INJURY AND ILLNESS

PREVENTION PROGRAM (IIPP)

OCTOBER 2022
# CHAPMAN UNIVERSITY

## Injury and Illness Prevention Program

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Policy Statement

An important priority of Chapman University is to provide a safe and healthy working environment for all employees. To achieve this goal, all university employees must join in a cooperative effort to identify and eliminate unsafe working conditions or practices, to control health hazards, and to comply fully with the safety and health standards for every job. To help accomplish this objective, the University has adopted this Injury and Illness Prevention (IIP) Program.

- University directors and managers are responsible for the leadership of Chapman University injury and illness prevention initiatives and for their effectiveness; and
- Supervisors are responsible for developing proper attitudes toward safety and health in those who they supervise, and for ensuring that all operations are performed with the utmost regard for the safety and health of all personnel involved; and
- All employees are responsible for continuously promoting safety while performing their job duties and for complying with all applicable safety and health rules and regulations.

The overall goal of our Injury and Illness Prevention Program is:

- To provide a safe and healthy environment for all Chapman University students, faculty, staff, volunteers and visitors to work and live;
- To reduce tangible and intangible costs of accidents;
- To maximize performance efficiency;
- To promote positive morale among Chapman University community members.
Responsibility for the Injury and Illness Prevention Program

University Responsibility

The Chapman University Enterprise Risk and Safety office is responsible for the development, implementation and management of the Chapman University Injury and Illness Prevention (IIP) Program. All Chapman University directors, managers and supervisors are responsible for implementation of individual components of the Plan.

An attitude of injury and illness prevention must be shared by all employees, beginning with individual responsibility for one's actions, as well as concern for the well-being of co-workers.

The Vice President (VP) of Enterprise Risk and Safety is responsible for the administration and ongoing management of the Chapman University Injury and Illness Prevention Program, including monitoring the program’s effectiveness. Any questions pertaining to the requirements of the program or to overall compliance with program policies may be directed to either the VP of Enterprise Risk and Safety or Environmental Health & Safety (EH&S).

Direct responsibility for ensuring day to day compliance with the specific guidelines contained in the Injury and Illness Prevention Program shall reside specifically with all managers and supervisors. It is up to every manager and/or supervisor to communicate and enforce all established safety rules, ensure that described procedures are followed and documentation requirements are completed.

The Chapman University Injury and Illness Prevention Program consists of the following key elements:

- Responsibility
- Compliance
- Communication
- Hazard Assessment
- Accident/Exposure Investigation
- Hazard Correction
- Training and Instruction, and
- Recordkeeping.

Overall Chapman University as well as individual departmental responsibility for day-to-day compliance with the Injury and Illness Prevention Program for Chapman University is shown in Appendix 1.
Compliance with the Injury and Illness Prevention Program

Adherence to Health and Safety Policies and Procedures

All Chapman University employees shall adhere to the safe and healthy work practices defined by the Chapman University Injury and Illness Prevention (IIP) Program and all specific safety and health guidelines promulgated by their individual department managers.

Every person employed by Chapman University must be aware that unsafe work practices are the root cause of nearly all accidents. Therefore, it is the responsibility of all faculty, staff and students at Chapman University to contribute to maintaining a low frequency of occupational injuries and illnesses by following safe work practices as a condition of employment. A list of General Safe Work Practices and Office Safety Work Practices is included in Appendix 2.

Any employee of Chapman University who knowingly fails to abide by prescribed safe work practices shall be subject to disciplinary action up to and including discharge per Chapman University policy. When a disciplinary action occurs, it shall be documented using the Chapman University Violation Warning Notice Form shown in Appendix 4.

Management is responsible for ensuring that all safety and health policies and procedures are clearly communicated and understood by all employees. Managers and supervisors are expected to enforce the rules with fairness and uniformity.

All employees are responsible for using safe work practices, to include following all directives, policies and procedures and assisting in maintaining a safe work environment.

Our system of ensuring that all workers comply with the rules and maintain a safe work environment includes:

- Informing workers of the provisions of our IIP Program;
- Evaluating the safety performance of all workers;
- Recognizing employees who perform safe and healthful work practices;
- Providing training to workers whose safety performance is deficient; and
- Disciplining workers for failure to comply with safe and healthful work practices.
Communication of Safety and Health Information

Safety Communication

Provide a means of communication between the University and the campus community on matters concerning employee health and safety.

Communication of information to employees of Chapman University regarding safety and health will be accomplished by providing each employee with initial job orientation training that is appropriate to their position. All employees shall receive access to this Chapman University Injury and Illness Prevention Plan and will be asked to provide acknowledgement that they have reviewed and understand same. This will be done at the time of hire for each new employee. Updates to this Plan will be published to the Environmental Health and Safety website and to the University Policy site where employees can review the policy.

Any employee having a safety or health concern related to their employment with Chapman University shall have the opportunity to communicate the concern either verbally or in writing to their immediate supervisor, the Wellness and Leave Administration Specialist in Human Resources, the VP of Enterprise Risk and Safety, and/or the Chapman University Equal Opportunity Officer without fear of reprisal. Upon receipt of any such notice such parties will consult with Chapman University’s VP of Enterprise Risk and Safety. The employee may communicate directly with them on any such concerns. An employee may submit their concerns anonymously by clicking on this link.

The University recognizes that open, two-way communication between management and staff on health and safety issues is essential to an injury-free, productive workplace. The following system of communication is designed to facilitate a continuous flow of safety and health information between management and staff in a format that is readily understandable and consists of one or more of the following items:

- New worker orientation including information on safety and health policies and procedures.
- Review of the Chapman University Injury and Illness Prevention Program.
- Workplace safety and health training programs.
- Regularly scheduled safety meetings for Facilities Management personnel.
- Effective communication of safety and health concerns between workers and supervisors, including translation where necessary and appropriate.
- Posted or distributed safety information as determined by supervisors in respective work areas.
- A system for workers to anonymously inform management about workplace hazards.
Identification and Evaluation of Workplace Hazards

Hazard Assessment and Control

Facilitate the identification and evaluation of workplace hazards and enable the correction of unsafe and/or unhealthy conditions.

