



Safety Program

Injury and Illness Prevention Program Plan

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Elsa Davis, DC, REHS
Division Manager

Roger Bell
Safety & Training Officer

HCA Safety Program
714-834-SAFE (7233)

Program Name and Address:

Departmental Safety Representative Name:

Program Manager Name:

Signature: _____

**HEALTH CARE AGENCY
SAFETY PROGRAM**

INJURY AND ILLNESS PREVENTION PROGRAM PLAN

TABLE OF CONTENTS

<u>TOPIC</u>	<u>PAGE</u>
DIRECTOR'S STATEMENT	2
I. PURPOSE	3
II. POLICY	3
III. GENERAL OVERVIEW	3
IV. RESPONSIBILITIES	4
V. COMPLIANCE	7
VI. HAZARD ASSESSMENT AND CONTROL	7
VII. HAZARD CORRECTION	9
VIII. SAFETY TRAINING REQUIREMENT	9
IX. GENERAL SAFETY PRACTICES	10
X. COMMUNICATION	11
XI. ACCIDENT INVESTIGATION / INJURY AND ILLNESS REPORTING PROCEDURES	12
XII. RECORDKEEPING	14
XIII. PROGRAM REVIEW	15
XIV. ATTACHMENTS	15

Director's Statement

The Health Care Agency (HCA) Director is responsible for overseeing the Injury and Illness Prevention Program (IIPP) Plan for HCA Employees. The Director has designated the HCA Safety Program Manager to direct the IIPP Plan administration. The responsibility for implementing this program is hereby delegated to each Program and shall be delineated in each IIPP Plan.

Program Manager acknowledges receipt and understands his/her role and responsibilities in regards to the IIPP Plan.

Program Manager Name:

Signature: _____

Date: _____

I. PURPOSE

The purpose of the Injury and Illness Prevention Program (IIPP) Plan is to provide guidelines and procedures for the establishment and maintenance of a proactive IIPP Plan throughout the Health Care Agency (HCA).

II. POLICY

HCA recognizes the need to comply with all regulations, applicable laws and standards set forth by the Division of Industrial Relations and the California Code of Regulations. HCA is committed to the safety and health of all its employees.

III. GENERAL OVERVIEW

In compliance with the California Code of Regulations, Title 8, General Industry Safety Orders, Section 3203, all California employers shall establish, implement, and maintain an effective (IIPP) Plan as of July 1, 1991. The IIPP Plan shall be in writing. The IIPP Plan is designed to aid in the provision of a safe and healthful work environment, as required by Labor Code Section 6400, and to reduce personal injury/illness and property losses resulting from occupational accidents and injuries. The IIPP Plan contains the following elements:

- A. Designation of the person, or persons, with the authority and responsibility for implementing the IIPP Plan.
- B. A system for ensuring that employees comply with safe and healthy work practices. Substantial compliance with this provision includes: recognition of employees who follow safe and healthful work practices, training and refresher training programs, disciplinary actions, or any other such means that ensure employee compliance with safe and healthful work practices.
- C. 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. Substantial compliance with this provision includes: meetings, training programs, posting, written communications, a system of anonymous notification by employees about hazards, labor/management safety and health committees, or any other means that ensures communication between employee and employer.
- D. A system of procedures for identifying and evaluating work place hazards including scheduled and periodic inspections to identify unsafe conditions and work practices.
- E. Procedures to investigate occupational injuries or occupational illnesses.
- F. Methods and/or procedures for correcting unsafe or unhealthy conditions, work practices and work procedures, in a timely manner, based on the severity of the hazard.

G. Required safety training and record keeping.

IV. RESPONSIBILITIES

A. HEALTH CARE AGENCY DIRECTOR

The HCA Director is responsible for overseeing the IIPP Plan for HCA employees. The Director has designated the HCA Safety Program Manager to direct the administration of the IIPP Plan. The responsibility for implementing this program is delegated to each Program and shall be delineated in each Program's IIPP Plan.

B. HCA SAFETY PROGRAM

Under the direction of the HCA Safety Program Manager, the HCA Safety Program is responsible for ensuring Agency-wide safety standards and assisting Divisions / Programs in achieving compliance with regulatory requirements and safe work practices. This is accomplished through the support and cooperation of managers, supervisors, Departmental Safety Representatives (DSRs), and the County Executive Office (CEO) Risk Management/Safety and Loss Prevention Program.

