

Kenosha County



Employee Safety Policies and Procedures

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**Kenosha County
Department of Personnel
Risk Management
1010 – 56th Street
Kenosha, WI 53140
P (262) 653-2800
F (262) 653-2491**

www.co.kenosha.wi.us



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Policy No.	001
Policy Name:	Safety Policy Statement
Control Date:	04/12/93 Rev. 08/2006

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It is the policy of Kenosha County to provide a place of employment free from recognized hazards in order to provide the safest of possible working conditions. Accidents cause untold suffering and financial loss to our employees and their families and cause an unnecessary drain of tax dollars when used to pay medical expenses and compensation as well as lost time away from work.

All levels of management will be held accountable to maintain a safe and healthy workplace environment for all employees, and to ensure their Department's compliance with all laws, rules and regulations, including those policies and procedures stated in the safety manual.

Every employee will adhere to the policies and procedures in the safety manual for their own safety and that of their co-workers. Employees and Supervisors must also be aware that safety will take precedence over expediency and shortcuts when performing their duties.

It is our desire and intent that the consideration of safety for both our employees and the general public in the performance of daily assignments bear as high a priority as the decision to commit funds or to complete a task which must be done.

Employees should be aware that every reasonable step will be taken to reduce the potential of an accident or injury related to their employment and they are encouraged to support management in the realization of this goal.

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1.0 Scope and Application

This safety manual was developed in accordance with the requirements of Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative Code as administered by the Wisconsin Department of Commerce. It contains provisions for both County-wide and individual departmental safety policies, rules and procedures. Employee responsibilities for complying with the policies and procedures contained in the safety manual are set forth below.

2.0 Responsibilities

All employees are responsible for complying with the requirements contained in this policy. See the individual sections contained in this policy for specific requirements. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

The responsibilities contained in this policy represent minimum safety related requirements that have been assigned to County employees. Additional responsibilities may be contained in departmental policies and procedures. Consult your Supervisor for more details.

4.0 Definitions

None.

5.0 Training

All employees will receive instruction in this policy at their time of assignment and whenever this policy is revised.

6.0 Policy Documentation Requirements

None.

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7.0 Division of Personnel

The Division of Personnel is responsible for the development, implementation, and/or coordination of all safety and health related programs, policies and procedures, including employee safety related training programs. The Risk Manager within the Personnel Division is the primary point of contact for all work-related safety and health issues and is responsible for the following activities:

- Development, maintenance, implementation, and/or coordination of all safety and health related policies and safety manual.
- Ensures all safety and health related training programs are conducted as required.
- Working closely with other departments to ensure that all safety policies and procedures are implemented.
- The performance of accident investigations and all associated activities.
- Worker's Compensation claims and investigations.
- Providing assistance in establishing qualifications and safety training necessary for each job classification.
- Developing controls to ensure that the policies and procedures in the safety manual are implemented and in compliance with all applicable laws, rules, regulations and ordinances.
- Providing assistance to other departments in determining the safety requirements for new equipment purchases and job activities.
- Co-Chairing Safety Committees.
- Advises the County Executive, Department Heads, Supervisors and employees of unsafe conditions or problems related to accident prevention and makes recommendations as appropriate for loss control.
- Directs departmental actions needed to ensure compliance with all safety and health requirements.

The Risk Manager will not fulfill obligations of Department Heads and/or Supervisors relative to providing a safe work environment, necessary equipment, training or inspections in the interest of accident prevention.

8.0 Department Heads

Department Heads are responsible for the safety, health and welfare of each employee within their department. The Department Head must become educated as to the required and desired safety and loss prevention criteria contained in the safety manual. Although it is normal practice for Supervisors to be delegated the authority to implement safety policies and procedures in some departments, the ultimate responsibility will rest with the Department Head.



The policies contained in the safety manual represent minimum safety requirements that are applicable to all employees and departments. Certain program areas require more detailed procedures and documentation that are unique to individual departments.

In these instances, and in instances where County-wide policies applicable to a specific departmental area have not been developed, Department Heads are responsible for developing departmental procedures and associated documentation that will be forwarded to the County Risk Manager for review and filing.

Appendix A of this safety manual summarizes the major departmental safety documentation requirements. Department Heads should consult each specific policy contained in the safety manual for more details, appropriate forms, and documentation requirements where required.

Department Heads are also responsible for ensuring that all employee training, inspections, audit and reviews of program areas applicable to their department are carried out as required (see inspection, audit and review policy and training requirements policy).

9.0 Supervisors

Supervisors are directly responsible for the safety and health of all employees under their supervision and are responsible for, but not limited to the following:

- Ensuring that all employees under their supervision and all activities performed within their department comply with the policies and procedures contained in the safety manual in addition to specific departmental safety rules and procedures.
- Ensuring that their employees attend and receive scheduled safety training.
- Reporting all unsafe acts, unsafe conditions, accidents and injuries immediately to the Risk Manager using established reporting procedures.
- Distribution and replacement of personal protective equipment.
- Implementing controls to address recognized safety hazards according to the following hierarchy:
 - Eliminate the hazard if at all possible.
 - Remove unsafe equipment from service and alert affected employees.
 - Restrict access to unsafe areas.
 - Implement engineering controls.
 - Implement administrative controls.
 - Implement personal protective equipment requirements.



10.0 Employees

All employees are expected to place safe work practices as their highest priority during the performance of their job activities and are required to adhere to the policies and procedures contained in the safety manual. Failure to follow safety policies and procedures will subject employees to disciplinary action, up to and including discharge. All employees are responsible for the following:

- Complying with the policies and procedures contained in the safety manual in addition to specific departmental safety rules and procedures.
- Attending and completing all safety training requirements specified by their Supervisor.
- Using safety and personal protective equipment that is provided to the employee for the performance of their daily work assignments.
- Wearing appropriate work clothing as prescribed by supervision.

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End Policy



1.0 Scope and Application

Various inspections, audits and program reviews are required by the policies set forth in the safety manual. For convenience, these requirements have been summarized in Appendix B of the safety manual. Consult the individual policies for further details regarding a specific requirement.

2.0 Responsibilities

Risk Manager:	Support and management of this policy. Reviews audit results.
Department Heads:	Ensures that the requirements of this policy are completed as required. Performance and documentation of audits and reviews.
Supervisors:	Performance of inspections.
Employees:	Performance of daily inspections. Notify Supervisor of deficiencies.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents the minimum safety related inspection, audit and review requirements associated with the County's safety program.

4.0 Definitions

Inspection:	Routine physical inspection of equipment and work area for proper operation and general safety.
Audit:	Spot check that determines if procedures are being properly followed.
Review:	Detailed analysis to determine if policy is effective and current.

5.0 Training

Department Heads and Supervisors will receive training in this policy at their time of assignment and whenever this policy is revised.

6.0 Documentation Requirements

See the forms section of the safety manual.



Policy No. 003

Policy Name: Inspections, Audits and Reviews

Control Date: 08/2006

7.0 Inspection, Audit and Review Findings

Equipment failing to pass an inspection shall be red-tagged by the Supervisor and shall not be allowed to continue service until it has been repaired.

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End Policy



1.0 Scope and Application

Various policies contained in the safety manual require employee training on both an initial and recurring basis. For convenience, these requirements have been summarized in Appendix C of the safety manual. Consult the individual policies for more details regarding training type and frequency.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Ensures that the requirements of this policy are completed as required. Ensures that all employees within their department receive appropriate training and instruction on all safety policies applicable to their job.
Supervisors:	Ensures attendance of employees at all training sessions.
Employees:	Attend all scheduled training sessions.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

The safety training requirements summarized in this policy represent minimum safety related training that shall be provided to employees. Additional safety related training may be provided within each department.

4.0 Definitions

Authorized Employee:	Employees specifically authorized by management to perform certain job related tasks.
Affected Employee:	Employees who are affected by the activity being performed.

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5.0 Training

Department Heads and Supervisors will receive training in this policy at their time of assignment and whenever this policy is revised. Training shall be provided to affected employees at the intervals listed below. Affected employees are described in the individual safety policies:

- To all new employees before they begin work.
- As required by a specific safety policy contained in the safety manual.
- As a component of regularly scheduled department meetings.
- As a component of on-the-job training.
- When employees are assigned to new jobs.
- When new equipment, tools, or processes are introduced.
- When new hazards are identified.
- Whenever Supervisors believe additional training is necessary.
- Whenever employees demonstrate a lack of understanding of the training received.

6.0 Documentation Requirements

Documentation showing that employees have received training in the requisite program areas shall be provided to the Personnel Department in an approved format.

7.0 Method of Training

Department Heads are free to utilize instructional and training methods that best fit their departmental needs provided that such methods are effective and comply with all applicable OSHA, Department of Commerce and Kenosha County requirements.

End Policy



1.0 Scope and Application

In order for the County and its facilities to operate effectively toward the goal of providing a safe working environment, County employees must be aware of those rules and regulations which impact the manner in which they perform their duties. These General Work Rules represent the minimum acceptable standards of safety conduct expected of all employees. Any employee who fails to adhere to these work rules or who violates such rules may be subject to disciplinary action up to and including dismissal.

These rules are not intended to be all inclusive and additional safety policies may be applicable to your job classification and/or work being performed. Questions regarding these rules or the applicability of other safety policies to your work should be brought to your Supervisor's attention.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Ensures that work rules are communicated to employees.
Supervisors:	Communicates work rules to employees.
Employees:	Follow all work rules.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

Individual departments may develop their own internal general work rules which will supplement those contained in this policy. Consult with your Supervisor on department specific work rules.

4.0 Definitions

None.

5.0 Training

All employees will receive instruction in this policy at their time of assignment and whenever this policy is revised.

6.0 Documentation Requirements



None.

7.0 Safety Conflicts

In the event that a disagreement or conflict arises as to whether or not an unreasonable level of risk is involved with a particular task, the Risk Manager shall be contacted and will work with the Department Head toward corrective action on the task in question.

8.0 General Work Rules

1. All employees are required to report unsafe conditions, acts or equipment to their Supervisor immediately.
2. All employees are required to report accidents and injuries, no matter how minor, to their Supervisor immediately.
3. Horseplay, wrestling, practical jokes and throwing objects are forbidden.
4. Smoking is only allowed in areas expressly designated for that purpose. Smoking is forbidden at all times when refueling equipment and when working with hazardous and flammable chemicals.
5. Wearing apparel must be consistent with departmental policies.
6. The drinking of alcoholic beverages and use of illegal drugs of any kind during working hours is prohibited.
7. Lighting shall be appropriate and adequate for the activities being performed.
8. The public will be kept away from all work areas that could expose them to a hazard. This protection shall be in the form of proper signage and/or use of barricades.
9. Work areas shall be kept neat and clean at all times.
10. All floors, aisles and work and storage spaces shall be kept clean and orderly. Any object which could present a trip/fall hazard, such as electrical cords, boxes, etc., should be properly stored and secured. Walkways and hallways should not be used for storage.
11. Any substance spilled or observed on the floor which could cause the floor to become slippery or create a hazard must be cleaned up immediately. When floors become wet as a result of weather conditions or cleaning activity, "wet floor" signs shall be posted to warn employees and the public.
12. All tools, equipment and materials shall be returned to their proper storage location after use.
13. Oily and greasy rags must be stored in an approved (FM or UL) covered metal container.
14. Compressed air shall not be used for cleaning an employee's body. Compressed air used for cleaning work surfaces shall be reduced to less than 30 psi through the use of flow restrictors and shall only be permitted when used with effective chip guarding and personal protective equipment to protect the operator and other employees from the hazards of the release of compressed air and flying debris.



15. Inspect all personal protective equipment that has been issued to you for defects before each use.
16. Inspect all assigned tools and equipment you work with for safe operation on a daily basis.
17. Use the right tool for the job and use each tool only for the task for which it was intended.
18. Report defective or unsafe equipment and work practices to your Supervisor.
19. Do not operate equipment or use tools if training and orientation have not been received.
20. Do not abuse equipment and/or tools that have been provided to you to use.
21. Do not block or lock exit doorways or egress routes.
22. Fire extinguishers and safety showers/eye washes must be inspected monthly.
23. Burning must be performed in strict accordance with local ordinances while exercising caution. Supervisors must authorize all burning activities.
24. Compliance with the Kenosha County Uniform Work Rules.
25. Compliance with established departmental safety rules.

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End Policy



1.0 Scope and Application

Safety committees play an integral role in maintaining an effective workplace safety program. Kenosha County has two different types of safety committees, County-wide and departmental. Both types are explained in detail below.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Provides support and resources needed to implement this policy and ensures that meeting minutes are forwarded to the Risk Manager.
Supervisors:	Provides time for member employees to meet.
Employees:	Member employees attend committee meetings.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

Departmental safety committees have been established for five (5) different departments as follows; Brookside Care Center; Highways; Parks; Sheriff and Social Services. Additional departments wishing to form a safety committee should consult with the Risk Manager.

4.0 Definitions

None.

5.0 Training

All employees will be informed of the existence of the various safety committees at their time of assignment and whenever this policy is revised.

6.0 Documentation Requirements

Safety committees will keep meeting minutes. Minutes shall be taken by an assigned secretary and distributed to all committee members and forwarded to the County Risk Manager.



7.0 Departmental Safety Committees

An important tool for inter-departmental cooperation is the establishment of a safety committee within an operating department. Departmental safety committees have been established for five (5) different departments as follows; Brookside Care Center; Highways; Parks; Sheriff and Social Services. These safety committees consist of the County Risk Manager, a minimum of one management staff member from the department, and a minimum of two union members from the department. These committees should meet a least quarterly. Meetings are co-chaired by the Risk Manager and assigned departmental management personnel.

The primary functions of the departmental safety committees are to analyze accidents and to ensure that the implementation of the safety program is followed through. Additionally, the committees are responsible for the following:

- a) Discussing safety suggestions relayed to committee members and taking appropriate action(s) when necessary.
- b) Making recommendations to the Department Head on ways to improve the department safety program.
- c) Identifying safety hazards.
- d) Promoting safety within the member's own work area.
- e) Developing safety and health recommendations to address unsafe acts or conditions and recommending corrective actions.

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End Policy



1.0 Scope and Application

This policy has been developed to ensure that all purchased equipment, commodities and services conform to industry standards in addition to all federal, state and local code and manufacturing requirements.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Ensures that the requirements of this policy are completed as required.
Supervisors:	Ensure safety of purchased products and services.
Employees:	Not applicable.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

The requirements contained in this policy represent minimum safety related purchasing procedures. Additional purchasing requirements may be applicable within each department.

4.0 Definitions

None.

5.0 Training

Employees hired or transferred into job classifications with the authority to purchase products or services will receive instruction in this policy at their time of assignment and whenever this policy is revised.

6.0 Documentation Requirements

None.



7.0 Purchase Order Requirements

All Kenosha County purchasing documents for equipment or chemical products must contain the following general statement:

“The equipment or chemicals you would supply to Kenosha County must comply with all requirements and standards as specified by the Occupational Safety and Health Administration and Wisconsin Department of Commerce. All guards and protectors as well as appropriate markings must be in place before delivery. Items not meeting current regulatory specifications will be refused. The supplier may be required to provide training to County employees in the operation and handling of the item and its maintenance, at the supplier’s expense and at the convenience of the County.”

All Kenosha County purchasing documents for services, professional or otherwise must contain the following general statement:

“All work to be provided shall comply with all applicable Federal, State, and Local laws, rules, regulations and policies, including, but not limited to those established by Kenosha County, the U.S. Occupational Safety and Health Administration, U.S. Environmental Protection Agency, Wisconsin Department of Commerce and Wisconsin Department of Natural Resources.”

8.0 Insurance Requirements

All contractors and their sub-contractors providing services to Kenosha County will maintain adequate levels of insurance as required by the County.

9.0 Safety Standards

Specialized equipment or chemicals are usually constructed with components that are designed, built, or tested to standards prepared by Underwriters Laboratories (UL), American Society for Testing and Materials (ASTM), American Society of Mechanical Engineers (ASME), or American National Standards Institute (ANSI). It is usually simple to determine if the certification is present. If so, such specification requirements will ensure not only the safety of the employees and user, but the usable life of the equipment as well as its appropriateness for the job. All new equipment purchases (except single cord and plug) are required to be capable of being locked out to service the unit (see lockout / tagout) policy.



Policy No. 007
Policy Name: Purchasing Procedures
Control Date: 04/12/93 Rev. 08/2006

10.0 Material Safety Data Sheets

Material Safety Data Sheets (MSDS) will accompany all chemicals to ensure not only the safety of the employee but to outline the treatment required in the event of exposure. MSDS documents shall be managed as stated in the Hazard Communication Policy.

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End Policy



1.0 Scope and Application

This policy has been developed to provide procedures for the reporting of accidents and injuries and to provide a claims process for Worker's Compensation.

2.0 Responsibilities

Risk Manager:	Management and implementation of this policy and management of County Worker's Compensation Program.
Department Heads:	Ensures that the requirements of this policy are completed as required.
Supervisors:	Timely reporting of all injuries and illnesses.
Employees:	Follow the requirements of this policy.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

Internal department policies may differ from those prescribed in this policy. The procedures contained in this policy represent minimum County requirements which shall be incorporated into departmental policies.

4.0 Definitions

None.

5.0 Training

All employees will receive instruction in this policy at their time of assignment and whenever this policy is revised.

6.0 Documentation Requirements

See the sections that follow.



7.0 Reporting of Accidents, Injuries or Illnesses

A Kenosha County “Accident / Injury Report” is required for all job-related injuries, including those ‘minor’ injuries that do not require immediate medical attention and do not result in lost time. This form must be completed and turned in to the Personnel Department within twenty-four (24) hours of the injury or illness. Forms can be obtained from the Personnel Department.

Notwithstanding the 24-hour form submittal requirement, the personnel department shall be contacted immediately in the following cases:

- Serious injury.
- Injuries requiring hospitalization.
- Death.
- Loss of consciousness.
- Workplace violence.

8.0 Medical Care & Lost Time

If an employee seeks medical treatment a “Worker’s Compensation Claim Form” must be completed in addition to the “Accident / Injury Report”. The treating physician is required to complete a portion of the claim form, and must certify any time away from work. This certification may be subject to concurrence by a physician of the County’s choice.

9.0 Follow-Up Visits

Employees are required to attend all scheduled follow-up visits unless other arrangements have been made and approved by the Personnel Department. Each appointment for treatment or return visit is technically the end of a period of care, unless new instructions are given after the visit. Failure to keep appointments or to report medical status immediately after such visits is the same as not showing up for work and not calling in.

Employees who have been hospitalized for job-related injuries must call the Personnel Department immediately upon discharge to report their status. A written return to work slip is required from the employee prior to being allowed back to work. Employees are required to notify their employing department of changes in their status. Return to work and medical status reports shall be sent to your supervisor or designated manager.



10.0 Bills, Medical Reports, Etc.

All documents received by an employee that pertain to a job-related injury must be submitted on a timely basis. Bills for medical treatment as a result of an on-the-job injury must be submitted to the Personnel Department and not to the County's health insurance. Do not assume that bills you receive at your residence are copies and that the originals have been sent to Personnel.

11.0 Limited Work Accommodations

Limited or restricted duty assignments are job accommodations provided by both the Personnel Department and the affected employee's department. If an employee sustains an injury covered under Worker's Compensation, and the employee is released to return to work with physical restrictions, any accommodation must be approved by both the department Supervisor and the Personnel Department. Employees must make sure that their restrictions are clearly detailed by the treating physician and that a specific set of job responsibilities is outlined for the employee and his Supervisor.

Additionally, there will be a specific limit to the number of accommodations available in a department for employees considered to be within a healing period. These accommodations will not exceed sixty (60) calendar days. When an employee has reached the end of his healing period, he or she will be permitted to return to full work duty.

Limited work accommodation is assigned not by seniority, but by first eligibility and the work available in the department. Given the number of potential differences from employee to employee, each case will ultimately be examined on an individual basis.

12.0 Return To Work

No employee may return to work from an illness or injury for which he or she has incurred lost time without a return to work slip from their treating physician. All claims for injuries and illnesses which are compensated under Worker's Compensation and are accompanied by a return to work slip must be approved by the Personnel Department.

An employee's return to work may be delayed by further examinations or requests for information by the Personnel Department if their present physical or mental condition poses a concern about their ability to perform their job. (This rule also applies to employees on accident and sickness leave as governed by union contract.)

End Policy



1.0 Scope and Application

This policy has been developed to specify the conditions under which first aid is rendered to employees, who may perform first aid measures, and the procedures to follow when first aid is administered. This policy applies to all employees and complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce and 29 CFR Part 1910.151 (First Aid) as promulgated by the U.S. Occupational Safety and Health Administration.

Department Heads will designate a sufficient number of employees to be trained in rendering first aid if medical help cannot be provided to an injured employee within four (4) minutes of an accident resulting in a critical injury, or within fifteen (15) minutes of an accident resulting in a serious non life-threatening injury.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Designate first aid responders as required. Maintain list of first aid responders and certifications. Ensure recertifications are obtained.
Supervisors:	Ensure policy is adhered to by all employees. Replenish supplies.
Employees:	Follow procedures contained in this policy. Report all injuries.
Responders:	Follow procedures and training requirements contained in this policy and all provisions of the County's Bloodborne Pathogens Policy.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents minimum requirements related to first aid activities. Departmental procedures are required to be developed that contain more detailed instructions such as who to contact for medical emergencies and the methods used to contact first aid personnel.

4.0 Definitions

None.



5.0 Training

All employees will receive training in this policy at their time of assignment and whenever this policy is revised. Designated first aid responders must be trained and certified by an agency or person authorized to provide first aid training prior to their assignment. Cardiopulmonary Resuscitation (CPR) is a recommended element of first aid training.

All confined space Entrants, Attendants, and Supervisors, as authorized by the County's Confined Spaces Policy, are required to receive first aid and CPR training.

The County's preferred training provider is the American Red Cross but departments may use alternative sources such as in-house staff, provided such sources are qualified to perform the training provided. First aid training recertification shall be at intervals specified by the original training provider but in no case shall recertification exceed three (3) year intervals or one year for CPR, if included as an element of the first aid training.

6.0 Documentation Requirements

A listing of all designated first aid responders within each department shall be maintained and copies of past and current training certifications shall be kept on file and be made available.

7.0 Designation of First Aid Responders

Department Heads shall designate a sufficient number of first aid responders within their department if medical assistance cannot be provided to employees within the allotted time frames specified in the scope of this policy. Employees will be asked to volunteer for such assignment. In the event a sufficient number of volunteers cannot be obtained, supervisory staff shall be assigned first aid response duties.

8.0 Relationship To Bloodborne Pathogens

Designated first aid responders may come into contact with blood or other potentially infectious materials. As such, first aid responders must be enrolled in their Department's Bloodborne Pathogen's Exposure Control Plan which provides for annual training in the methods employees can use to protect themselves from bloodborne pathogens. The program also provides that first aid responders be given the opportunity to receive a vaccine for the Hepatitis B virus. See the Bloodborne Pathogens Policy for more details.



9.0 First Aid Kits

Each department that is required to provide first aid responders shall provide adequate and appropriate first aid kits and/or supplies. These supply kits shall be inspected on a monthly basis and be periodically replenished.

10.0 Rendering of First Aid

First aid shall only be provided by trained and designated first aid responders. If provided, all first aid should be rendered in designated areas as specified by the Department Head such as a first aid room, infirmary, etc. provided that the victim can be moved to that location without incurring further injury. If this is not possible, first aid should be rendered on the spot.

11.0 Serious Injury

In the event of serious injury, request medical help immediately by calling 911. Do not move the injured person unless absolutely necessary. Wait for medical help to arrive.

12.0 Reporting of Accidents, Injuries or Illnesses

A Kenosha County “Accident / Injury Report” is required for all job-related injuries, including those ‘minor’ injuries that do not require immediate medical attention and do not result in lost time. This report must be completed and submitted to the Personnel Department within twenty-four (24) of the injury or illness.

A “Worker’s Compensation Claim Form” is also required once professional medical care is sought. This claim form must be completed by the employee, supervisor and treating physician and must be submitted immediately following the first medical appointment. Untimely claim forms may result in a suspension of benefits including wages. Forms can be obtained from the employing department or the Personnel Office.

Notwithstanding the 24-hour form submittal requirement, the personnel department shall be contacted immediately in the following cases:

- Serious injury.
- Injuries requiring hospitalization.
- Death.
- Loss of consciousness.

End Policy



1.0 Scope and Application

This policy has been developed to specify the conditions needed to maintain a safe working environment in administrative offices. This policy complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Ensure policy is adhered to by all employees.
Supervisors:	Ensure policy is adhered to by all employees.
Employees:	Follow requirements contained in this policy.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents minimum requirements related to office safety. Departmental procedures may be developed to supplement these requirements.

4.0 Definitions

None.

5.0 Training

All employees will receive instruction in this policy at their time of assignment and whenever this policy is revised.

6.0 Documentation Requirements

None.



7.0 Care of Work Station

It is each employee's responsibility to keep their work station neat and free from clutter. Furniture such as tables, desks, and chairs must be maintained in good condition and be free from sharp corners, projecting edges, wobbly legs, etc. Report any loose or rough floor covering to your Supervisor.

8.0 File Drawers

All file, desk or table drawers are to be kept closed when not in use. Never open more than one file cabinet drawer at the same time. As soon as you leave, close them. Never overload top cabinet drawers.

9.0 Ladders

Never use chairs, desks, tables, or other office furniture in place of a ladder or as a makeshift ladder. Use a step ladder. If there is no step ladder available, inform your Supervisor so that one can be purchased if needed. Don't overreach and lose your balance.

10.0 Chairs

Employees should not recline in office chairs.

11.0 Doors and Blind Corners

Be cautious when approaching a door that can be pushed toward you. Take it easy when pushing a door open and slow down when coming to a blind corner.

12.0 Paper Cutters and Office Hazards

Care should be exercised when using and storing scissors, paper cutters, razor blades, etc. Keep the blades of paper cutters closed when not in use. Also make sure paper cutters are equipped with guards. Use a sponge or other wetting device for sealing envelopes. Use rubber finger guards when working with stacks of paper.

13.0 Electrical Plugs

When removing an electrical plug from a receptacle, pull by the plug and not the wire.



14.0 Office Equipment

Ensure equipment is grounded and that the cord is in good condition. If a machine gives you a shock or starts smoking, unplug it and report it to your Supervisor. Where appropriate, all equipment should be turned off when unattended or not in use.

15.0 Employee Accessory Devices

The use of accessory devices for personal work areas such as space heaters and fans, must be pre-approved for use by a Supervisor. Such devices must be UL rated and have adequate safety features to prevent a fire. For example, portable electric space heaters must be equipped with a grill and automatic shut-off protection and a tip-over switch. Accessory devices that require the use of chemical substances or fuels are not permitted.

16.0 Electrical Cords

Electrical cords should be placed to avoid creating a trip hazard. If a cord must cross a pedestrian walkway, it should be enclosed in an appropriate track and secured to the floor. Extension cords are not allowed to be used for heating equipment. Frayed, worn, or broken electrical cords should immediately be reported to your Supervisor.

17.0 Electrical Power Strips

Electrical power strips are designed to be used for low amperage accessories such as computer equipment, desktop printers and other peripheral equipment. Do not overload power strips by plugging in large appliances or equipment.

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End Policy



1.0 Scope and Application

This policy has been developed to provide for an ergonomically correct working position when using computer workstations and video display terminals. This policy applies to all workstations and complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Ensure workstations comply with these requirements.
Supervisors:	Ensure policy is adhered to by all employees.
Employees:	Follow requirements contained in this policy.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents minimum requirements related to computer workstations. Departments may implement more protective measures.

4.0 Definitions

None.

5.0 Training

Employees who use a computer will receive instruction in this policy at their time of assignment and whenever this policy is revised.

6.0 Documentation Requirements

None.



7.0 Workstation Design

A workstation should provide an employee with a comfortable sitting position sufficiently flexible to reach, use, and look at the screen, keyboard, and documents. In order to minimize fatigue, the following guidelines should be implemented:

- a) **Back Region Support** – The seat and backrest of the chair should support a comfortable posture permitting occasional variations in sitting position. Chair height and back rest angle should be adjustable. A foot rest may provide support to the lower back region.
- b) **Arms** – When the hands are resting on the keyboard, the upper arm and forearm should form a right angle and the hands should form a straight line with the forearm.
- c) **Legs and Feet** – The chair height is correct when the sole of the foot can rest on the floor or footrest and the back of the knee is slightly higher than the seat of the chair. This allows the blood to circulate freely in the legs and feet.
- d) **Screen Adjustments** – The screen to the display terminal or monitor should be able to tilt or swivel vertically in order to enable the employee to select the optimum viewing angle.
- e) **Eye and Screen** – The topmost line of the display should not be higher than the user's eye. The screen and document should be the same distance from the eye in order to avoid constant changes of focus.
- f) **Document Holder** – A vertical document holder should be utilized to allow for a comfortable position that relieves straining on the eyes and neck when typing from a document.

8.0 Lighting

Workstations and lighting should be arranged to avoid reflections on the display screen of surrounding surfaces and objects. Light should be directed so that it does not shine in the employee's eyes when looking at the screen.

Glare can result from light reflecting on a display screen or shiny keyboard. Anti-reflective screen treatments can be added to a video display screen. LCD monitors provide a matte finish and anti-glare screen. To avoid glare, display screens and monitors may be placed near a window so the line of sight between the eye and the screen is parallel to the window surface.

End Policy



1.0 Scope and Application

This policy has been developed to provide safe work practices and procedures for using hand tools and equipment and applies to all tool and equipment use. This policy complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Implementation of policy. Develop work procedures for tools and equipment used within the department.
Supervisors:	Ensure policy is adhered to by all employees.
Employees:	Follow requirements contained in this policy. Inspect tools before each use. Use the right tool for the task that it was intended.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents minimum requirements related to the use of hand tools and equipment and is not meant to be all-inclusive. Department Heads should implement more specific requirements or work procedures for tools and equipment used in their department.

4.0 Definitions

None.

5.0 Training

All employees whose work duties require the use of hand tools will receive instruction in this policy at their time of assignment and whenever this policy is revised. Employees shall not use tools, equipment and/or machinery for which they have not been trained.

6.0 Documentation Requirements

None.



7.0 Electrical Tools

All electrical tools are required to be properly grounded with the use of a 3-way plug and to be properly insulated to prevent electric shock.

8.0 Care and Inspection

Take care of all tools provided to you. Tools shall be kept in good working condition. Employees are required to select the appropriate tool for the task being performed. Use tools in the manner that they were intended and put them back in their proper storage locations when you have finished working with them. Inspect each tool for safe operation prior to each use according to the manufacturer's instructions. If found to be defective, follow the requirements below. Preventative maintenance shall be performed on all tools, equipment and machines as recommended by the manufacturer.

9.0 Maintenance, Repair and Modifications

Employees may perform recommended maintenance on tools and equipment provided that they have been trained and authorized to do so and follow all applicable safety requirements, including, but not limited to the County Lockout / Tagout Policy. Repairs are not to be performed by employees unless authorized by supervision. In most cases, repairs will need to be performed by qualified personnel. In no case may tools, equipment or machinery be modified beyond the manufacturer's recommendations.

10.0 Guarding

Never operate any tools, equipment or machinery that has defective safety equipment or has the guards removed or disabled. Ensure all guards and safety protective systems are in place and that they are functional before operating the machine, equipment or using a tool.

11.0 Personal Protective Equipment

Employees are required to wear all prescribed personal protective equipment when using tools, equipment and/or machinery. Consult the Personal Protective Equipment Policy for detailed requirements.



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12.0 Grinders

When operating a grinder, all guards must be installed and the top (tongue) guard should be adjusted to within one quarter 1/4 inch of the grinding wheel. The tool rest should be adjusted to within one-eighth 1/8 of an inch of the wheel, but no adjustment should be made while the wheel is in motion. Grinding on the flat side of the wheel is prohibited. Out of round wheels should be dressed before use.

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End Policy



1.0 Scope and Application

This policy has been developed to provide safe work practices and procedures for fire safety and using flammable liquids and applies to all County facilities. This policy complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce.

2.0 Responsibilities

Risk Manager: Support and management of this policy.
Department Heads: Implementation of policy.
Supervisors: Ensure policy is adhered to by all employees, exits are clear from obstruction and inspections of the workplace are performed.
Employees: Follow requirements contained in this policy.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents minimum building fire safety requirements and procedures for the use of flammable liquids. Department Heads may develop departmental procedures that are more inclusive of the requirements contained in this policy.

4.0 Definitions

None.

5.0 Training

All employees will receive instruction in this policy at their time of assignment and whenever this policy is revised. Instructional material on proper fire extinguisher use will be posted in employee break rooms.

6.0 Documentation Requirements

None.



7.0 Fire Plans and Evacuation Maps

Each county facility must have in place an emergency action plan specific to their building. See the Kenosha County Emergency Plan for more details. Evacuation maps, showing both primary and secondary exit routes out of the building must be prominently displayed within the building to allow employees and visitors to exit the building quickly in the event of an emergency. Facility Emergency Response Teams will be responsible for developing these maps.

8.0 Exits

Exits will not be locked (chained or otherwise) so as to impede proper evacuation. Exits will be marked/illuminated in accordance with state statutes and local ordinances.

9.0 Storage of Fire Equipment

Fire equipment will be prominently displayed, labeled for usage, and kept clear for easy access at all times.

10.0 Fire Extinguisher Use

Employees are not required to use a fire extinguisher and should exit the work area immediately upon an evacuation notice. Employees may use a fire extinguisher to attempt to extinguish a fire in the incipient stage only (beginning stage of a fire) and should be prepared to exit the area immediately if the fire cannot be extinguished. Report all fire extinguisher use to your Supervisor immediately.

11.0 Vehicle Fire Extinguishers

Vehicles and equipment as designated by the Department Head will be quipped with fire extinguishers.

12.0 Reporting Equipment Problems

If you notice an extinguisher with a low pressure gauge reading or an expired inspection tag, notify your Supervisor at once.

13.0 Monthly Inspections

Department Heads or their designate shall ensure that all fire extinguishers are inspected on a monthly basis and that a tag indicating the date of the inspection is affixed to the unit.



14.0 Storage of Flammable and Combustible Liquids

Flammable and combustible liquids must be stored in accordance with the Flammable and Combustible Liquids Code as promulgated by the Wisconsin Department of Commerce and at the directive of the Kenosha Fire Department. No storage of flammable or combustible liquids will be allowed in furnace or boiler rooms.

15.0 Use of Safety Containers

A maximum of ten (10) gallons total, of any flammable or combustible liquid shall be allowed to remain in their original shipping container outside of a liquid storage cabinet. Gasoline must be stored in red safety cans at all times and labeled accordingly. Kerosene, Diesel Fuel, or Fuel Oil must be stored in blue safety containers and labeled accordingly.

16.0 Refueling and Filling Operations

The transfer of flammable liquids between to metal containers shall be grounded by the use of a metal bonding strap to prevent the buildup and discharge of static electricity. Gasoline containers may not be filled on the back of pickup trucks or in the trunks of vehicles and must be placed firmly on the ground during filling operations.

17.0 Use of Non-Flammable Cleaners

Never use gasoline or other flammable solvents to clean hands or parts. A non-flammable cleaner will be furnished and must be used.

18.0 Smoking, Sparks and Open Flames

Smoking, sparks and open flames are absolutely prohibited in areas where flammable or combustible liquids are present.

19.0 Burning

Burning must be done in strict compliance with local ordinances. No flammable liquids should be used to start a fire. All burning activities must be approved by your Supervisor.

End Policy



1.0 Scope and Application

This policy has been developed to provide safe work practices designed to protect against sprain and strain type injuries during material handling. This policy applies to all material handling activities. Construction type activities that require material handling shall comply with the requirements of 29 CFR Part 1926.250 to 19126.251 as promulgated by the Occupational Safety and Health Administration (OSHA). This policy complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Implementation of policy.
Supervisors:	Ensure policy is adhered to by all employees.
Employees:	Follow requirements contained in this policy.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents minimum material handling requirements. Department Heads may develop specific departmental procedures to address specific material handling activities in their respective departments.

4.0 Definitions

None.

5.0 Training

All employees will receive instruction in this policy at their time of assignment and whenever this policy is revised.

6.0 Documentation Requirements

None.



7.0 Suspended Loads

Employees should never work under a suspended load or leave equipment unattended with a suspended load.

8.0 Stacking Material

When piling materials, make sure that the base is firm and level. Cross tie each layer. Keep piles level and not stacked too high (use shoulder height as a guideline). Keep aisles clear with adequate space to work in.

9.0 Lifting and Carrying

1. Do not manually lift any materials that weigh in excess of seventy (70) pounds. If you feel materials are too heavy to lift safely, get another employee to help or use handling equipment.
2. Size up the load and check overall conditions. Do not attempt to lift alone if it appears too heavy or awkward. Check adequate space for movement and good footing.
3. Make certain of good balance. Feet shoulder width apart; one foot beside and the other foot behind the article to be lifted. Stand as close as possible to the item being lifted.
4. Bend the knees; do not stoop. Keep the back straight. Tucking in the chin straightens the back.
5. Grip the load with palms of the hand and the fingers. The palm grip is more secure. With grip taken, tuck in the chin to make certain the back is straight.
6. Use the body weight to start the load moving and then lift by pushing up with the legs, as the legs are our strongest set of muscles.
7. Keep the arms and elbows close to the body when lifting.
8. Do not twist the body. To change directions shift foot position and turn the entire body.
9. If the load is to be lowered bend the knees; do not stoop. To deposit the load on a bench, shelf or table, place it on the edge and push it into position.
10. When equipment is available and conditions make it practical, mechanical devices should be used for lifting and carrying. Cranes, hoists, elevators, conveyors, lift trucks and similar units are made for this purpose.

10.0 Incompatible Materials

Incompatible materials shall be segregated to prevent accidental contact with each other that may result in fire, explosion or toxic gas emission.

End Policy



1.0 Scope and Application

This policy has been developed to provide safe procedures for all construction and traffic related activities. All construction related type activities shall comply with the requirements of 29 CFR Part 1926 as promulgated by the Occupational Safety and Health Administration (OSHA). This policy complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Implementation of policy.
Supervisors:	Ensure policy is adhered to by all employees.
Employees:	Follow requirements contained in this policy.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents minimum construction related requirements. Department Heads responsible for any construction activity shall ensure that all of the applicable portions of 29 CFR Part 1926 are implemented at the job site.

4.0 Definitions

None.

5.0 Training

All employees whose job duties involve construction or traffic related activities will receive instruction in this policy at their time of assignment and whenever this policy is revised.

6.0 Documentation Requirements

None.



7.0 Diggers Hotline

Before doing any excavating, installing a sign or post, or augering a hole, employees shall determine the locations of underground wire and utilities by calling "Diggers Hotline". Consult the telephone directory for the toll free number.

Work cannot proceed until the area has been surveyed by Diggers Hotline and all utility locations and lines have been marked. Consult the telephone directory for the toll free number.

8.0 Work Zone Protection

All work zones in the roadway, on the right-of-way, in designated parking areas, or on a sidewalk must have the proper warning signs and be properly barricaded. If you are unsure of the proper method for barricading and signing a work zone, contact your Supervisor immediately before proceeding. All traffic control devices to warn traffic and protect employees shall be placed and maintained in accordance with the uniform traffic control devices manual which may be obtained from the American Traffic Safety Services Association or the Federal Highway Administration.

All employees who work on highways, roads, streets or their easements shall wear traffic safety vests or use clothing or equipment that provides equivalent protection.