The Enterprise Risk and Safety Department supports the efforts of the general campus community in ongoing assessment of workplace safety. It is the responsibility of departmental managers to schedule workplace inspections as necessary and appropriate to assure a safe and healthy work environment.

The goal of workplace inspections is to identify and evaluate potential safety and health hazards. This task is performed as a self-audit initiative of the various departments in a manner as determined necessary and appropriate by the respective managers based on the hazards in their areas. It is the objective that the findings of these general safety audits, coupled with the issuance of any necessary work orders will resolve any identified concerns in a timely manner. Work orders are processed through Facilities Management via their web form found at this link.

A Sample Preventive Maintenance Checklist is shown as Appendix 5. This form or another alternative form that is appropriate to the facilities under inspection may be used. Employees may consult with the Environmental Health and Safety (EH&S) office for assistance in identifying an appropriate survey tool for their needs. Some areas such as science labs shall use specialized forms that are provided by EH&S for that purpose. When necessary, follow-up work orders should be initiated by the department to correct any potential hazards. Departments should consult with the EH&S office if they have any difficulty securing a needed remedy for an inspection issue.

Employees may advise the VP of Enterprise Risk and Safety of any workplace hazards by email to ehs@chapman.edu or by regular mail to Environmental Health and Safety, One University Dr., Orange, CA 92866. Concerns can be reported anonymously by use of this link.

It is the objective of the university that these periodic inspections will identify and evaluate workplace hazards. To be successful, these inspections shall be performed by a competent observer(s) in the workplace. These inspections are conducted:

- When we initially established our IIP Program;
- When new substances, processes, procedures or equipment which present potential new hazards are introduced into our workplace;
- When new, previously unidentified hazards are recognized;
- When occupational injuries and illnesses occur;
- When we hire and/or reassign permanent or temporary workers to processes, operations, or tasks for which a hazard evaluation has not been previously conducted; and
• Whenever workplace conditions warrant an inspection.

Investigation of Occupational Injuries and Illnesses

Incident and Accident Investigation

| Accident and incident investigations are the immediate responsibility of the area supervisor who will work cooperatively with trained individuals in assessing why the accident or incident occurred and what actions should be taken to prevent a reoccurrence. |

If an injury does occur, the department manager, or person responsible for that area of operation shall ensure that the cause of the occurrence is fully investigated and documented. A “Supervisor's Report of Injury or Illness Investigation” form, available on the Human Resources webpage via this link, shall be completed by the appropriate Chapman University representative. See Appendix 6 for an example of this form. Under no circumstances shall this report ever be filled out by the injured employee. In addition, an "Employee's Report of Accident or Illness" form, available on the Human Resources webpage via this link shall be completed by the employee. See Appendix 7 as an example. Furthermore, the injured party will complete the online Incident/Accident Investigation Report available online by clicking on this link. See Appendix 8 for an example of the requested data elements.

The purpose of the investigation shall be to identify the root cause of the injury or illness, and not an attempt to simply place blame on an individual. However, when the injury or illness is found to be the result of non-compliance with prescribed safe work practices, it shall be noted in the investigation report. The supervisory person conducting the investigation shall then determine if appropriate disciplinary action shall be taken as defined in the section describing responsibility for this Injury and Illness Prevention Program.

In the event of an accident resulting in death, a very serious injury, or injuries to multiple employees, immediately contact Chapman University Public Safety at 714-997-6763. Public Safety will notify the VP of Enterprise Risk and Safety. It will be necessary for the University to immediately notify Cal OSHA to initiate a prompt and thorough investigation into the cause of the incident.

ACCIDENT/EXPOSURE INVESTIGATIONS

Procedures for investigating workplace accidents and hazardous substance exposures include:

• Visiting the accident scene as soon as possible;
• Interviewing injured workers and witnesses;
• Examining the workplace for factors associated with the accident/exposure;
• Determining the cause of the accident/exposure;
• Taking corrective action to prevent the accident/exposure from reoccurring; and
• Recording the findings and corrective actions taken.
Correction of Unsafe Conditions or Workplace Practices

A report of corrected safety deficiencies shall be completed by the responsible manager and returned to the Chapman University EH&S office.

It is the responsibility of every employee; i.e. faculty, staff, and administration to immediately report any unsafe condition or work practice to their supervisor as well as to any co-workers who may be affected. It is the responsibility of the supervisor to submit in writing to Chapman University’s EH&S Department what has been done to correct any reported unsafe condition and to further indicate what remains to be completed to assure a safe work environment.

When a hazardous situation is found to exist in the workplace which cannot be immediately corrected, appropriate measures shall be taken to control exposure to the hazard, including evacuation of employees from the work area if deemed necessary by the manager or supervisor in charge. The supervisor or manager responsible for oversight should immediately notify Public Safety of the situation.

The department manager shall ensure that any unsafe conditions or work practices reported or observed in the workplace are corrected in a timely manner based on the severity of the hazard.
Employee Information and Training

Safety and Health Training

University supervisors are the primary safety trainers.

At the time of employment, all new workers will receive a link to the Chapman University Injury and Illness Prevention Plan (IIP). They will confirm receipt acknowledgement and acceptance via our web-based Learning Management System.

The department manager or immediate supervisor shall ensure that all employees receive information and training as appropriate to their position prior to beginning work and periodically during the term of their employment. Supervisors should assess the need of each employee for refresher training based on the nature of job responsibilities and risks inherent in work performed.

Any regularly scheduled employee safety training for employees, including managers and supervisors, should be documented by the management representative over that area of operations. A sample form that can be used to record this training can be found in Appendix 9. Managers and Supervisors may use other appropriate means to document completed training. When online training is used, a log of completers or individual completion certificates should be created and filed.
Injury and Illness Reporting

Work-related incidents, that have the potential for injury, illness, or property damage, irrespective of actual injury or illness must be reported as follows:

Incident Report – Accident/incident investigations are necessary to identify causation and to help identify deficiencies in the environment and implement corrective actions that might be indicated.

