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Introduction

The Injury & Illness Prevention Program (IIPP) is established to provide a framework for the KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT to ensure a safe and healthy work environment for all of its employees. The purpose of this manual is to provide information necessary to communicate the elements of the Injury and Illness Prevention Program. All employees of the KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT are governed by the procedures outlined in this manual, unless otherwise stipulated.

The goal of the program is to eliminate occupational injuries and illnesses. This program has been developed and implemented as required under the California Code of Regulations, Title 8, Chapter 4, Subchapter 7, Section 3203.

The SAFETY OFFICER is responsible for the implementation and coordination of the Injury and Illness Prevention Program. This plan will be reviewed annually and revised as necessary. The master copy of this IIPP can be found in the SAFETY OFFICER’s office at the District Office. Copies of the IIPP will be available at each district site and school location. The plan will also be available in the Risk Management section of the district’s staff website.

The IIPP will include the following topics: Responsibilities, Compliance, Communication, Hazard Assessment, Hazard Correction, Accident/Injury Investigation, Training/Instruction, and Recordkeeping.
Responsibility

The Safety Officer Designation Form

The Director, Human Resources Department is the Districts designated SAFETY OFFICER. The SAFETY OFFICER is the person responsible for implementing the KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT’S Injury and Illness Prevention Program.

The SAFETY OFFICER is responsible for occupational safety and health, and will assure that the KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT provides employees with a safe and healthy workplace, which complies with all Cal/OSHA and other applicable health and safety standards and regulations.

APPROVED: Superintendent

_________________________________________Date___________

ACCEPTED: Chief Business Officer

_________________________________________ Date___________

ACCEPTED: Safety Officer/Director, Maintenance, Operations and Transportation

_________________________________________ Date___________

The Safety Officer

The SAFETY OFFICER will serve as the Injury & Illness Prevention Program Coordinator for the KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT Schools. The Injury & Illness Prevention Program Coordinator/Safety Officer is responsible for implementing and maintaining the following aspects of the safety program:

1. Coordinating all risk control activities
2. Maintaining, evaluating, and revising the Injury & Illness Prevention Program
3. Providing advice and guidance to KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT management and supervisors
4. Communicating safety objectives
5. Developing and/or assisting in the development of employee training programs
6. Presiding over the KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT’S Safety Committee
7. Reviewing all accident reports and investigations
8. Serving as liaison between management and outside safety agencies
9. Maintaining records as prescribed by the Recordkeeping Section of the Injury & Illness Prevention Program
Principal and Supervisor Responsibilities

KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT’s Principals and Supervisors are responsible, where appropriate, for specific elements of the Injury and Illness Prevention Program. Principals and Supervisors play an integral role within the Injury & Illness Prevention Program. Principals and Supervisors are in constant and direct contact with their employees and can greatly influence safety attitudes and practices. It is essential that the Principals and Supervisors set the example for employees in regards to safety responsibilities. There are several specific responsibilities for Principals and Supervisors:

1. Managing the injury prevention efforts in their area of responsibility
2. Providing the necessary means of ensuring a safe and healthy work environment for their staff
3. Providing employees with safety training and job instruction
4. Providing written documentation of employee training and instruction for employees in their area of responsibility
5. Providing a planned safety meeting or “safety talk” program
6. Ensuring compliance with applicable federal, state, and local safety codes. Cal/OSHA safety regulations can be found in the California Code of Regulations, Title 8, by applicable topic. These regulations can be accessed via the Internet at www.ccr.oal.ca.gov or www.dir.ca.gov. The JPA Risk Manager may be contacted as a resource for compliance based inquiries
7. Conducting Accident/Injury Investigations
8. Taking any reasonable action necessary to prevent injuries when an immediate danger exists
9. Taking responsibility for the safety of all employees under their supervision and for any employee not under their supervision but in the supervisor’s work area
10. Providing and maintaining a clean and hazard-free work area
11. Providing safety orientation and job instruction to supervised employees
12. Planning, conducting, and documenting safety evaluations in assigned areas of responsibility
13. Conducting safety observations of employee safe work practices
14. Developing and maintaining cooperative safety attitudes in employees through the application of approved methods or preventive and corrective discipline
15. Maintaining emergency readiness
16. Ensuring employees receive prompt medical treatment for all injuries
17. Ensuring employees are fit to work
Employee Responsibilities

Employees are charged with adhering to the Injury & Illness Prevention Program as directed by management.

