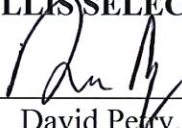




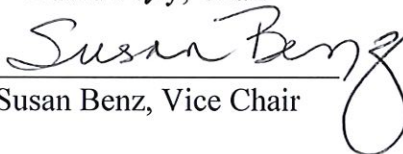
**TOWN OF HOLLIS**  
**SAFETY PROGRAM**

Adopted 03/09/2015  
Amended 05/14/2018  
Amended 08/10/2020  
Amended 08/15/2022

**HOLLIS SELECT BOARD**

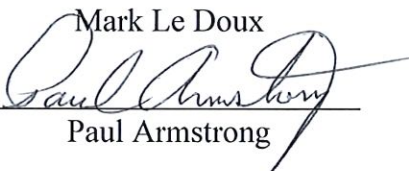


David Perry, Chair



Susan Benz, Vice Chair

Mark Le Doux



Paul Armstrong

Tom Whalen

## *Town of Hollis Safety Program*

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**TITLE XXIII LABOR: WORKERS COMPENSATION, CHAPTER 281-A:64**

**281-A:64 Safety Provisions; Administrative Penalty. –**

I. Every employer shall provide employees with safe employment. Safe employment includes but is not limited to furnishing personal protective equipment, safety appliances and safeguards; ensuring that such equipment, appliances, and safeguards are used regularly; and adopting work methods and procedures which will protect the life, health, and safety of the employees. For the purposes of this section, "employer" shall include railroads, even if the employees of such railroads receive compensation for work injuries under federal law rather than RSA 281-A.

II. All employers with 15 or more employees shall prepare, with the assistance of the commissioner, a current written safety program and file this program with the commissioner. After a written safety program has been filed, the program shall be reviewed and updated by the employer at least every 2 years. Employer programs shall, in addition to the specific rules and regulations regarding worker safety, include the process of warnings, job suspension, and job termination for violations of the safety rules and regulations set forth in the program. Where the employer is a public school district, administrative unit, or chartered public school, the safety program shall contain a plan for responding to violent acts committed by students against employees, volunteers, and visitors.

III. Every employer of 15 or more employees shall establish and administer a joint loss management committee composed of equal numbers of employer and employee representatives. Employee representatives shall be selected by the employees. If workers are represented by a union, the union shall select the employee representatives. The joint loss management committee shall meet regularly to develop and carry out workplace safety programs, alternative work programs that allow and encourage injured employees to return to work, and programs for continuing education of employers and employees on the subject of workplace safety. The committee shall perform all duties required in rules adopted pursuant to this section. For any public school district, administrative unit, or chartered public school, the joint loss management committee shall also address protocols for employees to follow in relation to workplace violence, including training. The department of labor shall adopt rules, pursuant to RSA 541-A, relative to safety programs, joint loss management committees, and employee safety in public schools.

IV. Employers subject to the requirements of paragraph III, other than employers participating in the safety incentive program under RSA 281-A:64-a, shall be placed on a list for early and periodic workplace inspections by the department's safety inspectors in accordance with rules adopted by the commissioner. Such employers shall comply with the directives of the department resulting from such inspections.

V. Notwithstanding paragraphs III and IV, an employer of 15 or more employees may satisfy the requirements of those paragraphs if such employer implements an equivalent loss management and safety program approved by the commissioner.

VI. The commissioner, in conjunction with the National Council of Compensation Insurance (NCCI), shall develop a list of the best and worst performers based on the experience modification factors promulgated by NCCI. The list shall include the top 10 lowest experience modification employers. The commissioner shall publicly recognize these low experience modification employers by presenting them with an award at the department's annual workers' compensation conference. The list of the top 10 highest and lowest experience modification employers shall be provided to the advisory council. The department shall review any specific claim against any employer listed in the top 10 highest experience modification list in conjunction with the safety program on file with the commissioner.



VII. In order to assist self-insurers in developing experience modification factors, self-insurers may submit the appropriate statistical information to the National Council of Compensation Insurance for calculating experience modifications.

VIII. The commissioner may assess an administrative penalty of up to \$250 a day on any employer not in compliance with the written safety program required under paragraph II of this section, the joint loss management committee required under paragraph III of this section, or the directives of the department under paragraph IV of this section. Each violation shall be subject to a separate administrative penalty. All penalties collected under this paragraph shall be deposited in the department of labor restricted fund established pursuant to RSA 273:1-b.

IX. [Repealed.]

**Source.** 1990, 254:36. 1994, 3:19. 1997, 343:9, 10, eff. Jan. 1, 1998. 2010, 134:1, eff. July 14, 2010. 2012, 144:1, 2, 4, I, eff. Jan. 1, 2013. 2019, 134:20, eff. June 25, 2019; 346:142, eff. July 1, 2019. 2020, 38:11, eff. Sept. 27, 2020.

## **POLICY STATEMENT**

The management of the Town of Hollis recognizes the importance of safety and health and is committed to providing a workplace for our employees in which recognized hazards are controlled or eliminated. The philosophies and objectives behind this commitment are as follows:

- The safety and health of all Town of Hollis employees is a priority.
- All employees will be required to make their safety, and the safety of their coworkers, a priority.
- As a condition of employment, each individual within the Town of Hollis will be expected to conduct their daily tasks in a manner that is consistent with the philosophy and objectives of this policy as well as any safety rules or procedures the Town of Hollis utilizes.

With these goals in mind, the Town of Hollis's Safety and Health Program will:

- Provide adequate safeguards to the maximum extent that is possible.
- Conduct a program of health and safety inspections to identify and eliminate unsafe working conditions or practices, to control health hazards, and to comply fully with all Safety and Health Standards.
- Train all employees in health and safety practices.
- Provide necessary personal protective equipment and instruction for its use and care when and where applicable.
- Develop, update and enforce health and safety rules and require all employees to cooperate with these regulations.
- Investigate, promptly and thoroughly, every accident or incident to determine the cause and take actions to prevent any reoccurrence of the problem.
- Support a healthy work environment and personal lifestyle for employees.

It is imperative that every employee, regardless of his or her level in the organization, does his or her part in supporting safety. No job or task is so important that we cannot take the necessary time to perform it safely. Adherence to this safety program will provide safer working conditions for everybody.

## **GOALS**

The Town of Hollis's safety goals are to:

- Provide a safe and healthy environment for all Town of Hollis employees.
- Avoid accidents or illness and their related costs.

## **RESPONSIBILITIES**

It is every employee's responsibility to watch for unsafe acts and conditions, and to report these problems to supervisors. However, it will be the specific duty of each Department Head to be knowledgeable of site-specific safety requirements and to be accountable for their implementation and adherence.

The Town Administrator will:

- Have overall responsibility for the coordination and implementation of the Safety Program.
- Ensure adequate resources are budgeted for the Health & Safety Program. Ensure compliance with State and Federal reporting requirements.

Department Heads will:

- Develop and implement Department specific health and safety policies and procedures.
- Ensure emergency backup systems are properly maintained and in good working order.
- Ensure that each level of supervision and all employees are made aware of the elements of the safety program and that those elements are implemented.
- Make certain personal protective equipment is available to those employees whose job functions require its use.
- Provide the support necessary to assure a safe and healthy work environment.
- Make certain supervision enforces safety through training, monitoring and through the use of disciplinary actions.
- Take immediate action(s) to correct any hazardous conditions or unsafe employee acts. Such actions could include notifying the Town Administrator of any such condition or act.
- Ensure protective guarding is in place and is being properly used, when and where appropriate.
- Ensure employees have received the necessary training for performing their job safely.
- Take prompt action in accident investigating and reporting.
- Enforce established disciplinary procedures with employees who do not adhere to safety rules and regulations.

