COUNTY OF ALAMEDA
County Administrator’s Office

INJURY and ILLNESS
PREVENTION PROGRAM
The Department Safety Coordinator is responsible for ensuring that all provisions of the IIPP are implemented; Coordinates employee training, accident investigation, and safety inspections. Schedules and monitors the correction of identified problems.

The Assistant County Administrator is responsible for addressing major safety issues and approving expenditures for their correction; assuring the timely abatement of hazards; and ensuring participation of all employees in the program.
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This document establishes the written Injury and Illness Prevention Program (IIPP) for the Alameda County-County Administrator’s Office as required by the California State Senate Bill 198 (SB198) and the California Code of Regulations, Title 8, Chapter 4, Section 3203 of the General Industry Safety Orders.

Effective July 1, 1991, every employer shall establish, implement and maintain an effective Injury and Illness Prevention Program (Program). The Program shall be in writing and, shall, at a minimum;

(1) Identify the person or persons with authority and responsibility for implementing the Program.

(2) Include a system for ensuring that employees comply with safe and healthy work practices.

(3) Include a system for communicating with employees in a form readily understandable by all affected employees on matters relating to occupational safety and health, including provisions designed to encourage employees to inform the employer of hazards at the worksite without fear of reprisal.

(4) Include procedures for identifying and evaluating workplace hazards including scheduled periodic inspections to identify unsafe conditions and work practices.

(5) Include a procedure to investigate occupational injuries or occupational illness.

(6) Include methods and/or procedures for correcting unsafe or unhealthy conditions, work practices and work procedures in a timely manner based on the severity of the hazard:

(7) Provide training and instruction
OBJECTIVES

1. To reinforce that accident prevention is an individual responsibility for all employees at every level, equal to any other work responsibility.

2. To educate and develop awareness of safety.

3. To prevent injuries, illnesses, and accidents in the workplace.

4. To ensure the safety and health of the Department’s employees and provide a safe and healthy work environment.
ASSIGNMENT OF RESPONSIBILITY

Safety is a management function for which all managers and supervisors in the County Administrator’s Office share responsibility.

Overall responsibility for safety throughout the Department rests with the County Administrator and the Assistant County Administrator, who establish the Department’s goals, requirements, and expectations for safety.

Primary responsibility for safety, on the operating level, is assigned to Principal Administrative Analysts who are expected to maintain their facilities and operations in compliance with Cal/OSHA and other applicable safety and health regulations. Other supervisors are responsible, in turn, for the safety of their own operations and staff are expected to assist their Principal Administrative Analyst in maintaining safe working conditions and practices throughout the department.

The services of the County Safety Program Manager, the Department Safety Coordinator, and the Assistant County Administrator, are available to assist managers and supervisors in the discharge of their responsibility for accident prevention.

Written safety rules and procedures will be developed as the need for them is identified. Employees are required to observe safety rules and procedures that apply to their job assignments. Employees who fail to do so are subject to County disciplinary procedures. Safety is an important measure of performance and will be considered in evaluating the effectiveness of management and non-management employees.

The following specific responsibilities are assigned to the County Administrator, Assistant County Administrator, Principal Administrative Analysts, and the Department Safety Coordinator.

**County Administrator**

- Adopt the Department’s safety program and require its implementation by each unit.
- Approve major program modifications.
- Include safety on the agenda of the Leadership meetings.
ASSIGNMENT OF RESPONSIBILITY

Assistant County Administrator

- Appoint the Safety Coordinator.
- Hold monthly meetings with the Safety Coordinator to review the status of the safety program and assist in the resolution of problems.
- Monitor the safety program and, when necessary, intervene to effect improvements.

Principal Administrative Analysts

- Assure that all activities and operations within the unit are conducted safely and in compliance with State safety regulations and Department policy.
- Review safety issues with management staff.
- Maintain an employee safety-training program.
- Maintain a program of scheduled safety inspections and coordinate the implementation of corrective measures.
- Provide at least one member for the safety committee.
- Establish and maintain a unit evacuation plan.
- Maintain the unit’s safety records.

