

III. Administrative Elements

A. Hazard Control

Identified hazards shall be corrected or made safe in the most expedient method available at the time. Reporting of hazards by all members of the university community, including visitors shall be encouraged. Where a hazard has been identified, a means of tracking the corrective action to completion shall be employed.

Hazards reported to Facility Services are tracked through the work control process. They are treated with appropriate priority to assure that the hazards are corrected in a timely manner.

Hazards reported to others in the administration shall result in an active response to check out the reported hazard, and to follow up with corrective action within the means of the recipient of the report. Where the recipient cannot correct the hazard, the information shall be forwarded to Facility Services or to the Environmental Health and Safety (EHS) office where action shall be initiated, and tracking employed to assure the condition is corrected.

Where temporary measures must be taken to guard against the hazardous condition, the person receiving the report should assure that these measures are taken, or request Facility Services or EHS to follow up on the report to get these protective measures in place. LSU Police should be notified in the event immediate assistance is required to control access to hazardous locations by others

B. Safety Meetings

Safety meetings on a regular basis can be effective accident prevention tools. Meetings are appropriate prior to and after the start of a new process/procedure particularly if such process/procedure deals with hazardous materials and/or equipment. This is particularly important with regard to engineering and/or scientific endeavors.

Safety meetings should be on topics that are safety related, and have effect on the group involved. They should provide for input from attendees with notes taken on suggestions. Ideally, meetings for trades people should be held on a monthly basis with a presentation on a particular subject followed by adequate discussion. It is generally accepted that short, to the point meetings are best; it does not preclude that meetings directed toward a complex process/procedure cannot be considerably longer.

Safety meetings for faculty and academic units should be held on a quarterly or semester frequency. Minutes of all safety meetings shall be recorded and provided to the Dean, Director, or Department Head as requested and kept on hand for a minimum of one year. Minutes should include the attendance roster, the name of the person conducting the meeting, the date, subject of the meeting and any suggestions arising from employees/attendees.

Prior to beginning a task, the person in charge shall be identified, and he or she shall conduct a pre-job safety planning session. The hazards shall be identified and pointed out to crew members along with the means to guard against those hazards. The person in charge shall assure that each member of the crew understands their role in the job. An employee working

alone shall consider each step of the job, analyze hazards, and select appropriate procedures and equipment before beginning the job.

EHS will present safety meetings on request, or provide assistance to the person in charge of the meeting.

C. Pre-Fire Plan

Pre-fire plans are developed for buildings on campus to assist fire and emergency personnel in response activities. An example of a pre-fire plan is shown in the appendix.

D. Accident Reports

1. Occupational Accident or Illness Report is to be used as the basic form for reporting the accidents of employees. This report is mandatory; it is required by the State and serves as the link between LSU and Risk Management. The report is initially generated if the incident is reported to the Employee Injury Call Center, otherwise the supervisor must generate the initial report. The Occupational Accident or Illness Report shall be sent to Office of Risk Management with a copy to Environmental, Health, and Safety. The Department Head shall also keep a file copy.
2. Automobile Accident or Loss Notice is to be used when a University-owned vehicle is involved. A copy of the report must be sent to the Director of Risk Management. A copy of the report will be forwarded to Environmental, Health, and Safety.
3. Liability Accident Notice shall be filled out in the event any visitor is injured on the Campus or in a University building. A copy of the report must be sent to the Executive Director, Risk Management. The Office of Risk Management will forward a copy of the report to Environmental, Health, and Safety.
4. LSU Police Reports are made for incidents such as fire, explosions, chemical spills, and other similar incidents where they are involved. Copies of these reports are forwarded to Environmental, Health, and Safety. They provide notification and information that can be used in accident investigations.
5. Verbal Reports are provided to various safety and environmental groups, such as the LSU Police, Radiation Safety, and EHS as required in Emergency Procedures.

E. Accident Investigations

Accidents must be investigated to an appropriate degree. As a result, we have two levels of investigations, a formal and an informal investigation.

