

Responsibility For Safety

1. Management/Safety Coordinator Responsibilities

- a. Establish and communicate safety policy to all employees
- b. Commit the resources necessary to accomplish these company goals
- c. Train employees on hazard recognition and safe work practices
- d. Coach, counsel, and when necessary discipline employees when unsafe practices are observed

2. Safety Coordinator/Supervisor/ Foreman responsibilities

- a. Become thoroughly familiar with and enforce our company safety policies and procedures
- b. Set the example for safety by complying with the safety rules and procedures and displaying a positive attitude toward the safety program
- c. Instruct employees on the hazards of the job, how to work safely, and on applicable safety and health regulations
- d. Make each employee aware that the violation of established safety rules will result in disciplinary action
- e. Periodically inspect work areas and proper equipment for compliance with work rules and safety standards to address
- f. Investigate injuries, accidents, and reported safety issues; record the results of the investigation; and assure corrective actions are completed
- g. Lead safety meetings and conduct or arrange safety training to address safety issues
- h. Maintain a safe and healthy workplace, ensure good housekeeping, proper illumination and ventilation, and the use of personal protective equipment as required for each job
- i. Inform each employee of the job specific emergency reporting and response procedures

3. Employee Responsibilities

- a. Become thoroughly familiar with our company safety policies and procedures and the specific safety rules that apply to our work
- b. Perform all work to standards and comply with safety policies, procedures, and rules
- c. Actively participate in safety activities and cooperate with site personnel
- d. Identify, correct or isolate and report hazards in the workplace, including unsafe actions and unsafe conditions
- e. Report all injuries as required by company policy and follow correct procedures for reporting both injuries and accidents
- f. Be proactive in identifying the need for and using personal protective equipment

Inspections

Each supervisor/foreman is responsible for inspecting his work area on a daily basis, as he goes about his daily activities, to identify and correct safety hazards. The foreman/supervisors will perform a complete inspection of their work area and fill out an inspection report. This inspection is done at least once a quarter (once a month recommended) and the identified safety risks will be documented. The necessary steps will be taken to correct the hazards and certain individuals will be responsible for those corrective actions. These reports will include the corrective actions and should be kept for 1 year. They will be reviewed at such time to evaluate the examples and find patterns of recognized hazards and possible ways to correct them.

Inspection Reports

Equipment Inspection

Company Name: _____

EQUIPMENT IDENTIFICATION

- Is the current equipment inventory list provided?
- Does this inventory list provide:
 - date of purchase?
 - serial and model numbers?
 - location of identifying numbers?

JOB SITE PROTECTION

- Is there a need for watchmen?
- Are operator cabs locked?
- Are operator cab windows covered?
- Are operating control panels locked?
- Are fuel and oil caps locked?
- Are ignition locks provided?
- Are batteries or rotors removed?
- Is equipment corralled?
- Have you notified local law enforcement?
- Have you increased patrol?
- Have the operators been instructed?

KEY CONTROL

- Has a competent person been assigned?
- Are keys removed from the site?
- Have you identified all personnel?
- Are all keys accounted for?

YARD SECURITY

- Have you provided adequate lighting?
- Are gates locked and secured?
- Is adequate yard signage posted?
- Have you posted a warning sign?

GENERAL

- Have you explained the work to the homeowner?
- Have you explained the work to the crew?
- Have you explained the work to the neighbors?
- Have you explained the work to the public?
- Have you explained the work to the media?

Please explain all "No" responses.

Supervisor/Foreman: _____

LICA Safety Form - 1002

Work Zone Safety Inspection

Company Name: _____

Pre-Excavation Inspection

Company Name: _____

DO NOT DIG WITHOUT LOCATE MARKS!

(Complete and sign this sheet prior to excavation taking place.)

Before you leave the shop obtain locate numbers and:
☐ Check to see if locates has been completed (look at due date).
☐ Make sure you have a field sketch or if one was left at job site.

If you do not have what you need as listed above, do not leave the shop. See your supervisor.

ON THE JOB SITE

Pre-Survey (checking for locates)

- ☐ Check for field sketch.
- ☐ Check for all facility marks on ground.
- ☐ Verify service fees from buildings/homes, that they have been located and/or that they are aerial.
- ☐ Draw a sketch of the marked facilities for future use.
- ☐ Check for any visible signs of pedestal, riser, new trench lines that may have been missed in your dig area.
- ☐ Check to make sure that dig area is defined and is same on locate sketch when possible.
- ☐ Check for any private facilities not located.
- ☐ If they are not located, locate them or contact someone to get them located.
- ☐ If there are high priority facilities in your dig area, make sure facility owner/locator is on job site and/or has been contacted for advice.

If lines are not located completely, consult locate card and contact responsible party.

