

**General Safety and Accident Prevention Plan**

**General Safety - Accident Prevention**

The University’s Accident Prevention Program is contained in the [*Safety Information Book*](http://www.wwu.edu/ehs/documents_webpages/safetyinfo.shtml). Accident prevention information is found in this section, plus other relevant sections of the book, including Section 2, departmental emergency procedures, and Section 3, Policy and Responsibilities. The chemical hygiene (laboratory) or hazard communication (non-laboratory) sections provide information on how to use chemicals safely. The information on personal protective equipment in Section 5 includes conducting a hazard assessment and details what personal protective equipment to wear for particular tasks.

**A. Accident Reporting and Investigation**

Accidents and illnesses on the job result in a no-win situation. Faculty, staff, or student employees who are injured or become ill on the job can suffer from physical pain, disruption of normal activities and frequently partial loss of income. Western can experience possible loss of productivity of the injured or ill person, interruption of departmental work and process, increased expense for temporary help and repair costs. To minimize such detrimental disruptions, accident prevention is a major goal of the overall health and safety program.

All accidents and occupational illnesses are to be reported immediately to determine if professional medical assistance is required***. Call 911 for medical aid and contact Public Safety at X3911***. Supervisory personnel are notified as quickly as possible, preferably within 24 hours, following an accidental injury or illness. They investigate accidents and injuries occurring to faculty, staff or students for whom they are responsible. The accidental injury/illness report form and reporting procedure are provided in Appendix A to this section.

Investigations of severe, work-related accidents or illnesses involving days of modified duty or time lost from the job will be given special attention by the Environmental Health and Safety staff. Work-related fatalities or multiple hospitalizations of employees will be reported as required to the Department of Labor and Industries by the Environmental Health and Safety office within 8 hours. The accident scene will be preserved as appropriate.

For severe accidents or illnesses, witnesses will be interviewed by Environmental Health and Safety staff. Interviews will be conducted in private.

Accidents are reviewed by the Central Health and Safety Committee, composed of faculty, staff, and a student. Departmental safety committees and supervisors may request departmental accident information from the [Workers’ Compensation](http://www.wwu.edu/ehs/workers_comp/workers.shtml) Claims Manager (X2947).

Accident investigations are to be completed in a timely fashion, generally within 2 to 3 weeks. If recommendations for corrective action cannot be implemented by individual departments or within individual operating budgets, they are submitted to the Vice President for Business and Financial Affairs or the appropriate Vice President, as soon as cost information is available. Implementation of corrective recommendations is dependent upon design requirements and institutional scheduling.

The Environmental Health and Safety office is responsible for administering the University's industrial insurance benefits and programs in accordance with the Washington Administrative Code (WAC) and the Revised Code of the State of Washington (RCW).

The University purchases workers' compensation insurance from the Washington State Department of Labor and Industries. Coverage is provided for all paid faculty, staff, and student employees who are injured or become ill while acting within the course and scope of their duties. Coverage begins automatically the first day of employment for all faculty, staff, and students who receive University paychecks. Each employee contributes a monthly amount for the medical aid portion of industrial insurance through payroll deduction. For further information on workers' compensation regulations and benefits, contact the Workers' Compensation Claims Manager at X2947.

Volunteers are provided industrial insurance, medical benefits only, as required by Washington Industrial Insurance Code, [RCW 51.12.035](http://apps.leg.wa.gov/rcw/default.aspx?cite=51.12.035). For additional information on volunteers, including policy and procedures, volunteer hourly time forms, field trip insurance, and volunteers' industrial insurance, contact the Risk Management Office at X3065. Visitors and unpaid students who sustain injury or illness should be referred to the [Risk Management](http://www.wwu.edu/ehs/risk_mgmt/riskmgmt.shtml) Office.

**B. Accidental Injury/Illness Recording**

Maintaining accurate injury and illness records is an important part of Western’s accident prevention efforts. Evaluating these records assists in determining where training may be needed and where additional protective equipment or procedures may be valuable.

The Occupational Safety and Health Administration (OSHA) 300 log for injuries and illnesses is kept current (within six days of an event). The Worker Compensation Claims Manager is responsible for maintaining this log. The log for the previous year is posted during February of each year on safety bulletin boards:

* Physical Plant (in hallway near lunchroom),
* Wilson Library main entrance,
* Third floor Old Main hallway,
* Environmental Health and Safety office in Environmental Studies 72, and
* Satellite facilities, such as Shannon Point Marine Center .

The log is presented on an annual basis to the Central Health and Safety Committee and, as for accident reports, is available to departmental safety committees and supervisors for use in improving the safety and health of employees and students.

**C. Safety Bulletin Boards**

Safety information about employee rights under the Washington Industrial Safety and Health Act is provided on posters located on safety bulletin boards. Updating of these posters is the responsibility of the Worker Compensation Claims Manager. Locations are those described in Part B of this section.

Any person noticing a damaged or missing poster should notify the Environmental Health and Safety office at X3064. Posters are available for departments wishing to provide additional copies by calling the above number.

**D. Safety and Health Orientation**

All persons receiving compensation for work at the University, whether temporary or permanent, are to receive a safety and health orientation when they begin work. This includes faculty, staff, student employees, rehires, and transferred persons. Safety orientation information is provided in Appendix A to this section in the brochure titled, Safety and Health for Employees. Additional brochures are available from the Environmental Health and Safety office. Topics covered include:

1. How and when to report injuries
2. Information about first aid facilities
3. How to report unsafe conditions
4. Use and care of personal protective equipment (references Section 5 of the *Safety Information Book, P*ersonal Protective Equipment)
5. Proper action to take in emergencies (references the emergency information poster; refer to Section 2 of the *Safety Information Book*)
6. Identification of hazardous materials, instructions on safe use, and emergency action (references Hazard Communication and Chemical Hygiene programs)
7. Description of Western’s safety program

Supervisors are responsible for orienting new employees (faculty, staff, exempt professionals, and student workers). The supervisor completes the Safety Orientation Checklist with the employee and returns a copy to the Environmental Health and Safety office (form provided in Appendix A to this section). Faculty in a teaching or supervisory role perform this orientation for student workers. Supervisory staff may wish to review information specifically for them presented in the brochure, Safety and Health Information for Supervisors, in Appendix A to this section.

**E. First Aid**

In accordance with [WAC 296 800-15005](http://www.lni.wa.gov/wisha/rules/corerules/HTML/296-800-150.htm) which requires provision of immediate assistance to injured or ill employees, directors, chairs or department heads are to designate individuals to maintain certification in first aid and CPR and to ensure that their certificates are current. This training is to comply with the federal and state requirement: ”a person or persons shall be adequately trained to render first aid”. Other arrangements may be made to comply with the regulation. The Environmental Health and Safety office maintains training records of all certified personnel and expiration dates. Training may be arranged by contacting the EHS office or the [Western training website](https://west.wwu.edu/training/).

