

**City of San Angelo**

**Safety Manual**

**\*Updated and Revised August 2016**

**City of San Angelo**

**Safety Manual**

**Section One**

**Policy Statement**

It is the policy of the City of San Angelo (COSA) to provide safe working conditions for its employees. Therefore, COSA employees at all levels are charged with the responsibility of working diligently to execute a policy of maintaining a safe and healthy work environment.

Regard for the safety of COSA employees is the ultimate responsibility of all level of the organization. Accidents, even minor ones, cause pain, disruption of work schedules and unnecessary financial drains on our resources. Therefore the prevention of property damage, injury and illness is the goal of each department and each employee within COSA.

A safe work place is well-organized and efficient. It contributes to a high moral on the part of COSA employees and it enhances the professional image of City Government. All COSA employees must make “SAFETY” a matter of continuing concern, not only to reduce hazards and prevent accidents, but to aid in improving the manner in which all city services are delivered to the public. It is important that all aspects of the COSA Safety Manual be strictly adhered to and that the intent of this manual is implemented by each department.

Regulations cannot be written to cover every possible situation or condition. Therefore, each individual employee has the responsibility to protect themselves, fellow employees and the general public as well as report unsafe conditions and practices.

**Department Implementation**

Because of the wide diversity of operations within COSA and the necessary differences in organizational structure within various departments, it is recognized that certain expressed procedures in this manual cannot be equally applied by all. There are some details which may be impossible or impractical for one Department Director/Division Manager to implement, while another would have no difficulty in total implementation. Therefore, it is highly recommended that if a Department/Division cannot fully follow any procedure set in this manual, that department shall appendix this manual and send a copy of the appendix to Risk Management.

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**Section Two**

**Responsibilities**

Each City employee shall be fully responsible for implementing the provisions of this Safety Manual as it pertains to operations under his/her area of responsibility. The responsibilities listed below are MINIMUM and shall in no way be construed to limit individual initiative to implement more comprehensive procedures to reduce or eliminate losses.

1. **Department Director/Division Manager:**

Each Department Director/Division Manager has the full authority to, and responsibility for, maintaining safe and healthful working conditions within his/her area of responsibility whether it be in the field, in a shop or in the office. Although personnel exposure to hazards varies widely from department to department, it is expected that an unrelenting effort will be directed toward preventing injuries, vehicle injuries, vehicle accidents and damage to property and materials.

**Each Department Director/Division Manager Shall:**

1. Ensure that the policies and procedures set forth herein are adhered to by all personnel under his/her direction.
2. Provide the leadership and positive direction essential in maintaining firm accident prevention policies as a prime consideration in all operations.
3. Establish written Department/Division safety policies, with assistance from Risk Management, to ensure compliance with COSA safety directives and procedures. Department/Division safety rules may NOT reduce or supersede COSA safety requirements. Where necessary, Department/Division safety rules may SUPPLEMENT COSA directives and procedures.
4. Establish written departmental guidelines, with assistance from Risk Management that will ensure timely response to Safety Suggestions and Hazard Reports. (Section Seven).
5. Conduct periodic meetings, as necessary, to review Department/Division losses and discuss plans to bring about a more positive accident prevention program.
6. Establish requirements for Department/Division safety training programs and ensure participation in COSA safety training programs.
7. Hold each Supervisor/Crew Leader accountable for preventable injuries, vehicle accidents and property damages incurred by his/her employees.
8. Appoint an individual to serve as the Department Safety Committee Member. This individual will assist supervisors in accident prevention responsibilities, maintain liaison with Risk Management and be the point of contact on departmental safety-related issues.
9. When needed, request the assistance of Risk Management in promoting the accident prevention program.

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1. **Supervisors:**

Each Supervisor has the responsibility for the safety of his/her employees and to ensure the safe operation of machines, equipment and vehicles under his/her jurisdiction. The Supervisor has the authority to enforce the provisions of this manual and all applicable safety requirements to eliminate or reduce losses.

**Each Supervisor shall:**

1. Ensure that all of his/her employees are briefed and fully understand Department/Division work procedures and existing policies and enforce their use to minimize injury and property damage.
2. Ensure that all of his/her NEW employees are fully briefed on Department/Division work procedures and existing policies BEFORE they actually begin their assigned tasks.
3. Ensure that all of his/her employees receive job safety training and are retrained when necessary in the accepted way each hazardous task must be accomplished.
4. Train all of his/her employees in the proper use of Personal Protective Equipment (PPE) and ensure that necessary PPE is available, serviceable and properly stored after use.
5. Conduct periodic safety meetings (minimum of one per quarter) and maintain a record of topics discussed, the date and names of the employees attending (Section Four).
6. Document ALL safety training and safety meetings and have documentation available for safety reviews.
7. Report ALL accidents and ensure that they are thoroughly investigated and properly reported in accordance with existing directives.
8. Take prompt corrective actions when hazards are recognized or unsafe acts are observed.
9. Actively pursue and investigate all safety suggestions and hazard reports, as they apply to their area of responsibility (Section Seven). Suggestions and hazard reports with possible general application throughout the city will be forwarded to Risk Management for comments and/or city wide implementation.
10. Cease operations considered to be an imminent danger to employees or to the general public.
11. Request assistance from Risk Management to resolve safety related problems when necessary.
12. Cooperate with Risk Management when safety reviews are conducted.
13. Ensure his/her employees injured on the job receive prompt medical attention. Take an active interest in injured employees to ensure they are aware of the worker’s compensation benefits to which they are entitled. If necessary, refer or contact Risk Management.
14. Disseminate and/or post safety notices, safety posters and reports on the Department/Division safety bulletin board.

