

OCCUPATIONAL HEALTH
CALIFORNIA STATE UNIVERSITY, FULLERTON

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ABBREVIATIONS

CCR	California Code of Regulations
CI/CE	Center for Internships/Cooperative Education
CSU	California State University
DSC	Department Safety Coordinators
EH&S	Environmental Health and Safety
EMMP	Employee Medical Monitoring Program
GISO	General Industrial Safety Orders
IIPP	Injury and Illness Prevention Program
MSDS	Material Safety Data Sheets
RISO	Research and Instructional Safety Office

INTRODUCTION

PURPOSE

Our overall audit objective was to determine the effectiveness of existing policies and procedures that relate to both employee and student health and safety and mitigation of real and potential hazards in the workplace.

Within the overall audit objective, specific goals included determining whether:

- ▶ the campus had developed and distributed a written IIPP to all departments;
- ▶ the campus had developed a satisfactory system for communicating pertinent IIPP and other safety and health information to all affected employees;
- ▶ selected departments had implemented procedures for both scheduled and unscheduled inspections which includes the filing of reports with distribution to appropriate department chairs and the office on environmental health and safety;
- ▶ the campus had implemented procedures for investigation, recording and reporting accidents;
- ▶ the campus had identified training requirements applicable to specific classes of employees and provided adequate training to students whose study areas take them into places where potential workplace hazards are located;
- ▶ the campus had developed procedures and materials to assure that employees and students are provided training in a timely manner;
- ▶ the campus had developed procedures for recording training to employees and students; and
- ▶ the campus has developed a medical monitoring program and identified those employees who should be included.

SCOPE AND METHODOLOGY

This review emphasized but was not limited to compliance with state laws, Board of Trustee policies, and Office of the Chancellor and campus policies, letters and directives. The primary directive for this review involves Title 8, §3203. *Injury and Illness Prevention Program (IIPP) of the California Code of Regulations (CCR)*. In addition, Office of the Chancellor and campus generated manuals were used to measure compliance with selected health and safety issues. January 1996 to date was the primary period of review.

Our focus involved appropriate health and safety related records and procedures within the campus Environmental Health and Safety Office and four departments: Art, Biology, Chemistry and Physical Plant. We selected ten employees from each of the four departments and two spring 1997 classes from each of the three academic departments. We reviewed available records related to health and safety training and information for both the selected employees and students within the selected classes.

Specifically, we reviewed and tested the following areas:

- development, implementation and communication of the campus IIPP;
- health and safety inspections;
- employee health and safety training;
- student health and safety training; and
- employee medical monitoring.

BACKGROUND

Senate Bill 198: Injury and Illness Prevention Program (IIPP) was passed and chaptered into the Insurance and Labor Codes on October 2, 1989. Regulations amending the General Industrial Safety Orders (GISO) in the California Code of Regulations were adopted on December 13, 1990 and incorporated in GISO § 3203, Injury and Illness Prevention Program. Beginning July 1, 1991, §3203 required employers to establish, implement, and maintain a written Injury and Illness Prevention Program with specified elements including substantial compliance criteria for use in evaluating an employer's injury prevention program.

The California State University developed and distributed a model Injury and Illness Prevention Program (IIPP) to each campus. This model (IIPP) was designed to serve as an umbrella that incorporates the elements of the myriad of individual health and safety programs required by state and federal law. It has also been designed to integrate existing campus health and safety regulations and future safety-related mandates that may arise.

The intent of the model IIPP was to: facilitate identification and evaluation of workplace hazards; correction of unsafe conditions; communications between the university and its employees, students and the general public on matters concerning health and safety; education and training of employee; development of compliance strategies; documentation/recordkeeping of safety and health related activities; and identification of the person responsible for administering the program.

OPINION

We visited the California State University, Fullerton campus from March 24 through April 18, 1997 and audited the procedures in effect at that time.

We found that, except for the items noted in the Executive Summary and in the details of the report, compliance with state, CSU and campus policies and procedures were satisfactory. The comments that follow are based on an effort to identify and mitigate issues that detract from the overall effectiveness of the existing campus health and safety program.

EXECUTIVE SUMMARY

The purpose of this section is to provide management with an overview of conditions requiring their attention. Areas of review not mentioned in this section were found to be satisfactory. Numbers in brackets [] refer to page numbers in the report.

