

# **Injury & Illness Prevention Plan**

## **Environmental Health & Safety/Risk Management**

Updated: 04/16/2024

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**ENVIRONMENTAL, HEALTH & SAFETY/RISK MANAGEMENT**  
**INJURY AND ILLNESS PREVENTION PROGRAM (IIPP)**

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**1.0 PURPOSE**

The purpose of the Injury and Illness Prevention Program (IIPP) at Palomar Community College District (PCCD) is to decrease the potential risk of disease, illness, injuries, and harmful exposures by protecting the health and safety of employees through training and heightened awareness. The Injury and Illness Prevention Plan in compliance with Cal- OSHA General Industry Safety Order 3203, effective July 1, 1991, is a written "safety" program designed to help staff and students maintain a safe and healthy working and learning environment.

**2.0 RESPONSIBILITIES**

The IIPP administrator, Superintendent/President Star Rivera-Lacy, Ph.D., (760) 744-1150, x7509, has the authority and responsibility for implementing the provisions of this program for PCCD.

All managers, supervisors and lead personnel are responsible for implementing and maintaining the IIPP in their work areas and for answering worker questions about the Program. A copy of this IIPP is available at the following locations:

EH&S/Risk Management Department:  
1140 West Mission Road  
San Marcos, CA 92069

Website:  
<https://www.palomar.edu/facilities/programs/>

**3.0 COMPLIANCE**

Management is responsible for ensuring that all safety and health policies and procedures are clearly communicated and understood by all employees. Supervisors and lead personnel are expected to enforce the rules fairly and uniformly.

All employees are responsible for using safe work practices, for following all directives, policies and procedures, and for assisting in maintaining a safe work environment.

**3.1 Policies**

The following is our system of ensuring that all workers comply with the rules and maintain a safe work environment:

- Informing workers of the provisions of our IIPP.
- Evaluating the safety performance of all workers.
- Recognizing employees who perform safe and healthy work practices. This recognition is accomplished by the following actions: making appropriate comments on performance evaluations, acknowledging their workplace contributions at safety meetings, and writing commendations or letters of recognition.
- Providing training to workers whose safety performance is deficient.

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**3.2 Non-Compliance**

The following outlines our disciplinary process for workers who fail to comply with safe and healthful work practices, identified as employee non-compliance. Employee non-compliance will be addressed by one or more of the following:

- An immediate discussion between the supervisor and the employee who is discovered working in an unsafe manner.
- Corrective safety training, and/or:
- Written disciplinary notice with information on the appropriate action.
- Appropriate disciplinary action, reporting to Human Resources.

**3.3 Authorities and Responsibilities****Superintendent/President**

The superintendent/president of PCCD has the ultimate authority and responsibility for the IIPP. They delegate this authority through the normal chain of command; to the vice presidents, deans, directors, department chairpersons, and to each Palomar College employee. Each employee is responsible for ensuring his or her safety.

**Administrators**

It is the responsibility of vice presidents, deans, directors, and managers to ensure that individuals under his or her management have authority to implement appropriate health and safety policies, practices, and programs. Administrators support health and safety programs and practices by ensuring that areas under their management are in compliance with health and safety policies.

**Supervisors**

Supervisors are responsible for protecting the health and safety of employees and students under their supervision:

- Supervisors implement district and department health and safety policies, practices, and programs ensuring that the work environment and equipment are safe and well maintained.
- Supervisors will investigate and report all accidents and near misses that occur.
- Supervisors will identify and correct hazardous conditions.
- Supervisors ensure that all employees receive and understand safety training so that they may perform their job duties safely.

**Employees and Student Workers**

- The most preventative measures lie in the ability of employees and student workers to perform their work safely by being informed of conditions affecting his or her health and safety. After participating in training programs provided by supervisors or instructors, employees and students are expected to perform their work in compliance with occupational safety and health standards and regulations that apply to their specific jobs, working in a

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- safe and efficient manner with regard for the safety of themselves and others.
- Employees and student workers are expected to use and maintain the required personal protective equipment and keep their work area neat and orderly.
  - All staff are required to immediately report all accidents, no matter how slight, to his or her supervisor.

#### **4.0 COMMUNICATION**

The following is our system of communication, designed to facilitate a continuous flow of two-way (management, supervision, and employees) safety and health information in a form that is readily understandable to and between all affected site personnel:

##### **4.1 Safety Meetings**

Our organization elects to use a labor/management safety and health committee meeting all the requirements of T8CCR 3203 (7)(c)(1) – (7) to comply with the communication requirements of subsection (a)(3) of T8CCR 3203.

