

**OCCUPATIONAL HEALTH**  
**CALIFORNIA STATE UNIVERSITY,**  
**DOMINGUEZ HILLS**

**Report Number 97-14**  
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## **ABBREVIATIONS**

CCR	California Code of Regulations
CSU	California State University
CSUDH	California State University, Dominguez Hills
DSC	Department Safety Coordinators
EHOS	Environmental Health and Occupational Safety
GISO	General Industrial Safety Orders
HRM	Human Resources Management
IIPP	Injury and Illness Prevention Program
MSDS	Material Safety Data Sheets
MSP	Medical Surveillance Program

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## INTRODUCTION

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### PURPOSE

Our overall audit objective was to determine the effectiveness of existing policies and procedures, which 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 included appropriate distribution of reports;
- ▶ the campus had implemented procedures for investigating, recording and reporting accidents;
- ▶ the campus had identified training requirements applicable to specific classes of employees along with providing students who operate in potentially hazardous worksites with adequate training;
- ▶ the campus had developed procedures and materials to assure that employees and students are provided training timely;
- ▶ the campus had developed procedures for recording training to employees and students;
- ▶ the campus had developed a medical monitoring program and completed an exposure assessment and identified those employees who should be included, and
- ▶ the campus had appointed a specific unit or individual to ensure the medical monitoring program was being followed in a timely and thorough manner.

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### 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. Calendar year 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 areas. We reviewed available records related to health and safety training and information for both the selected employees and students in 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.

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## BACKGROUND

The Board of Trustees Committee on Audit directed the office of the University Auditor to review the subject of Occupational Health at its January 1997 meeting. Occupational Health was selected because of several factors including the risk assessment recently completed by CSU executives and endorsements for the audit by the Statewide Academic Senate and the California State Students Association.

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) is designed to serve, as an umbrella, which 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 is 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.

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## **OPINION**

We visited the California State University, Dominguez Hills campus from May 27 through June 23, 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.

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## **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.

### **INJURY AND ILLNESS PREVENTION PROGRAM (IIPP) [5]**

The existing campus Injury Illness Prevention Program (IIPP) was neither endorsed by the president nor distributed to the campus community for implementation. Distributing a current IIPP endorsed by the president will increase the level of health and safety awareness among the campus community and reduce the risk of workplace accidents and illnesses.

### **HEALTH AND SAFETY INSPECTIONS [5]**

The campus health and safety inspection process was inadequate with respect to timeliness and documentation of inspections, corrective actions taken, and notification of inspection results to management with oversight responsibility. By assuring full implementation of inspection procedures,

the campus decreases exposure to injuries and work-related illnesses, civil litigation, and citations/fines by various regulatory agencies.

### **EMPLOYEE HEALTH AND SAFETY TRAINING [8]**

Campus health and safety training for employees was deficient with respect to development of training requirements, timely training of employees, and documentation of training conducted. 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]**

The campus did not have a policy in place for communicating and documenting health and safety instructions to students for either on- or off-campus classroom activities. By establishing a comprehensive and uniform process for providing students with appropriate training information regarding both on- and off-campus educational activities, the campus will reduce the risk of injuries and illnesses to students and subsequent civil litigation.

### **EMPLOYEE MEDICAL MONITORING [11]**

The campus Employee Medical Surveillance Program (MSP) was deficient. By assessing medical hazards on the campus, identifying those employees who should be included in the MSP and assuring they receive appropriate and timely medical monitoring, the risk of work related illnesses going undetected are decreased.

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## **OBSERVATIONS, RECOMMENDATIONS, AND CAMPUS RESPONSES**

### **CAMPUS INJURY AND ILLNESS PREVENTION PROGRAM**

The existing campus *Injury Illness Prevention Program (IIPP)* was neither endorsed by the president nor distributed to the campus community for implementation.

The director of Environmental Health and Occupational Safety (EHOS) stated that a presidentially endorsed IIPP manual had been circulated to campus departments sometime during 1990/1991. However, none of the three academic departments visited or Physical Plant was able to locate this IIPP document. The director EHOS provided us with a copy of an IIPP document dated June 1996. This latest version had been distributed to Physical Plant for review. To date, this latest version had not been finalized for presidential endorsement and distribution to the campus departments.

