UCDAVIS

ENTOMOLOGY/NEMATOLOGY

INJURY AND ILLNESS PREVENTION PROGRAM



INJURY AND ILLNESS PREVENTION PROGRAM

This Injury and Illness Prevention Program has been prepared by The University of California, Department: ENTOMOLOGY/NEMATOLOGY

in accordance with University Policy (UCD Policy & Procedure Manual Section 290-15: Safety Management Program) and California Code of Regulations Title 8, Section 3203 (8 CCR, Section 3203).

INJURY AND ILLNESS PREVENTION PROGRAM

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Department Information

Department Name: ENTOMOLOGY/NEMATOLOGY

Department Director: Steve Nadler

Address: 367 Briggs Hall

Telephone Number: 530 752 0492

Buildings Occupied by Department

1. Building: Briggs Hall

Unit(s): Entomology and Nematology

Contact: Andrew Ross
Phone: 530 752-2592

2. Building: Hutchison Hall

Unit(s): Entomology and Nematology

Contact: Andrew Ross
Phone: 530 752-2592

3. Building: Storer Hall

Unit(s): Entomology and Nematology

Contact: Andrew Ross
Phone: 530 752-2592

4. Building: Academic Surge

Unit(s): Entomology and Nematology

Contact: Andrew Ross
Phone: 530 752-2592

I. Authorities and Responsible Parties

The authority and responsibility for the implementation and maintenance of the Injury and Illness Prevention Program (IIPP) is in accordance with University Policy (UCD Policy & Procedure Manual Section 290-15: Safety Management Program) and California Code of Regulations (8 CCR, Section 3203) and is held by the following individuals:

1.	Name: Steve Nadler
	Title: Department Chair
	Authority: Authority and responsibility for ensuring implementation of this IIPP
2.	Signature: Stee Maller Date: 1/11/2021 Name: Andrew Ross
	Title: Department Safety Coordinator
	Authority: Department designated authority for implementation of this IIPP
	Signature: Docusigned by: Date: 1/11/2021

All Principal Investigators and supervisors are responsible for the implementation and enforcement of this IIPP in their areas of responsibility in accordance with University Policy (UCD Policy & Procedure Manual Section 290-15: Safety Management Program).

II. System of Communications

1.	Effective communications with employees have been established using the following methods
	Check all boxes that apply, list additional department methods in space provided.

Standard Operating Procedures Manual
Safety Data Sheets
Monthly departmental operations meetings
Internal media (department intranet)
EH&S Safety Nets
Training videos
Safety Newsletter
Handouts
Building Evacuation Plan
E-mail
Posters and warning labels
Job Safety Analysis – Initial Hire
Job Safety Analysis – Annual Review
Other (list): Quarterly safety committee meetings

- 2. Employees are encouraged to report any potential health and safety hazard that may exist in the workplace. **Hazard Alert/Correction Forms** (Appendix A) are available to employees for this purpose. Forms are to be placed in the Safety Coordinator's departmental mail box. Employees have the option to remain anonymous when making a report.
- 3. Employees have been advised of adherence to safe work practices and the proper use of required personal protective equipment. Conformance will be reinforced by discipline for non-compliance in accordance with University policy (<u>UC Davis Personnel Policies for Staff Members- Section 62, Corrective Action</u>).

III. System for Assuring Employee Compliance with Safe Work Practices

Employees have been advised of adherence to safe work practices and the proper use of required personal protective equipment. Conformance will be reinforced by discipline for non-compliance in accordance with University policy (<u>UC Davis Personnel Policies for Staff Members- Section 62</u>, <u>Corrective Action</u>).

The following methods are used to reinforce conformance with this program:

- 1. Distribution of Policies
- 2. Training Programs
- 3. Safety Performance Evaluations

Performance evaluations at all levels must include an assessment of the individual's commitment to and performance of the accident prevention requirements of his/her position. The following are examples of factors considered when evaluating an employee's safety performance.

- Adherence to defined safety practices.
- Use of provided safety equipment.
- Reporting unsafe acts, conditions, and equipment.
- Offering suggestions for solutions to safety problems.
- Planning work to include checking safety of equipment and procedures before starting.
- Early reporting of illness or injury that may arise as a result of the job.
- Providing support to safety programs.
- 4. Statement of non-compliance will be placed in performance evaluations if employee neglects to follow proper safety procedures, <u>and</u> documented records are on file that clearly indicate training was provided for the specific topic, and that the employee understood the training and potential hazards.
- 5. Corrective action for non-compliance will take place when documentation exists that proper training was provided, the employee understood the training, and the employee knowingly neglected to follow proper safety procedures. Corrective action includes, but is not limited to, the following: Letter of Warning, Suspension, or Dismissal.

Does your department use any additional methods for assuring employee compliance with safe work practices? YES χ NO

Annual refresher training, annual inspections of work areas

IV. Hazard Identification, Evaluation, and Inspection

Job Hazard Analyses and worksite inspections have been established to identify and evaluate occupational safety and health hazards.

1. Job Safety Analysis:

Job Safety Analysis (JSA) identifies and evaluates employee work functions, potential health or injury hazards, and specifies appropriate safe practices, personal protective equipment, and tools/equipment. JSA's can be completed for worksites, an individual employee's job description, or a class of employees' job description. Completed JSA's are located in **Appendix B**.

The following resources are available for assistance in completing JSA's:

- Laboratory personnel, please refer to the Laboratory Hazard Assessment Tool
- Non-Laboratory personnel, please refer to the <u>JSA/PPE Certification Forms</u>

(Example JSAs are located in <u>Appendix B1</u> and <u>Appendix B2</u> of this template)

2. Worksite Inspections

Worksite inspections are conducted to identify and evaluate potential hazards. Types of worksite inspections include both periodic scheduled worksite inspections as well as those required for accident investigations, injury and illness cases, and unusual occurrences. Inspections are conducted at the following worksites:

1) Location: Briggs Hall

Frequency: Annual

Responsible Person: Andrew Ross

Records Location: Online in Inspect program

2) Location: Hutchison hall

Frequency: Annual

Responsible Person: Andrew Ross

Records Location: Online in Inspect program

3) Location: Storer hall

Frequency: Annual

Responsible Person: Andrew Ross

Records Location: Online in Inspect program

4) Location: Everson Hall

Frequency: Annual

Responsible Person: Andrew Ross

Records Location: Online in Inspect program

(Worksite Inspection Forms are located in <u>Appendix C</u> (<u>C1 - General Office and C2 - Laboratory</u>). (Example Worksite Inspection Forms are located in Appendix C of this template (C1 - General Office and C2 - Laboratory).

V. Accident Investigation

University Policy requires that work-related injuries and illnesses be reported to Workers' Compensation within 24 hours of occurrence and state regulation requires all accidents be investigated.

Employee of this department will immediately notify their supervisor when occupationally-related injuries and illnesses occur, or when employees first become aware of such problems.

- 1. **Supervisors** will investigate all accidents, injuries, occupational illnesses, and near-miss incidents to identify the causal factors or attendant hazards. Appropriate repairs or procedural changes will be implemented promptly to mitigate the hazards implicated in these events. Proper injury reporting procedures can be found at http://safetyservices.ucdavis.edu/article/injury-reporting-procedure.
- 2. The <u>Injury and Illness Investigation Form (Appendix D)</u> shall be completed to record pertinent information and a copy retained to serve as documentation. It can be completed by either the supervisor or the Department Safety Coordinator.
- 3. **Note:** Serious occupational injuries, illnesses, or exposures must be reported to Cal/OSHA by an EH&S representative <u>within eight hours</u> after they have become known to the supervisor. These include injuries/illnesses/exposures that cause permanent disfigurement or require hospitalization for a period in excess of 24 hours. Please refer to <u>EH&S SafetyNet #121</u> for OSHA notification instructions.

VI. Hazard Correction:

Hazards discovered either as a result of a scheduled periodic inspection or during normal operations must be corrected by the supervisor in control of the work area, or by cooperation between the department in control of the work area and the supervisor of the employees working in that area. Supervisors of affected employees are expected to correct unsafe conditions as quickly as possible after discovery of a hazard, based on the severity of the hazard.

