

AGENDA
STATE SAFETY MEETING

Location: JFHQ VTC Room

Date: Tuesday, February 11, 2008

Time: 1:00 PM

1. Review and approve January meeting minutes – All
2. Review draft of Safety Committee Bylaws - All
3. Review of Evacuation Plan Status – TAB A & TAB C – Robin Sawvel
Evacuation Coordinators
4. Review of Accident/Incident Reports for December 07 & January 08 – Robin Sawvel
5. Up date on Workers Comp injuries for 2007 – Robin Sawvel
6. Review of Fire Alarm System Fix – Paul Geck
7. Review of Safety Suggestion Box in Armories - All
8. Review of date and time for 2008 safety meetings
9. Feedback on Fundraisr information – Robin Sawvel
10. Review of First Responder Training – Robin Sawvel
11. Safety Bulletin Board & Suggestion Box – Robin Sawvel
12. Eye Wash Station update – John Unger & Paul Geck
13. AED Update – Robin Sawvel
14. New Business
 - a. MSDS Sheets - Dennis
 - b. Safety Newsletter Title – Robin
 - c. Review Quarterly Inspection – Corvallis & Newport



OREGON MILITARY DEPARTMENT
JOINT FORCE HEADQUARTERS, OREGON NATIONAL GUARD
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AGP

13 February 2008

MEMORANDUM FOR RECORD

Subject: Safety Meeting for February, 2008

The Oregon Military Department Safety Committee met on 12 February, 2008, at the Military Department in Conference Room 200. The meeting was convened at 1:00 PM hours. The status of the Member attendance was as follows:

Dennis Farley	SMW	Chairman	Present
Timothy Gilbert	AGI	Member	Present
Robin Sawvel	AGP	Safety Manager/Recorder	Present
Bryce Dohrman	AGC	Risk Manager	Present
Bruce Vollstedt	AGI	Member	Present
Paul Geck	AGI	Member	Absent
Terry Larson	SMW	Member	Present
Terri Kroeker	DS-Air	Member	Present
Frank Wallace	SMW	Member	Present
Mike Wiley	Region 4	Member	Absent
John Unger	Region 5	Member	Absent
Owen Pence	Region 6	Member	Present
Jack Cassity	Region 7	Member	Present
Vacant	Region 8	Member	Absent
Mike Wilson	AGI	Member	Present
Randy Luketmeyer	AGI	Member	Present
Joanne Manson	AGI	Member	Absent
Cherie Zastoupil	OEM	Member	Present

1. The first order of business was to review the Safety Meeting minutes from the January, 2008 meeting. There was one correction to the minutes. Mike Wiley was listed as absent; minutes will reflect correction that Mike was in attendance via VTC. Remainder of minutes was approved as recorded.

2. **Review Draft Safety Committee Bylaws:** Several changes were suggested. Cherie requested footer at the bottom of the document so it can be easily located in the future. Tim questioned whether the Bylaws mimicked OSHA standards. The answer was yes. Tim questioned who would be responsible for replying and follow up under Objective 1 – Response. A clarification was suggested to the Bylaws indicating the response would be addressed in the safety minutes. Cherie also asked if employees were going to have to identify safety issues only in writing. A suggested change to say “either verbally or...” in Objective 1 – Participation. Dennis reminded committee members that all safety issues

should be addressed immediately. Terri suggested the Bylaws be posted on SharePoint and made a PDF file so that changes can't be made by anyone except the appropriate people.

The suggested changes went to a vote. Bruce motioned and Frank seconded.

3. Review of Evacuation Plan Status:

Tab A: Several changes were suggested by Tim. Eliminate all items under 5(b) Safety Committee. Tim feels the Safety Committee should not have any involvement in the Evacuation Plan. Robin suggested leaving some functions in for the Safety Committee as she believes they should be involved. Both parties agreed that number one (1) could be changed to read Conduct versus ensure. Robin suggested if taking out 5(b)(4) then to move it under section (c) as number five (5) as someone needs to notify EOC. Tim also indicated the Safety Officer would not need to direct emergency vehicles under number c(3) as there would be enough employees outside to do that or the Fire Dept. would see the smoke. Robin suggested leaving it in and just add "as necessary". Under section six (6) Bruce indicated he would send an email to Robin with suggested language.

Tab C: Tim indicated number 5(b) Safety Committee should mirror TAB A section 5(b) changes.

Mike indicated the Salem Auditorium has a box of orange vests that have not been used in a long time. Tim will check to see if it is possible for them to be used for the Evacuation Coordinators at HQ. Terri suggested changing the date at the top of the documents to February 1, 2008 so that the most current document is easily identifiable.