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1. **Crew Leaders:**

No one person can influence behavior and attitude more than the Crew Leader. Unless the Crew Leaders accept the responsibility for the control of accidents and losses, an accident prevention program cannot succeed.

**The Crew Leader Shall:**

1. Be responsible for on-the-job safety and health of all employees under their supervision.
2. Ensure that each supervised employee is fully trained for the specific job that is assigned to them and is completely familiar with all work and safety rules.
3. Ensure that each supervised employee complies with all established safety directives, procedures, rules and instructions including the use of PPE.
4. Foster interest in safe work practices through personal example.
5. Cease operations considered to be an imminent danger to employees or to the general public.
6. Cooperate with Risk Management when safety reviews are conducted.
7. Report all unsafe employee acts and all unsafe conditions that cannot be corrected by the Crew Leader.
8. Be personally responsible for the immediate medical care of injured employees under their supervision.
9. **Employees:** Employees must assume responsibility for their safety. Therefore, employees are required, as a condition of employment, to exercise due care in the course of their work to prevent injuries to themselves and to their fellow workers and prevent property damage.

**Employee responsibilities include, but are not limited to, the following:**

1. Working in accordance with accepted safety practices.
2. Reporting unsafe conditions and unsafe acts to their Supervisor.
3. Accepting personal responsibility for assisting in and supporting COSA accident prevention program and working toward its success.
4. Attending safety meetings, training sessions and other safety related functions, as directed by their Supervisor.
5. Maintaining good housekeeping standards.
6. Making safety suggestions to the Supervisor for operations improvement.
7. Reporting ALL accidents immediately to their Supervisor.
8. Wearing PPE that is required for performing assigned tasks.
9. **Risk Management:**

The Risk Manager is responsible for the day-to-day management of COSA accident prevention program. He/she shall take all actions deemed essential to reduce accidents.

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**Specifically Risk Management shall:**

1. Develop and implement an accident prevention program incorporating the current practices and philosophies adopted by the safety profession.
2. Consult directly with all management personnel and employees on accident prevention matters and provide guidance to ensure effective administration of the program.
3. Periodically attend Department/Division safety meetings to promote maximum understanding of the program and its objectives.
4. Conduct a periodic review of Department/Division accident and safety reports to ensure that they are timely and contain a thorough investigation and follow COSA safety policies.
5. Investigate those accidents that he/she deems need further investigation or clarification.
6. Investigate all safety hazard reports (Section Seven) received and coordinate corrective actions with Department Director/Division Manager.
7. Maintain complete records on city accidents in accordance with established guidelines and publicize information which will apprise management and employees of trends which call for corrective actions.
8. Establish a safety review program (Section Five) to include No-Notice, Special and Annual safety reviews of all facilities, shops and field areas.
9. Establish an effective training program to include the following:
10. New Employee Safety Orientation
11. Hazard Communications Training
12. Defensive Driving
13. Supervisor Safety Training
14. Job Safety Training
15. All other training as needs arise
16. Publish and disseminate safety information to all employees through safety newsletters and special safety correspondence.
17. Maintain a safety library for use by all departments and employees.
18. Fully utilize the assistance available from all sources on matters pertaining to safety and health.
19. **Department Safety Committee Member:**

This individual is appointed by his/her Department Director/Division Manager to function as a point of contact for the Departmental accident prevention program.

**Safety Committee Member responsibilities include:**

1. Contacting Risk Management after appointment to schedule a briefing.
2. Keeping the Department Director/Division Manager apprised of the program status.
3. Ensuring that all required reports are forwarded to Risk Management.
4. Assisting Supervisors and Crew Leaders with inspection, investigation and meeting requirements.
5. Disseminating safety information received from Risk Management and/or the Training/Development Specialist.
6. Attending Safety Committee meetings.

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**Section Three**

**ENFORCEMENT OF SAFETY REGULATIONS**

It is the expressed responsibility of the Department Director/Division Manager to enforce COSA safety policies and rules. When the Department Director/Division Manager deems that disciplinary actions need to be taken against an employee, he/she will take such actions in accordance with COSA Personnel Policies.

When an employee becomes an accident “repeater” (either vehicle or occupational injury accidents) or an employee, Crew Leader or Supervisor fails to maintain safe working practices, safe working conditions or a proper personal “safety” attitude, every effort will be made by that employee’s Department Director/Division Manager to re-educate that employee toward the necessary cooperation and attention to the safety program. This can be done through counseling, close supervision or re-assignment. Risk Management shall be available to consult with Department Directors/Division Managers on possible recommended actions.

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**SECTION FOUR**

**Meetings and Committees**

**Safety Meetings:**

Safety meetings can be formed at any level to focus group attention on safety related issues. They are also very effective in increasing safety awareness among employees. Supervisors shall conduct safety meetings to discuss safety problems and to inform employees of existing rules or changes in policies that must be followed.

