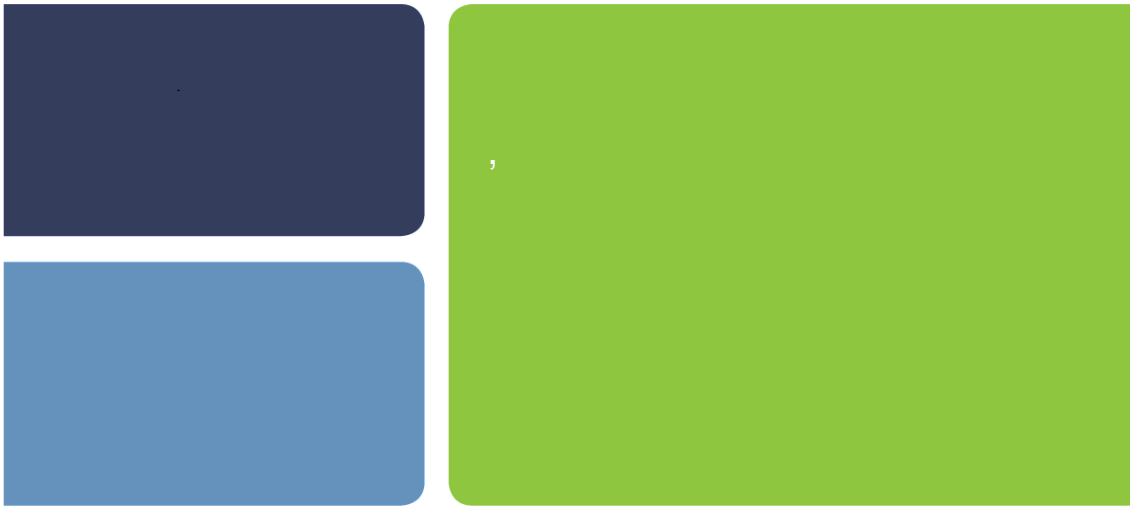




Cal/OSHA Workplace Health & Safety Plan



will maintain a safety and health program conforming to the laws of this state. The personal safety and health of each employee of this practice is of primary importance. Prevention of occupationally-induced injuries and illnesses will be given the highest priority. This document details how this practice will ensure the workplace safety and health of its employees and includes the following components:

Injury/Illness Prevention Program

Emergency Action Plan

Fire Prevention Plan

Hazard Communication Program

Workplace Violence Prevention Plan

Other Applicable Cal/OSHA Requirements

Written Injury/Illness Prevention Program (IIPP)

Policy Statement

It is the policy of this practice to fully comply with Labor Code 6401.7 and the General Industry Safety Order. This IIPP Policy was written with the California Code of Regulations, Title 8 Section 3203.

Business Name:

Owner:

Address: , ,

Telephone Number:

The has instituted and will administer a comprehensive and continuous occupational Injury and Illness Prevention Program (IIPP) for all employees. The health and safety of the individual employee takes precedence over all other concerns. Our goal is to prevent accidents, personal injury and occupational illness and to comply with all safety and health standards.

Our system for identifying, evaluating, and preventing occupational safety and health hazards includes the following:

1. Identification of a person or persons with the authority and responsibility to administer our safety program.
2. Establishment of a system for ensuring employee compliance with our safety program.
3. Establishment of a "readily understandable" employee/employer communication system, including review of reports by employees of potential and real hazards or concerns.
4. Scheduled periodic inspections of general work areas and specific work stations.
5. Investigation of all occupational injury or illness.
6. Correction of all unsafe work practices, procedures or conditions when they are identified.
7. Providing hazard/safety training to all employees at all appropriate times.
8. Development and enforcement of a written "Code of Safe Practices." The Code of Safe Practices will be reviewed and updated as necessary.
9. Maintenance of all applicable written records for at least the minimum times required. (Records for employees who have terminated employment before working a full year may be given to the former employee.)

Section I: IIPP Safety Coordinator

IIPP Safety Coordinator

The following persons have the authority and responsibility for implementing and maintaining our Injury/Illness Prevention Program (IIPP). The IIPP Safety Coordinator is responsible for overall management and administration of the IIPP. Each Supervisor is responsible for maintaining the IIPP in their area. A copy of the IIPP shall be available from the IIPP Safety Coordinator. Questions regarding the program should be directed to the IIPP Safety Coordinator or Supervisor.

IIPP Safety Coordinator:

IIPP Alternate Safety Coordinator:

Section II: Employee Compliance System

Policy

The IIPP Safety Coordinator is responsible for ensuring that all safety and health policies and procedures are clearly communicated and understood by all employees. Supervisors and other lead personnel are expected to enforce the rules fairly and uniformly.