Employee responsibilities are listed below:

1. Adhering to all safety rules and operating procedures established by the KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT Schools
2. Wearing appropriate personal protective equipment as required and provided by the KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT Schools
3. Inspecting and maintaining equipment for proper and safe operation
4. Reporting all injuries immediately, including first aid only injuries
5. Encouraging other workers to work in a safe manner
6. Reporting all observed unsafe acts and conditions to their supervisor
7. Reporting to work in an acceptable condition and not under the influence of alcohol or drugs
Compliance

Kingsburg Elementary Charter School District Commitment

The KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT is committed to providing all employees a safe and healthy work environment.

The KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT maintains an open door policy, allowing all employees to communicate any safety concerns without fear of repercussion.

Furthermore, the KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT is committed to providing full cooperation with any outside safety agency during the course of any inspection or audit.

(Board Policy Reference #4157)

Employee Compliance

Occupational safety and health regulations and workplace practices are designed to reduce or eliminate occupational injuries and illnesses of employees. Employee compliance with all rules and regulations is essential to maintaining a safe and healthy workplace.

Employees that have displayed an outstanding commitment to safety may be recognized through an employee recognition program. Conversely, employees that violate any safety policy, procedure, rule and/or regulation may be subject to disciplinary action.

Disciplinary Action

The KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT will utilize appropriate disciplinary action for employees who violate KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT’S safety policies, rules, and procedures, or for employees who require any counseling as a result of unsafe work practices.
Communication

General Information

The KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT recognizes that open, two-way communication between management and staff on health and safety issues is essential to an injury-free, productive workplace. The system of communication regarding safety and health at the KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT consists of many facets designed to facilitate a continuous flow of safety and health information between management and staff.

Managers and supervisors are responsible for communication with all employees about occupational safety and health issues in a manner or form readily understandable by all employees. Likewise, employees are encouraged to inform their managers and supervisors about workplace hazards without fear of reprisal.

Review of Injury & Illness Prevention Program

The Injury & Illness Prevention Program is to be used as a reference source for safety information pertaining to the KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT Schools. All employees are entitled to review the contents of the Injury & Illness Prevention Program. Each site should have a copy of the program. The program should be kept at a location readily accessible to all employees.

All new employees will be informed of the program during orientation and where copies of the written plan are located. All employees will be notified of any revisions to the program as the revisions are made.

The Injury & Illness Prevention Program will be reviewed annually and revised as necessary.

Any employee who may have comments and/or suggestions is encouraged to provide feedback regarding to the program to The SAFETY OFFICER for consideration.
Kingsburg Elementary Charter School District Safety Committee

The KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT Safety Committee has two primary functions. The first is communication between employees and management; the second function is the monitoring of the effectiveness of the KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT Schools’ Injury & Illness Prevention Program.

The KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT Safety Committee is KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT -wide and is comprised of both management and staff.

The KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT Safety Committee will meet regularly. The format of the meeting is to be decided by the members of the committee, but will always include a review of all injuries/accidents, a review of accident investigations, review of investigations pertaining to reports of hazardous conditions, a review of scheduled safety evaluations, and a round table session.

The employees on the KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT Safety Committee are to provide direct feedback to senior management of organizational and operational issues that are directly affecting injuries and Workers’ Compensation costs.

All KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT Safety Committee meetings are to be documented in the form of written meeting minutes. Original meeting minutes will be kept in the SAFETY OFFICER’S office at the District Office.

