

# **SIGNATURE STAFF RESOURCES**

## **EMPLOYEE SAFETY & INJURY PREVENTION PROGRAM**

### *POILICIES/PROCEDURES MANUAL*

*prepared by*

**SIGNATURE STAFF RESOURCES**  
Loss Control Department

***“Every accident, no matter how minor, is a failure of the organization.”***

## INTRODUCTION

*Many companies are too comfortable accepting a certain percentage of errors (accidents and injuries) in their daily business. Often this “comfort zone” ranges from 1 to 5 percent. For these companies mistakes (accidents and injuries) are regarded as a routine and acceptable part of their daily operations. In most cases, even 99.9% success rate is not good enough. Here is what the result would be if some things were done correctly “only” 99.% of the time:*

- *There would be 16,000 pieces of mail lost at the US Postal Service every hour.*
- *20,000 incorrectly filled drug prescriptions would occur annually.*
- *22,000 checks would be deducted from the wrong accounts every hour.*
- *2 million documents would be lost annually by the IRS.*
- *1,314 misrouted telephone calls would occur every minute.*

*As you can see, being unlucky 0.1% is unacceptable. All businesses must strive for 100% accuracy in everything they do.*

The intent of this program and procedures manual is to provide criteria and guidelines for affecting a consistent, organized, and systematic approach to employee safety and health at SIGNATURE STAFF RESOURCES and within the SIGNATURE association of companies. The manual was developed based on generally accepted elements, components, subjects and requirements of a comprehensive employee safety and health program. The number, grouping and wording of these elements varies according to different professional safety organizations, state workers' compensation agencies, federal safety authorities and safety and health professionals, however the intent is the same, *to define and assign written responsibilities, policies and procedures for ensuring employee safety and health in the workplace.* The four broad ranging elements considered as essential to any employee safety program and forming a basis for this manual are:

- Management Commitment and Employee Involvement
- Worksite Analysis
- Hazard Prevention and Control
- Safety and Health Training.

Through effective implementation and follow through of the established programs, procedures, and activities contained herein, we will attain the most efficient application of available resources toward achieving the goal of eliminating work related injuries.

Appropriate SIGNATURE personnel will review and evaluate this manual on at least an annual basis or when changes occur that prompt or require revision. Effective implementation requires a written program for job safety and health that is endorsed and advocated by the highest level of management or ownership and that outlines our safety plans, goals and objectives. This written program will be communicated to all required personnel. It encompasses the total workplace, regardless of number of workers employed or the number of work shifts.

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## CORPORATE SAFETY POLICY STATEMENT

One of **Signature's** "Core Values" is SAFETY. A "Core Value" is defined as a deeply held belief, that is beyond compromise. It is our belief that all work related injuries can be prevented and our ultimate goal is that of "Zero" employee work related injuries. If an injury does occur, it will be viewed as a deficiency in our management system and actions will be taken to discover and eliminate all deficiencies.

Safety and Health must be a part of every operation and without question; safety is everyone's responsibility.

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

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

We will maintain a safety and health program conforming to the best management practices of organizations of this type. To be successful, such a program must embody the proper attitudes toward injury and illness prevention not only on the part of supervisors and employees, but also between each employee and his or her coworkers. Only through such a cooperative effort, can a safety program in the best interest of all be established and preserved.

Our objective is a safety and health program that will reduce the number of injuries and illnesses to an absolute minimum, not merely in keeping with, but surpassing, the best experience of similar operations. Again, our goal is nothing less than zero injuries.

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Signed

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Date

## SAFETY AUTHORITY AND ACCOUNTABILITY

Management of **SIGNATURE STAFF RESOURCES** accepts the ultimate responsibility for the safety performance of this company. However, this responsibility must be extended, as authority is delegated, in a direct line through the client companies to the employees. Management must see to it that this responsibility is included in written employment agreements, job descriptions, and communicated at the very start of an individual employment.

Once safety responsibilities are fully assigned, management must ensure that client companies hold local managers or supervisors accountable for employee safety through ongoing review of continued employment agreements.

A good safety and health record is evidence of good management. Accordingly, client company managers will be responsible for accomplishing the following:

- Provide adequate resources and guidance for the development and implementation of this written employee Safety and Injury Prevention Plan and to the overall employee' safety and health program.
- Support and enforce company safety and health policies and practices.
- Ensure that the safety and health responsibility and authority has been delegated and is consistently used to measure accountability.
- Take part in safety and health program proceedings and periodically measure the success or failure of the adopted safety policies and procedures.
- Establish annual safety objectives, ensuring that plans of action and responsibilities have been developed to accomplish the objectives and periodically monitor progress being made.
- Periodically review all company policies, business procedures, underwriting and any other process that could lead to financial losses to the company's assets or business viability.

The Corporate Loss Control Department will act in a staff capacity. The primary function of this position is to advise and assist each operating manager in carrying out their own safety and health responsibilities. This individual is primarily responsible and will be held accountable for the overall implementation of the safety and health plan and has the authority to delegate any and all portions of the plan to subordinates, but will ultimately be responsible for the ongoing implementation, compliance and performance of the plan. Additionally this department will:

- Monitor the implementation of the Safety and Health Program within the corporation and recommend changes as necessary.
- Assist management in developing annual safety objectives, including plans of actions for achieving results.
- Act as an advisor to any safety and health committees and attend all committee meetings.
- Assist with maintenance of the company's injury recordkeeping system.
- Assist with the development and/or presentation of management safety training programs.
- Request specific information and assistance through to outside professional agencies, and keep abreast of current developments in occupational safety and health.
- Act as a liaison between insurance management and reporting operations/work sites.
- Assist with establishment of annual safety objectives, ensuring that plans of action and responsibilities have been developed to accomplish the objectives, and periodically monitor the progress being made.

## SAFETY AUTHORITY AND ACCOUNTABILITY

**Client MANAGERS:** A good safety and health record will also depend on the priority given to safety by the manager in charge of the operating unit. Client Managers are expected to:

- Interpret corporate and managerial unit safety and health policies, practices, and procedures and actively support them as an example to those responsible to them, giving safety and health equal emphasis and weight with matters of production, costs, and quality.
- Establish annual safety and health objectives, ensuring that plans of action and responsibilities have been developed to accomplish the objectives, and periodically monitor the progress being made.
- Ensure that all supervisory personnel have been delegated adequate safety and health responsibility and authority for which they are held accountable during annual performance evaluations.
- Include safety and health issues as part of the established agenda for scheduled supervisory staff meetings.
- Review and approve all accident investigation reports to ensure an acceptable level of quality, and establish a follow-up system to determine that recommended corrective actions have been implemented.
- Monitor safety inspection reports to ensure an acceptable level of quality and timely implementation of corrective measures.
- Participate as an active member of the safety and health committee. (if applicable)

**LOCAL SAFETY COORDINATOR:** The local safety coordinator will also act in a staff capacity to advise and assist local management in carrying out their safety and health responsibilities. In some instances, this safety and health coordinator will have other responsibilities outside of safety and health. This individual will be accountable for the following safety and health responsibilities:

- Monitor the implementation of the local safety and health program and recommend changes as necessary.
- Assist local management in developing annual safety objectives, including plans of actions for achieving results.
- Function as an advisor to the local safety and health committee, attend committee meetings, participate in committee inspections, investigations, etc.
- Monitor accident investigation and safety inspection reports and follow up to ensure that appropriate corrective actions are being implemented by the responsible personnel.
- Assist in the development and/or presentation of local management/supervisory/employee safety and health training programs.
- Review and/or recommend safety specifications for new equipment, processes, or materials.
- Request specific information and assistance through outside professional agencies and keep current on safety and health developments.
- Review, select, or develop appropriate safety materials and topics for display and distribution to each work location.
- Monitor hazardous substances in the work place as appropriate.

## SAFETY AUTHORITY AND ACCOUNTABILITY

- Maintain a complete and current Material Safety Data Sheet file on all hazardous substances/materials used at each location.
- Develop and update emergency procedures and any drills monitor drills conducted.
- Establish annual safety objectives ensuring that plans of action and responsibilities have been developed to accomplish the objectives, periodically monitor the progress being made.