1. **Membership:** Membership shall consist of all employees within a workplace under the jurisdiction of a Supervisor or Crew Leader. Every section or office, including administrative offices, will conduct safety meetings.
2. **Frequency of Meetings:** Each Supervisor/Crew Leader shall conduct a safety meeting at least quarterly, but more frequent safety meetings or tailgate safety meetings are highly encouraged.
3. **Procedures:** The Supervisor/Crew Leader conducting the meeting shall:
4. Document each meeting on the “Supervisor’s Safety Meeting Report” (Figure 4-1) and retain for one year and make documentation available for review by the Risk Manager and/or Training/Development specialist upon request.
5. Ensure that employees who are absent of did not attend the safety meeting are given a make-up safety briefing.
6. Contact the Training/Development Specialist for handouts, visual aids, videos or any other assistance needed that would enhance the safety meeting.

**Safety Committee Meetings:**

These meetings shall be conducted by Risk Management.

1. Membership shall consist of the Safety Committee Member from each department and be chaired by the Risk Manager.
2. The meetings shall convene on a quarterly basis at a time to be determined by the Risk Manager. He/she will notify each member by memorandum/email.
3. The Risk Manager shall:
4. Chair the meeting and appoint a recorder.
5. Use the meeting to inform department Safety Committee Members of any changes planned in the program.
6. Discuss any safety related problems that require attention.
7. Use the meeting to exchange ideas with all department representatives.
8. Review current films, posters, etc with members to ensure that they are aware of what is available for their use.
9. Ensure that minutes are prepared and disseminated.

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**SECTION 5**

**Safety Reviews and Evaluations**

Safety reviews help identify hazards, evaluate compliance with safety program requirements and determine effectiveness of the accident prevention program. Through safety reviews, Risk Management assists the Department Director/Division Manager and/or Supervisors in determining the condition of work areas, the degree of compliance with safety rules and standards and the safety of work practices. The whole purpose is to help identify hazards which, when corrected, would make it a safer and healthier work place.

There are three (3) types of safety reviews. They are as follows:

1. **Annual Safety Reviews:** They are conducted periodically by Risk Management.
2. **No-Notice Safety Reviews:** They are unannounced safety reviews and are most often conducted to observe a particular phase of an operation or to identify unsafe acts and conditions in an effort to eliminate accidents. This type of safety review can be used by all Supervisors for departmental use or can be conducted by Risk Management.
3. **Special Safety Reviews:** These are conducted primarily to evaluate the safety impact of changed procedures, newly installed equipment, modified equipment, relocation of equipment or any other type of work activity. These safety reviews can be used by all supervisors for departmental use or can be conducted by Risk Management.

**Safety Review Requirements**

Safety reviews will be made by the following:

1. Supervisors in all departments
2. As they deem necessary/appropriate
3. Report results to Risk Management
4. Risk Manager
5. Periodically review all city facilities and work areas
6. Conduct no-notice safety reviews
7. When asked by a department head for a special operation or work area.
8. When accident data indicates a possible problem in one department or area.
9. Special safety reviews as deemed necessary.
10. He/she observes an unsafe work condition.
11. Training/Development Specialist
12. He/she observes an unsafe work practice
13. As coordinated with Risk Management

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**Review Procedures**

For a safety review to be effective and useful to each department, it needs to address the work practices of that department. The following procedures are guidelines and are

not all encompassing. Each Supervisor that conducts his/her area safety review should tailor it to their needs and work place. Assistance in composing these safety review checklists can be obtained from the appendix to this manual (see Table of Contents) or from Risk Management.

1. Annual safety reviews will be scheduled by The Risk Manager. The schedule will be distributed to each Department Director/Division Manager at least thirty (30) days prior to the safety review date. Supervisors are encouraged to conduct their own safety reviews prior to their annual safety review.
2. Risk Management shall provide each employee the opportunity to discuss or identify unsafe or unhealthful working conditions or practices. Items identified will be discussed with the Department Director/Division Manager and/or Supervisor for possible action.
3. A formal report will be prepared by Risk Management on annual and special safety reviews. The no-notice safety reviews will be prepared on the “No-Notice Safety Review” form (see figure5-1).
4. All safety review reports will be retained for one year or until superseded by the next safety review.
5. Upon completion of all safety reviews conducted by Risk Management, he/she will prepare the required reports and forward them to the Department Director/Division Manager.
6. Any safety reviews that identify safety discrepancies or safety hazards shall require a written report back to the Risk Manager within thirty (30) days and shall contain:
7. Actions taken or planned to eliminate the discrepancy or hazard.
8. Corrective actions already taken and show the date of completion.
9. Corrective actions planned and the estimated time of completion.
10. The Risk Manager shall monitor the corrective actions taken or planned and conduct follow-up visits to ensure that corrective actions are adequate.

**Imminent Danger Situations**

When conditions exist as to pose imminent danger to city employees or to the general public, the Department Director/Division Manager, Supervisor or Crew Leader shall immediately stop work. These situations may be called to the attention of the Department Director/Division Manager by the Risk Manager or the Training/Development Specialist.

Upon observation of a violation of COSA safety policies or procedures the Department Director/Division Manager, Supervisor or Crew Leader shall stop the operation until the violation is corrected and the area is made safe. Any time the Risk Manager or Training/Development Specialist notifies a Department Director/Division Manager of an imminent danger situation and the Department Director/Division Manager fails to stop work, the Risk Manager or the Training/Development Specialist shall immediately notify the City Manager.

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**Section Six**

**Accident Reporting and Investigation**

It is imperative that all accidents (employee injury, vehicle collision, property damage or non-employee injury) be reported immediately to a Crew Leader, Supervisor or Department Director/Division Manager. To have an effective accident prevention program, all accidents have to be properly reported and documented. The accident investigation must be thorough enough to establish cause. In some instances, the accident may have several causes, with one being the primary cause and the other being contributing causes. This very vital portion of any accident prevention program shall rest with the Supervisor.