Each department maintains first aid kits so they are accessible to faculty, staff, and students. A person is to be assigned to maintain the kits in a serviceable condition. First aid kit procedures are presented in Appendix A to this section.

**F. Self Audit**

It is the responsibility of the department head, chair, supervisor, or unit head to appoint a person to conduct a safety and health audit on an annual basis using the checklist provided in Appendix A to this section. Completed audits are provided to departmental safety committees, if organized, and to the Central Health and Safety Committee by sending them to the Environmental Health and Safety office.

Because of the widely varying nature of department activities, the audit is a guideline only. Departments may delete or ignore any section that is not applicable. Assistance in performing audits and correcting any deficiencies identified is available from the Environmental Health and Safety office.

**G. Safety and Health Evaluation**

Occupational safety and health problems should be included during faculty or staff evaluations. Accidents, near misses, safety rule violations, short cuts, attitude toward safety and health, and knowledge of safe work practices should be included as evaluation factors.

**H. Reporting Unsafe Conditions, Equipment, Practices, or Assignments**

Faculty, staff and student employees are to report unsafe conditions, equipment, practices, or assignments to their supervisor, chair, or director. If this person is unable to resolve the issue, it should be reported to the Environmental Health and Safety office. The office will assign the situation an identification number by which its outcome may be tracked.

**I. Back Safety**

Back safety is important in accident prevention because back injuries are frequently painful and debilitating. A back safety checklist is provided in Appendix A to this section. Training in this important topic is available upon request.

**J. Fire Safety**

Fire evacuation information is provided in Section 2 of the *Safety Information Book*. As required by WAC [296-800-30025](http://apps.leg.wa.gov/wac/default.aspx?cite=296-800-30025), employees are to be familiar with the general principles of fire extinguisher use and the hazards involved with incipient stage fire fighting, as shown in Appendix A to this section. Also provided is the office fire safety policy and procedure.

**K. Office Safety**

An office safety and health checklist is provided in Appendix A to this section. Also provided are guidelines on eye safety at video display terminals, and work station comfort exercises.

**L. Tools, Equipment and Machinery**

All tools, equipment and machinery are to meet basic safety and health requirements. Any item that does not meet minimum requirements is to be taken out of service (red-tagged) until repair or replacement can be effected. Loose or torn clothing is not to be worn when working around machinery. Jewelry is to be removed, and long hair confined.

**M. Outside Contractors, Temporary Employees, Vendors, Volunteers, Guests**

Outside contractors working at the University are required to comply with safety and health regulations by contract. Safety concerns that may arise are reported to the project manager in the [Facilities Development/Capital Budget](http://www.wwu.edu/wwuarchitect/) Department. Temporary employees, vendors, volunteers and guests are required to be trained before working with chemicals, hazardous equipment or machinery. They are to comply with safety and health regulations that may affect their personal safety and health or those of others.

**N. Heat Stress**

The Environmental Health and Safety office provides information and training on heat stress and heat-related illness for affected departments or upon request for other units. This includes training for recognition of conditions which may cause concerns as well as symptoms of heat-related illnesses and appropriate first aid response.

Supervisors are responsible for monitoring weather and temperature-related conditions which may be hazardous for their personnel as well as providing measures for mitigating the hazard. Departments whose activities may be impacted by high temperatures and humidity, heat-generating equipment, or work in direct sun for long periods may contact the Environmental Health and Safety office to obtain Section 22, Heat Stress for their Safety Information Books.

**Section 4**

**Appendix A**

**Forms and Information**

**Contents:**

 **Page**

|  |  |  |
| --- | --- | --- |
| 1. | Safety and Health Information for Employees -Faculty, Staff, Exempt Professionals and Student Employees (brochure) | Brochure |
| 2. | Safety and Health Information for Supervisors, including Faculty in a Teaching or Supervisory Role, Chairs, and Department Heads (brochure) | Brochure |
| 3. | Safety Orientation Checklist | A4-7 |
| 4. | Accidental Injury/Occupational Illness Report | A4-9 |
| 5. | Accidental Injury/Illness Reporting Procedure | A4-11 |
| 6. | Incident/Potential Hazard Report Form | A4-13 |
| 7. | First Aid Kit Procedures | A4-15 |
| 8. | Cyanide First Aid | A4-16 |
| 9. | Hydrofluoric Acid Burns on Skin First Aid | A4-17 |
| 10. | Information on Calcium Gluconate Gel for HF Burns on Skin | A4-18 |
| 11. | Office Safety and Health Checklist | A4-19 |
| 12. | Safety and Health Audit Checklist | A4-21 |
| 13. | Fire Fighting Information  | A4-23 |
| 14. | Office Fire Safety Policy and Procedure | A4-25 |
| 15. | Back Safety | A4-26 |
| 16. | Eye Safety at Video Display Terminals | A4-27 |
| 17. | Work Station Comfort Exercises | A4-28 |

Back of Appendix Title



**Safety and Health Information for Employees**

**(Faculty, Staff, Exempt Professionals and Student Workers)**

Safety and health information is important to everyone.

This contains basic information to work safely.

|  |  |
| --- | --- |
| 1. How and when to report injuries
2. First aid
3. How to report unsafe conditions
4. Proper action in emergencies
 | 1. Hazardous material identification, safe use, and emergency action
2. Western’s safety program
3. Use and care of personal protective equipment
 |

**Emergencies.** Your department is required to develop procedures for emergencies. These are in addition to University-wide procedures for emergency response. Ask to look at your departmental information and review exit maps and the disaster meeting location. Ask your supervisor to show you the location of emergency equipment including main and back-up exits, locations of fire extinguishers and pull stations.

When a building alarm sounds, leave your area immediately and go outside to your meeting location. Do not re-enter until the “all-clear” is given, even if the alarm stops.

**First Aid.** To provide immediate assistance to injured or ill employees, your supervisor or department head has designated individuals to maintain current certification in first aid and CPR. Ask who these individuals are in your area. Training may be arranged by contacting the EHS office. A first aid kit is maintained for your area by your department. Ask your supervisor where it is located. A person is assigned to maintain it in a serviceable condition.

**Reporting Unsafe Conditions.** Report unsafe conditions to your supervisor or safety representative. If the problem is not corrected, contact the Environmental Health and Safety office at 650-3064.

**Reporting Accidents.** If professional medical assistance is required, **call 911 for medical aid and contact Public Safety at X3911**. You are to report all accidents and occupational illnesses to your supervisor as quickly as possible following an accidental injury or illness. S/he will investigate accidents and injuries occurring in your area. The accidental injury/illness report form should always be completed as soon as possible and sent to the Environmental Health and Safety office.