Specific procedures that can be used to correct hazards include, but are not limited to, the following:

- Tagging unsafe equipment "Do Not Use Until Repaired," and providing a list of alternatives for employees to use until the equipment is repaired.
- Stopping unsafe work practices and providing retraining on proper procedures before work resumes.
- Reinforcing and explaining the need for proper personal protective equipment and ensuring its availability.
- Barricading areas that have chemical spills or other hazards and reporting the hazardous conditions to appropriate parties.

Supervisors should use the <u>Hazard Alert/Correction Report (Appendix A)</u> to document corrective actions, including projected and actual completion dates.

If an imminent hazard exists, work in the area must cease, and the appropriate supervisor must be contacted immediately. If the hazard cannot be immediately corrected without endangering employees or property, all personnel need to leave the area except those qualified and necessary to correct the condition. These qualified individuals will be equipped with necessary safeguards before addressing the situation.

Does your department have any additional Hazard Correction Procedures? Yes No x

VII. Health and Safety Training

Health and safety training, covering both general work practices and job-specific hazard training is the responsibility of: Steve Nadler and immediate Supervisor(s) as applicable to the following criteria:

- 1. Supervisors are provided with training to become familiar with the safety and health hazards to which employees under their immediate direction and control may be exposed.
- 2. All new employees receive training prior to engaging in responsibilities that pose potential hazard(s).
- 3. All employees given new job assignments receive training on the hazards of their new responsibilities prior to actually assuming those responsibilities.
- 4. Training is provided whenever new substances, processes, procedures or equipment (which represent a new hazard) are introduced to the workplace.
- 5. Whenever the employer is made aware of a new or previously unrecognized hazard, training is provided.

The <u>Safety Training Attendance Record</u> form is located in <u>Appendix E</u>.

VIII. Recordkeeping and Documentation

Documents related to the IIPP are maintained in/at/on:

370 Briggs Hall in IIPP safety records binders

The following documents will be maintained within the department's IIPP Binder for at least the length of time indicated below:

- 1. Hazard Alert/Correction Forms (Appendix A form). Retain for three (3) years.
- 2. Employee Job Safety Analysis forms (Appendix B form) Retain for the duration of each individual's employment.
- 3. Worksite Inspection Forms (Appendix C form). Retain for three (3) years.
- 4. Injury and Illness Investigation Forms (Appendix D form). Retain for three (3) years.

The following documents will be maintained within the department's IIPP Training Records Binder for at least the length of time indicated below:

1. Employee Safety Training Attendance Records (Appendix E form). Retain for three (3) years.

IX. Resources

- 1. UC Office of the President: Management of Health, Safety and the Environment, 10/28/05
- 2. UC Davis Policy and Procedure Manual, Section 290-15, Safety Management Program
- 3. California Code of Regulations Title 8, Section 3203, (<u>8CCR §3203</u>), Injury and Illness Prevention Program
- 4. Personnel Policies for Staff Members, Corrective Action, UC PPSM 62
- 5. UC Davis Environmental Health & Safety
 - Safety Services Website
 - EH&S SafetyNets
 - Safety Data Sheets
- 6. Does your department have any additional resources? YES NO x

X. COMPLETED TASKS

All tasks are required before submitting:

If you selected 'No' for any task, provide an estimated timeframe for completion.

JSA Reviewed: YES × NO

Annual Worksite Inspection completed: YES × NO

IIPP Reviewed: YES × NO

Annual IIPP Training completed: YES × NO



Approve Well done Andy!

HAZARD ALERT / CORRECTION FORM

Alert Identification No Department:	
I. Unsafe Condition or Hazard	
Name: (optional) Job:	
Title: (optional)	
Location of Hazard:	
Building: Floor: Room:	
Date and time the condition or hazard was observed:	
Description of unsafe condition or hazard:	
What changes would you recommend to correct the condition or hazard?	
Employee Signature: (optional) Date:	
II. Management/Safety Committee Investigation Name of person investigating unsafe condition or hazard:	
Results of investigation (What was found? Was condition unsafe or a hazard?): (Attach add sheets if necessary.)	litional
Proposed action to be taken to correct hazard or unsafe condition: (Complete and attach a F Correction Report, IIPP Appendix E)	Hazard
Signature of Investigating Party: Date:	

IIPP-Appendix A January 2016

Completed copies of this form should be routed to the appropriate supervisor and department Safety Coordinator, and must be maintained in department files for at least three years.

HAZARD ALERT / CORRECTION REPORT

Alert Identification No.						
Department:						
This form should be used in conjunction with the "Hazard Alert Form" (IIPP Appendix A), as appropriate, to track the correction of identified hazards.						
All hazards should be corrected as soon as possible, based on the severity of the hazard. If a serious imminent hazard cannot be immediately corrected, evacuate personnel from the area and restrict access until the hazard can be addressed.						
Supervisor/Safety Coordinator Name: Telephone:						
Supervisor/Safety Coordin	ator Signature:		Date:			
Description and Location of Unsafe Condition	Date Discovered	Required Action and Responsible Party	Comple Projected	tion Date Actual		
Condition			<u> </u>			

IIPP–Appendix A January 2016 Completed copies of this form should be routed to the department Safety Coordinator and kept in department files for at least three years.

Example Job Safety Analysis

Department: Environmental Health & Safety Section: Health & Safety

Name	Signature	Date

Job Function	Potential Health or Injury Hazard	Safe Practice, Apparel, or Equipment
Inspection and auditing of laboratories containing chemicals.	Exposure to chemicals via inhalation, contact, ingestion or injection.	Avoid all unnecessary exposures. Reduce exposures that cannot be avoided by minimizing exposure duration and concentration. Proper selection and use of personal protective equipment including gloves, protective eyewear, lab coats, and in some instances respiratory protection. Implementation of proper personal hygiene habits, including washing hands and face before eating and smoking. All personnel to receive on the job and classroom training including Chemical Laboratory Safety, Hazardous Waste Management and Minimization Training and other applicable courses during the first 6 months of employment.
Inspection and auditing of laboratories containing radiological materials.	Exposure to radiological agents via inhalation, contact, ingestion or injection.	Avoid all unnecessary exposures. Adhere to radiological material handling procedures including limiting exposures through combination of minimizing time, maximizing distances and use of appropriate shielding. Proper selection and use of personal protective equipment including gloves, protective eyewear, lab coats, and in some instances respiratory protection Implementation of proper personal hygiene habits, including washing hands and face before eating and smoking. Participation in radiological monitoring program including dosimetry. All personnel to receive on the job and classroom training including Radiation Safety and other applicable courses during the first 6 months of employment.
Inspection and auditing of laboratories containing biological materials.	Exposure to biological agents via inhalation, contact, ingestion or injection.	Avoid unnecessary exposures. Proper selection and use of personal protective equipment including gloves, protective eyewear, lab coats, and in some instances respiratory protection. Proper adherence to blood borne pathogen handling protocols. Implementation of proper personal hygiene habits, including washing hands and face before eating and smoking. Voluntary participation in Hepatitis B vaccination program. Proper adherence to biological waste handling procedures. All personnel to attend EH&S Blood borne Pathogen Program training during the first 6 months of employment. Participation in Facilities- specific medical clearances as required.
Inspection and auditing of laboratories, shops and spaces containing physical hazards.	Injury from physical hazards including high voltage, lasers and ultraviolet light, compressed gases and liquids, cryogenic materials, and specialized equipment as well as falling objects.	Avoid unnecessary exposures. Proper selection and use of personal protective equipment including gloves, protective eyewear and specialized equipment. Employees are not to enter restricted areas unless accompanied by a properly trained individual familiar with the hazards of the area. Employees are not to operate specialized equipment without proper training and documentation. Watch for overhead hazards and wear head protection if needed. Personnel auditing or routinely entering areas where lasers are used will receive laser safety training within 6 months of employment.