All employees, including managers and supervisors, are responsible for complying with safe and healthful work practices. Our system of ensuring compliance with these practices includes the following:

- Informing workers of the provisions of our IIPP.
- Informing workers where our IIPP can be accessed and reviewed.
- Evaluating the safety performance of all workers.
- Providing training to employees whose safety performance is deficient.
- Informing workers of the provisions of our IIPP.
- Informing workers where our IIPP can be accessed and reviewed.
- Evaluating the safety performance of all workers.
-
- Providing training to employees whose safety performance is deficient.
-

Incentives

Employees who follow safe and healthy work practices will have this fact recognized and documented on their performance reviews. In addition, the following incentives may be offered:

1. Verbal Commendation (with memo to employee file).
2. Written Commendation.
3. Verbal Commendation (with memo to employee file).
4. Written Commendation.
5. Awards for no injuries, occupational illnesses or safety violations for periods exceeding six months of full-time equivalent work time.

Disciplinary Procedures

POSSIBLE CONSEQUENCES: In accordance with our at-will employment policy, employment may be discontinued at will, at any time, by either party, with or without cause or advance notice. Therefore, the following disciplinary procedures are advisory and not binding on the employer. At the employer's discretion the employee may be:

1. Given a written or oral warning; and/or
2. Required to undergo additional or repeat training; and/or
3. Suspended from duty without pay; or
4. Discharged from employment.
5. Given a written or oral warning; and/or
6. Required to undergo additional or repeat training; and/or
7. Suspended from duty without pay; or

8. Discharged from employment.

Employer's Rights

The employer reserves the right to impose any rules or take any disciplinary action as deemed appropriate.

Nothing in this policy is meant to or should be construed to alter our at-will employment relationship.

Section III: Employee Communication System

Employee communication on safety topics

In accordance with standard requirements, this practice has established a system that will allow effective communication with employees on safety matters. The following is our system of communication, designed to facilitate a continuous flow of two-way (employer/ management and employee/ workers) safety and health information in a form that is readily understandable to and between all parties.

Methods of employer-to-employee communication on safety topics include:

- New worker orientation, including a discussion of site-specific safety and health policies and procedures.
- Direct communication from supervisors to employee or from employer to employee.
- Routes memos or emails.
- Informal / spontaneous training.
- Posted or distributed safety information written in an effective manner and including language translation when appropriate.
- Notes taken at monthly staff meetings.
- Monthly staff meetings.
- Workplace specific safety and health training.
- Follow-through by supervision to ensure effectiveness.
- New worker orientation, including a discussion of site-specific safety and health policies and procedures.
- A system for workers to anonymously inform management about workplace hazards without fear of reprisal
- Direct communication from supervisors to employee or from employer to employee.
- Routes memos or emails.
- Informal / spontaneous training.
- Posted or distributed safety information written in an effective manner and including language translation when appropriate.
- Notes taken at monthly staff meetings.
- Monthly staff meetings.
- Workplace specific safety and health training.
- Follow-through by supervision to ensure effectiveness.

Methods of informing employees of new hazards

At least one of these methods shall be used to inform employees of new hazards when they are introduced in our practice.

Employees have been advised that safe work conditions and practices and required personal protection equipment are mandatory as indicated by our training program and our Code of Safe Practices. Descriptions of safe working conditions, practices, and required personal protection equipment are included in initial and subsequent training.

Employees have been advised that there will be no reprisals or other job discrimination for expressing any concern, comment, suggestion or complaint about a safety-related matter.

The results of the investigation of any employee safety suggestion or report of hazard will be distributed to all employees affected by the hazard or shall be posted on appropriate bulletin boards.

Section IV: Inspections (Hazard Assessment)

Hazard Assessment

The IIPP Safety Coordinator or Alternate IIPP Safety Coordinator will conduct periodic inspections to identify workplace hazards, and to verify compliance with our Code of Safe Practices and other safety requirements:

- When our Injury and Illness Prevention Program is first established
- When new substances, processes, procedures or equipment that 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 intermittent workers to processes, operations, or tasks for which a hazard evaluation has not been previously conducted; and
- Whenever workplace conditions warrant an inspection.
- When our Injury and Illness Prevention Program is first established
- When new substances, processes, procedures or equipment that 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 intermittent workers to processes, operations, or tasks for which a hazard evaluation has not been previously conducted; and
- Whenever workplace conditions warrant an inspection.

Periodic Inspections

Periodic inspections shall consist of a visual exam of the work area and interviews of employees. We will utilize our Code of Safe Practices and the Inspection Checklist (CVMA Form 9) while conducting the inspections to help ensure that safe work conditions are maintained. The CVMA Form 9 will be used to document these inspections. The results of the inspection will be summarized on IIPP (CVMA Form 8), which includes a system of prioritization and correction completion date.

Inspection documentation will be maintained in the Cal/OSHA section of our filing system in the folder labeled "Inspections."

Section V: Injury/Illness Investigation

It is our policy to investigate accidents, occupational injuries or illnesses, and unusual occurrences.

The purpose of this investigation is to find the cause of an injury, illness or incident and to prevent similar occurrences in the future, not to place blame.

