

Sponsor(s) : County Council  
Adopted : September 6, 2022  
Committee Referral : N/A  
Committee Consideration Date : N/A  
Committee Recommendation : N/A

**RESOLUTION NO. 22-R-44**

**COUNCIL-ADMINISTRATOR FORM OF GOVERNMENT FOR COLLETON COUNTY**

**[A Resolution to Approve and Authorize Implementation of the Amended Colleton County Safety Policy Manual.]**

**WHEREAS:**

1. Colleton County is committed to providing a safe work environment for all of its employees; and
2. A successful safety and accident prevention program depends upon the support and participation of employees at all levels - elected, hired, and volunteer; and
3. The implementation of a pro-active safety program benefits the County by ensuring a healthy work environment; potentially decreasing Worker's Compensation premiums, which are tied to experience modifiers; lowering costs associated with lost time accidents; and assuring compliance with OSHA and other workplace safety and health legislation; and
4. Staff amended the policy to include updated regulations and County policies, as well as to correct scrivener's errors in the original version; and
5. Staff recommends that Council approve and authorize implementation of the provisions of the amended Colleton County Safety Policy Manual.

**NOW THEREFORE BE IT RESOLVED BY THE COLLETON COUNTY COUNCIL DULY ASSEMBLED THAT:**

County Council hereby approves and authorizes implementation of the amended Colleton County Safety Policy Manual (included herein and by reference).

ATTEST:

SIGNED:

  
Kaela Brinson, Council Clerk

  
Steven D. Murdaugh, Chairman

COUNCIL VOTE: UNANIMOUS  
OPPOSED:

**COLLETON COUNTY**

**SAFETY POLICY**

**MANUAL**

**(Approved September 6, 2022)**

**COLLETON COUNTY**

**SAFETY POLICY**

**MANUAL**

(INSERT DATE OF APPROVAL)



### Colleton County Safety Policy Statement

Colleton County is extremely conscious of the safety of our employees, as well as the citizens that use our services. As an employer, we recognize our obligation to ensure the safest possible work place for our employees. As a government entity, we recognize our responsibility to provide a safe environment for the public we serve.

Each department head is responsible and will be held accountable for the loss control performance within his or her department. Colleton County has appointed our Risk Manager, George Welch, as safety coordinator. He will coordinate the County's overall loss control program; however he is not responsible for line functions which are the responsibility of department heads and supervisors. It is expected that department heads will complement the efforts of the safety coordinator to reduce accidents and provide for the safety of the public. These loss control responsibilities are continuous and equal in importance with all other operational considerations.

All employees are responsible for cooperating with and supporting the County's loss control program activities and objectives. All employees are expected to adopt the concept that the safe way to perform a task is the most efficient and only acceptable way to complete said task.

Loss control is every employee's responsibility. Only with your help can we continue to maintain a safe environment for both our employees and the citizens we serve.



J. Kevin Griffin  
County Administrator

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## **1.0 INTRODUCTION**

### **TO THE EMPLOYEES OF COLLETON COUNTY GOVERNMENT:**

- 1.1.** Colleton County is committed to providing a safe work environment for all of its employees. To achieve that goal the Safety Committee was established by Ordinance 02-O-15 (enacted July 22, 2002) to oversee and maintain a comprehensive safety program for all County facilities, employees, volunteers, contract workers, visitors, and others.
- 1.2.** This Safety Policy Manual is provided at the recommendation of the Safety Committee to inform employees of their rights and responsibilities. The Policy was developed under the authority of the Occupational Safety and Health Act of 1970 (OSH Act) and the South Carolina Occupational Safety and Health Act. Many Departments with hazards particular to their assigned work will have Department-specific policies as well.
- 1.3.** A successful safety and accident prevention program depends on the support and participation of all employees. Everyone must read and understand the provisions of this policy and their Department-specific policies. Continued compliance with safety procedures and guidelines is a condition of employment and volunteer status.

## **2.0 AUTHORITY**

- 2.1.** Colleton County operates under the Council-Administrator form of government. The County Administrator is appointed by the County Council and serves at the pleasure of the Council. The County Administrator serves as the administrative head of Colleton County Government and is responsible for the administration of all Departments of the Government that Council has the authority to control. The Colleton County Administrator executes policies, directives, and legislative actions promulgated by the Colleton County Council, and supervises the expenditure of appropriated funds.
- 2.2.** Colleton County Safety Committee members have the authority and responsibility to stop any observed, unsafe activities. When a Safety Committee member stops an activity he/she will notify the responsible Department Head and the County Administrator. The Department Head will take appropriate steps to eliminate the hazard and will report remedial action taken to both the Administrator and the Safety Committee member. The Safety Committee member, who observed the hazard, will make a report to the Safety Committee Chairperson or Vice Chairperson for review by the Safety Committee at the next quarterly meeting.

**3.0 APPLICABILITY AND ENFORCEMENT:**

- 3.1. The provisions of this Policy will be applicable to all employees, volunteers, contract workers, and others of Colleton County Government.
- 3.2. Related standards or policies: The number of OSHA Standards, OSHA Enforcement Directives, Center for Disease Control (CDC) Guidelines and County policies that support or apply to the County's Safety Policy is numerous. Some of the corresponding standards that apply to a particular topic are included in the title sections of this policy. This is not inclusive of all applicable standards, policies and directives that support or apply to the County's Safety Policy. Department Heads and Supervisors are responsible for determining the appropriate standards and policies that apply to their Departments and for developing, adopting, and maintaining written Department/agency policies addressing the specific safety needs of their Department/agency.

**4.0 CONFLICT POLICY:**

- 4.1. These safety policies and procedures, along with all formally issued Department-specific safety policies supersede all previous rules and regulations, policies, procedures, and practices, relating to the same policy. All conflicting rules, regulations, and directives are hereby repealed.

**5.0 SEVERABILITY POLICY:**

- 5.1. It is the intent of Colleton County that the sections, paragraphs, sentences, clauses, and phrases of this Safety Policy Manual are severable. Should any such section, paragraph, sentence, clause, or phrase be declared unconstitutional, invalid, or unenforceable by the judgement or decree of any court of competent jurisdiction, such declaration will not affect the remaining sections, paragraphs, sentences, clauses, or phrases since the same would have been enacted by Colleton County without the incorporation into this policy of such unconstitutional, invalid, or unenforceable section, paragraph, sentence, clause, or phrase.

**6.0 SAFETY RESPONSIBILITIES:**

- 6.1. The responsibility for safety is mandated through OSHA Standards and further delegated by the County Council to all managers and supervisors, however, the ultimate responsibility for safety rests with each individual

employee, volunteer, or contract worker. All Colleton County employees, volunteers, and contract workers are expected to comply with safety procedures, policies, and guidelines; to be aware of potential hazards; and to work at all times to promote a safe and accident-free environment.

**7.0 SAFETY INSPECTION PROGRAM:**

**7.1.** The goal of any safety program is to prevent accidents. To help achieve that goal, Colleton County has instituted a self-inspection program for all Departments. There will be two types of self-inspection. The first is a monthly inspection to be conducted within each Department. The second is an annual inspection by Safety Committee members.

**7.2.** All Departments will develop an Inspection Checklist adapted to fit that Department's particular needs. A sample OSHA Checklist is included in this manual as a guide for list development.

**7.2.A.** Monthly Department Inspection Program: Every Department will conduct monthly Safety Inspections. The focus of these inspections will be on any immediate safety hazards that could affect employees. The Department Head or designee will perform a walk-through of the Department area using the Inspection Checklist to determine any existing hazards or safety violations. The goal of this Safety Program is to identify and correct problems before accidents occur.

**7.2.B.** Annual Safety Committee Department Inspections:

- 1)** The originating ordinance of the Colleton County Safety Committee provides that the Committee will make periodic inspections of all County Departments. These inspection teams will use the Department Checklist, but will also focus on building code, fire regulation issues, and Departmental programs.
- 2)** The inspection program is not designed to be punitive in nature. Attention to accident prevention and safety issues will make a better work environment for everyone.

## **8.0 OSHA INSPECTIONS:**

- 8.1.** The Occupational Safety and Health Administration (OSHA) may at any time conduct an inspection of County facilities. A courtesy inspection, which is done at the request of the employer, is a scheduled, preplanned inspection. A compliance inspection, which may occur as the result of a complaint, is a no-notice inspection. In either case, the inspecting officer will identify him/her self as an OSHA inspector and provide credentials beforehand.
- 8.2.** OSHA inspections generally begin in Administration with officer identification; an explanation of the nature of the inspection; a review of paperwork like Worker's Compensation records, etc.; and an overview of the inspection procedures. If a person presents him/her self as an OSHA inspector at a work site, the Department Head or employee approached should notify the Administration Office immediately. Administration will confirm the identity of all inspectors by telephoning the OSHA Compliance Office in Columbia.
- 8.3.** Compliance Officers are authorized, during regular work hours and at other reasonable times, to enter without excessive delay and establishment, workplace, or environment where work is performed by County employees. The Compliance Officers may observe any conditions, structures, machines, apparatus, devices, vehicles, equipment or materials that the County owns or uses in the performance of job duties. During the course of an inspection, the Compliance Officers may question employees or agents of the County. All County employees will cooperate with the Officers. Questions that cannot be answered at the Department level should be referred to the County Administrator.
- 8.4.** At the conclusion of the inspection, the Compliance Officers will conduct an exit interview, at which time they will discuss with management any findings or violations and the procedures and time limits for posting, correcting, and notifying OSHA of those corrections.

## **9.0 SAFETY COMPLAINT PROCEDURES:**

- 9.1.** Colleton County employees are expected to report safety hazards and at-risk work procedure concerns immediately to their supervisor or Department Head. The supervisor or Department Head must investigate and respond to the complaint in a timely manner. Any hazard that cannot be immediately removed or corrected must be posted with the appropriate warning signs and where possible made inaccessible.

**9.2.** In situations where hazards are reported to the supervisor or Department Head and no corrective action is taken, the following procedures will be followed:

**9.2.A.** The employee may contact any member of the Colleton County Safety Committee and report the hazard. The employee may be requested to put the complaint in writing. A form is provided in the form section of this manual. If the employee refuses to put the complaint in writing, the Safety Committee member will document the complaint and initiate an investigation.

**9.2.B.** Alternatively, the employee may contact the Human Resources or Administration Offices, and they will contact a Safety Committee member.

**9.2.C.** The Safety Committee will investigate all complaints and make determinations as to the corrective action necessary to eliminate the hazard. The Committee will document the investigation and the corrective action recommendations. If needed, the Committee will work with the Department/Office Head involved to coordinate completion of required corrective action. A report detailing the complaint, the investigation, the recommended corrective action, and the implementation of those actions must be forwarded to the County Administrator.

**9.2.D.** If after following this complaint procedure and the completion of remedial action the employee still has concerns about the potential safety hazard, the employee should report the hazard directly to the County Administrator.

## **10.0 EMPLOYEE SAFETY TRAINING PROGRAM:**

**10.1.** The Colleton County Employee Safety Training Program has two segments. The first segment is New Employee Training, which consists of overall safety training and Department-specific safety training; the second segment is the Annual Training Program, which includes an overall and Department-specific training review of polices/regulations, and an update on safety issues.

**10.1.A.** New Employee Training Program

- 1)** All new hires must attend a New Employee Training Class, which will cover the following:
  - a. Review of the County Safety Manual
  - b. Accident reporting procedures
  - c. Safety Committee information on membership, accident review procedures, etc.
  - d. Accident investigation/assessment program
  - e. Worker's Compensation
  - f. An over view of the:
    1. Infection Control Program
    2. Hazard Communication Program
    3. Lock Out/Tag Out Program
    4. Confined Space Program
    5. Personal Protective Equipment Program
  
- 2)** In addition to general safety training, the new employee will be given additional training directly applicable to his/her assigned tasks. This training will include:
  - a. Emergency plans, evacuation routes, and assembly locations appropriate to the Department and job assignment.
  - b. Department specific safety policies
  - c. Safe operating procedures for the particular position/office, i.e.
    1. Proper lifting procedures
    2. Use and care of Personal Protective Equipment
  - d. Procedures and responsibilities for reporting safety violations and accidents
  - e. Procedures appropriate to the Department and job assignment for the following Programs:
    1. Infection Control
    2. Hazard Communication
    3. Lock Out/Tag Out
    4. Confined Space
    5. Personal Protective Equipment
  - f. Location of County Safety Manual and Department Safety Policies
  - g. Specifics of particular job assignment hazards
  
- 3)** The general safety training will occur at the Benefits Sign Up meeting during the first 30-days of employment. The job-specific training will occur on the job site, again during the first 30-days of employment.

Both training sessions will be documented in the employee's personnel file.

**10.1.B. Annual Training Program:**

- 1) A review of the general Safety Program and of job-specific safety training will be held for every employee in every Department on an annual basis. This review will include, but not be limited to, the following:
  - a. An overall review of the County's Safety Manual including procedures and responsibilities for reporting safety violations and accidents
  - b. Training on all equipment that requires annual training i.e. fire extinguishers
  - c. A review of the following programs with emphasis on job-specific hazards:
    1. Infection Control
    2. Hazard Communication
    3. Lock Out/Tag Out
    4. Confined Space
    5. Personal Protective Equipment
  - d. Training as required for any job-specific tasks, i.e. confined space rescue
  - e. Introduction/training on any new safety issues, procedures, equipment, etc.
  
- 2) All annual training will be documented in writing, and such documentation will be maintained in a Department training file.

**11.0 INFECTION CONTROL (29 CFR 1910.1030; BLOOD BORNE PATHOGENS STANDARD); (29 CFR 1910.134; RESPIRATORY PROTECTION STANDARD); (OSHA COMPLIANCE DIRECTIVE CPL 2-44D); (OSHA COMPLIANCE DIRECTIVE CPL 2-106); (CDC MMWR/VOL 43/RR-13; TB)**

**11.1.** The term "Infection Control" refers to the steps taken to stop or control the spread of an organism that is capable of causing an infection or illness in a person. Within the County, there are certain Departments where, due to the nature of job duties, the risk of exposure is extremely high. Such Departments must have written Department-Specific Infection Control Plans. These Departments are; Fire/Rescue, Sheriff, Solid Waste, Animal and

Environmental Control, and Facilities Management. Their Department plans must meet the specific requirements of OSHA's Blood Borne Pathogen (BBP) and Tuberculosis (TB) standards. The employees in these Departments must also be offered vaccination against Hepatitis B.

**11.2.** Although their jobs do not pose the same high risk of occupational exposure to blood or other potentially infectious materials (OPIM), employees in other County Departments should have a basic understanding of infection control. Every position has the potential for inadvertent exposure. For instance, a clerk in the Treasurer's Office might assist a citizen who has fallen and cut himself. If the employee comes into contact with the citizen's blood, the employee must know how to handle that exposure.

**11.3. POST EXPOSURE EVALUATION AND FOLLOW UP**

**11.3.A.** Any exposure incident is treated as a Worker's Compensation event and must be reported, investigated, and documented. When an employee has an exposure incident, he or she must report it immediately to his/her supervisor, Department head, or designated infection control officer, who will immediately complete and submit a First Report of Injury Form as would be done for any work-related injury.

**11.3.B.** Following a report of an exposure incident, the exposed employee will, as soon as possible, receive a confidential medical evaluation and follow-up performed by a licensed physician or other healthcare professional. This evaluation will include at least:

1. Documentation of the route of exposure, and the circumstances under which the exposure incident occurred.
2. Identification and documentation of the source individual, unless it can be established that identification is not feasible or prohibited by state or local law.
3. The source individual's blood will be tested as soon as feasible and after consent is obtained to determine HBV and HIV infectivity. If consent is not obtained, the County Attorney will establish that legally required consent cannot be obtained. When the source individual's consent is not required by law, the source individual's blood, if available, will be tested and results documented.
4. When the source individual is already known to be infected with HBV or HIV, testing of the source individual's status need not be repeated.

5. Results of the source individual's testing will be made available to the exposed employee, and the employee will be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.

**11.3.C.** Collection and testing of blood for HBV and HIV serological status will comply with the following:

1. The exposed employee's blood will be collected and tested as soon as feasible after consent is obtained.
2. The employee will be offered the option of having his/her blood collected for testing for HBV/HIV serological status. The blood sample will be preserved for up to 90 days to give the employee time to decide if the blood should be tested for HIV serological status.

**11.3.D.** Any employee who has had a possible exposure incident will be offered post-exposure evaluation and follow-up per the OSHA standard. All post-exposure follow-up will be performed by a licensed physician or other healthcare professional.

**11.4. INFORMATION PROVIDED TO THE HEALTHCARE PROFESSIONAL**

**11.4.A.** Administration/Risk Management will ensure that the healthcare professional, responsible for providing the employee with post-exposure evaluation and follow-up, has:

1. A copy of the OSHA Blood Borne Pathogens Standard 29 CFR 1910.1030 along with a reminder of the confidentiality requirements of the standard;
2. A written description of the exposed employee's duties as they relate to the exposure incident;
3. Written documentation of the route of exposure and the circumstances under which exposure occurred;
4. Results of the source individual's blood testing, if available; and
5. All medical records are relevant to the appropriate treatment of the employee, including vaccination status where available.

**11.5. HEALTHCARE PROFESSIONAL'S WRITTEN OPINION**

**11.5.A.** Administration/Human Resources will obtain and provide the employee with a copy of the healthcare professional's written opinion within 15 days of the completion of the evaluation. The written opinion for HBV vaccination and post-exposure follow-up must be limited to:

1. Whether HBV vaccination is indicated for an employee, and if the employee has received such vaccination;
2. A statement that the employee has been informed of the results of the evaluation of the post-exposure follow-up; and
3. A statement that the employee has been told about any medical conditions, which may result from exposure to blood or other potentially infectious materials and which may require further evaluation or treatment. NOTE: All other findings or diagnoses must remain confidential and must not be included in the written report.

**11.5.B.** If there is a blood or other bodily fluid spill in an office, the Facilities Management staff must be contacted for clean-up. They are trained in clean up methods and procedures.

## **11.6.** FORMULA FOR INFECTION

**11.6.A.** The following "Formula for Infection" is provided to help explain the set of circumstances necessary for the spread of disease from person to person:

1. First is the **organism**. All diseases start with an organism that causes illness or infection.
2. Second is the **dose** of the organism. How much of the organism is present in a medium that will allow the organism to thrive and transmit.
3. Third is the **virulence** of the organism. How strong is the organism and is the organism able to live outside the body?
4. Fourth is the **mode of entry**. How does the organism get introduced into the body?
5. Fifth is the **host resistance**. How healthy is the exposed person?

**11.6.B.** When an organism is present at a high enough level and virulence (to cause disease), and it can gain entry into the body of a host with low

resistance, the disease will spread. When these conditions are not met, the disease will not spread.

**11.6.C.** Casual contact with a person, who has a communicable disease, will not spread the disease from person to another. Contact with inanimate objects held by an infected person will not spread disease. For the disease to spread, there must be contact with a specific "at-risk" body fluid. The body fluids that are considered "at-risk" fluids are: blood, semen, vaginal secretions, amniotic fluid, pleural fluid, synovial fluid, and cerebrospinal fluid.

## **12.0 MEDICAL SERVICES AND FIRST AID (29CFR 1910.151):**

**12.1.** OSHA encourages and, in some cases, requires employers to have personnel trained in CPR and First Aid. Their Program Directive requires that employers have CPR and First Aid available to injured employees within three (3) minutes of an injury or that the work site is located within three (3) miles of a medical facility.

**12.2.** Colleton County is a large, rural County. Many of our employees perform job duties at sites that do not meet the OSHA three minutes/three miles rule. All employees are encouraged to participate in the CPR/First Aid/Infection Control classes that are offered periodically through the Fire-Rescue Department or other sources if the employee prefers.

**12.3.** First Aid training must include the following as a minimum:

- a. Treatment of shock due to injury, allergic reaction, and fainting.
- b. Instruction in the types of bleeding control and the appropriate interventions.
- c. Poisoning principles and treatment, chemical emergency information, and treatments as well as how to and when to contact the nearest poison control center.
- d. Assessing the severity of burns and determining the appropriate intervention for the burn.
- e. Treatment for temperature extremes – exposure to cold (frostbite and hypothermia) and heat injuries (heat cramps, heat exhaustion, and heat stroke).
- f. Musculoskeletal injury treatment, including fracture, strains, sprains, head, neck, and back injuries.

- g. Treatment for bites from humans, animals, and stings or bites from insects – including response to anaphylactic shock.
- h. Handling other medical emergencies including heart attack, stroke, asthma attacks, diabetic emergencies, seizures, and emergency pregnancy situations.
- i. Confined space first aid training.
- j. Site of injury training – head, neck, eye, nose, mouth, teeth, abdomen, fingers, and feet.

**12.4. NOTE:** Currently CPR training is good for two (2) years and First Aid training is good for three (3) years. People are no longer certified in CPR and First Aid. They receive cards that indicate completion of a course of instruction in CPR and First Aid.

**12.5.** Each Department Head must conduct a careful assessment of his/her work areas and determine the appropriate level of medical training/protection required for employees. In some instances it may be necessary to require that all or selected employees be trained in CPR and First Aid. Also, every County facility and vehicle must have a first aid cabinet/kit available for employees. These kits should be well-stocked and inspected/restocked periodically to ensure compliance with ANSI standard Z308.1-1978.