At the end of each school year, the KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT Safety Committee should review its accomplishments to ensure its effectiveness in accomplishing safety goals and objectives.
Hazard Assessment

General Information

The detection of hazards in the workplace is essential in ensuring a safe work environment. Undetected and uncorrected safety hazards may cause accidents resulting in serious injury to employees. There are two major sources of unsafe conditions – normal wear and tear of equipment and employee actions.

Normal wear and tear is the constant process in which equipment and facilities deteriorate. Routine evaluations of equipment and areas can detect hazardous conditions before they cause injury.

Employee actions can contribute to unsafe conditions in several ways. Misused and abused equipment can be dangerous. Additionally, employees may leave their work area untidy, which can contribute to a dangerous environment.

Regular hazard identification and assessment can minimize the quantity and severity of hazards to which employees may become exposed. Safety Evaluations and Hazard Analysis are tools utilized by the KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT to identify hazards.

Periodic inspections are always performed according to the following schedule:

- When we initially established our IIPP.

- Whenever new substances, processes, procedures or equipment which present potential new hazards are introduced into our workplace.

- Whenever new, previously unidentified hazards are recognized.

Safety Walks

Principals and Supervisors are encouraged to conduct safety walks quarterly in their area of responsibility. Principals and Supervisors should continuously monitor their areas during the work day for safety hazards and report any safety concerns to the DIRECTOR OF MOT.

The Principal and/or Supervisor, along with site staff will review all safety walks and initiate corrective action via the district’s work order system.
Safety Evaluations

Principals and/or Supervisors shall conduct safety evaluations annually in areas where they are knowledgeable.

Safety evaluations must be documented. All documentation shall be forwarded to the DIRECTOR OF MOT.

The Principal and/or Supervisor, along with site staff will review all safety evaluations and initiate corrective action via the district’s work order system.

The DIRECTOR OF MOT and the KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT Safety Committee will also review the safety evaluations and investigate long-term solutions to recurring hazards.

Safety Inspections

The KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT has site safety inspections conducted every three years via an outside consultant. Approximately six months after the conclusion of the inspection, a visit is paid to the district to obtain information regarding the status of priorities 1 and 2.

Hazard Reporting System

It is the responsibility of all employees to report unsafe work conditions and practices to their appropriate supervisor or the DIRECTOR OF MOT. Employees may use the district’s Equipment Repair & Safety Work Request Procedures to report unsafe work conditions or practices.

Employees may use the Equipment Repair & Safety Work Request Form to report unsafe work conditions and practices. Employees should forward the completed form to their supervisor for review and appropriate action. The Equipment Repair & Safety Work Request Form may be obtained from the School Office Manager or by contacting the DIRECTOR OF MOT, and can be submitted anonymously.

It is the policy of the KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT to prohibit employee reprisal for reporting unsafe/unhealthy work conditions and practices. Management personnel who are found in violation of this policy shall be held accountable.

Conversely, employees who have knowledge of an unsafe/unhealthy work condition or practice and who intentionally conceal this information will be in violation of KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT Schools’ policy.

The KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT is committed to conducting complete and thorough investigations of all reports of hazardous conditions. If conditions are determined to be
hazardous, appropriate measures will be taken by the KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT to correct those conditions.

Hazard Correction

Hazard Correction Responsibilities

The correction of any identified hazards should be conducted immediately. Personnel at all levels of employment have responsibilities in hazard correction. All personnel should have an understanding of their role in hazard correction to effectively eliminate identified hazards.

The Chief Business Official
The CHIEF BUSINESS OFFICIAL is responsible for allocating appropriate resources and funding for the correction of unsafe/unhealthy work conditions or practices.

The Director of MOT
The DIRECTOR OF MOT is responsible for immediately initiating corrections to any hazard that has come to his/her attention.

Any safety-related work requests should be given the highest priority to ensure prompt correction.

The DIRECTOR OF MOT will follow up on corrective activity for all reports of unsafe or unhealthy conditions.

The Safety Officer
The SAFETY OFFICER will review all reports of unsafe/unhealthy work conditions on a monthly basis to determine the development of any patterns.