The Safety and Security Committee meets the first Wednesday of the month over Teams from 1:30 p.m. - 2:30 p.m. The Committee examines the operation of the College with respect to safety and security. Areas considered by the Committee are: periodic safety inspections, general safety of facilities, inspection of hazardous materials and equipment, designation of dangerous areas, general laboratory safety, and all matters concerning risk management. California Code of Regulations, Title 8, Section 3203 requires all California employers to establish and maintain effective injury and illness prevention programs. These must be written and include elements of California Labor Code Section 6401.7. The Safety & Security Committee reports to the Finance & Administrative Services Planning Council and is chaired by the supervisor of Environmental Health & Safety.

##### **4.2 Workplace Hazard Reporting**

EH&S/Risk Management at PCCD provides a system for workers to inform management about workplace hazards. This is accommodated by administrators, supervisors, and employees who will report any hazardous conditions or activities noted: because of the monthly inspections as performed by the EH&S/Risk Management Department, and during daily routine operations. Hazards can be reported online at <https://www.palomar.edu/facilities/hazard-identification-form/> via the Hazard Identification Form\* or to the Manager of EH&S/Risk Management at ehs@palomar.edu or by calling 760-744-1150, extension 3677.

##### **4.3 Other Communications**

We recognize that open, two-way communication between management and employees on health and safety issues is essential to an injury-free, productive workplace. The following system of communication is designed to facilitate a continuous flow of safety and health information between management and employee in a form that is readily understandable and consists of the following items:

We will conduct new employee orientation including a discussion of safety and health policies and procedures, as well as our IIPP.

- An authorized instructor will conduct workplace safety and health training.
- Supervisors will conduct safety stand-downs to address any serious safety conditions.
- Posting and/or distributing safety information.

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**5.0 HAZARD ASSESSMENT**

It is Palomar Community College District (PCCD) policy that periodic inspections of work locations are conducted to identify, evaluate and correct unsafe conditions and work practices. The PCCD intent is to establish a program that will provide the foundation for a safe work environment.

1. All PCCD employees should conduct periodic inspections of assigned work locations according to the following schedule:
  - When new substances, processes, procedures or equipment which present potential new hazards are introduced into our workplace;
  - When new, previously unidentified hazards are recognized;
  - When occupational injuries and illnesses occur; and
  - Whenever workplace conditions warrant an inspection.
  - When we hire and/or reassign permanent or intermittent workers to processes, operations, or tasks for which a hazard evaluation has not been previously conducted; and
2. IF the work area inspection reveals an immediate safety hazard, THEN:
  - Take immediate action to establish control of the affected area to prevent any injuries;
  - Implement interim compensatory measures to minimize the safety hazard;
  - Contact necessary resources (e.g., Facilities, Environmental Health & Safety, Custodial Services, Supervisor etc.) to facilitate correcting or minimizing the safety hazard.

**6.0 ACCIDENT/EXPOSURE INVESTIGATIONS**

Investigation of workplace accidents, hazardous substance exposures and near-accidents will be done by PCCD Campus Police, and or the PCCD Environmental Health & Safety/Risk Management Department, and will include:

- Visiting the scene as soon as possible;
- Interviewing affected workers and witnesses;
- Examining the workplace for factors associated with the accident/exposure/near-accident;
- Determining the causes of the accident/exposure/near-accident;
- Taking corrective action to prevent the accident/exposure/near-accident from reoccurring; and
- Recording the findings and corrective actions taken on the attached OSHA Form 301.

**7.0 HAZARD CORRECTION**

Unsafe or unhealthy work conditions, practices or procedures at our work facilities shall be corrected in a timely manner based on the severity of the hazards, and according to the following procedures:

- When observed or discovered;
- When an imminent hazard exists which cannot be immediately abated without endangering employee(s) and/or property, we will remove all exposed workers from the area except those necessary to correct the existing condition. Workers necessary to correct the hazardous condition shall be provided with the necessary protection; and
- All such actions taken and the dates they are completed shall be documented on the attached Identified Hazards and Correction Record\*.

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**8.0 TRAINING AND INSTRUCTION**

All workers, including management, supervisors, and lead personnel shall have training and instruction on general and job-specific safety and health practices. Environmental, Health & Safety/Risk Management (EH&S/RM) has developed a procedure which establishes training requirements for initial and continuing training for district personnel. The procedure provides a systematic process and guidance for Palomar employees. The Safety Training Program can be found on the EH&S/RM webpage. Training and instruction shall be provided as follows:

- [Safety Training Program](#)
- To all new workers;
- To all workers given new job assignments for which training has not been previously provided;
- Whenever new substances, processes, procedures or equipment are introduced to the workplace and represent a new hazard;
- Whenever we become aware of a new or previously unrecognized hazard;
- To supervisors to familiarize them with the safety and health hazards to which workers under their immediate direction and control may be exposed; and
- To all workers with respect to hazards specific to each employee's job assignment.

