

**City of Houston
Health and Safety
Program Evaluation**

for

**City of Houston
Parks and Recreation Department**

Prepared By:
Leo W. Benford, CSP, ARM, ALCM
Aon Global Risk Consulting

AON
Insure your vision

Executive Summary

The function of this assessment is to provide feedback to the City of Houston and Department Management on the safety status of the Houston Parks and Recreation Department (HPARD). Aon conducted a review of the operations and safety performance of this department. This report documents the results of the weeklong assessment conducted from June 22 through June 25, 2009. The review was performed in accordance with the guidelines and principles developed by Aon along with general industry and Best Practices.

The objective of the assessment was to provide credible, objective, value-added information to the Parks and Recreation Team, (Executive Management, Middle Managers and Line Managers) and The City of Houston. The performance assessment is also intended as a catalyst to promote behavioral change to facilitate continuous safety improvement in:

- Implementation and maintenance of the Accident Prevention Plan,
- Enforcement of safe work procedures (Behavioral Based Safety),
- Establishment and implementation of the Safety Committee,
- Accountability for Safety & Health and;
- Establishing a culture that continues to embrace safety goals and objectives on a proactive basis.

Without a thorough identification of risks, effective governance and management cannot be achieved. The need to identify, assess and control these risks must be an integral part of decision-making and safety-operational management process.

The Houston Parks and Recreation Department (HPARD) is currently under the leadership of Director, Mr. Joe Turner. The Parks and Recreation Department was created in 1916 with two facilities (Sam Houston Park and Hermann Park). Since that time, the HPARD system has grown to over 350 developed parks (includes swim areas, golf courses, fitness centers, indoor courts), 200 green spaces (over 38,945.42 acres) and approximately 1,200 full and part-time employees. HPARD is composed of nine divisions including;

- Recreation and Wellness Division,
- Greenspace Management Division,
- Facilities Management and Development Division,
- Management and Finance Division,
- Grants, Legislation and Development,
- Urban Park Rangers Division,
- Park Administration Division,
- Lake Houston Park Division and;
- Communications Division

The department owns and operates 57 community centers (at least thirteen community centers offer weight-training facilities, and many feature an indoor gym and aerobics classes) across the city. The Houston Parks and Recreation Department also operates and maintains 39 outdoor swimming pools and 13 water playgrounds. Also included in the parks system is 3 Tennis Centers with 60 lighted, outdoor - hard courts. In addition to the staffed Tennis Centers, the Department provides 145 tennis courts in 78 neighborhood parks across the city.

The Parks and Recreation Department has seven public golf courses, skate parks, gardens, dog parks and other recreation areas. The Parks & Recreation system is also accredited through the Commission for Accreditation of Park and Recreation Agencies (CAPRA based on 156 standards).

Health, Safety & Environmental

After the opening conference, all persons (multiple levels of employment) contacted were receptive to this assessment of the management controls, implementation strategies and field observations (included focus groups & personal interviews on safety and health). Positive feedback was provided throughout the assessment period.

The Parks and Recreation Department is operating under the guidance of a written Accident Prevention Plan (APP). Mr. David Nutt, Safety Representative, provided a copy of this plan for review. The copy provided was dated November 2005. The program is directed by two Safety Representatives and a Risk Management Division. The APP appears to have the full support of Senior Management as accountability guidelines are established and addressed in the performance review (on an annual basis and according to APP section I, page 6).

The APP is a comprehensive written safety and health plan that addresses industry specific subject matters. The plan is scheduled for an annual review (minimum); however, there was no information to support such activities are taking place.

Safety is considered a key component for the Parks and Recreation Department and can be strengthened with established - dedicated goals and objectives (monitored, measured and communicated).

Another key strength is the Workers' Compensation Management Team (Ms. Earnestine S. Mercier and Ms. Wanda Ray). Under the Risk Management Division, this team has assisted in the reduction of the overall lost cost by at least 50-60% in each of the past 2 years. The lost cost has declined dating back to the 2005 year. An injury recording and reporting system is in place and communicated to employees at the time of hire. A checklist is used by this division to make sure that all subject matters are addressed. A post injury follow up, modified duty plan, a Bona Fide' Offer letter and consultations with the attending physicians (employee escorted to the doctor's office) are included in these practices. Loss frequency was also stable with no defined loss

patterns or trends (common injuries were to the lower back, multiple parts of the body and lower extremities).

Medical programs (Concentra, internal physician with the City of Houston, etc), managed care, accident reporting, investigations, and recordkeeping are areas that are considered strong points for this department. The management and supervisory personnel have been trained and updated on the Standard Operating Procedures (SOP) related to injury reporting and investigations. Some of the management and supervisory personnel expressed interest in updated training (extended time since employees have had to complete such activities) on investigations & reporting including root causes and corrective actions.

The new hire or employee orientation is a safety management component that is consistent throughout and used to convey information to new hires. Each participant will attend the City of Houston's orientation program addressing safety (AP-2-21-Employee Safety & Health, AP2-14 – Purchase, Use, Storage or Disposal of hazardous Waste & AP2-2-Motor Vehicle Assignment & Use), and health, rules/regulations, benefits, etc. The employee orientation and training is a vital effort in the overall loss reduction effort; therefore, it is important that the program be expanded once the employee is assigned to a division. This includes increased on the job training (OJT), training on specialized equipment, PPE, etc. Some divisions provide a thorough orientation, while others do not. A training team is present to assist with tracking, execution of training, etc.

Equally important is the "Safety Committee". A Committee was present in the past; however, it has not been functional within the past 4-6 months. This group can function to create and maintain interest in safety and health, thus reducing accidents (mission is also to aid and advise both management and employees).

The recommendations contained in the next section are considered control measures (general industry and Best Practices) that can assist the department in further reaching your loss reduction targets. The recommendations are based on principles used by a wide range of companies, safety research, and through proven methods in safety and loss prevention.

Recommendations

- An Accident Prevention Plan (APP) is utilized to convey and implement the safety efforts for this department. This is a comprehensive plan that addresses a wide range of potential loss sources and industry recommended procedures-control measures. A copy of the plan was provided for review and served as a guide for the administrative portion of the assessment. The copy provided was dated November 2005. The program should be updated, modifications completed as needed and released with a new reissue date.
- At the same time (annual basis), review and reissue the safety policy statement to employees (Review & Revision Component, page 24 and ii of the preface, section review). This policy comes from the Director of the Parks and Recreation system stating management's commitment to employee safety and health. An updated written health

and safety policy helps promote an effective Accident Prevention Plan. Such a policy should reflect the special needs of your workplace and should be regularly reviewed and updated. To be effective, a policy should:

- involve senior management and representatives in the preparation of the policy,
 - be seen as consistent with the workplace's objectives of operating in an efficient and predictable manner,
 - be relevant to workplace's real needs, not adopted from another workplace and;
 - be accepted as equal in importance to the workplace's other policy objectives.
-
- Several of the supervisory personnel were familiar with the APP; however, a vast majority of the field personnel and some supervisors have not reviewed the APP. The focus groups identified a need to further communicate the plan to all levels of employment. The information should be addressed and documented in safety meetings or training classes.
 - Safety and health goals and objectives (Section I, page one of APP and or AP 2-21) should be developed or reestablished. During the assessment, there were few if any employees that were aware of any safety and health goals/objectives. It is important to treat safety and health as all other department goals and objectives. It is also important to communicate what the targets are, and the standards (activity or results oriented) used to accomplish these goals. In addition, constant feedback and updates are needed, and should be provided to all stakeholders.
 - The incident rates (Total Recordable Incident Rate/TRIR, Lost Workday Case Rate/LWDCR, etc = Total # of injuries & illnesses x 200,000/manhours worked by all employees) should be calculated at least monthly, provided to all levels of management, and discussed with employees. This will assist with targeting loss reduction goals.
 - The Bureau of Labor Statistics has a website that can assist with these calculations (<http://data.bls.gov/IIRC>). Incidence rates can be used to show the relative level of injuries and illnesses among different industries, firms, sections or operations within a single firm. Because a common base and a specific period of time are involved, these rates can help determine both problem areas and progress in preventing work-related injuries and illnesses.
 - Make sure that all accidents are reported according to your internal guidelines. Claims without a reported employee injury can be reported to TPA and designated as "report only". This gives the departments and/ or Safety Department a record of a potential claim. In addition, this will help with "Near Miss" tracking and trend identification.
 - The City of Houston Risk Management department provides services related to safety and health. It is important to utilize these services to assist in your loss reduction efforts. With over 1200, it is impossible for two Safety Officers to address all concerns.

The supervisory personnel (focus groups) have requested additional support on location specific safety and health topics. In addition, personnel at the Wheeler Street facility are requesting additional presence from the Safety Representative. An additional safety representative can assist with these requests.

- The Safety Committee is an important tool in getting the message for safety and health to employees. This group can function to create and maintain interest in safety and health, thus reducing accidents. The mission is also to aid and advise both management and employees on related matters. Success lies with the mission, the goals and the objectives, it's staffing, structure and the support it receives from all levels within your organization.

Committee membership should be rotated periodically. This ensures a fresh set of ideas, and also increases the number of employees who are trained to look at the operations through the eyes of safety. The goal is to get more employees involved and interested in safety and health (behavioral changes). Safety communication should be increased at all levels to make sure that safety and health continues to be a targeted goal/objective.

- Inform employees of the Driver-Worker Safety Achievement Awards program.
- Consideration should be given by the Safety Committee (Management Component, page 2) to provide incentives i.e. recognition and rewards for safe work behaviors, accomplishments of team and departmental safety goals.
- Good efforts are underway by the Human Resources (HR), Training and Workers' Compensation Division during the initial safety review. However, employees would like to see more hands on training, and expanded safety and health topics relevant for their specific operations (after initial hire & orientation).
- It is important to increase "on the job" training for employees that maybe involved in high hazard operations (proper use of hand tools and other mechanical equipment, personal protective equipment training, etc). On the job training is a Best practice that is widely used because the trainee can be producing while he/she is being trained. A Job Hazard/Safety Analysis (JHA/JSA), over-the shoulder coaching and job instruction training are key methods utilized.
- A Job Safety Analysis (JSA) or Job Hazard Analysis (JHA) should be conducted to determine and establish proper work procedures (Inspection & Audit Component, page 17) in sections experiencing lower back injuries, falls and from being struck by or against objects. Supervisors and employees can use the findings of a JSA/JHA to eliminate and prevent hazards in their workplaces (including field locations). This is likely to result in fewer worker injuries, and illnesses; safer, more effective work methods; reduced workers' compensation costs; and increased worker productivity. The process includes the following:
 - Involve your employees

- Review your accident history
- Conduct a preliminary job review
- List, rank, and set priorities for hazardous jobs
- Outline the steps or tasks

The key of each basic step of the job is to identify potential hazards and to recommend the safest way to do the job.

- Enforce the attendance required at the mandatory training classes. Also address communications between management and the training team. Supervisors feel they are not being properly notified (or given time) when classes are available; however, the training team provided a detailed database with dates, attendees, notices, etc. There appears to be a gap in communication on what safety topics are offered, when offered along with dates/times (between training & supervisors-management).
- Develop a checklist (division or section specific) that can be utilized to monitor work activities (work practices and conditions) conducted in The Department, and to locate and report existing and potential hazards having the capacity to cause accidents in the workplace. Once identified, the goal is for the corrective actions to fix not only the action item, **but to fix the system.**

Self-inspections are necessary if you are to know where probable hazards exist, and whether they are under control. The inspection checklist form would also serve as a tool to educate employees and supervisory personnel on unsafe acts as well as conditions.