**Employee Responsibilities**

|  |  |
| --- | --- |
| 1. Comply with University and departmental environmental, health and safety rules, policies and procedures
2. Observe all hazard warnings
3. Report hazardous or unsafe conditions, e.g., blockage of fire extinguishers or exit doors
 | 1. Only operate equipment for which authorization and training have been received
2. Participate in internal audits when requested
3. Maintain facilities in accordance with standard checklists
4. Report job-related accidents, property damage or chemical releases
 |

**Safety and Health Information for Employees**

**Western’s Safety Program.** Western’s safety program is contained in the ***Safety Information Book***, found in each department. Ask your supervisor where it is located. It provides the University safety and health policy, as well as all programs relevant to your department.

**Personal Protective Equipment.** Protective equipment should be made available to you by your supervisor to protect from chemical exposure, as well flying particles or other physical hazards. Your equipment is to be kept clean and in good working order. Report any deficiencies to your supervisor.

**Hazardous Chemicals.** How to identify hazardous gases, chemicals, and materials should be explained to you by your supervisor, along with the hazard communication (non-laboratory) program or the chemical hygiene (laboratory) program. Refer to the *Safety Information Book* for additional information. Ask where the Material Safety Data Sheets are kept and refer to them for chemical safety information. Ask your supervisor to answer questions you may have or contact the Environmental Health and Safety office.

**Environmental Health and Safety Contact Information**

**Environmental Studies 72, Mail Stop 9070, 650-3064**

If you leave a message, someone will call back within 15 minutes. OR

Call 738-5136, and enter a phone number at the tone to receive a return call within 15 minutes.

***Call about:***

|  |  |
| --- | --- |
| 1. Possible hazards
2. Indoor air quality
3. Ergonomics
4. Hazardous materials
5. Chemical or biological release
6. Hazardous chemical disposal
 | 1. Biological hazards
2. Bloodborne pathogens
3. Workers’ compensation
4. Asbestos
5. Environmental issues
6. Emergency response
 |

**Facilities Management Contact Information**

**Work Control Center: 915 26th Street, 650-3240**

**Hours: 7:30 am-5 pm**

**After business hours contact University Police at 650-3555**

***Call about:***

|  |  |  |
| --- | --- | --- |
| 1. Building maintenance
 | 1. Ventilation
 | 1. Fume hood operation
 |

**University Police Contact Information**

**Campus Services Facility on Bill MacDonald Parkway**

**Emergency: 650-3911 (24-hour)**

**Non-emergency: 650-3555**

***Call about:***

|  |  |
| --- | --- |
| 1. Emergencies
2. Alarms
 | 1. Stolen property
2. Hazards observed after normal business hours
 |

Abstracted from the Policies and Responsibilities Section (3) of the Western Safety Information Book

**Safety and Health Information for Supervisors**

**Including Faculty in Teaching or Supervisory Roles, Chairs, and Department Heads**

**All University faculty, staff, exempt professionals and student employees are required to comply with occupational safety and health regulations that apply to their actions and conduct on the job.**

**As a *person in a supervisory role,* you have additional responsibilities.**

**Contact the Environmental Health and Safety office for assistance.**

**What You Need To Know:** State, federal, and University occupational safety and health regulations require you to:

1. Report work-related illness or injury
2. Assure the availability of first aid trained personnel and first aid kits, as appropriate
3. Establish safety orientation programs for new employees
* Provide and assure the use of appropriate machine guarding safety devices
1. Provide and assure the use of personal protective equipment, such as gloves, goggles, hearing protectors, respirators, etc.
2. Establish fire prevention and emergency evacuation plans
3. Assuring safe storage and handling of hazardous materials
4. Provide information and training to employees about hazardous chemicals at work
5. Control employee exposure to harmful agents such as toxic substances, carcinogens, flammables, and explosives
6. Control employee exposure to harmful environments. such as high noise areas or confined space

A Central Health and Safety Committee and University safety bulletin boards have been established. Unit safety committees and safety boards may be created but are not required.

**What You Need To Do.**

1. Encourage employees to report accidents, incidents, and unsafe conditions to you.
2. Report all accidents or incidents on the Accidental Illness or Occupational Injury form or the Incident/Potential Hazard form (available from the Environmental Health and Safety office).
3. Determine what health and safety training is required for you and for others in your unit. Make sure all training is current and includes information on the particular hazards of a job. Training is available through the Environmental Health and Safety office on hazard communication, first aid, laboratory safety, fire safety and more.
4. Set a good example. Follow safety regulations yourself.
5. Provide required safety devices, safeguards, personal protective equipment and clothing. This includes equipment covers to reduce noise to acceptable levels, guards on moving parts of machinery, gloves, goggles, hard hats, hearing protectors, etc.

**Health and Safety Information For Supervisors, Chairs, and Department Heads**

1. Assure that periodic audits are conducted for areas under your supervision to identify and correct unsafe conditions or practices.
2. Investigate all accidents whether or not an injury is involved to discover potential problems and apply preventive measures for the future.
3. Remember the goal of accident investigation is to determine cause and prevention, not to establish blame. Employees should not feel threatened by accident investigations.
4. Conduct safety orientation sessions for each new or reassigned employee. An employee safety orientation checklist is available to help you design your safety orientation program.

**Responsibilities for Safety**

Faculty members while in a teaching and/or supervisory role, supervisors, and forepersons are responsible to the department head for implementing and carrying out the following responsibilities for the department head. Responsibilities of supervisory personnel can be delegated only with specific approval of the department head. Environmental Health and Safety provides training, information, interpretation, and assistance.

1. Provide for training assigned under D. 5. (Page 3-4) of employees and students before allowing them to work at any hazardous task.
2. Enforce the required use of personal protective equipment.
3. Where appropriate, provide written procedures regarding safe operation and emergencies for specific tasks or equipment.
4. Provide appropriate signs relating to specific departmental activities and procedures.
5. Review accidents and occupational illnesses and send completed reports to the Environmental Health and Safety office.

Chairs, department heads or center directors have the following responsibilities:

1. Provide an overall safe place for faculty, staff, and students within the unit's facilities.
2. When correction of safety-related items or activities is beyond a department’s purview, make written recommendations to the appropriate dean, Provost, or vice president who will review the issue posed. The Environmental Health and Safety office is to be notified of these safety-related items.
3. Annually review tasks to determine that appropriate safety issues, including safety equipment, are addressed. Refer issues as described in item 2.
4. Ensure that appropriate safety and operational procedures and records are prepared and disseminated.
5. Ensure that employees and students are trained in safety procedures, including new employee safety and health orientations.
6. Ensure that an audit is conducted on an annual basis following a standard checklist provided by the Environmental Health and Safety office. The audit is conducted quarterly in all units where personal protective equipment is used.
7. Document to employee files incidences of noncompliance with departmental, environmental, safety and health rules, policies and procedures.
8. Obtain specific items, such as first aid kits, or provide information, such as chemical inventories, as requested in the general or specific safety programs.

