



LEWIS COUNTY RISK & SAFETY HANDBOOK

Fully Updated

3/17/2026

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Section 1 – Accident Prevention Program

Lewis County has created an Accident Prevention Program (APP), in accordance with Washington Industrial Safety and Health Act (WISHA) standards, which integrates safety and health measures into each job task so that safety practice, accident prevention and job performance become inseparable. The integration of job tasks and safety practices is accomplished through the cooperative efforts of leadership, management and staff to obtain the lowest possible occupational injury and illness (workers' compensation) rates. The objective is the preservation of a safe and healthy work environment for all employees. All policies located under the umbrella of the *Lewis County Risk & Safety Handbook* shall be considered part of the Accident Prevention Program.

1.1 – Scope

Unless otherwise stated in a bargaining unit contract, this policy applies to employees who work in the offices of elected officials who adopt this policy and to employees and appointed officials who work under the authority of the Board of County Commissioners (BOCC). "Employees," when used here throughout, shall include volunteers.

Independent elected officials who choose not to utilize this policy may publish their own policies regarding this subject. Such policy should be reviewed by the County Prosecuting Attorney for legal implications and be updated as required. For such policy to satisfy and serve in place of this one, a copy of such policy must be provided to Risk Management upon or prior to implementation.

1.2 – General Safety Rules

General safety rules represent the minimum standards to be followed by all County employees. Specific equipment, tasks and processes require a much broader set of precautions and rules. Each department / office must create unique safety guidelines, procedures and rules pertinent to their work functions. Safety Committee meetings, crew meetings and training sessions are just a few tools that can be utilized to pass this vital information on to employees, to create a safer workplace, eliminate hazards and reduce risk. The following rules apply to all Lewis County Employees:

- Do not remove, displace, damage, destroy or carry off any safety devices, safeguards or notices of warning furnished for use in or at any County facility or worksite.
- Do not interfere with the use of any method or process adopted for the protection of equipment or employees.
- Do everything feasible to protect the life and safety of others.
- Do not enter any hazardous workplace without proper permission, training and equipment.
- Do not operate or use equipment, materials, tools, or machinery that fail to meet the applicable WISHA requirements, including the rules of specific industries.
- Study and follow all safe practices that apply to your work.
- Cooperate with all other employees in the workplace to try to eliminate on-the-job injuries and illnesses.

- Apply the principles of accident prevention in daily work and use proper safety devices and protective equipment as required.
- Take care of all personal protective equipment.
- Do not wear loose or torn clothing, unbound long hair, or jewelry while working around machinery.
- Report all on-the-job accidents and / or injuries to your direct supervisor immediately, or soon as it is medically safe to do so.
- Maintain all work areas in a clean and organized manner.
- Do not block or obstruct evacuation routes, fire doors, exits, firefighting devices or alarm boxes.
- Do not block or obstruct electrical panels, breakers or isolation devices.
- Use ladders properly and check for defects before using them.
- Use proper lifting techniques.
- Do not rush.
- Ask for help when you need it.
- Do not engage in horseplay.

1.3 – Safety Orientation

All Lewis County employees, regardless of the hours or duration they work for the County, are required to receive safety orientation training prior to beginning work. This training is intended to be an introductory course on health and safety best practices and the safety culture of Lewis County.

As part of the Employee Orientation & Refresher Training Program, ran by Human Resources, Risk Management will present Safety Orientation to new employees.

Departments / offices may opt to do Safety Orientation in-house rather than sending new hires to the training presented by Risk Management. If this option is utilized the training must cover the following topics:

- A description of Lewis County's safety and health program (i.e. the *Risk and Safety Handbook*).
- How and when to report on-the-job injuries, including instruction about first-aid facilities in their primary work location.
- How to report unsafe conditions and practices.
- What to do in an emergency how to exit their primary work location in an evacuation.
- Identification of hazardous gases, chemicals or materials used on-the-job and instruction about the safe use and emergency action to take after accidental exposure.

PowerPoint presentations, which cover all the requirements outlined above, are available on the employee intranet under the Risk page. Risk Management will provide additional training dates and training resources to departments upon request.

Safety orientation training only needs to be done *once* so long as none of the information (such as the evacuation assembly area or first aid location) changes. Safety orientation training should

be documented in the employee's personnel file maintained by the department. For employees who participate in the Risk Management Safety Orientation training course, a *Safety Orientation Checklist* will be provided to document the course. Departments / offices are encouraged, but not required, to use the forms created by Risk Management to document their in-house training as well. These forms can be found on the employee intranet under the Risk tab.

1.4 – Position Specific Safety Training

In addition to safety orientation training, departments / offices are required to provide position specific safety training, including training on personal protective equipment the employee will be using. Position specific training must be completed prior to assigning employees to a hazardous task. The training requirements of employees and volunteers identified in the *Lewis County Risk & Safety Handbook* are the responsibility of the elected official or department director, unless otherwise specified. Further, the scheduling of training and arranging attendance for countywide training is the responsibility of each elected official or department director. Risk Management will provide consultation assistance, when requested, in the development of required training programs.

1.5 – First Aid Training

Risk Management shall offer Medic First Aid / Cardiopulmonary Resuscitation (CPR) / Automated External Defibrillator (AED) training at least once per quarter (hereinafter referred to as "first aid training"). A list of upcoming classes is available on the employee intranet. To sign yourself or an employee you supervise up for first aid training contact the Safety Officer.

County facilities which operate within city limits (Chehalis/Centralia) shall have a minimum of a primary and alternate first-aid trained employee from each office area, with no more than 15 employees per trained employee.

County facilities outside city limits will meet the requirement of WAC 296-800-150 and 29 CFR 1910.151(b) which, as interpreted by this policy, requires training of all staff, including but not limited to: road crews, engineers, central shop, sheriff deputies, traffic control, and animal shelter staff. Elected / Directors may add to this list as deemed appropriate.

1.6 – First Aid Supplies

First aid kits must be made readily available in all work locations. Acquisition and replacement of first aid supplies shall be the responsibility of the department / office unless elsewhere specified. First aid supplies should be appropriate to the occupational setting of the department / office. The supplies must be:

- Easily accessible to all employees
- Able to be moved to the location of an injured / ill worker.
- Stored in containers that protect them from damage, deterioration or contamination.

To ensure that departments / offices are appropriately furnished with first aid supplies and equipment, Risk Management shall conduct annual inspections.

1.7 – Emergency Eye Washing Stations

Work locations which require emergency washing stations to be present, shall maintain them within the requirements outlined in WAC 296-800-15030. Maintenance on these devices must be completed according to manufacturer instructions. Risk Management shall coordinate annual inspections for eye washing stations to ensure they are functioning properly. Annual inspections should include:

- Examination of the piping.
- Ensuring that water is available at the appropriate temperature and quality.
- Activation to ensure that the valves and other hardware are working properly.
- Checking the waterflow rate.

Documentation of annual inspections shall be maintained by the affected department / office.

1.8 – Emergency Action Plan

Lewis County, through Risk Management, shall anticipate and plan for emergency response operations. The Lewis County Emergency Action Plan (EAP) shall provide Lewis County staff members with a guide for handling sudden and unexpected situations. The EAP is a broad plan as it relates to fire, emergency reporting and evacuation. The EAP is available for review on the employee intranet, and departments / offices should maintain a printed copy of the EAP in their primary work location.

Elected officials, directors and facilities managers are responsible for working within this basic reporting and evacuation plan. Any additional internal site-specific emergency response planning is the responsibility of the elected official or director. Risk Management may assist with site-specific emergency planning upon request.

In order to ensure the effectiveness of the EAP the Risk Management department shall conduct regular fire / evacuation drills. The EAP shall be written in such a way that it meets or exceeds the standards outlined in WAC 296-824-20005. Additionally, Risk Management shall review the EAP at least annually, or whenever a deficiency has been observed during a drilled or real emergency scenario.

1.9 – Continuing Safety Education

Lewis County encourages all employees to participate in continued education on the topics of safety, health, risk prevention and accident prevention. To facilitate this Risk Management will:

- Notify employees of training opportunities from Lewis County's partner organizations such as the Washington Counties Risk Pool (WCRP).
- Create training resources for departments / offices to utilize.
- Offer County wide trainings on safety and health topics.
- Disseminate safety and health information County wide.

1.10 – Hazard Reporting

All employees have the right to report or discuss safety and health concerns without fear of discrimination, retaliation or termination. Employees and the County Employee Safety Committee are encouraged to take an active role in identification, reduction, mitigation and / or elimination of hazards and unsafe practices.

Lewis County encourages employees to report anything they perceive to be a risk to their own safety or the safety of others to their direct supervisor. Additionally, Risk Management and Human Resources are available to any employee who would prefer reporting a safety or health concern to someone outside their department, using the emails riskmanagement@lewiscountywa.gov or HR@lewiscountywa.gov respectively.

For more information on your rights as a worker, see the Risk tab of the employee intranet. For more information on how to report an incident, hazard or near miss, see Section 6 – Incident Reporting and Investigation.

1.11 – Safety Disciplinary Policy

In order to maintain a safe and healthful workplace, employees must be cognizant of and comply with County, State and federal safety and health regulations as they apply to the specific job duties required. Further, supervisors must enforce these regulations. Violations of this or any other policy within the *Lewis County Risk & Safety Handbook* may result in disciplinary action up to and including termination. Investigations into policy violations shall be conducted in accordance with the *Lewis County Employee Handbook* or applicable collective bargaining agreement.

1.12 – Maintenance

Risk Management shall review and update this policy and all policies under the umbrella of the *Risk Management Policy* to ensure that Lewis County continues to operate within state and federal safety and health standards. Reviews and updates shall occur:

- Whenever there is a change to the Washington Administrative Code (WAC), Revised Code of Washington (RCW), or other code, law or statute which oversees the content of these policies.
- When a deficiency has been identified through mock emergencies, incidents, etc.
- At least once every two years.

Section 2 – Employee Safety Committee

Lewis County is required to have an Employee Safety Committee as outlined in WAC 296-800-130. The purpose of the Safety Committee is to provide employees with an opportunity to communicate their health and safety concerns. Either the Safety Officer and/or another Risk Management Representative will serve as advisor(s) to the Safety Committee but may not be members of the committee.

2.1 – Meeting Schedule

The Lewis County Safety Committee shall meet monthly. The meetings shall be no longer than one hour, unless extended by a majority vote of the committee. Meetings will be announced via email and a meeting schedule will be posted on the employee intranet under the Risk page.

2.2 – Committee Members

Committee membership shall be made up of representatives from each department under the Board of County Commissioners (BOCC). Additionally, Elected Officials are encouraged to participate in the Employee Safety Committee by selecting a primary representative to serve on the Safety Committee. Should an Elected Official opt not to participate in the Safety Committee, they must conduct a Safety Meeting, with appropriate documentation, which meets the requirements outlined in WAC 296-800-13025.

2.2.1 – Selecting Committee Members

There should be a mixture of both employee-elected and employer-selected members on the Safety Committee. The number of employee-elected members must be equal to or greater than the number of employer-selected members. The term of the elected members of the committee shall be a maximum of one year, however there is no limit to the number of terms an employee can serve. A secondary representative should also be elected/selected in the event the primary representative is unavailable on the scheduled meeting date. Both primary and secondary representatives are welcome to attend meetings simultaneously.

Larger departments with multiple divisions within them are encouraged to provide one primary and one secondary representative per division rather than for the department as a whole. For example, Public Health and Social Services is required to provide one primary and one alternate, however, given that the umbrella of Public Health and Social Services includes many divisions with varying risks and safety concerns, it would be beneficial that each division have its own representation (i.e. the Animal Shelter would have its own representation as the safety needs of the Animal Shelter differ from those of Public Health and Safety Services as a whole).

2.2.2 – Elected Chairperson

The elected Chairperson's role is to run the meeting using *Robert's Rules of Order*. Once yearly, nominations will be taken for the Chairperson, Risk Management Representatives, including the Safety Officer, are not eligible for nomination. At the meeting following when nominations were taken, members of the Employee Safety Committee will vote on who the Chairperson should be. The nominee with the majority vote shall be named Chairperson. At the meeting following the vote the Chairperson shall begin to undertake their duties and shall continue to do so for a one-

year term, unless they opt to step down or become no longer employed by the County. Should the Chairperson opt to step down or leave the County, nominations for a new Chairperson shall be taken at the same meeting at which their departure was announced.

2.3 Safety Committee Obligations

During meetings, as outlined in WAC 296-800-130, it is the responsibility of the Safety Committee to:

- Review safety and health complaints received from the employees.
- Review safety and health inspection reports to help correct safety hazards.
- Evaluate accident investigations conducted since the last meeting to determine if the cause(s) of the unsafe situation was identified and corrected
- Evaluate the workplace accident and illness prevention program and discuss recommendation for improvement, if needed.
- Document attendance.
- Write down topics discussed.

2.4 Record of Meetings

Each committee meeting must have meeting minutes prepared and approved by the committee. Meeting minutes must describe the discussion of the required topics. A copy of the meeting minutes will be sent to the primary and alternate committee members. These meeting minutes must be preserved for one year and made available for review by safety and health consultation personnel of the Department of Labor and Industries'. It is encouraged, but not required, to post the meeting minutes on each office's internal Safety Board. Additionally, the Safety Meeting Minutes will be posted on the County Safety Board, located in the Historical Courthouse, and on the employee intranet, under the Risk tab.

Section 3 – Automated External Defibrillator (AED) Policy

An Automated External Defibrillator (AED) is used to treat persons who experience sudden cardiac arrest. Non-medical personnel, who are trained to do so, may use AEDs to treat a person in cardiac arrest.

Departments or offices that wish to have an AED are responsible for upkeep and maintenance of the devices. If children routinely visit a County building, it is strongly recommended that County building have both pediatric and adult pads for the AED.

3.1 – Definitions

- *Automated External Defibrillator (AED)*. A device used to treat persons who experience sudden cardiac arrest.
- *Cardiopulmonary Resuscitation (CPR)*. An emergency medical procedure for a person in cardiac or respiratory arrest. CPR involves chest compressions to manually pump blood through the heart.

- *Medical Direction:* Physician supervision of any activity that involves medical treatment, including providing oversight and leadership.
- *Sudden Cardiac Arrest.* The abrupt cessation or normal circulation due to the heart's failure to effectively pump blood.

3.2 – Policy

This policy is intended to provide guidance in successfully managing the use of AEDs as lifesaving tools within County Buildings and to provide program consistency and guidance to County departments and offices wishing to acquire AEDs for their area(s).

This policy does not create an obligation for an employee to use an AED, nor is it intended to create any expectation that an AED or an employee trained to use one will be present and/or able to use an AED in the event that one may be medically beneficial. This policy is in no way intended to replace the training necessary to use an AED.

3.3 – Responsibilities

3.3.1 – The Lewis County Safety Officer is responsible for:

- Coordinating with the Lewis County Emergency Medical Services (EMS) Medical Program Director for medical oversight when needed.
- Acquiring follow-up data after AED devices have been used.
- Maintaining a current list of AED locations on the employee intranet.
- Providing the building name, address, floor number and general AED location to:
 - Lewis County Medical Program Director Dr. Peter McCahill who can be reached via email at lewiscountymdpd@gmail.com
 - The Chief of whichever fire department is responsible for EMS response to the AED location.
- Providing consultation for the development and/or updating of this policy.
- Ensuring inspections, testing and maintenance are completed per manufacturer guidelines on all AED devices owned by Lewis County.
- Maintaining records of said inspections, testing and maintenance.

3.3.2 – Department Directors / Elected Officials are responsible for:

- Purchasing and maintaining AEDs.
- Ordering replacement parts after use of an AED or according to manufacturer specifications, whichever comes first.
- Reporting any AED use to Emergency Medical Services and the Lewis County Safety Officer.
- Ensuring a used AED is not placed back into service until EMS has downloaded data from the device.
- Replacing used AED pads and batteries before returning the device to service.

3.4 – Placement & Location of AED Devices

Departments must ensure AEDs are:

- Placed in a marked and secure but accessible location.
- Always left in a fixed location unless under maintenance, repair or in use.
- Positioned to allow a response time of three minutes or less from collapse to device arrival.

The list of current AED locations is maintained on the employee intranet.

3.5 – Response Action Plan

In the event of a suspected cardiac arrest, follow these steps:

1. Call 911.
2. Begin CPR.
3. If an AED is available, retrieve the device or have someone bring it to you.
4. Apply the AED electrode pads to the person's bare chest, following the diagrams on the pads.
5. Follow the AED prompts. If the AED detects a shockable rhythm, it will automatically deliver a shock. AEDs are designed to be safe and will not shock someone who does not need it.
6. Notify Emergency Medical Services and the Lewis County Safety Officer so that they can complete a post-use review. The device must not be returned to service until data is downloaded, and the pads and batteries are replaced.

3.6 – Inspections

To ensure AEDs are accessible and functional, monthly and yearly inspections must be completed. Monthly inspections will be coordinated by the Safety Officer but may be completed by any authorized personnel. Annual inspections shall be conducted by the Safety Officer directly. All records pertaining to AED inspection will be maintained by the Safety Officer. The Jail will be responsible for conducting and documenting their monthly and annual inspections.

3.7 – Out of Service Notification

If an AED is inoperable employees and Department Directors / Elected Officials must be notified immediately. The AED must be removed from its regular location until repairs or replacement is completed. In place of the AED, signage must be posted advising that the AED is currently out of service and where the next closest available AED is located. Once the AED is back in service employees must be notified and the sign must be removed.

3.8 – Training and Education

AED training is provided at no cost as part of First Aid/CPR training. For training schedules contact the Lewis County Safety Officer. For more information regarding First Aid / CPR training see section 1.5 of the *Accident Prevention Program*.

3.9 – Limited Immunity from Civil Liability

Washington’s “Good Samaritan” law, RCW 4.24.300, provides civil immunity to individuals who render emergency medical care or transport injured persons without compensation. The law protects volunteers and licensed health care providers from liability for ordinary negligence, so long as they are not grossly negligent or intentionally harmful.

