

HEALTH AND SAFETY PROGRAM

of

POLK COUNTY, TEXAS

August, 2010

(Approved by Commissioners Court on August 24, 2010)

POLK COUNTY, TEXAS HEALTH AND SAFETY PROGRAM

SECTION 10.00

10.01.1 Safety Program Goals

Safety is a big task for Polk County. As your employer, the County recognizes its obligation to provide the safest possible working environment in which to perform your duties. The purpose of establishing a safety and loss control program is to reduce or eliminate employee exposure to the hazards that exist in our workplace and to eliminate unnecessary waste, loss, or damage to facilities, equipment, and resources. For this reason, this safety program has been developed to establish procedures and safety rules to assist in the prevention of accidents and injuries. Your involvement is essential to the effectiveness of our safety program.

The goal of the safety program is to keep injuries, illness, property damage, and liability to the absolute minimum while maintaining our high production quotas. When incorporated with other management efforts, safety and loss prevention techniques will have a positive effect on production by minimizing loss time, work interruptions, and by reducing costly property damage and spoilage. By placing constant emphasis on training for safe operational procedures, employee hazard awareness and safe working conditions, it is possible to eventually eliminate the cause and effects of losses allowing us to reach our goal - MAKE AND KEEP THIS A SAFE PLACE TO WORK!

10.01.2 Safety Manual Goals

A good safety program has many important parts. A safety manual is one of these parts. The goal of this manual is to explain specific procedures and responsibilities that each employee must take to ensure their own safety and the safety of those around them. Many work areas in our County require special safety procedures which may not be covered in this manual but will be addressed in departmental manuals and special training sessions.

This manual explains general safety policies and procedures that affect each employee's personal safety while performing their duties. All employees of Polk County must read and understand this manual. Any questions can be answered by your supervisor or the County Safety Director. Compliance with all safety policies and procedures in this manual is mandatory. Safety awareness is the best way to prevent accidents. This manual is an important tool for safety awareness.

10.01.3 Need for Safety Awareness

The different Precincts and Departments making up this County's work force present their own types of hazards. All people must be alert to the hazards associated with their workplace. This is for their personal safety and the safety of those who work around

them. By recognizing a hazard that exists in your workplace, you can avoid its negative results by reducing your expense to it.

The health and welfare of every employee is very important. The safety program and this manual will help prevent personal injuries. The County's management is committed to working with each employee to provide safe working conditions.

SECTION 10.02

10.02.0 PERSONNEL RESPONSIBILITIES

For the safety program to be a success, each employee must be held responsible for understanding and strictly observing all safety standards, requirements, and precautions applicable to their work duty. Certain key people such as the Emergency Management Coordinator (referred to as the Safety Director), supervisors, and members of the Safety Committee, will take on added tasks to make the program work. Each employee must understand their duties. Five levels are outlined below:

- Elected Official or Department Head
- Safety Director
- Supervisor
- Lead persons
- Employee

10.02.1 Elected Official / Department Head

The Elected Official or Department Head is responsible for the safety and health of all employees while they carry out their duties. Safety is the heart of good management. Accidents on the job not only means possible injury or loss of life, but create costly delays, damage to resources, or may require additional work to repair damage that could have been avoided. Each Elected Official and/or Department Head must include the aspect of safety in all production goals, cost and quality control.

There is a wide diversity of operations within our County Government. Elected Officials and Department Heads are given flexibility in developing and implementing alternative methods when necessary to accomplish their goals as long as the intent of the safety program is not compromised. Although it is normal practice for supervisors to be delegated the authority to carry out safety objectives in the departments or precincts, the Elected Officials' or Department Heads' responsibility for meeting those objectives cannot be transferred. At a minimum you should:

1. Include in budgeting the resources required to provide for safety needs;
2. Take a quick action to reduce or eliminate the risk of hazardous conditions as they present themselves;
3. Emphasize safety as priority in your department and lead by good example;
4. Establish a departmental safety committee and utilize it.

10.2.2

Safety Director

The Safety Director will evaluate all the various activities at the workplaces within our County to uncover the hazardous conditions which contribute to accidents. The Director will make recommendations and provide assistance, training material, and equipment to supervisors to reduce the negative results of exposure to hazards. The Director's duties include:

1. Develop accident prevention and loss control methods, procedures and programs;
2. Communicate accident and loss control information to those directly involved;
3. Provide advice and counseling to supervisors and employees on safety, health hazards, and loss control effects;
4. Monitor employee work habits and suggest necessary changes to correct unsafe acts and conditions.

10.02.3

Supervisor

The supervisor has the broadest responsibility for safety. Safety is vital to the proper execution of all operations. Accidents and unsafe conditions could bring operations to a stop. A safe job site with few accidents is a happy and efficient place to work. It is the kind of environment we want. The supervisor will name an alternate to take charge of safety control when he/she is absent. The supervisor will also see to the following safety matters;

1. Actively promote and support departmental safety;
2. Assure that employees receive and understand this manual;
3. Set a personal example of good safety practices;
4. Enforce all safety regulations in effect and make employees aware that violations of safety rules will not be tolerated;
5. Make sure all injuries are treated, investigated, and reported promptly. Properly completed reports on all accidents (even if injury/damage is not apparent) is required;
6. Provide regular, complete, safety instructions regarding duties prior to employees actually starting their assignment;
7. Continuously inspect your workplace for unsafe acts or conditions. Be responsive to suggestions and promptly take corrective action;
8. Provide and ensure the proper use and maintenance of required safety equipment and protective devices;
9. Maintain records and documentation on accidents, safety training, hazard reports, and inspections.

"I don't have time to spend on safety." The supervisor who makes this statement will then cite numerous activities which already occupy their time. Most often, the statement is made when they don't believe the safety program is important enough for them to

spend their time on. As stated previously, doing the job right and doing it safely go hand in hand. The safety of employees is your responsibility. However, if the supervisor really doesn't have the time to devote to safety to make it an effective program, they should delegate their responsibility to someone within their group who is genuinely concerned with safety and can provide required efforts. Choose this person well and lend your full support to them. You are delegating the task, but you remain fully responsible and accountable for your group meeting the safety program criteria and you will be judged accordingly.

10.02.4 Lead persons

Lead persons are responsible for the safety of all employees under their direction. Safety duties include:

1. Set a good example for fellow workers;
2. See that Division rules regarding safety are followed;
3. Report all accidents;
4. Assist in training of all new employees and keep existing employees to date concerning safety procedures;
5. Report all hazards of unsafe conditions;
6. Make your group "safety aware";
7. Properly use and maintain all equipment assigned to your unit;

10.02.5 Employees

All employees have a responsibility to themselves, fellow workers, and management to Follow safe work practices. Personal injury on the job is usually the result of a failure to Follow good safety practices. Each employee must:

1. Place safe work practices and recognition/reporting of hazardous conditions as their highest priority while performing their duty;
2. Read and understand the safety manual;
3. Report all accidents promptly even if injury or damage is not apparent;
4. Wear, properly use, and maintain all required safety or personal protective equipment issued to you. (note: Take care of the equipment so it will remain in a usable condition as long as possible. Neglect or abuse of equipment assigned to you may lead to disciplinary action.)
5. Warn co-workers of unsafe conditions that threaten their safety and report unsafe acts by others;
6. Make suggestions to correct unsafe conditions and report them immediately;
7. Do not operate equipment or use a tool or chemical which you have not received training on. Notify supervisor of the situation;
8. Use common sense;
9. Follow all safety policies and procedures.

SECTION 10.03

10.03.0 ORGANIZATION

10.03.1 Departmental Safety Committee

Each Elected Official and/or Department Head within the County may establish a Departmental Safety Committee within their department; its goal being the development of training and work procedures that will ensure a departmental work environment free from the potential effect of its hazards and negative effects on the employees.

The composition of this committee must be tailored to meet the needs of each department and therefore may be composed in any manner meeting departmental needs. A guideline for setting up a Departmental Safety Committee is included in this manual. As a minimum, the committee should be composed of the Elected Official/Department Head, or his/her appointee, and members that represent the various duties performed within the department (example: operations, maintenance, labor, etc.)

10.03.2 Purpose

A strong and active committee gives strength to the safety program. The Departmental Safety Committee is the means of keeping our workplace on a safe basis. It can be the tool to help all workers to talk about safety. This includes supervisors talking with their workers about safe work methods and training, or workers talking to management through the Departmental Safety Committee. The maximum exchange of ideas between all personnel enhances the immediate corrections of problems Departmental Safety Committees can help to make all personnel "safety aware".

With overtone of cooperation, the safety program will succeed. This section of the manual is a guide for setting up a Departmental Safety Committee. It will help further the understanding of Departmental Safety Committee goals and functions.

10.03.3 Organization and Structure of Departmental Safety Committee

Proper organization of the Departmental Safety Committee is needed for its success. Careful thought must be given in putting it together, or in any future changes.