A checklist can aid in the identification of potential loss sources as well as address key safety and health matters. When the annual inspections are completed by the Safety Officer(s), the supervisors should be present and the observation used as a time to train on hazard recognition-identification.

- Increase hazard recognition training (National Fire Protection Association-NFPA, American National Standards Institute-ANSI, local, state and federal requirements where applicable) for those persons conducting the accident investigations, (corrective actions) and those that are required to conduct facility and job inspections. During the focus groups, not all persons have received such training and were not as versed in determining corrective actions or identifying potential hazards in the workplace. Training should be mandatory for those persons that are required to conduct such an investigation. This type of training will help with the following:
 - Safety & health rules not being understood
 - Lack of education in hazard recognition
 - Hazards not controlled and often not recognized and;
 - Lack of ownership
- After any hazard recognition training, make sure that all supervisors and management personnel conduct workplace inspections to note unsafe acts and conditions (as identified

during the tours and made part of the corrective action process). The NSC states that 85-90% of all accidents are from unsafe acts rather than conditions; therefore it is **also** important to address Behavioral Based Safety Initiatives (BBS).

- Initiate a BBS program (proactive approach) focusing on unsafe acts within the workplace. This could be from accident investigation reports, safe work observations, and inspection findings. Such a program can be started with those divisions with the highest loss potential.
 - Critical Behaviors are identified through review and analysis of accident data
 - Tasks are observed peer-to-peer focusing on the critical behaviors

The Process

- Safe work observations (JHA/JSA, inspections, etc)
 - Observations = Feedback – immediate
 - Measurement = data collection, tabulations, analysis
 - Implementation and Communication of corrective actions
- A comprehensive safety assessment of the work areas (and or activities) at the main location on Wheeler should be conducted by the Safety Committee. This is the largest facility (largest concentration of employees and exposure) presenting the greatest potential for accidents and injuries. The BBS process can start at this location. The National Safety Council states that 85-90% of all accidents are from unsafe acts, rather than conditions. Therefore, it is important to address both worker behaviors, (Behavioral Based Safety/BBS) as well as conducting audits for physical hazards.

The safety officer assigned to this section should focus on unsafe acts as well as conditions. The physical hazards are the easiest to deal with because there is little resistance to change.

- To assist with a BBS program each section should maintain a daily first aid log. Capturing this information would assist with any potential trend identification (need for corrective actions) and serve as a basis for any claims that may arise from minor injuries. This should also be communicated to employees using the first aid kits. This will help with “Near Miss” tracking and trend identification.
- Constant communications are important. Safe working is essentially a collaborative effort, involving all levels at HPARD. It hinges critically on effective health and safety communication (page 3). Health and safety education relies mainly on good communication, and consultation with employees on health and safety (also under safety committee) matters. This effort can be very important in creating and maintaining a safe and healthy working environment. Through consultation, your department can motivate the workforce and increase awareness of health and safety issues, and in turn your operations should become more efficient with a reduced number of accidents and work-related illnesses.

- A 360-degree communication effort with employees, supervisors and between departments should be a target objective. The sharing and communication of safety and health information is important to all stakeholders. Currently, some employees feel that they do not get responses on key issues or have better access to safety information.
- All departments with exposure requiring the use of respiratory protection should be trained in the elements within the Accident Prevention Plan "Respiratory Protection" section (page 37-38 of the APP). Several locations had cartridge respirators present as well as the potential for exposure to harmful substances. The focus group meetings did not identify any training, medical screening, or fit test. The key elements that should be followed include an administrator, selection, use, medical approval, employee training, fitting, cleaning, storage, disinfecting, and inspections.
- Each facility should maintain an accurate, up-to-date inventory of chemicals in the workplace. This inventory along with appropriate MSDSs must be posted or be kept in a readily available area for employee review and must be maintained in an organized manner. Most of the inventory lists reviewed were last dated 2005.
- Employees that require medical vaccinations should be tracked and the program administered. Based on interviews and focus groups meetings, several sections (or employees) have not had any updated vaccinations.
- Housekeeping improvements are needed at the main location on Wheeler. Keeping the workplace well organized helps you organize your work and help to prevent accidents and fires. It is most important that corridors, stairways and passages are kept clear of hazards and that access to all work areas are kept uncluttered. Where potential tripping and slipping hazards are identified then immediate action must be taken to remove or reduce the problem.

It is recommended that the 5S system be considered to accomplish this Best Practice. 5S is the name of a workplace organization methodology that uses a list of five Japanese words. This list is characterized as "standardized cleanup", however it is much more than cleanup. 5S is a philosophy and a way of organizing and managing the workspace and work flow with the intent to improve efficiency by eliminating waste, improving flow and reducing process unevenness.

Everyone in the workplace should be responsible for keeping things tidy and making sure that the work area is a safe place to conduct day-to-day activities. Employees should be encouraged if they see a problem that you cannot solve, talk to your manager.

- Provide Bloodborne Pathogens (BBP) training for potentially exposed employees (mainly custodians, carpentry, etc). Also provide kits for cleaning-handling purposes.

Fire & Life Safety

- All locations should conduct evacuation drills (some already conducting). All staff should be prepared to deal with any emergency that may happen during the course of a workday. In order to minimize the effects of such events, regular practice of emergency drills is essential to demonstrate responsibility and promotes calm, competent use of the plans in an emergency. The day to day changes at most of the facilities, makes frequent practice drills critical.
- Make sure that flammable storage cabinets are being used by locations with exposure.

Motor Vehicles

- Provide frequent driver safety/tailgate meetings in between the 3-year driver training courses.
- Make sure that all sections provide some type of documented inspection of their vehicles (monthly minimum).
- Provide expanded training for operations involved in the utilization of 15 passenger vans. The roll over probability of 15 passenger vans is linked to a high center of gravity, which tends to increase and shift to the rear as the van is loaded with persons and or cargo. It is important to increase the education efforts for this potential vehicle exposure.

The National Highway Transportation Safety Administration (NHTSA) suggests the following points to lower your rollover risk:

- Screen and train all drivers
- Remove the rear seat and limit the capacity to 9 persons including the driver
- Load forward seats first – at all times
- Communicate with passengers and parents about the high risks
- Do not tow anything behind the vehicle or load the roof
- Conduct a full safety inspection of the vehicle, including tire pressure and wear
- Include safety items such as a fire extinguisher, first aid kit and cell phone/radio – do not use these items while driving
- Require all passengers and the driver to wear proper safety restraints while the vehicle is moving

Department Observations

Focus Groups & Independent Interviews – Issues & Opportunities (Combined)

- Safety is important and addressed by the various sections
- Aware of safety and health and communicated on an ongoing basis
- Employees are concerned about safety & health
- Vast majority of employees interviewed had no knowledge of the “Safety Committee”
- Presenters of safety information at the Wheeler facility only address mundane topics and not relevant information for more experienced employees.
- Increase OJT (on the job training) on new equipment.
- Increase the dissemination of safety information
- Make sure the proper tools are provided and updated
- Better communication of safety issues, problems, goals/objectives, loss trends, changes
- Allotment of time when changes are introduced-implemented
- Provide consistent and pertinent safety training information in the field
- Increase Safety Department field presence at Wheeler location
- Cut out cell phone usage while at work
- Increased access to water during summer months (water at some facilities is stale)
- Increased toolbox meeting for specific topics (i.e. heat stress, cold, crime, back safety, etc.)
- Increase education and assessment on “Office Ergonomics”
- Making sure proper discipline is administered for safety violations
- Need consistency and enforcement on safety matters
- Need a more proactive approach to safety and health
- Would like to see safety incentives
- Better timeliness on equipment and vehicle repairs
- Safety Boots is a hot topic amongst several focus groups
- Vaccinations needed for employees

Department Focus Groups Breakouts

Wheeler

Custodians

- Bloodborne training & kits

Carpentry

- Restrict smoking to designated areas
- Better air circulation
- No city safety awards given for no vehicle or work related accidents

Heavy Construction

- Issues related to working with older equipment, borderline unsafe
- Incentives (acknowledgement, newsletters, recognition, cash, etc)
- Uninformed of safety and health outside of work group
- Safety Boots not suitable

Vehicle Maintenance

- Lack of man power to keep up with repairs
- Access to additional safety and health support
- Incentives

Supervisory Personnel

- More support from safety officer assigned to Wheeler location
- Need to be updated on vaccinations
- Not enough time to handle all safety related matters and production issues
- Restrict cell phone use while at work (especially when using equipment)
- Proper allotment of time when changes are implemented
- Office ergonomics
- Better communication of safety issues, problems, goals/objectives, loss trends, changes

Paint Shop

- No major issues, good support

Herman Park

- Discipline not used properly for safety violations
- Need more proactive HSE approach
- Consistency on safety support
- Standard format for inspections i.e. safety checklist

Memorial Park (Field Operations)

- Better facilities
- Better PPE mainly boots

Memorial Park Golf

- Incentives
- Better accountability for safety and health
- More safety meetings conducted by HSE

Judson Robinson Community Center

- Better equipment when handling tables and chairs for event set up
- Increased back injury prevention training-evaluations

Field Operations

- Better or comfortable PPE
- Changing PPE for work conditions (summer, winter, etc)

McGregor Operations (tennis, pool)

- No issues to report

Sharpstown Community Center

- No issues to report

Gessner Golf Course

- Assistance with getting rid of older scrap equipment
- More inspections by safety team

Martin Luther King

- Problems with timely vehicle repairs

Milby

- Accessibility of assigned safety officer

Bissonett

- No issues to report

Candle Light Community Center

- Training on 15 passenger vans

North Shepherd (Forestry & Safety)

- Better communication between departments
- Access to good drinking water
- Responsiveness to safety questions from supervisors

- Proper (or equipment in need of repair) equipment for the task at hand
- Better safety boots
- Personnel conducting safety meeting not versed on subject matter(s)

Wallisville

- No issues to report

Judson Robinson

- Exit obstructed with equipment, chairs, etc.

Wheeler Street

Paint Shop

- Recover the box fan (replace rear cover) with exposed openings (no greater than ½ openings).
- Provide secondary containment for storage of 5 gallon containers (over 15-20) and 55 gallon drums
- Use Best practices i.e. changing and inspecting filters in the spray booth to reduce emissions of potential hazardous air pollutants during spraying operations of paints or other materials.
- Repair the manometer on the spray paint booth (a device employed to measure pressure)

Carpentry Shop

- Need bloodborne pathogen kits
- Stairs blocked from overhead storage area
- Load limits not calculated or posted for overhead storage area
- Exposed outlet on the wall between paint room and carpentry shop
- Exit braced from opening door (exit route)
- Unguarded grinder
- Missing fire extinguishers from posted areas
- Replace blade guards when saws are not being used
- Housekeeping improvements are needed in this area
- Make sure that any damaged or frayed electrical cords are removed from service
- Improper storage of flammable/combustible materials (need flammable materials locker)

Electrical Shop

- Cord used for permanent power source (to overhead lights)
- Load limits not calculated or posted for overhead storage area

Maintenance Shop

- Unsecured compressed gas cylinders
- Blocked/obstructed exits
- Outdated fire extinguishers
- No eye wash fountain in the area

Golf Course (Memorial Park)

- Flush and clean eyewash cabinet (possible install automatic system)
- Update MSDS inventory
- Inspect and make sure electrical cords are not damaged
- Load limits not calculated or posted for overhead storage area
- Adjust grinder
- Provide a flammable materials storage cabinet

Golf Course (Gessner)

- Exposed opening in the electrical panel box
- Load limits not calculated or posted for overhead storage area
- Improve housekeeping by discarding old-unused materials – equipment
- Update MSDS inventory

Bissonnet

- Repair grinder (missing side guard)

Milby

- Dispose of old 55 gallon drums of waste materials. Also, provide secondary containment for storage of waste containers
- Exposed opening in the electrical panel box
- Adjust grinder
- Replace belt guards on the Tora Z-Master
- Improve housekeeping by discarding old-unused materials – equipment

EVALUATION STATEMENT

The purpose of the Health and Safety Program evaluation is to provide a basis for each department to establish or reinforce its own program.

