

GENERAL SAFETY/LOSS PREVENTION MANUAL

Revised June 2016

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State of Louisiana
Louisiana Department of Health
Office of the Secretary

DEPARTMENTAL SAFETY POLICY STATEMENT

Secretary's Statement of Policy

It is the policy of the Louisiana Department of Health (LDH) to provide safe and efficient services to the patients/clients of the State of Louisiana and a safe working environment for the employees of the Department. Each state employee must willingly assist management in accomplishing this goal, which cannot be achieved without safe work practices. This policy, with certain procedural requirements, will serve as a guide to Offices' in developing internal procedures to fit their particular operations. It is the Departments objective to follow federal, state, and local codes/policies to maintain safe and healthy conditions.

Safe work habits are criteria for satisfactory job performance. Each employee is responsible for immediately reporting accidents, unsafe conditions and work practices to supervisory staff and taking effective temporary actions to minimize risk to themselves and others.

Each Assistant Secretary is responsible for ensuring that both he/she and his/her employees are oriented and trained to follow applicable safety rules/policies and procedures outlined in the Department's Safety Policy, the Department's Safety Manual, Office Procedures and/or work location plan or as they may be amended in the future. It is the Department's intent to provide good supervision, effective training and safe equipment for employees to perform their work. The success of the LDH Safety Program will be based on the joint commitment of management and staff to minimize and eliminate all potential hazards to clients/patients, employees, and property.

A handwritten signature in black ink, appearing to be "R. Gee".

LDH Secretary

6/13/16

Date

Part II APPLICABILITY

The LDH Safety/Loss Prevention Manual applies to all Offices of the Louisiana Department of Health.

Part III IMPLEMENTATION

This policy and procedural manual will be effective January 2012.

Part IV RESPONSIBILITIES

A. Office of the Secretary/Office of Undersecretary/Office of Security Coordinator will be responsible for the coordination and monitoring of safety efforts and the reduction of loss severity in LDH by:

1. Implementing policies and establishing a Departmental General Safety/Loss Prevention Manual necessary to formalize an effective general safety program within the entire Department;
2. Assisting with the development of resources necessary for safety program implementation and enhancement;
3. Providing information to management regarding the effectiveness of the safety program within the Department and providing consultative services to management in such areas as program compliance, loss trends, identification of problem areas and assistance regarding program enhancement;
4. Reviewing individual Office procedures to ensure compliance with Department policy and the Departmental Safety/Loss Prevention Manual;

5. Identifying safety training needs and assisting Offices with the development of both external and internal resources to meet these needs;
6. Coordinating intra-departmental Safety/Loss Prevention matters;
7. Serving as Departmental liaison to the Office of Risk Management on Safety/Loss Prevention matters;
8. Providing data relative to loss severity and safety to Offices of the Department and analyzing trends and program needs, and
9. Promoting and coordinating Departmental efforts in the areas of Occupational Health programs (i.e. Blood-borne pathogens)

B. Departmental Offices is the responsibility of the Undersecretary, Assistant Secretary to take necessary steps to implement safe procedures within their Offices that ensure compliance with all established laws, codes and accreditation requirements and to effectively address safety needs of their respective Offices.

Each Office will develop and maintain internal procedures in accordance with the Departmental Safety/Loss Prevention Manual. Each Office's internal safety procedures will reflect the commitment of management to direct its safety program and will be kept on file for review and updating as needed.

Office Safety Procedures must address the following:

1. Appointment of an Office Safety Coordinator to coordinate safety efforts within the Office and to serve as a liaison to the LDH Safety Coordinator on safety matters. Other duties of the Office Safety Coordinator will be to develop office safety procedures, safety resources and to advise management of the status of the Office safety program in compliance with the Office of Risk Management (ORM).
2. Establishment and implementation of a safety plan in each work location to comply with ORM guidelines. NOTE: Offices may develop a single safety plan that is applicable to all work locations where management has

determined program and work location safety needs are essentially the same.