Tim reminded the members that this committee does not just represent HQ employees but also other regions. Therefore, there needs to be an evacuation plan for each armory in regions represented by this committee. Robin indicated the armories should be covered under the federal Safety Committee and will confirm with the SSO at the federal Safety Committee Meeting tomorrow and report back.

This item was tabled until the next meeting. Robin will email TAB D and TAB E for review at next meeting.

4. Evacuation Coordinators: Robin reported she has had flyers out for several months and two public voice messages. She has only received two volunteer. She will bring it up at the federal Safety Meeting.

5. Review of Accident/Illness Report: The committee reviewed one Incident Report. An employee lost her footing while descending the staircase across from the Cafeteria. It was determined it was not due to any mechanical failure on the part of the facility.

Robin indicated there were 35 Workers Compensation claims for 2007 and 4 Incident reports filed. There were also 2 State Active Duty (SAD) claims. As of today, we have 3

Workers Compensation Claims and 1 Incident Report. Robin also reported that the Agency has agreed to work with SAIF Loss Control on designing a Loss Control Program. All managers will be required to attend. The program will be test driven by RSMS at Camp Withycombe under COL Sears.

6. Review Fire Alarm Fix: Paul was not in attendance but Tim stated he believed the Company had come out and checked the alarm but had not submitted a quote to AGI as of yet.

7. Review of Safety Suggestion Box in Armories: This was a question from a prior meeting as to whether it was possible to have a Safety Suggestion Box in all armories. Bruce suggested having a safety form for employees to fill out and mail in. Robin indicated there is a Safety Form in which employees can either put their name on it or stay anonymous. She indicated this form is on the Safety Bulletin Board in HQ and also located on the AGP website. Tim indicated if an armory wants a Safety Suggestion Box someone needs to be responsible for it.

8. Review of Date and Time for future Safety Meetings & VTC Schedule: Meetings are scheduled the 2nd Tuesday of every month. Scheduled time of 1:00 PM was discussed and the committee agreed to move it to 1:30 PM instead to accommodate some members scheduling conflicts.

Suggested changes to move the meeting time to 1:30 PM on the 2nd Tuesday of every month was brought to vote. Motioned by Bruce and seconded by Mike.

9. Feedback on Fundraiser: Robin indicated there had been a discussion in the past on whether we could do safety fundraisers in order to trigger safety awareness. She spoke with Karl Jorgenson who indicated the committee can do fundraisers as long as the money is used to buy lunches and not to support the program. Tim asked if the lunches would only be for HQ as it would be too expensive for other employees to attend from outside this area. If so, this committee wasn't fairly representing all employees. Tim did suggest doing safety visits and taking those employees out for a safety lunch. After more discussion as to location issues surrounding fundraisers, Robin reminded the committee that the question was if we could have fundraisers, the how and when would be worked out at a later time.

10. Review of First Responder Training: Robin spoke with Tina Villalobos who indicated she is working with the medical unit to provide training. Once she gets a training schedule, she will forward one to AGP.

11. Safety Bulletin Board & Suggestion Box: Robin just wanted to remind members that there is now a Safety Bulletin Board and a Suggestion Box. The Board was donated by HQ Starc and is located in the hallway between AGP and AGC of HQ. The box is located off the drill floor.

12. **Eye Wash Station Update:** Because both John and Paul were not in attendance, this item was tabled until the next meeting.

13. **AED Update:** Robin passed out an updated AED Placement List (Jan 08) she received from the SSO. Tim indicated this is an awareness item. Who is taking care of them and maintenance? This is something that the FMS' need to be aware of.