Loss prevention is a key ingredient in your overall risk control program. Being able to identify hazards unique to your department will enable you to build your program with the ultimate goal of reducing the costs and frequency associated with occupational injuries.

Completion of this program will indicate those strong areas of your health and safety program and will also show those areas that need additional attention to make your program complete.

This Aon Global Risk Consulting's evaluation is purely advisory and intended to assist our clients in health and safety procedures. The adoption and implementation of changes is the responsibility of the client. Observations of Aon Global Risk Consulting are based on practices and conditions observed, and information provided at the time of our visit. They do not imply or guarantee compliance with local, state or federal regulations applicable to such practices and/or conditions.

SCORING

The scoring of the health and safety evaluation profile is based on a percentage scale. The scale is zero to two, with zero being the lowest possible score and two being the highest. The zero represents the range of zero to forty-nine percent or none complete. The one represents a score between the fifty and ninety-ninth percent. The two represents a score of one hundred percent or exceptionally done.

All Aon Global Risk Consulting' inspections, reports and recommendations are purely advisory and for the purpose of assisting clients and insureds in risk control and safety procedures. Observations and recommendations are the result of practices and conditions observed and information made available to us at the time of our visit and do not purport to refer to or guarantee compliance with local, state or federal regulations which may be applicable to such practice and conditions. This report should not be considered a definitive listing of all existing hazards nor an absolute solution to all indicated hazards. No responsibility for the implementation, management and operation of risk control and safety procedures is assumed by Aon.

EVALUATION DATA SHEET

Date Evaluated:	6/22-25/2009
Department/Location Name and Address:	Parks and Recreation Department 601 Sawyer, 2 nd Floor Houston, Texas 77007
Present Employee Count:	1200
Contact's Name:	Dana Doan
Contact's Title:	Safety Supervisor
Contact's Phone:	(713) 837-3993/(713) 306-2548
Evaluation Performed By:	Leo W. Benford, CSP, ARM, ALCM, CSHO

HEALTH AND SAFETY PROGRAM EVALUATION PROFILE

Description	Elements	Possible Points	Actual Points	Score %
I. Management Support and Leadership	10	28	21	75
II. Medical Programs	8	20	16	80
III. Accident Recording System	4	14	12	86
IV. Employee Orientation	5	12	12	100
V. Department Supervision	7	18	16	89
VI. Safety Committees	7	14	8	57
VII. Specialized Training	3	54	54	100
VIII. Accident Investigation	8	18	16	89
IX. Department Hazard Evaluation	9	24	23	96
X. Safety Communication	5	10	8	80
XI. Occupational Illness Analysis	8	22	19	86
XII. Emergency Preparedness	12	36	36	100
XIII. OSHA Standards	13	84	71	85
XIV. Motor Vehicles	8	16	15	94
TOTALS	106	370	327	88

I. MANAGEMENT SUPPORT AND LEADERSHIP

(28 Points)

		Points	
		Possible	Actual
1.	<p>Does the department have a published safety policy? <i>Yes, a safety policy is in place; however, there was no indication that it is reissued on an annual basis or communicated to employees annually.</i></p> <p><i>The Department is also functioning with an Accident Prevention Plan (APP). This is a comprehensive plan addressing a wide range of subject matters for general industry loss sources. Addressed disseminating this information to all employees or making the program accessible to all levels of employment via intranet, hard copies, etc.</i></p>	2	2
2.	<p>Is it signed by a member of top management? <i>Yes, the policy is signed by The Director.</i></p>	2	2
3a.	<p>Is there a full-time or <u>part-time person</u> responsible for safety? <i>Yes, there are two HSE Officers operating for this department.</i></p> <p>If part-time, what other duties does this person have? <i>N/A</i></p>	2	2
4.	<p>How frequently does the senior leadership, manager, director, etc., perform safety inspections at your location? <i>The Safety Officers conduct documented inspections on an annual basis. All others are completed by the supervisors and some managers. These are mainly visual with no tracking mechanism. Addressed need for increased-documented inspections of the larger locations, i.e. Memorial and Wheeler.</i></p> <p>Monthly (2 pts.), Quarterly (1 pt.) or Less than Quarterly (0 pts)</p>	2	1
5a.	<p>Is there an Department Safety Committee? <i>Yes, the APP addresses a safety committee; however, it has not been functioning within the past 4-6 months. Most employees (independent interviews & focus groups) were not aware of such a committee.</i></p>	2	1
5b.	<p>If yes, how often do they meet? <i>Intent was to meet at least quarterly; however, less than quarterly has been the result in the past 4-6 months.</i></p> <p>Monthly (2 pts.), Quarterly. (1 pt), or Less than Quarterly (0 pts)</p>	2	0
5c.	<p>Are any of the top management officials members on the safety committee? <i>Yes</i></p>	2	2
5d.	<p>Is the committee task driving? i.e. find way to improve processes. <i>No specific recommendations were provided from those persons interviewed.</i></p>	2	0
6a.	<p>Does top management receive reports on safety performance activity? <i>Yes</i></p>	2	2
6b.	<p>How often? <i>Monthly</i></p> <p>Monthly (2 pts.), Quarterly (1 pt) or Less than Quarterly (0 pts)</p>	2	2
7.	<p>Does top management visibly display their support for the safety program?</p> <p>Briefly explain: <i>The Management and Supervisory team members interviewed during this assessment displayed a genuine interest in Safety & Health. A positive attitude was presented by the various contacts throughout the assessment process. Listed in APP are directives on commitment to safety and health.</i></p>	2	2
8.	<p>Are there written standards concerning what management's responsibility should be in relationship to the safety/loss control program? <i>Job descriptions outline the management-supervisory safety and health responsibilities. Directives are listed in the APP.</i></p>	2	2
9.	<p>Is safety/loss control accountability clearly defined in job descriptions of management personnel? <i>Yes, information was present to support such efforts. Communications of safety goals and objectives is listed in the APP; however, few employees were aware of such requirements.</i></p>	2	2
10.	<p>Have all responsible individuals been provided a copy of this, and are they held accountable? <i>Some of the managers were not aware of the annual targets. This information or objectives have not been communicated to all levels of management.</i></p>	2	1

II. MEDICAL PROGRAM

(20 Points)

		Points	
		Possible	Actual
1.	Are prospective employees given a post-offer health examination? N/A	2	2
2.	Do you have an RN/LPN on duty? <i>Yes, the HPARD uses Concentra to handle related activities (acute & urgent care).</i>	2	2
3.	Have any supervisors/employees received certified first aid training? <i>Yes, CPR-first aid is offered to employees. Also included are HSE and Fire Wardens. Trainers are on staff to teach these classes.</i> <i>If yes, how many? When does the certification expire? There are at least 2-3 employees per division (not all persons would be first responders) for an estimated total of 20-25.</i>	2	2
4a.	Have first aid facilities been established by a medical doctor and/or hospital/clinic? <i>Yes, The HPARD uses Concentra to handle related activities.</i>	2	2
4b.	Have standing orders been provided and issued to the RN or LPN? <i>Yes, the Concentra system is familiar with these operations and meets with management relative to Managed Care.</i>	2	2
5.	Is access to first aid supplies controlled and a first aid log maintained? <i>Not at this time; however, supplies are controlled, but no logs are currently maintained as to how supplies are used. Management and HSE contacts were receptive to this recommendation and reporting assessment.</i>	2	1
6.	Are first aid supplies updated as to their shelf life? <i>The Safety Officer and Supervisors conduct inspections on these supplies and the cabinets restocked as needed.</i>	2	2
7.	Are the services of a medical doctor retained? <i>Yes, The PARD (through HR- COH Risk Management) uses Concentra to handle related activities. They also have access to two Physicians (one contract & one staff).</i>	2	2
8a.	Are annual health examinations given to any employees or employee groups? <i>Not at this time. There is a need to include employees that are required are have the potential to use respiratory protection.</i>	2	0
8b.	If yes, are procedures established to ensure that all employees subject to the physical actually get one? <i>There are some employees that are required to have vaccinations and no one has provided information for these updates.</i>	2	1

III. ACCIDENT RECORDING SYSTEM

(14 Points)

		Points	
		Possible	Actual
1a.	Is there an injury recording system being completed? <i>Yes, the Workers Compensation Team uses a 6 step process. A checklist is also used in the event of an injury (to gather and record information needed for the process. A workability guideline is also given to employees.</i>	2	2
1b.	Are injuries discussed with the other employees? <i>Some of the department supervisors and HSE personnel verified (provided documentation) that such information is addressed during daily, weekly and monthly safety sessions. The level of information varied among the various divisions.</i>	2	2
2a.	Is someone in charge of the Workers' Compensation/claims program? <i>If yes, title: Ms. Earnestine S. Mercier, Administrative Coordinator and Ms. Wanda Ray, Administrative Manager.</i>	2	2
2b.	Have proper claims management techniques been implemented? <i>Yes, the City of Houston has dedicated personnel along with personnel within the HPARD system. A fully integrated managed care program is in place.</i>	2	2
3a.	Are frequency and severity rates computed for your department? <i>No rates were provided; however, the City of Houston HR Department provides this information on a periodic basis.</i>	2	1
3b.	If yes, indicate what the most recent rates are and how often are they calculated? <i>Monthly (2 pts), Quarterly (1 pt) or Less than Quarterly (0 pts)</i>	2	1
4.	Does top management receive periodic analysis reports? <i>If yes, please indicate their name(s) and title(s)? There are at least 15-20 department managers and or supervisors that receive this information. Some levels of managements have not received this information. This includes line management and Sr. management.</i> <i>Key personnel include;</i> <i>Mr. Joe Turner, Director</i> <i>Mr. David Nutt, Safety Representative</i> <i>Mr. Harold Norris, Risk Management</i> <i>Ms. Earnestine S. Mercier, Administrative Coordinator and;</i> <i>Ms. Wanda Ray, Administrative Manager</i> <i>Mr. Bob Murray, Safety Representative</i>	2	2

IV. EMPLOYEE ORIENTATION

(12 Points)