**SUPERVISORS:** most of what is planned and established must reach the employee on the job by way of the first line supervisor, who is in frequent and close association with the employee. The supervisor is responsible to ensure that all employees under their control follow all safety and health policies, procedures, and rules established by SIGNATURE STAFF RESOURCES and this plan. Furthermore, supervisors are also responsible for administering training and guidance to employees under their direction and have the authority to reprimand and recommend disciplinary actions against employees that choose to violate the safety and health policies of SIGNATURE STAFF RESOURCES.

- By personal example, communicate and demonstrate to employees the importance of working safely.
- Be knowledgeable of all General Safety Rules and Safe Work Practices, and enforce them as they apply to the area of supervisory responsibility.
- Enforce the wearing of required personal protective equipment.
- Insist upon and demand good housekeeping practices.
- Ensure the employees understand and properly follow work procedures that are established for their safety.
- Provide both group and individual employee recognition for good safety performance.
- Include safety as an appraisal item on each annual performance review.
- Respond to all employee safety suggestions and take immediate action to correct any unsafe physical condition of which you become aware.
- Instruct each new and/or transferred employee on hazards of the job or task that the employee will be assigned.
- Plan, organize and conduct effective employee safety meetings, such meetings are to be held monthly at a minimum, more frequently if work conditions warrant.
- Ensure that any assigned representatives to the Safety and Health Committee or an alternate attends all scheduled committee meetings.
- Promptly investigate all accidents or near-miss incidents to determine causes, and develop corrective actions needed to prevent a recurrence. Complete in a quality manner the appropriate accident investigation report and submit the report within 24 hours to your immediate manager.
- Conduct scheduled safety surveys and inspections of the work area. Ensure that corrective measures are initiated and that progress is being made through consistent follow-up action.

## SAFETY AUTHORITY AND ACCOUNTABILITY

**Employees** have a responsibility for their own safety, but likewise, they have responsibility to family, co-workers, and community and to their employer by whom they are paid. In the performance of their duties, they will be expected to observe safety rules, practices and procedures, as well as, instructions related to the efficient performance of their work. The ideal in safe and efficient operation is reached only when all employees are safety conscious and keenly alert both mentally and physically. Employees will be held accountable for the following safety and health responsibilities:

- Comply with instruction of supervisors, and abide by all safety rules, practices, and procedures.
- Reporting all accident, injuries, or near miss incidents to direct supervision and cooperate with any investigative efforts.
- Reporting any observed unsafe work practices or conditions to supervision immediately.
- Reporting any unsafe or improperly working machinery to supervision immediately.
- If your supervisor fails to correct unsafe conditions to your satisfaction, immediately stop all work related activities and report the condition to the office or managerial staff.
- Observing and following all established safety policies, procedures and rules.
- Be actively involved in the safety program by submitting recommendations relating to safety.
- Reporting to work physically able to perform your job in a safe manner.
- Know your exact duties in case of fire or other emergency.
- Attend and participate in all safety meetings and/or training and apply increased safety knowledge to work habits.

## SAFETY AND HEALTH OBJECTIVES

### (TO BE IMPLEMENTED WITH SUSTAINED COMPANY GROWTH)

As previously stated in the corporate policy statement, the overall goal of SIGNATURE STAFF RESOURCES is “a safety and health program that will reduce the number of injuries and illnesses to an absolute minimum.” While all program activities are aimed at achieving this goal, such a goal is too general to provide a workable framework for organizing a successful program. To provide this a framework, it is necessary to formulate specific measurable safety and health objectives based on this goal.

This section is designed to assist the development of well formulated objectives that provide the foundation for being able to better organize activities, allocate staff, monitor performance, assess program effectiveness, and communicate information about the program to others.

Safety and health objectives. Including plans of actions will be established by each SIGNATURE STAFF RESOURCES operating company on an annual basis. The objectives should address specific needs as identified by injury analysis, inspection reports review, and similar related information. It is important to understand that an objective is a result to be achieved which is defined in a clear statement, can be measured, and is to be accomplished within a specific period of time.

The following are examples of quantitative and qualitative objectives that could be formulated:

1. Reduce by 20% the number of OSHA recordable injuries and illnesses.
2. Train all supervisors in the use of internal injury/illness reporting system by 2/28/02.
3. Revise and distribute General Safety Rules to all employees by 6/30/02.
4. Assess the safety needs and obtain a safety video each month for scheduled safety meetings.

The appropriate assignment of objectives is very important. Quantitative or statistical type objectives should be reserved for individuals at management level only, persons below this level should be assigned objectives of qualitative or action oriented nature. However, the qualitative objectives should compliment the quantitative objectives established by management. For instance, if a manager lists an objective to reduce the number of OSHA recordable back injuries, then subordinates should establish objectives aimed at increasing the awareness of safe lifting techniques.

**FORM 1, SAFETY AND HEALTH OBJECTIVES REPORT**, has been provided for assistance in objective setting at all levels. The document will assist in defining specific objectives and a separate form should be submitted for each objective that is established. Although it is expected that all written objectives should be finalized by the end of a given year, the exact assignment periods may need to be agreed upon by individual managers and their subordinates.

The assignment of formal, written safety and health objectives will lack full effectiveness unless completion is measured.

**FORM 2, SAFETY AND HEALTH OBJECTIVES STATUS REPORT**, has been provided to assist managers with measuring of progress regarding the objectives submitted by subordinates. It is expected that progress will be measured on at least a quarterly basis.

## SAFETY AND HEALTH OBJECTIVES

### SAFETY AND HEALTH OBJECTIVE DEVELOPMENT FORM

Safety & Health Program Objective No. \_\_\_\_\_

Directions: Use one of these sheets for each objective. Consider the following areas as subjects for Safety & Health Program Objectives.

- Deficiencies, problems, or needs of the written program and its implementation.
- Accident trends.
- Physical or procedural hazards.

#### DEFINING THE SPECIFIC DEFICIENCY, PROBLEM, OR NEED

A. Deficiency, problem, or need: \_\_\_\_\_

B. More Specifically, (What evidence do you have?):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

#### II. DESIRED RESULTS

In terms of specific, controllable, measurable objectives, state the desired result on each deficiency, problem, or need listed under 1-B.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

III. PLAN OF ACTION TO ACHIEVE DESIRED RESULTS: Outline specific activities to be carried out, stat who is responsible for each, and when each will be done.

<u>ACTION TO BE TAKEN</u>	<u>BY WHOM</u>	<u>TARGET DATE</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Submitted by: \_\_\_\_\_

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

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

**SAFETY AND HEALTH OBJECTIVE STATUS REPORT FORM**

CALENDAR/FISCAL YEAR: \_\_\_\_\_ TO \_\_\_\_\_  
\_\_\_\_\_

DATE OF THIS REPORT:

OBJECTIVE	PERSON (S) RESPONSIBLE	TARGET COMPLETION DATE	STATUS

Submitted by: \_\_\_\_\_

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

## **SAFETY AND HEALTH COMMITTEES**

### **(TO BE IMPLEMENTED WITH SUSTAINED COMPANY GROWTH)**

A Safety and Health Committee is a group of interested salaried and hourly personnel that meet periodically to monitor the ongoing implementation of the company safety and health program. The basic purpose of the committee is to promote safety awareness by involving employees directly in the safety and health programming efforts.

Each SIGNATURE STAFF RESOURCES operating company will develop a Safety and Health Committee comprised of manager(s), safety coordinator(s), selected supervisory and employee level personnel. Supervisory and employee personnel should be rotated each six months.

The committee should be chaired by a member of line management, but the position of chairperson should also be rotated periodically. The Safety Coordinator will act in an advisory capacity. The chairperson will chair the meetings; assign committee responsibilities, and report committee activities and recommendations to his/her immediate manager. A secretary should be chosen to record minutes of the meetings as directed by the chairperson. Meeting notes/minutes should be distributed to appropriate personnel and all committees members. Care should be taken to correctly document all committee activities and to ensure that corrective actions are followed up on through completion.

The committee will meet on a periodic basis and meetings should follow an established agenda. The meetings should be devoted primarily to the following:

- Review injuries and accidents that have occurred since the last meeting, along with corrective measures that have been implemented or scheduled.
- Review the status of corrective actions generated by safety inspection/survey reports.
- Discuss unsafe work methods and hazardous conditions that have been observed or reported by committee members.
- Discuss safety educational and promotional activities that may be necessary.
- Submit recommendations to appropriate management personnel.

Additionally the safety committee may be involved in providing safety inspections/surveys of the workplace. If so, then the results of these activities should be discussed during the scheduled meetings.