Similar to Washington’s “Good Samaritan” law, RCW 70.54.310 provides limited immunity from civil liability for individuals and entities using AEDs in accordance with the law. This includes protection for the acquiring entity, the AED user, and the physician / medical director. Immunity does not apply to acts of gross negligence or willful misconduct.

Section 4 – Claims Administration

This policy and attached procedures provide for the administration and defense of general liability claims and lawsuits filed or brought against Lewis County and/or County officers, employees, or agents. The procedures attached to this policy set actions and authorities designed to provide cost-effective and consistent means of claim and lawsuit administration.

4.1 – Definitions

The following terms shall have the meanings which follow unless the context in which they are used clearly indicates otherwise.

- *Board of County Commissioners (BOCC)*. The legally elected legislative and budgetary authority of Lewis County.
- *Claim*. A formal demand for monetary or other compensation as a result of alleged injury, harm or damage caused by the County, its officers, or employees as provided by court rule, state statute, or administrative regulation.
- *County*. Lewis County, Washington.
- *Courts*. Court employees under County self-insurance (liability and workers’ compensation), Washington Counties Risk Pool liability and excess workers’ compensation coverage.
- *Employee*. Any person performing identified tasks, functions, or services for Lewis County or Courts as a regular, temporary, full or part-time employee, or a documented volunteer in the service of Lewis County. Independent Contractors are not County employees under the definition of this policy.
- *Files*. The complete and accurate records with respect to potential or actual claims/lawsuits against the County.

- *Lawsuit.* A legal action which names as defendant(s) or respondent(s) the County and / or its officers, and / or its employees for decisions made, acts performed, omissions made, or taxes or assessments imposed in the course of County business.
- *Risk management.* The division designated by the BOCC as authorized to manage, negotiate and / or settle claims for Lewis County.
- *Risk Management Deputy.* The attorney assigned by the Prosecuting Attorney to, among other things, provide legal advice and assistance to the BOCC and Risk Management in the claim and lawsuit litigation process.

4.2 – Responsibilities

Elected officers, employees or agents are expected to cooperate and support the defense of a claim or lawsuit. Further, any officer, employee or agent named in any legal action involving their County job is required to report the existence of legal action.

These policies and procedures shall not be construed to expand the County's liability for claims or lawsuits beyond that defined by state and federal statutes. To ensure a viable claim or lawsuit program the following general responsibilities are identified below for certain Lewis County Offices and Departments.

4.2.1 – The Auditor is responsible for:

- Accepting and recording lawsuits, as required by law and / or resolution.
- Sending copies of all lawsuits to the Risk Management Deputy and Risk Management.

4.2.2 – Risk Management is responsible for:

- Receiving all claims and copies of lawsuits.
- Preparing and maintaining files for all claims.
- Notifying insurance carrier(s) of all claims / lawsuits.
- Investigating, causing an investigation to be conducted and / or monitoring investigations associated with claims or potential claims.
- Coordinating litigation strategies with the Risk Management Deputy and impacted elected officials / department directors.
- Establishing reserve for insured claims / lawsuits based on litigation strategy and the Washington Counties Risk Pool (WCRP) analysis.
- Arranging, negotiating or authorizing settlement for all claims within the BOCC authorized amounts, with legal advice the Risk Management Deputy and WCRP as necessary.
- Providing recommendation to the BOCC (after review with the impacted elected official / department director) for claim settlement over the authorized amount and claim denials.
- Producing and presenting status reports on pending claims to the BOCC.
- Directing payment of approved, insured claims.
- Tracking reimbursement for uninsured claims.

4.2.3 – The Prosecuting Attorney and Risk Management Deputy are responsible for:

- Creating and maintaining an appropriate file upon receipt of a lawsuit.
- Providing Risk Management with copies of all legal appearances, filings, etc., as requested.
- Managing investigations of lawsuits.
- Establishing litigation plans with Risk Management and impacted elected officials / directors, as necessary or requested.
- Coordinating litigation with any outside attorney, as required.
- Meeting with Risk Management to evaluate status and strategy on appropriate claims / lawsuits.
- Coordinating with Risk Management and impacted elected officials / directors prior to offering any settlement.

4.2.4 – Elected Officials, Directors, and Employees are responsible for:

- Reporting any incident or accident which could be expected to result in a claim or lawsuit to Risk Management and their department leadership, unless otherwise directed by specific reporting procedures.
- Completing detailed investigations as requested by Risk Management, the Risk Management Deputy, the WRCR or outside attorneys.
- Providing information, testimony, exhibits and documents to authorized investigators, the Risk Management Deputy, Risk Management, the WCRP, and outside counsel in all claims and lawsuits.
- Reporting being named in any legal action involving their County job.

4.3 – Policy

With the exception of the BOCC, Prosecutor, Risk Management, or as defined by law or related County policy, elected officials and departments under the BOCC are not authorized to settle any claims or lawsuits and will not:

- Make admission of liability involving a claim or lawsuit.
- Discuss incidents, decisions, or issues with a person not serving as a County officer, employee or investigative agent when a reasonable person would understand that such a discussion may lead to a claim or lawsuit against the County.
- Discuss any open or recently settled claim or legal action with those who have no reason to know without knowledge and approval of Risk Management, the Risk Management Deputy, the Prosecutor, or the BOCC. This limitation does not apply to authorized Prosecutor staff. This restriction does not apply to internal discussion or investigation, with those who have a need to know, or agencies such as the WCRP or outside counsel. Specifically, the intent is to limit release of information without authorized approval – that approval being identified above.

Section 5 – Loss Prevention and Risk Management Services

Employee safety is a primary consideration in County operations. Loss prevention and safety programs are an important, front-end effort of the Risk Management process to maintain a safe and healthful environment for employees, volunteers and citizens.

5.1 – Loss Prevention

Loss prevention is a technical risk management term used to describe any measure that reduces the probability or frequency of a particular loss.

This can be achieved by providing management with a source of consultation and guidance. Routine inspection, evaluation and correction of hazardous conditions and / or practices in the workplace are vital to reducing loss. Loss prevention is also implemented by evaluating the circumstances involving incidents that do occur, changing job practices, retraining and redirecting employees, and improving the process for the future. It is the responsibility of management, supervisors and employees to evaluate the work environment to reduce the hazards and / or practices which cause losses. This policy provides minimum expectations for a loss prevention / safety inspection program.

5.2 – Risk Management Services

Risk Management provides specific services to departments / offices for loss prevention purposes. The primary services offered include, but are not limited to:

- Policy review and consultation services.
- Loss prevention programs.
- Ergonomics consultation.
- Contract indemnification and insurance requirement language drafting and review.
- Inspections.

5.3 – Inspections

Risk Management will provide, upon request, consultation, guidance and loss prevention inspections. The following are subject to inspection, for limited purposes related to risk and safety, by Risk Management staff or other authorized inspectors, without notice:

- All County owned vehicles.
- All County owned equipment.
- All County owned facilities.
- All County issued equipment.
- All space, equipment and facilities leased by the County from private vendors for the purpose of conducting County business.
- Any County workplace or worksite, including those worksites which are contracted out to private vendors.

5.4 – Inspection Process

Management, supervisors, or designated personnel will assist in the inspection process. Other government inspectors will be asked to provide identification when requesting to inspect County operations or facilities. Supervisors will make employees available to the inspector, and employees will be permitted to talk in private with the inspector. Supervisors will provide necessary assistance to the inspector. Supervisors will take any available corrective action at the time of inspection and document any information during the inspection and/or exit interview. The supervisor's inspection documentation will be forwarded to the elected official / director. Elected officials / directors will provide a written reply to Risk Management outlining excepted corrective action for any internal or outside inspection.

5.5 – Loss Prevention and Safety Inspection Authority

Employees are encouraged to take an active role in identification, reduction, mitigation and / or elimination of hazards and unsafe practices. If an employee reports a concern to a supervisor and feels the issues were not addressed, the following steps should be taken:

- Employee documents the matter and the efforts they took with their supervisor and submits their concerns to a Risk Management Representative, using the *Safety / Security Concern Report* form outlined in *Section 6 – Incident Reporting & Investigation*.
- Risk Management will review the concern with the Safety Committee and reach out to the employee's supervisor. If the concern is unable to be resolved, the matter will be documented and submitted to the appropriate elected official / director.
- If the issue is still not resolved, either the employee, elected official / department director, Risk Management, or the Safety Committee may submit the matter to the County Manager.
- The County Manager, with assistance from Risk Management, will review the documented matter or direct further investigation, as deemed appropriate, and provide a written reply to the elected / director and the Employee Safety Committee.
- Directed / Negotiated solutions will be documented and returned to the employee, County Employee Safety Committee, elected official / director, and Risk Management for information or action.
- Only when all other actions have failed to resolve the issues shall hazard concerns be brought before the Board of County Commissioners (BOCC).
- The Board of County Commissioners (BOCC) has the authority to instruct departments under their control to resolve reported and unresolved hazards or unsafe practices. Risk Management, at the direction of the BOCC, will work with elected officials to identify solutions to reported hazards and unsafe practices.
- The BOCC will review all recommendations submitted by the elected official / director. After review, the BOCC will make final decision involving matters under control of the BOCC.

Section 6 – Incident Reporting & Investigation

Lewis County is committed to providing a safe and healthful work environment by protecting employees from workplace injury and disease whenever feasible. The purpose of this policy is to ensure that all accidents, incidents and near misses are reported, recorded and investigated. Reporting and sharing information with relevant parties creates an opportunity to answer questions of what happened and why and use this information to determine how to prevent recurrences.

6.1 – Definitions

- *Incident.* Any unplanned, unexpected or undesired event which **disrupts normal operations**. An incident may or may not result in injury or damage. Both accidents and near misses are a *type* of incident. Example: A machine overheats, triggering the fire alarm and an evacuation. No one is injured, but operations are halted. This is an incident without injury, but it is still important to investigate.
- *Accident.* Any unplanned, unexpected or undesired event which **results in actual harm** such as personal injury or illness, property damage, a liability claim or environmental harm. Example: An employee is carrying a heavy object when they lose their grip. The object falls from their hands, landing on their foot and breaking one of their toes. This is an incident with **tangible harm**, or an accident.
- *Near Miss.* A **potential** hazard or incident in which no property was damaged, and no personal injury was sustained, but where, given a slight shift in time or position, damage or injury easily could have occurred. Example: A wrench falls from a height and lands inches from an employee. No one is hurt, but the outcome **could have** been different given a slight shift in the employee's position.
- *Safety Concern.* Any procedure, condition, or behavior that has not resulted in an **accident** but has the **potential** to either **cause or increase** the amount of harm should an accident occur. Generally, safety concerns have a **clear and concise solution**. Safety concerns are **not** inconveniences or potential disruptions to operations. Example: Employees working with chainsaws notice that their first aid kits lack tourniquets. This is a safety concern because while the lack of a tourniquet does not cause an accident it has the potential to increase the severity of the injury. Once an employee reports this safety concern there is a clear solution (purchasing tourniquets for the first aid kits).
- *Security Concern.* A security concern is any procedure, condition or behavior that has the potential to create circumstances in which a third-party (non-employee) or unauthorized personnel could **gain access to** an area, documents or information that they are not privileged to. Examples include the discovery of unlocked doors which are meant to be locked, witnessing someone badging an unknown individual into a secure area, or blind spots in areas that are meant to be surveilled.

6.2 – Reporting Expectations

Regardless of severity incident reporting is **mandatory**. All incidents must be reported by the affected employee to their immediate supervisor, or someone up the chain of command, **immediately**, or as soon as it is safe to do so. Acceptable methods of employee to supervisor reporting include email, instant (teams) messaging, text, phone call or oral (in person) communication. Employees who fail to report incidents in a timely manner may be subject to disciplinary action. Failure to provide timely and accurate information regarding an incident can hinder necessary and effective investigation, individual employee and County legal defense, or preparation and / or reporting requirements for insurance and liability matters. Delayed reporting due to circumstances outside of the employee's control such as severe injury, lack of cell service, etc., will not warrant disciplinary action.

Supervisors should report incidents to Risk Management **within 24 hours or the following business day**, using the forms outlined in *Section 6.5 – Reporting Forms*.

Risk Management **must be notified immediately** of any incident in which:

- An employee injury results in amputation, loss of an eye, in-patient hospitalization, death or probable death.
- A citizen is injured and needs medical attention outside of basic first aid.
- A vehicle accident which causes:
 - Severe enough damage that the vehicle cannot be driven from the scene (except in cases where the immobility of the vehicle is exclusively due to tire damage).
 - Severe enough injury to any involved parties that they must receive medical care away from the scene of the accident.

It is *strongly preferred* that Risk Management be notified immediately of all incidents, regardless of severity. Timely reporting of employee injuries, particularly those which require medical attention outside of basic first aid, is necessary to mitigate any delays in employees receiving their workers' compensation benefits. For more information on reporting expectations for workplace injuries please see *A Supervisor's Guide to Workplace Injuries*, located on the intranet.

Employees are not required but strongly encouraged to report any safety or security concerns they observe. Employees often have insights into concerns and their solutions that Risk Management may not. Therefore, getting employee feedback and reports on processes and opportunities for improvement is essential for Risk Management to succeed in our goal of reducing workplace incidents, injuries and illnesses.

6.3 – Responsibilities

Successfully responding to and mitigating incidents, accidents and near misses requires collaboration between employees, supervisors and Risk Management. Each party has unique but equally important roles in creating a culture of safety which does not stigmatize workplace incidents or reporting.

6.3.1 – Risk Management is responsible for:

- Creating a reporting culture in which employees of the County feel their concerns will be heard and acknowledged, and which aims to identify and control hazards.
- Reviewing incident reports and utilizing the facts within to recommend corrective actions which ensure the potential for recurrence is either reduced or eliminated.
- Assisting with incident investigations upon request or whenever additional follow up is needed to reduce recurrence.
- Maintaining incident reports in accordance with the Washington State record retention guidelines.
- Reviewing this policy at least once yearly and updating it and all associated reporting forms as needed.
- Offering training courses on incident reporting and incident/injury responses at both employee and supervisor levels.

6.3.2 – Managers and Supervisors are responsible for:

- Creating a work environment in which employees feel safe and encouraged to report incidents, safety concerns and security concerns.
- Receiving reports of incidents and interviewing employees, citizens and witnesses as needed.
- Investigating incidents and determining what if any changes in behavior, procedure or environment are needed.
- Utilizing the appropriate reporting forms when documenting incidents reported to them by their employees.
- Ensuring that employees under their leadership have read and understood this policy.
- Cooperating with Risk Management when additional follow up after an incident is needed.

6.3.3 – Employees are responsible for:

- Notifying their supervisor, or someone up the chain of command, of any incidents immediately, or as soon as it is safe to do so.
- Cooperating with the incident investigation process which includes but is not limited to participating in interviews, giving witness statements, filling out vehicle accident reports and taking photos of the scene where required.
- Reporting safety or security concerns to their direct supervisor or Risk Management using the Safety or Security Report form.

6.4 – Reporting Forms

Risk Management has created a selection of forms to be used during the incident reporting process. The type of form(s) needed will depend on the type of incident being reported. These forms benefit both employees and supervisors by creating a timely reporting process and

allowing for investigations into preventative measures. Each of the forms outlined below are available on the employee intranet.

6.4.1 – Lewis County Employee Injury / Illness / Blood Exposure Report Form

This form serves as both an incident report *and* investigation report form for incidents involving employee:

- Injury
- Illness
- Fatality
- Blood Exposure

It is intended to be filled out by the affected employee's direct supervisor, or next person in the chain of command should the direct supervisor not be available. All information needed to complete this form correctly can and should be gathered by *interviewing* the injured/ill employee and any available witnesses. Once the supervisor has completed the form employees should be offered an opportunity to review the report for accuracy. **Both parties are required to sign the form prior to it being turned into Risk Management.**

Supervisors who are completing this form must return it to Risk Management **within 24 hours or the following business day**. For more details, please see the *Lewis County Employee Injury / Illness / Blood Exposure Report Form Supervisor Instructions* located on the intranet.

6.4.2 – Lewis County Incident Report Form

This form serves as both an incident report *and* investigation report form for the following:

- Vehicle Damage (including but not limited to passenger vehicles, PITs, Heavy Equipment and other types of machinery).
- Non-employee incidents (3rd party injuries, disruption of normal operations caused by a 3rd party, etc.)
- Property damage
- All other incident types not involving employee injury, blood exposure, illness or fatality.

This form is intended to be completed by a direct supervisor of the affected employee(s) or direct supervisor for the location in which a non-employee incident occurred. All information needed to complete this form correctly can and should be gathered by *interviewing* affected party and any available witnesses. Once the supervisor has completed the form employees should be offered an opportunity to review the report for accuracy. **Both parties are required to sign the form prior to it being turned into Risk Management.**

Supervisors who are completing this form must return it to Risk Management **within 24 hours or the following business day**. For more details, see the *Lewis County Incident Report Form Supervisor Instructions* located on the intranet.

6.4.3 – Washington Counties Risk Pool (WCRP) Vehicle Accident Checklist

The WCRP has created a post vehicle accident checklist for its member counties which serves two purposes:

1. Provides instructions to employees on how to respond to a motor vehicle accident.
2. Acts as a report form.

This form is intended to be completed by the employee who was driving at the time of the accident and should be filled out as soon as it is safe to do so. Supervisors of employees who were involved in motor vehicle accidents are still required to fill out the *Lewis County Incident Report* form and send it to Risk Management **within 24 hours or the following business day**. The *WCRP Post Accident Checklist* should be submitted to Risk Management along with the *Lewis County Incident Report* form.

The *WCRP Post Accident Checklist* should be included in all **County Vehicle Crash Packets**. It is also located on the intranet. For more information on County Vehicle Crash Packets see section 10 – *Vehicle Use Policy*.