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End Policy



1.0 Scope and Application

This policy is intended to prescribe rules and establish minimum requirements for the care, and use of the common types of ladders, in order to insure safety under normal conditions of usage. This policy applies to use of all ladders and scaffolds. Construction type activities that require scaffolding shall comply with the requirements of 29 CFR Part 1926.450 to 19126.454 as promulgated by the Occupational Safety and Health Administration (OSHA). This policy complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Implementation of policy.
Supervisors:	Ensure policy is adhered to by all employees.
Employees:	Follow requirements contained in this policy.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents minimum ladder and scaffold safety requirements. Department Heads may develop specific departmental procedures to address specific ladder and scaffold use activities in their respective departments.

4.0 Definitions

None.

5.0 Training

All employees will receive instruction in this policy at their time of assignment and whenever this policy is revised.

6.0 Documentation Requirements

None.



7.0 General Ladder Requirements

1. All ladders shall be OSHA approved and bear a label indicating the type of ladder:

Type I - Industrial stepladder, 3 to 20 feet for heavy duty, such as utilities, contractors, and industrial use.
Type II - Commercial stepladder, 3 to 12 feet for medium duty, such as painters, offices, and light industrial use.
Type III - Household stepladder, 3 to 6 feet for light duty, such as light household use.
2. Metal ladders shall not be used when working around electrical circuits, wires, changing light bulbs, etc.
3. Never stand on or above the second step from the top of a step ladder or the third rung from the top of a straight ladder.
4. Ladders should not be painted and must have approved non-skid feet. Clean muddy or slippery shoes before climbing.
5. Always check the weight rating of the ladder to be sure the ladder can safely carry your weight plus any load you are carrying. Type II commercial grade ladders are recommended rather than household Type III ladders.
6. No more than one person should be on a ladder at a time unless the ladder is approved for such use.

8.0 Portable Wooden and Fiberglass Ladders

1. All wood parts shall be free from sharp edges and splinters; sound and free from accepted visual inspection from shake, wane, compression failures, decay, or other irregularities. Low density wood shall not be used.
2. Step ladders longer than 20 feet shall not be supplied or used.
3. Single ladders longer than 30 feet shall not be supplied.
4. Two-section extension ladders longer than 60 feet shall not be supplied. All ladders of this type shall consist of two sections, one to fit within the side rails of the other, and arranged in such a manner that the upper section can be raised and lowered.
5. Trestle ladders, or extension sections or base sections of extension trestle ladders longer than 20 feet shall not be supplied.
6. Painter's stepladders longer than 12 feet shall not be supplied.
7. A mason's ladder is a special type of single ladder intended for use in heavy construction work. Mason's ladders longer than 40 feet shall not be supplied.
8. Trolley ladders and side-rolling ladders longer than 20 feet should not be supplied.



9. Ladders shall be maintained in good condition at all times, the joint between the steps and side rails shall be tight, all hardware and fittings securely attached, and the movable parts shall operate freely without binding or undue play.
10. Metal bearings of locks, wheels, pulleys, etc., shall be frequently lubricated.
11. Frayed or badly worn rope shall be replaced.
12. Safety feet and other auxiliary equipment shall be kept in good condition to insure proper performance.
13. Ladders shall be inspected frequently and those which have developed defects shall be withdrawn from service for repair or destruction and tagged or marked as "Dangerous, Do Not Use."
14. Rungs should be kept free of grease and oil.
15. Portable rung and cleat ladders shall, where possible, be used at such a pitch that the horizontal distance from the top support to the foot of the ladder is one-quarter of the working length of the ladder (the length along the ladder between the foot and the top support). The ladder shall be so placed as to prevent slipping, or it shall be lashed, or held in position. Ladders shall not be used in a horizontal position as platforms, runways, or scaffolds;
16. Ladders for which dimensions are specified should not be used by more than one man at a time nor with ladder jacks and scaffold planks where use by more than one man is anticipated. In such cases, specially designed ladders with larger dimensions of the parts should be procured;
17. Portable ladders shall be so placed that the side rails have a secure footing. The top rest for portable rung and cleat ladders shall be reasonably rigid and shall have ample strength to support the applied load;
18. Ladders shall not be placed in front of doors unless the door is blocked, locked, or guarded;
19. Ladders shall not be placed on boxes, barrels, or other unstable bases to obtain additional height;
20. Ladders with broken or missing steps, rungs, or cleats, broken side rails, or other faulty equipment shall not be used; improvised repairs shall not be made;
21. Short ladders shall not be spliced together to provide long sections;
22. Ladders made by fastening cleats across a single rail shall not be used;
23. Ladders shall not be used as guys, braces, or skids, or for other than their intended purposes;
24. Tops of the ordinary types of stepladders shall not be used as steps;
25. No ladder should be used to gain access to a roof unless the top of the ladder shall extend at least 3 feet above the point of support, at eave, gutter, or roofline;
26. Middle and top sections of sectional or window cleaner's ladders should not be used for bottom section unless the user equips them with safety shoes;



27. The user should equip all portable rung ladders with non-slip bases when there is a hazard of slipping. Non-slip bases are not intended as a substitute for care in safely placing, lashing, or holding a ladder that is being used upon oily, metal, concrete, or slippery surfaces;
28. The bracing on the back legs of step ladders is designed solely for increasing stability and not for climbing.

9.0 Portable Metal Ladders

1. Ladders must be protected against corrosion unless inherently corrosion-resistant.
2. The spacing of rungs or steps shall be on 12-inch centers.
3. Rungs and steps shall be corrugated, knurled, dimpled, coated with skid-resistant material, or otherwise treated to minimize the possibility of slipping.
4. The minimum width between side rails of a straight ladder or any section of an extension ladder shall be 12 inches.
5. The length of single ladders or individual sections of ladders shall not exceed 30 feet. Two-section ladders shall not exceed 48 feet in length and over two-section ladders shall not exceed 60 feet in length.
6. Extension ladders shall be equipped with positive stops which will insure the overlap specified in the table above.
7. The length of a stepladder is measured by the length of the front rail. To be classified as a standard length ladder, the measured length shall be within plus or minus one-half inch of the specified length. Stepladders shall not exceed 20 feet in length.
8. The bottoms of the four rails are to be supplied with insulating non-slip material for the safety of the user.
9. A metal spreader or locking device of sufficient size and strength to securely hold the front and back sections in the open position shall be a component of each stepladder. The spreader shall have all sharp points or edges covered or removed to protect the user.
10. Trestle ladders or extension sections or base sections of extension trestle ladders shall be not more than 20 feet in length.
11. The length of a platform ladder shall not exceed 20 feet. The length of a platform ladder shall be measured along the front rail from the floor to the platform.
12. To get maximum serviceability, safety, and to eliminate unnecessary damage of equipment, good safe practices in the use and care of ladder equipment must be employed by the users.
13. Ladders must be maintained in good usable condition at all times.



14. If a ladder is involved in any of the following, immediate inspection is necessary:
 - If ladders tip over, inspect ladder for side rails dents or bends, or excessively dented rungs; check all rung-to-side-rail connections; check hardware connections; check rivets for shear.
 - If ladders are exposed to oil and grease, equipment should be cleaned of oil, grease, or slippery materials. This can easily be done with a solvent or steam cleaning.
 - Ladders having defects are to be marked and taken out of service until repaired by either maintenance department or the manufacturer.
15. A simple rule for setting up a ladder at the proper angle is to place the base a distance from the vertical wall equal to one-fourth the working length of the ladder.
16. Portable ladders are designed as a one-man working ladder based on a 200-pound load.
17. The ladder base section must be placed with a secure footing.
18. The top of the ladder must be placed with the two rails supported, unless equipped with a single support attachment.
19. When ascending or descending, the climber must face the ladder.
20. Ladders must not be tied or fastened together to provide longer sections. They must be equipped with the hardware fittings necessary if the manufacturer endorses extended uses.
21. Ladders should not be used as a brace, skid, guy or gin pole, gangway, or for other uses than that for which they were intended, unless specifically recommended for use by the manufacturer.

10.0 Scaffolding

All scaffolding shall comply with the requirements specified in 29 CFR Part 1926 Subpart L in addition to the following requirements:

1. Erect scaffolding under proper supervision.
2. Planks and other material used in building scaffolding must be sound and free from knots (especially cut lumber, commonly referred to as “scaffolding lumber”). Keep planks in good condition with a spar varnish. Never paint the planks.
3. Be sure that planking is adequately cleated. Scaffolding over ten (10) feet should have toe boards, mid-rails, and handrails. Follow the County’s Fall Protection Policy.
4. Tools on top of the scaffolding are liable to fall and injure someone. Keep tools in a bucket or box lashed on to the scaffolding.
5. Ensure that scaffold wheels (if provided) are locked and that the scaffold is level.



11.0 Equipment Inspection

1. Always check ladders and scaffolding thoroughly before using. A rung, foot, or guard rail could be broken or loose. Use only OSHA approved equipment. Never use make-shift ladders or scaffolding.
2. Inspect wooden ladders periodically. Wooden ladders shrink over a period of time. In a stepladder, this may cause steps or back bar members to become loose. Hold the rods beneath the steps with a pair of pliers and tighten the nut at the end with a wrench to maintain strength and steadiness.
3. Do not paint wooden ladders or scaffold planks as defects may be covered by paint. Use a good grade of spar varnish or a mixture of linseed oil and turpentine to preserve the wood.

12.0 Placement and Securing of Ladders

When using ladders, set them on a firm dry base at the proper angle. The distance between the foot of the ladder and the wall it rests against should be equal to about one quarter $\frac{1}{4}$ the distance to the support point of the ladder. When possible, secure ladders in place with ropes, hooks, spikes, or other anti-slip devices.

Always be careful of the placement of a ladder. Avoid placing ladders within the arc of a swinging door (unless the door is locked), near blind corners, or where they could be in the path of vehicles or equipment. Use signs or barricades to alert others.

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End Policy



1.0 Scope and Application

This policy has been developed to establish safety requirements for all welding, cutting, brazing and soldering activities related to maintenance and construction type activities. This policy complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce and 29 CFR Part 1910.211 through 1910.255 and Part 1926.350 through 1926.354 as promulgated by the U.S. Occupational Safety and Health Administration.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Implementation of policy.
Supervisors:	Ensure policy is adhered to by employees and contractors. See specific requirements in Sections 7.0 and 8.0 of this policy.
Employees:	Follow requirements contained in this policy.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents minimum welding, cutting brazing and soldering requirements. Additional procedures may be developed for departmental use. Consult your Supervisor for more detailed requirements associated with these activities in your department.

4.0 Definitions

As used herein confined space is intended to mean a relatively small or restricted space such as a tank, boiler or pressure vessel.

5.0 Training

Cutters or welders and their Supervisors must be suitably trained in the safe operation of their equipment and the safe use of the process.

6.0 Documentation Requirements



A “Hot Work Permit” must be completed and posted in all areas where welding, cutting, soldering, or brazing activities are performed except for shop and garage areas. See the forms section of the safety manual for a copy of the permit to use.

7.0 Applicable Requirements

The requirements contained in this policy represent minimum basic requirements for welding, cutting, brazing and soldering activities. Depending on the type of work to be performed, further requirements may be applicable. Supervisors are to consult 29 CFR Part 1926.350 through 1926.354 for construction related activities and 29 CFR Part 1910.211 through 1910.255 for all other types of activities.

Shop and garage areas are work areas in which welding, cutting, brazing, soldering and torch use are typically performed. These areas do not require the use of a “Hot Work Permit” system, although all work must still comply with the remaining requirements of this policy.

8.0 Management and Supervision Responsibilities

- a) Before cutting or welding is permitted, the area shall be inspected by Supervisor who will designate precautions to be followed in granting authorization to proceed in the form of a written “Hot Work Permit”. Copies of all issued permits will be kept on file by the Supervisor.
- b) Advise all contractors about flammable materials or hazardous conditions of which they may not be aware.
- e) Supervisors shall also be responsible for following:
 - Ensuring that Personal Protective Equipment (PPE) is available and that its use is enforced.
 - Safe handling of the cutting or welding equipment and the safe use of the cutting or welding process.
 - Determining the combustible materials and hazardous areas present or likely to be present in the work location.
 - Have the work moved to a location free from dangerous combustibles.
 - If the work cannot be moved, have the combustibles moved to a safe distance from the work or have the combustibles properly shielded against ignition.
 - See that cutting and welding are so scheduled that operations that might expose combustibles to ignition are not started during cutting or welding.
 - Secure authorization for the cutting or welding operations from the designated management representative.



- Shall determine that the cutter or welder secures his approval that conditions are safe before proceeding.
- Shall determine that fire protection and extinguishing equipment are properly located at the site.
- Ensure fire watches are available at the site where required.

9.0 Basic Precautions

- a) If the object to be welded or cut cannot readily be moved, all movable fire hazards in the vicinity shall be taken to a safe place.
- b) If the object to be welded or cut cannot be moved and if all the fire hazards cannot be removed, then guards shall be used to confine the heat, sparks, and slag, and to protect the immovable fire hazards.
- c) If the requirements stated in above cannot be followed then welding and cutting shall not be performed.

Wherever there are floor openings or cracks in the flooring that cannot be closed, precautions shall be taken so that no readily combustible materials on the floor below will be exposed to sparks which might drop through the floor. The same precautions shall be observed with regard to cracks or holes in walls, open doorways and open or broken windows.

10.0 Fire Safety

- a) Suitable fire extinguishing equipment shall be maintained in a state of readiness for instant use. Such equipment may consist of pails of water, buckets of sand, hose or portable extinguishers depending upon the nature and quantity of the combustible material exposed.
- b) Fire watchers shall be required whenever welding or cutting is performed in locations where other than a minor fire might develop.
- c) Fire watchers shall have fire extinguishing equipment readily available and be trained in its use. They shall be familiar with facilities for sounding an alarm in the event of a fire. They shall watch for fires in all exposed areas, try to extinguish them only when obviously within the capacity of the equipment available, or otherwise sound the alarm. A fire watch shall be maintained for at least a half hour after completion of welding or cutting operations to detect and extinguish possible smoldering fires.
- d) Before cutting or welding is permitted, the area shall be inspected by the individual responsible for authorizing cutting and welding operations. The Supervisor shall designate precautions to be followed in granting authorization to proceed preferably in the form of a written permit.



- e) Where combustible materials such as paper clippings, wood shavings, or textile fibers are on the floor, the floor shall be swept clean for a radius of 35 feet (10.7 m). Combustible floors shall be kept wet, covered with damp sand, or protected by fire-resistant shields. Where floors have been wet down, personnel operating arc welding or cutting equipment shall be protected from possible shock.
- f) Cutting or welding shall not be permitted in the following situations:
 - In areas not authorized by management.
 - In sprinklered buildings while such protection is impaired.
 - In the presence of explosive atmospheres (mixtures of flammable gases, vapors, liquids, or dusts with air), or explosive atmospheres that may develop inside uncleaned or improperly prepared tanks or equipment which have previously contained such materials, or that may develop in areas with an accumulation of combustible dusts.
 - In areas near the storage of large quantities of exposed, readily ignitable materials.
- g) Where practicable, all combustibles shall be relocated at least 35 feet (10.7 m) from the work site. Where relocation is impracticable, combustibles shall be protected with flameproofed covers or otherwise shielded with metal or asbestos guards or curtains.
- h) Ducts and conveyor systems that might carry sparks to distant combustibles shall be suitably protected or shut down.
- i) Where cutting or welding is done near walls, partitions, ceiling or roof of combustible construction, fire-resistant shields or guards shall be provided to prevent ignition.
- j) If welding is to be done on a metal wall, partition, ceiling or roof, precautions shall be taken to prevent ignition of combustibles on the other side, due to conduction or radiation, preferably by relocating combustibles. Where combustibles are not relocated, a fire watch on the opposite side from the work shall be provided.
- k) Welding shall not be attempted on a metal partition, wall, ceiling or roof having a combustible covering nor on walls or partitions of combustible sandwich-type panel construction.
- l) Cutting or welding on pipes or other metal in contact with combustible walls, partitions, ceilings or roofs shall not be undertaken if the work is close enough to cause ignition by conduction.
- m) Cutting or welding shall be permitted only in areas that are or have been made fire safe. When work cannot be moved practically, as in most construction work, the area shall be made safe by removing combustibles or protecting combustibles from ignition sources.

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- n) No welding, cutting, or other hot work shall be performed on used drums, barrels, tanks or other containers until they have been cleaned so thoroughly as to make absolutely certain that there are no flammable materials present or any substances such as greases, tars, acids, or other materials which when subjected to heat, might produce flammable or toxic vapors. Any pipe lines or connections to the drum or vessel shall be disconnected or blanked.
- o) All hollow spaces, cavities or containers shall be vented to permit the escape of air or gases before preheating, cutting or welding. Purging with inert gas is recommended.

11.0 Confined Spaces

- a) The County's Confined Space Policy must be followed in addition to the following requirements when working in confined spaces.
- b) When arc welding is to be suspended for any substantial period of time, such as during lunch or overnight, all electrodes shall be removed from the holders and the holders carefully located so that accidental contact cannot occur and the machine be disconnected from the power source.
- c) In order to eliminate the possibility of gas escaping through leaks or improperly closed valves, when gas welding or cutting, the torch valves shall be closed and the gas supply to the torch positively shut off at some point outside the confined area whenever the torch is not to be used for a substantial period of time, such as during lunch hour or overnight. Where practicable, the torch and hose shall also be removed from the confined space.
- d) Ventilation is a prerequisite to work in confined spaces. For ventilation requirements see 29 CFR 1910.211.
- e) When welding or cutting is being performed in any confined spaces the gas cylinders and welding machines shall be left on the outside. Before operations are started, heavy portable equipment mounted on wheels shall be securely blocked to prevent accidental movement
- f) Where a welder must enter a confined space through a manhole or other small opening, means shall be provided for quickly removing him in case of emergency. When safety belts and lifelines are used for this purpose they shall be so attached to the welder's body that his body cannot be jammed in a small exit opening. An Attendant with a preplanned rescue procedure shall be stationed outside to observe the welder at all times and be capable of putting rescue operations into effect.
- g) After welding operations are completed, the welder shall mark the hot metal or provide some other means of warning other workers.

12.0 Protection of Personnel



- a) A welder or helper working on platforms, scaffolds, or runways shall be protected against falling by following the County's Fall Protection Policy.
- b) Welders shall place welding cable and other equipment so that it is clear of passageways, ladders, and stairways.
- c) Helmets or hand shields shall be used during all arc welding or arc cutting operations, excluding submerged arc welding. Helpers or Attendants shall be provided with proper eye protection.
- d) Goggles or other suitable eye protection shall be used during all gas welding or oxygen cutting operations. Spectacles without side shields, with suitable filter lenses are permitted for use during gas welding operations on light work, for torch brazing or for inspection.
- e) All operators and Attendants of resistance welding or resistance brazing equipment shall use transparent face shields or goggles, depending on the particular job, to protect their faces or eyes, as required.
- f) Where the work permits, the welder should be enclosed in an individual booth painted with a finish of low reflectivity such as zinc oxide (an important factor for absorbing ultraviolet radiations) and lamp black, or shall be enclosed with noncombustible screens similarly painted. Booths and screens shall permit circulation of air at floor level. Workers or other persons adjacent to the welding areas shall be protected from the rays by noncombustible or flameproof screens or shields or shall be required to wear appropriate goggles.
- g) All protective equipment, helmets, goggles and protective clothing must meet the requirements contained in 29 CFR 1910.211.

13.0 Health Protection and Ventilation.

The welding and cutting of stainless steel or objects that contain degreasing or cleaning solvents and/or chlorinated hydrocarbon requires special procedures. In addition, materials, including welding rods, that may contain mercury, cadmium, beryllium, lead, zinc and or fluorine compounds must be worked upon using these special procedures. Supervisors will consult 29 CFR 1910.211 for detailed procedures to be followed before allowing these materials to be worked upon.

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End Policy



1.0 Scope and Application

This policy has been developed to ensure that the hazards of all chemicals are evaluated and that information concerning their hazards is transmitted to employees and contractors. This transmittal of information is to be accomplished by means of a comprehensive hazard communication program, which includes container labeling and other forms of warning, material safety data sheets and employee training. This policy applies to all employees.

This policy has been developed to establish methods and procedures for communicating hazards associated with chemicals and other hazards in the workplace to employees and contractors. This policy complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce and 29 CFR Part 1910.1200 (Hazard Communication) as promulgated by the U.S. Occupational Safety and Health Administration.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Implementation of policy. Maintain records of employee communications, exposures and Material Safety Data Sheets.
Supervisors:	Ensure policy is adhered to by all employees. Perform hazard reviews and address all employee communication requests.
Facilities:	Labeling/color-coding of piping systems.
Employees:	Follow requirements contained in this policy.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents the County's hazard communication requirements. Individual departments may develop more detailed procedures than those contained in this policy. Consult your Supervisor for more detailed requirements that may exist in your department.

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4.0 Definitions

Chemical	A hazardous substance whose use is inconsistent with normal consumer use, exposure and quantity. Normal use of commercial products and/or chemicals that are consistent with normal consumer use (used in the same manner and quantity) as a household consumer would use the substance is exempt from this policy provided that chemical exposures are no more than that which would be experienced by a normal consumer under ordinary conditions of use.
MSDS	Material Safety Data Sheet

5.0 Training

Employees will be provided with both information and training in hazard communication. Information to presented to employees at the their time of assignment include any operations in their work area where hazardous chemicals are present and the location and availability of this policy, including the required list(s) of hazardous chemicals, and required material safety data sheets. In addition to this initial training, existing employees will be trained and informed of the hazards associated with any new chemical that is introduced into their work area or when such employees are exposed to different chemical hazards due to a transfer to another department.

Training in hazard communication will be scheduled by the Personnel Department and will include the following training topics:

- a) Methods and observations that may be used to detect the presence or release of a hazardous chemical in the work area (such as monitoring conducted by the County, continuous monitoring devices, visual appearance or odor of hazardous chemicals when being released, etc.);
- b) The physical and health hazards of the chemicals in the work area;
- c) The measures employees can take to protect themselves from these hazards, including specific procedures the County has implemented to protect employees from exposure to hazardous chemicals, such as appropriate work practices, emergency procedures, and personal protective equipment to be used; and,

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- d) The details of this policy, including an explanation of the labeling system and the material safety data sheet, and how employees can obtain and use the appropriate hazard information.

6.0 Documentation Requirements

Material safety data sheets are required to be on file and available for review for any covered chemical substance or product before it is allowed to be used by employees. Department Heads shall devise a method (manual or otherwise) to keep track of these documents such that the documents are sorted by product name and shall ensure that a copy of each MSDS is provided to the Personnel Department.

Chemical exposure monitoring data, when conducted, will be maintained by the Personnel Department.

7.0 Source of Information

The County will rely upon vendors, suppliers, manufacturers, and other responsible parties of chemicals and materials to provide hazard information associated with the chemicals so that the appropriate controls and protective measures can be implemented.

8.0 Location Of Chemicals

Internal departmental controls have been established to restrict the work areas where chemicals are allowed to be stored and/or used. Employees will be instructed on the locations where specific chemicals can be found in their work area upon their assignment.

The County will minimize the threat to employee safety and health by requiring that lesser degree or non-hazardous chemicals be substituted for highly hazardous or toxic chemicals, whenever feasible.

9.0 Chemical Evaluation And Inventories

New chemicals proposed for use in the workplace shall be evaluated by the Department Head and if approved, a copy of the MSDS will be forwarded to the Personnel Department.

Existing chemicals in the work area shall be evaluated by the Supervisor to identify the health and physical hazards associated with them to ensure that engineering controls, preventative measures, and employee information and training can be implemented to reduce the risk of employee injury or exposures.



Physical hazards are those hazards, which reflect the physical characteristics of the chemical and do not include any adverse health effects that may be exhibited upon exposure or over-exposure. Chemicals shall be evaluated for physical hazards such as flammability, combustibility, reactivity (ability to react violently with water or produce toxic gases), and any other applicable hazard.

Health hazards include those hazards, which can adversely affect an employee's health. Chemicals shall be evaluated for health hazards. The hazard evaluation of each chemical shall be conducted by the company and/or its outside consultant using the information provided on the MSDS sheets or any other supplemental information provided by the manufacturer.

A chemical inventory which lists those chemicals present within each facility is required to be maintained within each department. Department Heads shall devise a method (manual or otherwise) to keep track of this inventory.

10.0 Container Labeling

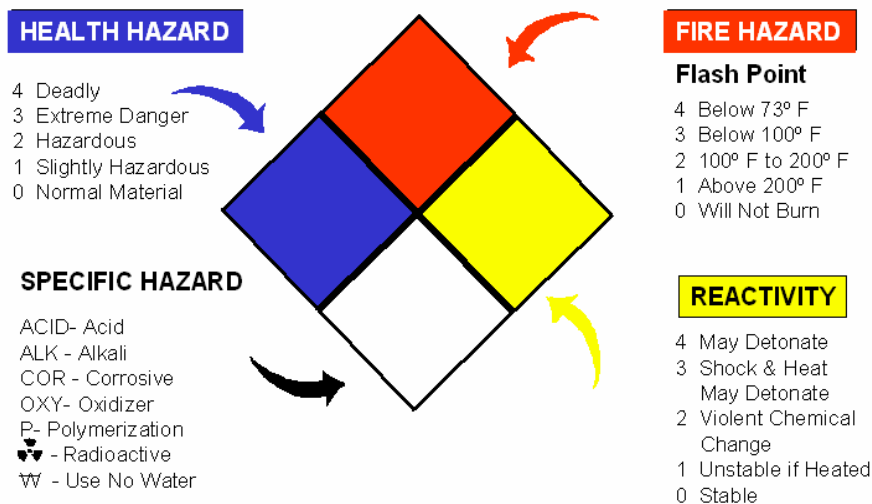
Chemical containers must be properly labeled with their name, the manufacturer or supplier's name and address, hazard warnings, etc. Proper labeling must include this information in English and employees will receive training in container labeling. Supervisors will ensure that labels on incoming containers of hazardous chemicals are not removed or defaced.

The County relies on the manufacturer and/or supplier for the proper labeling of all chemicals received into its facilities. Secondary and portable containers, for which chemicals have been transferred, shall utilize the National Fire Protection Association Diamond System (NFPA), as described below.

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THE NFPA DIAMOND LABELING SYSTEM



Supervisory personnel at each facility shall be responsible for ensuring all received chemicals are properly labeled prior to acceptance into the facility for use.

Chemicals transferred into other secondary or portable containers are required to contain an NFPA label. The employee responsible for transferring the chemical to a secondary or portable container is responsible for ensuring that the label is affixed to the container. Labels and labeling assistance can be obtained from your Supervisor. Portable containers for which chemicals are transferred, are not required to be labeled, provided that it is intended for the immediate use by the employee who made the transfer.

Chemicals stored in stationary containers, such as tanks and totes, are required to have the NFPA label affixed. Supervisors shall ensure such labels are present at all times.

Certain containers, products, and wastes that are regulated and labeled under other laws and regulations are exempt from OSHA's labeling requirements because they already contain sufficient information as required by the governing body or regulation. Although they may be exempt from the labeling requirements, they may not be exempt from MSDS (Material Safety Data Sheet) requirements if the materials are used in a manner inconsistent with normal consumer use. The products subject to the labeling requirements of other regulatory bodies, which are exempt from the Hazard Communication labeling requirement, can be found within the standard.



11.0 Piping Systems

Piping systems are required to be properly identified as to the contents within them (e.g. hot water, domestic water, steam, etc.), and must be legible and prominently displayed. Piping systems are identified by either a label and/or the color-coding matrix specified by the American National Standards Institute (ANSI) piping color-code standard. However, it is realized that due to the large complexity of piping systems, not all piping runs can be immediately identified by color and/or label, but every effort will be made to do so. Facilities shall be responsible for ensure all piping systems within close proximity to an employee's work area are properly labeled and/or color-coded.

12.0 Material Safety Data Sheets

Material Safety Data Sheets (MSDSs) are required to be obtained and be maintained on file for all chemicals used within the facility. The filing system used shall at a minimum be capable of sorting the documents by their product name. The MSDS sheets contain additional information, beyond that presented on the label in regards to the chemical.

MSDS sheets are maintained on file for each chemical used within each department. Copies of all MSDS documents shall be forwarded to the Personnel Department. Contact your Supervisors for the location and procedure to obtain these documents. Supervisors shall ensure that an MSDS sheet is available for each substance used in their department and that the information regarding such substances is conveyed to affected employees.

All outdated, discontinued, or obsolete MSDS sheets are kept on file by the department for a period of thirty (30) years after the date of discontinuation. The date the chemical was discontinued should be written on the front of the MSDS.

Employees are encouraged to read the MSDS sheet before using chemicals in their work area to become familiar with any precautions that must be taken in order to handle the chemical safely.

In case of emergencies, the applicable MSDS sheet must be made immediately available to all emergency responders. In the case of trade secrets, the manufacturer, importer, or distributor is required to provide the information necessary for effective treatment to the treating physician or nurse. A confidentiality agreement may need to be entered into under such circumstances and will be handled on a case-by-case basis by the County Risk Manager.

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13.0 Non-Routine Tasks

Supervisors will inform employees of the health and physical hazards associated with non-routine activities for which the employee may perform. This may include activities, such as cleaning of and installation of equipment, etc. Supervisors are responsible for evaluating non-routine tasks prior to the activity being performed to determine all hazards and potential hazards that may be associated with the task. As a part of this evaluation, the Supervisor shall convey this information to affected employees and ensure that all appropriate precautions have been taken, including the use of proper personal protective equipment.

14.0 Availability Of Information

The following information shall be made available to each employee upon request:

- The Hazard Communication Standard (OSHA 29 CFR 1910.1200).
- The Air Contaminate Z-Tables (OSHA 29 CFR 1910.1000).
- The company's Hazard Communication Program.
- The Chemical Inventory List.
- Material safety data sheets.
- Personal medical records.

The information shall be given to the employee within a reasonable time frame. Employees are to contact their Supervisor for all information requests.

15.0 Contractors

Supervisors will provide contractors with a copy of the appropriate information on chemicals and piping systems for which they may be potentially exposed prior to performing work. Such information will include the particular chemicals in the specific work area, as well as, the hazards and protective measures associated with those chemicals. The MSDS sheets for such chemicals, along with the County's Hazard Communication Program, will be made available to the contractor upon request.

The contractor will also be made familiar with emergency procedures should an emergency situation arise during the course of the contractor's work. The information shall be provided by the Supervisor responsible for the contractor's activities.

Contractors will be required to sign the Contractor Safety Checklist contained in the appendix before being allowed to perform work. The employee who requisitioned the contractor shall be responsible for reviewing this document with the contractor.



Policy No. 018
Policy Name: Hazard Communication
Control Date: 04/12/93 Rev. 08/2006

Contractors are required to provide the necessary information (i.e. MSDS) for any potentially hazardous chemical that the contractor will be bringing into the facility for use while performing work. Such information shall be provided to the Supervisor and a copy of the MSDS(s) shall be affixed to the contract and kept on file.

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END POLICY



1.0 Scope and Application

This policy covers the servicing and maintenance of machines and equipment in which the unexpected energization or start up of the machines or equipment, or release of stored energy could cause injury to employees. It applies to all equipment and sources of hazardous energy, including electrical, pneumatic, hydraulic, gaseous and stored energy. Authorized employees who are required to service equipment are covered by this policy. Additionally, affected employees have limited responsibilities under this policy as well. See definitions section.

This policy complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce and 29 CFR Part 1910.147 (Control of Hazardous Energy) as promulgated by the U.S. Occupational Safety and Health Administration. The Control of Hazardous Energy Standard is commonly referred to as Lockout / Tagout or LOTO.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Implementation of policy. Perform annual review LOTO policy. Assigns authorized employees.
Supervisors:	Ensure policy is adhered to by all employees by locking out equipment before it is serviced. Manage the issuance of locks. Performs annual audit of LOTO Program and annual verification that LOTO procedures are accurate.
Employees:	Follow requirements contained in this policy.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents minimum lockout / tagout requirements that must be followed when servicing equipment. Department Heads will develop specific lockout / tagout procedures to be followed for each piece of covered equipment.

4.0 Definitions



LOTO Lockout / Tagout in which a lock or tag is affixed to a piece of equipment to secure there is no unexpected startup of the equipment or release of energy.

Energy Control Procedure Equipment specific procedures that detail the exact steps authorized employees are to perform to isolate all sources of energy before servicing the piece of equipment.

Authorized Employees: Employees who have been specifically authorized by Department Heads to perform maintenance and lockout / tagout of equipment.

Affected Employees: Employees who may be affected by the lockout of equipment, such as the operator of the equipment that is being worked upon.

5.0 Training

Affected employees will be instructed at their time of assignment of the requirements of the LOTO program and the prohibition on attempting to energize or startup any equipment that has been locked / tagged out.

Authorized employees will receive training, as scheduled by the Personnel Department, in the hazards and magnitudes of energy sources and the specific procedures to be followed when servicing equipment.

Retraining shall be provided for all authorized and affected employees whenever there is a change in job assignments, a change in machines, a piece of new equipment or process that presents a new hazards, or when there is a change in the energy control procedure.

6.0 Documentation Requirements

Review Lockout Procedures: Supervisors are required to review their specific department's LOTO procedures at least once a year to ensure that they provide adequate worker protection. As part of the review, the Supervisor will ensure that any deviations and inadequacies identified in the energy-control procedure or its application are corrected.

Periodic Inspections: Periodic inspections are intended to assure that employees are familiar with their responsibilities under the procedure and continue to implement energy-control procedures properly. The inspector, who must be an authorized person not involved in using the particular control procedure being inspected (typically a Supervisor), must be able to determine the following:



- Employees are following steps in the energy-control procedure;
- Employees involved know their responsibilities under the procedure; and
- The procedure is adequate to provide the necessary protection, and what changes, if any, are needed.

For a lockout procedure, the periodic inspection must include a review of each authorized employee's responsibilities under the energy-control procedure being inspected. Where tagout is used, the inspector's review also extends to affected employees because of the increased importance of their role in avoiding accidental or inadvertent activation of the machinery. Inspections shall be completed at least annually, be maintained on file within the department, and be completed on forms provided by the County.

7.0 Exceptions

The policy does not apply to servicing and maintenance activities in the following situations, when:

1. Exposure to hazardous energy is controlled completely by unplugging the equipment from an electric outlet and where the employee doing the service or maintenance has exclusive control of the plug. This applies only if electricity is the only form of hazardous energy to which employees may be exposed. This exception encompasses many portable hand tools and some cord and plug connected machinery and equipment.
2. An employee performs hot-tap operations on pressurized pipelines that distribute gas, steam, water, or petroleum products, for which the following can be shown:
 - Continuity of service is essential;
 - Shutdown of the system is impractical; and
 - The employee follows documented procedures and uses special equipment that provides proven, effective employee protection.
3. The employee is performing minor tool changes or other minor servicing activities that are routine, repetitive, and integral to production, and that occur during normal production operations. In these cases, employees must have effective, alternative protection.



Policy No. 019
Policy Name: Control of Hazardous Energy
Control Date: 04/12/93 Rev. 08/2006

8.0 Methods of Energy Control

Lockout (the physical affixing of a padlock) is the primary method employees will use control hazardous energy. For older equipment that does not have a physical location to affix a lock, tagout may be authorized. All new equipment purchases (except single cord and plug) are required to be capable of being locked out.

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9.0 Lockout / Tagout Equipment

Supervisors shall ensure that appropriate equipment is provided to employees to use for energy control. The lockout and tagout devices should be standardized in color, shape, and size and in the case of tagout devices, print and format. Tagout devices must include a “Do Not Operate” warning statement and identify the employee who applied the device and the date. All lockout and tagout devices are not to be used for any other purpose than for energy control and must durable to withstand the environment to which they are exposed.

10.0 Lockout Procedures

Lockout Procedures are required to be developed and documented for each machine or major piece of equipment for which energy sources are present. It is the responsibility of the Department Heads to ensure Lockout Procedures are created for all new and existing machines or equipment and that these procedures be kept current. Energy sources include any source of electrical, mechanical, hydraulic, pneumatic, chemical, or thermal energy. All procedures sheets are required to be developed using a standardized form contained in the appendix to the safety manual. In the absence of a specific energy control procedure, authorized employees shall follow the following basic steps:

Notification of Employees

Affected employees shall be notified by the authorized employee of the application of lockout devices. Notification shall be given prior to the controls being applied.

Preparation for Shutdown

Before an authorized employees turns off a machine or piece of equipment, the authorized employee shall have knowledge of the type and magnitude of the energy, the hazards of the energy to be controlled, and the method or means to control the energy. The authorized employee shall obtain and review the Lockout Procedure for the specific machine or equipment prior to performing any lockout procedures.

Machine or Equipment Shutdown

The machine or equipment shall be turned off or shutdown using the normal operating controls for the specific machine or piece of equipment.

Machine or Equipment Isolation

All energy isolating devices that are necessary to control the energy to the machine or equipment shall be physically located in such a manner as to isolate the machine or equipment from the energy source.



Lockout Device Application

Lockout devices shall be affixed to each energy isolating device by the authorized employee. A tag (not to be confused with tagout) shall also be affixed to the lock with a nylon tie that indicates the name of the authorized person serving the equipment and the date. Lockout devices shall be affixed in a manner for which it will hold the energy isolating devices in a “safe” or “off” position.

Stored Energy

Following the application of lockout devices, all potentially hazardous stored or residual energy shall be relieved, disconnected, restrained or otherwise rendered safe. If there is a possibility of reaccumulation of stored energy to a hazardous level, verification of isolation shall be continued until the servicing or maintenance is completed or until the possibility of such accumulation no longer exists.

Verification of Isolation

Prior to starting work on machines or equipment that have been locked out, the authorized employee shall verify that isolation and deenergization of the machine or equipment has been accomplished by testing the normal starting mechanism for the piece of equipment.

Performing Servicing and Maintenance

The servicing or maintenance on the machine or equipment can now be safely performed.

Release from Lockout

Before lockout devices are removed and energy is restored to the machine or equipment the work area shall be inspected to ensure that nonessential items have been removed, the equipment and components are operationally intact, and employees have been safely positioned. Lockout devices shall be removed from each energy isolating device by the employee who applied the device. When the authorized employee who applied the lockout device is not available to remove it, procedures for removal of authorized employee lock and tag must be followed. Affected employees shall be notified by the authorized employee of the removal of the lockout device. Notification shall be given after they are removed.

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11.0 Tagout Procedures

If no physical location exists to affix a lock, tagout may be used. Tagout procedures are identical to the lockout procedures above except that:

1. A tag is used instead of a lock and is affixed where a lock would normally be applied.
2. At least one energy isolating device (fuse, breaker) must be removed from the energy circuit.

12.0 Lockout And Tagout Procedures During Testing

The following procedure must be followed by each authorized employee when it is necessary to temporarily remove the energy isolating devices and reenergize the machine or equipment to test or position the machine, equipment, or component.

1. The work area shall be inspected to ensure that nonessential items have been removed and to ensure that machine or equipment components are operationally intact.
2. The work area shall be checked to ensure that all employees have been safely positioned or removed. After lockout and tagout devices have been removed and before a machine or equipment is started, affected employees shall be notified that the lockout and tagout devices have been removed.
3. The employee who applied the device shall remove each lockout and tagout device from each energy isolating device.
4. Energize and proceed with testing and positioning.
5. Deenergize all systems and reapply energy control measures in accordance with the Lockout/Tagout Procedure to continue the servicing and/or maintenance.

13.0 Group Lockout And Tagout

If more than one individual is required to lockout and tagout a machine or piece of equipment, each authorized employee shall place a lock and tag on the energy isolation device to ensure the employees a level of protection equivalent to that provided by the implementation of a personal lockout and tagout device. The Supervisor is designated as the lockout/tagout leader and is responsible for coordinating all lockout activities. If an energy-isolating device cannot accept multiple locks or tags, a multiple lock and tagout device shall be used.