Employees will:

- Report all accidents or incidents and hazardous conditions to their supervisor.
- Adhere to and follow all safety rules and regulations.
- Attend all required training sessions and safety meetings.
- Be willing to serve as representatives on the Joint Loss Management Committee.



Joint Loss Management Committee (JLMC) will:

- Assist and advise management in establishing and maintaining the safety program.
- Review and update rules and programs as needed.
- Plan and coordinate inspections, committee meetings and training.
- Maintain accident and incident records, reports and data.
- Conduct a program of health and safety inspections to identify and eliminate unsafe working conditions or practices, control health hazards and comply fully with all Safety and Health Standards.
- Prepare and support a budget for Town wide health and safety programs.

### **JOINT LOSS MANAGEMENT COMMITTEE**

Consistent with RSA 277, the JLMC shall consist of equal numbers of management and employee representatives. The employee representatives to the JLMC shall be selected by the employees of that given unit or department. Meetings of the JLMC shall be held at least quarterly per year, and minutes of the meetings shall be taken and posted in each department. The JLMC shall have the following representation:

#### **Management / Supervisors**

1. Town Administrator
2. DPW Director
3. Library Director
4. Police Chief or designee
5. Fire Chief or designee

#### **Employee / Labor**

1. DPW
2. Town Hall
3. Police Department
4. Fire Department
5. Communication Specialist

- Non-voting Select Board Representative

Chairperson will be rotated between management and employee on an annual basis, elections being held the first meeting of each year.

### **SAFETY AND HEALTH INSPECTIONS**

The Joint Loss Management Committee will oversee the annual safety inspection of all Town of Hollis facilities. The purpose of the inspection is to identify any potential hazards. A list of items to look for:

General housekeeping	Hand Rails, Stairs
Means of egress and exit	Electrical cords, outlets
Fire hazards/extinguishers	Unsafe storage methods
Hazardous equipment/materials	Air Quality
Ergonomic and workstation design	Office Safety



Industrial hygiene (i.e. noise/air quality, etc.)  
Exit Signs

Furnace inspection & maintenance  
Snow & ice removal

## **SAFETY AUDITS AND CORRECTIVE ACTIONS**

After the safety inspection, the Joint Loss Management Committee and/or Hollis Fire Department will prepare an audit of its findings. The audit will address provisions to correct or improve safety hazards or concerns found during inspection.

## **COMMUNICATION OF IDENTIFIED HAZARDS**

The Joint Loss Management Committee will share audit findings with Department Heads. The JLMC will submit its findings and recommendations in writing to the Town Administrator and post them on Departmental Bulletin Boards for all employees to review.

## **TRACKING LOSSES**

The JLMC will review insurance company loss records, first report of an injury, investigation reports, etc., in order to identify problem areas or concerns and to take corrective actions to prevent the problems from reoccurring.

## **SAFETY RULES AND REGULATIONS**

- No employee will perform any task he or she feels is unsafe.
- Each employee shall report all unsafe conditions and practices immediately to his/her supervisor.
- Smoking in unauthorized areas is strictly forbidden.
- Each employee shall cooperate with members of the Town of Hollis's JLMC.
- Each employee shall use common sense and care to prevent injury to him/her and to others.
- Deliberate destruction of Town of Hollis property is not permitted.
- Working under the influence of alcohol and drugs is strictly forbidden.
- Each employee shall be responsible for putting equipment away when finished with his/her job.
- Each employee will keep aisles and exits clear at all times and practice proper housekeeping.
- Each employee shall immediately report any accidents, incidents, or injuries to their supervisor.
- Each employee shall use protective equipment when required.

## **DISCIPLINARY POLICY**

As a condition of employment, all employees are required to participate actively in Town health & safety programs and follow safety regulations in the interest of on-the-job accident prevention. Willful disregard of safety practices, rules, instruction, or the welfare of fellow employees has no place in the Town of Hollis. This kind of behavior may lead to injuries, damage to products or equipment, and work delays. Disciplinary action up to and including termination of employment will be taken in those cases where it is determined that blatant disregard for safety practices has occurred. Supervisors are to follow disciplinary procedures outlined in the Town Personnel Policy and Employee Handbook or Collective Bargaining Agreements, as applicable.

## **TRAINING**

The JLMC will plan and schedule periodic training on safety and health subjects. Each Department Head should plan and schedule periodic training on safety and health subjects that meet specific Department objectives.

### **COMMUNICATION OF SAFETY ISSUES**

This written safety and health manual, and any subsequent amendments, will be conspicuously available in each department. Minutes of the Joint Loss Management Committee will be posted on the Departmental Bulletin board. When new policies are adopted by the Town based on safety inspections, department and/or office head or employee recommendations, those policies will be immediately distributed to each department for distribution to employees. Training will be done on new policies either within the affected departments or town-wide as necessary within a reasonable time frame.

### **FUNDING AND RESOURCES DEDICATED TO SAFETY**

The Town of Hollis will provide the funding and resources necessary to comply with the goals and policies of the Joint Loss Management Program.

### **EMERGENCY RESPONSE PROCEDURES**

#### Emergency Phone Numbers

- Fire 911
- Police 911
- Ambulance 911
- Poison Control (800) 222-1222

### **ACCIDENT REPORTING**

Employees should report all accidents, injuries, near misses and property damage immediately to a supervisor. The supervisor or management, upon report of injury, will immediately administer appropriate first aid or will ensure the injured person receives necessary medical attention. The supervisor should assure that the area and/or equipment and environment where an accident has occurred is properly secured until an accident investigation has been completed. Department heads will assist employees in completing an Accident/Incident Review form. (Appendix A) and submit it to the Town Administrators office within 24 hours. A First Report of Injury shall be filled out by the Town Administrator's office and sent to Primex (228-3833) within 5 days of injury. Internal accident reports shall also be completed. A copy of all reports shall also be forwarded to the Town Administrator as soon as possible and kept on file. The format will include information such as:

- Injured employee information
- Date and time of injury
- Date and time of treatment
- Parts of body injured
- Treatment given
- Location of accident
- How the accident occurred
- Why the accident occurred



Very minor injuries requiring only minimal first aid treatment do not require a First Report of Injury but shall be entered in a First Aid Log maintained by the Town Administrator. The log will record the employee's name and position title, the date and cause of injury, extent of injury, and treatment provided.

## **ACCIDENT INVESTIGATION**

Most accidents are caused by a failure of people, equipment, or the environment. Accident investigations are conducted to determine how and why these failures occurred. By using information found during an investigation, a similar or perhaps more serious accident may be prevented in the future. Accident investigations are targeted toward accident prevention and are not conducted to place blame.

Each Department shall initiate the investigation of all accidents. A Supervisor's Accident/Loss Investigation Report shall be completed (Appendix B) and internal department policies will be followed. The Joint Loss Management Committee will aid in accident and incident investigations when requested by the Department Head. They will be guided by the following:

- Accident investigations have one primary goal - to prevent future accidents.
- All accidents resulting in an injury, repetitive injury, or any accident with the potential to have caused injury, should be investigated.
- The primary objective is to find out exactly and completely how and why the accident occurred.
- The secondary objective, based on the facts, is to establish what could have been done to prevent the accident, and what can be done to prevent a reoccurrence.

A good accident investigation includes an investigation to get the facts, identification of the hazards or exposures involved, identification of the causes involved without placing blame, developing a plan of action which consists of physical and administrative controls, presenting the plan to management, and follow through.

