

TOWN OF



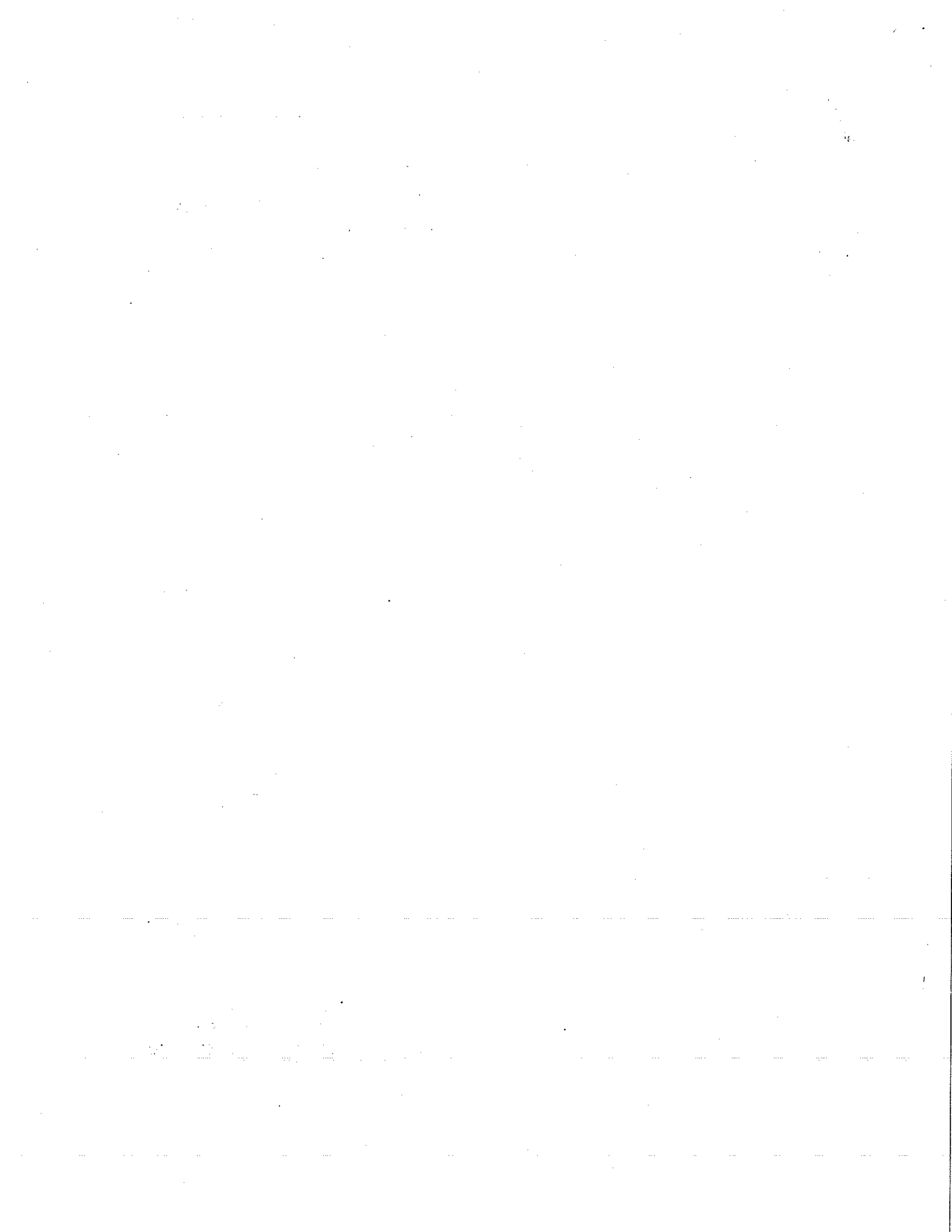
**FAIRHAVEN,
MASSACHUSETTS**

SAFETY

HANDBOOK

A STEP-BY-STEP GUIDE TO
UNDERSTANDING THE TOWN OF
FAIRHAVEN'S SAFETY PHILOSOPHY,
POLICIES AND PROCEDURES
PROMOTING A SAFETY CONSCIOUS
WORK ENVIRONMENT

SAFETY



Preface



The Town of Fairhaven recognizes that our employees provide the services for our citizens. As the most critical resource, employees will be safeguarded through training, provision of appropriate work surroundings, and procedures that foster protection of health and safety. All work conducted by Town of Fairhaven's employees will take into account the intent of this policy. No duty, no matter what its perceived result, will be deemed more important than employee health and safety.

The Town of Fairhaven is firmly committed to the safety of our employees. We will do everything possible to prevent workplace accidents and we are committed to providing a safe working environment for all employees.

We value our employees not only as employees but also as human beings critical to the success of their family, the local community, and Town of Fairhaven.

Employees are encouraged to report any unsafe work practices or safety hazards encountered on the job. All accidents/incidents (no matter how slight) are to be immediately reported to the supervisor on duty.

A key factor in implementing this policy will be the strict compliance to all applicable federal, state, local, and company policies and procedures. Failure to comply with these policies may result in disciplinary actions.

Respecting this, the Town of Fairhaven will make every reasonable effort to provide a safe and healthful workplace that is free from any recognized or known potential hazards. Additionally, Town of Fairhaven subscribes to these principles:

1. All accidents are preventable through implementation of effective Safety and Health Control policies and programs.
2. Safety and Health controls are a major part of our work every day.
3. Accident prevention is good business. It minimizes human suffering, promotes better working conditions for everyone, holds the Town of Fairhaven in higher regard with residents, and increases productivity. This is why Town of Fairhaven will comply with all safety and health regulations which apply to the course and scope of operations.
4. Management is responsible for providing the safest possible workplace for Employees. Consequently, management of the Town of Fairhaven is committed to allocating and providing all of the resources needed to promote and effectively implement this safety policy.

Preface

5. Employees are responsible for following safe work practices and Town rules, and for preventing accidents and injuries. Management will establish lines of communication to solicit and receive comments, information, suggestions and assistance from employees where safety and health are concerned.
6. Management and supervisors of the Town of Fairhaven will set an exemplary example with good attitudes and strong commitment to safety and health in the workplace. Toward this end, Management must monitor department safety and health performance, working environment and conditions to ensure that program objectives are achieved.
7. Our safety program applies to all employees and persons affected or associated in any way by the scope of this business. Everyone's goal must be to constantly improve safety awareness and to prevent accidents and injuries.

Everyone at the Town of Fairhaven must be involved and committed to safety. This must be a team effort. Together, we can prevent accidents and injuries. Together, we can keep each other safe and healthy in the work that provides our livelihood.



Michael Silvia

Walter A. Eckerman

Board of Selectmen

January 31, 2005

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Employee Safety Responsibilities



The primary responsibility of the employee's of the Town of Fairhaven is to perform his or her duties in a safe manner, in order to prevent injury to themselves and others.

As a condition of employment, employees **MUST** become familiar with, observe, and obey Town of Fairhaven's rules and established policies for health, safety, and preventing injuries while at work. Additionally, employees **MUST** learn the approved safe practices and procedures that apply to their work.

Before beginning special work or new assignments, an employee should review applicable and appropriate safety rules.

If an employee has any questions about how a task should be done safely, he or she is under instruction **NOT** to begin the task until he or she discusses the situation with his or her supervisor. Together, they will determine the safe way to do the job.

If, after discussing a safety situation with his or her supervisor, an employee still has questions or concerns, he or she is required to contact the department head or the Executive Secretary.

Employee Safety Rules

1. **Conduct:** Horseplay, 'practical jokes,' etc. are forbidden. Employees are required to work in an injury free manner displaying accepted levels of behavior. Conduct which places the employee or others at risk, or which threatens or intimidates others is forbidden.
2. **Drugs and Alcohol:** Use and/or possession of illegal drugs or alcohol on Town property or on Town time is forbidden. Reporting for work while under the influence of illegal drugs or alcohol is forbidden.
3. **Housekeeping:** The following areas must remain clear of obstructions:
 - Aisles/exits
 - Fire extinguishers and emergency equipment
 - All electrical breakers, controls, and switches
 - Eye wash/safety showers

You are responsible to keep your work area clean and safe. Clean-up several times throughout the day disposing of trash and waste in approved containers, wiping up any drips/spills immediately, and putting equipment and tools away as you are finished with them.