Job Function	Potential Health or Injury Hazard	Safe Practice, Apparel, or Equipment
Inspection and auditing of laboratories and animal housing facilities containing animals.	Exposure to animals and animal allergies via inhalation and contact	Avoid unnecessary exposures. Proper selection and use of personal protective equipment including gloves, protective eyewear, lab coats, and in some instances respiratory protection. Proper adherence to animal care and use protocols. Implementation of proper personal hygiene habits, including washing hands and face before eating and smoking. Participation in the occupational health program for animal workers. All personnel to attend the IACUC Animal Care and Use 101 training during the first 6 months of employment. Participation in Facilities- specific medical clearances as required.
Handling and moving heavy items and equipment.	Ergonomic hazards including heavy lifting, repetitive motions, awkward motions, crushing or pinching injuries etc.	Get help with all loads that cannot be safely lifted by one person. Use mechanical means to lift and move heavy items, push carts and dolly rather than pull, attend back safety class, employ proper lifting techniques at all times. Set up work operations as ergonomically safe as practical. Wear proper hand and foot protection to protect against crushing or pinching injuries.
General office work	Back strain, eyestrain, repetitive motion injury. Physical injuries due to slips, trips and falls, and falling objects. Electrical hazards. Physical injuries due to fires, earthquakes, bomb threats and workplace violence.	Ensure that workstations are ergonomically correct. Keep floors clear of debris and liquid spills. Keep furniture, boxes, etc. from blocking doorways, halls and walking space. Do not stand on chairs of any kind, use proper foot stools or ladders. Do not store heavy objects overhead. Do not top load filing cabinets, fill bottom to top. Do not open more than one file drawer at a time. Brace tall bookcases and file cabinets to walls. Provide one-inch lip on shelves. Do not use extension cords in lieu of permanent wiring. Ensure that high wattage appliances do not overload circuits. Use GFCIs in receptacles in potentially wet areas. Replace frayed or damaged electrical cords. Ensure that electrical cords are not damaged by being wedged against furniture or pinched in doors. Attend emergency action and fire prevention plan training including emergency escape drills.
Operation of motor vehicles	Motor vehicle accidents involving personal injury, or property damage	All drivers of University vehicles must attend the Driver Safety Awareness Course offered by Fleet Services and possess a valid California drivers license. Hazardous materials may not be transported in personally owned vehicles.
Exposure to noise hazards	Hearing loss due to noise exposure	Voluntarily participate in the Hearing Conservation Program. Use hearing protection as required.

Job Safety Analysis

Department: Business Services

Name	Signature	Date

Job Function	Potential Health or Injury Hazard	Safe Practice, Apparel, or Equipment
General office work	Back strain, eyestrain, repetitive motion injury. Physical injuries due to slips, trips and falls, and falling objects. Electrical hazards. Physical injuries due to fires, earthquakes, bomb threats and workplace violence.	Ensure that workstations are ergonomically correct. Keep floors clear of debris and liquid spills. Keep furniture, boxes, etc. from blocking doorways, halls and walking space. Do not stand on chairs of any kind, use proper foot stools or ladders. Do not store heavy objects overhead. Do not top load filing cabinets, fill bottom to top. Do not open more than one file drawer at a time. Brace tall bookcases and file cabinets to walls. Provide one-inch lip on shelves. Do not use extension cords in lieu of permanent wiring. Ensure that high wattage appliances do not overload circuits. Use GFCIs in receptacles in potentially wet areas. Replace frayed or damaged electrical cords. Ensure that electrical cords are not damaged by being wedged against furniture or pinched in doors. Attend emergency action and fire prevention plan training including emergency escape drills.
Operation of motor vehicles	Motor vehicle accidents involving personal injury, or property damage	All drivers of University vehicles must attend the Driver Safety Awareness Course offered by Fleet Services and possess a valid California drivers license. Hazardous materials may not be transported in personally owned vehicles.

WORKSITE INSPECTION FORM

General Office Environment

Location	:					Date:
Inspector: Phone:						
Departme	Department:					
						Administration and Training
Yes 🗆	No		NA		1.	Are all safety records maintained in a centralized file for easy access? Are they current?
Yes 🗆	No		NA		2.	Have all employees attended Injury & Illness Prevention Program training? If not, what percentage has attended?
Yes 🗆	No		NA		3.	Does the department have a completed Emergency Action Plan? Are employees being trained on its contents?
Yes 🗆	No		NA		4.	Are chemical products used in the office being purchased in small quantities? Are Material Safety Data Sheets needed?
Yes 🗆	No		NA		5.	Are the Cal/OSHA information poster, Workers' Compensation bulletin, annual accident summary posted?
Yes \square	No		NA		6.	Are annual workplace inspections performed and documented?
						General Safety
Yes \square	No		NA		7.	Are exits, fire alarms, pullboxes clearly marked and unobstructed?
Yes \square	No		NA		8.	Are aisles and corridors unobstructed to allow unimpeded evacuations?
Yes 🗆	No		NA		9.	Is a clearly identified, unobstructed, charged, currently inspected and tagged, wall-mounted fire extinguisher available as required by the Fire Department?
Yes 🗆	No		NA		10.	Are ergonomic issues being addressed for employees using computers or at risk of repetitive motion injuries?
Yes 🗆	No		NA		11.	Is a fully stocked first-aid kit available? Is the location known to all employees in the area?
Yes 🗆	No		NA		12.	Are cabinets, shelves, and furniture over five feet tall secured to prevent toppling during earthquakes?
						Are books and heavy items and equipment stored on low shelves
Yes \square	No		NA		13.	and secured to prevent them from falling on people during earthquakes?
Yes \square	No		NA		14.	Is the office kept clean of trash and recyclables promptly removed?
						Electrical Safety
Yes 🗆	No		NA		15.	Are plugs, cords, electrical panels, and receptacles in good condition? No exposed conductors or broken insulation?
Yes \square	No		NA		16.	Are circuit breaker panels accessible and labeled?
Yes 🗆	No		NA		17.	Are surge protectors being used? If so, they must be equipped with an automatic circuit breaker, have cords no longer than 15 feet in length, and be plugged directly into a wall outlet.
Yes \square	No		NA		18.	Is lighting adequate throughout the work environment?
Yes 🗆	No		NA		19.	Are extension cords being used correctly? They must not run through walls, doors, ceiling, or present a trip hazard.
Yes 🗆	No		NA		20.	Are portable electric heaters being used? If so, they must be UL listed, plugged directly into a wall outlet, and located away from combustible materials.

IIPP-Appendix C1-Office January 2016 Completed copies of this form should be routed to the department Safety Coordinator and must be maintained in department files for at least three years.

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LABORATORY SAFETY REVIEW CHECKLIST

ENVIRONMENTAL HEALTH & SAFETY
ONE SHIELDS AVENUE
DAVIS, CA 95616
(530) 752-1493



To fill out this checklist online from a tablet or phone, please use the SIT tool on UC Safety Suite. Principal Investigator/Laboratory Supervisor: _____ Lab Contact: Building: Room Number: Date: Chemical Yes No Corrected NA Abbreviations used on container labels are identified in a prominent place in the lab. Description/Corrective Action: Abbreviations and/or acronyms used in the laboratory shall be posted in a prominent place and available to all laboratory workers Chemical containers are clearly labeled with contents (in English) and primary hazard(s). Description/Corrective Action: Each container of hazardous substance is to be labeled with the identity of the hazardous substance and any appropriate hazard warnings. Chemical storage containers are in good condition and appropriate for contents. Description/Corrective Action: Hazardous substances shall be stored in containers which are chemically inert to and appropriate for the type and quantity of hazardous substance. Containers of hazardous substances shall not be stored in such locations or manner as to result in physical damage to, or deterioration of, the container. Containers of hazardous chemicals are not stored on the floor. Description/Corrective Action: Floor storage is not recommended for hazardous materials. If it is necessary to do so, secondary containment is required. Corrosive or potentially hazardous liquid chemicals are stored below eye level. Description/Corrective Action: To reduce potential for spill or splash injury to face and eyes, corrosives and other potentially hazardous liquids should be stored below eye level (< 56"). Flammable chemicals are stored separately from combustible materials. Description/Corrective Action: Storage of flammable liquids shall be separated from incompatible materials, including combustible materials. Flammable liquid (including waste) storage outside of the flammable storage cabinet is less than 10 gallons. Description/Corrective Action: The maximum amount of flammable liquids (including waste) in a laboratory allowed outside a flammable storage cabinet is 10 gallons. If no flammable storage available, reduce inventory to less than 10 gallons. Flammable liquid storage in the lab is below allowable quantities as determined by the campus Fire Marshal (60 gallons per fire-rated area). Description/Corrective Action: Flammable liquids in the laboratory must not exceed 60 gallons per fire rated area.