The accident investigation may include any/all of the following:

- Conducted as soon as possible after the accident has occurred at the site where the accident took place.
- Photograph or sketch the accident scene.
- Identify the people involved in the accident.
- Interview witnesses separately and as soon as possible after the accident for:
  - The event(s) leading up to the accident.
  - How the accident occurred.
  - Who arrived at the scene immediately after it occurred.

Interviews may include any/all of the following:

- Interview for facts, not fault.
- Ask non-leading questions.
- Test the information.
- Beware of "smoke screens."
- Interview privately.
- Get complete information about the injured person and accident, including the job the employee was performing.
- Describe where the accident took place, including all environmental conditions at the time of the accident.



- Present the information and documentation to management so corrective actions can be taken to prevent a reoccurrence.
- Cooperate fully with any investigations conducted by the NH DOL, police or other regulatory authority.

## **RECORD KEEPING AND POSTING**

The Town of Hollis shall keep on file: first reports of injury; safety inspection of facilities and audit findings; accident reports; insurance loss reports; minutes of Joint Loss Management Committee meetings; written responses from management regarding committee recommendations and investigation reports. All training records and first aid treatment records will be maintained at the department level. The Town Administrator shall maintain a centralized first aid treatment / injury log.

## **WORKERS RIGHT TO KNOW: Hazardous Materials (RSA 277-A:3V)**

Each Department that stores or uses hazardous material will develop and implement a written hazard communication program. This program will include:

- Provisions for container labeling.
- Collection and availability of Safety Data Sheets (SDS).
- Employee training program.
- Listings of hazardous material in each work area.
- Provisions for the program to be available to all employees.
- Maintain/archive old SDS for a minimum of 30 years on file.

## **TOXIC SUBSTANCE POLICY**

### ***Purpose:***

- To protect employees from hazards associated with the storage and handling of hazardous and toxic substances and to ensure compliance with New Hampshire Department of Labor Standards 1403.61 Toxic Substances, and N.H. RSA 277-A Toxic Substances in the Workplace

### ***Employer Responsibilities:***

- Train employees who handle, use, or are otherwise exposed to hazardous and toxic substances in accordance with N.H. RSA 277-A:3V Toxic Substances in the Workplace
- Keep a running inventory of all hazardous and toxic substances in the workplace.
- Determine the level of chemical hazards within the workplace.
- Replace chemicals with less harmful alternatives when applicable.
- Obtain and make Safety Data Sheets for all hazardous and toxic substances in the workplace available to employees, upon request, for examination and reproduction.
- Ensure proper labeling of all hazardous and toxic substances, including those that are transferred out of their original containers.
- Post appropriate signs and notices as required by N.H. RSA 277-A:3V Toxic Substances in the Workplace.
- Provide and require the use of appropriate personal protective equipment at no cost to employees.

- Maintain on file at the workplace Safety Data Sheets for a period of at least 30 years after discontinuation of the use of each toxic substance. In the event that the employer ceases operations or relocates, all material safety data sheets shall be submitted to the department of labor to be maintained on file for the statutorily required 30 year period. All rights of access to material safety data sheets provided in this chapter shall apply to the full 30 year period.

***Employee Responsibilities:***

- Handle, store and dispose of hazardous and toxic substances according to manufacturer's guidelines.
- Never mix chemicals unless authorized by employer.
- Never remove labels from containers of hazardous or toxic substances.
- Use appropriate personal protective equipment when the employer and/or the Material Safety Data Sheet indicate that it is necessary.

***Procedural Overview:***

- Safety Data Sheets:
  - Safety Data Sheets shall be supplied for each hazardous and toxic substance in the workplace.
  - The Safety Data Sheets shall be kept on file in a convenient office location and made available, upon request, for examination and reproduction.
  - Each Safety Data Sheet must contain the following information about the substance for which it is supplied:
    - Identity of the substance as it is listed on the label;
    - The chemical's common name;
    - If the chemical is a mixture, the identity of the ingredients;
    - Physical and chemical characteristics;
    - Physical and health hazards including the primary routes of entry into the body;
    - Safe handling, use and disposal procedures;
    - Spill and leak precautions and procedures;
    - Emergency and first aid procedures; and
    - Name, address and phone number of the chemical manufacturer

***Labeling Requirements:***

- All hazardous and toxic substances must have a label containing the following information;
  - Identity of the substance.
  - Name and address of the chemical manufacturer, importer, etc.
  - Hazard warnings including acute and chronic health hazards as well as physical hazards.
- Labels must be substantial.
- Labels must not be removed under any circumstances.
- Containers without labels must be removed from use even if the contents are supposedly known.
- Signs, placards, process sheets, batch tickets, operating procedures or other written materials may be used in place of individual container labels as long as the above labeling requirements are met.

***Training Requirements:***



- Employees will receive training on hazardous and toxic substances in their work area upon initial assignment and whenever a new hazard becomes present.
- Employees will receive the following information:
  - Any operations in their work area where hazardous chemicals are present;
  - Location and availability of Safety Data Sheets and lists of chemicals.
- Employees will be trained in the following areas:
  - Methods and observations that may be used to detect the presence or release of a hazardous chemical in the work area;
  - Physical and health hazards of the chemicals in their work area;
  - Methods employees can use to protect themselves from hazards in their work area;
  - Labeling systems;
  - How to use Safety Data Sheets

***Personal Protective Equipment:***

- Personal Protective Equipment required for handling hazardous and toxic substances will be listed on each Safety Data Sheet. Equipment most commonly required includes but may not be limited to:
  - Goggles
  - Face shields
  - Safety glasses
  - Chemical resistant gloves
  - Aprons
  - Appropriate Footwear

**ACCIDENT REPORTING**

***Purpose:*** To ensure that all accidents in the workplace are reported immediately and to the proper authorities and to ensure compliance with New Hampshire Department of Labor Standards 1403.04 Accident Reporting Requirements and 1403.49, Record Keeping.

***Employer Responsibilities:***

- Record all accidents occurring in the workplace no matter how serious.
- Lab 1403.04 Accident Reporting Requirements. Within 8 hours after its occurrence, the employer shall report an employment accident which is fatal to one or more employees or which results in the hospitalization of 3 or more employees shall be reported to the NH DOL.
- Post emergency telephone numbers next to every telephone throughout the facility for use in the event of an emergency.
- Keep a log of all injuries and illnesses sustained by employees in the workplace.
- The loss shall include:
  - Date of injury
  - Name of injured employee
  - Occupation
  - Injury/Illness Description
  - Lost time status
  - Date of return to work



- Keep records available for use by NHDOL inspectors upon request.
- Workplace Safety: Reporting Death and Serious Injury. HB 406 (2019).

Death of any person in the workplace must be reported by the employer to the NH DOL within eight hours of the occurrence. Serious injury of any person in the workplace (amputation, loss or fracture of any body part, head injury or internal injury that necessitates immediate hospitalization) must be reported by the employer to the NH DOL within 24 hours.

Reports must be made electronically or telephonically, and must identify the cause and location of the incident, the place where the injured person is receiving medical care, and any other relevant information requested by the Commissioner or designee. The NH DOL will investigate the incident and may issue a report and recommendations.

All workplace deaths and injuries must be reported up the chain of command to a decision-maker. A prompt determination must be made on whether the incident is reportable, the report must occur in a timely fashion, and a representative must interact cooperatively with the NH DOL to facilitate the investigation. Specific questions about whether an incident is reportable and how the employer should handle its role in the investigation process should be directed to legal counsel.

***Employee Responsibilities:***

- Report all accidents immediately to employer (supervisor) no matter how serious.
- Report accidents that happen to yourself, and those to which you are a witness, using accident reporting form.