Title 8, §3203. *Injury and Illness Prevention Program (IIPP)*, requires the IIPP to include a system for communicating with employees in a form readily understandable by all affected employees on matters relating to occupational safety and health, including provisions designed to encourage employees to inform the employer of hazards at the worksite without fear of reprisal.

The director, EHOS indicated that a lack of funding had prevented the distribution of the revised 1996 IIPP document to the campus community.

By not distributing a current IIPP, endorsed by the president, to the campus community, the risk of employee injuries and illnesses is increased.

#### **Recommendation 1**

We recommend that the current IIPP be finalized, endorsed by the president and distributed to all campus departments for implementation.

#### **Campus Response**

We concur with the recommendation. The IIPP has been finalized, endorsed by the president and distributed to all deans, directors, and managers for implementation.

### **HEALTH AND SAFETY INSPECTIONS**

The campus health and safety inspection process was inadequate with respect to timeliness and documentation of inspections; corrective actions taken; and notification of inspection results to management with oversight responsibility.

We found that:

- ▶ Periodic inspections of laboratories and other potentially hazardous workplace areas by the Art, Biology, and Chemistry departments were not occurring.
- ▶ Quarterly inspections of laboratories by the principal investigators and supervisors outlined in the chemical hygiene plan were not occurring.
- ▶ Follow-up action to indicate corrective action of deficiencies noted during inspections was not always adequately documented.
- ▶ Inspections of non-departmental areas (bathrooms, hallways, exteriors and interiors, and assembly rooms) were not being conducted by EHOS.

The *CSUDH Injury and Illness Prevention Program (IIPP)* (which conforms to Title 8, §3203 et. seq.) addresses inspections in a number of sections:

§10.0, HEALTH AND SAFETY INSPECTIONS. Pertinent inspection requirements include:

§10.1.b. EHOS 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. EHOS will conduct annual inspections of non-departmental public access areas.

§12.0, HAZARD CONTROL PROCEDURES. Pertinent inspection requirements include:

§12.1. Upon completion of scheduled or unscheduled inspections all findings will be prepared in writing and submitted to department chairs and EHOS. Corrective actions, or a suitable timetable for elimination of hazard (where appropriate), is the responsibility of the department. EHOS will, however, assist by obtaining expert corrective assistance and will attempt to secure University-wide funding where appropriate and necessary.

§14.0, RECORD KEEPING. Pertinent inspection requirements include:

§14.7.a. Records of scheduled and periodic inspections to identify unsafe conditions and work practices. The documentation includes the name of the person(s) conducting the inspection, the unsafe conditions and work practices

identified, and the corrective action(s) taken. These records will be maintained for at least three years.

*The CSUDH Chemical Hygiene Plan* discusses inspections conducted by both the principal investigators and supervisors:

§7.5 f. Chemical Hygiene Officer ensures that appropriate audits are conducted.

§7.7 e. (Principal Investigators and Supervisors) Conduct quarterly inspections of laboratory.

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, no chemical hygiene officer, and not distributing the IIPP to the departments for implementation.

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

## **Recommendation 2**

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

## **Campus Response**

We concur with the recommendation. The campus will appoint a chemical hygiene officer to provide oversight for the implementation of the campus Chemical Hygiene Plan. The campus has reactivated the Instructional Research and Safety Committee (formally the College of Arts and Sciences' Safety Committee). The committee will be expanded to include broader campus representation to address health and safety issues. Included in the committee's charge will be a focus on inspection procedures, time lines, thoroughness of inspections, follow-up documentation and report distribution as well as procedures to follow to ensure that health and safety deficiencies are addressed. Special attention will also be placed on the integration of safety inspections conducted by the principal investigators and supervisors into the existing inspection program. All programs/plans will be administered under the guidance of the Office of Environmental Health and Occupational Safety. The appointment of a chemical hygiene officer and the procedures for implementation of the plan will be completed by March 1998.

There will be a review and revisions made to the inspection requirements and procedures identified in the Campus Injury Illness Prevention Plan. Emphasis will be given to who conducts inspections (i.e.,

principal investigators, supervisors), time lines, inspection thoroughness, required follow-up documentation, report distribution, and health and safety deficiency correction procedures. Distribution to deans, directors, managers and others of the revised plan will be completed by June 1998. Implementation of identified procedures will also begin in June 1998.

