

**OCCUPATIONAL HEALTH
CALIFORNIA STATE UNIVERSITY,
CHICO**

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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
EMHS	Environmental Management Health and Safety
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, Chico campus from September 15, 1997 through October 17, 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.

CAMPUS INJURY AND ILLNESS PREVENTION PROGRAM (IIPP) [5]

The four departments reviewed had not developed specific Injury Illness Prevention Program (IIPP) procedures as required by the campus IIPP. Implementation of department specific IIPP procedures increases the level of health and safety awareness among the campus community and reduces the risk of workplace accidents and illnesses.

HEALTH AND SAFETY INSPECTIONS [5]

The campus health and safety inspection process was inadequate. Establishing full implementation of existing campus inspection policies and procedures reduces campus exposure to 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 were not fully implemented with respect to: development of training profiles, timely training of employees and maintenance of training records. Establishing full implementation of training policies and procedures reduces campus exposure to injuries and illnesses, subsequent civil and criminal litigation, and citations/fines by various regulatory agencies.

STUDENT HEALTH AND SAFETY TRAINING [8]

On- and off-campus health and safety training and information policies and procedures for students were inadequate. Establishing a more comprehensive and uniform process of providing students with applicable training and information regarding both on- and off-campus educational activities reduces the risk of both injuries and illnesses to students and subsequent civil litigation.

EMPLOYEE MEDICAL MONITORING [9]

The campus had neither identified all employees who should be included in their Employee Medical Monitoring Program (EMMP) nor provided timely medical monitoring to a number of those currently in the EMMP. Identifying those employees who should be included in the EMMP and assuring they receive appropriate and timely medical monitoring reduces the risk of work-related illnesses going undetected.

OBSERVATIONS, RECOMMENDATIONS, AND CAMPUS RESPONSES

CAMPUS INJURY ILLNESS AND PREVENTION PROGRAM

The four departments reviewed had not developed specific Injury Illness Prevention Program (IIPP) procedures as required by the campus IIPP.

The CSU Model Injury and Illness Prevention Program (IIPP) among others, addresses the campus's requirements contained in California Code of Regulations (CCR) Title 8, §3203, Injury and Illness Prevention Program. The campus version of the IIPP titled *Injury Illness Prevention Program* requires each department to develop its own specific IIPP procedures in §7, Responsibilities.

The various department chairs and directors visited indicated that they were not aware of the requirement for department specific IIPP procedures.

By not developing an individual departmental IIPP, the risk of employee injuries and illnesses is increased.

Recommendation 1

We recommend that the each campus department develop health and safety policies and procedures to ensure effective compliance with the campus's IIPP and other university health and safety policies.

Campus Response

Environmental Management, Health and Safety (EMHS) has developed a committee of department representatives to discuss the results of this audit and the campus IIPP. We are currently in the process of amending or IIPP, including the development of specific IIPP procedures for each department. EMHS will assist the departments with developing specific procedures and these will be incorporated into the IIPP document. We expect to have this completed by September 1, 1998.

HEALTH AND SAFETY INSPECTIONS

The campus health and safety inspection process was inadequate. The areas where improvement was needed included: timeliness of inspections; distribution of inspection reports; and, documentation on follow-up activities to correct previously identified deficiencies.

We found that:

- ▶ None of the four departments visited had developed formal *internal* inspection and hazard control procedures required by §10.0 and §12.0 of the campus Injury Illness Prevention Program, which would include the frequency, distribution and corrective action procedures for inspections.
- ▶ Formal inspections, including laboratories, in the three academic areas were not being completed within the intervals recommended by the campus IIPP, which included semi-annually by department safety coordinators/ laboratory managers and annually by EMHS.
- ▶ Records of departmental inspection results for the four departments (Art, Chemistry, Biology, and Facilities Management) selected were not being provided to either EMHS or to applicable health and safety committees.
- ▶ Monthly inspections of eyewashes and safety showers were not being completed. These inspections were being accomplished annually by Facilities Management staff.
- ▶ Scheduled inspections of non-departmental areas (bathrooms, hallways, exteriors and interiors, and assembly rooms) were not being conducted by EMHS.
- ▶ There was minimal documentation evidencing follow-up on deficiencies noted during inspections.
- ▶ Chemical inventories for the academic departments' laboratories and stock rooms were not being maintained and forwarded to EMHS.