Department Safety Coordinator

- Serves as Chairperson and member of the Department’s Safety Committee.
- Coordinates the Department’s safety inspection program.
- Serves as the Department’s primary contact with the Risk Management Unit on all matters relating to safety, including, but not limited to, industrial hygiene, and ventilation.
- Coordinates the evaluation of public liability and employee safety and health problems.
- Schedules and monitors the correction of identified safety problems.
- Establishes and maintains the Department’s safety record system.
Meets each month with the Assistant County Administrator to:

- Review the status of the safety program.
- Review accidents involving employees or members of the general public.
- Resolve corrective action problems.
- Plan for future budgetary issues.
- In cooperation with Principal Administrative Analysts, and the Assistant County Administrator, develop safety policies and procedures.
- Attends Leadership meetings twice a year to report on program status and discuss the resolution of safety problems.

Maintains records of:
- Safety problems and corrective action taken.
- Evacuation drills.
- Fire department inspection reports.
- Building safety inspection reports.
- OSHA 300 log.
- Safety training classes for employees.
Safety Committee

The Principal Administrative Analysts appoints committee members with selections made from management and non-management personnel. The Committee may range in size from 6 or more members. Union participation in Safety Committee is encouraged.

The Safety Committee should meet at least quarterly. The principal duties of the committee are:

1. To recommend safety programs and activities.
2. To review accidents (employee injury, property damage, and incidents involving the public) and recommend corrective action.
3. To review employee safety suggestions and complaints.
4. To identify training needs and resources.
5. To examine safety problems and suggest corrective measures.
6. To conduct building inspections.
7. To serve as a communications link between management and staff.
8. Review reports of hazardous conditions and, at the committee's discretion, conduct its own investigations.
9. When requested by Cal/OSHA, verify action taken by the Department to abate citations issued by Cal/OSHA.
10. To perform other related functions as considered appropriate by committee members and office management.
Safety Training

The Department will provide its employees with training in general safe work practices and specific instructions on hazards unique to the employee's job assignment, as required by Cal/OSHA standards.

1. During new employee orientation, employees will be instructed in:
   a) Back Injury Prevention
   b) Office Ergonomics safety procedures
   c) General safe work practices and office safety
   d) Workplace Violence Prevention

2. Refresher training courses in all of these topics will be presented on a schedule recommended by the Safety Committee and approved by the Assistant County Administrator.

3. Employees will also be given appropriate safety training whenever:
   a) They are given a new job assignment with the potential for new or additional safety hazards.
   b) New hazardous substances, procedures, or equipment are introduced.
   c) Management learns of a new or previously unrecognized hazard.

4. Safety training will be provided for supervisors as needed to assure their understanding of operating procedures, equipment, and the health and safety hazards to which their employees are exposed.

Units are required to maintain an individual written record of the training provided to each employee. Records will be retained for 5 years and will identify:

- Types of training
- Training dates
- Training provider
**Safety Inspections**

1. Department locations will be inspected at least once a year.

   The Department Safety Coordinator inspects each facility at least once a year. The inspections may include the Committee and the County Safety Program Manager.

   The Department Safety Coordinator and the Principal Administrative Analysts retains copies of the inspection reports.

   Within 30 days thereafter, the Principal Administrative Analyst is required to provide the Department Safety Coordinator with a status report confirming that corrective action has been taken, scheduled, or indicating why it is not needed.

2. Hazards discovered during an inspection or which otherwise come to the attention of management will be corrected in a timely manner consistent with the severity of the problem. The correction of urgent items shall be expedited. Interim procedures for safeguarding employees will be adopted where imminent hazards exist that cannot be corrected immediately.

Principal Administrative Analysts and the Department Safety Coordinator will retain safety inspection reports, including a record of corrective action, for five years.

**Employee Reports of Unsafe Conditions & Practices**

Employees are encouraged to report unsafe conditions and practices and to contribute solutions for safety problems they identify.