3. Appointment of a Safety Officer at each work location.

4. Documentation of ORM compliance of all work locations maintained at the operating location, including a summary within the state office, as well as regional offices.

Part V

General Safety/Loss Prevention Plan

All work locations of the Department (Offices, Facilities, Divisions and/or Bureaus)

Must have safety plans which show good faith efforts to comply with the requirements of ORM. Work sites must either have an individual safety plan or, if the work location houses employees of several Offices or Departments, the employees must participate and be included in a safety plan addressing the safety of the combined work locations.

Work locations of fewer than fifteen (15) employees may either have their own Safety Plan or participate in the safety plan of the nearest organizational entity of the same Office of the Department that has an established safety plan. (Example: a satellite clinic could be a part of the main clinic).

Management shall have and maintain documentation that all of its employees have read and understand the General Safety/Loss Prevention Plan.

A. ELEMENTS OF A GENERAL SAFETY/LOSS PREVENTION PLAN

In situations where work locations are substantially similar in staff and work conditions, offices may find it convenient to develop a safety plan that is applicable to all such work locations with accommodations made to allow local variances to be addressed. (Example: Parish, OPH, work locations may have

one plan that is utilized by all parish offices with sections to be added to address local variances.)

1. MANAGEMENT POLICY STATEMENT –

LDH Safety Policy Statement is located in part 1, pg. 3, of the LDH General Safety/Loss Prevention Manual. The Departmental safety policy statement shall be posted at all work locations.

2. RESPONSIBILITY FOR SAFETY –

The responsibility for safety shall be addressed in safety plans of every work location in accordance with the Departmental Policy Statement and ORM guidelines.

3. SAFETY INSPECTIONS OF WORK SITES –

Work site safety inspection programs are to be established at all work locations in compliance with ORM requirements. Responsibility for the inspections will rest with the work location administrator to ensure inspections are conducted and documented. Reports of inspections will be kept at the work location for a minimum of three (3) years.

All safety inspection forms will contain the following information:

- a. The address of the work location –
- b. The person(s) performing the safety inspection –
- c. Work site problem(s) and location of the problem at the work location –
- d. Why the problem(s) exists
- e. What actions have been taken and who has been informed of the problem.
- f. Those problems identified that are not corrected within thirty (30) days must be reported through the Hazard-Control Program. (See Attachment 4, Hazards Over 30 Days Summary)

In the interest of consistency within the Department, the reporting of safety inspections and any identified problems shall comply with the procedures contained in the General Safety/Loss Prevention Manual, Part VI, Section B., entitled, "Safety Inspections of Work Sites", p. 20. The report form, in Part VII, Attachment 2, is entitled, "LDH INSPECTION SUMMARY REPORT".

4. ACCIDENT/INCIDENT INVESTIGATIONS –

In accordance with ORM, an investigation and subsequent report will be made of all accidents resulting in medical treatment, loss time or death. The purpose of the investigation(s) will be to ascertain all facts surrounding an accident through careful questioning and investigation of activities contributing to the event. The objective will be to document all the facts and causes of the accident and to determine the actions necessary to prevent recurrence.

For standardization of accident investigation(s) within the Department, the DA2000 (Attachment 7) form will be used by all Offices and work sites under their jurisdiction. For a visitor or client the DA3000 is to be used.

An **accident** is defined as "an unplanned event(s) that caused personal injury or property damage." An **incident** is defined as "an unplanned event(s) that could have caused personal injury or property damage." All accidents/incidents, including those occurring to non-employees at a work setting that result in injury, shall be investigated by the supervisor or other designated office personnel responsible for the area in which the accident/incident occurred. After acquiring the necessary medical aid for the injured person, the supervisor shall begin investigating the accident/incident by following these steps:

00 Immediately assemble facts surrounding the accident/incident.

- a. If possible, have the injured person tell what happened, sign a statement regarding the incident and the believed extent of injury (DON'T FIX BLAME OR FIND FAULT JUST GET THE FACTS).
- b. Survey the accident/incident scene for information.