1. Formal Investigations

- a. Formal investigations are conducted for serious accidents. Both Safety and the Department involved are participants in the investigation. The following incidents are the ones normally investigated in a formal investigation:
 - i. Lost time accidents (Lost time is missing the next tour of duty/work day.)
 - ii. Serious accidents or near misses without lost time such as explosions, fires, chemical spills, and electrical accidents Lost time accidents (Lost time is missing the next tour of duty/work day.)

- b. Once an accident is reported, a decision on the need to conduct a formal investigation is immediately made by Department Director and EHS. If either determines that a formal investigation is necessary, it will be held. The following steps should be taken:
 - i. Scene is secure
 - ii. Preliminary scene visit is made and information and evidence is gathered
 - iii. List of people to be interviewed is developed and interviews are conducted
 - iv. Accident Investigation Report and Action Plan is developed by Department and EHS and routed to Department Executive Directors or Deans for approval and guidance on implementation. (See investigations below)
2. Informal Investigations by Supervisors
- a. Since the supervisor is the person charged with preventing accidents in his/her work group, that person should be actively involved in determining the causes and acting to correct the causes of accidents. As such the supervisor is the proper person to investigate the following types of accidents:
 - i. Accidents which cause visit to the doctor with no lost time
 - ii. Near misses that disrupt productivity but do not have potential for serious injury
 - b. The supervisor's first duty is to assist the injured with obtaining medical attention. Supervisors are required to accompany the person to the physician if possible to explain to the physician the employee's job duties to allow proper determination as to the return to work restrictions. After this, the supervisor carries out the following steps:
 - i. The supervisor conducts an accident investigation as soon after the accident as practicable. Participation by Environmental Health and Safety (EHS) is not required, but an EHS representative is available to assist and participate if requested.
 - ii. The supervisor must complete an Action Plan and submit it to his/her supervisor, with a copy to the EHS section. Even though the investigation is informal, the action plan must include "who, what, where and when" as these terms relate to the planned action.
3. The Investigation Procedure
- Conducting the accident or incident investigation should follow an agenda which serves to assure that all causes are uncovered. Generally, the inquiry should follow the plan outlined below:
- a. Obtain background information on the job, the circumstances, work assignment, etc
 - b. Establish events and job steps leading up to the accident (Job Safety Analysis to be performed as recommended by EHS)
 - c. Determine root causes of the accident
 - d. Develop an Action Plan for prevention of recurrence:
 - i. What action is to be taken (include what, how, where)
 - ii. Who is responsible to do this on each element

- iii. When will each step be completed
- iv. Arrangements to follow up and assure the action is taken (quality control)
- 4. Approval Process and Routing
 - a. The action plan should be reviewed by the department director or dean for approval.
 - b. If disciplinary action is appropriate, human resources should be consulted for guidance.
 - c. The accident investigation should be routed to the EHS office. A copy should be filed in the department of origin.
- 5. Completing Items in The Action Plan
 - a. Departments are to complete action items and report completion to EHS on informal investigations.
 - b. On formal investigations, EHS will track the action plan to completion with the cooperation of the department involved

F. Job Safety Analysis

Job safety analysis (JSA) is a process where each step in a job or process is determined, hazards identified in each step, and corrective or protective measures determined to counter the hazards. Jobs or processes to have JSAs performed are identified by EHS. The JSA may be performed by the department supervisor or by EHS with the assistance of the supervisor. EHS is always available for consultation and will provide a standard form on which to record the information. After the JSA is completed, the information gathered will be shared with affected employees and safety rules and procedures revised to accommodate the new plan as necessary. JSAs may be posted in the work area, included in procedure manuals, and / or posted on the Internet web page.

Identification of jobs and processes that will be evaluated with a JSA will be done by EHS considering the severity of the activity, the trends discovered in accident/injury analysis, and upon new equipment/procedures being introduced in the workplace.

G. Safety and Health Inspections and Reports

Note: Inspection report forms are provided for various inspection activities. These reports are contained in the Appendix and are available from EHS.

- 1. Safety and Health Inspections
 - a. Building inspections by Building Coordinators or Residence Managers must be conducted quarterly as a minimum.
 - b. Inspections performed by EHS personnel include inspections of high risk buildings/facilities, updates for the air flow velocity of fume hoods/ductwork, emergency showers and eyewash stations, and floor slip tests along with other inspections as necessary or as requested by university personnel. Frequency of these inspections depends on policy/procedures.
 - c. Inspections performed by individual laboratory and/or shop instructors, researchers, engineers, or scientists in their specific area of responsibility should be performed at

least once per semester. Laboratory supervisors should be constantly on the lookout for violations of safety rules and unsafe workplace conditions.