Public and Private Utilities

- ☐ Ask for assistance from homeowner and utilize locating equipment and use common sense.
- ☐ Locate septic lines.
- ☐ Locate water yard lines.
- ☐ Locate private power lines to sheds, wells, invisible fences, etc.
- ☐ Locate private gas or propane lines.
- ☐ Locate sprinkler lines and heads and drip systems.
- ☐ Draw a sketch of locations for all private facilities on job site.
- ☐ Locate telecommunication cable (TV, Telephone, fiber optics, etc.)

EXCAVATING

- ☐ If paralleling or working on a critical or high priority line, pot hole or use locating equipment to expose and verify location and depth of facility every 100 feet.
- ☐ Hand dig within 24 inches (or as required in your state) of lines, peds, pole risers, meters or other structures.
- ☐ Bore away from facilities.
- ☐ Verify depth of any facilities boring across, change route or depth as required, notify supervisor.
- ☐ Do not place excavated dirt on locate marks, flags, whiskers, etc.
- ☐ Support all lines exposed during excavation to avoid kinks or other damage.

BACKFILLING

- ☐ Shade all lines placed or exposed with good fill dirt.
- ☐ Verify all fill dirt is free from rocks, cable trash, crew trash, and large dirt clods.

PLEASE DIG SAFELY: As an excavator, you are responsible for verifying that all facilities within the dig area have been located. You are responsible for locating all private and public facilities. Have the homeowner assist you if needed.

Supervisor/Foreman: _____ Date: _____

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Accident Investigation

If an injured individual needs medical attention outside of first aid, the injury must be investigated in the same shift in which the incident occurred. The investigation is the responsibility of the immediate supervisor/foreman. He or she will be in charge of finding the cause of the accident and the steps necessary to ensure it will not happen again. If necessary, other individuals will be called upon to complete the corrective actions; after which the foreman/supervisor will document the incident and corrective steps taken.

Sample Accident Investigation Reports

Employee Accident Report

Company Name: _____ Phone: _____ Investigation date: _____

Investigated by: _____ Age: _____ Male ☐ Female ☐

Medical clinic where treatment was given: _____

Name of injured: _____ Full time ☐ Part time ☐ Temporary ☐

Home Address: _____ Reports to: _____ AM ☐ PM ☐

Job title of injured: _____ Length of employment: _____ Injury time: _____

Department: _____ Address of accident: _____

Injury date: _____ Date reported: _____

Nature of injury and part of body, or property damaged: _____

Object inflicting injury or damage: _____ Medical treatment ☐ First aid ☐

Severity of injury: _____ Fatality ☐

Witness names and phone numbers: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Where did the accident occur? _____

How did the accident occur? (Attach photos and diagrams if needed.) _____

Describe unsafe acts or conditions which contributed to the loss. _____

Corrective action taken to prevent recurrence: _____

Follow-up actions necessary: _____

Supervisor/Foreman: _____ Date: _____

LICA Safety Form - 1006 (9-07)

Accident: Facility Damage Report

Company Name: _____

Machine Operator _____

Date of Locate _____

Name of Locate Company _____ Date _____ and Time of Damage _____

Facility Owner _____ Ticket #: _____

Live or Abandoned _____

Measurement Off By: _____ Feet _____ Inches _____

Photographs Taken: Yes ☐ No ☐ Facility Damaged: Yes ☐ No ☐

Locate Sketch Attached: Yes ☐ No ☐ Locates: Yes ☐ No ☐ Painted ☐ Plugged ☐

Was Hand Dig Completed 24" Each Side of Mark: Yes ☐ No ☐ How Many Taken _____

Was Line Found and Exposed By Hand: Yes ☐ No ☐ Was Locate Sketch on Job Site: Yes ☐ No ☐

Cause: _____

Name of Machine Operators Supervisor _____ Damage by Hand or Machine: Yes ☐ No ☐

What happened to cause this damage? _____

Why did this happen? _____

What is being done to insure this will not happen again? _____

Comments on damages: _____

Machine Operators Signature _____

Supervisor Signature _____

Manager Signature _____

Ok to pay _____ Date _____

Claim Number: _____ Date _____

Check Number: _____ Amount Paid: _____ Dept. Code: _____

P.O. Number: _____ Date Closed: _____

Cause: Locate Error ☐

Facility not marked ☐

Abandoned facility ☐

Mark off, but facility was not damaged ☐

Locate marks off ☐

Other (explain) - Use back of form _____

Cause: Dig Error ☐

Out of dig area ☐

No locate requested ☐

Expired locate ☐

Digging prior to locate ☐

Hit on locate - within 24" of mark ☐

Marks destroyed - drawing incorrect ☐

Unable to investigate / not notified ☐

Found all cables marked ☐

Other (explain) - Use back of form _____

Supervisor/Foreman: _____ Date: _____

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Safety Meetings

Monthly safety meetings with all personnel, including the office staff, will take place. It will serve as a forum to discuss safety issues and concerns that employees might have and past incidents that have occurred. In addition to these monthly meetings, the Supervisors should meet with the work crews. The crew and supervisor should discuss specific safe work procedures, safe use of equipment and personal protective equipment once a month. They are also encouraged to address past incidents and their investigation results. In addition to issues exclusive to their company, they should discuss OSHA mandated training topics.