The work of an active committee is always noticed. We see them when they make their monthly inspection, and later we see or hear of changes that take place – sometimes a large and sometimes just a small change, such as a word of caution or a suggestion that guards not be removed without proper authority, or a safer way to do a job, or mentioning that a cleaner room makes for better working conditions. These recommendations come to fellow employees who are working with you. While on the committee, you are working in their interest to make their jobs more pleasant, convenient, and safe in every way. The retired Safety Committee member helps this work along! From close acquaintance with the work, the committee member can help by cautioning against unsafe practices, and knows just how to approach a new

employee and give a friendly hint that may help a lot in that particular job, or suggest a new method to the older employee so ruts won't develop when there are better ways of doing things.

More important is the example that careful employees set for their coworkers. The retired Safety Committee member is really never retired; for his/her example is observed far more than he/she ever knows. By having the opportunity to think, act, and live safely, the retired committee member is doing his share to build up an organization of careful, efficient, men and women.

10.03.4 Chairperson

The Chair of the Departmental Safety Committee must have the power to direct quick repairs to be made or equipment obtained. The chairperson will set up regularly scheduled safety meetings within the department which should be held at least monthly. The topics for the meeting, as well as the time to begin and end, should be stated. A specific day should be set for each monthly meeting. Only safety issues will be discussed. It is important that all suggestions and mentioned hazards be recorded. Each must be promptly assigned to one person for action. The chairperson assigns the tasks to others, but it is their job to see that they are completed.

10.03.5 Recorder

A detailed account of the meetings of the Departmental Safety Committee is needed to keep employees and supervisory staff informed. The task of providing this account will ensure that all topics discussed and assigned for action are recorded. It helps to bring about actions and solutions instead of their being overlooked. The recorder should not be the chairperson. The Recorder should have an understanding of safety issues and of the facility. The format of the recorder's account (minutes) should closely follow the topics for the meeting. The recorder should have the minutes typed and copies sent to the other members and to the appropriate members of management. The recorder should take the minutes of the general meeting and post them on the safety bulletin board. Safety bulletin boards should be located in conspicuous areas of each department. These boards should announce future meetings and minutes of past meetings. Training classes and safety articles should also be posted.

10.03.6 Committee Members

The Departmental Safety Committee should not exceed five members. A larger number tends to make it more difficult to have all members at each meeting. If the size of the department is so large that five members can not adequately manage the safety program, then several smaller committees may be set up. These smaller groups would have a representative report to the primary departmental Safety Committee. Committee membership should be a broad-based representation of all workers in the department. Employees would be well represented and have an active voice in committee functions. The entire department or division should participate in the safety program, as many

different viewpoints are valuable. Members must be willing to accept and complete assignments for the committee to review and enact.

10.03.7 Duties of the Committee

- Schedule to meet at least once a month. May call an emergency session if needed to resolve an urgent safety matter.
- Review departmental accidents and injury reports in an effort to determine cause and develop safeguards to prevent recurrence.
- Review, analyze, develop and implement corrective action on each hazard report submitted by employees. If required corrective action is not within the ability of the Departmental Safety Committee, it should be forwarded in writing to the Elected Official/Department Head concerned for appropriate action.
- The Departmental Safety Committee will make an annual budget recommendation for the funds needed for safety equipment, materials and activities. The annual budget should be carefully reviewed by the department head. The budget recommendations should include training, equipment, and all other matters needed to promote safety.
- Document each meeting, including a summary of the accidents, injuries, and hazard reports reviewed and corrective action taken. Copies of this documentation will be kept on file by the department supervisor and one copy forwarded to the County Safety Director.

10.03.8 Executive Safety Committee

The County Judge, or his Safety Director, shall establish a safety committee chaired by himself or the Safety Director and composed of at least three (3) key Elected Officials/Department Heads. The Safety Director shall appoint a recorder to the committee.

This committee's intention is to focus on safety trends and develop solutions to overcome problems. This committee will guide the direction of safety program resources to produce the best possible work environment for employees. The committee shall:

- Hold meetings at least monthly to review loss experiences by departments, cost analysis figures, and evaluate the progress of the safety program.
- Give consideration to the facts, analysis, and corrective action taken on accidents involving lost time, injuries, equipment damage, liability claims, and other losses.
- Receive and act upon hazard reports submitted by the departmental safety

committees representing needed action which is not within their jurisdiction.

- Keep minutes of each meeting and distribute to the County Judge's office, each Elected Official/Department Head, and departmental committee. A central file of minutes will be kept by the Safety Division.
- Set topics for safety training at the monthly safety meeting. The subjects must be of current value to each department. The Safety Committee will provide materials needed to conduct the class.

SECTION 10.04

10.04.0 SAFETY TRAINING

Employee education is very important to the overall safety program and the safety of individual employees. Without adequate training, employees often must make decisions without the knowledge or experience to do so, which may result in employee injuries. All employees will be taught to safely perform their jobs.

10.04.1 Topics for Training Classes

- Use, care, and maintenance of personal protection equipment.
- State, Federal and County Safety policies.
- All standard operating procedures (SOPs) should be reviewed with the employees. Instructions should cover specific procedures and use of any required safety equipment.
- CPR and First Aid classes must be held for all employees.

When hazardous activities are identified, employee training should be provided so they will understand how to reduce their exposure to such activities.

10.04.2 What if an Employee Cannot Read?

Many supervisors are concerned about training employees who have poor English comprehension or reading skills. Supervisors should act as helpers and trainers for such employees to help them learn safe work habits. Training must be given if it requires reading aloud or teaching employees in their native language. Supervisors may appoint someone for these purposes but it is up to the supervisor to be sure all training is effectively communicated. The Safety Director will try to obtain a Spanish translation of most written materials.

10.04.3 Sources of Training

- The supervisors are responsible for conducting safety training.
- The County Safety Division will provide any support and assistance needed upon request.
- The County Safety Division can supply film, video, slides, and varied specialized training courses.
- Outside vendors or other expert sources may be called upon to provide new and varied instruction.

SECTION 10.05

10.05.0 SAFETY MEETINGS

General safety meeting should be used to:

1. Review past safety projects and suggestions;
2. Document future safety projects;
3. Communicate actions of management;
4. Involve all employees in the actions of the safety program;
5. Help create safety awareness;
6. Highlight any hazards that exist;
7. Introduce new safety procedures and equipment;
8. Review any accidents that have occurred;

10.05.1 Meeting Procedures

Supervisors should conduct the meeting. A meeting agenda should be prepared at least three days before the meeting and should be posted for all employees to review. All old issues should be reviewed before discussing new ones. The meeting should be routinely scheduled for approximately the same day and time each month. Dates and times for meetings should be selected so that the greatest number of employees may attend. The meeting should not last more than 45 minutes. All meeting minutes should be posted and then filed in the safety notebook.

10.05.2 Tailgate Meetings

Tailgate meetings (also called toolbox meetings) are short safety meetings conducted periodically with small groups of employees. All Employees may not be able to attend monthly general safety meetings. The tailgate meetings may be used to communicate safety issues to these employees.

10.05.3 Description

Tailgate meetings should be very short –5 to 10 minutes –and held at least weekly. The department supervisor conducts the meeting for three to five employees, normally at the beginning of a workday. It expands upon information presented at the general safety meeting and allows employees to ask direct questions about safety issues. Employees

are encouraged to actively participate in the meeting. It is from this source that many of the work site hazards are identified.

10.05.4 Benefits

Tailgate meetings will create better safety awareness. They will aid in developing a safety communication link between supervisor and employee. Also, while ensuring all employees, regardless of days off or shift, attend a safety meeting tailgate meetings will develop a more personal safety program.

10.05.5 Contents

Safety procedures will be reviewed during the tailgate meeting. Information gained from general safety meetings will be shared. Employees will be encouraged to ask questions and identify potential hazards. Notes and attendance records will be kept by the supervisor.

SECTION 10.06

10.06.0 MEDICAL SERVICES

It is the County's policy that each employee promptly report any injury, no matter how small, to their supervisor. It is the duty of the supervisor to see that medical treatment is quickly provided and corrective steps taken to prevent further injury.

10.06.01 Emergency Medical Care

Serious injury requiring immediate emergency medical care, such as profuse bleeding, broken bones, unconsciousness, shock, etc., shall warrant emergency treatment. The injured person shall be immediately transported to the nearest hospital. Twenty four hour emergency service is available at the following local hospital;

Memorial Medical Center – Livingston
1717 Highway 59 Bypass
Livingston, Texas, 77351

Determine if outside medical care is required. If there is any doubt, call for outside medical help by dialing 911 or radioing the dispatcher and asking for emergency medical help. Give emergency personnel the following information;

- Identify yourself
- Give victims name, approximate age, sex, and the nature of the problem (broken leg, unconsciousness, head injury, etc.)
- Identify the location of the accident, the time it happened, and the unit or telephone number at which you may be contacted.
- Stay on the phone/radio until the dispatcher says its okay to hang up.

- Administer first aid as necessary until help arrives.
- Do not leave the employee until relieved by the emergency medical personnel.
- Go with the employee or follow the employee to the hospital.
- Notify the Elected Official/Department Head and Safety Director at the earliest opportunity.
- Notify Human Resources that an injury has occurred. When the emergency is over, go to the Human Resources Department to report the details of the emergency.

