-Strips® or butterfly bandages.
- using hot or cold therapy;
- using any totally non-rigid means of support, such as elastic bandages, wraps, non-rigid back belts, etc.;
- using temporary immobilization devices while transporting an accident victim (spinals, slings, neck collars, or back boards);
- drilling a fingernail or toenail to relieve pressure, or draining fluids from blisters;
- using eye patches;
- using simple irrigation or a cotton swab to remove foreign bodies not embedded in or adhered to the eye;
- using irrigation, tweezers, cotton swab or other simple means to remove splinters or foreign material from areas other than the eye;
- using finger guards;
- using massages;
- drinking fluids to relieve heat stress.

How do you decide if the case involved restricted work?

Restricted work activity occurs when, as the result of a work-related injury or illness, an employer or healthcare professional keeps, or recommends keeping, an employee from doing the routine function of his or her job or from working the full workload the employee would have been scheduled to work before the injury or illness occurred.

How do you count the number of days of restricted work activity or the number of days away from work?

Count the number of calendar days the employee was on restricted work activity or was away from work as a result of the recordable injury or illness. Do not count the day on which the injury or illness occurred or the day after the incident occurs. If a single injury or illness involved both days away from work and days of restricted work activity, enter the total number of days for each. You may stop counting days of restricted work activity or days away from work once the total of either or the combination of both reaches 180 days.

Under what circumstances should you NOT enter the employee's name on the OSHA Form 300?

You must consider the following types of injuries or illnesses to be privacy concern cases:

- an injury or illness resulting from a sexual assault;
- a mental illness;
- a case of HIV infection, hepatitis, or tuberculosis;
- a needlestick injury or cut from a sharp object that is contaminated with blood or other potentially infectious material (see 29 CFR Part 1904.8 for definition); and
- other illnesses, if the employee has independently and voluntarily requested that his or her name not be entered on the log.

What if the outcome changes after you record the case?

If the outcome or extent of an injury or illness changes after you have recorded the case, simply draw a line through the original entry or, if you wish, delete or write out the original entry. Then write the new entry where it belongs. Remember, you need to record the most serious outcome for each case.

Classifying injuries

An injury is any wound or damage to the body resulting from an event in the work environment.

Examples: Cut, puncture, laceration, abrasion, fracture, bruise, contusion, chipped teeth, amputation, insect bite, electrocution, or a thermal, chemical, electrical, or radiation burn. Sprains and strains injuries to muscles, joints, and connective tissues are classified as injuries when they result from a slip, trip, fall or other similar accidents.

What if the outcome changes after you record the case?

If the outcome or extent of an injury or illness changes after you have recorded the case, simply draw a line through the original entry or, if you wish, delete or write out the original entry. Then write the new entry where it belongs. Remember, you need to record the most serious outcome for each case.

Classifying injuries

An injury is any wound or damage to the body resulting from an event in the work environment.

Examples: Cut, puncture, laceration, abrasion, fracture, bruise, contusion, chipped teeth, amputation, insect bite, electrocution, or a thermal, chemical, electrical, or radiation burn. Sprains and strains injuries to muscles, joints, and connective tissues are classified as injuries when they result from a slip, trip, fall or other similar accidents.
Classifying Illnesses

Skin diseases or disorders
Skin diseases or disorders are illnesses involving the worker’s skin that are caused by work exposure to chemicals, plants, or other substances.

Examples: Contact dermatitis, eczema, or rash caused by primary irritants and sensitizers or poisonous plants; oil acne; friction blisters, chronic ulcers; inflammation of the skin.

Respiratory conditions
Respiratory conditions are illnesses associated with breathing hazardous biological agents, chemicals, dust, gases, vapors, or fumes at work.

Examples: Silicosis, asbestos, pneumoconiosis, pharyngitis, rhinitis or acute congestion; farmer’s lung, beryllium disease, tuberculosis, occupational asthma, reactive airways dysfunction syndrome (RADS), chronic obstructive pulmonary disease (COPD), hypersensitivity pneumonitis, toxic inhalation injury, such as metal fume fever, chronic obstructive bronchitis, and other pneumonias.

Poisoning
Poisoning includes disorders evidenced by abnormal concentrations of toxic substances in blood, other tissues, other bodily fluids, or the breath that are caused by the ingestion or absorption of toxic substances into the body.

Examples: Poisoning by lead, mercury, cadmium, arsenic, or other metals; poisoning by carbon monoxide, hydrogen sulfide, or other gases; poisoning by benzene, hexane, carbon tetrachloride, or other organic solvents; poisoning by insecticide sprays, such as parathion or lead arsenate; poisoning by other chemicals, such as formaldehyde.

When must you post the Summary?
You must post the Summary only — not the Log — by February 1 of the year following the year covered by the form and keep it posted until April 30 of that year.

How long must you keep the Log and Summary on file?
You must keep the Log and Summary for 5 years following the year to which they pertain.

Do you have to send these forms to OSHA at the end of the year?
No. You do not have to send the completed forms to OSHA unless specifically asked to do so.

How can we help you?
If you have a question about how to fill out the Log,

☐ visit us online at www.osha.gov or

☐ call your local OSHA office.
Optional

Calculating Injury and Illness Incidence Rates

What is an incidence rate?
An incidence rate is the number of recordable injuries and illnesses occurring among a given number of full-time workers (usually 100 full-time workers) over a given period of time (usually one year). To evaluate your firm's injury and illness experience or to compare your firm's experience with that of your industry as a whole, you need to compute your incidence rate. Because a specific number of workers and a specific period of time are involved, these rates can help you identify problems in your workplace and/or progress you may have made in preventing work-related injuries and illnesses.

How do you calculate an incidence rate?
You can compute an occupational injury and illness incidence rate for all recordable cases or for cases that involved days away from work for your firm quickly and easily. The formula requires that you follow instructions in paragraph (a) below for the total recordable cases or those in paragraph (b) for cases that involved days away from work, and for both rates the instructions in paragraph (c).

(a) To find the total number of recordable injuries and illnesses that occurred during the year, count the number of line entries on your OSHA Form 300, or refer to the OSHA Form 300A and sum the entries for columns (c), (f), (i), and (j).
(b) To find out the number of injuries and illnesses that involved days away from work, count the number of line entries on your OSHA Form 300 that received a check mark in column (i), or refer to the entry for column (f) on the OSHA Form 300A.
(c) The number of hours all employees actually worked during the year. Refer to OSHA Form 300A and optional worksheet to calculate this number.

You can compute the incidence rate for all recordable cases of injuries and illnesses using the following formula:

Total number of injuries and illnesses ÷ Number of hours worked by all employees x 200,000 hours = Total recordable case rate

(For the 200,000figure in the formula represents the number of hours 100 employees working 40 hours per week, 50 weeks per year would work, and provides the standard base for calculating incidence rates.)

You can compute the incidence rate for recordable cases involving days away from work, days of restricted work activity or job transfer (DART) using the following formula:

(Number of entries in column H ÷ Number of entries in column I) × Number of hours worked by all employees x 200,000 hours = DART incidence rate

You can use the same formula to calculate incidence rates for other variables such as cases involving restricted work activity (column J) on Form 300A, cases involving skin disorders (column M) on Form 300A, etc. Just substitute the appropriate total for these cases, from Form 300A, into the formula in place of the total number of injuries and illnesses.

What can I compare my incidence rate to?
The Bureau of Labor Statistics (BLS) conducts a survey of occupational injuries and illnesses each year and publishes incidence rate data by various classifications (e.g., by industry, by employer size, etc.). You can obtain these published data at www.bls.gov or by calling a BLS Regional Office.

Worksheet

<table>
<thead>
<tr>
<th>Total number of recordable injuries and illnesses in your establishment</th>
<th></th>
<th>Total recordable cases incidence rate</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>+</td>
<td>200,000 =</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hours worked by all your employees</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Total number of recordable injuries and illnesses with a checkmark in column E or column I</th>
<th></th>
<th>DART incidence rate</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>+</td>
<td>200,000 =</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hours worked by all your employees</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
How to Fill Out the Log

The Log of Work-Related Injuries and Illnesses is used to classify work-related injuries and illnesses and to note the extent and severity of each case. When an incident occurs, use the Log to record specific details about what happened and how it happened.

If your company has more than one establishment or site, you must keep separate records for each physical location that is expected to remain in operation for one year or longer.

We have given you several copies of the Log in this package. If you need more than we provided, you may photocopy and use as many as you need.