Problems may be reported to the first-line supervisor, the Department Safety Coordinator, or the Safety Committee.

Employees are directed to report emergency situations immediately to their supervisor, the Department Safety Coordinator, or other available management representatives.

Safety problems for which employees have identified a solution may also be submitted to the County Safety Suggestion Program. Cash awards for suggestions of merit are available through this program. (See page 11 for complete information.)

Any member of the staff may also report suggestions, complaints, and reports of unsafe conditions or practices anonymously. These reports may be submitted, unsigned, to the Safety Committee, the Safety Coordinator, any Principal Administrative Analyst, the Assistant County Administrator, or the County Safety Program Manager.

Employees may also telephone the County Safety Program Manager to report suspected safety hazards with the assurance that their identity will remain confidential.
Record Keeping

1. The County Risk Management Office prepares the Cal/OSHA Log of Occupational Injuries and Illnesses (300 Log) for the County Administrator’s Office. The Logs are forwarded to the Safety Coordinator monthly. Final versions are sent to the Safety Coordinator annually.

   ♦ Logs must be retained by the Department for five years and, when requested, shown to Cal/OSHA compliance officers, employees, former employees, and employee representatives.

   ♦ Primary responsibility for maintaining the Department’s file of Cal/OSHA Logs is assigned to the Department Safety Coordinator. The Department Safety Coordinator sends copies of the 300 Log to all Principal Administrative Analysts for the locations they manage where they must also be retained for five years.

      Every year, the Summary CAL/OSHA Form 300 will be posted where employees can see it. This will be done no later than February 1 and will remain posted until April 1.

2. The Department Safety Coordinator and the Principal Administrative Analysts retain safety inspection reports and accident investigation reports, including a record of corrective action taken, for five years.

3. The Department Safety Coordinator keeps industrial hygiene air and bulk sample analysis reports. These reports must be kept for thirty years and made available to employees, former employees, and employee representatives upon request.

4. The Department Safety Coordinator retains copies of Safety Committee minutes for five years.

5. Individual employee training records are maintained for five years.
Accident Investigation

Employee On-the-Job Injuries

Supervisors are required to investigate and complete the Supervisor's Investigation of Employee Injury form (page 13) for every occupational injury or illness, including, "near miss accidents" in which serious injury was only narrowly avoided.

Investigations must be completed within 48 hours after notification of the injury has been received. The Supervisor's Investigation of Employee Injury form should be used to record the information obtained, identify the unsafe acts and unsafe conditions that caused or contributed to the accident/injury, and recommendations for corrective action.

The Department Principal Administrative Analyst will review, evaluate, implement, monitor corrective action, and consult with the Department Safety Coordinator as needed.

Hazard Evaluation

The following sources of information were used, and will continue to be used, to evaluate potential safety and health hazards. This will help determine the content of the Department’s Injury and Illness Prevention Program.

1. Material Safety Data Sheets for hazardous substances used by Department staff.
2. The identification of hazards related to specific occupations or functions; e.g., hostile clientele, heavy lifting, driving, stress, etc.
3. Periodic and scheduled inspections of work areas.
4. Investigation of accidents, injuries, occupational illnesses, and unusual incidents affecting safety.
5. Analysis of injury trends, frequency, and severity by occupational groups.
6. Evaluation of information, complaints, and suggestions provided by employees.
7. Review of specific hazards identified by an outside consultant.

All management employees are responsible for identifying workplace hazards and unsafe activities in their areas and for having hazard evaluations conducted.
SAFETY SUGGESTION PROGRAM RULES AND PARTICIPATION

THE AWARDS: Your work safety suggestion may win a cash award of $10 to $100. Awards are made each month for the suggestions submitted during the previous month or as soon as possible.

At the end of each year, all suggestions submitted that year will be considered for supplementary cash awards. The most valuable safety suggestions of the year may be eligible for additional amounts.