6.4.4 – Safety / Security Concern Report Form

If an employee observes something that meets the definition of a safety or security concern as outlined in section 6.2 they are encouraged to report it to Risk Management using the *Safety / Security Concern Report Form*. This form is intended to be completed by the employee who made the firsthand observation. This form is not intended to be used to report damage to workspaces, furniture, or other items which are overseen by facilities staff, unless said damage has led to a serious potential hazard. **This form is not intended to replace the facilities work order request.**

6.4.5 – Reporting Near Misses

Employees and supervisors should report near misses exactly as they would if they *had actually happened*. Supervisors should follow the same steps to interview and investigate the incident using one of the forms outlined above.

6.5 – Scene Procedures

The first responsibility of any County employee at the scene of an incident is to render assistance and, if necessary, notify appropriate authorities. This includes calling 911 where appropriate. Once appropriate action is taken, all incidents must be reported to the employee's direct supervisor immediately, or as soon as it is safe to do so. If the direct supervisor is not available, the reporting employee will follow the chain of command for their department. The employee's direct supervisor shall in turn report the incident to Risk Management. Late reporting of any incident may result in appropriate disciplinary action, as determined by the Elected Official / Department Director.

Where practical, the incident scene should not be disturbed until pictures have been taken, witnesses contacted and interviewed by the direct supervisor or Risk Management, or once police officials have completed their investigation. Supervisors must investigate the incident as

soon as it is safe and reasonable to do so, and results of the investigation should be documented on the coinciding incident report form.

6.5.1 – Scene Procedures for Incidents Involving Injury

Employees should call 911 to request medical assistance for any work-related employee injury requiring medical attention other than basic first aid. Ambulance transportation to a medical treatment facility must be requested for all injuries to the head, neck or back, and/or where substantial blood loss has resulted from the injury. If an employee suffers an injury that requires transportation to a medical facility for care, the employee must not be allowed to drive themselves to a medical facility.

Risk Management must be notified immediately after any work-related injury resulting in amputation, loss of an eye, in-patient hospitalization, death or probable death of any employee. For injuries of this severity Risk Management will need to coordinate with a representative of The Department of Labor and Industries (LNI) to assist with the investigation. LNI must be notified within 8 hours of the incident. Additionally, if an injury of this severity occurs, any equipment involved in the incident may not be moved until a representative from LNI has released the equipment, unless moving the equipment is necessary to:

- Remove any victims or
- Prevent further incidents and injuries

If an employee's injury requires medical attention, they may not return to work until they obtain an Activity Prescription Form (APF) from their attending physician. This form details whether they can return to work full duty or whether there are specific restrictions and/or limitations needing accommodation. The APF must be submitted to Risk Management and the appropriate Department for return-to-work authorization consideration. The employee may qualify for workers' compensation benefits. For more information regarding APFs, return-to-work and applying for workers' compensation benefits see the *Section 7 – Workers' Compensation*

6.5.2 – Scene Procedures for Incidents Involving Vehicles

When a County owned vehicle or privately owned vehicle (POV) authorized for County business is involved in a traffic accident/incident employees must report the incident to their direct supervisor immediately, or as soon as it is safe to do so. Vehicle accidents involving Commercial Driver's License (CDL) employees must be handled in accordance with Department of Transportation regulations.

Employees who are involved in an accident while driving a County owned vehicle should utilize their *WCRP Post Accident Checklist* to assist them with responding to the accident and gathering appropriate information. The checklist should be completed and filled out at the scene of the accident whenever feasible. After completing the checklist, if the vehicle is safe to drive, employees shall take County-owned vehicles to Lewis County Motor Pool for inspection and repair. If the vehicle is not able to be driven, the employee may contact Motor Pool to request a tow.

If law enforcement does not arrive at the scene of the accident to complete a report, the driver of any county vehicle or authorized POV must complete and submit a Collision Report to Washington State Patrol within four business days of the accident when damage to the vehicle(s) and property is estimate at equal to or above \$1,000.00 as outlined in RCW 46.52.030. The Lewis County Fleet Manager can provide assistance in estimating repair costs related to the accident/incident for Collision Report consideration. However, the person responsible for the repairs of the property will make the final determination of cost.

6.6 – Incident Investigation

Supervisors must investigate the incident scene, any equipment involved and interview the employee(s) involved as well as any witnesses. The incident reports outlined in section 6.4 cover all of the following required information:

- Nature of incident (near miss, blood exposure, property damage etc.)
- Nature of injury (if applicable)
- General incident information (time of loss, location, etc.)
- Names and contact details of any witnesses
- Events leading up to the incident
- PPE being used at time of loss
- Incident causes
- Review of any unsafe conditions
- Future incident prevention

Additionally, supervisors should attach the following (if applicable):

- Maps or drawings of the scene
- Photographs
- Witness statements
- Involved employee statements
- Any other pertinent information

6.6.1 – Post Incident Drug and Alcohol Screening

Employees may be required to submit to a drug and alcohol screening after an incident, as outlined in WAC 357-37-200, as part of the investigation process. A severe incident may be a qualifying event for a reasonable suspicion test. Whether or not an incident is severe enough to warrant drug and alcohol testing is at the discretion of department / office leadership. Even extremely severe incidents, such as motor vehicle accidents which cause significant damage or injury, may not warrant drug and alcohol if there is an obvious at-fault party other than the County employee. Each incident will be handled case by case.

Risk Management is available for consultation whenever an incident occurs and can offer guidance on whether a drug and alcohol test may be warranted by request. Risk Management will not instruct departments / offices to administer drug or alcohol testing.

Some medical treatment facilities will administer a drug and alcohol test to any person who seeks medical treatment after being involved in a motor vehicle accident in which that person is the driver.

For more information regarding drug and alcohol screenings see the *Lewis County Drug-Free Workplace Policy*.

Section 7 – Workers’ Compensation

Lewis County is a self-insured employer covered under statutory Workers' Compensation Laws. The purpose of this policy is to inform employees of their rights, obligations and benefits, and to establish procedures for accessing those benefits when applicable. These benefits are administered in accordance with the Washington State Department of Labor and Industry regulations for self-insured employers.

7.1 – Definitions

7.1.1 – Self-insurance

A self-insured employer, such as Lewis County, must cover the costs of an on-the-job injury or occupational disease. This means that Lewis County assumes financial responsibility for the potential loss, rather than purchasing an insurance plan. Employees of self-insured entities have the same rights and responsibilities as other workers in Washington State.

7.1.2 – Industrial Injury

“Injury” is defined under RCW 51.08.100 as a “sudden and tangible happening, of a traumatic nature, producing an immediate or prompt results and occurring from without, and such physical conditions result therefrom”. The elements of an injury include:

- An event at a particular point in time
- A traumatic event
- An event which produces something immediately or within a brief period of time
- Something occurring from outside the body
- The presence of a physical condition resulting from that event

An industrial injury is any injury as described above which is sustained during the course of work.

Additionally, stress resulting from exposure to a single traumatic event will be treated as an industrial injury as outlined in WAC 296-14-300. Repeated exposure to traumatic events, none of which are a single traumatic event, is not an industrial industry. Examples of single traumatic events include: Actual or threatened death, actual or threatened physical assault, actual or threatened sexual assault, and life-threatening traumatic injury.

7.1.3 – Occupational Disease

An occupational disease is a disease that arises *naturally* and *proximately* out of employment. Naturally arising means the disease is:

- Caused by distinctive conditions of the worker's employment; OR
- The worker's occupation exposed them to the likelihood of contracting the disease; OR
- The disease is caused by continuous and specific activity required to perform the job.

Proximately arising means the disease was caused directly by the job and would not have been contracted but for the conditions of employment. The elements of an occupational disease include:

- Proximate cause
- Objective circumstances
- A causal relationship

As outlined in WAC 296-14-300, for certain firefighters, law enforcement officers, and direct care nurses there is a presumption that posttraumatic stress disorder (PTSD) is an occupational disease provided by RCW 51.08.142, 51.32.185 and 51.32.395. For public safety telecommunicators, PTSD may be considered an occupational disease as provided by RCW 51.08.142.

7.2 – Eligibility

7.2.1 – Who May Apply for Workers' Compensation Benefits?

Anyone doing work on behalf of the County (County employees, documented volunteers, etc.) who suffers an industrial injury or an industrial disease while acting in their course of employment or service and who applies within the legal timeframe is eligible. Applying for benefits does not guarantee acceptance of a claim.

7.2.2 – Legal Time Frames

For claims involving an industrial injury a Self-Insurer Accident Report (SIF-2) must be filed by the worker within a period one year after the day upon which the injury is alleged to have taken place. For claims involving an occupational disease, an SIF-2 must be filed within two years from the date the disease was confirmed to be occupational in nature by a qualified physician.

7.3 – Reporting and Filing

7.3.1 – Reporting Requirements

Any industrial injury or illness must be reported to the employee's direct supervisor immediately. If the direct supervisor is not available, the reporting employee will follow the chain of command for their department. Late reporting of any injury may result in appropriate disciplinary action, as determined by the Elected Official / Department Director.

Once an industrial injury or illness is reported the supervisor is required to fill out the *Lewis County Employee Injury / Illness / Blood Exposure Report Form* which can be located on the employee intranet. This form will capture the employee's point of view by guiding the supervisor through an investigative interview process. For more information regarding incident reports, please see *Section 6 - Incident Reporting & Investigation Policy*. Departments / offices

are required to return the incident report to Risk Management within 24 hours of the incident, or the following business day. A copy shall be maintained in the employee's file.

7.3.2 – How to Apply for Workers' Compensation Benefits

When an employee suffers an industrial injury illness and they feel that medical attention is required or when an occupational disease is diagnosed, the employee may apply for Workers' Compensation Benefits. In addition to the *Lewis County Employee Injury / Illness / Blood Exposure Report Form* the employee must complete the employee section of the SIF-2. The SIF-2 is a physical document with no digital alternative. To fill out an SIF-2 form the employee will need to contact Risk Management and schedule a time to come in. Ideally, SIF-2 forms will be filled out prior to the employee seeking medical attention. However, certain circumstances surrounding the nature of the injury or the employee's job schedule may prevent this from happening. It is essential that, at the very least, employees and/or their direct supervisors attempt to contact Risk Management to obtain a claim number to provide the medical staff for billing. Be sure to advise the doctor's office or hospital that the employee works for Lewis County, a self-insured entity, and that they are **not** billing to LNI.

7.3.3 – Filing and Claims Handling

Lewis County has contracted with a third-party administrator (TPA) to assist with the handling of claims. Once the employee portion of the SIF-2 form is completed, a Risk Management representative will complete the 'Employer Start Here' section and then provide the SIF-2 to Lewis County's TPA, Pensar North America Inc. (from here on referred to as the TPA).

7.3.4 – Acceptance or Denial of Claim

Once a claim has been properly filed, the TPA has 60 days to accept or deny a Workers' Compensation Claim. The TPA, with the assistance of Risk Management as needed, may investigate each claim. Acceptance or denial of a claim will be based on:

- The facts surrounding the claim.
- The physician's initial diagnosis.
- Other medical information that may be requested.
- Results from initial investigation of the incident (done at a department level).

7.4 – Benefits

7.4.1 – Medical Treatment

Once the TPA has received the claim, the employee is entitled to all authorized medical treatment for conditions related to industrial injury or occupational disease. The Washington Administrative Code (WAC), chapter 296-20, sets forth the type of treatments allowed and the fee schedule for those treatments.

Some treatments must be authorized by the TPA before they are obtained. These treatments include, but are not limited to:

- Non-emergency surgeries.

- Treatments beyond 60 days or 20 visits, from the first date of treatment.
- Physical therapy beyond 12 treatments.
- Diagnostic studies other than routine x-rays.
- Laboratory studies.
- Pain clinics.

Treatments that are not covered under your workers compensation benefits include, but are not limited to:

- Treatments of an experimental or controversial nature.
- Treatments that only maintain stabilized condition.

Employees who leave work during their regular shift to seek medical treatment for an injury the same day the injury occurred shall be paid a full day's regular pay regardless of the number of hours worked. Any additional time away from work due to the employee's injury shall be handled as outlined in section 7.4.3 – *Time-loss Compensation*.

7.4.2 – Travel Expenses

Upon prior written authorization, the TPA will reimburse employees travel expenses for treatment when an employee must travel more than 15 miles one-way from the worker's home or a work location to the closest doctor/treatment facility with sufficient qualifications. An employee may elect to travel to a doctor/treatment facility without prior authorization but will not be reimbursed for such expenses. For example, if an employee lives in Napavine and chooses a Physical Therapist that only practices in Tacoma, the employee will only be reimbursed for mileage to the closest qualified physical therapist in Chehalis or Centralia.

Additionally, Lewis County will reimburse employees' travel expenses for the following reasons:

- Examinations that are requested by Lewis County or the Department of Labor and Industries (LNI).
- Vocational Services requested by Lewis County or LNI.
- Fitting of prosthetic devices.

7.4.3 – Time-loss Compensation

If an employee is unable to work as a result of their industrial injury or occupational disease, time loss compensation benefits may be applicable. This benefit is only a portion of the employee's regular salary and is not intended to provide the employee with the same level of income received while working. Time loss compensation benefit amounts vary depending on the number of dependents the employee claims on their SIF-2. Generally, the amount is less than 100% of the employee's normal wages.

Once an attending physician has determined an employee cannot return to work due to their injury/illness and notice has been provided to the TPA/Risk Management, the TPA has 14 days to issue the initial time-loss payment. Delays in reporting by the employee, the elected/director,

the supervisor, or doctor will delay time-loss payments at no fault to Lewis County. An employee is not entitled to time-loss payments on the date of the injury or the three days following. For example, if an employee is injured on 2/1/2025, they would not be eligible for time-loss benefits until 2/5/2025. Waiting period days will be counted regardless of whether they were a day the employee wouldn't have been working normally (e.g. a weekend day, scheduled PTO). The TPA uses a 30-day calendar which may affect the dates an employee receives their time loss check. If the employee is unable to return to work after 7 days, the first three days will be paid retroactively.

Accrued leave may be used for the initial three days of missed work, prior to time loss kicking in. Additionally, accruals may be used to supplement the missing portion of income not covered by time-loss compensation benefits. This may be referred to as "making the employee whole". Employees who choose not to make themselves whole, or who have exhausted their leave banks, will be responsible for paying their portion of insurance costs, if applicable. Lewis County will continue to pay the employer portion of the insurance costs so long as the injured worker is still employed by the County.

Employees who are out of work due to a workplace injury or illness and are receiving time-loss compensation **may not** receive donated leave from other employees.

7.4.4 - Property Damage Refunds

In some cases, an employee may be reimbursed for the cost of personal clothing, footwear and other items that are damaged or lost because of a workplace injury. This benefit is also applicable in scenarios where personal items are damaged or lost due emergency treatment offered at the scene of an industrial injury. The employee must submit receipts for the cost of repair or replacement of such items to Risk Management. Risk Management will then pass on the receipts to the TPA who will review them for reimbursement.

7.4.5 – Vocational Benefits

Vocational benefits are aimed at helping a worker who cannot return to their old job due to the effects of their injury become employable in a new position. Referrals for vocational services are discretionary and made based on specific claim needs.

7.4.6 – Permanent Partial Disability

If an employee's industrial injury or occupational disease caused permanent loss of bodily function, they may be entitled to a permanent partial disability (PPD) award. The amount received for any physical loss does not include compensation for pain and suffering. The degree of a partial loss of function is determined by a disability rating. These ratings are conducted either by the health-care provider who treated the employee or by one or more independent medical examiners using established medical standards and guidelines. Ratings are performed after the employee's condition is deemed medically stable and no further treatment is needed. Any PPD benefits will be paid in accordance with State Statutes.

7.4.7 – Total Permanent Disability

If an employee's accident results in the loss or total paralysis of both legs or arms, one leg and one arm, or a total loss of eyesight they may be eligible for a pension by law, even if they are able to return to work.

If vocational and medical evaluations determine that an injury prevents the employee from ever becoming gainfully employed, they may be entitled to a pension.

While pension benefits will come directly from LNI, Lewis County is responsible for funding the benefits. More information will be provided at the time a pension is determined.

7.5 – Returning to Work

In the event an employee is injured on the job, Lewis County has implemented a return-to-work process. This process will provide injured or ill employees with the opportunity to return to safe, productive work as soon as medically possible.

The ultimate goal is to return the employee to their original job. If the employee is unable to perform the tasks of the original job, Lewis County will follow the return-to-work process to attempt to provide modified duty work that meets the approval of the attending health care provider. The support and participation of elected/directors, supervisors and all employees is essential to the success of the return-to-work process.

For a brief overview of the return-to-work process, see the *Return-to-Work Flowchart*, located on the intranet.

7.5.1 – Obtaining a Release from the Attending Physician

Once employees have opened a claim and sought medical treatment for their occupational illness or industrial injury, they will need to submit an Activity Prescription Form (APF). This form lists all, if any, restrictions imposed on the employee due to their injury/illness. The form shall be provided to the employee during their initial appointment with Risk Management, and additional copies are available on the intranet.

There are three outcomes listed on the APF:

1. No-Duty (the employee cannot return to work in any capacity).
2. Full Duty Without Restrictions (the employee's injury/illness does not inhibit them from performing their job duties, there are no medical restrictions).
3. Release for Modified Duty (the employee has medical restrictions and may only return to work if certain conditions are met).

The APF has specific outlines for medical restrictions including, but not limited to, duration of sitting/standing, liftable weight capacities, ability to twist, bend or kneel. If the APF recommends light duty but does not specify any restrictions or limitations the employee will be directed to request a new APF from their attending physician.

Employees must provide Risk Management with up-to-date APFs. A new APF should be submitted when:

- Their previous APF is within one day of expiration.
- Their work release status or work restrictions have changed.
- 30 days have passed since an APF was submitted.