The CSU Model Injury and Illness Prevention Program (IIPP) among others, addresses the inspection requirements contained in California Code of Regulations (CCR) title 8, §3203, Injury and Illness Prevention Program. The campus version of the IIPP titled *Injury Illness Prevention Program* addresses specific inspection requirements in §10, Environmental Health and Safety Inspections, §12, Hazard Control Procedures, and §16, Resources. The *Laboratory Safety Manual* addresses inspections in §4, Chemical Hygiene and Safety Plan.

The director for EMHS stated that the primary reason for the required inspections not being accomplished timely was due to limited resources.

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 2

We recommend that the campus review and strengthen their existing health and safety inspection procedures related to number and frequency of inspections, inspection report distribution and follow-up activities to correct previously identified deficiencies.

Campus Response

The campus is in the process of developing inspection procedures. An inspection checklist has been created and the departments are beginning to conduct inspections of laboratory areas. We expect to have all the laboratories inspected within one year and then continue inspections on a semi-annual basis.

EMPLOYEE HEALTH AND SAFETY TRAINING

The campus employee health and safety training procedures were not fully implemented with respect to: development of training profiles, timely training of employees and maintenance of training records.

We found that:

- ▶ None of the four departments visited had fully implemented training policies and procedures as outlined in §13.0 of the campus IIPP.
- ▶ The campus had not developed formal training profiles for each of its employees. Employee training profiles provide greater assurance each employee will receive required training.
- ▶ Not all employees were receiving required health and safety training. We found no evidence of any training being provided to selected faculty tested. Available records did indicate that a significant amount of training was provided to the selected staff employees tested.
- ▶ There was no documented evidence by departments that new employees received specific safety training prior to assignment to a new job. EMHS offers general safety training to all new employees every 30 days and also instructs supervisors to provide safety training.
- ▶ There was no documented evidence that employees received necessary training and information whenever new hazardous substances, processes, procedures or equipment were introduced to the workplace; or whenever a previously unrecognized hazard was discovered.
- ▶ Procedures were not in place to assure that each employee who missed individual shop training sessions in facilities management were identified and rescheduled for training at a later date.

The CSU Model Injury and Illness Prevention Program (IIPP) among others, addresses the training requirements contained in California Code of Regulations (CCR) Title 8, §3203, Injury and Illness

Prevention Program. The campus version of the IIPP titled *Injury Illness Prevention Program* addresses specific training requirements in §13. Employee Safety Training.

Campus Executive Memorandum 95-03, *University Policy on Health and Safety Training Sessions*, dated March 8, 1995 states in part: "...it shall be the policy of California State University, Chico to require attendance by faculty and staff at certain campus health and safety training sessions. EMHS shall determine, based on job classifications and duties, which employees must attend the various sessions."

The EMHS trainer indicated that resources were limited and focus was first on training required by law and then on areas where most accidents occur. In addition, the Executive Memorandum from the president requiring all faculty and staff to attend the required training was not being enforced.

By not assuring full implementation of training 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 3

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

Campus Response

The Health and Safety Trainer is creating a matrix of training profiles that will list each employee, the training required for each position, and the frequency of follow-up training sessions. EMHS will provide general training to meet state and federal requirements. The departments will provide specific training for the unique hazards associated with the job, when jobs change, and when training of new hazards is appropriate. EMHS will consolidate all the training records in the current training database.

STUDENT HEALTH AND SAFETY TRAINING

On- and off-campus health and safety training and information policies and procedures for students were inadequate.

We found that:

- ▶ Two of the three academic departments visited (Art and Biology) had not developed any student health and safety policy for classroom or lab activities.
- ▶ Four of the six classes reviewed did not require students to certify having received health and safety instructions in the classroom and laboratories.

- ▶ No reference was made to the use and location of Material Safety Data Sheets (MSDS) in the only two classes-providing students with health and safety information.
- ▶ Material Safety Data Sheets (MSDS) used for all four departments reviewed were not always readily accessible to students and *employees* working in laboratories and other campus facilities.
- ▶ There was no campus policy for off-campus activities such as internships and field trips. One department, Art, had developed a field trip policy for its students.
- ▶ The waiver and release liability form, used by the Art department was not adequate. The document did not specifically address the hazards related to the students' off-campus activity.