**SAFETY AND HEALTH COMMITTEES**

SAFETY COMMITTEE MEETING MINUTES FORM

Suggested Order of Business

- Ø 1. Roll Call
- Ø 2. Reading Of Minutes Of Previous Meeting
- Ø 3. Consideration of business held over from last meeting
- Ø 4. Report on progress made on previous recommendations
- Ø 5. Reading and discussing of reports submitted to committee
- Ø 6. Discussion of accidents that have occurred since last meeting
- Ø 7. Recommendations for prevention of such accidents
- Ø 8. Report on safety instructions to employees (bulletins, talks, etc.)
- Ø 9. New business and discussion of special safety projects
- Ø 10. Meeting adjourned

✓ (Please check each item as it is completed)

- 1. Company/Department Name: \_\_\_\_\_
- 2. Chairperson: \_\_\_\_\_
- 3. Location: \_\_\_\_\_
- 4. Date of Meeting: \_\_\_\_\_
- 5. Date of Last Meeting: \_\_\_\_\_
- 6. Committee Members Present: \_\_\_\_\_

<u>Printed Name</u>	<u>Signature</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

- 7. Reading of Previous Minutes/Old Business
- 8. Review of Loss Experience since last meeting. (Identification of Loss Experience trends.)
- 9. Review of Safety Survey/Inspections. Status of Recommendations
- 10. New Recommendations

**SAFETY AND HEALTH COMMITTEES**

**SAFETY COMMITTEE ACCIDENT/INJURY REVIEW FORM**

INJURIES

Name: \_\_\_\_\_  
Description of Injury: \_\_\_\_\_  
Identified Cause of Injury: \_\_\_\_\_  
Solution/Corrective Action: \_\_\_\_\_  
Implementation Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Description of Injury: \_\_\_\_\_  
Identified Cause of Injury: \_\_\_\_\_  
Solution/Corrective Action: \_\_\_\_\_  
Implementation Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Description of Injury: \_\_\_\_\_  
Identified Cause of Injury: \_\_\_\_\_  
Solution/Corrective Action: \_\_\_\_\_  
Implementation Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Description of Injury: \_\_\_\_\_  
Identified Cause of Injury: \_\_\_\_\_  
Solution/Corrective Action: \_\_\_\_\_  
Implementation Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Description of Injury: \_\_\_\_\_  
Identified Cause of Injury: \_\_\_\_\_  
Solution/Corrective Action: \_\_\_\_\_  
Implementation Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Description of Injury: \_\_\_\_\_  
Identified Cause of Injury: \_\_\_\_\_  
Solution/Corrective Action: \_\_\_\_\_  
Implementation Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Description of Injury: \_\_\_\_\_  
Identified Cause of Injury: \_\_\_\_\_  
Solution/Corrective Action: \_\_\_\_\_  
Implementation Date: \_\_\_\_\_

## INJURY AND ACCIDENT ANALYSIS AND REVIEW

As previously mentioned in the Duties and Responsibilities section of this manual, **Management of SIGNATURE STAFF RESOURCES** is responsible and will review and analyze all data, records and other documentation that pertains to the employee safety and health program. This review is imperative to the success of the program and will be conducted on at least a **QUARTERLY** basis. The focus of this review will be on overall deficiencies in the injury prevention plan, which allowed any injuries to take place. If there have been no new accidents and resulting injuries then the review would be limited to ongoing workplace surveys, safety training, unsafe behavioral identification, and safety programming changes.

This review process will include such items as:

- 1. Review of Past Injuries and Accidents:** A review of the most recent accidents and injuries to identify any trends or previously unidentified deficiencies in safety programming.
- 2. Accident Trend Identification:** Employees will be made aware of identified or developing trends as they are recognized with the trend factors being a focal point for corrective action and employee training. Input from all levels of employment will be gathered to provide information and recommendations for corrective measures to eliminate identified trends.
- 3. Injury Cause and Corrective Action Identification and Implementation:** Follow-up on implementation of corrective measures will be conducted by **Management** until the causal factor has been eliminated or controlled
- 4. Workplace Hazard Surveys:** Review all ongoing workplace safety surveys and inspections to ensure that hazards and behaviors are being monitored in the workplace and that corrective actions are being implemented to eliminate these exposures.
- 5. Employee Safety Training:** Employee training records will be reviewed on a regular basis to ensure an adequate and effective training program is maintained and in compliance with regulatory requirements. Employees will be interviewed from time-to-time to establish retention of training and determine when information should be supported or repeated
- 6. Safety Program Procedural Changes:** Review any safety programming changes to ensure that this information is being disseminated to the appropriate level of employee.

Documentation of this review process will be completed by using the [Accident Analysis Forms](#) located in the section.

## INJURY AND ACCIDENT ANALYSIS AND REVIEW

## QUARTERLY BASIC CLAIMS ANALYSIS FORM

Quarter		A	B	C
		Number of Claims	Claims Costs	Number of Employees
<b>Current Year</b>				
1	1 <sup>st</sup>			
2	2 <sup>nd</sup>			
3	3 <sup>rd</sup>			
4	4 <sup>th</sup>			
	<b>Total</b>			
<b>Previous Year</b>				
6	1 <sup>st</sup>			
7	2 <sup>nd</sup>			
8	3 <sup>rd</sup>			
9	4 <sup>th</sup>			
	<b>Total</b>			

## Required Calculations:

- Average direct cost per claim, Column B ÷ Column A = \_\_\_\_\_
- Total Claims Cost (Direct/Indirect), Column B x 4 = \_\_\_\_\_  
(**Note:** The ratio of indirect claims costs to direct claims costs has been estimated to be somewhere between 4 and 20 times the direct claims cost, for this analysis, we will use the factor of 4)
- Total (Direct/Indirect) Cost Per Claim, (Column B x 4) ÷ Column A = \_\_\_\_\_
- The Average Claims Costs Per Employee (Column B x 4) ÷ Column C = \_\_\_\_\_
- The Injury Frequency as a Percentage (Column A ÷ Column C) x 100 = \_\_\_\_\_  
(**Note:** This is how many injuries have been experienced per 100 employees)
- The percentage difference in claims costs for this quarter/year compared to last previous, (Column B, Previous Cost – Column B, Current Cost) ÷ Column B, Previous Cost = \_\_\_\_\_
- The percentage difference in the number of claims for current quarter/year compared to previous quarter/year.  
(Column A, Previous Quarter/Year – Column A, Current Quarter/Year) ÷ Column A, Previous Quarter/Year = \_\_\_\_\_



**INJURY AND ACCIDENT ANALYSIS AND REVIEW****INJURY AND ACCIDENT ANALYSIS – INJURY TYPE**

ACCIDENT TYPE	CASES	% OF TOTAL CASES	LOST WORKDAY CASES	% OF TOTAL LOST WORKDAY CASES
Foreign Body in Eye				
Cuts				
Bruises/Contusions				
Burns				
Punctures				
Amputation				
Fractures				
Strains/Sprains				
Multiple Injuries				
Illness				
OTHER				
TOTAL				

**INJURY AND ACCIDENT ANALYSIS – BODY PART**

PART OF BODY INJURED	CASES	% OF TOTAL CASES	LOST WORKDAY CASES	% OF TOTAL LOST WORKDAY CASES
Head				
Eyes				
Arms				
Hands				
Back				
Chest				
Abdomen				
Legs				
Feet				
OTHER				
TOTAL				



## EMPLOYEE INVOLVEMENT

**SIGNATURE STAFF RESOURCES** encourages employee involvement in each component of the ongoing safety and injury prevention program. **Management** will solicit this involvement by giving each employee an opportunity to participate and be responsible for the implementation, maintenance and compliance of the safety program for their respective work areas or job assignment.

### SAFETY MEETINGS

This company will ensure that all employees meet **at least quarterly** to discuss safety and health issues or concerns and increase employee awareness of employee safe work practices, rules and procedures. Each direct supervisor will complete safety meetings as part of their job ongoing responsibilities. Regular meetings will be scheduled in advance with a pre-chosen topic designed to keep the safety program active in the minds of the employees. The topic may be posted or issued to each employee so they can be more effectively prepared to discuss the subject.

Each meeting need not take longer than 15 to 30 minutes, but information should be communicated in the supervisor's own words. To enhance the meetings, actual items of the topic should be introduced or demonstrated such as personal protective equipment, pictures of hazards, etc. Visual aids such as videos may also be used to assist with the presentation.