10.06.2 Non-emergency Injuries Requiring Physician Care

If an ambulance is not needed these directions should be followed;

- Give necessary first aid treatment to the injured employee; and
- Have the injured employee driven to the Human Resources Department by another employee (a witness of the accident if possible).

The Human Resources Department will give you a medical treatment report for the doctor to fill out regarding injury. Time allowing, Human Resources will also begin the report of injury to an employee. (Note: Filling out these reports may seem bothersome; but the reports are necessary to make certain your medical benefits are paid promptly – allowing you quick and continued medical treatment.)

Polk County contracts for Worker's Compensation physicians. All employees must use a contracting doctor for medical treatment if needed. For a list of the physicians in the area, contact the Human Resources Department for the information. If the injury/illness is an emergency, seek treatment at the local emergency room. For follow-up treatment recommended by the emergency room physician, a contracting doctor must still be used. For treatment after hours or when Human Resources is not available, use the emergency room.

The employee driving the injured employee must stay at the doctor's office and drive the injured employee back to Human Resources after the visit. (Make use of your time by filling out the witness report if applicable).

Upon returning to Human Resources, the injured employee will turn in the medical treatment report and let Human Resources know the conditions the doctor has imposed for the employees return to work. Human Resources will then issue the employees report of injury, additional witness report, and the supervisor report of injury. These reports should be filled out immediately and returned to Human Resources immediately.

The supervisor report and the witness statement should be taken to the department immediately. Depending on the doctor's advice, the driver will take the employee home or to the supervisor's office.

Accidents occurring after Human Resources Department hours (prior to 8 a.m. or after 5 p.m.) should be sent directly to the doctor or the hospital. The accident must be reported to Human Resources the following work day and all of the above mentioned reports filled out.

10.06.3 First Aid Treatment

Many occupational injuries may be effectively treated in the field, thereby eliminating the need to visit a doctor for minor injuries. However, First Aid will only be given when there is qualified personnel and First Aid materials available. If this is not the case, then the preceding procedure for non-emergency medical treatment will be used.

It is a goal of the safety program that all employees are trained in First Aid, CPR, and AED techniques. Courses will be made available through the Safety Division. Following this, adequate first aid materials will be available to and under the charge of a person trained in first aid.

Minor first aid treatable injuries must be reported to the supervisor, who will investigate it and record it in the supervisor's record book. This record will be periodically submitted to the Safety Director.

SECTION 10.07

10.07.0 PERSONAL PHYSICAL RESTRICTIONS

Employees are expected to maintain the standards of physical fitness required to do their job. When there is reason to think the physical health of an employee is such that he/she cannot perform safely, action must be taken. The Elected Official/Department Head shall request a physical evaluation of the employee to determine his fitness to do the job. This examination is requested through the Human Resources Department and is done without expense to the employee. The doctor examining the employee will be determined by the County and approved by the Human Resources Supervisor.

When an employee is determined to be unfit for the job, he/she shall be removed from the job until certified by the doctor to be fit. If the employee is found to be permanently incapacitated or shall be incapacitated for a long period, he/she may be removed permanently from that job. Failure to maintain appropriate fitness is grounds for separation.

10.07.1 Personal or Health Related Problems

Supervisors must be sensitive to any behavior of the employee which interferes with the employee's ability to work satisfactorily and safely. Often these are isolated incidents. Other times, they may indicate a more serious problem that is not skill related but may be the result of personal or health related problems. These problems are varied – emotional stress, marital and family difficulties, alcohol, drug or medication dependency,

or severe financial situations. While it is not the responsibility of the supervisor to determine the cause of the problem, it is his/her responsibility to determine whether a job performance problem exists.

When the supervisor becomes aware that a persistent job performance problem exists, steps must be taken to confront the problem.

Document - Record all incidents of unsatisfactory job performance including absenteeism, tardiness, missed deadlines, poor quality or quantity of work, specific attitude problems, carelessness, inattentiveness, etc. Documentation should be focused on the functional applications of the job, not on what the employee problem may be.

Evaluate – Based from the standpoint of maintaining an efficient, productive, and safe operation, make a determination regarding the seriousness of a job performance problem. Act before the problem becomes so severe as to be intolerable. It may be helpful to consult with the Human Resources Supervisor, the Safety Director, an employee representative, or a supervisor. Action taken must be fair, impartial, and justified.

Intervene – Using the documentation that has been developed, the supervisor should discuss the job performance deficiencies with the Employee. While the tone should be a caring one, the employee must be made aware that poor performance will not be accepted and that failure of the employee to take corrective action may result in separation. The supervisor must clarify the areas of dissatisfaction and expectations regarding improvement. The employee does not necessarily have to agree that his/her performance is a problem. Guidelines and timetables for measuring progress are established with employee input. Do not become sidetracked with excuses of the cause of the problem itself. Stick to the issue of job performance.

Follow-up – The supervisor must continue to observe and document the job performance of the troubled employee. If there is satisfactory improvement, the employee should be told so with a restatement of the supervisor expectations. If improvement objectives are not met within the time frame agreed upon, a second intervention involving disciplinary action is called for. The employee may face disciplinary action up to or including termination.

10.07.2 Medication

An employee taking strong or multiple medications which causes dizziness, blackouts, drowsiness, double vision, impaired judgment, or other abnormal reactions, shall not be allowed to work until treatment is complete and the effects of the medication have worn off. Some medicines, which produce no side effects when taken alone, may produce, in combination, a systematic interaction which affects the user's ability to act and perform normally. Any employee displaying erratic behavior, particularly those on medication, should be removed from the job and be referred for medical attention. If multiple

medicines are being used, the physician should be told. A medical release is required before the employee is allowed to resume his/her job at the request of his/her Elected Official or Department Head.

10.07.3 Intoxication

An intoxicated employee, in fact or in appearance, shall not be permitted to work. In addition, the employee shall not be allowed to leave the work site unescorted. Keys to the employee's vehicle are to be taken and the employee driven home. Do not allow the employee to drive or take possession of a vehicle while in what you reasonably believe to be an intoxicated state. If the employee refuses to cooperate or becomes belligerent, call the Sheriff's Department for assistance. Report all such incidents of this nature to the Human Resources Supervisor.

10.07.4 Alcoholism

Confirmed alcoholism is acknowledged as a disease and therefore may be treated as any other illness. An Alcoholic employee is potentially hazardous to himself and to others. Ignoring this problem at the work site is a mistake management and employee must avoid. When the need for treatment of an alcoholic employee is indicated, contact the Human Resources Department for assistance.

SECTION 10.08

10.08.0 REPORTING ON THE JOB INJURIES

This section explains the procedure to be followed in reporting "on the job" injuries and to furnish guidelines for the proper completion of required reports after an occupational injury has occurred.

Our goal is to make certain that an injured employee gets prompt medical attention, worker's compensation benefits, and that the cause of the accident is determined to prevent future occurrences.

10.08.1 Reporting Procedures

All job injuries, no matter how small must be reported. Each report is detailed below.

Copies of all forms will be on file in each department and will be available to employees from their immediate supervisor or Elected Official/Department Head.

Report of Injury/Accident. This form is to be completed immediately by the injured employee or by his/her supervisor (or designee), if the employee is unable, and returned to the Human Resources Department no later than 24 hours from time of injury. The form relates to the events of the accident or injury. Any safety problems that may have been contributed to the accident should be noted on this report. Human

Resources staff will forward the employee's Report of Injury to the Safety Director and the County's Insurance Carrier.

If the injury occurs on a weekend or holiday, the injury should be reported to the Human Resources Department on the next normal working day.

Witness Statement of Injury. Supervisors distribute and collect this report from each person witnessing the accident or injury. In some instances, the form may also be used to obtain negative witness reports, i.e., reports that the accident did not happen or injury did not occur. These reports should be solicited immediately before memories fade or there is time for discussion about the accident. Results are best obtained when witnesses are separated before being interviewed. These reports should be submitted to Human Resources within 24 hours of the accident or injury.

Certification of Physician or Practitioner. This form is completed by the attending physician. It provides a detailed medical description of the injury and establishes return-to-work orders. It is the document by which Human Resources and the worker's compensation administrator tracks the employee's progress. Unless otherwise instructed, the Certification of Physician or Practitioner must be completed for each treatment the employee receives or a DWC-73 form must be used.

Supervisor's Report of Injury/Accident. This is the report that conveys the statistical information necessary in the management of the safety program. It relates the nature of the accident, hazards contributing to the accident, and unsafe acts that may be evident. This report is not only beneficial to the safety program, but also is a valuable investigative tool for supervisory use. This report is due within three days of the accident.

10.08.2 Supervisors Responsibility

The supervisor is responsible for assuring the completion and submission of employee reports, witness reports, and the supplemental reports in a timely manner. The supervisor also has the responsibility to instruct employees in the County's injury procedures (explained in Section 10.06 of this Manual) and make sure employees adhere to these procedures. It is also the supervisor's responsibility to provide the injured employee with additional medical treatment report forms when returning to the doctor for supplemental treatments or to ascertain that the employee returns with the proper documentation for each visit. The Elected Official/Department Head must ensure that employees are compliant with all restrictions as determined by the physician on the Medical Treatment Report forms.