**12.6.** Where necessary, as a result of occupational hazards, eye wash/shower stations must be available for employees as a First Aid measure. ANSI standard Z358.1-1980 governs eye wash/shower stations. Eye wash stations in buildings should be plumbed in. Eyewash stations that are gravity fed, must be flushed for at least three minutes weekly to eliminate any potential bacterial growth.

**12.7.** Department-specific requirements for CPR and First Aid Training are detailed in the particular Department's Hazard Assessment/Safety Policy.

### **13.0 PERSONAL PROTECTIVE EQUIPMENT (PPE) (29 CFR 1910.132):**

**13.1.** Personal Protective Equipment (PPE) is the equipment to protect employees from specific job hazards. This includes protection for the head, face eyes, hearing, hands, body, and feet. It may also include respiratory devices and protective shields and barriers.

**13.2.** Employers are required to assess job hazards and to provide Personal Protective Equipment (PPE) where necessary. It is the responsibility of each

Department head to conduct frequent hazard assessments and to document these assessments in writing. Further, it is the responsibility of each Department head to ensure that the appropriate Personal Protective Equipment (PPE) required to protect against job hazards are available in adequate quantities and sizes for all affected employees.

**13.3. HAZARD ASSESSMENT:**

**13.3.A.** The Risk Manager will instruct each Department Head or designated Safety Officer on an assessment of the workplace to determine if hazards, which necessitate the use of personal protective equipment (PPE) are present or are likely to be present. If such hazards are present or are likely to be present, the proper type of PPE will be provided to the affected employees.

**13.3.B.** Such assessments by the Department Head/Safety Officer will be conducted regularly and will be verified through a written certification that identifies the Department evaluated, the certifying person, and the date of the hazard assessment.

**13.3.C.** During the assessment, the Department Head/Safety Officer shall consider the following basic hazard categories:

1. Impact
2. Penetration
3. Compression (roll-over)
4. Chemical
5. Heat
6. Harmful dust
7. Light (optical) radiation

**2)** and shall observe:

1. Sources of motion: Machinery or processes where any movement of tools, machine elements or particles could exist or where the movement of personnel could result in a collision with stationary objects.
2. Sources of high temperature that could result in burns, eye injury, or ignition of protective equipment.
3. Types of chemical exposures.
4. Sources of harmful dust.

5. Sources of harmful light: welding, cutting, brazing, furnaces, heat-treating, or high-intensity light radiation.
6. Sources of falling objects or potential for dropping objects.
7. Sources of sharp objects, which might pierce the feet or cut the hands.
8. Sources of rolling or pinching objects, which could crush the feet.
9. The layout of the workplace and location of co-workers.
10. Any electrical hazard.

**13.3.D.** The Department Head/Safety Officer should also examine all PPE for defects or damage. Any PPE that is not in safe and proper working condition will be removed from service and replaced with the ANSI approved equipment.

**13.4. TRAINING:**

**13.4.A.** Where Personal Protective Equipment (PPE) is deemed to be necessary, employees must be trained in the proper selection, use, maintenance and disposal of the particular PPE. This training will occur at the time of hire and will be repeated regularly and as needed throughout employment. Each training session will be documented in writing.

**13.4.B.** Department Heads are responsible for providing training to each employee who is required to use PPE. Such training shall be documented in writing with the name of each employee, the date of the training, and an outline of the material covered during the training session. Before being allowed to perform work requiring the use of PPE, the employee shall demonstrate his/her knowledge of the following:

1. When PPE is necessary?
2. Why PPE is necessary?
3. What type of PPE is necessary?
4. How to properly don, adjust and wear PPE.
5. The limitations of the PPE.
6. The proper care, maintenance, useful life, and disposal of the PPE.

**13.4.C.** Employees will be retrained when:

1. A Department Supervisor has reason to believe that an employee who has already been trained does not have the understanding and skill required to use PPE effectively.
2. An employee is performing in such a manner that the Department Supervisor feels that the employee has not retained the understanding or skill required to utilize PPE properly.
3. Any changes in the Department's workplace and/or changes in the PPE will render previous training obsolete.

**13.5. PPE AND PARTICULAR HAZARDS:**

**13.5.A.** The following is a list of general circumstances where PPE would be required:

**1) Eye and Face Protection:**

- a. All employees shall use the appropriate eye or face protection when exposed to eye or face hazards from flying particles, molten metal, liquid chemicals, acids, caustic liquids, chemical gasses, vapors or potentially injurious light radiation.
- b. Each affected employee shall use eye protection that provides side protection when there is a hazard from flying objects. Detachable side shields or protectors (clip-on or slide-on side shields) are acceptable.
- c. Employees who wear prescription lenses while engaged in operations that require eye protection, shall wear eye protection that can be worn over the prescription lenses or shall wear prescription safety glasses.
- d. All employees engaged in the operation, such as welding, which produces injurious light radiation, shall use equipment with filter lenses that have a shade number appropriate for the work being performed.
- e. Any Department-specific eye and face hazards, and the particular PPE required to protect against them, shall be detailed in that Department's PPE Program Policy.

**2) Head Protection:**

a. Employees are required to wear protective helmets when working in areas where there is a potential for injury to the head from falling objects. Protective helmets are designed to meet different criteria therefore Departments must choose the appropriately rated helmet that provides the protection required for the job being performed. Protective helmets must meet the following criteria:

1. Must resist penetration by objects.
2. Must absorb the shock of a blow from dropped or falling objects.
3. Must be water-resistant.
4. Must come with instructions explaining the proper adjustment and replacement of the suspension and headband.
5. Must comply with ANSI Z89.1-1986 (if purchased after July 5, 1994) or ANSI Z89.1-1969 (if purchased before this date).

b. Helmets are divided into three (3) classes with specific protection ratings for each class. Helmet classes are:

1. **Class A:** These helmets are used for general service (e.g. mining, building, construction, shipbuilding, lumbering and manufacturing). They provide good impact protection but limited voltage protection (up to 2400 volts). Example: Firefighters helmet.
2. **Class B:** These helmets are used for electrical work. They protect against falling objects and high voltage shock and burns (up to 24,000 volts). Example: Lineman's helmet.
3. **Class C:** These helmets are designed for comfort, protecting heads that might bump against objects, but do not protect against falling objects or electrical shock. They are commonly called "bump hats".

c. Any Department-specific hazards to the head, and the particular PPE required to protect against them, shall be detailed in that Department's PPE Program Policy.

**3) Foot Protection:**

- a. All employees shall wear protective footwear when working in areas where there is a danger of foot injuries due to falling or rolling objects; objects piercing the sole, and where employees are exposed to electrical hazards. The selection of footwear depends on the hazards identified in the workplace.
- b. Safety footwear must meet the minimum compression, impact performance standards, and testing requirements established by the ANSI standards. Protective footwear purchased after July 5, 1994 shall comply with ANSI Z41-1991 or, if purchased before this date, the footwear shall comply with ANSI Z41-1967.
- c. There are safety shoes to protect against different types of hazards. There are safety shoes with impact-resistant toes and heat resistant soles that protect against hot surfaces common in roofing, paving and hot metal industries. Some have metal insoles to protect against puncture wounds. They may be designed to be electronically conductive for use in explosive atmospheres or nonconductive to protect from workplace electrical hazards. Some shoes include metatarsal guards to protect the instep area from impact and compression.
- d. Any Department-specific hazards to the feet, and the particular PPE required to protect against them, shall be detailed in that Department's PPE Program Policy.

**4) Hand Protection:**

- a. All employees shall use appropriate hand protection whenever they are exposed to hazards such as:
  - 1. Skin absorption of harmful substances,
  - 2. Severe cuts and lacerations,
  - 3. Severe abrasions or punctures,
  - 4. Chemical burns, thermal burns, or harmful temperature extremes.
- b. Gloves are made of different materials to handle specific hazards. Departments shall base the selection of hand protection on the evaluation of the performance characteristics of the hand protection relative to the task(s)

to be performed, conditions present, duration of use, and the hazards and potential hazards identified.

- c. Any Department-specific hazards to the hands, and the particular PPE required to protect against them, shall be detailed in that Department's PPE Program Policy.

**5) Body Protection:**

- a. Departments shall select and require employees to use the appropriate body protection (chest, abdomen, arms, groin, and legs) necessary to protect from the hazards identified with the tasks to be performed. Hazards to the body can be caused by intense heat; splashes of hot metal or other hot liquids; impact from tools, machinery or materials; cuts; hazardous chemicals; radiation or contact with potentially infectious materials like blood.
- b. Protection must be provided for the parts of the body that may be exposed to the hazard. Body protection includes, but is not limited to, vests, aprons, surgical gowns, coveralls, full-body suits, cooling vests or sleeves.
- c. Any Department-specific hazards to the body, and the particular PPE required to protect against them, shall be detailed in that Department's PPE Program Policy.

**6) Hearing Protection:**

- a. Employees are required to wear ear protection in areas where machines or equipment may produce sound levels in the frequencies that can cause hearing loss. Engineering controls to reduce noise levels, such as climate-controlled cabs, will be provided if possible; however, when sound levels cannot be reduced to acceptable ranges, PPE will be provided and exposed employees will be required to wear it.
- b. Examples of hearing protection are earmuffs and ear plugs. Home-made efforts at protection, like cotton balls or fabric, are not acceptable.

- c. Any Department-specific hazards to hearing, and the particular PPE required to protect against them, shall be detailed in that Department's PPE Program Policy.

**7) Respiratory Protection:**

- a. Employees who are required to perform tasks that may involve exposure to fumes, gases, mists, chemicals, or oxygen-deficient atmospheres, will be provided with respirators appropriate to the task.
- b. Such employees, in addition to receiving training on the proper use of the particular PPE, shall be properly fit tested and certified as medically qualified to use the selected respirator.
- c. Any Department-specific respiratory hazards, and the particular PPE required to protect against them, shall be detailed in that Department's PPE Program Policy.

**8) Safety Vests:**

- a. Employees, who work along roadways or scenes where vehicles are moving around the work area, are required to wear safety vests. The bright colors and light-reflective quality of vests provide high visibility for the wearer. They are therefore included as protective gear.
- b. Department-specific requirements for the use of safety vests shall be detailed in that Departments PPE Program Policy.

**13.6. SUMMARY:**

**13.6.A.** Providing the appropriate protection for the hazards identified is the basis of an effective safety program. All Departments will carefully assess the workplace for hazards and will implement engineering and work practice controls that eliminate or reduce the hazards to the lowest level possible. PPE will be carefully selected to protect employees from the hazards that cannot be eliminated through engineering or work practice controls.

**13.6.B.** Employees will be trained to understand why the PPE is necessary, when and how to use the PPE, and how to dispose of, or maintain the PPE properly. Employee training records will document that the training was provided and that the employee demonstrated the skills necessary to use the PPE properly. Any for-cause review training and all annual training sessions will also be documented in employee records. Every Department will have certification forms to document employee training and to record Department hazard assessments.

**13.6.C.** The following sample forms are provided to familiarize employees with PPE Certification for training and hazard assessment. The particular forms used within each Department are available from the Department Head or Safety Officer.

Colleton County

\_\_\_\_\_ Department  
(Insert Department Name)

\_\_\_\_\_  
(Insert Department Address)

**Certificate of Hazard Assessment**

(According to 29 CFR 1910.132)

I, \_\_\_\_\_ certify that \_\_\_\_\_ was  
(name of individual) (name of Department)  
evaluated on \_\_\_\_\_ for hazards which are present, or are  
(date(s))  
likely to be present, which necessitate the use of personal protective  
equipment (PPE).

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(date)

\_\_\_\_\_  
(title)

Colleton County Safety Policy Manual

Colleton County \_\_\_\_\_ Hazard Assessment  
(Insert Department name)

Date: \_\_\_\_\_ Conducted by: \_\_\_\_\_ Work area: \_\_\_\_\_

<u>Task</u>	<u>Hazard</u>	<u>PPE required</u>	<u>Comments</u>

Colleton County

\_\_\_\_\_ Department  
(Insert Department Name)

\_\_\_\_\_  
(Insert Department Address)

**Certificate of Employee Training in PPE Use**  
(According to 29 CFR 1910.132)

I, \_\_\_\_\_ certify that on \_\_\_\_\_ the  
(name of trainer) (date)

following employees of \_\_\_\_\_ received the training required  
(Department Name)  
under OSHA's standard on personal protective equipment.

Name

Signature


As part of this training, employees were informed of the personal protective equipment selected by this facility for their use and by my signature and those of the individual employees listed above, we certify that each employee has demonstrated his/her understanding of this training.

\_\_\_\_\_  
(Signature of trainer)

\_\_\_\_\_  
(date)

## **14.0 RESPIRATORY PROTECTION (29 CFR 1910.134):**

- 14.1.** Respiratory protection refers to Personal Protective Equipment designed to protect employees from a work atmosphere that contains hazardous elements or that is too low or too high in oxygen concentration. Only a NIOSH (National Institute for Occupational Safety and Health) approved respirator qualifies as a PPE for such atmospheric conditions. Masks, which are approved by the FDA (Food and Drug Administration) protect the wearer from fluid, particulate splatter, and dust, but they do not qualify as respiratory protection in hazardous atmospheres.
- 14.2.** The OSHA Standard establishes very specific requirements that must be met in a respiratory protection program:
- a. The Department Head must designate an individual to serve as the Program Administrator.
  - b. The Program Administrator must perform a hazard assessment to determine what specific hazards exist within the Department.
  - c. The Program Administrator must perform a hazard assessment to determine what specific hazards exist within the Department.
  - d. The Program Administrator and Department Head must determine and obtain the appropriate respirators to protect against the identified hazards.
  - e. Employees assigned to positions that require respirators must receive medical clearance annually to use the respirator on duty. As part of the medical clearance process, a physician can require a physical or even pulmonary function testing.
  - f. Once he/she is medically cleared to wear a respirator, the employee must be fit tested on the particular respirator required for his/her job. Fit testing will be accomplished through either a "qualitative" or a "quantitative" fit test as prescribed in the OSHA standard. A "qualitative" fit test is defined as a pass/fail test to assess the adequacy of respirator fit. It relies on the individual's response to a test agent. "Quantitative" fit testing means an assessment of the adequacy of the respirator by numerically measuring the amount of leakage into the respirator. Fit testing will occur at the time the employee is assigned to the duty position, annually, or whenever the

employee has physical changes that may indicate a need to change respirator size.

- g. The Department must adopt a policy disallowing beards, mustaches and/or long sideburns, since no facial hair is allowed under the sealing surface of a respirator face piece.

**14.3.** Although not in the same protection category as a respirator, a dust mask is considered a filtration device. If a Department **requires** employees to use dust masks in the performance of their duties, then that Department must meet all the requirements of the respiratory protection standard. If, however, a Department makes dust masks available for employees to use if they choose to, then the Department is required only to provide the employee with a copy of the OSHA standard and to ensure the employee knows how to use the mask correctly and what hazards it protects against.

**14.4.** A respirator can be awkward to wear, but it should fit so that it:

- a. Is secure, but not too tight around your chin.
- b. Doesn't pinch the nose.
- c. Doesn't slip.
- d. Allows you to move your head and talk.

Any fit problem should be brought immediately to the attention of the Department Head or designated Safety Officer.

**14.5.** A respirator must be inspected before and after each use to ensure that it is not damaged. Inspect the respirator for:

- a. Holes, cracks, tears, or other damage.
- b. Connections that are not tight.
- c. Signs of wear, especially in rubber parts like the face piece seal, head band, valves, connecting tube, fittings, canister or cartridges.
- d. Dents or corrosion in filters, cartridges and canisters.
- e. An air or oxygen cylinder that is not fully charged.

Any damage or questionable appearance/signs must be reported immediately to the Department Head or designated Safety Officer.

**14.6.** The employee should perform the proper maintenance/decontamination procedure as recommended by the manufacturer after every use of the respirator. Once that is completed, the respirator must be cleaned, disinfected, and stored in its proper place away

from dust, light, heat, cold, moisture, and/or chemicals. Any rubber or plastic piece must be in its normal position. Storing the respirator improperly can damage it and reduce its life span.

- 14.7.** Employees must be thoroughly trained on the use, inspection, maintenance, and storage of any respirator they will use on the job. The OSHA standard contains very specific guidelines on required training. All training must be documented, and records must be maintained for twelve (12) month period. Employees must be retrained annually, or whenever changes in the workplace necessitate an amendment to the required respiratory protection policy and PPE, or whenever the employee demonstrates an inadequate knowledge of the respirator.
- 14.8.** The following pages contain a Respiratory Protection Checklist, for use by every employee who utilizes a respirator at work, and an OSHA Respirator Medical Evaluation Questionnaire, provided to familiarize employees with the information required by a physician to issue a medical clearance for respirator use by an employee.

**Respiratory Protection Checklist**

Do you:

- \_\_\_\_\_ Use an assigned NIOSH-approved respirator when necessary?
- \_\_\_\_\_ Check the cartridge or canister color coding to be sure the respirator protects against the specific contaminant?
- \_\_\_\_\_ Check the end of service life indicator or follow the change schedule for canister cartridges described in our respirator program?
- \_\_\_\_\_ Use an atmosphere-supplying respirator whenever there's not enough oxygen?
- \_\_\_\_\_ Check the fit of the respirator before each use for a tight seal?
- \_\_\_\_\_ Check the condition of the respirator before each wearing?
- \_\_\_\_\_ Understand the conditions that may make it possible for a person to wear a respirator?
- \_\_\_\_\_ Know how to put on your respirator properly?
- \_\_\_\_\_ Recognize that respirators may slow you down or make it more difficult to do certain tasks?
- \_\_\_\_\_ Pay attention to the quality of our air supply and get to fresh air when:
  - \_\_\_\_\_ You're wearing an air-purifying respirator and you can taste or smell an air contaminant?
  - \_\_\_\_\_ You're wearing an atmosphere-supplying respirator and it signals that your air supply is low?
- \_\_\_\_\_ Report – and not wear – a respirator that shows any damage?
- \_\_\_\_\_ Remove a respirator in such a manner that you don't contaminate yourself?
- \_\_\_\_\_ Clean and disinfect your respirator after each use?
- \_\_\_\_\_ Store a respirator carefully in its assigned location?

**OSHA Respirator Medical Evaluation Questionnaire**

To the Employer: Answers to questions in Section 1 and question 9 in Section 2 of Part A, do not require a medical examination.

To the Employee: Can you read? (circle one): YES NO

**Your employer must allow you to answer this questionnaire during normal working hours or at a time and place that is convenient for you. To maintain your confidentiality, your employer or supervisor must not look at or review your answers, and your employer must tell you how to deliver or send this questionnaire to the healthcare professional that will review it.**

Part A. Section 1. (Mandatory) Every employee who has been selected to use any type of respirator must provide the following information. (Please print!)