In any accident involving an employee or a non-employee, obtain as much information as possible, be courteous and offer assistance as may be required. If treatment is required, either call 911 for medical assistance or take the employee to the closest hospital emergency room.

All accident reports shall be completed and turned into Risk Management no later than 24 hours after the accident. Immediate verbal notification to Risk Management is required on accidents involving head injuries, spinal cord injuries, severe burns, amputation of an arm or a leg, severe fractures and any life threatening or fatal injuries.

**Completing the City of San Angelo Accident Reporting Form**

Obtaining as much information as possible about the accident, as soon as possible after an accident, will greatly aid in the accurate completion of the report. Obtain names and addresses of the person(s) involved, possible witnesses and notes on what, where, when, why and how about the accident.

The Accident Reporting Form will be completed by a Supervisor or Department Director/Division Manager. This report shall not be completed by the employee or non-employee who was involved in the accident/injury.

The person completing this form must be honest in his/her responses to questions on the form. The ultimate purpose of this form is to identify safety deficiencies and to provide corrective actions or training to prevent future occurrences.

Each portion of the Accident Reporting Form (Figure 6-1 at end of this section) will be completed in accordance with instructions that follow and as appropriate for each type of accident. This form is also available on the COSA Extranet under Risk Management.

1. **Block 1 Instructions**
2. **Type of Accident:** Check the appropriate block(s). If an incident involves more than one type of accident category (auto accident where personal injury occurs), check the blocks that apply and provide the appropriate information. Only one Accident Reporting Form is necessary for a particular incident.
3. **Dept:** Department name
4. **Dept #:** Department number
5. **Date:** Date of accident

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1. **Date of Report:** The actual date that the accident report was completed, signed and forwarded to Risk Management.
2. **Address:** Location of accident. Give complete details about where the accident occurred.
3. **Block # 2 Instructions**
4. **Name of Employee:** Enter employee’s complete name. If the employee uses a nickname, place that name in parenthesis. If the person completing the form knows the employee’s number, complete that information in the space provided.
5. **Information:** Complete as much information in the remaining self explanatory spaces as possible including street address and zip code. Some information will not be available to the person completing the form, but will be available at the Department Director/Division Manager level. The “Hourly Salary” block should be completed to the third decimal point (example: 10.080).
6. **Work Being Performed:** An important space in this block is “Work Being Performed”. The person completing the report should be as accurate as possible in detailing the actual work the employee was performing.
7. **Task & Training:** Two other equally important items are whether the employee was performing his/her regular job at the time of the accident and did the employee have training for this job/task.
8. **Block # 3 Instructions**
9. **City Vehicle:** If a city vehicle was involved in an accident, complete this portion of the report. Use the five (5) digit number assigned to the city vehicle when completing the “Vehicle #” block.
10. **Non-City Vehicle:** If a non-city vehicle is involved, obtain as much information as possible about that vehicle and driver. Include the other driver’s insurance company/policy#.
11. **Block 4 Instructions**
12. **Injury:** Use this block for accidents that involve employee injuries.
13. **Cause:** What caused the injury? Identify the actual cause of the injury, if known. Be specific (example: a hammer, electric drill, broken glass, etc).
14. **Kind of power:** Notate the type of power is used to operate the object that caused the injury (example: gas powered chain saw or hand operated saw).
15. **Lost time:** If the accident resulted in lost time, record the first full day that the employee was unable to work.
16. **Notification:** When was the Crew Leader/Supervisor notified of the injury
17. **Safety Equipment:** Was safety equipment being used. This is an important space to identify whether the employee was using the proper safety equipment.
18. **Fault:** This last question is also very important. Was the accident caused by employee’s failure to use safety appliances or equipment? The person completing this report has the very important task of being accurate in his/her responses to this question.

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1. **Block 5 Instructions**
2. **Property Damage:** Complete this block for property damage and non-employee damage.
3. **Non-Employee:** Obtain full name of non-employee and a minimum of date of birth and telephone number.
4. **Injured Minor:** If the individual injured is as minor, obtain guardian’s name and address.
5. **Type of Injury:** Ensure that the type of injury is identified on the form.
6. **Block 6 Instructions:**
7. **All Accidents:** Complete this block for **ALL** accidents.Witnesses are very important to possibly reconstruct the accident if necessary.
8. **Witnesses:** Obtain names, addresses and phone numbers. If the witnesses are city employees, obtain the department for which they work.
9. **Block 7 Instructions:**
10. Complete this block in as much detail as possible. Follow the “who, what, when, where, why and how” pattern in order to obtain as true a picture as possible.
11. Ensure that the employee involved in the accident is not the person filling out this block.
12. **Block 8 Instruction:**
13. Complete this block for **ALL** accidents.
14. If treatment was refused, check the “YES” block.
15. Was an ambulance called?
16. Was employee taken to hospital or to a doctor’s office?
17. If employee was taken to Hospital, which one?
18. If known, give the doctor’s name treating the employee.
19. If First Aid is given, who gave it and what was done?
20. If the employee is counseled before the report is submitted, indicate so here.
21. **Block 9:**
22. Additional Comments/Remarks.
23. **Signatures:** The person that completed the form shall sign the form. The form shall also be signed by the Department Director/Department Manager.
24. **Disposition of Vehicle:** If the accident involved a city vehicle, the vehicle shall be taken to the city vehicle maintenance shop for estimates. These estimates shall be forwarded to Risk Management by the Vehicle Maintenance Department. If subrogation is possible, the Risk Manager will pursue this course of action.