Procedure to investigate occupational injury or occupational illness

- Our IIPP Safety Coordinator, or a supervisor assigned to the investigation by the IIPP Safety Coordinator, shall conduct the investigation.
- The investigation shall be conducted as soon as possible after the incident, but no later than 48 hours after the incident is reported to management.
- All involved individuals and witnesses shall be interviewed. Interviews shall be conducted as privately as possible and shall be done individually.
- The site of the incident shall be inspected for unsafe conditions or hazards that may have contributed to the incident. If possible, the injured employee will be interviewed at the site of the accident. We will use sketches, diagrams or photos if indicated and document measurements when appropriate.
- If the facts of the incident are unclear or if there is any element of controversy, we will take signed statements from all employees involved and from witnesses.
- Injury and Illness Investigation documentation shall be kept for a minimum of one (1) year.
- Appropriate measure shall be taken to prevent a recurrence of the accident/exposure and appropriate additions shall be made to our Code of Safe Practices.
- Our IIPP Safety Coordinator, or a supervisor assigned to the investigation by the IIPP Safety Coordinator, shall conduct the investigation.
- The investigation shall be conducted as soon as possible after the incident, but no later than 48 hours after the incident is reported to management.
- All involved individuals and witnesses shall be interviewed. Interviews shall be conducted as privately as possible and shall be done individually.
- The site of the incident shall be inspected for unsafe conditions or hazards that may have contributed to the incident. If possible, the injured employee will be interviewed at the site of the accident. We will use sketches, diagrams or photos if indicated and document measurements when appropriate.
- If the facts of the incident are unclear or if there is any element of controversy, we will take signed statements from all employees involved and from witnesses.
- Injury and Illness Investigation documentation shall be kept for a minimum of one (1) year.
-
- Appropriate measure shall be taken to prevent a recurrence of the accident/exposure and appropriate additions shall be made to our Code of Safe Practices.
-

Documentation

Injury and Illness Investigation documentation shall be kept for a minimum of one (1) year.

Section VI: Correcting Unsafe Work Conditions or Practices

Procedures

- When an unsafe work condition, practice or procedure is observed, discovered, or reported, it shall be documented on CVMA Form 8 – Inspection Summary and Action Plan. The specific hazard or work practice will be listed. Corrective measures shall be determined and listed on the form. Appropriate corrective measures shall be taken in a timely manner. A priority shall be assigned to corrective measures, which will reflect the severity of the hazard or unsafe practice.
- If the hazard involves equipment that can be removed from service, this shall be done. A tag shall be attached identifying the equipment as defective and not to be used.
- Employees will be notified of the hazard and interim protective measures taken until the hazard is corrected. This notification will be accomplished by memo, individual communication, at staff meetings or by other means that may be appropriate. Unsafe work practices will be pointed out to the involved employee. If the unsafe work practice is in violation of our Code of Safe Practices, appropriate disciplinary measures shall be taken. An appropriate addition shall be made to our Code of Safe Practices when necessary.
- If an imminent hazard exists that cannot be immediately abated without endangering employees, all exposed employees shall be removed from the area except those needed to correct the existing condition. Employees necessary to correct the hazardous condition shall be provided the necessary safeguards. If required safeguards are not available, our Emergency Action Plan shall be implemented. Employees may not enter an imminent hazard area without appropriate protective equipment, training, and the prior specific approval of the IIPP Safety Coordinator or designee.
- When an unsafe work condition, practice or procedure is observed, discovered, or reported, it shall be documented on CVMA Form 8 – Inspection Summary and Action Plan. The specific hazard or work practice will be listed. Corrective measures shall be determined and listed on the form. Appropriate corrective measures shall be taken in a timely manner. A priority shall be assigned to corrective measures, which will reflect the severity of the hazard or unsafe practice.
- If the hazard involves equipment that can be removed from service, this shall be done. A tag shall be attached identifying the equipment as defective and not to be used.
- Employees will be notified of the hazard and interim protective measures taken until the hazard is corrected. This notification will be accomplished by memo, individual communication, at staff meetings or by other means that may be appropriate. Unsafe work practices will be pointed out to the involved employee. If the unsafe work practice is in violation of our Code of Safe Practices, appropriate disciplinary measures shall be taken. An appropriate addition shall be made to our Code of Safe Practices when necessary.
- If an imminent hazard exists that cannot be immediately abated without endangering employees, all exposed employees shall be removed from the area except those needed to correct the existing condition. Employees necessary to correct the hazardous condition shall be provided the necessary safeguards. If required safeguards are not available, our Emergency Action Plan shall be implemented. Employees may not enter an imminent hazard area without appropriate protective equipment, training, and the prior specific approval of the IIPP Safety Coordinator or designee.