**Help.** The Environmental Health and Safety (EHS) office is available to advise and assist you in developing safety programs. Please call at X3064 or contact Environmental Studies 72.The EHS office manages worker compensation claims. Call for assistance if an employee is injured or becomes ill on the job. You may be asked to verify information about the accident or illness and to discuss employee return-to-work procedures.

Abstracted from the Policies and Responsibilities Section (3) of the Western Safety Information Book

***Western Washington University***

**Safety Orientation Checklist**

Position \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This checklist is used to conduct safety orientations. The orientation program introduces faculty, staff, and student employees to Western Washington University's policies and procedures, and reinforces our commitment to employee health and safety.

 Safety Rules and Regulations. *Review content and location of Western Washington University's Safety Information Book, and how to report unsafe conditions and practices*

 Safety Committee. *Describe the organization and function of any internal safety committee, Central Health & Safety Committee, and the location of safety bulletin boards*

 Emergency Plans. *Provide fire and evacuation drill information, location of primary and alternate exits, general emergency response information, and locations, types, proper use of fire extinguishers and hazards of fighting incipient fires..*

 First Aid. *Provide the location of first aid kits, availability of First Aid/CPR trained individuals in the area, and procedure for requesting emergency medical aid transportation.*

 Workers' Compensation and Accident Reporting. *Explain the accident reporting policy and procedure, and present the Accidental Injury/Occupations Illness Report form.*

 Work Site Job Safety Tour. *Identify potential hazard areas, locate safety and emergency equipment, and describe the proper use and care of protective equipment*

 Specific Job Safety Practices (additional checklist on the back of this page) *Review job duties with emphasis on safety practices, preventive measures, and training requirements*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Supervisor's Name Employee's Name Date

(Please Print) (Please Print)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

Supervisor's Signature Employee's Signature Date

**Your signature implies nothing more than that you, the employee, have received safety orientation and understand the safety rules that apply to your work site.**

***Western Washington University***

**Specific Job Safety Orientation**

 Motor Vehicle Safety. *Proper equipment maintenance, use of seat belts, vehicle fire extinguisher, and the Transportation Office's Operator's Checklist booklet*

 Hazard Communication. (Only for non-laboratory employees working with hazardous materials. *Chemical hazards employees work with, protective equipment, proper labeling of containers. MSDS location and how to read. Chemical waste.*

 Asbestos. *Medical monitoring, training, personal protective equipment, and protective work practices*

 Respirators. *Medical monitoring, training, fit test*

 Fall Protection. *Training equipment, notification system*

 Lockout/Tagout. *Energy Control Plan, training, locks, tags*

 Confined Space. *Training, equipment, ventilation, air monitoring, communication, permit*

 Bloodborne Pathogens. *Protective equipment, universal precautions, waste disposal*

 Laboratory Standard/Chemical Hygiene. *Written Chemical Hygiene Program, elements of the standard, medical evaluation, waste disposal availability, personal protective equipment, protective work practices*

 Trenching and Shoring. *Training, competent person*

 Hearing Conservation. *Training and baseline audiological test*

 Tuberculosis.  *Training*

 Specialized Tools and Equipment

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor's Signature Employee's Signature Date

**Your signature implies nothing more than that you, the employee, have received safety orientation and understand the safety rules that apply to your work site.**



**Accidental Injury/Occupational Illness Report**

***Please complete this report within 24 hours of all accidental injuries or occupational illnesses/exposures. This report is submitted to EHS for the sole purpose of fulfilling state and University notification requirements. This report is not an admission of fault nor has any determination of fault been made. The information reported is a brief summary of known facts at this time and is subject to change.***

(Please Print)

 ❒ Employee ❒ Student Worker ❒ Student

Name: ❒ Volunteer ❒ Graduate Student ❒ Visitor/Other

Address: Campus Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone: \_\_\_\_\_\_\_\_\_\_ Campus Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Social Security #: \_\_\_\_\_\_\_\_\_\_ Date of Hire \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position: \_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of injury \_\_\_\_\_\_\_\_\_\_\_\_ Time of injury AM / PM Time of shift start AM / PM

Exact location of accident/exposure:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What were you doing at the time of injury or exposure?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Part(s) of body affected: \_\_\_\_\_\_\_\_\_\_\_\_ Type of injury: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Describe accident/exposure in full detail (what, how, where, machinery, etc., involved):

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To whom did you report this?:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_Time:\_\_\_\_\_\_\_\_\_AM / PM

List any witnesses:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Did Police or Emergency services respond? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Physician/Hospital name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Tele.#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Treatment involved:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In your opinion, was injury caused by an unsafe act (activity/movement) or an unsafe condition (machinery, weather)? Please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In your opinion, what could be done to correct it? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Return to: Environmental Health and Safety

 Environmental Studies 72, Mail Stop 9070

 Bellingham, WA 98225-9070

 (360) 650-3064  Fax 650-6514  *Supervisor's Report on Back of Page*



**Supervisor's Report**

 (Please Print)

Employee's name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Department:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Exact location of accident/exposure: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Same as employee report

Date and time reported to you:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Same as employee report

Last day worked \_\_\_ Return to work full duty date \_\_Return to restricted work date\_\_\_\_\_\_\_\_\_

Names of witness(es) interviewed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Immediate action taken in response to injury: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In your opinion, what actions, events, or conditions contributed to the accident:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What recommendations do you suggest for prevention and follow up:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Supervisor’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Supervisor's signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_

Supervisor's title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Campus telephone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Environmental Health and Safety Report**

 (Please Print)

 Not required/applicable

What actions, events, or conditions may have contributed to the accident:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please explain your position, or cite specific regulations, policies, procedures, or other similar factors that apply:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Individuals contacted:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Corrective action taken:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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What recommendations for prevention, follow-up, or training do you have:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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EHS signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***RETURN TO: Environmental Health and Safety, Environmental Studies 72, Mail Stop 9070***



**Environmental Health and Safety**

Environmental Studies 72, Mail Stop 9070

Bellingham, WA 98225-9070

(360) 650-3064 Fax (360) 650-6514

**Accidental Injury/Illness Reporting Procedure**

Washington State law requires that a worker immediately report any on-the-job injury to his or her employer ([RCW 51.28.010](http://apps.leg.wa.gov/rcw/default.aspx?cite=51.28.010)).

**Employee Responsibilities**:

Report all injuries, regardless of severity.

Fill out a Western Washington University Accidental Injury/Occupational Illness report and give it to your supervisor within 24 hours of the accident.

 **Medical Treatment:**

1. Inform the attending physician that the injury is job-related.
2. Complete the worker’s statement on the Washington State Fund Accident Report

 at the doctor's office or hospital.