HEALTH AND SAFETY INSPECTIONS [5]

The campus health and safety inspection process was inadequate with respect to: timeliness of inspections; documentation on follow-up activities to points raised on previously conducted inspections; and distribution of inspection reports. By establishing full implementation of existing campus inspection policies and procedures, the campus will reduce the risk of injuries and illnesses, subsequent civil and criminal litigation and citations/fines by various regulatory agencies.

EMPLOYEE HEALTH AND SAFETY TRAINING [7]

The campus employee health and safety training procedures was deficient with respect to: development of training requirements, timely training of employees, and exchange of training information. By assuring that training policies and procedures are fully implemented, the risk of employees not being provided timely health and safety training is decreased.

STUDENT HEALTH AND SAFETY TRAINING [10]

Our review of campus student health and safety training procedures indicated that a comprehensive program had not been developed for either on or off-campus educationally related activities. By establishing a more comprehensive and uniform process of providing students with applicable training and information regarding both on and off-campus educational activities the campus will reduce the risk of both injuries and illnesses to students and subsequent civil litigation.

EMPLOYEE MEDICAL MONITORING [11]

Medical monitoring coverage was not being provided to those CSUF faculty whose workplace contain hazardous materials. By assuring all employees working with hazardous agents and materials are included in the Employee Medical Monitoring Program, the risk of work related illnesses going undetected are decreased.

OBSERVATIONS, RECOMMENDATIONS, AND CAMPUS RESPONSES

HEALTH AND SAFETY INSPECTIONS

The campus health and safety inspection process was inadequate with respect to timeliness of inspections; documentation on follow-up activities to points raised on previously conducted inspections; and distribution of inspection reports.

We found that:

- ▶ Required inspections were not being conducted in a timely manner by the various campus groups (Environmental Health & Safety (EH&S), Research and Instructional Safety Office (RISO), department safety coordinators (DSC) and lab supervisors) charged with these responsibilities.
- ▶ DSC inspection reports were frequently not provided to department chairs and EH&S.
- ▶ Follow-up on inspection issues raised by EH&S, RISO and the DSCs were, in general, not adequately documented.
- ▶ Inspections reports issued by RISO were normally directed to the applicable lab supervisor and not copied to either the department chair or EH&S. RISO periodically contacted EH&S by phone with issues needing remedial action.

The CSUF IIPP manual (which conforms to Title 8, §3203. IIPP) addresses inspections in several sections:

Section 10.0 HEALTH AND SAFETY INSPECTIONS:

10.1.b. EH&S recommends that all areas be inspected on a semi-annual basis. Those departments engaged in hazardous operations are encouraged to conduct more frequent inspections.

10.1.d. EH&S will conduct annual inspections of non-departmental public access areas.

Section 13.0 HAZARD REPORTING, ASSESSMENT AND CONTROL PROCEDURES.

13.1.a. Department Inspections. Upon completion of scheduled or unscheduled inspections, all findings will be prepared in writing and submitted to department chairs and EH&S on the appropriate Safety Inspection Checklist form in

Appendix VIII. Corrective action, or a suitable timetable for elimination of a hazard is the responsibility of the department. . . .

13.1.b. Environmental Health and Safety Inspections. Inspections conducted by EH&S will be reported in writing to Department Chairs and Department Safety Coordinator using the Health and Safety Report in Appendix XI. Corrective action, or a suitable timetable for elimination of the hazard is the responsibility of the department. . . .

The CSUF Chemical Hygiene Plan discusses inspections conducted by lab supervisors.

Section 2.3 1. (Lab Supervisor) Conduct formal laboratory inspections quarterly to ensure compliance with existing laboratory Standard operating procedures.

A combination of factors has contributed to the health and safety inspection process not being fully implemented. Included among them are a lack of resources to both complete and monitor inspections and subsequent reports, and unclear inspection responsibility and related reporting procedures between EH&S & RISO.

By not assuring full implementation of inspection procedures, the campus is exposed to an increased risk of injuries and illnesses, subsequent civil and criminal litigation and citations/fines by various regulatory agencies.

Recommendation 1

We recommend that the campus review and strengthen their existing health and safety inspection procedures related to timeliness of inspections, follow-up documentation and report distribution in order to assure compliance with state, CSU and campus regulations.

Campus Response

We concur and will take the following corrective actions to address this recommendation.