*This training will include (but is not limited to):*

- Explanation of our IIPP, emergency action plan and fire prevention plan, and measures for reporting any unsafe conditions, work practices, injuries and when additional instruction is needed.
- Availability of toilet, hand-washing, and drinking water facilities.
- Provisions for medical services and first aid, including emergency procedures.
- Proper housekeeping, such as keeping stairways and isles clear, work areas neat and orderly, and promptly cleaning up spills.
- Prohibiting horseplay, scuffling, or other acts that adversely influence safety.
- Proper storage to prevent:
  - ✓ Stacking goods in an unstable manner.
  - ✓ Storing materials and goods against doors, exits, for extinguishing equipment and electrical panels.

*Where applicable our training may also include:*

- Prevention of musculoskeletal disorders, including proper lifting techniques.
- Use of appropriate clothing, including gloves, footwear, and personal protective equipment.
- Information about chemical hazards to which employees could be exposed and other hazard communication program information.
- Proper food and beverage storage to prevent them from becoming contaminated.

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**In addition, we provide specific instructions to all workers regarding hazards unique to their job assignment, to the extent that such information was not already covered in other training.**

## **9.0 RECORDKEEPING**

Our organization has taken the following steps to implement and maintain our IIPP:

Our organization has ten or more employees and keeps records as follows:

1. Records of scheduled and periodic inspections including the person(s) conducting the inspection, the workplace hazards (i.e., unsafe conditions and work practices that have been identified) and the action(s) taken to correct the identified unsafe conditions and work practices, are recorded on the Hazard Assessment Checklist\* and the Incident/Release Assessment Form\* and the EH&S/Risk Management Notification Form\*. These records are maintained for at least one (1) year.
2. Documentation of safety and health training for each worker, including the worker's name or other identifier, training dates, type(s) of training, and training providers are recorded and documented in the Palomar Professional Purposeful Development Portal (P<sup>3</sup>D). This documentation is maintained for at least one (1) year.

## **10.0 REFERENCES**

[Cal-OSHA General Industry Safety Order §3203 Injury and Illness Prevention Program](#)

[California Labor Code §6401.7](#)

[California Code of Regulations, Title 8, §3203](#)

SB-553: Workplace Violence Prevention Plan (WVPP)

[California Legislative Information: SB 553](#)

[Cal/OSHA Workplace Violence Prevention Guidance and Resources](#)

PCCD-X-1: EH&S/Risk Management Notification Requirements (Attachment 4)

## **11.0 DEFINITIONS**

**Cal/OSHA – California Occupational Safety and Health Administration** - The state agency that protects workers from safety hazards through regulations, safety programs, inspections, and consultative assistance.

**Administrator** – An employee responsible for the maintenance and supervision of the institution and separate from the faculty or academics, referring specifically to all vice presidents, deans, directors and managers.

**Supervisor** – Responsible for protecting the health and safety of employees and students under their supervision.

**Employee** – A person employed for wages or salary.



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**Student Worker** – A student enrolled at PCCD who is employed for wages or salary.

**Senate Bill** (SB) – California Legislative Senate Bill

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**ATTACHMENT 1****Facilities Department**  
**Environmental Health & Safety/Risk Management**  
**Hazard Identification Form**

The purpose of this form is to report potentially hazardous situations to the Environmental Health & Safety Department.

Please provide the following contact information:

Date:

Name:

Title:

Department:

Work Phone:

E-Mail:

Please describe the nature and location of the hazard:

Describe interim action that you took to mitigate the hazard, if any

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**ATTACHMENT 2****IDENTIFIED HAZARDS AND CORRECTION RECORD**

Date of Inspection: \_\_\_\_\_

Person Conducting Inspection: \_\_\_\_\_

UNSAFE CONDITION OR WORK PRACTICE	LOCATION	PRIORITY	PERSON ASSIGNED	CORRECTIVE ACTION TAKEN (DATE)

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#### ATTACHMENT 3

#### Hazard Assessment / Workplace Inspection Checklist

(Common Areas, Teaching Rooms, Libraries and Offices)

<b>Building</b>		<b>Room number(s) and name(s)</b>	
<b>Department/Faculty</b>			
<b>Inspection date</b>		<b>Date of report</b>	
<b>Inspection team</b>	<b>1</b>	<b>2</b>	<b>3</b>
<i>Minimum of two people:- Safety coordinator /Staff/Faculty/Manager /Union Representative</i>			

**Instructions:**

- This inspection form applies to areas such as; lecture theatres, laboratories, classrooms, libraries, offices, staff kitchens and common rooms, corridors and lobbies, or any other work area.
- If the item is not relevant for that particular area, write NA (Not Applicable) in the 'check' box.
- If there are no problems under a particular item, mark the 'check' box (ü).
- If there is a problem, put a cross in the 'check' box (X) and in 'Comments' a brief description what is wrong.
- If you do sort it out immediately, still describe the problem and what you did and mark the relevant box if further action is required.
- After the inspection, send the checklist to the Environmental Health & Safety Department.