The Summary — a separate form — shows the work-related injury and illness totals for the year in each category. At the end of the year, count the number of incidents in each category and transfer the totals from the Log to the Summary. Then post the Summary in a visible location so that your employees are aware of injuries and illnesses occurring in their workplace.

You don't post the Log. You post only the Summary at the end of the year.
OSHA's Form 300
Log of Work-Related Injuries and Illnesses

You must record information about every work-related injury or illness that results in lost time away from work, restricted work activity, or job transfer. You must also record significant non-work-related injury or illnesses that are diagnosed by a physician or other health care provider. You must also record work-related illnesses and injuries that meet any of the specific recording criteria listed in 29 CFR 1904.4 through 1904.12. Felt free to use this form for a single case if you need to. You must complete an Injury and Illness Incident Report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you are unsure whether a case is recordable, call your local OSHA office for help.

<table>
<thead>
<tr>
<th>Identity the person</th>
<th>Describe the case</th>
<th>Classify the case</th>
</tr>
</thead>
<tbody>
<tr>
<td>(A) Case no.</td>
<td>(B) Employee's name</td>
<td>(C) Job title (e.g., Worker)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Using these four categories, check ONLY the most serious result for each case:

- (G) Days away from work
- (H) Days away from work
- (I) Temporarily disabled
- (J) Other recordable cases

Enter the number of days the injured or ill worker was:

- (G) Days away from work
- (H) Days away from work
- (I) Temporarily disabled
- (J) Other recordable cases

Check the "Injury" column or choose one type of illness:

- (1) Accident (2) Illness (3) Other (4) Fatality (5)

Page totals: __________

Be sure to transfer these data to the Summary page (Form 300A) before you post it.

Page 73 of ______
OSHA's Form 300A

Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this Summary.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entire range of pages on the Log. If you had no cases, write "0."

Employees, former employees, and their representatives have the right to review the OSHA Form 300A in its entirety. They also have limited access to the OSHA Form 300 or its equivalent. See 29 CFR Part 1904.39, in OSHA's recordkeeping rule for further details on the access provisions for these forms.

**Number of Cases**

<table>
<thead>
<tr>
<th>Total number of deaths</th>
<th>Total number of cases with days away from work</th>
<th>Total number of cases with job transfer or restriction</th>
<th>Total number of other recordable cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a)</td>
<td>(b)</td>
<td>(c)</td>
<td>(d)</td>
</tr>
</tbody>
</table>

**Number of Days**

<table>
<thead>
<tr>
<th>Total number of days of job transfer or restriction</th>
<th>Total number of days away from work</th>
</tr>
</thead>
<tbody>
<tr>
<td>(e)</td>
<td>(f)</td>
</tr>
</tbody>
</table>

**Injury and Illness Types**

<table>
<thead>
<tr>
<th>Total number of . . .</th>
<th>(g) Injuries</th>
<th>(h) Poisonings</th>
<th>(i) All other illnesses</th>
<th>(j) Skin disorders</th>
<th>(k) Respiratory conditions</th>
</tr>
</thead>
</table>

---

**Establishment Information**

Year establishment name ____________________________

Street ____________________________

City ____________________________ State ________ ZIP ________

Industry description (e.g., Manufacturer of motor vehicles)

Standard Industrial Classification (SIC), if known (e.g., SIC 3719)

---

**Employment Information**

(If you don't have these figures, use the worksheet on the back of this page to estimate.)

Annual average number of employees ____________________________

Total hours worked by all employees last year ____________________________

---

**Sign Here**

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

Company executive ____________________________ Title ____________________________

Date ____________________________

---

Post this Summary page from February 1 to April 30 of the year following the year covered by the form.

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Comments are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about this estimate or any other aspect of the data collection, contact the Department of Labor, OSHA Office of Business Operations, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.
Optional

Worksheet to Help You Fill Out the Summary

At the end of the year, OSHA requires you to enter the average number of employees and the total hours worked by your employees on the summary. If you don’t have these figures, you can use the information on this page to estimate the numbers you will need to enter on the summary page at the end of the year.

How to figure the average number of employees who worked for your establishment during the year:

1. Add the total number of employees your establishment paid in all pay periods during the year. Include all employees: full-time, part-time, temporary, seasonal, salaried, and hourly.
   
   The number of employees paid in all pay periods = __________

2. Count the number of pay periods your establishment had during the year. Be sure to include any pay periods when you had no employees.
   
   The number of pay periods during the year = __________

3. Divide the number of employees by the number of pay periods.

   ____________
   ____________ = ____________

4. Round the answer to the next highest whole number. Write the rounded number in the blank marked Annual average number of employees.

   The number rounded = ____________

For example, John Construction figured in average employment this way:

<table>
<thead>
<tr>
<th>Pay Period</th>
<th>Number of Employees</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>10</td>
</tr>
<tr>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>3</td>
<td>15</td>
</tr>
<tr>
<td>4</td>
<td>20</td>
</tr>
<tr>
<td>5</td>
<td>40</td>
</tr>
<tr>
<td>24</td>
<td>20</td>
</tr>
<tr>
<td>28</td>
<td>15</td>
</tr>
<tr>
<td>26</td>
<td>10</td>
</tr>
<tr>
<td>850</td>
<td></td>
</tr>
</tbody>
</table>

Number of employees paid = 860
Number of pay periods = 26

31.92 rounded to 32
32 is the annual average number of employees

How to figure the total hours worked by all employees:

Include hours worked by salaried, hourly, part-time and seasonal workers, as well as hours worked by other workers subject to day to day supervision by your establishment (e.g., temporary help services workers).

Do not include vacation, sick leave, holidays, or any other non-work time, even if employees were paid for it. If your establishment keeps records of only the hours paid or if you have employees who are not paid by the hour, please estimate the hours that the employees actually worked.

If this number isn’t available, you can use this optional worksheet to estimate it.

Optional Worksheet

Find the number of full-time employees in your establishment for the year.

Multiply by the number of work hours for a full-time employee in a year.

This is the number of full-time hours worked.

Add the number of any overtime hours as well as the hours worked by other employees (part-time, temporary, seasonal).

Round the answer to the next highest whole number. Write the rounded number in the blank marked Total hours worked by all employees last year.
OSHA's Form 301
Injury and Illness Incident Report

This Injury and Illness Incident Report is one of the first forms you must fill out when a recordable work-related injury or illness has occurred. Together with the Log of Work-Related Injuries and Illnesses and the accompanying Summary, these forms help the employer and OSHA develop a picture of the extent and severity of work-related incidents.

Within 7 calendar days after you receive information that a recordable work-related injury or illness has occurred, you must fill out this form or an equivalent. Some state workers' compensation, insurance, or other reports may be acceptable substitutes. To be considered an equivalent form, any substitute must contain all the information asked for on this form.

According to Public Law 91-596 and 29 CFR 1904, OSHA's recordkeeping rule, you must keep this form on file for 5 years following the year to which it pertains.

If you need additional copies of this form, you may photocopy and use as many as you need.

Information about the employee

1) Full name ____________________________
2) Street ________________________________
   City ______________________ State ______ ZIP ______
3) Date of birth ______ / ______ / ______
4) Date hired ______ / ______ / ______
5)   ☐ Male
     ☐ Female

Information about the physician or other health care professional

6) Name of physician or other health care professional ____________________________
   City ______________________ State ______ ZIP ______
7) If treatment was given away from the workplace, where was it given?
   Facility ____________________________
   Street ________________________________
   City ______________________ State ______ ZIP ______
8) Was employee treated in an emergency room?
   ☐ Yes
   ☐ No
9) Was employee hospitalized one night or an in-patient?
   ☐ Yes
   ☐ No

Information about the case

10) Case number from the Log __________ (Transmit case number from the Log after you record the case.)
11) Date of injury or illness ______ / ______ / ______
12) Time employee began work ______ / ______ AM / PM
13) Time of event ______ / ______ AM / PM ☐ Check if time cannot be determined
14) What was the employee doing just before the incident occurred? Describe the activity, as well as the tools, equipment, or material the employee was using, by specific example. Examples: "climbing a ladder while carrying roofing materials"; "spraying chlorine from hand sprayer"; "daily computer key-entry."
15) What happened? Tell us how the injury occurred. Examples: "When ladder slipped on wet floor, worker fell 20 feet"; "Worker was sprayed with chlorine when backpack broke during replacement"; "Worker developed soreness in wrist over time."
16) What was the injury or illness? Tell us the part of the body that was affected and how it was affected; be more specific than "bump," "pains," or "sore." Examples: "strained back"; "chemical burn, hand"; "carpal tunnel syndrome."
17) What object or substance directly harmed the employee? Examples: "concrete floor"; "chlorine"; "metal arm saw." If this question does not apply to the incident, leave it blank.
18) If the employee died, when did death occur? Date of death ______ / ______ / ______

PUBLIC REPORTING BURDEN FOR THIS COLLECTION OF INFORMATION IS ESTIMATED TO AVERAGE 22 MINUTES PER RESPONSE. INCLUDING TIME FOR READING INSTRUCTIONS, SEARCHING EXISTING DATA SOURCES, GATHERING AND RECORDING THE DATA NEEDED, AND COMPLETING AND SUBMITTING THE COLLECTION OF INFORMATION. PERSONS ARE NOT REQUIRED TO RESPOND TO THE COLLECTION OF INFORMATION UNLESS IT DISPLAYS A CURRENT VALID OMB NUMBER. IF YOU HAVE ANY COMMENTS ABOUT THIS RELEVANT OR ANY ASPECTS OF THIS DATA COLLECTION, INCLUDING SUGGESTIONS FOR reducing this burden, CONTACT: U.S. Department of Labor, OSHA Office of Statistics, Room N-M44, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this address.
If You Need Help...