10.08.3 Notice to Elected Officials/Department Heads

Supervisors should read and understand the medical services procedures in Section 10.06 of this manual and follow them to ensure prompt medical treatment of the injured employee.

10.08.4

Injuries Sustained by Employees in County Vehicles and Privately Owned Vehicles used on County Business

When an employee operates a County owned vehicle and becomes injured as a result of an accident, that employee is entitled to worker's compensation ONLY if the operation of the vehicle was directly associated with the performance of duty. An employee injured in an accident while driving to and from home on a normal work day would not be reported as a worker's compensation injury. The employee would receive medical coverage under their current health benefit plan. The only exception to this rule is when an employee is called to perform a duty after or before normal work hours or when it is clear that due to the nature of the employee's title or position, the injury arose out of the employee's obligation to perform his/her employment function and was authorized to do so. (example: A Road & Bridge employee stops to repair a street sign while on his/her way home.) Cases in question should be directed to the Safety Director before any determination is made as to whether or not an injury in a County vehicle is compensable or not when the incident occurs.

When an employee operates a privately owned vehicle on authorized County business, the responsibility for employee injuries is covered under the provisions of the Workers Compensation Act. Any non employee passengers are the primary responsibility of the employee through their insurance carrier or the carrier of the party otherwise responsible for the accident. The after hours provisions as well as the to and from provisions described above apply equally to both situations.

The employee's insurance carrier or the carrier of the party responsible for the accident will be required to pay for the physical damages and liability claims arising out of the accident. The employee's insurance carrier will respond before the County's carrier.

10.08.5

Light Duty Assignment for on the Job Injuries

The County's policy and procedure provides a program under which light or modified duty assignments can be made available to employees who are recovering from job related injuries and who are presumed to be able to return to full unrestricted duty within ninety (90) days of the date that the original modified duty assignment is made.

Through the implementation of this program, it is expected that employees will be able to return to gainful employment as soon as is medically feasible, that employee morale will be positively affected, and that the impact of occupational injuries will be minimized at the same time departmental productivity increases.

The success of this program is dependent upon the close working relationship between the treating physician, the department supervisor, Safety Director, and the employee.

10.08.6 Policy

It is the intention of the County that every effort be made to provide light or modified duty assignments to employees who, after having been injured on the job, are capable of providing meaningful service to the County while recuperating from the injury. The priority for light duty assignments will be as follows:

- Return employee temporarily to his/her normal position with only minor restrictions of activity which do not create a substantial burden on other employees or the County.
- Return employee temporarily to a position which provides valuable service to the County, but does not necessarily provide the same level or quality of service as before the employee was injured.
- Temporarily reassign the employee to a department other than their own to provide light duty service that is needed by another department which is not available in the employees home department but fulfills the medical restrictions placed upon the employees activity.

In the event none of the above are available, the employee may be sent home with the concurrence of the Safety Director, Human Resources Supervisor, and the employee supervisor until the next doctor's appointment or when the appropriate duty becomes available.

10.08.7 Procedure

When an occupational injury is treated by any health professional, the medical management of the case is the responsibility of the affected Elected Official/Department Head, the Safety Director, the Human Resources Supervisor and the employee.

When an employee is seen for treatment of a job related injury, either initially or on an ongoing basis, he/she must remain in contact with the Safety Division. Any difference of opinion expressed by an outside medical provider and the County's staff will be resolved by a second physician selected by the County.

Upon each doctors appointment the employee will be given a status slip verifying their current status. The slip will be dated and the time of release from their physician's office should be provided. Supervisors should be aware of the time an employee was released from their physician's office and when they returned to their work station.

If the result of the visit is the recommendation for light duty, the doctor will discuss and provide written limitations and their duration with the employee as well as the supervisor to ensure the opportunity for the assignment exists.

If no opportunity exists, the Safety Division in conjunction with the Human Resources Department will coordinate the temporary reassignment of the employee to another

activity. The injured employee will remain on the payroll of the home activity regardless of where he/she is relocated.

If for any reason the light duty assignment is made and the employee claims to be unable to perform, the employee is to be sent immediately to the Human Resources Department and then to the appropriate physician for re-evaluation. Only if the problem develops after normal working hours or weekends should an employee be sent directly home. If the after hours situation occurs, an appointment should be made for the employee to visit the department and appropriate physician on the next working day.

The physician will send the employee back to Human Resources immediately after completion of treatment. Human Resources will direct the employee back to the job or home, depending on the physician's recommendation. The parent division and light duty assignment, if different, shall be notified of the employee's status.

Light duty status is considered to expire upon; full recovery, repeal by medical authority of record, or at the end of ninety (90) days. The employee's physician, with the concurrence of Human Resources and the Elected Official/Department Head may recommend an extension of the light duty status of the employee when ninety (90) days has been exhausted but the full return to work status of the employee is expected shortly thereafter.

Due to limited available positions in each department, light duty assignments will not always be available. The County reserves the right to make the final determination as to the conditions under which such positions are made available and for how long a person may occupy such a position.

Long term modification and/or reassignment which may be considered necessary as a result of an occupational injury or illness will be managed on a case by case basis by the Safety Division, Human Resources Supervisor, and the affected Elected Official/Department Heads to ensure that reasonable efforts are made to provide gainful employment for previously injured employees as provided in the Workers Compensation Act.

Overtime for employees assigned to light duty is not authorized.

SECTION 10.09

10.09.0 REPORTING AND HANDLING COUNTY VEHICLE ACCIDENTS AND THIRD PARTY CLAIMS

These instructions are to be followed explicitly when an employee is involved in an accident in a County vehicle involving third party property. It is assumed that the employee is not injured and can function accordingly. If injured, the employee should attend to the injury and leave the following instructions to someone else.

All inquiries concerning an incident/accident should be referred to the Safety Division or to the County Judge's Office.

No County employee should make any comment on or express any opinion as to the County's liability, responsibility or intent to make payment, repair, or reimbursement for any damage.

No County employee should discuss any accident, incident, alleged fact or other potential claim related problem with any party, adverse or not, whether it be a claimant, attorney or a member of the news media.

All accidents and claims should be investigated and a report completed regardless of How minor the damage or injury appear to be.

10.09.1 Duties of the County Employee

- Stop immediately and determine if there are injuries or damage.
- Protect the scene-of accident; set emergency signals; turn ignition off; obtain assistance to control traffic and avoid obstructing traffic as much as possible.
- Notify the Police immediately. Information to the Police should pertain to what occurred and should be factual statements, not opinions. Offer no information regarding the responsibility for the accident or what should have been done to avoid the accident.
- Make no admission to fault of negligence to bystanders. Say no more than is necessary and DO NOT sign any statements.
- Notify the Elected Official/Department Head. If the accident occurs after normal working hours, on a weekend or holiday, have the dispatcher notify the Safety Division. If the accident involves serious injury or extensive damage, radio/telephone notice should be given immediately to the Elected Official/Department Head who will consequently contact the Safety Director.
- If the accident involves a vehicle or a criminal act such as vandalism, notify the appropriate law enforcement agency immediately.
- If the accident involves an injury or potential injury and the vehicle has a radio, notify your base station or dispatcher of the situation and have them request assistance from the appropriate safety organization (i.e. Ambulance Service, Fire Department, Police Department, Sheriff's Department).
- Complete the appropriate accident/incident reports as accurately and completely as possible with the guidance of the employees supervisor or Elected Official/Department Head.

10.09.2 Reporting Accidents Involving the County

Any employee witnessing an accident potentially involving Polk County should respond in accordance with the following procedures;

1. Ask the victims if they are injured and offer to call an ambulance.
2. Provide basic First Aid if you are certified to give First Aid.
3. Report circumstances to your Elected Official/Department Head by the fastest means available.
4. Describe what you witnessed. Include everything that you personally saw. Heard, felt, tasted, or smelled. Try to identify the source of any information you have that is not within your personal knowledge.
5. **DO NOT** admit to any liability on the part of Polk County or make any statements which could lead the injured person to believe that the County will take care of the matter. Refer persons to the Safety Division or County Judge's Office without further comment.
6. Any law enforcement officer witnessing or investigating an accident in which a third party is injured or damage occurs under circumstances where it appears the County may be liable, he/she shall prepare a complete report for submittal to the Safety Division and County Judge's Office.
7. In accidents involving a vehicle driven by a law enforcement officer, the investigation will be made by the Texas Department of Public Safety or the Police Department within the municipality where the accident/incident occurred.

10.09.3 Duties of the Elected Officials/Department Heads

Once an accident occurs, regardless of the amount of physical damage or bodily injury, an accident form should be completed and submitted to the Human Resources Supervisor and the Safety Director. In situations where damages or bodily injuries to a third party exist, telephone the Safety Division. If the accident occurs after normal working hours, telephone notice will be given on the morning of the next business day; however, if the accident involves serious bodily injury or extensive property damage, have the dispatcher contact the Safety Division.