- d. Inspections made by Facility Services personnel include fire extinguishers, fire alarms, sprinkler systems, smoke/heat detection systems, emergency lights, sentronic door closing systems, and fume hoods. These inspection frequencies vary, depending on regulatory requirements and university policy.
- e. Inspections by outside agencies such as DEQ, ORM, or the Office of the State Fire Marshal are conducted at their discretion, or upon request from individuals inside and outside of the university.

NOTE: Inspectors who, in the normal course of inspection, find empty extinguishers, leaking sprinkler heads/valves, broken smoke/heat detectors, etc., shall report same to Facility Services as soon as possible for repair or replacement.

2. LABORATORY INSPECTIONS

The EHS inspections forms for the various labs outline the major areas of concern and provide guidance on operating a safe and environmentally healthful laboratory.

- a. Laboratory Inspections
 - i. The assignment of inspection personnel depends upon the type of inspection and the area to be covered. Safety of assigned areas is inherently the responsibility of the supervisor. To detect unsafe conditions, he/she may assign inspection duties to subordinates or use available staff inspection groups. Safety Coordinators may be designated by departments to inspect laboratories, as well as EHS personnel and chemical hygiene officers and biosafety officers as applicable
 - ii. It is important that the inspected area be identified by building name, department, floor on which it is located, and room number. Further, the area shall be identified as used for teaching, research, both, or neither, as would be the case in equipment room, chemical storage and/or hazardous waste holding areas.
 - iii. EHS has developed a program of laboratory self-assessments to be done at the beginning of each semester. The purpose of these inspections is to promote laboratory safety awareness and internal corrective actions. The Quick Assessment Forms (QAF) are to be done in the spring and fall semesters and forwarded to EHS upon completion of the corrective actions. The QAF will be used as the first step in the accreditation program described below.
 - iv. The QAF is a short assessment of all aspects of laboratory safety which includes items construed to be important by the National Institute of Health, the American Chemical Society, OSHA, NFPA regarding safety in research or teaching laboratory. If the QAF indicates that the laboratory is doing biological work, then the lab must undergo further review by the Bio-Safety Office.
 - v. Biosafety health considerations include appropriate physical examinations for staff and research personnel. Staff or research personnel with reduced immunologic competency (and pregnant women) shall receive medical evaluation before starting or continuing oncogenic virus work or other exposures which may impact their medical condition.

- vi. Inspections of Biosafety Level 3 Recombinant DNA research labs must be performed by the Biosafety Officer. Such inspections are also recommended for labs performing work with infectious agents.
- vii. Once finalized, the report shall be turned over to the department head/chairperson and a copy sent to Environmental, Health, and Safety. The department head/chairperson shall review the report and respond to or implement corrective recommendations.
- b. Laboratory Accreditation Program

The Office of Environmental Health and Safety has developed a formal Laboratory Accreditation Program. The purpose of the accreditation audit is to ensure that laboratories are safe and complying with environmental regulations. Audits will be conducted by EHS and a formal report will be generated and sent to the PI and the department chair. After any deficiencies are resolved, the PI will receive LSU Safety Accreditation for his laboratories. A final report will be forwarded to Department management and the Director of EHS. Re-accreditation audits will be scheduled through Departmental Management with the goal of reviewing each laboratory every three years

3. Miscellaneous Inspections

- a. Art Department (Labs, Shops, and Studios) Inspections

Inspection of Art Department facilities should be performed using the EHS inspection checklist. Some items of particular concern in studios, labs, and shops are the use of chemicals and organic vapors which present fire and health hazards and cutting, welding, and grinding operations which may present safety hazards. Attention should be given to orderly arrangements within the facilities with unobstructed isles and work areas. Housekeeping should always be noted and corrected where deficiencies are found.

- b. Facilities other than those listed, such as theaters, recreational areas, and other academic areas

Inspection of these facilities should be performed using an EHS inspection checklist or suitable substitute.