If you need help deciding whether a case is recordable, or if you have questions about the information in this package, feel free to contact us. We'll gladly answer any questions you have.

- Visit us online at www.osha.gov
- Call your OSHA Regional office and ask for the recordkeeping coordinator
  or
- Call your State Plan office

<table>
<thead>
<tr>
<th>Federal Jurisdiction</th>
<th>State Plan States</th>
</tr>
</thead>
</table>
| Region 1 - 617 / 565-9860  
Connecticut; Massachusetts; Maine; New Hampshire; Rhode Island | Alaska - 977 / 269-4957 |
| Region 2 - 212 / 337-2378  
New York; New Jersey | Arizona - 302 / 542-5795 |
| Region 3 - 215 / 661-4900  
Delaware; Pennsylvania; West Virginia | California - 415 / 703-5100 |
| Region 4 - 404 / 462-2390  
Alabama; Florida; Georgia; Mississippi | *Connecticut - 860 / 566-4389 |
| Region 5 - 312 / 583-2220  
Illinois; Ohio; Wisconsin | Hawaii - 808 / 586-5100 |
| Region 6 - 214 / 767-4731  
Arkansas; Louisiana; Oklahoma; Texas | Indiana - 317 / 255-2988 |
| Region 7 - 816 / 226-5861  
Kansas; Missouri; Nebraska | Iowa - 515 / 281-3661 |
| Region 8 - 303 / 544-1600  
Colorado; Montana; North Dakota; South Dakota | Kentucky - 502 / 564-3070 |
| Region 9 - 415 / 975-4310 | Maryland - 410 / 707-2371 |
| Region 10 - 206 / 553-5930  
Idaho | Michigan - 517 / 322-1818 |
| | Minnesota - 651 / 284-5050 |
| | Nevada - 702 / 486-9020 |
| | *New Jersey - 609 / 984-1380 |
| | New Mexico - 505 / 827-4230 |
| | *New York - 518 / 457-2574 |
| | North Carolina - 919 / 807-2875 |
| | Oregon - 503 / 378-3272 |
| | Puerto Rico - 787 / 754-2172 |
| | South Carolina - 803 / 534-9069 |
| | Tennessee - 615 / 741-2783 |
| | Utah - 801 / 530-6001 |
| | Verrazano - 802 / 828-2705 |
| | Virginia - 804 / 786-6613 |
| | Virgin Islands - 340 / 772-1315 |
| | Washington - 360 / 902-5354 |
| | Wyoming - 307 / 777-7786 |

*Public Sector only
Section X – Acknowledgment Form

The rules, programs, and procedures stated within the Company’s Safety Program are not intended to cover all the possible situations you will be faced with on the job. The Company encourages you to act in a safe and responsible manner at all times, both on and off the job.

I have read the Company’s Safety Program, understand it, and agree to abide by it. I understand that violation of these rules may lead to dismissal.

Print Name: ____________________________________________

Signature:______________________________________________

Date ___________________________________________________
RESERVED FOR FUTURE USE
APPENDIX A – Sample Safety Policy Statements

“The Occupational Safety and Health Act of 1970 clearly states our common goal of safe and healthful working conditions. The safety and health of our employees continues to be the first consideration in the operation of this business.”

“Safety and health in our business must be a part of every operation. Without question it is every employee’s responsibility at all levels.”

“It is the intent of this company to comply with all laws. To do this we must constantly be aware of conditions in all work areas that can produce injuries. No employee is required to work at a job he or she knows is not safe or healthful. Your cooperation in detecting hazards and, in turn, controlling them is a condition of your employment. Inform your supervisor immediately of any situation beyond your ability or authority to correct.”

“The personal safety and health of each employee of this company is of primary importance. The prevention of occupa-
tionally-induced injuries and illnesses is of such consequence that it will be given precedence over operating productivity whenever necessary. To the greatest degree possible, management will provide all mechanical and physical facilities re-
quired for personal safety and health in keeping with the highest standards.”

“We will maintain a safety and health program conforming to the best practices of organizations of this type. To be suc-
cessful, such a program must embody the proper attitudes toward injury and illness prevention on the part of management and employees. It also requires cooperation in all safety and health matters, not only between supervisor and employee, but also between each employee and his or her co-workers. Only through such a cooperative effort can a safety program in the best interest of all be established and preserved.”

“Our objective is a safety and health program that will reduce the number of injuries and illnesses to an absolute mini-
imum, not merely in keeping with, but surpassing, the best experience of operations similar to ours. Our goal is zero acci-
dents and injuries.”

“Our safety and health program will include:

- Providing mechanical and physical safeguards to the maximum extent possible.
- Conducting a program of safety and health inspections to find and eliminate unsafe working conditions or practices, to control health hazards, and to comply fully with the safety and health standards for every job.
- Training all employees in good safety and health practices.
- Providing necessary personal protective equipment and instructions for its use and care.
- Developing and enforcing safety and health rules and requiring that employees cooperate with these rules as a condi-
tion of employment.
- Investigating, promptly and thoroughly, every accident to find out what caused it and to correct the problem so that it won’t happen again.
- Setting up a system of recognition and awards for outstanding safety service or performance.”

“We recognize that the responsibilities for safety and health are shared:

- The employer accepts the responsibility for leadership of the safety and health program, for its effectiveness and im-
provement, and for providing the safeguards required to ensure safe conditions.
- Supervisors are responsible for developing the proper attitudes toward safety and health in themselves and in those they supervise, and for ensuring that all operations are performed with the utmost regard for the safety and health of all personnel involved, including themselves.
- Employees are responsible for “wholehearted, genuine cooperation with all aspects of the safety and health program, in-
cluding compliance with all rules and regulations and for continuously practicing safety while performing their duties”.

GMRC 2808 AG  01-18  A-1
It is the policy of this company that every employee is entitled to a safe and healthful place in which to work. To this end, every reasonable effort will be made in the interest of accident prevention, fire protection, and health preservation.

The safety of our employees is a major consideration in the operation of our organization. Management and supervisory personnel will be accountable for the safety of the employees working under their supervision and will be expected to conduct operations in a safe manner at all times. Management will also be responsible for establishing safe working conditions and promoting the health and safety of employees.

It is the desire of (company name) to comply with state and federal laws and to provide a safe working environment for its employees. The Company, however, recognizes that the responsibilities for safety and health are shared:

- The Company accepts the responsibility for leadership of the safety and health program, for its effectiveness and improvement, and for providing the safeguards required to ensure safe conditions.
- Supervisors are responsible for developing the proper attitude toward safety and health in themselves and in those they supervise. They are also responsible for ensuring that all operations are performed with the utmost regard for safety and health of all personnel involved, including themselves. When safety practices are necessary, the supervisor shall communicate them to the employee on his/her first day of employment. If safety procedures are not being followed, disciplinary action will be taken. This action might include, but is not limited to, reprimand, suspension, or dismissal of the employee. Periodic review of this policy with employees will be done by the supervisor.
- Employees are responsible for wholehearted cooperation in all aspects of the safety and health program including compliance with all rules and regulations – and for continuously practicing safety while performing their job functions.

STATEMENT OF SAFETY POLICY

It is the policy of ________________ to strive for the highest safety standards for its employees. Safety does not occur by chance. It is the result of careful attention to our work by all those involved. Managers, supervisors, and employees share the responsibility of maintaining a safe workplace.

This safety program has been developed to assure compliance with all State and Federal OSHA regulations. Regard for the safety of all employees, the general public, and subcontractors in our facilities is of great importance to ________________ company. Accidents can be prevented and the safety of all is the goal we want to achieve.

