



PERRIS UNION
HIGH SCHOOL DISTRICT

INJURY & ILLNESS PREVENTION PROGRAM

(IIPP, CCR Title 8 § 3203)

RESPONSIBILITY

At the direction of the Perris Union High School District Governing Board (BP 4157) and under the authority of the District's Superintendent, the Injury and Illness Prevention (IIPP) administrator, the District's Director of Risk Management (951-943-6369 x 80281), has the responsibility for implementing and maintaining this IIPP.

Managers and supervisors are responsible for implementing and maintaining the IIPP in their work areas and for answering worker questions about the IIPP. A copy of this IIPP is available from each manager and supervisor.

COMPLIANCE

All employees, including managers and supervisors, are responsible for complying with occupational safety and health standards applicable to their own actions and conduct, under Labor Code Section 6407.1. Our system of ensuring that all employees comply with these practices includes one or more of the following practices:

- ✓ Informing employees of the provisions of our IIPP.
- ✓ Evaluating the safety performance of all employees.
- ✓ Recognizing employees who perform safe and healthful work practices.
- ✓ Providing training to employees whose safety performance is deficient.
- ✓ Disciplining employees in accordance with union policy, Board Policy, and Administrative Regulations for failure to comply with safe and healthful work practices.

COMMUNICATION

All managers and supervisors are responsible for communicating with all employees about occupational safety and health in a form readily understandable by all employees. Our communication system encourages all employees to inform their managers and supervisors about workplace hazards without fear of reprisal.

Our communication system includes one or more of the following checked items:

- ✓ New worker orientation, including a discussion of safety and health policies and procedures.
- ✓ Review of our IIPP.
- ✓ Training programs.
- ✓ Regularly scheduled safety meetings.
- ✓ Posted or distributed safety information.
- ✓ A system for employees to anonymously inform management about workplace hazards.

HAZARD ASSESSMENT

A competent observer shall perform periodic inspections to identify and evaluate workplace hazards in the following areas of our workplace:

- ✓ All work sites are operated by the Perris Union High School District.

Periodic inspections are performed according to the following schedule:

1. When we initially established our IIPP;
2. When new substances, processes, procedures, or equipment that present potential new hazards are introduced into our workplace;
3. When new, previously unidentified hazards are recognized;
4. When occupational injuries and illnesses occur, and
5. Whenever workplace conditions warrant an inspection.

ACCIDENT/EXPOSURE INVESTIGATIONS

Procedures for investigating workplace accidents and hazardous substance exposures include:

1. Interviewing injured employees and witnesses;
2. Examining the workplace for factors associated with the accident/exposure;
3. Determining the cause of the accident/exposure;
4. Taking corrective action to prevent the accident/exposure from recurring; and
5. Recording the findings and actions taken on the Supervisor's Accident/Injury Investigation Form.

HAZARD CORRECTION

Unsafe or unhealthy work conditions, practices, or procedures shall be corrected promptly based on the severity of the hazards. Hazards shall be corrected according to the following guidelines:

1. When observed or discovered and reported to the appropriate supervisor, it results in a work order being submitted. Employees also have the right to submit a [Report of Unsafe Conditions](#) Google document to submit by intradistrict mail or email to riskmanagement@puhsd.org; and
2. When an imminent hazard exists that cannot be immediately abated without endangering employee(s) and/or property, we will remove all exposed employees from the area except those necessary to correct the existing condition. Employees who are required to correct the hazardous condition shall be provided with the necessary protection and training.

TRAINING AND INSTRUCTION

All employees, including managers and supervisors, shall have training and instruction on general and job-specific safety and health practices. Training and instruction is provided:

1. When the IIPP is first established;
2. To all new employees
3. To all employees given new job assignments for which training has not previously provided;
4. Whenever new substances, processes, procedures or equipment are introduced to the workplace and represent a new hazard;
5. Whenever the employer is made aware of a new or previously unrecognized hazard;
6. To supervisors to familiarize them with the safety and health hazards to which employees under their immediate direction and control may be exposed; and
7. To all employees, with respect to hazards specific to each employee's job assignment.

General workplace safety and health practices include, but are not limited to, the following:

1. Implementation and maintenance of the IIPP.
2. Emergency action and fire prevention plan.
3. Provisions for medical services and first aid, including emergency procedures.
4. Prevention of musculoskeletal disorders, including proper lifting techniques.
5. Proper housekeeping, such as keeping stairways and aisles clear, work areas neat and orderly, and promptly cleaning up spills.
6. Prohibiting horseplay, scuffling, or other acts that tend to adversely influence safety.
7. Proper storage to prevent stacking goods in an unstable manner and storing goods against doors, exits, fire extinguishing equipment, and electrical panels.
8. Proper reporting of hazards and accidents to supervisors.
9. Hazard communication, including worker awareness of potential chemical hazards, and proper labeling of containers.
10. Proper storage and handling of toxic and hazardous substances, including prohibiting eating or storing food and beverages in areas where they can become contaminated.