Risk Management shall then distribute the APF to the TPA and directors/elected, supervisors or administrators as necessary and with consideration of local privacy laws.

7.5.2 – Returning to Work: Full Duty

Once an employee has received an APF that indicates they are clear for full duty without restrictions they may return to work per their regularly scheduled hours and duties. Some injuries/illnesses may require continued or follow up medical appointments without inhibiting the employee's ability to perform their duties. In these circumstances, the employee must schedule the appointments outside of work hours, unless approved by their supervisor in advance. The employee will be expected to abide by, and adhere to, all Lewis County policies, which they were informed of at the time of hire. The employee shall continue to get medical benefits under their worker's comp claim as outlined in section 2.4.1- *Medical Treatment*, so long as the appointments are directly related to the occupational illness/industrial injury, regardless of whether they return to work in a full duty capacity.

7.5.3 – Returning to Work: Modified Duty

If an APF has been submitted with medical restrictions indicating that the employee can only return to work in a modified duty capacity, Risk Management and the employee's management team will work together to determine if the restrictions can be accommodated.

After the employee's management team confirms that they are able to accommodate the requested restrictions with a modified duty assignment, Risk Management will send correspondence to the department to document the approval and document the restrictions. A modified duty job offer will be presented to the employee by Risk Management, which will include a start date and general overview of the job itself. Employees will be required to sign their modified duty job offer prior to returning to work. A template of the modified duty job offer is available for reference on the intranet. Employee's refusal to accept the modified duty job offer may result in termination of time-loss benefits. It is the employee's responsibility to follow the physician's treatment plan and notify the County (employee's manager or supervisor, and Risk Management) when restrictions are either lifted or revised.

Although returning the employee to work is the ultimate goal, there are some situations where modified duty cannot be reasonably accommodated, such as when the restrictions completely prevent an employee from doing any of the essential functions of their job. Each injury or illness will be handled case by case. Employees whose restrictions cannot be reasonably accommodated shall be placed on time-loss until their restrictions are lifted or modified.

7.5.4 – No Duty

If an employee's APF indicates that they are unable to work in any capacity, or if the department / office is unable to make reasonable accommodations for their modified duty restrictions, they shall be placed on time-loss and receive payment for their time away from work as outlined in section 7.4.3 – *Time loss Compensation*.

Being placed on time-loss is an indicator that the employee's work-related injury or illness may be a serious health condition. When an employee experiences a work-related injury or illness that meets the criteria for serious health conditions as outlined in the Family Medical Leave Act (FMLA), Lewis County will designate the absence as both FMLA and Worker's Compensation leave *concurrently*. Once a claim has gone into time-loss status Human Resources will be notified to assist with review for FMLA designation. For more information regarding FMLA, see the *Lewis County Employee Handbook* located on the employee intranet, or contact Human Resources directly.

7.5.5 – Continued Employment Timeframes

Once an employee has been placed in time-loss status, Lewis County will hold their regular position for a period of six months. The six months will begin on the first day of time-loss and cumulative days after will count towards the six-month timeframe. A three-month extension **may be** offered if the attending physician provides written documentation that the employee's recovery, ***on a more likely than not basis***, will have progressed enough that the employee will be able to perform the essential functions of their job by the end of the three-month extension. This will leave the employee's regular job open for a maximum of nine months from the time they were first placed on time-loss. However, if the department or office demonstrates that the employee's continued absence would cause undue hardship, they may decide to withhold the offer of a three-month extension. Examples of undue hardship include but are not limited to:

- Excessive financial burden
- Significant operational disruption
- Impact on workplace safety or legal compliance

Employees will be offered an opportunity to present new information regarding their claim and their recovery status before any decisions regarding employment status are made. This policy in no way interferes with the application of the Family Medical Leave Act (FMLA) or the Americans with Disabilities Act (ADA).

7.5.6 – Non-Disciplinary Medical Separations

Non-disciplinary medical separation refers to the process by which an employee is separated from their position due to a medical condition that prevents them from performing the essential functions of their job. Once the injured employee is deemed unable to return to their regular job duties by their attending physician or the six-to-nine-month timeframe has expired, Lewis County may consider a non-disciplinary medical separation. The Elected Official or Department Director will send a written notice to the employee advising of the separation. Accrued leave will be paid out to the employee as determined by their applicable Collective Bargaining Agreement

or the Employee Handbook. **This termination of employment in no way impacts the continued legal entitlement to workers' compensation benefits.** Additionally, employees must be advised of their eligibility to apply in the future for their current or a similar role with Lewis County once they have been released to perform the essential functions of the job for which they are applying.

The County does not take the decision to terminate employment lightly. Medical separation must only occur after careful deliberation and consideration of business needs, the employee's projected recovery time, and evaluation of undue hardships. Lewis County must consider its duty to spend tax-payer money ethically and responsibly. Offices / Departments should consult with both Risk Management and Human Resources prior to moving forward with a non-disciplinary medical separation.

7.6 – Obtaining a Medical Second Opinion

Lewis County may occasionally have a need to request a medical second opinion. When a department or office becomes aware that an employee's medical condition, return to work status, absenteeism, behavior or work production is affecting mission accomplishment, elected officials or department directors shall contact Risk Management, so they can explore options for medical second opinion requests. Based on the complexity of the case, a meeting between Human Resources, the department, Risk Management and legal counsel may need to take place.

Examples of medical second opinion referral requests include but are not limited to:

- Return to work issues
- Light duty evaluations
- Fitness for duty evaluations
- Physical capabilities of employee work requirements
- Accommodation requests
- Long-term disability evaluations

Employees are required to cooperate fully with any medical second opinion referrals. Should a third medical opinion be required, the medical provider will be selected by mutual agreement of both parties and is paid for by the requesting party.

7.6.1 – Procedure for Obtaining a Medical Second Opinion

Authorization for employee medical second opinion referrals, including Fit for Duty (FFD) or Independent Medical Evaluation (IME), is the responsibility of Risk Management and the TPA. The TPA shall be responsible for arranging medical appointments with a local independent physician appropriate for the category of illness or injury and will be the point of contact with the referral physician(s). All correspondence shall be sent to the employee's attorney in cases where the employee has retained legal counsel.

Risk Management or the employee's Elected Official/Director, under certain circumstances, shall be responsible for contacting the employee regarding the medical second opinion examination and informing the employee of the following:

- The medical appointment location, time and date.
- The employee's responsibilities regarding the appointment and the consequences of not showing up for the appointment.

Medical second opinion results will be reviewed and discussed to consider the examination findings and recommendations and determine the appropriate course of action. All correspondence written to the employee shall be written by the appropriate individual (Elected Official, Department head, Supervisor, Risk Management, or legal counsel) and shall be reviewed by Risk Management and Legal prior to sending. All documentation regarding secondary medical opinions shall be held as confidential and maintained by the Risk Management Department.

7.7 – Requesting a Claim File

Employees have the right to access their medical records. An employee or their representative must make a request for their claim file in writing. Employees should submit this request directly to the TPA. Once the written request has been received the TPA may take no more than 15 days to fulfill the request. Unless otherwise specified in the request, the TPA shall supply the entire file to the employee.

Section 8 – Personal Protective Equipment (PPE)

Personal Protective Equipment (PPE) is an item used to protect the eyes, face, head, body, arms, hands, legs or feet from potential hazards. Examples include goggles, head covers, gloves, safety shoes, protective shields and other types of barriers. Lewis County is required to provide employees with appropriate PPE, as outlined in WAC 296-800-16020, where hazards are present or likely to be present, and there is a reasonable probability that an injury can be prevented by such equipment. Additionally, supervisors working for Lewis County must ensure that their employees use and care for their PPE.

PPE is only a supplementary form of protection, necessary where all hazards have not been controlled through other means, such as engineering controls. PPE should be used after all other reasonable means of reducing hazards have been carried out. Engineering controls are especially important in hearing protection, which has specific standards calling for employers to take all feasible steps to control hazards associated with noise. For more information regarding hearing protection and engineering hazard controls, see Lewis County's *Hearing Conservation Program*.

8.1 – Responsibilities

8.1.1 – Elected / Directors are responsible for:

- Ensuring their departments are furnished with appropriate PPE.
- Adopting this, or a similar program, which meets the requirements outlined in WAC 296-800-160 through WAC 296-800-16080.
- Requiring all employees within their individual offices / departments to adhere to this, or a similar program.

- Providing a copy of any published policy regarding this topic to Risk Management.

8.1.2 – Supervisors are responsible for:

- Ensuring employees have, use and care for their appropriate PPE.
- Ensuring employees under their leadership have read and understood this policy and the expectations of said employees here within.
- Documenting and investigating any reports of defective equipment.
- Completing hazard assessments for PPE.
- Creating a culture in which identifying hazards is a part of the regular routine.
- Informing Risk Management of any safety concerns within their department.
- Ensuring their employees receive PPE and Hazard Awareness training upon hiring and when there is reason to believe the understanding, motivation, and skills required to use PPE has not been retained.

8.1.3 – Employees are responsible for:

- Using the appropriate PPE for the specific job they were assigned.
- Maintaining, sanitizing and caring for their reusable PPE.
- Immediately reporting defective PPE to their supervisor.

8.1.4 – Risk Management is responsible for:

- Assisting with hazard assessments for PPE when requested.
- Maintaining and updating this policy.

8.2 – Assessing Hazards and PPE Selection

In order to determine if PPE is necessary, a hazard assessment must be completed. Supervisors must complete a hazard assessment if hazards are present, or likely to be present in their department. The supervisor must also maintain a written certification that includes:

- Name of the workplace.
- Name of the department.
- Address of the workplace inspected.
- Name of the person certifying that a workplace hazard assessment was completed.
- Date the workplace hazard assessment was completed.
- Statement identifying the document as the certification of hazard assessment.

Hazard assessments should be completed anytime there is a change to procedure that may affect the number of potential hazards present within a department. A hazard assessment form which meets the requirements outlined above is available on the employee intranet under the Risk page.

8.3 – Providing PPE to Employees

Lewis County is required to provide PPE at no cost to the employee so long as the PPE is:

- A type that would not reasonably or normally be worn away from the workplace and

- Required to comply with a safety and healthy standard to protect employees from processes, mechanical irritants, or environmental, physical, chemical or radiological hazards.

See the chart on the following page for more information regarding the types of PPE that Lewis County may be required to pay for. This chart provides examples only and should not be considered an exhaustive list. Some employees may be able to seek reimbursement for the purchase of certain types of PPE, such as footwear. Those employees should refer to their applicable departmental policies or collective bargaining agreements for specifics on procedure, qualifying items and monetary values.

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Part of the Body:	PPE provided at no cost:	PPE Lewis County is not required to pay for:
Head	• Bump caps • Hard hats • Nonconductive head protection	
Eye & Face	• Face shields • Goggles • Laser safety goggles • Nonprescription eye protection • Prescription eyewear inserts/lenses for full-face respirators • Welding and diving helmets.	• Non-specialty prescription eyewear
Ear	• Hearing protection	
Hand/Arm	• Aluminized gloves • Barrier creams (unless solely used for weather-related protection) • Chemical resistant clothing/aprons/gloves • Mesh or leather aprons • Non-specialty gloves if required to protect from dermatitis, severe cuts or abrasions • Rubber insulating gloves	• Hand protection used only for keeping clean or for cold weather with no safety or health consideration
Foot	• Metatarsal foot protection • Rubber boots with steel toes • Shoe covers such as toe caps and metatarsal (foot bone) guards	• Non-specialty safety-toe protective footwear such as steel-toe shoes or boots • Sturdy shoes • Lieman's boots
Other	• Atmosphere supplying respirators • Climbing ensembles used by linemen such as belts/hooks	• Long sleeve shirts • Long pants • Ordinary cold weather gear • Ordinary rain gear • Sunglasses • Sunscreen

8.4 – PPE Types and Standards

8.4.1 – Eye & Face Protection

Employees will use eye and face protection when machines or operations present potential eye or face injury from physical, chemical or radiation agents. It is the responsibility of each supervisor to make available and enforce the wearing of eye and face protection equipment by all exposed employees. Eye and face devices must meet all state and federal guidelines.

Each affected employee is required to use appropriate eye or face protection when exposed to hazards from objects, flying particles, molten metal, liquid chemicals, acids or caustic liquids, chemical gases or vapors, or potentially injurious, light radiation.

Those required to use eye and/or face protection must comply with the following standards:

- Safety glasses with side protection shall be worn when employees are exposed to hazards from flying objects.
- Face shields should only be used as eye and face protection in areas where splashing or dust, rather than impact resistance, is the problem. In the case of grinding operations (plus other operations) a face shield is only to be used as secondary protection to other protective devices, such as safety goggles.
- Equipment must provide adequate protection against the particular hazards for which they are designed.
- When exposed to radiant energy, the supervisor shall ensure affected employees use equipment with filter lenses that have a safe number appropriate for the work being performed.
- Those employees who wear prescription lenses must ensure PPE can be worn over the lenses without disturbing the proper position for protection or obtain permission from their office or department to obtain prescription safety glasses.
- Protectors must be reasonably comfortable when worn under the designated conditions.
- Protectors must fit snugly without interfering with the movements or vision of the wearer.
- Protectors must be durable; able to be disinfected; easily cleanable.
- Employees must keep their eye and face protection clean and in good repair.
- Eye and face protection will be worn when using, performing or handling any of the following:
 - Using shop grinders, chain saws, mowers, crushers or aqua jets.
 - Performing carcass removal, welding, weed and brush cutting/pulling, or any operation that presents potential for injury.
 - Handling chemicals or large quantity biohazard cleanup.

8.4.2 – Foot Protection

Substantial footwear, made of leather or other equally firm material, shall be worn by employees in any occupation or location (except typical office environments) where there is danger of injury

to the feet through falling, slipping, penetration, moving objects or from footwear that is inappropriate for the work being performed (e.g. high heels).

Those whose occupation or location require protective footwear must comply with the following standards:

- Traditional tennis shoes, shoes with canvas tops, thin or soft-soled athletic shoes, open-toed sandals, dress shoes or other similar types of shoes shall not be worn for jobs involving site engineering, or by road crew employees.
- When wearing protective footwear, the construction and material must provide adequate protection from the hazard to which the wearers' feet are exposed.
- For penetration hazards, shoes with heavy leather soles or soles of equally firm material are required.
- Shoes shall meet American National Standards Institute (ANSI) standards for crush/penetration protection as outlined in WAC 296-800-16065.
- The soles of the footwear must protect the employee from penetration while also limiting slip hazards.
- The footwear must be able to be cleaned and disinfected or be disposable in nature.
- Rubber boots must be worn when there is potential for exposure to hazardous chemicals, hazardous sewage or biohazardous substances.

8.4.3 – Hand Protection

Departments shall select and require employees to use appropriate hand protection when employees' hands are exposed to hazards such as skin absorption or harmful substances, severe cuts or lacerations, punctures, severe abrasions, or harmful temperatures.

Those required to use hand protection must comply with the following standards:

- Hand protection must meet the testing standard(s) for the hazard(s) anticipated.
- Employees should be acquainted with the limitations of the protective items used.
- Gloves' performance characters should be assessed by using standard test procedures.
- The following factors must be considered when selecting hand protection:
 - Task
 - Conditions present
 - Duration of use
 - Hazards
 - Potential hazards

8.4.4 – Head Protection

It is the responsibility of each supervisor to make available and enforce the wearing of hard hats. Employees are responsible for having their hard hat on site and within reach for use when work conditions or site-specific policy require. Supervisors have the authority to require employees to wear hard hats for safety considerations at any time.

Those required to use head protection must comply with the following standards:

- All employees will wear hard hats while working in areas or at tasks where there is a potential for injury to the head from falling or flying objects.
- Hard hats are required while flagging traffic control.
- Hard hats must have 12 square inches of reflector and 360° visibility.
- Head protection must provide adequate protection against the particular hazards for which they are designed.
- Caps with metal buttons or visors must not be worn around electrical hazards.
- Employees must wear a hair net that controls all loose ends when hair is long enough to cause concern that it may be caught in rotation machinery as outlined in WAC 296-800-16055.
- Employees must wear a hair covering of solid material when the employee is exposed to an ignition source and may enter a flammable area as outlined in WAC 296-800-16055.
- There are some exceptions for wearing head protection while in an area with hazards, these include but are not limited to:
 - Employees working on asphalt paving crews when they are exposed to extreme temperatures from hot mix, when they are not exposed to falling objects, need not wear protective hard hats.
 - When an employee is working on a project that is difficult to keep the hard hat on, such as when an employee is doing a lot of bending over and the hat will not stay on, the employee may temporarily remove their hard hat. The employee must keep their hard hat within reach, and once the restrictive portion of the job is complete, the hard hat will be put back on.

8.4.5 – Hearing Protection

It is the responsibility of each supervisor to make available and enforce the wearing of hearing protection by their employees, and to arrange for baseline and annual audiogram testing. It is the responsibility of each employee to wear the required hearing protection and to report for their audiograms when instructed. For more information regarding hearing protection and audiograms, see the *Lewis County Hearing Conservation Program*.

8.4.6 – Respirators

Departments / Offices in which employees may be exposed to hazardous chemicals in the air, such as gases, vapors, mists or dust, must have a Respirator Program in place, as outlined in WAC Chapter 296-842. Affected departments / offices must have a designated program administrator who oversees the program, makes updates to the program as needed, and oversees the storage and maintenance of the respirators. The written program must include the following:

- How the respirators are selected and issued, including a list of all respirators used.
- When and how respirators will be used in routine work activities, infrequent activities, and foreseeable emergencies such as spill responses, rescue or escape scenarios.

- How medical evaluations of the respirator wearer are provided.
- How respirator fit-testing is done.
- How employees are trained about respiratory hazards at their primary work location.
- How the department / office evaluates the effectiveness of the program.