Providing a safe place to work, the proper protective equipment and a work environment conducive to safe work practices and policies is a primary and a major concern for the management of this company.

_____________________________________________________
President
Appendix B –
Sample Checklist – Planning for Emergencies

1. Has a contingency analysis been conducted to determine what emergencies might arise?

2. Have emergency plans and procedures been developed for potentially catastrophic events such as:
   a. Fires
   b. Explosions
   c. Leaks and spills
   d. Severe weather
   e. Floods
   f. Earthquakes
   g. Bomb threats
   h. Employee Violence
   i. Theft/Robbery Attempts
   j. Other

3. Do these plans provide for procedures for extinguishing different types of fires which might occur?

4. Do these plans have adequate evacuation and recovery procedures for each type of emergency?

5. Have responsibilities been assigned in the plan to specific personnel to direct operations and to respond to emergencies? Are these persons aware of their responsibilities? Are they qualified to lead in the necessary actions which might be required?

6. Are emergency crews qualified, designated and on site?

7. Are different communications channels assigned to support emergency operations?

8. Are there plans to evacuate personnel from each work site in the event of emergencies?

9. Are evacuation route and warning signals information posted in each work area? Are the evacuation routes and exits marked?

10. Can egress routes from work areas be followed by personnel in the dark or in smoke?

11. Are the emergency plans and procedures posted in prominent areas?

12. Have personnel received training in emergency procedures?
   a. Workers
   b. Supervisory personnel

13. Are there drills on simulated emergencies being conducted periodically for personnel?

14. Is there a procedure to ensure that all personnel have been alerted to the emergency and those who will not combat it have been evacuated?

15. Are the egress provisions adequate (i.e., doors, stairways) for the evacuation in the event of an emergency?

16. Do all doors open in the proper direction to facilitate egress of personnel in emergencies?

17. Are there procedures to preclude obstructions to personnel or equipment in critical evacuation or emergency equipment access routes or areas?

18. Is the emergency equipment called for in the emergency procedures available at the facility, and is it operational? Can the equipment be reached easily if an emergency occurs?

19. Are warning systems installed (sirens, loudspeakers, etc.) and are they tested periodically? Are all personnel familiar with the meanings of warning signals and required action to be taken?

20. Is there a fire detection system at each facility? Are fire extinguishers sized, located, and of the types required by standards, and are they suitable for the types of fires which might occur?

21. Are emergency telephone numbers posted for the fire department, ambulance, hospital emergency room, law enforcement, and others?
RESERVED FOR FUTURE USE
Appendix C – Self-Inspection Checklist

The most widely accepted way to identify hazards is to conduct safety and health inspections. The only way you can be certain of the actual situation is for you to look at it from time to time.

Make a Self-Inspection of Your Operation

Begin a program of self-inspection of your own operation. Self-inspection is a must if you are to know where probable hazards exist and whether they are under control.

Later in this Section, you will find checklists designed to assist you in this fact-finding. They will give you some indication of where you should begin action to make your operation safer and more healthful for all of your employees.

These checklists are by no means all inclusive. You may wish to add to them or delete portions that do not apply to your operation. Consider carefully each item as you come to it and then make your decision.

Don't spend time with items that obviously have no application to your operation. Make sure each item is seen by you or your designee, and leave nothing to memory or chance. Write down what you see, or don't see, and what you think you should do about it.

When you have completed the checklists, add this material to your injury information, your employee information, and your process and equipment information. You will now possess may facts that will help you determine what problems exist.

Once the hazards have been identified, you can institute control procedures.

Technical assistance in self-inspection may be available to you through your insurance carrier, the local safety council and many local, state, and federal agencies, including the state consultation programs and OSHA Area Offices. Additional checklists are available from the National Safety Council, trade associations, insurance companies and other similar service organizations.

Self-Inspection Scope

The scope of your self-inspections should include the following:

- **Building and Grounds Conditions** — floors, exits, stairs, walkways, ramps, platforms, driveways, aisles.
- **Housekeeping Program** — debris disposal, tools, objects, materials, leakage and spillage, cleaning methods, schedules, work areas, remote areas, storage areas.
- **Electricity** — equipment, switches, breakers, fuses, switch-boxes, junctions, special fixtures, circuits, insulation, extensions, tools, motors, grounding, NEC compliance.
- **Heating and Ventilation** — type, effectiveness, temperature, controls, natural and artificial ventilation and exhaustiing.
- **Machinery** — points of operation, gears, shafts, pulleys, key ways, belts, couplings, sprockets, chains, frames, controls, adjusting, maintenance, lock out, grounding.
- **Personnel** — training, experience, type clothing, personal protective equipment, use of guards, work practices.
- **Hand and Power Tools** — inspection, storage, repair, types, maintenance, grounding, use and handling.
- **Chemicals** — storage, handling, spills, disposals, amounts used, toxicity or other harmful effects, warning signs, supervision, training, protective clothing and equipment.
- **Fire Prevention** — extinguishers, alarms, smoking rules, exits, personnel assigned.
- **Maintenance** — regularity, effectiveness, training of personnel, materials and equipment used, records maintained, method of locking out machinery, general methods.
- **Personal Protective Equipment** — type, size, maintenance, repair, storage, assignment of responsibility, training in care and use, rules of use.
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SELF-INSPECTION CHECKLISTS

These check lists are by no means all-inclusive. You should add to them or delete portions or items that do not apply to your operations; however, carefully consider each item as you come to it and then make your decision.

EMPLOYER POSTING

☐ Is the required OSHA workplace poster displayed in a prominent location where all employees are likely to see it?

☐ Are emergency telephone numbers posted where they can be readily found in case of emergency?

☐ Where employees may be exposed to any toxic substances or harmful physical agents, has appropriate information concerning employee access to medical and exposure records and "Material Safety Data Sheets" been posted or otherwise made readily available to affected employees?

☐ Are signs concerning "Exiting from buildings," posted where appropriate?

☐ Is the Summary of Occupational Illnesses and Injuries posted in the month of February?

RECORDKEEPING

☐ Are all occupational injury or illnesses, except minor injuries requiring only first aid, being recorded as required on the OSHA 300 log?

☐ Are employee medical records and records of employee exposure to hazardous substances or harmful physical agents up-to-date and in compliance with current OSHA standards?

☐ Are employee training records kept and accessible for review by employees, when required by OSHA standards?

☐ Have arrangements been made to maintain required records for the legal period of time for each specific type record? (Some records must be maintained for at least 40 years.)

SAFETY AND HEALTH PROGRAM

☐ Do you have an active safety and health program in operation that deals with general safety and health program elements as well as the management of hazards specific to your worksite?

☐ Is one person clearly responsible for the overall activities of the safety and health program?

☐ Do you have a safety committee or group made up of management and labor representatives that meets regularly and report in writing on its activities?

☐ Do you have a working procedure for handling in-house employee complaints regarding safety and health?

☐ Are you keeping your employees advised of the successful effort and accomplishments you and/or your safety committee have made in assuring they will have a workplace that is safe and healthful?

MEDICAL SERVICES AND FIRST-AID

☐ Is there a hospital, clinic, or infirmary for medical care in proximity of your workplace?

☐ If medical and first-aid facilities are not in proximity of your workplace, is at least one employee on each shift currently qualified to render first aid?

☐ Have all employees who are expected to respond to medical emergencies as part of their work (1) received first-aid training; (2) had hepatitis B vaccination made available to them; (3) had appropriate training on procedures to protect them from bloodborne pathogens, including universal precautions; and (4) have available and understand how to use appropriate personal protective equipment to protect against exposure to bloodborne diseases?

☐ Where employees have had an exposure incident involving bloodborne pathogens, did you provide an immediate post-exposure medical evaluation and follow-up?

☐ Are medical personnel readily available for advice and consultation on matters of employees' health?

☐ Are emergency phone numbers posted in prominent places (by telephones and main work areas)?

☐ Are first-aid kits easily accessible to each work area, with necessary supplies available, periodically inspected and replenished as needed?

☐ Have first-aid kit supplies been approved by a physician, indicating that they are adequate for a particular area or operation?

☐ Are means provided for quick drenching or flushing of the eyes and body in areas where corrosive liquids or materials are handled?
FIRE PROTECTION

☐ Is your local fire department well acquainted with your facilities, its location and specific hazards?

☐ Are portable fire extinguishers provided in adequate number and type (ABC dry chemical fire extinguishers should be used)?

☐ Are fire extinguishers mounted in readily accessible locations?