- a. Environmental Health and Safety (EH&S) and Research and Instructional Safety (RISO) will jointly develop a written safety inspection program that will address division of Responsibilities, protocols and schedules of inspections. This program will incorporate all current inspections (Department of Safety Coordinators, food service, lab safety, radiation Safety, radiation safety, etc.) and those found deficient by the Audit into one document. It Will address correction responsibilities, reporting procedures and follow-up protocol. Correction date: October 1, 1997.
- b. Campus compliance with the new OSHA Safety Inspection Program. Correction date: June 1, 1998.

- c. EH&S will conduct a mandatory meeting of Department Safety Coordinators to reemphasize their responsibilities, inspection procedures, filing reports and follow-up corrective action. Correction date: November 1, 1997.
- d. EH&S and RISO will develop or purchase a database program for tracking of identified Safety issues and document the corrective action taken. This will facilitate the follow-up of safety issues and document the corrective action taken. Correction date: February 1, 1998.

Recommendation 2

We recommend that the campus formally establish specific roles and responsibilities for both EH&S and RISO to assure that: duplication of effort does not occur; campus areas which have previously not been given adequate inspection and training coverage are addressed; and, cross-interchange of appropriate information occurs.

Campus Response

We concur with this recommendation. The campus will develop a document clarifying the roles and Responsibilities of these offices to insure all areas of the campus are adequately covered. We will also encourage increased communication by establishing monthly meetings between the two offices to facilitate exchange of information and develop strategies for problems and situations as soon as they arise. In addition, the Vice President for Administration and the Vice President for Academic affairs will study the feasibility and desirability of co-locating and merging the two operations.

EMPLOYEE HEALTH AND SAFETY TRAINING

The campus employee health and safety training program was deficient with respect to development of training requirements, timely training of employees, and exchange of training information.

We found that:

- ▶ Not all employees were receiving required training timely.
- ▶ Specific training requirements, including frequency of refresher training had not been developed for each employee. We did find that EH&S was developing a program that addresses this issue.
- ▶ There was no advance schedule indicating which departmental employees should be attending training provided by either EH&S or RISO trainers. Normal procedures involved EH&S or

RIOS notifying departments they would provide certain training on a specific date and requested the attendance of their employees.

- ▶ Employees who missed scheduled departmental training were often not identified for training at a later session.
- ▶ Orientation of new employees (faculty and staff) did not consistently address health and safety issues. The faculty orientation outline did not discuss any pertinent health and safety issues. Although the staff orientation process did provide some health and safety information, the completeness of that coverage could not be determined.
- ▶ Procedures had not been developed to notify EH&S or RISO of newly hired employees or employees who were reclassified into areas where potential workplace hazards existed.
- ▶ Departmental records did not provide evidence that new employees were provided appropriate training prior to being given assignments in areas where work hazards were present. Considering that EH&S and RISO generally schedule training sessions on an annual basis with specific departments, there is a risk of employees not being adequately trained or provided necessary health and safety information before working in those areas where hazards exist.
- ▶ The degree of training record documentation varies among the four departments visited. Some records were maintained within individual shops and others in department offices. Training information was rarely forwarded to either EH&S or RISO. We also noted that training information was not exchanged between RISO and EH&S.

Title 8, Section 3203, IIPP includes the following health and safety training requirements.

Section 3203.(a)(7). Provide training and instruction:

Whenever the program is first established;

To all new employees;

To all employees given new job assignments for which training has not previous been received;

Whenever new substances, processes, procedures and equipment are introduced into the workplace and represent a new hazard;

Whenever the employer is made aware of a new or previously unrecognized hazard; and

For supervisors to familiarize themselves with the safety and health hazards to which employees under their immediate direction and control may be exposed.

Section 3203.(b)(2). Documentation of safety and health training required by subsection (a)(7) for each employee including employee name or other identifier,

training dates, type(s) of training, and training providers. This documentation shall be maintained for at least one year.

The CSUF IIPP manual, which closely follows the CSU Model IIPP, addresses specific campus training requirements in Section 14.0 EMPLOYEE SAFETY TRAINING.

The inadequacy of the employee health and safety training program can be attributed to both a lack of: resources (to fully identify, complete and monitor employee training requirements) and, a process which does not promote an exchange of information between EH&S & RISO.

Failure to assure training procedures are fully implemented increases the risk of employees not being provided timely health and safety training

Recommendation 3

We recommend that the campus strengthen their existing health and safety training procedures to assure timely training of their employees.

Campus Response

We concur and will take the following corrective actions to address the issue.