All employees who wear tight-fitting respirators will be fit-tested prior to them using their respirator. Departments / offices may contact Lower Columbia Occupational Health to schedule fit-testing. No beards are allowed on wearers of tight-fitting respirators. Program administrators must ensure that all respirators selected for use within the department / office meet WISHA standards. Program administrators who would like assistance in developing a Respirator Program may contact Risk Management for policy consultation.

8.4.7 – Voluntary Use of PPE

When there are no requirements for employees to use PPE as determined by the hazard assessment, employees may still use PPE voluntarily so long as:

- The voluntary use of PPE does not introduce hazards to the work environment and is consistent with applicable rules established by the department.
- The voluntary use of PPE does not interfere with an employer's security requirements.
- The voluntary use of PPE does not conflict with standards for that specific type of equipment established by the department of health or DOSH.

Voluntary use of respirators has specific guidelines and requirements. Please see the affected department's *Respirator Program* for more information regarding voluntary use of respirators.

8.5 – Training

All employees will receive a basic overview of PPE best practices during their new hire safety orientation. Additionally, employees who must use PPE as a part of their regular job duties must receive department / office specific training prior to completing any activities which require said PPE. Training must be thorough enough so that employees know the following:

- When PPE is necessary
- What PPE is necessary
- How to put on, take off, adjust and wear PPE
- The limitations of PPE
- Proper care, maintenance, useful life and disposal of PPE

Employees must be re-trained on PPE use under the following circumstances:

- There is reason to believe the understanding, motivation, and skills required to use the PPE has not been retained.
- Changes in the workplace make previous training out of date.
- Changes in the types of PPE used within the department make previous training out of date.

Training should be documented in writing and include the name of the employees who attended the training, and the date the training took place. Documents regarding training should be appropriately stored with the office / department. Virtual training may be offered to employees who have access to County email. Risk Management can assist with training upon request.

9 – Bloodborne Pathogens Exposure Control Plan

Lewis County is committed to providing a safe and healthful working environment for all employees. To prevent occupational exposure to bloodborne pathogens, the County will comply with all sections of the Washington Administrative Code (WAC) 296-823-099 through 296-823-18055.

9.1 – Applicability

This policy applies to employees who work in the offices of elected officials and to employees of departments which report to the Board of County Commissioners (BOCC) **who have occupational exposure to blood or other potentially infectious materials that may contain bloodborne pathogens.** When used here “employees” includes volunteers.

Elected Officials may choose to publish their own policy regarding this subject. Such policy should be reviewed by the prosecutor for legal implications and updated, as required. Further, a copy of such policy must be provided to Risk Management and other impacted operations (such as Facilities), as they must be aware of any policy variations for operational and training purposes.

9.2 – Definitions

- *Bloodborne Pathogens (BBP)* Infectious microorganisms in human blood or other potentially infectious materials that can cause disease in humans. Common BBP include Hepatitis B and Human immunodeficiency virus (HIV)
- *Contaminated Sharps* any contaminated object that can penetrate the skin such as needles, scalpels, or broken glass.
- *Exposure Incident* A specific eye, mouth or other mucous membrane, nonintact skin or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee’s duties. Examples of non-intact skin include skin with dermatitis, hangnails, cuts, abrasions, chafing or acne.
- *Occupational Exposure* the reasonably anticipated eye, skin, mucous membrane or other contact with blood or other potentially infectious materials that may result from the performance of an employee’s duties.
- *Other Potentially Infectious Materials (OPIM)* infectious bodily fluids or materials other than blood. Examples include but are not limited to saliva, semen, body fluids contaminated with blood, and unfixed organs or tissues (other than intact skin)
- *Safer Medical Devices* medical devices that have been engineered to reduce the risk of needle sticks and other contaminated sharp injuries.

- *Source Person* persons, living or dead, whose blood or other potentially infectious materials may be a source (OPIM) of occupational exposure to the employee.
- *Universal Precautions* An approach to infection control in which all human blood and OPIM are treated as if they are known to be infected with BBP.

9.3 – Identifying Occupational Exposures

Elected officials or department directors must identify, in writing, tasks, procedures and job classifications within their office / department where occupational exposure to blood or OPIM may occur. The exposure determination must:

- Be made **without** the consideration of personal protective equipment (PPE)
- Include a list of job classifications where all employees have occupational exposure.
- Include a list of job classifications where some employees have occupational exposure and a description of the tasks/procedures which cause occupational exposure for these employees.

9.4 – Creating an Exposure Control Plan

Departments / offices with occupational exposure to BBP must have an exposure control plan in place, as outlined in WAC 296-823-11010. Each department / office shall ensure that their exposure control plan contains the following elements:

- The exposure determination.
- A procedure for evaluating exposure incidents when they occur, which includes filling out a *Lewis County Employee Injury/Illness/Blood Exposure Report Form*. This report should be kept in the employee's medical file, and a copy should be sent to Risk Management.
- Implementation of **universal precautions** or other at least as effective infection control systems.
- Input from nonmanagerial employees with potential exposure to contaminated sharps on the identification, evaluation and selection of effective, safer medical devices.
- Documentation of the process used to solicit input from employees (including the identity or position of said employee).
- Procedures for the usage, maintenance and disposal of personal protective equipment (PPE).
- Documentation of the infectious control systems used within the department or office to protect employees from exposure to blood or OPIM. The infectious control systems must include the following elements:
 - Use of feasible controls, including appropriate equipment and safer medical devices, to eliminate or minimize occupational exposure.
 - Procedures for handling contaminated sharps properly and safely.
 - Procedures for handling reusable sharps properly and safely.

- Procedures to minimize splashing, spraying, splattering and generation of droplets within the workplace.
- System for appropriate labeling of containers used to store, transport, or ship blood or OPIM such as refrigerators, freezers, sharp containers or laundry bags.
- Provision of handwashing facilities that are readily accessible to all employees.
- Prohibition of food, drink and other personal activities in the work area.
- Prohibition of mouth pipetting or suctioning of blood or OPIM.
- Procedures for placing specimens in appropriate containers.
- Procedures for examining and labeling contaminated equipment.
- Procedures for maintaining a clean and sanitary worksite including a written schedule for cleaning and decontamination.
- Procedures for the proper and safe disposal of regulated waste.
- Procedures for the proper and safe handling of contaminated laundry.

Exposure control plans must be reviewed and updated at least annually, and whenever necessary to include new or modified tasks / procedures. The plan must be accessible at the workplace when exposed employees are present. If an employee requests a copy of the exposure control plan one must be provided within 15 days of their request.

Risk Management will provide consultation and assistance on the development of exposure control plans, upon request.

9.5 – Personal Protective Equipment

It is the responsibility of the department / office to ensure that personal protective equipment (PPE) is used when work practices and controls will not fully protect employees from the risk of exposure to blood or OPIM. PPE must be provided at no cost to employees. Supervisors must ensure that their employees are using appropriate PPE. Examples of appropriate PPE include:

- Gloves
- Gowns
- Laboratory Coats
- Face shields or a combination of masks and eye protection
- Mouthpieces
- Resuscitation bags
- Pocket masks
- Other ventilation devices

PPE must be available in multiple sizes and readily accessible at the worksite or issued to employees prior to work beginning. Employees must remove all PPE before leaving the work area. PPE should be cleaned, repaired, laundered and disposed of at no cost to the employee. When PPE is removed it must be placed in an appropriately designated area or container for storage, washing, contamination or disposal.

9.6 – Post Exposure Evaluation and Follow-up

Departments / offices must make sure employees who have been exposed to blood or OPIM have appropriate post-exposure medical evaluation and follow-up available.

Employees shall immediately, or as soon as feasible, report any exposure incident to their supervisor. Supervisors must complete and submit a *Lewis County Employee Injury / Illness / Blood Exposure Report Form* to Risk Management within 24 hours or the following business day. This form meets all requirements for investigating a blood exposure incident. For more information regarding incident reporting and investigation see *Section 6 – Incident Reporting & Investigation*.

All blood exposure incidents will require medical care, such as testing and infection prevention drug regiments, and are therefore qualifying events for workers' compensation benefits. The following documents need to be completed, signed and submitted to Risk Management within 24 hours of the exposure incident, or the following business day, in order to prevent delays in employees receiving their benefits.

- SIF-2 signed by both the employee and the Risk Management Representative responsible for claims administration.
- *Lewis County Employee Injury / Illness / Blood Exposure Report* form signed by the employee, and the employee's direct supervisor.
- Physician's Initial Report (PIR) signed by the attending healthcare professional.

9.6.1 – Post Exposure Procedures

Following the initial first aid treatment such as cleaning the wound, flushing eyes, or other mucous membranes, supervisors shall complete the following:

- Document the routes of exposure and how the exposure occurred.
- Identify and document the source individual unless identification is infeasible or prohibited by law.
- Obtain consent and arrange to test the source individual as soon as possible to determine if they are HIV, HCV, or HBV positive. If the source individual is already known to be positive for HIV, HCV and/or HBV, new testing is not needed.
- Document that the source individual's test results were conveyed to the employee's health care provider.
- Provide the exposed employee with the source individual's test results.
- Provide the exposed employee with information about laws on confidentiality for the source individual.
- Obtain consent and provide a blood test for the exposed employee as soon as possible for HBV, HCV and HIV. This step may be completed by having the employee arrange for testing using their Workers Compensation benefits.

9.7 – Hepatitis B Vaccination

Employees who are regularly exposed to human blood or OPIM, or those who have high potential for exposure, will be offered hepatitis B vaccinations upon assignment or have the option for the vaccination series anytime during job assignment, when exposed or after exposure.

If an employee declines the offer for hepatitis B vaccination, they must sign a statement which includes the following language:

"I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with hepatitis B vaccine, at no charge to myself. However, I decline hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series at no charge to me."

Departments / offices are not required to provide the vaccination series to employees who:

- Have previously received the completed series
- Have immunity to hepatitis B, confirmed by an antibody test
- Have medical reasons for which they cannot receive the vaccination series

9.8 – Training

Training must be arranged by the elected official / director before assigning employees to tasks where occupational exposure might occur.

Annual BBP training will be arranged by the elected / director for employees who are occupationally exposed, and for those employees designated as primary and alternate first aid providers in each physical office.

Additional training will be provided by the elected official / director whenever tasks or procedures change that affect the employee's occupational exposure as outlined in WAC 296-23-12010. Training records will be maintained by the elected office or department for three years from the date of training.

9.9 – Medical Records

Departments / offices must maintain an accurate medical record for each employee with occupational exposure. The record must include all of the following (if applicable):

- Name and Social Security Number of employee
- A copy of the employee's hepatitis B vaccination status, including the dates of all vaccinations.
- Any medical records related to the employee's ability to receive vaccinations.
- The HBV declination statement (if applicable).

- A copy of all results of examinations, medical testing and follow-up procedures related to post-exposure evaluations.
- Employer copy of the health care professional's written opinion regarding post-exposure evaluations.
- A copy of the information provided to the healthcare provider (as required).

Employee medical records must be kept confidential and shall not be disclosed or reported to any person, without the employee's written consent, except as required by law

Section 10 – Vehicle Use Policy

The purpose of this policy is to provide uniform and consistent guidance for the use of County vehicles (including personal vehicles while used for County business), safety of employees and citizens, and to limit liability. This policy shall take precedence if more restrictive than federal or state law. Employees who violate this policy or the law may be subject to discipline up to and including discharge.

10.1 – Responsibilities

10.1.1 – Elected Officials / Directors are responsible for:

- Adopting this, or a similar program, which satisfies all State and Federal regulations.
- Requiring all employees within their individual offices/departments to adhere to this, or a similar program.
- Ensuring employees use County vehicles for county business whenever possible and that vehicle use is conducted in a cost and energy efficient manner.
- Ensuring that employees who drive on behalf of Lewis County:
 - Possess a current and valid State Driver's License (as required by state law), which shall be kept on their person, and applicable endorsement(s) for certain job classifications (such as Commercial Driver's License), unless granted accommodation.
 - Complete a Driving History Record (Abstract) Review upon hire and every three years thereafter.
 - Participate in a Defensive Driving Program upon hire and every three years thereafter.
 - Possess and maintain the minimum state-mandated vehicle insurance when driving a personal vehicle for County business.
 - Report revocation/suspension of an employee's driver's license to Risk Management within 24 hours of discovery.

10.1.2 – Supervisors / Managers are responsible for:

- Ensuring employees under their leadership have read and understood this policy and the expectations of said employees here within.

- Ensuring that employees under their leadership understand procedures for reporting incidents and equipment deficiencies. For more information regarding this subject, see *Section 6 – Incident Reporting & Investigation*.
- Maintaining vehicle Crash Packets and inspecting them at least once yearly and after each incident involving a vehicle to ensure all the required documents are still up to date.

10.1.3 – Employees are responsible for:

- Possessing a valid State Driver’s License (as required by state law).
- Demonstrating their ability and willingness to drive in a safe and legal manner.
- Subjecting to physical examinations, drug and alcohol testing, and driving tests for those employees in designated job classifications (such as Commercial Driver’s License).
- Participating in Driver Record Evaluations.
- Completing Defensive Driver Training within forty-five days of hire and at least every three years thereafter, or more frequently, as required by an Elected / Director or the BOCC. Defensive Driver Training must be completed prior to any vehicle use upon behalf of the County.
- Performing pre-trip vehicle inspections.
- Protecting vehicles and County property from damage or theft.
- Reporting all vehicle incidents immediately to their direct supervisor, Risk Management, and local law enforcement (as appropriate to circumstances or as directed by their supervisor and/or Risk Management).
- Paying for any fines and/or penalties imposed as a result of traffic infractions and criminal traffic offenses committed while operating a County vehicle or privately owned vehicle for County business purposes.
- Reporting all citations, infractions and suspensions to their direct supervisor.
- Notifying their direct supervisor and fleet services of any vehicle damage, defects or safety concerns.
- Using vehicles in a safe and prudent manner, in safe operating conditions, and in accordance with state laws.

10.1.4 Fleet Services is responsible for:

- Performing regular maintenance services and annual vehicle safety inspections.
- Promptly repairing mechanical and safety issues.
- Assisting supervisors and/or Risk Management with post incident investigation as needed.

10.1.5 Risk Management is responsible for:

- Maintaining and updating this policy as needed so that it satisfies all State and Federal regulations.
- Addressing employee safety concerns.

- Assisting elected officials / directors with questionable Driving History Record (abstract) review upon request.
- Providing a list of unauthorized drivers to Fleet Services.

10.2 Assigning County Vehicles

The appointed authority may assign a vehicle to an employee, provided that the assignment is the most cost effective and efficient manner of delivering County services to the public and demonstrates a business need and/or provides a needed service enhancement (i.e. traveling for training opportunities). Assignment of a County vehicle is not the same as designating a “take home” vehicle.

10.2.1 Permission for Volunteers to Operate County Vehicles

Written permission from an appointing authority is required for volunteers to operate County vehicles. Written permission is considered granted if the following is completed: memo, directive, resolution, formal policy or other standardized procedure. The authority must demonstrate all of the following:

- When business necessity requires a County vehicle, and all other County employees are either unavailable or unable to drive.
- Volunteers approved to drive County vehicles will comply with all requirements of this policy.
- The volunteer is currently and properly registered with the County.
- The volunteer has possess a current and valid State Driver’s License, and has completed a defensive driving course.

10.2.2 Limitations

County vehicles shall be used only in the scope and course of County business. Employees may not use County vehicles for personal matters (including transportation of children to school or daycare facilities) except under one of the following circumstances:

- Traveling to an eating establishment, while on County business, in a location where driving to switch to a personal vehicle would result in an extra and unnecessary expenditure of County time and money.
- Operating a vehicle assigned to travel to and from the employee’s residence and is authorized by an appointed authority to do so.
- Limited and personal use such as traveling to eating establishments or between host locations while at a conference or event.
- While either beginning or ending a trip and it is not efficient or purposeful to begin or end travel at The County Motor Pool.
- In the event of an emergency where in driving the County vehicle is the best solution to obtain the necessary assistance.

10.2.3 Prohibited Vehicle Use

- A County vehicle is considered a “Public Location of Business”, and as such, there shall be no smoking (including vaping) in County vehicles. This restriction in no way prevents employees from smoking on their authorized breaks or rest stops, when traveling long distances. However, this smoke break must occur outside of the vehicle.
- There shall be no alcohol or illicit drug use prior to or while operating a County vehicle, as prohibited by law. Further, employees shall not drive while impaired by prescription drugs. Such actions may be grounds for separate disciplinary action up to and including termination of employment. For additional information see Lewis County’s *Drug Free Workplace Policy*.
- Efforts should be taken to secure items within the passenger compartment that could become projectiles during a violent stop or collision.
- Only persons engaged in official County business may ride as passengers in a County vehicle. This includes other county employees, state employees, appointed board members and documented volunteers. Spouses, children and family members are not allowed as drivers or passengers in County vehicles. Any exceptions justified by operational need are to be defined by the elected, department policy, or written justification, with a copy provided to Risk Management.
- Except by specific job assignment, such as K-9 or animal control, there shall be no transportation of animals in County vehicles.
- Cellphone and two-way radio use while driving should be limited to emergencies and emergency response operations. Employees should recognize the increased risk and distractions of mobile communications and are asked to pull over and stop before conducting extensive communication on cellphones or two-way radios.

10.3 Use of Personal Vehicles on County Business

No employee is required to drive a personal vehicle, on County business, as a condition of employment for Lewis County. Personal vehicles shall not be used for County business unless prior authorization from the appointing authority has been granted. Drivers who routinely use their personal vehicles on County business shall maintain adequate vehicle insurance as required by law. The elected / director is responsible for determining proof of insurance with appropriate policy limits. Mileage reimbursement allotted for business use of personal vehicles contains compensation for gas, insurance coverage and vehicle maintenance.

The County’s liability insurance is secondary to the employee’s auto insurance, which is the primary insurer of the vehicle. Employees should notify their carrier as to the amount of business use for endorsement purposes. Due to the potential implication of additional parties, personal vehicle use for County business remains subject to this policy.