The Group Lockout and Tagout will also be utilized when outside contractors are performing lockout/tagout procedures on County owned equipment. Group lockout and tagout will include a lock and tag from the outside contractor performing the work, as well as a County authorized employee if performing work on the equipment.

14.0 Removal Of Lockout And Tagout Devices

Only the employee who applied the device shall remove each lockout and tagout device from each energy isolating device. When the authorized employee who applied the lockout and tagout device is not available, that device may be removed by a designated authorized employee Supervisor only. Prior to the removal of a lock and tag by the Supervisor, the following must be adhered to:

Verification must be made by the Supervisor that the authorized employee who applied the lockout and tagout device is not on the premises.

A reasonable effort must be made to contact the authorized employee who applied the device to inform them that their lockout and tagout device has been removed.

The Supervisor who has removed an authorized employee's lock and tag should discard the lock and return the tagout device to the Lockout/Tagout Hardware Station and ensure that the authorized employee has knowledge that their lockout or tagout device has been removed prior to returning to work.

15.0 Outside Contractors

The Supervisor is responsible for obtaining the written Lockout/Tagout Program and training certifications for all outside contractors who engage in activities requiring lockout/tagout. Additionally, the Supervisor will coordinate the lockout programs of both the County and the contractor with all affected and authorized employees to ensure that contractor lockouts are performed safely and made known.

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End Policy



1.0 Scope and Application

This policy has been developed to make employees aware of the safe handling and storage of compressed gas cylinders. This policy applies to all compressed gas use and complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce and 29 CFR Part 1910.101 (Compressed Gas General Requirements) and 1910.253 (Oxy Fuel Gas Welding and Cutting) as promulgated by the U.S. Occupational Safety and Health Administration.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Implementation of policy.
Supervisors:	Ensure policy is adhered to by all employees.
Employees:	Follow requirements contained in this policy.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents minimum compressed gas handling and storage requirements. Department Heads may develop more specific procedures to be followed in their respective departments.

4.0 Definitions

None.

5.0 Training

Employees whose job duties require the use of compressed gases will be instructed in the requirements of this policy at the time of their initial assignment and whenever this policy is revised.

6.0 Documentation Requirements

None.



7.0 General Requirements

- a) All compressed gas cylinders must be stored in an upright position and secured around the body of the cylinder to prevent falling. Smoking is not allowed around compressed gas cylinders.
- b) Use of hydrogen, manifold and piping systems and other compressed gases not covered in this policy shall comply with the requirements of the Compressed Gas Association.
- c) Under no condition shall acetylene be generated, piped (except in approved cylinder manifolds) or utilized at a pressure in excess of 15 psig (103 kPa gauge pressure) or 30 psia (206 kPa absolute).
- d) Only approved apparatus such as torches, regulators or pressure-reducing valves, acetylene generators, and manifolds shall be used.
- e) Compressed gas cylinders shall be legibly marked, for the purpose of identifying the gas content, with either the chemical or the trade name of the gas. Such marking shall be by means of stenciling, stamping, or labeling, and shall not be readily removable. Whenever practical, the marking shall be located on the shoulder of the cylinder.
- f) All cylinders with a water weight capacity of over 30 pounds (13.6 kg) shall be equipped with means of connecting a valve protection cap or with a collar or recess to protect the valve.
- g) Cylinders shall be kept away from radiators and other sources of heat.
- h) Inside of buildings, cylinders shall be stored in a well-protected, well-ventilated, dry location, at least 20 (6.1 m) feet from combustible materials. Cylinders should be stored in definitely assigned places away from elevators, stairs, or gangways. Assigned storage spaces shall be located where cylinders will not be knocked over or damaged by passing or falling objects, or subject to tampering by unauthorized persons. Cylinders shall not be kept in unventilated enclosures such as lockers and cupboards.
- i) Empty cylinders shall have their valves closed.
- j) Valve protection caps, where cylinder is designed to accept a cap, must always be in place, hand-tight, except when cylinders are in use or connected for use.



- k) Inside a building, cylinders, except those in actual use or attached ready for use, shall be limited to a total gas capacity of 2,000 cubic feet (56 m³) or 300 pounds (135.9 kg) of liquefied petroleum gas.
- l) Acetylene cylinders shall be stored valve end up.

8.0 Oxygen Storage

- a) Oxygen cylinders shall not be stored near highly combustible material, especially oil and grease; or near reserve stocks of carbide and acetylene or other fuel-gas cylinders, or near any other substance likely to cause or accelerate fire; or in an acetylene generator compartment.
- b) Oxygen cylinders stored in outside generator houses shall be separated from the generator or carbide storage rooms by a noncombustible partition having a fire-resistance rating of at least 1 hour. This partition shall be without openings and shall be gastight.
- c) Oxygen cylinders in storage shall be separated from fuel-gas cylinders or combustible materials (especially oil or grease), a minimum distance of 20 feet (6.1 m) or by a noncombustible barrier at least 5 feet (1.5 m) high having a fire-resistance rating of at least one-half hour.

9.0 Operating Procedures

- a) Cylinders, cylinder valves, couplings, regulators, hose, and apparatus shall be kept free from oily or greasy substances. Oxygen cylinders or apparatus shall not be handled with oily hands or gloves. A jet of oxygen must never be permitted to strike an oily surface, greasy clothes, or enter a fuel oil or other storage tank.
- b) When transporting cylinders by a crane or derrick, a cradle, boat, or suitable platform shall be used. Slings or electric magnets shall not be used for this purpose. Valve-protection caps, where cylinder is designed to accept a cap, shall always be in place.
- c) Cylinders shall not be dropped or struck or permitted to strike each other violently.

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- d) Valve-protection caps shall not be used for lifting cylinders from one vertical position to another. Bars shall not be used under valves or valve-protection caps to pry cylinders loose when frozen to the ground or otherwise fixed; the use of warm (not boiling) water is recommended. Valve-protection caps are designed to protect cylinder valves from damage.
- e) Unless cylinders are secured on a special truck, regulators shall be removed and valve-protection caps, when provided for, shall be put in place before cylinders are moved.
- f) Cylinders not having fixed hand wheels shall have keys, handles, or nonadjustable wrenches on valve stems while these cylinders are in service. In multiple cylinder installations only one key or handle is required for each manifold.
- g) Cylinder valves shall be closed before moving cylinders.
- h) Cylinder valves shall be closed when work is finished.
- i) Valves of empty cylinders shall be closed.
- j) Cylinders shall be kept far enough away from the actual welding or cutting operation so that sparks, hot slag, or flame will not reach them, or fire-resistant shields shall be provided.
- k) Cylinders shall not be placed where they might become part of an electric circuit. Contacts with third rails, trolley wires, etc., shall be avoided. Cylinders shall be kept away from radiators, piping systems, layout tables, etc., that may be used for grounding electric circuits such as for arc welding machines. Any practice such as the tapping of an electrode against a cylinder to strike an arc shall be prohibited.
- l) Cylinders shall never be used as rollers or supports, whether full or empty.
- m) The numbers and markings stamped into cylinders shall not be tampered with.
- n) No person, other than the gas supplier, shall attempt to mix gases in a cylinder. No one, except the owner of the cylinder or person authorized by him, shall refill a cylinder.
- o) No one shall tamper with safety devices in cylinders or valves.
- p) Cylinders shall not be dropped or otherwise roughly handled.



- q) Unless connected to a manifold, oxygen from a cylinder shall not be used without first attaching an oxygen regulator to the cylinder valve. Before connecting the regulator to the cylinder valve, the valve shall be opened slightly for an instant and then closed. Always stand to one side of the outlet when opening the cylinder valve.
- r) A hammer or wrench shall not be used to open cylinder valves. If valves cannot be opened by hand, the supplier shall be notified.
- s) Cylinder valves shall not be tampered with nor should any attempt be made to repair them. If trouble is experienced, the supplier should be sent a report promptly indicating the character of the trouble and the cylinder's serial number. Supplier's instructions as to its disposition shall be followed.
- t) Complete removal of the stem from a diaphragm-type cylinder valve shall be avoided.
- u) Fuel-gas cylinders shall be placed with valve end up whenever they are in use.
- v) Liquefied gases shall be stored and shipped with the valve end up.
- w) Cylinders shall be handled carefully. Rough handling, knocks, or falls are liable to damage the cylinder, valve or safety devices and cause leakage which may result in an explosion or result in the cylinder becoming a powerful projectile that is fueled by the escaping gas from a damaged valve that may have been broken off.
- x) Before connecting a regulator to a cylinder valve, the valve shall be opened slightly and closed immediately. The valve shall be opened while standing to one side of the outlet; never in front of it. Never crack a fuel-gas cylinder valve near other welding work or near sparks, flame, or other possible sources of ignition.
- y) Before a regulator is removed from a cylinder valve, the cylinder valve shall be closed and the gas released from the regulator.
- z) Nothing shall be placed on top of an acetylene cylinder when in use which may damage the safety device or interfere with the quick closing of the valve.
- aa) If cylinders are found to have leaky valves or fittings which cannot be stopped by closing of the valve, the cylinders shall be taken outdoors away from sources of ignition and slowly emptied.



- bb) A warning should be placed near cylinders having leaking fuse plugs or other leaking safety devices not to approach them with a lighted cigarette or other source of ignition. Such cylinders should be plainly tagged; the supplier should be promptly notified and his instructions followed as to their return.
- cc) Safety devices shall not be tampered with.
- dd) Fuel-gas shall never be used from cylinders through torches or other devices equipped with shutoff valves without reducing the pressure through a suitable regulator attached to the cylinder valve or manifold.
- ee) The cylinder valve shall always be opened slowly.
- ff) An acetylene cylinder valve shall not be opened more than one and one-half turns of the spindle, and preferably no more than three-fourths of a turn.
- gg) Where a special wrench is required it shall be left in position on the stem of the valve while the cylinder is in use so that the fuel-gas flow can be quickly turned off in case of emergency. In the case of manifolded or coupled cylinders at least one such wrench shall always be available for immediate use.

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End Policy



1.0 Scope and Application

This policy contains safety requirements relating to fire protection, design, maintenance, and use of fork trucks, tractors, platform lift trucks, motorized hand trucks, and other specialized industrial trucks powered by electric motors or internal combustion engines. This policy does not apply to compressed air or nonflammable compressed gas-operated industrial trucks, nor to farm vehicles, nor to vehicles intended primarily for earth moving or over-the-road hauling.

This policy complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce and 29 CFR Part 1910.178 (Powered Industrial Trucks) as promulgated by the U.S. Occupational Safety and Health Administration.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Implementation of policy and training requirements.
Supervisors:	Ensure policy is adhered to by all employees.
Employees:	Follow requirements contained in this policy. Perform daily inspections of trucks before each use.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents minimum powered industrial truck requirements. Department Heads may develop more specific procedures to be followed in their respective departments.

4.0 Definitions

PIT: Powered Industrial Truck. See scope and application section.

5.0 Training

Training and evaluations for PIT operators must be conducted by an experienced trainer and will be scheduled by the Department Head. Training will include both classroom and hands-on activities. The County may choose to utilize the services of an outside provider for this service or may elect to perform the training in-house.



All training and evaluations must be completed before an operator is permitted to use a PIT without continual and close supervision. Training shall cover the following basic topics:

- Operator's prior knowledge and skill.
- Types of powered industrial trucks the operator will operate in the workplace.
- Hazards present in the workplace.
- Operator's demonstrated ability to operate a powered industrial truck safely.

Trained operators shall be evaluated every three years using the evaluation checklist provided in the appendix. If they pass the evaluation, they do not need to receive refresher training. If they fail the evaluation, they will be required to receive retraining before they can operate a PIT.

Operators will be required to undergo retraining more frequently if:

- The operator is involved in an accident or a near-miss incident.
- The operator has been observed operating the vehicle in an unsafe manner.
- The operator has been determined during an evaluation to need additional training.
- There are changes in the workplace that could affect safe operation of the truck
- The operator is assigned to operate a different type of truck.

6.0 Documentation Requirements

Training certification and evaluations.

7.0 Pre-Qualifications For Powered Industrial Truck Operators

Supervisors shall ensure that all candidates for powered industrial truck (PIT) operators must meet the following basic requirements prior to starting initial or annual training:

- Have a driver's license and good driving record.
- No adverse vision problems that cannot be corrected by glasses or contacts.
- No adverse hearing loss that cannot be corrected with hearing aids.
- No physical impairments that would impair safe operation of the PIT.
- No neurological disorders that affect balance or consciousness.
- Not taking any medication that affects perception, vision, or physical abilities.

8.0 Rights

Kenosha County reserves the right to terminate or cancel the authority for any employee to operate a powered industrial truck.



9.0 General Requirements

- a) Only approved industrial trucks shall be used in hazardous locations. Consult 29 CFR 1910.178 for detailed requirements on truck designations.
- b) Where general lighting is less than 2 lumens per square foot, auxiliary directional lighting shall be provided on the truck.
- c) Concentration levels of carbon monoxide gas created by powered industrial truck operations shall not exceed the levels specified in 29 CFR Part 1910.1000.

10.0 Inspections

All powered industrial truck operators shall complete the vehicle safety inspection contained in the appendix prior to the start of their shift. Inspection records should be turned in to your Supervisor.

Do Not Operate the truck if the inspection fails any of the inspection items. Contact your Supervisor immediately of any identified or suspected safety or operability issues that may be associated with the truck.

11.0 Safe Operating Procedures

- a) Only authorized and trained personnel will operate PITs.
- b) The operator will wear seatbelts at all times in PITs that come with seat-belts as standard equipment.
- c) The operator will perform daily pre-trip inspections.
- d) Any safety defects (such as hydraulic fluid leaks; defective brakes, steering, lights, or horn; and/or missing fire extinguisher, lights, seat belt, or back-up alarm) will be reported for immediate repair or the PIT will be taken out of service.
- e) Operators will follow the proper recharging or refueling safety procedures.
- f) Loads will be tilted back and carried no more than six inches from the ground. Loads that restrict the operator's vision will be transported backwards.
- g) PITs operators will obey posted speed limits and slow down on wet floors and going around turns.



- h) Operator will sound the horn and use extreme caution when meeting pedestrians, making turns, and cornering.
- i) Passengers may not ride on any portion of a PIT. Only the operator will ride PITs.
- j) If PITs are used as a man lift, an appropriate man lift platform (cage with standard rails and toe-boards) will be used and secured to the PIT.
- k) Aisles will be maintained free from obstructions, marked, and wide enough (six-foot minimum) for vehicle operation.
- l) Lift capacity will be marked on all PITs. Operators will assure the load does not exceed rated weight limits.
- m) When unattended, PITs will be turned off, forks lowered to the ground, and the parking brake applied.
- n) All PITs (with the exception of pallet jacks) will be equipped with a multi-purpose dry chemical fire extinguisher.
- o) Operators must report all accidents, regardless of fault and severity, to their Supervisor. Personnel Department will conduct an accident investigation.
- p) When loading rail cars and trailers, dock plates will be used. Operators will assure dock plates are in good condition and will store them on edge when not in use.
- q) Rail cars and trailers will be parked squarely to the loading area and have wheels chocked in place. Operators will follow established docking/undocking procedures.

12.0 Changing And Charging Storage Batteries

- a) Battery charging installations must be located in areas designated for that purpose.
- b) Facilities must be provided for flushing and neutralizing spilled electrolyte, for fire protection, for protecting charging apparatus from damage by trucks, and for adequate ventilation for dispersal of fumes from gassing batteries.
- c) A conveyor, overhead hoist, or equivalent material handling equipment must be provided for handling batteries.



- d) Reinstalled batteries must be properly positioned and secured in the truck.
- e) A carbon filter or siphon must be provided for handling electrolyte.
- f) When charging batteries, acid must be poured into water. Water must not be poured into acid. Wear a face shield, safety glasses and rubber gloves during this operation.
- g) Trucks must be properly positioned and brakes applied before attempting to change or charge batteries.
- h) Care must be taken to assure that vent caps are functioning. The battery (or compartment) cover(s) must be open to dissipate heat.
- i) Smoking is prohibited in the charging area.
- j) Precautions must be taken to prevent open flames, sparks, or electric arcs in battery charging areas.
- k) Tools and other metallic objects must be kept away from the top of uncovered batteries.

13.0 Trucks And Railroad Cars

- a) Check the flooring of trucks, trailers, and railroad cars for breaks and weakness before driving onto them.
- b) The brakes of highway trucks must be set and wheel chocks placed under the rear wheels to prevent the trucks from rolling while they are boarded with powered industrial trucks unless a dock-locking mechanism is used.
- c) Wheel stops or other recognized positive protection must be provided to prevent railroad cars from moving during loading or unloading operations.
- d) Fixed jacks may be necessary to support a semi-trailer and prevent upending during the loading or unloading when the trailer is not coupled to a tractor.
- e) Positive protection must be provided to prevent railroad cars from being moved while dockboards or bridge plates are in position.



14.0 Operation

- a) If at any time a powered industrial truck is found to be in need of repair, defective, or in any way unsafe, the truck must be taken out of service until it has been restored to safe operating condition.
- b) Trucks must not be driven up to anyone standing in front of a bench or other fixed object.
- c) No person will be allowed to stand or pass under the elevated portion of any truck, whether loaded or empty.
- d) Unauthorized personnel may not ride on powered industrial trucks.
- e) Arms or legs may not be placed between the uprights of the mast or outside the running lines of the truck.
- f) When a powered industrial truck is left unattended, load engaging means must be fully lowered, controls neutralized, power shut off, and brakes set. Wheels must be blocked if the truck is parked on an incline.
- g) A safe distance must be maintained from the edge of ramps or platforms while on any elevated dock, platform, or freight car. Trucks must not be used for opening or closing freight doors.
- h) There must be sufficient headroom under overhead installations, lights, pipes, sprinkler system, etc.
- i) An overhead guard must be used as protection against falling objects. An overhead guard is intended to offer protection from the impact of small packages, boxes, bagged material, etc., representative of the job application, but not to withstand the impact of a falling capacity load.
- j) A load backrest extension must be used whenever necessary to minimize the possibility of the load or part of it from falling rearward.
- k) Trucks must not be parked so as to block fire aisles, access to stairways, or fire equipment.



15.0 Traveling

- a) All traffic regulations must be observed, including authorized speed limits. A safe distance must be maintained, approximately three truck lengths from the truck ahead, and the truck must be kept under control at all times.
- b) The right of way must be yielded to ambulances, fire trucks, or other vehicles in emergency situations.
- c) Do not pass other trucks traveling in the same direction at intersections, blind spots, or other dangerous locations.
- d) The driver must slow down and sound the horn at cross aisles and other locations where vision is obstructed. If the load being carried obstructs forward view, the driver must travel with the load trailing.
- e) Railroad tracks must be crossed diagonally wherever possible. Parking closer than eight feet from the center of railroad tracks is prohibited.
- f) The driver must look in the direction of and keep a clear view of the path of travel.
- g) Grades must be ascended and descended slowly. When ascending or descending grades in excess of 10 percent, loaded trucks must be driven with the load upgrade. On all grades, the load and load engaging means must be tilted back if applicable, and raised only as far as necessary to clear the road surface.
- h) Under all travel conditions the truck must be operated at a speed that will permit it to be brought to a stop in a safe manner.
- i) Stunt driving and horseplay are prohibited.
- j) The driver must slow down on wet and slippery floors.
- k) Dockboard or bridgeplates must be properly secured before they are driven over. Dockboard or bridgeplates must be driven over carefully and slowly and their rated capacity never exceeded.
- l) Avoid running over loose objects on the roadway surface.



- m) While negotiating turns, reduce speed to a safe level by turning the hand steering wheel in a smooth, sweeping motion. Except when maneuvering at a very low speed, the hand steering wheel must be turned at a moderate, even rate.

16.0 Loading

- a) Only stable or safely arranged loads can be handled. Exercise caution when handling off-center loads that cannot be centered.
- b) Only loads within the rated capacity of the truck can be handled.
- c) Adjust the long or high (including multiple-tiered) loads that may affect capacity.
- d) Trucks equipped with attachments must be operated as partially loaded trucks when not handling a load.
- e) A load engaging means must be placed under the load as far as possible. The mast must be carefully tilted backward to stabilize the load.
- f) Use extreme care when tilting the load forward or backward, particularly when high tiering. Tilting forward with load engaging means elevated is prohibited except to pick up a load. An elevated load may not be tilted forward except when the load is in a deposit position over a rack or stack. When stacking or tiering, use only enough backward tilt to stabilize the load.

17.0 Fueling Safety

- a) Fuel tanks may not be filled while the engine is running. Avoid spillage.
- b) Spillage of oil or fuel must be carefully washed away or completely evaporated and the fuel tank cap replaced before restarting engine.
- c) No truck can be operated with a leak in the fuel system until the leak has been corrected.
- d) Do not use open flames for checking electrolyte level in storage batteries or gasoline level in fuel tanks.
- e) Keep open flames, heat and other sources of ignition away during fueling. No smoking.
- f) Handle LP tanks with care.



- g) No truck can be operated with a leak in the fuel system until the leak has been corrected.
- h) Make sure the valve on the LP tanks is turned off when removing/replacing LP gas cylinder.
- i) Place empty LP tanks into proper storage area designated for such cylinders.

18.0 Maintenance

- a) Any power-operated industrial truck not in safe operating condition must be removed from service. All repairs must be made by authorized maintenance personnel.
- b) Those repairs to the fuel and ignition systems of industrial trucks that involve fire hazards must be conducted only in locations designated for such repairs.
- c) Trucks in need of repairs to the electrical system must have the battery disconnected before such repairs.
- d) All parts of any such industrial truck requiring replacement must be replaced only by parts equivalent as to safety with those used in the original design.
- e) Industrial trucks must not be altered so that the relative positions of the various parts are different from what they were when originally received from the manufacturer. They also can not be altered either by the addition of extra parts not provided by the manufacturer or by the elimination of any parts. Additional counter-weighting of fork trucks must not be done unless approved by the truck manufacturer.
- f) Industrial trucks must be examined before being placed in service, and must not be placed in service if the examination shows any condition adversely affecting the safety of the vehicle. Such examination must be made at least daily. Where industrial trucks are used on a round-the-clock basis, they must be examined before each shift. Any defects must be immediately reported and corrected.
- g) When the temperature of any part of any truck is found to be in excess of its normal operating temperature, thus creating a hazardous condition, the vehicle must be removed from service and not returned to service until the cause for such overheating has been eliminated.
- h) Industrial trucks must be kept in a clean condition, free of lint, excess oil, and grease. Noncombustible agents should be used for cleaning trucks. Low flash point (below 100



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degrees F) solvents must not be used. High flash point (at or above 100 degrees F) solvents may be used.

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END POLICY



1.0 Scope and Application

This policy specifies the requirements for the use and handling of pesticides by County employees. This policy covers all applications, including those at parks, golf courses and cemeteries and complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce.

2.0 Responsibilities

Risk Manager: Support and management of this policy.
Department Heads: Implementation of policy.
Supervisors: Ensure policy is adhered to by all employees.
Employees: Follow requirements contained in this policy.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy sets forth the requirements for all pesticide use. Departments using pesticides are required to develop more detailed procedures to ensure the requirements of this policy are adhered to.

4.0 Definitions

Pesticide: Any substance or mixture of substances labeled or designed or intended for use in preventing, destroying, repelling or mitigating any pest, or as a plant regulator, defoliant or desiccant.

5.0 Training

All County employees who job requires the use and application of pesticides are required to comply with the applicable licensing and certification requirements of Chapter 29 of the Wisconsin Administrative Code as promulgated by the Wisconsin Department of Agriculture, Trade and Consumer Protection (ATCP). Training of employees shall be provided by the University of Wisconsin Extension; Pesticide Applicator Training Program.



6.0 Documentation Requirements

In addition to records of training, departments shall keep appropriate records showing areas in which pesticides have been applied, the amount applied, the type of pesticide used and the date and time it was applied.

7.0 Pesticide Use and Application

All use is required to comply with the specific requirements of ATCP Chapter 29. The requirements in this policy are not intended to be all inclusive and users should consult ATCP 29 for more detailed requirements.

8.0 General Requirements

- a) Pesticide warning signs in areas where pesticides will be applied will be posted by the employee applying the pesticide as follows:

Sites located within 300 feet of a residence, migrant labor camp, school, playground, day care facility, health care facility, commercial or industrial facility, public recreation area, or other nonagricultural area except a public road, where individuals are likely to be present during the restricted entry interval specified on the pesticide label.

Application of pesticides at County golf courses and cemetery shall comply with the signage and other requirements of ATCP Chapter 29.

- b) Employees who handle pesticides labeled with a skull and crossbones will be monitored visually or by voice contact at least once every two (2) hours.
- c) Employees are not permitted to enter areas in which pesticides have been applied during the time interval specified on the label. Signs shall be removed when it is safe for employees and the public to enter areas in which pesticides have been applied.
- d) Pesticides shall not be used, transported or stored in a negligent manner, or in a manner inconsistent with the pesticide label or for a purpose for which the pesticide is not registered or labeled.
- e) Employees are not allowed to eat, drink or smoke during the application or handling of pesticides.
- f) Empty pesticide containers are to be properly disposed and shall not be used for any other purpose.



- g) Pesticides must be stored and transported according to label directions, in a manner that avoids reasonably foreseeable and reasonably preventable hazards to persons, property and the environment and shall be secured against access by children, the general public, domestic animals and wild animals.
- h) Pesticides must be adequately separated from food, feed and other products so that pesticides will not contaminate or be mistaken for those products.
- i) Thoroughly clean pesticide residues from storage areas and transport vehicles before reusing those storage areas or transport vehicles for other purposes.
- j) Protect pesticide containers and labels from reasonably foreseeable damage or destruction.
- k) Inspect pesticide containers when those containers are removed from their outer shipping containers, to ensure that the pesticide containers are intact and properly sealed, and that pesticide labels are intact and fully legible.
- l) Pesticides may not be stored or transported in a visibly broken, defective or improperly sealed container unless that container is enclosed in another suitable container which effectively prevents foreseeable spillage.
- m) Any spill of pesticide shall be immediately reported to your Supervisor who will notify the County Risk Manager so that reporting to the Wisconsin Department of Natural Resources can be made.
- n) Personal Protective Equipment shall be worn and used as prescribed by the pesticide label instructions and shall be consistent with the County's Personal Protective Equipment Policy.

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End Policy



Policy No. 023
Policy Name: Trenching and Excavating
Control Date: 12/3/98 Rev. 08/2006

1.0 Scope and Application

This policy contains safety requirements to protect County employees during work in excavations and/or trenches. This policy complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce and 29 CFR Part 1926.650 (Excavations) as promulgated by the U.S. Occupational Safety and Health Administration.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Implementation of policy.
Supervisors:	Ensure policy is adhered to by all employees. Supervisors are designated as a “Competent Person” for the purposes of this policy.
Employees:	Follow requirements contained in this policy.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents minimum excavating and trenching requirements. Department Heads may develop more specific procedures to be followed in their respective departments.

4.0 Definitions

Competent Person:	Supervisor who is capable of identifying existing and predictable hazards in the surroundings, or working conditions which are unsanitary, hazardous, or dangerous to employees, and who has authorization to take prompt corrective measures to eliminate them.
Excavation:	Any man-made cut, cavity, trench, or depression in an earth surface, formed by earth removal.
Trench:	A narrow excavation (in relation to its length) made below the surface of the ground. In general, the depth is greater than the width, but the width of a trench (measured at the bottom) is not greater than 15 feet (4.6 m).



Trench (cont.) If forms or other structures are installed or constructed in an excavation so as to reduce the dimension measured from the forms or structure to the side of the excavation to 15 feet (4.6 m) or less (measured at the bottom of the excavation), the excavation is also considered to be a trench.

5.0 Training

Employees engaged in excavation and trenching type activities shall receive instruction in these requirements at the time of their initial assignment. Department Heads will ensure that Supervisors receive appropriate training such that they meet the criteria of a “competent person”.

6.0 Documentation Requirements

None.

7.0 General Requirements

- a) All surface encumbrances that are located so as to create a hazard to employees shall be removed or supported, as necessary, to safeguard employees.
- b) The estimated location of utility installations, such as sewer, telephone, fuel, electric, water lines, or any other underground installations that reasonably may be expected to be encountered during excavation work, shall be determined prior to opening an excavation.
- c) Diggers hotline shall be contacted at least 72 hours prior to performing all work to locate underground utilities. Facility blueprints shall be referenced for all private utilities that may exist on the property where excavating work is to be performed.
- d) When excavation operations approach the estimated location of underground installations, the exact location of the installations shall be determined by safe and acceptable means. While the excavation is open, underground installations shall be protected, supported or removed as necessary to safeguard employees.
- e) Employees exposed to public vehicular traffic shall be provided with, and shall wear, warning vests or other suitable garments marked with or made of reflectorized or high-visibility material.
- f) No employee shall be permitted underneath loads handled by lifting or digging equipment. Employees shall be required to stand away from any vehicle being loaded or unloaded to avoid being struck by any spillage or falling materials. Operators may remain



in the cabs of vehicles being loaded or unloaded when the vehicles are equipped, in accordance with 1926.601(b)(6), to provide adequate protection for the operator during loading and unloading operations.

- g) When mobile equipment is operated adjacent to an excavation, or when such equipment is required to approach the edge of an excavation, and the operator does not have a clear and direct view of the edge of the excavation, a warning system shall be utilized such as barricades, hand or mechanical signals, or stop logs. If possible, the grade should be away from the excavation.
- h) Walkways shall be provided where employees or equipment are required or permitted to cross over excavations. Guardrails which comply with 29 CFR 1926.502(b) shall be provided where walkways are 6 feet (1.8 m) or more above lower levels.

8.0 Access and Egress

- a) Structural ramps that are used solely by employees as a means of access or egress from excavations shall be designed by a competent person. Structural ramps used for access or egress of equipment shall be designed by a competent person qualified in structural design, and shall be constructed in accordance with the design.
- b) Ramps and runways constructed of two or more structural members shall have the structural members connected together to prevent displacement.
- c) Structural members used for ramps and runways shall be of uniform thickness.
- d) Cleats or other appropriate means used to connect runway structural members shall be attached to the bottom of the runway or shall be attached in a manner to prevent tripping.
- e) Structural ramps used in lieu of steps shall be provided with cleats or other surface treatments on the top surface to prevent slipping.
- f) A stairway, ladder, ramp or other safe means of egress shall be located in trench excavations that are 4 feet (1.22 m) or more in depth so as to require no more than 25 feet (7.62 m) of lateral travel for employees.



9.0 Hazardous Atmospheres

- a) Where oxygen deficiency (atmospheres containing less than 19.5 percent oxygen) or a hazardous atmosphere exists or could reasonably be expected to exist, such as in excavations in landfill areas or excavations in areas where hazardous substances are stored nearby, the atmospheres in the excavation shall be tested before employees enter excavations greater than 4 feet (1.22 m) in depth.
- b) Adequate precautions shall be taken to prevent employee exposure to atmospheres containing less than 19.5 percent oxygen and other hazardous atmospheres. These precautions include providing proper respiratory protection or ventilation.
- c) Adequate precaution shall be taken such as providing ventilation, to prevent employee exposure to an atmosphere containing a concentration of a flammable gas in excess of 20 percent of the lower flammable limit of the gas.
- d) When controls are used that are intended to reduce the level of atmospheric contaminants to acceptable levels, testing shall be conducted as often as necessary to ensure that the atmosphere remains safe.

10.0 Emergency Rescue Equipment

- a) Emergency rescue equipment, such as breathing apparatus, a safety harness and line, or a basket stretcher, shall be readily available where hazardous atmospheric conditions exist or may reasonably be expected to develop during work in an excavation. This equipment shall be attended when in use.
- b) Employees entering bell-bottom pier holes, or other similar deep and confined footing excavations, shall wear a harness with a lifeline securely attached to it. The lifeline shall be separate from any line used to handle materials, and shall be individually attended at all times while the employee wearing the lifeline is in the excavation.

11.0 Protection From Hazards Associated With Water Accumulation

- a) Employees shall not work in excavations in which there is accumulated water, or in excavations in which water is accumulating, unless adequate precautions have been taken to protect employees against the hazards posed by water accumulation. The precautions necessary to protect employees adequately vary with each situation, but could include special support or shield systems to protect from cave-ins, water removal to control the level of accumulating water, or use of a safety harness and lifeline.



- b) If water is controlled or prevented from accumulating by the use of water removal equipment, the water removal equipment and operations shall be monitored by a competent person to ensure proper operation.
- c) If excavation work interrupts the natural drainage of surface water (such as streams), diversion ditches, dikes, or other suitable means shall be used to prevent surface water from entering the excavation and to provide adequate drainage of the area adjacent to the excavation. Excavations subject to runoff from heavy rains will require an inspection by a competent person and compliance with paragraphs (a) and (b) above.

12.0 Stability Of Adjacent Structures

- a) Where the stability of adjoining buildings, walls, or other structures is endangered by excavation operations, support systems such as shoring, bracing, or underpinning shall be provided to ensure the stability of such structures for the protection of employees.
- b) Excavation below the level of the base or footing of any foundation or retaining wall that could be reasonably expected to pose a hazard to employees shall not be permitted except when:
 - A support system, such as underpinning, is provided to ensure the safety of employees and the stability of the structure; or
 - The excavation is in stable rock; or
 - A registered professional engineer has approved the determination that the structure is sufficiently removed from the excavation so as to be unaffected by the excavation activity; or
 - A registered professional engineer has approved the determination that such excavation work will not pose a hazard to employees.
- c) Sidewalks, pavements and appurtenant structure shall not be undermined unless a support system or another method of protection is provided to protect employees from the possible collapse of such structures.

13.0 Protection Of Employees From Loose Rock Or Soil

- a) Adequate protection shall be provided to protect employees from loose rock or soil that could pose a hazard by falling or rolling from an excavation face. Such protection shall consist of scaling to remove loose material; installation of protective barricades at intervals as necessary on the face to stop and contain falling material; or other means that provide equivalent protection.



- b) Employees shall be protected from excavated or other materials or equipment that could pose a hazard by falling or rolling into excavations. Protection shall be provided by placing and keeping such materials or equipment at least 2 feet (.61 m) from the edge of excavations, or by the use of retaining devices that are sufficient to prevent materials or equipment from falling or rolling into excavations, or by a combination of both if necessary.

14.0 Inspections

- a) Daily inspections of excavations, the adjacent areas, and protective systems shall be made by a competent person for evidence of a situation that could result in possible cave-ins, indications of failure of protective systems, hazardous atmospheres, or other hazardous conditions. An inspection shall be conducted by the competent person prior to the start of work and as needed throughout the shift. Inspections shall also be made after every rainstorm or other hazard increasing occurrence. These inspections are only required when employee exposure can be reasonably anticipated.
- b) Where the competent person finds evidence of a situation that could result in a possible cave-in, indications of failure of protective systems, hazardous atmospheres, or other hazardous conditions, exposed employees shall be removed from the hazardous area until the necessary precautions have been taken to ensure their safety.

15.0 Protection From Cave-Ins

- a) Each employee in an excavation shall be protected from cave-ins by an adequate protective system designed in accordance with 29 CFR 1926.652 except when:
- Excavations are made entirely in stable rock; or
 - Excavations are less than 5 feet (1.52 m) in depth and examination of the ground by a competent person provides no indication of a potential cave-in.

Supervisors shall consult the applicable regulation for more detailed requirements and are required to ensure that all sloping, benching and shoring activities comply with the specifications put forth in 29 CFR 1926 Subpart P; Appendices A through F.



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b) When protective systems are required (e.g.: greater than 5 feet deep) for excavations or trenches, the walls of the excavation or trench must be one of the following:

- Sloped for stability.
- Cut to create stepped or benched grades.
- Supported by a system made with posts, beams, shores or planking and hydraulic jacks.
- Supported by a trench box to protect workers in an excavation or trench.

Additionally:

- Excavated materials must be at least 2 (two) feet away from the edge of the excavation or trench.
- An exit ladder must be within 25 feet of workers.

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End Policy



1.0 Scope and Application

This policy contains safety requirements to protect employees from falls of six (6) feet or more when performing elevated work except on ladders and scaffolding (See Ladders and Scaffolding Policy). This includes all construction work and activities that subject employees to elevated heights, including, but not limited to: changing light bulbs, trimming trees, all hi-lo truck work, painting, etc. This policy complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce and 29 CFR Subpart M (Fall Protection) as promulgated by the U.S. Occupational Safety and Health Administration.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Implementation of policy. Designated qualified person.
Supervisors:	Ensure policy is adhered to by all employees.
Employees:	Follow requirements contained in this policy.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents minimum fall protection requirements. Department Heads may develop more specific procedures to be followed in their respective departments.

4.0 Definitions

Qualified Person: A person, typically a Supervisor, that has been trained in all of the following areas:

- The nature of fall hazards in the work area;
- The correct procedures for erecting, maintaining, disassembling, and inspecting the fall protection systems to be used;
- The use and operation of guardrail systems, personal fall arrest systems, safety net systems, warning line systems, safety monitoring systems, controlled access zones, and other protection to be used;
- The role of each employee in the safety monitoring system when this system is used;
- The limitations on the use of mechanical equipment during the performance of roofing work on low-sloped roofs;



- The correct procedures for the handling and storage of equipment and materials and the erection of overhead protection; and
- The role of employees in a Fall Protection Plan and the OSHA standard.

5.0 Training

Employees engaged in activities that expose them to fall hazards at heights of six (6) feet or more will receive training in the requirements of this policy at their time of initial assignment. Additionally, the employee will receive training in fall protection to be provided by a qualified person. Retraining will be provided whenever conditions or work practices and/or equipment changes or when an employee demonstrates a lack of understanding for the requirements associated with fall protection.

6.0 Documentation Requirements

Written certification of training record.

7.0 General Requirements

- a) Supervisors will ensure that all fall protection systems selected for each application will be installed before an employee is allowed to go to work in an area that necessitates the protection. When selecting and purchasing fall protection equipment and supplies, they must be approved for the purpose for which they are intended. Such fall protection equipment is required to bear appropriate labels clearly indicating that the equipment meets or exceeds applicable ANSI and ASTM requirements.
- b) All elevated work above six (6) feet requires that employees utilize some type of personal fall arrest system such as lanyards, lifelines or other protections as provided in this policy.
- c) Where lanyards and vertical fall arrest systems are used, a body harness shall be worn with lanyards and vertical fall arrestors being anchored to a suitable point sufficient to withstand above and beyond the force of impact as specified in 29 CFR 1926.503 and 1916 Subpart M Appendices A through E.
- d) Supervisors will determine if the walking/working surfaces on which its employees are to work have the strength and structural integrity to support employees safely. Employees will be allowed to work on those surfaces only when the surfaces have the requisite strength and structural integrity.



- e) If the situation calls for use of fall protection devices such as harnesses or lanyards and belts because the fall hazard cannot be reduced to a safe level, then the employee must don such protective equipment before beginning the work and use it as intended throughout the duration of the work.
- f) Only employees trained in such work are expected to perform it.
- g) All worksites shall be kept clean and orderly and in a sanitary condition.
- h) All walking/working surfaces must be kept in a clean and, so far as possible, dry condition. Where wet processes are used, drainage shall be maintained, and false floors, platforms, mats, or other dry standing places should be provided where practicable.