lammables liquids are not stored in containers that exceed 1 gallon containers (or 2 gallons for approved safety can).		
Description/Corrective Action: Flammable liquid storage containers must not exceed 1 gallon, with the exception of 2 gallon if container is a safety can.		
lammables liquids are not used in close proximity to ignition sources.		
Description/Corrective Action: Flammable liquids shall be kept as far as possible from open flames, but not less than 12 inches.		
lammables are stored in "laboratory safe" refrigerator/freezer only.		
Description/Corrective Action: Flammables must be stored in refrigerators or freezers manufactured to be "laboratory safe" and properly labeled as safe for storage of flammables.		
ncompatible chemicals are properly segregated.		
Description/Corrective Action: Incompatible substances must be separated from each other by distance, partitions or secondary containment to prevent accidental contact. Store acids from bases, oxidizers from flammables, etc.		
aboratory is free of expired or unneeded chemicals.		
Description/Corrective Action: Expired chemicals should be discarded following appropriate disposal procedures. All unneeded chemicals should be removed from the laboratory.		
Pyrophoric chemicals are segregated, properly contained, labeled and used only in buildings equipped with automatic sprinkler system.		
Description/Corrective Action: Pyrophoric chemicals must be segregated from incompatible materials by a distance of not less than 20 feet or by storing in hazardous material storage cabinets. Pyrophoric chemical use and storage is permissible only in buildings that are equipped throughout with an approved automatic sprinkler system.		
storage cabinets are clearly labeled as to contents.		
Description/Corrective Action: Chemical storage cabinets must be conspicuously labeled as appropriate, i.e. "FLAMMABLE "or "CORROSIVES".		
trong acids and strong bases are stored in secondary containers.		
Description/Corrective Action: Secondary containment is required for the indoor storage of all corrosives.		
ime sensitive chemicals/peroxide formers are labeled with date received, stored away from		
ight and disposed of within 18 months of purchase or expiration date, whichever is sooner.		
Description/Corrective Action: Peroxide formers are to be stored away from light and heat and labeled with the date they were received, opened and an expiration date to facilitate hazard control. Organic peroxides can decompose into various unstable compounds over time.		



Water reactive chemicals are properly segregated, contained and labeled.				
Description/Corrective Action: Materials which will react with water shall not be stored in the same room with flammable or combustible liquids. Chemicals that may react violently with water must be stored in a moisture free environment and protected from accidental contact with water.				
Documentation	Yes	No	Corrected	NA
Appropriate hazard communication signage is posted at laboratory entrance(s).				
Description/Corrective Action: Hazard identification signs (biohazard, radiation, carcinogen, toxic, oxidizer, flammable, pyrophoric, water reactive, corrosive, magnetic fields, laser, etc.) are required at the entrances to locations where hazardous materials are stored, dispensed, used or handled.				
Building Emergency Evacuation Route is posted near the exit.				
Description/Corrective Action: Map of escape route shall be posted near exits.				
Chemical inventory has been completed or updated within past 12 months.				
Description/Corrective Action: An inventory of all hazardous substances known to be present in the workplace must be maintained and updated at least annually.				
Current emergency contacts and PI/supervisor contact are posted at the laboratory entrance.				
Description/Corrective Action: The names or regular job titles of persons who can be contacted for further information or explanations during an emergency should be posted at the entrances to all laboratories.				
Department Injury and Illness Prevention Plan is available and up-to-date.				
Description/Corrective Action: Every employer shall establish, implement and maintain an effective Injury and Illness Prevention Program. The program shall be in writing and updated at least annually.				
Emergency Action Plan is available.				
Description/Corrective Action: Every employer shall establish, implement and maintain an Emergency Action Plan. The plan shall be in writing and updated at least annually.				
Emergency assistance information is posted.				
Description/Corrective Action: Effective provisions shall be made in advance for prompt medical treatment in the event of serious injury or illness. This can be accomplished by a communications system for contacting a doctor or emergency medical service, such as access to 911 or equivalent telephone system. Emergency numbers must be posted near telephone.				
Hazard assessment is completed and reviewed annually.				
Description/Corrective Action: UCOP policy requires a hazard assessment to determine the appropriate personal protective equipment. Any completed hazard assessment that indicates less than the minimum PPE described requires review and approval from EH&S. Hazard assessment must be reviewed on an annual basis and roster must be kept up-to-date.				



If applicable, participation in the Medical Surveillance Program has been established and documented.				
Description/Corrective Action: For a Cal/OSHA regulated substance for which there are exposure monitoring and medical surveillance requirements, medical surveillance shall be established for employee as prescribed by the particular standard.				
Personnel is aware of location/existence of current campus-wide Chemical Hygiene Plan				
Description/Corrective Action: A written Chemical Hygiene Plan is required for any workplace that uses hazardous chemicals. Access to current Chemical Hygiene Plan must be available to all members of the lab. UC Davis campus-wide Chemical Hygiene Plan is contained within the Laboratory Safety Manual: http://safetyservices.ucdavis.edu/article/laboratory-safety-manual .				
Safety Data Sheets are accessible and available.				
Description/Corrective Action: Safety data sheets for each hazardous substance must be readily accessible. Electronic access and other alternatives to maintaining paper copies are permitted provided all lab workers have immediate access.				
Self-inspections are conducted and documented on an annual basis.				
Description/Corrective Action: Records of scheduled and periodic inspections (annual) to identify unsafe conditions and work practices, including person(s) conducting the inspection, the unsafe conditions and work practices that have been identified and action taken to correct the identified unsafe conditions and work practices are required.				
Staff is aware of how to report incidents and near-misses.				
Description/Corrective Action: Staff should be provided information on the reporting of incidents and near misses.				
Standard Operating Procedures are available.				
Description/Corrective Action: Written SOPs for hazardous operations in the laboratory, work with particularly hazardous substances, etc., and documented training are required. Consult manufacturers' Safety Data Sheets (SDS) for hazard classification information.				
Electrical	Yes	No	Corrected	N/
3-Prong plugs have not been modified to plug into 2-prong receptacle.				
Description/Corrective Action: Equipment must be properly grounded to operate safely.				
A minimum clearance of thirty-six inches in front of electric panel/breaker box is being maintained.				
Description/Corrective Action: A minimum clearance must be maintained around electrical panel for easy access in the event of an emergency.				
Electrical cords do not pose any trip hazards.				
Description/Corrective Action: Cords must be taped down or otherwise secured to prevent tripping.				



Equipment does not have any damaged cord, plug or other condition that constitutes an electrical hazard.				
Description/Corrective Action: Remove equipment from service until repaired or replaced.				
Extension cords are not being used as permanent or semi-permanent wiring.				
Description/Corrective Action: Extension cords may be used in temporary situations where permanent wiring is inappropriate or because equipment is frequently moved. If permanent wiring is required a circuit receptacle should be installed.				
Extension cords or power strip are plugged directly into outlet.				
Description/Corrective Action: Power strips or extension cords must be directly connected to a permanently installed circuit receptacle, not connected in series.				
High voltage equipment is clearly and appropriately labeled.				
Description/Corrective Action: "Danger – High Voltage" must be posted on all doors that lead to areas that contain equipment with high voltage (>600 volts). Equipment must be marked as high voltage with permanent, highly visible markings.				
High voltage equipment is properly guarded.				
Description/Corrective Action: High voltage conductors (>600 volts) must be effectively guarded against danger from accidental contact. All protective panels must be properly installed.				
Major appliances/equipment are plugged directly into outlet.				
Description/Corrective Action: Refrigerators, freezers, incubators, centrifuges, microwaves, analytical equipment, etc. must be plugged directly into the wall outlet.				
Personnel working on hard-wired equipment are trained to the Energy Isolation – Lock Out/Tag Out program.				
Description/Corrective Action: The employer's hazardous energy control procedure shall include separate procedural steps for the safe lockout/tagout of each machine or piece of equipment affected by the hazardous energy control procedure. Only trained individuals may work on hard-wired equipment.				
Power strips near liquids have surge protection.				
Description/Corrective Action: Surge protection is required for all power strips that are used near liquid.				
quipment	Yes	No	Corrected	N
Appropriate safety information is posted on equipment.				
Description/Corrective Action: Required safety information, including danger and hazard warning must be posted on equipment.				