## **EMPLOYEE HEALTH AND SAFETY TRAINING**

Campus health and safety training for employees was deficient with respect to development of training requirements, timely training of employees, and documentation of training conducted.

We found that:

- ▶ Specific training requirements, including frequency of refresher training, had not been developed for each employee.
- ▶ There was no advance schedule of which department employees were to attend training provided by EHOS. Attendance at many of the EHOS sponsored training sessions was minimal.
- ▶ None of the departments in our sample had created specific health and safety training policies and procedures for their specific areas as outlined in the IIPP.
- ▶ Employees who missed scheduled departmental training were not identified to receive training at a later date.
- ▶ The campus had developed approximately 21 health and safety programs through EHOS. However, thirteen of these programs were either partially implemented or had not been implemented at all.
- ▶ Faculty were not included in the CSUDH new employee orientation. Therefore, they were not receiving the required health and safety information at the start of employment.
- ▶ None of the three academic departments were able to demonstrate that procedures were in place to assure new employees were required to work under direct supervision during the initial training period.
- ▶ None of the three academic departments were able to demonstrate, through either written procedures or training records, that employees received additional training when new workplace hazards were introduced
- ▶ No records were available to indicate that additional training was provided to employees moving into new job assignments where they previously had not received any training.
- ▶ Training records maintained in the academic departments reviewed were inadequate. As such, we were not able to determine that all employees received all required training.

*Title 8, §3203, IIPP* includes the following health and safety training requirements:

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

- (A) Whenever the program is first established;
- (B) To all new employees;
- (C) To all employees given new job assignments for which training has not previous been received;
- (D) Whenever new substances, processes, procedures and equipment are introduced into the workplace and represent a new hazard;
- (E) Whenever the employer is made aware of a new or previously unrecognized hazard; and
- (F) For supervisors to familiarize themselves with the safety and health hazards to which employees under their immediate direction and control may be exposed.

§3203.(b)(2). Documentation of safety and health training required by subsection (7)(a) 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 CSUDH IIPP Manual*, that closely follows Title 8, §3203 addresses specific campus training requirements in section 13.0 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 not distributing the IIPP to the departments for implementation.

Failure to assure that 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 training procedures, including implementation of the IIPP training requirements, to assure timely and complete training for all employees.

### **Campus Response**

Environmental Health and Occupational Safety will recommend a campus training policy and develop a procedures manual which will include various types of required training, identification of the regulation requiring the training, frequency of the required training and refresher courses, and typical

classifications requiring the training. The Instructional Research and Safety Committee will address the creation of a centralized depository for training records and the need for health and safety training, initial and refresher training, new employee training, and required additional training when new hazards are introduced into the workplace. The policies and procedures will be established by March 1998.

The Office of Environmental Health and Occupational Safety will provide consultation and oversight for training programs. It will also more broadly communicate to the campus community information on health and safety issues and training programs. A recently established web site will assist in disseminating this information. Units will provide the Office of Environmental Health and Occupational Safety information on their individual programs. The published programs will include the current on-going training in areas such as: Respiratory Protection, Hazard Communication, Hazard Recognition, Personal Protective Equipment, Chemical Hygiene, Air Monitoring, Blood Borne Pathogens, Fire Extinguisher, Medical Surveillance, Injury Illness Prevention Training, and New Employee Orientation in Health and Safety.

## **STUDENT HEALTH AND SAFETY TRAINING**

The campus did not have a policy in place for communicating and documenting health and safety instructions to students for either on- or off-campus classroom activities.

We found that:

- ▶ The Art department had not established procedures for providing health and safety information to students.
- ▶ The Chemistry and Biology departments did not mention the use and availability of material safety data sheets (MSDS) on their instructional laboratory safety procedure documents.
- ▶ Injuries involving students and campus visitors were not being reported to the Occupational Health and Safety Committee. The reporting of these types of accidents could be used as a means of identifying where campus or specific department policy might be warranted.
- ▶ There were no campus written procedures, including central oversight, of internship activities other than medical and student teaching facilities. These latter two contracted programs were subject to oversight by the Purchasing Office.
- ▶ The student field trips program did not sufficiently cover health and safety issues related to off-campus student activities. Specifically, assignment of liability and student certification acknowledging receipt of appropriate pre-field trip health and safety information was not adequately addressed.