8.0 Personal Fall Arrest Systems

- a) Personnel requiring the use of personal fall protection equipment shall employ the "Buddy System" or have an observer to render assistance when and if required.
- b) There are three main components to the personal fall arrest system. This includes the personal protective equipment the employee wears, the connecting devices and the anchorage point. Prior to tying off to perform the work, a means of rescue in the event of a fall must be immediately available. The system needs to meet the following criteria for each component:
 - 1. Personal Protective Equipment
 - Full body harnesses are required. The use of body belts is prohibited.
 - The attachment point of the body harness is the center D-ring on the back.
 - Employees must always tie off at or above the D ring of the harness except when using lanyards 3 feet or less in length.
 - Harnesses or lanyards that have been subjected to an impact load shall be destroyed unless involved in an accident in which case it shall be turned over to the Risk Manager.
 - Load testing shall not be performed on fall protection equipment.
 - 2. Connecting devices
 - This device can be a rope or web lanyard, rope grab or retractable lifeline.
 - Only locking snaphooks may be used.
 - Horizontal lifelines will be designed by a qualified person and installed in accordance with the design requirements.
 - Lanyards and vertical lifelines need a minimum breaking strength of 5,000 pounds.



- Lanyards may not be clipped back to itself (e.g. around an anchor point) unless specifically designed to do so.
- If vertical lifelines are used, each employee will be attached to a separate lifeline.
- Lifelines need to be protected against being cut or abraded

3. Anchorage

- Secure anchor points are the most critical component when employees must use fall arrest equipment. Buildings may have existing structures (e.g., steel beams that may meet the criteria for a secure anchor point). Other work locations and assignments may require the installation of a temporary or permanent anchor. As a minimum, the following criteria must be considered for each type of anchor point:
 - Structure must be sound and capable of withstanding a 5000 lb. static load/person attached.
 - Structure/anchor must be easily accessible to avoid fall hazards during hook up. Direct tying off around sharp edged structures can reduce breaking strength by 70% therefore; chafing pads or abrasion resistant straps must be used around sharp edged structures to prevent cutting action against safety lanyards or lifelines.
 - Structures used as anchor points must be at the worker's shoulder level or higher to limit free fall to 6 feet or less and prevent contact with any lower level (exception – when self retracting lifelines and or 3 foot lanyards are used)
 - Choose structures for anchor points that will prevent swing fall hazards. Potentially dangerous "pendulum" like swing falls can result when a worker moves horizontally away from a fixed anchor point and falls. The arc of the swing produces as much energy as a vertical free fall and the hazard of swinging into an obstruction becomes a major factor. Raising the height of the anchor point can reduce the angle of the arc and the force of the swing. Horizontal lifelines can help maintain the attachment point overhead and limit the fall vertically. A qualified person must design a horizontal lifeline.

c) Permanent Anchor Requirements:

In addition to all the criteria listed above, the following points must be considered:

- Environmental factors and dissimilarity of materials can degrade exposed anchors.
- Compatibility of permanent anchors with employee's fall arrest equipment.
- Inclusion of permanent anchors into a Preventive Maintenance Program with scheduled annual re-certification.
- Visibly label permanent anchors.



- Anchors must be immediately removed from service and re-certified if subjected to fall arrest forces.
- d) Reusable Temporary Anchors:
- Reusable temporary roof anchors must be installed and used following the manufacturer's installation guidelines.
 - Roof anchors must be compatible with employee's fall arrest equipment.
 - Roof anchors must be removed from service at the completion of the job and inspected prior to reuse following the manufacturer's inspection guidelines.
 - Roof anchors must be immediately removed from service and disposed of if subjected to fall arrest forces.
- e) Complete System:
- If a fall occurs, the employee should not be able to free fall more than 6 feet nor contact a lower level. To ensure this, add the height of the worker, the lanyard length and an elongation length of 3.5 feet. Using this formula, a six-foot worker with a six-foot lanyard would require a tie-off point at least 15.5 feet above the next lower level.
- A personal fall arrest system that was subjected to an impact needs to be removed from service immediately.
 - Personal fall arrest systems need to be inspected prior to each use and damaged or deteriorated components removed from service.
 - Personal fall arrest systems should not be attached to guardrails nor hoists.
- f) Inspection:
- The employee will inspect the entire personal fall arrest system prior to every use. The competent person will inspect the entire system in use at the initial installation and weekly thereafter. The visual inspection of a personal fall arrest system periodically will follow the manufacturer's recommendations.

9.0 Work From Aerial Lifts And Self Powered Work Platforms

- a) Body harnesses must be worn with a shock-absorbing lanyard (preferably not to exceed 3 feet in length) and must be worn when working from an elevated work platform (exception: scissor lifts and telescoping lifts that can move only vertically do not require the use of a harness and lanyard as long as the work platform is protected by a guardrail system). The point of attachment must be the lift's boom or work platform.
- b) Personnel cannot attach lanyards to adjacent poles, structures or equipment while they are working from the aerial lift.



- c) Personnel cannot move an aerial lift while the boom is in an elevated working position and the operator is inside of the lift platform.

10.0 Guardrail Systems

- a) Guardrails are needed at the edge of work areas 6 feet or more in height to protect employees from falling. This includes the edge of excavations greater than six feet in depth. Guardrail systems need to meet the following criteria:
- Toprail is 42 inches, +/- 3 inches above the walking/working level
 - Midrail is located midway between the top rail and the walking/working level

* It is important to remember that the working level is that level where the work is being done. Someone working on a stepladder next to an edge may raise his/her working surface well above the walking surface.

- b) Both top and midrails should be constructed of materials at least one-quarter inch in thickness or diameter. If wire rope is used for top rails, it needs to be flagged with a high-visibility material at least every 6 feet and can have no more than 3" of deflection.
- c) The toprail needs to withstand a force of 200 pounds when applied in any downward or outward direction.
- d) The midrail needs to withstand a force of 150 pounds applied in any downward or outward direction.
- e) The system should be smooth to prevent punctures, lacerations or snagging of clothing.
- f) The ends of the top rail should not overhang the terminal posts, except when such overhang does not present a projection hazard.
- g) When a hoisting area is needed, a chain, gate or removable guardrail section must be placed across the access opening when hoisting operations are not taking place.



11.0 Unprotected Sides And Edges

- a) Each employee on a walking/working surface (horizontal and vertical surface) with an unprotected side or edge which is 6 feet (1.8 m) or more above a lower level shall be protected from falling by the use of guardrail systems, safety net systems, or personal fall arrest systems.

12.0 Leading Edges

- a) Each employee who is constructing a leading edge 6 feet (1.8 m) or more above lower levels shall be protected from falling by guardrail systems, safety net systems, or personal fall arrest systems. Exception: If a Supervisor can demonstrate that it is infeasible or creates a greater hazard to use these systems, a fall protection plan shall be developed that meets the requirements of paragraph (k) of 29 CFR 1926.502.

Note: There is a presumption that it is feasible and will not create a greater hazard to implement at least one of the above-listed fall protection systems. Accordingly, the Supervisor has the burden of establishing that it is appropriate to implement a fall protection plan which complies with 1926.502(k) for a particular workplace situation, in lieu of implementing any of those systems.

- b) Each employee on a walking/working surface 6 feet (1.8 m) or more above a lower level where leading edges are under construction, but who is not engaged in the leading edge work, shall be protected from falling by a guardrail system, safety net system, or personal fall arrest system.
- c) If a guardrail system is chosen to provide the fall protection, and a controlled access zone has already been established for leading edge work, the control line may be used in lieu of a guardrail along the edge that parallels the leading edge.
- d) A “Fall Protection Plan” option is available only to employees engaged in leading edge work who can demonstrate that it is infeasible or it creates a greater hazard to use conventional fall protection equipment. The fall protection plan must conform to the specifications of 29 CFR Part 1926.502.



13.0 Hoist Areas

- a) Each employee in a hoist area shall be protected from falling 6 feet (1.8 m) or more to lower levels by guardrail systems or personal fall arrest systems. If guardrail systems, [or chain, gate, or guardrail] or portions thereof, are removed to facilitate the hoisting operation (e.g., during landing of materials), and an employee must lean through the access opening or out over the edge of the access opening (to receive or guide equipment and materials, for example), that employee shall be protected from fall hazards by a personal fall arrest system.

14.0 Holes

- a) Each employee on walking/working surfaces shall be protected from falling through holes (including skylights) more than 6 feet (1.8 m) above lower levels, by personal fall arrest systems, covers, or guardrail systems erected around such holes.
- b) Each employee on a walking/working surface shall be protected from tripping in or stepping into or through holes (including skylights) by covers.
- c) Each employee on a walking/working surface shall be protected from objects falling through holes (including skylights) by covers.

15.0 Ramps, Runways, And Other Walkways

- a) Each employee on ramps, runways, and other walkways shall be protected from falling 6 feet (1.8 m) or more to lower levels by guardrail systems.

16.0 Excavations

- a) Each employee at the edge of an excavation 6 feet (1.8 m) or more in depth shall be protected from falling by guardrail systems, fences, or barricades when the excavations are not readily seen because of plant growth or other visual barrier
- b) Each employee at the edge of a well, pit, shaft, and similar excavation 6 feet (1.8 m) or more in depth shall be protected from falling by guardrail systems, fences, barricades, or covers.



17.0 Dangerous Equipment

- a) Each employee less than 6 feet (1.8 m) above dangerous equipment shall be protected from falling into or onto the dangerous equipment by guardrail systems or by equipment guards.
- b) Each employee 6 feet (1.8 m) or more above dangerous equipment shall be protected from fall hazards by guardrail systems, personal fall arrest systems, or safety net systems.

18.0 Wall Openings

- a) Each employee working on, at, above, or near wall openings (including those with chutes attached) where the outside bottom edge of the wall opening is 6 feet (1.8 m) or more above lower levels and the inside bottom edge of the wall opening is less than 39 inches (1.0 m) above the walking/working surface, shall be protected from falling by the use of a guardrail system, a safety net system, or a personal fall arrest system.

19.0 Protection From Falling Objects

- a) When an employee is exposed to falling objects, each employee is required to wear an ANSI (American National Standards Institute) hard hat and comply with one of the following measures:
 - Erect toeboards, screens, or guardrail systems to prevent objects from falling from higher levels; or,
 - Erect a canopy structure and keep potential fall objects far enough from the edge of the higher level so that those objects would not go over the edge if they were accidentally displaced; or,
 - Barricade the area to which objects could fall, prohibit employees from entering the barricaded area, and keep objects that may fall far enough away from the edge of a higher level so that those objects would not go over the edge if they were accidentally displaced.

End Policy



1.0 Scope and Application

The purpose of this policy is to establish safe work practices that are intended to prevent electric shock or other injuries resulting from either direct or indirect electrical contacts when work is performed near or on equipment or circuits which are or may be energized. This policy applies to both “Qualified” employees and “Unqualified” employees who are working on, near, or with electrical installations defined below. This policy complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce and 29 CFR 1910.302 through 1910.335 (Electrical Safety), including 1910.137 (Electrical Protective Devices) and 1910.269 (Electrical Generation, Transmission and Distribution) as promulgated by the U.S. Occupational Safety and Health Administration.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Implementation of policy. Will ensure training of Assistant Department Head.
Assistant Dept. Head:	Identification and location of hazardous electrical exposures and equipment, employee training and selection and use of personal protective equipment.
Supervisors:	Ensure policy is adhered to by all employees.
Employees:	Follow requirements contained in this policy.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents minimum electrical safety requirements. Department Heads may develop more specific procedures to be followed in their respective departments.

4.0 Definitions

Qualified Person:	An employee who is permitted to work on or near exposed energized parts after having met the training requirements established below. Qualified persons must be capable of working safely on energized circuits and must be familiar with the proper use of special precautionary techniques, personal protective equipment, insulating and shielding materials, and insulated tools.
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Unqualified Person: An employee, such as a custodian or building engineer, whose work may cause them to come into close contact with an energized component, such as a fuse box, but who are not allowed to perform work on or near an energized part or piece of equipment.

5.0 Training

Qualified Employees:

All qualified employees and any employee working with or exposed to 50 volts or more shall be trained in the following topics prior to their assignment and whenever facility electrical conditions change. Department Heads shall ensure this training is received and documented.

- The skills and techniques necessary to distinguish exposed live parts from other parts of electric equipment.
- The skills and techniques necessary to determine the nominal voltage of exposed live parts, and
- The clearance distances specified in 29 CFR Part 1910.333(c) and the corresponding voltages to which the qualified person will be exposed.
- The proper use of special precautionary techniques, personal protective equipment, insulating and shielding materials, and insulated tools.

Unqualified Employees:

Unqualified employees shall be instructed prior to their assignment in safety related work procedures necessary for them to protect themselves from electrical hazards (e.g. resetting of a circuit breaker, etc.). Supervisors shall ensure this instruction is received and documented.

6.0 Documentation Requirements

Written certification of training and instruction record.

7.0 General Requirements

- a) No County employee shall be authorized to work on energized components of an electrical system except specifically authorized and qualified employees who have been designated in this policy.
- b) Work activities and authorizations for qualified employees are restricted to the use of voltage meters to determine if voltage is being supplied to the equipment being tested. In these instances, test meters shall be properly insulated and under no condition shall they be used on systems in excess of 120 volts AC.



8.0 Work On Or Near Exposed De-energized Parts

- a) Live parts to which any employee may be exposed will be de-energized by following the County's lockout procedure before any employee works on or near them, unless de-energizing will introduce additional or increased hazards or is not feasible due to equipment design or operational limitations. In cases where de-energizing cannot be accomplished, employees will be instructed by supervision to stay clear of the area and Supervisors will ensure that appropriate safeguards (e.g. locking doors, barricading) are put in place to ensure that employees keep away from the area. Live parts that operate at less than 50 volts to ground need not be de-energized if there will be no increased exposure to electrical burns or to explosion due to electric arcs.
- Examples of increased or additional hazards include deactivation of emergency alarm systems, shutdown of hazardous location ventilation equipment, or removal of illumination for an area.
 - Examples of work that may be performed on or near energized circuit parts because of infeasibility due to equipment design or operational limitations include testing of electric circuits that can only be performed with the circuit energized and work on circuits that form an integral part of a continuous process that would otherwise need to be completely shut down in order to permit work on one circuit or piece of equipment. In these cases, such work is limited to systems of no more than 120 volts AC.
- b) Whenever any employee is exposed to contact with parts of fixed electric equipment or circuits that have been de-energized, the circuits energizing the parts will be properly locked out as per the County's lockout policy.
- c) Safe procedures for de-energizing circuits and equipment will be determined before circuits or equipment are de-energized. These procedures are required to be developed as per the County's lockout policy.
- d) The circuits and equipment to be worked on will be disconnected from all electric energy sources. Control circuit devices, such as push buttons, selector switches, and interlocks, may not be used as the sole means for de-energizing circuits or equipment. Interlocks for electric equipment may not be used as a substitute for lockout procedures.
- e) Stored electric energy that might endanger personnel will be released before starting work. Capacitors shall be discharged and high capacitance elements shall be short-circuited and grounded, if the stored electric energy might endanger personnel.



- f) Stored non-electrical energy in devices that could reenergize electric circuit parts will be blocked or relieved to the extent that the circuit parts could not be accidentally energized by the device.
- g) No work will be performed on or near de-energized live parts, circuits or equipment until their de-energized condition has been verified. Verification of the de-energized condition will be made as follows:
 - A qualified person will operate the equipment operating controls or otherwise verify that the equipment cannot be restarted.
 - A qualified person will use test equipment to test the circuit elements and electrical parts of equipment to which employees will be exposed and will verify that the circuit elements and equipment parts are de-energized.
 - The test shall also determine if any energized condition exists as a result of inadvertently induced voltage or unrelated voltage backfeed even though specific parts of the circuit have been de-energized and presumed to be safe.
- h) Before any circuit or equipment is reenergized (even temporarily) the following requirements will be met in the order listed:
 - a. A qualified person will conduct tests and visual inspections, as necessary, to verify that all tools, electrical jumpers, shorts, grounds, and other such devices have been removed, so that the circuits and equipment can be safely energized.
 - b. Employees exposed to the hazards associated with reenergizing the circuit or equipment will be warned to stay clear of circuits and equipment.
 - c. Each lock will be removed by the employee who applied it or under his or her direct supervision.
 - d. If that employee is absent from the workplace, then the lock may be removed provided that it is certain that the employee who applied the lock is not available at the workplace, and that employee is made aware that the lock has been removed before he or she resumes work as per the County's lockout policy.
 - e. There will be a visual determination that all employees are clear of the circuits and equipment.



9.0 Work On Or Near Exposed Energized Parts

In those cases where the exposed live parts are not de-energized, either because of increased or additional hazards or because of infeasibility due to equipment design or operational limitations, other safety-related work practices must be used to protect employees who may be exposed to the electrical hazards involved.

The work practices used must protect employees against contact with energized circuit parts directly with any part of their body or indirectly through some other conductive object or where employees are near enough to be exposed to any hazard they present.

- a) Only qualified persons may work on electric circuit parts or equipment that, has not been de-energized. This work is limited to systems of no more than 120 volts AC. These employees must be familiar with the proper use of special precautionary techniques, personal protective equipment, insulating and shielding materials, and insulated tools.
- b) Whenever any type of work is to be performed near overhead lines, the lines will be de-energized and grounded, or other protective measures will be provided before work is started. When overhead lines are to be de-energized, arrangements to de-energize and ground them will be made with the organization that operates or controls the electrical circuits involved. When protective measures are provided such as guarding, isolating, or insulating, those precautions shall prevent employees from contacting such lines directly with any part of their body or indirectly through conductive materials, tools, or equipment. Only electrical utility employees or their contractors will be permitted to install insulating devices on overhead power transmission or distribution lines.
- c) Whenever an unqualified employee is working in an elevated position near overhead lines (e.g. aerial lift), the location will be such that the person and the longest conductive object he or she may contact cannot come closer to any unguarded, energized overhead line than the following distances:
 - For voltages to ground 50,000 volts (50kV) or below - 10ft.(305cm);
 - For voltages to ground over 50kV - 10 ft. (305cm) plus 4 inches (10 cm) for every 10kV over 50kV.
- d) Whenever an unqualified employee is working on the ground in the vicinity of overhead lines, the person may not bring any conductive object closer to unguarded, energized overhead lines than the distances given above.



- e) For voltages normally encountered with overhead power lines, objects which do not have an insulating rating for the voltage involved are considered to be conductive. For example, a wooden rake handle that does not have an insulating rating is considered to be a conductive object.
- f) Whenever any person is working in the vicinity of overhead lines, whether in an elevated position or on the ground, the person may not approach or take any conductive object without an approved insulating handle closer to exposed energized parts than that shown Table 1 below unless:
- The person is insulated from the energized part. Gloves, with sleeves if necessary, rated for the voltage involved, are considered to be insulation of the person from the energized part on which work is performed, or
 - The energized part is insulated both from all other conductive objects at a different potential and from the person, or
 - The person is insulated from all conductive objects at a potential different from that of the energized part.

Table 1
Minimum Safe Approach Distances

Voltage Range (Phase to Phase)	Minimum Approach Distance
300V and less	Avoid Contact
Over 300V, not over 750V	1 ft. 0 in. (30.5 cm)
Over 750V, not over 2kV	1 ft. 6 in. (46 cm)
Over 2kV, not over 15kV	2 ft. 0 in. (61 cm)
Over 15kV, not over 37kV	3 ft. 0 in. (91 cm)
Over 37kV, not over 87.5kV	3 ft. 6 in. (107 cm)
Over 87.5kV, not over 121kV	4 ft. 0 in. (122 cm)
Over 121kV, not over 140kV	4 ft. 6 in. (137 cm)



- g) Any vehicle or mechanical equipment capable of having parts of its structure elevated near energized overhead lines will be operated so that a minimum clearance of 10 ft. (305 cm) is maintained. If the voltage is higher than 50kV, the clearance will be increased a minimum of 4 inches (10 cm) for every 10kV over that voltage. However, under any of the following conditions, the clearance may be reduced:
- h) Employees standing on the ground may not contact the vehicle or mechanical equipment or any of its attachments, unless:
- The employee is using protective equipment rated for the voltage; or
 - The equipment is located so that no un-insulated part its structure (that portion of the structure that provides a conductive path to employees on the ground) can come closer to the line than permitted in paragraph number 12 (see above).
- i) If any vehicle or mechanical equipment capable of having parts of its structure elevated near energized overhead lines is intentionally grounded, employees working on the ground near the point of grounding will not stand at the grounding location whenever there is a possibility of overhead line contact.
- j) Additional precautions, such as the use of barricades or insulation, will be taken to protect employees from hazardous ground potentials, depending on earth resistivity and fault currents that can develop within the first few feet or more outward from the grounding point.
- k) Qualified employees may not enter spaces containing exposed energized parts, unless illumination is provided that enables the qualified employee to perform the work safely.
- l) Where lack of illumination or an obstruction precludes observation of the work to be performed, qualified employees may not perform tasks near exposed energized parts.
- m) Employees must not reach blindly into areas which may contain energized parts.
- n) Whenever a qualified employee works in a confined or enclosed space (such as a manhole or vault) that contains exposed energized parts, he/she must be provided with, and will use, protective shields, protective barriers, or insulating materials as necessary to avoid inadvertent contact with those parts.
- o) Doors, hinged panels, and the like that are present in any confined or enclosed space will be secured to prevent their swinging into an employee and causing the employee to contact exposed energized parts.



- p) Conductive materials and equipment that are in contact with any part of an employees body will be handled in a manner that will prevent them from contacting exposed energized conductors or circuit parts.
- q) Whenever an employee must handle long dimensional conductive objects (such as ducts and pipes) in areas with exposed live parts, appropriate work practices (such as the use of insulation, guarding and material handling techniques) shall be instituted which will minimize the hazard.
- r) Only wooden ladders or ladders with nonconductive side rails will be used in situations where the employee or ladder could contact exposed energized parts.
- s) Conductive articles of jewelry and clothing (such as watch bands, bracelets, rings, metal belt buckles, metal rimmed glasses, keychains, necklaces, metalized aprons, cloth with conductive thread, or metal headgear) may not be worn if they might contact exposed energized parts. However, such articles may be worn if they are rendered nonconductive by covering, wrapping, or other insulating means.
- t) Where live parts present an electrical contact hazard, employees may not perform housekeeping duties at such close distances to the parts that there is a possibility of contact, unless adequate safeguards (such as insulating equipment) are provided.
- u) Electrically conductive cleaning materials (including conductive solids such as steel wool, metalized cloth, and silicon carbide, as well as conductive liquid solutions) may not be used in proximity to energized parts unless appropriate procedures are followed that will prevent electrical contact.
- v) Only a qualified person following the requirements of the procedures set forth in this section of the policy may defeat an electrical safety interlock (limited to 120 volts AC) and then only temporarily while he or she is working on the equipment.
- w) The interlock system will be returned to its operable condition when such work is completed.

10.0 Portable Electric Equipment

- a) All cord- and plug- connected electric equipment, flexible cord sets (extension cords), and portable electric equipment will be handled in a manner that will not cause damage.



- b) Flexible electric cords connected to equipment may not be used for raising or lowering the equipment.
- c) Flexible cords may not be fastened with staples or otherwise hung in such a fashion as could damage the outer jacket or insulation.
- d) Portable cord- and plug- connected equipment and flexible cord sets (extension cords) shall be visually inspected before use and missing pins, or damage to outer jacket or insulation) and for evidence of possible internal damage (such as pinched or crushed outer jacket). However, cord- and plug- connected equipment and flexible cord sets (extension cords) which remain connected once they are put in place and are not exposed to damage need not be visually inspected until they are relocated.
- e) If there is a defect or evidence of damage that might expose an employee to injury, the defective or damaged item will be removed from service, and no employee may use it until necessary repair and tests have been made to render the equipment safe.
- f) Whenever an attachment plug is to be connected to a receptacle (including any on a cord set), the relationship of the plug and receptacle contacts will first be checked to ensure that they are of proper mating configurations.
- g) A flexible cord used with grounding-type equipment will contain an equipment grounding conductor.
- h) Attachment plugs and receptacles may not be connected or altered in a manner that would prevent proper continuity of the equipment grounding conductor at the point where plugs are attached to receptacles. Additionally, those devices may not be altered to allow the grounding pole of a plug to be inserted into slots intended for connection to the current carrying conductors.
- i) Adapters that interrupt the continuity of the equipment grounding connection may not be used.
- j) Portable electric equipment and flexible cords used in highly conductive work locations (such as those inundated with water or other conductive liquids), or in job locations where employees are likely to contact water or conductive liquids,
- k) Employees' hands may not be wet when plugging and unplugging flexible cords and cord and plug-connected equipment, if energized equipment is involved.



- l) Energized plug and receptacle connections may be handled only with insulating protective equipment if the condition of the connection could provide a conducting path to the employees hand (if, for example, a cord connector is wet from being immersed in water).
- m) Locking-type connectors will be properly secured after connection.

11.0 Electric Power And Lighting Circuits

- a) Load rated switches, circuit breakers, or other devices specifically designed as disconnecting means will be used for the routine opening, reversing, or closing of circuits under load conditions.
- b) Cable connectors not of the load-break type, fuses, terminal lugs, and cable splice connections may not be used for such purposes, except In an emergency.
- c) After a circuit is de-energized by a circuit protective device, the circuit may not be manually re-energized until it has been determined that the equipment and circuit can be safely energized. However, when it can be determined from the design of the circuit and the overcurrent devices involved that the automatic operating of a device was caused by an overload connected equipment is needed before the circuit is reenergized.
- d) Repetitive manual reclosing of circuit breakers or reenergizing circuits through replaced fuses is prohibited. Such a condition would indicate an electrical problem and a qualified outside contractor should be contacted.
- e) Overcurrent protection of circuits and conductors may not be modified, even on a temporary basis, beyond that allowed by the OSHA standard regulating the installation safety requirements for overcurrent protection (See 29 CFR 1910.304(e)).

12.0 Test Instruments And Equipment

- a) Only qualified persons may perform testing work on electric circuits or equipment.
- b) Test instruments and equipment and all associated test leads, cables, power cords, probes, and connectors will be visually inspected for external defects and damage before the equipment is used. If there is a defect or evidence of damage that might expose an employee to injury, the defective or damaged item will be removed from service, and no employee may use the item until necessary repairs and tests to render the equipment safe have been made.



- c) Test instruments and equipment and their accessories will be insulated and rated for the circuits and equipment to which they will be connected and will be designed for the environment in which they will be used.

13.0 Flammable Or Ignitable Materials

- a) In those situations where flammable materials are present only occasionally, electric equipment capable of igniting them will not be used, unless measures are taken to prevent hazardous conditions from developing. Flammable materials include, but are not limited to: flammable gases, vapors, or liquids; combustible dust and ignitable fibers or filings.
- b) In those situations where flammable vapors, liquids or gases, or combustible dusts or fibers are (or may be) present on a regular basis, the electrical installation requirements contained in the OSHA standard regulating hazardous locations must be observed (See 29 CFR 1910.307).

14.0 Personal Protection Safeguards

- a) Employees working in areas where there are potential electrical hazards will be provided with, and will use, electrical protective equipment that is appropriate for the specific parts of the body to be protected and for the work to be performed. This equipment may include rubber protective equipment such as insulating gloves, blankets, hoods, line hose, sleeves, and matting for use around electric apparatus.
- b) Protective equipment will be maintained in a safe, reliable condition and will be periodically inspected and/or tested.
- c) If the insulating capability of protective equipment may be subject to damage during use, the insulating material shall be protected. For example, an outer covering of leather can be used for the protection of rubber insulating material.
- d) Employees will wear nonconductive head protection wherever there is a danger of head injury from electric shock or burns due to contact with exposed energized parts.
- e) Employees will wear protective equipment for the eyes or face wherever there is danger of injury to the eyes or face from electric arcs or flashes or from flying objects resulting from electrical explosion.



- f) When working near exposed energized conductors or circuit parts, each employee will use insulated tools or handling equipment if the tools or handling equipment might make contact with such conductors or parts. If the insulating capability of insulated tools or handling equipment is subject to damage, the insulating material will be protected.
- g) Fuse handling equipment, insulated for the circuit voltage, will be used to remove or install fuses when the fuse terminals are energized.
- h) Ropes and hand lines used near exposed energized parts shall be nonconductive.
- i) Protective shields, protective barriers, or insulating materials will be used to protect each employee from shock, burns, or other electrically related injuries while that employee is working near exposed energized parts which might be accidentally contacted or where dangerous electric heating or arcing might occur.
- j) When normally enclosed live parts are exposed for maintenance or repair, they will be guarded to protect unqualified persons from contact with their live parts.
- k) Alerting techniques will be used to warn and protect employees from hazards which could cause injury due to electric shock, burns, or failure of electric equipment parts as follows:
 - Safety Signs and Tags: Safety signs, safety symbols, or accident prevention tags will be used where necessary to warn employees about electrical hazards which may endanger them.
 - Barricades: Barricades will be used in conjunction with safety signs where it is necessary to prevent or limit employee access to work areas exposing employees to un-insulated energized conductors or circuit parts. Conductive barricades may not be used where they might cause an electrical contact hazard.
 - Attendants: If signs and barricades do not provide sufficient warning and protection from electrical hazards, an Attendant will be stationed to warn and protect employees.

END POLICY



1.0 Scope and Application

This policy has been designed to provide procedures and guidelines necessary for the protection of employees against bloodborne pathogens and other pathogenic bacterium and viruses and to provide protection against communicable diseases that can be transmitted through human blood, other body fluid or other potentially infectious materials (OPIM). The requirements contained in this policy apply to all employees with occupational exposure to bloodborne pathogens, including designated first aid responders. Limited requirements apply to all other employees. This policy complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce and 29 CFR 1910.1030 (Bloodborne Pathogens) as promulgated by the U.S. Occupational Safety and Health Administration.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Implementation of policy. Training of employees.
Supervisors:	Ensure policy is adhered to by all employees. Inspections.
Employees:	Follow requirements contained in this policy.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents minimum communicable diseases protection requirements. Individual departments, unless specifically exempted by the County Risk Manager, will develop their own internal Exposure Control Plan. See the Exposure Control Plan requirements in the appropriate section of this policy. Department Heads will solicit input from non-managerial employees responsible for direct patient care who are potentially exposed to injuries from contaminated sharps in the identification, evaluation, and selection of effective engineering and work practice controls and shall document the solicitation in the Exposure Control Plan.

4.0 Definitions

AIDS:	Acquired Immunodeficiency Syndrome
Bloodborne Pathogen:	Pathogenic microorganisms that are present in human blood, other certain body fluids and other potentially infectious materials (OPIM) and can cause disease in humans.



	These pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV).
HBV:	Hepatitis B Virus
HIV:	Human Immunodeficiency Virus
OPIM:	Other potentially infectious materials. The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids. Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and HIV-containing cell or tissue cultures, organ cultures, and HIV or HBV containing culture mediums or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

5.0 Training

Employees With Potential Exposures:

Employees in job classifications that have any kind of exposure to bloodborne pathogens and/or OPIM will receive annual training in Bloodborne Pathogens before they are assigned to a job that has occupational exposure. At a minimum, this will include all designated first aid responders; confined space Entrants, Attendants and Supervisors; all medical examiner employees, a health department employees; all sheriff officers; all correctional officers, and all nursing home staff. A written certification of training record is required. All training will be provided through the Department Head.

All Other Employees:

All other employees will receive instruction in the general requirements of this policy.

6.0 Documentation Requirements

The Exposure Control Plan shall be reviewed and updated at least annually and whenever necessary to reflect new or modified tasks and procedures which affect occupational exposure and to reflect new or revised employee positions with occupational exposure. The review will be documented using County approved forms. The review and update of such plans shall:

- Reflect changes in technology that eliminate or reduce exposure to bloodborne pathogens; and
- Document consideration and implementation of appropriate commercially available and effective safer medical devices designed to eliminate or minimize occupational exposure.



7.0 General Requirements

- a) Only employees who are specifically designated as a first aid responder are allowed to render first aid to victims.
- b) In the event you witness a medical emergency, contact 911 immediately and wait for help if it is safe to do so.
- c) Report any and all injuries immediately to your Supervisor.
- d) Report any blood or OPIM exposures to your Supervisor immediately.
- e) Ensure any contaminated sharps generated by you (used insulin needles, broken glass) is properly placed in a labeled and designated “sharps” container.
- f) In the event your department is exempted from the requirement to have an individual Exposure Control Plan, follow the other requirements in this policy.

8.0 Exposure Control Plan Elements

Department Heads are required to ensure that their individual department Exposure Control Plans contain at a minimum, the following information. :

- a) A determination of the job classifications that show a reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee's duties. This determination shall include:
 - A list of all job classifications in which all employees in those job classifications have occupational exposure;
 - A list of job classifications in which some employees have occupational exposure, and
 - A list of all tasks and procedures or groups of closely related task and procedures in which occupational exposure occurs and that are performed by employees in job classifications listed above.

The exposure determination shall be made without regard to the use of personal protective equipment.



- b) The schedule and method of implementation for each of the following sections described in this policy:
- Methods of Compliance.
 - Personal Protective Equipment.
 - Housekeeping.
 - Regulated Wastes.
 - Hepatitis B Vaccination.
 - Post-Exposure Evaluation and Follow-up.
 - Communication of Hazards to Employees.
 - Medical Records and Recordkeeping.
 - Sharps Log.
 - The procedure for the evaluation of circumstances surrounding exposure incidents.

9.0 Methods of Compliance

Each department will address how they will comply with the requirements of this section. For departments that are exempted from the requirement to have an Exposure Control Plan, the compliance methods described in this section are applicable.

- a) Universal precautions shall be observed to prevent contact with blood or other potentially infectious materials. Under circumstances in which differentiation between body fluid types is difficult or impossible, all body fluids shall be considered potentially infectious materials.
- b) Supervisors shall ensure that engineering and work practice controls are used to eliminate or minimize employee exposure. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be used.
- c) Supervisors shall examine and maintain engineering and work practice controls on a regular schedule to ensure their effectiveness.
- d) The County provides readily accessible hand washing facilities to all employees and are required to be used to wash your hands if contacted with blood or OPIM, regardless of whether or not personal protective equipment was worn.
- e) When the provision of hand washing facilities is not feasible, such as with outdoor work, Supervisors will ensure that an appropriate antiseptic hand cleanser in conjunction with clean cloth/paper towels or antiseptic towelettes is provided. When antiseptic hand cleansers or towelettes are used, hands shall be washed with soap and running water as soon as feasible.



- f) Employees must wash their hands immediately or as soon as feasible after removal of gloves or other personal protective equipment.
- g) Employees must wash hands and any other skin with soap and water, or flush mucous membranes with water immediately or as soon as feasible following contact of such body areas with blood or other potentially infectious materials.
- h) Contaminated needles and other contaminated sharps must not be bent, recapped, or removed except as specifically allowed by regulation (see OSHA standard). Shearing or breaking of contaminated needles is prohibited.
- i) Contaminated needles and other contaminated sharps must not be bent, recapped or removed unless Department Heads can demonstrate that no alternative is feasible or that such action is required by a specific medical or dental procedure.
- j) Such bending, recapping or needle removal must be accomplished through the use of a mechanical device or a one-handed technique.
- k) Immediately or as soon as possible after use, contaminated reusable sharps are required to be placed in appropriate containers until properly reprocessed. Contact your Supervisor for the location of appropriate containers which are usually red and contain the biohazard warning symbol, although certain departments may utilize other types of containers.
- l) Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in work areas where there is a reasonable likelihood of occupational exposure to blood or OPIM.
- m) Food and drink cannot be kept or stored in refrigerators, freezers, shelves, cabinets or on countertops or benchtops where blood or other potentially infectious materials are present.
- n) All procedures involving blood or other potentially infectious materials shall be performed in such a manner as to minimize splashing, spraying, spattering, and generation of droplets of these substances.
- o) Mouth pipetting/suctioning of blood or other potentially infectious materials is prohibited.
- p) Specimens of blood or other potentially infectious materials shall be placed in a container which prevents leakage during collection, handling, processing, storage, transport, or shipping.



- q) The container for storage, transport, or shipping shall be labeled or color-coded according to OSHA regulations and closed prior to being stored, transported, or shipped. When a facility utilizes Universal Precautions in the handling of all specimens, the labeling/color-coding of specimens is not necessary provided containers are recognizable as containing specimens. This exemption only applies while such specimens/containers remain within the facility. Labeling or color-coding in accordance with OSHA regulations is required when such specimens/containers leave the facility.
- r) If outside contamination of the primary container occurs, the primary container shall be placed within a second container which prevents leakage during handling, processing, storage, transport, or shipping and is labeled or color-coded according to the requirements of this standard.
- s) If the specimen could puncture the primary container, the primary container shall be placed within a secondary container which is puncture-resistant in addition to the above characteristics.
- t) Equipment which may become contaminated with blood or other potentially infectious materials shall be examined prior to servicing or shipping and shall be decontaminated as necessary, unless the Supervisor can demonstrate that decontamination of such equipment or portions of such equipment is not feasible.
- u) A readily observable label in accordance with OSHA regulations must be attached to the equipment stating which portions remain contaminated.
- v) Supervisors shall ensure that this information is conveyed to all affected employees, the servicing representative, and/or the manufacturer, as appropriate, prior to handling, servicing, or shipping so that appropriate precautions will be taken.

10.0 Personal Protective Equipment

Each department will address how personal protective equipment, in accordance with the requirements of this section, will be implemented. For departments that are exempted from the requirement to have an Exposure Control Plan, the personal protective equipment described in this section can be found in a standard first aid kit. Contact your Supervisor for the location of the nearest first aid kit.

- a) Supervisors shall ensure that first aid kits are contained in their area and routinely checked to ensure adequate supplies are present. At a minimum, all first aid kits should contain a disposable gown, gloves, safety glasses and resuscitation device.



- b) For employees designated as having occupational exposure to blood or OPIM, the County will provide, at no cost to the employee, appropriate personal protective equipment such as, but not limited to, gloves, gowns, laboratory coats, face shields or masks and eye protection, and mouthpieces, resuscitation bags, pocket masks, or other ventilation devices. Personal protective equipment will be considered "appropriate" only if it does not permit blood or other potentially infectious materials to pass through to or reach the employee's work clothes, street clothes, undergarments, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time which the protective equipment will be used.
- c) Each employee must use appropriate personal protective equipment unless the employee temporarily and briefly declines to use personal protective equipment when, under rare and extraordinary circumstances, it is the employee's professional judgment that in the specific instance its use would have prevented the delivery of health care or public safety services or would have posed an increased hazard to the safety of the worker or co-worker. Whenever an employee makes this judgment, the circumstances will be investigated by the Supervisor and documented in a report to the Risk Manager in order to determine whether changes can be instituted to prevent such occurrences in the future.
- d) Supervisors will ensure that appropriate personal protective equipment in the appropriate sizes is readily accessible at the worksite or is issued to employees. Hypoallergenic gloves, glove liners, powderless gloves, or other similar alternatives must be readily accessible to those employees who are allergic to the gloves normally provided.
- e) The County will clean, launder, and dispose, repair and/or replace personal protective equipment required by this policy at no cost to the employee.
- f) If a garment(s) is penetrated by blood or other potentially infectious materials, the garment(s) must be removed immediately or as soon as feasible.
- g) All personal protective equipment must be removed prior to leaving the work area.
- h) When personal protective equipment is removed, it must be placed in an appropriately designated area or container for storage, washing, decontamination or disposal. Contact your Supervisor.
- i) Gloves are required to be worn when it can be reasonably anticipated that employees may have hand contact with blood, other potentially infectious materials, mucous membranes, and non-intact skin; when performing vascular access procedures; and when handling or touching contaminated items or surfaces.



- j) Disposable (single use) gloves such as surgical or examination gloves, are to be replaced as soon as practical when contaminated or as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised.
- k) Disposable (single use) gloves cannot be washed or decontaminated for re-use.
- l) Utility gloves may be decontaminated for re-use if the integrity of the glove is not compromised. However, they must be discarded if they are cracked, peeling, torn, punctured, or exhibit other signs of deterioration or when their ability to function as a barrier is compromised.
- m) Masks in combination with eye protection devices, such as goggles or glasses with solid side shields, or chin-length face shields, shall be worn whenever splashes, spray, spatter, or droplets of blood or other potentially infectious materials may be generated and eye, nose, or mouth contamination can be reasonably anticipated.
- n) Appropriate protective clothing such as, but not limited to, gowns, aprons, lab coats, clinic jackets, or similar outer garments shall be worn in occupational exposure situations. The type and characteristics will depend upon the task and degree of exposure anticipated.
- o) Surgical caps or hoods and/or shoe covers or boots shall be worn in instances when gross contamination can reasonably be anticipated (e.g., autopsies).