The meeting should also allow time for and offer an avenue for employees to voice their concerns regarding workplace safety and health.

As applicable, the following information should also be covered:

- Review of any injuries the work group has experienced since the last meeting.
- Review any safety violations noted by the supervisor during day-to-day observations or by personnel conducting safety inspections of the work area.
- Review work planned for the week ahead, and discuss higher risk activity and necessary safeguards.

Records of all meetings will be fully documented regarding topic, participation, and resource material. The following form may be used for documentation purposes.



## EMPLOYEE INVOLVEMENT

### REPORTING OF HAZARDS AND UNSAFE CONDITIONS

As a condition and requirement of continued employment, all employees are required to immediately report hazards and unsafe conditions in the workplace to their immediate **Supervisor**.

The Report of Hazards and Unsafe Conditions **Form (Page 20)** will be made readily available to all employees and serve as a means for reporting these conditions.

All **Supervisors** will take prompt action relating to all hazard reports by investigating and determining if a true hazard or injury potential exists. If it is determined that a hazard does exist, immediate corrective action will be taken. The reporting employee will be notified by the Supervisor of the corrective action taken or the procedures used to conclude that no hazard exists. This information will be shared with all employees of the work area and, if practical, the entire company.

**EMPLOYEE INVOLVEMENT**

**REPORT OF HAZARDS AND/OR UNSAFE CONDITIONS**

DATE OF REPORT: \_\_\_\_\_

PERSON REPORTING: \_\_\_\_\_

HAZARD/CONDITION IDENTIFIED: \_\_\_\_\_

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

COMPANY FINDINGS: \_\_\_\_\_

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

CORRECTIVE ACTION TAKEN: \_\_\_\_\_

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

DATE COMPLETED: \_\_\_\_\_

COMPLETED BY: \_\_\_\_\_

Management Review by: \_\_\_\_\_ Date: \_\_\_\_\_

Additional Comments/Recommendations: \_\_\_\_\_

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

## EMPLOYEE SAFETY ORIENTATION AND TRAINING PROGRAM

**SIGNATURE STAFF RESOURCES** is committed to providing safety related orientation and training to all employees at all levels. The purpose of this section is to ensure that each employee is effectively instructed with regard to his or her assigned job and related exposure to injury or illness and to educate and familiarize employees with applicable safety and health procedures, rules, and work practices.

The Loss Control Department will develop, implement, and maintain an aggressive safety and health orientation and training program. Employee safety training will be administered in phases.

1. **NEW EMPLOYEE OR REASSIGNMENT ORIENTATION TRAINING.** For all newly hired or transferred employees prior to the initial work assignment, appropriate training will be provided by the employee's immediate supervisor or a qualified person designated by the supervisor. The orientation will consist of a review of the general safety rules, safe lifting guidelines and/or specific job assignment and work area safety requirements. Safety procedures/rules will be stressed and/or demonstrated during the session. Job Safety Analyses appropriate to the employee's job should be fully reviewed. Personal Protective Equipment, where required, will be issued and demonstrated. All new employees will be given a tour of the assigned work location and an opportunity to pose questions to expedite the familiarization process.

New employees will not be released to a job assignment until it has been determined by their immediate Supervisor that the individual has retained the minimal acceptable requirements of the training provided and received all pertinent information needed to safely perform the assigned job duties. Additionally the employee must sign the **Employee Acknowledgment Form** (Page 19) indicating his/her understanding of the general safety rules.

2. **EMPLOYEE REGULARLY SCHEDULED, REFRESHER OR ONGOING TRAINING.** Periodically all managers, supervisors, and employees will receive safety related training. The training subjects and materials will be developed utilizing industry and company specific criteria relating to identified and potential hazard exposures, injury and incident data, as well as training required by federal regulations, such as annual forklift operator training. Training will be conducted at intervals that ensure demonstration of adequate employee training and at no time will an employee be approved to work if a period of greater than 12 months has passed without some type of safety refresher training. All employees assigned to attend a training session must demonstrate competency and retention of the minimal acceptable levels of understanding, prior to returning to any job assignment.



## SAFETY SURVEYS AND INSPECTIONS

This section is developed to ensure that comprehensive, documented safety related inspections and hazard surveys are being completed. **SIGNATURE STAFF RESOURCES** has implemented the following program to identify, correct, and control workplace hazards on an ongoing basis.

### COMPREHENSIVE SURVEYS

**SIGNATURE STAFF RESOURCES** has arranged to receive a safety and health survey by the current [workers' compensation insurance provider](#) on at least an annual basis. These surveys will be established to identify existing and potential hazards, safety program deficiencies and non-compliance issues that should be addressed. The findings of the surveys will be discussed and recommendations for corrective actions suggested. The survey will also include an evaluation of the overall effectiveness of this Safety & Injury Prevention Program's policies and procedures.

### SAFETY INSPECTIONS

**Management** will conduct [annual](#) in-house safety inspections that will include the entire work area and related equipment. All inspections will be conducted on an ongoing basis without interruption. Management will allocate adequate staff time and resources to perform the surveys.

An inspection checklist(s) will be used to assist with completing the inspection process. The list will be evaluated and updated with hazard exposures that are identified during the inspections and through other pertinent data as determined necessary. The contents of this checklist will be reviewed on a regular basis to ensure effectiveness. The checklist will be and become a part of the permanent record of the inspection and will serve as a confirmation of the survey.

**Management** will review the inspection checklists to ensure that a course of corrective action and time line has been established for eliminating each deficiency.

### INFORMAL DAILY INSPECTIONS

All supervisors and employees will be responsible for making informal safety inspections in the form of general observation and awareness of their assigned work area or work position on an ongoing basis and as part of their daily regular job duties. The supervisor should pay close attention to observing work methods as well as work conditions. All hazards identified by this observation will be reported to an immediate supervisor for corrective action. The [Report of Hazards and/or Unsafe Conditions Form](#) will be used.

### CLIENT WORK SITE SAFETY EVALUATIONS

**SIGNATURE STAFF RESOURCES** will also perform Client Work Site Safety Evaluations prior to assigning employees to job duties at a remote work site or location. The Client Site Inspection Checklist Form and Work Site Hazard Evaluation will be completed by appropriate personnel and reviewed by Management prior to employee assignment.

**SAFETY SURVEYS AND INSPECTIONS**

**SIGNATURE CLIENT SITE SAFETY INSPECTION CHECKLIST**

Client Name: \_\_\_\_\_ Date of Inspection: \_\_\_\_\_

Nature of Clients Business: \_\_\_\_\_

Complete Job Descriptions of SIGNATURE employees job duties:

- 1) \_\_\_\_\_  
\_\_\_\_\_
- 2) \_\_\_\_\_  
\_\_\_\_\_
- 3) \_\_\_\_\_  
\_\_\_\_\_

**SAFETY PROGRAM ELEMENT IMPLEMENTED BY CLIENT**

**Implemented = Is this safety element in place and effectively protecting Employees?  
Needed = Is this safety element needed to protect Employees?**

PROGRAM	In-Place		Needed		Comments
	Y	N	Y	N	
Personal Protection	ρ	ρ	ρ	ρ	_____
Safety Orientation	ρ	ρ	ρ	ρ	_____
Safety Training	ρ	ρ	ρ	ρ	_____
Safety Meetings	ρ	ρ	ρ	ρ	_____
Safety Committee	ρ	ρ	ρ	ρ	_____
Safety Inspections	ρ	ρ	ρ	ρ	_____
Safety Coordinator(s)	ρ	ρ	ρ	ρ	_____
Accident Investigation	ρ	ρ	ρ	ρ	_____

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

**SAFETY SURVEYS AND INSPECTIONS**

**SIGNATURE CLIENTS' WORK SITE HAZARD POTENTIAL/EXPOSURE FORM**

**Exposed = Will employees be exposed to this hazard?**  
**Controlled = Is the hazard to employees adequately controlled?**