☐ Are employees periodically instructed in the use of fire extinguishers and fire protection procedures?

☐ Are fire extinguishers checked annually by properly trained service personnel and noted on the inspection tag?

PERSONAL PROTECTIVE EQUIPMENT

☐ Are protective gloves, aprons, shields or other means provided and required where employees could be cut, or there is reasonably anticipated exposure to corrosive liquids, chemicals, blood or other potentially infectious materials?

☐ When handling chemicals, are respirators, rubber gloves, aprons, chemical goggles, coveralls and other chemical protective gear available?

☐ Is personal protective equipment always worn by workers when applying or handling chemicals?

☐ Are adequate work procedures, protective clothing and equipment provided and used when cleaning up spilled toxic or otherwise hazardous materials or liquids?

☐ Is all personal protective equipment maintained in a sanitary condition and ready for use?

☐ Are there appropriate procedures in place for disposing of or decontaminating personal protective equipment contaminated with or reasonably anticipated to be contaminated with blood or other potentially infectious materials?

☐ Are safety glasses or face shields provided and worn where there is any danger of flying particles or corrosive materials?

☐ Are approved respirators provided for regular or emergency use where needed?

☐ Are respirators available when handling dust producing feeds or crops?

☐ Is it necessary for employees to raise their voice to be heard over worksite noise?

☐ Are hearing protectors available for wearing around noisy animals and equipment?

☐ Is appropriate foot protection required where there is the risk of foot injuries from falling objects, crushing, penetrating actions, or being stepped on?

☐ Do your employees dress properly for various weather conditions?

☐ Where food or beverages are consumed on the premise, are they consumed in areas where there is no exposure to toxic material, blood or other potentially infectious materials?

HOUSEKEEPING

☐ Are building entrances and passageways always kept clear of stored materials or trash that may catch fire, cause falls or fall on workers?

☐ Are spills cleaned up promptly and thoroughly?

☐ Are doors and gates to hazardous areas kept closed and secured at all times?

☐ Are materials stacked and stored correctly to prevent trip-over hazards?

☐ Are entrances to grain and silage storage areas always kept closed to prevent unintended access?

☐ Are debris and other used material removed from building daily?

☐ Is disposal of unused combustible materials done frequently?

☐ Is any open burning of debris and other materials done at a distance within 100 feet of buildings?

LIVESTOCK FACILITIES

☐ Are pens, gates, and chutes adequate for the job, sturdy and well maintained?

☐ Are livestock pens designed to allow for easy escape from an aggressive animal?

☐ Are livestock pens and work areas secured to keep out visitors and children?

☐ Is livestock restraining equipment available and in good condition (for example, squeeze chutes, head gates, etc.)?

☐ Are floors and walking surfaces clear of feed material, mud, etc.?

☐ Are manure lagoons posted with warning signs and fenced to keep visitors, children and animals out?

☐ Are manure pit openings covered with secured gates to prevent anyone from entering?

☐ Are manure storage areas posted with warning signs about manure gases?

☐ Is manure handling equipment adequately shielded and well maintained?

☐ Are chemicals stored in original containers and in a location inaccessible to visitors and children?
Are feeding, grinding and other material handling equipment properly shielded?
Are vents clear, do ventilation fans operate properly?
Are portable heaters and other heating equipment in good condition?
Are electric water heaters for livestock properly installed and grounded?

CHEMICAL HANDLING/HAZARDOUS COMMUNICATIONS PROGRAM

Are chemicals stored in a room or building which can be secured from children, visitors, and livestock?
Are entrances to chemical storage areas posted to warn others of the hazards inside and to inform firefighters of the contents in case of a fire?
Do chemical containers have original labels?
Are chemicals stored in their original container, and never in food and drink containers?
Are empty chemical containers disposed of properly?
Is smoking prohibited in and around buildings where chemicals are stored and when they are being handled?
Is the chemical storage area well-ventilated and lighted?
Are chemicals mixed in a well-ventilated room with spill-holding capacity?
Are respirators, rubber gloves, aprons, chemical goggles, coveralls and other chemical protective gear available?
Is there a list of hazardous chemicals used in your operation?
Is there a current written exposure control plan for occupational exposure to blood-borne pathogens and other potentially infections materials?
Is there a written hazard communications program dealing with Material Safety Data Sheets (MSDS) labeling and employee training?
Is each container for hazardous substances, i.e., storage containers, etc. (labeled with product identity and hazard warning) for communication of the specific health hazards and physical hazards?
Is there a Material Safety Data Sheet readily available for each hazardous chemical used?

LOCK-OUT/TAG-OUT PROCEDURES

Lock-out/Tag-out applies to such items as power washing equipment, fans, feed augers, grinders and any other equipment using a power source, whether electric, hydraulic or pneumatic.

Is all machinery capable of movement required to be de-energized, disengaged and locked out during cleaning, servicing, adjusting or setup operations, whenever required?
Where the power disconnecting means for equipment does not also disconnect the electrical control circuit, are there appropriate electrical enclosures identified? Are means provided to assure the control circuit can also be disconnected and locked out?
Is the locking-out of control circuits in lieu of locking out main power disconnects prohibited?
Are all equipment control valve handles provided with a means for locking-out?
Does the lock-out procedure require the stored energy (mechanical, hydraulic, air, etc.) be released or blocked before equipment is locked out for repairs?
Are appropriate employees provided with individually keyed personal safety locks?
Are employees required to keep personal control of their key(s) while they have safety locks in use?
Is it required that only the employee exposed to the hazard place or remove the safety lock?
Is there a means provided to identify any or all employees who are working on lock-out equipment by their locks or company tags or a sufficient number of accident prevention signs or tags and safety padlocks provided for any reasonably foreseeable repair emergency?
In the event that equipment or lines can not be shut down, locked out and tagged, is the safe job procedure established and rigidly followed?

CONFINED SPACE

Is a confined space entry program developed?
Have all employees been trained in a confined space entry program?
Is either natural or mechanical ventilation provided prior to confined space entry?
Are appropriate atmospheric tests performed to check for oxygen deficiencies, toxic substances and explosive concentrations in the confined space before entry?
Is there an attendant located outside of the confined space whenever it is occupied, whose sole responsibility is to remain in verbal contact with employee(s) inside the confined space and provide rescue, sound an alarm and/or render assistance if an emergency should occur?
HAND/POWER TOOLS

☐ Are all portable power tools always disconnected when not in use?
☐ Are all stationary power tools grounded and all portable power tools either double insulated or of the 3-wire grounded type?
☐ Are all stationary tools such as grinders properly shielded?
☐ Are all hand tools (especially cutting tools like saws, knives etc.) properly stored so they cannot fall or be brushed against accidentally?
☐ Is hearing protection always used when operating noisy power tools?
☐ Are all areas well lit?
☐ Are all tools and equipment (both company and employee owned) used by employees at their work place in good condition?
☐ Are hand tools such as chisels, punches, etc. which develop mushroom heads during use, reconditioned or replaced as necessary?
☐ Are broken or fractured handles on hammers, axes, and similar equipment replaced properly?
☐ Are worn or bent wrenches replaced regularly?
☐ Are appropriate handles used on files and similar tools?
☐ Are employees made aware of the hazards caused by faulty or improperly used hand tools?
☐ Are appropriate safety glasses, face shields etc. used while using hand tools or equipment which might produce flying materials or be subject to breakage?