**Physical Restrictions or Off Work:**

1. You must bring a statement from your doctor if time off work is ordered.
2. This statement must include the period of time you will be unable to work, and what your physical restrictions are.
3. If you are unable to physically bring the statement in, inform your supervisor by

 telephone and then mail the doctor’s statement to your supervisor.

1. Check in with your supervisor once a week while you are off work to update your progress.
2. For each extension of time off work or physical restriction prescribed by your doctor, documentation must be submitted to your supervisor.
3. Claims Management will contact your doctor regarding the University’s proactive return-to-work program.
4. You must obtain a release from your doctor when you are able to return to work. Give the release to your supervisor.
5. ***You will not be allowed to return to regular duties without a release.***

The Environmental Health and Safety Department is the only University department authorized to complete and sign the Employer Section of the Washington State Fund Accident Report. Forms received by the employee’s department must be forwarded to Environmental Health and Safety, Environmental Studies 72, Mail Stop 9070. If you have any questions, contact Workers’ Compensation Claims Management, 650-2947 or 650-3064.

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Back of Accident Reporting Procedure

**Environmental Health and Safety**

**Incident/Potential Hazard Report Form**

# Document No. \_\_\_\_\_\_\_ Work Order Written  No  Yes Number: \_\_\_\_\_\_

** Incident Report  Possible Hazard Observed**

**Report Information:**

**Reported/Observed By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_**

**Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Mail Stop: \_\_\_\_\_\_Phone:**

**Date Observation/Incident: \_\_\_\_\_\_\_\_\_\_\_Time: \_\_\_\_\_\_AM PM**

**Exact Location: (Building, room, street, etc.): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Description of Incident/Potential Hazard: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Information Taken By:**

***initials***

***Investigation Information:***

**Investigated by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_**

**Property Damage: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Person(s) involved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Actions Taken by Investigator (at the time of investigation): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Investigator’s or EHS Departmental Recommendations for Prevention and/or Corrective Actions:**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Follow-up Information  or Outcome ** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***For EHS Dept Use Only:*****Internal Routing:**  | **Date Entered into Database****(Initial):** | **Incident/Hazard Code****(See Below)** | **Follow-up Date:** | **Date Report Closed:****Location Filed:** |

***Fall TS Chem Bio Fire IAQ Ergo Const Misc OAQ EE WQ AI(AccInv) Noise Elec Strk***

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Back of Incident/Potential Hazard Report

**Western Washington University**

**First Aid Kit Procedures**

First aid kits are to be accessible to faculty, staff, exempt professionals, and student employees at all times while they are at work in compliance with Washington Administrative Code, Part [296-800-15020](http://www.lni.wa.gov/wisha/rules/corerules/HTML/296-800-150.htm). Special first aid supplies are to be made available as appropriate when working with specific chemicals. It is suggested that kits be labeled with emergency telephone numbers, available from the Environmental Health and Safety office.

Protective equipment is to be available to persons providing first aid or CPR. This includes gloves of latex, nitrile, or other suitable material and CPR protective shields.

Each department head, director, or chair is responsible for providing first aid kits for his or her respective unit. She or he is also responsible for ensuring that CPR face shields and protective gloves are available, and that supplies are adequate and in good condition. This may be accomplished by delegation.

Faculty and staff members are responsible for notifying the appropriate person, usually a supervisor or departmental administrator, if first aid supplies are used or needed.

The Environmental Health and Safety office provides consulting services to help departments and employees meet these requirements.

**Guidelines**

Kits are to be appropriate to the number of people who will be using them. Kits should be checked monthly to ensure a complete stock of items. Contact Environmental Health and Safety for additional information.

Environmental Health and Safety will assist in obtaining pre-approval by a consulting physician if you require specialized first aid supplies and procedures for individual chemicals. Specific first aid supplies and use protocols for cyanide and hydrofluoric acid, which are included in this procedure, were approved by a physician in 1994.

In accordance with the University’s Emergency Response, Hazard Communication and Chemical Hygiene programs, personnel in each department are to receive training relating to the location of first aid kits and persons in their area trained in CPR and first aid. This information is to be incorporated into the departmental emergency plan as described in the *Safety Information Book.*

**Western Washington University**

**Cyanide Poisoning Treatment**

1. Inventory your chemicals and keep cyanide compounds stored safely. Those not requiring

refrigeration are under lock and key.

2. Plan your experiment carefully. Inform someone in the laboratory or area that you are working with cyanide-containing chemicals.

3. Each person working with or around cyanide is to be trained in emergency procedures

4. Wear a laboratory coat, gloves, and suitable eye protection. Perform procedures in a chemical fume hood, to ensure that airborne concentrations are below the Permissible Exposure Limit (PEL). Refer to the University’s chemical hygiene program or contact the Environmental Health and Safety office for PEL concentrations.

1. Hydrogen cyanide has a characteristic odor of bitter almonds. If cyanide exposure is known or suspected, including ingestion, inhalation, skin contact or eye contact, the following symptoms may be present:

 **EARLIEST SYMPTOMS**: Weakness, Dizziness, Headache, Nausea, Confusion, Vomiting, Loss of consciousness, Respiratory rate is initially increased and then becomes slow and gasping.

 **AT HIGH CONCENTRATIONS**: Instantaneous collapse and cessation of respiration.

1. In the event of a cyanide emergency, activate the emergency response system by calling an aid car at 911.

Call the University Police at 3911.

**If you are working after hours**, you **must** call University Police in order for Bellingham Fire Department paramedics to access the cyanide antidote, located in the Chemistry Office (room 270).

1. Treatment for known or suspected cyanide poisoning is provided intravenously.

The **Cyanokit**, **located in a clear box in the Chemistry Office (Room 270)** near the entrance, contains one dose .

Bellingham Fire Department (BFD) paramedics **must** be called to provide the treatment.

BFD paramedics have received specific training on **Cyanokit** administration.

8. Evacuate the contaminated area and close all doors and remove the victim to a safe area. Use suitable protective equipment to handle a contaminated victim, as appropriate.

9. In case of respiratory arrest, administer rescue breathing using a rescue breathing protective device with a one way valve.

10. After the emergency, ensure that a replacement **Cyanokit** is ordered**.** Replace the **Cyanokit** when expired. Contact the Environmental Health and Safety office for assistance.

**Western Washington University**

**Hydrofluoric Acid Burns On Skin First Aid**

1. Skin contact with hydrofluoric acid may cause severe burns. Even at concentrations of less that 50% hydrofluoric acid, the burns may be deep and cause considerable damage. Calcium gluconate gel has been demonstrated to be beneficial in treating such burns. It is to be kept with first aid supplies in areas using hydrofluoric acid.

2. In the event of a hydrofluoric acid burn, activate the emergency response system by calling 911 for an aid car. Also call the University Police at 3911.

3. Remove the victim to a safe location. Use appropriate protective gear, such as gloves or a respirator, when handling a contaminated victim depending on the severity of contamination. Do not become an additional victim.