4. **Injury Reporting:** All work related injuries must be reported to your supervisor immediately. Failure to immediately report injuries can result in loss of Workers' Compensation benefits. After all medical appointments, resulting from a work related injury, you must contact your supervisor to discuss your progress. You must also give your supervisor any paperwork that you received at the appointment. Reporting forms are attached.
5. **Personal Protective Equipment:** Inspect PPE prior to each use. Do not use damaged PPE. You are required to maintain and keep PPE clean.
 - a) Safety Glasses – must be worn at all times in designated areas in this facility.
 - b) Hard Hats – must be worn at all times in designated areas.
 - c) Gloves – work gloves must be worn at all times when handling sharp or rough stock, welding, or performing other jobs, which could cause hand injuries. Synthetic gloves must be worn when handling chemicals.
 - d) Welding – appropriate filter lens, welding helmet, gloves, and sleeves are required for welders at all times.
 - e) Respirators – only employees trained and authorized to use respirators are allowed to do so.
 - f) Hearing Protection – is required in areas where noise exposure is more than 90dBA. (85dBA if you already have experienced a hearing loss).

Employee Safety Rules

6. **Equipment Operation:** You must specifically be trained and authorized by your supervisor to operate the following:

- Town vehicles,
- Forklifts, backhoes, loaders, etc.
- Machine and power tools,
- Paint sprayers,
- Welders, and
- Cranes/hoists.

When operating machines: do not wear loose clothing, long hair should be tied up and back, remove jewelry, and sleeves should either be rolled all the way up, or all the way down.

Never operate damaged or defective equipment. Turn the machine off and report it to your supervisor immediately.

Never tamper with, remove, or deactivate machine guards or controls designed to ensure safe operations.

Never reach into an operating machine or moving machine part.

7. **Ladders: (Excludes Fire Department)**

- Inspect all ladders prior to each use;
- Ladders must be placed on secure footing;
- Only one person is allowed on a ladder at one time;
- Never stand on the top two steps of a stepladder;
- Always maintain 3 point contact when working on ladders;
- Never reach beyond arm length when working off of a ladder; and
- Never use metal ladders when working on or around electrical equipment.

8. **Cranes/Hoists/Lifting Devices:**

- a) Inspect all cranes, hoists and lifting devices (slings, hooks, etc.) prior to each use. Never use damaged equipment.
- b) Never walk under a load suspended from a hoist or crane.
- c) Keep all personnel clear of the 'fall zone' of the crane/hoist.
- d) Know the weight of material being lifted. Never overload a crane/hoist.

Employee Safety Rules

9. **Lockout/Tagout** – prior to working on any machinery when guards are removed, every energy source (electrical, hydraulic, chemical, mechanical, etc.) must be deactivated, stored energy dissipated, and the control locked in the off (safe) position.

Never remove or tamper with a lockout performed by another employee or contractor. A lockout could consist of a lock applied to a control such as a switch, breaker, or valve. A tag containing words such as "DANGER DO NOT OPERATE" may also be used for lockout. If you see the lock, the tag, or both applied to an energy control device it means, "keep your hands off."

10. **Hazard Communication:**

- a) All chemical containers must be labeled to identify contents and hazards. Most labels use numbers to rank the hazard level in three important areas:
- FIRE** (red background color) will the material burn?
 - HEALTH** (blue background) is the material dangerous to my body?
 - REACTIVITY** (yellow background) is the material dangerously unstable?

After each hazard (Fire, Health, Reactivity) a number from 1-4 will be assigned. The numbers reflects the degree (or amount) of hazard:

- 0 Minimal
- 1 Slight
- 2 Moderate
- 3 Serious
- 4 Severe

- b) A Material Safety Data Sheet (MSDS) must be secured for all chemicals purchased or brought on site. You have a right to access MSDSs – ask your supervisor.
- c) Follow all label and MSDS instructions – including amount instructions.
- d) Do not mix chemicals unless authorized to do so.
- e) Keep all chemicals in closed containers.
- f) Store all flammable liquids in safety cabinets or safety cans. Never use flammable chemicals around ignition sources such as smokers, pilot lights, or arcing/sparking electrical equipment.

Employee Safety Rules

- g) Wear required Personal Protective Equipment and minimize contact with the chemical.
 - h) Do not eat, drink, or smoke while using chemicals. And always wash your hands after handling chemicals.
11. **Confined Space Entry** – only trained and authorized employees are permitted to enter confined spaces. If you believe that your job requires confined space entry contact your supervisor prior to undertaking the work. (Confined spaces are areas not meant for human occupancy, have limited means of entry/exit, and have electrical, chemical, thermal, atmosphere, or entrapment hazards).
12. **Emergencies:**
- a) In the event of any serious injury or fire call 911. Send someone to the facility entrance to meet the Fire Department. If in doubt, call 911.
 - b) Upon discovering a fire, alert others in immediate danger and initiate facility wide fire alarm.
 - c) When the evacuation signal is given, all employees should immediately turn off equipment, close doors, and evacuate to their designated evacuation areas. Attendance will be taken to account for all personnel. Stay together in the group until further instructions are received.
 - d) Do not attempt to fight any fire which is uncontained, too hot, too smoky, or if you are too frightened.
 - e) To use a fire extinguisher, remember PASS:
 - P = Pull (the safety pin)
 - A = Aim (at the base of the fire)
 - S = Squeeze (the lever)
 - S = Sweep (side to side)
- If you use a fire extinguisher, remember:
- Stay low,
 - Keep yourself between the fire and an exit,
 - Do not turn your back on a fire, and
 - Immediately report the use to your supervisor.

Employee Safety Rules

- d) Do not touch blood or any other bodily fluid during or following an incident. If you are trained to administer first aid, gloves and other barriers are located with the first aid equipment. If you think that you have been exposed to bodily fluid notify your supervisor immediately.

13. Town Vehicles and Driver Safety:

- a) Only employees authorized by Town of Fairhaven are permitted to operate Town of Fairhaven vehicles.
- b) No 'side trips' or personal use of Town vehicles are permitted.
- c) Seat belts/shoulder harnesses must be worn whenever the vehicle is in motion.
- d) All local and state traffic regulations and signs must be followed.
- e) No unauthorized riders (hitchhikers, etc.) are allowed.
- f) All moving violations resulting in points being assigned to your license must be reported to your supervisor.
- g) Driving while under the influence of alcohol or other drugs is forbidden.
 - Employees driving their personal vehicles on Town business must follow c through g above.

14. Electrical Safety:

- a) Never operate or tamper with the electrical main switch or breakers. You are authorized only to operate switches/disconnects on/for individual machines.
- b) Report all electrical problems and suspected problems to your supervisor.
- c) All junction boxes, control boxes, connections, and other wiring must have covers securely installed to prevent accidental contact.
- d) Inspect all plugs, cords, and portable equipment prior to use.

Employee Safety Rules

- e) Report any damaged electrical equipment to your supervisor. Only authorized personnel are permitted to make repairs.
- f) Extension cords are to be used only for temporary applications. Never stretch cords across aisles or areas where others may trip over them. Do not attach extension cords to the building or run them under rugs/mats or through walls.
- g) Any personal electrical devices must be approved by the Town of Fairhaven prior to use.

15. Lifting:

- a) If you need help moving material, ask for it.
- b) When you lift, use your leg muscles by squatting close to the load, preserving the curve in your back, spreading your feet, and lifting with your legs, keeping the load close to your body.
- c) When you turn holding an object, move your feet, do not twist.

16. **Staying Safe** - Report any unsafe conditions or situations to your supervisor. If you have suggestions on improving any aspect of safety in the facility discuss it. If you are ever unsure of how to operate a piece of equipment or complete an assignment **ask for help**. Asking for help when you are unsure reduces the chance of being injured.

These rules have been established to help you stay safe and injury free. Violation of the above rules, or conduct that does not meet minimum accepted work standards, will result in discipline, up to and including discharge.

When working at a customer location, employees are required to follow the above rules as well as all customer rules and procedures and work in a manner, which reflects positively on the town. Before operating any equipment at a customer location permission must be secured from the customer contact.

Employee Safety Rules

Protective Footwear

Purpose: To establish minimum foot protection requirements for those employees involved in job activities where such protection is normally required.

Responsibility: All employees and department heads.

Policy: *

A. Shoes such as sneakers, sandals, canvas tops, are not acceptable in the work environment and are prohibited.

B. Leather work shoes or boots with durable soles must be worn by all field personnel. This includes but is not limited to such occupations as refuse collectors, street repair, parks maintenance, firemen, policemen, mechanics, maintenance personnel, building inspectors, etc.