Item		No Action <i>Green</i>	Action <i>Amber</i>	Urgent Action <i>Red</i>	Comments
<b>Slips Trips and Falls</b>					
1	Floors and stairs in good condition and have even surfaces (no cracks or holes)				
2	Carpeting is securely fitted, with no loose ends				
3	Area is generally tidy and the floor free of clutter				
4	Are spills cleaned up immediately by everyone?				
5	Do water machines/machinery leak?				
6	Are there any trailing leads that pose a trip hazard?				
7	Walkways, landings and corridors clear of obstructions and trip hazards (e.g. cables)				

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8	Are steps on stairs and stairways designed or provided with a slip-resistant surface?				
9	Are step risers on stairs uniform from top to bottom?				
10	Do stairwells have securely fixed handrails?				
11	Are stairway handrails located between 30 and 34 inches above the leading edge of stair treads?				
<b>Fire Safety</b>		<b>No Action</b> <i>Green</i>	<b>Action</b> <i>Amber</i>	<b>Urgent Action</b> <i>Red</i>	<b>Comments</b>
12	Fire doors and exits clearly marked, kept clear on both sides at all times, never left open and illuminated by a reliable light source				
13	Fire extinguishers present in marked locations and display a current inspection label/tag				
14	Emergency exit signs in place and show correct routes, with no conflicting signage				
15	Can final fire exit doors be opened from the inside (not padlocked)?				
16	Fire doors should NOT be wedged open				
17	Are doors, passageways or stairways that are neither exits nor access to exits, appropriately marked "NOT AN EXIT" or "STOREROOM" etc.?				
18	Is the emergency fire and evacuation procedure displayed next to call point(s)?				
19	Do exit doors open in the direction of exit travel?				
20	Have employees been instructed in the fire evacuation procedures in the event of an emergency?				
21	Are Personal Emergency Evacuation Plans in place for people with disabilities?				
22	Can fire doors open easily and close fully? Is the self-closer working correctly?				

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23	Are there "Floor monitors" identified to assist during emergencies on each floor/area?				
24	Does the building have a "Team Leader" identified to help assist during emergencies?				
25	Do kitchens contain a fire blanket?				
26	Is there at least a minimum of 18" clearance below fire sprinkler head deflectors?				
27	Are all exits kept free of obstructions?				
<b>Equipment</b>		<b>No Action</b> <i>Green</i>	<b>Action</b> <i>Amber</i>	<b>Urgent Action</b> <i>Red</i>	<b>Comments</b>
28	Projection screens/projectors are securely fixed to the wall/ceiling				
29	All power sockets and switches are in good condition (not loose or damaged)				
30	Is hearing protection provided and used when noise levels exceed NIOSH noise standards (85 DBA)?				
31	Extension leads are not overloaded or daisy chained				
32	Furniture is stable and undamaged				
33	Equipment (stepladders, kick stools) used to access equipment stored correctly				
34	Is equipment (at height) correctly tagged and displays a current inspection date?				
35	All office workstations have been assessed by the user				

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36	Are large filing cabinets and bookshelves secured/bracketed to the wall?				
37	Manual handling aids (trolleys, sack trucks etc.) are in good condition, inspected and labelled				
38	Have risk assessments been done and are control measures being implemented?				
39	Are extension cords maintained without splicing, deterioration or damage?				
40	Are ladders in good condition?				
41	Are there at least a minimum 30" width, 36" depth and 78" height clearance in front of electrical service equipment?				

Item		No Action <i>Green</i>	Action <i>Amber</i>	Urgent Action <i>Red</i>	Comments
<b>General area</b>					
42	Is lighting adequate and operational?				
43	Sufficient plug sockets. Broken sockets or overloaded, electrical outlets in good condition. Are cover plates missing or damaged?				
44	Heating is adequate for the area and use within the area				
45	Air conditioning is adequate and blows in the correct direction. The thermostat is fully functioning				
46	Are the windows in good repair?				
47	Are all exits kept free of obstructions?				
48	Layout of furniture area is adequate and allows plenty of space between objects				
49	Shelving and storage is sufficient. Shelving is not too high or overloaded				

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50	The doors are fully functioning. Door hardware intact				
51	Are noise levels adequately controlled?				
52	Ceiling tiles missing or damaged, showing signs of dampness or mold				
53	Walls showing damage, dampness or mold				
54	Waste removal adequate. Recycling bins are provided				
55	Accommodation for clothing. Suitable hangers or coat rack provided				
56	Sufficient floor space/dimensions to allow people to move around with ease				
57	Furniture is stable and undamaged				
58	Are stairways adequately illuminated?				