- 1. Today's date: \_\_\_\_\_
- 2. Name: \_\_\_\_\_
- 3. Age (to the nearest year) \_\_\_\_\_
- 4. Sex (circle one) Male Female
- 5. Height: \_\_\_ ft \_\_\_ in
- 6. Weight: \_\_\_\_\_
- 7. Job Title: \_\_\_\_\_
- 8. A phone number where the Healthcare Professional who reviews this questionnaire can reach you. Include area code: \_\_\_\_\_
- 9. The best time to phone you at this number: \_\_\_\_\_
- 10. Has your employer told you how to contact the health care professional who will review this questionnaire (circle one)? YES NO
- 11. Check the type of respirator you will use (you can check more than one category):
  - a. N, R or P disposable respirator (filter-mask, non-cartridge type only)
  - b. Other type (for example, half- or full-face piece type, powered air purifying, supplied-air, self-contained breathing apparatus) \_\_\_\_\_
- 12. Have you worn a respirator (circle one): YES NO If yes, what type(s)?  
\_\_\_\_\_

Part A. Section 2. (Mandatory): every employee who has been selected to use any type of respirator must answer Questions 1 through 9 below. (circle yes or no):

- 1. Do you currently smoke tobacco or have you smoked tobacco in the last month? Yes/No

2. Have you had any of the following conditions?

- a. Seizures (fits) Yes/No
- b. Diabetes (sugar disease) Yes/No
- c. Allergic reactions that interfere with your breathing: Yes/No
- d. Claustrophobia (fear of closed-in places) Yes/No
- e. Trouble smelling odors: Yes/No

3. Have you had any of the following pulmonary or lung problems?

- a. Asbestosis: Yes/No
- b. Asthma: Yes/No
- c. Chronic bronchitis: Yes/No
- d. Emphysema: Yes/No
- e. Pneumonia: Yes/No
- f. Tuberculosis: Yes/No
- g. Silicosis: Yes/No
- h. Pneumothorax (collapsed lungs): Yes/No
- i. Lung Cancer: Yes/No
- j. Broken ribs: Yes/No
- k. Any chest injuries or surgeries: Yes/No
- l. Any other lung problem that you've been told about? Yes/No

4. Do you currently have any of the following symptoms of pulmonary or lung illness?

- a. Shortness of breath? Yes/No
- b. Shortness of breath when walking fast on level ground or walking up a slight hill or incline: Yes/No
- c. Shortness of breath when walking with other people at an ordinary pace on level ground: Yes/No
- d. Have to stop for breath when walking at your own pace on level ground: Yes/No
- e. Shortness of breath when washing or dressing: Yes/No
- f. Shortness of breath that interferes with your job: Yes/No
- g. Coughing that produces phlegm (thick sputum): Yes/No
- h. Coughing that wakes you early in the morning: Yes/No
- i. Coughing that occurs mostly when you are lying down: Yes/No
- j. Coughing up blood in the last month: Yes/No
- k. Wheezing: Yes/No
- l. Wheezing that interferes with your job: Yes/No
- m. Chest pain when you breathe deeply: Yes/No
- n. Any other related symptoms that you think may be related to lung problems: Yes/No

5. Have you had any of the following cardiovascular or heart problems?

- a. Heart attack: yes/no
- b. Stroke: Yes/No
- c. Angina: Yes/No
- d. Heart failure: Yes/No
- e. Swelling in your legs or feet (not caused by walking): Yes/No
- f. Heart arrhythmia (heart beating irregularly): Yes/No
- g. High blood pressure: Yes/No
- h. Any other heart problem that you've been told about: Yes/No

6. Have you had any of the following cardiovascular or heart symptoms?

- a. Frequent pain or tightness in your chest: Yes/No
- b. Pain or tightness in your chest during physical activity: Yes/No
- c. Pain or tightness in your chest that interferes with your job: Yes/No
- d. In the past two years have you noticed your heart skipping or missing a beat: Yes/No
- e. Heartburn or indigestion that is not related to eating: Yes/No
- f. Any other symptoms that you think may be related to heart or circulation problems: Yes/No

7. Do you currently take medication for any of the following problems?

- a. Breathing or lung problems: Yes/No
- b. Heart trouble: Yes/No
- c. Blood pressure: Yes/No

d. Seizures (fits): Yes/No

8. Have you ever used a respirator? Yes/No If you have used a respirator, have you ever had any of the following problems? If you have never used a respirator, go to question number 9.

a. Eye irritation: Yes/No

b. Skin allergies or rashes: Yes/No

c. Anxiety: Yes/No

d. General weakness or fatigue: Yes/No

e. Any other problem that interferes with your use of a respirator: Yes/No

9. Would you like to talk to the Healthcare professional who will review this questionnaire about your answers to this questionnaire: Yes/No

**Questions 10 to 15 must be answered by every employee who has been selected to use either a full face piece respirator or a self-contained breathing apparatus (SCBA). For employees who have been selected to use other types of respirators, answering the following questions is voluntary.**

10. Have you ever lost vision in either eye (temporarily or permanently): Yes/No

11. Do you currently have any of the following vision problems?

a. Wear contact lenses: Yes/No

b. Wear glasses: Yes/No

c. Color blind: Yes/No

d. Any other eye or vision problem: Yes/No

12. Have you ever had an injury to your ears, including a broken ear drum: Yes/No

13. Do you currently have any of the following hearing problems?

a. Difficulty hearing: Yes/No

b. Wearing a hearing aid: Yes/No

c. Any other hearing or ear problem: Yes/No

14. Have you ever had a back injury: Yes/No

15. Do you currently have any of the following musculoskeletal problems?

a. Weakness in any of your arms, hands, legs or feet: Yes/No

b. Back pain: Yes/No

c. Difficulty fully moving your arms and legs: Yes/No

d. Pain or stiffness when you lean forward or backward at the waist: Yes/No

e. Difficulty fully moving your head up or down: Yes/No

f. Difficulty fully moving your head side to side: Yes/No

g. Difficulty bending at your knees: Yes/No

h. Difficulty squatting to the ground: Yes/No

i. Climbing a flight of stairs or a ladder carrying more than 25 lbs: Yes/No

j. Any other muscle or skeletal problem that interferes with using a respirator: Yes/No

## **15.0 LOCKOUT/TAG-OUT (29 CFR 1910.147)**

**15.1.** A Lockout/Tag-Out procedure is a process for establishing that a piece of machinery is properly turned off before any service, maintenance procedure, cleaning, or correction of an operational problem is conducted. Simply turning off a machine or unplugging it is not enough to prevent unexpected start-up.

### **15.2. DEFINITIONS:**

**15.2.A.** Before developing a Lockout/Tag-Out procedure several definitions must be understood.

- a. **Affected employee** – 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/tag-out, or whose job requires him/her to work in an area in which servicing or maintenance is being performed.
- b. **Authorized employee** – A person who locks out or tags out machines or equipment to perform servicing or maintenance on that machine or equipment. An “affected employee” becomes an “authorized employee” when that employee’s duties include servicing or maintenance covered under this section.
- c. **Energized** – Connected to an energy source or containing residual or stored energy.
- d. **Energy source** – Any source of electrical, mechanical, hydraulic, pneumatic, chemical, thermal or other energy form.
- e. **Lockout** – The placement of a lockout device on an energy-isolating device, following established procedure, ensuring that the energy isolating device and the equipment being controlled cannot be operated until the lockout device is removed.
- f. **Lockout device** – A device that utilizes a positive means such as a lock, either key or combination type, to hold an energy-isolating device in a safe position and prevent the energizing of a machine or equipment. Examples of such devices and blank flanges and bolted slip binds.
- g. **Tag-out** – The placement of a tag-out device on an energy-isolating device, following established procedure, to indicate that the energy isolating device and the equipment being controlled may not be operated until the tag-out device is removed.
- h. **Tag-out device** – A prominent warning device, such as a tag and a means of attachment, which can be securely fastened to an

energy isolating device in accordance with an established procedure, to indicate that the energy isolating device and the equipment being controlled may not be operated until the tag-out device is removed.

### **15.3. GUIDELINES**

**15.3.A.** Each Department may have specific policies and regulations, but the following is a list of some very simple guidelines to protect against machine hazards:

- a. Never try to clean, repair or perform maintenance on any equipment or machine without completing the lockout/tag-out procedure.
- b. Never touch, much less operate, any equipment or machine unless you are trained and authorized to do so.
- c. Never touch anything that is locked and tagged out unless you are responsible for working on it and you are sure that the power is disconnected.

**15.3.B.** The key to any lockout/tag-out procedure is to shut down machines completely before repair, maintenance, and cleaning.

### **15.4. LOCKOUT:**

**15.4.A.** The following is an example of a six-step lockout or shut down procedure.

- a. Before shutdown – Before the shutdown, the authorized employee must know the type and magnitude of the energy, the hazards of the energy to be controlled, and the method or means to control that energy. The authorized employee must notify all affected employees of the lockout.
- b. Shutdown – The authorized employee shuts down the machine or equipment by the normal stopping procedure (pressing the stop button, moving the switch to the “off” position, etc.)
- c. Isolation – The main power switches, circuits, or other sources of energy are moved to the “off” position or otherwise rendered inoperative.
- d. Lockout – Locks are placed on switches or other energy sources in the “safe” or “off” position. During a group lockout, all members of the group must add their locks to the group lockout devices.

Never place a lock inside another individuals lock. Warning tags should be placed with each lock.

- e. Energy release – All potentially hazardous stored or residual energy (such as that in springs, elevated parts, rotating flywheels, hydraulic systems, electrical systems and air, gas, steam, or water pressure) is relived, disconnected or otherwise made safe by repositioning, blocking, or bleeding down. (If there is a possibility of re-accumulation of stored energy to a hazardous level, verification of isolation shall be continued until the servicing or maintenance is completed or until the possibility of such accumulation no longer exists).
- f. Testing – As a check on the disconnection of the energy sources, the authorized employee, after ensuring that no personnel is exposed, operates the push button or other normal operating controls to make certain the equipment will not operate.

**Caution:** Return the operating control(s) to the “neutral” or “off” position after the test. **The equipment is now locked out.**

#### **15.5. TAG-OUT:**

**15.5.A.** Tag-out is the process of placing tags on machinery to warn workers not to start or operate the equipment. It usually occurs after the lockout and is a way of making doubly sure that other workers know how to stay away from the machinery. Tag-out is not a substitute for lockout. However, in cases where machinery cannot be locked out, tag-out is extremely important because it is the only way to warn other employees that the equipment should not be used. Tag-out alone should be used only with management approval.

#### **15.6. GETTING BACK ON LINE:**

**15.6.A.** When maintenance or servicing is done, only the authorized employee who installed the lock may remove it. Special circumstances may apply during shift change or when an employee who placed a lock or tag is not available to remove it. The specific Lockout/Tag-Out written policy must provide procedures for such situations.

**15.6.B.** When the machine cleaning or servicing is complete, the following steps must be taken to resume normal operation:

1. Check all around the machine to make sure that all maintenance items have been removed and that the equipment components are operationally intact.
2. Check the area to make sure all employees are outside the risk area and that no one can enter the area during this phase.
3. Verify that the controls are in neutral.
4. Remove the lockout devices and re-energize the machine
5. Notify the affected employees that the servicing is completed and the machine is ready for use.

**15.7. TRAINING:**

**15.7.A.** Every employee needs to be trained on the lockout/tag-out standard to the degree required by job responsibilities. The three basic levels of training are as follows:

1. Authorized employees: Authorized employees are the workers that conduct the maintenance or servicing activities and are the ones who will lockout or tag-out the equipment. They need the highest level of training, including specific information on isolating energy sources. Assignments may be divided among authorized employees to handle certain designated pieces of equipment.
2. Affected employees: These are usually the operators of the equipment who are not trained to repair or service the machines. They need to understand the purpose of the procedures, how the procedures are applied, and how they protect the employee. They should be trained to recognize when it is necessary to put in a service call and instructed not to attempt to fix machines themselves.
3. Other employees: These workers are located in the area of the machines, but are not involved in their operation. They must be trained to understand what lockout/tag-out means and taught not to interfere with the procedures.

**15.8. EMPLOYEE RESPONSIBILITIES:**

**15.8.A.** Lockout procedures are a common-sense precaution designed to ensure that machines and people do not accidentally tangle. No power must

go to a machine that is being serviced and that every step of the procedure is followed so that no machine takes anyone by surprise. Not everyone is responsible for performing tasks that require lockout first, but everyone is responsible for:

1. Reporting any machine problems or malfunctions;
2. Recognizing a locked machine;
3. Staying away from a locked machine.

**15.8.B.** Lockout/Tag-out procedures are solely for the protection of the employee. Coordination and communication are the keys to a successful lockout/tag-out program.

### **15.9. LOCKOUT/TAG-OUT MISTAKES:**

**15.9.A.** The following is a list of the ten most common lockout/tag-out program mistakes.

1. Using a generic lockout/tag-out procedure. A generic lockout/tag-out procedure is great for introducing employees to the concept of lockout/tag-out, but a good lockout/tag-out procedure is designed specifically for the machinery and equipment of the particular work site.
2. Failing to recognize all energy sources. Electricity is only one source of energy for machinery. Other sources of energy include hydraulic, heat, radiation, chemical, flammable, and kinetic (springs). It is important to identify and label all energy sources on the machine. Check maintenance manuals or contact the manufacturer to ensure that all energy sources have been identified.
3. Not completely isolating or dissipating all energy sources: All energy sources must be isolated by using an appropriate device such as a blank flange, bolted slip bind, cribbing/shoring/blocking device, valve lock, or chain and u-bolt with locking clip. When the device is installed, the area should be cleared, and the machine tested for stored energy.
4. Attaching locks: If the lockout procedure involves several maintenance employees locking out together, no employee should hang his/her lock on another lock, because when the first lock is removed, the other(s) attached to it will be removed as well. In such circumstances and appropriate

gang lock that allows spate attachment for each worker's lock should be used.

5. Non-maintenance workers are not trained on lockout/tag-out procedures: OSHA requires that machine operators and other non-maintenance employees be trained on the basic lockout/tag-out procedures. They do not need to know the details that the maintenance employees have to know, but they must recognize the procedure and understand their responsibility not to interfere in it in any way.
6. Failing to lockout equipment located nearby: Any equipment located near the machine being locked out must also be locked or tagged out if there is a possibility that failure to do so might affect the lockout procedure.
7. Failing to update procedures for new or updated equipment: OSHA requires an annual review of lockout/tag-out procedures to ensure they are up to date and complete. An authorized employee or team should be assigned this task.
8. Lack of procedures for handling shift changes: Where necessary lockout/tag-out procedures must cover maintenance activities that stretch over more than one work shift. This can be done by assigning someone to coordinate the shift change, or by conducting a complete lockout a second time at the start of the new shift. The procedures must be specific and in writing.
9. Tag-out used incorrectly: Tags are not as protective as a lockout and may evoke a false sense of security. They should only be used if it is impossible to lock out the machinery. Additional safeguards should always be used to ensure that the tag-out is as effective as a lockout. Such safeguards might include opening a second disconnect, blocking a control switch or removing valve handles.
10. Not coordinating procedures with contractors: Lack of communication with outside contractors is a frequent source of lockout/tag-out accidents. Lockout/tag-out procedures must be reviewed with contractors before onsite work is performed. The contractors must be aware of all hazardous energy sources and must coordinate their activities with on-site affected employees.

**15.10.** The following checklist is included to aid each department in developing an appropriate lockout/tag-out procedure.

**Lockout/Tag-Out Checklist**

	Before the shutdown, the authorized employee must know the type, magnitude, and hazards of the energy to be controlled.
	The employee must know the method or means to control the energy
	The employee informs all affected employees of the lockout
	The employee then stops the equipment by the usual method.
	Once the machine is turned off, the main power switches and circuits should be turned off.
	Locks should be placed on the switches (or other energy sources) in the "off" or "safe" position.
	In a group lockout, all members of the group must add their locks individually to the lockout.
	Warning tags should be affixed with each lock.
	Any stored or residual energy is then eliminated.
	With no one near the equipment, the employee tests it by attempting to start it up in the usual manner.

**16.0 HAZARD COMMUNICATIONS STANDARD (29 CFR 1910.1200):**

**16.1.** In the workplace everyone is responsible for the safe handling, use and storage of chemicals. Employers and Department Heads have the responsibility to inform and protect employees from chemical hazards, and employees have the responsibility to follow established procedures when handling and working with chemicals. To prevent accidents or injuries, the following guidelines must be followed:

1. Every employee, who uses any type of chemical on the job, must read all available manufacturer's product information (MSDS).
2. Every Department Head/supervisor must have a complete listing of chemical products and MSDS sheets on hand for immediate information in the event of an accident. This information should be in a conspicuous place assessable to all employees who work with these chemicals.
3. Extreme care should be exercised at all times by personnel who are working with acids, caustics, solvents, pesticides or petroleum products. If questions arise, the supervisor/Department Head should be consulted.
4. No food or drink shall be allowed in an area where potentially toxic substances are stored, mixed or otherwise handled.
5. Every employee must be extremely careful to avoid spills or splashes when handling chemicals. Spilled chemicals must be removed immediately by the method appropriate to the material spilled.
6. It is required that employees wear Personal Protective Equipment in any situation where contact with chemicals may occur.
7. If an employee does come in contact with a caustic chemical, immediate appropriate action, i.e. flushing the affected part with water, must be taken. If a caustic chemical is swallowed, product counteraction instructions must be followed.
8. Emergency services telephone numbers (poison control, EMS, etc) must be posted conspicuously in all chemical storage areas and the offices of the Department Head/supervisor.
9. All chemicals and other injurious materials must be stored in proper, approved containers. Antidotes and first aid

treatment methods shall be attached to the container or otherwise be readily available to all workers.

10. The Department Head/supervisor must be notified immediately in the event of any chemical spill, no matter how small. Particular care must be taken with:
  - a. Any chemical spill, where water, sewer, building, or workers are contaminated.
  - b. Any chemical spill with an obnoxious odor.
  - c. Any injury to eyes or face from chemicals
  - d. Any accidental mixing of large amounts of chemicals.
  - e. Any fire involving chemicals.
  - f. Any other chemical incident/accident that causes employee concern.

## **16.2. RIGHT TO KNOW:**

**16.2.A.** The OSHA Hazard Communications Standard (29 CFR 1910.1200) states that employees have a "RIGHT TO KNOW" about the hazards they face on the job and how to protect themselves against them. Although numerous federal, state and local regulations govern chemical handling, the Hazard Communications Standard establishes a basic set of rules that everyone must follow.

## **16.3. APPLICATIONS OF STANDARD:**

**16.3.A.** OSHA'S Hazard Communications Standard applies to every organization that uses chemicals. Chemical manufacturers must determine the physical and health hazards of each chemical they make. Users must be told about the chemical hazards through container labels and Material Safety Data Sheets (MSDS). Employers are required to develop a written Hazard Communications Program that does the following:

1. Tells employees about the Hazard Communications Standard.
2. Explains how the Hazard Communications Standard is put into effect in the workplace.
3. Provides information and training in hazardous chemicals including:
  - a. How to recognize, understand and use labels and MSDS.
  - b. Safe procedures for working with hazardous substances.

**16.3.B.** The Hazard Communications Standard places specific requirements on manufacturers and employers and assigns important responsibilities to the employees. Employers must read and understand chemical-container labels and MSDS sheets, and they must follow the instructions and warnings provided therein.

**16.4. RESPONSIBILITIES:**

**16.4.A.** Each Department will develop, implement, and maintain a written Hazard Communications Program specific to that Department and its hazards. Additionally, each Department will maintain an MSDS file on all chemicals used by that Department. Department Heads and supervisors will ensure that employees know where the Hazard Communications Program is located and how to implement the program in their Department. The Hazards Communications Program is designed to improve workplace safety, and workplace safety is the responsibility of every employee.

**16.4.B.** Every employee must do the following:

1. Identify hazards before starting a job.
2. Respect all precautions – take no chances.
3. Ask the supervisor when in doubt.
4. Know in advance what could go wrong and what to do about it.
5. Know-how, when, and where to get help.
6. Know the location of the Department Hazard Communications Program.
7. Know when to implement the Hazard Communications Program for the Department.
8. Know the location of the MSDS file for the Department.
9. Ensure that the MSDS file is provided to emergency responders.

**16.4.C.** Department Hazard Communications Programs and MSDS files will be reviewed annually (at a minimum) and updated as necessary. Department Heads are responsible for ensuring that reviews and updates are conducted.

**16.5. HAZARDOUS MATERIALS RESPONSE:**

**16.5.A.** An important part of any Hazard Communications Program is identifying the appropriate emergency response agency to notify following a chemical incident/accident. Employees, supervisors, and Department Heads must:

1. Know-how and when to notify the appropriate emergency response service(s);
2. Have Material Safety Data Sheets for involved chemicals available for the response team;
3. Provide any other accident information required by the response team;
4. Take appropriate safety precautions while dealing with the incident before the response team's arrival and during work on the scene;
5. Stay out of the hazard area.

**16.5.B.** Every employee must take the time to familiarize himself/herself with the Hazard Communication Program of his/her particular Department.

## **17.0 CONFINED SPACES (PERMIT-REQUIRED AND NON-PERMIT REQUIRED (29 CFR 1901.146):**

### **17.1. OVERVIEW OF CONFINED SPACE:**

**17.1.A.** A confined space work-area is defined as a space that:

1. Is large enough and so configured that an employee can bodily enter and perform assigned work.
2. Has limited or restricted means for entry or exit (for example, tanks, vessels, silos, storage bins, hoppers, vaults, and pits are spaces that may have limited means of entry).
3. Is not designed for continuous employee occupancy.

**17.1.B.** Employers are required to identify all confined space areas and to post signs or another warning to alert employees of the dangers of the particular confined space. Using chemicals in a confined space is an obvious danger as a lack of ventilation can cause the build-up of deadly vapors or fumes. Other hazards that may be found in a confined space include:

1. Getting trapped or stuck.

2. Extreme temperatures.
3. Liquids or granulated substances that can engulf the worker and cause strangulation, suffocation, constriction, or crushing.
4. Objects falling in from the opening.

**17.2. DEFINITIONS:**

**17.2.A.** Before developing a Confined Space Program, some definitions must be clearly understood.

1. **Acceptable entry conditions** – means the conditions that must exist in a permit space to allow entry and to ensure that employees involved with a permit-required confined space can safely enter into and work within the space.
2. **Attendant** – means an individual stationed outside one or more permit spaces who monitors the authorized entrants and who performs all attendant’s duties assigned in the employer’s permit confined space program.
3. **Authorized entrant** – means an employee who is authorized by the employer to enter a permit space.
4. **Emergency** – means any occurrence (including any failure of hazard control or monitoring equipment) or an event internal or external to the permit space that could endanger entrants.
5. **Entry** – means the action by which a person passes through an opening into a permit-required confined space. The entry includes ensuing work activities in that space and is considered to have occurred as soon as any part of the entrant’s body breaks the plane of an opening into the space.
6. **Entry supervisor** – means the person (such as the employer, foreman, or crew chief) responsible for:
  - a. Determining if acceptable entry conditions are present at a permit space where only entry is planned;
  - b. Authorizing entry and overseeing entry operation;
  - c. Terminating entry as required by this section.

**Note:** An entry supervisor may also serve as an attendant or as an authorized entrant, as long as that person is

trained and equipped as required by this section for each role he/she fills. Also the duties of an entry supervisor may be passed from one individual to another during an entry operation.