C. Each foreman/supervisor shall be responsible to see that proper footwear is being utilized by his/her employees.

D. Violations of these regulations shall be brought to the attention of the appropriate department head for necessary action.

*Police/Fire Department personnel (with the approval of the Chief) may wear black sneakers which meet uniform standards in specific situations.

Eye Protection

Purpose: To require the use of eye protection where there is reasonable probability that an injury can be prevented by such equipment. This regulation shall apply to such operations, processes or work which involve a hazard to the eyes from flying objects or particles, sprays or splashes of hot or corrosive materials or chemicals,

Responsibility: All employees and department heads.

Employee Safety Rules

Policy and Procedure: *

A. All employees shall be provided with and required to wear proper eye protection when exposed to an operation or area where eye hazards normally exist. Some examples are listed below:

1. Arc or gas welding, brazing, cutting, scarfing.
2. Machining or woodwork which causes flying particles.
3. While using pneumatic tools or power actuated tools.
 4. Splashes from molten metals or substances, hot or corrosive liquids, acids and caustics.
 5. Power lawn mowers, tree trimmers and chippers, weed whacking, brush cutting and chain saws.
 6. Sledging, chipping, hammering, scaling, drilling, grinding, sanding, etc.
 7. Where danger of an electrical arc exists.
 8. When primary switching operations are performed, both overhead and underground.
 9. When lacing boilers.
 10. Driving/operating open equipment, tractors, graders, front-end loaders.
 11. During firearm training or practice.
 12. Cutting pipe, block, cement, or asphalt using a gas powered saw.
 13. Handling chemicals
 14. Power washing vehicles
 15. When working on equipment and vehicles as a precaution of a battery exploding.

Employee Safety Rules

- B. Eye protective devices may be obtained through the Department Head.
- C. Each foreman/supervisor shall be responsible for the distribution and use of the proper eye protective devices by his/her employees.
- D. Required eye protection shall be worn whenever eye hazards are present.
- E. Employees provided with eye protection are responsible for its maintenance and proper use.

If the equipment is damaged or lost through misuse or carelessness, the responsible employee may be charged with the replacement cost.

F. Eye protectors that are worn by more than one worker must be maintained in a clean, sanitary condition.

1. If an employee uses safety prescription glasses and they are broken or damaged as a result of an industrial accident, through no fault of the employee, the Town will repair or replace them. If the glasses are damaged through fault of the employee or off the job, the town will not be responsible for repair or replacement.
2. Based on the job being performed, it may be necessary to wear additional protection over the safety prescription glasses.

NOTE: All eye protection devices must meet the minimum specifications in *accordance* with the American National Standard for Occupational and Educational Eye and Face Protection, Z87.1-1968, including any revisions to same.

* Police and Fire Department personnel in emergency situations may not be able to comply with this policy. Police Chief and Fire Chief to issue guidance on eye protection.

Employee Safety Rules

Hearing Protection

Purpose: To require the use of an approved hearing protective device in those areas or operations wherein the noise level cannot be reduced to permissible levels through administrative or engineering controls.

Responsibility: All employees and department heads.

Policy: *

A. All employees shall be provided with and required to wear an approved hearing protective device when exposed to noise which exceeds those levels established by the Commonwealth of Massachusetts.

B. All employees, upon being provided with hearing protection, shall be required to wear same when working in areas or operations where there is a possibility of hearing damage.

C. Each foreman/supervisor shall be responsible for the distribution and proper usage of said equipment.

D. Each employee provided with ear protection shall be responsible for its maintenance and proper use when in his/her care. If the equipment is damaged or lost through misuse or carelessness, the responsible employee may be charged for the replacement cost.

Procedure:

A. Each department is responsible for identifying those areas/operations in which noise level hazards exist, or where excessive impact noise is present.

B. The Executive Secretary will assist in the identification of noise levels when necessary.

NOTE: EAR PROTECTION MUST MEET ANSI S3.19-1974, Z24.22-1957 as amended.

* Police and Fire Department personnel, in emergency situations, may not be able to comply with this policy. Police Chief and Fire Chief to issue guidance on hearing protection.

Employee Safety Rules

Hand-Body Protection

Purpose: To require the use of an approved piece of personal protective clothing in those areas or operations where such equipment is necessary to protect the employees from recognized hazards.

Responsibility: All employees and department heads.

Policy and Procedure:

All employees working in areas or operations where the following personal protective equipment is required shall wear said equipment as long as the hazard is present or may be present.

A. WORK CLOTHING: Appropriate clothing is required when working for the Town. Said clothing shall not interfere with the performance of an employee or expose him/her to unnecessary hazards. Long sleeve shirts may be required on certain operations.

Examples of Prohibited Attire:

Open shirts exposing employee to sunburn, poisonous plants, insects, flying debris, etc.

Loose shirttails, sleeves which can get caught in moving machinery or power tools.

Cutting off pant legs to make shorts, wearing shorts which expose the employee to sunburn, poisonous plants, insects, flying debris.

B. SPECIAL CLOTHING: Special clothing may be required to protect an employee from impacts of dust, fire and heat, vapors, moisture and corrosive liquids as well as temperature changes.

C. GLOVES: Appropriate gloves will be provided and their use will be required when an employee is working in an area where he/she is exposed to injury to the hands or fingers from material, machinery, heat, chemicals, electrical contact, sharp objects, etc.

D. Each department will be responsible for identifying those areas or of operations in which such equipment is necessary, including the type of equipment required.

E. The Executive Secretary will assist whenever necessary.

Employee Safety Rules

Head Protection

Purpose: To require the use of an approved safety hat or bump cap in those areas or operations where there are hazards of bumping one's head or having it struck, or having harmful materials precipitate on the head.

Responsibility: All employees and department heads.

Policy:

A. All employees shall be provided with and be required to wear an approved safety hat or cap when exposed to an area or operation where such equipment is necessary to protect the employees from recognized hazards. Whenever entering any area marked with a sign stating "HARD HAT AREA" or similar wording, which indicates head protection is required, said protection must be worn.

B. All employees, upon being provided with head protection, shall be required to wear same when working in areas or operations where there is a possible danger of impact from falling or flying objects, striking fixed objects, or from electrical contact.

C. Each foreman/supervisor shall be responsible for the distribution and proper usage of said equipment.

D. Each employee provided with a safety hat or cap shall be responsible for its maintenance and proper use. No modifications, decals, painting, etc., shall be permitted without prior approval by the Department Head.

Procedure:

A. Each Department is responsible for identifying those areas/operations where head protection is required.

B. The Executive Secretary will assist in the identification of hazardous areas when necessary.

NOTE: HEAD PROTECTION MUST MEET ANSI STANDARDS 289.1-1969 AND Z89-.2-1971 as amended.

Employee Safety Rules

Use of Safety Restraint Devices (Seat Belts)

Purpose: To establish policy-for the utilization of recognized safety restraint devices when operating or riding in a town owned or leased vehicle or piece of equipment equipped with such devices.

Responsibility: All employees and department heads.

Policy:

A. All Town-owned or leased vehicles and equipment designed to permit or require the installation of safety restraints shall be so equipped.

B. All drivers and passengers of vehicles and equipment which have said devices shall utilize same. (Unless authorization is obtained in writing from Department Superintendent/Chief. Copy of authorization must be on file in the Selectmen's Office.)

The following are exceptions to the rule:

1. When said vehicle/equipment is being used in a stop-go mode which requires the operator/passenger(s) to frequently enter and exit vehicles within a short distance of travel.

2. When the driver/passenger is performing a function or wearing special equipment which would prohibit the safe use of such equipment.

3. When it becomes necessary, due only to an emergency, to carry more passengers than the vehicle has safety belts.

4. Specific operations can be excluded from this requirement with the approval of the Executive Secretary.

C. All drivers shall instruct their passengers to wear their safety belts.

D. The driver/operator shall not remove or deactivate any safety restraint device and shall advise the appropriate authority whenever said device is not working properly.

Employee Safety Rules

Safety Vests/Shirts

Purpose: To require the use of an orange vest or orange shirt when working in areas where additional visibility is necessary to afford the employees added protection.

Responsibility: All employees and department heads.