Section VII: Training

Policy

It is our policy and the responsibility of the Safety Coordinator to provide training in the following circumstances:

1. When the IIPP is first established;
2. To all new employees / workers;
3. To all employees / workers given new job assignments for which training has not previously been received;
4. Whenever new substances, processes, procedures or equipment are introduced to the workplace and represent a new hazard;
5. Whenever the employer is made aware of a new or previously unrecognized hazard;
6. For Supervisors to familiarize themselves with the safety and health hazards to which employees under their immediate direction and control may be exposed.
7. Whenever a new Cal / OSHA program or plan that applies to veterinary practice is instituted.
8. When the IIPP is first established;
9. To all new employees / workers;
10. To all employees / workers given new job assignments for which training has not previously been received;
11. Whenever new substances, processes, procedures or equipment are introduced to the workplace and represent a new hazard;
12. Whenever the employer is made aware of a new or previously unrecognized hazard;
13. For Supervisors to familiarize themselves with the safety and health hazards to which employees under their immediate direction and control may be exposed.
14. To all employees/ workers with respect to hazards specific to each employee's job assignment.
15. Whenever a new Cal / OSHA program or plan that applies to veterinary practice is instituted.

Training Program

Our training program includes (but is not limited to):

- Our IIPP, Code of Safe Practices, emergency action plan, fire prevention plan, hazard communication program, zoonotic disease prevention program, and other Cal/OSHA required components for our practice and measures for reporting any unsafe conditions, work practices, injuries and when additional instruction is needed.
- Workplace hazards specific to our practice such as general sanitation and housekeeping, safe lifting, ergonomics, slip, trip and fall, bite and scratch avoidance, safe animal handling, and others.
- Use of appropriate clothing and personal protective equipment.
- The rights and responsibilities of both employer and employees in maintaining a safe work environment.
- Our IIPP, Code of Safe Practices, emergency action plan, fire prevention plan, hazard communication program, zoonotic disease prevention program, and other Cal/OSHA required components for our practice. and measures for reporting any unsafe conditions, work practices, injuries and when additional instruction is needed.
- Workplace hazards specific to our practice such as general sanitation and housekeeping, safe lifting, ergonomics, slip, trip and fall, bite and scratch avoidance, safe animal handling, and others.
- Use of appropriate clothing and personal protective equipment.
- The rights and responsibilities of both employer and employees in maintaining a safe work environment.

Documentation

Documentation of training is maintained on forms maintained in the Cal/OSHA section of our filing system in a folder labeled "Training."

Training-related documents shall be maintained for a minimum of one (1) year. Training records of employees who have worked for less than one (1) year may be provided to the employee upon termination of employment and may not be retained beyond the term of employment.

Section VIII: Recordkeeping

Inspection Recordkeeping

Our practice has taken the following steps to implement and maintain our IIPP.

Safety & Health Training Recordkeeping

Our practice has fewer than ten employees and maintains a log of instructions (CVMA Form 6) provided to employees with respect to hazards unique to their job assignments when first hired or when they are assigned new duties.

Our practice retains training records for the term of employment of employees who work for us for less than one (1) year. These records are provided to the employee(s) upon termination of their employment.

These records will be maintained in the Cal/OSHA area of our filing in sections titled "Safety Inspections" and "Safety Training".

Code of Safe Practices

Code of Safe Practices

1. Report all unsafe conditions and accidents to Supervisors or the Safety Coordinator.
2. No one under 18 years of age may be involved in taking radiographs. Pregnant individuals should also avoid radiation exposure.
3. X-ray monitoring badges are to be worn whenever you are involved in taking radiographs.
4. Do not handle or restrain animals if you are not trained or feel uncomfortable with a particular animal.
5. Clean up fecal material, urine and other material on the floor that may cause slipping and falling as soon as possible.
6. Clean up all spills immediately. Refer to the appropriate SDS for specific hazards and procedures. Kitty litter may be used as an absorbent in many cases.
- 7.
8. No food or drink are permitted in areas where medications or medical equipment are located, or where medical procedures are taking place.
9. Appropriate footwear in good condition shall be worn on the premises.
10. No smoking shall be permitted in the building.
11. Electrical cords shall be protected from moisture, foot traffic and animals.
12. Only authorized personnel shall operate autoclaves, X-ray equipment, anesthetic machines, and other devices that require training for safe and proper use.
- 13.
14. Only trained and identified employees may attempt to respond to fire or other emergencies.
15. Safety devices on equipment shall not be circumvented.
16. When lifting heavy objects, the large muscles of the legs shall be used instead of the smaller back muscles. Request assistance when necessary.
17. Horseplay, scuffling and other acts that tend to have an adverse influence on the safety of employees shall be prohibited.
18. Gloves are to be worn when: changing radiographic solutions or hand processing radiographs, bathing and treating animals with insecticides, administering Brucella or contagious ecthyma vaccine, handling animals suspected of harboring zoonotic agents.

Emergency Action Plan (EAP)

Procedures

for

EAP Safety Coordinator:

EAP Alternate Safety Coordinator:

This Emergency Action Plan (EAP) was written to comply with the California Code of Regulations, Title 8, Section 3220.