4. Flush the skin with water for at least 10 minutes.

5. Remove contaminated clothing during washing. Cut away clothing if necessary to avoid injuring affected skin.

6. For skin exposures, calcium gluconate gel is offered to the victim. If accepted, it is applied gently to the skin. If not, continue flushing with water until medical assistance arrives.

7. Following the incident involving use of calcium gluconate gel, ensure that the supply of gel remains adequate. Replace the gel when the expiration date is exceeded.

8. **All** hydrofluoric acid burns are to be evaluated by a physician, usually in the emergency room. This includes burns to a very small area of the skin.

 References:

 Poisondex (R) topic: hydrofluoric acid, 1989.

 Bronstein, A.C. and Currance, P.L. Emergency Care for Hazardous Materials Exposures. Mosby Company, 1988.

 Allied Signal, Inc., HF Products Group. Recommended Medical Treatment for Hydrofluoric Acid Exposure. Morristown, New Jersey, 1991.

**Information On Calcium Gluconate Gel**

**For Hydrofluoric Acid Burns On Skin**

The following information is provided regarding the treatment for hydrofluoric acid burns on skin.

1. Bronstein and Currance indicate that with dilute hydrofluoric acid burns, less than 20%, calcium gluconate gel is to be applied to the skin. This gel apparently cannot be purchased commercially in the United States because it is not approved for sale by the Food and Drug Administration.
2. Allied Signal, a hydrofluoric acid manufacturer, indicates all hydrofluoric acid burns should have calcium gluconate applied after water washing.
3. Obtain calcium gluconate gel (call EHS).
4. It may be prepared as needed by adding 3.5 grams of calcium gluconate powder into 5 ounces of water soluble lubricant, such as K-Y or Surgilube.
5. The major action of this gel is to provide calcium to tissues. The calcium will bind with fluoride to make calcium fluoride.
6. The use of calcium gluconate is not a mandatory treatment, but is to be offered to the injured person, since the treatment has been demonstrated to be beneficial.

References:

Bronstein, A.C. and Currance, P.L. Emergency Care for Hazardous Materials Exposures. Mosby Company, 1988.

Allied Signal, Inc., HF Products Group. Recommended Medical Treatment for Hydrofluoric Acid Exposure. Morristown, New Jersey. 1991.

**Office Safety and Health Checklist**

*Offices are not completely safe places to work. Approximately 40,000 office workers suffer disabling work injuries each year. Principal causes of office injuries include:*

1. *Falls*
2. *Handling materials or equipment, including pencils, scissors, staplers*
3. *Collisions with furniture or equipment*
4. *Vehicle accidents*
5. *Flying particles*

 Aisles, doorways, and corners are free of obstructions.

 File cabinet drawers and storage closet doors do not open into walkways.

 File drawers are opened one at a time and kept closed when not in use.

 Sharp edges, burrs, or splinters are removed from furniture.

 Clutter is minimized.

 Phone lines, electrical or extension cords are secured under desks or along baseboards.

 Where electrical cords cross walkways, they are covered by runners.

 Sharp tools such as scissors are stored safely with points or cutting edges protected or away.

 Chemicals are stored safely.

 Heavy items are stored on lower shelves. Small, loose items are boxed and labeled.

 Floor surfaces are clean, dry, and free of debris or tools. Carpets are secured.

 Emergency exits are visible and unobstructed, with adequate aisle spaces in exit approaches.

 A step stool or stepladder is available to reach high objects safely.

 Departmental emergency procedures are in place for the office.

 A first aid kit is available.

 Persons who are certified in first aid and CPR are available.

 Emergency phone number labels are on telephones.This page is intentionally left blank—

Back of Office Checklist**Safety and Health Audit Checklist**

Department \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This audit is a reminder to look for unsafe practices, or potential accident areas. Mark an (Y) for Yes, (N) for No, or a (N/A) for Not Applicable. File this report with the Central Health and Safety Committee through Environmental Health and Safety, Mail Stop 9070.

|  | **Locations/rooms ⇒** |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Item ⇓** |  |  |  |  |
| **A** | **Housekeeping & General Safety** |  |  |  |  |
| 1 | Are the corridors kept clear of obstructions? |  |  |  |  |
|  2 | Are hard floor and carpeting surfaces free of tripping and slipping hazards? |  |  |  |  |
| 3 | Are floor surfaces uneven or in need of repair? |  |  |  |  |
| 4 | Is the area free of clutter? |  |  |  |  |
| 5 | In areas where items are stored or placed overhead, is there ready access to a suitable step stool, step ladder, or similar device? |  |  |  |  |
| 6 | In storage areas, are the heavier items stored at waist level, with the lightest objects placed on the higher shelves? |  |  |  |  |
| 7 | Are stair treads in good condition? |  |  |  |  |
| 8 | Are stairwell handrails in good condition? |  |  |  |  |
| 9 | Are stairwells completely clear of obstructions and any objects? (Stairwells may not be used for storage) |  |  |  |  |
| 10 | Are broken and unsafe pieces of equipment physically removed from use? |  |  |  |  |
| **B** | **Fire Protection** |  |  |  |  |
| 11 | Are all fire alarm pull stations and fire extinguishers accessible?  |  |  |  |  |
| 12 | Is all storage kept at least 18” below the sprinkler head keeping sprinklers unobstructed?  |  |  |  |  |
| 13 | Are all EXIT signs illuminated? |  |  |  |  |
|  14 | Are extension cords used for temporary use only? |  |  |  |  |
| **C** | **Ergonomics** |  |  |  |  |
| 15 |  Are workstations or other equipment adjusted to fit the user? |  |  |  |  |
| 16 | Have employees been advised of the availability of ergonomic assessments? (Call EHS at x2047) |  |  |  |  |
| 17 |  Is lighting appropriate for the task(s) performed? |  |  |  |  |
| 18 |  Is surface glare from sunlight or excessive lighting addressed? |  |  |  |  |
| 19 | Are breaks scheduled appropriately for the task(s) performed? |  |  |  |  |
| 20 | Is task variation considered for very repetitive tasks? |  |  |  |  |
| 21 | Is there sufficient ventilation? |  |  |  |  |
| 22 | Are any areas excessively noisy? |  |  |  |  |