Policy and Procedures: *

A. All employees working on a roadway shall be provided with an orange safety vest or an orange shirt.

1. Additional equipment such as orange gloves, cap, etc., may be provided if deemed appropriate.

2. The roadway is defined as the area between the curbs or where the curbs would be if said area does not have curbs.

B. All employees working in any other area where it is determined necessary that they be clearly visible shall also be provided with an orange safety vest or orange shirt.

C. All employees upon being provided with an orange safety vest or orange/red shirt shall wear same when working in any of the areas outlined above (Sections A & B).

D. Each foreman/supervisor will be responsible for the distribution and proper usage of this equipment.

E. Each employee provided with an orange vest shall be responsible for its maintenance and proper use when in his/her care.

F. If this equipment is damaged or lost through misuse or carelessness, the responsible employee may be charged for the replacement cost.

G. In the event of cold weather, the orange vest must be worn on the outside and if the orange/red shirt is covered, an orange vest will be required.

* Police and Fire Department personnel, in emergency situations, may not be able to comply with this policy. Police Chief and Fire Chief to issue guidance on safety vests.

Employee Safety Rules

Personal Protection – Hair Style/Length

Purpose: In order to safeguard from an injury which may be caused by the length/style of head and facial hair when working around machinery or when certain types of personal protective equipment is required, the following guide- lines have been promulgated:

Responsibility: All employees and department heads.

Policy:

A. The general policy is to trim or confine all hair which may constitute a hazard to the employee. The intent is to allow as much personal freedom in hairstyle and length as possible without subjecting the employee to injury. In no way is there any intent to violate an employee's constitutional rights.

Special Note: The Police and Fire Departments have existing rules and regulations covering this subject and are not subject to the following guidelines. Their policies are considered a part of this overall town regulation.

B. If an employee is working with machinery or equipment that has moving parts, such as gears, pulleys, nip points, turning parts, etc., and such parts cannot be totally enclosed, the following standards must be adhered to:

1. Hair can extend down to the top of the collar of a shirt and to the bottom of the earlobes.
2. Longer hair is permitted if it is contained by the use of a hair net or similar device.
3. Beards are permitted unless the style or length presents a hazard. If so, it must be trimmed or contained.

C. When an employee may be required to wear a facemask respirator or self- contained breathing apparatus, the following standard must be adhered to:

Head, facial hair, sideburns, etc., shall be trimmed to a length/style which will permit a proper seal when wearing the above-listed types of personal protective equipment.

Employee Safety Rules

D. If an employee is required to wear a protective safety hat, the following standards must be adhered to.

Large, bushy hairstyles that will not permit an employee to properly wear a safety hat will have to be trimmed to permit the wearing of same.

Procedure:

Each department shall be responsible for the evaluation of the work environment as it relates to this policy.

Whenever it is determined that a hazard exists, all reasonable means shall be taken to eliminate or guard the hazard. In those situations where this is not possible, the affected employee shall be advised of the hazard to his person which is caused by his/her hair length/style. He/she shall then be directed to comply with this regulation within a reasonable time. The time is to be determined by the supervisor in charge.

The Selectmen's Office shall render assistance in the identification of those conditions that would fall under this regulation. This may be done at the request of a Department or upon its own initiative.

Hazards – Restrictions Pertaining to Tires Mounted on Multi-Piece Rims

Purpose: To establish policy for the airing of tires mounted on multi-piece rims. To identify the hazards associated with multi-piece rims.

Responsibility: All drivers.

Hazard Warning: Improper inflation of a partially or totally flat tire mounted on a multi-piece rim can cause the assembly to burst with an explosive force sufficient to cause serious physical injury or death.

Policy:

A. Only qualified motor vehicle maintenance personnel are to inflate, change or repair tires mounted on multi-piece rims.

Employee Safety Rules

Procedure:

A. When a driver observes that his vehicle has a tire that is flat or in need of air, he shall inspect the rim to determine if it is a one piece or multi-piece unit.

1. If it is a one piece unit he/she may take the necessary action to inflate the tire to the recommended pressure.
2. If it is a multi-piece unit he/she SHALL NOT attempt to inflate the tire. The Town Motor Vehicle Maintenance Department must be contacted and they will take the necessary action to repair or inflate the tire.

Securing Town Vehicle/Equipment

Purpose: To establish procedures for the securing of town vehicles and equipment from theft, vandalism, or accidental run-away situations.

Responsibility: All employees and department heads.

Policy:

A. Whenever a town vehicle or piece of equipment is left parked or unattended, the following procedure is to be followed:

1. Turn off the engine. *
2. If equipped with automatic transmission, place in the normal park position.
3. Set parking brake.
4. If on a grade, turn front wheel toward curb or side of the street to block vehicle from rolling.
5. Remove key from ignition. (Except in situation approved in writing from the Department superintendent/Chief. Example item 1. above.)

B. If there are valuables inside the vehicle/equipment, or if said vehicle/equipment is to be left unattended for a long period of time, if so equipped all windows are to be closed and the doors locked.

C. Equipment that does not have an ignition key and can be started by pushing a button or other like device shall be secured by removing the ignition wire or other such device to eliminate unauthorized operation.

Employee Safety Rules

D. Vehicles, equipment, etc., shall not be left overnight at an unsecured construction site unless it is impossible or impractical to move same to one of the town's compound.

NOTE: Vehicle equipment is not to be left unattended with the key in the ignition and the engine running.

*Except in emergency situations and extreme weather conditions with written approval from the Department superintendent/Chief.

Work Area Traffic Control

Purpose: To establish guidelines for the proper installation of protective devices and warning devices in relation to construction projects being performed on or adjacent to a roadway.

Responsibility: All employees and department heads.

Policy:* The Town of Fairhaven shall conform to the Commonwealth of Massachusetts, Department of Transportation Manual on Traffic Controls and Safety Practices for Street and Highway Construction, Maintenance and Utility Operations. (Copy available for review in BPW Office.)

Procedure:

A. Prior to the start of any construction, maintenance or utility operation, on or adjacent to a roadway, the necessary safeguards to protect employees from vehicular traffic, and motorists from unexpected obstructions to the normal traffic flow, must be examined.

B. Utilizing the Commonwealth of Massachusetts regulations, the necessary safeguards shall be installed to protect both workers and motorists.

C. All traffic control devices shall be installed prior to the start of construction, maintenance or utility operations, and shall be properly maintained and operated during the time such special conditions exist. They shall remain in place only as long as they are needed and shall be removed immediately thereafter.

* Police Chief to issue policy for emergency situation or other situations affecting Police Department activities.

Employee Safety Rules

Licensing Criteria to Obtain/Maintain Town Vehicle Driving Privileges

Purpose: To establish a policy regarding minimum standards that would have to be met by a prospective or current employee who would or does not operate a town automobile, motorcycle, truck, piece of equipment or any other similar device. All such devices will be referred to as vehicles within this policy.

Responsibility: All employees and department heads.

Policy:

A. In order to obtain the privilege of operating a Town vehicle a person must meet the following criteria:

1. Have a current Massachusetts operator license.
2. Must be at least 18 years of age or older.
3. Have a license that is not under supervision or revocation.
4. Not be a habitual drunkard or drug addict.
5. Not be mentally or physically unable to drive safely.
6. Annually provide the Selectmen's Office with a copy of his/her valid motor vehicle driver's license issued by the Commonwealth of Massachusetts. (July 1st of each year)
7. Town may request a copy of employee's Registry of Motor Vehicle driving record.

B. Prospective employees are not eligible to be hired to operate a town vehicle if:

1. License is currently under suspension or revocation.
2. Failure to provide the Office of the Selectmen with a copy of the Employee driving record data sheet from the Registry of Motor Vehicles.
3. Not able to obtain a Massachusetts driver's license.
4. Convicted of driving while intoxicated or under the influence of drugs within the past two years.

Employee Safety Rules

5. Habitual violator of traffic laws (3 or more moving violations during the past two years.)

C. Current employees' privileges to drive a town vehicle may be suspended/terminated if any of the following apply:

1. License is found to be or has been suspended or revoked.
2. Failure to provide the Office of the Selectmen with a valid motor vehicle driver's license.
3. Not able to obtain a valid Massachusetts driver's license.
4. Convicted of driving while intoxicated or under the influence of drugs during the past two years.
5. Habitual violation of traffic laws (3 or more moving violations during the past two years.)
6. Involved in three or more preventable Town motor vehicle accidents within a 36-month period.

NOTE: Driving status may be reinstated after employee has completed a specified accident/citation-free period (12 months). Town will request a copy of the employee driving record data sheet from the Registry of Motor Vehicles.