HOW YOU CAN PARTICIPATE: Complete, as fully as possible, the form describing your suggestion. Make a copy. Feel free to attach additional information, drawings, or blueprints which might more completely explain your suggestion. If you suggest a new device, a sample of the device would be helpful to the review board. If you want help to complete the suggestion form, you should contact your Agency/Department Safety Coordinator or the County Safety Program Manager (telephone 510.271.5183). You will be notified by the County Safety Program Manager of decisions made about your suggestion.

Send the form to the County Safety Program Manager. Keep a copy for your records. Each suggestion that is submitted becomes the property of the County of Alameda and may be put into use immediately.

HOW AWARDS ARE DETERMINED: A safety suggestion review board examines the suggestions submitted each month. The review board decides which suggestions are of value to the County and what awards should be granted for them. The review board may include the County Safety Program Manager and may include a representative of County safety management.

WHO IS ELIGIBLE FOR AWARDS: All present Alameda County employees EXCEPT:

1. County Safety Program Manager.
5. Second Line and Higher Supervisory Personnel.
NOTE: Be sure to read the Safety Suggestion Program Rules on Page 11 before completing this form.

County of Alameda  
Safety Suggestion Form

To Be Completed and Sent to:

COUNTY SAFETY PROGRAM MANAGER  
Risk Management  
125 12th Street, Suite 300, Oakland, California 94607  
QIC: 28505

Note: If help is needed to complete this form, contact your Agency/Department Safety Coordinator or the County Safety Program Manager (Extension 25183).

DATE

NAME

JOB TITLE

COUNTY DEPARTMENT and DIVISION

TELEPHONE EXT. and QIC CODE

I suggest that __________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

I believe my suggestion will help _________________________________________

_____________________________________________________________________

SEND THIS FORM TO THE SAFETY PROGRAM MANAGER
COUNTY OF ALAMEDA  
SUPERVISOR’S INVESTIGATION OF EMPLOYEE INJURY

<table>
<thead>
<tr>
<th>Employee Name:</th>
<th>Date/Time of Injury:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Job Title:</td>
<td>Phone Number:</td>
</tr>
<tr>
<td>Witnesses:</td>
<td>Date Reported:</td>
</tr>
<tr>
<td>Nature of Injury:</td>
<td>Department:</td>
</tr>
<tr>
<td>Was medical treatment required?</td>
<td>Yes ☐ No ☐</td>
</tr>
<tr>
<td>QIC:</td>
<td></td>
</tr>
<tr>
<td>Name/Location of Physician:</td>
<td></td>
</tr>
<tr>
<td>Did the employee return to work?</td>
<td>Yes ☐ No ☐</td>
</tr>
<tr>
<td>Date last worked?</td>
<td></td>
</tr>
</tbody>
</table>

1. What job was employee doing when injury occurred? ________________________________
2. Where did injury occur? ______________________________________________________________________
3. Describe accident and nature of injury: _______________________________________________________
   _______________________________________________________________________________________

4. What act(s) or condition(s) may have contributed to the accident?
   - Act of another
   - Congested work area
   - Cumulative/repetitive activity
   - Equipment failure
   - Excessive or improper lifting
   - Improper use of equipment
   - Inattention
   - Other:
   - Override of safety device
   - Safety procedure not followed
   - Unauthorized activity
   - Unsafe driving
   - Unsafe clothing or footwear
   - Unsafe floor or stair condition
   - Work environment/workstation

5. What can be done to prevent a reoccurrence or similar accident?
   Who will do it? __________________________
   Timetable? _____________________________
   What assistance do you need for the corrective measure? __________________
   Is a safety inspection needed to determine corrective measure? If so, by whom? __________________
   Is money needed to correct the condition? (approx. amount) __________________
   Is training needed? (type) __________________

Supervisor __________________________ Phone No. __________ Date __________

Action taken to correct condition:

If no action taken, why not:
Agency/Dept. Safety Coordinator __________________________ Date __________

Distribution: County Safety Program Manager, Agency/Dept. Safety Coordinator, Employee, WC TPA

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