Submit the original accident form to the Safety Division by the next business day.

Within two working days following the accident, deliver the Vehicle to the Vehicle Maintenance Department so they can obtain at least three estimates of the damages, or the Elected Official/Department Head may obtain at least three (3) estimates. If your department has any additional information pertaining to the damages received that will help expedite the processing of the claim, please do not hesitate to share that information with the Safety Division and County Judge's Office. The Vehicle Maintenance Department will be responsible for forwarding those estimates to the appropriate departments.

The Sheriff's Department must be notified when County property is involved in a case of theft, vandalism, or vehicular accident.

The Elected Official/Department Head will investigate the circumstances of the damage and report the following to the County Judge's Office, with a copy to Human Resources and the County Auditor (for insurance reporting purposes);

1. Date and time of accident.
2. Full description of property damage.
3. Amount of damage (include estimates if appropriate.)
4. Name and address of person(s) causing damage, if known.
5. All facts concerning the cause of the incident.
6. Name and address of all witnesses.
7. The case number if police action was involved.

10.09.4 Damage to County Property

Accidents, vandalism, fire, storms, etc. cause damage to County property. Often, the County may have a claim against a party for damage to a County vehicle or property. The Safety Division shall report any damage involving county property to the County Auditor's office for the purpose of determining insurance coverage. The following procedures should be followed when County property is damaged.

10.09.5 Duties of County Employees

If it is a fire, call the fire department immediately by dialing 911. Contact the supervisor immediately upon notice of damage to County property. If the damage is observed after regular working hours, telephone notice may be given the next morning; however, if the loss involves extensive property damage, radio/telephone notice should be given immediately.

If an accident involves a vehicle or if vandalism is discovered, contact the Polk County Sheriff's Department or the appropriate law enforcement agency.

10.09.6 Duties of the Sheriff's Department

The Polk County Sheriff Department is responsible to investigate any vandalism, theft, or any malicious damage to County property. The investigating officer should complete the damage report form (Attachment D) and note the property damage, exact location, and person(s) responsible for the damage. A copy of the report should be submitted to the Safety Division the next business day after the incident/accident. The Safety Division shall provide this information to the County Auditor's Office.

10.09.7 Duties of the Safety Director

The Safety Director should be advised of any accident involving serious injury or extensive damage in which a claim may be made against the County by a third party.

The Safety Director shall see that all reports and investigations regarding accidents are properly completed and submitted.

10.09.8 Claims Against the County

Claims against Polk County are handled by the County Judge's Office. There may be an occasion where an employee is approached by a third party stating that something is the County's fault or asking for information about filing a claim against the County for property loss or personal injury.

If you receive an inquiry about a claim against Polk County, direct the person to the County Judge's Office. To file a claim, a written complaint must be filed with the County Judge. The County Judge files the complaint with the County Insurance carrier which conducts an investigation as to whether the claim is valid.

Never assume the County is in the wrong or has an obligation to pay any cost associated with an accident or injury. All costs associated with an injury must be paid first by the injured party's insurance carrier. If a claim is established, the cost of treatment will become part of the claim.

10.09.9 Vehicle Accident and Breakdown Procedure for County Vehicles

If a County vehicle is disabled as the result of an accident, or if a vehicle breaks down at any time, contact your supervisor immediately. A wrecker will be sent by dispatch to tow the vehicle to the appropriate location. Whenever a serious incident occurs involving a County vehicle – whether it is a breakdown, vandalism, or other incident, call your supervisor for advice on the proper action to be taken.

SECTION 10.10

10.10.0 OPERATING COUNTY VEHICLES

The majority of employees at one time or another will operate a County vehicle. To many, it is essential to the duties performed. But, operating County-owned equipment is a privilege which may be withdrawn at any time. If you lose the privilege, you may lose your job. By taking care of the privilege, you are also protecting your job. All drivers for the County, in public or private vehicle, will obey all applicable laws of the state of Texas, as well as the following regulations of Polk County.

10.10.1 Policy of Vehicle Operation

County personnel operating any County vehicle will possess a valid Texas Driver license. No employee will operate a vehicle without the proper classification of driver license;

"A" License – any vehicle except motorcycle.

"B" License – Single vehicle exceeding 24,000 pounds

"C" License – Single two axle vehicle not exceeding 24,000 pounds.

"M" License – Motorcycle.

An employee cannot become certified or may lose current certification to operate either a County or privately owned, for County business if the employee has:

1. Had three (3) moving violations and/or accidents, One (1) DWI conviction, or one breath test refusal (BTR) in the preceding 24 month period.
2. Has had one (1) DWI or one (1) DUID conviction, or one (1) breath test refusal (BTR) on his/her State driving record.
3. Lost or losses of, State of Texas driving privileges for any reason. When the State renews the employees driving privileges, they may again apply for a County operators permit.
4. Failed to meet the physical standards necessary to operate a vehicle.
5. Failed to successfully complete the County Defensive Driving Course training when required.

Elected Officials/Department Heads must notify the Human Resources Supervisor of employees who drive County vehicles. Human Resources will supply the Texas Association of Counties (TAC) with the necessary information to ensure each employee is driving in accordance with Texas laws.

Any employee who operates a vehicle for County use is required to report a suspension or revocation of their license to their supervisor. Their supervisor will notify the Safety Division. **FAILURE OF AN EMPLOYEE TO REPORT A CHANGE IN LICENSE STATUS WILL RESULT IN DISCIPLINARY ACTION UP TO AND INCLUDING DISCHARGE.**

No employee should be trained or instructed to drive any vehicle for which they are not licensed. An employee will not be allowed to operate a special purpose vehicle (tractor, sweeper, etc.) until they have been trained by the supervisor on its operating instructions, emergency procedures, maintenance, vehicle limitations, and satisfactorily demonstrated their ability to operate it. After passing the operator test, the supervisor will give them certification to operate the vehicle.

Any vehicle, equipment or machinery found to be unsafe by any County employee will not be driven or used until those conditions have been corrected by maintenance services. An employee should notify their supervisor of unsafe conditions in writing. It will be the supervisor's responsibility to ensure correction of the problem. Should the condition continue to exist beyond this point, bring it to the attention of the Safety Division.

The use of seat belts is a law in this State. While driving or riding in a County vehicle, use of the seat belt is mandatory. Please see Appendix D, Polk County Seat Belt Use Policy, for more details. Violation of this policy is subject to disciplinary action, which may include suspension and/or termination.

Every employee who routinely drives a County vehicle will be trained in defensive drivers training as training sessions are scheduled. Retraining will be provided at least once every three years. Persons taking defensive driving courses in lieu of traffic fines will get credit for this requirement, but the County will not bear the cost of training in this case.

If a vehicle becomes disabled while you are driving it, (i.e. overheats, flat tire, warning light on, etc.), do not try to "limp in". Notify Maintenance Services of the vehicles situation, unit number, and location by radio or telephone. If a wrecker is not available, move the vehicle off the road or out of the flow of traffic, set the parking brake, turn on your flashers, remove the ignition key, and lock all doors and boxes. Arrange transportation to the appropriate County facility and drop off the key.

10.10.2 General Rules

Before the initial use of any vehicle each day, the driver will walk around and inspect the vehicle for damage, inoperable lights, unsecured loads, flat or worn tires, or any other condition which may create an unsafe situation.

Seat belts are to be worn at all times by all occupants anytime the vehicle is in motion.

No County vehicles of any type will be left unattended with the ignition key left in the ignition. When leaving your vehicle, set the brake, remove the key, and lock the doors.

Do not park County vehicles in "No Parking" zones except in an emergency situation or if required in performance of official duties. Use emergency flashers when parking in those zones or when broken down.

If the driver does not have a full, clear view of an area behind him when backing up, a second person in the vehicle will get out and guide the driver using appropriate hand and voice signals. If the driver is alone he/she will get out of the vehicle and inspect the area before backing up and then proceed with extreme caution.

Drivers should ensure loads are secured and tailgates are up and locked before vehicle is put in motion. If the tailgate must remain open, a red flag will be attached to the outside corners of the gates.

During periods of limited visibility or any time windshield wipers are in use, the headlights will be turned on. Make certain lights are off when parked.

Consumption of alcoholic beverages or narcotics before or while operating a County vehicle is prohibited. Such action may lead to termination.

Trailers are to be fastened securely to hitches. Safety pins in pintail locks will be used. Safety chains will be crossed under the hitch and securely fastened before moving the vehicle.

All items transported whether in a truck or trailer will be secured.

No more than three (3) persons will ride in the front seat of any vehicle equipped with three (3) seat belts. Where only two single seats exist, there will be only one rider per seat.

Riding on running boards, tool boxes, or the vehicle roof is prohibited. Employees riding in back of crew trucks will remain seated when the truck is moving.

County vehicles are to be used for official County business only. Transportation of private citizens, unless as part of an official or authorized function is prohibited. Sheriff Deputies with take-home vehicles should follow rules established for them.