10.4 Rental Vehicles

When renting a vehicle for County business, rental company insurance shall be purchased. Employees are required to maintain a copy of the rental agreement for a minimum of 30 days

after the agreement expires. This agreement lists important vehicle information such as the VIN, year, make, model and mileage of the vehicle and will need to be submitted to Risk Management in the event a loss occurs while a County employee is operating a rental vehicle for County business purposes.

10.5 Driving History and Records

No person shall drive a County or personal vehicle for use in official County business without possessing a valid State Driver's License, or when it has been determined, based on evaluation of driving history and records (from here on out referred to as a driver's abstract), that they pose a liability to the County if allowed to drive on County business.

10.5.1 Obtaining a Driver's Abstract

Prior to hiring, candidates expected to drive on behalf of the County must be required to provide a copy of their abstract as a condition of their employment offer.

The County reserves the right to verify the status of an employee's driver's license with the Department of Licensing at any time throughout the employee's term of employment. Any request for a driving abstract to determine an employee's willingness to drive in a safe and legal manner, which is made by an Elected Official or Department Director, is allowed under this policy so long as driving is an essential function of that employee's job. Employees approved to drive for County business must immediately inform their supervisor of any changes that may affect their legal or physical ability to drive, or their continued insurability. Failure to promptly report such changes may result in disciplinary action up to and including termination.

To obtain a driver's abstract for someone who is currently employed by Lewis County, elected / directors will need to send a signed Driver Record Request form to the Department of Licensing (DOL) for processing. Employees shall sign a consent form for the release of driving abstracts. Ultimate refusal to sign the consent form will be cause for termination. To expedite the receipt of a driver's abstract, an employee may request a copy of their driver's abstract directly from the DOL, the cost of which shall be reimbursed by their Department / Office.

10.5.2 Evaluating Driver's Abstracts

The evaluation is intended to identify all events that have resulted in a traffic citation/incident and how those events may affect the ability to safely drive for the County, or if they pose a risk to the County if they continue to drive on the County's behalf. The County monitors driving records as a component of loss prevention and risk management.

Circumstances which may result in loss of authorization to drive a County vehicle or drive on behalf of County business include, but are not limited to:

- Felony or criminal traffic violations within the last five years.
- More than two moving infractions within the last three years.
- Considered unfit to drive for health reasons.
- Determined to have operated a vehicle while impaired by drugs or alcohol (including unauthorized prescription drugs).

- Deemed to be “accident prone” or being involved in three or more accidents in a period of two years.
- History of failure to follow traffic regulations or willfully disobeying County policy or procedures relating to the use of motor vehicles.

Additionally, any of the above criteria may disqualify an applicant from consideration if driving is an essential function of the job they have applied for. Employees who are charged with a violation, which causes them to reach the above standards, may be immediately suspended from driving on behalf of the County until disposition of the charge. Loss of ability to drive due to suspension or revocation of a driver’s license, or County permission due to violation of this policy, is grounds for dismissal when driving is an essential job function. Dismissal from employment under such circumstances shall be the sole discretion of the County and may be based on the employee’s inability to perform essential job functions. Employees required to drive on County business shall notify their direct supervisor of any change in license status, and all traffic violations, regardless of whether they occurred while operating a vehicle on behalf of the County.

10.5.3 – Considerations

Persons with a questionable driving record may be able to receive training and be coached to become a better driver. Electeds / Directors should consider the applicability of the individual’s past violations to the job duties, the frequency of driving and the types of vehicles the employee will be driving.

10.6 – Crash Packets

To ensure that employees will have access to all the documents they need in the event they are involved in a vehicle accident, Risk Management has created “Crash Packets”. Crash Packets must include the following documents:

- WCRP Vehicle Accident Checklist.
- WCRP Certificate of Membership.
- Contact information for the Safety Officer.
- Contact information for the Risk Management Office.
- Contact information for Risk Management After-Hours.
- Contact information for Fleet Services.

All County owned vehicles are required to carry a Crash Packet in the glove box. Employees who regularly drive their personal vehicles on behalf of the County are encouraged to carry a Crash Packet with them in their vehicle in case of incident.

Crash Packets should be inspected at least once yearly by a supervisor or manager of the location the vehicle is primarily parked at to ensure all the information provided within is still up to date. Additionally, if an incident occurs in which one of the documents within the Crash Packet was used, supervisors must ensure that the document is replaced prior to the vehicle being used for County business again. Risk Management can assist with Crash Packet inspections upon request. All documentation required for the Crash Packets is available on the intranet.

11.0 – Utility Vehicle Safety

Utility vehicles may only be used for official business by authorized utility vehicle drivers associated with a County department. Utility vehicles may not be used for personal business. When operated on a city or county roadway, knowledge and compliance with applicable laws, rules, regulations and policies are the responsibility of the driver. Noncompliance may result in a citation and/or suspension of utility use privileges.

The purpose of this policy is to:

- Define who may operate a utility vehicle on behalf of the County
- Identify authorization requirements for utility vehicle drivers.
- Establish procedures and practices that promote safe operations
- Provide for property loss prevention.
- Promote the safety of employees and the public.

11.1 – Definitions

Utility Vehicle is a four wheeled motorized vehicle that transports people, equipment or supplies off or on a roadway. Examples of utility vehicles include low speed vehicles such as golf carts, Cushman Vehicles, all-terrain vehicles (ATVs), mules and neighborhood electric vehicles (NECs).

Authorized Utility Vehicle Driver is an elected official, employee or volunteer that:

- Is at least 18 years of age
- Possesses a valid state driver's license
- Has at least one year of automobile driving experience
- Has completed utility vehicle training
- Has knowledge of and complies with applicable state laws, rules and regulations
- Has read and understood this policy

11.2 – Responsibilities

11.2.1 – Supervisors are responsible for:

- Ensuring utility vehicle training is satisfactorily completed.
- Providing for annual maintenance and service of utility vehicles used within their department.
- Ensuring that all operators of utility vehicles maintain compliance with state laws, rules and regulations.
- Ensuring employees under their leadership have read and understood this policy and the expectations of said employees here within.
- Addressing enforcement and violations of this policy.

11.2.2 – Authorized Utility Vehicle Drivers are responsible for:

- Completing utility vehicle training prior to operating a utility vehicle.
- Operating utility vehicles in compliance with any state laws, rules or regulations.
- Operating utility vehicles in accordance with this policy.
- Reporting any safety concerns or vehicle defects to their direct supervisor.

11.3 – Utility Vehicle Operational Standards

Anyone operating a utility vehicle must be confirmed authorized to do so and meet the requirements for authorization laid out within this policy. Additionally, authorized drivers must comply with the following operational standards:

- Drivers must be trained prior to operating a utility vehicle.
- Drivers must yield to pedestrians at all times.
- Utility vehicles are to be operated at speeds no greater than 10 MPH, or as safety concerns demand.
- The terrain, weather conditions, vehicular traffic and existing pedestrians should always be considered prior to driving a utility vehicle, as these conditions may affect the ability to operate the vehicle safely.
- Drivers will stop at all “blind intersections” and then proceed with caution.
- Use of cell phones and headphones is prohibited while operating a utility vehicle.
- Utility vehicles shall not be operated in a way that endangers the operator, passengers, pedestrians, or property.
- The number of passengers and load capacity shall not exceed the manufacturer’s rated limits. All passengers must be in seats designed for such use and no passengers are allowed to be transported in the truck beds or on the sides of vehicles.
- If seat belts are available, they must be worn by the driver and passengers at all times.
- Great care should be used when operating a utility vehicle on non-improved surfaces to avoid loss of control and/or rollovers. Special care should be taken when on steep inclines or declines.
- When parked, utility vehicles shall not block any entrance to buildings, stairways, ramps, reserved parking, fire lanes, fire equipment or thoroughfares.
- Keys should not be left in an unattended utility vehicle.
- Operators must reduce speed to match other users on all streets, sidewalks and paths. In crowded pedestrian areas, operators must proceed at a slow walking pace.
- Knowledge and compliance with applicable state laws, rules, regulations and policies are the responsibility of the driver and noncompliance may result in suspension of user privileges.

11.4 – Privately Owned Utility Vehicles

Privately owned utility vehicles may not be operated for county-related business or purposes without prior written approval of the sponsoring County department. Scenarios in which privately owned utility vehicles use may be authorized include but are not limited to: fair and events preparation, emergency situations. Contractors, vendors and/or personally owned utility vehicle owners must indemnify and hold the County harmless for liability associated with the utility vehicle's use and provide a copy of the required liability insurance as part of the approval process.

Drivers of privately owned utility vehicles, authorized for County business use, must sign an Acknowledgement Form stipulating that they have reviewed this policy, the Incident Reporting and Investigation Policy, indemnify and hold the County harmless for liability associated with its use, have provided the required insurance documentation and have satisfactorily completed training.

Section 12.0 – Powered Industrial Trucks (PIT)

Powered Industrial Trucks (PITs) operated by Lewis County employees must meet the applicable requirements of design, construction, and stability. Lewis County will ensure that all PITs are inspected, maintained and operated in accordance with WAC Chapter 296-863 as well as the manufacturer's recommendations and specifics.

12.1 – Definitions

- *Authorized Person.* A person who has been designated to perform maintenance on a PIT.
- *Powered Industrial Truck.* A mobile, power-driven vehicle used to carry, push, pull, lift, stack, or tier material. Examples include, but are not limited to fork trucks, forklifts, tractors, platform lift trucks, scissor lifts and motorized hand trucks.

12.2 – Equipment Requirements

Any PIT owned or operated by the County shall meet American National Standards Institute (ANSI) b56.1-1993 Safety Standards as outlined in WAC 296-863-20005. All PITs shall have legible nameplates installed by the manufacturer which contain at least the following:

- Model and serial number.
- Approximate weight of the PIT.
- Certification that the manufacturer has met the mandatory requirements of ANSI B56.1 Safety Standards.
- Type designation to show the PIT meets the applicable requirements of a nationally recognized testing laboratory.

If the PIT has front-end attachments, including forklift extensions, they must also be marked to identify the attachment, the approximate combined weight of the PIT and attachment, and the maximum capacity of the PIT with attachments at their highest elevation and the load laterally centered.

12.3 – Maintenance and Inspection

PITs should be kept in safe working condition through regular maintenance and inspection. Any PIT that is not in safe operating condition shall be immediately removed from service and may not be returned until the cause of the problem has been eliminated. Inspections of PITs should be completed according to the manufacturer's instructions. Inspections must be completed daily prior to being put into service.

Repairs of PITs shall only be completed by an authorized person. Replacement parts must be equivalent to the parts used in the original design. All repairs shall be completed in accordance with the requirements outlined in WAC 296-863-30015 through WAC 296-863-30040. PITs should always be kept clean and free of excess lint, oil and grease.

12.4 – Training

Prior to the use of any PIT, County employees must complete the required training on safe and proper operation. Training shall be completed by certified instructors, such as the Safety Officer. Certified instructors must demonstrate the knowledge, training and experience in powered industrial trucks in order to evaluate trainees and their competence efficiently. Operator certification will be awarded to those employees who complete the following requirements:

- Demonstrated competency
- Supervised practice
- Written evaluation (administered by a certified instructor)
- Practical evaluation (hands-on driving evaluation with a certified instructor)

In addition to the practical evaluation during initial training, operators of PITs should have their performance evaluated by a supervisor or certified instructor after each refresher training and at least once every three years.

Refresher training including an evaluation must be provided whenever:

- An employee is involved in an accident or near-miss incident while operating a PIT.
- An employee is seen operating PIT in an unsafe manner.
- An evaluation shows an employee is not operating the PIT safely.
- An employee has been assigned to operate a different or modified PIT.
- Conditions in the workplace that could affect safe operation of the PIT

12.5 – Documentation

Departments must maintain records that each of their PIT operator employees have been evaluated and trained as required by WAC Chapter 296-863. These records must include the name of the operator, the date(s) of training, the date(s) of evaluation, and the name of the person administering training and evaluations.

Section 13 – Lock Out Tag Out (LOTO) Program

Employees can be seriously or even fatally injured if machinery they service or maintain unexpectedly energizes, starts up, or releases stored energy. The Occupational Safety and Health Administration (OSHA) has developed a standard on the Control of Hazardous Energy, known as Lockout-Tag-Out (LOTO). The standard addresses practices and procedures necessary to disable machinery and prevent the release of potentially hazardous energy while maintenance or servicing activities are performed.

13.1 – Definitions

- *Affected Employee:* An employee who is required to operate, use, or be in the area where a machine or equipment could be locked or tagged out for service or maintenance.
- *Authorized employee:* An employee who locks or tags out a machine or equipment to do service or maintenance.
- *Can be locked out:* An energy-isolating device that can be locked in the “off” or “safe” position.
- *Energy-isolating device:* A mechanical device that physically prevents transmitting or releasing energy. This includes but is not limited to:
 - Manually operated electrical circuit breakers
 - Disconnect switches
 - Manually operated switches that disconnect the conductors of a circuit from all ungrounded supply conductors if no pole of the switch can be operated independently.
 - Line valves.
 - Blocks.
 - Similar devices used to block or isolate energy.
- *Lockout:* Placing a lockout device on an energy-isolating device using an established procedure to make sure the machine or equipment cannot be operated until the lockout device is removed.
- *Lockout Device:* A device that uses a positive means, such as key or combination lock, to hold an energy-isolating device in the “safe” or “off” position.
- *Tagout:* Placing a tagout device on an energy-isolating device using an established procedure to indicate that the energy-isolating device and the machine or equipment being controlled may not be operated until the tagout device is removed.
- *Tagout Device:* A prominent warning device, such as a tag and means of attachment. It can be securely fastened to an energy-isolating device to indicate that the energy-isolating device and the machine or equipment being controlled may not be operated until the tagout device is removed.

13.2 – Policy

Lewis County has established the following written program for the utilization of procedures for affixing appropriate lockout devices or tags to disable machines or equipment before any

servicing or maintenance is performed where the unexpected energizing, start up, or release of stored energy could occur and cause injury to employees. This program is intended to meet all the requirements outlined in WAC Chapter 296-803.

Any employee who does not follow this lockout/tagout program may be subject to disciplinary action found in the *Lewis County Employees Handbook* and in accordance with current collective bargaining agreements. Such action will be considered a serious safety violation.

13.3 – Responsibilities

13.3.1 – Departments are responsible for:

- Evaluating areas under their administrative control and determining whether there are processes or equipment that have the need for LOTO procedures.
- Adopting and implementing the contents of this LOTO program when the need for LOTO is identified.
- Providing the necessary training, understanding and equipment to their employees to successfully comply with the LOTO program.
- Developing and maintaining current equipment-specific LOTO procedures applicable to their operations.

13.3.2 –Managers and Supervisors:

- Determining situations that require the presence of LOTO devices and procedures.
- Ensuring that all employees are properly trained in LOTO procedures.
- Identifying which employees are required to participate in the LOTO program.
- Ensuring proper LOTO devices are available to employees.
- Ensuring that the provisions of the program are followed.

13.3.3 – Employees are responsible for:

- Observing all practices and procedures contained within the LOTO Program.
- Understanding the proper procedures for energy control and other general safety practices.
- Attending designated training sessions.
- Reporting hazardous or unsafe conditions to their direct supervisor or a Risk Management Representative.
- Complying with the restrictions and limitations imposed upon them during the use of lockout.
- Performing the lockout in accordance with this procedure.
- Upon observing a machine or piece of equipment which is locked out for service or maintenance employees must not attempt to start, energize, or use that machine or equipment.

13.3.4 – Risk Management is responsible for:

- Assisting with the development of department-specific LOTO procedures upon request.
- Receiving and investigating any reports of hazardous or unsafe conditions.
- Reviewing this program annually to determine if revisions are needed.
- Ensuring employees receive updated training if any changes to this program are made after the annual review.

13.4 – Standard Operating Procedures

Standard Operating Procedures (SOPs) describe the method(s) that will be used to complete a task or operation. Departments with the need for LOTO procedures must develop equipment and department specific SOPs in writing to complete their LOTO Program. Departments should include this policy as a part of their department-specific program. Department LOTO SOPs must include the following:

- Training procedures for authorized and affected employees.
- Identification of potentially hazardous energy associated with equipment, the energy source and the means of isolating that energy from equipment or machinery.
- Development of specific procedures for all machinery and equipment that will require LOTO within the department / areas of operation.
- Proper procedures for the restoration of equipment to power after service and maintenance has been performed.
- Steps indicating the safe removal and transfer of LOTO devices and who will be responsible for these steps.
- Processes which ensure all outside contractors comply with the LOTO standards.
- Periodic review of the department's LOTO program to ensure accuracy and compliance.

13.5 – Exemptions

Work on cord and plug connected equipment for which exposure to the hazards of unexpected energizing or start-up of the equipment is controlled by the unplugging of the equipment from the energy source, where the plug is under the exclusive control of the employee performing service or maintenance, will be excluded from this procedure.

“Live work” operations involving transmission and distribution systems for substances such as gas, steam, water or petroleum products when they are performed on pressurized pipelines will be excluded from the procedure provided that:

- Continuity of service is essential
- Shutdown of the systems is impractical
- Documentation procedures are followed, and special equipment is used which will provide proven protection for employees

Electronic testing, diagnostic testing and adjustments that do not place an employee in a point of operation will be excluded from this procedure.

13.6 – Training

LOTO training will be conducted for all employees who are required to perform work on any equipment as referenced in this program once every three years. The training will address all components and procedures of this program. It will include methods to ensure employees understand the purpose and function of the program, that they can recognize applicable lockout/tagout situations, and that they have acquired the knowledge and skills required for applying, using, and removing the locks and tags.

Additionally, retraining shall be provided for all employees whenever there is a change in job assignments, change in machines, when a new hazard is presented or when there is a change in energy control procedures. Retraining shall also be conducted when the department has a reason to believe that there are deviations from or inadequacies in the employee's knowledge or use of the energy control procedures.