Staff, faculty and students who are assigned responsibility for an activity shall immediately investigate and report all occurrences (incidents, near miss, accidents, and illnesses). For further assistance, contact EH&S.

1. To facilitate this process, Chapman University uses an electronic reporting format that can be accessed by all members of the university community. This way your report will be properly filed with Risk Management/EH&S, and someone will be back in contact with you for further information if necessary. Use the online Risk Management/EH&S online reporting form found at this link to report any incident form. For more information, please reference the Risk Management webpage on Accident & Incident reporting.

2. Injury/Illness to Employee – Contact Tim Frenchcampbell, Wellness and Leaves Specialist for further information on reporting requirements and benefits. There are specific guidelines under which the University is required to report illness or injury to our Workers’ Compensation insurer.
Recordkeeping and Documentation

Accident and Incident Records and Reports

All records are maintained for one year except for any required reporting to Cal/OSHA which shall be maintained for five years.

Records related to the management of the Chapman University Injury and Illness Prevention Program are cooperatively maintained by department managers and supervisors and the Chapman University Enterprise Risk and Safety office.

The Chapman University Injury and Illness Prevention Program operates on the premise that no operation can be successful without adequate recordkeeping. Good recordkeeping enables one to learn from experience and make corrections for future operations. Records of accidents, work-related injuries, illnesses and property losses serve as a valuable purpose in that regard.

Under Cal/OSHA recordkeeping requirements, information on accidents is gathered and stored by the employer. Upon review of such records, causes can be identified, and control procedures instituted to prevent the illness or injury from recurring.

California employers must report to Cal/OSHA any serious illness, serious injury or death of an employee that occurred at work or in connection with work within eight hours of when they knew or should have known of the illness. (See section 342(a).) This includes a COVID-19 illness if it meets the definition of serious illness.

A serious illness includes, among other things, any illness occurring in a place of employment or in connection with any employment that requires inpatient hospitalization for other than medical observation or diagnostic testing. (See section 330(h).) This means that if a worker becomes ill while at work and is admitted as in-patient at a hospital — regardless of the duration of the hospitalization — the illness occurred in a place of employment, so the employer must report this illness to the nearest Cal/OSHA office. Reports must be made immediately, but not longer than eight hours after the employer knows or with diligent inquiry would have known of the serious illness.

The University is required to report immediately to Cal/OSHA any COVID-19-related serious illnesses or death, as defined under CCR Title 8 section 330(h), of an employee occurring in our place of employment or in connection with any employment.

Injury & Illness Records

1. The Chapman University Supervisor’s Report of Injury or Illness will be completed for each report of injury or illness to an employee. Originals of these reports are maintained in the Human Resources department. These records are available to the VP, Enterprise Risk and Safety for periodic review by the Safety Committee.

2. The First Report of Injury is filed in a timely manner by the Human Resources Department with the University’s workers’ compensation insurance company.

3. During its regular meeting schedule, or more frequently as needed, the Chapman University Safety Committee will review summary data from these records to see where
injuries and illnesses are occurring in the interest of identifying patterns or repeat situations. These records will help the university to identify hazardous areas in the workplace and pinpoint where immediate corrective action is needed.

4. All such records of the Safety Committee will be maintained for a period of no less than five years.

**Exposure Records**

Cal/OSHA standards concerning toxic substances and hazardous exposures require records of employee exposure to these substances and sources, physical examination reports, employment records, and other information.

The use of regulated carcinogens has additional reporting and recordkeeping requirements under Title 8 of the California Code of Regulations for details. Any such use must be reported to the EH&S.

**Documentation and Records Retention**

Essential records, including those legally required for workers’ compensation, insurance audits, and government inspections, must be maintained for as long as required.

Cal/OSHA standards also require that employers keep records of steps taken to establish and maintain their Injury and Illness Prevention Program. These include:

- Records of scheduled and periodic inspections as required by the standard to identify unsafe conditions and work practices. The documentation must include the name of the person(s) conducting the inspection, the unsafe conditions and work practices identified, and the action taken to correct the unsafe conditions and work practices. The records are to be maintained for at least one year.

- Documentation of safety and health training required by standards for each employee. The documentation must specifically include employee name or other identifier, training dates, type(s) of training and the name of the training provider.

- Written minutes to meetings of the Chapman University Safety Committee will be maintained by Enterprise Risk and Safety for a period of at least one year.
## APPENDIX 1A - RESPONSIBILITY LIST FOR THE INJURY/ILLNESS PREVENTION PROGRAM