11.0 Housekeeping

Each department will specify, at a minimum, the individual housekeeping requirements of this section. For departments that are exempted from the requirement to have an Exposure Control Plan, the following housekeeping requirements must be met.

- a) All worksites must be maintained in a clean and sanitary condition. Areas in which bloodborne or OPIM exposures could occur (e.g. first aid areas, laboratories) must be cleaned according to the schedule implemented within your department. Contact your Supervisor for details. Department Heads shall determine and implement an appropriate written schedule for cleaning and method of decontamination based upon the location within the facility, type of surface to be cleaned, type of soil present, and tasks or procedures being performed in the area.
- b) All equipment and environmental and working surfaces must be cleaned and decontaminated after contact with blood or other potentially infectious materials.



- c) Contaminated work surfaces must be decontaminated with an appropriate disinfectant after completion of procedures; immediately or as soon as feasible when surfaces are overtly contaminated or after any spill of blood or other potentially infectious materials; and at the end of the work shift if the surface may have become contaminated since the last cleaning.
- d) Protective coverings, such as plastic wrap, aluminum foil, or imperviously-backed absorbent paper used to cover equipment and environmental surfaces, must be removed and replaced as soon as feasible when they become overtly contaminated or at the end of the workshift if they may have become contaminated during the shift.
- e) All bins, pails, cans, and similar receptacles intended for reuse which have a reasonable likelihood for becoming contaminated with blood or other potentially infectious materials must be inspected and decontaminated on a regularly scheduled basis as dictated by your Supervisor and cleaned and decontaminated immediately or as soon as feasible upon visible contamination.
- f) Broken glassware which may be contaminated is not allowed to be picked up directly with the hands. It must be cleaned up using mechanical means, such as a brush and dust pan, tongs, or forceps.
- g) Reusable sharps that are contaminated with blood or other potentially infectious materials shall not be stored or processed in a manner that requires employees to reach by hand into the containers where these sharps have been placed.

12.0 Sharps and Regulated Wastes

Regulated Waste means liquid or semi-liquid blood or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed; items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling; contaminated sharps; and pathological and microbiological wastes containing blood or other potentially infectious materials.



Department Supervisors shall ensure that all regulated wastes are addressed in their Exposure Control Plans. All waste disposal facilities identified in individual Exposure Control Plans must be licensed to accept medical and biological wastes. The following are minimum requirements for all regulated wastes.

- a) All regulated waste and contaminated sharps must be discarded immediately or as soon as feasible in containers that are closable; puncture resistant (sharps only); leakproof on sides and bottom; and labeled or color-coded in accordance with the OSHA standard. Typically this will be a red plastic container that has the standard biohazard warning label on the sides. Contact your Supervisor for department specific requirements.
- b) During use, containers for contaminated sharps must be easily accessible to personnel and located as close as feasible to the immediate area where sharps are used or can be reasonably anticipated to be found (e.g., laundries). Additionally, the containers must be maintained upright throughout use; and replaced routinely and not be allowed to overfill. At a minimum, these containers will be inspected on a monthly basis and be disposed at a minimum every three months.
- c) When moving containers of regulated waste and contaminated sharps from the area of use, employees must ensure that the containers are:
 - Closed immediately prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport, or shipping;
 - Placed in a secondary container if leakage is possible. The second container must be closable; constructed to contain all contents and prevent leakage during handling, storage, transport, or shipping; and be labeled or color-coded according to OSHA standards.
- d) Reusable containers must not be opened, emptied, or cleaned manually or in any other manner which would expose employees to the risk of percutaneous injury.
- e) All regulated waste shall be placed in containers which are durable, leakproof and which have a biohazard label affixed to the outer container.

13.0 Laundry

Each department, unless exempted from the requirement to have an Exposure Control Plan, shall detail its laundry procedures, if applicable. The following are minimum requirements:

- a) Contaminated laundry must be handled as little as possible with a minimum of agitation.



- b) Contaminated laundry will be bagged or containerized at the location where it was used and shall not be sorted or rinsed in the location of use.
- c) Contaminated laundry shall be placed and transported in bags or containers labeled or color-coded in accordance with OSHA standards. When a facility utilizes Universal Precautions in the handling of all soiled laundry, alternative labeling or color-coding is sufficient if it permits all employees to recognize the containers as requiring compliance with Universal Precautions.
- d) Whenever contaminated laundry is wet and presents a reasonable likelihood of soak-through of or leakage from the bag or container, the laundry shall be placed and transported in bags or containers which prevent soak-through and/or leakage of fluids to the exterior.
- e) Supervisors will ensure that employees who have contact with contaminated laundry wear protective gloves and other appropriate personal protective equipment.
- f) When a facility ships contaminated laundry off-site to a second facility which does not utilize Universal Precautions in the handling of all laundry, the facility generating the contaminated laundry must place such laundry in bags or containers which are labeled or color-coded in accordance with OSHA standards. Department Heads are responsible for ensuring that laundry facilities receive a written notice that the laundry may or may not contain bloodborne pathogens and/or OPIM.

14.0 Hepatitis B Vaccination

Department Heads will ensure that all employees having full or occasional potential exposure to blood or OPIM receive an opportunity to obtain the Hepatitis B Vaccine. Unless exempted from the requirement to have a specific department Exposure Control Plan, each department shall specify in detail how the requirements of this section will be met. The vaccination offer, and any declination on the part of employees, will be documented on County approved forms.

The hepatitis B vaccine and vaccination series will be made available to all employees who have occupational exposure to blood or OPIM, and post-exposure evaluation and follow-up to all employees who have had an exposure incident.

- a) The County will ensure that all medical evaluations and procedures including the hepatitis B vaccine and vaccination series and post-exposure evaluation and follow-up, including prophylaxis, are:



- Made available at no cost to the employee;
 - Made available to the employee at a reasonable time and place;
 - Performed by or under the supervision of a licensed physician or by or under the supervision of another licensed healthcare professional; and
 - provided according to recommendations of the U.S. Public Health Service current at the time these evaluations and procedures take place
- b) The County shall ensure that all laboratory tests are conducted by an accredited laboratory at no cost to the employee.
- c) The Hepatitis B vaccination shall be made available after the employee has received the training required by this policy and within 10 working days of initial assignment to all employees who have occupational exposure unless the employee has previously received the complete hepatitis B vaccination series, antibody testing has revealed that the employee is immune, or the vaccine is contraindicated for medical reasons.
- d) Employees are not required to participate in any type of prescreening program as a prerequisite for receiving hepatitis B vaccination.
- e) If the employee initially declines hepatitis B vaccination but at a later date while still covered by this policy, decides to accept the vaccination, the County will make available the hepatitis B vaccination at that time.
- f) If a routine booster dose(s) of hepatitis B vaccine is recommended by the U.S. Public Health Service at a future date, the booster dose(s) will be made available to all covered employees.

15.0 Post-exposure Evaluation and Follow-up.

All exposures to blood or OPIM must be immediately reported to your Supervisor. Following a report of an exposure incident, the County will make immediately available to the exposed employee a confidential medical evaluation and follow-up after contacting the Personnel Department for instructions. The evaluation and follow-up will include at least the following elements and specific steps employees should take should be listed in individual departmental Exposure Control Plans:

- Documentation of the route(s) of exposure and the circumstances under which the exposure incident occurred. This must be documented on the exposure form located in the appendix.
- Identification and documentation of the source individual, unless the County can establish that identification is infeasible or prohibited by state or local law;



- The source individual's blood shall be tested as soon as feasible and after consent is obtained in order to determine HBV and HIV infectivity. If consent is not obtained, the County will establish that legally required consent cannot be obtained. When the source individual's consent is not required by law, the source individual's blood, if available, shall be tested and the results documented.
 - When the source individual is already known to be infected with HBV or HIV, testing for the source individual's known HBV or HIV status need not be repeated. Results of the source individual's testing shall be made available to the exposed employee, and the employee shall be informed of applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual.
 - The exposed employee's blood shall be collected as soon as feasible and tested after consent is obtained. If the employee consents to baseline blood collection, but does not give consent at that time for HIV serologic testing, the sample shall be preserved for at least 90 days. If, within 90 days of the exposure incident, the employee elects to have the baseline sample tested, such testing shall be done as soon as feasible.
 - Post-exposure prophylaxis, when medically indicated, as recommended by the U.S. Public Health Service; counseling; and evaluation of reported illnesses.
- a) Supervisors shall ensure that the healthcare professional responsible for the employee's Hepatitis B vaccination is provided with a copy of this regulation.
 - b) Supervisors are responsible for ensuring that the healthcare professional evaluating an employee after an exposure incident is provided the following information:
 - A copy of the OSHA Bloodborne Pathogens regulation.
 - A description of the exposed employee's duties as they relate to the exposure incident.
 - Documentation of the route(s) of exposure and circumstances under which exposure occurred. See the required form in the appendix.
 - Results of the source individual's blood testing, if available.
 - All medical records relevant to the appropriate treatment of the employee including vaccination status.
 - c) The County will obtain and provide the employee with a copy of the evaluating healthcare professional's written opinion within 15 days of the completion of the evaluation.



- d) The healthcare professional's written opinion for Hepatitis B vaccination shall be limited to whether Hepatitis B vaccination is indicated for an employee, and if the employee has received such vaccination.
- e) The healthcare professional's written opinion for post-exposure evaluation and follow-up shall be limited to the following information:
 - That the employee has been informed of the results of the evaluation; and
 - That the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or treatment.
- f) All other findings or diagnoses shall remain confidential and shall not be included in the written report.

16.0 Communication of Hazards to Employees

The hazards associated with bloodborne pathogens will be communicated to employees through the use of labeling, signage and color coding. This information will be presented in detail during the annual training session for employees who have occupational exposure to blood or other OPIM.

17.0 Medical Records and Recordkeeping

The following recordkeeping provisions will be implemented for each employee having occupational exposure to blood or OPIM. Department Heads must ensure that the recordkeeping requirements comply with all Personnel Department requirements and guidelines.

- The name and social security number of the employee;
- A copy of the employee's hepatitis B vaccination status including the dates of all the hepatitis B vaccinations and any medical records relative to the employee's ability to receive vaccination.
- A copy of all results of examinations, medical testing, healthcare professional's written opinion, and follow-up procedures as applicable.
- A copy of the information provided to the healthcare professional.
- The County will ensure that employee medical records kept confidential; and not disclosed or reported without the employee's express written consent to any person within or outside the workplace except as required by this section or as may be required by law
- Employee records will be kept for at least the duration of employment plus 30 years.



- Employee medical records will be provided upon request for examination and copying to the subject employee or to anyone having written consent of the subject employee.

18.0 Sharps Log

All Department Heads shall ensure that a separate sharps injury log is maintained within each department as follows:

- The sharps injury log will be used for the recording of percutaneous injuries from contaminated sharps.
- The information in the sharps injury log shall be recorded and maintained in such manner as to protect the confidentiality of the injured employee. The sharps injury log shall contain, at a minimum:
 - The type and brand of device involved in the incident,
 - The department or work area where the exposure incident occurred, and
 - An explanation of how the incident occurred.

19.0 Exposure Evaluations

All departments not exempted from the requirement to develop an individual departmental Exposure Control Plan will develop specific procedures for investigating the circumstances of any exposure incident.

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End Policy



1.0 Scope and Application

This policy has been established to reduce or eliminate the potential for employees to be adversely affected by occupational noise exposure in excess of regulated limits during the course of their employment. Employees, including temporary help, who are exposed to noise levels at or above 85 decibels averaged over an 8-hour period, will receive a baseline audiogram within six (6) months of initial assignment to determine their current level of hearing. Annual audiograms will then be performed to ensure that the employee's initial, or baseline level of hearing is not being adversely affected by noise generated from occupational exposure. Annual training for noise exposure will be provided to all affected employees. Employees exposed to noise levels at or above the limits specified in Table 1 of this policy are required to wear hearing protection.

This policy complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce and 29 CFR 1910.95 (Noise Protection) as promulgated by the U.S. Occupational Safety and Health Administration.

2.0 Responsibilities

Risk Manager:	Support and management of this policy. Approval of audiometric testing provider.
Department Heads:	Implementation of policy. Coordinates the scheduling of audiograms for affected employees and maintains an updated noise survey of the workplace in areas where noise is anticipated to reach 85 decibels.
Supervisors:	Ensure policy is adhered to by all employees.
Employees:	Follow requirements contained in this policy.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents minimum hearing protection requirements. Department Heads may develop more specific procedures to be followed in their respective departments.

4.0 Definitions

Affected Employee	An employee who is exposed to noise at or above the limits in Table 1.
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Decibels: A unit of measurement for noise exposure, expressed in dBA.

5.0 Training

Employees who are exposed to noise at or above 85 decibels on the OSHA “A” weighted scale and averaged over an 8-hour work shift, will receive annual training in the effects of noise exposure and the steps they can take to prevent hearing loss through the use of monitoring and hearing protection.

6.0 Documentation Requirements

Current noise exposure surveys are required to be maintained for the workplace in each affected department by the Department Head.

The Personnel Division will maintain records of employee audiograms and copies of noise exposure monitoring data.

7.0 Noise Exposure Monitoring

Work areas and job classifications will be periodically monitored and assessed to determine if employees are being exposed to noise at or above the limits specified in Table 1. Department Heads will coordinate this monitoring with the Risk Manager. Monitoring does not mean each employee will be individually monitored, as monitoring is only necessary to obtain a representative sample of all employees who perform similar tasks. Subsequently, employees may be asked to wear a sound-measuring device (dosimeter) in order for the County to determine actual noise exposure levels. Employees who are asked to wear such devices must not tamper with the unit or introduce any variables into the measuring process such as hitting the unit with a hammer, etc. since this data will be used to determine when and where hearing protection is required.

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Table 1
Allowable Noise Exposure Limits

Sound Level in dBA	Hours Per Day
85	16
90	8
92	6
95	4
97	3
100	2
102	1.5
105	1
110	0.5
115	0.25 or less

Examples of operations that exceed 85 decibels include, but are not limited to:

- Mowing and Trimming Operations
- Chainsaw Use
- Roller Operation During Paving

8.0 Controls

Engineering (partitions, sound absorbing materials, etc.) and administrative controls will be used whenever feasible to reduce noise exposures in excess of Table 1 values to acceptable limits. The Risk Manager, in conjunction with the Department Head, will evaluate the feasibility of implementing such controls.

9.0 Audiometric Testing Program

All affected employees will receive an initial baseline audiogram within six (6) months of being exposed to 85 decibels averaged over an 8-hour work shift. If a mobile test van service is used to perform the audiogram, the time period for testing will be extended to one (1) year as allowed by existing regulations.

All audiometric testing will be performed by a licensed or certified audiologist, otolaryngologist, or other physician or by a technician who is certified by the Council of Accreditation in Occupational Hearing Conservation or who has satisfactorily demonstrated competence in administering audiometric examinations for all hearing tests and shall be provided at no cost to the employee.



The use of such outside services shall be approved by the Risk Manager. Employees scheduled for hearing tests will be notified at least twenty-four (24) hours prior to the scheduled test and must make arrangements to ensure their appointment is kept. Employees working outside the hours of 8:00 a.m. to 5:00 p.m. will be scheduled for hearing tests during regular business hours. At least fourteen (14) hours prior to the scheduled hearing test, affected employees must not work with in any environment exceeding 85 decibels unless they are wearing hearing protection as prescribed by this program.

All affected employees will be scheduled to receive an annual audiogram each year they remain in the job classification in which they remain affected employees.

10.0 Standard Threshold Shift

The purpose of annual audiometric testing is to determine if a standard hearing threshold shift has occurred which may place the employee at greater risk of hearing loss. A standard threshold shift is a change in hearing threshold relative to the baseline audiogram as determined by a certified audiologist or physician.

Employees experiencing a standard threshold shift are required to:

- Be notified of the shift in writing twenty-one (21) days after the determination.
- Be fitted with hearing protection, trained in its use and be required to wear such protection in work areas exceeding 85 decibels.
- Employees already using hearing protection will be refitted with hearing protection having a greater attenuation factor (ability to reduce noise) and retrained in the use of such protection.

If annual or follow-up testing indicates a standard threshold shift is not persistent, employees will be informed of the evaluation indicating the standard threshold shift to be temporary. In these cases, the County may discontinue the mandated wearing of hearing protection but only if the employee's noise exposure is less than 90 decibels averaged over an 8-hour work period.

11.0 Hearing Protection

A choice of hearing protection will be made available to each affected employee. Employees may choose to wear any type of hearing protection provided by the County so long as the protection selected has the proper attenuation factor. Employees will be instructed on how to properly wear the type of hearing protection they select. The wearing of hearing protection is mandatory for:

- Any employee who has experienced a standard threshold shift that is exposed to noise in excess of 85 decibels.



- Any employee exposed to noise in excess of Table 1 values.

Hearing protectors are required to have an attenuation factor that reduces the employee's noise exposure to 90 decibels or lower when such protection is properly worn by the employee. For employee's experiencing a standard threshold shift, hearing protection attenuation shall be sufficient to reduce the employee's noise exposure to 85 decibels or less.

12.0 Proper Selection Of Hearing Protection

All hearing protection devices are required to be capable of reducing noise exposures to less than 90 decibels. For employees who have experienced a standard threshold shift, the hearing protection must be capable of reducing the noise to less than 85 decibels.

Kenosha County will only provide hearing protection devices that have a Noise Reduction Rating (NRR) assigned to the device. This NRR will be used to estimate the effectiveness of the device according to the following formula:

- 1) Subtract seven (7) from the NRR
- 2) Divide this value by two (2)
- 3) Subtract the value from No. 2 above from the 8-hour TWA obtained from monitoring.

Example: Monitoring shows that a particular work task exposed the employee to 94 decibels on an 8-hour time weighted average. The hearing protection to be used indicates that it has an NRR value of 33.

$$\begin{aligned} 33 \text{ NRR} - 7 &= 26 \text{ NRR} \\ (26 \text{ NRR} / 2) &= 13 \\ 94 \text{ decibels} - 13 &= 81 \text{ decibels} \end{aligned}$$

The wearing of hearing protection that has a NRR value of 33 in a job that results in a noise exposure of 94 decibels averaged over an 8-hour workday will effectively and safely reduce the employee's exposure to 81 decibels in the example above.

End Policy



1.0 Scope and Application

This policy has been established to ensure that emergency and emergency evacuation plans are developed, implemented and communicated to each employee for each department and departmental facility within the County.

This policy complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce and 29 CFR 1910.38 (Emergency Action Plans) as promulgated by the U.S. Occupational Safety and Health Administration.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Implementation of policy and development of department specific emergency action plans and evacuations route maps.
Supervisors:	Training of employees.
Employees:	Follow the requirements contained in their Department's emergency action plan.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents minimum emergency planning requirements. Emergency plans specific to each department are required to be developed, implemented and communicated to employees.

4.0 Definitions

Emergency: Any event that has the potential to adversely affect human health, safety or the environment.

5.0 Training

Department Heads will designate and train employees to assist in a safe and orderly evacuation of other employees and will review the emergency action plan with each employee:

- When the plan is developed or the employee is assigned initially to a job;
- When the employee's responsibilities under the plan change; and



- When the plan is changed.

6.0 Documentation Requirements

Departmental specific emergency actions plans and evacuation route maps are required.

7.0 Departmental Plans

Each Department Head is responsible for developing a specific emergency action plan for their department using the guidance provided by the Kenosha County Division of Emergency Management. Employees will be trained in the contents of this plan as indicated above. At a minimum, the plan will contain the following information:

- Procedures for reporting a fire or other emergency;
- Method of alarm system used and its meaning;
- Procedures for emergency evacuation, including type of evacuation and exit route assignments;
- Procedures to be followed by employees who remain to operate critical operations before they evacuate;
- Procedures to account for all employees after evacuation;
- Procedures to be followed by employees performing rescue or medical duties; and
- The name or job title of every employee who may be contacted by employees who need more information about the plan or an explanation of their duties under the plan.

8.0 Evacuation Maps

Evacuation exit maps showing the preferred (primary) and secondary (alternate) exit routes for safe egress from the building will be posted within each facility at intervals that allow for quick and efficient evacuation of the building in the event of an emergency. Department Heads will be responsible for the development and posting of these maps.

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End Policy



1.0 Scope and Application

This policy has been established to ensure that employees are provided with and wear the appropriate personal protective equipment so that the potential for injury or illness is minimized to the maximum extent practicable. Hearing and respiratory protection are addressed under other County safety policies.

This policy complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce and 29 CFR 1910.132 through 1910.138 as promulgated by the U.S. Occupational Safety and Health Administration.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Implementation of policy and completion of department specific hazard assessments.
Supervisors:	Ensure employees wear prescribed PPE. Provide new and replacement PPE to employees as required. Assist with specific hazard assessments.
Employees:	Wear prescribed PPE and report defective equipment.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents the minimum requirements associated with personal protective equipment. Departments will establish individual hazard assessments that identify the specific PPE to be used by employees within their department and job assignment. Copies of the hazard assessment shall be provided to the County Risk Manager.

4.0 Definitions

PPE:	Personal Protective Equipment means hard hats, gloves, glasses, body protection, etc. Any protective device that an employee can wear that is designed to prevent injury or illness.
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5.0 Training

Each employee required to wear PPE will be trained at the time of their initial assignment in the following:

- When PPE is necessary;
- What PPE is necessary;
- How to properly don, doff, adjust, and wear PPE;
- The limitations of the PPE; and,
- The proper care, maintenance, useful life and disposal of the PPE.

Each trained employee shall demonstrate an understanding of the training provided, and the ability to use PPE properly, before being allowed to perform work requiring the use of PPE. The Supervisor shall ensure that these training requirements are met.

Retraining will be provided when:

- The Supervisor has reason to believe that any employee who has already been trained does not have the understanding and skill provided by the training; or
- Changes in the workplace render previous training obsolete; or
- Changes in the types of PPE to be used render previous training obsolete; or
- Inadequacies are observed in an affected employee's knowledge or use of assigned PPE which indicate that the employee has not retained the requisite understanding or skill.

6.0 Documentation Requirements

Each department is responsible for conducting its own hazard assessment of the workplace using standardized forms provided in the appendix.

Written training certification must be maintained that contains the name of each employee trained, the date(s) of training, and the subject of the certification. Supervisors shall ensure that this documentation is maintained.

7.0 General Requirements

- a) It is the County's intent to provide employees with personal protective equipment essential to safely perform routine operations. Supervisors shall keep abreast of the latest PPE available to ensure that the PPE provided to employees is not outdated and provides adequate protection to the employee. Such equipment includes, but is not limited to:

- Eye Protection



- Gloves
- Protective Headgear
- Goggles
- Visibility Vests
- Protective Clothing
- Special application tools

Employees are responsible for using and maintaining such equipment properly according to established procedures and manufacturer's specifications. When the need for personal protective equipment has been identified, its use will be mandatory as a condition of employment. These rules also apply to all Supervisors in the affected departments.

Other protective equipment and safety devices are provided in order to protect employees from unnecessary exposures. Such equipment includes barricades, cones, warning signs, warning lights, and other specialty items.

Failure to use safety devices or personal protective equipment may result in disciplinary action. In the event of an injury or illness that results from a failure to use prescribed safety devices or personal protective equipment, Worker's Compensation benefits will be reduced in accordance with Wisconsin Statutes.

- b) Protective equipment, including personal protective equipment for eyes, face, head, and extremities, protective clothing, protective shields and barriers, will be provided, used, and maintained in a sanitary and reliable condition wherever it is necessary by reason of hazards of processes or environment, chemical hazards, radiological hazards, or mechanical irritants encountered in a manner capable of causing injury or impairment in the function of any part of the body through absorption, inhalation or physical contact.
- c) Defective or damaged PPE will not be used under any circumstance. Employees are to report defective or damaged PPE to their Supervisor immediately.
- d) All PPE will be designed and constructed according to national consensus standards such as the American National Standards Institute (ANSI) and others.
- e) Employees are not to perform any task whenever they are unsure of the PPE requirements for the task to be performed. In such cases, employees are to consult with their Supervisor on the PPE requirements before performing any work.



8.0 Hazard Assessment

Hazard assessments will identify the potential hazards unique to the tasks or job classification evaluated and will be completed on County approved forms. A hazard assessment shall be conducted for each departmental job classification except for office and administrative type activities that involve no exposures to hazardous materials or hazardous work conditions that could cause injury or illness to the employee performing such activities. The Department Head is responsible for ensuring that hazard assessments are completed.

The hazard assessment will serve as the basis for individual departmental PPE requirements. Department Heads may use the information gathered from the hazard assessment to develop specific work practices concerning the use of PPE or may use the hazard assessment itself as a work practice provided that employees are informed of (and trained in) the conditions under which such PPE is to be worn.

9.0 Eye and Face Protection

The hazard assessment will ensure that appropriate eye or face protection is identified when employees are exposed to eye or face hazards from flying particles, molten metal, liquid chemicals, acids or caustic liquids, biological hazards and pathogens, chemical gases or vapors, or potentially injurious light radiation. Side protection will be indicated and required when there is a hazard from flying objects. Detachable side protectors (e.g. clip-on or slide-on side shields) are acceptable. Employees who wear prescription lenses while engaged in operations that involve eye hazards must wear eye protection that incorporates the prescription in its design, or wear eye protection that can be worn over the prescription lenses without disturbing the proper position of the prescription lenses or the protective lenses.

Employees required to wear filter lenses for welding, cutting or brazing work will be provided equipment with a shade number appropriate for the work being performed for protection from injurious light radiation.

10.0 Head Protection

The hazard assessment will ensure that appropriate head protection (e.g. hard hat) is provided when working in areas where there is a potential for injury to the head from falling objects. Such headgear must be designed to reduce electrical shock hazard when the employee is working on or near exposed electrical conductors which could contact the head.



11.0 Foot Protection

The hazard assessment will ensure that appropriate protective footwear is provided when working in areas where there is a danger of foot injuries due to falling or rolling objects, or objects piercing the sole, biological hazards and pathogens, and where such employee's feet are exposed to electrical hazards.

12.0 Hand Protection

The hazard assessment will ensure that appropriate hand protection is provided when employees' hands are exposed to hazards such as those from skin absorption of harmful substances; biological hazards and pathogens, severe cuts or lacerations; severe abrasions; punctures; chemical burns; thermal burns; and harmful temperature extremes. Supervisors are required to base the selection of the appropriate hand protection on an evaluation of the performance characteristics of the hand protection relative to the task(s) to be performed, conditions present, duration of use, and the hazards and potential hazards identified.

13.0 Body Protection

The hazard assessment will ensure that appropriate body protection is provided when employees' bodies are exposed to hazards such as those from the contact and skin absorption of hazardous or harmful chemical substances, including biological hazards and pathogens.

14.0 Use of Pesticides

The hazard assessment will indicate if potential exposures to pesticides are present. PPE used for the application of pesticides will conform to the requirements specified on the label of the pesticide used. See the County Pesticide Policy for more information.

15.0 Electrical Hazards

The hazard assessment will indicate if potential exposures to electrical hazards are present. Employees who are required to work on or near live electrical installations will require special PPE to protect them from arc flash hazards and electrocution. This special PPE will be identified in the hazard assessment. See the County Electrical Safety Policy for more information.



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16.0 Biological Hazards

The hazard assessment will indicate if potential exposures to biological hazards and/or pathogens are present. Employees who are exposed to such hazards will require special PPE that will be identified on the hazard assessment and in specific departmental work rules and the exposure control plan required under the County's Bloodborne Pathogens Policy.

17.0 Personal Protective Equipment Costs

Department heads will reimburse or pay for personal protective equipment as required by the Wisconsin Department of Commerce and County policies.

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End Policy



1.0 Scope and Application

Kenosha County has developed the following respiratory protection program to protect the health and safety of County employees who are exposed to respiratory hazards. This policy applies to all employees who use a respirator, except for respirators that are used to protect against biological hazards. The applicability of a particular requirement is dependent on the type of respirator used and the conditions under which it is worn.

This policy complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce and 29 CFR 1910.134 (Respiratory Protection) promulgated by the U.S. Occupational Safety and Health Administration.

2.0 Responsibilities

Risk Manager: Designated as the Program Administrator. Administers and oversees the following aspects of the respiratory protection program:

- Designated as the Program Administrator. Administers and oversees the following aspects of the respiratory protection program:
- Selection of respiratory protection options.
- Approve all respirator use (voluntary or otherwise).
- Monitoring respirator use to ensure that respirators are used in accordance with their certifications.
- Arranging for and/or conducting training.
- Arranging for and/or conducting exposure monitoring.
- Arranging for or conducting qualitative respirator fit testing.
- Administering the medical surveillance program.
- Maintaining records required by the program.
- Provides OSHA respirator information to voluntary wearers.
- Annually evaluates the program.

Department Heads: Implementation of policy.

- Identify work areas, processes or tasks that require workers to wear respirators.
- Coordinate employee testing and training requirements with Risk Manager.

Supervisors: Ensuring that employees under their supervision (including new hires) have received appropriate training, fit testing, and medical evaluation.



- Ensuring the availability of appropriate respirators and accessories.
- Being aware of tasks requiring the use of respiratory protection.
- Enforcing the proper use of respiratory protection when necessary.
- Ensuring that respirators are properly cleaned, maintained, and stored according to the respiratory protection plan.
- Continually monitoring work areas and operations to identify respiratory hazards.

Employees: Each employee has the responsibility to wear his or her respirator when and where required and in the manner in which they were trained and to:

- Care for and maintain their respirators as instructed, and store them in a clean sanitary location.
- Clean their respirator at the end of each workday.
- Change their respirator or respirator cartridge according to the change out schedule.
- Be clean-shaven in order to wear negative pressure air-purifying respirators.
- Inform their Supervisor if the respirator no longer fits well, and request a new one that fits properly.
- Inform their Supervisor or the Risk Manager of any respiratory hazards that they feel are not adequately addressed in the workplace and of any other concerns that they have regarding the program.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents the minimum requirements associated with respiratory protection. Department Heads may develop more specific procedures to be followed in their respective departments.



4.0 Definitions

PEL: Permissible Exposure Limit for an airborne contaminant as listed by OSHA, usually expressed as an 8-hour time weighted average concentration.

5.0 Training

Each employee required to wear a respirator, or an employee who has received approval from the Program Administrator to wear a voluntary respirator other than a filtering facepiece (dust mask), will receive training at the time of their initial assignment and annually thereafter in the following topics.

- Why the respirator is necessary and how improper fit, usage, or maintenance can compromise the protective effect of the respirator;
- What the limitations and capabilities of the respirator are;
- How to use the respirator effectively in emergency situations, including situations in which the respirator malfunctions;
- How to inspect, put on and remove, use, and check the seals of the respirator;
- What the procedures are for maintenance and storage of the respirator;
- How to recognize medical signs and symptoms that may limit or prevent the effective use of respirators; and
- The general requirements of this policy.
- Specific requirements contained in departmental written work practices.

Retraining will be provided annually, and whenever the following situations occur:

- Changes in the workplace or the type of respirator render previous training obsolete;
- Inadequacies in the employee's knowledge or use of the respirator indicate that the employee has not retained the requisite understanding or skill; or
- Any other situation arises in which retraining appears necessary to ensure safe respirator use.

6.0 Documentation Requirements

Department Heads will conduct a reasonable evaluation of all work tasks in their respective departments that have the potential to cause employee exposures to airborne contaminants in excess of the OSHA Permissible Limit (PEL). These evaluations will be coordinated with the County Risk Manager. Specific written work procedures will be developed by the Department Head for any work tasks that show respiratory protection is required to reduce employee exposures below the PEL.

The Risk Manager will maintain documentation of the following information:



- All exposure test results and monitoring data.
- All fit testing results.
- All medical surveillance documentation.
- All training documentation.
- Annual review of respirator program.

Supervisors shall ensure that the respirator information provided in the appendix is provided to all employees who have been approved by the Risk Manager to wear a voluntary filtering facepiece (dust mask) and shall document the conveyance of such information.

7.0 General Requirements

- a) Respirator use will be required for any task involving an exposure to a chemical substance where such exposure is at or above the Permissible Exposure Limit (PEL) and will continue until engineering and administrative controls have been installed to the extent feasible to reduce exposures below the PEL.
- b) Employees may not perform any task requiring the use of a respirator, or wear a respirator, for any reason, without first obtaining approval from the Risk Manager. Respirators are defined as any device used to prevent or minimize the inhalation of toxic, hazardous, or nuisance air contaminants, including the use (voluntary or otherwise) of particulate air filters commonly referred to as "dust masks".

Although respirators provide protection from exposure to air contaminants, employees are prohibited from entering any work area in which atmospheric conditions exist that are immediately dangerous to life and health, including rescue operations. Employees who are required to participate in this program do so at no cost to them. The expense associated with training, medical evaluations and respiratory protection equipment will be borne by the County.

- c) Work areas will be evaluated to identify tasks in which airborne contaminants may be present during normal work routines or in emergency situations. The evaluation will include:
 - Identification and development of a list of hazardous substances used in the workplace.
 - Review of work processes to determine where potential exposures to these hazardous substances may occur. This review shall be conducted by surveying the workplace, reviewing work procedures, and talking with employees and Supervisors.
 - Exposure monitoring to quantify potential hazardous exposures.



- d) The Program Administrator shall ensure a hazard assessment of the workplace is conducted and updated as needed (i.e., any time work process changes which may potentially affect employee exposures). If an employee feels that respiratory protection is needed during a particular activity, he or she is to contact his or her Supervisor or the Program Administrator. The Program Administrator will evaluate the potential hazard and arrange for outside assistance as may be necessary. The Program Administrator will then communicate the results of that assessment back to the employees. If it is determined that respiratory protection is necessary, all other elements of this program will be in effect for those tasks and this program will be updated accordingly.
- e) All respirators used by the County will be certified by the National Institute for Occupational Safety and Health (NIOSH) and used in accordance with the terms of that certification. All filters, cartridges, and canisters must be labeled with the appropriate NIOSH approval label. The label must not be removed or defaced at any time while it is in use.

8.0 Voluntary Respirator Use

Voluntary use is defined as the use of a filtering face piece, such as the use of a dust mask, in situations where the employee is not exposed to regulated contaminants above the OSHA Permissible Limit. Employees must receive permission from the Risk Manager before being allowed to wear a voluntary filtering face piece. Employees who receive approval to voluntarily wear a dust mask are exempt from all other elements of this program except that they must be provided with a copy of the Voluntary Respirator Information Sheet found in the appendix.

9.0 Required Respirator Use

Respirator use is required for the following activities:

- Weekly cleanup of the shooting range (lead exposures)
- Sandblasting highway equipment (particulate metals and dust)
- Painting highway equipment (solvents)
- Pesticide application (pesticides)
- Employee exposures to tuberculosis.
- Any other job that may require the use of a respirator.



The employee's Supervisor should be consulted prior to the performance of any task in which the potential for inhalation of chemical vapors, fumes, mists, dusts, or fogs exists or is anticipated. Any employee wearing a respirator and performing a task not listed above shall contact their Supervisor so that they can be enrolled in the respiratory protection program.

10.0 Medical Evaluations

Employees who are either required to wear respirators, or who choose to voluntarily wear any type of respirator, except for a dust mask, must pass a medical exam before being permitted to wear a respirator on the job. All examinations and questionnaires are to remain confidential between the employee and the physician.

Employees who are required to wear respirators due to lead exposures in the shooting range are exempt from this requirement provided that they do not perform clean-up activities for more than thirty (30) days per year.

Employees are not permitted to wear respirators until a physician has determined that they are medically able to do so. Any employee refusing the medical evaluation will not be allowed to work in an area requiring respirator use. Employees failing the medical evaluation will be reassigned and/or have restrictions placed on their job duties to prevent exposure to contaminants that would otherwise require the use of a respirator.

A licensed physician designated by the County will provide the medical evaluations. Medical evaluation procedures are as follows:

- The medical evaluation will be conducted using the questionnaire provided in Appendix C of the respiratory protection standard. The Program Administrator will provide a copy of this questionnaire to all employees requiring medical evaluations.
- To the extent feasible, the County will assist employees who are unable to read the questionnaire (by providing help in reading the questionnaire). When this is not possible, the employee will be sent directly to the physician for medical evaluation.
- All affected employees will be given a copy of the medical questionnaire to fill out, along with a stamped and addressed envelope for mailing the questionnaire to the County's physician. Employees will be permitted to fill out the questionnaire during their regularly scheduled work hours.
- Follow-up medical exams will be granted to employees as required by the standard, and/or as deemed necessary by the physician.
- All employees will be granted the opportunity to speak with the physician about their medical evaluation, if they so request.



- The Program Administrator will provide the County's physician with a copy of this program, a copy of the Respiratory Protection standard, the list of hazardous substances used, and for each employee requiring evaluation; his or her work area or job title, proposed respirator type and weight, length of time required to wear respirator, expected physical work load (light, moderate, or heavy), potential temperature and humidity extremes, and any additional protective clothing required.
- Any employee required for medical reasons to wear a positive pressure air-purifying respirator will be provided with a powered air-purifying respirator.

After an employee has received medical clearance and begun to wear his or her respirator, additional medical evaluations will be provided under the following circumstances:

- Employee reports signs and/or symptoms related to their ability to use a respirator, such as shortness of breath, dizziness, chest pains, or wheezing;
- The County's physician or a Supervisor informs the Program Administrator that the employee needs to be reevaluated;
- Information from this program, including observations made during fit testing and program evaluation, indicates a need for reevaluation;
- A change occurs in workplace conditions that may result in an increased physiological burden on the employee.

11.0 Fit Testing

All employees required to wear respiratory protection or employees who use voluntary respirators other than a dust mask must be fit tested on an annual basis. Fit testing will be performed by a qualified individual or may be performed in-house by the Program Administrator according to the following schedule:

- Prior to being allowed to wear any respirator with a tight fitting face piece.
- Annually.
- Whenever there are changes in the employee's physical condition that could affect respiratory fit (e.g., obvious change in body weight, facial scarring, dental changes, etc.).

Employees will be qualitatively fit tested with the make, model, and size of respirator that they will actually wear and be provided with several models and sizes of respirators so that they may find an optimal fit. Fit testing of Powered Air-Purifying Respirators (PAPRs) will be conducted in the negative pressure mode. If conditions affecting respirator use change, the Program Administrator will evaluate on a case-by-case basis whether Quantitative Fit Testing is required. Fit testing shall adhere to the following protocols:



- Employees having excess facial hair, beard growth, or long sideburns shall not be tested.
- Employees will be instructed on the conditions that prevent a good respirator face seal such as, but not limited to; beard growth, sideburns, a skull cap that projects under the face piece, temple pieces on glasses, or the absence of one or more dentures.
- One of the three qualitative fit testing protocols contained in the appendix to 29 CFR 1910.134 will be used to conduct the test with a preference for saccharin fit testing.
- Employees will be provided a Material Safety Data Sheet on the substance used for the test upon request.

Prior to the fit test, employees will be instructed in the proper selection, use, and maintenance of respiratory protection. Employees will be provided the opportunity to handle the respirator, have it fitted properly, test its face to face piece seal, and wear it in normal air for a familiarity period prior to the actual fit test. Fitting instructions will include demonstrations and practice in how the respirator should be worn, how to adjust it, and how to determine if it fits properly.

Employees who must wear corrective lenses or glasses and will receive special instructions on the hazards posed by such use and shall be properly fitted such that the eyewear does not interfere with the face piece seal.