14. New Business:

- a. **MSDS Sheets:** Dennis indicated with any new products (chemicals, etc) you may have not used before, to make sure you are aware of the hazards. He stated the Guard is not good on updating their MSDS book. He indicated he was given a chemical to clean up around the smoking area at RTI and looked up the MSDS and discovered it was very toxic and not allowed for use in California.
- b. **Safety Newsletter Title:** A suggestion was submitted by an employee to change the name of the Safety Newsletter to "Safe Guard" in an Oregon shape with a Minute Man Statute. The committee voted to keep the current name of Safety Line. Frank motioned and Dennis seconded.
- c. **Review of Quarterly Inspections:** The Quarterly Inspections for Corvallis and Newport were both reviewed by the Committee. Tim reminded the committee that there isn't always money to fund fixes. There is a form on the back of the sheet where problems found should be listed. These forms when completed should be hung on the bulletin board of that facility. Tim indicated copies of these forms are electronically sent to AGI. Robin indicated she does not get copies of these forms, this was the first set. She asked if it was possible for her to get an electronic copy when they are sent to AGI. Tim indicated it would be too cumbersome for employees to remember to send them to AGP. Tim indicated Robin needs a federal computer. He will check into seeing what it will take. Tim did suggest that different people from the Safety Committee should rotate inspection sites. Otherwise employees tend to get too complaisant in looking over possible hazards. Bruce suggested rotating inspection people. Tim stated it should be Bruce, Robin and Paul for the East side. Tell the FMS that you want to go through the facility and have them show you how they do their inspections. Mike suggested Quarterly Inspections performed on the East side of the mountain be made up of the State Safety Officer, Eastern FMS Supervisor and one State Safety Committee member from the East. West side should be the State Safety Office, Western FMS Supervisor and one State Safety committee member.

15. There was no further new business; the meeting was adjourned at 2:30 PM.

/s/
Robin Sawvel
Safety Officer & Recorder

Oregon Military Department Safety Committee ByLaws

Mission Statement: To provide input on any issue(s) that will improve safety and health and to elevate the awareness of safety and health throughout the Agency.

Goal: The goal of the HQ Safety Committee is to eliminate hazards which can cause worksite injuries and illnesses through the involvement of employees and managers, and to provide a platform for communication of safety and health issues within the Agency.

Objectives:

1. Encourage employees to communicate concerns regarding worksite safety and health matters, review safety concerns and make recommendations to the appropriate manager(s) for addressing those concerns within a specified period of time.
2. Review the results of all safety-related incident reports and worksite injuries/illnesses, accidents and death investigations in a timely manner. Provide recommendations and/or identify similar hazards/issues in various offices to appropriate management for long-term solutions.
3. Conduct quarterly walkaround inspections to monitor the safety and health of the Agency's worksite and collaborate on corrective measures with appropriate management.
4. Evaluate annually the Agency's safety and health management program accountability system and provide recommendations to appropriate management and/or the Deputy Director of State Affairs.
5. Oregon Military Department Safety Committee (OMD) will meet on the second Tuesday of each month except when the quarterly walk around inspections is made.

Definition:

Objective 1: Promote Employee Involvement in Safety Issues

Participation - The committee will encourage employee involvement in identifying penitential safety and health issues. All safety and health concerns raised by employees will be presented to the committee either verbally or in writing and be reviewed at the next regularly scheduled Safety Committee Meeting.

Safety Log - The recorder will maintain a log of all issues received by the committee, including the date the issue was received, the decision made/action required and the date the issue was resolved. A copy of the log including unresolved issues will be available at all meetings.

Response – The committee will respond to employees in writing (**Safety Committee Minutes**) as to the status of their safety and health concerns and will work with the appropriate managers to help ensure timely resolutions of all issues.

Objective 2: Review of Agency Safety-Related Incidents

Incident/Accident Review – Incident/accident investigation reports will be reviewed by the Safety Committee. The committee may make recommendations to eliminate any potential hazard(s) contributing to the incident/accident and evaluate the potential of that hazard(s). Recommendations will be made in writing to the appropriate manager(s). The Safety Committee chairperson will brief the executive staff if there are other potential areas/activities that have similar or potential hazards that may require improvement as a result of the incident/accident review. Results of these meetings and written recommendations will be included on the action log and printed in the Safety Committee minutes.

Objective 3: Conduct Quarterly Walkaround Inspections of Agency Worksites

Schedule – The Safety Committee members and field office safety contacts will perform quarterly walkaround inspections of all OMD worksites.

Training – The Safety Committee will ensure that the persons designated to carry out quarterly walkaround inspections and investigations of safety incidents/accidents have received training in:

- a. Hazard identification in the workplace
- b. Workings of the Safety Committee
- c. Accident Investigations

Inspection Report and Follow-up – The findings of the quarterly walkaround inspections of the local offices will be handled as follows:

Safety Committee Member or field office contact:

- a. Conduct walkaround inspections of their work area
- b. Discuss with manager the results of the walkaround inspection
- c. Negotiate/coordinate solutions to hazards/issues discovered during walkaround to include projected correction date and person(s) responsible for correction
- d. Provide copies to the appropriate manager and Safety Committee recorder for inclusion at next safety Committee meeting
- e. Follow up with appropriate manager for final correction of hazards/issues within 60 days or less
- f. If some hazards are not corrected within 60 days, notify Safety Committee Chairperson

Safety Committee Chairperson (hazards/issues unresolved at local levels)

- a. Discuss situation(s) with appropriate manager an/or Administrator to resolve issues(s) and report results to Safety Committee
- b. Final results will be included in Safety Committee minutes and disrupted via e-mail to all staff

Objective 4: Review of the Employer Safety and Health Program

Evaluation – The Safety Committee will review the Agency’s safety and health program system and make written evaluation of the program to the Deputy Director of State Affairs.