7. **Hazardous atmosphere** – means an atmosphere that may expose employees to the risk of death, incapacitation, impairment of the ability to self-rescue (that is, escape unaided from a permit space), injury, or acute illness from one or more of the following causes:
  - a. Flammable gas, vapor, or mist over 10 percent of its lower flammable limit (LFL).
  - b. Airborne combustible dust at a concentration that meets or exceeds its LFL. (NOTE: This concentration may be approximated as a condition in which the dust obscures vision at a distance of 5 feet (1.52m) or less).
  - c. Atmospheric oxygen concentration below 19.5% or above 35.5%.
  - d. Atmospheric concentration of any substance for which a dose or a permissible exposure limit is published in Subpart G, Occupational Health and Environmental Control, or in Subpart Z, Toxic and Hazardous Substances of this part and which could result in employee exposure over its dose or permissible exposure limit. (NOTE: An atmospheric concentration of any substance that is not capable of causing death, incapacitation, impairment of ability to self-rescue, injury, or acute illness due to its health effects is not covered by this provision).
  - e. Any other atmospheric condition that is immediately dangerous to life or health.
8. **Immediately dangerous to life or death (IDLH)** – means any condition that poses an immediate or delayed threat to life or that would cause irreversible adverse health effects or that would interfere with an individual's ability to escape unaided from a permit space.
9. **Non-permit confined space** – means a confined space that does not contain or, concerning atmospheric hazards, have the potential to contain any hazard capable of causing death or serious physical harm.
10. **Oxygen deficient atmosphere** – means an atmosphere containing less than 19.5% oxygen by volume.

11. **Oxygen enriched atmosphere** – means an atmosphere containing more than 23.5% oxygen by volume.
12. **Permit-required confined space (permit space)** – means a confined space that has one or more of the following characteristics:
  - a. Contains or has a potential to contain a hazardous atmosphere.
  - b. Contains a material that has the potential for engulfing an entrant.
  - c. Has an external configuration such that an entrant could be trapped or asphyxiated by inwardly converging walls or by a floor that slopes downward and tapers to a smaller cross-section.
  - d. Contains any other recognized serious safety or health hazard.
13. **Permit-required confined space program (permit space program)** – means the employers overall program for controlling and where appropriate, for protecting employees from permit space hazards, and for regulating employee entry into permit spaces.
14. **Permit system** – means the employer’s written procedure for preparing and issuing permits for entry and for returning the permit space to service following termination of entry.
15. **Rescue service** – means the personnel designated to rescue employees from permit spaces.

### **17.3. CONFINED SPACE NOTICE**

**17.3.A.** As stated above, employers must evaluate their workplaces to identify any confined space work area and to determine if any confined space meets the hazard criteria for permit-required confined space. Atmospheric, engulfment, and space design hazards automatically qualify a confined space for the permit-entry system. When employers identify such spaces, they must do the following to reduce hazards of working in the confined space:

1. Post signs or other warnings to alert employees to the dangers of the particular confined space.
2. Use barriers or other means to keep unauthorized employees out of permit spaces.
3. Develop and use a written space-entry program.

4. Conduct air monitoring and other tests to identify and evaluate hazards in each permit space.
5. State the conditions that will make the space acceptable to enter safely and verify that those conditions will be maintained as long as work goes on in the space.
6. Flush, ventilate or otherwise eliminate or control the space's atmospheric hazards before allowing entry into the space.

**17.4. PERMIT-REQUIRED CONFINED SPACES:**

**17.4.A.** The key to a permit-required confined space safety program is the permit itself. A permit-required confined space cannot be entered unless there is a completed, signed permit posted or easily available. The permit identifies:

1. The space to be entered.
2. Purpose, date, and authorized length of the entry.
3. Names of workers authorized to enter the space, and names of the assigned space attendant and entry supervisor.
4. Hazards of the permit space, results of initial and periodic tests and measures used to isolate the space and eliminate or control the hazards.
5. Acceptable entry conditions.
6. Equipment to be used in the space, including personal protective clothing and equipment (PPE), lighting, ventilating, testing, and monitoring, ladders to get in and out, and rescue and retrieval equipment.
7. Available rescue and emergency services and their phone numbers.
8. Additional permits, for instance, hot work, that relates to work in the space.
9. Any other special employee safety information.

**17.5. EMPLOYEES AUTHORIZED FOR PERMIT-REQUIRED CONFINED SPACES:**

**17.5.A.** Employers must identify and train the people who will play key roles in permit-required confined space work and spell out their duties. The official names for key confined space workers are **authorized entrants**, who are assigned and trained to work in a permit space; **attendants**, who are stationed outside the space to maintain contact with and monitor authorized entrants; and **entry supervisors**, who determine if conditions are acceptable for permit-required confined space

entry, and who authorize, oversee, and stop work in the space. Entry supervisors terminate entry and cancel the permit when the permit operations are completed or when a condition not allowed by the permit occurs in or near the space. It is the employer's responsibility to make sure the space is safe when workers are using it.

- 1) Authorized entrants** can enter a permit-required confined space only after it has been tested and found safe for entry. The authorized entrant is responsible for understanding the space's potential hazards as listed on the permit, and for recognizing the signs and symptoms that indicate the space may no longer be safe. In addition to hazard knowledge, the authorized entrant has to know what equipment to use and how to use it.

Before going into a permit-required confined space, the entrant must have:

- a. All necessary personal protective gear,
  - b. Equipment to communicate with the attendant,
  - c. The tools necessary to complete the confined space task,
  - d. When needed, a retrieval system, like a chest or full-body harness with a retrieval line overhead.
- 2)** When entry into a permit-required confined space has been achieved, the authorized entrant must complete his assigned task as quickly and efficiently as possible. It is the entrant's responsibility to be aware of conditions in the space and to monitor his/her state. The attendant must be notified immediately if the entrant observes a dangerous situation or a condition prohibited in the space. In that event, the entrant must exit the space as quickly as possible, if necessary with the help of the attendant or a rescue team. An entrant must also exit the space immediately if the attendant or entry supervisor gives an order or there is an evacuation alarm.
- 3)** An **attendant** is an employee trained to understand the potential hazards of a permit-required confined space and how exposure to those hazards could affect the behavior of the person in the space. The attendant is responsible for:
  - a. Maintaining an accurate count of who is in the space.
  - b. Monitoring activities inside and outside the space.

- c. Staying in touch with authorized entrants.
- d. Keeping unauthorized persons out of, and away from, an occupied permit space.
- e. Ordering immediate evacuation of the permit space if any of the following occur:
  - 1. Attendant duties cannot be performed safely,
  - 2. The authorized entrant shows signs of behavioral effects of hazard exposure,
  - 3. An outside situation could endanger the workers in the space.
- f. Summoning authorized rescue and emergency services when needed to evacuate workers from permit-required confined space hazards.

**4)** The **entry supervisor** oversees permit-required confined space work operations. This person must make sure testing, equipment use, and other permit requirements are completed before signing the permit and allowing entry into the permit space. Other responsibilities include:

- a. Understanding the confined space's hazards.
- b. Terminating entry and canceling the permit when the task is completed or if unsafe conditions arise.
- c. Making sure rescue/emergency services are available.

**17.6. EMPLOYER RESPONSIBILITIES FOR PERMIT-REQUIRED CONFINED SPACES:**

**17.6.A.** Regulations direct employers to:

- 1. Test to be sure conditions in the permit space is acceptable before entry and while work is being conducted.
- 2. Provide at least one attendant outside an occupied permit space.
- 3. Develop and implement a rescue and emergency system.
- 4. Coordinate procedures when a contractor or another employer is involved in work in a confined space.
- 5. Review the confined space safety program at least annually. The program must also be reviewed whenever a problem occurs.

**17.6.B.** The employer is responsible for ensuring that rescue/emergency services personnel are trained and equipped to perform assigned rescue duties. The training must include practice, at least once a year, in removing people or dummies from the actual confined spaces or spaces similar to them. Rescuer team members must know basic first aid and cardiopulmonary resuscitation (CPR), and at least one team member must have certification in both.

**17.7. SAFETY PROCEDURES AND TRAINING:**

**17.7.A.** Authorized entrants, attendants, and supervisors must, according to OSHA regulations, "acquire the understanding, knowledge and skills necessary for the safe performance of the duties assigned". They must be given training when they are assigned to confined space duties, when a new hazard appears, or when there is a reason to believe that procedures are not being properly followed.

**17.7.B.** In addition to the basic safety procedures required by OSHA, there are some other sensible safety practices necessary for work in confined spaces. These include, but are not limited to:

1. Planning the job carefully before entering a confined space. The entrant should know what to do and how to do it quickly and efficiently.
2. Assembling all tools and equipment before entry.
3. Shutting off any steam, water, heat, or power lines going into the space and following lock-out and tag-out procedures before entry begins.
4. Making sure the space is properly ventilated.
5. Not taking any food, drink, or cigarettes into a confined space.
6. Never enter a confined space if the entrant has been drinking or using drugs or if he/she is not feeling well.
7. Leaving the space immediately if there is any hint of a problem. If the entrant feels tired, dizzy, and nauseous, has trouble breathing, or has any other indication of danger, he/she must exit the space. Oxygen deficiency and asphyxiation can strike quickly and fatally.

**17.7.C.** Work in permit-required confined space is dangerous, but the protective measures required by the permit system do substantially reduce the risks. It is critically important that employees involved with

this work take their training seriously, follow every safety procedure, and take every precaution.

**17.7.D.** The following is a sample safety checklist for Permit-Required Confined Spaces. Department Heads may adapt this checklist to conform to their particular Department needs.

**PERMIT-REQUIRED CONFINED SPACES SAFETY CHECKLIST**

General Safety Knowledge	
	Know which confined spaces require permits for entry.
	Recognize – and – obey warning signs and barriers if not authorized to enter permit-required confined spaces.
	Complete training before taking any responsibility for work in confined spaces.
Check Entry-Permit Data	
	Before entering a confined space, an entry permit must be checked for complete information.
Authorized Entrants	
<b>Before Entering Space</b>	
	Review entry permit to be sure it's complete and understood.
	Assemble necessary tools and equipment.
	Be sure any steam, water, heat, or power lines going to the space are shut off and locked and tagged.
	Be sure the space is ventilated.
	Leave any food, beverages, and cigarettes outside the space.
	Don't enter a confined space if you've been drinking or using drugs or aren't feeling well.
<b>Working in a Confined Space</b>	
	Be alert to conditions in the space and your own physical and behavioral reactions.
	Alert attendant immediately of potentially dangerous conditions or signs and symptoms of exposure to hazardous chemicals.
	Leave space immediately upon recognizing signs or symptoms of exposure.
	Leave space immediately if ordered to by attendant or if there's an evacuation alarm.
	If you can't leave the space without help, tell the attendant to summon emergency aid or to use your rescue system.

Attendant	
	Review entry permit to be sure you understand all hazards and signs as well as symptoms of exposure.
	Check that systems to communicate with authorized entrant(s) and emergency and rescue services are in place.
	Remain stationed outside occupied permit space.
	Keep count of the number of people in permit space.
	Prevent unauthorized persons from entering permit space.
	Monitor activities in permit space and maintain communications with authorized entrants to be sure they're safe.
	Direct workers to leave space if they're endangered.
	Summon rescue and emergency services if needed.
	Perform non-entry rescues if needed.
Entry Supervisors	
	Know the hazards of permit space.
	Check that permits are complete and accurate before signing.
	Check on the availability of rescue and emergency services.
	Terminate entry and cancel a permit when the stated length of entry ends or if conditions change and become unsafe.
	Make sure acceptable entry conditions are maintained while space is occupied.
	Remove unauthorized persons who enter a permit space.
Rescue and Emergency Workers	
	Receive training to perform rescue duties, including at least one yearly practice in a confined space with people or dummies.
	Receive training on the hazards of confined spaces.
	Receive training on first aid and CPR.
	Receive needed PPE and rescue equipment.

## **18.0 WORKPLACE VIOLENCE:**

### **18.1. OVERVIEW:**

**18.1.A.** OSHA does not yet have a workplace violence regulation in place, but the increasing incidence of such occurrences makes this an important safety and health issue. There are four (4) basic types of workplace violence, and each type requires a different preventive measure. The basic types of workplace violence are:

1. Violence by strangers – This is the most common type of workplace violence and involves an assailant who has no legitimate relationship to the business. This person usually enters the workplace to commit a robbery or other criminal act.
2. Violence by customers or clients – The assailants in these cases can be current or former customers and clients, such as passengers, patients, students, inmates, criminal suspects, or prisoners. The victims are workers who provide direct services to the public, such as law enforcement, healthcare and social service providers, teachers, and sales personnel.
3. Violence by co-workers – Although receiving much media attention, these incidents are small when compared to all workplace-related violence. The assailant can be a current or former employee, supervisor, or manager. The individual is usually seeking revenge for what is perceived as unfair treatment.
4. Violence by the personal relations – The assailant in this situation is a person who has a troubled relationship with an employee outside of work and who violently confronts the worker at the employment site. Personal relations include current or former spouses, lovers, relatives, friends, or acquaintances.

### **18.2. DEPARTMENTAL PLANS:**

**18.2.A.** Each Department Head must have a copy of the Colleton County Facilities Emergency Plan. Each employee must understand his/her responsibility within the plan and his role in helping to prevent a violent incident. Additionally employees must know how and when to alert other employees that a violent threat exists.

**18.2.B.** Colleton County’s policy is one of zero-tolerance for violence and weapons in the workplace.

**18.3. GENERAL RESPONSIBILITIES:**

**18.3.A.** All employees must know what course of action to take in each emergency situation. Department Heads/Supervisors must make sure that all employees are familiar with the Colleton County Facilities Emergency Plan. Employees are responsible for taking precautions to assure their safety and to follow emergency procedures. Employees must also be familiar with the four types of emergency actions, evacuate, shelter, lockdown and lockout outlined in the Colleton County Facilities Emergency Plan.

Type of Emergency Action	Type of Emergency Potentially Causing this Action	What To Do
Evacuate	Fire Bomb Threat	<ul style="list-style-type: none"> <li>- Bring your phone</li> <li>- Leave your stuff behind</li> <li>- Meet at Assembly Point</li> <li>- Take note of anyone Missing</li> </ul>
Shelter	Tornado Hazardous Materials Spill Earthquake	<ul style="list-style-type: none"> <li>- Evacuate to Shelter Area</li> <li>- Close Doors/Windows</li> <li>- Turn off HVAC Sytem</li> <li>- Drop, Cover and hold on</li> </ul>
Lockdown	Active Shooter	<ul style="list-style-type: none"> <li>- Close, lock, block interior doors and turn out lights</li> <li>- Move away from sight</li> <li>- Place phone on silent</li> <li>- Do not open door</li> <li>- Maintain Silence</li> </ul>
Lockout	Incident at another County Facility Escaped fugitive/prisoner in the area	<ul style="list-style-type: none"> <li>- All employees return to interior of the building</li> <li>- Lock perimeter doors</li> <li>- Increase situational awareness</li> <li>- Business as usual inside the building</li> </ul>

**18.4. GENERAL GUIDELINES:**

**18.4.A.** The following is provided as a general guideline for employees who are faced with a violent person or situation.

**1) Understand the mindset of the potentially violent person.**

- a. The person posing the danger is in crisis due to some "triggering" event and is operating outside the bounds of acceptable workplace behavior in word and demeanor.
- b. Do not try to put off or brush off the person. He/she has a compelling need to communicate his/her grievance to someone immediately.

**2) Take the moral high road.**

- a. Establish an atmosphere of cooperation.
- b. Do not display anger, fear, or anxiety.
- c. Talk in a calm voice, lower and slower than the person does. Set the example of behavior.
- d. Be truthful in any discussion with the person. To lose credibility now could be dangerous.

**3) Listen to the person without interruption, comment, or judgement.**

- a. Offer the person a private place to talk.
- b. Do not play down the importance of the person's concerns no matter how insignificant they are to you.
- c. If you talk at all, ask open ended questions that call for long, narrative answers
- d. A person in crisis will only respond favorably to someone who is:
  1. Willing to listen.
  2. Understanding.
  3. Worthy of respect.
  4. Non-threatening.

**4) Allow the aggrieved person to suggest a solution.**

- a. A person will more readily agree to a resolution that he or she helped formulate.
- b. Assure the person that you will act on any injustices he/she has suffered – then make sure you do.

**18.4.B. Training and prevention is the best cure for workplace violence.**

The most important precaution that can be taken is to train all employees on how to recognize potentially violent behavior, how to report it, how to defuse an escalating situation, and what to do once violence begins.

Department-specific procedures should be included with the Colleton County Facilities Emergency Plan within each Department.

**19.0 ACCIDENT PREVENTION, SIGNS AND TAGS, FALL PROTECTION, AND HOUSEKEEPING (29 CFR 1910.22; 29 CFR 1910.23; 29 CFR 1910.141 AND 29 CFR 1910.145):**

**19.1. OVERVIEW:**

**19.1.A.** The Housekeeping Standard (29 CFR 1910.22) specifically states: "All places of employment, passageways, storerooms, and service rooms shall be kept clean, orderly, and in a sanitary condition. The floor of every workroom shall be maintained in a clean and dry condition. To facilitate cleaning, every floor, working place, and passageway shall be kept free from protruding nails, splinters, holes, or loose boards". Housekeeping is an important part of any safety program. Consider this quote, "Slips, trips, and falls constitute the majority of general industry accidents. They cause 15% of all accidental deaths, and are second only to motor vehicles as a cause of fatalities". Active participation by management and employees is necessary to prevent hazards caused by poor housekeeping.

**19.2. GUIDELINES:**

The remainder of this section provides guidelines to help eliminate "housekeeping" hazards in the workplace.

**19.2.A. Office Safety:**

1. Every employee is responsible to see that his/her desk and/or work area is clean and orderly. Pick up items such as pencils or paper clips and wipe up any spilled liquids. This is not the responsibility of custodial workers.
2. Household pets and other animals, except for service animals, are prohibited from County facilities. (This prohibition does not apply to the Animal and Control Department).
3. Keep an eye open for loose or rough floor coverings. Report dangerous situations to your supervisor for corrective action. If the hazard is not corrected through this process, then follow the employee safety complaint procedure.
4. All file, desk, and table drawers shall be kept closed when not in use. If you leave the desk, close all drawers before leaving. Never open more than one file drawer at a time.

5. Furniture such as tables, desks, and chairs, must be maintained in good condition and be free from sharp corners, projecting edges, wobbly legs, etc..
6. Never use chairs, desks, or other office furniture as a makeshift ladder. Use a stepladder or special use furniture/equipment. Don't overreach and lose your balance.
7. All chairs should be used sensibly. Don't tilt them or lean back in them. Don't keep defective chairs in use.
8. Don't attempt any electrical repairs.
9. Cords on electrically operated machines and telephones create a tripping hazard when left on the floor or walkways. Arrange the work area to avoid this hazard or install cord shields.
10. When using extension cords, place them so that they do not lie in a traffic area (tripping hazard) or through doors that may close and cut the cord.
11. Do not remove the ground prong of the three-prong plug. Electrical equipment with a three-pronged plug requires a three-hole receptacle. Items such as fans and other appliances designed for residential use that have only two-prong cords cannot be used in public buildings. All appliances in public buildings must have a three-pronged plug.
12. When climbing or descending stairs, use the handrails.
13. Exercise care near doorways to avoid being hit by the door when it opens.
14. Sharpened pencils should be placed point down in pencil holders. Other sharp objects – scissors, letter openers, etc., should be covered or in holders to prevent puncture wounds. Carry pencils, pens, and scissors in such a way that the sharp end cannot cause puncture wounds to you or others.
15. Report all defective equipment to your supervisor for repair.

**19.2.B.**     Ladder safety:

- 1)** In those Departments where tasks involving ladders are performed, the Department Head, supervisors, and employees will ensure that the appropriate ladder is selected for the job at hand. Routine

inspection of ladders must be included on the Department Checklist in affected Departments.

- 2) More specific information on ladder safety can be found in the Safety Manuals of the Departments that regularly employ ladders in their work.

**19.2.C. Housekeeping:**

- 1) The OSHA Housekeeping Standard addresses workplace cleanliness and establishes guidelines for the number of toilets, lavatories, and shower facilities (where necessary) that must be provided for employee use. Some of these guidelines are:
  - a. Lavatories must have both hot and cold running water, or as a minimum tepid water.
  - b. Hand soap or a similar cleansing agent must be provided. Individual soap dispensers should be provided; bar soap should be avoided.
  - c. Hot air hand dryers or paper towels must also be provided.
  - d. Toilet facilities must be kept clean and in a good state of repair.

**19.2.D. Accident Prevention Signs and Tags:**

- 1) There are five (5) types of accident prevention signs and tags. They are: Danger Signs, Caution Signs, Warning Signs, Safety Instruction Signs, and Biological Hazard Signs. These signs are used to warn or alert employees to situations that require PPE or may pose a danger.
  - a. Danger Signs are used to warn or alert employees of specific hazards/dangers or radiation. These signs will be red, black, or white, with opaque and glossy colors. Lettering must be in a contrasting color to the background.
  - b. Caution Signs are used to warn employees against potential hazards or to caution employees against unsafe practices. Caution Signs will have a yellow background with black lettering.
  - c. Safety Instruction Signs are used where there is a need to convey general instructions or suggest relative safety measures. These signs will have a standard background color of white with white lettering in a green panel.
  - d. Warning Signs are used to address a danger level between Caution and Danger. They display the appropriate message for the

particular situation, and have an orange background with lettering in a contrasting color.