**Completing the Employer’s First Report of Injury or Illness**

Obtaining as much information as possible about the injury, as soon as possible, after the incident will greatly aid in the accurate completion of this report.

One person from each department and an alternate will be assigned to complete the Employer’s First Report of Injury or Illness form (figures 6-2 & 6-3 at the end of this section). The reporting person will be identified by name and title in Block 40 and then will sign and date the form in Block 51. These forms are also available on the COSA Extranet under Risk Management.

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For job related accidents/injuries requiring medical treatment the employee must obtain written orders from the provider giving the medical and work status of the individual. This must be provided to the Department Director/Division Manager immediately who will in turn submit that information with his/her report. Risk Management will be notified immediately by phone for injuries requiring medical treatment so that pre-authorization can be given to the medical provider.

Disregard the distribution instructions contained in the upper left portion of this form. Risk Management will be responsible for distribution to TWCC.

With the exception of blocks 34 and 46, **ALL** numbered blocks must be completed. This form must be typed or printed in **BLACK** ink. It is important to emphasize that the reporting official ensure that all provided information is accurate as possible. It is imperative that this form be forwarded to Risk Management within 24 hours of the incident.

**Special Instructions for Certain Items**

**Items 2, 7 & 8:** Article 8308-2.13, Texas Worker’s Compensation Act requires the Commission to maintain information as to the race, ethnicity and sex on every compensable injury. This information will be maintained for non-discriminatory statistical use.

**Item 4:** If individual does not have a home phone, please provide a phone number where the employee can be reached (example: Cell Phone).

**Items 5, 15, 17, 26, 29 & 30:** Enter the date in month, day and year format (example: 08-13-54).

**Item 18:** List nature of accident or exposure (example: fall from scaffold, contact with radiation, etc). If occupational disease, state so.

**Item 19:** List specific body part(s) that is affected (example: chin, right leg, forehead, left upper arm, etc).

**Item 20:** Describe the following in detail:

1. The events leading up to the injury/illness.
2. The actual injury (example: cut left forearm, etc).
3. The reason(s) why the accident/injury occurred. Use an additional sheet of paper if necessary.

**Item 22:** State the exact work-site location of the injury (example: construction site, office area, storage area, etc).

**Item 24:** List the object, substance or exposure that directly inflicted the injury or illness (example: knife, floor, hammer, chemical, etc).

**Items 32 & 33:** Enter the date in month-year format (example: 02-16).

**Item 37:** Enter the number of days or hours that make up a full work week for your employees.

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**Section Seven**

**Hazard Reports and Safety Suggestions**

The primary purpose of hazard reporting and use of safety suggestions is to enhance the overall accident prevention program by early identification, reporting and correction of hazards. This section establishes policy and a system to notify the Department Director/Division Manager and/or Risk Management of hazardous conditions that may lead to accidents.

**Hazard Report**

The detection of unsafe and/or unhealthful working conditions at the earliest possible time accompanied with prompt abatement of hazards at the lowest possible working level are essential elements of an effective accident prevention program.

The hazard reporting system shall be a comprehensive and aggressive program to protect all COSA employees from work-related injuries, illnesses and deaths. It shall provide the employee a safe and healthful work environment in which recognized hazards have been eliminated or controlled. The format for reporting workplace hazards is by using the “City of San Angelo Hazard Report” (Figure 7-1). The basis and format of using this report are as follows:

1. Each Department Director/Division Manager shall make sure that this hazard reporting program is well publicized and that this form is readily available to all of their employees. They shall also eliminate or control any hazardous condition that is reported by their employees and seek assistance from Risk Management as necessary.
2. COSA employees shall be provided the opportunity to participate in the hazard reporting program without fear or coercion, discrimination or reprisal. The anonymity of employees who identify hazardous conditions shall be protected, if requested.
3. Risk Management will actively support the hazard reporting program by:
4. Investigating all hazard reports that are submitted to Risk Management.
5. Making recommendations to the Department Director/Division Manager in order to eliminate or control hazardous conditions.
6. Providing reports back to the affected Department Director/Division Manager with a summary of the investigation.

A hazard may be reported by any city employee and shall follow the reporting procedures identified as follows:

1. Report hazards first to their Supervisor/Crew Leader, so that actions can be taken. If the hazard is eliminated on the spot, no further action is required unless it applies to other similar operations or departments. If this is the case, notify Risk Management for possible city-wide dissemination.

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1. Report hazards to Risk Management by use of the Hazard Report. This report can be hand delivered, sent via inter-office mail or emailed directly to

Risk Management.

1. Those having difficulty in eliminating hazards should submit a Hazard Report to Risk Management and/or seek assistance from the Risk Manager.
2. When a Hazard Report is submitted to Risk Management, the Risk Manager shall ensure:
3. An investigation is conducted to validate the reported hazard.
4. A hazard control number is assigned.
5. The employee submitting the hazard report is advised within ten (10) working days, after receipt of the report, of the actions that are being taken or are planned (unless the employee submitted the form anonymously).
6. The action taken is verified for effectiveness and the employee is notified that the hazard is abated.