In the event of an emergency, the following procedure shall be initiated:

1. Escape Procedures – Evacuation: If it is necessary to evacuate the building, all employees shall leave the building using the nearest exit and meet at/in the . If this area is inaccessible, meet at/in . See floor plan for location of exits and exit routes.
2. Critical Operations – Shut Down: We do not have any critical operations that require special action before evacuations. If necessary, after the initial emergency has passed, veterinarians on duty, registered veterinary technicians on duty, and other necessary personnel shall remain to help close down the practice. The Supervisor who will oversee the close down shall be , or the senior veterinarian on duty. If none are present, the senior supervisor present shall assume this duty.
3. Roll Call – Do not leave the assembly area without checking with your supervisor or the EAP Safety Coordinator or senior staff member present. This procedure will enable us to account for all employees. The EAP Safety Coordinator or senior staff person present will be responsible for notifying emergency responders of missing employees.
4. Rescue and Medical Duties (Medical Service and First Aid) – We have not designated specific individuals to provide CPR or first aid because emergency treatment is readily available by dialing 911.
5. Reporting Emergencies (Alarm system) – Notify your immediate supervisor or the EAP Safety Coordinator. Direct voice communication is our preferred means of communication, but our telephone intercom may also be used. Our primary employee alarm system shall consist of direct voice communication also. We will use our telephone intercom system or public address system as appropriate to inform employees of an emergency situation. Air horn/whistle option: For extreme emergencies such as fire, an air horn or whistle shall be used to notify employees.
6. EAP Safety Coordinator – is available if employees have questions or comments on this practice's Emergency Action Plan.
7. Notifying Practice Owner: If , is not on the premises at the time, the senior supervisor on duty shall immediately call him/her at and/or at . Every effort shall be made to contact him/her as soon as possible if he/she cannot be reached at either of these numbers.
8. Fire Extinguishers: shall be trained and authorized to use fire extinguishers. Fire extinguishers are operated by pulling the pin that blocks the trigger of the unit, pointing the nozzle at the base of the fire and pulling the trigger. The spray should be directed at the base of the fire in a back and forth motion. Attempts to put out small fires may be made by supervisors. If the fire cannot be controlled, evacuate the building as detailed above.
9. Employee Emergency Contact Information: A list of home telephone numbers and emergency contact information (names and phone numbers) for employees is kept in the .
10. Patient Evacuation: Under no circumstances are employees to attempt to rescue patient animals when an evacuation is required. Only trained emergency responders shall make rescue attempts at this time. Employees may assist trained emergency responders by taking charge of the animals once they have been removed to a safe location. The Safety Coordinator or senior staff member present shall report to emergency responders the status of all employees present and once all employees are accounted for, emergency responders may be asked to attempt the rescue of patient animals.
11. Patient Contingency Plan: In the event that we are unable to care for patients left in our charge, we shall attempt to contact the client or the client's agent and make arrangements to have the patients removed from the premises. If this is not possible or the patient requires continued medical treatment, we will attempt to move the patients to nearby veterinary facilities: .

Additional procedures, if any, include:

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Fire Prevention Plan (FPP)

for

This Fire Prevention Plan (FPP) was written to comply with the California Code of Regulations, Title 8, Section 3221.

Potential Fire Hazards, Ignition Sources & Housekeeping

Potential Fire Hazards

Potential fire hazards in our practice have been identified as the following:

1. Oxygen storage tanks used in the surgery room and treatment area.
2. Alcohol containers used throughout the hospital.
3. Clothes dryer / lint catcher.
4. Heating pads / cage dryers.
5. Oxygen storage tanks used in the surgery room and treatment area.
6. Alcohol containers used throughout the hospital.
7. Clothes dryer / lint catcher.
8. Heating pads / cage dryers.
9. Oxygen storage tanks used in the surgery room and treatment area.
10. Alcohol containers used throughout the hospital.
11. Clothes dryer / lint catcher.
12. Heating pads / cage dryers.

Potential Ignition Sources

Potential ignition sources have been identified as:

1. Open flames.
2. Sparks from electrical switches and equipment.
3. Lint in dryers.
4. Open flames.
5. Sparks from electrical switches and equipment.
6. Lint in dryers.
7. Open flames.
8. Sparks from electrical switches and equipment.
9. Lint in dryers.
10. Open flames.
11. Sparks from electrical switches and equipment.
12. Lint in dryers.

Minimizing Potential Fire Hazards

Minimization of potential fire hazards shall include:

1. Compressed gas shall be stored properly in the .
2. Smoking shall not be allowed anywhere within the hospital and open flames are not used in any routine procedure.
3. Accumulating waste including dust and paper products shall be removed from the building promptly or stored in a safe area until such removal is possible.
4. Combustible materials shall be stored in suitable containers with proper caps in place.
5. All electrical connections are to be kept in good working condition and extension cords shall not be used if not needed.
6. Electrical outlets shall have Ground Fault Circuit Interrupters (GFCIs) wherever possible or all cords/plugs being plugged in will have a ground prong.
7. Electrical outlets will not be overloaded with too many devices plugged into them.
8. All electrical equipment shall be kept in good working order.
9. Compressed gas shall be stored properly in the .
10. Smoking shall not be allowed anywhere within the hospital and open flames are not used in any routine procedure.
11. Accumulating waste including dust and paper products shall be removed from the building promptly or stored in a safe area until such removal is possible.
12. Combustible materials shall be stored in suitable containers with proper caps in place.
13. All electrical connections are to be kept in good working condition and extension cords shall not be used if not needed.
14. Electrical outlets shall have Ground Fault Circuit Interrupters (GFCIs) wherever possible or all cords/plugs being plugged in will have a ground prong.
15. Electrical outlets will not be overloaded with too many devices plugged into them.
16. All electrical equipment shall be kept in good working order.
17. Compressed gas shall be stored properly in the .
18. Smoking shall not be allowed anywhere within the hospital and open flames are not used in any routine procedure.
19. Accumulating waste including dust and paper products shall be removed from the building promptly or stored in a safe area until such removal is possible.
20. Combustible materials shall be stored in suitable containers with proper caps in place.
21. All electrical connections are to be kept in good working condition and extension cords shall not be used if not needed.
22. Electrical outlets shall have Ground Fault Circuit Interrupters (GFCIs) wherever possible or all cords/plugs being plugged in will have a ground prong.
23. Electrical outlets will not be overloaded with too many devices plugged into them.
24. All electrical equipment shall be kept in good working order.
25. Compressed gas shall be stored properly in the .
26. Smoking shall not be allowed anywhere within the hospital and open flames are not used in any routine procedure.
27. Accumulating waste including dust and paper products shall be removed from the building promptly or stored in a safe area until such removal is possible.
28. Combustible materials shall be stored in suitable containers with proper caps in place.
29. All electrical connections are to be kept in good working condition and extension cords shall not be used if not needed.
30. Electrical outlets shall have Ground Fault Circuit Interrupters (GFCIs) wherever possible or all cords/plugs being plugged in will have a ground prong.
31. Electrical outlets will not be overloaded with too many devices plugged into them.
32. All electrical equipment shall be kept in good working order.

Housekeeping Measures

Housekeeping measures to reduce fire danger shall include:

1. Daily emptying of trash cans.
2. Regular cleaning of light fixtures.
3. Prompt removal of empty boxes and packing materials.
4. Keeping work areas free of clutter.
5. Routine emptying of lint catchers in dryers.
6. Daily emptying of trash cans.
7. Regular cleaning of light fixtures.
8. Prompt removal of empty boxes and packing materials.
9. Keeping work areas free of clutter.
10. Routine emptying of lint catchers in dryers.
11. Daily emptying of trash cans.
12. Regular cleaning of light fixtures.
13. Prompt removal of empty boxes and packing materials.
14. Keeping work areas free of clutter.
15. Routine emptying of lint catchers in dryers.
16. Daily emptying of trash cans.
17. Regular cleaning of light fixtures.
18. Prompt removal of empty boxes and packing materials.
19. Keeping work areas free of clutter.
20. Routine emptying of lint catchers in dryers.

Fire Extinguishers / Maintenance of Equipment

Fire extinguishers shall be tested and recharged annually and checked visually monthly to ensure that each unit is in good working order and has adequate pressure. See the floor plan for the locations of the fire extinguishers.

Our Fire Safety Coordinator, shall be responsible for maintenance of equipment and preventing the accumulation of flammable or combustible waste material and maintaining good housekeeping practices.

Hazard Communication Program (HCP)

for

This written Hazard Communication Program (HCP) has been developed to comply with Title 8, Section 5194 to protect the health and safety of our employees.

It applies to all operations that may expose employees to hazardous substances (chemicals) as a result of normal working conditions or as the result of a reasonably foreseeable emergency. The Safety Coordinator, , has full authority and responsibility for implementing and maintaining this program.

We provide information about the hazardous substances in our workplace, the associated hazards, and the control of these hazards through a comprehensive HCP that consists of the following components:

- Maintaining a list of the hazardous substances in the workplace.
- Maintaining a collection of Material Safety Data Sheets in a place accessible and known to all employees.
- Ensuring adequate labeling of all hazardous materials.
- Training Employees about the materials, labels, SDSs, emergency procedures and handling precautions.
- Alerting all employees in the hospital when they are at risk of exposure to chemicals used by their co-workers or contractors in the workplace.

, our HCP Safety Coordinator, will monitor our plan to ensure that the policies are carried out and that the plan is effective.

If anyone has questions about this program, contact the HCP Safety Coordinator.

The following pages outline how this program will be conducted.

List of Hazardous Materials

Maintaining a list of the hazardous substances in the workplace.

, our HCP Safety Coordinator, will prepare and keep current an inventory list of all known hazardous substances present in our workplace. This list will be maintained in our Safety Program Binder immediately following our Hazard Communication Program. The list will be kept in alphabetical order using an identity that is referenced on the appropriate Safety Data Sheet (SDS). In most cases, this will be either the brand name or generic name, whichever is used more commonly. New substances that are considered hazardous will be added to the list as required. Specific information on each hazardous substance is available in our SDS collection.

It is our policy to list all substances that may present any level of physical or health hazard. We have elected to maintain one list for all hazardous substances in our facility. The list is as follows:

Hazardous materials in this practice

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SDS Collection

Maintain a collection of Material Safety Data Sheets in a place accessible and known to all employees.