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**ATTACHMENT 4**

**NOTIFICATION REQUIREMENTS - PCCD-X-1**

**NOTES:**

- 1) **Immediate notification is typically accomplished via telephone, and or e-mail.**
- 2) **Refer to specified regulation or incident section for the specific information required to be reported & documented.**
- 3) **All regulatory notifications will be performed by EH&S/Risk Management. All crime related incidents will be notified by PCPD.**

<b>Item #</b>	<b>RELEASE TYPE</b>	<b>INCIDENT INVOLVES:</b>	<b>REG:</b>	<b>NOTIFY:</b>	<b>VERBAL:</b>	<b>WRITTEN:</b>
1	Hazardous Materials	Any release or threatened release of a hazardous material that poses significant present or potential hazard to human health & safety, property, or the environment.	19CCR2703; 19CCR2705; H&SC 25507; 42USC11004	<b>Cal EMA &amp; the CUPA, Superintendent/President, Asst. Superintendent/VP of Finance &amp; Administrative Services, Supervising VP, Director of Public Affairs, PCPD, SMFD &amp; agency w/traffic jurisdiction (i.e. California Highway Patrol (CHP), police, sheriff)</b>	Immediately, upon discovery.	Within 30 days submit a written "Emergency Release Follow-up Notice Reporting Form" to Chemical Emergency Planning & Response Commission (CEPRC). (19CCR2705)
2	Hazardous Material	Hazardous Materials Transportation-related spill incidents involving a DOT Reportable Hazardous Material	40CFR263.30(c); 49CFR171.15; 49CFR171.16; CVC23112.5 13CCR 1166	<b>NRC, Cal EMA, the CUPA</b>  <b>(See Item # 1 for additional required notifications)</b>	Immediately, upon discovery, but in no case later than 12 hours after the incident.	Hazardous Materials Incident Report (DOT Form F 5800.1) – Within 30 days to NRC 40CFR263.30(c) & 49CFR171.16  If release onto highway (including streets): Hazardous Materials Incident Report (DOT Form F 5800.1) – Within 30 days to CHP (13CCR 1166)
3	Hazardous Material	Hazardous Materials Transportation-related spill incidents involving a Non-Reportable Hazardous Materials – Release of hazardous material into highway (including streets).	CVC23112.5	<b>(Same as Item #1)</b>	Immediately, upon discovery.	No written report needed
4	Hazardous Substance	Release of a Reportable Quantity (RQ) of any Extremely Hazardous Substance (EHS) or of a hazardous substance as defined by the CERCLA within any 24 hour period.	40CFR355 Subpart c; 42USC103 (CERCLA)	<b>Local Emergency Planning Committee (LERPC), State Emergency Planning Committee (SERC), NRC, Cal EMA, &amp; the CUPA (See Item # 1 for additional required notifications)</b>	Immediately, upon discovery.	Written follow-up Emergency Notification
5	Hazardous Substance	Any hazardous substance discharge in or on any waters of the state, or discharged or deposited where it is, or probably will be discharged in or on any waters of the state.	CWC13271; H&CS5411; H&CS5411.5	<b>NRC, Cal EMA, Department of Fish &amp; Game(Office of Spill Prevention &amp; Response), RWQCB, Local Health Officer or the Director of Environmental Health &amp; the CUPA</b>	Immediately, upon discovery.	No written report needed
6	Hazardous Waste	Release, fire or explosion involving a hazardous waste (including hazardous substances) which could threaten human health, or the environment, onsite, & or outside the facility & evacuation of local areas may be advisable.	22CCR66264.56; 22CCR66265.56	<b>Department of Toxic Substances Control (DTSC) Cal EMA &amp; the CUPA</b>	Immediately, upon discovery.	Within 15 days to the DTSC. (22CCR66264.56 & 22CCR66265.56
7	Hazardous Waste	Discharge of waste (including hazardous substances), or proposing to discharge within any region that could affect the quality of waters of the state other than into a community sewer system.	CWC13260; CWC13271	<b>Cal EMA, RWQCB and the CUPA</b>	Immediately, upon discovery.	Waste discharge report to the RWQCB

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Item #	RELEASE TYPE	INCIDENT INVOLVES:	REG:	NOTIFY:	VERBAL:	WRITTEN:
8	Storm Water	General Permit for discharges of Storm Water associated with construction permit violations.	40CFR122.41; 40CFR122.42 Order 2009-0009-DWQ (General Construction Permit)	<b>State Water Resources Control Board</b>	Immediately, upon discovery but no later than 24 hours of discovery.	Violation to be included within PCCD General Construction Permit Annual Report.