**BLOODBORNE PATHOGENS POLICY**

***Purpose:***

- To protect employees from hazards associated with contact, clean-up, disposal and handling of human body fluid wastes.
- Universal precautions, an approach to infection control in which all human blood and certain human body fluids are treated as if known to be infectious where the potential exists for contact with blood or other potentially infectious material.
- To ensure compliance with New Hampshire Department of Labor Standard 1403.08, Blood Borne Pathogens.

***Employer Responsibilities:***

- Identify job classifications where employees have occupational exposure to blood or other potentially infectious materials.
- Identify job classifications where some employees have exposure based on certain tasks.
- Train the above-identified employees in proper response procedures for situations involving blood and other potentially infectious materials.
- Train employees to treat all blood and other body fluids with universal precautions (as if known to be infected with HIV, HBV or other blood borne pathogens).
- Supply first aid and potentially infectious material clean-up kits that contain:
  - One time use disposable gloves such as surgical or examination gloves;

- Eye/face protection to protect the face against splashing of body fluids;
- Material to absorb blood or other potentially infectious material;
- Device(s) to scoop up the absorbent and body fluid (two pieces of stiff cardboard will suffice).
- Disinfectant to clean all surfaces which blood or other potentially infectious material has contacted. For some surfaces a 1:10 bleach/water mixture is appropriate.
- Biohazard containers/bags or specific containers for the disposal of needles, sharps, used bandages, and all other emergency items that come in contact with blood or other potentially infectious materials. These containers must be marked so that they are not confused with other similar containers in the workplace used for other purposes.
- Waterless, disinfectant hand cleaners

***Employee Responsibilities:***

- Respond to all situations involving blood or other human body fluids with universal precautions (treat all blood and body fluids as if known to be infectious for HIV, HBV or other blood borne pathogens).
- Follow the procedure listed under the Procedural Overview section when responding to any situation involving blood or other potentially infectious materials.

***Procedural Overview:***

- Protection measures when responding to a medical emergency:
  - Before attending to a victim medically, don the following personal protective equipment:
    - Single use disposable gloves, such as surgical or examination gloves;
    - Wash hands after removal of exam gloves and wear eye protection when blood or other potentially infectious material might be splashed.
    - Eye and face protection to protect from splashed body fluids.
  - Attend to victim and perform needed medical measures.
  - Clean up and dispose of contaminated sharps and dressings as outlined below.
- Clean-up of blood or any other potentially infectious material:
  - Before cleaning up any human blood or other potentially infectious material don the following personal protective equipment:
    - Single use disposable gloves such as surgical or examination gloves;
    - Eye and face protection to protect from splashed body fluids.
  - Pour absorbent over the entire fluid spill and wait until the fluid absorbs into the material.
  - Scoop up the fluid soaked absorbent using a designated device or two pieces of cardboard into a biohazard container or another container specified only for disposal of body fluids, etc.
  - Once all the absorbent and body fluid(s) are scooped up, dispose of the device(s) into the same container.
  - Dispose of sharps (needles, lancets, etc.) in puncture resistant containers that are appropriately marked and designated for such purposes.
  - Dispose of used bandages, gauze, linens and all other items that come in contact with blood or other potentially infectious materials.



- Thoroughly wash hands immediately following clean-up and disposal using an appropriate disinfectant soap and warm water (waterless hand cleaners can provide for immediate washing, but are not a substitute for appropriate washing).
- Procedures following an unprotected critical exposure or suspected unprotected exposure to blood and/or body fluids:
  - Wash the affected area immediately. If exposure involves the eye, flush copiously with running water.
  - Do not suck or "force bleed" the exposed area.
  - Report the exposure to your supervisor.
  - Fill out appropriate forms, which may include:
    - For Fire, Police, EMS, Corrections:
      - Emergency Response/Public Safety Worker Incident Report Form
    - For Others:
      - First Report of Injury

## **FLAG PERSON POLICY**

### *Purpose:*

- To protect employees from hazards associated with worksites on or adjacent to highways or streets and to ensure compliance with New Hampshire Department of Labor Standard 1403.22, Flag person.

### *Employer Responsibilities:*

- Ensure that at worksites on or adjacent to a highway or street, where signs, signals, and barricades do not provide protection from traffic, that a flag person is provided.
- Provide appropriate training to any employee who may serve as a traffic flagger.
- Provide designated flag person(s) with highly visible warning garment with retro-reflective striping while flagging, and ANSI Type 2 vest at a minimum is recommended. An ANSI Type 3 garment is suggested for night time flagging.
- Provide additional reflective warning garments or devices to flag persons for nighttime flagging.
- Provide the flag person with a combination Stop/Slow paddle at least 18 inches in width and letters that are at least 6 inches in height.

### *Employee/Flag person Responsibilities:*

- Wear provided warning garments provided by employer at times designated to do so.
- Erect adequate "Flagger Ahead" warning signs.
- Use flags and/or paddles as instructed.

### *Additional Reference:*

- Manual on Uniform Traffic Control Devices (MUTCD)

## **NOISE EXPOSURE POLICY**

### *Purpose:*



- To protect employees from hazards associated with occupational noise exposure and to ensure compliance with New Hampshire Department of Labor Standard 1403.41, Noise Exposure.

***Employer Responsibilities:***

- Monitor noise levels in the workplace to ensure they do not exceed an 8 hour time weighted average of 90 db.
- Institute engineering and administrative controls to reduce employee noise exposures when necessary.
- Provide hearing protection, free of charge, when engineering and administrative controls fail to reduce employee noise exposures.
- Train employees in the correct fit and care of hearing protection devices.
- Monitor exposure to impulsive or impact noise to ensure employee exposure does not exceed 140 db peak sound pressure level.
- Keep records of sound level readings and employee training.

***Employee Responsibilities:***

- Inform employer when exposure to excessive noise is suspected.
- Follow guidelines of instituted engineering and administrative controls that are designed to reduce employee noise exposure.
- Wear provided hearing protection when employer deems necessary.

**FIXED LADDER POLICY**

***Purpose:***

- To protect employees from hazards associated with fixed ladder installations and to ensure compliance with New Hampshire Department of Labor Standard 1403.32, Ladders (Fixed and Portable).

***Employer Responsibilities:***

- Ensure that all fixed ladder installations meet requirements listed under the Procedural Overview section of this policy.
- Ensure that all portable ladders meet the requirements in sections of this policy.
- Provide stepladders with metal spreader or locking device of sufficient size and strength to securely hold the front and back sections in the open position.
- Train employees in proper inspection, use and set-up of ladders including wooden, metal and non-self-supporting ladders.

***Employee Responsibilities:***

- Perform pre-use ladder inspection, according to the Procedural Overview section of this policy, before placing any ladder into service.
- Remove from service any ladder that has developed defects and is unsafe for use.
- Tag or mark unsafe ladders with the words "Dangerous, DO NOT USE."
- Set up non self-supporting ladders on a sound base at a 4:1 pitch to prevent slipping.
- Set up any ladder used to gain access to a roof or platform must extend at least 3 feet above the platform.

***Procedural Overview:***

- Fixed Ladder Installation Requirements:
  - Metal rungs must have a minimum diameter of 3/4 inch.
  - Wooden rungs must have a minimum diameter of 1-1/8 inch.
  - Rungs must be spaced uniformly no more than 12 inches apart.
  - Rungs must be a minimum of 16 inches in length.
  - Ladder side rails must extend 3 1/2 feet above the top landing.

***Fixed Ladder Safeguards:***

- Ladders more than 20 feet in length must be equipped with safety devices such as cages, wells or fall protection systems.
- Ladders with cages must have a platform every 30 feet of travel.
- Ladders without cages must have a platform every 20 feet of travel.
- Cages on fixed ladders must extend at least 42 inches above the top landing.
- The bottom of the cage shall be not less than 7 feet nor more than 8 feet from the bottom of the ladder.