1. , our HCP Safety Coordinator, will be responsible for obtaining and maintaining the Safety Data Sheet (SDS) collection for our practice.
2. The HCP Safety Coordinator will also be responsible for: (1) Reviewing incoming SDSs for new and significant safety information and their completeness, (2) Seeing that any new information is passed on to the affected employees, (3) Contacting the manufacturer if an SDS is missing or incomplete, and (4) Contacting Cal/OSHA if a complete SDS is not received within 25 days of a written request.
3. The collection will be kept in alphabetical order by brand name. In some cases, when the item is more commonly known by the compound or generic name, that name will be used. Occasionally, we have elected to maintain two copies of an SDS, one filed under the brand name and one filed under the generic or compound name.
4. SDSs are available to all employees for review during each work shift.
5. Notify , our HCP Safety Coordinator, if you cannot find a specific SDS or if a new hazardous substance is introduced and the appropriate SDS is not available.
6. SDSs for products no longer in use in our facility will be moved to our active SDS collection and archived for a minimum of 30 years.
7. If anyone has specific questions or needs more information on an SDS, please contact .

SDS Information

Our SDS binder name and location is as follows:

- SDS binder name:
- Location of SDS binder:

Labeling of Hazardous Materials

Instruction Document

Ensure adequate labeling of all hazardous materials.

, our HCP Safety Coordinator, will be responsible for maintaining labels on all hazardous materials. will verify that all containers are labeled in accordance with HAZCOM 2012 and the Globally Harmonized system (GHS) of labeling. The system includes:

PRIMARY CONTAINERS

- Name, Address, and Telephone Number
- Product Identifier
- Signal Word
- Hazard Statement(s)
- Precautionary Statement(s)
- Supplementary Information (Pictogram(s))

SECONDARY CONTAINERS

- Identity of the hazardous substance(s)
- Applicable hazard warnings

The original label on a primary container will be maintained in good condition. In the event that the original label becomes unreadable, a "workplace label" that includes the name of the hazardous substance(s) and appropriate hazard warnings shall be placed on the container. The same "workplace label" shall be placed on secondary containers into which the material is transferred. In the event that the secondary container has limited space available for label warnings, our workplace label will include the product identifier and words, pictures, symbols or combination thereof, which in combination with other information immediately available (such as an SDS collection), will provide information regarding the hazards associated with the product.

Unmarked secondary containers may occasionally be used in some areas of the facility, such as the grooming area, where substances may be mixed or used in quantities sufficient for single use only. A single employee will use these materials, and the container will be empty at the end of the task. Mop buckets may not be labeled if they will be emptied at the end of the task.

Employee Training

Document

Providing Employees with Training & Information

It is our policy to provide employees with health and safety training before they are assigned to their duties. This training will be arranged by our HCP Safety Coordinator, and the following topics will be covered:

- The requirements of the hazard communication regulation, including employee rights under the regulation (the right to personally receive hazardous substances information and not be discriminated against for showing an interest in how these substances may affect their health and safety).
- Location and availability of the written Hazard Communication Program.
- Location of the SDS collection.
- How to obtain information from a SDS and from container labels.
- Any operation in their work area, including non-routine tasks, where hazardous substances are present and exposures are likely to occur.
- The physical and health effects of the hazardous substances they may encounter.
- Symptoms of overexposure.
- Procedures and duties in the employee's work area where hazardous substances are present, including methods to reduce or prevent their exposure to these hazardous substances through safe work associations and use of personal protective equipment when indicated.
- Methods and observation techniques used to determine the presence or release of hazardous substances in their work areas.
- Emergency spill-containment and first aid procedures to follow in the event an employee finds a spill or is exposed to a hazardous substance.
- How to read labels on both primary and secondary containers. If a workplace ("secondary") label system is being utilized for secondary containers, training on how to read these labels will be included.

If employees have any additional questions, they are to contact the HCP Safety Coordinator.

When new hazardous substances are introduced into the work area,, our HCP Safety Coordinator, will review the training items relative to the new substance with the affected employees. The HCP Safety Coordinator may utilize a special meeting, regular staff meetings, memos, direct communication with the employee or notices on our bulletin boards to disseminate this information.

- I have read and the HCP employee training information above.

Non-Routine Task - Hazard Notification

Alert all employees in the facility when they are at risk of exposure to chemicals used by their co-workers or subcontractors in the workplace.

1. Inform employees about hazardous non-routine tasks. Periodically, employees are required to perform hazardous non-routine tasks. Prior to starting work on such projects, each affected employee will be given information by our HCP Safety Coordinator, or by their Supervisor about hazards to which they may be exposed during such activity. This information will include:
 - Specific hazards.
 - Protective devices/safety measures that are to be utilized.
 - Measures the practice has taken to lessen the hazards, including special ventilation, protective equipment to be used, presence of other employees, and emergency procedures to be followed.