Moving parts of equipment are properly guarded.				
Description/Corrective Action: Belts, pulleys, sprockets and chains, shafts or other rotating parts of mechanical equipment must be properly guarded (opening <1/2").				
Secondary containment for vacuum pumps that use oil is provided.				
Description/Corrective Action: Secondary containment must be provided for vacuum pumps to collect oil leakage.				
re	Yes	No	Corrected	N
Aisles, exits and/or hallways are not obstructed.				
Description/Corrective Action: Aisles must meet minimum clearance guideline of 24" to facilitate departure in the event of an emergency.				
Fire Extinguisher is available in the room with flammable or combustible liquids.				
Description/Corrective Action: A portable fire extinguisher must be located in the area where flammable or combustible liquids are stored, used or dispensed.				
Fire extinguisher annual maintenance tag is present and up-to-date.				
Description/Corrective Action: Fire extinguisher must be inspected annually by Fire Prevention and documented on inspection tag. Contact Rocci Twitchell at rrtwitchell@ucdavis.edu to arrange for annual maintenance or replacement tag.				
Fire extinguisher is properly mounted.				
Description/Corrective Action: Fire extinguisher must be mounted and easily accessible in the event of an emergency.				
Fire extinguisher monthly visual inspection is documented and up-to-date.				
Description/Corrective Action: Fire extinguishers must be visually inspected monthly and documented.				
Fire extinguishers are available as required.				
Description/Corrective Action: Portable fire extinguishers must be available within 75' or less for class A fires or within 50' for class B fires (flammable liquids).				
Fire extinguishers are fully charged, pin and/or security seal is intact.				
Description/Corrective Action Fire extinguishers must be fully charged and operational at all times.				
Fire-rated doors are not propped open.				
Description/Corrective Action: Fire-rated doors must not be propped open. Magnetic holdopens, linked to building alarm systems, are acceptable.				



sprinklers is met.				
Description/Corrective Action: Title 8, §6170 requires 18" clearance between sprinklers and				
materials below and 24" from ceiling to materials below without sprinklers. Move items that prevent this required clearance.				
ume Hoods	Yes	No	Corrected	N.
Audible/visual alarm is functional and/or visual airflow indicator is working.				
Description/Corrective Action: Fume hood must be equipped with a quantitative airflow				
monitor that continuously indicates air is flowing or an audible or visual alarm that is activated				
if airflow decreases to less than 80% of required airflow.				
Chemical work is conducted more than 6" from front of hood.				
Description/Corrective Action: To minimize potential for injury or exposure, hazardous				
chemicals and/or reactions should be kept at least 6" behind the plane of the sash.				
Fume hood has been certified within the past year.				
Description/Corrective Action: Annual check of fume hood is required to ensure the ability to				
maintain inward airflow.				
Fume hood illumination is functional.				
Description/Corrective Action: If fume hood illumination is available, it must be functional.				
Fume hood is not cluttered or used for storage.				
Description/Corrective Action: Fume hood should not be used for long-term storage of				
equipment, chemicals or supplies not regularly used. Fume hood should be kept clean and free				
of clutter at all times for improved airflow across the work surface.				
Fume hood users know how to check their airflow monitor to verify that the hood airflow is				
functioning properly. Users know how to check the certification sticker for annual testing.				
Description/Corrective Action: Fume hood operators must know where the quantitative				
airflow monitor or alarm system is located on the hood and how it is used to indicate an inward				
airflow during hood operation, and be able to determine the date of the last performance test				
and if the hood performance met the requirements.				
Proper sash height is indicated. Sash position does not exceed approved working height. Fume				
hood is kept closed when not in use.				
Description/Corrective Action: The sash and/or jamb of the fume hood must be marked to				
show the maximum opening at which the hood face velocity meets the required airflow. Fume hood should be kept closed when not in use.				



Gas	Yes	No	Corrected	NΑ
Compressed gas cylinders are adequately secured.				
Description/Corrective Action: Compressed cylinders must be stored upright and adequately				
secured. Two, non-combustible restraints (upper 1/3 and lower 1/3) are recommended. "C"-				
clamps are not adequate to secure large cylinders.				
Compressed gas cylinders are labeled with contents and hazards.				
Description/Corrective Action: Compressed gas cylinders are required to have a shoulder label				
that includes contents and hazard information.				
Oxygen and combustible cylinders are separated by an appropriate distance or barrier.				
Description/Corrective Action: Oxygen cylinders in use or in storage shall be separated from				
fuel gas cylinders or combustible materials a minimum distance of 20 feet or by a non-				
combustible barrier at least 5 feet high, or a minimum of 18 inches (46 centimeters) above				
the tallest cylinder and having a fire-resistance rating of at least one hour.				
Toxic gases are properly stored in a ventilated cabinet/fume hood.				
Description/Corrective Action: Cylinders shall not be kept in unventilated enclosures such as				
lockers and cupboards.				
Valves of gas cylinders are capped when not in use.				
Description/Corrective Action: Valve protection devices must be in place when cylinder is not				
in use. The regulator must not remain installed when cylinder is not in-use.				
General Safety	Yes	No	Corrected	N/
Ceiling tiles/panels are not missing and are in good condition.				
Description/Corrective Action: Individual ceiling tiles adjacent to sprinkler heads must be in				
place to ensure activation of the sprinkler system during a fire. Groups of three or more ceiling				
tiles missing in areas not adjacent to sprinkler heads must be replaced to ensure activation.				
Floor is free of defects that could cause slipping, tripping or falling.				
Description/Corrective Action: Laboratory floor needs to be free of defects that could cause				
slip, trips and falls.				
Hand wash sink is available with soap and paper towels.				
Description/Corrective Action: Employees must be able to wash and dry their hands after				
working with potentially hazardous materials, after removing gloves and prior to leaving				
laboratory.				



Lab areas are clean and uncluttered.				
Description/Corrective Action: Lab area should be clean and uncluttered, excess materials should be stored in neat, secure manner that provides easy access and reduces the potential for falling, collapsing, rolling or spreading of the material. Equipment, chemicals, glassware and supplies not in regular use should be stored in areas other than workstations. Paper on work surfaces and walls should be kept to a minimum. There should be minimal glassware on bench top, in sink, and in fume hood.				
Laboratory sinks delivering non-potable water, are labeled "Industrial Water - Do Not Drink"				
Description/Corrective Action: Water for industrial purposes must be posted in a manner to indicate that the water is unsafe and is not to be used for drinking.				
Laboratory ventilation pressure is negative with respect to corridors and offices.				
Description/Corrective Action: Negative pressure should be maintained between the laboratory and adjacent non-laboratory spaces to prevent uncontrolled chemical vapors from leaving the laboratory.				
Refrigerators/freezers are labeled appropriately for the use of the refrigerator/freezer. i.e. "not for storage of food for consumption", "not for storage of flammable materials".				
Description/Corrective Action: Permanent warning labels against the storage of food and beverages must be affixed to all laboratory refrigerators and freezers, i.e., "not for storage of food for consumption," "not for storage of flammable materials," etc.				
Spills are promptly and properly cleaned.				
Description/Corrective Action: All spills shall be cleaned promptly, using appropriate protective apparel and equipment.				
There is no eating or drinking in the laboratory or food storage with hazardous materials.				
Description/Corrective Action: Eating and drinking in areas where laboratory chemicals are stored or handled is prohibited. Workers should be directed to consume food and beverages outside the laboratory.				
Vacuum systems (both house systems and stand-alone vacuum pumps) are fitted with traps and/or protection (HEPA/hydrophobic) filter, if required.				
Description/Corrective Action: Improper trapping can allow vapor to be emitted from the exhaust of the vacuum system, resulting in either reentry into the laboratory and building or potential exposure to maintenance workers.				
PPE	Yes	No	Corrected	N
Appropriate gloves are available for use with hazardous activities conducted within the laboratory.				
Description/Corrective Action: Gloves that are appropriate for the activity must be available in the laboratory. Chemical resistant gloves are required for handling hazardous materials.				
Equipment or process sound levels do not exceed 85 dBA.				