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<th>Role</th>
<th>Responsibility</th>
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<tr>
<td><strong>Risk Manager</strong></td>
<td>The Vice President (VP) of Enterprise Risk and Safety is charged with the responsibility of identifying, evaluating, and controlling loss exposures faced by the University. Provides staff support to the Chapman University Safety Committee.</td>
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<td><strong>Environmental Health &amp; Safety Specialist</strong></td>
<td>EH&amp;S works closely with the Chapman University Facilities Management and Campus Planning Department in the design and development of facilities, work areas and work procedures and makes environmental, health and safety recommendations accordingly. EH&amp;S also assists with identifying, assessing, and controlling hazards on campus.</td>
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<td><strong>Safety Committee</strong></td>
<td>The Safety Committee is the principal means used by the Risk Manager in helping assure a safe and healthy environment for students, faculty, staff, employees, and visitors to the Chapman University campus. Members of the Safety Committee serve a rotating term and membership generally includes representatives from the following offices:</td>
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<td>Risk Management</td>
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<td></td>
<td>Environmental Health &amp; Safety</td>
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<td></td>
<td>Facilities Management/ University Services</td>
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<td>Human Resources</td>
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<td>Public Safety</td>
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<td>Fire Safety/Emergency Response Management</td>
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<td>Academic Affairs</td>
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<td>Transportation Services</td>
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<td>Student Health Services</td>
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<td>University Athletics</td>
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<td></td>
<td>Colleges of Science</td>
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<td>Residence Life</td>
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<td>Colleges of Performing Arts</td>
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<td></td>
<td>Student Life</td>
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<td></td>
<td>Purchasing</td>
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<td>IS&amp;T</td>
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<td></td>
<td>Campus Planning</td>
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<td>Theatre Operations</td>
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<tr>
<td>Department</td>
<td>Position of Responsible Person</td>
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<tr>
<td>Campus Planning</td>
<td>Vice President</td>
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<tr>
<td>Event’s Scheduling Office</td>
<td>Director, Events Scheduling</td>
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<td>Facilities Management</td>
<td>Associate Vice President</td>
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<tr>
<td>Financial Services</td>
<td>Controller</td>
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<td>Human Resources</td>
<td>Vice President</td>
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<tr>
<td>Information Systems and Technology</td>
<td>Vice President</td>
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<tr>
<td>Interfaith Center</td>
<td>Dean</td>
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<td>Leatherby Libraries</td>
<td>Dean</td>
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<tr>
<td>Office of Admissions</td>
<td>Vice Chancellor for Enrollment Management</td>
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<td>Psychological Counseling Services</td>
<td>Director</td>
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<td>Strategic Marketing &amp; Communications</td>
<td>Vice President</td>
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<tr>
<td>Public Safety</td>
<td>Chief</td>
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<td>Residence Life</td>
<td>Director</td>
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<tr>
<td>Schools and Colleges</td>
<td>Dean or Designee</td>
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<tr>
<td>Student Financial Aid</td>
<td>Director</td>
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<tr>
<td>Student Health Services</td>
<td>Director</td>
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<tr>
<td>Student Life</td>
<td>Vice Chancellor of Student Affairs</td>
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<tr>
<td>Theatre Operations</td>
<td>Manager</td>
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<tr>
<td>University Advancement</td>
<td>Director of Advancement Operations</td>
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<tr>
<td>University Services</td>
<td>Director</td>
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<tr>
<td>All other Departments</td>
<td>Director or designee</td>
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APPENDIX 2 - CODE OF SAFE WORK PRACTICES

Adherence to all elements of the Chapman University Injury and Illness Prevention Program as well as strict compliance with all safety rules and procedures is a condition of employment. All injuries, including those which do not require first-aid treatment, must be reported immediately to your immediate supervisor or department manager. They must also be reported using the online reporting form found by clicking on this link. See the Risk Management’s website for more information.

The following is a list of General Safety Rules for all employees. Every employee is required to comply with these rules and to insist that their co-workers abide by them. Failure to comply with all University Safety Rules will result in disciplinary action.

1. Under no circumstances shall an employee place themselves or a co-worker in a hazardous situation. When you notice an unsafe condition, correct it. If you cannot correct it, report it to your supervisor.

2. Under no circumstances is an employee to report to work under the influence of alcohol or other controlled substances. Employees observed ingesting or in possession of alcoholic beverages or controlled substances on university time or university property will be subject to appropriate disciplinary action. Exceptions may be made where alcohol is served at a University-sponsored event.

3. Work areas (on or off-site) are to be kept neat, orderly, and clean. Never allow conditions that may result in a safety hazard or unsafe condition. Report unsafe conditions to your supervisor immediately.

4. Walk; do not run on university property.

5. Avoid carrying a load when descending or ascending stairs. Never carry a load that in any way interferes with your field of vision. The use of mobile phones can create a distraction when walking, especially when descending or ascending stairs and should be avoided.

6. High heels may contribute to serious falls in the office or on stairs. Use caution when wearing high heels. Some surfaces will be grated, increasing the risk when wearing high heel shoes.

7. Keep your own work area safe.
   - Desk drawers should not be left open.
   - Be sure the electrical cords for your office machines are properly grounded. Do not daisy-chain electrical connections. Make sure any extension cords that are in use do not present a tripping hazard.
When leaving your desk make sure your chair is not left in an aisle where someone may trip on it.

Be sure desk drawers are clean and sharp objects are not left unprotected.

8. When working with file cabinets make sure only one drawer is pulled out at a time to prevent potential tipping of the file cabinet. Heavier weighted items can provide for a more stable cabinet if they are placed in the lower drawers.

9. Whenever relocating office machines, everyone should exercise proper judgment, lifting techniques, and seek assistance when needed.

10. Do not stand on or utilize chairs, especially those with wheels for storing or retrieving materials from elevated places.

11. Do not lean back in chairs. All legs of the chair should be on the floor always.

12. Learn and practice proper ergonomic techniques. For assistance with office ergonomics questions, please contact the Human Resources Department.

13. Follow good lifting practices. Ask for help when needed and help others lift or carry heavy or bulky objects when necessary. Stack materials safely.

14. All electrical safety requirements will be complied with when repairing or servicing office equipment.

15. Never touch or operate any electrical switches or buttons unless authorized to do so. Do not attempt to repair defective electrical equipment.

16. Use tools only for their intended purposes. Do not use defective tools. Do not remove guards or safety devices on power tools or equipment.

17. Personal protective equipment (safety glasses, shoes, gloves, respirators, etc.) will be worn always when specifically required. Do not wear loose jewelry or clothing when working with machines, tools or other such equipment.

18. Do not start or attempt to operate company vehicles or equipment unless authorized to do so, and only when the vehicle or equipment is in good working condition.

19. Use of University vehicles must be in a manner that is consistent with and complies with the university authorized driver program and vehicles safety policies.

20. Rules for Safe Handling of Hazardous Chemicals

Here are 11 basic rules all employees who handle hazardous chemicals should know and follow.

Rule #1. Follow all established procedures and perform job duties as you have been trained.
Rule #2. Be cautious, and plan ahead. Think about what could go wrong and pay close attention to what you are doing while you work.

Rule #3. Always use required personal protective equipment (PPE) and inspect it carefully before each use to make sure it is safe to use. Replace worn out or damaged PPE; it will not provide adequate protection.

Rule #4. Make sure all containers are properly labeled and that the chemical is in an appropriate container. Do not use any chemical not contained or labeled properly. Report any damaged containers or illegible labels to your supervisor immediately.

Rule #5. Read labels and the safety data sheet (SDS) before using any chemical to make sure you understand hazards and precautions.