- e. Biological Hazard Signs/Tags are used to alert employees to the presence of a biological hazard or to identify equipment, containers, rooms, experimental animals, etc. that may be contaminated with hazardous biological agents. These signs will be fluorescent orange or orange-red with lettering in a contrasting color.

**20.0 FACILITIES EMERGENCY PLAN/FIRE PREVENTION PLANS/PORTABLE FIRE EXTINGUISHERS (29 CFR 1910.38, 29 CFR 1910.155, 29 CFR 1910.156, 29 CFR 1910.157):**

**20.1. FACILITIES EMERGENCY PLAN:**

**20.1.A.** Every Department/Facility must have a copy of the Colleton County Facilities Emergency Plan (dated 10/22/18) that provides direction to employees in the event of such emergencies like fire, bomb threat, power failure, tornado, hurricane, severe thunderstorms, etc. The Plan must be readily available to employees, and a complete overview of it must be included in orientation and annual review training or any time a Department is moved to a new facility or when changing conditions warrant Plan amendment.

**20.1.B.** Facilities Emergency Plan elements are:

1. Emergency escape procedures and emergency escape route assignments.
2. Procedures to be followed by employees who remain in the facility to continue or complete critical plant operations before they evacuate.
3. Procedures to account for all employees after emergency evacuation has been completed.
4. Rescue and medical duties for those employees who are to perform them.
5. The preferred means of reporting fires and other emergencies.
6. Names or regular job titles of persons or Departments who can be contacted for further information or explanation of duties under the plan.

**20.2. ALARM SYSTEMS:**

**20.2.A.** In facilities where an alarm system is used, all employees must receive training in how the alarm system is to be used and when it will be used. If the system is used for multiple purposes, employees must be trained to recognize the distinctive signals that correspond to particular emergency situations.

**20.3. FIRE PREVENTION PLAN:**

**20.3.A.** Every Department must develop its own written Fire Prevention Plan, which includes the following elements (Quoted from OSHA Standard 29 CFR 1910.38):

1. A list of major workplace fire hazards and their proper handling and storage procedures, potential ignition sources (such as welding, smoking, and others) and their control procedures, and the fire protection equipment or systems that can control a fire involving these hazards and ignition sources.
2. Names and regular job titles of those personnel responsible for maintenance of equipment and systems installed to prevent or control ignition of fires.
3. Names and regular job titles of those personnel responsible for the control of fuel source hazards.
4. The housekeeping procedures that control accumulations of flammable and combustible waste materials and residues so that they do not contribute to a fire emergency.
5. Procedures for periodic review to eliminate the accumulation of potential fire hazards.

**20.4. FIRE EXTINGUISHERS:**

**20.4.A.** Fire extinguisher training is available to all employees through the Fire/Rescue Commission. Orientation, annual, and review training for employees will be scheduled throughout the year.

**20.4.B.** Fire extinguishers will be inspected periodically either by a contracted outside service agency or by in-house employees trained to perform such service checks. Extinguishers found not to be in good working order will be removed and sent to an authorized agency for repair and refilling. If repair is not possible, the extinguisher will be replaced.

**20.4.C.** Department Heads and Safety Officers must include inspection of all fire extinguishers in their normal Department inspection procedures.

**21.0 ELECTRICAL SAFETY (29 CFR 1910.301 through 29 CFR 1910.399):**

**21.1.** For most County employees exposure to electrical hazards would occur in relation to some type of office machinery or as an occupational exposure from power tools. The following are some basic requirements for diminishing these kinds of hazards:

- a. All electrical equipment used in County facilities must be grounded by connecting a three-wire cord with a polarized three-prong plug to a properly grounded three-hole **receptacle**.
- b. If extension cords are used, they must be of the three-conductor type with matching plug and receptacle.
- c. Each time it is used, an electrical tool or machine must be visually inspected for damage to cords and ground connections. The most common defects occur at the points where the cord is attached to the tool or where the cord is attached to the plug.
- d. Where electrical equipment is used in a wet location, the employee must use only low voltage equipment and must wear rubber boots and rubber gloves.
- e. Power tools must be operated with the required guards, and care must be taken not to entangle or cut power cords.
- f. Electrical panels must be labeled so breakers can easily be located and cut off in the event of an emergency. Office personnel must know where the breaker box for their office is located.

**21.2.** Due to the nature of their jobs, some County employees are potentially exposed to greater electrical hazards. For instance, Roads and Bridges personnel face potential hazards from both overhead and underground electrical transmission sources. These employees must take extra precautions when operating heavy equipment around such sources.

**21.3.** Department-specific requirements for dealing with potential occupational electrical hazards are detailed in the particular Department's Hazard Assessment/Safety Policy.

**22.0 HAND TOOLS, POWER TOOLS, LAWNMOWERS AND CHAINSAWS: (29 CFR 1910.242, 29 CFR 1910.243 and 29 CFR 1910.266):**

**22.1.** The proper use, maintenance, and storage of hand tools, power tools, lawn mowers, and chainsaws are an important part of Colleton County's Safety Program. Selecting the correct tool for the job, using appropriate PPE, handling the tool with care, keeping the tool in proper working order, and storing the tool safely are all critical components of the Program.

**22.2.** The following safety rules are established for the tools indicated:

**22.2.A.** Hand tools and power tools:

1. Select the right tool for the job.
2. Sharpen the cutting edges of the tools and carry the tools with the sharp edge down.
3. Sand the wooden handles of shovels, rakes, mauls, etc., thus preventing splinters.
4. Check the handle of each tool for tightness.
5. Check the head of each tool, such as hammers, chisels, punches, mauls, and have the tool dressed if it is mushroomed (including burrs and chipped edges).
6. Shatter-proof, clear goggles, or safety glasses must be worn when using hammers, chisels, punches, wedges, grinders, drills, wire brushes, etc. Be sure no unprotected person is in the area before using these tools.
7. Avoid using metal measuring tapes, fabric tapes containing woven metal strands, rope with wire cord, or other tools and equipment that have conductive properties while around energized circuits or equipment.
8. Use only properly insulated tools (screwdrivers, wire cutters, etc.) when working around energized electrical circuits or equipment.
9. Return tools to their proper place so that they do not fall from a ledge or create a tripping hazard.

**22.2.B.** Power tools:

1. Know your power tool. Read the operating manual carefully. Keep the manual conveniently filed for easy reference. Learn the tools applications and limitations, as well as the specific hazards peculiar to the tool. Use the proper tool for the job you are doing.
2. Ground all electrical tools – unless double insulated. If a tool is equipped with a three-prong plug, it should be plugged into a three-hole electrical receptacle. If an adaptor is used

to accommodate a two-prong receptacle, the adapter wire must be attached to a known ground. Do not rely on the screw securing the receptacle cover plate to be an acceptable ground. Never remove the ground prong of a three-prong plug.

3. Keep guards in place and in working order.
4. Keep the work area clean; cluttered areas and benches invite accidents.
5. Do not use an electric power tool in damp or wet locations.
6. All visitors should be kept a safe distance away from work areas.
7. When not in use, tools should be stored in dry, secure locations.
8. Do not force a tool; it will do the job better and safer at the rate for which it was designed.
9. Use the right tool; do not force a tool or attachment to do the job of a heavy-duty tool.
10. Loose clothing or jewelry that may get caught in moving parts should not be worn. Rubber gloves and footwear should be used when working outdoors under wet weather or soil conditions with an electrical tool.
11. Safety glasses must be worn. The appropriate respirator must be used when an operation is dusty.
12. Never carry a tool by the cord, or yank the cord to disconnect it from the receptacle. Keep the cord away from heat, oil, and sharp edges.
13. Use clamps or a vise to hold work. Keep both hands free to operate the tool.
14. Keep proper footing and balance at all times.
15. Keep tools sharp and clean at all times for the best and safest performance.
16. Disconnect tools when not in use.
17. See that keys and adjusting wrenches are removed from the tool before connecting it to the source of power.
18. Do not carry a plugged-in tool with your finger on the switch.
19. Use only approved, properly insulated and inspected extension cords. Electrical tools with three-pronged, grounded plugs require three-pronged extension cords.
20. Always examine both the cord and connections of an electrical power tool before using it. When using pneumatic

hand tools, make sure the hose is properly connected and keep the air valve closed until the gun is ready to use.

**22.2.C. Woodworking machinery:**

1. Machine guards are to be permanently attached.
2. If you are running short or narrow stock, protect your fingers by using a block.
3. Before using a circular saw, check all materials for possible warping. If a concave edge is found, always place it away from the straight edge of the table saw.
4. If the saw binds in a cut, the saw must be shut off before attempting to dislodge the lumber.
5. A rip saw shall not be used for cross cutting; nor shall a cross-cutting saw be used for ripping. A spreader and kickback fingers shall be required when using a rip saw. A spreader will be required when using a cross-cut saw.
6. Learn to stand out of the line of a possible "kickback".
7. Stand out of the line of fire to avoid being struck by the small pieces that are frequently thrown from a circular saw.
8. Never reach over any machine to get finished materials from the opposite side, to remove dust or wood particles from the saw table, or to oil the machine while it was in operation.
9. In using a joiner, never allow either hand to pass over the knife. Use both hands – one on each side of the material – using particular care at the start and finish.
10. Safety glasses must be used.

**22.2.D. Lawnmowers:**

1. Power mowers will not be left unattended with the motor running.
2. Areas to be mowed must be inspected for foreign objects before mowing. Wire, stones, bottle caps, and other debris should be removed before mowing.
3. Operators should warn bystanders about the danger of flying objects. Extreme precautions must be taken when there are children in the immediate area.
4. Operators must keep hands and feet away from the undercarriage of the mower.

5. After mowing is completed, remove dirt and grass from the mower and place the mower in a dry location under cover.
6. Power lawn mowers will not be left unattended, lifted, or tilted off the ground while the mower is running.
7. Mowers should have protective guards so as not to throw objects towards the operator or bystanders.
8. Debris should not be thrown towards streets, traffic, or parked vehicles.
9. Never add gas to a running lawnmower. The mower will be shut off at all times during fueling operations.
10. Safety glasses and hearing protection must be worn while operating mowers or weed eaters.
11. Operators of power mowers will wear steel-toed shoes.
12. A safety vest must be worn while mowing near streets and roads.

**22.2.E. Grinders:**

1. Only those employees familiar with the mounting of grinding wheels are permitted to do so. A ring test on each new grinding wheel should be completed before installation. (Perform a ring test by supporting the wheel on a rod through the arbor hole and tapping it lightly with a wooden object. A clear metallic ring indicates the absence of cracks).
2. The wheel must fit easily on the spindle. Too loose or too tight is dangerous.
3. When the wheel is mounted, stand to one side out of danger while you allow it to develop full operating speed for at least one minute. Keep sightseers out of the area while the wheel is being tested.
4. Apply work gradually to a cold wheel, since cold wheels are most subject to breakage.
5. Never store a grinding wheel on damp or concrete surfaces. Do not put oily rags on the wheel.
6. Every grinding tool must be securely fastened to the shaft before commencing work.
7. The operating speed is listed on the wheel label by the wheel manufacturer for each type of wheel. Grinding wheels are not to be operated over these speeds. Wheel speed and grinder operating speed will be verified before installation.

8. Avoid using the side of an energy wheel for grinding, unless it is specifically designed for side grinding. Side grinding weakens the wheel and may cause the wheel to burst.
9. Use the cutting edge of a grinding wheel uniformly. A grooved wheel means the wheel has been dangerously weakened.
10. Grinder bearings must be kept properly oiled and adjusted. This will help to prevent hot bearings and spindles, which are sometimes responsible for melted bushings.
11. Do not abuse the wheel by applying excessive pressure.
12. Be particularly careful when grinding narrow tools or other objects as they are apt to catch between the rest and the wheel. The tool rest is to be adjusted to within 1/8 inch of the wheel surface at all times.
13. The operator's eyes must be protected at all times when the machine is in use. All observers within 20 feet will wear eye protection.

**22.2.F. Chainsaws:**

The following information on chainsaw safety is extracted from the OSHA Standard, 29 CFR 1910.266, that applies to the logging industry. Although we are not engaged in pulpwood operations, the information applies to most of the brush clearing operations the County performs.

1. Each chainsaw placed into initial service after the effective date of this section shall be equipped with a chain brake and shall otherwise meet the requirements of the ANSI B175.1-1991 "Safety Requirements for Gasoline-Powered Chainsaws" which is incorporated by the reference as specified in Section 1910.6. Each chainsaw placed in service before the effective date of this section shall be equipped with a protective device that minimizes chainsaw kickback. No chainsaw kickback device shall be removed or otherwise disabled.
2. Each gasoline-powered chainsaw shall be equipped with a continuous pressure throttle control system which will stop the chain when pressure on the throttle is released.
3. The chainsaw shall be operated and adjusted per the manufacturer's instructions.

4. The chainsaw shall be fueled at least 10 feet from any open flame or other source of ignition.
5. The chainsaw shall be started at least 10 feet from the fueling area.
6. The chainsaw shall be started on the ground or where otherwise firmly supported. Drop starting a chainsaw is prohibited.
7. The chainsaw shall be started with the chain brake engaged.
8. The chainsaw shall be held with the thumbs and fingers of both hands encircling the handles during operation unless the employer demonstrates that a greater hazard is posed by keeping both hands on the chainsaw in that particular situation.
9. The chainsaw operator shall be certain of footing before starting to cut. The chainsaw shall not be used in a position or at a distance that could cause the operator to become off-balance, to have insecure footing, or to relinquish a firm grip on the saw.
10. Before felling any tree, the chainsaw operator shall clear brush or other potential obstacles, which might interfere with cutting the tree or using the retreat path.
11. The chainsaw shall not be used to cut directly overhead.
12. The chainsaw shall be carried in a manner that will prevent operator contact with the cutting chain and muffler.
13. The chainsaw shall be shut off or the throttle released before the operator starts his retreat.
14. The chainsaw shall be shut down or the chain brake shall be engaged whenever a saw is carried for more than 50 feet. The chainsaw shall be shut down or the chain brake shall be engaged when a saw is carried less than 50 feet if conditions such as, but not limited to, the terrain, underbrush, and slippery surfaces may create a hazard for an employee.
15. The chainsaw operator will have the appropriate hand, eye, and hearing protection, including chaps in non-emergency situations, for the lower torso before operating the chainsaw.
16. Anyone within the immediate area will be provided with the appropriate head, eye, and hearing protection while the chainsaw is in operation.

## **23.0 VEHICLE SAFETY PROGRAM:**

### **23.1. OVERVIEW:**

**23.1.A.** Colleton County's vehicle fleet is diverse ranging from passenger automobiles to large sanitation vehicles and heavy equipment for road maintenance. Safe vehicle operation, no matter the size or type of vehicle, is an important part of our Safety Program.

**23.1.B.** There are four key elements in any successful vehicle safety program:

1. Commitment by County employees in all positions to comply with the policy guidelines.
2. Careful selection and training of all employees whose positions require the driving of a County vehicle.
3. Establishment of an effective vehicle maintenance program.
4. Establishment of an active and aggressive accident investigation program.

**23.1.C.** Our current Council-approved Vehicle Policy is found in Section 4.10 of the Personnel Policy Manual. Information on the use of vehicles, safety requirements, maintenance, and accident prevention and reporting is included. All employees who drive a County vehicle must read and understand this Section.

### **23.2. HIRING FOR DRIVING POSITIONS:**

**23.2.A.** Selecting an employee for a driving position requires a careful screening process. Department Heads and supervisors should consider the following:

1. Is the driver licensed to operate the vehicle required to perform the duties of the position?
2. If licensed, what is the applicant's level of experience with the vehicle he/she will be driving?
3. Does the applicant display a responsible attitude towards safe vehicle operation?
4. Does the applicant display proper respect for public safety both on and off the job?
5. What is the applicant's knowledge of applicable driving regulations?

6. What is the applicant's past driving history or experience? Has the Department required the applicant to provide a 5-year motor vehicle driver's license record?
7. Has the applicant been given a driving skills test to demonstrate his/her knowledge and expertise on the vehicle he/she will operate?
8. Does the applicant have any medical condition that might affect his/her ability to operate a vehicle safely?

### **23.3. DRIVER TRAINING:**

**23.3.A.** Safety training for drivers will occur at the time of hire, annually for review purposes, anytime a driver becomes responsible for operating a different type of vehicle, and whenever performance issues indicate that additional training is needed. All driver training will be documented and copies of the documentation will be maintained in the employee's training files. The documentation should include the date, topic covered, and the names of all employees in attendance.

**23.3.B.** The training will include:

1. Review of the overall County Vehicle Safety Policy with particular emphasis on safe vehicle operation, accident reporting requirements, conformance, and performance requirements, maintenance responsibilities, etc.
2. Review of Department-specific Vehicle Safety Policy including procedures for reporting accidents and mechanical breakdowns.
3. Hands-on equipment familiarization to minimize unintentional equipment misuse and abuse.
4. Explanation of any assigned routes and schedules.
5. Instruction on completion of pre-trip and post-trip vehicle inspection reports. (A sample form appears at the end of this chapter).
6. Outside training courses such as defensive driving or the operation of specialized vehicles like police cars, fire trucks, and ambulances may also be offered as budget and Department schedules permit.

### **23.4. DRIVER SUPERVISION:**

**23.4.A.** After an employee has completed all required training and begun driving, he/she will be periodically monitored through supervisory "ride-alongs" or Driver Observation Reports.

- 1) A "ride-along" program consists of the Department Head, supervisor, or designated, senior, experienced driver riding with another driver to observe driving skills.
- 2) The Driver Observation Report is a report completed by the Department Head, supervisor, or a designated, senior, experienced driver documenting observation of a driver in the performance of his/her duties. The report should include the following information:

- a. Date of report
- b. Time of day
- c. Identification of the vehicle and if possible the driver. This can be documented either with the vehicle number or license numbers.
- d. Approximate location where the vehicle was observed.
- e. The observer's estimate of the vehicle speed; recorded as over posted limits, within posted limits or below posted limits.
- f. Weather conditions at the time of observation.
- g. Traffic conditions at the time of observation.
- h. Length of time vehicle was observed.
- i. A remarks section for additional comments by the observer.

A sample form is included at the end of this section. Once completed, the form should be filed in the employee's training file or personnel file as appropriate.

**23.4.B.** Both the "ride-along" and the driver observation programs are management tools to document good, safe performance or to discover and correct through remedial training any driver deficiencies.

**23.4.C.** For all employees for whom driving is a primary part of their jobs, supervisors/Department Heads will conduct annual driving record reviews.

## **23.5. DRIVER/OPERATOR RESPONSIBILITIES:**

**23.5.A.** The driver/operator carries the greatest responsibility for the safe operation of County vehicles and equipment. In addition to the requirements found in the Vehicle Policy, Section 4.10 of the Personnel Policy Manual, drivers/operators must:

1. Have and maintain a valid operator's license;
2. Be capable of passing a physical examination and/or alcohol/drug test when a question of fitness to drive arises due to prolonged or serious illness, the occurrence of an accident involving the employee, or the occurrence of other "for cause" situations under the County's Alcohol & Drug Testing Policy;
3. Be capable of satisfactorily completing a driving "ride-along" monitoring;
4. Obey traffic laws at all times;
5. Exercise special precaution when:
  - a. Driving in an area where children are playing on the roadway or near the curb.
  - b. Passing schools, playgrounds, or school buses.
  - c. Approaching pedestrians or persons on bicycles.
  - d. Adverse weather or road conditions are encountered.
6. Complete periodic inspections and preventative maintenance services as directed by their Department Head. No vehicle will be operated if any controlling mechanism (such as steering, brakes, headlights, horn, or windshield wipers) is not in proper working condition;
7. Wear seat belts at all times (Any passengers are required to do the same);
8. Not leave the key in the ignition of a County vehicle for any reason when the vehicle is unoccupied or parked.

**23.6. SAFE DRIVING PROCEDURES:**

**23.6.A.** Colleton County vehicle and equipment drivers/operators are expected to operate County-owned vehicles safely at all times. To aid employees in the accomplishment of that task the following tips are offered:

1. Defensive driving: As a defensive driver, you are expected to exercise more caution than merely observing traffic laws and rules. You should always drive with the expectation that you can defend yourself against any sudden situation. To

do so, you should expect and make allowances for the reckless and careless actions of others, staying constantly on the alert. Look and think far enough ahead to be able to take necessary preventative actions should the need arise. Adjust your driving to meet all conditions of traffic, roads, and weather.

