

# **Allan Hancock College - Santa Maria Campus**

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**INJURY AND ILLNESS PREVENTION  
PROGRAM (IIPP)**

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YOUR OSHA COMPLIANCE SOLUTION

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## TABLE OF CONTENTS

Section	Page
<b>1 OBJECTIVE.....</b>	<b>1</b>
<b>2 RESPONSIBLE PERSON .....</b>	<b>1</b>
<b>3 SYSTEM FOR ENSURING EMPLOYEE COMPLIANCE.....</b>	<b>1</b>
3.1 Personnel Responsibility .....	1
3.2 Methods of Compliance.....	1
<b>4 SYSTEM FOR COMMUNICATING WITH EMPLOYEES .....</b>	<b>1</b>
4.1 General.....	1
4.2 Methods of Communication.....	2
4.3 Hazard Communication .....	2
<b>5 IDENTIFYING AND EVALUATING WORK PLACE HAZARDS .....</b>	<b>2</b>
5.1 Hazard Assessment .....	2
5.2 Inspections .....	2
5.3 Hazard Identification by Employees .....	2
<b>6 CORRECTING WORKPLACE HAZARDS .....</b>	<b>3</b>
6.1 Corrective Response and Action.....	3
6.2 Imminent Hazards .....	3
<b>7 INJURY/ILLNESS INVESTIGATION.....</b>	<b>3</b>
7.1 Injury/Illness Investigation .....	3
7.2 Injury/Illness Reporting .....	4
<b>8 PROGRAM ACCESS .....</b>	<b>4</b>
8.1 Employee Access .....	4
8.2 Methods of Access .....	4
8.3 Records .....	4
8.4 Separate Operations .....	4
8.5 Communication .....	4
8.6 Collective Bargaining Agents.....	5
<b>9 TRAINING.....</b>	<b>5</b>
9.1 Employee Training .....	5
9.2 Management and Supervisory Training.....	5
<b>10 RECORDKEEPING .....</b>	<b>5</b>
10.1 Training Records .....	5
10.2 IIPP Activity .....	5
10.3 Safety Data Sheets .....	5
10.4 Employee Medical Records.....	6
10.5 Injury Records .....	6
<b>APPENDIX 1 – TASK HAZARD ANALYSIS .....</b>	<b>7</b>

**APPENDIX 2 – IDENTIFIED HAZARDS AND CORRECTION RECORD.....9**  
**APPENDIX 3 – EMPLOYEE SAFETY MEETING ..... 10**

## **1 OBJECTIVE**

Allan Hancock College - Santa Maria Campus has adopted this Injury and Illness Prevention Program to establish the minimum safety orders for securing safety in the workplace. Compliance with these orders may not in itself prevent occupational injuries or diseases, but will provide a safe environment which is a fundamental prerequisite in controlling injuries and illness. These orders are designed and consistent with the standards set forth under the California Code of Regulations, Section 3203.

## **2 RESPONSIBLE PERSON**

Allan Hancock College - Santa Maria Campus has designated Eric Smith with the authority and responsibility for the implementation of the Injury and Illness Prevention Program (IIPP). Eric Smith will be responsible for:

- a. Establishment and enforcement of all workplace policies for a safe and healthful work environment;
- b. Designation of supervisory and management personnel to assist in the enforcement and supervision of company policies and orders within the IIPP;
- c. Maintaining records pertaining to the program; and
- d. Maintaining, reviewing, and updating the IIPP at least annually.

## **3 SYSTEM FOR ENSURING EMPLOYEE COMPLIANCE**

### **3.1 Personnel Responsibility**

All company personnel have the responsibility for complying with safe and healthful work practices, including applicable regulations, company policy, and department safety procedures.

### **3.2 Methods of Compliance**

Methods for ensuring that employees comply with safe and healthy work practices may include one or a combination of the following:

- a. Recognition and noted performance evaluation of employees who follow safe and healthful work practices,
- b. Training and retraining programs,
- c. Disciplinary action, or
- d. Any other such means to encourage compliance.