Rule #6. Use all chemicals solely for their intended purpose. Do not, for example, use solvents to clean your hands, or gasoline to wipe down equipment.

Rule #7. Never eat or drink while handling any chemical, and if your hands are contaminated, do not use cosmetics or handle contact lenses.

Rule #8. Read the labels and refer to SDSs to identify properties and hazards of chemical products and materials.

Rule #9. Store all chemicals properly, separate incompatibles, and store in ventilated, dry, cool areas.

Rule #10. Keep yourself and your work area clean. After handling any chemical, wash thoroughly with soap and water. Clean work surfaces at least once a shift so contamination risks are minimized.

Rule #11. Learn about emergency procedures and equipment. Understanding emergency procedures means knowing evacuation procedures, emergency reporting procedures, and procedures for dealing with fires and spills. It also means knowing what to do in a medical emergency if a coworker is injured or overcome by chemicals.

Please refer to the Environmental Health and Safety website for any updates to this document.
APPENDIX 3 – Office and Industrial Ergonomics

CHAPMAN UNIVERSITY

1. INTRODUCTION

Ergonomics is the study of people and their interaction with the elements of their job or task including equipment, tools, facilities, processes, and environment. It is a multidisciplinary field of study integrating industrial psychology, engineering, medicine, and design.

In a more practical sense, ergonomics is the science of human comfort. When aspects of the work or workplace exceed the body’s capabilities, the result is often a musculoskeletal disorder (MSD). To help avoid MSDs, work demands should not exceed the physical capabilities of the worker. MSDs are also known by several other names including:

- CTDs (cumulative trauma disorders)
- RSIs (repetitive stress or repetitive strain injuries)
- RMI (repetitive motion injuries)
- Overuse syndrome

The most common, recognizable name for MSDs is cumulative trauma disorders or CTDs. Whatever the name used, these injuries belong to a family or group of wear and tear illnesses that can affect muscles, nerves, tendons, ligaments, joints, cartilage, blood vessels or spinal discs of the body. MSDs do not include slips, trips and falls, cuts, motor vehicle accidents or other similar accidents; although a close look at the reasons for acute injuries often reveals design problems that can be corrected.

2. POLICY

It is the policy of Chapman University to provide all employees with a safe and healthy workplace. A proactive ergonomics program is integrated into our company’s written Injury and Illness Prevention (IIP) program.

Records documenting the identification, prevention, and control of employee exposure to ergonomic risk factors will be maintained pursuant to all regulations.

This program is a collaborative effort that includes managers, supervisors, and labor. The office of Environmental Health & Safety is responsible for the program’s implementation, management, and recordkeeping requirements.

3. ERGONOMICS PROGRAM

The purpose of an ergonomics program is to apply ergonomic principles to the workplace to reduce the number and severity of MSDs, thus decreasing workers’ compensation claims.
and, where possible, increase productivity, quality, and efficiency. An ergonomically sound work environment maximizes employee comfort while minimizing the risk of undue physical stress.

A proactive approach focuses on making changes when risks have already been identified, as well as incorporating ergonomics into the design phase of a new facility or process, into purchasing new equipment or tools, and into the contemplation of scheduling changes. Chapman University has such a program which includes the following components:

A. **Management Leadership.** The management of Chapman University is committed to the ergonomics process. Management supports the efforts of the EH&S for the identification and control of ergonomic risk factors. Management will support an effective MSD reporting system and will respond promptly to reports. Management will endeavor to provide necessary and appropriate communication with employees about the program.

B. **Employee Participation.** An essential element to the success of the ergonomics program, employees will be solicited for their input and assistance with identifying ergonomic risk factors, worksite evaluations, development and implementation of controls, and training. Employee participation in the program will occur only during company time.

C. **Identification of Problem Jobs.** Collecting data that identifies injury and illness trends is a key element of a successful program that includes surveillance. Surveillance can be either *passive* or *active*. Conducting a records review is an example of passive surveillance, which looks at existing data such as OSHA Logs, workers’ compensation claims, trips to the medical facility, and absentee records. Active surveillance uses observations, interviews, surveys, questionnaires, checklists, and formal worksite evaluation tools to identify specific high-risk activities. Chapman University will be using both passive and active surveillance, as appropriate, to identify problem areas.

D. **Worksite Evaluations.**

(1) Triggers for a worksite evaluation:

   (a) When an employee reports an MSD sign or symptom.
   (b) Jobs, processes, or work activities where work-related ergonomic risk factors have been identified which may cause or aggravate MSDs.
   (c) Any change of jobs, tasks, equipment, tools, processes, scheduling, or changes in work shift hours (for example, going from a traditional 5-day, 8-hour shift to a compressed 4-day, 10-hour shift).
   (d) When a safety walk-through or scheduled inspection or survey has uncovered potential MSD hazards.

(2) Work-related risk factors to be considered in the evaluation process include, but are not limited to:
(a) Physical risk factors including force, postures (awkward and static), static loading and sustained exertion, fatigue, repetition, contact stress, extreme temperatures, and vibration.
(b) Administrative issues including job rotation/enlargement, inadequate staffing, excessive overtime, inadequate or lack of rest breaks, stress from deadlines, lack of training, work pace, work methods, and psychosocial issues.
(c) Environmental risk factors including noise, lighting, glare, air quality, temperature, humidity, and personal protective equipment and clothing.
(d) Combination of risk factors such as, but not limited to, highly repetitive, forceful work with no job rotation or precision work done in a dimly lit room.

E. Setting Priorities. Worksite evaluations will be scheduled based upon the following:

(a) Any job, process, operation, or workstation which has contributed to a worker’s current MSD;
(b) A job, process, operation, or workstation that has historically contributed to MSDs; and
(c) Specific jobs, processes, operations, or workstations that have the potential to cause MSDs.