**FIRE INCIDENTS, BOMB THREAT, ACTIVE SHOOTER, EARTHQUAKE & REPORTING MEDICAL INJURY REQUIREMENTS**

ITEM #	DESCRIPTION	INCIDENT INVOLVED:	NOTIFY:	VERBAL:	WRITTEN:
1	Fire Safety, Earthquake or Hostile Environment	Activation of fire alarms – False or Actual fire events; Hostile Environment: (Active Shooter or Bomb Threat); Earthquake	<b>Superintendent/President, Asst. Superintendent/Vice President of Finance &amp; Administrative Services, Supervising VP, Public Affairs Office, Campus Police &amp; Facilities Office</b>	Immediately, upon discovery but no later than 1 minute of discovery. Verbal notice via text alert or phone system.	Within 72 hours submit a written “Incident/Release Assessment Form” & “PCCD Notification Form” to EH&S/Risk Management for record keeping. (See Attachments 1&2)
2	Medical Injury	Work related, medical, slip, trips & fall incidents occurring while on the PCCD campus	<b>Immediate Supervisor, EH&amp;S/Risk Management, Campus Police and Health Services (911 in cases of emergencies).</b>	Within eight (8) hrs after the death of any employee from a work-related incident or hospitalization of 3 or more employees as a result of a work-related incident, (OSHA) 29CFR Parts 1904;1952	Within 30 days submit a written Medical Injury Report Form to EH&S/Risk Management. “Incident/Release Assessment Form” & “PCCD Notification Form” to EH&S/Risk Management for record keeping. (See Attachments 5 & 6)

**Key:****REPORTABLE HAZARDOUS MATERIALS**

- An unintentional release of a hazardous material during transportation (including loading & temporary storage related to transportation);
- A hazardous waste is released;
- A specification cargo tank 1,000 gallons or greater containing any hazardous materials.

**CONDITIONS**

- A person is killed;
- A person receives an injury that requires admittance to a hospital;
- The general public is evacuated for 1 hour or more;
- One or more major transportation arteries or facilities are closed for 1 hour or more; and or
- There is a release of a marine pollutant in a quantity exceeding 450 liters (119 gallons) for liquids or 400 kilograms (882 pounds) for solids;
- In campus emergency situations, follow the PCCD Emergency Procedures Guide located in all campus building rooms & PCCD EH&S/Risk Management web portal.

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**ATTACHMENT 5**

**INCIDENT/RELEASE ASSESSMENT FORM**

**If you have an emergency, call 911**

*The following is a tool to be used for assessing incidents, and or medical injuries at PCCD. Additionally, a PCCD notification form is provided to document all incidents pertaining to PCCD.*

**Questions for Incident Assessment:**

	YES	NO
1. Was anyone killed or injured, or did they require medical care or admitted to a hospital for observation?	<input type="checkbox"/>	<input type="checkbox"/>
2. Did anyone, other than employees/students in the immediate area of the incident, evacuate?	<input type="checkbox"/>	<input type="checkbox"/>
3. Did incident cause damage to any building structures, equipment and or public/private party?	<input type="checkbox"/>	<input type="checkbox"/>
4. Was the incident a condition creating a substantial probability of harm that requires immediate action to prevent, reduce, or mitigate damages to persons, property, or the environment?	<input type="checkbox"/>	<input type="checkbox"/>
5. Is there an increased potential for secondary effects including fire, explosion, line rupture, equipment failure, or other outcomes that may endanger or cause exposure to employees, the general public, or the environment?	<input type="checkbox"/>	<input type="checkbox"/>
6. Did control, containment, decontamination, and/or clean-up require the assistance of federal, state, county, or municipal response elements?	<input type="checkbox"/>	<input type="checkbox"/>
7. Did the incident cause an activation of the PCCD Emergency Operation Center(s)?	<input type="checkbox"/>	<input type="checkbox"/>
8. Was the injury caused by (a condition due to poor lighting, trip hazard, bump hazard, air born hazard resulting in respiratory complications, and or eye problems)?	<input type="checkbox"/>	<input type="checkbox"/>

If the answer is YES to any of the above questions – refer to Reportable/Non-Reportable Assessment Form, complete the PCCD notification form and keep it readily available. Documenting why a “YES” response was made to each question will serve useful in the event questions are asked in the future, and to justify why reporting to an outside regulatory agency was required.

If all answers are NO, complete the PCCD notification form and keep it readily available. Documenting why a “no” response was made to each question will serve useful in the event questions are asked in the future, and to justify not reporting to an outside regulatory agency.