The employer safety and health program will include the following items:

- a. Written procedures for reporting and investigating safety and health incidents
- b. Written procedures of tracking and reporting incident statistics
- c. Written requirements for safety and health training

Objective 5: Meetings

Schedule – The OMD will meet on the second Tuesday of each month except when the quarterly walkaround inspection is made.

Agenda – Committee meeting agendas will prescribe the order in which the committee business will be addressed. Each agenda will include the following items:

- a. Review of new safety and health concerns received
- b. Status report of employee safety and health concerns currently under review
- c. Review of any worksite incidents/accidents/illnesses/deaths occurring since the last safety Committee meeting
- d. Review of action list

Minutes – Minutes will be made of each meeting reviewed by the chair for accuracy and when final, the minutes will be posted on the OMD website and the OMD Safety Bulletin Board. Members will post a courtesy copy of the monthly minutes in each office. The minutes will be retained by the recorder for three years for the Agency. All reports, action lists, evaluations and recommendations of the OMD Safety Committee will be made a part of the minutes. Additionally, the minutes will identify those committee members that were present and those members not in attendance.

Quorums – Six (6) voting members constitutes a quorum. All members of the Safety Committee are considered voting members. A simple majority of vote of committee members present is required for all decisions. Voting members will be identified by name in the minutes by a yay or nay vote due to participation by telephone and VTC. Any issue not resolved by a simple majority vote will be forwarded to the Deputy Director of State Affairs for resolution. Alternates are considered voting members. Member's who miss more than four (4) scheduled meetings in a 12 month period and have not sent alternates, will be replaced on the Safety Committee.

TAB A
FIRE PROTECTION EMERGENCY ACTION PLAN

- 1. PURPOSE:** To establish an operational procedure for the Joint Force Headquarters in Salem, Oregon as used in implementing an Emergency Action Plan (EAP) for the assigned facility.
- 2. RESPONSIBLE DIRECTORATE:** The Director of Personnel (AGP) is responsible for the maintenance of this Emergency Action Plan as it pertains to the State Safety Officer.
- 3. REFERENCES:** ORARNG PAM 385-9; AFI 32-2001 Oct 2002
- 4. GENERAL INFORMATION:** Directorates will partner in the required development of an Emergency Action Plan for their offices. This will ensure the employees working inside the facility understand and can perform the Emergency Action Plan. The plan will meet the unique operations of the facility and members. This plan will provide direction to key personnel to quickly make better-informed decisions while responding to all emergencies. Directorates and employees will be evaluated on their knowledge of the plan, the ability to perform their respective duties as outlined in the plan, and how well the overall plan operates, through annual fire drills for the facility. It is the responsibility of all members assigned to the facility or doing business in the facility to be knowledgeable, trained, and in compliance with this plan.
- 5. RESPONSIBILITIES:**
 - a. Chief of Staff.
 - (1) Will act as Commander of Troops (COT) for the JFHQ.
 - (2) The COT will be stationed in the NW corner of the building and will receive headcounts from each Evacuation Coordinator.
 - (3) With support from AGI and the State Safety Officer will coordinate and manage all emergencies associated with the facility.
 - (4) Release tenants to return to the building or to go home.
 - b. Safety Committee.
 - (1) Ensure the plan is current and that all directorates are briefed annually.
 - (2) Execute two fire drills annually, one in April and one unannounced drill.
 - (3) Work with the all departments during actual testing of the plan.
 - (4) Notify Emergency Operations Center (EOC) of upcoming drills.
 - (5) Designate maintenance personnel to meet and direct emergency vehicles when they arrive on the scene.
 - (6) Ensure maintenance personnel are assigned to the senior fire official.

g. Exit the facility.