Commercial size vehicles (larger than pickups) should not travel in the extreme left lane of the expressways, except when passing a slower moving vehicle or to avoid a traffic hazard (emergency vehicles are excluded.)

Headsets will not be worn, except for specific cases requiring their use. Headsets can be hazardous because the wearer is unable to hear verbal orders, warnings, emergency vehicle sirens, horns, or even normal traffic sounds. The prohibition includes individual radio devices. Texting on cellular devices is not allowed while driving. Violations of this policy are subject to disciplinary action which may include termination.

SECTION 10.11

10.11.0 ACCIDENT INVESTIGATION

Accidents can be prevented when their causes are known. Those causes can only be determined by conducting an investigation. The purpose of an accident investigation is to determine all factors, human and material, which directly or indirectly contribute to the accident. This information can be used to reduce the chances of a similar accident in the future. The accuracy and thoroughness of an investigation determines the

effectiveness of the corrective action. Guidelines and suggestions for a proper investigation follow.

10.11.1 Investigation Procedures

Safety must be first during the investigation. In many cases, an accident scene is a dangerous place.

Investigating personnel must be particularly alert to the hazards they may come upon at the scene and must protect themselves from those hazards.

Each accident must be investigated by the supervisor of the department in which it occurred. If major injury or equipment damage has occurred, the Safety Director is available to help with the investigation. It may be necessary that the Safety Director complete an investigation of his own. Reports must be completed and filed with Human Resources immediately.

An immediate concern should be to preserve the conditions of the accident scene as they were at the time of the accident. The investigator must be able to piece together the sequence of events leading to the accident. Disturbing things at the scene make this process much harder (i.e. condition of controls, guards, etc.)

Begin where the accident occurred. Carefully examine where the injury occurred. Photograph the scene, if possible. If not, draw a diagram of the location noting placement of machinery, equipment, and any other physical object. Mark where victim and witnesses were.

Seek answers to the following general questions that apply to most situations. Write down your answers.

- What was the injured person doing at the time of the accident? Performing the assigned task? Doing maintenance? Assisting another worker?
- Was the injured employee working on a task he/she was expected to do? Was he/she qualified to perform the task? Was he/she familiar with the equipment and machinery?
- What were other workers doing at the time of the accident?
- Was the proper equipment being used for the task at hand (screwdriver instead of can opener to open a paint can, file instead of a grinder to remove a burr on a bolt after it was cut, etc.)?
- Was the injured person following approved procedures?
- Is the process, operation, or task new to the area?

- Was the injured person being supervised? What was the proximity and adequacy of supervision?
- Did the injured employee receive hazard recognition training prior to the accident?
- What was the location of the accident? What was the physical condition of the area when the accident occurred?
- What immediate or temporary actions could have prevented the accident or minimized its effect?
- What long term or permanent action can prevent a recurrence of the accident or minimized its effect?
- Had corrective action been recommended in the past but not adopted?

During the course of the investigation, the above questions should be answered to the satisfaction of the investigator. Other questions that come to mind as the investigation continues should be recorded as well.

Weigh the evidence and eliminate any inconsistency in the testimony. This may require further questioning of the injured or witnesses.

Write the report. All data, findings, and recommendations should be compiled into the basic report format. When assembled, all facts should be reviewed for accuracy and completeness, then submitted to the Safety Division. The report should contain:

- Purpose of the investigation
- Name of person(s) doing the report
- A brief explanation of circumstances surrounding the accident
- Time, date, and location of the accident
- Witness Statements
- Statement of facts established by the investigator
- Photographs, if available
- Any design work to accomplish reduction of hazard which may be available
- Conclusions and recommendations

SECTION 10.12

10.12.0 HAZARD REPORTING

It is every employee's responsibility to report equipment and facilities which are designed poorly or have become unsafe. The unsafe condition should be reported to the Elected Official or Department Head. The form is given to the supervisor who will distribute copies to the departmental safety committee and the Safety Director.

SECTION 10.13

10.13.0 SAFETY INSPECTIONS

Safety inspections of department/division may be conducted ANNUALLY by the Safety Division on a formal basis. (i.e. reports will be sent to the County Judge and Executive Safety Committee). Informal inspections will be accomplished as needed to assure that hazards are kept at a minimum and safe work practices are enforced.

10.13.1 Formal Inspections

The Safety Division will perform formal inspection on a schedule that will be convenient to the Elected Official/Department Head/supervisor concerned. Individuals within the department are expected to fully cooperate in the inspections to ensure that all areas are covered and all hazards itemized. The Safety Division will utilize checklists appropriate for each area being inspected. Emphasis will be placed on the condition of facilities, equipment, and machines as well as implementation of the overall program such as:

- Good housekeeping
- Use of prescribed protective equipment
- Compliance with published division work rules
- Qualification of drivers and condition of vehicles
- Proper maintenance of electrical equipment
- Proper guarding of open pits, ditches, tanks, etc.
- Proper storage of flammable/combustible liquids and hazardous materials
- Portable fire fighting equipment, first aid kits, and emergency lighting
- Condition of power and hand tools and ladders
- Proper guarding of powered equipment and machines
- Excessive noise levels
- Excessive dust levels, proper ventilation
- Proper clothing
- Administrative compliance with this manual and other pertinent directives

Inspection reports are to be kept in department files on all inspections for three years and must include the following:

- Date of inspection and name of inspector
- Written list of deficiencies discovered
- Recommendations for correction of deficiencies
- Date by which corrections are to be completed

A copy of all formal inspection reports will be furnished to the County Judge, Executive Safety Committee, appropriate Elected Official/Department Head, and the Safety Director.

Supervisors shall inform all employees of any unsafe conditions which can not be immediately corrected, and take proper measure to protect against them.

10.13.2 Informal Inspections

Informal inspections shall be conducted by the Safety Division whenever the need arises. Department Heads, Elected Officials, supervisors, and any employee may request inspections when an unsafe condition or practice is noticed. The Safety Division will make recommendations for corrective actions or consult with outside agencies for guidance. A record of the visit and discrepancies shall be filed at the Safety Division and follow up action will be taken to ensure that corrective measures are taken.

SECTION 10.14

10.14.0 PURCHASING SAFETY EQUIPMENT

Purchasing tools, monitors, safety equipment, personal protective equipment, training supplies, or anything required for safety of the workers will be done under County purchasing policies.

SECTION 10.15

10.15.0 PERSONAL PROTECTIVE EQUIPMENT

Many workers in the County are exposed to potentially hazardous situations. A hazard that cannot be removed from the workplace must be protected against. Personal protective equipment cannot remove a hazard but will reduce the potential risk involved from exposure to it. If an accident does occur, the equipment will lessen the employees degree of injury. Policies for the requirements, use and care of personal protective equipment are as follows:

The Safety Director shall be responsible to write the specifications for use of personal protective equipment for all hazardous jobs.

Specialized protective equipment required on hazardous jobs will be provided by the County with the exception of prescription safety glasses. Each employee will be fully accountable for the use and care of personal protective equipment issued to him. Equipment will be replaced by the County when it is damaged as a result of normal wear and tear. Employees will not be allowed to perform any job that requires personal protective equipment unless they have the required equipment. This means an employee may be sent home without pay when he/she does not have and use required personal protective equipment which is in usable condition. If the equipment has been broken or lost, the employee must replace it before he/she will be allowed back on the job site.

Ordinary safety shoes and prescription safety glasses will be provided by the employee, when required. Assistance in choosing proper equipment and finding it can be obtained from the Safety Director. Even though the employee is expected to buy his own eyeglasses and shoes, failure to use them when required is also justification for removing employee from the work site.

Department supervisors will budget for protective equipment requirements as well as other tools and materials that are needed. Both initial and replacement costs should be considered. Failure to adequately budget for personal protective devices will not suffice as an excuse to them.

Training on the use of equipment must be given at the time the equipment is issued. A clear reasonable explanation of the equipment's purpose and limitations must be given. An employee who understands the need for the equipment will be more willing to use it. Supervisors should also be certain the equipment fits the employee properly. It should neither be too big or too small to provide the protection needed nor so uncomfortable the employee does not want to use it.

10.15.1 General Requirements

10.15.2 Head Protection

Although every worker is encouraged to use their head to absorb knowledge – they should not use it to absorb blows! Those who are exposed to head hazards must be provided with hard hats. Specific hazardous operations where hard hats are required are;

- All subsurface operations where tools, equipment or construction materials are overhead.
- All areas where a real potential for head injury exist (i.e. overhead operations, rotating equipment, tree trimming, overhead lifting equipment, etc.)
- All construction sites or any area where "Hard Hat Area" signs are posted
- Whenever so advised by supervisory personnel

Anyone (supervisor, authorized visitors, etc.) exposed to the above listed situations will be required to wear protective head gear.

Before each use, helmets should be inspected for cracks or signs of wear that might reduce the degree of safety provided. Prolonged exposure to sunlight and chemicals can shorten the life of the helmet. Helmets that exhibit less surface gloss, chalking, or cracking should be discarded.