Examples for non-routine tasks performed by employees that may expose them to hazardous substances may include:

Examples of non-routine tasks performed by employees that may expose them to hazardous substances

- Pest Control (Premises) – Insecticide / Rodenticide
- Painting – Paint Thinner, Paint
- Landscaping Maintenance – Gasoline
- Pest Control (Premises) – Insecticide / Rodenticide
- Painting – Paint Thinner, Paint
- Landscaping Maintenance – Gasoline
- Pest Control (Premises) – Insecticide / Rodenticide
- Painting – Paint Thinner, Paint
- Landscaping Maintenance – Gasoline
- Pest Control (Premises) – Insecticide / Rodenticide
- Painting – Paint Thinner, Paint
- Landscaping Maintenance – Gasoline

2. Inform Contractors

To ensure that outside contractors work safely at our practice, it is the responsibility of our HCP Safety Coordinator,, to provide and receive the following information from contractors:

- Hazardous substances to which they may be exposed while on the premises as well as substances they will be bringing into the workplace.
- Precautions and appropriate protective measures the contractor or employees should take to lessen the possibility of exposure.

Workplace Violence Prevention Plan (WVPP)

, our WVPP Safety Coordinator, will be responsible for implementing the program plan.

Ways to participate in identifying, evaluating, and correcting workplace violence hazards

Ways to participate in identifying, evaluating, and correcting workplace violence hazards are:

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Ways to participate in designing and implementing training

Ways to participate in designing and implementing training are:

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Ways to participate in reporting and investigating workplace violence incidents

Ways to participate in reporting and investigating workplace violence incidents are:

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Procedure(s) to coordinate implementation of the WVPP so that both employers and employees understand their respective roles

Procedure(s) to coordinate implementation of the WVPP so that both employers and employees understand their respective roles:

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Procedure(s) to receive workplace violence reports

Procedure(s) to receive workplace violence reports:

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Procedure(s) to respond to workplace violence reports

Procedure(s) to respond to workplace violence reports:

- In this description, an affirmative statement should be made that employees who make a report of workplace violence will not be retaliated against.

Procedure(s) to prohibit retaliation against an employee who files a report

Procedure(s) to prohibit retaliation against an employee who files a report:

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Procedure(s) to ensure that employees with supervisory work responsibilities comply with the WVPP

Procedure(s) to ensure that employees with supervisory work responsibilities comply with the WVPP:

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Procedure(s) to ensure that employees with non-supervisory work responsibilities comply with the WVPP

Procedure(s) to ensure that employees with non-supervisory work responsibilities comply with the WVPP:

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Procedure(s) to communicate with employees about how they can report a violent incident, threat, or other workplace violence concern to the employer or law enforcement without fear of reprisal

Procedure(s) to communicate with employees about they can report a violent incident, threat, or other workplace violence

concern to the employer or law enforcement without fear of reprisal:

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Procedure(s) to communicate with employees about how their concerns will be investigated and how they will be informed of the results of the investigation and any corrective actions taken

Procedure(s) to communicate with employees about how their concerns will be investigated and how they will be informed of the results of the investigation and any corrective actions taken:

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Procedure(s) to alert employees of the presence, location, and nature of workplace violence emergencies

Procedure(s) to alert employees of the presence, location, and nature of workplace violence emergencies:

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Procedure(s) to evacuate and shelter plan for the worksite

Procedure(s) to evacuate and shelter plan for this worksite:

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Procedures to obtain help from staff assigned to respond to workplace violence emergencies, and if any, security personnel and law enforcement

Procedures to obtain help from staff assigned to respond to workplace violence emergencies, and if any, security personnel and law enforcement:

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Procedure(s) to develop and provide the training

Procedure(s) to develop and provide the training:

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Procedure(s) to evaluate workplace violence hazards, including, but not limited to, scheduled periodic inspections to identify unsafe conditions and work practices and employee reports and concerns

Procedure(s) evaluate workplace violence hazards, including, but not limited to, scheduled periodic inspections to identify unsafe conditions and work practices and employee reports and concerns:

- Examples should include: scheduled periodic inspections to identify unsafe conditions and work practices, and immediate response to employee reports and concerns.

When workplace violence inspections will be conducted

Inspections shall be conducted when the plan is first established, after each workplace violence incident, whenever the employer is made aware of a new or previously unrecognized hazard, and:

- Examples should include: when the plan is first established, after each workplace violence incident, whenever the employer is made aware of a new or previously unrecognized hazard.

Procedures to correct workplace violence hazards in a timely manner

Procedure(s) Procedures to correct workplace violence hazards in a timely manner:

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Post-Incident Response Procedures

In the event that a workplace violence incident occurs at the worksite, these are the post-incident response procedures:

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WVPP Review

The plan shall be reviewed at least annually, when a deficiency is observed or becomes apparent, after a workplace violence incident occurs, and:

- Examples should include: a statement that the plan shall be reviewed at least annually, when a deficiency is observed or becomes apparent, and after a workplace violence incident occurs.

Procedures to obtain the active involvement of employees and authorized employee representatives in reviewing the plan

Procedures to obtain the active involvement of employees and authorized employee representatives in reviewing the plan:

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