C. DIVISION / PROGRAM MANAGERS

Division / Program Managers are responsible for implementing the IIPP Plan and methods for ensuring compliance with safe and healthful work practices within their areas of responsibility for their Division / Program.

Each Division / Program shall have the HCA written IIPP Plan. The written IIPP Plan covers the hazards unique to the Division / Program and any training required to ensure a safe work environment. The Division / Program Manager shall have the following responsibilities:

1. To identify unsafe and unhealthy conditions and work practices through safety and health inspections.
2. To correct hazards after identification.
3. To develop work procedures to minimize hazards to employees and the public.
4. To assure that each employee receives adequate safety training in the tasks they are to perform, including any retraining of an employee when tasks have not been completed to standard.
5. To use established procedures for corrective action to ensure that employees comply with safety and health regulations and best work practices.
6. To establish a communications system to keep employees informed of safety and health regulations, and to allow employees address health and safety concerns, without the fear of reprisal, and receive a response to that complaint.

7. To ensure the HCA Emergency Action Plan (EAP) for their program is maintained and updated to include: building specific emergency evacuation routes, evacuation assignments and training, emergency routes, and training for those who have evacuation assignments.
8. To appoint at least one, permanent, Departmental Safety Representative (DSR) per Program (one DSR per 200 employees is recommended, or one per facility). Each DSR must attend a minimum of two safety training classes and the DSR Quarterly Meetings offered by the HCA Safety Program.
9. To establish a means for making their departments more effective for the safety and health of their employees.
10. To establish an effective means of retaining safety and training records.

D. SUPERVISORS

The Supervisor is the key to a successful IIPP Plan. The Supervisor shall have the following responsibilities:

1. To provide IIPP Plan training to employees during the first fifteen (15) days of employment or when the employee is transferred to a new job assignment, or when new processes, procedures, or equipment are introduced in the workplace that represent a new hazard. Refresher training must be provided at least once a year, thereafter.
2. Document training, after the appropriate training is provided, by using the *Employee Training Checklist* (Attachment I). After the employee has signed the form, the Supervisor shall submit a copy to HCA Safety and Human Resources, to retain in the employee's personnel folder.
3. To encourage the proper attitudes toward safety and job performance in themselves and in their subordinates.
4. To recognize the potential for the real hazards of each job supervised.
5. To observe and evaluate work conditions and procedures continuously, and to detect and correct unsafe conditions and practices.
6. To enforce all safety rules, procedures, and policies.
7. To provide employee orientation and training.
8. To promptly investigate injuries and accidents to determine cause, and prevent recurrence.
9. To instruct and encourage employees to report unsafe conditions and to submit practical suggestions for correction.

10. To ensure that tools, equipment and personal protective equipment (PPE) are properly maintained and utilized.
11. To attend Supervisor Safety Training upon assumption of supervisory responsibilities, and thereafter attend bi-annual refresher Supervisor Safety Training.
12. In addition to the Supervisor's responsibilities with his/her employees, the Supervisor must also collaborate with the DSR regarding Program's safety issues, including:
 - Keeping the DSR apprised of employee injuries when they occur
 - Allowing the DSR to present safety topics as an agenda item at staff meetings
 - Providing guidance and/or assistance to the DSR when requested

E. EMPLOYEES

The employee should work in a safe and efficient manner at all times. The employee shall have the following responsibilities:

1. To learn and follow the standards and procedures that apply to their own specific job assignment(s).
2. To maintain a neat and clean work area that is free from recognizable hazards.
3. To inspect general workplace conditions on a daily basis.
4. To wear Personal Protective Equipment (PPE) as required for their work assignment.
5. To report promptly to their supervisors or designee any activity, behavior, or unsafe condition that could cause injury or illness to others, or damage to property.
6. To comply with HCA's Policies and Procedures, occupational safety and health laws, and any specific rules related to their job duties.
7. To report any emergencies and assist, when safe and appropriate, until emergency personnel arrive on site.
8. To share with supervisors any suggestions for health and safety improvements.

F. HUMAN RESOURCE SERVICES

Human Resource Services shall provide the supervisor of each new employee with the *Employee Training Checklist* (Attachment I). After the appropriate training is provided, within fifteen (15) working days, the *Employee Training Checklist* (Attachment I) shall be reviewed and signed by the supervisor and the employee. The

signed form shall be returned to Human Resource Services, who will retain a copy in the employee's personnel folder.