10.15.3 Hearing Protection

Ear plugs or muffs shall be used to guard against prolonged exposure to noise exceeding 85 decibels (rule of thumb: protection is needed anytime you cannot hear

another person speak in a normal volume while standing an arm's length away. Any area in doubt of requiring protection should be reported to the Safety Division so testing can be performed.

10.15.4 Eye and Face Protection

Goggles, safety glasses, face shields, and welding helmets with proper lenses shall be provided and must be worn in all designated areas to protect against airborne particles, chemicals and heat.

Eye protections should be comfortable and ensure a close fit. Various defogging materials should be available to the employee to prevent impaired vision in humidity or rain.

Protective wear should be cleaned daily. Use of sweatbands helps reduce eye irritation, aids visibility, and eliminates work interruptions for face mopping.

Your eyes are much too important to risk an injury. Wear the protective equipment for your own sake.

10.15.5 Hand Protection

Gloves protect against cuts, splinters, burns, chemicals, and punctures. Employees in occupations having exposure to hand injury should wear gloves suited to the occupation.

- Cotton gloves are for general light utility use
- Leather gloves are used when working with rough abrasive surfaces, moderate heat, and sharp edges
- Rubber gloves are used for protection against chemicals and waste water

Employees must only use gloves for applications recommended by manufacturers, and return worn out gloves to their supervisor when requesting replacements.

10.15.6 Foot Protection

Safety shoes shall be worn by employees who work in areas where feet can be mashed by dropping or rolling heavy objects over them. Footwear must have sole protection from puncture as well. Protective footwear must be worn in the following departments: Aging Services, Road & Bridge, Maintenance and Sheriff's Office.

10.15.7 Respiratory Protection

Approved respirators, mask, or self contained breathing apparatus (scuba) shall be used by employees who work in toxic or abnormal atmospheric conditions.

All respiratory protection must be inspected regularly. All respiratory protection equipment must be used only in atmospheres they are rated to protect against.

Employees must be fitted, trained, and tested on this equipment before being allowed to use it.

SECTION 10.16

10.16.0 HAZARDOUS CHEMICAL TRAINING

Many occupations use chemicals that can be harmful to the employee if misused or mishandled. The Texas Hazards Communication Act has specific requirements that training will be conducted regarding the use and storage of dangerous chemicals in the workplace.

Polk County intends to follow the requirements of the law and has started such a training program. The County believes that every protective step must be taken to protect employees from any harmful chemical exposure whether required by law or not. Each employee will be trained to appreciate the hazards of the chemicals he/she works with and will be shown how to use the chemical properly without harm to themselves or others. Training will be given so that the employee knows the proper uses of the chemical, its dangers, and what to do in the event of hazardous contact with the chemical.

Material Safety Data Sheets will be available on site on each hazardous chemical used by an employee. Supervisors will be sure that each employee knows what the dangers are and what to do in the event of contact of spillage before the employee will be allowed to work with them.

The Safety Director will maintain the records of training. Supervisors will submit the roster of personnel attending chemical training sessions as well as the description of the subject chemicals. The Safety Director is also available to help set the criteria and provide training materials. He/she will monitor the program to be sure of compliance to the law.

SECTION 10.17

10.17.0 TRAFFIC CONTROL

Many occupations within the departments of this County require their employees to be exposed to vehicle traffic at their work sites. Because of the probability and severity of injuries resulting from working in or around the streets, the Safety Division will establish a work site traffic control policy that will be used by all departments at risk. A uniform program used by all departments will ensure consistent training and the proper protection from on-coming traffic. A reduction of employee injuries and citizen liability claims will be the result of an effective traffic control policy. The County traffic control

policy will be included in all departmental safety manuals in which an exposure to traffic in the workplace may possibly exist.

SECTION 10.18

10.18.0 DEPARTMENTAL SAFETY MANUALS

This manual has established general guidelines that affect everyone involved in the County-wide safety program. It would be impossible to include all aspects of safety for every department within the County. For the safety program to be a success, each department must develop and publish a specific safety manual that addresses the unique as well as common safety hazards faced by their employees.

10.18.1 Responsibilities

10.18.2 Safety Division

The Safety Division will assist in development and will publish departmental safety manuals written by the Elected Official/Department Head and their safety committee. The manuals must be designed to address and include the specific hazards in the workplace that affect all division employees such as clerical, labor, operator and maintenance.

10.18.3 Elected Officials/Department Heads

Elected Officials/Department Heads must ensure the accomplishment and give endorsement to the completed department manual. Elected Officials/Department Heads are encouraged to issue supplements to the various safety manuals addressing area of safety concerns unique to their operations. These supplements shall not diminish the requirements of this manual, but may add to the requirements. All supplements must be approved by and on file with the Safety Division.

10.18.4 Supervisors

Supervisors will lend assistance in development of this manual. It is their responsibility to make certain everyone is issued a copy and understands the safety manual.

10.18.5 Employees

Employees must read and understand all manuals issued to them. Their suggestions and comments are encouraged and welcome. Compliance with all the manuals, safety rules, and procedures is mandatory! Carelessness and inattention to good safety habits may be grounds for disciplinary action up to and including termination of employment.

SECTION 10.19

10.19.0 DISCIPLINARY ACTION

The main goal of the safety program is for the employees' benefit, to make their job site a safer place to be employed. The program is a positive step for our employees and will be managed in that spirit. An employee "think safety" attitude will be promoted and emphasized through cooperation, improved hazard awareness, safer conditions, and formal training. However, when violations of safety policy or procedure occur, corrective action will be prompt. Too often safety violations are overlooked until an accident occurs.

The purpose of discipline is to prevent accidents by stopping unsafe acts before they cause injury. Safety violations may result in formal disciplinary action or dismissal.

The nature of the safety violation determines if a warning should be issued. This decision will be made by the supervisor or the safety committee. Any employee may be cited. A single serious violation could be grounds for termination. Three written warnings given to an employee may be grounds for termination.

The following are examples of unsafe acts but are not limited to those that can bring about disciplinary action:

- Failure to comply with safety procedures
- Careless, negligent, or improper use of County property or equipment
- Defiant or indifferent attitude toward safety policies/procedures
- Contributing to an accident by disregarding safety
- Failure to cooperate in an accident investigation

If the supervisor observes workers not using safe work methods, he/she should correct them at once. If they do not correct the methods, the unsafe method soon becomes standard. For this reason, supervisors who permit an employee under their supervision to disregard safety practices or engage in unsafe actions will be disciplined more severely than the worker themselves.

**POLK COUNTY
RECORD OF ACCIDENT**

Employee Name: _____ DOB: _____
 Address: _____ Social Security #: _____
 City: _____ State: _____ Zip: _____
 Telephone: _____ Email Address: _____
 Department: _____ Office Telephone: _____
 Job Title: _____

ACCIDENT INFORMATION: (ALL INFORMATION MUST BE COMPLETED, EVEN IF NO INJURIES)

Date of Accident: _____ Time: _____ AM/PM
 Was there any lost time: YES / NO Date lost time began: _____
 Time work began: _____ # of hours worked before accident: _____

Nature of Injury:

<input type="checkbox"/> Allergic Reaction	<input type="checkbox"/> Amputation	<input type="checkbox"/> Angina Pectoris	<input type="checkbox"/> Asphyxiation	<input type="checkbox"/> Burn
<input type="checkbox"/> Concussion	<input type="checkbox"/> Contusion	<input type="checkbox"/> Contagious Disease	<input type="checkbox"/> Crushing	<input type="checkbox"/> Dislocation
<input type="checkbox"/> Electric Shock	<input type="checkbox"/> Enucleation	<input type="checkbox"/> Exposure	<input type="checkbox"/> Foreign Body	<input type="checkbox"/> Fracture
<input type="checkbox"/> Freezing	<input type="checkbox"/> Hearing Loss	<input type="checkbox"/> Heat Prostration	<input type="checkbox"/> Hernia	<input type="checkbox"/> Infection
<input type="checkbox"/> Inflammation	<input type="checkbox"/> Laceration	<input type="checkbox"/> Myocardial Infarction	<input type="checkbox"/> No injury	<input type="checkbox"/> Occupational disease
<input type="checkbox"/> Poisoning	<input type="checkbox"/> Puncture	<input type="checkbox"/> Rupture	<input type="checkbox"/> Severance	<input type="checkbox"/> Sprain
<input type="checkbox"/> Strain	<input type="checkbox"/> Syncope	<input type="checkbox"/> Vascular	<input type="checkbox"/> Vision Loss	