		Points	
		Possible	Actual
1.	Is there a formal safety orientation program for new employees? <i>Yes, an internal program is in place along with addressing the requirements set by City of Houston HR department. The PARD also addresses information relative to the department.</i>	2	2
2.	Is a specific individual responsible for new employee safety orientation? Title: Dr. Laura Wilson & Jose Robleto	2	2
3a.	Is there a published booklet listing established safety rules and regulations? <i>Yes, employees receive information during the orientation process. This handout addresses safety, HR matters, benefits, etc.</i>	2	2
3b.	Is this booklet reviewed with all new employees during orientation? <i>Yes, all new hires should complete this process along with some dedicated new hire requirements set within the PSRD.</i>	2	2
4.	Do supervisory personnel have department checklists concerning particular department hazards, which should be, pointed out to the new employee upon her/his arrival? <i>Yes, there are key topics addressed in the orientation process.</i>	2	2
5.	Is the new employee evaluated periodically on her/his safety performance? If yes, please indicate how: <i>Yes, there is a follow up with employees with some divisions conducting on the job training. The focus groups identified a need for additional On the Job training (OJT).</i>	2	2

V. DEPARTMENT SUPERVISION

(18 Points)

	Points	
	Possible	Actual
<p>1. Have supervisory personnel ever received any formal safety/loss control training? i.e. OSHA 10 hour, 30 hour. <i>No formal classes outside of internal training.</i></p> <p>If yes, indicate subject covered and date:</p>	2	1
<p>2. Do supervisory personnel conduct on the job training of all new employees? <i>Not at this time for all divisions within this Department. A recommendation was addressed to increase this activity.</i></p>	2	1
<p>3. Do supervisory personnel use an employee contact program or five-minute safety talks to communicate safety to employees? <i>Several of the field operations conduct this type of activity. Others with less of an exposure hold monthly meetings or one on one coaching.</i></p>	2	2
<p>4a. Are supervisory personnel required to make periodic hazard identification inspections of their department? <i>Yes, these supervisory personnel are responsible for such activity. Some of the leadership personnel needed additional hazard awareness or identification training (based on focus groups). Better documentation (including a checklist) is recommended.</i></p>	2	2
<p>4b. If yes, how frequently is this done?</p> <p><i>Monthly (2 pts), Quarterly (1 pt), or Less than Quarterly (0 pts) for some departments (by HSE)</i></p>	2	2
<p>5a. Is a written report made of their inspection findings?</p> <p><i>If yes, to whom: the field or location supervisors along with the Safety Officer complete the inspections. The reports go to the various Division Managers along with HS&E. The Safety Officer inspections are documented.</i></p>	2	2
<p>5b. Is the inspection followed up routinely? <i>Yes, the Safety Officer or department representative would follow up on any open action items; however, not all results are reported. Where applicable (or when reported), a written corrective action report is forwarded to safety addressing the status of each action item.</i></p>	2	1
<p>6. Are staff supervisors evaluated and held accountable for their department safety performance? <i>Yes</i></p> <p>If yes, how: <i>Annual reviews are completed and HS&E addressed with employees.</i></p>	2	2
<p>7. Have supervisory personnel been trained in how to investigate accidents and make meaningful reports? <i>Most of the supervisors participating in the focus groups have completed such training. Follow up corrective action and investigation training should be scheduled to accommodate other employees (should be mandatory for those required to complete investigations and develop corrective actions).</i></p>	2	2

VI. SAFETY COMMITTEES

(14 Points)

	Points	
	Possible	Actual
<p>1. Do you presently have any active safety committees at your department? <i>No, not at this time. The group has not met within the past 4-6 months.</i></p> <p>If no, please indicate if there ever has been and why it was disbanded: <i>The committee remains in place; however, due to some changes, meetings have not been completed or continued.</i></p>	2	1
<p>2. What types of safety committees are presently active at your department?</p> <p><input type="checkbox"/> Executive Safety Committee for senior management</p> <p><input type="checkbox"/> Departmental Safety Committee</p> <p><input type="checkbox"/> Group Safety Committee</p> <p><input checked="" type="checkbox"/> Management/Employee Safety Committee</p> <p><input checked="" type="checkbox"/> Other (explain briefly) SHARC</p>	2	2
<p>3. Are minutes taken and distributed for each safety committee meeting? <i>Yes, but most employees were not aware of the findings or actions of the committee.</i></p>	2	2
<p>4. Can employees volunteer to serve on the safety committee? <i>Yes, however, the group is mainly management personnel.</i></p>	2	1
<p>5. Are safety committee members rotated on/off on a regular basis? <i>No, this has not been a common practice unless a person leaves the group.</i></p>	2	1
<p>6. Can you list some of the accomplishments of the safety committee for the past year?</p>	2	1
<p>7. Are goals established for the safety committee? <i>Goals have not been established.</i></p>	2	0

VII. SPECIALIZED TRAINING

(54 Points)

				Points	
				Possible	Actual
1.	Has an inventory been made of job procedures to determine those with high risk potential requiring special training? <i>Yes, risk assessments have been completed for several of the divisions and SOP established to evaluate the potential exposures for affected employees.</i>			2	2
2.	What types of safety training are given at your department?				
	<input checked="" type="checkbox"/> Forklift Training	0 pts	1 pt 2 pts	2	2
	<input checked="" type="checkbox"/> Lifting	0 pts	1 pt 2 pts	2	2
	<input checked="" type="checkbox"/> Hoist Safety	0 pts	1 pt 2 pts	2	2
	<input checked="" type="checkbox"/> Employee Fire Fighting (training on fire extinguishers)	0 pts	1 pt 2 pts	2	2
	<input checked="" type="checkbox"/> Confined Space (awareness only, no exposure or entry)	0 pts	1 pt 2 pts	2	2
	<input checked="" type="checkbox"/> Hazard Communication	0 pts	1 pt 2 pts	2	2
	<input checked="" type="checkbox"/> Accident Investigation	0 pts	1 pt 2 pts	2	2
	<input checked="" type="checkbox"/> Lockout/Tagout	0 pts	1 pt 2 pts	2	2
	<input checked="" type="checkbox"/> First Aid/CPR	0 pts	1 pt 2 pts	2	2
	<input checked="" type="checkbox"/> Personal Protective Equipment	0 pts	1 pt 2 pts	2	2
	<input checked="" type="checkbox"/> Emergency Evacuations (drills conducted at most locations)	0 pts	1 pt 2 pts	2	2
	<input checked="" type="checkbox"/> Bloodborne Pathogens (updates needed for some areas)	0 pts	1 pt 2 pts	2	2
	<input checked="" type="checkbox"/> Hearing Conservation	0 pts	1 pt 2 pts	2	2
3.	For each category of specialized training given at your facility, can you indicate the person giving the training and date?				
	Forklift Training	0 pts	1 pt 2 pts	2	2
	Lifting	0 pts	1 pt 2 pts	2	2
	Hoist Safety	0 pts	1 pt 2 pts	2	2
	Employee Fire Fighting	0 pts	1 pt 2 pts	2	2
	Confined Space	0 pts	1 pt 2 pts	2	2
	Hazard Communication	0 pts	1 pt 2 pts	2	2
	Accident Investigation	0 pts	1 pt 2 pts	2	2
	Lockout/Tagout	0 pts	1 pt 2 pts	2	2
	First Aid/CPR	0 pts	1 pt 2 pts	2	2
	Personal Protective Equipment	0 pts	1 pt 2 pts	2	2
	Emergency Evacuations	0 pts	1 pt 2 pts	2	2
	Bloodborne Pathogens	0 pts	1 pt 2 pts	2	2
	Hearing Conservation	0 pts	1 pt 2 pts	2	2

VIII. ACCIDENT INVESTIGATION

(18 Points)

	Points	
	Possible	Actual
1. Do you have an accident investigation procedure? <i>Yes, procedures are in place and training completed for the supervisory personnel. Updates needed for some person that may be required to conduct investigations.</i>	2	2
2. Are supervisors held accountable for the investigation of on-the-job accidents? <i>Yes</i>	2	2
3. Is follow-up made to ensure that causes of accidents are correctly identified and that corrective action has been taken? <i>Yes, the Safety Officer reviews accidents and assist with corrective actions. A need was addressed pertaining to update training for all field supervisory personnel required to conduct investigations.</i> <i>If yes, who is responsible: Safety Officer and Supervisors.</i>	2	2
4. Has a system been set up to investigate and correct situations which almost or could have caused an accident (near misses)? <i>The PARD is tracking losses and developing corrective actions. A recommendation was addressed to expand "Near Miss) reporting (possible trend identification).</i>	2	2
5a. Does the safety committee help investigate or reviewing on-the-job accidents? <i>No, not at this time. The Committee is not active.</i>	2	0
5b. Are loss trends identified and acted upon? <i>Yes, however, in the past three years, there were no loss patterns or trends. Common accidents were strains, falls and struck by/against.</i>	2	2
6. Is there an active job safety analysis (JSA) program at your department? <i>Written procedures are in place to conduct a JSA; however, the practice is not actively in place.</i>	2	2
7. Are accident-repeaters identified so further training can be scheduled? <i>Yes, counseling is conducted along with follow up training.</i>	2	2
8. Do any management members receive and review all accident reports? <i>Yes, the Division & Section Managers and the Safety Team members.</i>	2	2

X. SAFETY COMMUNICATION

(10 Points)

	Points	
	Possible	Actual
1. Are safety awards or other forms of incentives given to deserving employees for safety achievements? <i>No not at this time. The APP addresses this potential rewards system. The City of Houston has a recognition program for zero worker accidents and zero vehicle accidents.</i>	2	1
2. Do you have an in-department newspaper or newsletter? <i>No, there are similar handouts provided during safety month (from City of Houston).</i>	2	1
3. Do you have a safety suggestion system? <i>Verbal to supervisors, need to add suggestion box in each division</i>	2	2
4. Do you use any of the following in your safety communication program? <input type="checkbox"/> Employee-of-the-Month Program <input checked="" type="checkbox"/> Bulletin Board Safety Displays <input type="checkbox"/> Contests <input checked="" type="checkbox"/> Posters <input checked="" type="checkbox"/> Other (post copies of safety minutes) Safety Awareness month, Safe Driver/Safe Worker	2	2
5. Are you a member of the National Safety Council, ASSE, or any other safety organizations? <i>Yes</i> <i>If yes, please specify: National Safety Council, several HSE team members are also in the ASSE</i>	2	2

XI. OCCUPATIONAL ILLNESS ANALYSIS

(22 Points)

		Points	
		Possible	Actual
1.	Can you identify any potential health hazards in your department? <input checked="" type="checkbox"/> Noise <input checked="" type="checkbox"/> Chemicals/Solvents <input checked="" type="checkbox"/> Respiratory Exposure: <i>Programs need to be disseminated and communicated to workers.</i> <input checked="" type="checkbox"/> Confined spaces <i>Currently exposure not present, awareness level addressed.</i> <input checked="" type="checkbox"/> Excavations (<i>contractor exposure</i>) <input checked="" type="checkbox"/> Heat Stress (<i>employees would like additional information</i>) <input type="checkbox"/> Other (specify)	2	2
2.	Does your department perform periodic industrial hygiene tests for these hazards? Yes If yes, for what substances?	2	2
3.	Have steps been taken to address exposures identified as needing attention by the industrial hygiene tests? <i>Yes, records are maintained for past monitoring.</i> If yes, please describe: <i>Areas have been addressed with administrative and PPE controls.</i>	2	2
4.	Does your department maintain a file for records of industrial hygiene tests for known employee exposures? <i>Yes, records are maintained</i>	2	2
5a.	Are any employees or group of employees given health examinations due to potential exposures to any suspected or confirmed health hazards such as hearing or respiratory? <i>No not at this time (recommendation addressed to conduct medical screening and fit tests).</i> If yes, what type of examination?	2	0
5b.	Is their record documented? <i>Yes, when conducted, the information is maintained in the HR division records and safety.</i>	2	2
5c.	Are the employees advised of the results of such examination? <i>Yes, where applicable, limited need for this type of process.</i>	2	2
5d.	Is this activity tracked to assure all employees are examined annually, who are required? <i>Not at this time. An assessment is being conducted of all persons falling into this category. Vaccinations are needed for some employees.</i>	2	1
6.	What types of personal protective equipment are required at your department? <input checked="" type="checkbox"/> Safety Shoes <input checked="" type="checkbox"/> Safety Glasses <input checked="" type="checkbox"/> Face Shields (grinding area) <input checked="" type="checkbox"/> Hearing Protection <input checked="" type="checkbox"/> Gloves <input type="checkbox"/> Specialized Clothing <input checked="" type="checkbox"/> Respirators, <i>but no selection, medical screening and fit conducted (formal program recently developed)</i> <input type="checkbox"/> Other	2	2