**Contact Numbers:**

- California Emergency Management Agency (Cal EMA): (800) 852 – 7550
- Department Of Environmental Health (DEH), California Unified Program Agencies (local CUPA administering agency): daytime: (858) 505-6657; after hours: (858) 505-6657/6673 to record a message
- National Response Center (NRC): (800) 424-8802 [NOTE: Use this number for Department of transportation also]
- California Regional Water Quality Control Board/San Diego, Regional Administrator: (858) 467-2952
- Environmental Protection Agency: (415) 227-9500 or (800) 300-2193, Duty Officer, option #3
- Occupational Safety & Health Administration (OSHA): (800) 321-6742
- California Highway Patrol: 911
- Fish & Game: (916) 445-0045 (24 hour line/Sacramento)
- San Diego Gas & Electric (SDG&E) Emergency Notice System: (888) 555-3449 [if SDG&E equipment is involved]
- Department of Toxic Substances Control (DTSC): (800) 728-6942
- Local Emergency Planning Committee (LEPC): (858) 505-6693
- Superintendent/President, Star Rivera-Lacy: (760) 744-1150 x7509
- Assistant Superintendent/Vice President of Finance & Administrative Services, Todd McDonald: (760) 744-1150 x3409
- Public Affairs Office (PAO), Julie Lanthier Bandy: (760) 744-1150 x2365
- Palomar College Police Department (PCPD): (760) 891-7273 or (760) 744-7753 x3961
- Manager, Environmental, Health & Safety/Risk Management, Derrick Johnson: (760) 744-1150 x3677

\*Call 911 in an emergency\*

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**ATTACHMENT 6****INCIDENT/RELEASE ASSESSMENT FORM continued****REPORTABLE / NON REPORTABLE ASSESSMENT FORM****1. INCIDENT/RELEASE AND RESPONSE DISCRIPTION**

Incident CAD# \_\_\_\_\_

<b>Date/Time:</b>	<b>Date/Time Reported:</b>	<b>Incident/Release Stopped:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
Incident Business / Site Name:		
Incident Address:		
Other Locators (Bldg, Room, Athletic Field, Parking Lot):		
Please describe the incident/medical injury and indicate specific causes and area affected:		Photos Attached?: Yes <input type="checkbox"/> No <input type="checkbox"/>
Indicate actions to be taken to prevent similar incidents/releases from occurring:		

**2. ADMINISTRATIVE INFORMATION**

Administrator or Supervisor in charge at the time of incident:	Phone:
Contact Person involved in the incident:	Phone:

**3. CHEMICAL/FIRE/MEDICAL INFORMATION**

Chemical	Quantity <input type="checkbox"/> GAL <input type="checkbox"/> LBS <input type="checkbox"/> FT <sub>3</sub>
Fire/Active Shooter/Bomb Threat/Earthquake	Evacuation <input type="checkbox"/> Yes <input type="checkbox"/> No
Medical	Hospital Admittance <input type="checkbox"/> Yes <input type="checkbox"/> No
Clean-Up/Fire/Medical Procedures & Timeline:	
<b>No clean-up required</b>	
Completed By:	Phone:
Print Name:	Title:

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**ATTACHMENT 7****EH&S/RISK MANAGEMENT NOTIFICATION FORM**

\*Refer to PCCD-X-1 (Attachment 4) for complete notification guidelines.

**NOTIFICATION LOG:** (include Date, Time & Contact Name)**\*Internal:**

PCPD \_\_\_\_\_

Superintendent/President \_\_\_\_\_

Asst. Superintendent/Vice President of Finance &amp; Administrative Services, Supervising VP or designee \_\_\_\_\_

Public Affairs Office (PAO) \_\_\_\_\_

Facilities Office \_\_\_\_\_

EH&amp;S/Risk Management \_\_\_\_\_

Bldg. Dean \_\_\_\_\_

Health Services \_\_\_\_\_

Instruction Office \_\_\_\_\_

**\*\*External:**

SMFD \_\_\_\_\_

S.D. Dept. Environmental Health (CUPA) \_\_\_\_\_

Cal EMA (Emergency Management Agency) (SERC) \_\_\_\_\_

N.R.C. (National Response Center) \_\_\_\_\_

U.S. EPA Region 9 \_\_\_\_\_

Cal. Regional Water Quality Control Board \_\_\_\_\_

Fish &amp; Game \_\_\_\_\_

San Diego LEPC: \_\_\_\_\_

DTSC: \_\_\_\_\_

SDG&amp;E \_\_\_\_\_

California Highway Patrol \_\_\_\_\_

Occupational Safety &amp; Health Administration (OSHA) \_\_\_\_\_

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## ATTACHMENT 8

## OSHA'S INJURY &amp; ILLNESS RECORDKEEPING FORM

OSHA's Form 301 (Rev. 04/2004)  
**Injury and Illness  
Incident Report**

**Note:** You can type input into this form and save it. Because the forms in this recordkeeping package are "fillable/writable" PDF documents, you can type into the input form fields and then save your inputs using the [free Adobe PDF Reader](#). In addition, the forms are programmed to auto-calculate as appropriate.

**Attention:** This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

U.S. Department of Labor  
Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

This *Injury and Illness Incident Report* is one of the first forms you must fill out when a recordable work-related injury or illness has occurred. Together with the *Log of Work-Related Injuries and Illnesses* and the accompanying *Summary*, these forms help the employer and OSHA develop a picture of the extent and severity of work-related incidents.