G. DEPARTMENTAL SAFETY REPRESENTATIVE (DSR)

Under the direction of the HCA Safety Program Manager and the support of the CEO Risk Management Safety and Training Officer assigned to HCA, the DSR serves as a coordinator responsible for implementation and maintenance of HCA Safety Programs, at the program level.

The DSR is the initial contact person for program staff regarding safety issues, and is responsible for referring safety related issues to the HCA Safety Program (e.g., cases of serious injury/illness, imminently dangerous situations, general safety questions, facilities issues, etc.).

V. COMPLIANCE

All HCA employees, without exceptions, including managers and supervisors are responsible for complying with safe and healthful work practices. Our system of ensuring that all employees comply with these practices includes all of the following:

- Informing employees of the provisions of the IIPP Plan.
- Recognizing employees who perform safe and healthful work practices.
- Providing training to employees whose safety performance is deficient and who require refresher trainings.
- Ensuring that employees comply with safe and healthful work practices.
- Use established procedures for disciplinary action to ensure that employees comply with safety and health regulations and work practices.

VI. HAZARD ASSESSMENT AND CONTROL

Hazard recognition and control is a key to an effective IIPP Plan. Inspections and procedures for hazard correction provide a method of identifying and mitigating existing or potential hazards in the workplace. To achieve maximum efficiency and quality of care, potential workplace hazards must be controlled, and hazardous conditions (or practices) must be corrected as they occur, or are recognized.

A. IMPORTANCE AND BENEFITS OF INSPECTIONS

Inspections are an important means of identifying hazards before accidents or injuries occur. Unsafe physical conditions and/or unsafe practices are the primary cause of most accidents and injuries in occupational settings. Inspections should thus concentrate on these areas of concern and work to alleviate the root causes of the problem. Some of the benefits of having effective safety inspections are:

1. Compliance with Federal and State safety and health laws
2. Detection and elimination of unsafe practices
3. Detection and elimination of physical hazards
4. Stimulation and maintenance of employee interest in safety
5. Education of supervisory and facility personnel
6. Better controls over housekeeping practices

B. INSPECTIONS

Each Division / Program Manager shall ensure safety and health inspections are conducted in all work areas for which they are responsible. Inspections shall be made to identify and evaluate hazards.

1. All HCA facilities owned, leased, or donated shall have an annual safety inspection by the HCA Safety and Training Officer and/or the designated DSR. Inspections are recorded on the *Safety & Health Inspection Checklist* (Attachment II) form, shall be reviewed and signed by the DSR and Program Manager or by the STO, depending on who completed the inspection. Any corrective actions resulting from the inspection should be recorded in the *Safety and Health Inspection Corrective Action Confirmation* (Attachment III) form. The original should be filed in the Program's Red Safety Binder and a copy of the annual inspection shall be forwarded to the HCA Safety Program. The Program, as well as, the HCA Safety Program will retain these inspections for a minimum of five (5) years.
2. Periodic inspections shall be performed by the designated DSR, or if absent, by the Supervisor.
The following is the minimum frequency for periodic inspections (this includes the required annual safety inspection):
 - Offices are required to be inspected on an annual basis; and
 - Medical clinics and laboratories are required to be inspected on a quarterly basis.
3. All employees shall inspect their general workplace conditions on a daily basis. The hazard assessment of the employee work area can be visual and is best done at the beginning of the work shift.
4. Inspections shall be made to identify and evaluate recognizable hazards:
 - When the program is first established;
 - Whenever new substances, processes, procedures, or equipment are introduced to the workplace that could potentially represent a new occupational safety and health hazard; and
 - Whenever the employer is made aware of a new or previously unrecognized hazard.

C. CAL/OSHA INSPECTIONS

Whenever a Cal/OSHA officer arrives at any HCA worksite to conduct an inspection or investigation, the HCA Safety Program must be notified immediately at 714-834-SAFE (7233). If it is after normal operating hours the CEO/Risk Management Safety Manager must be contacted at 714-981-6288.

VII. HAZARD CORRECTION

When an unsafe or unhealthy condition is identified, the Division / Program Manager is responsible for ensuring corrective action is initiated in a timely manner, based on severity. The more hazardous exposures shall be given priority.