There is no comprehensive and uniform state, CSU or campus policy regarding student health and safety training. *The CSUDH IIPP Manual* contains limited and general comments regarding health and safety training for its students in §4.0 and §7.0.

Without the benefit of uniform procedures regarding communication of health and safety issues to students, individual 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 comprehensive and uniform process for providing students with appropriate training information regarding both on- and off-campus educational activities, there is an increased risk of both injuries and illnesses to students and subsequent litigation.

#### **Recommendation 4**

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

#### **Campus Response**

The Instructional Research and Safety Committee will recommend campus policies and develop procedures for student health and safety training for student activities occurring on and off campus. The policies and procedures will be developed by March 1998.

The campus will review and revise as necessary the sections of *Scope* and *Students* in the Injury Illness Prevention Plan. Distribution to deans, directors, managers and others of the revised plan will be completed by June 1998. Implementation of identified procedures will also begin in June 1998.

### **EMPLOYEE MEDICAL MONITORING**

The campus Medical Surveillance Program (MSP) was deficient in several areas. We found that:

- ▶ Seven of the ten employees included in our test had not received any medical examinations since their inclusion in the (MSP). Two of the three remaining employees had either been provided a physical at the time of employment and none since or was not provided an initial physical until two years after their date of employment and none since.
- ▶ Departments did not participate in the assessment of employees to be included in the medical monitoring program. The list was compiled by employee classification codes only.
- ▶ The current list of employees requiring medical monitoring did not include any faculty even though they are exposed to the same academic work areas as the laboratory technicians who are included in the list.

*CSUDH MSP Manual*, §3.0.Purpose states in part:

. . . pre-employment and periodic exams may reveal a disease or illness in the early stage and to help to determine whether or not the employee's health status is compatible with the job assignment. . . To identify unrecognized effects of exposure by continually monitoring group employee health data to detect possible health trends.

At least two factors have contributed to the deficiencies in the campus MSP: the written version of the campus MSP was not published until May 1997; and there was confusion as to responsibility for oversight of the MSP.

By not assessing medical hazards on the campus, identifying those employees who should be included in the MSP and assuring they receive appropriate and timely medical monitoring, the risk of work-related illnesses going undetected are increased.

#### **Recommendation 5**

We recommend that the campus:

- a. assure that the MSP is distributed to all departments;
- b. provide training to department representatives regarding the full implementation of the MSP;
- c. conduct a campus-wide assessment of its medical hazards;
- d. identify and include all appropriate employees in the campus MSP; and
- e. assure that all employees in the MSP are provided appropriate and timely medical examinations.

#### **Campus Response**

We concur with the recommendation. The campus will clarify the responsibility for oversight of the Medical Surveillance Program.

Environmental Health and Occupational Safety will reevaluate the campus written Medical Surveillance Program. There will be revised policies developed and procedures established for the program implementation. The revised program will be distributed to deans, directors, managers and others for implementation by May 1998.

Included in the revisited areas of the Medical Surveillance Program will be the review and possible revisions to the sections addressing medical hazard evaluation and training. Environmental Health and

Occupational Safety will provide program training for department representatives. Training for department representatives will begin by December 1997.

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**APPENDIX A:  
PERSONNEL CONTACTED**

<b><u>Name</u></b>	<b><u>Title</u></b>
Robert Detweiler	President
Steve Doyle	Director, Environmental Health and Occupational Safety
Faye Edwards	Administration Operational Analyst I
Amer El-Ahraf	Executive Vice President
Danny Gammage	Coordinator, Hazardous Materials
David Inafuku	Instructional Support Technician
Louis Ivers	Chair, Art Department
Cecile Lindsay	Associate Vice President, Academic Affairs
Raymond Montoya	Plumber, Physical Plant
Joseph Moss	Director, Physical Plant
Yoram Neumann	Executive Vice President
Stanley Noguchi	Instructional Support Technician
LaVerne Parker-Diggs	Director, Human Resources
Allene Quarles	Associate Director Human Resources
Christine Rivera-Adame	Benefits Manager Human Resources
Laura Robles	Chair, Biology Department
Steven Slimp	Associate Director Physical Plant
Dennis Weight	Manager, Work Control
George Wiger	Chair, Chemistry Department
Robin Wilkes	Instructional Support Technician
Emmit Williams	Director, Procurement, Contracts and Support Services
Salase Williams	Dean, College of Arts and Sciences