- c. Determine if there are witnesses. If so, get their account of the accident/incident, SEPARATELY.
- d. Record all information.
- e. Complete the Accident/Incident Investigation Form

- g. The original form is to be retained by the safety officer in the area where the accident occurred.

5. SAFETY MEETINGS –

Office safety procedures shall provide for safety officers, supervisors or work location administrators to meet with staff on a monthly or quarterly basis based on their Agency Rating. A “Class A” will meet monthly. A “Class B” will meet at least quarterly. The Office of Risk Management-Loss Prevention determines the classification.

Meetings will be documented indicating the date, persons attending and topics discussed. The form (attachment 1) provided in this manual is designed to record the above data. Safety meetings can be incorporated into other meetings such as staff meetings. However, at minimum the meeting will provide a systematic method to examine work practice(s) or condition(s) for unsafe and potentially unsafe acts or conditions that have produced or have the potential to produce personal injury or property loss.

The safety meeting should solicit effective methods to prevent occurrence or recurrence of accidents and/or property damage. Any variance from (attachment 1) shall provide the same information for documentation and safety audit purposes.

Documentation of “Safety Meetings”, as well as “Safety Inspections” shall be kept on file for a minimum of three (3) years. Safety audits are carried out each year by the Office of Risk Management- Loss Prevention Section, for the previous year. Therefore, documentation must be on hand to verify that all required safety elements have been carried out to meet the established minimum standards.

6. SAFETY RULES –

Each Office shall provide for the establishment of the following safety rules relative to the specific work being performed by subordinate organizational units. These rules shall be uniformly enforced and made a part of all safety plans. Documentation shall indicate that all staff have received and understand the safety rules, (see Attachment 8 for example of the safety rules. These rules can be modified to fit individual offices.)

7. TRAINING -

a. Employee Training

NOTE: It is recommended that all employees receive documented instruction in job-specific safety areas of their particular job in a formalized orientation program or by the supervisor.

The following training is required for each employee.

- (1). Bloodborne Pathogen training is mandatory within the first 90 days of employment, then every 5 years thereafter for employees who do not work in high-risk situations. Employees who work in high-risk positions must take this training at least annually. If you are unsure of your requirements check with your supervisor.
- (2). Defensive driver training is mandatory within the first 90 days of employment, then every 3 years thereafter.
- (3). LDH's Drug Abuse and Testing Policy training is mandatory within the first twelve (12) months of employment, then every 5 years thereafter for all LDH employees.
- (4). Sexual Harassment training is mandatory within the first twelve (12) months of hire of employment, then every 5 years thereafter for all LDH employees.

Additionally, facilities shall develop and implement a training program for: each new employee, an existing employee on a new job, when new jobs are

initiated, the use of required personal protective equipment (PPE) and where to get assistance as needed. Such programs shall be incorporated into facility or Office policy and shall be furnished for review by the Departmental Safety Coordinator upon request.

- (1). Hazard recognition and method of corrective action;
- (2). Involvement of employees in accident prevention programs;
- (3). Awareness and acceptance of employee safety;
- (4). Provision of information to employees on accident causes, occupational health hazards and accident prevention programs;
- (5). Compliance with all Safety/Loss Prevention rules, regulations and guidelines;
- (6). Training in the areas appropriate for the job.

b. Supervisory Training

In order to promote a safe work place, effect reductions of departmental loss severity and fulfill management's obligation to provide a safe and health work place and work condition, it is recommended for those offices/facilities under a Class "B" plan requirement and required by law for those facilities under a Class "A" requirement to establish programs to train supervisors in conducting: safety meetings, safety inspections, accident investigations and safety analysis.

Documentation of safety training, as well as safety meetings, for employees and/or supervisors must be kept on file a minimum of at least three (3) years for safety audit purposes.