F. Worksite Evaluations Methods. Various methods will be used to evaluate problem jobs including:

(1) Walk-through and observations
(2) Employee interviews
(3) Surveys and questionnaires
(4) Checklists
(5) Detailed worksite evaluations

G. Control of the Ergonomic Risk Factors. Chapman University will take steps to identify ergonomic risk factors and reduce hazards by using a three-tier hierarchy of control (in order of preference):

(1) Engineering controls. The most desirable and reliable means to reduce workplace exposure to potentially harmful effects. This is achieved by focusing on the physical modifications of jobs, workstations, tools, equipment, or processes.

(2) Administrative controls. This means controlling or preventing workplace exposure to potentially harmful effects by implementing administrative changes such as job rotation, job enlargement, rest/recovery breaks, work pace adjustment, redesign of methods, and worker education.

(3) Personal protective equipment (PPE). Although not recognized as an effective means of controlling hazards and do not take the place of engineering or administrative controls, there are acceptable forms of PPE, which include kneepads and anti-vibration gloves.
H. **Training.** Training is intended to enhance the ability of managers, supervisors, and employees to recognize work-related ergonomic risk factors and to understand and apply appropriate control strategies. Training in the recognition and control of ergonomic risk factors will be given as follows:

1. To all new employees during orientation.
2. To all employees assuming a new job assignment.
3. When new jobs, tasks, tools, equipment, machinery, workstations, or processes are introduced.
4. When high exposure levels to ergonomic risk factors have been identified.

The minimum for all managers, supervisors, and employees will include the following elements:

1. An explanation of Chapman University ergonomics program and their role in the program;
2. A list of the exposures which have been associated with the development of SDS’s;
3. A description of MSD signs and symptoms and consequences of injuries caused by work and non-work-related risk factors;
4. An emphasis on the importance of early reporting of MSD signs and symptoms and injuries to management, and;
5. The methods used by Chapman University to minimize work and non-work-related risk factors.

Training will be provided in one, or a combination, of the following formats:

1. Classroom-style presentation
2. Online, via the LearnUpon Learning Management System
3. Distribution of educational literature
4. Hands-on equipment and work practice demonstrations

Trainers will be experienced in delivering training programs that address work and non-work-related risk factors and will be familiar with Chapman University operations. Training will be provided from one, or a combination, of the sources listed below:

1. Internally developed resources
2. The workers’ compensation carrier
3. An outside consultant

All training will be documented:

1. All employees will be required to sign a training sign-in roster.

I. **MSD (Medical) Management and Return-to-Work.**

Pursuant to the law, Chapman University provides medical care to all employees injured at work. Chapman University maintains a good working relationship with our health care provider, Concentra. All work-related injuries and illnesses will be referred to
Concentra unless the injured employee has notified Chapman University in writing that other provisions have been made prior to an injury or illness.

In the event of a work-related injury or illness, the health care provider will:

(1) provide diagnosis and treatment for Chapman University employees;
(2) determine if reported MSD signs or symptoms are work-related;
(3) support the Chapman University Return-to-Work program by recommending restricted, modified, or transitional work duties when appropriate;
(4) refer Chapman University injured employees to other clinical resources for therapy or rehabilitation;
(5) provide Chapman University with timely work status reports, and;
(6) develop a positive working relationship with Chapman University workers’ compensation carrier, Hartford Insurance.

Chapman University has a Return-to-Work program and will offer return-to-work opportunities to injured employees in accordance with work restrictions identified by a recognized health care provider.

J. Program Evaluation and Follow-Up. To ensure that issues have been addressed and that new problems have not been created, monitoring and evaluation will be conducted on an on-going basis. The methods include use of individual interviews and checklists to reevaluate the job/task to ensure that risks have been reduced, minimized, or eliminated.

4. INDIVIDUAL RESPONSIBILITIES

A. Ergonomics Program Coordinator. The EH&S Specialist will serve the role of University Ergonomics Program Coordinator and will report to the VP of Enterprise Risk and Safety and the Campus Safety Committee and be responsible for this policy and program. All evaluations, controls, and training will be coordinated under the direction of the Ergonomics Program Coordinator in collaboration with management. The Ergonomics Program Coordinator will monitor the results of the program to determine additional areas of focus as needed.

The Ergonomics Program Coordinator will:

(1) ensure that evaluators performing worksite evaluations and training are properly trained;
(2) ensure that control measures are implemented in a timely manner;
(3) ensure that a system is in place for employees to report MSD signs or symptoms and suspected work-related risk factors to managers and supervisors;
(4) ensure that accurate records are maintained and provide documentation upon request;
(5) schedule manager, supervisor, and employee training and maintain records to include date, name of instructor, topic, and materials used, and;
(6) monitor the program on a quarterly basis and provide an annual review.
(7) follow-up with any ergonomics strategy and/or solutions.
B. **Managers.** Duties of all managers will include:

(1) accountability for the health and safety of all employees within their departments through the active support of the ergonomics program;
(2) allocating human and/or financial resources;
(3) attending ergonomics training to familiarize themselves with the elements of the program, recognition and control of work-related ergonomic risk factors, MSD signs and symptoms, early reporting requirements and procedures, and medical management;
(4) ensuring that supervisors and employees have received the appropriate training;
(5) ensuring that ergonomics practices and principles are considered when conducting worksite evaluations, and;
(6) ensuring that recommended controls are implemented and/or used appropriately through active follow-up.

C. **Supervisors.** Duties of all supervisors will include:

(1) attending ergonomics training to familiarize themselves with the elements of the program, recognition and control of work-related ergonomics risk factors, MSD signs and symptoms, early reporting requirements and procedures, and medical management;
(2) ensuring that employees have received the appropriate training;
(3) ensuring that employees are provided with and use the appropriate tools, equipment, parts, and materials in accordance with ergonomic requirements;
(4) ensuring that employees understand the MSD signs and symptoms and early reporting system;
(5) responding promptly to employee reports;
(6) providing appropriate workers’ compensation documentation to employees as required by all regulations;
(7) seeking clarification from Human Resources when return-to-work directives from the health care provider are unclear, and;
(8) maintaining clear communication with managers and employees.