7.	Are training programs in place for the above-checked personal protective equipment?	2	2
8.	Is a disciplinary system used to enforce the use of personal protective equipment? <i>Yes, the PARD has a progressive discipline program in place to address operations and rules violations.</i>	2	2

XIII. OSHA STANDARDS /BEST PRACTICES

(84 Points)

				Points	
				Possible	Actual
1. Hazard Communication Standard	Have the following elements been completed?				
<input checked="" type="checkbox"/> Chemical Inventory (some need to be updated)	0 pts	1 pt	2 pts	2	2
<input checked="" type="checkbox"/> Material Safety Data Sheets (MSDSs)	0 pts	1 pt	2 pts	2	2
<input checked="" type="checkbox"/> Employee Training	0 pts	1 pt	2 pts	2	2
<input checked="" type="checkbox"/> Written Program	0 pts	1 pt	2 pts	2	2
<input checked="" type="checkbox"/> Labeling	0 pts	1 pt	2 pts	2	2
2. Lockout/Tagout Standard	Have the following elements been completed?				
<input checked="" type="checkbox"/> Written program for isolating energy	0 pts	1 pt	2 pts	2	2
<input checked="" type="checkbox"/> Use of lockout/tagout devices	0 pts	1 pt	2 pts	2	2
<input checked="" type="checkbox"/> Periodic inspections	0 pts	1 pt	2 pts	2	2
<input checked="" type="checkbox"/> Training	0 pts	1 pt	2 pts	2	2
<input checked="" type="checkbox"/> Machine Specific Process (good guards on equipment)	0 pts	1 pt	2 pts	2	2
3. Confined Space Standard	Have the following elements been completed?				
<input type="checkbox"/> Identification of confined spaces and inventory	0 pts	1 pt	2 pts	N/A	N/A
<input type="checkbox"/> Determinants of Permit system	0 pts	1 pt	2 pts	N/A	N/A
<input type="checkbox"/> Periodic inspections	0 pts	1 pt	2 pts	N/A	N/A
<input type="checkbox"/> Atmospheric testing/Equipment	0 pts	1 pt	2 pts	N/A	N/A
<input type="checkbox"/> PPE and emergency response plan	0 pts	1 pt	2 pts	N/A	N/A
<input type="checkbox"/> Training (Entrants, Attendants and Supervisors)	0 pts	1 pt	2 pts	N/A	N/A
4. Bloodborne Pathogens	Have the following elements been completed?				
<input checked="" type="checkbox"/> Exposure Control Plan	0 pts	1 pt	2 pts	2	2
<input checked="" type="checkbox"/> Communicating Hazards to Employees (update training needed)	0 pts	1 pt	2 pts	2	2
<input checked="" type="checkbox"/> Preventive Measures	0 pts	1 pt	2 pts	2	2
<input checked="" type="checkbox"/> Methods of Control	0 pts	1 pt	2 pts	2	2
<input checked="" type="checkbox"/> Exposure Incident Plan	0 pts	1 pt	2 pts	2	2
<input checked="" type="checkbox"/> Exposure Determination	0 pts	1 pt	2 pts	2	2

XIII. OSHA STANDARDS/BEST PRACTICES

(84 Points)

						Points	
						Possible	Actual
5.	Hearing Conservation						
	Have the following elements been completed?						
	<input checked="" type="checkbox"/> Monitoring and recordkeeping (past records maintained)	0 pts	1 pt	2 pts	2	2	
	<input checked="" type="checkbox"/> Administrative controls or PPE	0 pts	1 pt	2 pts	2	2	
	<input checked="" type="checkbox"/> Audiometric testing (no major exposure, but plan in place)	0 pts	1 pt	2 pts	2	2	
	<input checked="" type="checkbox"/> Posting of Standard	0 pts	1 pt	2 pts	2	2	
	<input checked="" type="checkbox"/> Written Program	0 pts	1 pt	2 pts	2	2	
6.	Machine Guarding						
	Have the following elements been completed?						
	<input checked="" type="checkbox"/> Are guards in place? Good job of guarding equipment	0 pts	1 pt	2 pts	2	2	
	<input checked="" type="checkbox"/> Are employees trained not to use equipment without guards?	0 pts	1 pt	2 pts	2	2	
	<input checked="" type="checkbox"/> Is training being conducted?	0 pts	1 pt	2 pts	2	2	
7.	Ergonomics						
	Have the following elements been completed?						
	<input type="checkbox"/> Policy Statement	0 pts	1 pt	2 pts	2	2	
	<input type="checkbox"/> Ergonomic Committee (addressed by HSE)	0 pts	1 pt	2 pts	2	1	
	<input type="checkbox"/> Medical Management (Concentra & Physicians)	0 pts	1 pt	2 pts	2	2	
	<input type="checkbox"/> Ergonomic Analysis of Risk Factors	0 pts	1 pt	2 pts	2	1	
	<input type="checkbox"/> Education and Training	0 pts	1 pt	2 pts	2	1	
8.	Laboratory Standard						
	Have the following elements been completed?						
	<input type="checkbox"/> Policy	0 pts	1 pt	2 pts	N/A	N/A	
	<input type="checkbox"/> Training	0 pts	1 pt	2 pts	N/A	N/A	
	<input type="checkbox"/> Hazard Assessment	0 pts	1 pt	2 pts	N/A	N/A	

XIII. BEST PRACTICES/OSHA STANDARDS

(84 Points)

				Points	
				Possible	Actual
9.	Process Safety Management			N/A	N/A
	Have the following elements been completed?				
	<input type="checkbox"/> Materials Identified	0 pts	1 pt	2 pts	N/A
	<input type="checkbox"/> Formal Program	0 pts	1 pt	2 pts	N/A
	<input type="checkbox"/> Process Hazard Analyses	0 pts	1 pt	2 pts	N/A
	<input type="checkbox"/> Operating Procedures	0 pts	1 pt	2 pts	N/A
	<input type="checkbox"/> Emergency Plans	0 pts	1 pt	2 pts	N/A
	<input type="checkbox"/> Training	0 pts	1 pt	2 pts	N/A
	<input type="checkbox"/> Contractor Awareness	0 pts	1 pt	2 pts	N/A
	<input type="checkbox"/> Pre-start-up Safety Reviews	0 pts	1 pt	2 pts	N/A
	<input type="checkbox"/> Work Permit System	0 pts	1 pt	2 pts	N/A
10.	Personal Protective Equipment				
	Have the following elements been completed?				
	<input type="checkbox"/> Hazard Assessment	0 pts	1 pt	2 pts	2
	<input type="checkbox"/> Training	0 pts	1 pt	2 pts	2
11.	Respiratory Protection				
	Have the following elements been completed?				
	<input type="checkbox"/> Identification of Substances as Hazardous Exposures	0 pts	1 pt	2 pts	2
	<input type="checkbox"/> Respiratory Selection	0 pts	1 pt	2 pts	2
	<input type="checkbox"/> Health Evaluation and Surveillance	0 pts	1 pt	2 pts	2
	<input type="checkbox"/> Employee Training	0 pts	1 pt	2 pts	2
	<input type="checkbox"/> Fit Testing	0 pts	1 pt	2 pts	2
	<input type="checkbox"/> Respiratory Cleaning, Maintenance and Storage	0 pts	1 pt	2 pts	2
	<input type="checkbox"/> Respiratory Program Evaluation	0 pts	1 pt	2 pts	2

XIII. BEST PRACTICES/OSHA STANDARDS

(84 Points)

						Points	
						Possible	Actual
12. Electrical Safety-related Work Practices							
Have the following elements been completed?							
<input type="checkbox"/> Training	0 pts	1 pt	2 pts			2	2
<input type="checkbox"/> Use of Personal Protective Equipment	0 pts	1 pt	2 pts			2	2
<input type="checkbox"/> Protective Tools	0 pts	1 pt	2 pts			2	2
<input type="checkbox"/> Written Program	0 pts	1 pt	2 pts			2	2
13. HAZWOPER (Hazardous Waste Operations)							
Have the following elements been completed?							
<input type="checkbox"/> A Written Program	0 pts	1 pt	2 pts			N/A	N/A
<input type="checkbox"/> Employee Training	0 pts	1 pt	2 pts			N/A	N/A
<input type="checkbox"/> Communication	0 pts	1 pt	2 pts			N/A	N/A
<input type="checkbox"/> Documentation	0 pts	1 pt	2 pts			N/A	N/A

XIV. MOTOR VEHICLES

(16 Points)

		Points	
		Possible	Actual
1.	Please indicate your total vehicle count Owned <u>245</u>	2	2
2.	Do employees drive company vehicles home at night? <i>Yes, several management and Sr. Supervisory employees may take vehicles home. This exposure represents a small portion of the fleet.</i>	2	2
3.	Is a written procedure in place to verify the current status of the driver's license of each employee who has access to company owned/leased vehicles? <i>Yes</i>	2	2
4.	Do you perform an annual review of the driving record of those employees who have access to company owned/leased vehicles? <i>Yes, motor vehicle records (MVR) are checked on employees that operate a company vehicle for the PARD.</i>	2	2
5.	Have all employees at your department been informed that owned/leased vehicles are only to be used for authorized company activity and/or according to personal use guidelines? <i>Yes, affected employees are educated on this subject matter.</i>	2	2
6.	Are monthly safety inspections performed on all company owned/leased vehicles? <i>Vehicles are inspected visually on a daily basis. Not all divisions conduct written inspections.</i>	2	1
7.	Are employees required to use safety belts while driving company owned/leased vehicles? <i>Yes, a seatbelt policy is enforced.</i>	2	2
8.	Do you require all drivers to take defensive driving course when assigned driving duties and require refresher training every 3 years for accident free driver and as remediation post accident? <i>Yes, employees that drive or have the potential to drive a company vehicle take this course. There are several employees that are authorized to teach the NSC – DDC (or similar courses) driver education program. Documentation was present to support this effort. The training center maintains a database with all employees that have taken this course.</i>	2	2

**City of Houston
Health and Safety
Program Evaluation**

for

Houston Department of Health and
Human Services



Prepared By:
Scott B. Lassila, CSP, CSM, APS
Aon Global Risk Consulting

CONFIDENTIAL AND PRIVILEGED

TABLE OF CONTENTS

Executive Summary

Evaluation Statement

Scoring

Evaluation Data Sheet

Health and Safety Program Evaluation Profile

Audit Questionnaire

- I. Management Support and Leadership
- II. Medical Program
- III. Accident Recording System
- IV. Employee Orientation
- V. Department Supervision
- VI. Safety Committees
- VII. Specialized Training
- VIII. Accident Investigation
- IX. Department Hazard Evaluation
- X. Safety Communication
- XI. Occupational Illness Analysis
- XII. Emergency Preparedness
- XIII. OSHA Standards
- XIV. Motor Vehicles
- XV. Field Observations

EVALUATION STATEMENT

The purpose of the Health and Safety Program evaluation is to provide a basis for each department to establish or reinforce its own program.