HAZARD	Exposed		Controlled		COMMENTS
	Y	N	Y	N	
Slips/Falls	ρ	ρ	ρ	ρ	_____
Chemical Exposure	ρ	ρ	ρ	ρ	_____
Skin	ρ	ρ	ρ	ρ	_____
Inhalation	ρ	ρ	ρ	ρ	_____
Ergonomic	ρ	ρ	ρ	ρ	_____
Lifting	ρ	ρ	ρ	ρ	_____
Push/pull	ρ	ρ	ρ	ρ	_____
Carrying	ρ	ρ	ρ	ρ	_____
Repetitive tasks	ρ	ρ	ρ	ρ	_____
Mobile Equipment Operation	ρ	ρ	ρ	ρ	_____
Forklifts	ρ	ρ	ρ	ρ	_____
Loaders	ρ	ρ	ρ	ρ	_____
Order picker/lifts	ρ	ρ	ρ	ρ	_____
Other:_____	ρ	ρ	ρ	ρ	_____
Motor Vehicles (Ride/drive)	ρ	ρ	ρ	ρ	_____
Machinery (List Types)	ρ	ρ	ρ	ρ	_____
_____	ρ	ρ	ρ	ρ	_____
_____	ρ	ρ	ρ	ρ	_____
_____	ρ	ρ	ρ	ρ	_____
_____	ρ	ρ	ρ	ρ	_____
Electrical	ρ	ρ	ρ	ρ	_____
Hand Tools (List Types)	ρ	ρ	ρ	ρ	_____
_____	ρ	ρ	ρ	ρ	_____
_____	ρ	ρ	ρ	ρ	_____
_____	ρ	ρ	ρ	ρ	_____
_____	ρ	ρ	ρ	ρ	_____
Power Tools (List Types)	ρ	ρ	ρ	ρ	_____
_____	ρ	ρ	ρ	ρ	_____
_____	ρ	ρ	ρ	ρ	_____
_____	ρ	ρ	ρ	ρ	_____
Falling Objects	ρ	ρ	ρ	ρ	_____
Airborne Particles/Dust/Debris	ρ	ρ	ρ	ρ	_____
Confined Spaces	ρ	ρ	ρ	ρ	_____
Fire Hazards	ρ	ρ	ρ	ρ	_____
Excavations	ρ	ρ	ρ	ρ	_____
Drowning	ρ	ρ	ρ	ρ	_____
Violence/Crime Area	ρ	ρ	ρ	ρ	_____
Emergency Evacuation Plan	ρ	ρ	ρ	ρ	_____

Signature: \_\_\_\_\_

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

### SAFETY SURVEYS AND INSPECTIONS (con't)

In addition to established contents of inspection checklists, supervisors or anyone conducting safety surveys and inspections should be aware of the following unsafe acts of employees:

- Using equipment without training or authority,
- Insecure or disorderly piling or arranging of materials,
- Operating equipment at unsafe speed,
- Using defective tools or equipment,
- Unsafe loading or unloading of trucks, skids, racks, etc,
- Lifting improperly or handling loads that are too heavy,
- Using improper tools, equipment, or vehicles,
- Making guards or safety devices inoperative,
- Failure to use personal protective equipment,
- Repairing or adjusting machinery in operation or motion,
- Horseplay.

Remember unsafe conditions **may** cause injuries....unsafe acts and work practices **cause** injuries.

#### DOCUMENTATION

Safety and Health Inspection checklists will be submitted for each inspection completed, regardless of person completing inspection. Inspections completed by supervisor will include a description of corrective action taken or planned for each deficiency with date of correction or date to be corrected. A copy of the checklist should be forwarded to the supervisors immediate manager and safety coordinator.

**SAFETY SURVEYS AND INSPECTIONS (con't)**

**SAFETY SELF-INSPECTION CHECKLIST**

Date of Inspection: \_\_\_\_\_  
Person Conducting Inspection: \_\_\_\_\_  
Location Inspected: \_\_\_\_\_

(Use back if needed for comments concerning identified exposures.)

	<b>YES</b>	<b>NO</b>
1. <b>Housekeeping</b> - Is the work area clean and orderly?	π	π
2. <b>Floors</b> - Are floors in good condition and free of trip hazards?	π	π
3. <b>Stairways</b> - Are stairways safe and free of tripping hazards?	π	π
4. <b>Storage</b> - Are materials, products, and supplies stored safely?	π	π
5. <b>Ladders</b> - Are proper sized ladders provided where needed and of standard construction, and in safe working condition?	π	π
6. <b>Machines &amp; Equipment</b> - Are machines and equipment in safe working condition with necessary protective guards in place?	π	π
7. <b>Tools</b> - Are the right tools for the job being used? Are all tools, including power tools, in safe working condition?	π	π
8. <b>Electrical</b> - Are grounds provided on power tools and extension cords? Are electrical power supply panels and boxes securely protected from accidental contact? Are circuits properly marked?	π	π
9. <b>Lighting</b> - Is adequate lighting provided in all work areas?	π	π
10. <b>Personal Protective Equipment</b> - Are all employees provided personal protective equipment when their work duties require the use of this equipment? Are they trained in proper use?	π	π
11. <b>First Aid</b> - Are first aid supplies provided?	π	π
12. <b>Fire Extinguishers</b> - Are fire extinguishers easily accessible and properly inspected? Have employees who would be expected to use fire extinguishers had training in their safe use?	π	π
13. <b>Exits</b> - Are emergency exits properly marked and readily accessible?	π	π

Additional Hazards/Conditions Noted: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## SAFETY SURVEYS AND INSPECTIONS (con't)

### HAZARD CORRECTION AND CONTROL (Corrective Action and Follow-Up)

Whenever possible, the supervisor will correct the unsafe work methods or conditions immediately upon recognition. All identified hazards will receive a timely response.

Each Safety and Health Inspection Checklist will be reviewed during the next scheduled survey. All previous identified items must be completed prior to the next scheduled survey. Hazard conditions or procedures detected during inspections for which no corrective action can be determined by the supervisor will be brought to the attention of the safety coordinator. The coordinator will consult with the supervisor, maintenance/engineering, Safety and Health Committee, and outside consultants as necessary to determine suitable corrective actions.

### CORRECTION

Whenever possible and feasible, hazards identified in the work area will be corrected by eliminating the cause of the hazard at the source. This will include, but not be limited to the following:

- Discontinuation or removal of identified hazardous chemicals, materials, or substances from the work area.
- Discontinuation from use or removal of hazardous equipment or machinery until replaced or repaired to safe operating condition.
- Repair of facilities to remove identified hazards.
- Implementation of additional corrective action as identified.
- Retraining of employees to correct any unsafe employee act or behaviors.

### CONTROL

When identified hazards cannot be eliminated from the work area, the hazard will be effectively controlled by engineering, administrative procedures, work practices, personal protective equipment, or any suitable combination of these measures.

**Engineering controls include, but not limited to the following:** Isolation of employee exposure to the hazard, guarding or displacement of employee exposure to the hazard or preventative maintenance and repair of machinery and equipment.

**Administrative controls and procedures will include, but not be limited to the following:** Written programs to establish administrative guidelines for safe work practices, and additionally established and implemented safety work rules and procedures

**Work practice controls will include, but not be limited to the following:** Careful planning and performance of each assigned job, task, or duty; reduction in duration of exposure to hazards; and adherence to safety and health rules and procedures.

Prioritization for implementing corrective actions pertaining to safety and health hazards and deficiencies will be included on the Safety and Health Inspection Checklists. Correction completion dates and date goals should be indicated on the list at the time of the survey. Responsibility for follow up must also be identified.

## JOB SAFETY ANALYSIS

There are elements of all jobs where certain tasks require additional safety emphasis. One technique used to identify hazards associated with any job is a Job Safety Analysis. A Job Safety Analysis is method of studying a job (or job task) in order to:

- a. Define basic activities or steps which must be followed to complete a particular task,
- b. Identify hazards or potential injuries associated with each step,
- c. Develop approaches that will eliminate, minimize, or prevent such hazards or injury potentials.

The most significant advantage of completing Job Safety Analysis is that it requires a close; step-by-step look at a job. The basic completion of a JSA results in the recognition of unsafe conditions or work practices that could be eliminated.

### DEVELOPMENT

There must be an organized approach to the development and implementation of a JSA Program. This program should include the following items.

- 1) Establishing specific objectives and goals for the program.
- 2) Training of management personnel in basic JSA techniques.
- 3) Prioritize jobs for JSA's.
- 4) Establishing a timetable for conducting the JSA's.
- 5) Development of the JSA's.
- 6) Review and approving the JSA's.
- 7) Distribution and implementation of the JSA's.
- 8) Updating the JSA's.
- 9) Periodic review of the JSA's.