The following records shall be kept on file in each employee's personnel record for a minimum of three (3) years:

- Name of employee.
- Date fit test was performed.
- Fit test protocols used.
- Name of test conductor.
- Respirator used during the fit test, including manufacturer, model number, size and approval numbers.

Employees failing the fit test will be reassigned and/or have restrictions placed on their job duties to prevent exposure to contaminants that would otherwise require the use of a respirator. Such circumstances include, but are not limited to; dentures and reconstructive surgery. The Program Administrator shall determine, at his or her discretion and upon consultation with appropriate personnel, what conditions constitute circumstances requiring reassignment and/or restriction.



12.0 Respirator Use

All employees are required to conduct user seal checks each time that they wear their respirator. Employees shall use either the positive or negative pressure check (depending on which test works best for them) as specified in Appendix B-1 of the Respiratory Protection Standard.

All employees shall be permitted to leave the work area to go to the locker room or other storage area to maintain their respirator for the following reasons: to clean their respirator if the respirator is impeding their ability to work, change filters or cartridges, replace parts, or to inspect respirator if it stops functioning as intended. Employees should notify their Supervisor before leaving the area.

Employees are not permitted to wear tight-fitting respirators if they have any condition, such as facial scars, facial hair, or missing dentures, that prevents them from achieving a good seal. Respirator wearers are not allowed to have beards. Employees involved in tasks requiring respirator use may be required to shave so that the respirator fits properly for their own protection. Employees are not permitted to wear headphones, jewelry, or other articles that may interfere with the face-to-face seal.

13.0 Emergency Procedures

Employees are not allowed to respond to emergencies involving hazardous chemicals and as such, no foreseeable emergency conditions resulting in employee exposures to hazardous substances are expected to occur as. In the event a hazardous substance is involved in an emergency situation, follow the facility's emergency action plan.

14.0 Respirator Malfunction

For any malfunction of an Air Purifying Respirator (APR), such as vapor breakthrough, face leakage, or improperly working valve, the respirator wearer must inform his or her Supervisor that the respirator no longer functions as intended, and go to the locker room or other designated area to maintain the respirator. Respirators found to be non-functioning as a result of an integral malfunctioning component part must be discarded as the County prohibits employees from repairing any non-functioning respirator.



15.0 Cleaning, Maintenance, Change Schedules and Storage

Respirators are to be regularly cleaned and disinfected at designated respirator cleaning stations. Respirators issued for the exclusive use of an employee shall be cleaned as often as necessary, but at least once per day if they have been used. The following procedure is to be used when cleaning and disinfecting respirators:

- Disassemble respirator, removing any filters, canisters, or cartridges.
- Wash the face and associated parts in mild detergent with warm water. Do not use organic solvents.
- Rinse completely in clean warm water.
- Wipe the respirator with disinfectant wipes (e.g., 70% Isopropyl Alcohol) to kill germs.
- Air dry in a clean area.
- Reassemble the respirator and replace any defective parts.
- Place in a clean, dry plastic bag or other airtight container.

Note: Supervisors and Crew Leaders shall ensure an adequate supply of appropriate cleaning and disinfection material at the cleaning station. If supplies are low, employees should contact their Supervisor.

Respirators are to be properly maintained at all times in order to ensure that they function properly and adequately protect the employee. Maintenance involves a thorough visual inspection for cleanliness and defects each time the respirator is worn.

Worn or deteriorated parts will cause the respirator to be discarded as no components will be replaced or repairs made. Malfunctioning respirators shall be discarded and a new respirator shall be issued. The following checklist will be used when inspecting respirators:

Face Piece:

cracks, tears, or holes

facemask distortion

cracked or loose lenses/faceshield

Headstraps:

breaks or tears

broken buckles

Valves:

residue or dirt

cracks or tears in valve material



Filters/Cartridges:
approval designation
gaskets
cracks or dents in housing
proper cartridge for hazard

Employees are permitted to leave their work area to perform limited maintenance on their respirator in a designated area that is free of respiratory hazards, such as a locker room or other designated area. Such maintenance may include washing their face and respirator to prevent eye or skin irritation, replacing the filter, cartridge or canister.

16.0 Change Schedules

Employees wearing respiratory protection against dusts and other particulates shall change the cartridges on their respirators when they first begin to experience difficulty breathing (i.e., resistance) while wearing their masks.

Organic and inorganic vapor cartridges shall be changed out after a maximum of eight (8) hours of use. Changeouts may be required more frequently if breakthrough (odors) is noticed during the wearing of the respirator.

17.0 Storage

Respirators must be stored in a clean, dry area, and in accordance with the manufacturer's recommendations. Each employee will clean and inspect their own air-purifying respirator in accordance with the provisions of this program and will store their respirator in a plastic bag in their own locker or storage area. Each employee will have his or her name on the bag and that bag will only be used to store that employee's respirator.

18.0 Defective Respirators

Respirators that are defective or have defective parts shall be taken out of service immediately and discarded. If, during an inspection, an employee discovers a defect in a respirator, he or she is to bring the defect to the attention of his or her Supervisor so that a new respirator can be issued.



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19.0 Program Evaluation

The Program Administrator will conduct periodic evaluations of the workplace to ensure that the provisions of this program are being implemented. The evaluations will include regular consultations with employees who use respirators and their Supervisors, site inspections, air monitoring and a review of records. Problems identified will be noted in the evaluation log contained in the appendix.

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End Policy



1.0 Scope and Application

Kenosha County has developed the following program to protect employees who must work in confined spaces that contain serious safety and/or health related hazards. Only authorized employees may enter a confined space.

This policy complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce and 29 CFR 1910.146 (Confined Spaces) promulgated by the U.S. Occupational Safety and Health Administration.

2.0 Responsibilities

Risk Manager: Support and management of this policy.

- Consult with affected employees and their authorized representatives on the development and implementation of all aspects of the permit space program.
- Performs annual review of programs effectiveness.

Department Heads: Implementation of policy.

- Identify all confined spaces in their department that employees may enter and ensure they are labeled and/or communicated to employees.

Supervisors: Ensure policy is adhered to by all employees.

- Acts as Entry Supervisor.
- Conducts pre-entry briefings.
- Authorizes Entrants and Attendants.
- Authorizes entry permits.
- Maintains entry safety equipment.

Employees: See specific requirements for Attendant and Entrant responsibilities.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.



3.0 Departmental Polices and Requirements

This policy represents minimum confined space entry requirements. Departments having employees who work in confined spaces such as Highways, Parks and Facilities will develop specific entry procedures for each type of confined space that their employees may enter, including sewers.

4.0 Definitions

Confined Space: Any space that meets the following three criteria:

- Is large enough and so configured that an employee can bodily enter the space and perform assigned work and;
- Has limited or restricted means for entry and exit (e.g. tanks, vessels, tunnels, pits, etc.) and;
- Is not designated for continuous human occupancy.

Confined space examples include tanks, pits, vats, crawl spaces, tunnels, sewers, etc.

Permit Required Confined Space:

A confined space that contains any of the following conditions:

- Contains or has a potential to contain a hazardous atmosphere;
- Contains a material that has the potential for engulfing an Entrant;
- Has an internal configuration such that an Entrant could be trapped or asphyxiated by inwardly converging walls or by a floor which slopes downward and tapers to a smaller cross-section; or
- Contains any other recognized serious safety or health hazard (e.g. physical, mechanical, electrical, etc.)

Permit required confined spaces typically include sewers, tanks, pits, boilers, chimneys.

5.0 Training

Training will be provided so that all employees who are authorized to enter and work in confined spaces acquire the understanding, knowledge, and skills necessary for the safe performance of their duties assigned under this policy. Training will be provided to each affected employee at the following intervals:



- Before the employee is first assigned duties under this section;
- Before there is a change in assigned duties;
- Whenever there is a change in permit space operations that presents a hazard about which an employee has not previously been trained;
- Whenever the Supervisor has reason to believe either that there are deviations from the permit space entry procedures or that there are inadequacies in the employee's knowledge or use of these procedures.

All employees will be informed by the Supervisor at the time of hire that they are not allowed to enter a confined space for any reason unless they are specifically authorized and have received the training described above.

6.0 Documentation Requirements

Copies of all confined space entry permits are to be maintained on file for a period of one (1) year by the Supervisor of each department that performs confined space entries.

Training certifications are to contain each employee's name, the signatures or initials of the trainers, and the dates of training. The certification must be available for inspection by employees and their authorized representatives.

Supervisors will keep on file records of calibration for all atmospheric test meters showing when the unit(s) was last calibrated.

7.0 General Requirements

- a) Each Department Head shall evaluate the work space and equipment used within their department to identify permit required confined spaces.
- b) The Facilities Department will be responsible for marking all building type permit required confined spaces. All other departments are responsible for marking their respective permit required confined spaces. Markings shall read: DANGER -- PERMIT-REQUIRED CONFINED SPACE, DO NOT ENTER or similar verbiage. Markings are not required if equally effective means of identifying permit required confined spaces are made available to employees. For example, marking would not be required for sewer manholes if the Department institutes a program that ensures all employees are made aware that sewers are considered to be permit required confined spaces.
- c) Department Heads shall specify which employees or which job classifications are authorized to enter confined spaces.



- d) If an injured Entrant is exposed to a substance for which a Material Safety Data Sheet (MSDS) or other similar written information is required to be kept at the worksite, that MSDS or written information will be made available to the medical facility treating the exposed Entrant.
- e) All designated Entrants and Attendants will be trained in first aid, CPR and be enrolled in the County's Bloodborne Pathogens program.
- f) A confined space is considered to be entered if any part of the body breaks the plane to the opening of the confined space.
- g) Alternate entry procedures for spaces only containing an actual or potentially hazardous atmosphere are not allowed. All entries for permit required confined spaces must follow the permit required entry procedures contained in this policy.
- h) The Risk Manager will review entry operations whenever the County has reason to believe that the measures taken under the permit space program may not protect employees and revise the program to correct deficiencies found to exist before subsequent entries are authorized.

NOTE: Examples of circumstances requiring the review of the permit space program are: any unauthorized entry of a permit space, the detection of a permit space hazard not covered by the permit, the detection of a condition prohibited by the permit, the occurrence of an injury or near-miss during entry, a change in the use or configuration of a permit space, and employee complaints about the effectiveness of the program.

The Risk Manager will also perform a standard annual review of the effectiveness of the confined space program by reviewing all entry permits that were issued in the prior twelve (12) month period.

- i) No eating, drinking or smoking are allowed in any confined space.
- j) Welding, cutting or brazing shall be performed in accordance with the County's Welding and Cutting Policy.
- k) All confined space test meters will be calibrated as per the manufacturer's recommendations and records shall be maintained showing the date the unit was last calibrated.

8.0 Entrant Duties



Entrants shall be responsible for:

- Knowing the hazards that may be faced during entry, including information on the mode, signs or symptoms, and consequences of the exposure;
- Properly using safety and monitoring equipment;
- Communicating with the Attendant as necessary to enable the Attendant to monitor Entrant status and to enable the Attendant to alert Entrants of the need to evacuate the space if necessary.

Additionally, the Entrant is responsible for alerting the Attendant whenever the Entrant recognizes any warning sign or symptom of exposure to a dangerous situation, or the Entrant detects a prohibited condition. The Entrant will exit the permit space as quickly as possible whenever:

- An order to evacuate is given by the Attendant or the entry Supervisor,
- The Entrant recognizes any warning sign or symptom of exposure to a dangerous situation,
- The Entrant detects a prohibited condition, or
- An evacuation alarm is activated.

9.0 Attendant Duties

Attendants may not enter a confined space for any reason or perform any duties that might interfere with the Attendant's primary duty to monitor and protect the authorized Entrants. Attendants may perform non-entry type rescues as described in this policy. Attendants are responsible for:

- Knowing the hazards that may be faced during entry, including information on the mode, signs or symptoms, and consequences of the exposure;
- Being aware of possible behavioral effects of hazard exposure in authorized Entrants;
- Continuously maintaining an accurate count of authorized Entrants in the permit space and ensuring that the means used to identify authorized Entrants accurately identifies who is in the permit space;
- Remaining outside the permit space during entry operations until relieved by another Attendant;
Communicating with authorized Entrants as necessary to monitor Entrant status and to alert Entrants of the need to evacuate the space if necessary;



- Monitoring activities inside and outside the space to determine if it is safe for Entrants to remain in the space and ordering the authorized Entrants to evacuate the permit space immediately under any of the following conditions;
 - If the Attendant detects a prohibited condition;
 - If the Attendant detects the behavioral effects of hazard exposure in an authorized Entrant;
 - If the Attendant detects a situation outside the space that could endanger the authorized Entrants; or
 - If the Attendant cannot effectively and safely perform all of his or her duties.
- Summoning rescue and other emergency services as soon as the Attendant determines that authorized Entrants may need assistance to escape from permit space hazards;
- Taking the following actions when unauthorized persons approach or enter a permit space while entry is underway:
 - Warning the unauthorized persons that they must stay away from the permit space;
 - Advising the unauthorized persons that they must exit immediately if they have entered the permit space; and
 - Informing the authorized Entrants and the entry Supervisor if unauthorized persons have entered the permit space.

10.0 Entry Supervisors

Supervisors are designated as Entry Supervisors. Entry Supervisors must:

- Know the hazards that may be faced during entry, including information on the mode, signs or symptoms, and consequences of the exposure;
- Verify, by checking that the appropriate entries have been made on the permit, that all tests specified by the permit have been conducted and that all procedures and equipment specified by the permit are in place before endorsing the permit and allowing entry to begin;
- Terminate the entry and cancels the permit if prohibited conditions develop;
- Verify that rescue services are available and that the means for summoning them are operable;
- Remove unauthorized individuals who enter or who attempt to enter the permit space during entry operations; and



- Determine, whenever responsibility for a permit space entry operation is transferred and at intervals dictated by the hazards and operations performed within the space, that entry operations remain consistent with terms of the entry permit and that acceptable entry conditions are maintained.

11.0 Retrieval Equipment and Non-Entry Rescues

To facilitate non-entry rescues, retrieval systems or methods shall be used whenever an authorized Entrant enters a permit space, unless the retrieval equipment would increase the overall risk of entry or would not contribute to the rescue of the Entrant. Retrieval systems must meet the following requirements.

Each authorized Entrant is required to use a chest or full body harness, with a retrieval line attached at the center of the Entrant's back near shoulder level, above the Entrant's head, or at another point which the Supervisor can establish presents a profile small enough for the successful removal of the Entrant. Wristlets may be used in lieu of the chest or full body harness if the Supervisor can demonstrate that the use of a chest or full body harness is infeasible or creates a greater hazard and that the use of wristlets is the safest and most effective alternative.

The other end of the retrieval line must be attached to a mechanical device or fixed point outside the permit space in such a manner that rescue can begin as soon as the rescuer becomes aware that rescue is necessary. A mechanical device must be available to retrieve personnel from vertical type permit spaces more than 5 feet deep.

Attendants may perform non-entry rescues provided that the entry Supervisor is alerted immediately and it is safe to retrieve the Entrant from the space. Attendants are not to enter the confined space for any type of rescue attempt. Attendants will alert all unauthorized personnel that may be near the space to not attempt an entry rescue as it could be dangerous to life and health and only qualified rescuers can enter such spaces.

12.0 Rescue And Emergency Services

Department Heads will make arrangements with local emergency responders for confined space rescues by evaluating the rescuer's ability to respond to a rescue summons in a timely manner, considering the hazard(s) identified. Additionally, they will evaluate a prospective rescue service's ability, in terms of proficiency with rescue-related tasks and equipment, to function appropriately while rescuing Entrants from the particular permit space or types of permit spaces identified.

Department Heads will select a rescue team or service from those evaluated that:



- Has the capability to reach the victim(s) within a time frame that is appropriate for the permit space hazard(s) identified;
- Is equipped for and proficient in performing the needed rescue services;

Department Heads will also inform each rescue team or service of the hazards they may confront when called on to perform rescue at the site; and provide the rescue team or service selected with access to all permit spaces from which rescue may be necessary so that the rescue service can develop appropriate rescue plans and practice rescue operations.

Preference will be given to the local fire department who meets the above qualifications and their use shall be documented in writing. In the event that no fire department is equipped to meet the above requirements, the Department Head shall consult with the Risk Manager to locate a suitable private rescue service.

13.0 Contractors

If a contractor is used to enter a confined space, the Kenosha County Supervisor is charge of the project will:

- Inform the contractor that the workplace contains permit spaces and that permit space entry is allowed only through compliance with a permit space program meeting the requirements of this section;
- Apprise the contractor of the elements, including the hazards identified and the County's experience with the space, that make the space in question a permit space;
- Apprise the contractor of any precautions or procedures that the County or Department has implemented for the protection of employees in or near permit spaces where contractor personnel will be working;
- Coordinate entry operations with the contractor, when both County personnel and contractor personnel will be working in or near permit spaces; and Debrief the contractor at the conclusion of the entry operations regarding the permit space program followed and regarding any hazards confronted or created in permit spaces during entry operations.

14.0 Permit Required Confined Space Entry Procedures

Entry Supervisors will provide at least one Attendant outside the permit space into which entry is authorized for the duration of entry operations. Attendants are only allowed to oversee the Entrant(s) to a single confined space and may not monitor more than one space at a time.



Any conditions making it unsafe to remove an entrance cover shall be eliminated before the cover is removed. When entrance covers are removed, the opening shall be promptly guarded by a railing, temporary cover, or other temporary barrier that will prevent an accidental fall through the opening and that will protect each employee working in the space from foreign objects entering the space.

Before an employee enters the space, the internal atmosphere shall be tested, with a calibrated direct-reading instrument, for oxygen content, for flammable gases and vapors, and for potential toxic air contaminants, in that order. Testing can be performed by the Entrant, the Attendant or the entry Supervisor provided that they have been trained to use the test meter and interpret the results. The space will also be evaluated for physical and other hazards.

Entry Supervisors will reevaluate the permit space in the presence of any authorized Entrant or that employee's authorized representative who requests that the County conduct such reevaluation because the Entrant or representative has reason to believe that the evaluation of that space may not have been adequate. Additionally the entry Supervisor will immediately provide each authorized Entrant or that employee's authorized representative with the results of any testing conducted.

Testing of the space shall be performed without entering the space. Entrants or their authorized representative will be provided an opportunity to observe the pre-entry testing.

There may be no hazardous atmosphere within the space whenever any employee is inside the space. Hazardous atmosphere is defined as a concentration in excess of the OSHA permissible exposure limit, ACGIH threshold limit value or a concentration that is known to be immediately dangerous to life and health. Continuous forced air ventilation shall be used, as follows:

- An employee may not enter the space until the forced air ventilation has eliminated any hazardous atmosphere;
- The forced air ventilation shall be so directed as to ventilate the immediate areas where an employee is or will be present within the space and shall continue until all employees have left the space;
- The air supply for the forced air ventilation shall be from a clean source and may not increase the hazards in the space.
- The atmosphere within the space shall be periodically tested as necessary to ensure that the continuous forced air ventilation is preventing the accumulation of a hazardous atmosphere. Any employee who enters the space, or that employee's authorized representative, shall be provided with an opportunity to observe the periodic testing required by this paragraph.



If a hazardous atmosphere is detected during entry:

- Each employee shall leave the space immediately;
- The space shall be evaluated to determine how the hazardous atmosphere developed; and
- Measures shall be implemented to protect employees from the hazardous atmosphere before any subsequent entry takes place.

The Entry Supervisor will verify that the space is safe for entry and that the pre-entry measures required above have been taken, through a written permit system. The permit must be signed before entry is allowed.

Electrical systems or components that present a possible safety hazard within a confined space will be locked out according to the County's lockout procedure before entering the space.

15.0 Permit System

Entry Supervisors must sign a permit authorizing entry into a permit required confined space. The permit form is contained in the appendix.

Before entry begins, the entry Supervisor identified on the permit shall sign the entry permit to authorize entry. The completed permit shall be made available at the time of entry to all authorized Entrants or their authorized representatives, by posting it at the entry portal or by any other equally effective means, so that the Entrants can confirm that pre-entry preparations have been completed.

The duration of the permit may not exceed the time required to complete the assigned task or job identified on the permit. The entry Supervisor will terminate entry and cancel the entry permit when:

- The entry operations covered by the entry permit have been completed; or
- A condition that is not allowed under the entry permit arises in or near the permit space.

The entry Supervisor will retain each canceled entry permit for at least one (1) year to facilitate the review of the permit-required confined space program. Any problems encountered during an entry operation shall be noted on the pertinent permit so that appropriate revisions to the permit space program can be made.



16.0 Openings and Obstructions

Openings into the confined space shall be kept free from obstructions at all times, such as, but not limited to, hand tools and debris. Openings shall be guarded and barricaded when opened to prevent unauthorized employees or personnel from entering the confined space and to prevent objects or debris from falling into the confined space.

All guarding shall be accomplished by the use of any of the following barrier methods only and shall be installed such that unauthorized individuals cannot accidentally walk, fall in, or otherwise enter the space without having to physically remove, defeat and/or bypass the barrier that is used :

- Yellow caution tape wrapped around the opening.
- Vertical poles with associated yellow chain linked fencing placed around the opening.
- Orange or yellow traffic cones placed around the opening.

No other types of barrier guarding are allowed (i.e., use of chairs, tables, trashcans, etc.)

17.0 Vehicle Traffic Area Entry Requirements

Confined space entries into confined spaces located in vehicle traffic areas need to be identified and additionally protected by ensuring all of the following actions are performed (These are in addition to those requirements under “Openings and Obstructions” discussed above):

- A vehicle must be parked near the manhole in such a way as to protect the space opening and in such a manner as to not totally obstruct the flow of traffic;
- Vehicle’s four way flashers and yellow strobe lights shall be on at all times;
- Traffic cones shall be placed near the entry to channel traffic;
- Barricades and signs shall be used when appropriate in high traffic areas;
- Vehicles exhaust fumes shall be directed away from the entry point;
- All employees above ground shall wear safety colored orange vests and
- Entrant’s safety rope shall be attached to a tripod winch. Attendant shall use radio communication to communicate with Entrant and off-site supervisory personnel. Flagmen directing traffic shall not serve as an Attendant.
- Entrants and Attendants who work on highways, roads, streets or their easements shall wear traffic safety vests or use clothing or equipment that provides similar protection.



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18.0 Sewer Entries

All sewer entries will be performed in accordance with the requirements of this and all other applicable County Safety Policies. Department Heads will develop specific sewer entry work procedures to supplement the requirements of this policy. Such practices will address at a minimum:

- Unique hazards associated with the sewer to be entered.
- Type of sewer system to be entered.
- Surge flow and flooding.
- Introduction of contaminants.
- Special Equipment.

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End Policy



1.0 Scope and Application

Kenosha County has developed the following program to protect the safety and health of employees who are involved with the laboratory use of hazardous chemicals.

This policy complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce and 29 CFR 1910.1450 (Occupational Exposure To Hazardous Chemicals In Laboratories) promulgated by the U.S. Occupational Safety and Health Administration.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Implementation of policy and development of specific chemical hygiene plan for their operation(s).
Supervisors:	Ensure policy is adhered to by all employees.
Employees:	Follow policy requirements.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents minimum chemical hygiene planning requirements for the laboratory use of hazardous chemicals. Departments having laboratory type operations that fall under the definition of "laboratory use of hazardous chemicals" are required to develop and implement their own specific chemical hygiene plan that must include all of the following requirements contained in this policy.

4.0 Definitions

Laboratory use of hazardous chemicals means handling or use of such chemicals in which all of the following conditions are met:

- (i) Chemical manipulations are carried out on a "laboratory scale;"
- (ii) Multiple chemical procedures or chemicals are used;



- (iii) The procedures involved are not part of a production process, nor in any way simulate a production process; and
- (iv) "Protective laboratory practices and equipment" are available and in common use to minimize the potential for employee exposure to hazardous chemicals.

The following activities are not considered to be laboratory use of hazardous chemicals, even if such use occurs in a laboratory and as such, the requirements of this policy do not apply:

- Laboratory uses of hazardous chemicals which provide no potential for employee exposure.
- Procedures using chemically-impregnated test media such as Dip-and-Read tests where a reagent strip is dipped into the specimen to be tested and the results are interpreted by comparing the color reaction to a color chart supplied by the manufacturer of the test strip.
- Commercially prepared kits such as those used in performing pregnancy tests in which all of the reagents needed to conduct the test are contained in the kit.

5.0 Training

Department Heads are required to ensure that affected employees are provided with information and training to ensure that they are apprised of the hazards of chemicals present in their work area.

Such information shall be provided at the time of an employee's initial assignment to a work area where hazardous chemicals are present and prior to assignments involving new exposure situations. The frequency of refresher information and training shall be determined by the Department Head

Employees will be instructed in the following:

- The contents of the OSHA standard and its appendices which must be made available to employees.
- The location and availability of the Department's Chemical Hygiene Plan;
- The permissible exposure limits for OSHA regulated substances or recommended exposure limits for other hazardous chemicals where there is no applicable OSHA standard.
- Signs and symptoms associated with exposures to hazardous chemicals used in the laboratory.
- The location and availability of known reference material on the hazards, safe handling, storage and disposal of hazardous chemicals found in the laboratory including, but not limited to, Material Safety Data Sheets received from the chemical supplier.



Affected employees shall also receive training in the following subject areas:

- Methods and observations that may be used to detect the presence or release of a hazardous chemical (such as monitoring conducted by the employer, continuous monitoring devices, visual appearance or odor of hazardous chemicals when being released, etc.).
- The physical and health hazards of chemicals in the work area.
- The measures employees can take to protect themselves from these hazards, including specific procedures the employer has implemented to protect employees from exposure to hazardous chemicals, such as appropriate work practices, emergency procedures, and personal protective equipment to be used.
- The applicable details of the Department's written Chemical Hygiene Plan.

6.0 Documentation Requirements

Department Heads shall establish and maintain for each employee an accurate record of any measurements taken to monitor employee exposures and any medical consultation and examinations including tests or written opinions required by this standard.

Records of all training and instruction provided under this policy shall be maintained within the Department.

7.0 Employee Exposures

For laboratory uses of OSHA regulated substances, the Department Head shall ensure that laboratory employees' exposures to such substances do not exceed the permissible exposure limits specified in 29 CFR part 1910, subpart Z.

Department Heads shall ensure measurement of the employee's exposure to any substance regulated by a standard which requires monitoring if there is reason to believe that exposure levels for that substance routinely exceed the action level (or in the absence of an action level, the Permissible Exposure Limit).

If the monitoring described above shows and employee's exposure level to be over the action level (or in the absence of an action level, the PEL), the Department Head shall immediately comply with the exposure monitoring provisions of the relevant standard.

Monitoring may be terminated in accordance with the relevant standard or if allowed, when exposure monitoring data shows the employee is not being overexposed to any hazardous chemical above safe limits as prescribed by OSHA and ACGIH.



Department Heads shall ensure that within 15 working days after the receipt of any monitoring results, the employee is notified of these results in writing either individually or by posting results in an appropriate location that is accessible to employees.

8.0 Chemical Hygiene Plan

- a) A written Chemical Hygiene Plan (CHP) shall be developed by each affected Department. Each plan shall be capable of protecting employees from health hazards associated with hazardous chemicals in that laboratory and be capable of keeping exposures below any applicable limits.
- b) The Chemical Hygiene Plan shall be readily available to employees and employee representatives.
- c) The Chemical Hygiene Plan shall include each of the following elements and shall indicate specific measures that will be taken to ensure laboratory employee protection:
 - Standard operating procedures relevant to safety and health considerations to be followed when laboratory work involves the use of hazardous chemicals.
 - Criteria that will be used to determine and implement control measures to reduce employee exposure to hazardous chemicals including engineering controls, the use of personal protective equipment and hygiene practices.
 - Particular attention shall be given to the selection of control measures for chemicals that are known to be extremely hazardous.
 - A requirement that fume hoods and other protective equipment are functioning properly and specific measures that shall be taken to ensure proper and adequate performance of such equipment.
 - Provisions for employee information and training.
 - The circumstances under which a particular laboratory operation, procedure or activity shall require prior approval before implementation.
 - Provisions for medical consultation and medical examinations for exposures.
 - Designation of personnel responsible for implementation of the Chemical Hygiene Plan including the assignment of a Chemical Hygiene Officer, and, if appropriate, establishment of a Chemical Hygiene Committee.
- d) Provisions for additional employee protection for work with particularly hazardous substances are to be contained in the written Chemical Hygiene Plan. These include "select carcinogens," reproductive toxins and substances which have a high degree of acute toxicity. Specific consideration shall be given to the following provisions which shall be included where appropriate:



- Establishment of a designated area;
 - Use of containment devices such as fume hoods or glove boxes;
 - Procedures for safe removal of contaminated waste; and
 - Decontamination procedures.
- e) The Department Head shall review and evaluate the effectiveness of the Chemical Hygiene Plan at least annually and update it as necessary.

9.0 Medical Consultation And Medical Examinations

- a) Employees who work with hazardous chemicals shall receive an opportunity to receive medical attention, including any follow-up examinations which the examining physician determines to be necessary, under the following circumstances:
- Whenever an employee develops signs or symptoms associated with a hazardous chemical to which the employee may have been exposed in the laboratory, the employee shall be provided an opportunity to receive an appropriate medical examination.
 - Where exposure monitoring reveals an exposure level routinely above the action level (or in the absence of an action level, the PEL) for an OSHA regulated substance for which there are exposure monitoring and medical surveillance requirements, medical surveillance shall be established for the affected employee as prescribed by the particular standard.
 - Whenever an event takes place in the work area such as a spill, leak, explosion or other occurrence resulting in the likelihood of a hazardous exposure, the affected employee shall be provided an opportunity for a medical consultation. Such consultation shall be for the purpose of determining the need for a medical examination.
- b) All medical examinations and consultations shall be performed by or under the direct supervision of a licensed physician and shall be provided without cost to the employee, without loss of pay and at a reasonable time and place.
- c) The following information shall be provided to the physician:
- The identity of the hazardous chemical(s) to which the employee may have been exposed.
 - A description of the conditions under which the exposure occurred including quantitative exposure data, if available,
 - A description of the signs and symptoms of exposure that the employee is experiencing, if any.



- d) Department Heads shall obtain a written opinion from the examining physician for any examination or consultation provided. The written opinion must include the following:
- Any recommendation for further medical follow-up.
 - The results of the medical examination and any associated tests.
 - Any medical condition which may be revealed in the course of the examination which may place the employee at increased risk as a result of exposure to a hazardous workplace.
 - A statement that the employee has been informed by the physician of the results of the consultation or medical examination and any medical condition that may require further examination or treatment.
- e) The written opinion shall not reveal specific findings of diagnoses unrelated to occupational exposure.

10.0 Hazard Identification

With respect to labels and material safety data sheets, employees shall ensure that labels on incoming containers of hazardous chemicals are not removed or defaced.

Department Heads shall maintain any material safety data sheets that are received with incoming shipments of hazardous chemicals, and ensure that they are readily accessible to laboratory employees.

11.0 Respirators and Personal Protective Equipment

Where the use of respirators and personal protective equipment is necessary to maintain exposure below permissible exposure limits, employees will be provided with the proper respiratory equipment in accordance with the County's Respirator and Personal Protective Equipment Policy.

[This Section Intentionally Left Blank]

End Policy



1.0 Scope and Application

Kenosha County has developed the following program to protect the safety and health of employees whose work activities may expose them to communicable diseases.

This policy complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce and the general duty clause of the Occupational Safety and Health Act.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Implementation of policy and development of specific exposure control plan and procedures for their operation(s).
Supervisors:	Ensure policy is adhered to by all employees.
Employees:	Follow policy requirements.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents minimum requirements for exposure to communicable diseases. Each department having employees who are or who may be exposed to communicable diseases will develop specific exposure control plans and procedures to prevent employees from becoming infected.

4.0 Definitions

Communicable Disease:	Examples include, but are not limited to Tuberculosis, Meningitis, Hepatitis, Acquired Immunodeficiency Syndrome (AIDS), and Human Immunodeficiency Virus (HIV) etc. Any pathogen (virus or bacterium) that can infect a human being through direct contact or through contact with blood, body fluids, airborne exposures or exposures to contaminated water.
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5.0 Training

Department Heads are required to ensure that affected employees are provided with the appropriate training in their specific exposure control plans and procedures.



6.0 Documentation Requirements

Documentation of all employee exposures and tests, routine or otherwise (e.g. annual TB skin tests) will be maintained on file within the Department as well as any documentation required by communicable disease guidance documents issued by the U.S. Occupational Safety and Health Administration (OSHA) or U.S. Centers For Disease Control (CDC).

Records of all training and instruction provided under this policy shall be maintained within the Department.

7.0 Requirements

1. Departments having employees whose work exposes them or potentially exposes them to communicable diseases are required to develop specific exposure control plans and procedures to ensure the safety and health of such employees. Examples of where such plans may be required include:
 - Corrections Facilities
 - Brookside
 - Medical Examiner
 - Health Department
2. As with any medical/health condition that affects employment, any person who has a communicable disease and requires special employment accommodations must provide a doctor's statement to the Personnel Department that certifies the condition and any limitations or special considerations.
3. As with any medical, physical, or psychological condition, an individual with any communicable disease will be afforded privacy and confidentiality by all persons affiliated with Kenosha County. All disclosures will require a release of information, signed by the individual in accordance with state and federal laws, and will state the appropriate person who will receive such information and the reasons why.
4. Employees who are reluctant to or who refuse to work with a person having a communicable disease should be counseled or given training if their concerns are based on misunderstanding or lack of current medical/social information. Persons who refuse may be subject to corrective or disciplinary action if such refusal is determined to be unwarranted and/or if it impedes or disrupts business.



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Policy Name: Communicable Diseases
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5. All employees must be sensitive to persons with a communicable disease in that their medical disability may be a factor in their behavior or mental health.
6. Individuals with specified communicable diseases are protected under the Americans with Disabilities Act (ADA), and all reasonable accommodations will be made to provide County services in non-traditional modes to the degree that their disabilities requires.

8.0 Relationship to Bloodborne Pathogens

Exposure control plans and procedures shall be in addition to the Bloodborne Pathogens Control Plan required by the County's Bloodborne Pathogens Policy. Where possible, Departments should ensure their communicable diseases exposure control plans incorporate the applicable provisions of their bloodborne pathogens exposure control plans so that there are no procedural or policy conflicts.

[This Section Intentionally Left Blank]

End Policy



Policy No.	034
Policy Name:	Vehicle Operation
Control Date:	08/2006

1.0 Scope and Application

The following policy governs the use of vehicles owned, leased, rented and/or operated for county business and covers the use of these vehicles if used for personal use as allowed by Executive Order. It also governs the use of personal vehicles that are used to conduct County business.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Implementation of this policy.
Supervisors:	Ensure policy is adhered to by all employees.
Employees:	Follow policy requirements.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents minimum requirements for vehicle operation and maintenance. Departments may develop their own vehicle policies provided that they contain all of the requirements of this policy.

4.0 Definitions

None.

5.0 Training

Vehicle operators shall receive instruction in this policy and become familiar with the Guide to Determining Accident Preventability which is included in the appendix. Operators of special equipment shall be trained according to the special equipment requirements contained in this policy.

6.0 Documentation Requirements

Numerous documentation requirements are contained throughout this policy. See the pertinent sections for details. Records of all training and instruction provided under this policy shall be maintained within the Department.



7.0 Use Of Vehicles

- 1) All employees driving County vehicles, and those using their personal vehicles in pursuit of County business, must comply with all applicable laws of the State of Wisconsin as well as the following regulations of the County. Emergency vehicles under pressing emergency situations are exempted from normal motor vehicle laws and rules. However, this does not relieve such operator from the duty to drive in a prudent fashion under the circumstances for the safety of all persons nor does this protect such operator from the consequences of their reckless disregard for the safety of others.

The operation of a County vehicle is a privilege which may be withdrawn at any time. In order to operate a County vehicle of any type, an employee must have completed the following:

- a) Participation in a defensive driving or driver perception course as required by the Personnel Department and/or employing Department. Temporary driving privileges may be granted by the Risk Manager prior to the course being offered.
 - b) Orientation to County Driving rules and insurance procedures contained within this policy.
 - c) Training in the maintenance and use of vehicles and off-the-road equipment and machinery. No employee should be directed to operate a vehicle for which they have not been adequately trained to operate. This includes training and knowledge of safety procedures, tire and wheel changing procedures as appropriate, and vehicle maintenance requirements that pertain to the operation.
 - d) Successful completion of motor vehicle registration review as required by the Personnel Division.
- 2) Parking citations shall be the responsibility of the operator.
 - 3) All employees who drive as part of their work assignment and their passengers are required to properly wear their seat belts and if applicable their shoulder harness.
 - 4) Riding on the sides, running boards, tool boxes, tailgates, truck beds, or roof of any truck or vehicle is prohibited.
 - 5) Drivers shall direct their full attention to the safe operation of their vehicle.



- 6) During periods of limited visibility or any time windshield wipers are in use, headlights must be turned on.
- 7) Trailers will be fastened securely to hitches according to manufacturer procedures.
- 8) All items which might be transported either in a vehicle or trailer, which may move around during transport, must be secured.
- 9) Inappropriate and unauthorized personal use of County vehicles is not permitted. Exceptions include travel to and from work and lunch stops only for those employees specifically authorized by Executive Order. Occasional trips expressly authorized by the Department Head may also be exempt. Passengers shall be limited to County employees and others as may be authorized in advance by the Department Head.
- 10) Operators are the first line of defense against equipment wear, failure and damage. Vehicles should be visually inspected by the operator daily; before, during and after operation, so that malfunctions can be detected before they result in serious damage, equipment failure or accident. Report any noted findings to your Supervisor immediately.
- 11) Backing of vehicles which do not have a clear view of the entire rear end will be done with the assistance of a guide, if available. If a second person is in the vehicle, they must get out and guide the vehicle back using the appropriate hand signal and voice signal. If the driver is alone, he or she will get out of the vehicle and inspect the area behind before backing. If that is not feasible, avoid backing. Backing accidents that occur during snow plow and other emergency situations will be reviewed on a case-by-case basis and will take into consideration operational necessity.
- 12) A current automobile insurance identification card or certificate showing the insurance company name, policy number, and expiration date shall be kept in the glove box of every County vehicle. A copy of the County Accident Scene Procedures that are contained in this policy shall also be kept in the glove box (see appendix). These procedures must be adhered to following an accident. Replacements can be obtained from the Personnel Division.

Use of vehicle turn signals shall be utilized appropriately by all drivers at all times in any vehicle that is so equipped.
- 13) Tailgates will be up and latched when vehicles are in motion. If a vehicle's function requires that the tailgate remain in the open position, the warning lights or other appropriate caution device must be used.



- 14) If the vehicle does not have a tailgate but is loaded, the driver of the vehicle will ensure that the load is secure on the truck and that overhangs are properly marked with the use of a red flag or cloth.

8.0 Parking

- 1) County vehicles shall not be parked in “No Parking” zones except in emergency situations or in the required performance of official duties. At the time a vehicle is parked in a “No Parking” zone, emergency flashers will be turned on in any vehicle that is so equipped or can be so equipped.
- 2) No County vehicle will be left unattended with the ignition key left in the ignition, where anyone not employed by the County could have access to the vehicle.
- 3) When possible, vehicles will be locked when not occupied.
- 4) Employees who occupy a metered parking space will pay the meter for the duration of the stay while conducting business. Should any citation or ticket be issued, the employee will assume responsibility for payment.
- 5) Vehicles must be parked where they will not interfere with the operation of other vehicles or traffic. Emergency response units are exempted when necessitated by the emergency.

9.0 Equipment

- 1) Safety equipment, including seat belts, shall not be removed, bypassed or tampered with.
- 2) Doors will not be tied open.