Loss prevention is a key ingredient in your overall risk control program. Being able to identify hazards unique to your department will enable you to build your program with the ultimate goal of reducing the costs and frequency associated with occupational injuries.

Completion of this program will indicate those strong areas of your health and safety program and will also show those areas that need additional attention to make your program complete.

This Aon Global Risk Consulting's (AGRC) evaluation is purely advisory and intended to assist our clients in health and safety procedures. The adoption and implementation of changes is the responsibility of the client. Observations of AGRC are based on practices and conditions observed, and information provided at the time of our visit. They do not imply or guarantee compliance with local, state or federal regulations applicable to such practices and/or conditions.

SCORING

The scoring of the health and safety evaluation profile is based on a percentage scale. The scale is zero to two, with zero being the lowest possible score and two being the highest. The zero represents the range of zero to forty-nine percent or none complete. The one represents a score between the fifty and ninety-ninth percent. The two represents a score of one hundred percent or exceptionally done.

All Aon Global Risk Consulting' inspections, reports and recommendations are purely advisory and for the purpose of assisting clients and in risk control and safety procedures. Observations and recommendations are the result of practices and conditions observed and information made available to us at the time of our visit and do not purport to refer to or guarantee compliance with local, state or federal regulations which may be applicable to such practice and conditions. This report should not be considered a definitive listing of all existing hazards nor an absolute solution to all indicated hazards. No responsibility for the implementation, management and operation of risk control and safety procedures is assumed by Aon.

EVALUATION DATA SHEET

Date Evaluated:	March 30 and 31, 2009
Department/Location Name and Address:	Houston Health and Human Services 8000 North Stadium Drive Houston, Texas 77054
Present Employee Count:	Approximately 1300
Contact's Name:	Dana Doan
Contact's Title:	Safety Supervisor
Contact's Phone:	713-837-9303
Evaluation Performed By:	Scott B. Lassila, CSP, CSM, APS

HEALTH AND SAFETY PROGRAM EVALUATION PROFILE

Description	Elements	Possible Points	Actual Points	Score %
I. Management Support and Leadership	10	28	14	50
II. Medical Programs	8	20	17	85
III. Accident Recording System	4	14	5	36
IV. Employee Orientation	5	12	5	42
V. Department Supervision	7	18	7	39
VI. Safety Committees	7	14	9	64
VII. Specialized Training	3	32	16	50
VIII. Accident Investigation	8	18	9	50
IX. Department Hazard Evaluation	9	24	17	71
X. Safety Communication	5	10	5	50
XI. Occupational Illness Analysis	8	22	19	86
XII. Emergency Preparedness	12	36	34	94
XIII. OSHA Standards	13	52	43	83
XIV. Motor Vehicles	7	16	15	94
TOTALS	106	316	215	68%

MANAGEMENT SUPPORT AND LEADERSHIP

(28 Points)

	Points	
	Possible	Actual
1. Does the department have a published safety policy? Yes there is a policy, but some departments members were not aware of it or where is was located	2	1
2. Is it signed by a member of top management? Yes, signed by the director	2	2
3a. Is there a full-time or <u>part-time person</u> responsible for safety? The HR department has assigned a safety coordinator to the departments and some locations had a safety person, but not all locations had knowledgeable safety folks assigned to head the efforts. If part-time, what other duties does this person have? Depends on the location	2	1
4. How frequently does the senior leadership, manager, director, etc., perform safety inspections at your location? Based on the survey, no safety surveys are currently being completed by the senior leadership Monthly (2 pts.), Quarterly (1 pt.) or Less than Quarterly (0 pts)	2	0
5a. Is there a Department Safety Committee? It depends on the location. Some locations have a safety committee and some do not	2	1
5b. If yes, how often do they meet? Most meet quarterly Monthly (2 pts.), Quarterly. (1 pt), or Less than Quarterly (0 pts)	2	1
5c. Are any of the top management officials members of the safety committee? Form my employee focus groups no senior leadership is involved in the safety committees.	2	1
5d. Is the committee task driven? i.e. find way to improve processes ? In some cases	2	1
6a. Does top management receive reports on safety performance activity? Yes, but industry best practices are not followed. Frequency rates, severity rates are not calculated for each location and the employees are interested in seeing statistics for their locations within the department.	2	1
6b. How often? Ongoing from the COH HR department Monthly (2 pts.), Quarterly (1 pt) or Less than Quarterly (0 pts)	2	1
7. Does top management visibly display their support for the safety program? Yes Briefly explain: There is support at the top, but it needs to be conveyed to the employees in the field during staff meetings, communications, emails etc.	2	1
8. Are there written standards concerning what management's responsibility should be in relationship to the safety/loss control program? Yes/No, but based on the employee interviews some of the management know their responsibilities and others did not know if it was spelled out or where it could be found.	2	1
9. Is safety/loss control accountability clearly defined in job descriptions of management personnel? Based on my communication with the supervisors, I am not sure if safety is a part of the job descriptions or if the safety responsibilities are spelled out.	2	1
10. Have all responsible individuals been provided a copy of this, and are they held accountable? Accountability and communications seems to be a problem in some locations.	2	1

II. MEDICAL PROGRAM

(20 Points)

	Points	
	Possible	Actual
1. Are prospective employees given a post-offer health examination? No	2	0
2. Do you have an RN/LPN on duty? Yes at the clinics	2	2
3. Have any supervisors/employees received certified first aid training? Yes If yes, how many? Several are trained at each location and AED training is done too.	2	2
4a. Have first aid facilities been established by a medical doctor and/or hospital/clinic? Yes	2	2
4b. Have standing orders been provided and issued to the RN or LPN? Yes, to get injured employees back to work	2	2
5. Is access to first aid supplies controlled and a first aid log maintained? Yes, but most locations do not have a log	2	1
6. Are first aid supplies updated as to their shelf life? Most locations update their own supplies	2	2
7. Are the services of a medical doctor retained? Concentra	2	2
8a. Are annual health examinations given to any employees or employee groups? Yes, for employees that wear respirators	2	2
8b. If yes, are procedures established to ensure that all employees subject to the physical actually get one? Yes, by each location maintains those files	2	2

III. ACCIDENT RECORDING SYSTEM

(14 Points)

	Points	
	Possible	Actual
1a. Is there an injury recording system being completed? Yes, but industry best practices are not followed for maintaining statistics ie Frequency rates, severity rates	2	1
1b. Are injuries discussed with the other employees? Loss information is not communicated throughout the department s. This information will help to reduce similar accidents.	2	0
2a. Is someone in charge of the Workers' Compensation/claims program? Yes If yes, title: The HR department reports and maintains the records.	2	2
2b. Have proper claims management techniques been implemented? Yes, currently working with a TPA to help administer the claims	2	2
3a. Are frequency and severity rates computed for your department? No	2	0
3b. If yes, indicate what the most recent rates are and how often are they calculated? Unknown Monthly (2 pts), Quarterly (1 pt) or Less than Quarterly (0 pts)	2	0
4. Does top management receive periodic analysis reports? No If yes, please indicate their name(s) and title(s)? Unknown	2	0

IV. EMPLOYEE ORIENTATION

(12 Points)

		Points	
		Possible	Actual
1.	Is there a formal safety orientation program for new employees? Yes at the HR department downtown. The orientation at each bureau varies dramatically. I feel that the orientation process could be streamlined and be made more effective.	2	1
2.	Is a specific individual responsible for new employee safety orientation? Varies by locations Title:	2	1
3a.	Is there a published booklet listing established safety rules and regulations? Not by location to the best of my knowledge. One could not be produced	2	1
3b.	Is this booklet reviewed with all new employees (including office and shop) during orientation? No, but some locations have developed an orientation outline.	2	0
4.	Do supervisory personnel have department checklists concerning particular department hazards which must be pointed out to the new employee upon her/his arrival? The labs do for the most part, clinics do hands on orientations, and the BARC does some hands on or working with a current employee.	2	1
5.	Is the new employee evaluated periodically on her/his safety performance? Depend on the locations. Some are within 30 days some are over 90 days If yes, please indicate how: within 30 days – 2 pts, 60 days- 1 pt, over 60 days - 0pts-	2	1

V. DEPARTMENT SUPERVISION

(18 Points)

	Points	
	Possible	Actual
<p>1. Have supervisory personnel ever received any formal safety/loss control training? i.e. OSHA 10 hour, 30 hour, safety leadership. I do not believe that safety leadership training has been completed and many of the folks that I spoke to were interested in that type of training.</p> <p>If yes, indicate subject covered and date: Unknown</p>	2	0
<p>2. Do supervisory personnel conduct the job training of all new employees? Yes, but varies by location. Many of the supervisors do, but some pass this task off to other employees in the department</p>	2	1
<p>3. Do supervisory personnel use an employee contact program or five-minute safety talks to communicate safety to employees? Yes, but I do not think they are consistent</p>	2	1
<p>4a. Are supervisory personnel required to make periodic hazard identification inspections of their department? Some of the locations do a monthly walk through of the facility and some do not. Most are informal with no write ups on the findings. Documentation should be maintained</p>	2	1
<p>4b. If yes, how frequently is this done? Depends on the location, but should be done monthly Monthly (2 pts), Quarterly (1 pt), or Less than Quarterly (0 pts)</p>	2	1
<p>5a. Is a written report made of their inspection findings? Problems are written up and are sent to Building Maintenance department, but are slow to get things fixed.</p> <p>If yes, to whom: Building Maintenance</p>	2	1
<p>5b. Is the inspection followed up routinely? Depends on the location.</p>	2	1
<p>6. Are staff supervisors evaluated and held accountable for their department safety performance? No, currently safety performance is not part of the review process.</p> <p>If yes, how:</p>	2	0
<p>7. Have supervisory personnel been trained in how to investigate accidents and make meaningful reports? Based on my findings, the supervisors have been told how to fill out the accident reports, but no training has been completed.</p>	2	1

VI. SAFETY COMMITTEES

(14 Points)

	Points	
	Possible	Actual
1. Do you presently have any active safety committees at your department? Depends on the location If no, please indicate if there ever has been and why it was disbanded:	2	1
2. What types of safety committees are presently active at your department? Group Safety Committee is in place at some locations, but they are not task driven	2	1
3. Are minutes taken and distributed for each safety committee meeting? Yes for the locations that have the committees	2	1
4. Can employees volunteer to serve on the safety committee? Yes and are encouraged	2	2
5. Are safety committee members rotated on/off on a regular basis? Yes	2	2
6. Can you list some of the accomplishments of the safety committee for the past year? Some of the locations had improved safety performance, implemented a first aid supplies process	2	1
7. Are goals established for the safety committee? No goals are set	2	1

VII. SPECIALIZED TRAINING

(24 Points)