***Portable Ladder Preuse Inspections:***

- Check joints between the steps and side rails to make sure they are tight
- Hardware fittings should be firmly attached
- Lubricate pulleys, locks and wheels when necessary.
- Look for cracks in wood ladders.
- Check for frays in ropes of extension ladders. Replace worn or frayed ropes before use.
- Ensure that movable parts operate without binding or undue play.
- Look for bends or cracks in metal ladders.

***Portable Ladder Use Precautions:***

- Always check for overhead power lines and maintain a safe distance from them when raising, lowering and using portable ladders of wood, metal or fiberglass.
- Always check ladder for load capacities before use.
- Set up non self-supporting ladders on a sound base at a 4:1 pitch to prevent slipping.
- Do not place ladders on boxes, barrels, or other unstable bases to obtain additional height.

<b>TRAFFIC CONTROL POLICY</b>
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***Purpose:***

To protect employees when working in or around vehicular traffic and to ensure compliance with New Hampshire Department of Labor Standard 1403.62, Traffic Control.

***Employer Responsibilities:***

- Ensure that pedestrian and vehicular traffic is adequately controlled on every job site.
- Provide employees with appropriate personal protective equipment (PPE) and other safety devices needed to effectively and safely control traffic.



- Ensure that traffic control devices conform to applicable federal and state regulations or to applicable sections of Federal Highway Administration Manual on Uniform Traffic Control Devices (MUTCD).
- Provide training to employees on safe and effective traffic control techniques.

***Employee Responsibilities:***

- Follow practices set by the employer for the control of traffic.
- Use personal protective equipment like safety vest when in or around vehicular traffic.

***Procedural Overview:***

- General Requirements:
  - Effective means for control of pedestrian and vehicular traffic shall be instituted on every job site where necessary.
- Protective Equipment:
  - All employees working in or around vehicular traffic shall wear, at a minimum, an ANSI Class II Traffic Vest.
- Traffic Control Devices:
  - Flaggers shall use paddles with clearly visible Stop/Slow signals.
  - Signs shall be erected in advance of the work zone to warn of possible hazards such as *flagger ahead, road work ahead, and be prepared to stop.*
    - The placement and spacing of signs in advance of a work area shall be adjusted according to vehicle speed as outlined in the Manual on Uniform Traffic control devices (MUTCD)
  - Cones, Barricades and other devices shall be used to separate traffic lanes from work areas.
  - Construction vehicles shall be equipped with adequate warning equipment (amber lights).

**SLIP, TRIP AND FALL POLICY**

***Purpose:***

The purpose of this policy is to reduce and/or eliminate employee and citizen slips, trips, and fall related events and injuries.

***Discussion:***

Slips, trips, and falls are among the leading causes of injury and lost work time to employees, and to members of the public visiting municipal/school/county property. Accidents often occur from a lack of due diligence to report and address existing conditions that can contribute to these types of events. Therefore the Town of Hollis and its employees will take a proactive approach to managing the risks associated with slip, trip and fall related conditions.

It is the policy of the Town of Hollis that its employees will be required to monitor, report, and whenever reasonably possible, correct conditions that have, or are likely to cause a slip, trip, and fall related event if corrective action is not taken.

***Procedures:***

- A Slip, Trip, and Fall Log shall be maintained at every public facility by the Department Head. Unsafe conditions shall be reported to the appropriate supervisor for that location immediately for corrective action. If the conditions present an immediate threat to the safety of employees or the public the employee will take reasonable steps to prevent injuries until the appropriate personnel arrive.
- Employees shall wear footwear appropriate for the conditions.
- Sidewalks, parking lots, stairs, and other areas that employees and the public utilize shall be properly maintained to ensure that no tripping points, ice and snow build up, or other conditions that could contribute to a slip, trip, or fall exist.
- Interior hallways, stairs, floors, and other areas of foot travel shall be clear of obstructions such as boxes, power cords, frayed carpeting, or weathered matting. Proper signage shall be used to signal wet floors or hazardous conditions which could contribute to a slip, trip, or fall.

***Evaluating and Reporting:***

All slip, trip, and fall related incidents/injuries will be documented in the Slip, Trip, and Fall Log maintained by each department. Each incident and the log itself will be reviewed by the appropriate supervisor and the Joint Loss Management Committee (JLMC). A master Slip, Trip, and Fall Log shall be kept by the Town Administrator in a centralized file to monitor results, identify emerging trends, and to maintain documentation for potential claims.

**TEMPORARY ALTERNATE DUTY POLICY (TAD)**

In accordance with the provisions of RSA 281-A:23-b, the Town of Hollis will provide Temporary Alternative Work (TAD) opportunities for employees who suffer a work-related injury or illness. When practicable, employees will be returned to their regular duties with modifications consistent with a physician's stipulated work restrictions. The Department Head will work with the Town Administrator to assist in returning the employee to TAD work. The specific assignment of duties shall be determined on a case-by-case basis pursuant to the physician's restrictions and the work available at the time of injury or illness. In the event that such restrictions make it impracticable for an employee to perform their normal job, even with modification, the employee may be reassigned to a different town department. TAD assignments will be assigned based on the availability of suitable transitional work within the physician's restrictions. Employee's progression toward returning to their normal job will be evaluated approximately in 4 week intervals. Extensions beyond this time frame will require approval by the Board of Selectmen. Provided positive progress is being made, TAD may continue until the employee is able to return to his/her normal job. The Town of Hollis has no obligation to provide temporary alternative work opportunities to employees who suffer a non-work related injury or illness.

**CONFINED SPACE POLICY**

***Purpose:***

To protect workers from hazards associated with Confined Space Entry and to ensure compliance with New Hampshire Department of Labor Standard 1403.14, Confined Space Entry and 1403.68, Welding in Confined Spaces.

***Employer Responsibilities:***



- Evaluate the workplace to determine if any areas fall under the definition of confined space as defined by the New Hampshire Department of Labor Standard 1402.02.
- Post danger signs at the location of confined spaces or inform exposed employees through equally effective means.
- Train all involved employees in safe confined space entry operations.
- Assign a minimum of 2 employees to entry operations.

***Supervisor Responsibilities:***

- Ensure that an entry permit is accurately completed before allowing entry into a confined space.
- Continually evaluate the entry and remove entrants should conditions warrant.

***Employee Responsibilities:***

- Prior to fully opening any confined space, check the air around the opening for any atmospheric and physical hazards. Typically this is done by “cracking” a cover or partially opening a door.
- Be trained in safe entry procedures, recognition of hazards, use of equipment for confined space entry including PPE, and any other topics necessary for safe entry.
- Follow procedures for entrants and attendants outlined in Procedural Overview.