Within 7 calendar days after you receive information that a recordable work-related injury or illness has occurred, you must fill out this form or an equivalent. Some state workers' compensation, insurance, or other reports may be acceptable substitutes. To be considered an equivalent form, any substitute must contain all the information asked for on this form.

According to Public Law 91-596 and 29 CFR 1904, OSHA's recordkeeping rule, you must keep this form on file for 5 years following the year to which it pertains.

If you need additional copies of this form, you may photocopy the printout or insert additional form pages in the PDF, and then use as many as you need.

## Information about the employee

- 1) Full name \_\_\_\_\_
- 2) Street \_\_\_\_\_
- City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_
- 3) Date of birth \_\_\_\_\_  
Month Day Year
- 4) Date hired \_\_\_\_\_  
Month Day Year
- 5) ☐ Male ☐ Female

## Information about the physician or other health care professional

- 6) Name of physician or other health care professional \_\_\_\_\_
- 7) If treatment was given away from the worksite, where was it given?  
Facility \_\_\_\_\_
- Street \_\_\_\_\_
- City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

- 8) Was employee treated in an emergency room?  
☐ Yes  
☐ No
- 9) Was employee hospitalized overnight as an in-patient?  
☐ Yes  
☐ No

## Information about the case

- 10) Case number from the Log \_\_\_\_\_ (Transfer the case number from the Log after you record the case.)
- 11) Date of injury or illness \_\_\_\_\_  
Month Day Year
- 12) Time employee began work (HHMM) \_\_\_\_\_ ☐ AM ☐ PM
- 13) Time of event (HHMM) \_\_\_\_\_ ☐ AM ☐ PM ☐ Check if time cannot be determined

\* **Re fields 14 to 17:** Please do not include any personally identifiable information (PII) pertaining to worker(s) involved in the incident (e.g., no names, phone numbers, or Social Security numbers).

- 14) **What was the employee doing just before the incident occurred?** Describe the activity, as well as the tools, equipment, or material the employee was using. Be specific. *Examples:* "climbing a ladder while carrying roofing materials"; "spraying chlorine from hand sprayer"; "daily computer key-entry."

- 15) **What Happened? Tell us how the injury occurred.** *Examples:* "When ladder slipped on wet floor, worker fell 20 feet"; "Worker was sprayed with chlorine when gasket broke during replacement"; "Worker developed soreness in wrist over time."

- 16) **What was the injury or illness?** Tell us the part of the body that was affected and how it was affected. *Examples:* "strained back"; "chemical burn, hand"; "carpal tunnel syndrome."

- 17) **What object or substance directly harmed the employee?** *Examples:* "concrete floor"; "chlorine"; "radial arm saw." *If this question does not apply to the incident, leave it blank.*

- 18) **If the employee died, when did death occur?** Date of death \_\_\_\_\_  
Month Day Year

Add a Form Page

Reset

Completed by \_\_\_\_\_

Title \_\_\_\_\_


Phone \_\_\_\_\_ Date \_\_\_\_\_  
Month Day Year

**ENVIRONMENTAL, HEALTH & SAFETY/RISK MANAGEMENT  
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**SUMMARY OF CHANGES**

Author: Derrick Johnson Phone: x2147 Location: M&O 102D

Date of Revision	Description of Change/Comments	Reviewer(s)	Step, Section, Attachment or Page
4/17/2017	Date procedure was completed	See Below	
8/8/2019	Added Hazard Assessment and Accident/Exposure Investigations Section Added OSHA FORM 301	See Below	Section 5.0 and 6.0, pages 4 and 5  Page 18
04/15/2024	Revision change		Heading
	Added SB 533, Workplace Violence (WVPP) reference		Section 1.0
	President name, updated department name change, website		Section 2.0
	Updated Manager's title, and Hazard Identification Form web link		Section 4.2
	Revised section		Section 8.0
	Added P <sup>3</sup> D		Section 9.0
	Added PCCD-X-1, Notification Requirements		Section 10.0
	Added Senate Bill information.		Section 11.0
	Updated contact names and phone numbers		Attachment 5
	Added reference notification requirement procedure		Attachment 7

<b>Document Reviewers:</b>	<b>Name:</b>
Environmental Health and Safety Analyst	Allison Tyra  <small>Allison Tyra (Apr 16, 2024 15:53 PDT)</small> Apr 16, 2024
Risk Management Analyst	M. Victoria de la Torre <i>M. Victoria de la Torre</i> Apr 18, 2024
<b>Approvers:</b>	
Manager, Environmental Health & Safety/Risk Management	Derrick Johnson <i>Derrick Johnson</i> Apr 23, 2024












# EHS-IIPP-ver.-2-OSHA-301

Final Audit Report

2024-04-23

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