8. JOB SAFETY ANALYSIS (JSA) PROGRAM –

a. The purpose of the JSA Program is to identify hazards which can exist among certain jobs, develop work procedures which will eliminate or reduce identified job hazards and serve as an accident investigation tool.

b. Objectives of the JSA Program are:

- (1). To systematically evaluate jobs and work methods to eliminate hazards and potential hazards,
- (2). To develop a tool to assist in the teaching of safe work procedures, and
- (3). To provide a framework for accident analysis.

c. Procedures/Responsibilities

- (1). Within each Office, the Assistant Secretary will establish procedures to develop and maintain the JSA Program at each work location.
- (2). First-line supervisors and/or other designated staff to perform job safety analysis shall be instructed to select jobs to be analyzed by the following factors listed in order of importance:
 - (a) Trend Jobs - that repeatedly produce accidents should be analyzed for job safety.
 - (b) Potential Severity - If a job has the potential for severe injury or property damage, it should be analyzed for job safety.
 - (c) Death - If an individual is killed while performing a job task, as a direct result of the task being performed.
- (3). The first-line supervisor or other designated staff who is responsible for performing a job safety analysis should conduct the JSA by using the following steps:
 - (a) Break the job down into its basic steps (usually less than twelve).
 - (b) For each step, identify any potential accident(s) or hazard(s) which can exist.

(c) For each step, give recommended safe job procedures which address any identified potential accident(s) or hazard(s).

(4). The JSA Work sheet form (attachments 5 and 6), contained in Part VII: Safety Forms, may be used in conducting job safety analysis.

9. RECORD KEEPING –

a. Department

(1). The LDH Safety Coordinator will maintain ORM statistical data indicating the status of the Department’s compliance, loss severity, loss trends, statistical records of accident, claims and loss experience indicating the effectiveness of Departmental safety efforts.

(2). The LDH Safety Coordinator will maintain a list of Office Safety Coordinators and work with them to ensure that Office and facility safety programs are maintained and records kept for a minimum of three (3) years.

b. Office

(1). Each Office of the Assistant Secretary will maintain:

(a) A record of the status of the loss prevention program of each work location.

(b) A record of the person designated as responsible for safety at the work locations. Each Office of the Assistant Secretary will include in its budget requests and legislative proposal packages for compliance of the loss prevention program.

c. Work Locations

(1). Each work location will maintain reports or forms of all First Reports of Injury, Safety Inspection, Incident/Accident Investigation, Hazard Control, Safety Meetings, First Aid, Job Safety Analysis and any other needed or related forms and documentation for a period

of no less than three (3) years from the end of the year for which the records pertain.

(2). Each work locations shall submit up the chain of command to its Regional Office, copies of required records necessary for ORM Safety Audits.

10. FIRST AID –

Office policies will address systematically the provision of training to ensure at least one employee per work location and shift is trained in first aid and the provision of first aid kits at each worksite, if it takes 15 minutes or more to attain medical treatment. Each Office shall maintain at the Office of the Assistant Secretary a current record of staff trained to deliver first aid and of an annual inspection of the first aid kits at the work locations.

11. HAZARD CONTROL PROGRAM-

a. Purpose to establish a systematic method of recognizing, evaluating and controlling hazards prior to injury to staff, clients/patients, visitors and/or property. Offices shall develop procedures to implement the LDH Hazard Control Program at all work locations.

b. Objectives of the program are:

(1).To train and require employees to examine and maintain a written record of working conditions, tools, equipment or work practices that have the potential to cause harm to people, property or the environment.

(2). To provide a timely method of discussion, evaluation, risk assessment and hazard control.

(3). To provide upward communication in the organization relative to hazards and downward communication from LDH management on actions taken to eliminate such, and

(4). To provide a consistent method of managing hazards until they are eliminated.

c. General Procedures/Responsibilities

(1). Within each Office, the Undersecretary (OS/OMF) or Assistant Secretary (OPH, OAD, OMH and OCCD) will establish procedures to develop and maintain the Hazard Control Program at each work location.