***Procedural Overview Before Entry:***

- Determine if it is safe to open the space for eventual entry (i.e.: open manhole cover).
- Evaluate atmospheric hazards of confined space by first testing the internal atmosphere with a correctly calibrated direct reading instrument in this order:
  - Oxygen content;
  - Flammable gases and vapors; and
  - Potentially toxic air contaminants.
- If the confined space has been determined to have a hazardous atmosphere:
  - Eliminate the hazardous atmosphere before entry through the use of forced air ventilation, purging, making inert. The atmosphere will be tested to ensure that these steps have made the space safe for entry. Any of these steps shall continue throughout the time an employee is in the space.
- Identify and effectively control any physical hazards including, but not limited to:
  - Material with potential to engulf an entrant;
  - Internal configuration which could cause an entrant to become trapped or suffocated by inwardly converging walls or by a floor which slopes downward into a smaller cross-section; and
  - Fall hazards.
  - Electrical hazards (or other energy sources).
- Establish means of communication between the employee entering the space and the space attendant (i.e.: face-to-face, radio or other appropriate means).
- Determine which types of PPE the entrant(s) should use based on hazards identified.
- Establish rescue measures so an employee can be immediately retrieved from the space in the event of an emergency (i.e. Tripod with retrieval mechanism and full body harness).
- Complete the Confined Space Evaluation form (permit) based on 1-7 above. (Appendix C)

***Procedural Overview During Entry:***

- Attendant
  - One employee shall remain directly outside the space throughout the duration of the entry; and
  - Remains in constant contact with the entrant.
- Entrant
  - Enters space wearing appropriate personal protective equipment; and
  - Remains in constant contact with the attendant
- Communication
  - Continual communication must occur between entrant and space attendant.
  - In the event that communication stops, or the entrant is not responding, the entrant should be immediately retrieved from the space using the designated rescue procedures.
- Air monitoring
  - Air conditions and contaminant levels shall be continually monitored throughout the entry procedures.
  - In the event the conditions change posing a hazard to the entrant, the entrant should be retrieved from the space using the designated rescue procedures.
- Ventilation
  - If the space contained a hazardous atmosphere, forced air ventilation, making inert or flushing shall remain throughout the duration of the entry procedure.
  - In the event these measures fail, the entrant shall be retrieved from the space immediately using the designated rescue procedures.

***Procedural Overview After Entry:***

- Replace the entrance cover securely.
- Document the entry procedures using the confined space evaluation form. (Appendix C)

***Welding Provisions:***

- When an area cannot be effectively ventilated, air supplied respirators or a mask approved by Mine Safety and Health Administration (MSHA) shall be used.
- If an (IDLH) Immediately Dangerous to Life and Health situation is created, Self-Contained Breathing Apparatus (SCBA's) shall be used.
  - Personnel using SCBA's shall be specifically trained in the use of SCBA's being used.
- Oxygen shall never be used for ventilation.

<b>EXCAVATING AND TRENCHING POLICY</b>
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***Purpose:***

To protect employees from hazards associated with excavating and trenching and to ensure compliance with New Hampshire Department of Labor Standard 1403.19, Excavating and Trenching.

***Employer Responsibilities:***

- Before excavation begins, contact utility companies to determine if there are underground utility installations in that area.



- Ensure that underground utilities are identified and marked prior to excavation.
- Supply employees with trench protective systems when necessary.

***Competent Person (Supervisor) Responsibilities:***

- Inspect and evaluate the condition of all trenches and excavations prior to permitting employees to enter.
- Perform inspection at the beginning of each day and at least 3 to 4 times during the operation thereafter.
- Cease operation when weather or other conditions may affect the integrity of trench or excavation.
- Continue trenching or excavation operations once the conditions have been made safe according to the guidelines identified in the Procedural Overview section of this policy.
- Evaluate proximity of trenching operations to retaining walls, utility poles, and other objects that may need support to prevent collapse or undermining.

***Employee Responsibilities:***

- Follow the applicable procedures identified under the Procedural Overview section of this policy

***Procedural Overview:***

- Before Excavation or Trenching Operation-
  - Contact utility companies to determine if there are any underground utility installations in that area.
  - Identify and mark underground utility installations prior to operations.
  - Competent person must inspect and evaluate the condition of trench or excavation prior to permitting employees to enter.

***During Excavation or Trenching Operation:***

- Competent person must inspect and evaluate the trench or excavation 3 to 4 times during the work day.
- Use a trench protective system (e.g. trench box) or sloping of the ground to the appropriate angle of repose when walls and faces of trenches and excavations are 5 feet or more deep, or when, regardless of depth, there is a danger of cave in or moving ground.
- Trenches 4 feet deep or more must have adequate means of exit such as ladders or steps, located so as to require no more than 25 feet of lateral travel.
- When employees are required to enter a trench or excavation, excavated or other material shall be stored and retained at least 2 feet or more from the edge of the excavation.
- Support retaining walls, utility poles, or other objects which could collapse or undermine if not properly supported.
- Wear/use appropriate personnel protective equipment.

***Personal Protective Equipment:***

- Personal Protective Equipment typically required for this operation includes but may not be limited to:
  - Hardhat
  - Safety Footwear
  - Gloves

## **SEAT BELT POLICY**

### ***Purpose:***

This policy is intended to protect Town of Hollis employees operating or riding in motor vehicles from the hazards of motor vehicle accidents.

### ***Policy:***

- It is mandatory for all Town of Hollis employees operating or riding in motor vehicles to use seat belts. This includes all employees operating Town of Hollis owned vehicles, passengers in Town of Hollis owned vehicles, and all employees operating personal vehicles while engaged in Town of Hollis business, and employees riding in a passenger vehicle while on Town of Hollis business.
- All Town of Hollis vehicles will be equipped with seat belts. This includes the vehicle cab, passenger seating area and jump seats. Passengers will only be permitted to ride in areas of the vehicle designed for that purpose. Seat belts shall be used by all employees riding in the vehicle when the vehicle is in motion.
- There are no exemptions to this policy.
- Violation of this policy will result in disciplinary action in accordance with Town of Hollis disciplinary procedures.

## **WORKPLACE VIOLENCE PREVENTION/PROCEDURE POLICY**

### ***Purpose:***

The Town of Hollis maintains a zero tolerance standard of violence in the workplace. The purpose of this policy is to provide Hollis employees, volunteers and public a guidance that will maintain an environment at and within town property and events that is free of violence and the threat of violence.

### ***Policy:***

Violent behavior of any kind or threats of violence, either implied or direct, are prohibited, in Hollis facilities and at town sponsored events. Such conduct by a town employee will not be tolerated. An employee who exhibits violent behavior may be subject to criminal prosecution and shall be subject to disciplinary action up to and including dismissal. Violent threats or actions by a non-employee may result in criminal prosecution. Hollis will investigate all complaints filed and will also investigate any possible violation of this policy of which we are made aware. Retaliation against a person who makes a complaint regarding violent behavior or threats of violence made to him/her is also prohibited.

### ***Definitions:***

- Workplace Violence: Behavior in which an employee, former employee, volunteer or visitor to a facility inflicts or threatens to inflict damage to property, serious harm, injury or death to others at the work place.
- Threat: The implication or expression of intent to inflict physical harm or actions that a reasonable person would interpret as a threat to physical safety or property.
- Intimidation: Making others afraid or fearful through threatening behavior.
- Zero-tolerance: A standard that establishes that any behavior, implied or actual, that violates the policy will not be tolerated.
- Court Order: An order by a Court that specifies and/or restricts the behavior of an individual. Court Orders may be issued in matters involving domestic violence, stalking or harassment, among other types of protective orders, including Temporary Restraining Orders.

### ***Prohibited Behavior:***



Violence in the workplace may include, but is not limited to the following list of prohibited behaviors directed at or by a co-worker, supervisor or member of the public:

- Direct threats or physical intimidation;
- Implications or suggestions of violence;
- Stalking;
- Assault of any form;
- Physical restraint, confinement;
- Dangerous or threatening horseplay;
- Loud, disruptive or angry behavior or language that is clearly not part of the typical work environment;
- Blatant or intentional disregard for the safety or well-being of others;
- Commission of a violent felony or misdemeanor on town property;
- Any other act that a reasonable person would perceive as constituting a threat of violence.