Each of these items is somewhat self-explanatory in nature and need not be fully discussed. The following paragraphs will help explain some of the items that may need further explanation.

Prioritization of Jobs for JSA's: The following factors should be considered in selecting which jobs to analyze.

- 1) Jobs that have caused serious injuries in the past.
- 2) Jobs with high potential to cause severe injuries.
- 3) Jobs with a high injury frequency.
- 4) New jobs.

Sources to consider to assist with identification of this type of jobs includes: OSHA 300 Log, First Aid Logs, Loss Runs, and/or injury/accident/near miss reports.

Review and Approving the JSA's: After the draft copy of the JSA has been completed by the supervisor, it should be reviewed by the location manager and/or the safety coordinator to ensure that no major problems exist with the analysis. Any questions should be discussed with the supervisor, employee, and the Safety Committee.

Distribution and Implementation: The completed JSA's should be available within the location and should be readily accessible to the employees for their review of the established job method. The

## JOB SAFETY ANALYSIS (con't)

JSA's should be reviewed with all new hires and any employee who has been transferred or not performed the job in the last six months.

Updating the JSA's: If changes in operation, equipment, tools, or another hazard are identified, the JSA should be updated and the new job method communicated to the employees as quickly as possible. The JSA should be reviewed every time there is an accident involving that particular job to ensure there have been no changes in the operation.

Periodic Training: All employees who perform the job should be retrained at least annually on the JSA.

### CONDUCTING THE JSA

The two basic methods of conducting JSA's are by "observation" and "discussion". The "observation" method is the preferred method in that the job is actually observed, and the employee can be asked questions about his activities. However, if it is not practical to observe the actual job being done or the job may be a future process, the discussion method is a useful alternative. With either method, the basic elements are 1) Define the job steps, 2) Identify the hazards, and 3) Develop approaches.

The observation technique breaks down the job to give you a more in-depth look at the actual sequence of activities in developing the JSA. The development activities include the following:

1. Selecting the proper employee to observe.
2. Explaining the purpose of the analysis.
3. Observing the job and formalizing the job steps.

Before the search for hazards begins, the job should be broken down into steps, which describe what is done, and in what order, without going into the details of how each job step is to be done. The analysis should be basic, not too detailed, nor too general in nature. A rule of thumb is that the analysis should contain from 5 to a maximum of 15 steps. Each step is a generalization and given in its natural order of occurrence. Details are omitted, hazards are not mentioned, and precautions are not described. Each step should begin with an "action".

4. Recording the basic steps on the JSA Form.

Basic steps of the job should be recorded on the JSA Form, a sample is included in this section. Each of these job steps should be put on the left-hand column of this form.

5. Checking the steps with the employee.

Once these basic steps have been recorded, discuss the steps with the employee to ensure that you have not left out any major activity and understand why the job is done in this manner.

6. Observing the job again to identify hazards and accident potential.

## JOB SAFETY ANALYSIS (con't)

Observe the job a second time to identify the hazards and potential accidents that may be associated with it. The purpose is to identify all hazards, whether they are part of the job environment or are inherent hazards of the job itself. While analyzing each job step, no attempt should be made to develop solutions. Doing so interferes with spotting hazards and potential accidents. As means to help develop the recognition of the hazards, 10 basic accident types should be used as the basis for the JSA.

These accident types include the following:

- Struck-By (SB)
- Struck-Against (SA)
- Contact-With (CW)
- Caught-On (CO)
- Caught-Between (CBT)
- Foot-Level-Fall (FLF)
- Fall-To-Below (FTB)
- Over-Exertion (OE)
- Health Exposure (E)
- Other (O)

The definitions of these accidents types are provided later. The accident types associated with each job step should be specifically identified.

The hazard and each accident type should be recorded in the center column of the form.

### 7. Observing the job again to develop corrective actions.

When the hazards and potential accidents associated with each job step have been identified, and their causes are understood, the next step is to develop ways to reduce the potential through developing controls over people, equipment, and/or the work environment. Possible controls over people could include changing the job procedure, providing additional training and instruction for the employees, and better employee selection. Controls for equipment could include guarding, interlocking, repair and maintenance, inspection procedures, and alteration or modification of the equipment. Controls for the work environment could include substitution for hazardous materials, altering material flow or handling methods, or ventilation and engineering controls, to name a few.

The solutions or corrective actions should be placed in the third column on the JSA form.

### 8. Discussing the hazards and corrective actions with the employee.

After the hazards and corrective actions(solutions) have been developed, the supervisor should discuss them with the employee who was used in the study to obtain his/her input.

### 9. Completing the JSA form.

A sample of a completed JSA is provided at the end of this section as a reference to completion.

## JOB SAFETY ANALYSIS (con't)

### Accident Types

To make hazard identification easier and more generally understandable, the system of ten (10) accident-types has been defined. Using this system, a hazard is identified by the potential accident(s) it can cause.

1. Struck-By (SB): A person is forcefully struck by an object.
2. Struck-Against (SA): A person forcefully strikes against an object.
3. Contact-With (CW): A person comes in contact with harmful material.
4. Caught-On (CO): A person or part of his clothing or equipment is caught on an object that is either moving or stationary.
5. Caught-Between (CBT): A person is crushed, pinched, or otherwise caught between either a moving object and a stationary object or between two moving objects.
6. Foot-Level-Fall (FLF): A person slips or trips and falls to the surface he is standing or walking on.
7. Fall-To-Below (FTB): A person slips or trips to a level below the one he was walking or standing on.
8. Over-Exertion (OE): Someone over-extends or strains himself while doing a job.
9. Health Exposure (E): Someone is exposed to harmful materials or conditions. This may occur over short term (acute) or the long term (chronic). These exposures normally require measurement by industrial hygiene techniques to determine severity of the hazard.
10. Other (O): A hazardous condition that is not classified elsewhere but has the potential for causing an accident.

### USE

Some ideas regarding usage have already been briefly mentioned, but the following details the uses of JSA's more thoroughly.

- a. Job Safety Instruction and Training: It is critical that each appropriate JSA be reviewed with the newly hired employee. This review should be fully documented.
- b. Retraining: Employees that return to work after extended periods due to layoff, injury, illness, etc., should also review their appropriate JSA's. The extent of review will depend on the length of time away from the job. Certainly, any job that has changed will need to be reviewed.
- c. Transfers: In most cases, employees that make job transfers need to be trained as new workers. Some alteration of the training may be made based on skill level, but all appropriate JSA's will need to be reviewed.
- d. Accident Investigation: Basically, an accident interrupts the completion of a job. As part of the investigation effort, the associated JSA should be reviewed to assist in determining what went wrong. The JSA may need to be amended based on the findings of the investigation.



## INJURY REPORTING AND INVESTIGATION

**SIGNATURE STAFF RESOURCES** will investigate all work related accidents, resulting injuries and near miss incidents involving employees or company property to develop preventative measures and implement corrective actions. Preventing future workplace injuries in our company is the principle purpose of accident investigation.

### REPORTING

**Employees are required to report any of the following to their immediate supervisor:**

- Accidents/incidents with injury/illness of any magnitude (including first aid related cases);
- Accidents/incidents resulting in property or equipment damage of any magnitude; and
- Any near miss incidents that could potentially have resulted in injury/illness or property damage.

Supervisors are required to report any of the above incidents to their immediate managers by completing the **Supervisor's Report of Injury** in detail.

**SIGNATURE STAFF RESOURCES** will report the following situations to state or federal agencies as required:

- OSHA; All fatalities and accidents involving hospitalization of (3) or more employees will be reported within 8 hours.

### ACCIDENT AND INJURY INVESTIGATION

All accidents and/or injuries will be formally investigated. An investigative team of at least the Immediate Supervisor, the employee(s) involved and any witnesses will come together and conduct a thorough investigation of the situation. Upon notification of an injury or near miss incident, the immediate supervisor will be responsible for initiating the investigative proceedings to determine the following:

- 1) What happened?
- 2) Why did it happen?
- 3) What was the basic cause (s) for it happening?
- 4) What will be done to prevent it from ever happening again?
- 5) Who is responsible for implementing the corrective action and when will it be implemented?

All activities and findings of the investigators will be documented and recorded for review. The **Supervisor's Accident Investigation Report Form** will be used as minimum documentation of the investigation.