ELECTRICAL SYSTEM

☐ Is all wiring installed in accordance with the minimum standards as set forth in the current edition of the National Electric Code?
☐ Is all equipment listed by recognized testing agencies?
☐ Was the electrical system installed by a licensed electrician?
☐ Was the electrical system inspected by an electrical inspector?
☐ Does each building have a single electrical service entrance?
☐ Is the electrical service entrance panel in the building grounded to a driven grounding electrode (ground rod)?
☐ Are rain-proof enclosures used on all outside electrical boxes?
☐ Was all wiring inside of the livestock area done in accordance with Article 547 of the National Electric Code?
☐ Are all electrical boxes and equipment in areas subject to wash down watertight, dust-tight, and made of corrosion-resistant materials?
☐ Are all electrical cables of the type designed for use in a damp environment?
☐ Are all switch and receptacle boxes and covers in animal and grain processing areas of a weatherproof and dust-tight design?
☐ Are all thermostats UL listed, watertight, dust-tight, and made of corrosion-resistant material?
☐ Are all light fixtures made of corrosion-resistant material and equipped with shatterproof gasket covers or globes?
☐ Are Ground-Fault Circuit Interrupters used on extension cords when working in or around wet areas?
☐ Are all wiring, power cords, plugs and switches kept in good condition?
☐ Does the electrical system have ample capacity to handle all loads?
☐ Are all heat lamp holders equipped with porcelain sockets?
☐ Are all motors totally enclosed and rated for farm service?
☐ Is all “permanently installed” equipment serviced by permanent electrical wiring (i.e., no plug cord connections)?
☐ Has a lightning surge arrester been installed on the electrical service entrance panel?
☐ Is the appropriate type of surge arrester provided to protect computers, electronic controls, etc.?
☐ Is the building equipped with a lightning rod system?
☐ Is the lightning rod system bonded to the electrical system grounding network as required by the National Electric Code?
☐ Is the lightning protection system “master label” present on site?
☐ Have provisions been made to minimize the development of and problems associated with extraneous voltages?
HEATING SYSTEM

☐ Is the heating system installed in accordance with local codes and standards?
☐ Are all gas fired heating devices approved by a recognized testing agency such as the American Gas Association or CSA International?
☐ Are portable, gas fired or electric heaters properly supported to a rigid structure?
☐ Do all heating devices have the appropriate clearances from combustible materials as recommended by the manufacturer?
☐ Are all heating devices that were designed by the manufacturer to be vented, vented to the outside atmosphere, for the proper release of flue gases?
☐ Are all fuel-fired heating devices properly vented to the outside atmosphere with an approved vent or chimney?
☐ Are all LP Gas fuel supply lines installed in accordance with NFPA 58 (LP Gas Code)?
☐ Is the LP Gas supply tank installed in accordance with NFPA 58 (LP Gas Code)?
☐ Are all electric heat lamps properly supported by a chain or fine cable, and not supported via the electrical power cord?
☐ Do electric heat lamps have an appropriate guard and shield?
☐ Is there an adequate maintenance program for the heating system?

☐ Have emergency plans and procedures been developed for the operation?
☐ Have appropriate routes been identified for proper evacuation in case of a fire?
☐ Have emergency plans and procedures been developed for fires?
☐ Have emergency plans and procedures been developed for explosions?
☐ Have emergency plans and procedures been developed for leaks and spills?
☐ Have emergency plans and procedures been developed for severe weather?
☐ Have emergency plans and procedures been developed for floods?
☐ Have emergency plans and procedures been developed for earthquakes?
☐ Have emergency plans and procedures been developed for bomb threats?
☐ Have emergency plans and procedures been developed for employee violence?
☐ Does the emergency action plan have adequate evacuation and recovery procedures for each type of emergency?
☐ Have responsibilities been assigned in the plan to specific personnel? Are these persons aware of their responsibilities?
☐ Are there plans to evacuate personnel from each work area in the event of emergencies?
☐ Are evacuation routes and warning signals information posted in each work area?
☐ Are evacuation routes and exits marked?
☐ Can egress routes from work areas be followed by personnel in the dark or in smoke?
☐ Are emergency plans procedures posted in prominent areas?
☐ Have personnel received training in emergency procedures?
☐ Are there drills or simulated emergencies being conducted periodically for personnel?
☐ Is there a procedure to insure that all personnel have been alerted to the emergency, and those who will not combat it have been evacuated?
☐ Are there procedures to preclude obstructions to personnel or equipment in critical evacuation or emergency equipment access routes or areas?
☐ Are emergency telephone numbers posted for the fire department, ambulance, hospital emergency room, law enforcement and others?

MANURE STORAGE AREAS

☐ Are all employees trained on what to do before entering a manure pit?
☐ Is there a method available to determine if there is adequate oxygen in a manure pit, or there is a dangerous level of hydrogen sulfide or methane in the pit?
☐ Are employees provided with appropriate self contained breathing apparatus before entering a manure pit?

POWER WASHER

☐ Are electrical power washers equipped with a Ground-Fault Circuit Interrupter?
☐ Are stationary fuel-fired power washers vented to the outside atmosphere in an approved manner, in accordance with the manufacturer’s recommendations?
☐ Are portable fuel-fired power washers only used in adequately ventilated areas?
☐ Is there a maintenance program for the power washer?
Are employees reminded about the potential for serious injury or electrical accidents when using power washers?

Are employees warned because of the extreme temperatures and intensive pressure that wands should never be pointed at people or livestock?

Are workers instructed to avoid spraying around electrical outlets and equipment?

EXTREME TEMPERATURES

Can employees recognize the signs and symptoms of heat and cold related illnesses?

Are plans developed to treat employees for heat or cold related illnesses?

Are emergency numbers posted by telephones and in major work areas?

Are workers encouraged to dress in layers?

Are employees encouraged to not wear shorts in the workplace?

Are adequate breaks provided for employees, depending on weather conditions?

LIVESTOCK HANDLING

Are employees trained in the proper handling of livestock to prevent injury?

Are employees trained to respect livestock rather than fear them?

Are employees encouraged to move around livestock calmly and deliberately, and to avoid quick actions or loud noises?

Are workers instructed not to shove, poke or bump livestock?

Are workers encouraged to keep an appropriate distance between themselves and the livestock?

Are workers trained in the use of panels and cutting boards to move livestock?

Are workers instructed to always keep an escape route open while working with livestock?

Do you have adequate mechanical devices for the removal of large dead animals to prevent worker back injuries?

Are workers encouraged to be careful around livestock during mating cycles?

Are workers informed to restrain livestock before treating injuries or illnesses?

Are workers trained in the proper method to immunize livestock to prevent needle sticks?
Appendix D – Safety And Health Audio Visuals

FARM/AGRI-BUSINESS SAFETY

#119  Farm Safety Means Farm Safely (20 min) – Features segments with actual farmers, emergency personnel and experts talking with their experiences and safety lessons learned.

#120  Agricultural Equipment Operator Safety Series – 7 short segments on one DVD designed as a training resource for farm machinery operator safety. Suggested audience: youth engaged in agricultural machinery operations and other farm questions.

1. Starting & Stopping Tractors (8:09 min)
2. Tractor Safety on the Farm (8:49 min)
3. Tractor Hitches, PTO’s & Hydraulics (10:25 min)
4. Tractor Safety on the Road (8:43 min)
5. Why Farm Machinery Accidents Occur (9:50 min)
6. Farm Machinery Accident Situations (8:22 min)
7. Farmstead Safety (9:39 min)

#207  A Tractor Accident Can Happen to Anyone (8 min) – This DVD stresses the importance of installing Rollover Protective Structures (ROPS), as well as wearing seat-belts and exercising caution when operating a tractor.

#209  Dispensing Propane Safely – Dispensing Propane Safely is an employee training program funded by the Propane Education & Research Council that details the many tasks associated with the safe and effective dispensing of propane into several types of propane cylinders and tanks, including those found at retail locations, bulk plant and forklift operations. Propane autogas dispensing operations, as well as emerging propane technologies such as refillable one pound propane cylinders are also highlighted.

#210  Anhydrous Ammonia (33 min) – Anhydrous Ammonia DVD is a safety training video about the hazards of Anhydrous Ammonia and safe responses to incidents involving this dangerous gas.

#240  NH3 Farmer Safety (12 min) – The DVD focuses on elements that farmers need to remember when they are working with ammonia and ammonia equipment. We chose to concentrate on practices that will lessen the chances of an accident or ammonia release while in transport or during application in the field.

#244  Reducing Grain Bin Entry Risks (22 min) – Entering grain bins is a common occurrence at grain elevators and farms. While there are many dangers to grain bin entry, it can be accomplished safely. This video produced by the Grain Handling Safety Coalition will walk the viewer through the steps necessary to reduce the risks of entering a grain bin. Topics covered include: identifying risks and hazards, reducing the spoilage and proper grain storage techniques, safety standards, how to enter a bin safely, alternatives of bin entry, and best practices for overall grain handling safety.

DRIVING SAFETY

#129  Rules of the Road (105 min) – Get Street Smart! Rules of the Road introduces teens to safe, smart and skillful driving. Know what to do in case of auto accident with the “In Case of Emergency” bonus features. Interactive quizzes and tests. Topics cover driving basics, city and residential driving, highway driving, the driver’s exam, safety tips, tips for hazardous conditions, drug and alcohol awareness.

#204  Driving Distractions “Are You Playing With a Full Deck” (27 min) – Eating, drinking, operating a cell phone, PDA or navigation devices. These are all potentially dangerous activities. The explosion of vehicle electronics and “eat while you drive” fast food now makes concentrating on your driving more difficult than ever. Every driver needs to be prepared for the things that may happen when our driving focus becomes blurred by our new technology or other distractions. Driving Distraction Are you Playing with a Full Deck makes your drivers more aware of driving distractions.