When a serious or imminent hazard is found, the employees must be protected against this hazard until it is corrected. This could include ceasing operations until the hazard has been corrected or eliminated, or relocating employees to an alternate, safe worksite. When a hazard is observed or discovered, it shall be corrected according to the following procedures:

- A. When an imminent hazard exists which cannot be immediately abated without endangering employee(s) and/or property, all exposed employees will be removed from the area, except those necessary to correct the existing condition. Employees who are required to correct the hazardous condition shall be provided with the necessary PPE.
- B. When an unsafe condition or work practice exists, and corrective action may require a longer period of time, employees shall be notified and instructed to stay out of unsafe areas and/or avoid using unsafe equipment until the problem is corrected. If, for some reason, it is necessary for an employee to enter the unsafe area, the proper protective measures will be taken and the employee will be informed as to the type of exposure or any potential hazard.

VIII. SAFETY TRAINING REQUIREMENT

HCA has the duty to provide required safety training to all employees. Supervisors shall be knowledgeable and able to recognize the safety and health hazards to which employees under their immediate direction and supervision may be exposed. Safety training may be conducted by the CEO/Risk Management/Safety & Loss Prevention Program, the HCA Safety and Training Officer (STO), the designated DSR, and/or the Program Supervisor. Training is conducted biennially, and as needed.

The Health Care Agency is responsible for providing or coordinating the following (applicable) trainings:

- A. Back Injury Prevention
- B. Bloodborne Pathogens- Exposure Control Program Plan (BBP-ECPP)

- C. Chemical Hygiene Program (CHP) Plan
- D. Defensive Driving and Refresher Trainings
- E. Emergency Action Plan (EAP)
- F. Emergency Preparedness Program (EPP) Plan
- G. Ergonomics
- H. Fire Prevention Program (FPP) Plan
- I. Hazard Communication Program (HCP) Plan
- J. Injury and Illness Prevention Program (IIPP) Plan
- K. New Employee Introduction to Safety
- L. Personal Protective Equipment (PPE)
- M. Respiratory Protection Program (RPP) Plan
- N. Slip and Fall Prevention
- O. Supervisor Safety and Refresher Trainings

Health and Safety training is required:

- A. When the program is first established and, if required, at least biennially thereafter.
- B. For all new employees.
- C. For all employees given a new job assignment. Employees given a new job assignment, but performing the same tasks, are not required to be retrained.
- D. When a new substance, process, procedure, or equipment that represents a new hazard is introduced into the workplace.
- E. Whenever the department receives notification of a new or previously unrecognized hazard.
- F. For supervisors to familiarize themselves with the health and safety hazards to which their employees may be exposed.

All training shall be documented on the *Record of Training* form (Attachment IV) or other applicable forms. All training records must be retained for a minimum of five (5) calendar years from the date of training, as required by law.

IX. GENERAL SAFETY PRACTICES

Safety rules are an essential part of HCA's IIPP Plan. All employees are required to know and follow these general safety rules:

- A. All injuries must be immediately reported to your supervisor or designee in the supervisor's absence.
- B. Report all unsafe or unhealthful work practices and conditions in the workplace, including defective tools or other equipment, to the Program Manager/Supervisor.
- C. All employees must follow established Policies and Procedures.
- D. Any potential deviations from safety procedures require approval from immediate supervisor.
- E. Never remove protective guards from equipment, or machines, when in use.
- F. If unsure on how to operate a machine or perform any assigned task, ask your supervisor before proceeding.
- G. Personal Protective Equipment (PPE) must be properly used in any area where it is required.
- H. Use only the proper tool for the job. Do not use defective tools or equipment because they may result in an injury.
- I. Abide by safe lifting practices.
- J. It is prohibited for employees to be under the influence of alcohol or illegal drugs while at work.

X. COMMUNICATION

The IIPP Plan is designed to allow and encourage communication between employees and various levels of management concerning safety and health related matters. Departments must communicate safe work practice rules and other information relating to occupational hazards in a form that is readily understandable and makes every effort to encourage employees to inform management about workplace hazards, or other concerns, free from fear of reprisal.