- (1) When exiting, follow the designated escape routes. Take any visitors you may have with you. **NOTE:** Know your primary escape route and a secondary escape route in case the first route is blocked.
- (2) Avoid high Risk areas, when possible.
- (3) Close all doors as you leave a room.
- (4) Do not lock doors; the fire department may need access to that area.
- (5) Before opening any doors to exit, **ALWAYS** check the door with the back of your hand. If any heat is felt or smoke is entering around the door, perform the following:
 - (a) Brace shoulder and foot against the door, and turn your face to the side;
 - (b) Open door slowly;
 - (c) If pressure is felt against the door, flames may be present or large amounts of smoke, **CLOSE DOOR IMMEDIATELY** and **DO NOT RE-OPEN**.
 - (d) Smoke is extremely toxic; always move away from the smoke and flames. If this can't be avoided, drop and crawl on your hands and knees where the temperatures are cooler and the air will be cleaner. **NOTE:** Do not stand up, the temperatures will be higher and you can quickly be overcome by smoke and heat.
- (6) If you cannot exit the facility without moving through a lot of smoke or flame, perform the following actions:
 - (a) Secure the room by closing all doors, ventilation ducts and systems.
 - (b) Seal all cracks leading into the room with whatever is available i.e. tape, rags, clothing, drapes (wet when possible), etc....
 - (c) Call 911 and let them know where you are located. If you are by a window and cannot exit on your own, wave your arms to attract the fire crew's attention.
 - (d) Wait calmly.
- (7) Assist other personnel who may be confused or injured. Those who are injured should be moved to medical attention outside and away from the fire area. **NOTE:** If a person's clothes are on fire, remember to **STOP, DROP, and ROLL**.
- (8) Assemble in the pre-designated safe area (~~see diagram at Enclosure XX-1~~). **DO NOT RE-ENTER THE FACILITY FOR ANY REASON.**
- (9) Report to your Evacuation Coordinator any personnel taken to the medical collection area or missing personnel.
- (10) Evacuation Coordinator must report personnel status to the COT or designated representative on the northwest side of the Owen Summers Readiness Center as quickly as possible.
- (11) Stay in your assembly area until released by the COT or the fire department.

TAB C
EARTHQUAKE EMERGENCY ACTION PLAN

1. **PURPOSE:** To establish an operational procedure for the Joint Force Headquarters in Salem, Oregon as used in implementing an Emergency Action Plan (EAP) for the assigned facility.
2. **RESPONSIBLE DIRECTORATE:** The Director of Personnel (AGP) is responsible for the maintenance of this Emergency Action Plan as it pertains to the State Safety Officer.
3. **REFERENCES:** ORARNG Pam 385.9; Environmental, <http://www.fema.gov/>; OAR 104-020-0000, http://arcweb.sos.state.or.us/rules/OARS_100/OAR_104/104_020.html
4. **GENERAL INFORMATION:** Directorates will partner in developing an Emergency Action Plan for the Joint Force Headquarters. An annual earthquake drill (April) will be conducted to evaluate the directorates/tenants ability to quickly account for and evacuate the building. The drill will also evaluate the overall knowledge of the plan and the ability of key personnel to perform their duties in response to an emergency.
5. **RESPONSIBILITIES:**
 - a. Chief of Staff.
 - (1) Will act as Commander of Troops (COT) for the JFHQ.
 - (2) COT will be stationed in the NW corner of the building and will receive headcounts from each Evacuation Coordinator.
 - (3) Along with AGI, coordinate and manage all emergencies associated with the facility.
 - (4) Release tenants to return to the building or to go home.
 - b. Safety Committee.
 - (1) Ensure the plan is current and that all directorates are trained.
 - (2) Execute the evacuation plan annually - April.
 - (3) Work with JFHQ departments during actual testing of the plan.
 - (4) Designate security personnel to meet and direct emergency vehicles as they arrive on the scene.
 - (5) Ensure a maintenance person is assigned to the senior fire official.
 - (6) Update the plan following all drills or emergencies.

- (5) After the ground stops shaking the evacuation coordinator and the director of that department will do an evaluation using the checklist, to determine if you should evacuate.
- (6) Some critical operations or actions may be required prior to evacuation, if time allows:
 - (a) Shut down computers.
 - (b) Securing classified documents.
 - (c) Shut down special machinery or equipment.

g. Exiting the facility.