#206  Young Drivers The High Risk Years (16 min) – This video listens to 16 year-olds tell why they want their driver’s licenses and what driving means to them. Parents of teenagers who died in crashes tell how they tragedies happened and how their families have been affected. The DVD includes summaries of state laws on learner’s periods, night driving restrictions, and passenger restrictions.

#208  Defensive Driving 15 Passenger Vans (11 min) – This valuable program will provide your drivers with important safety tips to help them operate the large vans safely, protect the passengers and avoid possible accidents. The DVD covers loading and handling, common causes of rollovers, safety guidelines, and buckling up.
Distracted Driving (18 min) – Distracted Driving provides the information employees need to drive cars, vans and small trucks safely, both on and off the job. Topics covered are: the cost of distracted driving, “multi-tasking”, technology and distraction, eliminating distractions before you drive, cell phones, and fighting distraction on the road.

Driving Defensively (18 min) – Whether they are speeding, tailgating, or just not paying attention to what they’re doing, other drivers can put you at risk. Driving Defensively provides the information employees need to drive cars, vans and small trucks defensively, both on and off the job. The DVD cover a range of topics: the fundamentals of driving defensively, dealing with distracted drivers, coping with aggressive drivers, using your headlights, driving safely in bad weather, handling a blowout, and sharing the road with trucks and buses.

Driving Safety (20 min) – Driving Safety provides the information employees need to drive cars, vans, and small trucks safely, both on and off the job. It covers inspecting the vehicle (adjusting seats, mirrors, and other equipment), mental preparation and concentration, passing another vehicle, sharing the road with trucks and buses, school bus encounters, driving at night, adverse weather conditions, skidding, and hydroplaning, distracted driving, road rage, and what to do in case of an accident.

Drive Safe, Save Lives (15 min) – The DVD has 3 short clips:
1. Stay Focused: Don’t Drive Distracted
2. Dangers of Impaired Driving and Speeding
3. Stay Safe with Seat Belts and Safety Seats

Safe Lifting (17 min) – Our latest release on the topic Safe Lifting emphasizes to your employees the importance of overall back care, both at work and at home. It also provides them with other information on how to protect their back from injury including exercises and weight control. Topics included are: how the back works, common types and causes of back injuries, effects of back injuries, injury prevention and safety practices, and proper lifting techniques.

Electrical Safety for Qualified Workers (13 min) – This program explains the safety precautions qualified electrical workers must always take to avoid needless tragedies while performing any type of electrical work. The DVD includes definition of a qualified worker, approach boundaries, the shock hazard of electricity, voltage-rated gloves and PPE, the arc flash boundary, creating and verifying an electrically safe work condition, and exceptions when energized work is allowed.

Electrical Safety for Everyone (11 min) – This video provides viewers with a general understanding of how electricity works while showing them the actions they can take to prevent becoming a part of an energized electrical conduit. Topics include: why electricity is dangerous, resistance and Ohm’s law, two electrical safety concepts, avoiding electrical contact and grounding, safe work practices, use of double-insulated tools and GFCIs, and response to a shock event.

Winter Walking Staying on Your Feet (10 min) – Winter walking is a seasonal safety issue which is usually limited to several months. But during those several months thousands of serious injuries happen. This informative video helps the viewer understand the need to adjust our walking behavior and techniques when the snow begins to fall. The DVD covers why we need to adjust our walking techniques in winter, winter hazards to be alert for, walking techniques for winter conditions, procedures for winter conditions, procedures for staying on your feet, and techniques to minimize the effects of a fall.

Common Sense Construction Safety (26 min) – This is the video you need to prevent accidents and save you money, time and energy. The DVD covers what is OSHA, fall protection, electrical, ladders, scaffolds, mobile equipment, personal protective equipment, housekeeping, and additional OSHA standards.

To the Point About: Lock-Out/Tag-Out (13 min) English & Spanish combo – This program trains your employees in the proper methods to control hazardous energy to prevent injuries and save lives. The DVD quickly gets to the point about the important topic of Lock-Out/Tag-Out and explains OSHA’s required training points to your employees. Covered in the DVD are energy control program, why LOTO is required, affected employees, authorized employees, other workers, and Lock-Out/Tag-Out devices.

To the Point About: Confined Space Entry (12 min) English & Spanish Combo – Controlling access to confined spaces and the hazards they contain can prevent injuries and save lives. The DVD includes topics such as: the confined space entry permit, atmospheric hazards, atmospheric testing and monitoring, other confined space hazards and how they are controlled, and the duties of the entry supervisor, the attendant and the entrant.
#217 Hazard Communication in Construction Environments (18 min) – This video introduces employees to the Hazard Communication regulations and provides training on the various groups of chemicals found in the construction environment. It covers many topics: background of the regulation; GHS Safety Data Sheets and container labels, toxics, corrosives and irritants; flammables, combustibles and gases; exposure situations; personal protective equipment; and chemical storage, spills and clean-up.

#218 Construction Fall Protection: We All Win (20 min) – This program covers the information that construction workers need to protect themselves from falls. The video is a 5-part modular video presentation that can be used to educate both new and experienced workers. The modules cover introduction to fall protection, fall prevention systems, personal fall arrest systems, using personal fall arrest systems, and rescue.

#219 Hand and Power Tool Safety-Basic Training (21 min) English & Spanish version – This Basic Training program reviews various types of hand and power tools and how to handle them in a safe manner. It trains your employees to understand that tools are extremely useful but they can also be dangerous if not used correctly. Included in the DVD are why safeguards should never be bypassed, the importance of manufacturer’s safety instructions, and the employee’s responsibility to use tools safely.

#220 Fall Protection (12 min) – Fall Protection provides the information employees need to work safely when they are “off the ground”, and assist in satisfying the major training requirements in the OSHA Standard on Fall Protection. Covers: the seriousness of fall hazards, types of environments where fall may occur, the “Fall Protection Plan”, concentrating and keeping a clear head, the importance of housekeeping in preventing falls, measure that can be taken to protect against falls, and protective equipment.

#221 Ladder Safety (13 min) – Many employees take ladders for granted, and don’t take the appropriate precautions when using ladders. The DVD covers ladder selection, inspection before use, setting up and moving ladders, climbing on ladders, and ladder accidents.

#222 Ladder Safety in Construction Environments (13 min) – Many employees take ladders for granted, and don’t take the appropriate precautions when using ladders. The DVD covers ladder selection, inspection before use, setting up and moving ladders, climbing on ladders, and ladder accidents.

#223 Supported Scaffolding (20 min) – Helps employees understand the dangers of working with scaffolds, and how these risks can be minimized by knowing the correct ways to erect, maintain and use scaffolding equipment. Topics included in this dvd are: responsibilities of a “scaffold expert”, creating a level and stable foundation, platforms and planking, the danger of power lines, ramps and walkways, platform hazards, personal fall arrest systems, and guarding against falling objects.

#224 Supporting Scaffolding in Construction Environments (20 min) – Helps employees understand the dangers of working with scaffolds, and how these risks can be minimized by knowing the correct ways to erect, maintain and use scaffolding equipment. Topics included in this dvd are: responsibilities of a “scaffold expert”, creating a level and stable foundation, platforms and planking, the danger of power lines, ramps and walkways, platform hazards, personal fall arrest systems, and guarding against falling objects.

#225 Slips Trips and Falls (17 min) – Shows employees the situations that can lead to slips, trips and falls, and what they can do to avoid or prevent these accidents. It covers why slips, trips, and falls occur, common causes of accidents, potential health effects of resulting injuries, techniques used to avoid injury, the importance of safety shoes, and how to fall safely.

#226 Slips Trips and Falls in Construction Environments (17 min) – Shows employees the types of situations on construction sites that can lead to slips, trips and falls, and what they can do to avoid or prevent these accidents. Topics covered are: center of gravity and balance, trips and slips, walking surfaces, housekeeping and maintenance, footwear, how to fall properly, and personal protective equipment.

#227 Safe Lifting in Construction Environments (17 min) – Safe Lifting in Construction Environments provides the information employees need to protect their backs when they are lifting and carrying. Included are the back’s structure and function, preparing for a lift, the mechanics of safe lifting, and planning a “carry”.

#228 Personal Protective Equipment in Construction Environments (17 min) – Created to assist construction workers in selecting proper Personal Protective Equipment. Topics include general workplace injury information, PPE for head hazards, PPE for eye and face hazards, PPE for respiratory hazards, PPE for hand and finger hazards, PPE for foot hazards, and PPE for electrical hazards.