- a. The campus is developing a database, with support from the Chancellor's Office, which will identify Safety training requirements related to job classifications or codes. This database will identify the employee, their date of hire, the training required, training dates and the frequency of refresher. Once this database is put into use, employees will be flagged when training is due. EH&S and RISO will be responsible for scheduling the training and notifying those identified in the database. The database will be accessible by both offices on a server. Correction date June 1, 1998.
- b. EH&S and RISO will be working with the Campus Training Coordinator to list all scheduled safety Training in a campus-wide training brochure. Correction date: January 1998.
- c. EH&S and RISO will work with the Human Resources Department and Faculty Affairs and Records To identify the degree and type of safety training necessary for all new hires, whether faculty, staff or student assistants. This will target those employees requiring New Employee Orientation and identify additional training requirements. Job duties requiring additional training will not be assigned until required training is implemented .
- d. EH&S and RISO will work with Human Resources, Faculty Affairs and Records and the Vice Presidents for Academic Affairs and Administration to develop comprehensive safety orientation for all new employees. Correction date: February 1998.
- e. Documentation of how department training records are kept will be clarified with Department Safety Coordinators to ensure records are maintained according to Cal/OSHA and campus guidelines. Access to, use and location of these records will also be defined. Reviewing of department training Records will become part of the campus inspection program. Correction date: November 1, 1997.

STUDENT HEALTH AND SAFETY TRAINING

Our review of campus student health and safety training procedures indicated that a comprehensive program had not been developed for either on or off-campus educationally related activities.

We found that:

- ▶ one of three academic departments visited had not instituted laboratory safety procedures which students must read and certify their compliance by signing and dating.
- ▶ two of three academic departments visited did not mention the use and availability of material safety data sheets (MSDS) on their instructional laboratory safety procedure documents.
- ▶ injuries involving students are not required to be reported to the campus Occupational Health and Safety Committee as are injuries involving employees. It would be useful for this committee to also receive information on student injuries as a means of identifying health and safety issues where campus or specific department policy might be warranted.
- ▶ there was no single office or campus policy from which all off-campus programs were subject to review for uniformity in addressing student health and safety issues. Although the majority of the CSUF academic departments coordinate their internship programs through the Center for Internships/Cooperative Education (CICE), we found at least fourteen did not. We also noted there were similar short term projects referred to as community based learning, field trips, as well as the longer term student teaching and nursing programs that involve students participating in off-campus educationally related activities.
- ▶ there were differences in individual departmental requirements involving student internships. This particularly applied to designating whether the student, the campus or the company would accept responsibility for injuries that might occur to students while working off-campus on either a mandatory or voluntary basis.
- ▶ there were no campus-wide procedures in effect to assure applicable faculty and staff were providing their students with the most up to date, and as uniform as possible, health and safety information and training regarding both on and off-campus educationally related activities.

Because there is no comprehensive and uniform state, CSU, and campus policy regarding student health and safety training, we found that schools and departments were developing and implementing their own individual student health and safety related training and information, thus leading to varying degrees of coverage.

By not establishing a more comprehensive and uniform process of providing students with applicable training and information regarding both on and off-campus educational activities, there is an increased risk of both injuries and illnesses to students and subsequent civil litigation.

Recommendation 4

We recommend that the campus establish a more comprehensive program that addresses both on and off campus student health and safety training and information issues.

Campus Response

- a. EH&S and RISO will develop a campus policy regarding student health and safety training for The president's approval. Correction date: February 1, 1998.
- b. EH&S and RISO will work with Deans and Department Chairs to develop the degree and type of Student safety training necessary for the hazards encountered in specific classes. Students will receive basic safety instructions during the first week of classes of the semester and sign documentation that they have received the training. Activities, which require further specific training, will be documented as the training is given and forwarded to the department chair. The department will maintain documentation for three years, OSHA's standard record keeping time.
- c. In order to identify and correct procedures or activities that resulted in student injuries, the cause Of the student's injury and a recommendation for ways to prevent future injury will be required from the student's instructor. The Occupational Safety and Health Committee will review these injuries for recommend follow-up action by departments. Correction date: January 3, 1998.
- d. The Center for Internships/Cooperative Education (CICE), consulting as necessary with the campus risk management coordinator, will be responsible for reviewing and advising all departments for uniformity in addressing current student health and safety issues for on-and off-campus internship and community-based learning programs. CICE documentation and procedures will serve as a model upon which EH&S and RISO, in consultation with the campus risk management coordinator, will develop and provide applicable standards and guidelines for student teaching, field trips, and similar off-campus educationally related activity. RISO and EH&S , and the campus risk management coordinator will act as an advisor to CICE. Correction date: February 1, 1998.