D. **Employees.** Every employee of Chapman University is responsible for conducting himself/herself in accordance with this policy and program. All employees will:

(1) when provided, use the appropriate tools, equipment, parts, materials, and procedures in the manner established by managers and supervisors;
(2) ensure that equipment is properly maintained in good condition and when not, report it immediately;
(3) provide feedback to supervisors regarding the effectiveness of design changes, new tools or equipment, or other interventions;
(4) attend ergonomics training as required and apply the knowledge and skills acquired to actual jobs, tasks, processes, and work activities;
(5) report MSD signs or symptoms and work-related MSD hazards to the supervisor as early as possible to facilitate medical treatment and initiate proactive interventions, and;
(6) take responsibility in their personal health and safety.

5. ANNUAL PROGRAM REVIEW

A. The Ergonomics Program Coordinator will conduct an annual program review to assess the progress and success of the program. The review will consider the following:

(1) Evaluation of all training programs and records.
(2) The need for retraining of managers, supervisors, and employees.
(3) The jobs, processes, or operations which have produced a high incidence rate of work-related MSDs.
(4) The length of time between a request for an ergonomic evaluation and the actual evaluation.
(5) The length of time between the point at which the results of the evaluation are known and when implementation of controls begins.
(6) The length of time between the beginning and completion of implementation of controls.
(7) The program’s success based upon comparison to previous years using the following criteria:

   (a) Number and type of lost workdays associated with OSHA recordable cases.
   (b) Cost of workers’ compensation cases.
   (c) Employee feedback through direct interviews, walk-through observations, written surveys and questionnaires, and reevaluations.
Upper Management Commitment

General Ergonomics Training
- Identify an Ergonomics Program Coordinator
- Form an ergonomics task force or team
- Solicit employee participation

Advanced Ergonomics Training
- Establish realistic goals and an action plan
  - Create a living document

Active Surveillance
- Identify and select high-risk jobs, processes, and/or operations

Passive
- Perform worksite evaluations

Employee Participation/Feedback
- Develop and implement solutions

Implement the changes
- Measure all effects of the changes
  - Productivity
  - Injury Rates
  - Quality
  - Discomfort

Employee Participation and Feedback
- Continue to refine solutions
- Ongoing monitoring of the program

Long-Term Solutions
- Identify possibilities for modified work

Short-Term Solutions
APPENDIX 4 - VIOLATION WARNING NOTICE

(Sample Form – Employees should be provided a notice that contains similar data to that shown herein.)

Date: ________________________________

Location: ____________________________________________________________

Employee Name: ________________________________________________________

Employee ID #: _________________________________________________________

You Have Been Counseled On:

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________

Issued By:

_____________________________________________________________________

Supervisor Signature ___________________________ Date ______________________

_____________________________________________________________________

Employee Signature __________________________ Date ______________________

Department Manager’s Review:

_____________________________________________________________________

Signature __________________________ Date ______________________

Serious violations may result in disciplinary action and/or termination of employment.

Copy to: Human Resources, EH&S
**APPENDIX 5 – SAMPLE PREVENTIVE MAINTENANCE SAFETY CHECKLIST**

(Lab and Studio Inspections are completed using web-based tools. Use this form as a sample template for other inspections from which EH&S has not provided an electronic alternative.)

For all items marked NO, explanation is required on the bottom of the form. Please reference the line item.

<table>
<thead>
<tr>
<th>Yes</th>
<th>NO</th>
<th>N/A</th>
<th>INSPECTION ITEM</th>
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<td>1. Are work surfaces clean of waste and debris?</td>
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<td>2. Are all cartons or boxes safely stored in a manner that does not block egress of fire sprinkler systems?</td>
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<td>3. Are cords and electrical equipment serviceable and in good working condition?</td>
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<td>4. Are fire extinguishers charged, dated, in place, unobstructed, and in good working condition?</td>
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<td>5. Are fire doors free to properly operate, are the properly closed (not propped open), and do they fully close?</td>
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<td>6. Are fire corridors, exit aisles, hallways, stairways, landings, and walkways free from items which could hinder egress, including free of tripping hazards?</td>
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<td>7. Are all electrical breaker panels accessible and labeled to show which area is affected by each circuit breaker?</td>
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<td>8. Are circuit breakers clear of any tape, string or wire that would affect their operation?</td>
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<td>9. Is a cover on electrical panels and face plates installed on all electrical outlets and switches?</td>
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<td>10. Is electrical wiring in good condition with no evidence of fraying, wear and/or splices?</td>
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<td>11. Is there a minimum use of extension cords and an absence of daisy-chaining of cords?</td>
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<td>12. Are gas cylinders properly mounted?</td>
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<td>13. Are machine guards in place and in proper working order?</td>
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<td>14. Are gas shut off valves clear of weeds, trash, storage, debris, etc. and are they visible and accessible?</td>
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<td>15. Are gas appliances (water heater, furnace, etc.) free of combustible storage; i.e. no combustibles within 3 feet?</td>
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<td>16. Is the area free of low hanging obstacles which may cause head injury?</td>
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<td>17. Are all flooring surfaces (carpet, wood, tile, etc.) free of uneven or torn areas?</td>
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<td>18. Are all file cabinets and book shelves adequately secure and if necessary braced to the wall?</td>
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<td>19. Are storage areas free of debris and any sprinkler heads unobstructed?</td>
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<td>20. Is access to the roof properly secured?</td>
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<td>21. Is the roof free if debris and clutter?</td>
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<td>22. Are the roof drains clear?</td>
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<td>23.</td>
<td>Is mechanical equipment free of leaks?</td>
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<td>24.</td>
<td>Is the address visible on the outside of the building with contrasting background and numbers at least 5 inches in height?</td>
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<td>25.</td>
<td>Is the drive or alley around the building free of weeds, debris or obstruction?</td>
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<td>26.</td>
<td>Indicate any other potential safety hazards observed.</td>
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Describe in detail and “NO” answers from above. Reference the above line number.