A **weekly Toolbox Safety Talk** is a must to help employees stay focused on safety issues and show how important safety on the job is. It is recommended to have **safety talks everyday** before going out on their jobs. A **pre-job checklist** is suggested to improve the value of these safety talks. Records of topics and attendance will be maintained for each meeting.

Sample Toolbox Talks and Sign-In Sheet

CNA Risk Control

HARD HATS

SOME COMMON COMPLAINTS AND THE REAL TRUTH
We sometimes hear the following complaints about hard hats. But is there any real basis for them?

"It's too heavy." Hard hats are only a few ounces heavier than a cloth cap, but the extra protection you get is the extra weight.

"It's too hot." Measurements taken in hot weather show that the temperature under a hard hat is often higher than outside.

"It gives me a headache." A thump on the top of your head, which has fallen two floors, will give you a headache. There is, however, no medical evidence that a properly adjusted hard hat should cause a headache. Don't alter the suspension system or the straps because you won't get the designed protection.

"It won't stay on." You're right; it won't stay on if you're not wearing it properly. A chin strap will solve this problem. If you're not wearing it properly, that's a hard hat stays put no matter how you bend you have to do - if it's not.

"It's noisy." That's your imagination. That properly worn hard hat keeps noise to some extent.

NO HELP UNLESS YOU V
The hard hat is a useful piece of equipment. Like any other protective equipment, it must be adjusted and worn properly. You must protect your maximum protection.

HOW TO CARE FOR HARD HATS
The better care you take of your hard hat, the better care it will take of you. Here are some suggestions:

1. Properly adjust suspension systems to maintain clearance between your head and the shell of the hat.
2. Don't cut holes for ventilation. Don't heat and bend.
3. Don't substitute a "bump cap." They aren't strong enough.
4. Don't paint your hard hat.
5. Don't put anything under it except your head; this includes cigarettes or notebooks.
6. Don't wear it backwards.

For more information please call us toll-free at (866) 262-0540 or visit www.cna.com

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"Toolbox Talks" Sign-In Sheet

Company Name: _____

Date: _____

Meeting Location: _____ Topic: _____

Items Discussed: _____ Person Conducting Meeting: _____

Problem Areas or Concerns: _____

Attendees: _____

Comments: _____

Supervisor/Foreman: _____ Date: _____

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Safety Rules

All safety rules will be given to each employee for review. Employees are to understand and comply with these rules at all times. They should sign or initial these documents to show their understanding that abiding by the safety rules are part of their condition of employment.

Reviewing Safety Rules



The Foreman is utilizing the morning break to review safety rules.



Each employee should review all rules and sign these documents.



The Foreman is reviewing the proper use and distributing safety equipment: ear plugs, mask, goggles, etc.

Training

Training for any position is to be given by a qualified supervisor to every new employee prior to starting work. During training, the new employee will be introduced to the safety plan and the main points will be discussed. In addition to initial training, any employee that changes position should be advised of new safety responsibilities. All training will be documented by the supervisor. Any safety training required by local, state, or federal regulations will be given and recorded.

Indoor and on-site training.



All safety training for any position should comply with local, state, or federal regulations



Record Keeping

Our company will maintain the following safety records for a minimum of one year:

- **Equipment and jobsite inspection records**
- **Accident investigation reports**
- **Workers' Compensation Insurance Company First Reports of Injury**
- **Safety meeting records**
- **Training records**
- **OSHA Injury log Form 300** and the corresponding Incident Report Form 301 shall be maintained for three years as per OSHA requirements.
(See OSHA Forms)
- **The OSHA 300A** form (Annual Summary) shall be completed each January for the previous year and posted February 1- April 30 as per OSHA requirements.(See OSHA Forms)

The above records will be maintained by

(Employee Name)

(Job Title)

and kept at

(Location)

First Aid

Any injured individual will be given emergency first aid and will have access to any required follow-up medical care. In the absence of an infirmary, clinic, hospital, or physician that is reasonably accessible in terms of time and distance to the worksite, a person who has a valid certificate in first aid training from the American Red Cross or equivalent training that can be verified by documentary evidence, shall be available on the worksite to render first aid. First aid kits will be available at all times in the workplace and continuously updated with the necessary supplies. Emergency response numbers shall be plainly posted near telephones. In areas where 911 is not available, the phone numbers of the physicians, hospital or ambulances will also be plainly posted.