		Points	
		Possible	Actual
1.	Has an inventory been made of job procedures to determine those with high risk potential requiring special training? Yes, but depends on the location	2	1
2.	What types of safety training are given at your department?		
	<input type="checkbox"/> Safe Lifting/Back injury prevention	0 pts 1 pt 2 pts	2 1
	<input type="checkbox"/> Training on Equipment used	0 pts 1 pt 2 pts	2 1
	<input type="checkbox"/> Employee Fire extinguisher	0 pts 1 pt 2 pts	2 1
	<input type="checkbox"/> Hazard Communication	0 pts 1 pt 2 pts	2 1
	<input type="checkbox"/> Accident Investigation	0 pts 1 pt 2 pts	2 1
	<input type="checkbox"/> Lockout/Tagout	0 pts 1 pt 2 pts	2 1
	<input type="checkbox"/> First Aid/CPR	0 pts 1 pt 2 pts	2 2
	<input type="checkbox"/> Personal Protective Equipment	0 pts 1 pt 2 pts	2 1
	<input type="checkbox"/> Emergency Evacuations	0 pts 1 pt 2 pts	2 2
	<input type="checkbox"/> Blood borne Pathogens	0 pts 1 pt 2 pts	2 2
	<input type="checkbox"/> Defensive Driving	0 pts 1 pt 2 pts	2 2

VIII. ACCIDENT INVESTIGATION

(18 Points)

		Points	
		Possible	Actual
1.	Do you have an accident investigation procedure? Yes there is a procedure posted on the intranet	2	2
2.	Are supervisors held accountable for the investigation of on-the-job accidents? Yes	2	2
3.	Is follow-up made to ensure that causes of accidents are correctly identified and that corrective action has been taken? Based on my findings it is usually documented, but depending on the location may not be followed up on to insure it was corrected If yes, who is responsible: Depends on location, but should go to the safety office.	2	1
4.	Has a system been set up to investigate and correct situations which almost or could have caused an accident (near misses)? Yes but depends on the locations	2	1
5a.	Does the safety committee help investigate or reviewing on-the-job accidents? Some of the committees do review the accidents in their meetings.	2	1
5b.	Are loss trends identified and acted upon? During the employee interviews I was told that loss trend information is not conveyed to them	2	0
6.	Is there an active job safety analysis (JSA) program at your department? Some of the locations have SOP's	2	1
7.	Are accident-repeaters identified so further training can be scheduled? Not currently	2	0
8.	Do any management members receive and review all accident reports? Some are reviewed, but based on employee feedback, not all are reviewed.	2	1

X. SAFETY COMMUNICATION

(10 Points)

	Points	
	Possible	Actual
1. Are safety awards or other forms of incentives given to deserving employees for safety achievements? At some locations, bulletin boards are used.	2	1
2. Do you have an in-department newspaper or newsletter? There is a department newsletter	2	2
3. Do you have a safety suggestion system? Yes, but is face to face	2	1
4. Do you use any of the following in your safety communication program? <input type="checkbox"/> Employee-of-the-Month Program No <input type="checkbox"/> Bulletin Board Safety Displays at some locations <input type="checkbox"/> Contests None currently <input type="checkbox"/> Posters Safety posters would be a great addition to the process <input type="checkbox"/> Other (post copies of safety minutes)	2	1
5. Are you a member of the National Safety Council, ASSE, or any other safety organizations? No If yes, please specify:	2	0

XI. OCCUPATIONAL ILLNESS ANALYSIS

(22 Points)

	Points	
	Possible	Actual
1. Can you identify any potential health hazards in your department? X <input type="checkbox"/> Noise X <input type="checkbox"/> Chemicals/Solvents X <input type="checkbox"/> Respiratory Exposure N/A <input type="checkbox"/> Confined spaces N/A <input type="checkbox"/> Excavations N/A N/A <input type="checkbox"/> Heat Stress <input type="checkbox"/> Other (specify)	2	2
2. Does your department perform periodic industrial hygiene tests for these hazards? At some of the locations IH testing has been completed. Mainly for indoor air quality	2	2
3. Have steps been taken to address exposures identified as needing attention by the industrial hygiene tests? No issues have been found If yes, please describe:	2	2
4. Does your department maintain a file for records of industrial hygiene tests for known employee exposures? Yes	2	2
5a. Are any employees or group of employees given health examinations due to potential exposures to any suspected or confirmed health hazards such as hearing or respiratory? If yes, what type of examination? Medical evaluation for respiratory protection	2	2
5b. Is their record documented? Yes	2	2
5c. Are the employees advised of the results of such examination? Yes	2	2
5d. Is this activity tracked to assure all employees are examined annually, who are required? Yes	2	2
6. What types of personal protective equipment are required at your department? X Safety Shoes X Safety Glasses X Face Shields in the lab X Gloves X Specialized Clothing X Respirators <input type="checkbox"/> Other	2	2
7. Are training programs in place for the above-checked personal protective equipment? Yes but could be better. A written PPE assessment would be good and safety glasses in the labs at all times would be an improvement	2	1
8. Is a disciplinary system used to enforce the use of personal protective equipment? No	2	0

XII. EMERGENCY PREPAREDNESS

(36 Points)

		Points	
		Possible	Actual
1a.	Does your department have an emergency evacuation plan? Yes	2	2
1b.	Does your department have an employee evacuation plan? Yes	2	2
2.	Does your department have an emergency team? Yes	2	2
3.	Has the emergency team or other employees been training in the use of fire extinguishers and evacuation? Yes, hands on fire extinguisher training has not been completed	2	1
4.	Do you conduct fire drills? Yes usually twice a year	2	2
5.	Does the fire department conduct or assist in fire drills? Yes at some locations	2	2
6.	Does your local fire department conduct periodic inspections? Yes at some locations	2	2
7.	Have you posted evacuation routes for all employees to observe? Yes at every location If yes, is the plan explained to new employees by the supervisor when they are assigned to the department? It should be done, but depends on the location	2	2
8.	Does your department have an emergency plan? If yes, does it cover the following: <input type="checkbox"/> Fire 0 pts 1 pt 2 pts <input type="checkbox"/> Explosions 0 pts 1 pt 2 pts <input type="checkbox"/> Tomado 0 pts 1 pt 2 pts <input type="checkbox"/> Department Re-entry 0 pts 1 pt 2 pts <input type="checkbox"/> Shutdown of Utilities 0 pts 1 pt 2 pts <input type="checkbox"/> Hurricane 0 pts 1 pt 2 pts		
9.	Has each department supervisor in the department been provided with the emergency plan instructions? Yes	2	2
10.	Has the department been provided with emergency lighting? Yes, but some locations it does not work properly	2	1
11.	Is someone responsible for maintaining these emergency lights? Building maintenance If yes, name of person:	2	2
12.	Are the emergency lights properly positioned to direct at aisles, routes and exits? Yes	2	2

XIII. OSHA STANDARDS /BEST PRACTICES

(52 Points)

				Points	
				Possible	Actual
1. Hazard Communication Standard	Have the following elements been completed?				
<input type="checkbox"/> Chemical Inventory	0 pts	1 pt	2 pts	2	2
<input type="checkbox"/> Material Safety Data Sheets (MSDS's)	0 pts	1 pt	2 pts	2	2
<input type="checkbox"/> Employee Training	0 pts	1 pt	2 pts	2	2
<input type="checkbox"/> Written Program	0 pts	1 pt	2 pts	2	2
<input type="checkbox"/> Labeling	0 pts	1 pt	2 pts	2	2
2. Lockout/Tagout Standard	Have the following elements been completed?				
<input type="checkbox"/> Written program for isolating energy	0 pts	1 pt	2 pts	2	N/A
<input type="checkbox"/> Use of lockout/tagout devices	0 pts	1 pt	2 pts	2	N/A
<input type="checkbox"/> Periodic inspections	0 pts	1 pt	2 pts	2	N/A
<input type="checkbox"/> Training	0 pts	1 pt	2 pts	2	N/A
<input type="checkbox"/> Machine Specific Process	0 pts	1 pt	2 pts	2	N/A
3. Confined Space Standard	Have the following elements been completed?				
<input type="checkbox"/> Identification of confined spaces and inventory	0 pts	1 pt	2 pts	2	N/A
<input type="checkbox"/> Determinants of Permit system	0 pts	1 pt	2 pts	2	N/A
<input type="checkbox"/> Periodic inspections	0 pts	1 pt	2 pts	2	N/A
<input type="checkbox"/> Atmospheric testing/Equipment	0 pts	1 pt	2 pts	2	N/A
<input type="checkbox"/> PPE and emergency response plan	0 pts	1 pt	2 pts	2	N/A
<input type="checkbox"/> Training (Entrants, Attendants and Supervisors)	0 pts	1 pt	2 pts	2	N/A
4. Blood borne Pathogens	Have the following elements been completed?				
<input type="checkbox"/> Exposure Control Plan	0 pts	1 pt	2 pts	2	2
<input type="checkbox"/> Communicating Hazards to Employees (training)	0 pts	1 pt	2 pts	2	2
<input type="checkbox"/> Preventive Measures	0 pts	1 pt	2 pts	2	2
<input type="checkbox"/> Methods of Control	0 pts	1 pt	2 pts	2	2
<input type="checkbox"/> Exposure Incident Plan	0 pts	1 pt	2 pts	2	2
<input type="checkbox"/> Exposure Determination	0 pts	1 pt	2 pts	2	2

XIII. OSHA STANDARDS/BEST PRACTICES

(52 Points)

						Points	
						Possible	Actual
5.	Hearing Conservation						
	Have the following elements been completed?						
	<input type="checkbox"/> Monitoring and recordkeeping	0 pts	1 pt	2 pts	2	N/A	
	<input type="checkbox"/> Administrative controls or PPE	0 pts	1 pt	2 pts	2	N/A	
	<input type="checkbox"/> Audiometric testing	0 pts	1 pt	2 pts	2	N/A	
	<input type="checkbox"/> Posting of Standard	0 pts	1 pt	2 pts	2	N/A	
	<input type="checkbox"/> Written Program	0 pts	1 pt	2 pts	2	N/A	
6.	Machine Guarding						
	Have the following elements been completed?						
	<input type="checkbox"/> Are guards in place?	0 pts	1 pt	2 pts	2	2	
	<input type="checkbox"/> Are employees trained not to use equipment without guards?	0 pts	1 pt	2 pts	2	2	
					2		
	<input type="checkbox"/> Is training being conducted?	0 pts	1 pt	2 pts	2	1	
7.	Ergonomics						
	Have the following elements been completed?						
	<input type="checkbox"/> Policy Statement	0 pts	1 pt	2 pts	2	N/A	
	<input type="checkbox"/> Ergonomic Committee	0 pts	1 pt	2 pts	2	N/A	
	<input type="checkbox"/> Medical Management	0 pts	1 pt	2 pts	2	N/A	
	<input type="checkbox"/> Ergonomic Analysis of Risk Factors	0 pts	1 pt	2 pts	2	N/A	
	<input type="checkbox"/> Education and Training	0 pts	1 pt	2 pts	2	N/A	
8.	Laboratory Standard						
	Have the following elements been completed?						
	<input type="checkbox"/> Policy	0 pts	1 pt	2 pts	2	2	
	<input type="checkbox"/> Training	0 pts	1 pt	2 pts	2	2	
	<input type="checkbox"/> Hazard Assessment	0 pts	1 pt	2 pts	2	2	

XIII. BEST PRACTICES/OSHA STANDARDS

(52 Points)