escriptive/Corrective Action: Protection against the effects of noise exposure shall be provided		
hen the sound levels exceed 90 dBA for 8 hours. If the sound levels may exceed 85 dBA, a sound vel check should be completed.		
Face shields are worn as appropriate.		
Description/Corrective Action: Face shields must be worn over safety glasses or chemical splash goggles when using cryogens, large amounts of corrosives, or other eye/face splash hazards.		
Gloves are worn for laboratory procedures where skin contact with hazards may occur.		
Description/Corrective Action: Gloves are required for employees whose work involves exposure of hands to cuts; burns; harmful physical or chemical agents; or radioactive materials.		
If applicable, respirator use has been evaluated by EH&S and users are included in the campus respiratory protection program.		
Description/Corrective Action: Every employee that is required to wear a respirator must participate in the respiratory protection program which includes a medical evaluation and fittesting.		
If applicable, specialty PPE needed (i.e. UV/IR glasses, lab aprons, cryogenic gloves) is available in the laboratory.		
Description/Corrective Action: The employer shall assess the workplace to determine if hazards are present, or are likely to be present, which necessitate the use of personal protective equipment (PPE). If such hazards are present, or likely to be present, the employer shall select, and have each affected employee use, the types of PPE that will protect the affected employee from the hazards identified in the hazard assessment.		
Lab coats, appropriate to the activity, are worn.		
Description/Corrective Action: An appropriate lab coat must be worn when actively working in the laboratory unless an exemption to the UCOP PPE policy has been granted.		
Lab coats, properly fitted, are available.		
Description/Corrective Action: Employer is responsible for providing required PPE for protection against hazardous materials.		
Lab workers remove gloves before accessing common items, door knobs, elevator buttons, etc.		
Description/Corrective Action: Gloves should be removed before exiting the laboratory. In the event that hand protection is required for transport of chemical, one glove should be removed to access common items.		
Long pants (legs covered) and closed-toe/heel shoes are worn in the lab.		
Description/Corrective Action: UCOP PPE policy requires that long pants or equivalent and close-toed/close-heeled shoes be worn in the laboratory unless an exemption to the policy has been granted.		
Safety glasses or chemical splash goggles are worn in the laboratory when there is a risk of eye injury.		



Description/Corrective Action: Eye protection is required when there is a risk of eye injury, such as puncture, abrasion, contusion or burn as a result of contact with flying particles, hazardous substances, projections or injurious light rays.				
Safety Equipment	Yes	No	Corrected	N/
A plumbed emergency eyewash /safety shower or emergency eyewash is immediately available where corrosive liquids are handled or used.				
Description/Corrective Action:				
Description/Corrective Action: An emergency eyewash or emergency eyewash/safety shower must be available in the room where corrosive liquids are handled or used.				
A plumbed emergency eyewash/safety shower or emergency eyewash is available within 10 seconds.				
Description/Corrective Action: An emergency eyewash and deluge shower must be accessible within 10 seconds of all chemical splash or eye injurious hazards.				
Access to emergency eyewash/shower is free of items that obstruct their use.				
Description/Corrective Action: The area of the eyewash and shower equipment must be free of items that obstruct their use.				
Annual test of emergency eyewash/safety shower or emergency eyewash has been completed or documented.				
Description/Corrective Action: A flow verification test and inspection of plumbed eyewash and shower equipment must be completed annually.				
Appropriate chemical spill kit is available.				
Description/Corrective Action: Spill control kits tailored to deal with the potential risk associated with the materials being used in the laboratory are required.				
Calcium gluconate for Hydrofluoric acid (HF) exposure first aid is available. Calcium gluconate has not expired. Training on HF first aid is documented.				
Description/Corrective Action: Exposure to HF can lead to hypocalcemia. Therefore, hydrofluoric acid exposure is often treated with calcium gluconate, a source of Ca2+ that sequesters the fluoride ions. Non-expired calcium gluconate should be available and staff should be trained in HF first aid.				
First Aid Kit is available.				
Description/Corrective Action: Title 8, §3400 requires adequate first-aid materials be readily available for employees on every job. Purchase simple first aid kit and replenish as needed.				
Monthly activation of emergency eyewash/safety shower is documented.				
Description/Corrective Action: Plumbed eyewash and shower equipment must be activated at least monthly to flush the line and verify operation.				
Seismic	Yes	No	Corrected	N



Heavy items and precariously situated items are not stored on higher shelves.				
Description/Corrective Action: For seismic concerns, heavier items must be secured or placed on lower shelves.				
Large equipment is seismically anchored.				
Description/Corrective Action: To reduce potential injury and the blocking of doors and/or exits during seismic events, items over 5' tall, i.e., file cabinets, bookcases and other tippable items, should be anchored.				
Overhead storage is secured.				
Description/Corrective Action: To decrease the potential for injury or blocking aisles during seismic events, items stored overhead must be secured. Either move overhead storage or secure.				
Shelves have restraints to prevent items from falling.				
Description/Corrective Action: Shelves used for the storage of hazardous materials must have a lip or guard to reduce the potential for chemical spills during a seismic event.				
Training	Yes	No	Corrected	N/
Laboratory personnel have completed UC Laboratory Safety Fundamentals training.				
Description/Corrective Action: All laboratory workers are required to complete the UC Laboratory Safety Fundamentals e-Course prior to beginning work in the laboratory and every three years thereafter. Log on to LMS and complete required e-Course.				
Specialized training for lab-specific hazards has been documented.				
Description/Corrective Action: Documented training is required for all hazardous substances, processes, procedures and equipment in the work area (regulated carcinogens, Blood borne Pathogens, radiation, lasers use, etc.). Site-specific orientation training is required for all new laboratory personnel.				
Spill response training is documented.				
Description/Corrective Action: All employees should be trained in the appropriate spill response procedures for both minor and major chemical spills. Annual retraining is required.				
Training on laboratory specific Standard Operating Procedures (SOP) is documented.				
Description/Corrective Action: Documented training on all SOPs is required and specific and unambiguous training records must be available upon request.				
Training on the Chemical Hygiene Plan is documented.				
Description/Corrective Action: Documented training is required for the Chemical Hygiene Plan.				
Training on the Emergency Action Plan is documented.				
Description/Corrective Action: Documented training is required for the Emergency Action Plan. Annual retraining is required.				



Training on the Injury and Illness Prevent Plan (IIPP) is documented.				
Description/Corrective Action: Documented training is required for the IIPP. Annual retraining is required.				
Training to manage or handle hazardous waste is documented.				
Description/Corrective Action: Laboratory workers that generate or handle hazardous waste must be trained in storing, labeling, proper disposal and accumulation times for hazardous waste.				
Waste	Yes	No	Corrected	NA
All containers holding hazardous waste are closed except when adding or removing waste.				
Description/Corrective Action: A container holding hazardous waste must be closed except when adding or removing waste.				
All hazardous waste containers are compatible with the contents and in good condition.				
Description/Corrective Action: All hazardous waste containers must be compatible with the contents and in good condition. If a container holding hazardous waste is not in good condition, or if it begins to leak, the contents shall be transferred into a container that is in good condition. A container shall be made of or lined with materials which will not react with and are otherwise compatible with, the hazardous waste to be transferred or stored, so that the ability of the container to contain the waste is not impaired.				
All sharps are disposed of in a sturdy container or a hard-walled sharps container (non-red without biohazard label or red with biohazard) as appropriate.				
Description/Corrective Action: All sharps must be disposed of in a sturdy container (clean lab glass) or a hard-walled sharps container (non-red without biohazard label or red with biohazard) as appropriate. Improper disposal of sharps can cause injury and can also be a source of infectious, chemical or radiological aerosol and surface contamination.				
Biomedical waste containers have a tight-fitting lid in place.				
Description/Corrective Action: Biomedical waste containers must have a tight-fitting lid in place to prevent leakage during collection, handling, processing, storage, transport or shipping.				
Biomedical waste in red bags is being properly disposed in accordance with UCD Policy.				
Description/Corrective Action: All red bag waste must be disposed of in accordance with the Medical Waste Management Act.				
Medical Waste Management Act.				
Medical Waste Management Act. Biomedical waste secondary containment is used. Description/Corrective Action: If the outside of the primary biomedical container is contaminated, the primary container shall be placed in a second container which prevents				