### REVIEW

A member of management responsible for the department/area where the accident occurred will review all accident investigation reports to ensure pertinent information is transmitted to all concerned, for thoroughness, any needed remedial action and for corrective action determination and implementation.

**Insert FIRST REPORT OF INJURY**

**Supervisor's Accident  
Investigation Report**

GENERAL INFORMATION					
PLANT OR JOB				NAME OF INJURED OR DRIVER	
EST. AGE	MARRIED <input type="checkbox"/> Yes <input type="checkbox"/> No	OCCUPATION	EMPLOYMENT DATE	DATE OF INJURY/OCCURRENCE HOUR <input type="checkbox"/> am <input type="checkbox"/> pm	
Exact location .....					
Activity at time of injury or occurrence .....					
Describe injury or damage .....					
Was injured or driver acting in regular line of duty? <input type="checkbox"/> Yes <input type="checkbox"/> No (explain) .....					
NAME OF WITNESSES					
UNSAFE ACT (what happened)					
<input type="checkbox"/> Operating without authority; failure to secure or warn <input type="checkbox"/> Operating or working at unsafe speed <input type="checkbox"/> Making safety devices inoperative <input type="checkbox"/> Using unsafe equipment, hands instead of equipment, or equipment unsafely <input type="checkbox"/> Failure to use safe attire or personal protective equipment <input type="checkbox"/> Improper: <input type="checkbox"/> turn <input type="checkbox"/> lane usage <input type="checkbox"/> backing <input type="checkbox"/> interval <input type="checkbox"/> signal <input type="checkbox"/> judgment <input type="checkbox"/> Other:		<input type="checkbox"/> Unsafe loading, placing, mixing, combining, etc. <input type="checkbox"/> Taking unsafe position or posture <input type="checkbox"/> Working on moving or dangerous equipment <input type="checkbox"/> Distracting, teasing, abusing, startling, etc. <input type="checkbox"/> Lack of job training or instruction			
UNSAFE CONDITIONS					
<input type="checkbox"/> Improper guarding (unguarded, inadequately guarded, guard removal, etc.) <input type="checkbox"/> Defective substances or equipment (broken, poorly design of, slippery, etc.) <input type="checkbox"/> Hazardous arrangement (unsafely piled material, poor layout, poor housekeeping, no aisle markings, etc.) <input type="checkbox"/> Improper dress or apparel (goggles, gloves, shoes, masks, sleeves, etc.) <input type="checkbox"/> Defective: <input type="checkbox"/> brakes <input type="checkbox"/> motor <input type="checkbox"/> lights <input type="checkbox"/> wipers <input type="checkbox"/> steering <input type="checkbox"/> tires <input type="checkbox"/> wheels or rims <input type="checkbox"/> Other:		<input type="checkbox"/> Improper Illumination (none, glaring light, etc.) <input type="checkbox"/> Improper ventilation (poor, dusty, gassy, high humidity, etc.) <input type="checkbox"/> Poor road or visibility conditions			
STEPS TAKEN TO PREVENT A RECURRENCE					
<b>Unsafe Act:</b> <input type="checkbox"/> Instructed employee <input type="checkbox"/> Warned employee <input type="checkbox"/> Other action .....		<input type="checkbox"/> Supplied safeguard <input type="checkbox"/> Supplied pers. prot. equipment ..... ..... .....		<b>Unsafe Condition:</b> <input type="checkbox"/> Eliminated condition <input type="checkbox"/> Repaired condition <input type="checkbox"/> Guarded machine <input type="checkbox"/> Other action .....	
..... ..... ..... .....		..... ..... ..... .....		<input type="checkbox"/> Reported condition to: ..... ..... .....	
SUPERVISOR'S SIGNATURE _____			DATE _____		

## SAFETY DISCIPLINARY POLICY

**SIGNATURE STAFF RESOURCES** will enforce an employee disciplinary policy that relates to rules, policies and procedures established in SIGNATURE STAFF RESOURCES safety and injury prevention plan. The disciplinary policy will be a managerial tool to ensure a safe and healthful working environment. The disciplinary policy applies to all employees.

### VERBAL WARNINGS

**Management and Supervisors** will be allowed to issue verbal warnings to employees that commit minor infractions or violations of established safety rules or safe work practices. Continued violations of safety rules will lead to additional disciplinary actions.

### WRITTEN WARNINGS

**Managers or Supervisors** will issue written warnings for the following:

- ✓ Repeated minor violations of safety rules or procedures.
- ✓ Single serious violations of a rule or procedure that could have resulted in injury to them or another employee or could have caused property damage.

### DISCIPLINARY LEAVE, TERMINATION

**Supervisors** may recommend and **management** may institute disciplinary leave or employee termination for the above reasons and/or the following:

- ✓ A single serious or willful violation of a safety rule or procedure that results in an injury to an employee or property damage.
- ✓ Repeated violations and/or non-conformance to established safety rules or procedures.

### DOCUMENTATION

Violations of established company safety rules, regulations, policies or procedures will be documented in writing. The report will state the type and seriousness of the violation and will include a description of disciplinary action taken. The employee must read and sign the report acknowledging that they understand the seriousness of the violation. All safety violation information will be maintained in the employee's personnel file.

## SAFETY RECORDKEEPING

The only means of documenting actions, reviewing results and identifying trends and deficiencies in an employee injury prevention and safety program is through an effective safety recordkeeping program. Safety recordkeeping is also essential in tracking the performance of assigned duties and responsibilities under the program. This company is committed to implementing and maintaining up to date injury prevention and safety program records.

**Management** will maintain records of all work related injuries and illnesses. The records will be maintained at **SIGNATURE STAFF RESOURCES Office**, certain information, such as medical information is considered confidential and will be maintained so, separate from the employees' personnel files.

The following records relating to work related injuries and illnesses and will be maintained.

- ✓ OSHA 300, Log of Recordable Injuries and Illnesses (or equivalent),
- ✓ **(Applicable State)** Workers' Compensation Commission, Employer's First Report of Injury Forms,
- ✓ First Aid Log or other form of non-recordable accident/incident data.

The OSHA 300 Log of Recordable Injuries and Illnesses or an equivalent record will be maintained at **SIGNATURE STAFF RESOURCES Office**. The information will be maintained current within six working days as required.

The completed *LOG SUMMARY* for the previous calendar year, not the entire OSHA 300 Log will be posted by February 1<sup>st</sup>, in a conspicuous location and for employee review, and will remain posted until the end of April.

All data pertaining to employee injuries/illnesses that did not require medical treatment or were otherwise not recordable on the above-mentioned log, will be maintained in written record form and will include first aid treatment of any kind. This record will be in the form of a First Aid Log,

### **Safety and Health Survey and Inspection Records**

**SIGNATURE STAFF RESOURCES** will maintain and review records of all safety related surveys and inspections that are conducted within or that effect SIGNATURE STAFF RESOURCES, our employees, or facilities.

The following records relating to safety and health surveys and inspections will be maintained:

- ✓ Comprehensive survey reports and records of action taken,
- ✓ Documented checklists of in house self-inspection and records of action taken.

Reports generated and received as a result of comprehensive surveys conducted by outside professional agencies will be maintained for record and periodic review as well as made available for all employees' information. Members of management that receive these reports will ensure that recommendations are followed and that corrective actions are taken and documented for record keeping purposes.

## SAFETY RECORDKEEPING

Checklist ([Page 21](#)) used during the completion of an in-house self-inspection process will be maintained to document these inspections. The checklist will be and become a part of the permanent record of the inspection and will serve as a confirmation of the inspection.

### Safety Meeting Records

**SIGNATURE STAFF RESOURCES** will maintain accurate records of all employee safety meetings. These records will include the following information:

- ✓ Name of recorder,
- ✓ List of attendees, with signature,
- ✓ Details of topics discussed,
- ✓ Action or corrective measures suggested, recommended, or implemented.

Safety Meeting Attendance Form is found on [page 22](#).

### Training Records

**SIGNATURE STAFF RESOURCES** will maintain documentation ([Pages 19 and 23](#)) of all safety and health related training as part of the employees' permanent personnel file or in a designated employee safety training file. This documentation will be maintained as proof of training attendance. Records and documentation of employee safety related training will include:

- ✓ The trainer's or presenter's name,
- ✓ Date of training,
- ✓ Details of topic or subject covered,
- ✓ Legible identification of attendees,
- ✓ Attendee's signature.