## **4 SYSTEM FOR COMMUNICATING WITH EMPLOYEES**

### **4.1 General**

Employees will be communicated through a form readily understandable on matters relating to occupational safety and health. In addition, all employees are encouraged to communicate safety concerns to their supervisor without fear of reprisal.

## 4.2 Methods of Communication

Employees will be informed through one or a combination of the following methods:

- a. Meetings,
- b. Training programs,
- c. Postings/written communications,
- d. Anonymous notification by employees about hazards, or
- e. Any other means that ensures communication with employees.

*Note: Safety meetings may be documented using the form found in Appendix 3.*

## 4.3 Hazard Communication

Employees will be provided access to hazard information pertinent to their work assignments. Information concerning the health and safety hazards of tasks performed by department staff will be available from several sources. These sources include, but are not limited to Safety Data Sheets (SDSs), equipment operating manuals, container labels and work area warning postings.

# 5 IDENTIFYING AND EVALUATING WORK PLACE HAZARDS

## 5.1 Hazard Assessment

A hazard assessment may be conducted (using Appendix 1) to review workplace conditions, as well as potential hazards that might not be recognized otherwise.

Hazard assessments may be performed:

- a. At planned and new facilities;
- b. When new processes are implemented; and
- c. When new materials and/or equipment are introduced in the workplace.

## 5.2 Inspections

Periodic inspections will be performed and recorded to identify and evaluate hazards:

- a. When this program is first established;
- b. Whenever new substances, processes, procedures, or equipment are introduced to the workplace that represent a new occupational safety and health hazard; and
- c. Whenever management is made aware of a new or previously unrecognized hazard.

*Note: Inspectors may utilize the form found in Appendix 2 to document their findings.*

## 5.3 Hazard Identification by Employees

Employees are often the first to recognize hazards. All employees are required to actively participate in safe practices, which may include one or a combination of the following:

- a. Immediate notification of hazards to immediate supervisors and/or upper management;
- b. Stopping the work that is causing the hazard;

- c. Submission of work orders to the maintenance department for those hazards;  
and
- d. Submission of safety suggestions.

Employees are assured that management will guard against reprisals and will take positive steps to correct those potential hazards or workplace injuries that are brought to their attention.

## **6 CORRECTING WORKPLACE HAZARDS**

### **6.1 Corrective Response and Action**

Hazards discovered either as a result of a scheduled periodic inspection or during normal operations will be corrected when observed or discovered. The methods and/or procedures for correcting unsafe or unhealthy conditions, work practices and work procedures will be executed by designated personnel in a timely manner based on the severity of the hazard. The designated personnel responsible for the completion of remedial action and follow-up will be required to document the processes taken.

### **6.2 Imminent Hazards**

When an imminent hazard exists, which cannot be immediately abated without endangering employee(s) and/or property, all exposed personnel will be removed from the area except those necessary to correct the existing condition. Employees necessary to correct the hazardous condition will be provided the necessary safeguards.

## **7 INJURY/ILLNESS INVESTIGATION**

### **7.1 Injury/Illness Investigation**

Designated personnel, or a team of personnel, will be responsible to perform injury/illness investigations. Investigation processes will be utilized to determine and correct the cause(s) of the accident/incident. General procedures that may be used include:

- a. Interviewing Injured personnel and witnesses;
- b. Examining the injured employee's workstation for causative factors;
- c. Reviewing established procedures to ensure they are adequate and were followed;
- d. Reviewing training records of affected employees;
- e. Determining all contributing causes to incident/accident;
- f. Taking corrective actions to prevent the incident/accident from reoccurring; and
- g. Recording all findings and actions taken.

## **7.2 Injury/Illness Reporting**

At the conclusion of each injury/illness investigation, an injury/illness report will be created and archived. The designated investigation personnel will refer to the Accident/Incident Investigation Program for further instruction and requirements.