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LABORATORY SAFETY REVIEW CHECKLIST



lazardous waste in secondary containment.		
Description/Corrective Action: All hazardous waste must be managed so as to ensure that		
incompatible laboratory wastes are not mixed, and are otherwise prevented from coming in		
contact with each other. All hazardous materials must be in secondary containment.		
azardous waste is not being accumulated beyond regulatory time limits (i.e., 90 days for ctremely hazardous waste, 9 months for other hazardous waste).		
Description/Corrective Action: Extremely Hazardous waste may be accumulated for no greater		
than 90 days and other hazardous waste for no greater than one year. Due to EH&S waste		
processing time, hazardous waste can be held in laboratory no longer than 9 months.		
Hazardous waste is properly labeled.		
Description/Corrective Action: Hazardous waste must be labeled with "Hazardous Waste",		
the start date of accumulation, the contents, the hazard classification, the physical state and		
the name and address of the person producing the waste.		
Sharps containers are properly labeled, as to contents, hazard, etc.		
Description/Corrective Action: Sharps containers must be labeled with the words "sharps		
waste". Biohazard sharps containers must include the international biohazard symbol and the		
word "BIOHAZARD".		
Sharps container's contents are not past the fill line.		
Description/Corrective Action: Sharps containers must be prepared for disposal when ¾ full		
and be taped closed or tightly lidded to preclude loss of contents.		
Universal waste is properly labeled/discarded/contained.		
Description/Corrective Action: Universal waste must be contained in a manner that prevents	1	
Description/Corrective Action: Universal waste must be contained in a manner that prevents breakage and release of components to the environment. The container shall be structurally		
Description/Corrective Action: Universal waste must be contained in a manner that prevents breakage and release of components to the environment. The container shall be structurally sound and compatible with the contents. Universal waste must be labeled or marked to		
breakage and release of components to the environment. The container shall be structurally		
breakage and release of components to the environment. The container shall be structurally sound and compatible with the contents. Universal waste must be labeled or marked to		
breakage and release of components to the environment. The container shall be structurally sound and compatible with the contents. Universal waste must be labeled or marked to identify the type of universal waste (i.e. Universal Waste-Battery(ies), Universal Waste-		

IIPP – Appendix D January 2016

Please access the **Injury Reporting Procedure** page on the Safety Services website.

http://safetyservices.ucdavis.edu/article/injury-reporting-procedure

Complete the electronic **Employer's First Report** as soon as practicable.

			501 10	MATERIAL WAY	1011 TOW 10	W. P. Parley			
	UCD Employer's Report of Occupational Injury or Illness								
00	UNIVERSITY POLICY REQUIRES THAT INDUSTRIAL INJURY/ILLNESS BE REPORTED TO WORKERS' COMPENSATION WITHIN 24 HOURS OF OCCURRENCE AND STATE REGULATIONS REQUIRE THAT ALL ACCIDENTS BE INVESTIGATED. In the event of a serious injury or hospitalization, call Workers' Compensation immediately at (530) 752-7243. This form must be completed in its entirety and								
	mailed or faxed (530) 752-3439 to Workers' Compensation. Omission of information could result in a delay of benefits. EMPLOYEE MUST COMPLETE THESE SECTIONS:								
	Employee Name:	OMPLETE THESE SECTIONS:		l Er	mployee's UCD	avis ID :	#:		
	A dalance:								
ΔŦ	Address: Home Phone: ()								
DAT	City/State/Zip: Date of Birth: Sex: ☐Female ☐Male								
YEF	Department/Location:								
PLOY	Payroll Title/TC: Date of Hire: Annual Gross Salary:							Gross Salary:	
FM	Supervisor's Name:			Superviso	r's Work Phone	: ()		
	Employee () Volu	inteer () Student-Employee ()	()hours per day	() day	s per we	eek	() total weekly hours	
	Specific Injury/Illnes	s/Exposure:		Body	Part(s) affected	le .	П	Date of injury/illness:	
Ä	Location where injur	y or illness occurred:				65	7th c	Injured 2 DVac DN-	
M	What equipment, ma	aterials or chemicals caused the injury/illn	ess?:					Injured? ☐Yes ☐No tnessed this injury?	
ATEM	Explain in detail how	the injury occurred. Include specific activ	ities/task	s performed at th	he time				
N	Explain in detail now	The injury occurred. Include specific deliv	niie shask	5 periorified di ti	ne time.				
OYEE									
ď	Medical Treatment p Employee Health		Ь	Other: (Broylde	Nome & Dhene	#\			
EMPI	Private Physicial	uC Davis Medical Cent	er	Other. (Flovide		#)			
Щ	First Aid, no med Employee Signature	dical care needed.			1 То	day's Da	ate:		
E		STIGATION AND STATEMENT (EM on, explain in detail how the injury/illness of				rforme	4.		
出	Alter the investigation	in, explain in detail now the injury/limess of	occurred a	and the specific a	activity being pe	nonnec	4.		
þ									
MP									
	What was the injury,	CONTRIBUTING FACT		D 4 OTD #TIES				REVENTIVE ACTIONS	
	Struck by or	Equipment	OKS AN	☐ Ventilation is:	sues	SUPE	RVISC	OR WILL:	
_	against object (indicate)	Equipment failure	Employ	Ergonomic fa	actors	□ De	velop/r	evise safety procedures and PP or Chem. Hyg. Plan	
	39 0920	☐ Improper equipment or		Physically not ab	le to do work	☐ Re	quest e	ergonomic evaluation	
	Caught in/under/ between	material used for job Personal protective equipment		Employee fatigue Jnbalanced or p	e oor position		der nev der nev	w equipment w personal protective equipment	
	Fall / Slip / Trip	☐ Not worn		or motion		☐ Re	move e	equipment from use and	
	Material handling or lifting	☐ Not readily available ☐ Not adequate for the task	t	ncorrect procedu ask			air/rep hedule	preventive maintenance	
	Repetitive motion	☐ Personal protective equipment failure	☐ (Assista	Other unsafe pra	ictice		II retrai	n employee before task is	
	Chemical exposure	Training/Experience		Difficult to perform	m task	☐ Pe	rform o	on-site review of work activity,	
	Body fluid exposure:	☐ Lack of training☐ Safety training provided, not		without help Safety features o	or devices not	up □ Re	date jol configu	b safety analysis. ure work area	
	Needle stick	followed ☐ New task for employee or lack	1	readily available Assistive devices			mmuni job cat	cate corrective actions to others	
П	Sharps Animal bite	of experience	☐ Laci	of policy/proc	edure	□ Ot			
	Other, Explain	Work Area ☐ Work area set up improperly	Anir	nal (explain belo er (explain)	ow)	*			
	☐ Inadequate lighting or noise issues ☐ Inadequate lighting or noise Inadequate lig						actions will be completed by:		
		☐ Housekeeping issues ☐ Environmental factors				Exped	ted da	te of completion	
SL	IPERVISOR'S OR MA	(rain, wind, temp. etc) ANAGER'S SIGNATURE:	Use ad	ditional pages a	as needed		Date	of Investigation:	
DE	PARTMENT HEAD'S	S SIGNATURE:					Date	:	
PI E^	SE NOTE: COMPLETING T	HIS FORM IS <u>NOT</u> AN ADMISSION OF UNIVERSITY	I IABII ITV					7/2011 ER: WC/H/MJB	
LEA	IPP-Appendix I		LIADILI I Y					1/2011 ER. WOITINGS	
	January 2016								

SAFETY TRAINING ATTENDANCE RECORD

Training T	opic:	Date:
attach a co	py of the training session curricu	ulum)
Instructor:	_	Training Aids:
Location:		Time:
Attendo	ees – Please print and sign your n	ame legibly. Use additional sheets if necessary.
No.	Print Name	Signature/Date
1.		_
2		
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28.		
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30.		

IIPP-Appendix E January 2016 Completed copies of this form should be routed to the department Safety Coordinator and must be maintained in department files for at least three years.