EMPLOYEE ACCESS TO THE IIPP

All PUHSD employees have the right to examine and receive a copy of our IIPP. Unobstructed access to our IIPP can be found on the PUHSD website under [Employee Safety](#), which allows an employee to review, print, and email the current version of the program.

Any copy provided to an employee or their designated representative need not include any of the records of the steps taken to implement and maintain the written IIPP.

Where we have distinctly different and separate operations with distinctly separate and different IIPPs, we may limit access to the IIPP applicable to the employee requesting it.

An employee must provide written authorization in order to make someone their “designated representative.” A recognized or certified collective bargaining agent will be treated automatically as a designated representative for the purpose of access to the District’s IIPP. The written authorization must include the following information:

- The name and signature of the employee authorizing the designated representative.
- The date of the request.
- The name of the designated representative.
- The date upon which the written authorization will expire (if less than 1 year).

RECORD KEEPING

We are a local governmental entity (any county, city, or district, and any public or quasi-public corporation or public agency therein), and we are not required to keep written records of the steps taken to implement and maintain our IIPP.

Report of Unsafe Conditions

Risk Management



INSTRUCTIONS

The first method available to report an unsafe condition is through the Maintenance and Operations Work Order System.

Find out who at your site enters Work Orders and report your concern(s) to them.

Pursuant to the Injury Illness Prevention Plan (IIPP), employees have a right and responsibility to report unsafe conditions, and the option to report them anonymously. This form is just one available method used to report unsafe conditions.

1. Use this form to report an unsafe condition at your site/work location.

To submit, you can either:

- a. Complete this form, print it, and mail it through inter-district mail.
 - b. Complete this form, save it on your computer, and then email it to Risk Management at riskmanagement@puhsd.org, or
 - c. Complete the Google Form [Report of Unsafe Conditions](#). The form is accessible by going to the “Staff” tab at the top of the PUHSD website, then from the pull-down menu, go to “Employee Safety”. The Report Unsafe Conditions form is located in the middle of the page.
2. **To report anonymously, use one of the following:**
 - a. Complete this form, print it, and mail it:
 - i. Through inter-district mail to the District Office. Attention Risk Management.
 - ii. To: Perris Union High School District
Risk Management
155 East Fourth Street
Perris, CA 92570
 - b. Complete the Google Form, [Report of Unsafe Conditions](#), without completing questions 5-8.
 3. Keep a copy for your records. Your name, work location, and phone number are not required on either form unless you want to be informed of the “corrective action” taken.
 4. Work Orders should also be submitted to Maintenance & Operations. Please include the Work Order number on this form.

Report of Unsafe Conditions

Today's Date:
School/Site:
Area/Location/Room:
Address:
Site Administrator:
Workplace Supervisor:
Briefly describe hazard or condition observed and exact location:
Suggestions for possible remedy:
Work Order Number, if known:
Your name (optional):
Your work location (optional):
Your phone number (optional):

Date received by Risk Management:
Date reviewed/corrected:

Supervisor's Accident/Injury Investigation Report

SUPERVISOR: In an effort to reduce workplace accidents and injuries, it is imperative that every accident is effectively investigated and corrective/preventive measures taken. Please conduct an appropriate, immediate investigation of the accident, documenting the cause, correction, and prevention of future, similar accidents.

Review the accident with the injured employee, complete all areas, and return the completed report to the PUHSD Risk Management Office within 5 working days of the accident/injury.

Name of injured employee:		
Date of accident/injury:		Employee Job Title:
Hours/Day:	Shift Start Time:	Shift End Time:
Time of injury:		Date first notified of accident/injury:
Name of person who notified you:		
Did accident/injury occur at PUHSD site? ☐ Yes ☐ No		Site/Location:
List body parts involved/injured:		
What was the employee doing at the time of the accident/injury?		
Describe details of accident/injury (How did accident/injury occur? Be specific.):		
What equipment, materials, or chemicals were the employee using when the injury or exposure occurred?		

What have you done to investigate the cause(s) of the accident/injury?	
What caused the accident/injury?	
Was weather a factor? ☐ Yes ☐ No If yes, what was weather condition?	
What have you done to correct the cause(s) of this accident/injury?	
What will be done to prevent future accidents/injury like this from occurring?	
If there is a safety issue, please describe:	
Have you submitted a Work Order? ☐ Yes ☐ No	
W.O.#	Date submitted:
Would you like a consultation with Risk Management? ☐ Yes ☐ No	

Name and title of person who conducted the investigation (please print):

Name	Title

Signature	Date of investigation

References

CCR, Title 8, Section 3203

<https://www.dir.ca.gov/title8/3203.html>

IIPP Model Program for Non-High-Hazard Employers

https://www.dir.ca.gov/dosh/dosh_publications/IIPP-Model-nonhigh-hazard.doc

[BP 4157: Employee Safety](#)

PUHSD Employee Safety Page

<https://www.puhsd.org/employee-safety>

[PUHSD Report of Unsafe Conditions](#)