Domestic Violence, while often originating in the home, can significantly impact workplace safety and the productivity of victims as well as co-workers. For the purposes of this document, "domestic violence" is defined as abuse committed against an adult or fully emancipated minor. Abuse is the intentional reckless attempt to cause bodily injury, sexual assault, threatening behavior, harassment, or stalking, or making annoying phone calls to a person who is in any of the following relationships:

- Spouse or former spouse;
- Domestic partner or former domestic partner;
- Cohabitant or former cohabitant and or other household members;
- A person with whom the victim is having, or has had, a dating or engagement relationship;
- A person with whom the victim has a child.
- Hollis recognizes that domestic violence may occur in relationships regardless of the marital status, age, race, or sexual orientation of the parties.

***Reporting Acts of Threats of Violence:***

An employee who:

- is the victim of violence, or
- believes they have been threatened with violence, or
- witnesses an act or threat of violence towards anyone else shall take the following steps:
  - If an emergency exists and the situation is one of immediate danger, the employee shall contact the local police officials by dialing 9-1-1, and may take whatever emergency steps are available and appropriate to protect himself/herself from immediate harm, such as leaving the area.
  - If the situation is not one of immediate danger, the employee shall report the incident to the appropriate supervisor or manager as soon as possible and complete the Workplace Violence Incident Report Form.

***Procedures - Future Violence:***

Employees who have reason to believe they, or others, may be victimized by a violent act sometime in the future, at the workplace or as a direct result of their activities within the town, shall inform their supervisor or officials by immediately completing a Workplace Violence Incident Report Form so appropriate action may be taken. The official shall inform the Select Board and the local law enforcement officials.

Employees who have signed and filed a restraining order, temporary or permanent, against an individual due to a potential act of violence, who would be in violation of the order by coming near them, shall immediately supply a copy of the signed order to the Select Board. The Select Board shall provide copies to the appropriate department and local police.

***Incident Investigation:***

Acts of violence or threats will be investigated immediately in order to protect employees and volunteers from danger, unnecessary anxiety concerning their welfare, and the loss of productivity. The department official will cause to be initiated an investigation into potential violation of work rules/policies. Simultaneously, the Department official will refer the matter to local police for their review of potential violation of civil and/or criminal law.

Procedures for investigating incidents of workplace violence include:

- Visiting the scene of an incident as soon as possible.
- Interviewing injured and threatened employees, volunteers and witnesses.
- Examining the workplace for security risk factors associated with the incident, including any reports of inappropriate behavior by the perpetrator.
- Determining the cause of the incident.
- Taking mitigating action to prevent the incident from recurring. Recording the findings and mitigating actions taken.

In appropriate circumstances, Hollis will inform the reporting individual of the results of the investigation. To the extent possible, Hollis will maintain the confidentiality of the reporting employee and the investigation but may need to disclose results in appropriate circumstances; for example, in order to protect individual safety. Town will not tolerate retaliation against any employee or volunteer who reports workplace violence.

***Mitigation Measures:***

Incidents which threaten the security of employees shall be mitigated as soon as possible following their discovery. Mitigating actions include:

- Notification of law enforcement authorities when a potential criminal act has occurred.
- Provision of emergency medical care in the event of any violent act upon an employee.
- Post-event trauma counseling for those employees desiring such assistance.
- Assurance that incidents are handled in accordance with the Workplace Violence Prevention policy.
- Requesting Hollis' attorney file a restraining order as appropriate.

***Training and Instruction:***

Hollis Select Board shall be responsible for ensuring that all employees, including supervisors, are provided training and instruction on general workplace security practices. Departments shall be responsible for ensuring that all employees, are provided training and instructions on job specific workplace security practices.

Training and instruction shall be provided as follows:

- To all current employees and volunteers when the policy is first implemented.
- To all newly hired employees elected officials and volunteers , or employees given new job assignments for which specific workplace security training for that job assignment has not previously been provided.
- To affected employees and volunteers whenever management is made aware of a new or previously unrecognized hazard.

Workplace security training and instruction includes, but is not limited to, the following:

- Preventive measures to reduce the threat of workplace violence, including procedures for reporting workplace security hazards.
- Methods to diffuse hostile or threatening situations.
- Escape routes.
- Explanation of this Workplace Violence Prevention Policy.



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In addition, specific instructions shall be provided to all employees regarding workplace security hazards unique to their job assignment.

**APPENDIX A: ACCIDENT/INCIDENT REVIEW**

Date of Review: \_\_\_\_\_ Department/Job Title: \_\_\_\_\_  
Date of Injury: \_\_\_\_\_ Location: \_\_\_\_\_  
Reviewer's Signature: \_\_\_\_\_

**Personal Injury or Illness Information:**

Part of Body Affected: \_\_\_\_\_ Nature of Injury/Illness: \_\_\_\_\_  
Cause of Injury/Illness (Object/equipment/substance): \_\_\_\_\_  
Description of what happened, including events leading up to accident/illness: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Did Injured Leave Work? YES or NO Time: \_\_\_\_\_ AM/PM Date: \_\_\_\_\_  
Did Injured Seek Medical Treatment? YES or NO Where? \_\_\_\_\_  
Name of Physician: \_\_\_\_\_ Return to Work Date: \_\_\_\_\_  
Describe conditions or factors that may have contributed to the accident/illness: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Corrective Actions Taken (Outline actions taken to reduce likelihood that this type of incident will reoccur):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Safety Committee Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Material Handling Analysis:**

What was being handled? \_\_\_\_\_  
How much did it weigh? \_\_\_\_\_  
Distance of lift/lower? \_\_\_\_\_  
Did employee slip while lifting? YES or NO  
Were there any abnormal working conditions at the location of the accident (wet floors, material on floors, etc.)?  
\_\_\_\_\_  
Was the material handled in the standard way? \_\_\_\_\_  
How often is this job done? \_\_\_\_\_  
When was the accident reported? \_\_\_\_\_  
Who was the employee working with at the time of the accident? \_\_\_\_\_  
Has the employee had previous material handling accidents? YES or NO Explain: \_\_\_\_\_  
\_\_\_\_\_

**Slips, Trips, and Falls**

What was the condition of the walking surface (damaged, worn, wet, icy, cluttered, etc.)? \_\_\_\_\_  
Was hazardous condition reported prior to the accident? \_\_\_\_\_  
How long had the condition existed? \_\_\_\_\_  
Was the hazardous condition corrected? \_\_\_\_\_  
When? \_\_\_\_\_  
How? \_\_\_\_\_  
Was the lighting adequate? \_\_\_\_\_  
Was the employee wearing appropriate footwear? \_\_\_\_\_  
Was the employee carrying/pulling anything? \_\_\_\_\_



## **APPENDIX B: SUPERVISOR'S ACCIDENT/LOSS INVESTIGATION REPORT**

### **Purpose:**

To provide guidance for the effective completion of the Town of Hollis Supervisor's Accident/Loss Investigation Report.

Supervisors are responsible to investigate all accidents in their areas or that involve employees they supervise. During an investigation the supervisor should review how the accident happened, what caused the accident, and what actions should be taken to prevent recurrence. The Town of Hollis Supervisor's Accident/Loss Investigation Report is designed to document the supervisor's investigation, gather statistical data, and assist in preparing recommendations for accident prevention.

### **Report Preparation:**

- The immediate supervisor should prepare the Supervisor's Accident/Loss Investigation Report after fully investigating how and why an accident has occurred.
- The completed report should be typed or printed whenever possible to ensure legibility.
- One report should be submitted per accident.
- Refer to the appropriate policy for additional procedural information

### **Section I General Information:**

This section of the report identifies the Department, Division, Date of Occurrence, Time, Date Reported, and Exact Location of accident.