### Accident and Injury Investigation Records

**SIGNATURE STAFF RESOURCES** will ensure proper records and documentation of all accident, incident, and near-miss incidents investigation activities are maintained and reviewed. Records and documentation will include:

- ✓ Designated Injury investigation form(s),
- ✓ Any other supporting data including photographs,
- ✓ Records of corrective action or preventative measures implemented.

Supervisor's Accident Investigation Form is found on [page 25](#).

## SAFETY RECORDKEEPING

### Equipment Maintenance and Inspection Records

Management will maintain any applicable records and data pertaining to equipment inspection and preventative maintenance programs performed involving company owned and controlled equipment or vehicles. Records and documentation will include:

- ✓ Routine inspection and maintenance records,
- ✓ Documentation of services performed by contract agreement
- ✓ Documentation of repair and replacement of parts or equipment

This documentation will be periodically reviewed by the Loss Control Department. The documentation will be utilized to determine an effective, ongoing equipment maintenance program and to ensure regulatory compliance with regulations that require inspections on certain equipment.

## FIRST AID PROGRAM

The purpose of this section is to ensure that each SIGNATURE work location is arranged and prepared to handle both emergency and non-emergency injuries. Emergency first aid is immediate temporary treatment given to someone injured or suddenly ill before medical services can be obtained.

Non-emergency first aid provides prompt attention to minor cuts, scratches, burns, and the like, for which medical attention is not usually considered necessary. In most instances and locations, first aid supplies will be approved and provided by the location manager. First aid supplies are typically provide for self administered application, however in some situations and at certain locations properly trained and certified first aiders will be designated to provide needed first aid services.

Written instructions will be posted in a conspicuous location, naming the person or persons to be notified in an emergency and listing their telephone numbers, along with emergency numbers for the following:

1. Servicing Physician or State Specific Physician Panel
2. Emergency Ambulance Service
3. Nearest Hospital
4. Fire Department
5. Police Department
6. Any additional emergency contacts and telephone numbers

### Documentation

A First Aid Log will be retained at a central first aid station of each work location. An example Log is included. Some work sites may require more than a single station depending on the size of the operation. The log is to be completed by the person accessing the first aid supplies.

It is the responsibility of the location manager to ensure that the log is properly maintained, and to review the information on at least a monthly basis for the purpose of identifying trends or problem areas.



## SAFETY & INJURY PREVENTION PROGRAM REVIEW AND REVISION

**Management** and/or other designated representatives will periodically (at least annually) review and revise this Safety & Injury Prevention Program for effectiveness and complete implementation. Special attention will be devoted to areas and criteria that demonstrate failure in a program component and to the introduction of new procedures, processes or equipment.

Corrective measures and program changes will be taken as deemed necessary to reemphasize or restructure the program to perform at the optimum effectiveness and to meet designated company safety related goals and objectives.

Information will be solicited from all levels of employees to determine the effectiveness of each program component, and for assistance in developing adjustments and corrections.

**SAFETY & INJURY PREVENTION PROGRAM REVIEW AND REVISION**

**INJURY PREVENTION PLAN REVIEW AND REVISION FORM**

DATE OF REVIEW: \_\_\_\_\_

PERSON(S) INVOLVED IN REVIEW:

Printed Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Signature: \_\_\_\_\_

PARTS/ELEMENTS REVIEWED: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

FINDINGS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ACTIONS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

FOLLOW UP RECOMMENDATIONS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## GENERAL SAFETY RULES

The purpose of this section is to ensure that **SIGNATURE** supervisors and employees have a mutual understanding of what constitutes safe work methods and procedures. General Safety Rules are being provided which have application for everyone. In addition, Safe Work Practices are listed following the General Safety Rules to provide safety guidelines for more specific work activities and exposures.

Location specific rules will be added, as identified and needed.

### **Enforcement**

If **SIGNATURE** personnel are to take the Safety & Injury Prevention Program seriously and support it, the following enforcement efforts are necessary:

1. Consistent enforcement of the safety rules at all work locations and from supervisor to supervisor.
2. Consistent observance of established safety rules by management personnel as well as hourly employees.
3. Making the reasons for the safety rules known to those expected to obey them.

General Safety Rules that are not consistently enforced serve only to undermine and weaken employees' perception of management's commitment to safety and health. Violations of the General Safety Rules will prompt disciplinary action as described in the Safety Disciplinary Section of this manual and in a manner commensurate with violations of other standard corporate policies.

## GENERAL SAFETY RULES

1. **Follow Instructions.** If you do not understand, ask for additional explanation on how to do the job safely. All employees are expected to abide by the safety rules while performing work assignments or on Company property.
2. **Warning Signs.** Respect and obey all safety related warning signs.
3. **Unsafe Conditions.** You may notice conditions that appear hazardous. You should correct unsafe conditions if you can. If you can't, then report it to your supervisor promptly so they can be corrected.
4. **Work Habits.** You will do a service to yourself and your fellow workers by reporting unsafe working habits of other employees. You don't have to mention names. By doing this, you may prevent serious injury to yourself or others.
5. **Unfamiliar Equipment.** Avoid using any machine, equipment or tools that you have not been authorized, qualified, or trained to operate.
6. **Housekeeping.** Keep your work area clean.
7. **Personal Protective Equipment.** When protective clothing and equipment is issued to you, it is required that you use it for your safety. Take care of the equipment and have it replaced if damaged or worn out. Use the equipment only for its designed purpose.
8. **Foot Protection.** Wear appropriate footwear that will protect your feet while on the job.
9. **Loose Clothing.** Do not wear loose sleeves, shirt tails, loose or ragged clothing and jewelry around moving machines, especially long chains and rings.
10. **Horseplay.** Don't let your friendship or familiarity with fellow workers lead to playing a joke or thoughtless prank that could result in an injury. Horseplay on company premises or in company owned vehicles is strictly forbidden.
11. **Reporting of Accidents.** Immediately report an Injury to your supervisor. If injured, regardless of how minor, get the required medical attention or first aid promptly. All injuries must be reported to your supervisor immediately
12. **Lighting.** Employees should report burned-out light bulbs or dimly lit work areas to their supervisors.
13. **Floors.** Keep floors clean, free of oil, strings, rags, paper and any material that may cause slips and falls. Avoid stepping on loose objects on the floor. If using stairs, always keep one hand free to hold onto the rail.

## GENERAL SAFETY RULES

14. **Fire Extinguishers.** You should know the location of the fire extinguishers in your work area and know how to use them. Report discharged and inoperative fire extinguishers to your supervisor.
  
15. **Observe,** "No Smoking" signs.
  
16. Always use the safety guards that are provided for your machine or equipment. Never remove material that is being used for injury prevention purposes, such as machine guards, lockout devices, and safety barriers.
  
17. Use the proper tool for the job. Hammering with wrenches, prying with a file, etc., are unsafe practices.
  
18. Never turn on switches, open valves, etc., without first checking to ensure that no one is in a position to be injured and that all safeguards are in their proper place.
  
19. Never attempt to perform repairs or perform service or maintenance on machinery, electrical equipment or other facilities unless you are authorized and trained to do so.
  
20. When using ladders, make sure they are in good condition and have good footing.
  
21. Never use shortcuts or by-pass safety features or methods when doing a job.
  
22. Fighting or abuse and destruction of Company property are prohibited and will be considered grounds for termination.
  
23. Obey all rules and abide by the regulations to help develop safety awareness among your fellow workers.

## GENERAL SAFETY RULES

25. **Lifting, Six Rules of Safe Lifting:**

- a. ***GET A FIRM FOOTING:*** Keep your feet apart for a stable base; point toes out.
- b. ***BEND YOUR KNEES:*** Don't bend at the waist. Keep the principles of leverage in mind at all times.
- c. ***TIGHTEN STOMACH MUSCLES:*** Abdominal muscles support your spine when you lift, offsetting the force of the load. Train muscle groups to work together.
- d. ***LIFT WITH YOUR LEGS:*** Let your powerful leg muscles do the work of lifting, not your weaker back muscles.
- e. ***KEEP THE LOAD CLOSE:*** Don't hold the load away from your body. The closer it is to your spine, the less force it exerts on your back.
- f. ***KEEP YOUR BACK UPRIGHT:*** Whether lifting or putting down the load, don't add the weight of your body to the load by bending at the waist. Avoid twisting at the waist, twisting the body while lifting can cause injury.