A. METHODS OF COMMUNICATION

The following system of communication is designed to facilitate a continuous flow of safety and health information between management and staff. HCA's safety communication system includes:

1. New Employee Safety Training that introduces the elements of the IIPP Plan, HCP Plan, and provides an overview of the policies and procedures that the employee is expected to follow.
2. General employee meetings, or committees, that discuss current safety issues, employee concerns, accident investigations, and/or inspection results.
3. Bulletin boards that are regularly posted with announcements, safety-related memos, and/or important documents, such as the Cal/OSHA Log 300A and workers' compensation information. Other effective methods of communication are posters and notices, anonymous safety suggestion boxes, the County's U-Tip Safety Hotline 714-285-5597, and hazard communication information.
4. All employees are encouraged to report any issues that they perceive to be a workplace hazard to their Manager/Supervisor, designated DSR, the HCA Safety and Training Officer, the HCA Safety Manager, or the CEO/Risk Management Safety Manager. Memos are usually utilized to communicate safety-related issues directly to managers and supervisors, but communication can also be accomplished by phone, mail, e-mail, in person, anonymously, or by completing the *Safety Hazard Reporting* form (Attachment V).
5. No employee shall be retaliated or discriminated against for reporting hazards, or potential hazards, or for making suggestions relating to workplace health and safety.
6. Safety suggestions, or reported hazards, will be reviewed and investigated by the Manager/Supervisor, DSR, the HCA Safety and Training Officer, or the HCA Safety Manager.
7. Any recommendation(s) issued as a result of an investigation will be distributed to the employees affected by the hazard. These recommendations should also be posted on the appropriate bulletin boards.
8. Notices and warning signs located throughout HCA facilities (example: eye protection required, hearing protection required, evacuation routes, wet floor warnings, etc.). Employees, contractors, and visitors are all required to comply with all posted instructions.

B. SAFETY MEETINGS

Safety meetings provide an open forum for the discussion of safety concerns and safety-related issues. Minutes must be maintained by the program, and distributed to interested employees. This can be accomplished through the posting of minutes on safety bulletin boards. The safety meeting minutes are maintained and kept on-site or made readily available upon request. The safety meeting minutes must be retained for a minimum of five (5) calendar years.

XI. ACCIDENT INVESTIGATION / INJURY AND ILLNESS REPORTING PROCEDURES

A. ACCIDENT INVESTIGATION

The purpose of accident investigation is to find the root cause of an accident to prevent further occurrences, not to assign blame. Accident investigations must be prompt and objective, focusing on the causes of the accident or the hazardous conditions that led to the occurrence. Managers and/or Supervisors, the HCA Safety Manager, or the HCA Safety and Training Officer shall conduct a complete investigation by:

1. Reviewing the *Employer's Report of Occupational Injury and Illness - Form 5020* (Attachment VI).
2. Investigating the reported injury or illness.
3. Documenting all findings on a *Supervisor's Investigation of Employee's Injury or Illness* form (Attachment VII). This investigation shall include what occurred, what corrective action was taken, and how future injuries of this type can be prevented, if applicable.
4. Report all fatal or serious injury, accident, or serious occupational illness immediately to HCA Safety Program, if it is after normal business hours or during an observed County holiday, contact the CEO/Risk Management Safety Manager. Contact information is provided below:

<u>HCA Safety Program</u> (During Business Hours -- M-F / 8am-5pm)	<u>CEO/Risk Management Safety</u> (After Hours & Holidays)
Phone: 714-834-SAFE (7233)	714-981-6288
Fax: 714-667-8388	714-285-5599
E-Mail: HCASafetyProgram@ochca.com	
Pony: Bldg. 38-AH, Attn.: HCA Safety	600 W. Santa Ana Blvd., Ste. 104 Attn.: CEO/Risk Management
Website: http://intranet/safety	ocgov.sharepoint.com/Collab/SvcAreas/GRC/Risk/Pages/default.aspx

Managers and Supervisors should refer to the Health Care Agency P&P V-4.11 for detailed procedures regarding investigations and proper reporting.