In the event of an accident:

- Take necessary steps to protect the lives of yourself and others.
- Comply with police instructions.
- Do not assume or admit fault. Others will determine liability and negligence after through investigation.
- Report the accident to the Town of Fairhaven as soon as possible.

Employee Safety Rules

PERSONAL CELLULAR PHONES

Purpose: To require a standard for the use of Personal Cellular Phones.

Responsibility: All employees and department heads.

Policy: While at work, employees are expected to exercise discretion in using cellular phones. Personal calls during the work day can interfere with employee's work and be distracting to others. Employees must restrict their personal calls during work time and only use their personal cell phones during scheduled lunch periods. Family members and friends need to be made aware of the Town's cell phone policy. The Town of Fairhaven will not be held liable for the loss of personal cell phones brought into the work place.

Use of personal cell phone in an emergency must be with the supervisor's/department head's permission.

Use of cell phones while driving a Town vehicle is prohibited. In an emergency, pull over and stop the Town vehicle before using a personal cell phone. (EMS responding to an emergency is exempt from this policy.)

TOWN FACILITY INSPECTION PROGRAM

Purpose: To establish a formalized facility inspection program that would involve all levels of management.

Responsibility: Department heads, Executive Secretary

Policy: A two-phase program relating to the in-house inspection of Town facilities and equipment.

A. Self-Inspection: Each division will conduct a monthly in-house safety evaluation of their facilities and equipment, utilizing a standard inspection form. Each item is to be completed with an explanation for all "No" answers in the comment section. The individual completing the form must sign and date the form. A copy of this report shall be maintained by the department and a copy sent to the Selectmen. The necessary action shall be taken to remove all "No" responses, with a report of said action attached to the self-inspection report. Please refer to the Monthly Self-Inspection Checklist following.

Employee Safety Rules

CONSTRUCTION - ALTERATION OF TOWN BUILDINGS AND STRUCTURES

Purpose: To assure that the construction or major alteration of all Town buildings or structures are reviewed and approved prior to the commencement of any work activities.

Responsibility: Affected Town departments.

Policy: The construction, alteration, repair, demolition or change involving town owned or utilized buildings or structures shall comply with all requirements imposed upon the private sector. The additional standards outlined herein shall also apply.

Procedure:

A. The plan review procedure currently followed by the Town's Building Inspection Department for private construction shall be followed for all town construction. This procedure involves a critical review of all plans by the following departments.

1. Building Inspection, includes electric, plumbing and gas
2. Planning
3. Fire Department
4. Conservation commission (if applicable)

In addition, the Executive Secretary shall also review the plans prior to construction.

B. All Town departments erecting, constructing, enlarging, altering, repairing, moving, improving, removing, converting, or demolishing any building or structure, shall first obtain a separate permit from the Town Building Inspector. A building permit will be required regardless of whether the work is going to be performed by a private contractor or Town forces and will not be issued until plans are finally approved. The permit fee shall be waived, if work is performed by Town forces.

C. Ordinary minor repairs may be made without a permit, provided that such repairs shall not violate any of the provisions of the Town's building code or established state safety regulations.

Employee Safety Rules

1. No building permit shall be required for alterations and repairs to an existing structure where the value of such work is less than five hundred dollars (\$500) on jobs described as follows:

- a. Roofs - repair or replacement of sheeting and covering.
- b. Walls - exterior and interior paneling, painting, wall- papering, siding, plastering, stucco brick, etc.
- c. Floors - replacement, resurfacing, painting, covering
- d. Ceilings - refinishing, installation of tile or suspended ceilings
- e. Attic - insulation, installation of vents
- f. Partitions - removal, alteration or installation of non-load bearing partitions, provided, the minimum dimensions of specified areas are maintained.
- g. General - replacement of doors, windows, screens, etc.

2. Nothing contained herein shall waive the requirements obtaining a plumbing or electrical permit if said minor alteration or repairs involve plumbing or electrical installation.

D. All inspections and approvals normally imposed upon the private sector shall also prevail on town owned or town utilized buildings/structures.

E. Additional inspections may be conducted by the Building Maintenance Department or any other Town agency if such inspections are deemed to be in the best interest of the town.

All recommendations resulting from these special inspections shall be transmitted to the affected department head and the Executive Secretary for review and necessary action.

Reporting Injuries



1. Any work related injury or suspected injury must be reported immediately to your supervisor. A Form 101 and the Authorization to Obtain Information Form must be completed. Failure to promptly report an injury can result in disciplinary actions.
2. An accident investigation will be conducted to determine the root cause of the accident. The injured employee will be asked to participate in the investigation.
3. Employees are urged to report hazardous conditions and "near miss" incidents to their supervisors before injuries result.
4. Any attempt to defraud the Town of Fairhaven with a false workers' compensation claim will result in disciplinary action. The case can also be referred to the district attorney for possible prosecution.

Fire Prevention Plan and Electrical Safety

1. Smoking is not allowed in any interior area of the building. Smoking is only allowed in designated exterior smoking areas.
2. No candles or open flames are allowed within the facility.
3. Hot work: contractors performing hot work (welding, grinding, flame cutting, brazing, soldering, etc.) must contact Fire Department for approval and permit prior to the start of the work.
4. Only space heaters provided by the company are approved for use within the facility. Employees using space heaters are responsible to turn the heater off when leaving their desk for extended periods of time (lunch, end of the work day, etc.).
5. No flammable chemicals are allowed inside the building at any time. If you feel that there is a work-related need to use a flammable chemical, contact your department head for guidance.
6. Electrical safety:
 - Extension cords are not allowed with the exception of independently fused multi-tap cords for computers.
 - Keep electric cords out of areas where they will be damaged by stepping on/kicking them.
 - Turn electrical appliances off with the switch, not by pulling out the plug.
 - Turn all appliances off before leaving for the day.
 - Radios/tape/CD players and PDAs are the only personal electrical devices allowed to be used in offices/cubes. These devices must be in good repair. Department head reserves the right to instruct you to remove personal electrical devices at any time.
 - Never run cords under rugs or other floor coverings.
 - Any electrical problems should be reported immediately to your department head.
7. The following areas must remain clear and unobstructed at all times:
 - Exit doors,
 - Aisles,
 - Electrical panels, and
 - Fire extinguishers.

Hazard Communication



1. All employees of the Town of Fairhaven have a right to know what chemicals they work with, what the hazards are, and how to handle them safely.
2. Material Safety Data Sheets (MSDS) are documents provided by the supplier of a chemical. MSDS detail the chemical contents, associated hazards, and general safe handling guidelines. At the MSDS collection is located at [insert location]. Employees are free to utilize the MSDS as needed.
3. General rules for handling chemicals in an office environment are:
 - Read all label warnings and instructions.
 - When changing toner cartridges, consult with an experienced employee if you are unsure how to proceed.
 - Follow instructions for quantity. More is not better.
 - Minimize contact with chemicals. Use double layer cloths or gloves to protect your skin and keep your face clear of the area to reduce inhalation.
 - Always wash your hands after handling chemicals.
 - If a chemical enters your eye(s) immediately hold open the injured eye(s) and rinse it/them with clean, cool water for 15 minutes. Then be sure to report the injury immediately.
 - Any questions or concerns regarding chemicals should be reported to the department head.

Office Safety & Security

Office Safety:

1. Never leave file drawers open or open multiple file drawers at once.
2. Do not stack heavy or bulky objects on top of cabinets.
3. Do not store frequently used objects above shoulder height or below knee height.
4. Never reach into office machines without turning them off and unplugging them if possible.
5. Keep your work area free of trip hazards such as storage in walkways, cords across aisles, and damaged floor coverings.
6. Inspect step stools/ladders before use. Be sure to keep a stationary object in front of you when using a step stool to provide stability.
7. Never use defective or broken equipment. Report these problems to your supervisor.

Security:

1. Always be aware of your surroundings. Keep your head up and hands out of your pockets while walking to and from your car.
2. Immediately report any suspicious activity or person to Department Supervisor. And immediately report any theft to Department Supervisor.
3. When parking, remove all valuables from sight and lock car doors.
4. Keep all valuables (money, purses, jewelry, etc.) out of site when at your desk. Do not bring large sums of money or other valuables into the building.
5. Secure lap top computers, PDAs, and other small electronic devices before leaving your office or cube for extended periods of time (lunch, going home, etc.).