## **8 PROGRAM ACCESS**

### **8.1 Employee Access**

All employees will have either in person or printed copy access to the program.

### **8.2 Methods of Access**

Access will be provided by doing one of the following:

8.2.1 Access will be provided in a reasonable time, place, and manner, but in no event, later than 5 business days after the request for access has been received from an employee or designated representative. Designated representatives must submit a written authorization with their request for access to the program that contains the name and signature of the employee who they are representing, the date of the request, the designated representative's name (either the individual or organization), and the date upon which the request will expire if it is less than 1 year.

- a. A free printed copy of the program will be provided to the requesting employee or designated representative, unless the employee or designated representative agrees to receive an electronic copy.
- b. A reasonable, non-discriminatory reproduction charge for additional copies may be imposed after the first printed copy is requested if an employee or designated representative request additional copies of the program within 1 year of the previous request and the program has not been updated with new information since the printed copy was provided.

8.2.2 Unobstructed access through a company server or website, which allows an employee to review, print, and email the current version of the Program.

### **8.3 Records**

Such program access request need not include any of the records of the steps taken to implement and maintain the written program.

### **8.4 Separate Operations**

Access may be limited to the program or programs applicable to the employee requesting the program if there are distinctly different and separate operations that have different programs.

### **8.5 Communication**

All employees will be informed of their right and procedure to access the program.

## **8.6 Collective Bargaining Agents**

Nothing in Section 8 is intended to preclude employees and collective bargaining agents from collectively bargaining to obtain access to information in addition to that available under Section 8.

## **9 TRAINING**

### **9.1 Employee Training**

Training and instruction will be provided, along with specific procedures and hazard awareness associated with the duties to be performed:

- a. When this program is first established;
- b. To all new employees;
- c. To all employees given new job assignments for which training has not previously been received;
- d. Whenever new substances, processes, procedures or equipment are introduced to the workplace and represent a new hazard; and
- e. Whenever a new or previously unrecognized hazard is made aware.

### **9.2 Management and Supervisory Training**

Additional training will be provided for management and supervisors to familiarize themselves with the safety and health hazards to which employees under their immediate direction and control may be exposed.

## **10 RECORDKEEPING**

### **10.1 Training Records**

Documentation of all safety and health training for each employee will be maintained. Training records will include, employee name or other identifier, training dates, type(s) of training, and training providers. This documentation will be maintained for at least 1 year.

### **10.2 IIPP Activity**

Records documenting all IIPP activity will be kept and maintained for at least 1 year, including records of scheduled and periodic inspections to identify unsafe conditions and work practices. These records will include:

- a. Person(s) conducting the inspection,
- b. The unsafe conditions and work practices that have been identified; and
- c. The action taken to correct the identified unsafe conditions and work practices.

### **10.3 Safety Data Sheets**

Safety data sheets will be retained as necessary to comply with the provisions of the Hazard Communication program. Where safety data sheets are destroyed, a record



of the identity (chemical name if known) of the substance or agent, where it was used, and when it was used will be retained for at least 30 years.

#### **10.4 Employee Medical Records**

If applicable, the medical record for each employee will be preserved and maintained for at least the duration of employment plus 30 years, except that the following types of records need not be maintained for any specific period:

- a. Heat insurance claims records maintained separately from Allan Hancock College - Santa Maria Campus's medical program and its records;
- b. First aid records (not including medical histories) of one-time treatment and subsequent observation of minor scratches, cuts, burns, splinters, and the like which do not involve medical treatment, loss of consciousness, restriction of work or motion, or transfer to another job, if made on-site by a non-physician and if maintained separately from Allan Hancock College - Santa Maria Campus's medical programs and its records; and
- c. The medical records of employees who have worked for less than 1 year will not need to be maintained beyond the term of employment if they are provided to the employee upon termination of employment.