Foreman/supervisor will notify employees of where to receive first aid and any other medical care that may be needed due to job-related injuries and illness.

A Comprehensive First Aid Kit

First Aid Kit for up to 50 people

(can be purchased in a complete kit)

This first aid kit meets and exceeds:
ANSI standard Z308.1 & OSHA standard 1910.151

Adhesive Bandage Assortment

- 30 Adhesive Bandage, Plastic, 1" x 3"
- 30 Adhesive Bandage, Plastic, 3/4" x 3"
- 5 Adhesive Bandage, Plastic, X-LG 2" x 3"
- 5 Adhesive Bandage, Woven, Fingertip
- 5 Adhesive Bandage, Woven, Knuckle

Antiseptic Assortment

- 10 Antiseptic BZK Towelette, 5" x 7"
- 6 Burn Cream, 1 gm.
- 2 Insect Sting Wipe-Ups, 1" x 2"
- 3 PVP Wipe-Ups, 1" x 2"

Eye/Gauze Pad Assortment

- 2 Eye Pad
- 3 Gauze Non-Stick Pad, 2" x 3"
- 3 Gauze Non-Stick Pad, 3" x 4"
- 4 Gauze Pad, 2" x 2"
- 4 Gauze Pad, 3" x 3"

Compress / Gauze/ Tape Assortment

- 1 Absorbent Compress, 32 sq. in.
- 1 Adhesive Certi-Tape, 1/2" x 2.5 yd.
- 1 Gauze Roll, 2" x 6 yd.
- 1 Gauze Roll, 1" x 6 yd.
- 2 Gloves, Nitrile, Pair, M/L
- 1 Bandage Scissors, 4"

2 Lan-Cet, 2/pkg. (Splinter Remover)

1 Triangular Bandage, 40"

2 Cold Pack

1 Elastic Bandage (Ace Style) 2" x 5 yd.

2 Eye Wash, Ose, 20 ml

1 Forceps, Plastic, 4"

3 Ammonia Inhalant

1 Biohazard Bag w/Tie, 24" x 24"

5 Cet, Non-Aspirin, 2/pkg.

1 Cotton - Boxed, 1/4 oz.

1 CPRotector, "Mouth-to-Mouth" Barrier, 5.5" sq.

Emergency Preparedness Plan

All employees will be provided with the information necessary to carry out the Emergency Preparedness Plan. It is made up so that any employee can respond to an emergency that is likely to occur in the workplace or at a job site. All new and existing employees will be trained accordingly before starting work. Each year there is to be a drill that will be recorded. Then they will review the drill and make any changes that are deemed necessary.

The supervisor/foreman is in charge of notifying employees of site-specific emergency reporting and the appropriate response procedures.

An emergency is an immediate threat to life or imminent threat of great harm. Emergencies are characterized by sudden onset. The emergencies that we have identified as being potential threats at this facility include:

- **Fire or explosion**
- **Extensive chemical spill**
- **Tornado or other sudden, severe weather event**

[This is a sample list: show those that actually apply to your business]

The **four basic steps** in responding to any emergency are:

- 1) Secure the work area from further risk;**
- 2) Close down dangerous operations or equipment;**
- 3) Evacuate; and**
- 4) Take a head count.**

Additional Steps:

- 5) _____
- 6) _____
- 7) _____

Contact List

Police Department _____

Fire Department _____

Hospital _____

Other _____

If an emergency occurs...

a) In the event that anyone recognizes a developing emergency, notification will be made to management and all employees by the following means: *It is good to have an alternative method that does not require utility/electric service.*

☐ Phone ☐ Intercom ☐ Alarm ☐ Radio ☐ Other_____

b) When an emergency alarm is sounded or you are informed or become aware of an emergency, each employee will immediately stop work and secure his / her work area. Make sure there is no immediate threat to you personally, assure that others in your area are aware of the alarm, and follow the floor plan or site plan posted at: *Location (Except for very small facilities, this should always be done).*

c) Next assure that nothing in your area will contribute to the danger if left unattended. If equipment, operations, or supply lines need to be shut down take the time to do this. *Insert here any specific instructions which need to be addressed.*

d) Evacuate to the appropriate assembly area. Workgroup supervisor is responsible for making sure that every employee and visitor is evacuated. When you reach the assembly area, find your supervisor and report your presence. Supervisors will report their headcount results to the senior company official on site [or insert title of appropriate person].

Supervisor _____

e) The assembly areas for this facility are: *ALWAYS have at least two areas, a primary and an alternate. They should be widely separated and in different directions from the center of the facility, incase access to one is blocked.*

f) The senior company official on site will make necessary notifications, from the emergency contact list. The fire department has been to the facility to establish an emergency response preplan based on the location of dangerous materials and areas populated by employees. Be prepared to provide information on any condition that may change their approach to the incident, such as temporary storage of materials or missing persons.