**Safety and Health Audit Checklist**

Department \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **D** |  **Emergency Management** |  |  |  |  |
| 23 | Is the departmental first aid kit stocked and inspected regularly? |  |  |  |  |
| 24 | Are emergency phone labels posted on phones? |  |  |  |  |
| 25 | Is the Western Emergency Response Guide posted in common area(s)? |  |  |  |  |
| 26 | Have you completed Section 2 of your Safety Information Book? |  |  |  |  |
| **E** | **Personal Protective Equipment (PPE)** |  |  |  |  |
| 27 | Has personal protective equipment been provided to all employees needing it? |  |  |  |  |
| 28 |  Has training in the proper use of PPE been provided? |  |  |  |  |
| 29 |  Has a hazard assessment certification been completed and updated within a year? |  |  |  |  |
| **F** | **Tools** |  |  |  |  |
| 30 | Are hand tools in good condition? |  |  |  |  |
| 31 | Are all power tools grounded (3 prong plugs) or marked as double insulated? |  |  |  |  |
| 32 | Are tools stored properly (in cabinets, hung on a rack, etc)? |  |  |  |  |
| **G** | **Laboratory, Shop, and Studio Safety** |  |  |  |  |
| 33 | Are aisles clear and unobstructed to permit ready access out of the area in case of fire or another emergency? |  |  |  |  |
| 34 | Are Material Safety Data Sheets (MSDS) available for ALL products? |  |  |  |  |
| 35 | Are all chemical containers labeled to indicate their contents? |  |  |  |  |
| 36 | Are gas cylinders properly chained or secured |  |  |  |  |
| 37 | Is your chemical inventory up to date? |  |  |  |  |
| 38 | Are flammables, acids, and bases all stored separately from each other?  |  |  |  |  |
| 39 | Are flammable storage cabinets located out of hallways and exit paths? |  |  |  |  |
| 40 | Are all non-explosion proof refrigerators entirely free of flammables? |  |  |  |  |
| 41 | Are all refrigerators labeled to indicate whether or not they are safe for the storage of flammables? |  |  |  |  |
| 42 | Do you flush your emergency eyewash weekly and document? |  |  |  |  |
| 43 | Are emergency eyewash showers, eyewash stations and fire extinguishers unblocked by equipment? |  |  |  |  |
| 44 | Are corrosives stored only on the lowest shelves? |  |  |  |  |
| 45 | Are food products, including beverages of any sort, kept out of the lab, shop, or studio work environment at all times? |  |  |  |  |
| 46 | Are all chemical containers labeled to indicate any hazard which many be present, i.e. TOXIC, CORROSIVE, FLAMMABLE, etc? |  |  |  |  |

**Safety and Health Audit Checklist**

Department \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **H** | **Machinery** |  |  |  |  |
| 47 | Are all moving parts of the equipment (belts, pulleys, etc) adequately guarded or interlocks properly maintained so that any contact while the equipment is running is not possible? |  |  |  |  |
| 48 | Are safety procedures posted for oiling, cleaning, adjusting or any other routine maintenance?  |  |  |  |  |
| 49 |  Are all employees aware that it is dangerous and illegal to work under a suspended load?  |  |  |  |  |
| 50 |  Are all employees aware that every source of potential energy to equipment must be isolated (LockOut-TagOut) prior to working on that equipment? |  |  |  |  |

* Please explain all “No” responses and their locations on the “Safety Audit Checklist Attachment Page”. Be as specific as possible. All “No” responses may require further investigation by Environmental Health & Safety staff.

**Safety Audit Checklist Attachment Page**

Please denote which Section and Question Number when providing an explanation for any “No” answers on the Checklist in the space provided below. If additional pages are needed, please photocopy this form.

 **SECTIONS**

1. Housekeeping & General Safety
2. Fire Protection
3. Ergonomics
4. Emergency Management
5. Personal Protective Equipment (PPE)
6. Tools
7. Laboratory, Shop and Studio Safety
8. Machinery

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| **Section** | **Question #** | **Explanation** |
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**Fire Fighting Information**

**How to Use a Portable Fire Extinguisher**

Remember the acronym, “P.A.S.S:”

|  |  |
| --- | --- |
| **P** | **Pull** the pin. Some extinguishers require releasing a lock latch, pressing a puncture lever or taking another first step |
| **A** | **Aim** low. Point the extinguisher nozzle (or its horn or hose) at the base of the flames |
| **S** | **Squeeze** the trigger or handle while holding the extinguisher upright. This releases the extinguishing agent. |
| **S** | **Sweep** the extinguisher from side to side. Keep the extinguisher aimed at the base of the fire and sweep back and forth covering the area of the fire with the extinguishing agent until it appears to be out.Watch the fire area. If the fire breaks out again, repeat the process. |

**Hazards and Precautions for Fighting a Fire with a Portable Extinguisher**

Before you begin to fight a small fire:

1. Make sure everyone has left or is leaving the building.
2. Make sure the fire department has been called.
3. Be certain the fire is confined to a small area, such as a wastebasket, and that it is not spreading beyond the immediate area.
4. Be sure that your back is to a safe and unobstructed exit to which the fire will not spread.
5. Be sure that your extinguisher is the proper size and type for the fire at hand and that you know how to use it.

***It is reckless to fight a fire with an extinguisher in any other circumstances.*** Instead, leave immediately, close off the area, and leave the fire for the fire department.

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Back of Fire Extinguisher Information**Office Fire Safety Policy and Procedure**

**1. Policy**

It is the policy of Western Washington University that provision of a safe and healthful workplace includes minimizing the risk of fire and maximizing the life-safety of employees and students.

Compliance with the procedures provided below rest with the department head or center director, who may delegate these tasks. Supervisors are responsible to the director or department head for areas under their purview. Each person is responsible for awareness of fire safety and bringing fire hazards to their supervisor's attention or the attention of the Environmental Health and Safety office if a supervisor's response is not forthcoming.

**2. Procedure.**

To reduce the risk of fire at Western Washington University, the following procedures are to be followed, unless specific approval is received through the Environmental Health and Safety office.

 a. **All** electrical equipment for personal use at the University, including but not limited to extension cords, multiple outlet strips, coffee makers, microwave ovens, and space heaters, shall bear the Underwriter's Laboratories seal of approval. The Facilities Management Electrical Shop may for a fee prepare electrical devices in accordance with local ordinances.

 b. All extension cords shall be rated adequate to the capacity of the appliance. Cracked, worn or damaged cords shall be replaced. Only 3-wire extension cords shall be used for appliances with 3-prong plugs. Extension cords shall never be covered with objects or paper while in use or coiled.

 c. Multiple plugs shall not be attached to extension cords. Appropriately-rated multiple outlet strips may be used if they are plugged directly into an outlet, and if the appliance is directly plugged into the outlet strip.

 d. No hotplates or units with open or exposed heating elements may be used.

 e. Combustible materials such as recycled paper and plastic shall be kept away from space heaters, coffee makers, and other electrical devices.

 f. Timers which turn coffee makers and space heaters off automatically are available on special order. Contact Environmental Health and Safety for information. Off-timers or units which automatically turn power off are highly recommended. Under no circumstances shall timers which turn ON automatically be used.

 g. Coffee makers which have been recalled by the manufacturer in conjunction with the U.S. Consumer Products Safety Commission shall not be used. Information is available from Environmental Health and Safety (X3064).