**Correction of Hazardous Condition**

The Department Director/Division Manager is responsible for the abatement of hazards within their area of responsibility. Therefore, they shall select a method for the abatement of hazards or interim corrective action based on the following priorities:

1. Substitute less hazardous materials or select a less hazardous process.
2. Eliminate hazards through engineering changes or controls, if possible.
3. Isolate hazardous operations to minimize exposure.
4. Provide work-around procedures.
5. Provide Personal Protective Equipment (PPE).
6. Other factors that affect decisions are:
7. Technical feasibility and cost of available options.
8. Number of personnel exposed (both employees and the public) and the length of time that they are exposed.
9. Previous accident experience.
10. Future intended use of facility or equipment.
11. Available alternative methods to control the hazard or protect employees and the public.
12. Interim control procedures in effect.

**Completing the City of San Angelo Hazard Report**

Any COSA employee may submit a hazard report and Department Directors/Division Managers, Supervisors and Crew Leaders are encouraged to make the forms readily available to their employees and/or that employees know how to access the form online. Each hazard report will be accompanied in accordance with the following procedures:

1. **Report Number:** Leave this section blank. The responsible Department Director/Division Manager or Risk Management will assign this number. Department Directors/Division Managers are encouraged to track, by number, the hazard reports submitted to them. Risk Management will assign a tracking number to each report submitted to their office.
2. **To:** The employee may submit the written Hazard Report to their Supervisor, Department Director/Division Manager or directly to Risk Management.

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1. **From:** The employee may identify himself/herself, or the employee may choose to report the hazard anonymously. If the employee chooses to identify themselves, he/she will also need to identify their Department. Risk Management will investigate hazard reports that are sent anonymously, however they will not be able to respond directly to that employee.
2. **Location of Hazard:** Employee should be as specific as possible in order to allow the proper location to be investigated.
3. **Description of Hazard:** if the employee follows the “who, what, when, where, why” questioning pattern, it will aid the investigator in properly identifying the hazard. This is the last block that the person submitting the report needs to complete.
4. **Summary of Investigation:** The Department Director/Division Manager or Risk Management will complete this block. They should:
5. Be very specific in identifying the correct hazard.
6. Interview the employee that submitted the hazard report, if the employee has chosen to identify themselves on the report.
7. Interview other employees in the work area or accomplishing the task that has been reported as hazardous.
8. Follow the “who, what, when, where, why” questioning pattern in completing the summary of the investigation. Department Directors/Division Managers, Supervisors and Crew Leaders are encouraged to cooperate with the investigator.
9. List all persons interviewed as well as management contacts.
10. **Recommended Actions:** Identify those actions that need to be changed, modified, eliminated, etc in order to correct the hazard.
11. **Abatement Actions:** List those actions that were taken on-the-spot to correct the hazard and make the work place safe.
12. **Date/Name of Investigator:** Identify the person actually conducting the investigation and the date that the investigation was completed.
13. **Signatures:** Signature of the person named in the previous block.
14. **For Risk Management Use Only:** Risk Management may use this block for:
15. Identifying departments with high hazard reporting rate.
16. Follow-up reviews to ensure abatement actions were completed and adequate.

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**Safety Suggestions**

Even though Crew Leaders, Supervisors, Department Directors/Division Managers and Risk Management are constantly monitoring the accident prevention program, they may not notice all the facets of the tasks being accomplished by COSA employees. The Safety Suggestion Form (Figure 7-2) is the vehicle that employees may use to identify better, easier, less costly and safer procedures or programs. All employees are encouraged to use the Safety Suggestion Form. These forms will be used for safety suggestions ONLY.

All Department Directors/Division managers and Supervisors shall make the Safety Suggestion forms available to their employees and encourage participation.

Employees should submit their safety suggestions to Risk Management for evaluation and/or consideration. Forms may be submitted by hand delivery, via inter-office mail or email. Risk Management shall:

1. Evaluate each safety suggestion.
2. Make appropriate recommendations.
3. Contact the employee submitting the safety suggestion and advise him/her of the status of their suggestion.
4. Advise and consult with the appropriate Department Director/Division Manager on the status of the safety suggestion and possible implementation, acceptance or denial of the suggestion.

**Completing the Safety Suggestion Form**

The Safety Suggestion Form is very easy to complete. All that the employee needs to do is:

1. **To:** Risk Management (pre-printed).
2. **Name:** Print their name on this line.
3. **Department:** Identify the Department in which they work.
4. **Date:** The date in which they complete and turn in the form.
5. **Suggestion:** Give their suggestion in as much detail as possible so that it can be accurately and fairly evaluated by Risk management.
6. **Signature:** The employee signs the form and then forwards it to Risk management.

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**City of San Angelo**

**Safety Manual**

**Section Eight**

**Operation of COSA Vehicles and Equipment**

The operation of COSA vehicles and equipment is indispensable in conducting city business and a loss of any vehicle or equipment due to an accident, abuse or neglect will adversely affect the overall financial and operational capability of the city. In the interest of the accident prevention program, this section establishes requirements that are designed to eliminate or reduce vehicle and equipment damage and /or loss.

All drivers of COSA vehicles or equipment, and those having privately owned vehicles (POV) in pursuit of city business, will comply with all applicable state laws as well as the requirements of COSA. The following requirements are the minimum and in no way restrict Departments/Divisions from being more restrictive.