10.0 Special Equipment

- 1) Special equipment such as tractors, hi-lifts, high rangers, graders, plows, cranes, or any unit which has special devices added for specific types of work, will require formal instruction prior to use by a driver. This special training will include the following:
 - Explanation and demonstration of all control devices.
 - Explanation and demonstration of all safety equipment.
 - Explanation of maintenance items such as fuel, water, oil, or other minimum operating needs of the unit.
 - Demonstration of operation.



- New driver operation under supervision with testing.
- Instruction in driving to and from or on and off trailer, parking procedures, and method of securing.

A report showing completion of this training must be provided to and maintained by the employing Department.

- 2) Passengers will ride only in seats designed for passengers on special equipment.
- 3) Operators shall be familiar with the equipment's operating manual. Safety devices shall remain intact at all times.

11.0 General Requirements

In addition to the following general rules, department rules and regulations should be adhered to for specific procedures:

- 1) Each County Department shall maintain a current listing of all personnel within their operation who may drive a County vehicle for County business. The list must include employee name (legal), date of birth, social security number, Driver License Number, and State of issue. This list shall be provided to the Risk Manager by September first of each year. Changes and revisions to the list shall also be provided in a timely manner.
- 2) Each County Department shall maintain a current listing of all County vehicles utilized within their operation, including Vehicle Identification Number (VIN), year, make, model, license plate number, driver/operator or Supervisor, overnight storage location (including authorized take home vehicles), and service location. This list shall be provided to the Risk Manager by September first of each year. Any additions or deletions to this list must be provided to the Risk Manager no later than the deadline in order to coordinate the updating of County records for insurance renewal purposes. County vehicles, as referred to in this plan, include vehicles owned, leased, rented, or those which the County has responsibility of insuring, such as KCCSU Sheriff Department vehicles.
- 3) The driver's license status of all County employees who may be required to drive County vehicles as a part of their work assignment may be checked with the Department of Motor Vehicles. The status of an employee's license may be monitored more frequently if the license had previously been suspended, revoked, or is a Commercial Drivers License (CDL). The employee's entire driving record is considered in determining driving habits and potential liability to the County. The County has a legal obligation to determine each employee's ability to safely operate a vehicle.



- 4) Each employee who operates a vehicle must report the suspension or revocation of their license to their Supervisor, who will in turn advise the Risk Manager. Failure of an employee to report a change in license status will result in disciplinary action.
- 5) Employees are not permitted to drive any licensed vehicle while conducting County business if their driver's license is expired, suspended, or revoked. Suspension or loss of a driver's license may result in layoff.
- 6) All drivers may receive periodic reviews of their general driving ability.
- 7) Cell Phone Usage Safety Policy when operating motor vehicle:
 - Make every attempt to plan your calls so that they can be made while you are not operating your vehicle.
 - If available, always ensure your hands free unit is attached and functioning. Become familiar with its use prior to using it while driving.
 - When possible, pull the vehicle off the road into a safe parking area prior to making or receiving calls.
 - Never take notes or refer to maps or any materials while the vehicle is in motion.
 - Unless you are expecting an urgent call, do not answer the phone while driving. Use the voice mail on the phone and return the call later.
 - If available, let a passenger make or answer calls.
 - Keep calls brief and stop calls immediately if driving conditions become hazardous.

12.0 Operation of Personal Vehicles

- 1) Whereas part of the IRS mileage reimbursement rate is intended to compensate employees for the cost of insurance on their vehicles, employees who use personal vehicles for County business must have a current insurance card or certificate on file with the Personnel Division at all times. This card must state the insurer, coverage limits and effective dates of the policy. Those employees who have insurance information on file will be allowed to drive their personal vehicles on County business. Employees who drive their personal vehicles on County business and who do not have insurance information on file will be subject to progressive discipline.
- 2) Employees must continue to provide the Personnel Division with a new insurance certificate each time their auto policy is renewed or canceled.



- 3) In the event an employee has an accident in a personal vehicle while conducting County business, the employee's insurance is primary.
- 4) The above procedure must be followed by all employees, both represented and non-represented, including Department Heads. Department Heads will notify the affected employees in their departments and stress the need for compliance.

13.0 Driver Violations/Discipline/Training

- 1) Driver and passenger misconduct or substantial negligence such as operating under the influence of an intoxicant or controlled substance, reckless driving, inattentive driving or driving without a valid driver's license will result in immediate disciplinary action, up to and including termination.
- 2) Employees will be restricted from driving County vehicles (pulled off the road) whenever any one of the following occurs:
 - Any two (2) moving traffic violations in the previous twelve (12) months.
 - Any one (1) preventable accident during the previous twelve (12) months of service while conducting County business.
 - Any one (1) conviction of a major offense as categorized by the Wisconsin Department of Transportation. WI DOT document BDS109 or its equivalent will be used in identifying major offenses.
 - While their license is revoked, suspended, expired or otherwise not valid.
 - A positive drug or alcohol test including Reasonable Suspicion, Random (CDL Requirement), and Post –Accident (CDL Requirement).
- 3) Employees will be restricted from driving Personal Vehicles while conducting County business whenever any one of the following occurs:
 - Any one (1) preventable accident during the previous twelve (12) months of service while conducting County business.
 - Failure to maintain an active personal automobile liability insurance policy.
 - While their license is revoked, suspended, expired or otherwise not valid.
 - A positive drug or alcohol test including tests resulting from Reasonable Suspicion.
- 4) The County's "Guide To Determining Accident Preventability" (see appendix) will be used in determining accident preventability. Other factors and information sources may also be used. Employees are encouraged to read this guide.



- 5) The County Risk Manager will determine the duration of driving restrictions, the need for retraining and/or driving assessment on a case-by-case basis.
- 6) Traffic citations and parking violations are the responsibility of the driver. Parking fines must be paid promptly or resolved satisfactorily with the issuing agency. Failure to adequately resolve parking violations may result in disciplinary action.
- 7) A County employee who causes or is involved in a preventable accident may be subject to disciplinary action within the guidelines of existing labor contracts. A review of the accident shall determine whether it was preventable or non-preventable.
- 8) A written Kenosha County Vehicle Accident Investigation Report (see appendix) shall be placed in the employee's personnel file to document both preventable and non-preventable accidents.
- 9) Repeated offenses will result in disciplinary action up to and including termination.
- 10) Failure to wear seat belts will result in a verbal warning for the first offense, to be followed with progressive discipline if the situation persists.

14.0 Vehicle Accident Reporting & Investigation

- 1) An accident is defined as an event that causes a collision or similar incident involving a moving vehicle often resulting in property damage, injury and/or death. All accidents occurring while driving on behalf of the County must be reported to your Supervisor.
- 2) The employee's immediate Supervisor or manager shall ensure that the Finance and Personnel Divisions are notified promptly, and that the proper forms are completed and forwarded.
- 3) The Supervisor/manager shall investigate the accident, document the investigation on the Kenosha County Vehicle Accident Investigation Report, make a determination as to whether the accident was preventable or non-preventable, and submit the report to the Department's Incident Review Committee (IRC), or the Division Director and Risk Manager in the absence of such a committee.
- 4) The County Guide to Determining Accident Preventability shall be used in analyzing and determining preventability (see appendix). The appropriate committee or management personnel will also recommend remedial safety procedures, specify driver retraining as needed and disciplinary action as necessary. The preventability determination, necessary actions, and recommendations, if any, will be documented on the Kenosha County



Vehicle Accident Investigation Report and returned to the Supervisor/Department Head for implementation.

- 5) The Kenosha County Vehicle Accident Investigation Report and related records shall be kept as a permanent record in the employee's personnel file.

15.0 Accident Scene Procedures

Immediately following an accident there are several things that you should do, as well as things you should not do. Conducting yourself in a professional manner and following the procedures below may help prevent another accident from occurring, will aid in minimizing damages, and will assist the County in documenting what actually happened.

- 1) Secure The Scene
 - Stop immediately and remain at the scene until the authorities give you permission to leave.
 - Do not move your vehicle unless necessary for safety reasons. Location and position of the vehicle can help determine the cause of the event.
 - Before exiting your vehicle, turn the engine off, turn the emergency flashers on, and set the parking brake to ensure your vehicle does not roll.
 - If your vehicle is equipped with reflective triangles or other warning devices, place them appropriately.
- 2) Lend Assistance To The Injured
 - Send or call for help.
 - If you are able, check on the injured and render immediate assistance. Do not move anyone who is injured unless it is a life-threatening situation. Only give what first aid you have been trained to give by a qualified agency such as the American Red Cross. Do what you can do to help, but do not talk about the collision or events leading up to it.
- 3) Information You May & May Not Share With Others
 - When police arrive, cooperate fully and follow all of their instructions. Answer their questions honestly, but avoid speculating on cause or guilt, especially your own. Do not offer any more information than asked. Do not offer opinions and do not ad lib.
 - Notify your Supervisor as soon as time permits. You may give your name, address, employer name and address, vehicle license number, your driver's license number, and information off of the insurance identification card or certificate in your glove



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box to the police and other party involved. If anyone else asks for details, be polite, but firmly refuse to discuss the accident with them.

- You may only discuss details of the accident with the investigating members of the investigating law enforcement agency, your Supervisor or other County official, and Wisconsin Municipal Mutual Insurance Company representative. Do not discuss details of the accident with anyone other than those listed here without prior approval from the Personnel Office. Do not hesitate to ask individuals for identification.
- Do not apologize for the accident.
- Do not argue cause.
- Do not offer to pay medical expenses.
- Do not admit responsibility.
- Driver reprimands at the scene are not permissible. If necessary, reprimands should take place in a confidential environment.

4) Secure Driver/Witness Information & Statements

- Gather information. Write down as much information as you can right away. Information documented at the scene is significantly more accurate than that recalled at a later time. Write down the other driver, passenger and witness information and statements. Be sure to get the other driver's insurance information.

5) Inspect And Verify The Scene

- Inspect the accident scene carefully. Details are essential. Use the Kenosha County Vehicle Accident Investigation Report to record conditions at the scene, as well as other accident details. If this form is not available, gather as much information as you can and write it down as soon as possible.
- Make a sketch of the scene before any vehicles are moved. Do not worry about drawing a vehicle that looks realistic. The important thing is to show the position of the vehicles as they approached the scene and where they were following the collision.
- Include your description of what occurred. Your statement should be simple, to the point, and purely factual.

6) Complete Forms As Soon As Possible

- If you did not have time to fully complete the Kenosha County Vehicle Accident Investigation Report while at the scene, do so as soon as possible.
- Submit the form to your Supervisor as soon as possible.

16.0 Vehicle Maintenance



Policy No.

034

Policy Name:

Vehicle Operation

Control Date:

08/2006

- 1) Effective vehicle maintenance is necessary to provide a reliable and safe vehicle. Drivers shall follow the recommended maintenance schedule per the manufacturer and/or departmental procedures.
- 2) Vehicle windows shall be kept clean as practicable by the individual driver.
- 3) Interiors of County vehicles shall be kept clean of all paper, magazines, bottles, cans, rubbish, etc.

End Policy



Policy No.	035
Policy Name:	Asbestos Control
Control Date:	08/2006

1.0 Scope and Application

This policy has been developed to minimize the potential health risk to County employees and the public resulting from the presence of Asbestos Containing Materials (ACM) or Presumed Asbestos Containing Materials (PACM) in County-owned facilities.

This policy complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative Code as promulgated by the Wisconsin Department of Commerce, 29 CFR Part 1910.1001 (Asbestos) as promulgated by the U.S. Occupational Safety and Health Administration, NR447 (Control of Asbestos Emissions) of the Wisconsin Administrative Code as promulgated by the Wisconsin Department of Natural Resources, HFS159 (Asbestos Certification and Training Accreditation) of the Wisconsin Administrative Code as promulgated by the Wisconsin Department of Health and Family Services and all applicable regulations as promulgated by the U.S. Environmental Protection Agency.

2.0 Responsibilities

Risk Manager:	Program Administrator.
Department Heads:	Implementation of this policy.
Supervisors:	Ensure policy is adhered to by all employees.
Employees:	Follow policy requirements.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents minimum requirements for the identification and control of asbestos containing materials. Facilities that contain asbestos containing materials will be required to conduct an asbestos survey and develop an Asbestos Operations and Maintenance Plan if asbestos is present.

4.0 Definitions

ACM:	Asbestos Containing Materials (Any material containing asbestos in concentrations >1%)
PCAM:	Presumed Asbestos Containing Material means thermal system insulation and surfacing material found in buildings constructed no later than 1980.



O&M: Operations and Maintenance Plan. A plan detailing how identified ACM and PACM will be maintained in a safe condition.

5.0 Training

All personnel who may reasonably come into contact with ACM or PACM and all custodial (contractor or otherwise) and Facilities employees will receive asbestos awareness training.

Such training will include available information concerning the locations of thermal system insulation and surfacing ACM/PACM, and asbestos-containing flooring material, or flooring material where the absence of asbestos has not yet been certified; and instruction in recognition of damage, deterioration, and delamination of asbestos containing building materials. Such course shall take at least 2 hours.

6.0 Documentation Requirements

A comprehensive asbestos inspection shall be performed on all County-owned facilities constructed prior to 1980. All work involving asbestos (abatement, inspections, demolition, disposal, etc.) will be documented by the Risk Manager.

7.0 Competent Person

The Risk Manager shall serve as the designated “Competent Person” who will be in charge of the County’s asbestos program and will be responsible for County-wide planning and monitoring activities relating to asbestos.

8.0 General Requirements

1. Asbestos surveys will be conducted in County-owned buildings constructed prior to 1980 to identify all ACM and PACM.
2. A determination will be made as to whether ACM or PACM is capable of releasing fibers into the air.
3. A specific Operations and Maintenance (O&M) Program will be established for each facility to monitor ACM or PACM over its lifetime to ensure a fiber release episode does not occur.
4. Routine maintenance operations will be conducted in a manner that controls damage to ACM/PACM, and prevents employee exposures to asbestos.



5. If ACM/PACM poses a reasonable possibility of fiber release, an appropriate method of control will be implemented.
6. All work near or with asbestos containing material or presumed asbestos containing material will be accomplished by an outside certified asbestos abatement contractor unless otherwise specifically authorized by the Risk Manager.
7. All contractors hired by the County for asbestos related work, will be subject to rigorous selection and performance criteria that meet the requirements of all applicable regulations.
8. No construction, demolition, or renovation activity in any County-owned building constructed prior to 1980 may disturb any ACM/PACM without prior approval by the Risk Manager. Strict measures will be taken to comply with the most current regulations.
9. Documentation of any activity involving asbestos material activity will be part of the County's normal conduct of business.

9.0 Building Surveys

- 1) The Risk Manager will ensure that County-owned facilities constructed prior to 1980 are surveyed to identify the location of all ACM/PACM. The following criteria will be used to determine surveys for County-owned facilities:
 - Building age and life expectancy.
 - Accessibility of suspect materials.
 - Previous building data on ACM/PACM.
 - Available funding.
- 2) All surveys will include a review of building records, physical inspection and sampling of suspect areas as appropriate. All asbestos containing materials capable of fiber release will be noted by location, type, condition, and prioritized by areas needing immediate abatement action. All samples will be collected in a manner to avoid fiber release and personal exposure. For the purpose of this program, friable asbestos is defined as, any ACM/PACM of more than 1 percent asbestos by weight, which can be crumbled, pulverized, or reduced to powder by hand pressure. Dry non-friable ACM may also pose a hazard when special circumstances arise and should also be noted in the survey. An estimate of the cost of each abatement alternative shall also be provided by the surveyor.



- 3) The condition of ACM/PACM can deteriorate resulting in the release of fibers. Each custodial and maintenance worker must be instructed to report, on a daily basis, any observed deterioration of ACM to his or her Supervisor, who in turn must notify the Risk Manager.
- 4) No less frequently than every six (6) months, appropriately trained personnel will inspect the condition of asbestos containing material in all pre-1980 buildings. Any change in appearance of the surface material such as discoloration, staining, signs of damage or deterioration of the material will be photographed and recorded. The Risk Manager will direct an asbestos contractor to repair the damage. The semi-annual inspections should record:
 - Date of the inspection and name and title of inspector;
 - Changes noted in appearance or condition; and
 - Action taken because of such changes.

10.0 ASBESTOS CONTROL MEASURES

- 1) Asbestos control measures are methods used to prevent the release of fibers in asbestos containing materials. All of the following are types of asbestos control measures:
 - Asbestos surveys.
 - Operations and maintenance (O & M) programs.
 - Re-inspections of ACM.
 - Abatement which may include removal, enclosure or encapsulation.
- 2) Although removal of ACM is the only truly permanent solution, the presence of ACM in a building does not mean that the health of the building occupants is endangered. If ACM remains in good condition and is unlikely to be disturbed, exposure is negligible and removal is neither advisable nor recommended. In situations where removal is warranted, work will be done by qualified contractors operating in accordance with all applicable Federal, State and Local regulations and with stringent regard for the health and safety of all persons.

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- 3) Prior to the building survey, measures shall be adopted to identify, monitor and/or control work requests within County facilities. The Risk Manager shall be designated point of contact if potential disturbance of suspect materials is indicated. The Risk Manager will respond with an appropriate action keeping any disturbance of the material to a minimum. Once the building survey and assessment have been completed, the Risk Manager will prioritize affected buildings on an action needed basis according to existing hazard or potential hazard as outlined in EPA regulations. This information will then be compiled to formulate the total survey record, site specific O&M program or routine maintenance program, and overall asbestos management plan for each facility.

11.0 OPERATIONS AND MAINTENANCE (O & M) PROGRAMS

- 1) The Risk Manager will develop and monitor specific O & M Programs for all County facilities requiring such a plan. Facilities personnel will be the most active department associated with this program through construction, renovation and custodial operations. Once the O & M Program has been implemented, The Risk Manager will turn over full responsibility of managing the program to the Department Head of the Facilities Department.

12.0 NOTIFICATION

- 1) The Risk Manager will notify building occupants prior to surveying buildings. Survey results will be made available to all building occupants. Information given to building occupants will contain the following:
 - The potential health hazard(s) associated with asbestos.
 - The location of ACM/PACM and its current condition.
 - The ACM/PACM inspection schedule and any special measures to be implemented (i.e., Operations and Maintenance Programs).
 - Instructions to avoid disturbing the ACM/PACM (e.g., do not hang plants or pictures on the ACM/PACM, do not push furniture against the ACM/PACM, do not remove ceiling tiles unless authorized to do so, etc.).
 - Instruction to report any evidence of disturbance or damage.
 - Instructions to report any dust or debris from ACM/PACM, any change in the condition of the ACM/PACM, or any improper action of building personnel.

End Policy



Policy No. 036
Policy Name: Lead Control
Control Date: 08/2006

1.0 Scope and Application

This policy has been developed to ensure that the hazards associated with lead and lead containing materials are minimized or eliminated to protect the safety and health of employees, the public, and the environment.

This policy complies with Chapter 32 (Public Employee Safety and Health) of the Wisconsin Administrative code as promulgated by the Wisconsin Department of Commerce and 29 CFR Part 1910.1025 (Lead) as promulgated by the U.S. Occupational Safety and Health Administration.

2.0 Responsibilities

Risk Manager:	Support and management of this policy. Exposure monitoring.
Department Heads:	Implementation of this policy. Develop control procedures.
Supervisors:	Ensure policy is adhered to by all employees.
Employees:	Follow policy requirements.

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge.

3.0 Departmental Policies and Requirements

This policy represents minimum requirements for any activities involving lead or lead containing materials and/or wastes. Department Heads shall develop specific Lead Control Procedures as specified in this policy for each operation involving an employee's exposure to lead or lead containing materials.

4.0 Definitions

Action Limit: The limit for lead of 30 ug/m³ (micrograms per cubic meter) for which actions are required if employee airborne exposures meet or exceed this value.

PEL: Permissible Limit: Set by OSHA, this is the maximum daily airborne exposure to lead that employees can be exposed to with having to implement engineering controls, personal protective equipment, etc. It is set at 50 ug/m³ (micrograms per cubic meter).

TWA: Time Weighted Average based on a standard 8-hour workday.



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5.0 Training

Employees who work with lead or lead containing materials (e.g. paint, etc.) and are exposed to airborne lead concentrations at any level will receive copies of Appendix A and B of the OSHA lead standard. Employees who are exposed to lead above the OSHA action level or for whom the possibility of skin or eye irritation exists will receive training on an annual basis in the topics described in the OSHA lead standard.

6.0 Documentation Requirements

The results of all air monitoring tests and training records will be forwarded to the County Risk Manager. Documentation of annual respirator fit testing and respirator training shall all be documented as required.

7.0 Potential Sources Of Lead

The following sources may contain lead. This list is not all inclusive:

- Lead bullets, spent cartridges and floor sweepings from shooting range.
- Solder
- Painting (Spray, hand, scraping, etc.)
- Metals
- Welding Rods
- Batteries
- Sandblasting leaded paint

8.0 Exposure Assessment

Employee lead exposure monitoring shall be conducted to determine the employee's potential to exceed the OSHA lead action level. Identified activities will be monitored to determine actual exposure levels and to help in defining engineering, administrative or personal controls that may be warranted. Monitoring of every employee potentially exposed to lead is not required provided that the monitoring is representative of the activities performed by employees in the same job classification performing the same duties in regards to lead and lead containing materials.

- a) Employees will be notified in writing of the monitoring results within five (5) days of the receipt of the results from the laboratory. If the results indicate that the employee is exposed to lead above the PEL of 50 $\mu\text{g}/\text{m}^3$ on a TWA (8-hour) basis, then the notification will also include a description of corrective actions that have been or will be taken to reduce exposures.



- b) No additional monitoring is required if the initial lead exposure monitoring shows that the employee is not exposed at or above the action limit of 30 ug/m^3 unless work conditions or materials change. For employees who are exposed above the action limit
- c) Monitoring shall be repeated every six (6) months if exposure monitoring results show that the employee is exposed at or above the action limit of 30 ug/m^3 but below the PEL of 50 ug/m^3 on an 8-hour TWA basis. Monitoring may be discontinued if two (2) consecutive measurements, taken at least seven (7) days apart, are at or below the action level of 30 ug/m^3 .
- d) Monitoring shall be repeated every three (3) months if exposure monitoring results show that the employee is at or above the PEL of 50 ug/m^3 on an 8-hour TWA. Monitoring must continue at three (3) month intervals until two (2) consecutive measurements, taken at least seven (7) days apart, are below the PEL of 50 ug/m^3 .
- e) Whenever there is a change in equipment, processes, controls or a new type of job is added that involves exposure to lead, additional air monitoring will be required.

9.0 Lead Control Procedures

Department Heads shall develop lead control procedures for any operation in which initial monitoring shows airborne lead exposures at or above the action limit of 30 ug/m^3 . These procedures shall specify all of the following and include the other pertinent requirements of this policy:

- a) A description of each operation in which lead is emitted; e.g. machinery used, material processed, controls in place, crew size, employee job responsibilities, operating procedures and maintenance practices.
- b) A description of the specific means that will be employed to achieve compliance, including engineering plans and studies used to determine methods selected for controlling exposure to lead.
- c) A report of the technology considered in meeting the permissible exposure limit.
- d) Air monitoring data which documents the source of lead emissions.
- e) A detailed schedule for implementation of the program, including documentation such as copies of purchase orders for equipment, construction contracts, etc.



10.0 Personal Protective Equipment

- a) If an employee is exposed to lead above the PEL, without regard to the use of respirators or where the possibility of skin or eye irritation exists, the County will provide at no cost to the employee and assure that the employee uses appropriate protective work clothing and equipment such as, but not limited to:
- Coveralls or similar full-body work clothing.
 - Gloves, hats, and shoes or disposable shoe coverlets.
 - Face shields, vented goggles, or other appropriate protective equipment.
- b) Personal protective clothing required in the above paragraph will be provided in a clean and dry condition at least weekly, and daily to employees whose exposure levels without regard to a respirator are over 200 ug/m³ of lead as an 8-hour TWA.
- c) Facilities will be provided for the cleaning, laundering, or disposal of protective clothing and equipment.
- d) The Supervisor will repair or replace required protective clothing and equipment as needed to maintain their effectiveness.
- e) Supervisors shall ensure that all protective clothing is removed at the completion of a work shift only in change rooms provided for that purpose.
- f) Supervisors shall ensure that contaminated protective clothing which is to be cleaned, laundered, or disposed of, is placed in a closed container in the change-room which prevents dispersion of lead outside the container.
- g) Department Heads shall inform in writing any person who cleans or launders protective clothing or equipment of the potentially harmful effects of exposure to lead. Such communication shall first be approved by the County Risk Manager.
- h) Supervisors shall ensure that containers of contaminated protective clothing and equipment are labeled as follows:

CAUTION: CLOTHING CONTAMINATED WITH LEAD. DO NOT REMOVE DUST BY BLOWING OR SHAKING. DISPOSE OF LEAD CONTAMINATED WASH WATER IN ACCORDANCE WITH APPLICABLE LOCAL, STATE, OR FEDERAL REGULATIONS.



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- i) Procedures shall specify that the removal of lead from protective clothing or equipment by blowing, shaking, or any other means which disperses lead into the air is prohibited.

11.0 Housekeeping

- a) All surfaces shall be maintained as free as practicable of accumulations of lead.
- b) Floors and other surfaces where lead accumulates may not be cleaned by the use of compressed air.
- c) Shoveling, dry or wet sweeping, and brushing may be used only where vacuuming or other equally effective methods have been tried and found not to be effective.
- d) Where vacuuming methods are selected, the vacuums shall be used and emptied in a manner which minimizes the reentry of lead into the workplace.

12.0 Hygiene Facilities and Practices

- a) Employees who are exposed to lead above the PEL, without regard to the use of respirators, shall not have food or beverage present or consumed, tobacco products present or used, and cosmetics applied, except in change rooms, lunchrooms, and showers.
- b) Employees will be provided with clean change rooms whose work in areas where their airborne exposure to lead is above the PEL, without regard to the use of respirators.
- c) Change rooms must be equipped with separate storage facilities for protective work clothing and equipment and for street clothes which prevent cross-contamination.
- d) Employees who work in areas where their airborne exposure to lead is above the PEL, without regard to the use of respirators, shower at the end of the work shift.
- e) Supervisors shall ensure that employees who are required to shower do not leave the workplace wearing any clothing or equipment worn during the work shift.
- f) Supervisors shall ensure that employees who work in areas where their airborne exposure to lead is above the PEL without regard to the use of a respirator wash their hands and face prior to eating, drinking, smoking or applying cosmetics.



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13.0 Medical Surveillance

- a) Employees who are or may be exposed above the action level for more than thirty (30) days per year shall be enrolled in a medical surveillance program to be managed by the Risk Manager.
- b) The medical surveillance program shall comply with the requirements of the OSHA lead standard.

14.0 Respirator Use

- a) All respirator use shall comply with the County's respirator policy.
- b) Employees exposed above the PEL of 50 ug/m³ for less than thirty (30) days per year are exempt from the respirator policy to have a medical examination prior to wearing a respirator. These employees are still required to undergo annual respirator fit testing and training.

15.0 Signs

- a) The employer shall post the following warning signs in each work area where the PEL is exceeded:

WARNING
LEAD WORK AREA
POISON
NO SMOKING OR EATING

16.0 Plan Review

This plan and all lead control procedures will be reviewed on an annual basis and updated as necessary. The review will be completed on the forms contained in the appendix.

End Policy



1.0 Scope and Application

The County of Kenosha is committed to providing a safe and secure working environment for our employees and customers. The County of Kenosha will not tolerate any harassment, intimidation, violent act, or threat of violence against any employee, visitor or client. This includes any direct, conditional or implied threat, intentional act, or other conduct, which reasonably arouses fear, hostility, intimidation, or the apprehension of harm. The County of Kenosha will take steps to prevent and respond to all instances of violence and threats of violence, which occur on our premises or in the performance of official business outside of the premises.

2.0 Responsibilities

Risk Manager:	Support and management of this policy.
Department Heads:	Implementation of policy and development of specific exposure control plan and procedures for their operation(s). See Section 7.6
Supervisors:	Ensure policy is adhered to by all employees. See Section 7.6
Employees:	Follow policy requirements. See Section 7.6

All employees are responsible for complying with the requirements contained in this policy. Failure to abide by these requirements may subject the employee to disciplinary action, up to and including discharge. All employees have a responsibility for fostering and maintaining a safe and secure workplace. All employees are also expected to adhere to specific security and safety procedures as prescribed by their division or worksite management. All employees have a duty to report any knowledge of such acts or threats to their supervisors. Employees should note in their inspection files/reports where past specific behavior indicates the existence of anger and hostility; where a significant enforcement action is being taken; or where other behaviors, experiences, attitudes, etc. indicate a potential problem. This information shall be shared with their supervisors and other

When notified that an employee has been assaulted, threatened with bodily harm or has threatened to harm themselves, supervisors have a responsibility to respond in a timely and appropriate manner.

3.0 Departmental Policies and Requirements

This policy represents minimum requirements for responding to and addressing workplace violence. Specific departmental policies may be developed provided that they do not conflict with the requirements contained in this policy unless approved by the County Risk Manager.



4.0 Definitions

Workplace Violence: Any threat, act or other action, verbal or otherwise, that has the potential to result in injury or illness, mental or physical, to any individual in a workplace setting.

5.0 Training

Department Heads are required to ensure that the requirements of the policy are appropriately communicated to affected employees.

6.0 Documentation Requirements

The completion of an Assault/Threat Report and witness statements are required to be submitted to Risk Manager within 24 hours of any workplace violence event.

7.0 Requirements

1. Conduct prohibited by this policy includes, but is not limited to: physical attacks; any unwanted contact such as hitting, fighting, pushing, or throwing objects; verbal or non-verbal threats; any veiled, direct, or conditional suggestion of physical harm; verbal abuse or harassment acts or language intended to scare, menace or intimidate. Sexual harassment is not covered under this policy unless such harassment also involves acts or threats of violence.
2. No weapon shall be brought into the workplace. Banned weapons include firearms and other objects intended to cause harm to oneself or others. Use of any object, as an actual or intended weapon, shall be considered a violation of this policy. Only law enforcement or security personnel who are required to carry a weapon as part of their official job duties are exempted.
3. Appropriate disciplinary, administrative or criminal action shall be taken against any person who violates sub-sections 1 and 2 of this policy as described above.
4. Any person who engages in an act of violence or alleged act of violence in a County of Kenosha facility may be removed from the workplace by law enforcement officials as quickly as safety permits.
5. The Crisis Management or Safety Team will meet as necessary to review reported incidents of workplace violence, to recommend appropriate action to implement this policy, and to develop proposed revisions to this policy. Other program managers, health and safety committee representatives, legal specialists, police officials, union



representatives, or others may be called upon to work with the team as circumstances warrant.

The Crisis Management Team shall include:

- Director of Personnel Services
- County Risk Manager
- Appropriate Department Head

6. The following responsibilities are designated for each job classification listed:

Employee Responsibilities:

- Remove yourself from the threat as soon as possible.
- Obtain emergency police intervention or medical response if required (Dial 9-1-1 as necessary). Ask the police for a disorderly citizen response, and ask to have him/her arrested. The police will have a good idea if this is warranted, on a case-by-case basis. Disorderly conduct charges, or other counts may be appropriate for making threats against a public official, yelling, swearing, etc., in front of a member of the public. Ask for a "NO-Contact" order as a condition of bond and condition of "supervision."
- Notify immediately the manager/supervisor of the work unit if you are victim of, or a witness to, an act of violence or other violation of this policy.
- Document the assault/threat (in writing) as soon as possible after the incident occurs.
- Assist management in the completion of an Assault/Threat Report.
- Cooperate with any subsequent investigation of workplace violence incidents.

Department/Division Heads:

- Assess reported incidents to determine the need to involve the Crisis Management or Safety Team.
- Advise unit management on appropriate incident response measures.
- Conduct or assist in the investigation of workplace violence incidents.

Supervisors:

- Notify immediately the Director of Personnel Services, Risk Manager, and Department/Division Head.
- Obtain written statements from witnesses once the situation has been brought under control.
- Complete an Assault/Threat Report and forward the completed form and witness statements to the Risk Manager within 48 hours of the occurrence.
- Assist in, or cooperate with, subsequent investigations of workplace violence incidents.



- Assist in identifying potentially dangerous situations and the development of procedures to address those situations.
- Ensure that employees are aware of this policy on workplace violence.
- Assist the Crisis Management or Safety Team in identifying additional measures that can be taken to reduce workplace violence.
- Participate in any investigations.

Legal Counsel Responsibilities:

- Determine and initiate appropriate administrative/legal action, if necessary.

Personnel Director & Risk Manager:

- Review the accident report and injury report promptly.
 - Advise employee of assistance available.
 - Advise managers/supervisors on disciplinary actions and procedures.
7. When information about intimidating, threatening or violent behavior is made known to the Personnel Division, the Director & Risk Manager will take appropriate steps to initially assess the level of risk and try to prevent harm from occurring or reoccurring. The Personnel Director will consult with the appropriate employee(s), supervisor(s), and manager(s) and will offer assistance in finding aftercare services of employees involved in an incident of workplace violence. This may include one-on-one counseling, critical incident stress debriefings and/or other forms of assistance as deemed necessary and requested by the employee.
 8. If an employee obtains court-ordered protection that extends to the workplace from any individual, the employee is required to notify his/her supervisor or designated Crisis Management/Safety Team member.
 9. The Risk Manager will be responsible for maintaining records on workplace violence.
 10. Copies of this policy shall be distributed to all current employees.

End Policy



Appendix No. A
Appendix Name: Policy Documentation Summary
Control Date: 08/2006

No.	Policy Name	Required Documentation
001	Safety Policy Statement	
002	Responsibilities	
003	Inspections Audits and Reviews	Documentation of Performance
004	Training Requirements	Documentation of Training
005	General Work Rules	
006	Safety Committees	Attendance List and Meeting Minutes
007	Purchasing Procedures	Purchase Order Verbiage
008	Workman's Compensation	Accident Reporting Forms
009	First Aid	Accident Reporting Forms
010	Office Safety	
011	Computer Work Stations	
012	Tools and Equipment	
013	Flammable Liquids	
014	Materials Handling	
015	Construction & Traffic Safety	
016	Ladders and Scaffolding	
017	Welding and Cutting	Hot Work Permits
018	Hazard Communication	MSDS Documents and Chemical Listing
019	Lockout / Tagout	Equipment Specific Lockout Procedures
020	Compressed Gases	
021	Powered Industrial Trucks	Driver Certifications
022	Pesticides	Detailed Application Records
023	Trenching and Excavating	
024	Fall Protection	
025	Electrical Safety	
026	Bloodborne Pathogens	Exposure Control Plan & Letter To Laundry Service
027	Hearing Conservation	Noise Exposure Monitoring Data
028	Emergency Plan	Evacuation Procedures, Maps and Emergency Contact Information
029	Protective Equipment	Job Hazard Assessments w Certification
030	Respiratory Protection	Chemical Exposure Monitoring Data
031	Confined Spaces	Listing of Permit & Non-Permit Spaces
032	Chemical Hygiene Plan	Chemical Hygiene Plan Annual Review
033	Communicable Diseases	
034	Vehicle Operations	Accident Investigation Report/Insurance/Driver Course/License and Endorsements
035	Asbestos Control	Asbestos Surveys/test Results/Abatement Records/Contractor Certification
036	Lead Control	Procedures/Exposure Monitoring/Respirators/Policy Review
037	Workplace Violence	Assault Threat Report



Appendix No.

B

Appendix Name:

Audit / Inspections Summary

Control Date:

08/2006

No.	Program	Type	Frequency	Responsibility
000	Cranes and Hoists	Inspection of Units For Proper Operation	Monthly	Facilities
000	Cranes and Hoists	Inspection of Units For Proper Operation	Annually	Facilities
000	Cranes and Hoists	Inspection of Units For Proper Operation	Daily	Operator*
000	Powered Industrial Trucks	Inspection of Units For Proper Operation	Daily	Operator*
005	Safety Showers	Inspection of Units For Proper Operation	Monthly	Facilities
005	Eye Wash	Inspection of Units For Proper Operation	Monthly	Facilities
009	First Aid Kits	Inspection of Units For Supplies	Monthly	Facilities*
013	Fire Extinguishers	Inspection of Units For Proper Operation	Monthly	Facilities
016	Ladders and Scaffolding	Safety Inspection	Daily	Supervisor*
017	Welding and Cutting	Fire Watch	As Needed	Supervisor*
019	Lockout/Tagout	Review Lockout Procedures	Annually	Supervisors
019	Lockout/Tagout	Audit LOTO Program	Annually	Department Head
023	Trenching and Excavations	Safety Inspection	Daily	Supervisor*
026	Bloodborne Pathogens	Review Exposure Control Plan	Annually	Department Head
030	Respiratory Protection	Review Program Effectiveness	Annually	Risk Manager
031	Confined Spaces	Review Program Effectiveness	Annually	Risk Manager
032	Chemical Hygiene (Fume Hoods)	Inspection of Units For Proper Operation	Monthly	Facilities
032	Chemical Hygiene (Fume Hoods)	Review of Program Effectiveness	Annually	Department Head
036	Lead Control	Review of Program Effectiveness	Annually	Risk Manager
	* Does Not Require Documentation			



Appendix No.

Appendix Name:

Control Date:

C

Safety Training Summary

08/2006

No.	Policy Name	Type	Content	Affected Employees	Assignment	Annual	Special
001	Safety Policy Statement	Instruction	Responsibilities	All	X		
002	Responsibilities	Instruction	Responsibilities	All	X		
003	Inspections Audits and Reviews	Instruction	Responsibilities	Department Heads and Supervisors	X		
004	Training Requirements	Instruction	Responsibilities	Department Heads and Supervisors	X		
005	General Work Rules	Instruction	Policy Requirements	All	X		
006	Safety Committees	Instruction	Existence of Safety Committees	All	X		
006	Safety Committees	Instruction	Safety Committee Policy	Committee Members	X		
007	Purchasing Procedures	Instruction	Purchasing Procedures	Authorized Buyers	X		
008	Workman's Compensation	Instruction	Workman's Compensation	All	X		
009	First Aid	Instruction	First Aid By Authorized Personnel	All	X		
009	First Aid	Training	CPR	Designated Responders; Confined Space Entrants, Attendants and Supervisors	X	X	
009	First Aid	Training	First Aid	Designated Responders; Confined Space Entrants, Attendants and Supervisors	X		At least every 3 years
010	Office Safety	Instruction	Office Safety	All Administrative Personnel	X		
011	Computer Work Stations	Instruction	Policy Content	Computer Users	X		
012	Tools and Equipment	Instruction	Policy Content	Tools Users	X		
013	Fire Safety & Flammable	Instruction	Policy Content	All	X		
013	Fire Safety & Flammable	Instruction	Fire Extinguisher Use	All	X	X	
014	Materials Handling	Instruction	Policy Content	All	X		
015	Construction & Traffic Safety	Instruction	Policy Content	Public Works, Parks and Recreation, Facilities	X		
016	Ladders and Scaffolding	Instruction	Policy Content	Public Works, Parks and Recreation, Facilities	X		
017	Welding and Cutting	Training	Welding and Cutting	Welders and Cutters	X		
018	Hazard Communication	Training	MSDS, Labels, Hazard Communication	All	X		
019	Control of Hazardous Energy	Training	LOTO Procedures and Hazard Control	Authorized Employees	X	X	
019	Control of Hazardous Energy	Instruction	Purpose and Use of LOTO Policy	All	X		
020	Compressed Gases	Instruction	Gas Cylinder Safety	Users of Cylinders	X		Recently every 3 years
021	Powered Industrial Trucks	Training	Driver Recertification	Truck Operators	X		Special Requirements
022	Pesticides	Training	Pesticides	Pesticides	X		
023	Trenching and Excavating	Training	Trenching and Excavating	Trenching and Excavating	X		
024	Fall Protection	Training	Fall Protection	Fall Protection	X		
025	Electrical Safety	Training	Safe Work Practices	Working > 50 Volts	X		
025	Electrical Safety	Instruction	Safe Work Practices	General Electrical Safety	X		
026	Bloodborne Pathogens	Training	Protective Measures	Pathogenic Contact or First Aid Responders and Confined Space Employees	X	X	
026	Bloodborne Pathogens	Instruction	Only Authorized Employees Can Perform First Aid	All Employees	X		
027	Hearing Conservation	Training	Effects of Noise/Hearing Protection	Employees Exposed To >85 decibels	X	X	
027	Hearing Conservation	Medical	Medical Evaluation - Audiogram	Employees Exposed To >85 decibels	X	X	
028	Emergency Plan	Training	Emergency Procedures	All	X		
029	Protective Equipment	Training	Use, Care, Donning and Cleaning	Required To Wear PPE	X		
030	Respiratory Protection	Training	Proper Use of Respirators	Required Respirator Wearer	X	X	
030	Respiratory Protection	Medical	Medical Evaluation - Lung Function	Required Respirator Wearer	X		One Time Requirement
030	Respiratory Protection	Technical	Fit Testing	Required Respirator Wearer	X	X	
031	Confined Spaces	Training	Confined Space Entry Procedures	Authorized Entrants, Attendants and Supervisors	X		
032	Chemical Hygiene Plan	Training	Safe Use of Chemicals & SOPs	Medical Examiner, Department of Health Employees	X		
033	Communicable Diseases	Instruction	Working With Diseased Persons	All	X		
034	Vehicle Operations	Instruction	Defensive Driving / Driver Perception, Orientation and Examination	Operators of County Owned Vehicles	X		
034	Vehicle Operations	Instruction	Training and Maintenance of Vehicles	Off-Road Vehicles	X		
034	Vehicle Operations	Instruction	Operation	Construction Equipment Operators	X		
035	Asbestos Control	Training	Asbestos Safety	Facilities For Pre-1980 Buildings	X		
036	Lead Control	Training	Lead Safety	Shooting Range Facilities Personnel	X	X	



Appendix No.