In addition to training on general LOTO procedures, authorized employees should receive training on ensuring "zero energy state" which is a point at which the equipment has been safely isolated from any chances of re-energizing or release of internal contained energy. *An Authorized Employee Audit Form* is available on the employee intranet, under the Risk page.

13.7 – LOTO Devices

LOTO Equipment consists of locks, chains, tags, hasps and other hardware used to prevent the operation of equipment which is being serviced or maintained. Lockout devices are to be used whenever possible to control potential energy by keeping equipment in an "off" or "safe" position. Tags should be used in conjunction with lockout devices to warn against operation.

Potential energy sources can include:

- Electrical
- Pneumatic
- Hydraulic
- Water
- Gas
- Chemical / Coolant
- Steam
- Mechanical

Regardless of the energy source type, all LOTO devices must meet the following minimum criteria:

- Must be of durable construction and capable of withstanding the conditions in which they are placed.
 - Must be identified as such and must only be used for the control of hazardous energy.
 - Must identify the individual applying the device.
 - Must not be bypassed, ignored or otherwise defeated.
 - Should be standardized by department in color, size shape and format.
 - Should only be removed by the authorized employee who originally attached the device.
- If an alternative employee must remove the device for any reason, the guidelines outlined

in section 13.9.1 – *Removal of Another Person's LOTO Device* must be followed, and a *Removal of Another Person's Device* form must be completed.

13.7.1 – Use of Tags

Tags must be affixed as closely as possible to the isolation devices, making them immediately obvious to anyone attempting to restart the equipment. Additional control measures must be taken to reinforce the tagout device to prevent accident removal. Tags must be legible and understandable by all employees and must contain warning signs against energizing the equipment. Example language includes but is not limited to: DO NOT START, DO NOT OPEN, DO NOT CLOSE, DO NOT ENERGIZE, DO NOT OPERATE.

Tags may only be used alone when equipment cannot physically accept a lockout device. In these cases, all other procedures consistent with the LOTO program must be followed.

13.8 – LOTO Sequence

Before service and/or maintenance activities begin, the following procedures must be implemented, *in this order*, when locking or tagging out equipment:

1. Prepare for shutdown by evaluating the equipment / machine and identifying all potential energy sources and the means for controlling them. The form *Energy Control Procedures* should be used to document this process. This form is available on the employee intranet under the Risk Page.
2. Notify all affected employees in the work area.
3. Shut down the machine or equipment using the normal shut-down procedures. When equipment is properly shut down attach a tag which states “DANGER, DO NOT OPERATE,” or similarly affective language, to the power switch.
4. Disconnect or isolate the machine from the energy source(s) (e.g. main switch, circuit breaker, flow/control valve). The equipment will then be de-energized and isolated from any hazardous energy sources.
5. Lockout the energy isolating device(s) with assigned individual lock(s) and attach tag(s), (stating reason for the lock out condition). If more than one person is exposed to hazard or is working on the machine or equipment, each person must attach their individual lock. Only the person who attaches the lock is authorized to remove their lock.
6. Dissipate or restrain any stored or residual energy (such as that in capacitors, springs, elevated machine members, rotating flywheels hydraulic systems, and air, gas, steam or water pressure) by such actions as grounding, repositioning, blocking, bleeding down, etc.
7. Ensure that the machine or equipment is disconnected from the energy source(s) by first checking that no persons are exposed, then verify the machine or equipment is isolated by operating the push/on button or other normal operating control(s) or by testing to make certain the machine or equipment will not operate. Return operating controls to neutral or off position after verifying the isolation. For **any** electrical work, voltage checks will be

made of any circuit elements and electrical parts on which work is to be performed and any exposed adjacent parts.

8. The machine or equipment is now locked out, and servicing or maintenance may proceed.

13.8.1 – Group LOTO

Group lockout should be performed when work is being done on equipment by more than one individual. Each department should develop a process for group LOTO. This information should be included in the *Energy Control Procedures* form. Group LOTO can use a lockout device that accepts multiple locks, or a group box that stores all keys and is only opened by one authorized individual. A group representative should be selected to supervise the LOTO procedure. They will be responsible for maintaining the group lockout box or affixing the group lockout device. The representative will also oversee the entire LOTO operation and monitor the process to ensure it is performed in accordance with applicable regulatory requirements.

13.8.2 – Shift Changes

At times, equipment maintenance will extend beyond one work shift, so procedure must be in place to transfer control of LOTO procedures and equipment to the arriving shift. This is done by allowing the arriving employees to apply their LOTO devices prior to the outgoing employee removing their devices. The responsibility for this occurring in a seamless fashion is held by all departing and arriving shift supervisors involved with the project. These supervisors will be required to oversee the transfer of LOTO devices and ensure that energy control is maintained throughout the transfer.

13.8.3 – Working With Contractors

When outside servicing personnel are to be engaged in activities regarding LOTO, the onsite vendor will follow Lewis County's LOTO policy and department procedures **or** their company's policy and procedures, whichever is more stringent in management. The department or office responsible for hiring the contractor shall also be responsible for confirming that contractors follow this or their own more stringent policy. Risk Management may assist with confirmation upon request.

13.8.4 – Testing Equipment

If an employee must re-energize equipment during service/maintenance and it requires temporary removal of the LOTO devices, follow the sequence below:

1. Clear all tools and materials from equipment/machinery.
2. Remove all employees from the equipment area.
3. Remove LOTO devices.
4. Energize and proceed with service/maintenance.
5. De-energize and reapply LOTO devices.

13.9 – Removal of LOTO Devices

Each LOTO device must be removed from each energy isolating device by the employee who applied it. Removal of the device will be accomplished by the following steps:

1. Ensure that the equipment is operational and all tools are removed, and safeguards are put back in place.
2. Ensure all employees are clear of the equipment.
3. Employees who placed the LOTO device will remove the LOTO device.
4. Re-energize equipment.
5. Notify surrounding employees that service/maintenance has been completed and the machine/equipment is ready for use.

13.9.1 – Removal of Another Person's LOTO Device

When the authorized employee who applied the LOTO device is not available to remove it, the device may be removed under the direction of a supervisor, provided they can demonstrate that the specific procedure of device removal provides the same degree of safety as removal by the authorized employee who applied it. This procedure must include the following elements:

1. Verify the authorized employee is not at the facility.
2. Notify the employee's supervisor of the situation.
3. Ensure that all efforts are made to inform the authorized employee that their LOTO device must be removed.
4. If the authorized employee is unable to return to work, the department manager (or designee) may use bolt cutters to remove the lock.
5. Ensure the authorized employee has knowledge of the removal **before** they return to work.
6. All such actions must be recorded on the *Removal of Another Person's LOTO Device* form, located on the employee intranet under the Risk page.

14.0 – Chemical Hazard Communication

Lewis County has developed a written chemical hazard communication program to ensure all hazardous chemicals used within County work locations are identified and evaluated. All information concerning chemical hazards will be communicated to Lewis County employees to reduce or eliminate chemical exposures in the workplace. This program encompasses all chemical hazards that exist in Lewis County in which an employee may be exposed under normal conditions of use, or in a foreseeable emergency.

14.1 – Definitions

- *Hazardous Chemical* Any chemical which is classified as a physical hazard or a health hazard, a simple asphyxiant, combustible dust, pyrophoric gas, or hazard not otherwise classified.

- *Safety Data Sheet (SDS)* A written or printed material concerning a hazardous chemical that is prepared in accordance with WAC 296-901-14014.

14.2 – Chemical Inventory

Departments / Offices shall maintain a list of all hazardous chemicals used or stored for any process. A copy of the hazardous chemical list will be posted with the SDS binder at the Office / Department's primary work location. Hazardous chemical lists will be updated whenever new chemicals are introduced to the work area. The list must be available for inspection by management, employees, employee representatives, and representatives from the Department of Safety and Health (DOSH). Each Office / Department will conduct an annual review and inventory of all hazardous chemicals used or stored in their work areas. The review and inventory must include:

- Identification of all department work areas where hazardous chemicals are authorized for use or storage.
- Confirmation that the usage of hazardous chemicals within the work area is still warranted.
- Ensuring no hazardous chemicals stored in the work area are expired.
- Review of hazardous chemical storage requirements to ensure work areas are compliant with those requirements.
- Identifying jobs, processes and procedures that might expose the public to hazardous chemicals.
- A review of the hazardous chemical list, which should have the date of the review listed at the top of the page.

14.3 – Safety Data Sheets

Departments / Offices must have a safety data sheet (SDS) in the workplace for each hazardous chemical which they use. The Department / Office responsible for preparing the safety data sheet must ensure that the information provided accurately reflects the scientific evidence used in making the hazard classification. If a Department / Office becomes newly aware of any significant information regarding the hazards of a chemical, or ways to protect against the hazards, this new information must be added to the safety data sheet within three months.

The Department / Office must maintain copies of the required safety data sheets for each hazardous chemical and must ensure that they are readily accessible during each work shift to employees when they are in their work area(s).

Where employees must travel between workplaces during a work shift, i.e., their work is carried out at more than one geographical location, the safety data sheets may be kept at the primary workplace facility. In this situation, the department must ensure that employees can immediately obtain the required information in an emergency.

Safety data sheets must also be made readily available, upon request, to designated representatives, and DOSH in accordance with the requirements of WAC 296-901-14010.

Safety Data Sheets should include the following sections:

- Identification
- Hazard(s) Identification
- Composition/Information of Ingredients
- First-aid Measures
- Fire-fighting Measures
- Accidental Release Measures
- Handling and Storage
- Exposure Controls/Personal Protection
- Physical and Chemical Properties
- Stability and Reactivity
- Toxicological Information
- Ecological Information
- Transport Information
- Regulatory Information
- Other Information Including Date of Preparation or Last Revision

If no relevant information is found for any given subheading within a section, the SDS must clearly indicate that no applicable information is available. The SDS should be sufficient to meet all the requirements outlined in WAC 296-901-14014 and WAC 296-901-14028.

Safety Data Sheets should be stored in a clearly labeled three ring binder. If more than one binder is present, they should be marked and divided alphabetically. A copy of this policy should be included in the binder. Safety Data Sheets should be provided in English, and in additional languages upon request. The Department of Labor and Industries (LNI) is available to assist with the translation of hazard communications materials, including safety data sheets, upon written request. All Safety Data Sheets, including those no longer in use, should be archived indefinitely.

14.4 – Container Labeling

Chemicals in use by Lewis County employees or contractors employed by Lewis County will be in properly marked containers. Markings and placards must be maintained in a manner which ensures they are readily visible. Each container must have appropriate hazard warnings, words, pictures, symbols, names, manufacturers or a combination thereof to provide information about the chemical's specific health or physical hazards.

All labels, markings, pictures or symbols must be legible and in English. Additional languages shall be added if requested.

14.4.1 – Transfer of Chemicals to a Different Container

Chemicals will not be transferred to another container unless the SDS label is referenced to ensure there will be no adverse reaction to the new container material. In no case will a chemical be transferred into a new container without proper labeling.

14.4.2 – Marking of Stationary Process Containers

Containers may be marked by signs, placards, process sheets or operating instructions. Safety data sheets or other chemical information that is required by this policy must be readily accessible to employees.

14.5 – Training

All Lewis County employees shall receive a basic overview of Hazard Communications Training during their New Hire Safety Orientation, presented by Risk Management. Employees who are assigned to Offices / Departments which work with hazardous chemicals shall receive department-specific training from department leadership. This training shall be completed prior to their initial assignment to work with hazardous chemicals. Risk Management shall assist with training and training resources upon request. Employees must be retrained whenever a new hazardous chemical or process is introduced to their work or work area.

14.6 – Non-routine Tasks

Some hazardous chemicals are used infrequently or only during specific jobs or processes. Each Office / Department, in coordination with Risk Management, will create a written policy or procedure for each non-routine task or process involving the use of hazardous chemicals. At a minimum, the policy or procedure will contain the following information:

- Title of the process or procedure.
- The type and name of any hazardous chemical to be used.
- Specific Personal Protective Equipment (PPE) to be worn while using hazardous chemicals.
- Any emergency policies or procedures in effect.

All employees must be adequately trained in the process, procedure and equipment prior to authorization of hazardous chemical use. There must be an SDS available at the primary workplace for each hazardous chemical in use.

14.7 – Hazardous Chemicals Used by Contractors

Each Office / Department shall inform all contractors about the hazardous chemicals used at all worksites where contractor employees may be exposed. The contractor or their representative will be advised of at least the following:

- The type and name of the hazardous chemical in use.
- The PPE required to be used by the contractor employee.
- Emergency policies and procedures.
- The location of the hazardous chemicals and the SDS sheets for each.

The Department / Office must obtain a list of the hazardous chemicals that the contractor intends to bring to the worksite. Each Department / Office is responsible for obtaining current Safety Data Sheets for any hazardous chemicals before they are used on a Lewis County job site. An SDS shall be sent to the Elected or Director for approval on any questionable hazardous

chemical that a contractor intends to bring to a County worksite, prior to work beginning. Risk Management will assist with the review and approval process for questionable hazardous chemicals upon request.

Section 15 – Confined Spaces Program

This policy is intended to establish minimum standards and procedures for the adequate protection of employees and other people who may be required to enter confined spaces. It is the responsibility of the operating departments to develop and implement a Confined Spaces Program which is specific to their department.

15.1 – Definitions

- *Confined Space*. A space that is all the following:
 - Large enough and arranged so an employee could fully enter space and work.
 - Has limited or restricted entry or exit.
 - Not designed for permanent human occupancy.
- *Hazardous Atmosphere*. An atmosphere that may expose employees to the risk of death, incapacitation, impair their ability to self-rescue (escape unaided from a permit-required confined space), injury, or acute illness caused by one or more of the following:
 - Flammable gas, vapor, or mist in excess of ten percent of its lower flammable limit (LFL) or lower explosive limit (LEL).
 - Airborne combustible dust at a concentration that meets or exceeds its LFL. The concentration may be approximated as a condition in which dust obscures vision of 5 feet or less.
 - Atmospheric oxygen concentration below 19.5 percent or above 23.5 percent.
 - Atmospheric concentration of any substance which may exceed a permissible exposure limit (PEL).
- *Permit-Required Confined Space*. Means a confined space that has one or more of the following characteristics:
 - Contains or has the potential to contain a hazardous atmosphere.
 - Contains a material that has the potential for engulfing an entrant.
 - Has an internal configuration such that an entrant could be trapped or asphyxiated by inwardly converging walls or by a floor which slopes downward and tapers to a smaller cross-section.
 - Contains any other recognized safety or health hazard.
- *Non-Permit Required Confined Space*. A space that does NOT contain actual hazards or potential hazards capable of causing death or serious physical harm.

15.2 – Responsibilities

It shall be the responsibility of the operating department to meet the minimum safety standards, procedures, training and planning requirements for entry into confined spaces, as outlined in WAC Chapter 296-809. All Lewis County Offices, Departments, and employees shall be

responsible for compliance with these procedures. Risk Management shall assist departments with assessments, procedure drafting and enforcement, at the department's request. In the event Lewis County contracts with another employer to enter one of the County's confined spaces, the County shall follow all state and federal requirements.

15.3– Permit Required Confined Space Program

Operating departments shall develop a written permit-required program specific to their department's operations and duties. The department's permit-required program must include the following:

- Documentation of permit entry procedures
- Designation of employees that have active roles, including attendants, competent persons, entrants, entry supervisors, rescuers, program administrators, or those who test or monitor the atmosphere in a permit required space.
- Identification of each designated employee's duties.
- Training employees on their designated roles.
- How to identify and evaluate hazards.
- Use and maintenance of equipment.
- How to prevent unauthorized entry.
- How to coordinate entry with another employer.
- How to rescue entrants.
- If you intend to enter using alternative methods for entry, the procedures must address all measures used before entry to isolate and eliminate hazards from the space and control potential atmospheric hazards.

Affected employees and their authorized representatives must be consulted when developing all aspects of the program. The program must be made available to employees and their authorized representatives whenever requested. The program must be updated as necessary when deficiencies have been identified. The department must have an administrator who has overall responsibility for the program and has sufficient training or experience with permit-required confined space entry to oversee program development, implementation and evaluations.

15.4 – Equipment Considerations

Equipment used for confined space entry shall be determined by the individual department's specific confined space hazards and needs and in accordance with all state and federal guidelines.

15.5 – Employee Training

Offices and departments that are required to establish confined space written programs will train employees on their programs. Training for employees must be sufficient enough to meet the requirements outlined in WAC 296-809-40002.

Section 16 – Fall Protection Program

This policy is intended to establish minimum standards and procedures for the adequate protection of employees and other people who may be required to work in areas which expose them to fall hazards. It is the responsibility of the operating department / office to develop and implement a Fall Protection Program which is specific to their department whenever employees are exposed to a fall hazard of ten feet or greater. Departments / offices whose employees shall be exposed to fall hazards of four feet or more, but less than ten feet, shall comply with the safety regulations outlined in WAC 296-880-20005.

Regardless of height, offices / departments must:

- Guard open-sided floors, walkways, platforms or runways above or adjacent to dangerous equipment, such as dip tanks and material handling equipment and similar hazards with a standard guardrail system.
- Guard holes into which an employee can trip, step into, or step through by a cover of standard strength and construction or a standard guardrail system.
- Protect employees from falling into or onto impalement hazards.

16.1 – Definitions

- *Competent Person.* An individual knowledgeable of fall protection equipment, including the manufacturer's recommendations and instructions for the proper use, inspection, and maintenance; and who is capable of identifying existing and potential fall hazards; and who has the authority to take prompt corrective action to eliminate those hazards.
- *Fall Arrest System.* A fall protection system that will arrest a fall from elevation. Fall arrest systems include personal fall arrest systems that are worn by the user, catch platforms and safety nets.
- *Fall Restraint System.* A system in which all necessary components function together to restrain an employee from falling to a lower level. Types of fall restraint systems include standard guardrail systems or personal fall restraint systems.
- *Standard Guardrail System.* A type of fall restraint system that is a vertical barrier consisting of a top rail and midrail, and toeboard when used as falling object protection for persons who may work or pass below, that is erected along all open sides or edges of a walking/working surface, ramps, platforms, or runways.