- (1) When exiting, follow the designated escape routes. Take any visitors you may have with you. NOTE: Know your primary escape route and a secondary escape route in case the first route is blocked.
- (2) Avoid high Risk areas, when possible.
- (3) Close all doors as you leave a room.
- (4) Do not lock doors; the fire department may need access to that area.
- (5) Before opening any door to exit, ALWAYS open the door slowly to ensure there is nothing heavy waiting to fall on you.
- (6) If you cannot exit the facility without moving through a lot of smoke or flame, perform the following actions:
 - (a) Secure the room by closing all doors, ventilation ducts and systems.
 - (b) Seal all cracks leading into the room with whatever is available, tape, rags, clothing, drapes, and wet them if possible.
 - (c) Call 911 and let them know where you are located. If by a window and you cannot exit on your own, wave your arms to the fire crews for attention.
 - (d) Wait calmly.
- (7) Assist other personnel who may be confused or injured. Those who are injured should be assisted to medical attention outside and away from the damaged area. If a person's clothes are on fire, remember to STOP, DROP, and ROLL, then seek medical help.
- (8) Assemble in the pre-designated safe area (see site plan).
- (9) Report to your area Evacuation Coordinator.
- (10) Report personnel taken to the medical collection area or missing personnel.
- (11) Evacuation Coordinators will report personnel status to the Chief of Staff or designated representative located at the northwest side of the Owen Summers Building.
- (12) Stay in your assembly area until released by the Chief of Staff or the fire department.

REPORT OF INCIDENT/ACCIDENT/ILLNESS

- > PRINT OR TYPE ONLY. TO BE COMPLETED BY THE INJURED EMPLOYEE OR ATTENDING STAFF
- > IF A DOCTOR'S VISIT IS REQUIRED; COMPLETE SAIF 801 FORM IN ADDITION TO THIS FORM & FORWARD IMMEDIATELY.
- > FOLLOW THE GUIDELINES ON THE MEDICAL TRANSPORT CHECKLIST

1. NAME OF INDIVIDUAL: <div style="background-color: black; width: 100px; height: 15px; margin-top: 5px;"></div>	2. Section: <div style="background-color: black; width: 100px; height: 15px; margin-top: 5px;"></div>	3. DATE OF REPORT: <div style="text-align: right; margin-top: 5px;">11/29/07</div>
4. JOB TITLE: <div style="background-color: black; width: 100%; height: 15px; margin-top: 5px;"></div>	5. TYPE OF INCIDENT/ACCIDENT/ILLNESS: Slip and fall down stairs	
6. EXTENT OF INJURY(Body part or location of pain): Left ankle, right wrist		
7. LOCATION WHERE INJURY OCCURRED: HQ, Stairs outside of Cafeteria		
8. DATE & TIME OF INCIDENT/ACCIDENT/ILLNESS: 11/29/07 - 1:45 PM		
11. DATE REPORTED: 11/29/07	12. REPORTED TO WHOM: Safety Officer, Risk Management	
13. WITNESS (attach statement if necessary) RELATIONSHIP: <u>Co-Worker</u> SUPERVISOR, CO-WORKER, ETC. NAME: <u>SFC Patrick Burge</u> PHONE: <u>503-982-1812</u>	WITNESS (attach statement if necessary) RELATIONSHIP: _____ SUPERVISOR, CO-WORKER, ETC. NAME: _____ PHONE: _____	
14. DESCRIBE INCIDENT/ACCIDENT/ILLNESS FULLY (Include how it occurred, conditions when it occurred (weather, clothing, safety equipment, etc), and describe how it felt to the individual when it occurred): <u>Going down stairs by cafeteria, slipped off step, lost balance and fell forward, landing at bottom of stairs.</u>		
15. DESCRIBE FIRST AID/MEDICAL TREATMENT: <u>Taken to Urgent Care</u>		
16. WHERE WAS INDIVIDUAL SENT (IF TRANSPORTED): Urgent Care, Salem	17. MEANS OF TRANSPORTATION: Brad Helt - POV	
18. INJURED INDIVIDUALS WRITTEN COMMENTS: <u>Patrick Burge</u>		

THIS SIDE TO BE COMPLETED BY SUPERVISOR

19. CONTRIBUTING FACTORS OF INCIDENT/ACCIDENT/ILLNESS:

<p>UNSAFE ACTIONS:</p> <ul style="list-style-type: none"> <input type="checkbox"/> DISTRACTION, TEASING, HORSEPLAY <input type="checkbox"/> OPERATING WITHOUT AUTHORITY <input type="checkbox"/> MAKING SAFETY DEVICES INOPERATIVE <input type="checkbox"/> TAKING UNSAFE POSITION <input type="checkbox"/> FAILURE TO USE PERSONAL PROTECTIVE DEVICES <input type="checkbox"/> OTHER: _____ 	<p>UNSAFE CONDITIONS:</p> <ul style="list-style-type: none"> <input type="checkbox"/> INADEQUATE SUPERVISION <input type="checkbox"/> DEFECTIVE TOOLS, EQUIPMENT, OR SUBSTANCE <input type="checkbox"/> HAZARDOUS ARRANGEMENT <input type="checkbox"/> SUB-STANDARD PHYSICAL CONDITIONING <input type="checkbox"/> UNSAFE CLOTHING <input type="checkbox"/> PREVIOUS INJURY <input type="checkbox"/> HAZARDOUS OBSTACLES <input type="checkbox"/> OTHER: _____
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2008 FEB 19 AM 9:58
 MILITARY DEPARTMENT
 STATE OF OREGON