2. Driver's license: Drivers will carry their driver's license with them at all times when operating motor vehicles. Drivers are required to report any changes in their license status to their supervisor or Department Head immediately including expiration, revocation, or restriction of driving privileges. Should driving privileges be limited by the state, the County is under no obligation to accommodate the person in a different position; in other words, loss of driving privileges may result in dismissal. Failure to report changes in driver's license status may result in disciplinary action.
3. Seat belts: Seat belts will be worn by drivers and all passengers at all times. It is the responsibility of the driver to see to it that passengers are buckled up before starting up. Fire/Rescue employees, whose vehicles are not equipped with seat belts, are exempt from this rule, however, if a vehicle has seat belts, employees must wear them.
4. Riders and passengers: No unauthorized riders are allowed in or on County vehicles. Seats will not be overcrowded beyond the capacity of the available seat belts. Under no circumstances are persons allowed to ride in the back of trucks.
5. Intersections and railroad crossing: Many severe accidents occur at intersections and railroad crossing. When negotiating intersections, observe the following practices:
  - a. When approaching an intersection reduce your speed, with your foot off the throttle and over the brake. This reduces your stopping reaction time. Reduce speed further or stop at blind intersections.
  - b. Always be ready to take evasive action and to sacrifice the right of way. A green light does not guarantee safe passage.
  - c. Upon entering an intersection, look first left and then right. At an intersection of roads, the vehicle on the right has the right of way if both reach the intersection at the

same time, but never assume this will always happen. Yield accordingly.

- d. At railroad crossings, the rule is "Stop, Look and Listen". Come to a complete stop and proceed only if the way is clear. Shift gears before entering the crossing and not while in it.

6. **Passing:** Overtaking and passing other vehicles should be attempted only when it is safe to do so. When passing, you are more exposed to a variety of accident types. Before attempting to pass, a driver should determine the following:

- a. Is it necessary to pass?
- b. Do I have ample time to pass?
- c. Can the pass be made without interrupting the normal flow of traffic?

A "NO" to any of these questions should cause a reconsideration of the maneuver. When passing, observe the following practices

- a. Always give yourself plenty of time to pass; lack of time or space may force you to "cut in" and disrupt other traffic. On two-lane roads, have a good feel for both the speed and acceleration of your vehicle and the speed of any oncoming vehicle before attempting to pass.
- b. Before you pass, look to the rear and signal the traffic following you. Be sure there is nothing in front of the vehicle you are going to pass that might cause it to turn into you or prevent you from returning to your lane safely.
- c. On two or three-lane roads always pass on the left.
- d. Never pass in or near an intersection, on a hill, on a curve, or in the vicinity of pedestrians.
- e. When being passed by another vehicle, keep well to the right in your lane and if necessary reduce speed to accommodate the passer. Do not signal other drivers that it is safe to pass; doing so may burden you and the County with partial responsibility for any ensuing accident.

7. Following: Following too closely is a common cause of accidents. Never follow another vehicle so closely that you cannot stop safely if the vehicle ahead makes an emergency stop. Allow at least one vehicle length between you and the vehicle ahead for every ten miles per hour of speed. Also, use a three-second time interval for adequate following distances at moderate speeds; increase for adverse driving conditions.
8. Backing: A significant amount of automobile accidents involve backing. To avoid backing accidents, the best rule is to avoid backing situations themselves whenever possible. Plan your turns and parking so that backing is unnecessary. When backing is necessary, be certain that nothing is behind your vehicle. Check all rearview mirrors and provide sufficient mirrors to eliminate any "blind spots" behind your vehicle. Try to have someone guide you by standing to one side to signal, especially if you do not have a clear view of the back-up area behind you. Be sure the guide never stands behind your vehicle. Even with a guide you are still the one in control, so do not depend entirely on the judgement of the guide. When there is no clear rear view and no guide is available, you should stop and get out of the vehicle and inspect the backing area before proceeding. Never back around a corner or intersection to turn around or park. When using a driveway to turn around, back into it from the street if possible to be able to drive out forward into the street traffic. Always stop before backing over sidewalks or other pedestrian rights of way. Back slowly and in stages, especially in longer backing situations. Always be aware of your surroundings.
9. Hard braking and skidding: To avoid skidding and possible loss of control of the vehicle, the best rule is to avoid hard braking in the first place. This is done by governing your speed appropriately to the situation, not following too closely, and not speeding. When braking is necessary, apply brake pressure steadily and slowly to avoid locking the brakes. Keep the steering straight if possible, especially in wet conditions. If you find yourself in a skid in a rear-wheel vehicle, turn the wheels in the direction of the skid but not beyond. Drivers of front-wheel drive vehicles should turn the wheels in the opposite direction of the skid. A secondary skid can be more dangerous than the first.

Holding the skid and maintaining controlled acceleration can cause the vehicles to spin out. When you feel traction, steer back to the center of your lane. When entering curves, reduce speed and begin to brake if necessary. Apply steady and light acceleration through the turn.

10. Stopping and parking: Stopping or parking on road shoulders, curves, steep inclines, where visibility is limited, and on other rights of ways should be avoided whenever possible. Avoid mud, sand, or other soft ground conditions. Avoid stopping for extended periods where other traffic's view may be obstructed by your vehicle. When stopping along the roadside is unavoidable, use the vehicle's emergency flashing light – especially at night. Avoid parking spots that will require subsequent backing into traffic. When parking set the vehicle's transmission in park or lowest gear and set the parking brake. On inclines, turn the wheels toward the curb and away from the road. Avoid opening vehicle doors into traffic, but, if it is necessary to do so, exercise extreme caution while opening the door. When vehicles are unattended – even temporarily – never leave the keys in the ignition and always lock the vehicle.
11. Load security and weight limits: All vehicle drivers must remember that regardless of who loads a truck or vehicle, it is the driver's responsibility to ensure the vehicle is within its proper weight limits. Additionally, the driver is responsible for securing the load properly. Colleton County will not assume responsibility for traffic violations incurred because the driver has not properly secured a load or because the vehicle is overweight. If the vehicle cannot be brought into compliance with weight laws and load security, the truck will be off loaded until it is in compliance. Vehicles will not leave a loading area until the load is properly secured and does not present a safety hazard to the driver or the general public.
12. Adverse driving conditions:
  - a. Night: Statistics show that 80% of fatal accidents occur between 8:00PM and 8:00AM. When driving after dark, you should automatically increase your alertness. Turn on your headlights when light first begins to fade. At night, reduce your speed accordingly and drive at speeds that permit stopping within the visibility range of

headlights and street lights. When using high beams, you must dim them within 500 feet of an oncoming vehicle and within 300 feet of another vehicle you are overtaking and passing.

- b. Fog: Visibility is seriously restricted under foggy conditions and objects may appear distorted. Reduce your speed so that the stopping distance does not exceed one-half of the distance you can see. Keep headlights on low beam; remember that parking lights should be used for parking only. Stop if extremely poor visibility warrants it; pull off the road and use your emergency flashing lights.
- c. Rain/Snow/Ice: Rainy and especially icy/snowy conditions greatly increase the possibility of skid, resulting in accidents. To improve visibility, windshield wipers and blades must work properly. Use your headlights on low beam. Regulate your speed according to road conditions to allow for a controlled stop in an emergency. Check your brakes periodically. Winter means more darkness, less visibility, reduced traction, and cold weather conditions requiring greater driver alertness and skills. Add the extra margin of safety between your vehicle and others. When appropriate, have tire chains available and know how to use them.

### **23.7. ACCIDENT REPORTING AND INVESTIGATION:**

**23.7.A.** In the event of an accident involving a Colleton County owned vehicle, the operator and each employee present, must notify his/her supervisor or the County Administrator immediately. The operator of the vehicle should stay at the scene of an accident until it has been properly investigated by the appropriate law enforcement agency and should obtain a copy of the accident report, the names of the witnesses, and insurance information of all parties involved, if possible.

**23.7.B.** Accidents resulting in injury or property damage must be reported to the employee's immediate supervisor as soon as possible. The supervisor will require a written accident report from the involved employee. The written report will be forwarded to the Risk Manager within twenty-four (24) hours of the accident. Failure to report an accident or to file a written report, if required, may result in disciplinary action.

**23.7.C.** In addition to the employee's written accident report, Department Heads are required to forward within two (2) work days the following information to the Risk Manager:

1. The FR10 or other law enforcement accident report.
2. Photographs of the vehicle or property involved (if available);
3. At least two estimates for repair of any damage to County vehicle or property;
4. Any additional information that is pertinent to the accident or an investigation of the accident.

**23.8. VEHICLE MAINTENANCE PROCEDURES:**

**23.8.A.** When a particular vehicle is assigned to a driver/operator, that employee accepts the following responsibilities:

**1) Cleaning and Preventative Maintenance:**

- a. Keeping the vehicle clean inside and out. The vehicle will be free of interior debris or trash, especially that which could impair operation. Necessary objects will be secured or contained.
- b. Performing periodic basic checks including, but not limited to, inspecting tires (including the spare tire), checking coolant and oil levels, checking the battery, inspecting windshield wipers and fluid levels, lights, turn signals, and general body conditions. Such checks should be completed on a schedule as prescribed by the Department Head.
- c. Ensuring that periodic maintenance of the vehicle is performed at the County Shop or other designated maintenance facility.
- d. Ensuring that non-safety or non-essential repairs are completed during the next scheduled periodic maintenance or sooner at the discretion of the Department Head.
- e. Reporting emergencies and mechanical failures immediately to the Department Head.
- f. Maintaining the security of all special equipment (fire extinguisher, flashlights, first aid kits, etc.,) and vehicle information (warranty booklet, tag registration cards, owner's manual, driver accident information forms, fuel cards, etc.) kept in the vehicle.
- g. Maintaining records as required by the Department Head for the vehicle during the period of use.

**2) Vehicle Inspection:**

- a. Inspecting vehicles daily using the Department's approved vehicle pre-trip and post-trip inspection form. The completed form will be turned in to the employee's supervisor daily.
- b. Any employee who is instructed to drive a vehicle he/she feels is unsafe has the right to contact his/her Department Head and/or a Safety Committee Member for an inspection and a decision as to whether the vehicle should be driven.

**23.9.** The following is a sample Pre-Trip/Post-Trip Inspection Report. Departments may adapt this report for their use.

<b>SAMPLE: Vehicle Safety Inspection Report (Pre-trip and Post-Trip)</b>		
Name of Driver:		Vehicle Number:
Inspected by:		Date:
Vehicle, Make, Model and Year:		Mileage:
Driver/Inspector's Signature:		
<b>For all items listed below, check if okay. If not, explain separately on this form and notify your Supervisor.</b>		
<b>YES</b>	<b>NO</b>	<b>Exterior of Vehicle</b>
		Body-dents, scratches, rust, cleanliness
		Headlights – broken lens, bulbs, odd angle
		Rearview mirrors – broken or cracked glass, adjust if necessary
		Tailights, brake lights, left and right turn signals – broken or cracked lens, burnt out bulbs, inoperative
		Tires – poor air pressure and tread. Uneven wear, cuts or bulges
		Windshield, windows – cracks discoloration, unnecessary/vision obstructing stickers
		Windshield wipers – worn blades
		Signs of fluid underneath the vehicle
		<b>Interior/Trunk</b>
		Air conditioner, heater, defroster – proper functioning
		Horn – proper functioning
		Dashboard instruments and gauges – proper functioning
		Rearview mirror – condition and necessary adjustment
		Emergency equipment – complete items including accident reporting kit, spare tire, jack
		Seatbelts – proper condition
		Overall – cleanliness, loose objects
		<b>Mechanical</b>
		Engine – Unusual noise, stalling, hesitation, rough starting or running
		Brakes – Proper adjustment, pedal clearance. Test parking brake.
		Pulling left or right, an inadequate response
		Steering – wheel alignment/pulling left or right. Excessive play
		Transmission – unusual noises, slippage

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FULL	LOW	<b>Fluid levels</b>
		Transmission fluid level
		Engine oil level
		Radiator coolant level
		Windshield washer level
		Fuel
<p><b>List all deficiencies noted on the vehicle and any corrective action you took.</b></p>		
<p>Date deficiencies reported to Supervisor or Shop:</p> <p>Who did you report them to?</p>		
<p>Date and by whom were deficiencies corrected?</p>		



## **24.0 COMPUTER WORKSTATION:**

**24.1.** Employees who spend the majority of their time at a computer workstation can experience a number of problems from musculoskeletal disorders and repetitive motion injuries to eyestrain. Each Department Head must survey his/her Department to identify any workstation hazards. Employees should be counseled on proper work techniques that will reduce the likelihood of repetitive motion injury. The following is a checklist to aid supervisors and employees in evaluating computer workstations.

**Computer Workstation Safety Checklist**

<b>Yes</b>	<b>No</b>	<b>Are the following steps taken to prevent eyestrain:</b>
		No lighting glare or reflection?
		Does light reflect away from the operator's eyes?
		Non-reflective video display terminal (VDT) screens or screen covers?
		Does neither operator nor terminal face a window?
		Non-reflecting walls, ceilings, and surfaces?
		Are Brightness and contrast controls used?
		Take breaks to do other tasks, focus on distant objects?
		Eye exams at least annually for operators?
<b>Yes</b>	<b>No</b>	<b>Are the following steps taken to avoid neck and back pain:</b>
		Swivel terminal and detachable keyboard?
		Screen 12 to 18 inches from operators face?
		Top of screen and document holder no higher than eye level?
		Keyboard set for easy reach with hand and forearm straight and parallel to the floor, upper arm at right angle to forearm?
		Sturdy, comfortable chair with more than one seating position?
		Does the chair backrest adjust to support the lower back?
		Chair-height adjustable, so the user's feet rest on floor or footrest?
		Seating position with back against the chair, shoulders straight, and feet on the floor?
		Room for paperwork on top work surface, legs beneath?
		Breaks from VDT work at least every two hours?
<b>Yes</b>	<b>No</b>	<b>Are the following steps taken to reduce stress:</b>
		VDT area soundproofed?
		Alternate VDT work with other tasks?
		Muscle-loosening exercises?
<b>Yes</b>	<b>No</b>	<b>Are the following steps taken to prevent musculoskeletal disorders:</b>
		Wrist straight when working?
		No heavy jewelry on wrists?
		Occasional breaks to stretch and shake out wrists and fingers?
		Do employees report any pain, numbness or swelling?

**25.0 LIFTING AND BACK SAFETY:**

**25.1.** Injuries to the back occur more frequently than injuries to any other part of the body, and improper lifting is probably the greatest single cause of back injury on the job. The checklist on the following pages is provided to encourage all employees to use safe lifting and back protection practices both at work and at home.

<b>Back Protection and Safe Lifting Checklist</b>	
<b>Develop good back-protection habits:</b>	
	Exercise regularly for strong flexible muscles and avoid being overweight.
	Avoid or control stress.
	Do not overestimate your strength.
	Walk, do not run, to prevent slips, trips, and falls.
	Sleep on a firm mattress, either on your side with your knees bent, or on your back with knees elevated.
<b>Seek alternatives to lifting:</b>	
	Use equipment hoists, hand trucks, and dollies rather than lifting when possible.
	Push, do not pull, loaded hand trucks or dollies.
	Break a load into several small ones.
	Get a helper to lift heavy or awkward objects.
	Plan jobs and work areas to minimize the need to move tools and materials.
<b>Before you lift:</b>	
	Plan the straightest, flattest, and clearest route to your destination.
	Look for places to stop and rest along the way.
	Remove any objects that you might trip over.
	Try to have a waist-high surface area for unloading.
	Make sure the area where you will unload is clear.
	Check the object you will be carrying for rough or jagged edges and slippery surfaces.
	Lift a corner of the object to check weight and stability.
	Wear gloves with a good grip, safety shoes with reinforced toes and nonskid soles, and clothing that fits snugly.
<b>Lift correctly:</b>	
	Stand close to the load, with feet firmly on the floor, about shoulder-width apart and toes pointed out.
	Squat down close to the load with back straight, knees bent, and stomach muscles tight.
	Place hands on diagonally opposite corners of the load so one hand pulls the load towards you and the other hand lifts.
	Grip the load firmly with both hands, not just the fingers.
	Bring the load as close as possible to the body. With weight centered over your feet, tuck your arms and elbows into your side, and your chin into your neck.
	Stand up slowly. Keep your back straight and let your legs do the lifting.
	Check for a good grip and the ability to see the route.
	With the load, close to the body and not above waist high, move forward with small steps.
	Change direction by moving your feet, not by twisting.

<b>Unload properly:</b>	
	Lower load slowly with knees bent so the legs do the work.
	Position hands so the fingers don't get caught under the load.
	Place the load on the edge of the surface and slide it back.
<b>Nonstandard loads and lifts:</b>	
	Lift awkward shapes by squatting next to the object with feet spread. Grip top outside corner and bottom inside corner. Then, lift correctly.
	Get as close as possible to objects in hard to get locations. Keep back straight, stomach muscles tight. Bend slightly forward at the hips and bend knees. Grip object, then use leg, stomach, and buttocks muscles to lift.
	Use a ladder to reach objects in high places; work with a helper.
	Lift in high places by breaking down the load into smaller pieces. Lift the object waist-high, rest it on a lower shelf, bend knees, lift, and straighten up.
	Push on the object to be lowered to test weight and stability. If no help is needed, slide the object as close as possible to the body. Get a good grip and slide down.
	Match heights for two-person lift and decide who says where and when to move. Lift and rise together at the signal, using proper technique. Keep the load at the same level, then move, and unload together.
<b>Sit properly:</b>	
	Sit up straight, close to desk or table, back against the chair back, knees bent, and feet on the floor.
	Use a cushion or rolled towel if needed to support the lower back.
	Turn your whole body; don't twist to reach to the side.
	Hold pages upright while reading.
	Lean your elbow on the desk while on the phone; don't cradle the phone with your neck.
	Break up long sitting periods with brief stretch and walk.
	Shift positions periodically.
<b>Stand tall:</b>	
	Stand tall and straight, not stiff.
	Stand with shoulders even and back, head up, pelvis forward.
	Raise one foot on elevation if standing at length in one place and shift feet periodically.
<b>Other back saving postures:</b>	
	Drive with back straight, knees bent.
	When working on your back, lie flat, knees bent; get up and stretch periodically.
	Shovel with hands far apart, back straight, legs bent at knees so they do the work.
	To work near the ground, bend knees and not the waist, keeping back as straight as possible.
	Catch falling objects standing with back straight, knees bent, and feet firmly on the ground. Let the legs absorb impact during catch.
	Don't jump, even from a short height, use a ladder or steps.
<b>Play it safe:</b>	
	Never ignore back pain. Stop activity, rest, and report it.

## **26.0 SAFETY POLICY FORMS:**

**26.1.** This section contains copies of approved Safety Policy Forms. Departments may reproduce these forms as necessary to have sufficient copies available.

### **26.1.A.** Colleton County Safety Policy Form 1, Supervisor's First Report of Injury

- 1)** This report is to be prepared whenever a County employee is injured on the job in the line of duty. The employee's supervisor or Department Head must complete and submit the form to the Risk Manager within one business day of the injury. Failure to report an employee injury promptly may result in disciplinary action.
- 2)** In situations where immediate emergency medical treatment is required, the supervisor or Department Head must call the Human Resources – Risk Manager as soon as possible. Most hospitals and doctor's offices verify Worker's Compensation treatment with Human Resources. Treatment will not be authorized if the accident has not been reported.
- 3)** When completing the First Report of Injury Form, provide as much detail as possible. Be specific about the injury – for instance: severe laceration to palm of the right hand; and provide details concerning how the accident happened – what the employee was doing at the time of the injury and what circumstances caused the injury – for instance: an employee was delivering paperwork to Auditor's Office and slipped on a wet floor in a hallway on the second floor of Harrelson Building.

## SUPERVISOR'S FIRST REPORT OF INJURY

**(This report is to be completed by the Supervisor and forwarded to the Risk Manager within 24 hours of the employee being injured!)**

### **1. EMPLOYEE INFORMATION:**

Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Marital Status: \_\_\_\_\_ DOB: \_\_\_\_\_

Department: \_\_\_\_\_ Phone #: \_\_\_\_\_

Employee Status: F/T \_\_\_ P/T \_\_\_ Prisoner \_\_\_ Volunteer \_\_\_ Other: \_\_\_\_\_

Hire Date: \_\_\_\_\_ Occupation: \_\_\_\_\_

### **2. INJURY INFORMATION:**

Date of injury: \_\_\_\_\_ TIME OF INJURY: \_\_\_\_\_ am/ pm

Last date worked: (If employee has not returned to work) \_\_\_\_\_

Location of accident: \_\_\_\_\_ County Property: Yes \_\_\_ No \_\_\_

Date employer notified: \_\_\_\_\_ Individual notified: \_\_\_\_\_

Witness name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Phone #'s: Home: \_\_\_\_\_ Work: \_\_\_\_\_

### **3. Injury Details:**

a. Describe nature of injury (include body part(s) affected; amputation of right index finger at 2d joint, fracture of arm below or above the elbow, burns, etc) (Continue in Item 6 or on a separate page if necessary):

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b. Describe employees activities when injury occurred (include names of other individuals involved, tools, machinery, chemicals or unnatural motion(s) of employee - Give as much detail as possible)(Continue in Item 6 or on a separate page if necessary):

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**4. Safety Equipment (PPE):**

Was appropriate Safety equipment (PPE) used? (i.e., gloves, aprons, glasses, etc) Yes No

Was appropriate PPE provided? Yes\_\_\_ No\_\_\_ If no, why wasn't the PPE provided?\_\_\_\_\_

(The following questions apply only to the Detention Center, Fire & Rescue, Codes Enforcement, Animal Control Services, Sheriff's Department and Facilities Management)

Did this injury occur as result of an Infection Control Exposure Incident; either blood borne or airborne? Yes\_\_\_ No\_\_

Was an Infection Control Exposure Incident Report filed with the Department's Designated Officer per the Infection Control Plan? Yes\_\_\_ No\_\_\_

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**5. Medical Information/Treatment:**

Physician's Name and Address: \_\_\_\_\_

Was the employee treated at a hospital? Yes No

Which Hospital (Name and Address)

Was the employee hospitalized? Yes\_\_\_ No\_\_\_

Was the employee treated: Emergency Room Yes\_\_\_ No\_\_\_

Out-patient Yes\_\_\_ No\_\_\_

In-house treatment: Yes\_\_\_ No\_\_\_

First Aid: Yes\_\_\_ No\_\_\_

Was the employee transported by an EMS Service or a Volunteer Rescue Squad as a result of the accident? Yes\_\_\_ No\_\_\_ If so what service or Rescue Squad transported the employee?\_\_\_\_\_

6. Remarks or information continued from item 3:

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Prepared by: \_\_\_\_\_

Date: \_\_\_\_\_

**26.2.** Colleton County Safety Policy Form 2, Colleton County Non-Employee Injury Report

**26.2.A.** This report is to be prepared whenever an individual who is not a County employee is injured on County property or as a result of an accident with a County vehicle/equipment. The supervisor or Department Head at the site of the accident or to whom the driver/operator reports must complete and submit the form to the Risk Manager within one business day of the incident.