 Recalled units include:

1. Some GE or Universal brands manufactured between 1976 and 1984
2. Mr. Coffee cone filter microwave coffee maker
3. Some Proctor-Silex, Sears, or J.C. Penney-brand automatic drip coffee makers manufactured in 1985 and 1986
4. Some Hamilton Beach under-the-cabinet coffee makers manufactured in 1987-88
5. Some under-cabinet model 15306 Sunbeam coffeemaster flavor-lock drip coffee makers
6. Some J.C. Penney-brand coffee makers manufactured in May 1980
7. Mr. Coffee CMX-1000 12-cup 4-button digital clock model manufactured in 1981-1982
8. Nobility-brand 10-cup automatic coffeemakers, Models 151 or 232 prior to 1978
9. Each area administrator shall assign specific personnel the responsibility to ensure that all electrical appliances are turned off at the end of each work day. Back-up assignments and appropriate communication processes shall be established by each department to ensure equipment is off.

**Back Safety**

**Preventing back injuries doesn't take a lot of extra effort just extra thinking.**

**Performing the Lift**

Stand close to the load with feet wide apart.

Squat down, bending at the hips and knees.

Grip and hold the object firmly. Keep the load close to your body for less back pressure.

Use your legs to bring you to a standing position, keeping your back straight.

**Shoveling**

Make sure your grip and balance are solid.

Use a long-handle shovel to minimize bending.

Bend your knees, not your back.

Use the strength of your thigh muscles to bring you to an upright position.

Increase your leverage by keeping your bottom hand low and toward the shovel blade. This allows your arm and shoulder strength to take the load, instead of your back.

**Push, Don't Pull**

Whenever you have to move something that's on a cart, a dolly, a hand truck, or in a bin with wheels, push the load. Pushing puts less strain on your back.

**Turn, Don't Twist**

Instead of twisting, turn your whole body in the direction that you want to go.

**Move, Don't Reach**

If you can, arrange your workstation so that the things you work with most are within easy reach. Move things closer to you or move your entire body closer to them.

**Ask for Assistance**

Working safely may include assistance to perform a particular task or part of a task.

Work requiring assistance should continue only when it can be performed safely. If a second person is required, work on that task only is to stop until assistance is available.

Request assistance if performing an aspect of a job alone is unsafe or may cause injury.

**Remember...**

1. When working on your back keep knees bent to flatten back and relieve swayback.
2. When working low bend knees deeply to relieve back strain.
3. Plant feet firmly for all lifting jobs. Slips and jerks can injure the back.
4. Dismount carefully from platforms, vehicles, etc. Don't jump.
5. When driving keep seat forward. Knees are bent, higher than hips. Change positions often.
6. Use lifting and moving tools—hoists, lifts, hand trucks, dollies, etc., to save work and strain.

**Eye Safety at Video Display Terminals**

Two common problems related to visual stress are those of eye focusing and eye coordination. The quality of the characters on a computer screen is much less well defined than normal hard-copy print characters and, for some individuals, this relative lack of image definition inhibits the ability of the eye to focus. Uncorrected vision problems can cause unnecessary eyestrain and headaches.

Have your eyes examined regularly, and tell your optometrist or ophthalmologist how often you use a computer and your workstation configuration. Bifocal wearers may need a different prescription for computer work. In certain cases, specialized eyeglasses can be prescribed. These computer glasses can provide workers with a better ability to maintain focus at the computer screen.

Since the eyes naturally relax at a slightly downward gaze, adjust the height of each monitor so that the middle of the screen is about 5 to 6 inches below eye level. The eyes should be about even with the top of the monitor. Keeping the VDT screen clean also helps reduce vision complaints.

While the most comfortable viewing distance varies from person to person, most eye care professionals recommend sitting 16 to 30 inches away from the screen. Use an adjustable document holder that allows reference material placement at the same height and plane as the computer screen (usually 16 to 24 inches away from the eyes). Proper placement of materials may help relieve eye coordination stress.

If glare from a wall or window is a problem turn the screen to a right angle. Use curtains or blinds on your windows. Turn off lights that reflect on the screen. If glare and reflections can't be reduced enough, try placing a non-glare filter over the surface of the screen or a hood to the top of the terminal. If your work surface is bright or shiny, a dull-textured pad on the table or desk will reduce glare from the work surface.

All computer users should take periodic "vision breaks." You can quickly relieve some discomfort with a few simple techniques and they take only seconds to do.

***Blinking.*** To keep your eyes moist, prevent itching, and aid in cleaning, blink them often.

***Palming****.* To rest your eyes from the light, shape your hands into shallow cups and place them lightly over your closed eyes. Hold them there for one minute.

***Refocusing****.* To exercise the muscles that focus your lenses, periodically look away from the computer screen and focus on an object at least 20 feet away.

***Eye Rolling.***To exercise the muscles that move your eyes, roll your eyeballs around clockwise three times, then counterclockwise three times. Make wide circles.

***Work Station***

**Comfort Exercises**

Sitting for extended periods of time can cause muscle tension and stiffness to build up in your neck, back, shoulders, hands, wrists, and fingers. Short and simple exercises at your work station can increase flexibility and prevent these discomforts.

**Shoulder Roll.** With your back straight and arms relaxed at your sides, or with the arms extended and locked, roll your shoulders back towards your ears, making a complete circle. Repeat this lifting and dropping the shoulders five times.

**Arm Circles.** Raise your arms to the sides, elbows straight. *Slowly* rotate your arms in small circles forwards, then backwards. Lower your arms, then repeat three times.

**Arm Stretch.** While sitting or standing, raise your arms over your head, stretching as high as you can. Then bring your arms back down. Rest a moment. Repeat two times.

**Arm Pulls.** Gently pull elbow across chest toward opposite shoulder and hold for five seconds. Repeat five times, and then repeat entire exercise, pulling other arm.

**Neck Flex.** After hanging your head to your chin hold this stretch for five to ten seconds, then *slowly* raise your head to a neutral position. Repeat this exercise three times.

**Neck Glide.** Glide your head back, as far as it will go, keeping your head and ears level. (Doing it correctly creates a double chin.) Now glide your head forward. Repeat three times.

**Wrist Flex.** Put your right elbow on a table, hand raised, palm out. With your left hand, *gently* bend your right hand back toward the forearm. Hold five seconds. Repeat on the other side. Place hands at sides and shake them for 5-10 seconds.

**Finger Stretch.** Spread the fingers of both hands, palms down, far apart and hold for a period of five to ten seconds, then make a tight fist. Repeat this flexibility exercise three to five times.

**Finger Squeeze.** With a small foam ball in the palm of the hand, press the ball in the palm of the hand using your fingers to make a fist. Repeat 20 times on each hand.

**Thumb Squeeze.** With a small foam ball in the palm of the hand, press the ball in the palm of the hand towards the fingers. Do not use the fingers. Repeat 20 times, remembering to repeat with both hands.