(2). Each first-line supervisor, safety officer and other personnel designated to conduct safety inspections will be trained in the program and will be responsible for continuously detecting, inspecting, correcting and controlling potential unsafe acts or unsafe conditions that could create a safety hazard.

(3). The supervisor, safety officer and other personnel designated to conduct safety inspections, upon suspicion of or report of a hazard, or hazards, observed during inspection, shall be responsible for taking immediate temporary control (ITC) to assure that the suspected hazard does not expose life, property or the environment to danger.

(4). The supervisor is responsible for logging hazards in the Hazard Control Log, reviewing entries made by employees, taking ITC and any other action to eliminate the hazard as soon as possible. Specific procedures and forms for the Hazard Control Log and the Hazards over 30 Days Summary, are included in Section VII: Safety Program Forms.

(5). If hazard elimination or control is beyond the ability or authority of the supervisor, and/or safety officer, the supervisor must report the hazard to his/her supervisor. Higher level supervisors, in turn, must report the hazard upward until the proper level of authority to abate the hazard has been reached and corrective measures have been taken.

(6). Hazards requiring over 30 days to correct, for any reason, will be listed on the Hazards Over 30 Days Summary report form and submitted to the Assistant Secretary of that Office by the 15th of each month. It will be the responsibility of the Office Assistant Secretary to see that the hazard(s) are eliminated as soon as possible.

12. EMERGENCY PREPAREDNESS PROGRAM –

The Undersecretary/Assistant Secretary shall establish within his/her Office an Emergency Preparedness Program, relative to office safety procedures to ensure the safe evacuation or placement of employees and rapid control of hazards during a life threatening situation at all work locations within his/her Office. Such life threatening situations as hurricane, tornado, chemical spill, earth quake, terrorist attack, fire or explosion shall be included in written emergency preparedness program and taught to each employee. Evacuation drills (such as fire drill) and internal placement drills (such as chemical spill or tornado drills) shall be conducted at least once a year and two (every six months) are recommended. The objectives of such a program will be to:

- a. To prevent and control emergency situations,
- b. To warn employees of an actual or impending disaster and prepare them for possible evacuation, and
- c. To establish safe routes of exit.

The LDH Safety Coordinator, OMF, Training and Staff Development Section, is available for assistance in development of evacuation plans. A copy of the LDH Emergency Preparedness Plan for the Headquarters Complex is available on the Intra-net, LDH, Safety Web Site, to assist as a guideline.

13. SAFETY RESPONSIBILITY DOCUMENTATION –

Offices shall address in their safety procedures the responsibility for adhering to the safety plan, safety rules, safety procedures and safety

training as an on-going part of each and every employee, supervisory or management job. Failure to adhere to safety rules, policies or the safety plan for the work location, when it can be clearly shown that the employee has been trained, instructed and/or counseled in proper safe work performance shall be considered poor work performance and failure to properly perform the duties of one's position. Such incidents may subject the employee to disciplinary action. This policy applies to all employees from managerial to the front-line employee to ensure a safe work environment.

B. AUDIT OF THE GENERAL SAFETY/LOSS PREVENTION PLAN

1. INTRODUCTION-

The 1980 legislation creating the Office of risk Management also created the Bureau of Risk Analysis and Loss Prevention, within the Office of risk Management, to assist state agencies in the prevention and reduction of employee job-related accidents, injuries and property losses. Assistance includes auditing agency programs and incentives for compliance.

Risk Management has determined that every state agency will be under either a Class "A" or Class "B" operating safety plan. The class criterion is as follows:

- a. Class "A" Safety Plan - the plan required of agencies where worker's compensation rate per \$100 of payroll is \$5 or more for classification with highest amount of payroll;
- b. Class "B" Safety Plan - the plan required of agencies where worker's compensation rate per \$100 of payroll is less than \$5 for classification with highest amount of payroll.