20. BACKGROUND:
 ARE THERE ANY CONTRIBUTING FACTORS, SUCH AS LEVEL OF TRAINING, PERSONAL CHARACTERISTICS, HABITS, FAILURE TO ADHERE TO SAFETY POLICIES, ETC. THAT CAUSED THE INCIDENT/ACCIDENT/ILLNESS?

No - accidental slip and fall

GUIDES TO CORRECTIVE ACTION

21. IF AN UNSAFE ACTION AND/OR CONDITION WAS IDENTIFIED, LIST CORRECTIVE ACTION TAKEN:

22. ADDITIONAL SUPERVISOR COMMENTS:

23. SUPERVISOR NAME (PRINT): MAJOR MICHAEL BRAIBISH	24. SUPERVISOR SIGNATURE: <i>[Signature]</i>	25. DATE: 03 DEC 07
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SAFETY COMMITTEE REVIEW

26. SAFETY COMMITTEE RECOMMENDATIONS:

27. SAFETY CHAIR SIGNATURE: <i>[Signature]</i>	28. DATE: 2-12-08
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1 March 2006

(Updated Jan 08)

AED PLACEMENT LIST

PRIORITY OF DEFIBRILLATOR FIELDING	Date Distributed	Serial Number / LOCATION
CSMS	8 Feb 06	31396526 **
AASF #1	13 Jan 06	31396520 (Hgr 2) **
AASF #2	13 Jan 06	31396519
CRUTES	Mar	31396521
COUTES	Mar	31396541
1/186 OMS	Mar	31396534
2/162 OMS	Mar	31429861
3/116 OMS	Mar	31396525
3/116 OMSS	NA	---
HQJF OMS	25 Jan 06	31429870
141 SPT BN OMS	Mar	31429871*
141 SPT BN OMSS		
3670 OMS	Mar	31429884
USPFO-SDC	Mar	31429887
SALEM AUDITORIUM	Mar	31429868
MEDFORD ARMORY	Mar	31429867*
JFHQ ARMORY	7 Feb 06	31396537
SALEM ARC	Mar	31429889
HILLSBORO ARMORY		
GRESHAM ARMORY		
WOODBURN ARMORY		
BEND ARMORY	Mar	31429872
CLACKAMAS ARMORY		
KLIEVER ARMORY	Mar	31429885*
FOREST GROVE ARMORY	Mar	31429886*
LAGRANDE ARMORY	Mar	31429875
MAISON ARMORY	Mar	31429888
ASHLAND ARMORY		
JACKSON ARMORY		
EUGENE ARMORY/ Springfield		New construction Date?
PENDLETON ARMORY		
HERMISTON ARMORY		
ROSEBURG ARMORY		
ALBANY ARMORY		
ONTARIO ARMORY		
COOS BAY ARMORY		
HOOD RIVER ARMORY		
THE DALLES ARMORY		
CORVALLIS ARMORY		
MILTON FREEWATER ARMORY		
BAKER CITY ARMORY		

MCMINNVILLE ARMORY		
COTTAGE GROVE ARMORY		Closing date?
NEWPORT ARMORY		
GRANTS PASS ARMORY		
DALLAS ARMORY		
KLAMATH FALLS ARMORY		Moving to KF ANG ?
ST. HELENS ARMORY		
WARRENTON ARMORY		
LAKE OSWEGO ARMORY		
LEBANON ARMORY		
BURNS ARMORY		
OYF BEND		
RTI	Mar	31429862
Prineville		
TOTAL		23 on hand / approx 32 needed
NOTE 2: One (1) AED will be held at the OCC Health Office to be used as an immediate replacement when an AED is in for service.		31429883 * - AEDs still on SSO PHR ** - Directorate purchased one or more additional

Oregon Military Department
Quarterly Workplace Safety Inspection

Location: Corvallis

Date: 10-Jan-08

Prepared by: ArlenPhillips

YES NO N/A

HOUSEKEEPING

- 1) Is proper housekeeping maintained? (No trip, slip, or fire hazards?)