EMPLOYEE MEDICAL MONITORING

Medical monitoring coverage was not being provided to that CSUF faculty whose workplace contains hazardous materials.

Approximately 140 employees were included on the most current campus employee medical monitoring program listing. We did not note any faculty members being included in this program even though

there are hazardous materials in a number of academic workplaces. However, staff laboratory technicians working in the same workplaces as the faculty *were* included in the program.

Specific employee medical monitoring program requirements are contained within the CSU Sample Employee Medical Monitoring Program (EMMP) Manual and the CSUF Employee Medical Monitoring Program.

Section 2.2 of the CSU EMMP Manual contains the following information regarding faculty:

In general, faculty members have minimal contact with hazardous agents or chemicals, and minimal potential for exposure. Faculty members from the following departments may have potential for a significant biological, physical, or radiological exposure: Chemistry, Biological Sciences, Art, Industrial Arts, Chemical Engineering, Ornamental Horticulture and Plant and Soil Science.

Office of the Chancellor Memorandum HR 96-04, April 8, 1996, *Policy on Mandatory Medical Examinations - Personnel Actions for Failure to Employee to Comply*_states in part:

It is the policy of the CSU that medical examinations mandated by federal and state laws and regulations be strictly enforced by each campus. Failure or refusal of an employee to undergo required medical testing as determined by campus management shall constitute a failure or refusal to perform the normal and reasonable duties of the position.

Several years ago, the campus EH&S Office requested that all campus units determine which of their employees should be included in the EMMP. The responses from the academic departments did not include any recommendations for inclusion of faculty and no further follow-up was undertaken.

By not including all employees working with hazardous agents and materials in the EMMP, the risk of work related illnesses going undetected are increased.

Recommendation 5

We recommend that a renewed effort be made to assure that applicable faculty members are provided necessary and required medical protection through the campus Employee Medical Monitoring Program.

Campus Response

- a. In order to identify faculty members who are exposed to conditions requiring medical monitoring, a survey is currently being developed to identify substances or conditions which would require a

person to become included in the university's medical monitoring program. Signed surveys will be used also as a declaration of non-exposure. Correction date: September 1, 1998.

- b. A policy memo from the university president will be distributed campus-wide making it a requirement that all employees, whether faculty, staff or student assistants attend the required safety training and participate in the campus medical monitoring program. Employees who do not participate in required campus-wide training will be subject to the normal disciplinary processes related to failure to perform work. Correction date: February 1, 1998.

**APPENDIX A:
PERSONNEL CONTACTED**

<u>Name</u>	<u>Title</u>
Milton Gordon	President
Margaret Atwell	Associate Vice President, Academic Affairs
Charles Buck	Associate Vice President, Student Affairs
Joe Campbell	Maintenance Mechanic, Department Safety Coordinator
Sally Cardenas	Director, Internships/Cooperative Education
Jim Corbett	Manager, Central Plant
Brian Christie	Manager, Building Trades
Darryl Curran	Chair, Art Department
John Edwards	Supervising Painter
Bob Gill	Environmental Compliance Manager
Marco Guardi	Environmental Health and Safety Officer
Willie Hagan	Vice President, Administrative Affairs
Lloyd (Skip) Hines	Chemical Safety Officer, Research & Instructional Safety Office
William Huffman	Director, Public Safety
Jim Ivory	Supervising Painter
Kolf Jayaweera	Dean, School of Natural Science and Mathematics
John Jentz	Athletics Financial Officer
Carolyn Johnson	Internship Office Coordinator, Communications Department
Ut Le	Lead Auto and Equipment Mechanic
Mert Johnson	Manager, Landscape Services
C. Eugene Jones	Chair, Biological Science Department
Pamela Losco	Supervising Administrative Assistant, Student Health Center
Ann Megli	Assistant Director, Human Resources
William Pollock	Administrator, Associated Students Administration
Thomas Richey	Manager, Building Services
Jerry Samuelson	Dean, School of the Arts
Charles Stevens	Director, Physical Plant
Mary Kay Tetreault	Vice President, Academic Affairs
Bruce Weber	Chair, Chemistry Department
Tom Whitfield	Director, Environmental Health and Safety
Colleen Wilkins	Environmental Health and Safety Officer
Susan Fisher-Young	Director, Research and Instructional Safety Office