1. No employee will be allowed to operate any vehicle or equipment for which he/she does not have the appropriate classification of driver’s license. Additionally, no employee will be allowed to operate any vehicle or equipment for which he/she has not been properly trained.
2. Before initial use of any vehicle or equipment each day, the driver will inspect the vehicle and/or equipment and document that inspection on either the COSA Vehicle Inspection Checklist (figure 8-1), COSA Trailer Inspection Checklist (figure 8-2) or a department specific inspection checklist which has been approved for use by the Department Director/Division Manager and/or Risk Management. All completed checklist will be maintained by the Department for a minimum of one year from completion date.
3. Any deficiency (non-working part, damage to vehicle, etc) identified will be recorded on the inspection checklist and then reported to the Supervisor for appropriate corrective action.
4. Turn signals will be utilized by COSA employees at all times. If a turn signal becomes inoperative, drivers will use hand signals until the turn signals can be fixed.
5. Drivers will ensure that all windows, headlights, taillights and wipers are clean and operational.
6. SEAT BELTS WILL BE WORN AT ALL TIMES by the driver and any passengers.
7. Spotters will be used in backing any vehicle or equipment in congested areas or when a clear view or the rear or overhead cannot be obtained. If the driver is alone, he/she will exit the vehicle or equipment and inspect the area behind the vehicle or equipment immediately prior to backing.
8. Riding on the sides, tool boxes, tailgates or roofs of any vehicle or equipment is strictly PROHIBITED. Furthermore, standing in the back of any truck is prohibited and riders will sit down in the carry area and not on the wheel well covers.
9. When a COSA vehicle or equipment, or privately owned vehicle used in pursuit of city business, is in operation daytime running lights or headlights turned on low beam will be used. Emergency vehicles will be exempted from this specific line item if required for their operation.

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1. Drivers will observe ALL traffic laws.
2. All items/loads transported, either by vehicle, equipment or trailer will be properly secured and overhangs will be marked.
3. Tailgates will be up and secured when the vehicle is in motion. If a vehicle’s function requires that the tailgate remain down, then a red flag will be attached to the outer most part of the load.
4. Trailers will be fastened to hitches. Safety pins and chains will be properly fastened before moving the vehicle or equipment. The driver will ensure that all trailer lights are operational.
5. No more than three (3) persons will ride in the front seat of any vehicle or equipment and then only if there are seat belts for each person.
6. Operation of a city vehicle or equipment while under the influence of alcohol beverages, illegal drugs or prescription medication that impairs a person’s driving ability is PROHIBITED. Drivers taking prescription medication will notify their Supervisor prior to operating a vehicle or equipment.
7. Supervisors will periodically review their driver’s driving ability by riding with those employees and observing their driving ability.
8. An employee who operates COSA vehicles or equipment is required to report suspension or revocation of his/her driver’s license to his/her supervisor by the next working day. Additionally employees who operate COSA vehicles or equipment is required to report a charge/conviction for DWI, any moving violation where a law enforcement citation is given to the driver and any preventable accident, with or without a citation, to their Supervisor within three (3) business days. The Supervisor is required to provide that information to Risk Management within 24 hours or by the next working day. Failure of an employee to report a change in his/her license status will make them subject to disciplinary action in accordance with COSA Personnel Policies.
9. COSA vehicles will not be left unattended with the key in the ignition.
10. COSA vehicles left unattended will be properly parked and locked. Emergency vehicles will be exempt from this specific line item if required for their operation.
11. Vehicles found to be unsafe to drive will be repaired before returning to service.

**Driver Selection**

Selection of employees to drive COSA vehicles and equipment will be done with care. The professionalism of COSA employees is under public evaluation every time a vehicle or equipment is used. Therefore, it is of utmost importance that only highly qualified and safety motivated employees are assigned driving tasks.

**Special Purpose Equipment**

This type of equipment includes tractors, hi-lifts, high rangers, graders, back-hoes, cranes or any unit which has special devices for a specific type of work.

1. Employees who operate this type of equipment are required to receive formal instruction. This special training will be conducted by the Supervisor or a Qualified Operator whom the Supervisor has appointed. This training will be documented by the Supervisor, made available at safety reviews and will include the following:
2. Explanation and demonstration of all controls and safety equipment.

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1. Maintenance items such as fuel, water, oil or other operating needs of the equipment.
2. Demonstration of operation.
3. Instruction of driving to and from or on and off of a trailer, raising and lowering procedures and methods of securing the equipment.
4. Other requirements:
5. Passengers will ride only in seats designed for passengers. Employees will not ride on any part, other that the seat, of equipment.
6. Operators will ensure the safe operation of equipment and always have a spotter when backing in congested areas or onto the street.
7. Construction-type equipment will travel at less than twenty miles per hour (20 MPH) without exception, and will display a slow moving vehicle emblem. This type of equipment shall give the right-of-way to all other vehicles.
8. Headlights will be on and flashers operating whenever this type of equipment is operated on the street or highway.
9. The operator will not exceed the limitations of the equipment as outlined in the manufacturer’s manual.

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**City of San Angelo**

**Safety Manual**

**Section Nine**

**Operation in the Public Right of Way**

Any operation in the public right of way can create hazards to the public as well as COSA employees. This section establishes requirements to eliminate or minimize these hazards to protect both the public and COSA employees.

When operations are taking place in streets, parkways, sidewalks or other places where the public may be endangered, the Supervisor of the work site is responsible for the safety of the public and his/her employees. Supervisors must spend ample time before, during and after performance of the work to ensure that the public is protected from the hazards created from this type of work. The following are minimum requirements, but do not preclude departments from adopting more stringent rules.