**26.2.B.** In situations where immediate emergency medical treatment is required, the supervisor or Department Head must call the Risk Manager as soon as possible.

**26.2.C.** When completing this form, please provide as much detail as possible. The information will be passed on to our insurance carrier if necessary. If the injured party refused medical assistance, ask him/her to sign the form indicating that assistance was offered and refused. If the person will not sign, indicate in that space that the injured party would not sign the form.

## Colleton County Non-Employee Injury Report

(This report must be completed and submitted to the Risk Manager within twenty-four (24) hours of the accident/incident. Prepare one (1) form for each person involved.)

**1. Person Involved in Injury/Incident:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
SSN: \_\_\_\_-\_\_\_\_-\_\_\_\_ Age: \_\_\_\_ DOB: \_\_\_\_\_ Sex: Male:\_\_\_\_ Female:\_\_\_\_  
Phone #: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

**2. When and Where did the Injury/Incident occur?**

Date of the Injury/Incident: \_\_\_\_\_ Time: \_\_\_\_\_ AM/PM  
Location of Injury/Incident: \_\_\_\_\_  
What was the person's activity at the time of the injury/incident?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Describe the injury/incident - be as specific as possible: What part of the body was affected; (i.e., right arm):**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Was EMS called? Yes\_\_\_ No\_\_\_ Was First Aid offered? Yes\_\_\_ No\_\_\_  
Was First Aid accepted? Yes\_\_\_ No\_\_\_  
Did the person refuse First Aid or request that EMS not be called? Yes\_\_\_ No\_\_\_

**If the person refused First Aid or Medical assistance, have the individual sign this form.**

**The person's signature only verifies that assistance was offered and declined. It does not prohibit the person from seeking medical assistance at a later time!**

\_\_\_\_\_  
(Injured person's Signature)

Was the individual transported by EMS to an Emergency Room or Medical Facility? Yes\_\_\_ No\_\_\_

If yes, what facility was the person transported to? \_\_\_\_\_

3. Have the individual completely describe what happened (Use additional pages if necessary):

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4. List all witnesses (both public and County employees) who saw the injury/incident occur: (Provide the name, address and phone numbers for the witnesses and Use additional pages if necessary):

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5. Describe the scene of the injury/incident from the Supervisor's observations. (Provide as much detail as possible - Use additional pages if necessary):

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6. Any Contributing factors to the injury/incident:

**Lighting:** Day\_\_\_ Night\_\_\_ Twilight\_\_\_ Artificial\_\_\_ Other (explain)\_\_\_\_\_

**Weather:** Rain\_\_\_ Snow\_\_\_ Cold\_\_\_ Hot\_\_\_ Fog\_\_\_ Storms\_\_\_ What type of storm?\_\_\_\_\_ Other (explain)\_\_\_\_\_

**Medical Aids:** Glasses\_\_\_ Braces\_\_\_ Hearing Aid\_\_\_ Wheel chair\_\_\_ Walker\_\_\_ Cane\_\_\_ Other (explain type medical aid that may have contributed to the accident/incident):\_\_\_\_\_

Did the person have a medical condition (i.e., heart condition, stroke, diabetes, etc) that may have contributed to the accident/incident: \_\_\_\_\_

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COLLETON COUNTY SAFETY POLICY MANUAL

Did the person's clothing contribute to the accident? Yes\_\_\_ No\_\_\_

Was the clothing too loose or fit too tight for the activity the person was conducting? Yes\_\_\_ No\_\_\_

Explain how the clothing contributed to the injury/incident:

\_\_\_\_\_

Did any of the following contribute to the accident? Shoes\_\_\_ Skates\_\_\_ Jacket\_\_\_ Jewelry\_\_\_  
Hat\_\_\_ Horseplay\_\_\_ Alcohol\_\_\_ Other (specify)\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature and Date of Person Completing Report

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature and Date of Person Assisting with Report

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Head Review/Authorized Signature

\_\_\_\_\_  
Date

\_\_\_\_\_

**26.3.** Colleton County Department Accident Investigation Form, Form 3:

**26.3.A.** This form will be used by supervisors or Department Heads to document their investigation of any accident involving their respective Department personnel, equipment or vehicles. This report will be prepared in addition to any First Report of Injury or Non-Employee Injury Report Forms required and will be submitted to the Risk Manager within one business day of the accident.

**SOUTH CAROLINA ASSOCIATION OF COUNTIES WORKERS COMPENSATION TRUST  
ACCIDENT INVESTIGATION FORM**

<b>1. MEMBER</b>		<b>2. EMPLOYEE</b>		<b>3. DEPARTMENT</b>	
<b>4. EXACT LOCATION</b>	<b>5. DATE OF OCCURENCE</b>	<b>6. TIME</b>		<b>7. DATE REPORTED</b>	
<b>D E S C R I P T I O N</b>	<b>8. DESCRIBE CLEARLY HOW THE INCIDENT OCCURRED:</b>				
<b>9. WITNESSES</b>			<b>10. TELEPHONE</b>		
If the employee was injured in a motor vehicle accident, please complete the attached motor vehicle accident supplement.					

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DIRECT CAUSES		BASIC CAUSES
UNSAFE ACTS	UNSAFE CONDITIONS	WORK SYSTEM
Lack of skill or knowledge	Inadequate guards or protection	Inadequate hiring/placement practices
Failure to follow operation or maintenance procedure/method	Defective tools, equipment, machine, or vehicle	Inadequate enforcement of work rules and procedures
Failure to use guards provided	Congested work area/roadway	Inadequate job instruction/training
Failure to use personal protective equipment	Unsafe floors, ramps, stairways, platforms	Inadequate safety procedures
Making safety devices inoperable	Poor housekeeping	Inadequate preventative maintenance
Operating vehicle, equipment, or machine at unsafe speed or in an unsafe manner	Hazardous atmosphere: gases, dust, fumes, vapors	Inadequate environmental control program
Using known defective equipment	Hazardous chemicals/substances	Inadequate job planning methods
Operating without authority	Inadequate warning system	Improper layout or design of work area
Improper lifting, lowering or carrying technique	Fire or explosion hazards	Unsafe design or construction of tools, equipment, or machine
Unsafe lifting, lowering, or placing	Improper material storage	Inadequate medical monitoring
Taking unsafe position	Inadequate ventilation	Inadequate supervision
Influence of alcohol or drugs	Excessive noise	Other – explain in detail
Unaware of hazards	Radiation exposure	<b>INDIVIDUAL</b>
Unsafe act of employee	Poor road conditions	Pre-existing physical condition
Other – Explain in detail	Limited visibility	New physical impairment/condition
	Adverse weather	Physical impairment due to drug use
	Other – Explain in detail	Learning disability
		Employee insubordination or dishonesty

<b>P R E V E N T I O N</b>	<b>11. What actions have been or will be taken to remove direct causes? List all items in sequence:</b>	<b>By Whom:</b>	<b>When:</b>
	<b>12. What actions have been taken to remove the Basic Cause(s)? List the steps that will be taken to remove the Basic Cause(s) to help prevent similar accidents in the future.</b>	<b>By Whom:</b>	<b>When:</b>
<b>13. Investigated by:</b>	<b>Date:</b>		

<b>Motor Vehicle Accident Investigation Supplement</b>	
Employee/driver name:	Department:
Vehicle make/model/year:	Vehicle mileage:
Did police report state that employee contributed to the accident?	Was employee cited? If yes, which violation was cited?
Was employee drug tested?	Was employee wearing a seat belt?
Was this accident preventable? If, yes how could the employee have avoided the accident?	Did the employee receive sanction? If yes, list sanctions:
Has this employee had previous motor vehicle accidents in County vehicles? If yes, please describe briefly.	When was the last motor vehicle record review for this driver?
Has this employee taken a defensive driving class? If yes, what was the name of the class and when was it taken?	

**26.4.** Colleton County Safety Policy Form 4, Safety Work Order

**26.4.A.** This form will be used to report any unsafe condition or problem with County buildings, facilities, property, vehicles, or equipment. Any County employee may complete this form and submit it to the Risk Manager or a representative of the Safety Committee.

**26.4.B.** The form will then be routed to the Department Head responsible for the facility or equipment in question to provide him/her with the opportunity to make repairs or eliminate the problem. If the problem cannot be required at the Department level, then the form must be forwarded to the Facilities Management Director for action.

**26.4.C.** When repair or elimination of the problem is completed, the Department Head or Facilities Management Director will describe the action taken and return the form to the Risk Manager. The Risk Manager may review the problem and repair process with the Safety Committee.

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<b>Colleton County Safety Work Order</b>		Copy To: _____ _____ _____
<b>DATE/TIME UNSAFE CONDITION LOCATED:</b>	<b>Department or area where the unsafe condition is located:</b>	
<b>Name and phone number of person reporting unsafe condition:</b>		
Provide a brief description of the unsafe condition and the actions taken to prevent an accident while awaiting repair. (Use the reverse side of form if more space is required).		
Was the unsafe condition repaired by the reporting person? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Does the repair require Maintenance personnel to repair? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Provide the date this condition was reported to Facilities Management: _____		
<b>FOR FACILITIES MANAGEMENT:</b> Briefly describe the repairs made and the date the repairs were completed. (Use the reverse side of the form if more space is required).		
<b>Date of review by the Safety Committee:</b>		

**26.5. OSHA Checklist(s):**

**26.5.A.** Attached is an OSHA Self-Inspection checklist. This checklist is one that can be adapted to fit each Department. Department/Office Heads must develop complete checklists for their specific Department needs.

## **OSHA Self-Inspection Checklist**

### **Safety and Health Programs**

	Do you have an active safety and health program in operation that deals with general safety and health program elements as well as management of hazards specific to your worksite?
	Is one person 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 reports 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?
	Have you considered incentives for employees or workgroups who have excelled in reducing workplace injuries/illnesses?

### **Personal Protective Equipment**

	Are employers assessing the workplace to determine if hazards that require the use of personal protective equipment (for example, head, eye, face, hand, or foot protection) are present or are likely to be present?
	If hazards or the likelihood of hazards are found, are employers selecting and having affected employees use properly fitted personal protective equipment suitable for protection from those hazards?
	Has the employee been trained on PPE procedures that is, what PPE is necessary for job task, when they need it and how to properly adjust it?
	Are protective goggles or face shields provided and worn where there is any danger of flying particles or corrosive materials?
	Are approved safety glasses required to be worn at all times in areas where there is a risk of eye injuries such as punctures, abrasions, contusions, or burns?
	Are employees who need corrective lenses (glasses or contacts) in working environments having harmful exposures, required to wear only approved safety glasses, protective goggles, or use other medically approved precautionary procedures?
	Are protective glove, aprons, shields, or other means provided and required where employees could be cut or where there is a reasonably anticipated exposure to corrosive liquids, chemicals, blood, or other potentially infectious materials? See 29 CFR 1910.1030(b) for the definition of "other potentially infectious materials".
	Are hard hats provided and worn where the danger of falling objects exists?

	Are hard hats inspected periodically for damage to the shell and suspension system?
	Is appropriate foot protection required where there is the risk of foot injuries from hot, corrosive, or poisonous substances, falling objects, and crushing or penetrating actions?
	Are approved respirators provided for regular or emergency use where needed?
	Is all protective equipment maintained in a sanitary condition and ready for use?
	Do you have eyewash facilities and a quick drench shower within the work area where employees are exposed to injurious corrosive metals? Where special equipment is needed for electrical workers, is it available?
	Where food or beverages are consumed on the premises are they consumed in areas where there is no exposure to toxic materials, blood, or other potentially infectious materials?
	Is protection against the effects of occupational noise exposure provided when sound levels exceed those of the OSHA noise standard?
	Are adequate work procedures, protective clothing and equipment provided and used when cleaning up spilled toxic or otherwise hazardous materials or liquids?
	Are there appropriate procedures in place for disposing of or decontaminated personal protective equipment contaminated with or reasonably anticipated to be contaminated with blood or other potentially infectious materials?

**Flammable and Combustible Materials**

	Are combustible scrap, debris, and waste materials, oily rags, etc., stored in covered receptacles and removed from the worksite promptly?
	Is proper storage practiced to minimize the risk of fire including spontaneous combustion?
	Are approved containers and tanks used for storage and handling of flammable and combustible liquids?
	Are all connections on drums and combustible liquid piping vapor and liquid tight?
	Are all flammable liquids kept in closed containers when not in use (for example, parts cleaning tanks, pans, etc.)?
	Are bulk drums of flammable liquids grounded and bonded to containers during dispensing?
	Do storage rooms for flammable and combustible liquids have explosion-proof lights?
	Do storage rooms for flammable and combustible liquids have mechanical or gravity ventilation?
	Is liquefied petroleum gas stored, handled, and used per safe practices and standards?
	Are "NO SMOKING" signs posted on liquefied petroleum tanks?

	Are liquefied petroleum tanks guarded to prevent damage from vehicles?
	Are all solvent wastes and flammable liquids kept in fire-resistant covered containers until they are removed from the worksite?
	Is vacuuming used whenever possible rather than blowing or sweeping combustible dust? Are firm separators placed between containers of combustibles or flammables when stacked one upon another to assure their support and stability?
	Are fuel gas cylinders and oxygen cylinders separated by distance and fire-resistant barriers while in storage?
	Are fire extinguishers selected and provided for the types of materials in areas where they are used? <input type="checkbox"/> Class A – Ordinary combustible materials fires. <input type="checkbox"/> Class B – Flammable liquid, gas, or grease fires. <input type="checkbox"/> Class C – Energized electrical fires.
	Are appropriate fire extinguishers mounted within 75 feet of outside areas containing flammable liquids and within 10 feet of any inside storage areas for such materials?
	Are extinguishers free from obstructions or blockage?
	Are all extinguishers serviced, maintained, and tagged at intervals not to exceed 1 year?
	Are all extinguishers fully charged and in their designated places?
	Where sprinkler systems are permanently installed, are the nozzle heads directed or arranged so that water will not be sprayed into operating electrical switchboards and equipment?
	Are "NO SMOKING" signs posted where appropriate in areas where flammable or combustible materials are used or stored?
	Are safety cans used for dispensing flammable or combustible liquids at a point of use?
	Are spills of flammable or combustible liquids cleaned up promptly?
	Are storage tanks equipped with emergency venting that will relieve excessive internal pressure caused by fire exposure?
	Are "NO SMOKING" rules enforced in areas involving the storage and use of hazardous materials?

**Hand and Portable Powered Tools**

**Hand Tools and Equipment**

	Are tools and equipment (both company and employee-owned) used by employees at their workplace in good condition?
	Are hand tools such as chisels and punches that develop mushroomed heads during use, reconditioned or replaced as necessary?
	Are broken or fractured handles on hammers, axes, and similar equipment replaced promptly?
	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 jacks checked periodically to ensure they are in good operating condition?
	Are tool handles wedged tightly in the head of all tools?
	Are tool cutting edges kept sharp so the tool will move smoothly without binding or skipping?
	Are tools stored in dry, secure locations where they won't be tampered with?
	Is eye and face protection used when driving hardened or tempered studs or nails?

**Portable (Power Operated) Tools and Equipment**

	Are grinders and similar equipment provided with appropriate safety guards?
	Are power tools used with the correct shield, guard, or attachments recommended by the manufacturer?
	Are portable circular saws equipped with guards above and below the base shoe? Are circular saw guards checked to assure they are not wedged up, thus leaving the lower portion of the blade unguarded?
	Are rotating or moving parts of equipment guarded to prevent physical contact?
	Are all cord-connected, electrically operated tools and equipment effectively grounded or of the approved double insulated type?
	Are effective guards in place over belts, pulleys, chains, sprockets on equipment such as concrete mixers and air compressors?
	Are portable fans provided with full guards or screens having openings 1/2 inch or less?
	Is hoisting equipment available and used for lifting heavy objects and are hoist ratings and characteristics appropriate for the tasks?
	Are ground-fault circuit interrupters provided on all temporary electrical 15 and 20-ampere circuits used during periods of construction?
	Are pneumatic and hydraulic hoses on power-operated tools checked regularly for deterioration or damage?

**Powder-Actuated Tools**

	Are employees who operate powder-actuated tools trained in their use and carry valid operator's card?
	Is each powder-actuated tool stored in its locked container when not being used?

	Is a sign at least 7 inches by 10 inches with bold face type reading "POWDER-ACTUATED TOOL IN USE" conspicuously posted when the tool is being used?
	Are powder-actuated tools left unloaded until they are ready to be used?
	Are powder-actuated tools inspected for obstructions or defects each day before use?
	Do powder-actuated tool operators have and use appropriate personal protective equipment such as hard hats, safety goggles, safety shoes, and ear protectors?

**Lockout/Tag-Out Procedures**

	Is all machinery or equipment capable of movement required to be de-energized or disengaged and locked-out during cleaning, servicing, adjusting, or setting up operations whenever required?
	Where the power disconnecting means for equipment does not also disconnect the electrical control circuit: ___ Are the appropriate electrical enclosures identified? ___ Is means provided to assure the control circuit can also be disconnected and locked out?
	Is the locking-out of control circuits in place 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 that stored energy (mechanical, hydraulic, air, etc.) be released or blocked before equipment is locked out for repairs?
	Are 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 removed the safety lock?
	Is it required that employees check the safety of the lockout by attempting a startup after making sure no one is exposed?
	Are employees instructed to always push the control circuit stop button immediately after checking the safety of the lockout?
	Are a sufficient number of accident preventive signs or tags and safety padlocks provided for any reasonably foreseeable repair emergency?
	When machine operation, configuration, or size requires the operator to leave his/her control station to install tools or perform other operations in situations where the machine could move if accidentally activated, is there a requirement for a separate lock or block out?
	If equipment or lines cannot be shut down, locked-out, and tagged, is a safe job procedure established and rigidly followed?

**Confined Spaces**

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	Are confined spaces thoroughly emptied of any corrosive or hazardous substances such as acids or caustics before entry?
	Are all lines to a confined space, containing inert, toxic, flammable, or corrosive materials valves off and blanked or disconnected and separated before entry?
	Are all impellers, agitators, or other moving parts and equipment inside confined spaces locked out if they present a hazard?
	Is either natural or mechanical ventilation provided before confined space entry?
	Are appropriate atmospheric tests performed to check for oxygen deficiency, toxic substances, and explosive concentrations in the confined space before entry?
	Is adequate illumination provided for the work to be performed in the confined space?
	Is the atmosphere inside the confined space frequently tested or continuously monitored during the conduct of work? Is there an assigned safety standby employee outside of the confined space when required whose sole responsibility is to watch the work in progress, sound an alarm if necessary, and render assistance?
	Is the standby employee appropriately trained and equipped to handle an emergency?
	Is the standby employee or other employees prohibited from entering the confined space without lifelines and respiratory equipment if there is any question as to the cause of an emergency?
	Is approved respiratory equipment required if the atmosphere inside the confined space cannot be made acceptable?
	Is all portable electrical equipment used inside confined spaces either grounded and insulated or equipped with ground fault protection?
	Before gas welding or burning is started in a confined space are hoses checked for leaks, compressed gas bottles forbidden inside of the confined space, torches lighted only outside of the confined area, and the confined area tested for an explosive atmosphere each time before a lighted torch is taken into the confined space?
	If employees will be using oxygen-consuming equipment such as salamanders, torches and furnaces in a confined space – is sufficient air provided to assure combustion without reducing the oxygen concentration of the atmosphere below 19.5% by volume?
	Whenever combustion type equipment is used in a confined space are provisions made to ensure the exhaust gases are vented outside of the enclosure?
	Is each confined space checked for decaying vegetation or animal matter which may produce methane?
	Is the confined space checked for possible industrial waste, which could contain toxic properties?