16.2 – Fall Protection Work Plans

Each office / department shall develop and implement a written Fall Protection Work Plan including each area of the workplace where the employees are assigned and where fall hazards of ten feet or more exist. Risk Management may assist with development upon request. The fall protection work plan must:

- Identify all fall hazards in the work area.
- Describe the method of fall arrest or fall restraint to be provided.

- Describe the proper procedures for the assembly, maintenance, inspection and disassembly of the fall protection system to be used.
- Describe the method of providing overhead protection for workers who may be in or pass through the area below the work area.
- Describe the method for prompt, safe removal of injured workers.
- Be available on-site for inspection by the department.

Prior to allowing employees into areas where fall hazards of ten feet or more exist, the supervisors must ensure employees are trained and instructed on the items listed in the Fall Protection Work Plan.

16.3 – Training

Each affected employee must be trained by a competent person to know at least the following:

- The nature of fall hazards in the work area.
- When fall protection is required.
- What fall protection is required.
- The correct procedures for erecting, maintaining, assembling, disassembling and inspecting the fall protection systems to be used.
- The use and operation of fall protection systems used.
- Limitations of fall protection systems used.
- Proper care, maintenance, useful life, removal from service of devices used.

Circumstances where retraining is required include but are not limited to the following situations:

- Changes in the workplace render previous training obsolete.
- Changes in the type of fall protection systems or equipment to be used render training obsolete.
- Inadequacies in an affected employee's knowledge or use of fall protection systems or equipment indicate that the employee has not retained the requisite understanding or skill.

Training should be documented in writing. Departments / offices should obtain written confirmation that the affected employee has received and understood the required training. The documentation should include the name of the employee, the date(s) of the training, the subject(s) of the training and the signatures of the competent person who provided the training and the employee. Training documents shall be maintained in the employee file within the department / office.

17.0 – Heat-Related Illness (HRI) Prevention Program

Heat-related illness (HRI) can occur from exposure to extreme temperatures while on the job. Lewis County will ensure that all measures are taken to prevent the occurrence of HRI wherever feasible. Both temperature and humidity levels will be evaluated so that adequate controls and

procedures may be implemented to help reduce risk. Employees will be trained to recognize signs and symptoms of HRI.

17.1 – Definitions

- *Acclimatization* The body's temporary adaptation to work in heat that occurs as a person is exposed to it over a period of seven to fourteen days.
- *Drinking water* Potable water that is suitable to drink and suitably cool in temperature. Other acceptable beverages include drinking water packaged as a consumer product (i.e. bottled water), and electrolyte-replenishing beverages (i.e. sports drinks) that do not contain high amounts of sugar, caffeine, or both, such as energy drinks.
- *Engineering Controls* The use of devices to reduce exposure and aid cooling, not including wearable items. Examples include fans, misting stations and air conditioning.
- *Heat-related Illness (HRI)* A serious medical condition resulting from the body's inability to cope with a particular heat load and includes but is not limited to heat cramps, heat exhaustion, heat syncope and heat stroke.
- *Risk Factors for Heat-Related Illness* Conditions that increase susceptibility for heat-related illness including:
 - environmental factors
 - workload and duration
 - personal protective equipment and clothing
 - personal factors such as age, medications, physical fitness and pregnancy
- *Shade* A blockage of direct sunlight. Shade may be provided by any natural or artificial means that does not expose employees to unsafe or unhealthy conditions, and that does not deter access or use.

17.2 – Responsibilities

17.2.1 – Risk Management is responsible for:

- Maintaining and updating this policy as necessary
- Providing technical assistance to supervisors and department leadership, such as assisting with the creation of procedures, as requested.
- Coordinating employee training.
- Maintaining employee training records.

17.2.2 Directors/Elected Officials are responsible for:

- Adopting this, or a similar program, which meets the requirements outlined in WAC 296-62-09013 through WAC 296-62-09560.
- Requiring all employees within their individual offices/departments to adhere to this, or a similar program.
- Providing a copy of any published policy regarding this topic to Risk Management.

17.2.3 – Supervisors / Managers are responsible for:

- Evaluating, with assistance from Risk Management as needed, HRI hazards, including temperature, relative humidity, radiant heat, degree of physical workload and clothing or PPE contribution.
- Ensuring compliance with this program.
- Providing adequate water (minimum of one quart per hour per employee) and a shaded area (canopies, truck cabins, air-conditioned vehicles, etc.) for employee rest when needed to prevent HRI.
- Relieving employees showing symptoms of HRI from duty and providing sufficient means to reduce body temperature if needed.
- Evaluating employees removed from work before allowing them to return to work.
- Ensuring medical attention is received by employees experiencing signs of serious HRI.

17.2.4 – Employees are responsible for:

- Complying with management directives for prevention of HRI.
- Drinking adequate amounts of water.
- Notifying management when symptoms of HRI emerge.
- Asking for breaks when needed to reverse possible onset of HRI.
- Attending training on assessment, prevention and treatment of HRI.
- Recognizing symptoms of HRI.
- Recognizing the following personal factors that affect susceptibility to HRI: Lack of physical fitness, age, obesity, nicotine use, lack of acclimatization, dehydration, alcohol use (including the night before), use of prescription or nonprescription diuretic drugs, chronic illness, or diarrhea.

17.3 – Heat Stress Evaluations

Each worksite shall be evaluated for temperature and humidity extremes. The National Oceanic Atmospheric Association's Heat Stress Index (HSI), which is an index of ambient temperature in association with relative humidity, will be used to determine if the HSI is greater than 100. If the HSI is greater than 100, control measures will be implemented.

Measures include:

- A work/rest regimen with an increased number of breaks.
- Starting jobs earlier in the day.
- Provisions for gaining access to shade.
- Use of air-conditioning or fans.
- Any additional methods used to cool employees off.

17.4 – High Heat Procedures

If engineering or administrative controls (such as those listed above in section 18.3) are unavailable or unable to bring employee exposure to below 90 degrees Fahrenheit, the following high heat procedures must be implemented:

- Mandatory Cool Down Periods

Air Temperature	Mandatory Amount of Cool-Down Rest
At or above 90°F	10 minutes / 2 hours
At or above 100°F	15 minutes / 1 hour

- Observe employees for signs and symptoms of heat-related illness by implementing one or more of the following: Regular communication with employees working alone, such as by radio or cellphone, mandatory buddy system or any other effective means of observation.

17.4.1 – Acclimatization

Supervisors must closely observe employees for signs and symptoms of heat-related illness, using one or more of the close observation options outlined above, for 14 days when:

- Employees are newly assigned to working at or above the applicable temperatures listed in the table above.
- An employee is returning to work at the applicable temperatures listed in the table above after an absence of seven days or more.
- During a heat wave, which is defined for this section as any day in which the predicted high temperature for the day will be at least the temperatures listed in the table above and at least 10 degrees Fahrenheit higher than the average high daily temperature the preceding 5 days.

17.5 – Responding to HRI

Lewis County is determined to prevent HRI wherever feasible, however, supervisors and employees must be able to recognize the signs and symptoms of HRI in the event one occurs. Additionally, supervisors and employees must take immediate action to reduce symptoms and prevent illness from worsening. Use the chart in section 17.5.1 to assist with identifying, treating and mitigating symptoms of HRI.

17.5.1 – Heat Related Illnesses Identification and Action

Heat-related Illness	Signs & Symptoms	Treatment	Prevention Measures
Heat Rash	-Red, itchy skin -Bumpy skin -Skin infections	-Cool skin down -Keep affected area dry -Control itching and infection with medications	-Sleep in cool quarters to allow skin to dry between heat exposures
Heat Cramps	-Muscle cramps or spasms -Grasping the affected area -Abnormal body posture	-Drink salted water or sports drinks -Rest, cool down -Massage affected muscles -Get medical evaluation if cramps persist	-Adequate salt intake with meals
Heat Exhaustion	-High pulse rate -Extreme sweating -Pale face -Insecure gait -Headache -Clammy and moist skin -Weakness -Fatigue -Dizziness	-Move to shade and loosen clothing -Initiate rapid cooling -Lay flat and elevate feet -Monitor recovery closely -Drink small amounts of water -Evaluate mental status (ask Who? Where? When? questions) -Keep at rest until urine volume indicates water balances have been restored -If no improvement call 911	-Acclimatize workers using breaking in schedule -Provide ample drinking water at all times - Take breaks frequently during work in high temperatures
Heat Stroke	-Any of the above symptoms at a greater severity -Hot, dry skin (25-50% of cases) - Altered mental status with confusion or agitation -In extreme cases heat stroke can progress to loss of consciousness or seizures -Heat stroke can be fatal	-Call 911 -Immediately remove from work -Start rapid cooling -Lay flat and elevate feet -If conscious give sips of water -Monitor airway and breathing and administer CPR if needed	-Pre-employment medical screening of workers, with selection based on health and physical fitness. -Acclimatization for 5-7 days y graded work and heat exposure -Monitoring of employees during sustained work in severe heat

17.6 – Training

Employees who work outdoors are required to attend training on Heat-Related Illnesses prior to outdoor work where heat exposure might occur and at least annually after that.

Training shall be assigned to individual employees if they have access to a County email address. Employees who do not have access to County email may receive group training provided by Risk Management. Training must be thorough enough so that employees know the following:

- Environmental factors and other work conditions that contribute to the risk of HRI.
- General awareness of personal factors that may increase susceptibility to HRI.
- The importance of removing heat-retaining PPE during all breaks.
- The importance of frequent consumption of small quantities of drinking water or other acceptable beverages.
- The concept and requirements of acclimatization.
- The importance of taking preventative cool-down rest periods
- The mandatory cool-down rest periods when temperatures are above 90 degrees Fahrenheit.
- The department's procedures for providing shade or other means of reducing body temperature.
- The department's procedures for close observation of employees for signs and symptoms of HRI.
- The importance of reporting signs or symptoms of HRI immediately.

Supervisors must be trained in all the elements outlined above and the following additional items:

- Procedures to implement the provisions of the HRI rules.
- Procedures when an employee exhibits signs or symptoms of HRI, including emergency response procedures.
- Procedures for moving employees where they can be reached by emergency medical service providers, if necessary.
- How to provide clear and precise directions to the emergency medical providers so that they can find the work site.

Training should be documented in writing and include the name of the employees who attended the training, and the date the training took place.

Section 18 – Lewis County Wildfire Smoke Response Plan

Wildfire smoke may become a health hazard for employees required to work outside. This policy is intended to give guidance to departments / offices whose employees may be exposed to wildfire smoke as a part of their work duties. Departments are required to create a wildfire smoke response plan specific to their work environment needs.

18.1 – Definitions

- *Air Quality Index (AQI)* A unitless index used by the United States Environmental Protection Agency (EPA) to communicate air quality for several pollutants. References to AQI used throughout this policy means the “NowCast AQI for PM2.5.”
- *PM2.5.* The tiny particles in wildfire smoke. Solid particles and liquid droplets suspended in air, known as particulate matter, with an aerodynamic diameter of 2.5 micrometers or smaller.
- *NowCast* The method used by the EPA and the Washington State Department of Ecology to approximate the air quality. The NowCast uses longer averages during periods of stable air quality and shorter averages when air quality is changing rapidly, such as during a wildfire. The NowCast is generally updated every hour.
- *Wildfire Smoke* Emissions from planned and unplanned fires in wildlands, wildland urban interface, agricultural operations, or adjacent developed areas. Wildfire smoke contains a complex mixture of gases and particles. Fine particulates such as PM2.5. are the primary pollutants of public and occupational concern in wildfire smoke.
- *Sensitive Groups* People with preexisting health conditions and others who are sensitive to air pollution, who are among those most likely to experience health problems from exposure to wildfire smoke.

18.2 – Applicability

This policy applies to all employees who will be assigned to work outside for one hour or more during times when the AQI number exceeds 69 in the location they will be working.

This policy does not apply to employees working in enclosed buildings or structures in which it is required that windows, doors, bays, and other exterior openings are kept closed, except when necessary to open doors to enter and exit.

18.3 – Responsibilities

It shall be the responsibility of the affected department to meet the minimum safety standards, procedures, training and planning requirements outlined in WAC Chapter 296-820. All Lewis County Offices, Departments, and employees shall be responsible for compliance with these procedures. Risk Management shall assist departments with assessments, procedure drafting and enforcement, at the department’s request.

18.4 – Department Specific Wildfire Smoke Response Plans

For departments who have employees who work outside and therefore may be exposed to AQI which meets or exceeds 69 for one hour or more, a department-specific wildfire smoke response plan must be developed. **This policy must be included in the written response plan in order for it to meet the requirements outlined in WAC 296-820-505 through 296-820-860.** In addition to this policy, the written plan must include the following elements:

- The department’s response plan for wildfire smoke including methods to protect employees from wildfire smoke.

- The importance, benefits and limitations of using a properly fitted respirator, and the risks of wearing a respirator without a medical evaluation.
- How to properly put on, use, and maintain the respirators provided by the department.
- Procedures for moving or transporting an employee to an emergency medical service provider or other appropriate level of care if necessary.
- The specific jobs and tasks within the department covered under the wildfire smoke response plan.

18.5 Air Quality Monitoring and Notification

Supervisors of affected departments / offices must monitor the NowCast via www.airnow.gov and alert their employees when AQI levels reach 69, 101, 301 and 500. Action levels will be implemented based on the NowCast AQI in the corresponding areas of the County.

Lewis County encourages employees to notify their direct supervisor of worsening air quality, availability issues of appropriate exposure control measures and respiratory protection and any symptoms that may potentially be related to wildfire smoke exposure.

18.6 – Health Effects and Adverse Symptoms of Wildfire Smoke

Although there are many hazardous chemicals in wildfire smoke, the main harmful pollutant for people who are not close to the fire is “particulate matter”, the tiny particles suspended in the air. These tiny particles can reach the deepest parts of the lungs and can be absorbed into the body. The environmental Protection Agency (EPA) has determined that particulate matter may cause or worsen cardiovascular disease, respiratory disease, cancer and can harm the nervous system.

Exposure to particulate matter in wildfire smoke can cause a wide range of symptoms including, but not limited to:

- Respiratory symptoms:
 - Coughing
 - Wheezing
 - Difficulty breathing
 - Sore throat
 - Sinus pressure
 - Shortness of breath
 - Asthma attacks
 - Runny nose
 - Sinus pain
 - Phlegm
- Cardiovascular symptoms:
 - Chest pain or discomfort
 - Fast or irregular heartbeat
 - Feeling weak, light-headed, faint or dizzy
 - Pain or discomfort in the jaw, neck or back
- Other symptoms:
 - Headache
 - Scratchy or irritated eyes
 - Fatigue or tiredness

Symptoms requiring **immediate medical attention** can include, but are not limited to:

- Symptoms that can lead to a heart attack such as:
 - Chest pain or discomfort
 - Feeling weak, light-headed, faint or dizzy
 - Pain or discomfort in the jaw, neck or back
 - Pain or discomfort in one or both arms or shoulders
 - Shortness of breath, especially if accompanied by chest discomfort
- Symptoms that may indicate a stroke:
 - Sudden numbness or weakness in the face, arm or leg, especially on one side of the body
 - Sudden confusion, trouble speaking or difficulty understanding speech
 - Sudden trouble seeing in one or both eyes
 - Sudden trouble walking, dizziness, loss of balance, or lack of coordination
 - Sudden severe headache with no known cause
- Wheezing difficulty breathing or shortness of breath
- Asthma attacks
- Nausea or vomiting
- Any symptom that is concerning or per a healthcare provider's advice

Employees may follow medical advice they have been given or seek medical attention for any symptoms they may experience that are potentially related to wildfire smoke exposure, regardless of the severity. Lewis County will not retaliate against employees seeking medical attention or following the medical advice they have been given. Lewis County encourages those employees who fall into the category of sensitive groups to take extra precautions.

Wildfire smoke is a serious work-related hazard for exposed outdoor workers. It is important to notify a supervisor immediately when an employee is experiencing symptoms of wildfire smoke exposure so that they can respond appropriately. Employees should stay alert and vigilant when outdoors during a wildfire smoke event. If employees are experiencing even minor symptoms of smoke exposure, this may be an indicator that exposure needs to be reduced, or personal protective equipment (PPE) needs to be utilized. Employees have the right to file a worker's compensation claim to have their symptoms of wildfire smoke exposure evaluated.

18.7 – Respirators

When the current AQI is at or above 101, departments requiring employees to work outside must make NIOSH approved N95 respirators available at no cost to the employees and employees should be encouraged to use those respirators.

When the AQI reaches 351 or more, departments should directly distribute NIOSH approved N95 respirators to employees (at no cost to them) and encourage employees to use them.

Department specific wildfire smoke response plans should include the location where respirators are stored. If a department chooses to use a respirator other than an N95, the department specific wildfire smoke response plan should indicate this. Regardless of type, all respirators purchased and utilized by departments must be NIOSH approved.

When working in environments where the smoke level is beyond the AQI (i.e. PM_{2.5} is 500.44 µg/m³ or more), departments are required to enroll employees in a complete respiratory protection program (including fit-tests and respirator medical evaluations) in accordance with the Washington State Respirator Standard, WAC 296-842, before working in these conditions.

18.8 – Training

Affected departments will provide all supervisors and employees with effective information and training regarding Wildfire Smoke and exposure prevention before work which exposes an employee to an AQI of 69 or greater. Documented Wildfire Smoke exposure prevention refresher training is required annually for all employees who may be assigned work outdoors for one hour or longer annually. Risk management may assist with the development of training programs upon request.