1. Preparations shall be made for traffic and pedestrian safety before any street work actually begins.
2. All barriers, markers and lights shall be maintained in good repair, clean and brightly finished to ensure high visibility.
3. Placement of traffic cones, warning flags, barriers and lights for street work shall be in accordance with the Texas Manual on Uniform Traffic Control Devices, which is available from TXDOT (Txdot.gov). Additionally, another reference would be the Guide to Work Zone Traffic Control and is available from Texas Engineering Extension Service (TEEX). Supervisors are encouraged to periodically review these standards with their employees.
4. Work hours in heavy traffic areas shall be monitored closely to minimize employee exposure and disruption of traffic flow.
5. Where barriers, lights, etc are used overnight, the Supervisor shall examine the work area for proper placement at the end of the work day.
6. Where traffic must be periodically stopped or obstructed by workers or equipment, a flagger with protective vest shall be used.
7. Flaggers shall be used to slow or direct traffic where approach to the work area does not provide adequate visibility for drivers.
8. If operations are conducted in low light or after dark, all workers in or near the roadway shall wear reflective vests.
9. When streets are significantly obstructed or closed for any period of time, the Police Department, Fire Department, EMS and Risk management shall be notified of how long the closure will be in effect.
10. When pedestrian traffic is disrupted by a city operation, all necessary safety measures shall be taken to protect the public from injury. The following are the minimum requirements:
11. If pedestrian traffic must be routed into the street, protection shall be provided from the traffic by use of cones, barriers, signs, etc as necessary.

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1. Holes in sidewalks or parkways which must be left open will be covered whenever possible along with perimeter protection. Every possible means of preventing accidental entry into the hole shall be used. Darkness and inclement weather conditions must be considered as an added hazard to this condition.
2. Where unusual condition exists, notify the Supervisor and Risk Management immediately.

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**Section Ten**

All employees shall receive training on accident prevention. There are two (2) types of general safety training that employees shall receive:

1. **Orientation Training:** Each new full time COSA employee shall receive instruction from the COSA accident prevention program. This training is conducted at each orientation for new employees and is typically given by the Risk Manager and/or the Training/Development Specialist. Fire and Police will also provide training for their personnel. This training shall include:
2. How to report hazards (Hazard Reporting Form).
3. How to contact Risk Management.
4. Location of medical facilities and how to get treatment.
5. How to report job-related illnesses.
6. Hazard Communication Training.
7. Back Safety Program.
8. Other items as needed.
9. **Job Safety Training:** This training makes employees aware of the accident prevention program in their daily jobs. It also develops and helps keep good safety attitudes toward these programs. This training shall be provided immediately upon employment. Each Supervisor shall provide this specialized training to all new employees and when there is a change in equipment, procedures, processes or safety requirements. Training shall be of sufficient length and depth to ensure that employees know:
10. Hazards of the job that they will do.
11. Hazards of the work area.
12. Safety, fire and health requirements that apply to their job and work place.
13. Personal Protective Equipment (PPE) that they will need and how to use it.
14. Location and use of emergency and fire protection equipment.
15. Emergency procedures that apply to their jobs and work place including building evacuation procedures and locations of fire alarms.
16. How to identify and report hazards.
17. How tom report work-related injuries and illnesses.
18. Each Supervisor shall document the above training. Documentation shall include the date of training, employee’s signature to certify that he/she received training. This documentation shall be kept by the Supervisor and made available to Risk management upon request.
19. **Specialized Safety Training for Designated Employees:** This training is made available through, and conducted in accordance with Risk Management. All courses are updated to meet the needs of changing standards, concepts, rules, regulations of laws as needed.
20. **Supervisor Safety Training:** Supervisors are key people in COSA accident prevention program since they are directly responsible for safe and healthful work environments. They must know what safety standards or criteria apply in their area and must enforce compliance. This training will provide supervisors

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the necessary information and/or skill needed to manage their resources safely. This training shall be conducted by Risk Management and cover the following items on how to:

1. Recognize and eliminate hazards in the work place.
2. Process hazard reports submitted by employees.
3. Identify what safety guidance is required, how to obtain it and how to apply it.
4. Analyze job tasks for hazards.
5. Investigate and report job related accidents.
6. Determine safety review requirements and procedures.
7. Prepare safety review checklists.
8. Motivate employees to work safely.
9. **Defensive Driving Course:** This course is designed to improve driver attitudes by providing knowledge necessary for better judgment and safer driving habits. The knowledge gained by COSA employees, in this course, can also be applied to their private vehicles.
10. Each new full-time employee is required to attend and complete the Defensive Driving Course within sixty (60) days of employment. The Course is presented as part new employee orientation.
11. Each full time employee shall renew their Defensive Driving certification every three (3) years thereafter.
12. Risk Management is the authorized Defensive Driving Course agency for COSA. Typically, the course will be conducted by the Risk Manager or the Training/Development Specialist.
13. Risk Management and/or the Training/Development Specialist shall maintain a listing of COSA employees who have completed the Defensive Driving Course.
14. Should additional sessions need to be conducted, a Department Director/Division Manager shall contact Risk Management and/or the Training/Development Specialist to arrange the class for his/her employees.

All additional training which may be required or used to meet specific programs or goals shall be conducted, monitored or approved by Risk Management.

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