B. ON THE JOB INJURY/ILLNESS REPORTING PROCEDURES

It is the Supervisor's responsibility to inform their employee(s) regarding the need to report work related injuries or illnesses immediately upon occurrence of the incident. Managers and/or Supervisors shall:

1. Call 9-1-1 for critical injuries or illnesses.

2. Call the HCA Safety Program immediately upon knowledge of incident, at 714-834-SAFE (7233). If it is after normal operating hours or during an observed County holiday, call the CEO/Risk Management Safety Manager at 714-981-6288. The CEO Safety Office must report all fatal and serious injuries or illnesses to Cal/OSHA within eight (8) hours. Cal/OSHA defines a serious injury or illness as:
 - A County employee who is killed while in the performance of his/her duties
 - A County employee who suffers any serious degree of permanent disfigurement or amputation of any part of his/her body
 - A County employee who is hospitalized for a period in excess of twenty-four (24) hours, other than for medical observation
3. Within twenty-four (24) hours of a reported incident, follow and complete the HCA Safety Program's *Injury and Illness Reporting Checklist – Supervisor Responsibilities* (Attachment VIII). The reporting process is delineated step-by-step and is available on the HCA Safety Program's website at: <http://intranet/safety/injury-reporting>.

Note: If there is no internet access available, please contact HCA Safety at 714-834-SAFE (7233) or CEO/Risk Management Safety at 714-285-5500 to obtain hard copies of the forms.

4. It is extremely important to follow the distribution instructions noted at the bottom of each form, and also forward copies of all completed forms to HCA Safety Program, immediately following a reported incident.

XII. RECORDKEEPING

Recordkeeping is essential under the General Industry Safety Orders. Each Program shall be responsible for maintaining and retaining the following records:

- A. Copies of the annual *Safety and Health Inspection Checklist* (Attachment II) form, periodic inspection forms, and *Safety and Health Inspection Corrective Action Confirmation* (Attachment III) forms. Inspection records are required to be retained for a minimum of five (5) calendar years.
- B. Copies of training records for each employee. Training records must be retained by Supervisors, DSR, or their designee. These records must be available and accessible for review during an inspection. Training records are required to be retained for a minimum of five (5) calendar years. Training records shall include:
 1. The date(s) of the training sessions
 2. Name of trainer and credentials or title
 3. Type of training received or title of training given/received
 4. Brief summary of training subject(s)
 5. The employee's name, signature, and program/unit name

- C. Copies of Work Injury/Illness records to include the *Supervisor's Investigation of Employee's Injury or Illness* form (Attachment VII). It is recommended the records be retained for five (5) years.
- D. Copies of the *Cal/OSHA Log 300* (Attachment IX). This log records all of the work related injuries and illnesses that result in time lost from work, medical treatment, other than first aid, and limited duty time. Each injury or illness will be recorded on the *Cal/OSHA Log 300* (Attachment IX) form according to its instructions. A summary of injuries for the previous year is recorded on the *Cal/OSHA log 300A Summary* (same Attachment IX) form. Each year the 300A form must be posted on a bulletin board, or other location frequented by employees, from February 1st to April 30th. Cal/OSHA Log records include the 300, 300A Summary, and 301 forms and shall be maintained for the current calendar year and retained for a minimum of five (5) calendar years.
- E. Copies of *Safety Hazard Reporting* (Attachment V) forms shall be retained for a minimum of five (5) calendar years.
- F. Accurate medical records for each employee subject to medical surveillance. Records shall be kept in an employee medical record file. Employee medical records are kept confidential and will be maintained by HCA Employee Health, for at least the duration of employment, plus thirty (30) years. This is the retention period required by Cal/OSHA.

XIII. PROGRAM REVIEW

The HCA IIPP will be reviewed annually, or as needed, per internal or external directives (example: regulatory or Policy and Procedure changes), by the HCA Safety Program. Each component of the program will be analyzed to determine its applicability and effectiveness. If there are any changes to the program, the IIPP will be updated by the HCA Safety Program and changes will be communicated to Program Managers/Supervisors and DSRs.

XIV. ATTACHMENTS

- Attachment I** [Employee Training Checklist](#)
- Attachment II** [Safety & Health Inspection Checklist](#)
- Attachment III** [Safety & Health Inspection Checklist Corrective Action Confirmation](#)
- Attachment IV** [Record of Training](#)
- Attachment V** [Safety Hazard Reporting](#)
- Attachment VI** [Employer's Report of Occupational Injury and Illness - Form 5020](#)

- Attachment VII** [Supervisor's Investigation of Employee's Injury or Illness](#)
- Attachment VIII** [Injury and Illness Reporting Checklist – Supervisor Responsibilities](#)
- Attachment IX** [Cal/OSHA Logs 300, 300A Summary and 301](#)