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Date of Inspection
Name of Inspector
Signature of Inspector

Date Report Reviewed
Name of Reviewer
Signature of Reviewer

Accepted as written
Follow-up Required
Date

Accepted as written
Follow-up Required

Updated October 2022
APPENDIX 6 - SUPERVISOR’S REPORT OF
INJURY OR ILLNESS INVESTIGATION
(Sample – See HR for Current Form)

Name of Injured: __________________________ Age: ______ Gender: ______
Department: _____________________________ Title: ______________________
Date of Hire: _____________ Date of Injury/Illness: ________________ Time: ______ AM/PM
Date Injury/Illness Reported? _____________ If Delayed, Why: ________________________________
Location of Injury/Illness (Give street address or otherwise describe where accident occurred): ______
________________________
Was a police report made? Yes _____ No____ If No, To Whom? ________________________________
What was employee doing at the time of Injury/Illness? (Describe fully, identifying all equipment, tools, vehicles, or objects involved): ________________________________
________________________
How did Injury/Illness occur? (State exactly how employee was injured. Be sure to name any equipment, tools, vehicles, or objects involved): ________________________________
________________________
What part of body was Injured/Affected? (Be specific: head, right eye, lower back, left foot, etc.): ______
________________________
Nature of Injury/Illness (Cut, bruise, sprain, burn, fracture, etc.): ________________________________
________________________
If any, name people who saw Injury/Illness occur: ________________________________
________________________
If any, which doctor or medical center provided medical treatment? (Provide address): ______
________________________
What action has the department taken to prevent recurrence? (Do not say "Will be more careful in the future."): ________________________________
________________________
Department Head Signature: ________________________________
Dated: ________________________________
APPENDIX 7 - EMPLOYEE’S REPORT OF

INJURY OR ILLNESS INVESTIGATION
(Sample – See HR for Current Form)

Name: ____________________________ Department: _____________________
Title: ___________________ Date of Injury/Illness: ______ 19 ___ Time: _____ AM/PM

1. Location of Injury/Illness (Give street address or otherwise describe where accident occurred):

________________________________________

2. Was a police or other official report made?  Yes ☐ No ☐ If yes, please provide a copy of report and case number:

________________________________________

3. Nature of Injury or Illness:

________________________________________

4. Part of body injured or affected:

________________________________________

5. Who witnessed your Injury/Illness? (Name people who saw accident occur):

________________________________________

6. How did Injury or Illness happen? (Describe fully. State what you were doing when injury or illness occurred and exactly how you were injured or became ill. Be sure to include names of any equipment, tools, vehicles, or objects involved):

________________________________________

7. How may this injury or illness be prevented?

________________________________________

8. Did or will you leave work because of this injury or illness?  Yes ☐ No ☐

9. Were you sent to a doctor?  Yes ☐ No ☐

10. If no, did you refuse treatment?  Yes ☐ No ☐

11. List all doctors consulted for this injury or illness. (Give addresses and dates of all previous consultations):

________________________________________

________________________________________

________________________________________

Employee Signature: ____________________________

Dated: ____________________________
APPENDIX 8 - INCIDENT / ACCIDENT INVESTIGATION REPORT
(Sample – See Live Form is web-based)

Chapman University maintains an online reporting mechanism for incidents and accidents. This form can be found on the Risk Management Page or may be directly accessed by clicking on this link. This form is used to document the findings of your preliminary investigation. An incident is defined to include any event that results in injury to a person or damage to property. Complete this electronic form as soon as possible but within 24 hours of the event. Your online report will be filed with Enterprise Risk and Safety.

When you login to complete this form, please be prepared to answer the following questions:

- Date and Time of Incident*
- Department Making this Report*
- Person Making this Report
- Type of Incident*
- Details of Incident/Accident (Who, What, Where, When, Why, How)*
- Where there any witnesses and/or other persons involved in the Incident
- Identify any injured persons. Check all that apply.
- Was First Aid or Other Medical Care Rendered?
- Was there any damage to University property?
- Was there any damage to the property of others?
- Did any Chapman University Internal Departments and/or Persons respond?
- Did any external public safety (police/fire) agencies respond?
- Are affected areas/equipment currently out-of-service?
- Could this incident/accident have been prevented?
- Was there any Unsafe Condition Not Described Above?
- Are there any Unsafe Conditions that need to be addressed?
- Do you Know of Other Areas at Chapman where other similar incidents might occur?
- Other Comments?
APPENDIX 9 – SAMPLE EMPLOYEE SAFETY & HEALTH TRAINING RECORD

(Sample – Use this form if training is not web-based or if your department does not use other technique)

PART A

Employee Name: _____________________________________________

Employee ID #: ____________________ Job Position: _______________________

Once completed and signed by both the trainer and the employee this record serves as documentation that the below orientation and training has taken place.

GENERAL AND SPECIFIC SAFETY & HEALTH TRAINING

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Not Applicable</th>
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<tbody>
<tr>
<td>1.</td>
<td>General Safety</td>
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<td>2.</td>
<td>Safety and Health Policy</td>
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<td>3.</td>
<td>Employee Responsibilities</td>
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<td>4.</td>
<td>Enforcement/Discipline</td>
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<td>5.</td>
<td>Suggestion/Hazard Reporting</td>
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<td>7.</td>
<td>Accident Reporting</td>
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<td>8.</td>
<td>Personal Protective Equipment</td>
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<td>9.</td>
<td>Hazard Communication</td>
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<td>10.</td>
<td>Fire Prevention/Reporting</td>
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<td>11.</td>
<td>Lockout/Tagout</td>
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<td>12.</td>
<td>Electrical</td>
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<td>13.</td>
<td>Office Safety</td>
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<td>14.</td>
<td>Workers Compensation</td>
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<td>15.</td>
<td>Lab Safety Training</td>
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<thead>
<tr>
<th>Employee's Signature</th>
<th>Trainer's Signature</th>
<th>Type of Training (Initial, Annual, OR Update)</th>
<th>Date of Training</th>
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EMPLOYEE SAFETY & HEALTH TRAINING RECORD - PART B

Employee Name: ________________________________________________

Location: ______________________________________________________

Department: ____________________________________________________

Employee ID #: ________________________________________________

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<thead>
<tr>
<th>All Other Training (describe)</th>
<th>Type of Training</th>
<th>Date of Training</th>
<th>Trainer or Supervisor Name</th>
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