Other: _____

Body Part Injured: Left Right

<input type="checkbox"/> Abdomen	<input type="checkbox"/> Ankle	<input type="checkbox"/> Artificial Appliance	<input type="checkbox"/> Brain	<input type="checkbox"/> Buttocks
<input type="checkbox"/> Chest	<input type="checkbox"/> Disc	<input type="checkbox"/> Ear(s)	<input type="checkbox"/> Elbow	<input type="checkbox"/> Eye
<input type="checkbox"/> Face	<input type="checkbox"/> Facial Tissue	<input type="checkbox"/> Finger(s)	<input type="checkbox"/> Foot	<input type="checkbox"/> Hand
<input type="checkbox"/> Heart	<input type="checkbox"/> Hip	<input type="checkbox"/> Internal Organs	<input type="checkbox"/> Knee	<input type="checkbox"/> Larynx
<input type="checkbox"/> Lower Arm	<input type="checkbox"/> Lower Back	<input type="checkbox"/> Lower Leg	<input type="checkbox"/> Lungs	<input type="checkbox"/> Mid Back
<input type="checkbox"/> Mouth	<input type="checkbox"/> Neck	<input type="checkbox"/> No Injury	<input type="checkbox"/> Nose	<input type="checkbox"/> Pelvis
<input type="checkbox"/> Respiratory	<input type="checkbox"/> Sacrum/Coccyx	<input type="checkbox"/> Shoulder(s)	<input type="checkbox"/> Skull	<input type="checkbox"/> Teeth
<input type="checkbox"/> Thumb	<input type="checkbox"/> Toe	<input type="checkbox"/> Trachea	<input type="checkbox"/> Spine	<input type="checkbox"/> Upper Arm
<input type="checkbox"/> Upper Back	<input type="checkbox"/> Upper Leg	<input type="checkbox"/> Wrist(s)	<input type="checkbox"/> Other	_____

Cause of Accident:

<input type="checkbox"/> Abrasion	<input type="checkbox"/> Absorption	<input type="checkbox"/> Assault	<input type="checkbox"/> Bite	<input type="checkbox"/> Burn
<input type="checkbox"/> Crush	<input type="checkbox"/> Cut/Puncture	<input type="checkbox"/> Fall/Slip/Trip	<input type="checkbox"/> Foreign Matter	<input type="checkbox"/> Gunshot
<input type="checkbox"/> Natural Disaster	<input type="checkbox"/> Pandemic	<input type="checkbox"/> Strain	<input type="checkbox"/> Strike Against/Step On	<input type="checkbox"/> Struck By Object

Vehicle Accident Miscellaneous: _____

Location of Accident:

Office/Business Name	Address	City	State/Zip
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What activity were you engaged in at the time of accident? _____

What work process were you performing when accident occurred: _____

Please describe the details of how and why the incident occurred: _____

Did you receive medical treatment? _____ Yes _____ No

If yes, please give the following information where treatment was rendered:

Facility Name: _____

Doctor's Name: _____

Mailing Address: _____

Phone: _____ Fax: _____

Has the doctor taken you off work? _____ Yes _____ No

Witnesses that may have information about this accident: _____

Supervisor's Name: _____

Employee's Signature

Date

POLK COUNTY
EMPLOYEE RECORD OF ACCIDENT
WITNESS STATEMENT

Name of Employee involved in accident: _____
Date of Accident: _____ Time: _____ A, M, P, M'

Name of Witness: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____

Please complete even if not employed by Polk County
Employed By: _____ Phone: _____
Reason for presence at location: _____

Are you related to the employee: Yes _____ No _____
If Yes, how? _____

How long have you known this employee? _____

Did you actually see the accident occur? Yes _____ No _____

How close were you to the employee at the time of accident? _____

Please explain in detail what you saw occur: _____

Did the employee talk to you about this injury? Yes _____ No _____
If yes, when? _____

List any other person(s) that may have information about this **incident**: _____

Additional Comments: _____

To the best of my knowledge, this statement is true and correct.

Signature of Witness _____

Date _____

POLK COUNTY
CERTIFICATION OF PHYSICIAN/PRACTITIONER

Employee Name: _____ Date of Injury: _____

Description of injury/accident: _____

Doctor's Name: _____

Clinic/Facility Name: _____

Phone & Fax: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Date of Treatment: _____

Diagnosis: _____

Probable duration of condition: _____

Was employee airlifted from the scene or taken by an emergency vehicle? _____

Was employee admitted to the hospital? _____

Will the employee's injury/illness require an absence from work of more than three days? _____

Prescribed Regimen of Treatment:

Number of Treatments: _____ General Nature and duration of Treatments: _____

Prescribed Medication: _____

If it is medically necessary for the employee to be off work on an intermittent basis, or to work less than the employee's normal schedule of hours per day or days per week, include schedule of visits or treatment: _____

Referral to other provider of Health Services:

Name of Health Care Provider: _____

Area of Specialization: _____

Date of re-evaluation: _____

EMPLOYEES RETURN TO WORK STATUS

Complete items below regarding the employee's return to work status after reviewing a statement from the employer of essential functions of employee's position, or, if none provided, after discussing with employee.

Released to work full duty Released to work with restrictions Unable to return to work

Beginning Date: _____

Estimated Return to Work Date: _____

Estimated Return to Full Duty Date: _____

(Please check in each category below)

RESTRICTIONS:	CANNOT DO	CAN DO
Standing	_____	_____
Sitting	_____	_____
Kneeling/Squatting	_____	_____
Bending/Stooping	_____	_____
Pushing/Pulling	_____	_____
Twisting	_____	_____
Walking	_____	_____
Climbing	_____	_____
Grasping/Squeezing	_____	_____
Wrist flexion/extension	_____	_____
Reaching	_____	_____
Overhead Reaching	_____	_____
Keyboarding	_____	_____
Lifting	_____	_____
Driving/Operate machinery	_____	_____

Specific to:

Left Hand/Wrist Right Hand/Wrist Left Arm Right Arm Neck
 Left Leg Right leg Back Left Foot/Ankle Right Foot/Ankle

Physician's Signature

Date

**POLK COUNTY
SUPERVISOR REPORT OF ACCIDENT**

Employee Name: _____ DOB: _____
 Address: _____ Social Security #: _____
 City: _____ State: _____ Zip: _____
 Telephone: _____

Supervisor's Name: _____ Department: _____
 Telephone: _____ Email: _____

ACCIDENT INFORMATION: (ALL INFORMATION MUST BE COMPLETED)

Date of Accident: _____ Time: _____ AM/PM
 Time work began: _____ Did employee continue their workday? _____
 Date notified of accident: _____ Time notified _____ AM/PM

Nature of Injury:

- | | | | | |
|--|---------------------------------------|--|---------------------------------------|---|
| <input type="checkbox"/> Allergic Reaction | <input type="checkbox"/> Amputation | <input type="checkbox"/> Angina Pectoris | <input type="checkbox"/> Asphyxiation | <input type="checkbox"/> Burn |
| <input type="checkbox"/> Concussion | <input type="checkbox"/> Contusion | <input type="checkbox"/> Contagious Disease | <input type="checkbox"/> Crushing | <input type="checkbox"/> Dislocation |
| <input type="checkbox"/> Electric Shock | <input type="checkbox"/> Enucleation | <input type="checkbox"/> Exposure | <input type="checkbox"/> Foreign Body | <input type="checkbox"/> Fracture |
| <input type="checkbox"/> Freezing | <input type="checkbox"/> Hearing Loss | <input type="checkbox"/> Heat Prostration | <input type="checkbox"/> Hernia | <input type="checkbox"/> Infection |
| <input type="checkbox"/> Inflammation | <input type="checkbox"/> Laceration | <input type="checkbox"/> Myocardial Infarction | <input type="checkbox"/> No injury | <input type="checkbox"/> Occupational disease |
| <input type="checkbox"/> Poisoning | <input type="checkbox"/> Puncture | <input type="checkbox"/> Rupture | <input type="checkbox"/> Severance | <input type="checkbox"/> Sprain |
| <input type="checkbox"/> Strain | <input type="checkbox"/> Syncope | <input type="checkbox"/> Vascular | <input type="checkbox"/> Vision Loss | |
| <input type="checkbox"/> Other: _____ | | | | |

Cause of Accident:

- | | | | | |
|---|---|---|---|---|
| <input type="checkbox"/> Abrasion | <input type="checkbox"/> Absorption | <input type="checkbox"/> Assault | <input type="checkbox"/> Bite | <input type="checkbox"/> Burn |
| <input type="checkbox"/> Crush | <input type="checkbox"/> Cut/Puncture | <input type="checkbox"/> Fall/Slip/Trip | <input type="checkbox"/> Foreign Matter | <input type="checkbox"/> Gunshot |
| <input type="checkbox"/> Natural Disaster | <input type="checkbox"/> Pandemic | <input type="checkbox"/> Strain | <input type="checkbox"/> Strike Against/Step On | <input type="checkbox"/> Struck By Object |
| <input type="checkbox"/> Vehicle Accident | <input type="checkbox"/> Miscellaneous: _____ | | | |

Location of Accident:

Department/Business Name	Address	City	State/Zip
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Witnesses that may have information about this accident: _____

What equipment was involved? _____

List damage to County equipment/property: _____

Cost to repair County equipment/property: _____

Were safeguards/equipment provided? _____

Were safeguards/equipment used? _____

Do you question the validity of this claim? _____

How many previous accident/injuries has this employee had? _____

How many accidents occurred in your department this year? _____

How many injuries occurred in your department this year? _____

Were all County Safety Policies followed? _____

If no, explain: _____

Additional comments: _____

Supervisor's Signature

Date