### **Section II Personal Injury or Illness (WC):**

This section of the report should be used when an employee is injured as a result of a work related accident or has been exposed during the performance of work related duties to an illness for which treatment is needed. It is also used when prescription glasses or other durable medical equipment has been broken as a result of a work related accident.

- Name:
- Job title or occupation:
- Nature of Injury or Illness:
- Did Employee seek medical attention?: YES or NO
- Additional Forms completed: This block is intended as a reminder to ensure required DOL forms have been completed. Check to see if forms have been completed and check the box.
- Was appropriate Personal Protective Equipment available and in use if applicable: Check appropriate box.
- If No, why not?

### **Section III Motor Vehicle (MV)**

Motor Vehicle Accident Reporting Procedure.

- Name of Employee involved: If more than one employee was involved, use the name of the employee that was driving, most responsible, or most knowledgeable of what happened.
- Town Vehicle: YES or NO
- Department Notified: This is intended to be a reminder that the department needs to be notified of all motor vehicle accidents so that they may look the vehicle over for damage, etc. Please check the appropriate block.
- Enter estimated or actual cost of damage: If the actual cost or estimate of damage is less than \$1000 write the dollar amount in the space provided next to <\$1000. If over \$1000, write in the space provided next to >\$1000.

- Did Police investigate? Yes or No It is the Town's policy to be called whenever a Town Vehicle is in an accident. If the police were not called, you will need to explain why.
- Seat Belts in use? Yes or No If the answer is No you will need to explain why.
- Road Conditions? Indicate what the road conditions were at the time of the accident. For example were the roads icy, wet, or dry.

#### **Section IV Property/Liability Claims**

- Name of Town Contact Person: Name of individual who should be contacted in regards to the damaged property.
- Town Property Damaged: Name the Town owned property that was damaged
- Enter estimated or actual cost of damage: If the actual cost or estimate of damage is less than \$1000 write the dollar amount in the space provided next to <\$1000. If over \$1000, write in the space provided next to >\$1000.
- Non-Town Property Damaged: Indicate what was damaged by address or name of property. Example: Basement flooded or wooden fence damaged.
- Property Owner Name:
- Contact Phone Number:
- Owner Contacted: YES or NO Indicate by checking the appropriate block if the owner of the property has been contacted.
- Enter estimated or actual cost of damage: If the actual cost or estimate of damage is less than \$1000 write the dollar amount in the space provided next to <\$1000. If over \$1000, write in the space provided next to >\$1000.

#### **Section V Description of Accident**

Please investigate and describe accident clearly as to: who, what, when, where and why. Annotate if there were any witnesses and provide contact information if available. (Not required for accidents when a police report is filed)

- Remember this form should be completed by the individual performing the accident investigation and not the individual who had the accident.

#### **Section VI Future Prevention**

How would you prevent reoccurrence?

Suggested examples: Better aware of surroundings, lifting device should be used, modification of equipment, special equipment should be purchased, policy should be developed, or process should be studied.

#### **Action Taken (if Applicable)**

Describe any action you have taken to prevent reoccurrence or plan to take. (Ex: A policy change has been recommended; a training class has been scheduled on this piece of equipment; sidewalk sanded and all employees have been reminded to watch for slippery sidewalks) Remember, if an employee does not follow a Town safety policy corrective action must be taken.

#### **Signature Block**

All reports must be signed by the investigating supervisor and reviewed by Department Head or by an individual designated by the department head for this purpose.



**Supervisor's Accident/Loss Investigation Report**

**I. GENERAL INFORMATION**

Department:		Division:	
Date of Occurrence:	Time:	Date Reported:	
Exact Location of Occurrence:			

**II. PERSONAL INJURY OR ILLNESS (WC)**

Name:	Job title or occupation:
Nature of Injury or Illness:	Additional Forms completed: Employee: <input type="checkbox"/> Notice of Accidental Injury or Occupational Disease (8aWCA)  Employer: <input type="checkbox"/> Employer's First Report of Occupational Injury or Disease (8WC)
Did Employee seek medical attention?	
Was appropriate Personal Protective Equipment available and in use if applicable. <input type="checkbox"/> Yes <input type="checkbox"/> No	If No, why not

**III. MOTOR VEHICLE (MV)**

Name of Employee involved:	Vehicle No / ID:  Department Head Notified: <input type="checkbox"/> Yes <input type="checkbox"/> No
Enter Estimated cost or actual if known: < \$1000 _____  >\$1000 _____	Did Police investigate? If No, explain why not:
Seat Belts in use? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, explain why not:	Road Conditions?

**IV. PROPERTY DAMAGE (P/L)**

Name of Contact Person:	Owner of Property Damaged:
Property Damaged Involved:	Property Owner Name: Contact Phone Number: Owner Contacted: <input type="checkbox"/> Yes <input type="checkbox"/> No

Enter estimated or actual cost of damage? < \$1000 _____  > \$1000 _____	Enter estimated or actual cost of damage to Non-City Property? < \$1000 _____  > \$1000 _____
---	--

**V. DESCRIBE ACCIDENT**

Describe clearly how the accident occurred
--

**VI. FUTURE PREVENTION**

How would you prevent reoccurrence?
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What corrective action has been or will be taken? (if Applicable)
---

Supervisor (Print or Type)	Signature	Date:	Contact Number
Dept. Head/ Designated Individual	Signature	Date:	



## APPENDIX C: CONFINED SPACE ENTRY CHECKLIST

This is an example of a CONFINED SPACE ENTRY PERMIT. The permit depends on the atmospheric and physical hazards of that particular confined space. Entry must comply with NHDOL Rule 1403.14 Confined Space Entry.

### GENERAL

Location of confined space \_\_\_\_\_

Type of confined space \_\_\_\_\_

Can work be done without entering the confined space? YES or NO

Background of space (history, potential hazards, etc.) \_\_\_\_\_

Entry date \_\_\_\_\_ Entry time \_\_\_\_\_

Estimated length of stay in the space \_\_\_\_\_

Employees assigned \_\_\_\_\_

Supervisor in charge of entry \_\_\_\_\_

### PREPARATION FOR ENTRY

Electrical hazards controlled YES or NO If no, why? \_\_\_\_\_

Lockout procedures utilized YES or NO If no, why? \_\_\_\_\_

Incoming materials controlled YES or NO How? Blanked off Lock out Flushed

Types of incoming materials Sewage Water Gasses Chemicals Other

### ATMOSPHERIC TESTING

Tested for: Greater than 19.5 - % Oxygen Reading \_\_\_\_\_ within accepted limits YES or NO

Less than 10 - % of LEL Reading \_\_\_\_\_ within accepted limits YES or NO

Less than 35 PPM CO Reading \_\_\_\_\_ within accepted limits YES or NO

Less than 10PPM H2S Other toxins-were any noted YES or NO Controlled

Atmosphere testing time \_\_\_\_\_ Testing person \_\_\_\_\_

Instrument used for testing \_\_\_\_\_

Calibrated YES or NO Date of calibration \_\_\_\_\_

### OTHER PROTECTION

Air Monitored Continuously ( ) Personal Protective Equipment ( )

Ventilation Provided/Used ( ) Respiratory Protection ( )

Safety Harnesses Provided/Used ( ) Approved Lighting Utilized ( )

Fall Protection Provided/Used ( ) On-Site Communications Present ( )

Emergency Rescue Capability ( ) Outside Attendants Available ( )

### PERMIT

Permit Number \_\_\_\_\_

Permit Date \_\_\_\_\_

Entry Authorized By \_\_\_\_\_

Signature \_\_\_\_\_

Remarks \_\_\_\_\_

Permit not valid following (date & time) \_\_\_\_\_

Site Specific Considerations (List) \_\_\_\_\_