Principals and Supervisors
Upon the identification of an unsafe/unhealthy work condition or practice, the Principals and/or Supervisors will initiate the appropriate corrective action by way of a work order or communication with the appropriate department.

Principals and Supervisors are responsible for identifying and controlling access to a hazard and to prevent further danger to employees and the public, as well as notifying the necessary persons responsible for taking required action to correct the hazard.

Principals and Supervisors have the responsibility of investigating and determining the root cause of any unsafe condition. Any source of hazard that is beyond the ability of the Principals and/or Supervisor to correct should be immediately reported to the SAFETY OFFICER.

Principals and Supervisors are also responsible for taking temporary precautions until corrections can be made. Principals and Supervisors shall provide a status report to the SAFETY OFFICER when a temporary correction has been made.
**Employees**
All Employees are responsible for taking appropriate action to correct unsafe and unhealthy working conditions by immediately notifying appropriate management personnel of the conditions.

**Hazard Correction Follow-Up**

Whenever any report of an unsafe or unhealthy condition has been made, follow-up is essential to ensure that proper corrections are being or have been made. Persons of responsibility should conduct the necessary follow-up. Persons initiating a Report of Unsafe Condition or Hazard should follow up with their supervisors regarding the status of corrections.

Any unnecessary delays in hazard correction should be investigated by Principals and Supervisors and reported to the SAFETY OFFICER.

In the event an unreasonable delay in correcting safety hazards occurs, the SAFETY OFFICER should inquire with the necessary personnel the status of the work and report any pertinent information back to the Principal and/or Supervisor.

Once a reported hazard has been corrected, Principals and Supervisors should conduct a safety evaluation to ensure that the hazard has been completely eliminated.

Access should only be permitted upon the approval of the persons responsible for the area.

**COVID-19**

Refer to the Districts COVID-19 Prevention Plan
Accident Investigation

Supervisor Accident Investigation

It is the responsibility of the immediate supervisor to investigate all injuries (or near misses) and report on the KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT Schools’ Supervisor’s Report of Injury or Illness.

Supervisors will retain a copy and supply a separate copy to the appropriate department. These reports are subject to review by the SAFETY OFFICER.

Written reports of investigations should be as complete as possible. The most accurate, thorough reports record the sequence of events, noting each event in the order in which it occurred. A complete, factual report includes information based on these questions:

- WHO was injured and/or WHAT was damaged?
- HOW did the accident happen?
- WHERE and WHEN did it happen?
- WHO saw it happen?
- WHAT persons and/or equipment were involved?
- WHY did the accident happen?
- WHAT could and should have been done to prevent it?
- HOW can similar accidents be avoided in the future?

Procedures for investigating employee injuries include:

1. **Visiting the accident scene as soon as possible.**
   This will allow the supervisor to see the scene of the accident before any alterations to the scene can be made. It also allows the supervisor to be visible and available to Employees in the area.

2. **Interviewing injured workers and witnesses.**
   Several points of view may be helpful in determining the actual cause of an accident. Always include statements in the accident investigation report.

3. **Examining the workplace for factors associated with the accident.**
   It is essential to inspect the scene of the accident to determine if any hazards are present that may cause future accidents.

4. **Determining the cause of the accident.**
   Understanding the root cause of an accident will allow management to develop measures to prevent similar accidents from recurring. Determining the root cause of an incident may be a difficult or arduous task. A diligent investigation will allow management to understand the root cause.

5. **Taking corrective action to prevent the accident from recurring.**
   Immediate and complete corrective action is essential.

6. **Documenting the findings and corrective actions taken by completing Supervisor’s Accident Investigation Report.**
Attach all necessary information to the investigation report.

**Outside Agency Investigation**

Serious injuries and fatalities may be investigated by agencies outside of the KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT in addition to any internal investigation. Insurance agencies, as well as Cal/OSHA, fire departments, law enforcement agencies, and the KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT attorney may desire to investigate serious accidents and fatalities.

The KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT will cooperate with and assist outside agencies during the course of these investigations.

**Reports to Cal-OSHA**

Serious and fatal injuries are to be immediately reported to Cal/OSHA by the SAFETY OFFICER or designee. Immediately means as soon as practically possible but not longer than 8 hours after the KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT knows or with diligent inquiry would have known of the death, serious injury, or illness. If the KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT can demonstrate that exigent circumstances exist, the time frame for the report may be made no longer than 24 hours after the incident.

“Serious injury or illness” warranting Cal/OSHA notification means any injury or illness occurring in a place of employment or in connection with any employment that requires inpatient hospitalization, for other than medical observation or diagnostic testing, or in which an employee suffers an amputation, the loss of an eye, or any serious degree of permanent disfigurement, but does not include any injury or illness or death caused by an accident on a public street or highway, unless the accident occurred in a construction zone.

When making such report, the SAFETY OFFICER or designee shall include the following information, if available:

1. The time and date of the accident
2. The KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT Schools’ name, address, and telephone number
3. The name and job title of the person reporting the accident
4. The address of the site of the accident
5. The name of person to contact at the site of the accident
6. The name(s) and address(es) of any injured employee(s)
7. The nature of the injury
8. The location where injured employee(s) was/were moved to
9. The list and identity of other law enforcement agencies present at the site of the accident
10. A description of the accident and whether the accident scene instrumentality has been altered

**California Division of Occupational Safety and Health Enforcement Office in Fresno**

Phone (559) 445-5302

2550 Mariposa Street, Ste. 4000 Fresno, CA 93721
Fax (559) 445-5786
Training & Instruction

Training Programs

The KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT is committed to providing all necessary safety training to its employees. Safety training programs are necessary for the KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT to communicate to employees the hazards associated with their positions and safe work practices necessary to mitigate those hazards.

Training will be communicated through a number of ways: dialog between trainer and trainee, online courses, safety videos or DVDs, safety literature, hands-on examples, on-the-job training, seminars, and workshops.

Communication during training sessions should be two-way to ensure that employees understand their training and are afforded the opportunity to ask questions to clarify any information they may not understand initially.

The SAFETY OFFICER will periodically review the effectiveness of specific training programs and recommendations will be communicated to the necessary personnel or agencies conducting the training.

Initial Job Instruction

Initial job instruction (or job position safety orientation) refers to the on-the-job training given to new employees to prepare them to do a specific job. It covers such topics as general hazards, cleanliness and housekeeping responsibilities, and appropriate general safety rules. This type of safety training is an initial effort to generally acquaint employees with what they will need to know to perform their new positions safely.

Whether the employee is a new hire or a transfer from area position, safety training is essential.

When Employees move to new occupations, they are confronted with an entirely new workstation and a new set of safety hazards.

Pre-Job Safety Instructions for Hazardous Jobs

For hazardous jobs, it is advisable to cover the major job hazards with pre-job safety instructions. These are overviewed in an employee-specific orientation for hazardous operations. During this orientation, the employee’s supervisor will cover specific hazards of the job and necessary precautions.

Information to be included during this type of training should include, but not be limited to:

- Safety equipment and personal protective equipment requirements
- Potential exposure to toxic materials
- Emergency procedures
Safety Talks

Planned Safety Talks
Planned safety talks are one of several supervision tools for ongoing safety instructions designed to increase awareness of hazards, safe job procedures, and critical safety rules. These are designed to be short five to ten minute instructional talks between the first line supervisor and one or more employees. The subject of each talk is a specific topic like a safety rule or a particular hazard that is in need of emphasis. Supervisors should conduct these safety talks.

Planned safety talks should be used whenever a new substance, process, procedure, or piece of equipment presenting a new hazard is introduced and whenever a supervisor becomes aware of a new or previously unrecognized hazard. If a new substance, process, procedure or piece of equipment presenting a new hazard is not introduced, supervisors may schedule regular safety talks at a frequency that best suits the operations of the department or affected employees.