				Points		
				Possible	Actual	
9.	Process Safety Management					
	Have the following elements been completed?					
	<input type="checkbox"/> Materials Identified	0 pts	1 pt	2 pts	2	N/A
	<input type="checkbox"/> Formal Program	0 pts	1 pt	2 pts	2	N/A
	<input type="checkbox"/> Process Hazard Analyses	0 pts	1 pt	2 pts	2	N/A
	<input type="checkbox"/> Operating Procedures	0 pts	1 pt	2 pts	2	N/A
	<input type="checkbox"/> Emergency Plans	0 pts	1 pt	2 pts	2	N/A
	<input type="checkbox"/> Training	0 pts	1 pt	2 pts	2	N/A
	<input type="checkbox"/> Contractor Awareness	0 pts	1 pt	2 pts	2	N/A
	<input type="checkbox"/> Pre-start-up Safety Reviews	0 pts	1 pt	2 pts	2	N/A
	<input type="checkbox"/> Work Permit System	0 pts	1 pt	2 pts	2	N/A
10.	Personal Protective Equipment					
	Have the following elements been completed?					
	<input type="checkbox"/> Hazard Assessment – updated annually	0 pts	1 pt	2 pts	2	1
	<input type="checkbox"/> Training	0 pts	1 pt	2 pts	2	1
11.	Respiratory Protection					
	Have the following elements been completed?					
	<input type="checkbox"/> Identification of Substances as Hazardous Exposures	0 pts	1 pt	2 pts	2	1
	<input type="checkbox"/> Respiratory Selection	0 pts	1 pt	2 pts	2	1
	<input type="checkbox"/> Health Evaluation and Surveillance	0 pts	1 pt	2 pts	2	1
	<input type="checkbox"/> Employee Training	0 pts	1 pt	2 pts	2	2
	<input type="checkbox"/> Fit Testing	0 pts	1 pt	2 pts	2	2
	<input type="checkbox"/> Respiratory Cleaning, Maintenance and Storage	0 pts	1 pt	2 pts	2	2
	<input type="checkbox"/> Respiratory Program Evaluation	0 pts	1 pt	2 pts	2	1

XIII. BEST PRACTICES/OSHA STANDARDS

(52 Points)

				Points	
				Possible	Actual
12.	Electrical Safety-related Work Practices				
	Have the following elements been completed?				
	<input type="checkbox"/> Training	0 pts	1 pt 2 pts	2	N/A
	<input type="checkbox"/> Use of Personal Protective Equipment	0 pts	1 pt 2 pts	2	N/A
	<input type="checkbox"/> Protective Tools	0 pts	1 pt 2 pts	2	N/A
	<input type="checkbox"/> Written Program	0 pts	1 pt 2 pts	2	N/A
13.	HAZWOPER (Hazardous Waste Operations)				
	Have the following elements been completed?				
	<input type="checkbox"/> A Written Program	0 pts	1 pt 2 pts	2	N/A
	<input type="checkbox"/> Employee Training	0 pts	1 pt 2 pts	2	N/A
	<input type="checkbox"/> Communication	0 pts	1 pt 2 pts	2	N/A
	<input type="checkbox"/> Documentation	0 pts	1 pt 2 pts	2	N/A

XIV. MOTOR VEHICLES

(16 Points)

	Points	
	Possible	Actual
1. Please indicate your total vehicle count Owned <u>235</u>	2	2
2. Do employees drive company vehicles home at night? Some do	2	2
3. Is a written procedure in place to verify the current status of the driver's license of each employee who has access to company owned/leased vehicles?	2	2
4. Do you perform an annual review of the driving record of those employees who have access to company owned/leased vehicles?	2	2
5. Have all employees at your department been informed that owned/leased vehicles are only to be used for authorized company activity and/or according to personal use guidelines?	2	2
6. Are monthly safety inspections performed on all company owned/leased vehicles? Depends on location	2	1
7. Are employees required to use safety belts while driving company owned/leased vehicles? Yes	2	2
8. Do you require all drivers to take defensive driving course when assigned driving duties and require refresher training every 3 years for accident free driver and as remediation post accident?	2	2

DEPARTMENT OBSERVATIONS

Based upon my visits to several locations within the department and the focus group discussions, there are several levels of participation in the safety process. Many of the lab and clinic environments are very safety conscious, while BARC and others are practicing reactive safety more than proactive safety. Reactive safety is when the safety program is not administered in a way that promotes the safety effort. Employees are not held accountable and management has not bought into the process. Safety starts at the top of any organization. Leadership has to promote the safety effort at every meeting, they have to promote safety at every level in the department, and they have to get the employees involved in the safety process. This is the only way to drive a culture change and promote a safe environment for the employees and help reduce or eliminate accident from occurring on the job. Zero accidents and incidents are achievable and obtainable. The question is does senior leadership want to get there?

Health and Human Services is a large department and very diverse in the activities that they are involved in vary greatly, but safety can be handled in the same manner regardless of the location. In the employee focus group meetings, all of the employees were very interested in participating in the safety efforts, but it is not communicated to them or they are not asked to participate in the safety process. Many believed that there was a good safety program in place, however the program could be administered better. Some of them did not know where any of the safety information was kept or how to access the information. Supervisors and leadership have not done their part to promote the safety effort. Streamlining the process, making all of the forms available, documenting the safety efforts, and tracking performance is the key to getting more employees involved.

First and foremost the department has to define what the goals and objectives are and what needs to be done to meet those goals. Safety is everyone's responsibility and I do not believe that message has been properly conveyed to the employees. There needs to be a clear message that accidents are not acceptable and employees and supervisors should be held accountable. If an employee is injured on the job and they did not follow the Standard Operating Procedures or Job Safety Analysis, should they be held accountable? Yes, but if the supervisor never reviewed the SOP's or JSA's with the employees. Do they have some responsibility too?
Yes

The next thing that needs to be done is the supervisors and employees need to be **measured** on the items that are defined. Things that are measured will usually get completed. Safety should not be measured any differently than productivity or quality. If we have employees that do inferior work or are not very productive, we coach them to get them up to speed. Safety should be handled in the same way. We coach them to get them on the right track. We help them to convey the safety message.

The last step is to reward performance. We do not reward for not having accidents. We reward for participation on the safety committees, conducting and participating in the safety meetings, keep your training up to date, helping to write JSA's or SOP's, keeping you work areas clean, doing facility audits, mentoring new employees, and helping to improve processes to name a

few. Rewards do not have to be cash, lunches, or gift certificates. They can be recognition in their work group, recognition by the director or assistant director, or a certificate to name a few. Positive reinforcement can help drive your process forward. Challenging the various locations and tracking the injury data by location can help to create some friendly competition plus can help to identify what locations need additional help. Industry best practices include tracking frequency rates, severity rates, and workers comp cost per payroll dollar to name a few. Olen could assist you with developing the matrix to track you information.

Employee orientation and training is a key component to your safety process. During the survey many employees were interviewed and this was an area of concern that kept coming up. The general orientation for the new employees is well received, but once the employee is assigned to a location the orientation process is very different. Some locations orientate their employees well and some do not. I suggest developing a new employee safety orientation checklist that the supervisor could use while orientating on the local safety issues, hazards, concerns, and effort. The checklist is a great tool to make sure that nothing is missed during the orientation process. You need make sure that the employee signs off or initials the document to show that they received the orientation.

Supervision plays a very important part in the safety process. The supervisors that I spoke to during my surveys had varying levels of safety experience. Some had no experience and one was a Certified Safety Professional (CSP) all of them mentioned that they had never been through a supervisor safety program. A good way to improve your safety efforts would be to provide better training for your supervisors on the safety program, what hazards to look for and what they can do to increase awareness with the employees. This effort will help them to be better leaders in the safety effort and make them more aware of what they need to look for at their locations.

Safety Committees play a vital role in improving the safety efforts at a location or within the department as a whole. The safety committee should be task driven by identifying areas where safety needs to be improved and creating a corrective action plan to get those areas corrected. The committee could also be used to review accidents to determine root causes, help to keep employees aware of changes to the policies and procedures and be the sounding board for the other employees. Many of the best safety ideas come from the employees and they should be conveying these issues to the committee to work on so they can develop a plan to fix them.

Training and education at some of the locations is done really well and is documented. Some of the other locations are definitely lacking in this area. This goes back to the leadership and establishing what they need to do, when it needs to be completed, and holding them accountable to get the training and education done. There are many tools that are available on the city intranet as well as the internet to help with the training and education for the department employees. Since the department is very diverse, one size fits all training does not work. The training at each location is going to vary depending on the exposures. Develop a training matrix for each location to ensure that the employees are getting the training and education they need.

Accident investigations are very important in determining root causes, finding areas for improvement, and development of an action plan to help improve safety. If the department does not learn from their mistakes, they are likely to repeat them. Accident investigations should be formal process and not just filling out an accident report. Many of the locations are just filling out the reports. Some are doing a good job, but there is still room for improvement. Near misses should be investigated too. A near miss is nothing more than a near accident. The department should want the employees to report near misses and they should be investigated just like an accident would be investigated.

Safety communication should be frequent and accessible to the employees. Many of my clients use a bulletin board to post department and location statistic, safety meeting information, the weekly tool box talks, safety committee minutes and even safety posters. The boards help to keep up awareness and keep the employees involved in the safety process. One of the clinics I visited actually go one step further and post positive feedback on their employees and post a "star" with their name. This promotes positive feedback which helps drive safety performance.

Emergency preparedness is one of the strong points in the department and at the locations that were visited during the survey. The fire drills are conducted twice a year, each location had rally points assigned, evacuation routes were posted, and the employees were very familiar with the evacuation process. A concern that was brought up and the Stadium Drive focus group was that some of the employees were hesitant to leave their work areas unless they were threatened with a ticket. This goes back to the leadership and supervisors holding employees accountable. They have to leave during a fire drill or when the fire alarm is sounded. They have to follow the direction of the fire wardens. This has to be corrected as soon as possible and people need to be held accountable.

Motor vehicle program and policies are above average. Checking driver's licenses and defensive driving is the key to reducing accidents. Requiring defensive driving before employees are allowed to operate a city vehicle and requiring retraining for employees involved in an accident will help to reduce accidents too. I recommend tracking employees that have tickets or accident and establishing a program to exclude those individual that show at risk behavior from driving a department vehicle.

The focus groups had some interesting questions that should be posed to senior leadership. Questions and answers should be posted or communicated to the employees and staff at the various locations.

Lab and clinic:

Why are safety glasses not required in all the labs at all times?
Why is the roof access at the Braeswood lab not controlled?
Why can't the HVAC system be fixed at the main lab?
Can the autoclave be moved to reduce the smell to the employees in the main lab?
Why do some eye washes and showers not work properly?

BARC:

Why are vehicle at BARC not better maintained?
How come the communication system not operates properly at BARC?
Why are employees and supervisors not held accountable for safety?
Where is the safety manual kept and how do I get a copy?
Why are field supervisors not out in the field to assist the BARC employees?
Why do supervisors not provide safety information to employees?
Could we get additional safety training for the employees and supervisors?

Stadium Drive:

Could safety goals be defined and communicated?
Could safety information be posted for the employees to review?
Why is the biggest barrier to correcting problems always money?
Why are employees and supervisors not held accountable?
Why does it take so long for the facilities group to make repairs that are identified?
What are management's priorities in regards to safety?