ADDITIONAL BUILDINGS LIST FOR IIPP

5. Building: Everson Hall

Unit: Entomology and Nematology

Contact: Andrew Ross

Phone: 530 752-2592

6. Building: Bee Biology

Unit: Entomology and Nematology

Contact: Andrew Ross

Phone: 530 752-2592

7. Building: Orchard Park Headhouse 2 and 6

Unit: Entomology and Nematology

Contact: Andrew Ross

Phone: 530 752-2592

ADDITIONAL WORKSITE INSPECTION LOCATIONS LIST FOR IIPP

5. Building: Everson Hall

Unit: Entomology and Nematology

Contact: Andrew Ross

Phone: 530 752-2592

6. Building: Bee Biology

Unit: Entomology and Nematology

Contact: Andrew Ross

Phone: 530 752-2592

7. Building: Orchard Park Headhouse 2 and 6

Unit: Entomology and Nematology

Contact: Andrew Ross

Phone: 530 752-2592



Instructions:

1. Select assessment category.

- 2. List tasks/activities: Develop a list of activities, tasks, equipment/tools (group similar tasks/activities).
- 3. Identify and list potential hazards: for each task, activity or equipment/tools, list and describe the potential hazards.
- 4. Identify and list controls: for each task, activity, equipment/tools, document controls (i.e. training, equipment, written procedures,

Specify location: Briggs, Hutchison, Storer, Academic Surge,

- 5. If PPE is required, complete Part II- PPE Hazard Assessment and Certification.
- 6. Train affected employees on the final assessment and document the training.

Repeat assessment when new hazards are identified or introduced into the workplace or at least every three (3) years. Laboratory workers must use the online Laboratory Hazard Assessment Tool (LHAT) for PPE hazard assessment.

l am	△ A worksite		Everson, Bee Biology, C	Hutchison, Storer, Academic Surge Orchard Park	,		
reviewing (check the	☐ A single emplo		Name of employee:	renara rank			
appropriate	job description	•	Position title:	·			
box)							
	☐ A job descripti		Position titles:				
	class of emplo	yees	Location:				
	Hazard Evaluator		Signature/Date:				
TASI	K/ACTIVITY	PC	TENTIAL HAZARD	CONTROL	PPE Required? Y/N		
Cor	nputer use	Ergonon	nic injuries, carpel tunnel,	Ergonomics for computer users	N		
		eye	strain, arthritis, other	safety training and evaluation			
		wris	st/neck/back injuries	strongly recommended, ergonomic			
				key boards/chairs/etc. provided			
				upon individual requests			
Filing, stap	oling, writing, etc.	Repe	etitive motion injuries	Ergonomics training and	N		
				evaluation strongly recommended,			
				ergonomic equipment provide			
				upon request			
Gener	al office work	Slips, t	rips, falls, falling objects	Safety Training required. Never	N		
		. ,		under any circumstance stand on a			
				chair or other piece of furniture.			
				Always use a step stool of ladder to			
				retrieve items from high locations.			
				Keep floors clear of debris and			
				liquid spills. If a spill can't be			
				cleaned immediately, use the "wet			
				floor" sign to warn others of the			
				potential hazard. Keep furniture,			
				boxes, etc. from blocking			
				doorways, halls and walking space.			
				Do not store heavy objects			
				overhead. Do not top-load filing			
				cabinets, fill from bottom to top.			
				Do not open more than one file drawer at a time. Brace tall			
				bookcases and tall file cabinets to			
				walls. Refer to EH&S SafetyNet #			
				46 and 83.			
Gener	al office work		Electrical hazards	Safety Training required. Never use	N		
Gener	ai office work		Liceti icai iiazai us	2 to 3 prong adapters in electrical	IV		
				outlets, all large appliances			
				(refrigerators, microwaves ovens,			
				etc.) are plugged directly into an			

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	T	1	
		outlet, Never overload outlets or	
		daisy chain extension cords/power	
		strips, keep electrical cords away	
		from walk paths, UCD facilities	
		department or MCB shop	
		technicians address all electrical	
		problems (replacing light bulbs,	
		replacing ballasts, cracked or	
		frayed wires, etc.), annual	
		inspections performed by the fire	
		marshal or lab safety professional	
		with EH&S, refer to safety nets #	
		20 & 109N	
Handling/moving heavy items	Back/lifting injuries	Use lift cart or ask for assistance	N
		whenever possible, proper lifting	
		procedures followed as per safety	
		net #46, Back injury prevention	
		training required for anyone who	
		lifts heavy objects regularly.	
General workplace	Physical injuries due to fires,	Annual training on Departmental	N
·	earthquakes, workplace violence,	Emergency Action Plan (EAP), EAP	
	etc.	followed by all employees, copy of	
		EAP available for all employees in	
		mailroom on 3rd floor of Hutchison	
		Hall, workplace violence training	
		available from UCD police	
		department	

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Training Record

Designated Trainer: (signature is required)

I have read and acknowledge the contents, requirements, and responsibilities outlined in this document:

Name	Signature	Date

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Specify location: Bee Biology, Orchard park, or off campus field sites

Instructions:

I am

1. Select assessment category.

A worksite

- 2. List tasks/activities: Develop a list of activities, tasks, equipment/tools (group similar tasks/activities).
- 3. Identify and list potential hazards: for each task, activity or equipment/tools, list and describe the potential hazards.
- 4. Identify and list controls: for each task, activity, equipment/tools, document controls (i.e. training, equipment, written procedures, PPF...).
- 5. If PPE is required, complete Part II- PPE Hazard Assessment and Certification.
- 6. Train affected employees on the final assessment and document the training.

Repeat assessment when new hazards are identified or introduced into the workplace or at least every three (3) years. Laboratory workers must use the online <u>Laboratory Hazard Assessment Tool (LHAT)</u> for PPE hazard assessment.

reviewing	☐ A single emplo	nployee's Name of employee:			
(check the	job descriptior	า	Position title:		
appropriate box)	☐ A job descripti	ion for a Position titles:			
20,	class of emplo	yees	Location:		
	Hazard Evaluator		Signature/Date:		
TAG	//ACTIVITY		TENTIAL HAZADO	CONTROL	PPE Required?
IASI	K/ACTIVITY	POTENTIAL HAZARD		CONTROL	Y/N
	Pehicular transportation (car, Collision		on or traffic accident	Registered UC Davis employee	No
truck,	bicycle, etc.)		injuries (crushes, cuts,	with valid driver's license	
		scrapes,	sprains, strains, breaks,	required, successful completion	
			burns, etc.)	of the UCD safe driver	
				awareness training program	
				strongly recommended (access	
				course at:	
_				http://lms.ucdavis.edu/)	
Transportati	on (walking, hiking,	Falls, trips, slips (cuts, scrapes,		Appropriate field attire	No
	etc.)	sprains, breaks, strains, bruises,		required (i.e.: closed toe/closed	
			bumps, etc.)	heel shoes, long pants, no	
				sandals, no shorts, no bare	
				shoulders, no bare midriffs), tri-	
				annual field safety training	
				required	
	ent use (pumps,		or to severe injuries	Standard Operating Procedures	Yes
	actors, chain saws,		hes, cuts, abrasions,	(SOP's) required for any	
pru	ners, etc.)		ins, strains, breaks,	hazardous equipment use,	
		ele	ctrical shock, etc.)	documented training on	
				equipment required through UC	
				Davis Learning Management	
				System (LMS) (Ex: hand and	
				power tool training course for	
				anyone who uses a chain saw),	
				all equipment must be in good	
				working order with all safety	
				controls in place (EX: chain	
				break and guard on chain saw,	
		ĺ		etc.)	

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Environmental hazards (climate, weather, animals, insects, plants, etc.)	Exposure or contact related injuries (heat illness, heat stress, cold stress, bee stings, poison oak, bites, allergies, etc.)	Annual heat illness prevention training required, tri-annual field safety training required	No
Chemical, biological, or pesticide application (fertilizer, bio-control agents, fungicides, insecticides, herbicides, etc.)	Exposure related injuries (ingestion, inhalation, burns, poisoning, rash, irritation, allergy, etc.)	Qualified applicator certificate required for insecticide use, hazardous communications training or UC fundamentals of lab safety course and laboratory hazard assessment tool training required, triannual field safety training required	Yes
Lifting, climbing, repetitive motion	Back injuries, falls from ladders, repetitive motion injuries, etc.	Appropriate safety training required for task (i.e.: ladder safety training for persons who climb ladders, ergonomics training for repetitive motion activities, etc.)	No
Power tools and equipment hazards (welders, drill presses, table saw, grinders, hand drills, circular saws, radial arm saw, etc.)	Minor, severe, to fatal injuries (crushes, cuts, abrasions, sprains, strains, breaks, electrical shock, etc.)	All person using equipment or tools must be trained on the safe use and operation of that tool prior to using, All PPE's are provided by the department to ensure the safety of operators. PPE's must be worn by power tool or equipment operators at all times	Yes

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