Correctional Safety Talks
When an employee is observed working in an unsafe manner, it is the responsibility of the supervisor to correct the employee in a manner appropriate to the facts of the case.
Recordkeeping

There are several forms of documentation that must be retained for recordkeeping purposes:

Safety Evaluation Documentation
- Safety evaluation documentation will be maintained by the SAFETY OFFICER and/or Supervisor
- Safety evaluation documentation should include the name(s) of the person(s) conducting the evaluation
- Safety evaluation documentation should include any unsafe conditions or work practices
- Safety evaluation documentation should include corrective actions
- Safety evaluation documentation should be maintained for no less than three (3) years

Safety Training Documentation
- Human Resources or designee and the employee’s supervisor will maintain safety training documentation for a period of no less than three (3) years
- Safety training documentation should include the employee’s name, training dates, type of training, and training providers
- Safety training documentation should be maintained in the employee’s personnel file for the duration of his or her employment

Employee Injury Reports/Supervisor Accident Investigation Reports
- The SAFETY OFFICER will maintain Employee Injury Reports and Supervisor Accident Investigation Reports
- Copies of Employee Injury Reports and Supervisor Accident Investigation Reports will be maintained in the injured employee’s workers’ compensation file
- Copies of Employee Injury Reports and Supervisor Accident Investigation Reports shall remain in the injured employee’s workers’ compensation file for the duration of his or her employment
Appendix

Equipment Repair & Safety Work Request Procedures

KINGSBURG ELEMENTARY CHARTER School District
Equipment Repair and Safety Work Request Procedures

The Equipment Repair and Safety Work Request is to be filled out if there is equipment/buildings needing repair or a safety hazard that is noticed while on the job. We all have a duty to report any concerns immediately. In order to keep the safest shop and district possible, it is vital that you call your supervisor immediately to report any safety concern and complete the Equipment Repair and Safety Work Request form within 24 hours.

The following steps will explain how to complete the Equipment Repair and Safety Work Request:

1. Write the date you are filling out the request form.
2. Write your name as the requesting party (employees may anonymously report hazards)
3. Write the location of the repair or safety hazard (please be specific).
4. Write the priority of your request.
   ● High would be marked if the request is for an immediate safety issue and needs to be completed within 24 hours.
   ● Medium would be marked if the request needs to be completed within the week.
   ● Low would be marked if the request is a concern but not immediate and can be done as soon as time allows.
5. Turn the Equipment Repair and Safety Work Request in to James Scott. If it was reported as an immediate safety issue, please complete and turn in the form within 24 hours.

A copy of the completed request will be sent back to the original requestor.

If there is an immediate concern or you feel another employee or student might be harmed, call your supervisor immediately so they can limit access to the area or equipment. Do not leave an area or piece of equipment unsupervised if an immediate danger for a student, employee, or community member. Wait until your supervisor or the site principal gives you instructions to clear the area and or take the equipment out of operation.
Equipment Repair & Safety Work Request Form

KINGSBURG ELEMENTARY CHARTER SCHOOL DISTRICT
EQUIPMENT REPAIR AND SAFETY WORK REQUEST

“Making KINGSBURG ELEMENTARY CHARTER the Safest Environment to Learn and Work!”

Date of Request: ____/____/____ Requesting Party: ___________________________(Optional)

*A copy of the completed request will be sent back to the original requestor.

Work Location: __________________________________________________________

Description

Work/repair:_____________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Priority:

(____) High – SAFETY ISSUE – Must be done within 24 hours.
(____) Medium – Within the Week
(____) Low – When you get a chance

For Office Use Only:

Date Received: ____/____/____ Priority Assigned:___________________________

(____) Accomplish In-House Work Request Date: ____/____/____
(Copy of completed work request attached)

(____) Contract Out Company Contacted ____/____/____
Company Name: ___________________________

Comments:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Date Work Completed: ____/____/____

Authorized By: ______________________________
Employee First Notice Reporting Process

The District will be implementing a new process for reporting work related injuries. Please follow the new process below for all work related injuries or illnesses.