Office Safety & Security

6. If you are working alone and are in the office before or after regular business hours, on weekends, or holidays, observe these additional guidelines:
 - Be sure doors close and lock after you.
 - Turn on lights as you move through the building.
 - Always be aware of the closest telephone (do not hesitate to call 9-911 if you feel threatened).
 - Be sure that someone at home knows that you are at work and is expecting you to check in by a specified time.
 - As you leave be sure to turn off all equipment and lights that had you used.

7. Weapons including firearms, knives (blade longer than two inches), bow/arrow, pepper spray (mace, tear gas), and clubs are not allowed on property.

Sexual Harassment

The Town of Fairhaven does not tolerate harassment of our job applicants, employees, clients, guests, vendors, customers, or persons doing business with Town of Fairhaven. Any form of harassment related to an employee's race, color, sex, religion, national origin, age, citizenship status, veteran status, or handicap is a violation of this policy and will be treated as a disciplinary matter. For these purposes, the term harassment includes, but is not limited to, slurs, jokes, or other verbal, graphic, or physical conduct relating to an individual's race, color, sex, religion, or national origin; sexual advances; requests for sexual favors and other verbal, graphic, or physical conduct of a sexual nature.

Violation of this policy by an employee shall subject that employee to disciplinary action, up to and including immediate discharge.

Sexual harassment, one type of prohibited harassment, has been defined according to Town of Fairhaven guidelines as:

Unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when:

- *Submission to such conduct is made a term or condition, either explicitly or implicitly, of an individual's employment;*
- *Submission to or rejection of such conduct by an individual is used as a factor in decisions affecting that individual's employment; or*
- *Such conduct has the purpose or effect of substantially interfering with an individual's work performance or creates an intimidating, hostile, or offensive working environment.*

Examples of conduct prohibited by this policy include but are not limited to:

- Unwelcome sexual flirtation, advances, or propositions;
- Verbal comments related to an individual's age, race, gender, color, religion, national origin, disability, or sexual orientation;
- Explicit or degrading verbal comments about another individual or his/her appearance;
- The display of sexually suggestive pictures or objects in any workplace location including transmission or display via computer;
- Any sexually offensive or abusive physical conduct;

Sexual Harassment

- The taking of or the refusal to take any personnel action based on an employee's submission to or referral of sexual overtures; and
- Displaying cartoons or telling jokes which relate to an individual's age, race, gender, color, religion, national origin, disability, or sexual orientation.

Harassment of our employees in connection with their work by nonemployees may also be a violation of this policy. Any employee who becomes aware of any harassment of an employee by a nonemployee should report such harassment to his or her supervisor. Appropriate action will be taken with respect to violation of this policy by any nonemployee.

If you believe that you are being subjected to workplace harassment, you should:

1. Tell the harasser that his or her actions are not welcome and they must stop, if you feel comfortable enough to do so.
2. Report the incident immediately to your supervisor/manager, the site Human Resources representative, or the Employee Relations Department.
3. Report any additional incidents that may occur to one of the above resources.

Any reported incident will be investigated. Complaints and actions taken to resolve complaints will be handled as confidentially as possible, given Town of Fairhaven's obligation to investigate and act upon reports of such harassment.

Retaliation of any kind against an employee who reports a suspected incident of sexual harassment is prohibited. An employee who violates this policy or retaliates against an employee in any way will be subject to disciplinary action up to and including termination.

Blood Borne Pathogens

1. Blood and other bodily fluids can carry pathogens, which are capable of causing diseases in others. One of these diseases is HIV, which leads to aids and hepatitis.
2. People who carry these pathogens do not look any different than other people. Because we cannot tell by looking at a person if they are infected with a communicable disease we must take precautions whenever bodily fluids are released following an illness or injury.
3. In the event of a person loosing bodily fluids, stay away from the area and warn others to also do so. You can still stay close to the ill/injured person to support him/her, just be sure to stay out of contact any bodily fluids.
4. In the event that you find spilled bodily fluids, a syringe, or other medically contaminated materials, do not attempt clean up by yourself, call your department head immediately.

Employee Acknowledgement

The Town of Fairhaven is firmly committed to your safety. We will do everything possible to prevent workplace accidents and are committed to providing a safe working environment for you and all employees.

We value you not only as an employee but also as a human being critical to the success of your family, the local community, and Town of Fairhaven.

You are encouraged to report any unsafe work practices or safety hazards encountered on the job. All accidents/incidents (no matter how slight) are to be immediately reported to the supervisor on duty.

A key factor in implementing this policy will be the strict compliance to all applicable federal, state, local, and Town of Fairhaven policies and procedures. Failure to comply with these policies may result in disciplinary actions.

Respecting this, the Town of Fairhaven will make every reasonable effort to provide a safe and healthful workplace that is free from any recognized or known potential hazards. Additionally, Town of Fairhaven subscribes to these principles:

1. All accidents are preventable through implementation of effective Safety and Health Control policies and programs.
2. Safety and Health controls are a major part of our work every day.
3. Accident prevention is good business. It minimizes human suffering, promotes better working conditions for everyone, holds Town of Fairhaven in higher regard with customers, and increases productivity. This is why Town of Fairhaven will comply with all safety and health regulations which apply to the course and scope of operations.
4. Management is responsible for providing the safest possible workplace for Employees. Consequently, management of Town of Fairhaven is committed to allocating and providing all of the resources needed to promote and effectively implement this safety policy.
5. Employees are responsible for following safe work practices, company rules, and for preventing accidents and injuries. Management will establish lines of communication to solicit and receive comments, information, suggestions, and assistance from employees where safety and health are concerned.

Employee Acknowledgement

6. Management and supervisors of the Town of Fairhaven will set an exemplary example with good attitudes and strong commitment to safety and health in the workplace. Toward this end, management must monitor the company's safety and health performance, working environment, and conditions to ensure that program objectives are achieved.
7. Our safety program applies to all employees and persons affected or associated in any way by the scope of this business. Everyone's goal must be to constantly improve safety awareness and to prevent accidents and injuries.

Everyone at Town of Fairhaven must be involved and committed to safety. This must be a team effort. Together, we can prevent accidents and injuries and keep each other safe and healthy in the work that provides our livelihood.

By signing this document, I confirm the receipt of the Town of Fairhaven's employee safety handbook. I have read and understood all policies, programs, and actions as described and agree to comply with these set policies.

Employee Signature

Date

Self Inspection Checklist

TOWN OF FAIRHAVEN

QUARTERLY SELF-INSPECTION CHECKLIST

BUILDING _____

(LIST BUILDING BY NAME – SEPARATE SHEET FOR EACH BUILDING)

DEPARTMENT: _____ MONTH: _____

INSTRUCTIONS: Check each item as "Yes" or "No". If checked "No", indicate suggestions for improvement under "Comments". If item is not applicable, write "NA" in Comment Section.

GENERAL

ITEM	YES	NO	COMMENTS
Employees briefed on safety policy.	_____	_____	
Safety meetings conducted.	_____	_____	
Safety regulations enforced.	_____	_____	

BUILDINGS

Are all exits properly marked?	_____	_____	
Is lighting adequate?	_____	_____	
Is ventilation adequate?	_____	_____	
Are proper walkways maintained?	_____	_____	
Are all exit ways unobstructed?	_____	_____	
Are work areas kept clean?	_____	_____	

Self Inspection Checklist

Are rest rooms clean and stocked?

All material properly stored?

Are all chairs in good condition?

Are there wire extension cords used?

Have wire extension cords been examined for safety?

FIRE PROTECTION

Portable fire extinguishers available and inspected monthly?

Other required fire protection provided and inspected regularly?

SAFETY EQUIPMENT

Is personal protective equipment provided?

Is personal protective equipment used?

Is personal protective equipment inspected monthly?

Is use of equipment enforced?

POWER MACHINES

Are all gears, pulleys, etc. guarded?

Are machines anchored to prevent shifting?

Are power machines properly grounded?

TOOLS

Hand tools inspected monthly?

Power tools inspected monthly?

Are defective tools removed from service?

Self Inspection Checklist

LADDERS

Ladders inspected monthly and before each use? _____

Are safety feet provided on portable ladders? _____

Are scaffolds inspected before each use? _____

STORAGE

Compressed gases identified and stored? _____

Flammables stored in approved containers? _____

Types of flammables properly identified? _____

Drums storing flammables grounded and bonded? _____

Hazardous materials properly identified showing hazards and precautions? _____

Hazardous materials stored properly? _____

Waste materials properly disposed of? _____

All materials properly stored? _____

Self Inspection Checklist

MISCELLANEOUS

Are chains, slings, hoists inspected regularly?