	If the confined space is below the ground and near areas where motor vehicles will be operating is it possible for vehicle exhaust or carbon monoxide to enter the space?
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**Electrical**

	Does the Department specify compliance with OSHA for all contract electrical work?
	Are all employees required to report as soon as practical any obvious hazard to life or property observed in connection with electrical equipment or lines?
	Are employees instructed to make preliminary inspections and/or appropriate tests to determine what conditions exist before starting work on electrical equipment or lines?
	When serviceable equipment or lines are to be serviced, maintained, or adjusted are necessary switches opened, locked out, and tagged whenever possible?
	Are portable electrical tools and equipment grounded or of the double insulated type?
	Do electrical cords being used have a grounding conductor?
	Are multiple plug adapters prohibited?
	Are ground-fault circuit interrupters installed on each temporary 15 or 20-ampere, 120 volt AC circuit at locations where construction, demolition, modifications, alterations, or excavations are being performed?
	Are all temporary circuits protected by suitable disconnecting switches or plug connectors at the junction with permanent wiring?
	Do you have electrical installations in hazardous dust or vapor areas? If so, do they meet the National Electrical Code for hazardous locations?
	Is exposed wiring and cords with frayed or deteriorated insulation repaired or replaced promptly?
	Are flexible cords and cables free of splices or taps?
	Are clamps or other securing means provided on flexible cords or cables at plugs, receptacles, tools, equipment, etc., and is the cord jacket securely held in place? Are all cord, cable, and raceway connections intact and secure?
	In wet or damp locations are electrical tools and equipment appropriate for the use or location or otherwise protected?
	Is the location of electrical power lines and cables (overhead, underground, under-floor, other side of walls) determined before drilling, digging, or similar work is begun?
	Are metal measuring tapes, ropes, hand lines, or similar devices with metallic thread woven into the fabric prohibited where they could come in contact with energized parts of equipment or circuit conductors?
	Is the use of metal ladders prohibited in areas where the ladder or the person using the ladder could come in contact with energized parts of equipment, fixtures, or circuit conductors?

	Are all disconnecting switches and circuit breakers labeled to indicate their use or equipment served?
	Are disconnecting means always opened before fuses are replaced?
	Do all interior wiring systems include provisions for grounding metal parts of electrical raceways, equipment, and enclosures?
	Are electrical raceways and enclosures securely fastened in place?
	Are all energized parts of electrical circuits and equipment guarded against accidental contact by approved cabinets or enclosures?
	Is sufficient access and working space provided and maintained around all electrical equipment to permit ready and safe operations and maintenance?
	Are all unused openings (including conduit knockouts) in electrical enclosures and fittings closed with appropriate covers, plugs, or plates?
	Are electrical enclosures such as switches, receptacles, and junction boxes provided with tight-fitting covers or plates?
	Are disconnecting switches, for electrical motors over two horsepower, capable of opening the circuit when the motor is in a stalled condition without exploding? (Switches must be horsepower rated equal to or over the motor hp rating). Is low voltage protection provided in the control device of motors driving machines or equipment, which could cause probable injury from inadvertent starting?
	Is each motor disconnecting switch or circuit breaker located within sight of the motor control device?
	Is each motor located within sight of its controller or the controller disconnecting means capable of being locked in the open position or is a separate disconnecting means installed in the circuit within sight of the motor?
	Is the controller for each motor over two horsepower, rated in horsepower equal to or in excess of the rating of the motor it serves?
	Are employees who regularly work on and around energized electrical equipment or lines instructed in the cardiopulmonary resuscitation (CPR) methods?
	Are employees prohibited from working alone on energized lines or equipment over 600 volts?

**Walking/Working Surfaces**  
**General Work Environment**

	Is a documented, functioning housekeeping program in place?
	Are all worksites clean and orderly?
	Are work surfaces kept dry or is appropriate means taken to assure the surfaces are slip-resistant?
	Are all spilled hazardous materials or liquids including blood and other potentially infectious materials cleaned up immediately and according to proper procedures?

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	Are combustible scrap, debris, and waste stored safely and removed from the worksite properly?
	Is all regulated waste, as defined in the OSHA blood borne pathogens standard (29 CFR 1910.1030) discarded according to federal, state, and local regulations?
	Are accumulations of combustible dust routinely removed from elevated surfaces including the overhead structure of buildings, etc.?
	Is combustible dust cleaned up with a vacuum system to prevent the dust from going into suspension?
	Is metallic or conductive dust prevented from entering or accumulating on or around electrical enclosures or equipment?
	Are covered metal waste cans used for oily and paint-soaked waste?
	Are aisles and passageways kept clear?
	Are aisles and walkways marked as appropriate?
	Are wet surfaces covered with non-slip materials?
	Are holes in the floor, sidewalk, or other walking surfaces repaired properly, covered, or otherwise made safe?
	Is there safe clearance for walking in aisles where motorized or mechanical handling equipment is operating? Are materials or equipment stored in such a way that sharp projections will not interfere with the walkway?
	Are spilled materials cleaned up immediately?
	Are changes of direction or elevation readily identifiable?
	Are aisles or walkways that pass near moving or operating machinery, welding operations, or similar operations arranged so employees will not be subject to potential hazards?
	Is adequate headroom provided for the entire length of any aisle or walkway?
	Are standard guardrails provided wherever aisle or walkway surfaces are elevated more than 30 inches above any adjacent floor or the ground?
	Are bridges provided over conveyors and similar hazards?

**Floor and Wall Openings**

	Are floor openings guarded by a cover, a guardrail, or equivalent on all sides (except at entrance to stairways or ladders)?
	Are toe-boards installed around the edges of permanent floor openings (where persons may pass below the opening)?
	Are skylight screens of such construction and mounting that they will withstand a load of at least 200 pounds?
	Is the glass in the windows, doors, glass walls, etc., which are subject to human impact, of sufficient thickness and type for the condition of use?
	Are grates or similar type covers over floor openings such as floor drains of such design that foot traffic or rolling equipment will not be affected by the grate-spacing?
	Are unused portions of service pits and pits not actually in use either covered or protected by guardrails or equivalent?

	Are manhole covers, trench covers, and similar covers, plus their supports designed to carry a truck axle load of at least 20,000 pounds when located in roadways and subject to vehicle traffic?
	Are floor or wall openings in fire-resistive construction provided with doors or covers compatible with the fire rating of the structure and provided with a self-closing feature when appropriate?

**Stairs and Stairways**

	Are standard stair rails or handrails on all stairways having four or more risers?
	Are all stairways at least 22 inches wide?
	Do stairs have landing platforms not less than 30 inches in the direction of travel and extend 22 inches in width at every 12 feet or less of vertical rise?
	Do stairs angle no more than 50 and no less than 30 degrees?
	Are step risers on stairs uniform from top to bottom?
	Are steps on stairs and stairways designed or provided with a surface that renders them slip-resistant?
	Are stairway handrails located between 30 and 34 inches above the leading edge of stair treads?
	Do stairway handrails have a least 3 inches of clearance between the handrails and the wall or surface they are mounted on?
	Where doors or gates open directly on a stairway is there a platform provided so the swing of the door does not reduce the width of the platform to less than 21 inches?
	Where stairs or stairways exit directly into any area where vehicles may be operated, are adequate barriers and warnings provided to prevent employees from stepping into the path of traffic?
	Do stairway landings have a dimension measured in the direction of travel at least equal to the width of the stairway?

**Elevated Surfaces**

	Are signs posted when appropriate showing the elevated surface load capacity?
	Are surfaces elevated more than 30 inches above the floor or ground provided with standard guardrails?
	Are elevated surfaces (beneath which people or machinery could be exposed to falling objects) provided with standard 4-inch toe-boards?
	Is a permanent means of access and egress provided to elevated storage and work surfaces?
	Is the required headroom provided where necessary?
	Is the material on elevated surfaces piled, stacked, or racked in a manner to prevent it from tipping, falling, collapsing, rolling, or spreading?

	Are dock boards or bridge plates used when transferring materials between docks and trucks or rail cars?
--	--

**Hazard Communication**

	Is there a list of hazardous substances used in your workplace?
	Is there a written hazard communications program dealing with Material Safety Data Sheets (MSDS) labeling and employee training?
	Is each container for a hazardous substance (i.e. vats, bottles, storage tanks, etc.) labeled with product identification and a hazard warning (communication of the specific health hazards and physical hazards)?
	Is there a Material Safety Data Sheet (MSDS) readily available for each hazardous substance?
<b>Does this program include:</b>	
	An explanation of what an MSDS is and how to use and obtain one?
	MSDS contents for each hazardous substances or class of substances?
	Explanation of "Right to Know"?
	Identification of where an employee can see the employer's written hazard communications program and where hazardous substances are present in their work areas?
	The physical and health hazards of substances in the work area and specific protective measures to be used?
	Details of the hazard communication program, including how to use the labeling system and MSDS's?
<b>Are the employees trained in the following?</b>	
	How to recognize tasks that might result in occupational exposure?
	How to use work practice and engineering controls and personal protective equipment and know their limitations?
	How to obtain information on the types, selection, proper use, location, removal handling, decontamination, and disposal of personal protective equipment?
	Who to contact and what to do in an emergency?

**26.6.** Colleton County Safety Policy Form 6, Training Record

**26.6.A.** This is a sample form used to document training within a Department. Department Heads can adapt this form for use for specific Department training needs. Each Department must maintain files to document all training as it is completed for each employee.



**26.7.** Colleton County Light Duty Assignment Agreement Form, From 7

**26.7.A.** This form will be used when an employee is offered a light duty assignment following a job-related injury/illness. The form will be completed by Risk Management and signed by the employee and the Department Head of the Department in which the light duty assignment is located.

**Colleton County  
Light Duty Assignment Agreement**

**Proposed Position:** \_\_\_\_\_ **Department:** \_\_\_\_\_

**Department/Agency Head:** \_\_\_\_\_

**Physical Restrictions Mandated by Physician:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Light Duty Assignment (LDA) Brief Description of Duties:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Date LDA begins:** \_\_\_\_\_

**LDA projected duration:** \_\_\_\_\_

\_\_\_\_\_ **I accept the Light Duty Assignment and have read and understand the Employee Light Duty Responsibilities.**

\_\_\_\_\_ **I do not accept the Light Duty Assignment and understand that my temporary total disability payments may be terminated by the Worker's Compensation carrier.**

\_\_\_\_\_  
**Employee**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Department Head**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Risk Manager**

\_\_\_\_\_  
**Date**

**26.8.** Colleton County Workers Compensation Medical Authorization Form, Form 8

**26.8.A.** This form must be completed by any employee who receives medical treatment as a result of an on-the-job injury or illness. It is the Department Head's responsibility to get this form signed and forwarded to Risk Management along with the First Report of Injury.



**MEDICAL AUTHORIZATION AND CONSENT TO RELEASE INFORMATION**

TO ANY HOSPITAL OR DOCTOR CONCERNED:

The undersigned person hereby consents to and by this authorization or any photocopy thereof, hereby authorizes the release to Colleton County Government or any agent or designee of Colleton County Government and Colleton County's insurance carrier and/or third-party administrator, of all medical reports, histories, findings, prognosis, bills, information and other documents relating to any medical treatment, hospitalization, prescription drugs or other medical services or supplies, including psychiatric treatment or treatment for alcoholism or drug abuse of such patient.

The undersigned understands that my employer and its agents, designees and insurance carrier/third-party administrator, may from time to time, find it necessary to obtain information verbally from my treating health care providers and such contact is hereby authorized.

The undersigned person(s) understands and hereby acknowledges that the information above or certain portions thereof may be protected from disclosure without this signed authorization of federal and state privacy and confidentiality laws. A photocopy of this authorization will serve as an original.

Name: \_\_\_\_\_

SSN# \_\_\_\_\_

Date of Birth: \_\_\_\_\_

\_\_\_\_\_  
Patient- please print name

\_\_\_\_\_  
Patient – Signature

\_\_\_\_\_  
Date

**26.9.** Colleton County Return to Work Form, Form 9

**26.9.A.** This is a sample Return to Work Form. No employee may return to work from a medical absence without providing a Return to Work Form properly completed by the treating physician and delineating under what conditions and with what restrictions, if any, the employee may resume working.

**COLLETON COUNTY  
RETURN TO WORK FORM**

---

Employee Name

Date Seen

---

Diagnosis (detail injury or condition treated)

---

Prognosis (estimate future care – recovery time)

\_\_\_\_\_ The employee may return to work full duty (no restrictions)

\_\_\_\_\_ The employee may return to work in transitional duty

---

(Restrictions)

---

(Special care instructions)

\_\_\_\_\_ Return for follow up visit on \_\_\_\_\_

\_\_\_\_\_ Refer out to specialist

\_\_\_\_\_ Orthopedic

\_\_\_\_\_ Physical Therapy

\_\_\_\_\_ Other

---

(Please describe)

---

Treating Physician

Date

Please remind the employee to return this form to their supervisor or you may fax a copy to Risk Management at 843-898-6130

**ANNEX 1**

**1.0 WORKERS COMPENSATION**

**1.1 OVERVIEW**

The purpose of every safety program is to prevent worker injuries. Every employee must be committed to following safety procedures, working smart, and understanding the job and its required protective equipment, procedures, and physical requirements/dangers. Unfortunately, no program is fool proof. Accidents will happen.

**1.2 EMPLOYEE INJURY/EXPOSURE**

- 1.2.1** In the event an employee is injured on the job, supervisors and co-workers should assess the seriousness of the injury and administer first aid as needed. **The primary concern is always attending to the injured employee.** If the employee requires emergency medical care, summon assistance from 911. In either circumstance, Risk Management must be notified immediately.
- 1.2.2** If an employee is injured and requires medical treatment of a non-emergency nature, notify Risk Management immediately and an appointment with the approved Worker's Compensation physicians will be arranged for the employee
- 1.2.3** If an employee is injured and declines medical care, the employee must sign the First Report of Injury under Section 6 verifying that he/she has declined medical care. The supervisor must emphasize that, should the employee require medical attention at a later time as a result of the injury, the employee must still go to the Worker's Compensation approved physician. Use of Emergency Room after an employee has declined treatment will not be approved by the Worker's

Compensation insurance carrier unless life-threatening conditions develop.

**1.2.4** Referrals to specialists such as orthopedists, physical therapists, etc., or for special procedures such as MRI, CAT scans, etc., must be pre-approved by the Worker's Compensation insurance carrier. Follow-up treatment after use of the Emergency Room must be provided by a Worker's Compensation approved physician as arranged by Risk Management.

**1.2.5** **The employee should never use regular health insurance coverage for Worker's Compensation treatment.**

### **1.3** REPORTING EMPLOYEE INJURY/EXPOSURE

**1.3.1** As provided in **section 1.2**, Risk Management must be notified by telephone immediately so that medical treatment can be coordinated and/or approved.

**1.3.2** Following the telephone report, a written First Report of Injury must be completed by the injured employee's supervisor, and submitted to Risk Management within twenty-four hours of the injury. The report must contain as much detail as possible. Be specific about the injury – for instance: severe laceration to the palm of right hand; and provide details concerning how the accident happened – what the employee was doing at the time of the injury and what circumstances caused the injury – for instance: an employee was delivering paperwork to Auditor's Office and slipped on the wet floor in the hallway on the second floor of Harrelson Building. In this instance, include an explanation of why the floor was wet – for instance: rainy day and heavy foot-traffic in hallway tracked in mud and water.

**1.3.3** As noted in **Section 1.2.3** above, in the event an injured employee declines medical treatment, he/she must sign the First Report of Injury in the Remarks

Section of the Form (Section 6) and verify treatment was declined.

- 1.3.4** All injuries, whether or not treatment is required, must be reported to Risk Management within twenty-four (24) hours. If an accident occurs on a weekend or holiday, the First Report of Injury must be submitted to Human Resources/Risk Management on the first business day following the occurrence. Failure to submit the First Report of Injury on time may result in disciplinary action.
- 1.3.5** In the event of a fatality or critical injury of an employee, the County Administrator or his/her designee must be notified immediately. Communications (E-911) will have emergency telephone numbers.
- 1.3.6** The injured employee must sign a Medical Authorization Form (see Section 26.8 of Safety Manual) permitting the doctor to provide medical and treatment information to Risk Management and the Worker's Compensation Insurance Carrier. The supervisor must forward this form with the First Report of Injury to Risk Management. If the seriousness of the injury precludes the employee from being able to sign the Medical Authorization Form, the supervisor must so notify Risk Management.

#### **1.4 INVESTIGATION**

- 1.4.1** Immediately following an accident, the Department Head is required to complete a Colleton County Accident Investigation Form (see Section 26.3 of Safety Manual). The purpose of an investigation is to determine whether or not hazards exist which could be corrected to avoid similar incidents in the future. "Hazards" may include physically unsafe conditions or unsafe acts of employees caused by inadequate training or carelessness. The Investigation Form must be submitted to Risk Management within twenty-four (24)

hours of the accident (or the first business day following a weekend or holiday).

**1.4.2** The Department Head must be thorough and objective in assessing the direct and basic causes of the accident. Actions taken to correct these causes must be reported on the form in detail.

**1.4.3** The Safety Committee shall review accident reports and findings of the Department Heads analyzing the report in conjunction with any supporting evidence provided through Risk Management. If the Department's report omits important information or is questioned by a majority of the Safety Committee members, the Department Head will be asked to brief the Committee in full. The Committee may make recommendations for action, training, and if necessary, disciplinary measures up to and including discharge or garnishment of wages where allowable.

## **1.5 PRESCRIPTIONS**

**1.5.1** All prescriptions provided as a result of a Worker's Compensation injury must be filled by approved pharmacies only. A list of approved pharmacies is available at Risk Management.

## **1.6 RETURN TO WORK**

**1.6.1** When an employee sees a doctor for a job-related injury, the employee must obtain a written Return to Work Form (see sample form in Section 26.9 of Safety Manual) from the physician. Such form must provide:

**1.6.1.1** The diagnosis: What is the injury/condition

**1.6.1.2** The prognosis: What is the expectation of recovery

**1.6.1.3** Time out of work: How long will the employee be out of work

**1.6.1.4** Follow up care: What kind, when, where

**1.6.1.5** Return to work: When and under what condition the employee may return to work

**1.6.1.5.1** Regular duty: Must indicate a return to work at full duty, no restrictions

**1.6.1.5.2** Light Duty: Must indicate how long the employee will be on restricted duty and provide exact restrictions, such as half days only, or no standing, bending, stooping, etc.

**1.6.2** A doctor's note must be obtained each time an employee sees a physician for treatment related to the job-related injury. If the employee fails to obtain such note, the insurance carrier will not cover any charges related to a visit to obtain the required note.

**1.6.3** No employee may return to work without a properly completed return to work form that clearly states the conditions under which he/she may return.

**1.6.4** All such Return to Work Forms must be forwarded immediately by the supervisor to Human Resources/Risk Management.

## **1.7 LIGHT DUTY**

**1.7.1** No employee may return to work in a light-duty capacity until a Return to Work is provided from the service provider/physician indicating when and under what specific conditions the employee may be allowed to work.

**1.7.2** All Departments are strongly encouraged to provide Light Duty assignments to employees recovering from on-the-job injuries/illness. Any such Light Duty assignment must comply with the limitations or restrictions placed by the physician on the recovering employee. Risk Management will assist Department Heads in matching a recovering employee to a Light Duty assignment.

- 1.7.3** A Light Duty Assignment Agreement Form (see Section 26.7 of Safety Manual) must be completed when an employee is offered such an assignment. The Form shall be forwarded to Risk Management for inclusion in the employee's Worker's Compensation file.
- 1.7.4** If an employee is given a Light Duty assignment in a position at a lower classification and compensation level than his/her regular position, the employee will be paid at the compensation rate commensurate with the Light Duty position. If an employee can perform the functions of his/her regular position, but is able to work only a limited number of hours, the employee shall be paid at his/her regular rate of pay for the number of hours worked. In either case, such wages shall come from the Department's budgeted salary appropriation, and the Worker's Compensation insurance carrier shall "make-up" any compensation due to the employee according to the insurance formula's used in such cases.
- 1.7.5** Should no Light Duty assignment meeting the prescribed limitations/restrictions be available within the recovering employee's regular Department, Risk Management will endeavor to find a compliant assignment in another Department. The employee's regular Department will provide the funding for such Light Duty assignment at the rate commensurate with that Light Duty position, and the Worker's Compensation insurance carrier shall "make-up" any compensation due the employee pursuant to the insurance formula's used in such cases.
- 1.7.6** For the term of any Light Duty assignment in another Department, the recovering employee shall work under the supervision of the Department Head of the Department in which he/she is performing Light Duty. Coordination of any leave time required, sick time reporting, etc. shall be arranged by the recovering employee with the Department Head of the assigned

Department. That Department Head shall be responsible for providing job direction and instruction, discipline if necessary, verification of hours worked (time sheet signing), etc. The Department Head shall fax a copy of the recovering employee's Time Sheet, when it is completed and signed, to the employee's regular Department Head, so that hours for the employee can be included on the Payroll Transmittal Form. The original Time Sheet shall be submitted to Finance.

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