#### **10.5 Injury Records**

The Cal/OSHA Form 300, the privacy case list (if one exists), the Cal/OSHA Form 300A, and the Cal/OSHA Form 301 Incident Reports will be retained for 5 years following the end of the calendar year that these records cover.

**APPENDIX 1 – TASK HAZARD ANALYSIS**

<b>Company Name:</b> _____		
<b>Task Hazard Analysis</b>		<b>Box A - Hazards</b>
Date: _____	Task: _____	<input type="checkbox"/> Is the employee working with sharp or rough materials that require PPE? <input type="checkbox"/> Can any body part get caught in, struck by or caught between objects? <input type="checkbox"/> Can pushing, pulling, lifting, bending or twisting cause strain? <input type="checkbox"/> Do tools, machines or equipment present any hazards? <input type="checkbox"/> Can the worker slip, trip or fall? <input type="checkbox"/> Is special training needed? (forklift, scaffold, powder actuated tools) <input type="checkbox"/> Are there flammable, explosive or electrical hazards? <input type="checkbox"/> Fall hazard from one level to another to same level? <input type="checkbox"/> Is excessive noise or vibration a problem? <input type="checkbox"/> Is there a danger from falling objects? <input type="checkbox"/> Is lighting a problem? <input type="checkbox"/> Can weather conditions affect safety? <input type="checkbox"/> Are permits required? (hot work, confined space, etc.) <input type="checkbox"/> Contact with acids, toxic or caustics? (SDS) <input type="checkbox"/> Will there be exposure to dusts, fumes or mists? (SDS)
Task Location: _____	Foreman: _____	
Foreman: _____	Craft: _____	
<b>Break Task Into Steps</b>		
1. _____	2. _____	
2. _____	3. _____	
3. _____	4. _____	
4. _____	5. _____	
5. _____	6. _____	
6. _____	7. _____	
7. _____	8. _____	
8. _____	9. _____	
9. _____	10. _____	
<b>Hazards Associated with Steps (Box A, check those that exist)</b>		<b>Box B – PPE (Personal Protective Equipment)</b>
1. _____	2. _____	<input type="checkbox"/> Glasses <input type="checkbox"/> Hard Hats <input type="checkbox"/> Vests <input type="checkbox"/> Work Boots
2. _____	3. _____	<input type="checkbox"/> Harnesses <input type="checkbox"/> Respirators <input type="checkbox"/> Dust Masks <input type="checkbox"/> Gloves
3. _____	4. _____	<b>Print Name</b>
4. _____	5. _____	<b>Signature</b>
<b>Safe Work Practices/PPE (See Box B, check those that exist)</b>		
1. _____	2. _____	
2. _____	3. _____	
3. _____	4. _____	
4. _____	5. _____	



**TASK HAZARD ANALYSIS (Page 2)**

<b>Company Name:</b>			
<b>Date:</b>			
<b>Print Name:</b>	<b>Signature:</b>	<b>Print Name:</b>	<b>Signature:</b>

**APPENDIX 2 – IDENTIFIED HAZARDS AND CORRECTION RECORD**

Date of Inspection: \_\_\_\_\_

Inspector(s): \_\_\_\_\_

Unsafe Condition/ Work Practice	Location	Corrective Action Implemented	Person Responsible for Implementation	Date Implemented	Corrective Action Effective?	Additional Actions Required
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
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					<input type="checkbox"/> Yes <input type="checkbox"/> No	
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					<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	
					<input type="checkbox"/> Yes <input type="checkbox"/> No	

Additional Notes:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_





### APPENDIX 3 – EMPLOYEE SAFETY MEETING

<b>Company Name:</b>	
<b>Meeting Date:</b> ____/____/____	<b>Meeting Time:</b> ____:____AM/PM
<b>Attendees:</b> _____ _____ _____	

<b>Subjects Discussed:</b>

<b>Corrective Action Taken, if any:</b>