First Aid kits stocked and available?

Warning signs used where necessary?

Electrical equipment and tools grounded?

Safety color-coding used properly?

Vehicle condition inspected regularly?

Tools, equipment, material properly loaded?

All safety devices inspected and used?
i.e. flares, emergency lights, etc.

DEPARTMENT: _____

PREPARED BY: _____

DATE: _____

MEGA

MASSACHUSETTS EDUCATION
& GOVERNMENT ASSOCIATION
WORKERS' COMPENSATION GROUP, INC.

File #:

Date:

AUTHORIZATION TO OBTAIN INFORMATION

I authorize any physician, surgeon, any other medical professional person, dentist, hospital, rehabilitation/convalescent/colts(dial facility, ambulance service provider, nurse or insurance company to furnish to any representative of Massachusetts Education and Government Association Workers' Compensation Group (MEGA) all records in their possession, medical history, and physical condition both before and after the date of my signature on this form, regardless of the till le of occurrence.

I understand that the information obtained by use of this Authorization will be used by MEGA to determine eligibility for insurance benefits. Any information obtained will not be released to any person or organization except to other persons or organizations performing a business or legal service in connection with my claim or as many be otherwise permitted or required by law

I agree that a photographic copy of this Authorization shall be as valid as the original.

I know that I may request a copy of this Authorization.

THIS AUTHORIZATION SHALL REMAIN VALID UNTIL THE CLAIM HAS BEEN LEGALLY CONCLUDED.

Print Name of Claimant _____ Date _____

Signature of Claimant or Authorized Representative

321 Billerica Road Suite 210
Chelmsford, Massachusetts. 01824-4100
Telephone (978) 654-7444 (ROO) 832-9702. Fax (978) 654-7461
Email info@megawcgroup.com 28



DIA USE ONLY

**EMPLOYER'S FIRST REPORT OF INJURY
 OR FATALITY**

THIS FORM MUST BE FILED BY THE **EMPLOYER** IN THE EVENT OF AN INJURY THAT RESULTS IN DEATH OR FIVE OR MORE CALENDAR DAYS OF TOTAL OR PARTIAL INCAPACITY FROM EARNING WAGES.
INSTRUCTIONS AND CODES ON THE REVERSE SIDE - Please Print Legibly or Type - Unreadable forms will be returned.

EMPLOYEE	1. Employee's Name (Last, First, MI):		2. Home Telephone Number:		3. Social Security Number*:		4. Sex: <input type="checkbox"/> M <input type="checkbox"/> F	
	5. Home Address (No., Street, City, State & Zip Code):				6. Marital Status: <input type="checkbox"/> M <input type="checkbox"/> S		7. No. of Dependents:	
	8. Date of Hire (mm/dd/yyyy):		9. Date of Birth (mm/dd/yyyy):		10. Average Weekly Wage: \$ <input type="checkbox"/> Estimated <input type="checkbox"/> Actual			
EMPLOYER	11. Employer's Name:				12. Federal Tax I.D. Number:			
	13. Employer's Address (No., Street, City, State & Zip Code):				14. Employer's Telephone Number:			
	16. Workers' Compensation Insurance Carrier and Tel. No. (NOT LOCAL AGENT/ADMINISTRATOR):				17. W.C. Policy Number:			
	18. Self-Insured? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Self-Insurer Number:				19. Business Type: <input type="checkbox"/> Service <input type="checkbox"/> Wholesale <input type="checkbox"/> Mfg. <input type="checkbox"/> Retail <input type="checkbox"/> Other			
INJURY INFORMATION	20. DATE OF INJURY (mm/dd/yyyy):							
	21. Was Employee Injured on Employer's Premises? <input type="checkbox"/> Yes <input type="checkbox"/> No				22. Location of Injury if not on Employer's Premises:			
	23. FIRST day of Total or Partial Incapacity to Earn Wages (mm/dd/yyyy):				24. FIFTH day of Total or Partial Incapacity to Earn Wages (mm/dd/yyyy):			
	25. If Employee has Died, Date of Death (mm/dd/yyyy):				26. Source of Injury (Chemicals, Machinery, etc.):			
	27. Briefly Describe How Injury/Exposure Occurred and Body Part(s) involved:							
	28. Person to Whom Injury was Reported (list position):				29. Date Reported (mm/dd/yyyy):		30. Date reported as work related (mm/dd/yyyy):	
	31. Injury Code(s) Body Part Code(s) a. to body part a. b. to body part b. c. to body part c.				32. Witness(es) to Injury - Give Full Name(s), if none state as such:			
33. Has Employee Returned to Work? <input type="checkbox"/> Yes <input type="checkbox"/> No				34. Date Employee Returned to Work (mm/dd/yyyy):				
35. Employee's Regular Occupation:				36. Has Employee Returned to Regular Occupation: <input type="checkbox"/> Yes <input type="checkbox"/> No				
37. EMPLOYER'S Name (SEE INSTRUCTIONS ON REVERSE SIDE):				38. Title:				
39. EMPLOYER'S Signature (SEE INSTRUCTIONS ON REVERSE SIDE):				40. Date Prepared (mm/dd/yyyy):				

*Disclosure of Social Security Number is Voluntary. It will aid in the processing of your report.
 Revised 8/2001

THIS FORM DOES NOT CONSTITUTE AN EMPLOYEE'S CLAIM FOR BENEFITS UNDER WORKERS' COMPENSATION.

EMPLOYER'S FIRST REPORT OF INJURY OR FATALITY

FILING INSTRUCTIONS

1. **WHEN TO FILE:** File this form within 7 calendar days, not including Sundays and legal holidays, of receipt of notice of any injury alleged to have arisen out of and in the course of employment, which totally or partially incapacitates an employee for a period of 5 or more calendar days from earning wages. This form is not an admission of liability, but must be filed even though the Employer may believe that the Employee is not injured, or that the Employee is not entitled to benefits under M.G.L. Chapter 152.
2. **WHERE TO FILE:** This form should be mailed to the Department of Industrial Accidents at the address shown on the front of the form. Copies must also be provided to the Employee and to the Employer's Workers' Compensation insurer.
3. **PENALTIES:** Failure to report injuries on this form may result in a fine of \$100.00 in accordance with M.G.L. Chapter 152, Section 6.
4. **EMPLOYER'S NAME & SIGNATURE IN BOXES 37 & 39:** This form must be filed by the employer or an authorized agent/representative of the employer.

INDUSTRY CODES			
Agriculture, Forestry and Fishing 01 Agriculture Production - Crops 02 Agriculture Production - Livestock 07 Agricultural Services 08 Forestry 09 Fishing, Hunting and Trapping Mining 10 Metal Mining 12 Coal Mining 13 Oil and Natural Gas 14 Nonmetallic Minerals, Except Fuels Construction 15 General Building Contractors 16 Heavy Construction, Ex. Building 17 Special Trade Contractors Manufacturing 20 Food and Kindred Products 21 Tobacco Products 22 Textile Mill Products 23 Apparel and Other Textile Products 24 Lumber and Wood Products 25 Furniture and Fixtures 26 Paper and Allied Products 27 Printing and Publishing	28 Chemicals and Allied Products 29 Petroleum and Coal Products 30 Rubber and Misc. Plastic Products 31 Leather and Leather Products 32 Stone, Clay and Glass Products 33 Primary Metal Industries 34 Fabricated Metal Products 35 Industrial Machinery and Equipment 36 Electronic and Other Electrical Equipment 37 Transportation Equipment 38 Instruments and Related Products 39 Miscellaneous Manufacturing Industries Transportation and Public Utilities 40 Railroad Transportation 41 Local and Interurban Passenger Transit 42 Trucking and Warehousing 43 U.S. Postal Service 44 Water Transportation 45 Transportation by Air 46 Pipelines, Except Natural Gas 47 Transportation Services 48 Communications 49 Electric, Gas and Sanitary Services Wholesale Trade 50 Wholesale Trade - Durable Goods	51 Wholesale Trade - Non-durable Goods Retail Trade 52 Building Materials and Garden Supplies 53 General Merchandizing 54 Food Stores 55 Automotive Dealers and Service Stations 56 Apparel and Accessory Stores 57 Furniture and Home Furnishing Stores 58 Eating and Drinking Establishments 59 Miscellaneous Retail Finance, Insurance and Real Estate 60 Depository Institutions 61 Non-depository Institutions 62 Security and Commodity Brokers 63 Insurance Carriers 64 Insurance Agents, Brokers and Service 65 Real Estate 67 Holding and Other Investment Officers Services 70 Hotels and Other Lodging Places 72 Personal Services 73 Business Services 75 Auto Repair Services and Parking 76 Miscellaneous Repair Services	78 Motion Pictures 79 Amusements and Recreation Services 80 Health Services 81 Legal Services 82 Educational Services 83 Social Services 84 Museums, Botanical, Zoological Gardens 86 Membership Organizations 87 Engineering and Management Services 88 Private Households 89 Services, NEC Public Administration 91 Executive, Legislative and Garden 92 Justice, Public Order, and Safety 93 Finance, Taxation, and Monetary Benefits 94 Administration of Human Services 95 Environmental Quality and Housing 96 Administration of Economic Program 97 National Security and International Affairs Non-classifiable Establishments 99 Non-classifiable Establishments