D

Appendix Name:

Miscellaneous Forms

Control Date:

08/2006

Voluntary Respirator Information Sheet
PPE Hazard Assessment and Certification Form
Powered Industrial Truck Daily Inspection Checklist
Powered Industrial Truck Driver Evaluation Form
Welding and Burning Permit (Hot Work Permit)
Confined Space Entry Permit
Bloodborne Exposure Form
Hepatitis B Vaccination Declination Form
Lockout Procedure Form
Accident / Injury Report
Worker's Compensation Claim Form
County Accident Scene Procedures
Vehicle Accident Investigation Report
Guide to Determining Accident Preventability
Contractor Safety Checklist



Appendix D to Sec. 1910.134 (Mandatory) Information for Employees Using Respirators When Not Required Under the Standard

Respirators are an effective method of protection against designated hazards when properly selected and worn. Respirator use is encouraged, even when exposures are below the exposure limit, to provide an additional level of comfort and protection for workers. However, if a respirator is used improperly or not kept clean, the respirator itself can become a hazard to the worker. Sometimes, workers may wear respirators to avoid exposures to hazards, even if the amount of hazardous substance does not exceed the limits set by OSHA standards. If your employer provides respirators for your voluntary use, or if you provide your own respirator, you need to take certain precautions to be sure that the respirator itself does not present a hazard.

You should do the following:

1. Read and heed all instructions provided by the manufacturer on use, maintenance, cleaning and care, and warnings regarding the respirators limitations.
2. Choose respirators certified for use to protect against the contaminant of concern. NIOSH, the National Institute for Occupational Safety and Health of the U.S. Department of Health and Human Services, certifies respirators. A label or statement of certification should appear on the respirator or respirator packaging. It will tell you what the respirator is designed for and how much it will protect you.
3. Do not wear your respirator into atmospheres containing contaminants for which your respirator is not designed to protect against. For example, a respirator designed to filter dust particles will not protect you against gases, vapors, or very small solid particles of fumes or smoke.
4. Keep track of your respirator so that you do not mistakenly use someone else's respirator.

[63 FR 1152, Jan. 8, 1998; 63 FR 20098, April 23, 1998]

Employee Signature

Date



Certification of Hazard Assessment Form

This form may be used to certify (document in writing) your hazard assessment. Keep it on permanent file in the Safety Binder. The hazard assessment is accomplished by surveying the workplace to determine where physical or health hazards are present or likely to be present which necessitate the use of personal protective equipment (PPE). Any additional or unique hazards should be added to this list of common sources and hazards. By signing below, the "Lead Person" conducting the hazard assessment certifies that the assessment has been completed as described.

PERFORMED BY: _____ <div style="text-align: center; font-size: small;">Lead Person's Name & Title</div> DATE: _____ <div style="text-align: center; font-size: small;">Certifying Signature</div>	<input type="checkbox"/> Single employee's job description: <div style="display: flex; justify-content: space-between; margin-top: 10px;"> _____ _____ </div> <div style="display: flex; justify-content: space-between; font-size: small;"> Employee Name Job Title </div> <input type="checkbox"/> Job description for a class of employees: <div style="text-align: center; margin-top: 10px; font-size: small;">Working Title of Positions</div>		
<input type="checkbox"/> NONE - Hazards requiring personal protective equipment are not present or likely to be present.			
SOURCE	ASSESSMENT OF HAZARD	PPE REQUIRED	COMMENTS
<input type="checkbox"/> Use or handling of: <input type="checkbox"/> Chemicals <input type="checkbox"/> Biological agents, human blood, OPIM <input type="checkbox"/> Radioactive materials	Eye or face injury <input type="checkbox"/> Impact from flying particles <input type="checkbox"/> Chemical splash in eyes <input type="checkbox"/> Facial skin chemical contact <input type="checkbox"/> Nose/mouth contact with blood/OPIM Body/skin/hand contact <input type="checkbox"/> Biological agents <input type="checkbox"/> Sharps <input type="checkbox"/> Radioactive materials <input type="checkbox"/> Chemicals <input type="checkbox"/> Hot or cold objects	<input type="checkbox"/> Safety glasses <input type="checkbox"/> With side shields <input type="checkbox"/> Safety goggles <input type="checkbox"/> Chemical splash goggles <input type="checkbox"/> Face shield <input type="checkbox"/> Face mask for blood/OPIM only <input type="checkbox"/> Other _____	
<input type="checkbox"/> Operations generating airborne fiber, dust, fume, mist, or vapor	<input type="checkbox"/> Respiratory: inhalation exposure above exposure standards	Respirator <input type="checkbox"/> Filter or Cartridge <input type="checkbox"/> SCBA or air line <input type="checkbox"/> Voluntary Use of Dust Mask	
<input type="checkbox"/> High noise levels from equipment or operation	<input type="checkbox"/> Hearing: noise exposure above 85 decibels.	<input type="checkbox"/> Muff <input type="checkbox"/> Plugs <input type="checkbox"/> Other _____	
<input type="checkbox"/> Non-ionizing radiation sources <input type="checkbox"/> Lasers <input type="checkbox"/> Infrared <input type="checkbox"/> Welding <input type="checkbox"/> Ultraviolet	Radiation burns to: <input type="checkbox"/> Eyes <input type="checkbox"/> Body <input type="checkbox"/> Skin	<input type="checkbox"/> Shaded safety glasses <input type="checkbox"/> With side shields <input type="checkbox"/> Shaded safety goggles <input type="checkbox"/> Welding helmet <input type="checkbox"/> Protective clothing (welding leathers, etc.) <input type="checkbox"/> Barriers, shields <input type="checkbox"/> Other _____	
<input type="checkbox"/> General safety: physical hazards from equipment, process, or material	<input type="checkbox"/> Foot injury: equipment or object that can fall or roll onto feet <input type="checkbox"/> Impact or penetration to eye, face, head, body, or soles of feet <input type="checkbox"/> Electrical contact <input type="checkbox"/> Thermal: extreme heat or cold	<input type="checkbox"/> Safety shoes <input type="checkbox"/> Other _____ <input type="checkbox"/> Shaded safety glasses <input type="checkbox"/> With side shields <input type="checkbox"/> Shaded safety goggles <input type="checkbox"/> Welding helmet <input type="checkbox"/> Protective clothing (welding leathers, etc.) <input type="checkbox"/> Barriers, shields <input type="checkbox"/> Other _____ <input type="checkbox"/> Thermal gloves <input type="checkbox"/> Face shields <input type="checkbox"/> Thermal clothing <input type="checkbox"/> Safety glasses <input type="checkbox"/> Barriers, shields <input type="checkbox"/> Other _____	
<input type="checkbox"/> Other (specify): _____ _____ _____			



Powered Industrial Truck Daily Inspection Checklist

Forklift:	Date:	Operator:	Pass/Fail:
Comments:			

Pre-Shift Visual Inspection

- ☐ Manufacturer's data plate is clean and readable, especially rated capacity diagram.
- ☐ Make sure there is no distortion and no cracks in forks.
- ☐ Check lift chain for equal tension, no broken pins and no sign of excessive wear.
- ☐ Look for loose or broken bolts and cracks on the overhead guard and backrest extension.
- ☐ Inspect the tilt cylinders for loose lock nuts and fluid leaks.
- ☐ See if there are any leaks of oil, coolant or fuel underneath the forklift.
- ☐ Check the levels for the brake, engine oil, and hydraulic tank and coolant system.
- ☐ Check tires for cracks and signs of wear (and air pressure, if applicable).
- ☐ Start the lift truck and make sure the gauges give proper readings.
- ☐ Test the horn.
- ☐ Test the parking brakes.
- ☐ Make sure the steering wheel has the right amount of tension and free play.
- ☐ Mast and forks should raise, lower and tilt smoothly.
- ☐ Check to make sure the clutch engages properly.
- ☐ Hold the foot brake down for 10 seconds. There should be no noticeable drift in the pedal pressure.
- ☐ Periodically clean the air filter. Most air filters have a service indicator with a clear window, which displays a color code (green or red) that shows its condition. Clean and service or replace the filter when the indicator shows a red color.
- ☐ Check the exhaust system for leaks, loose bolts, nuts and missing parts.
- ☐ Check the injectors for loose connections, unsecured mountings, missing bolts, nuts and for leaks.
- ☐ Check to be sure transmission fluid level is between the "full" and "add" marks.
- ☐ If the forklift truck has a fire extinguisher, make sure it is fully charged and properly mounted.

Defective brakes, controls, tires, lights, power supply, load-engaging mechanism, lift system, steering, and signal equipment must be repaired before a forklift is allowed to go into service.

Signature: _____



COUNTY OF KENOSHA

PERFORMANCE EVALUATION FOR POWERED INDUSTRIAL TRUCK (Fork Lift) OPERATORS

EMPLOYEE/OPERATOR: _____ JOB TITLE: _____

DATE OF INITIAL TRAINING: _____

DATE EVALUATION BEGAN: _____

DATE EVALTION WAS COMPLETED: _____

EVALUATOR NAME: _____ JOB TITLE: _____

Refresher training and evaluation

Refresher training, including an evaluation of the effectiveness of that training shall be conducted to ensure that the operator has the knowledge and skills needed to operate the powered industrial truck safely.

Refresher training in relevant topics shall be provided to the operator when:

- The operator has been observed to operate the vehicle in an unsafe manner;
- The operator has been involved in an accident or near-miss incident;
- The operator has received an evaluation that reveals that the operator is not operating the truck safely;
- The operator is assigned to drive a different type of truck; or
- A condition in the workplace changes in a manner that could affect safe operation of the truck.

An evaluation of each powered industrial truck operator's performance shall be conducted at least once every three years.

Avoidance of duplicative training

If an operator has previously received training, and such training is appropriate to the truck and working conditions encountered, additional training in that topic is not required if the operator has been evaluated and found competent to operate the truck safely.

EVALUATION

The Evaluator will check the PASS box next to each criteria listed below when the employee has successfully demonstrated competence in the particular area. If the employee is not successful in a particular area, the Evaluator will provide training as necessary and reevaluate until the employee operator is deemed competent. The Evaluator will conduct this evaluation through a combination of daily observations and/or planned performance based tests. The Evaluator will indicate if refresher training was provided by circling Y for Yes or N for No for each criteria.



PASS

- ☐ 1. Shows familiarity with truck controls. Additional Training Provided: Y / N (Circle one)
- ☐ 2. Gave proper signals when turning. Additional Training Provided: Y / N (Circle one)
- ☐ 3. Slowed down at intersections. Additional Training Provided: Y / N (Circle one)
- ☐ 4. Sounded horn at intersections. Additional Training Provided: Y / N (Circle one)
- ☐ 5. Obeyed signs. Additional Training Provided: Y / N (Circle one)
- ☐ 6. Kept a clear view of direction of travel. Additional Training Provided: Y / N (Circle one)
- ☐ 7. Turned corners correctly - was aware of rear end swing. Additional Training Provided: Y / N (Circle one)
- ☐ 8. Yielded to pedestrians. Additional Training Provided: Y / N (Circle one)
- ☐ 9. Drove under control and within proper traffic aisles. Additional Training Provided: Y / N (Circle one)
- ☐ 10. Approached load properly. Additional Training Provided: Y / N (Circle one)
- ☐ 11. Lifted load properly. Additional Training Provided: Y / N (Circle one)
- ☐ 12. Maneuvered properly. Additional Training Provided: Y / N (Circle one)
- ☐ 13. Traveled with load at proper height. Additional Training Provided: Y / N (Circle one)
- ☐ 14. Lowered load smoothly/slowly. Additional Training Provided: Y / N (Circle one)
- ☐ 15. Stops smoothly/completely. Additional Training Provided: Y / N (Circle one)
- ☐ 16. Load balanced properly. Additional Training Provided: Y / N (Circle one)
- ☐ 17. Forks under load all the way. Additional Training Provided: Y / N (Circle one)
- ☐ 18. Carried parts/stock in approved containers. Additional Training Provided: Y / N (Circle one)
- ☐ 19. Checked bridge plates/ramps. Additional Training Provided: Y / N (Circle one)
- ☐ 20. Did place loads within marked area. Additional Training Provided: Y / N (Circle one)
- ☐ 21. Did stack loads evenly and neatly. Additional Training Provided: Y / N (Circle one)
- ☐ 22. Did drive backward when required. Additional Training Provided: Y / N (Circle one)
- ☐ 23. Did check load weights. Additional Training Provided: Y / N (Circle one)
- ☐ 24. Did place forks on the floor when parked, controls neutralized, brake on set, power off. Additional Training Provided: Y / N (Circle one)
- ☐ 25. Followed proper instructions for maintenance - checked both at beginning and end. Additional Training Provided: Y / N (Circle one)

Certification

Kenosha County shall certify that each operator has been trained and evaluated. The certification shall include the name of the operator, the date of the training, the date of the evaluation, and the identity of the person(s) performing the training or evaluation. This completed evaluation form signed by the Evaluator certifies that the employee operator has been trained and evaluated.

I certify the above named employee/operator has satisfactorily demonstrated the knowledge and skills needed to safely operate the powered industrial truck(s) used in the performance of his/her job.

Evaluator Signature

Date of Certification



WELDING and BURNING PERMIT

(Hot work is not permitted unless this card is approved and posted in work area.)

Date (of work) _____, 19____ Building _____

Dept. _____ Process _____

WORK TO BE DONE _____

NAME OF PERSON PERFORMING WORK _____

SPECIAL PRECAUTIONS _____

FIRE WATCH ASSIGNED? _____

The location where work is to be done has been examined by me, the necessary precautions taken and permission is granted for this work.

PERMIT EXPIRES _____

SIGNED _____
(Supervisor responsible for work authorization)

TIME STARTED _____ COMPLETED _____

(Circle all that apply)

Sprinklers in service. Cutting and welding equipment in good condition.

Floor swept clean. Combustibles & flammables removed from area.

Heat conduction hazard – Fire-Watcher assigned. Ducts shut down.

Holes, openings or drains closed or protected.

Non-combustible covers used to protect nearby combustibles.

Containers, tanks, ducts, etc. cleaned and purged of flammables and toxics

ABC extinguishers immediately available and charged.

FINAL CHECKUP (where fire watch is required)

Work area and all adjacent areas where sparks might have spread were inspected for at least 30 minutes after the work was completed and no fire conditions were noted.

Employee Signature _____

Return completed permit to supervisor for file record

CONFINED SPACE ENTRY PERMIT

PERMIT MUST BE POSTED AT ENTRY POINT WHILE OCCUPIED

Permit Space To Be Entered: *(Fill out completely)*

Date: _____

- 1) Building _____
2) Entrant _____
3) Space To Be Entered _____
4) Work To Be Performed _____



Hazards Associated With Confined Space Checked Above: *(Check all that apply)*

- ☐ Mechanical Hazards ☐ Slip & Fall ☐ Electrical Shock ☐ Acid/Caustic/Steam
☐ Engulfment (risk of being engulfed by liquid or powder) ☐ Configuration (risk of being trapped)
☐ Welding/Cutting/Brazing Activities ☐ Grinding ☐ Painting/Coating Activities

Preparations Made To Eliminate Risks Involved With Entry: *(Check all that apply)*

- ☐ Supervisor Notified ☐ Isolate Valve (Lock-out) ☐ Electrical Lock-Out ☐ Cleaned, Drained
☐ Ventilation ☐ Entrant Aware of Hazards ☐ Secure Area (traffic cones, vertical fencing, caution tape only)
☐ Procedures Reviewed With Employees ☐ Harness/Retrieval Equipment Utilized ☐ Communication
☐ Burn Permit

Atmospheric Testing: *(Entry Not Allowed if Values Are Not Within Specified Safe Range)*

Time (enter time & data every 60 min.) _____ _____ _____ _____
Oxygen (19.5% - 23.5%) _____ _____ _____ _____
Flammability (less than 10%) _____ _____ _____ _____
Carbon Monoxide (less than 35 ppm) _____ _____ _____ _____
Person Conducting Monitoring (Print Name): _____

Attendant and Rescue:

Attendant(s): (Print Name) _____
Attendant Method of Communication with Entrant (describe): _____
Certification That Wearing of Harness or Wristlets Present a Greater Danger To Entrant And is Therefore Not Required: (Entry Supervisor Signature Only): _____

APPROVED BY (Signature): _____

PERMIT EXPIRES AT _____ ON _____

POST AT ENTRY TO CONFINED SPACE

Approved 06/2005



County of Kenosha
EXPOSURE TO BLOOD – INCIDENT INVESTIGATION FORM

Name of exposed Employee: _____

Employee's Job Title: _____ Bldg/Location: _____

Date of Incident: _____ Time of Incident: _____

Description of the employee's duties as related to the incident: _____

What Potentially Infectious Materials were involved?

Type (i.e. blood, vomit, or other): _____

Source (individual or location of blood): _____

Possible Route of entry to exposed employee (i.e. eyes, nose, mouth, open cuts, etc.): _____

What were the Circumstances (what was occurring at the time of the exposure?): _____

What caused the Exposure? (Emergency first aid, human bite, fight, accident, etc.) Specifically identify any object(s) that may have been involved): _____

What Personal Protective Equipment (PPE) was the employee wearing (if PPE was not being worn - state NONE): _____

Recommendations for avoiding repetition of incident: _____

Report Submitted by: _____

Name & Title

Date

Send Copy to: Risk Manager – Department of Personnel



**HEPATITIS B VACCINE DECLINATION
(MANDATORY PER CFR 1910.1030)**

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring Hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with Hepatitis B vaccine, at no charge to myself at the specified clinic contracted by the County of Kenosha. However, I **decline** Hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with Hepatitis B vaccine, I can receive the vaccination series at no charge to me at the designated clinic.

Signature

Date

Please PRINT Your FULL Name

AND

Social Security Number or Employee ID Number

Signed forms must be sent to: Risk Manager – Department of Personnel



BUILDING:	
EQUIPMENT LOCATION:	
EQUIPMENT TYPE & ID:	
PROCEDURES APPROVED BY:	
PREPARATION DATE:	

LOCKOUT PROCEDURE SHEET

Implementation of the lockout procedures outlined below must be completed in sequence to assure the control of hazardous energies for the above-listed equipment, such that repair or maintenance tasks can be completed safely. **Under no circumstances shall any repair or maintenance activities be undertaken without following the specified procedures!**

Confined Space	<input type="checkbox"/>	Yes	Special PPE Needed	<input type="checkbox"/>	Yes		
	<input type="checkbox"/>	No		<input type="checkbox"/>	No		
ENERGY SOURCES REQUIRING LOCKOUT							
<input type="checkbox"/>	Electrical	<input type="checkbox"/>	Water	<input type="checkbox"/>	Hydraulic	<input type="checkbox"/>	Mechanical
<input type="checkbox"/>	Nat. Gas	<input type="checkbox"/>	Thermal Steam/Water	<input type="checkbox"/>	Pneumatic	<input type="checkbox"/>	Gravity

	ACTION	COMPONENT	LOCKOUT PROCEDURE
<input type="checkbox"/>	NOTIFY		
<input type="checkbox"/>	PREPARE		
<input type="checkbox"/>	SHUTDOWN		
<input type="checkbox"/>	ISOLATE		
<input type="checkbox"/>	LOCKOUT		
<input type="checkbox"/>	RELIEVE		
<input type="checkbox"/>	VERIFY		



COUNTY OF KENOSHA

Vehicle Accident Scene Procedures

Immediately following an accident there are several things that you should do, as well as things you should not do. Conducting yourself in a professional manner, and following the procedures below, may help prevent another accident from occurring, will aid in minimizing damages, and will assist the County and Insurance Company in documenting what actually happened.

1.0 Secure the Scene

- Stop immediately, and remain at the scene until the authorities give you permission to leave.
- Don't move your vehicle unless you have to for safety reasons. Location and position of the vehicle can help determine the cause of the event.
- Before exiting your vehicle: Turn the engine off; turn the emergency flashers on; and set the parking brake to ensure your vehicle doesn't roll.
- If your vehicle is equipped with reflective triangles or other warning devices place them appropriately.

2.0 Lend Assistance to the Injured

- Send for help.
- If you are able, check on the injured and render immediate assistance. Don't move anyone who is injured unless it is a life-threatening situation. Only give what first aid you have been trained to give by a qualified agency like the American Red Cross or hospital. Do what you can do to help, but don't talk about the collision or events leading up to it.

3.0 Information You May & May Not Share With Others

- When police arrive, cooperate fully and follow all their instructions. Answer their questions honestly, but avoid speculating on cause or guilt, especially your own. Don't offer any more information than asked. Don't offer opinions and don't ad lib.
- Notify your supervisor as soon as time permits. If the accident is serious in nature, your supervisor should contact the **Risk Manager** immediately.
- You may give your name, address, employer name and address, vehicle license number, your driver's license number, and information off the insurance identification card in your glove box to the police and other party involved. If anyone else asks for details, be polite, but firmly refuse to discuss the accident with them.
- You may only discuss details of the accident with the investigating police officer, your supervisor or other County official, and the County's insurance carrier. Don't hesitate to ask them for identification.
- Don't apologize for the accident.
- Don't argue cause.
- Don't offer to pay medical expenses.



COUNTY OF KENOSHA

- Don't admit responsibility
- Don't in days or weeks following the accident discuss details with strangers.
- Driver reprimands at the scene are not permissible. If necessary, reprimands should take place in a confidential environment.

4.0 Secure Driver/Witness Information & Statements

- Gather information. Write down as much information as you can right away. Information documented at the scene is significantly more accurate than recalled at a later time.

5.0 Inspect and Verify the Condition of the Premises

- Inspect the accident scene carefully. Details are essential. Vehicle Accident Investigation Report to record conditions at the scene, as well as other accident details.
- Make a sketch of the scene before any vehicles are moved. Don't worry about drawing a vehicle that looks realistic. The important thing is to show the position of the vehicles as they approached the scene and where they were following the collision.
- Include your description of what occurred. Your statement should be simple, to the point, and purely factual.

6.0 Complete Forms As Soon As Possible

- If you did not have time to fully complete the Kenosha County Vehicle Accident Investigation Report while at the scene, do so as soon as possible.
- Get the completed form to your supervisor as soon as possible.
- Your supervisor will complete a portion of the form and will forward it to the appropriate reviewing committee, department head or Risk Manager.



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VEHICLE ACCIDENT INVESTIGATION REPORT

EMPLOYEE: Complete sections below, sign at bottom, and turn in to your Supervisor.

DRIVER (Employee):

DATE of Accident:

Department / Shop:

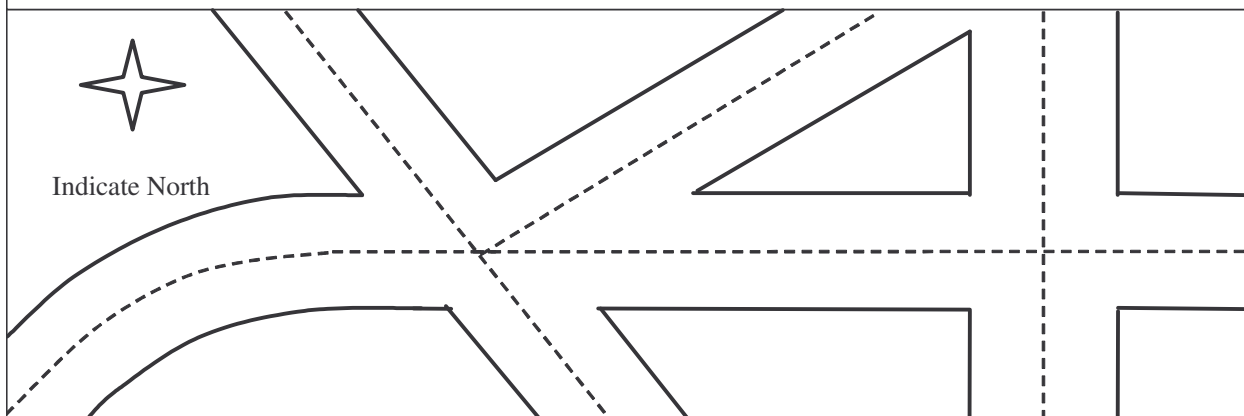
TIME of Accident:

VEHICLE ID (plate/VIN/MPS truck #):

LOCATION OF ACCIDENT:

Identify Street names, addresses, block numbers, landmarks, etc. to pinpoint the accident site:

Use the diagram below to sketch the scene of your accident. Show the direction of vehicles involved – point of collision – path of vehicles after collision – stop signs and traffic signals – position of pedestrians and inanimate objects, etc.



CONDITIONS (circle answers):

<u>ROAD CHARACTER</u>	<u>ROAD SURFACE</u>	<u>ROAD EFFECTS</u>	<u>TRAFFIC CONTROL</u>	<u>LIGHT</u>	<u>WEATHER</u>
Straight Road	Dry	Defective shoulders	Stop sign	Daylight	Clear
Curve	Wet	Holes, ruts, bumps	Stop-and-go signal	Dusk	Raining
Level	Muddy	Loose material on surface	Officer or flagman	Dawn	Snowing
On Grade	Snowy	Road under construction	Barricades	Darkness	Fog
Hillcrest	Icy	No defects	Railroad automatic signal	Snow glare	Other _____
			Uncontrolled		_____

DESCRIPTION OF ACCIDENT – DRIVER STATEMENT

Describe what happened, including damage to vehicles & injuries (attach additional sheet if more space is needed):

Were the Police Notified of this Accident? YES / NO (circle one).

Did you receive a traffic citation? YES / NO (circle one). Other driver issued a citation? YES / NO / N/A (circle one).

Driver (Employee) Signature:

Date:



KENOSHA COUNTY

VEHICLE ACCIDENT INVESTIGATION REPORT

SUPERVISOR: Complete sections below, sign, and forward to the Fleet Safety Committee and Risk Manager.

Supervisor:

Title:

Department / Shop:

Date Reported to you:

SUPERVISOR'S ANALYSIS OF ACCIDENT

Interview the driver and any employee witnesses, etc. regarding the specifics of this accident. Inspect damage to vehicle(s) and other objects as necessary. Describe your findings below (attach additional sheet if more space is needed):

In Your Opinion, was this accident PREVENTABLE? YES / NO (circle one)

Supervisor Signature:

Date:

FLEET SAFETY COMMITTEE: Use pre-established criteria in analyzing and determining the preventability of this accident. Document necessary actions and recommendations, then sign and date below.

The Fleet Safety Committee has determined that this accident was: PREVENTABLE / NON-PREVENTABLE

ACTIONS NECESSARY:

Return this completed form to the employee's supervisor. The Supervisor/Manager shall implement the above action.

FLEET SAFETY COMMITTEE MEMBERS SIGN BELOW

Signature

Date

Signature

Date

Signature

Date

Signature

Date

Signature

Date

Signature

Date

Signature

Date

Signature

Date



COUNTY OF KENOSHA

GUIDE TO DETERMINING ACCIDENT PREVENTABILITY

1.0 Standard of Performance

Kenosha County adopts a very conservative position regarding preventability, and assumes (as do the National Standards) that most incidents are preventable. However, we also operate on the premise that each case must be judged on its own merit, and that reasonableness and fairness must be practiced when deciding the responsibility of an accident.

Proper assessment of preventability relies on the active involvement and sound judgment of those involved in determining preventability. Most important is that committee members, supervisors, and other management personnel understand and accept the premise that a determination of preventability does not mean simply assessing 'blame' or 'fault', but is rather a process of determining what actually happened and why, with the primary purpose of trying to prevent it from happening again.

The following paragraphs will be used as a guide in determining the preventability of accidents. They highlight the most frequent occurrences based on past decisions of Accident Review Committees of the National Safety Council, Commercial Vehicle Section.

2.0 Personal Vehicles and Personal Use of Employer Vehicles

If an employee operates his/her own vehicle on official company business, accidents sustained by him/her must be judged according to these rules. However, accidents involving drivers operating their own vehicles during off-duty hours do not fall under the authority of this policy.

Accidents involving County vehicles assigned to employees for business and/or personal use when operated by the employee, whether for business use or not, shall be reviewed by the appropriate committee, director, or Risk Manager.

3.0 Accidents Involving More Than One of Our Drivers

When two or more vehicles of the County fleet are involved in the same accident, each driver may be charged with a preventable accident regardless of which one was primarily responsible for the occurrence.

Although two or more employees may be riding in the same vehicle, a preventable accident may only be charged against the person operating the vehicle.



COUNTY OF KENOSHA

4.0 Witness Statements

Each driver involved in an accident usually contributes to it in some degree. If the "other driver" admits he/she was at fault, it usually only means that he/she sees how he/she contributed to the situation. Admission of being at fault by the "other driver", a record of the "other driver" being cited for a traffic violation or witness or police statements of exoneration for our driver are not, in themselves, conclusive evidence to judge an accident "non-preventable." It is likely that our driver contributed to the situation in some manner.

Statements of exoneration are generally based on legal responsibility without respect to the definition of preventability. Consequently, a careful study must be made of all conditions to determine how the employee in question contributed to the situation by acts of omission or commission.

Unless thorough investigation indicates that the employee in question could not have avoided involvement, by reasonable defensive driving practice, the following types of accidents will be regarded as preventable.

5.0 Intersections

It is the responsibility of our drivers to approach, enter and cross intersections prepared to avoid accidents that might occur through the action of other drivers. Complex traffic movement, blind intersections, or failure of the "other driver" to conform to law or traffic control devices will not automatically discharge an accident as "non-preventable." Intersection accidents are preventable even though the driver has not violated traffic regulations. His/her failure to take precautionary measures prior to entering the intersections are factors to be studied in making a decision. When our driver crosses an intersection and the obvious actions of the "other driver" indicated possible involvement either by reason of his excess speed, crossing his lane in turning, or coming from behind a blind spot, the decision based on such entrapment should be preventable.

6.0 Backing

Practically all-backing accidents are preventable. A driver is not relieved of his/her responsibility to back safely when a guide is involved in the maneuver. A guide cannot control the movement of the vehicle; therefore, a driver must check all clearances for himself/herself.



COUNTY OF KENOSHA

7.0 Front-End Collisions

Regardless of the abrupt or unexpected stop of the vehicle ahead, a driver can prevent front-end collisions by maintaining a safe following distance at all times. This includes being prepared for possible obstructions on the highway, either in plain view or hidden by the crest of a hill or the curve of a roadway. Overdriving headlights at night is a common cause of front-end collisions. Night speed should not be greater than that which will permit the vehicle to come to a stop within the forward distance illuminated by the vehicle's headlights.

8.0 Rear-End Collisions

Investigation often discloses that drivers risk being struck from behind by failing to maintain a margin of safety in his/her own following distance. Rear-end collisions preceded by a roll-back, an abrupt stop at a grade crossing, when a traffic signal changes, or when the driver fails to signal a turn at an intersection, should be charged preventable. Failure to signal intentions or to slow down gradually should be considered preventable.

9.0 Passing

Failure to pass safely indicates faulty judgment and the possible failure to consider one or more of the important factors a driver must observe before attempting the maneuver. Unusual actions of the driver being passed or of oncoming traffic might appear to exonerate a driver involved in a passing accident; however, the entire passing maneuver is voluntary and the driver's responsibility.

10.0 Being Passed

Sideswipes and cut-offs involving our driver while he/she is being passed are preventable when he/she fails to yield to the passing vehicle by slowing down or moving to the right where possible.

11.0 Lane Encroachment

A safe driver is rarely a victim of entrapment by another driver when changing lanes. Similarly, entrapment in merging traffic is an indication of unwillingness to yield to other vehicles or to wait for a break in traffic. Blind spots are not valid excuses for lane encroachment accidents. Drivers must make extra allowances to protect themselves in areas of limited sight distances.



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Squeeze plays causing involvement with parked cars, pillars, and other structures, can be prevented by dropping back when it is apparent that the other driver is forcing the issue or contesting a common portion of the road.

12.0 Grade Crossings

Collisions with fixed rail vehicles, such as trains, streetcars, etc., occurring at grade crossings, in traffic, in a rail yard, switch area, or on private property are the responsibilities of the driver to prevent. When a vehicle is parked across a rail siding, the driver must first determine if it is safe and permissible and, furthermore, must stand by in case conditions change by the movement of rail cars during the parking interval.

13.0 Opposing Vehicles

It is extremely important to check the action of our driver when involved in a head-on or sideswipe accident with a vehicle approaching from the opposite direction. Exact location of vehicles, prior to and at the point of impact, must be carefully verified. Even though an opposing vehicle enters our drivers' traffic lane, it may be possible for our driver to avoid the collision. For example, if the opposing vehicle was in a passing maneuver and our driver failed to slow down, stop, or move to the right to allow the vehicle to re-enter his own lane, he/she has failed to take action to prevent the occurrence. Failing to signal the opposing driver by flickering the headlights or sounding the horn should also be taken into account.

14.0 Turning

Turning movements, like passing maneuvers, require the most exacting care by our drivers. "Squeeze plays" at the left or right turns involving other vehicles, scooters, bicycles, or pedestrians are the responsibility of the driver making the turn. Failure to signal, to properly position the vehicle for the turn, to check the rearview mirrors, to check pedestrian lanes, or to take precautionary action from tip-offs from the other vehicle immediately preceding the incident. U-turns by our driver that result in a collision are preventable.

15.0 Pedestrians

Traffic regulations and court decisions generally favor the pedestrian hit by a moving vehicle. An unusual route of a pedestrian at mid-block or from between parked vehicles does not necessarily relieve our driver from taking precautions to prevent such accidents. Whether speed limits are posted or the area is placarded with warning signs, speed too fast for conditions may be involved.



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School zones, shopping areas, residential streets, and other areas with special pedestrian traffic must be traveled at reduced speeds equal to the particular situation. Bicycles, motor scooters and similar equipment are generally operated by young and inexperienced operators. The driver who fails to reduce his/her speed when this type of equipment is operated within his/her sight-distance has failed to take the necessary precautions to prevent an accident.

Keeping within posted speed limits is not taking the proper precaution when unusual conditions call for voluntary reduction of speed.

16.0 Weather

Adverse weather conditions are not a valid excuse for being involved in an accident. Rain, snow, fog, sleet, or icy pavement has never caused an accident. These conditions merely increase the hazards of driving. Failure to adjust driving to the prevailing weather conditions should be cause for deciding an accident preventable.

17.0 Alleys, Driveways, and Plant Entrances

Accidents involving traffic originating from alleys, driveways, plant entrances, and other special intersecting locations should be carefully analyzed to determine what measures the driver might have taken to avoid the occurrence. Failure to slow down, sound a warning or to yield to the other driver can be considered cause to judge such an accident preventable.

18.0 Fixed Objects

Collisions with fixed objects are preventable. They usually involve failure to check or properly judge clearances. New routes, strange delivery points, resurfaced pavements under viaducts, inclined entrances to docks, marquees projecting over traveled section of road, and similar situations are not, in themselves, valid reasons for excusing a driver from being involved. He/she must be constantly on the lookout for such conditions and make the necessary allowances.

19.0 Private Property

When a driver is expected to make deliveries at unusual locations, construction sites, etc., or on driveways not built to support heavy commercial vehicles, it is his/her responsibility to discuss the operation with the proper authorities and to obtain permission prior to entering the area.



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20.0 Parking

Rollaway accidents from a parked position normally should be classified preventable. This includes unauthorized entry into an unlocked and unattended vehicle, double parking, and failure to properly block wheels or to turn wheels toward the curb to prevent vehicle movement.

21.0 Mechanical Failure

Any accident caused by mechanical failure that reasonably could have been detected by the driver, but went unheeded should be judged preventable. It is the driver's responsibility to report unsafe vehicle conditions for repairs and to obtain immediate repairs where continued operation might result in an accident. When mechanical difficulties occur unexpectedly during a trip, and a driver upon discovery, fails to check with his supervisor for emergency instructions prior to an accident, the accident is preventable.

22.0 Non-Collision

Many accidents, such as overturning, jack-knifing, or running off the road, may result from emergency action by the driver to preclude being involved in a collision. Examination of his/her driving procedure prior to the incident may reveal speed too fast for conditions, or other factors. The driver's actions prior to involvement should be examined for possible errors or lack of defensive driving practice.

23.0 MISCELLANEOUS

Loose objects falling from the vehicle, loose chains, doors swinging open, etc., resulting in damage to other property are preventable when the driver's action or failure to secure them are evidenced. Cargo damage, resulting from unsafe vehicle operation, is preventable by drivers, including overhead bridge hits where only cargo is damaged.



Contractor Safety Checklist

Requirements:

Complete the following form and submit it to the Project Manager. Information obtained from this form will be held in confidence and not be distributed to third parties without the written consent of the Contractor, unless required by law or court order. Submittals must be complete and supporting documentation must be attached when indicated.

1. Description of the work to be performed on site including unique hazards likely to be encountered.

2. Contractor's on site safety point of contact.

3. Contractor's statement regarding this project's compliance with OSHA, EPA, Wisconsin Department of Commerce and Wisconsin Department of Natural Resources, environmental, safety and health program requirements.

4. Responsibilities of contractor's key personnel.

5. Type(s) of personal protective equipment required, under what circumstances it will be used, and how its use will be enforced.

6. *Safety training required for the tasks to be performed including certification and/or recertification where applicable.*

7. Emergency procedures defined including instruction on notification of incidents to the County.



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8. Methods to comply with the requirement for immediate reporting of accidents to the County.

9. Procedures for emergency actions to be taken to secure dangerous conditions, to protect personnel and security of work areas in the event of an accident or an act of nature.

10. Contractor has been provided with access to Material Safety Data Sheets and has provided copies of all MSDS documents for chemicals that will be used on this project. List MSDS documents below and attach copies.

Company Name: _____

Address: _____
(Street) (City) (State) (Zip Code)

Telephone No.: _____

Signature: _____