Because there is no comprehensive and uniform state, CSU, and campus policy regarding on-campus student health and safety training and information, 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 and currently maintain a more comprehensive program that addresses health and safety training and information, including liability issues, related to both on- and off-campus student activities.

Campus Response

Each dean will develop a policy to address health and safety training for students both on and off campus. The policy will include a mechanism to certify that students have received proper instruction and that MSDS are available and accessible.

The campus Risk Manager will develop an internship and field trip policy that addresses safety concerns during off-campus events. Risk Management and EMHS will assist the departments in developing a waiver and release of liability form that addresses the hazards related to off-campus activities. This function will be completed within three months.

EMPLOYEE MEDICAL MONITORING

The campus had neither identified all employees who should be included in their Employee Medical Monitoring Program (EMMP) nor provided timely medical monitoring to a number of those currently in the EMMP.

We found that:

- ▶ The campus medical monitoring program (EMMP) did not include any faculty members among the 112 employees currently included in the program. Faculty exposure to hazardous materials is similar to those laboratory technicians who are included in the program.
- ▶ Documentation related to employee medical monitoring was not adequate and in most cases no determination could be made as to when the employee received an examination because the employees files were being maintained in three different locations.
- ▶ Four of the ten employees reviewed were not provided a baseline physical when the EMMP was implemented.
- ▶ Four of the ten employees in our review had not received any follow-up examinations since their inclusion in the program, and two other employees had not received consistent annual follow-up examinations. However, all employees and their supervisors had received annual reminders from EMHS.

Specific employee medical monitoring program requirements are contained within the CSU Sample Employee Medical Monitoring Program (EMMP) Manual and the CSUC Employee Medical Monitoring Program. Both the CSU and campus EMMP documents require a baseline physical examination of applicable employees before those employees are assigned to work with respirators or in areas containing potentially hazardous or OSHA regulated substances. Subsequent periodic examinations for these employees were required and the frequency depends upon that required by the physician or pertinent regulation.

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 of Employee to Comply* states in part:

It is the policy of the CSU that medical examinations mandated by federal and state laws and regulations are 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.

The employment manager and EMHS trainer indicated that personnel changes in EMHS, insufficient resources and a lack of communication between human resources and EMHS were contributing factors in the issues related to appropriate and timely employee medical monitoring.

By not identifying those employees who should be included in the EMMP 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. provide training to department representatives regarding full implementation of the EMMP;
- b. identify and include all appropriate employees in the EMMP; and
- c. assure that all employees in the EMMP comply with appropriate and timely medical monitoring requirements.

Campus Response

EMHS will identify all faculty and staff who require medical monitoring. EMHS will conduct a training session with the employees covered by the EMMP to review the medical monitoring laws and why the campus is requesting strict compliance with the EMMP requirements. Baseline physicals will be provided to those who have not participated in the EMMP

EMHS will work with Human Resources to combine the examination results in one location.

The Vice president for Business and Finance will be provided with a list of all employees required to participate in the medical monitoring program. When an employee fails to comply with EMMP requirements, EMHS will notify the Vice President for Business and Finance and a letter will be sent from him to the appropriate administrator and the employee requesting participation. This function will be completed by December 30, 1998.

APPENDIX A: PERSONNEL CONTACTED

<u>Name</u>	<u>Title</u>
Manuel Esteban	President
Michael Abruzzo	Chair, Biology Department
Darlene Beckner	EMHS Trainer
Carol Buckmann	Instructional Support Technician
Gary Campbell	Custodian
Dennis Graham	Vice President for Business and Finance
Janet Hansen	Instructional Support Technician
Neff Haskell	Laborer
George Johnson	Vice Provost, Operations
Todd Kruper	Instructional Support Technician
William Lerch	Director, Experiential Education
William McGinnis	Director, Facilities Management
Robert McNulty	Instructions Support Technician
Warren Moser	Auto Mechanic
Jeffrey Mott	EMHS Environmental Manager
Michael Murphy	Instructional Support Technician
Vernon Patrick	Chair, Art Department
Marvin Pratt	EMHS Environmental Technician
Rodney Quacchia	Chair, Chemistry
Don Sleeper	Manager, Support Services
Amanda Thomas	Employment Manager
Linda Vidovich	Benefits Representative
James Williams	Director, Environmental Management Health and Safety
Connie Zimmerman	Contracting Supervisor