NATURE OF INJURY OR ILLNESS CODES			
100 Amputation or Erucation 110 Asphyxia or Strangulation, Etc. 120 Burns (Heat) 130 Burns (Chemical) 140 Concussion 160 Contusion, Crushing, Bruise 170 Cut, Laceration, Puncture 190 Dislocation 200 Electric Shock, Electrocutation 210 Fracture 250 Hernia, Rupture 300 Scratches, Abrasions 310 Sprains, Strains 400 Multiple Injuries 900 No Injury 950 Damage to Prosthetic Devices 995 No Other Injury, NEC** 999 Non-classifiable Infective or Parasitic Disease 150 Infective or Parasitic Disease, UNS* 151 Amebiasis 152 Anthrax 153 Brucellosis 154 Conjunctivitis and Ophthalmia 156 Tetanus	157 Tuberculosis 159 Other Infective or Parasitic Diseases Dermatitis 160 Dermatitis, UNS* 183 Primary Infections of the Skin 184 Other Skin Conditions 185 Dermatitis, Allergic or Contact 189 Skin Condition, NEC** Poisoning, Systemic 270 Poisoning, Systemic, UNS* 271 Due to Toxic Materials other than Lead 272 Diseases of the Blood and Blood Forming Organs 273 Upper Respiratory Conditions 274 Influenza, Pneumonia, Etc. 276 Other Diseases of the Gastro-Intestinal Tract 278 Effects of Lead 279 Other Toxic Effects of One System Only Respiratory Systems, Conditions of 570 Respiratory Systems, Conditions of 571 Upper Respiratory 572 Asthma, Influenza, Pneumonia Pneumoconiosis 280 Pneumoconiosis	281 Aluminosis 282 Anthracosis 283 Asbestosis 284 Byssinosis 285 Siderosis 286 Silicosis 287 Other Pneumoconoses 289 Pneumoconoses with Tuberculosis Nervous System, Conditions of 560 Nervous System, Conditions of - NEC 561 Diseases of the Central Nervous System 562 Diseases of the Nerves and Peripheral Ganglia Neoplasm Tumor 550 Neoplasm Tumor UNS** 551 Malignant 552 Benign Radiation Effects 290 Radiation Effects, UNS* 291 Non-Ionizing Radiation 292 Microwaves 293 Ionizing Radiation - X-Ray 294 Ionizing Radiation - Isotopes 295 Welder's Flash	Other 265 Carpal Tunnel Syndrome 510 Cardiovascular and Other Conditions of the Circulatory System 520 Complications Peculiar to Medical Care 500 Effects of Changes in Atmospheric Pressure 240 Effects of Environmental Heat 220 Effects of Exposure to Low Temperature 530 Eye, other Diseases of the Eye 230 Hearing Loss or Impairment 991 Heart Condition, Excludes Heart Attack 320 Hemorrhoids 330 Hepatitis, Serum and Infective 275 Hepatitis, Toxic 260 Inflammation of Joints, Etc. 540 Mental Disorders 900 No Illness 999 Non-classifiable 990 Occupational Disease, NEC** 580 Symptoms and Ill-defined Conditions

BODY PART AFFECTED CODES			
Head 100 Head, UNS* 110 Brain 120 Ear(s), UNS* 121 Ear(s), External 124 Ear(s), Internal 130 Eye(s) UNS* 140 Face, UNS* 141 Jaw, Chin 144 Mouth and Throat (vocal cords, larynx) 146 Nose 148 Face, Multiple Parts 149 Face, NEC** 150 Scalp	160 Skull 198 Head Multiple 200 Neck & Cervical Vertebrae UPPER EXTREMITIES 300 Upper Extremities, NEC** 310 Arm(s), UNS* 311 Upper Arm 313 Elbow(s) 315 Forearm(s) 318 Arm(s), Multiple 319 Arm(s), NEC** 320 Wrist(s) 330 Hand(s), Not Wrists or Fingers 340 Finger(s)	398 Upper Extremities, Multiple 400 Trunk, UNS* 410 Abdomen, Internal Organs, Inguinal Hernia 420 Back 430 Chest, Ribs, Breastbone, Internal Organs 440 Hip(s)...Pelvis, Organs and Buttocks 450 Shoulder(s) 498 Trunk, Multiple LOWER EXTREMITIES 500 Lower Extremities 510 Leg(s), UNS*	513 Knee(s) 515 Lower Leg(s) 518 Leg(s), Multiple 519 Leg(s), NEC** 520 Ankle(s) 530 Foot or Feet, Not Ankle 540 Toe(s) 598 Lower Extremities, Multiple 700 MULTIPLE PARTS Applies when more than one major body part as been effected such as an arm and a leg 999 NON-CLASSIFIABLE - Insufficient information to identify part of body effected. Includes damage to prosthetic devices.

*UNS - UNSPECIFIED

** NEC - NOT ELSEWHERE CLASSIFIED

Fire Extinguisher Review

PERIODIC FIRE EXTINGUISHER REVIEW

INSTRUCTIONS FOR USE

1. Facility/Department: Indicate the name or designation where the extinguishers are located.
2. Person Conducting Review: Indicate the name of the person conducting the periodic review.
3. Information Current 33 of: Indicate the date the review was conducted.
4. Related Facility/Job Operating Procedures Reviewed: Ensure that the location, type, size and serviceability of the extinguisher is considered in relation to the actual needs of the department or specific job. Hotwork (welding, brazing, and cutting) operations must be considered if they are routinely conducted in the area.
5. Extinguisher Map Developed and Current: Ensure that a facility map is developed to show the exact location, type, and size of extinguishers used in the facility.
6. Extinguisher Location: Indicate location in the facility of the extinguisher.
7. Circle Type Extinguisher: Indicate the type of extinguisher.

Class A, Fire Extinguishers: Use on ordinary combustibles or fibrous material, such as wood, paper, cloth, rubber and some plastics. Travel distance for employees to any extinguisher is 75 feet (22.9 m) or less.

Class B, Fire Extinguishers: Use on flammable or combustible liquids such as gasoline, kerosene, paint, paint thinners and propane. Travel distance from the Class B hazard area to any extinguisher is 50 feet (15.2 m) or less.

Class C, Fire Extinguishers: Use on energized electrical equipment such as appliances, switches, panel boxes and power tools. Travel distance from the Class C hazard area to any extinguishing agent is 50 feet (15.2 m) or less.

Class D, Fire Extinguishers: Use on combustible metals, such as magnesium, titanium, potassium and sodium. Travel distance from the combustible metal working area to any extinguishing agent is 75 feet (22.9 m) or less.

H Type Fire Extinguishers: Indicates hose system.

8. Extinguishers Designation: Indicate the numerical or other designation of the extinguisher.

9. Date of Last Annual Check: Indicate the date of the last annual serviceability check. Check to ensure that the serviceability tag has been annotated with the monthly inspection and annual service. Unserviceable extinguishers will be reported to the Safety Officer.

Fire Extinguisher Review

PERIODIC FIRE EXTINGUISHER REVIEW

1. Facility/Department:
2. Person Conducting Review:
3. Information Current as of:
4. Related Facility /Job Operating Procedure Reviewed Yes/No
5. Extinguisher Map Developed and Current Yes/No

Location	Extinguisher Type	Extinguisher Designation	Date of Last Annual Check	Remarks
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Fire Extinguisher Review

Location	Extinguisher Type	Extinguisher Designation	Date of Last Annual Check	Remarks
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