The Office of Risk Management will let each agency know which class operating safety plan they are under. The Class "A" Safety Plan is more stringent or requires that certain elements of the safety plan be performed more often (An example would be that a Class "A" requires safety

inspections and safety meetings be conducted monthly, while a Class “B” requires safety inspections and safety meetings be conducted at least quarterly.). Both Class “A” and “B” operating safety plans must address the following:

- (1). Management Policy Statement
- (2). Responsibility for Safety
- (3). Safety Inspections
- (4). Accident Investigations
- (5). Safety Meetings
- (6). Safety Rules
- (7). Safety Training
- (8). Record Keeping
- (9). First Aid
- (10). Emergency Preparedness
- (11). Comprehensive Hazard Control
- (12). Implemented Job Safety Analysis (JSA) Program
- (13). Policy and Procedures (see Part VI: Procedures for Conducting Safety Inspections and Accident Investigations)

2. AUDIT PROCEDURES and APPEAL PROCESS –

a. Annual audits will be performed between January and April of each year by the Loss Prevention Unit to determine if a particular agency is in compliance with existing statutes and the state loss prevention program. Audits cover six (6) separate programs or lines of insurance. However, the Department is directly impacted by only five (5) separate safety programs, which include the following:

- (1)General Safety/Loss Prevention
- (2)Driver Safety
- (3)Bonds & Crime
- (4)Equipment (Boilers & Machinery) Management
- (5)Water Vessel Operator Safety Program
- (6)Aircraft Safety

Copies of the ORM Audit Form and the LDH Annotated ORM Safety Audit Form can be found in the “Safety Web Site” of the LDH Intra-Net.

An agency may request a pre-audit by the Loss Prevention Unit. Such a pre-audit can be used to determine if the agency is in compliance and determine what needs to be accomplished and certified if it is not in compliance (or meeting the minimum standards set by the Office of Risk Management Prevention Section). Pre-audits should be requested between July and December or the 1st half of a fiscal year when the agency has time to take any necessary action(s) to meet minimum standards or the Loss Prevention program.

Any agency which has undergone a loss prevention audit and has received certification from the Office of Risk Management as being in compliance with state law and loss prevention standards prescribed by the Office of Risk Management shall receive a credit to be applied to the agency’s annual self-insured premium per line of insurance coverage, excluding the coverage for road hazards and medical malpractice, equal to five percent (5%) of the agency’s total annual self-insured premium paid per line of coverage.

An agency which has failed to receive certification after undergoing a loss prevention audit by the Office of Risk Management shall be liable for a penalty of five percent (5%) of the agency’s total annual self-insured premium paid per line of coverage, excluding the coverage for road hazards

and medical malpractice. The Office of Risk Management shall notify such agency of the penalty at least sixty days prior to assessing the penalty.

An agency may, after a period of six (6) months from the agency's receipt of the notice of noncompliance, request that a subsequent audit be performed if such agency can demonstrate that the deficiencies cited in their previous audit have been remedied.

PART VI

PROCEDURES FOR CONDUCTING SAFETY INSPECTIONS And ACCIDENT INVESTIGATIONS

A. INTRODUCTION

Departmental policy requires specific procedures and forms be used for certain functions of the safety plan. Facilities wanting to use other forms than those required by the LDH General Safety / Loss Prevention Manual may submit requests to the LDH Safety Coordinator for exemption, along with specific justification for consideration.

B. SAFETY INSPECTIONS OF WORK SITES

1. The administrative head of each work location or his/her designee(s) will periodically conduct safety inspections of the work location. Such inspections shall occur at least every three (3) months for work locations with Class "B" Safety Plans. Work locations with Class "A" Safety Plans are required to conduct the inspections at least every month.
2. Complex work locations may be divided into areas to accomplish safety inspections.
3. Objectives of the Safety Inspections are:

- a. To keep each area of State owned or operated grounds and facilities free from safety and fire hazards and effectively control or isolate people and property from exposure to potential hazards;
- b. To ensure each area in all LDH owned or operated grounds and facilities is inspected at least once every three months for the purpose of eliminating potential safety and fire hazards (every month for those work locations under a Class "A" Safety Plan)
- c. To eliminate or immediately control potential safety or fire hazards at their source when possible; to report those hazards to the administrative head of the agency when appropriate;
- d. To document on the LDH Inspection Survey, inspections with hazards detected, immediate temporary control taken, and action taken to eliminate the hazards from recurring;
- e. To summarize hazards which cannot be eliminated within 30 days of recognition on the Hazards Over 30 Days Summary and forward it to the agency head, the Office Safety Coordinator and the Departmental Safety Coordinator; and
- f. To enable the agency head to audit and evaluate the work location to detect, correct and control potential hazards.

4. Specific Procedures for Inspections

- a. The work location administrator or his/her designee will complete the LDH Inspection Survey for this area. He/She will remain accountable for the thoroughness and accuracy of the information on this document.
- b. The work location administrator or his/her designee will meet with the first line supervisors and employees to explain the purpose and objectives of the program. Each employee should be encouraged to assist in identifying, eliminating, or effectively controlling potential safety and fire hazards.

c. Suggested items to look for:

(1) Slip or trip hazards (i e., cut, torn or broken floor covers, extension cords, etc.);

(2) Foreign materials which could cause loss of balance (i e., food, grease, water, etc.);

(3) Holes or protrusions (i e., eroded, broken or sunken walking surfaces, etc.); and

(4) Temporary accumulation of flammable or combustible materials.

d. The completed forms shall remain at the work location for at least three (3) years.

e. Questions concerning the form shall be referred to the Office or Department Safety Coordinator. (see Attachment 2)

C. Hazard Control Program

1. Procedures

a. The work location administrator or his designee will maintain a Hazard Control Log for each operating area.

b. The work location administrator his/her designee will meet with supervisors to explain the purpose, objectives and procedures for implementing and managing the hazard control program.

c. Supervisors will introduce the program and explain its purpose, objectives and procedures to all employees. The employees should understand that this program will assist them in communicating potential hazards to management for corrective action.

2. Responsibility

- a. Each employee of the agency will be responsible for detecting and reporting unsafe acts or unsafe conditions to the work location administrator or his/her designee.
- b. The work location administrator or designee, upon suspicion of a hazard will be responsible for taking immediate temporary control (ITC) to assure that the suspected hazard does not expose people, property or the environment to danger.
- c. The work location administrator or designee is responsible for entering hazardous acts/conditions in the Hazard Control Log.
- d. If hazard elimination or control is beyond the ability or authority of the work location administrator, he/she must report the hazard to his/her superior or until the proper level of ability or authority to abate the hazard has been reached and corrective action taken.

3. Hazard Priority and Communication

- a. The work location administrator will determine the priority of enacting a long term solution.
- b. The work location administrator should seek counsel from his/her subordinates (and Superior as necessary) in determining methods of effective corrective action to abate the hazard.
- c. Each person exposed to the hazard will be informed of the immediate temporary control (ITC) and of the hazard itself.

4. Hazards Over 30 Days

Hazards requiring more than 30 days to correct, for whatever reason, will be listed on the form, Hazards Over 30 Days Summary. (see Attachment 4)

5. Maintenance and Distribution of Forms

- a. LDH Hazard Control Log (Attachment #3) is to be retained in the originating work area for at least three (3) years.

b. LDH Hazards Over 30 Days Summary (Attachment #4) is to be retained at the agency completing the forms for at least three (3) years from the year being reported or until all hazards that are listed have been abated.

c. LDH Hazards Over 30 Days Summary will be completed and a copy sent to the Assistant Secretary of the Office or his/her designee and the Departmental Safety Coordinator by the 15th of the month following the month in which the hazard remained uncorrected for over 30 days.

PART VII

SAFETY PROGRAM FORMS

All forms attached shall be used unless prior approval is obtained from the LDH Safety Coordinator. Forms are available on the Office of Risk Management website under Loss Prevention Forms.