1. Report all on-the-job injuries or illnesses, whether you go to the doctor or not. Immediately call (Toll-Free) 1-844-752-0415.

2. A Registered Nurse will answer the call, initiate the claim and assist with determining the appropriate medical provider.

3. Notify your supervisor immediately. Follow your department procedures.

4. You must submit a work status report to your supervisor after you go to a Medical Provider Network (MPN) Clinic or Physician.

5. After the initial medical appointment, future appointments should be scheduled not to conflict with your work schedule.

6. The Workers’ Compensation Claims Administrator is TRISTAR Risk Management. For follow-up information or questions regarding your claim, call (559) 432-1260.

7. LIFE- OR LIMB-THREATENING EMERGENCIES: Call 911 or go to the nearest medical facility. Immediately notify your supervisor. Supervisor or designee will report injury to (Toll-Free) 1-844-752-0415.

8. For NON-LIFE-THREATENING EMERGENCIES and AFTER HOURS CARE, go to the closest hospital. Follow-up care must be provided by one of the designated providers.
Employee’s name ______________________ Supervisor’s name ____________________________

Job Position/Title __________________________________________________________________

Date and time of injury or illness __________________ Location __________________________

Task being performed when injury occurred _____________________________________________

Date and time injury was reported to you ______________________________________________

Name(s) of witness(es) ______________________________________________________________

_________________________________________________________________________________

Accident resulted in: Injury ______  Fatality ______  Property damage ______

First aid given? ______  Medical treatment required? ______  Workdays lost ______

Describe how the injury or illness occurred:

_________________________________________________________________________________

_________________________________________________________________________________

_________________________________________________________________________________

What actions, events, or conditions contributed most directly to this injury or illness?

_________________________________________________________________________________

_________________________________________________________________________________

_________________________________________________________________________________

Could anything be done to prevent occurrence of this type? If so, what?

_________________________________________________________________________________

_________________________________________________________________________________

_________________________________________________________________________________

_________________________________________________________________________________

Signature of Supervisor  ________________________________  Date

Signature of Safety Officer  ________________________________  Date

Comments:

_________________________________________________________________________________

_________________________________________________________________________________

_________________________________________________________________________________
SUPERVISOR’S INJURY FOLLOW-UP REPORT
Return this form and Employee’s Report of Injury or Illness to the departmental safety officer

Employee’s name _________________________ Supervisor’s name _________________________

Job Position/Title ________________________________

Date and time of injury or illness __________________ Location ____________________________

Follow-up Action Taken:

Work request submitted? Yes _____ No _____ If yes, Date ____________
If yes, describe:
_________________________________________________________________________________
_________________________________________________________________________________

Other follow-up action taken? Yes _____ No _____
If yes, describe:
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

*District Office Only
Online training assigned? Yes _____ No _____ If yes, Title of Course _______________________

Site Evaluation Needed? Yes _____ No _____ If yes, Date Completed ________________________

_________________________________  ______________________________
Signature of Supervisor      Date

_________________________________  ______________________________
Signature of Safety Officer     Date

Comments:
_________________________________________________________________________________
_________________________________________________________________________________
Employee’s name ____________________________________________
Job Position/Title __________________________________________
Shift Start Time ___________ Shift End Time ___________ Supervisor’s name ______________________________
Date and time of injury or illness ______________________ Location _______________________
Task being performed when injury occurred ______________________________________________
Date and time injury or illness reported ___________________ To whom? _____________________
Name(s) of witness(es) ______________________________________________________________

Describe how the injury or illness occurred:

_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

What part of the body was affected?

_________________________________________________________________________________

Describe the injuries or illness in detail:

_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

Date and time you first sought medical attention:

_________________________________________________________________________________

Name of doctor and/or hospital:

_________________________________________________________________________________

Could anything be done to prevent occurrences of this type? If so, what?

_________________________________________________________________________________

_________________________________   _____________________________
Signature of Employee       Date