**GENERAL SAFETY**

#229 Garage and Repair Shop Safety (12min) – A garage or repair shop has virtually every hazard you can imagine due to the wide variety of work that is performed there. This comprehensive program trains your employees about what hazards may exist and what they must each day to prevent injury. The topics covered include PPE, electrical safety, chemical safety, and back injury prevention.
#214 Injury Prevention in Restaurants and Food Service (16 min) – This video examines some of the more common hazards in Food Service and discusses choices workers can make to protect themselves and co-workers. Strains, sprains, bruises and fractures; cuts, lacerations and punctures; burns and scalds; and safety tips for kitchen staff, servers, bus people, bar staff, and dishwashers are all included as topics.

#215 Convenience Store Safety (10 min) – This training program is designed to train employees on the proper actions they must take to prevent robberies, as well as how to act during and after a robbery or robbery attempt. It also discusses other important training points for employees to be aware of such as proper housekeeping and safe lifting procedures.

#216 Office Safety (19 min) – This program on Office Safety trains employees what hazards exist in office environments, and how important it is to use good safety practices as they go about their work. Topics covered include: avoiding falls, putting yourself at risk, setting up your workstation, preventing computer eyestrain, using powered equipment, handling office supplies, and fire safety.

#220 Accident Investigation (13 min) – The Accident Investigation training video provides employees with the information they need to understand the goals of an accident investigation, the process itself, and how they can participate in the process to help make their workplace safer. It covers accidents and near misses, investigations and root cause analysis, the role of tools and equipment in accidents, the importance of training, the role procedures play in preventing accidents, and learning from accidents.

#221 Compressed Gas Cylinders (12 min) – Compressed Gas Cylinder training video provides the information employees need to handle and transport these potentially volatile storage containers. Included on the DVD are associated hazards, moving and transporting cylinders safely, positioning cylinders properly, proper “hook-up” procedures, safe storage practices, and storage “incompatibilities.”

#222 Safety Audits (15 min) – Provides employees with an understanding of the goals and procedures that are involved in a safety audit, show them how they can help in in the audit processes and describe specific safe work practices. Includes performing a “workplace analysis”, “systems of control”, evaluating your work area, performing a “personal” safety audit, and dealing with accidents.

#226 Electrocution Hazards Part 11...Employer Requirements (15 min) – Discusses the major types of electrocution hazards, and how employees can protect themselves from electrical hazards and electrocution in construction environments, as well as employer’s responsibilities in these areas. Covers electrical hazards and electrocution, power lines and isolation, tools and equipment, assured equipment grounding conductor programs, lock-out/tag-out/ and employee training.

#227 Electrocution Hazards Part 1...Types of Hazards and How You Can Protect Yourself (22 min) – Discusses the major types of electrocution hazards and how employees can protect themselves from electrical hazards and electrocution in construction environments. Included are: electrical hazards and electrocution, major types of electrocution hazards, power lines and GFCIs, power tools and extension cords, and lock-out/tag-out.

#228 Welding Safety (14 min) – Reminds employees that there are indeed a number of hazards associated with welding and provides the information they need to work safely when involved with welding operations. Topics included are: getting “authorization” for welding operations, sparking and the risk of fire, guards and protective barriers, hazardous fumes and ventilation, the use of respirators and other personal protective equipment, eye protection (welding helmets, filters, glasses and goggles), inspecting welding equipment, and proper welding safety procedures.

#229 DOT Hazmat Safety Training (18 min) – DOT Hazmat Safety Training focuses on employees who handle hazardous materials. The DVD makes employees aware of the hazards associated with the materials and shows them how to work with the materials safely. Covers hazardous materials labels, shipping papers and the safety data sheet, packaging and loading HAZMATS, shipping and receiving HAZMATS, emergency response information, the emergency response guidebook, emergency actions, and first aid procedures.

#231 Forklift/Powered Industrial Truck Safety (28 min) – This DVD was specifically created to assist facilities in complying with OSHA’s Powered Industrial Truck Standard. Included topics are: OSHA’s certification process, the seven classes of industrial trucks, equipment checkout and maintenance, a forklift’s stability triangle, safe operating procedures, lifting and lowering loads, and trucks and loading docks.

#242 U.S. Chemical Safety Board Safety – Informs the industry, workers, and the public about the causes of chemical accidents and recommended practices to prevent them. Contains 3 separate discs.

#243 Hazard Communication and the Global Harmonizing System (22 min) – As mandated by OSHA chemical safety data must be conveyed through the use of the standard communication elements found in the Global Harmonized System for the Labeling and Classification of Chemicals. This dvd explains each of these communication elements in detail so your employees will understand how chemical hazards are communicated and how to use this information to ensure their safety when storing, handing, and using hazardous substances.
#245  Reducing the Risk (70 min) – Created by noted legal expert Richard Hammer, Reducing the Risk is a turn-key training program featuring an interactive DVD. Within a few hours, your ministry workers learn how to screen and select workers, implement solid supervision policies, and respond to allegations, keeping your church safe for children of all ages.

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www.public-health.uiowa.edu/ICASH/index.html

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Toledo, Ohio 43604
(419) 259-7542
SOUTH DAKOTA
RESOURCES FOR SAFETY AND HEALTH INFORMATION

South Dakota Safety Council
1108 NW Avenue
Sioux Falls, SD 57104
605-361-7785 or 1-800-952-5539
www.southdakotasafetycouncil.org

South Dakota Division of Labor & Management
Kneip Building
700 Governors Drive
Pierre, SD 57501-2291
(605) 773-3681

South Dakota State University
Engineering Extension
James Manning, Department Head
West Hull 118, Box 510
907 Harvey Dunn St.
Brookings, SD 57007
(605) 688-4101
(Provides free OSHA safety & health consultation)

National Farm Medicine Center
1000 N. Oak Ave.
Marshfield, WI 54449
(715) 389-4999
http://www.marshfieldresearch.org/nfmc

National Pork Producers Council
10664 Justin Dr.
Urbandale, IA 50322
(515) 278-8012
www.nppc.org

National Safety Council
1121 Spring Lake Drive
Itasca, IL 60143-3201
(630) 285-1121
(800) 621-7619
www.nsc.org

OSHA
www.osha.gov

Regional Office
1999 Broadway, Suite 1690
PO Box 46550
Denver, CO 80201-6550
(720) 264-6550

NO Area office in South Dakota
Contact Regional Office
WISCONSIN
RESOURCES FOR SAFETY AND HEALTH INFORMATION

University of Wisconsin
Center for Agricultural Safety & Health
Dept. of Biological Systems Engineering
Cheryl Sdjolaas
Sr. Outreach Specialist
460 Henry Mall
Madison, WI 53706
(608) 262-6330
www.wiscash.uwex.edu

Wisconsin Council of Safety
501 E. Washington Avenue
Madison, WI 53703-2944
(608) 258-3400
(800) 236-3400
www.wmc.org

Wisconsin OSHA Consultation Program (Health)
University of WI State Laboratory of Hygiene
Environmental Health Division
2601 Agricultural Drive
Madison, WI 53707
(608) 226-5240
(Provides free OSHA safety & health consultation)
www.slh.wisc.edu

Wisconsin Department of Commerce (Safety)
Division of Marketing, Advocacy & Tech Development
144 NW Barstow Street
Waukesha, WI 53188
(262) 512-5198 or (800) 947-0553
(Provides free OSHA safety & health consultation)
www.commerce.state.wi.us

Extension Safety Specialist
Cheryl Skjolaas
University of Wisconsin
460 Henry Mall
Madison, WI 53706
(608) 265-0568

Wisconsin Department of Health Services
Farm Worker Health and Safety
https://www.dhs.wisconsin.gov/occupational-health/farm-health.htm

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www.nsc.org

OSHA
www.osha.gov

Regional Office
City Center Square
1100 Main Street, Suite 800
Kansas City, Missouri 64105
(816) 426-5861

State Offices
Appleton Area Office
1648 Tri Park Way
Appleton, WI 54914
(920) 734-4521

Eau Claire Area Office
1310 W. Clairemont Avenue
Eau Claire, WI 54701
(715) 832-9019

Madison Area Office
4802 E. Broadway
Madison, WI 53716
(608) 441-5388

Milwaukee Area Office
Henry S. Reuss Building, Suite 1180
310 West Wisconsin Avenue
Milwaukee, WI 53203
(414) 297-3315

National Farm Medicine Center
1000 N. Oak Ave.
Marshfield, WI 54449
(715) 389-4999
http://www.marshfieldresearch.org/nfmc