PERSONAL PROTECTIVE EQUIPMENT

- 2) Is PPE being used?
 3) Is all required PPE functional and in good repair?
 4) Is PPE being stored properly when not in use?
 5) Is a fall arrest system in place and being used?

LOCKOUT/TAGOUT

- 6) Are correct lockout/tagout procedures in use?
 7) Are suspended loads on potential energy (such as compressed springs, hydraulics, or jacks) controlled to prevent hazards?

ELECTRICAL SYSTEMS

- 8) Is there a 36-inch clearance and 30-inch width maintained in front of electrical panels and are panel doors closed?
 9) Are disconnecting switches and circuit breakers clearly labeled to indicate their use or equipment served?
 10) Are circuit breakers accessible to personnel, protected from physical damage and located away from ignitable material?
 11) Are portable electrical tools and equipment and fixed electrical equipment grounded or of the double insulated type?
 12) Do extension cords being used have a grounding conductor. Are they free of splices or electrical tape? Are they being used in lieu of permanent wiring?
 13) Are junction boxes, MCC Cabinets and Breaker Panels closed with no open breaker knockouts?
 14) Are GFCI outlets installed where needed?
 15) Are there broken receptacles and/or face plates?
 16) Are surge suppressors "daisy chained"?

EXITS

- 17) Are exits kept free of obstructions?
 18) Are doors, passageways that are neither exits or access to exits and which could be mistaken for exits appropriately marked "NOT AN EXIT," "STOREROOM," etc?
 19) Are emergency lights working and tested?

AISLES/WALKWAYS/WORKING SURFACES

- 20) Are aisle widths maintained at a minimum of 22-inches and emergency exit routes widths maintained at 28-inches and kept clear?
 21) Are fire aisles, access to stairways, and fire equipment kept clear?
 22) Are floor openings, floor holes, and pits covered or otherwise guarded?
 23) Are standard railings provided wherever aisle, walkways, open side of exposed stairs or raised workstations are elevated more than 48-inches above the ground or any adjacent floor?
 24) No items stacked on cabinet tops within 24" of ceiling?

CONFINED SPACE

- 25) Have all confined spaces been clearly labeled?

YES NO N/A

MACHINE GUARDING

- 26) Is machinery provided with appropriate safety guards?
 27) Are grinders, saws, and similar equipment provided with appropriate safety guards (tongue guards and work rests adjusted properly?)

CHEMICALS

- 28) Are there Material Safety Data Sheets (MSDS) readily available for each hazardous substance used in this department?
 29) Is there a list of hazardous substances used in this department?
 30) Are operating procedures readily available to employees who work in or maintain a chemical process?
 31) Are hazardous chemical containers appropriately labeled, including Secondary Containers?

FIRE PROTECTION AND PREVENTION

- 32) Are portable fire extinguishers provided in adequate number and type (mounted and locations marked every 75 feet or within 50 feet of a known fire source)? Are there signs "Fire Extinguisher"?
 33) Are fire extinguishers easily accessible (nothing left or stored in front of them)?
 34) Are all fire extinguishers inspected and maintained regularly?
 35) Are storage cabinets used to hold flammable liquids labeled "Flammable"?
 36) Do cabinet doors automatically close?
 37) Are flammable liquids properly stored?
 38) Are covered metal waste cans used for oily rags and paint-soaked waste?
 39) Are electrical equipment parts, which normally produce arcs, sparks, or flames enclosed and separated from all combustible materials?

WELDING/COMPRESSED GAS STORAGE

- 40) Are only trained and authorized personnel permitted to use welding, cutting or brazing equipment?
 41) Are cylinders clearly marked to identify what they contained?
 42) Are cylinders secured while in use?
 43) Are gages turned off when not in use?
 44) Are cylinders chained while being stored?
 45) Are cylinders stored with cover caps and with a one hour burn barrier or 20 feet from any heat source or flammable hazard?
 46) Are valve handles open to drain lines?

SUPERVISOR'S CHECKLISTS

- 47) Employee Orientation Checklist
 48) New Job Orientation/Review Checklist
 49) Ladder Inspection Checklist
 50) Fall Protection Systems & Hazards Checklist
 51) Forklift Competency Evaluation Checklist

Please complete Workplace Inspection Report on reverse.

Location: Corvallis

Date: 10-Jan-08

Prepared by: Arlen Phillips

Observation				Action and Follow-up					
#	Item, Location, and Hazard(s)	Recommended Action	Priority			Responsible Person	Action Taken	Estimated Completion	Done?
			A	B	C				
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>

Copies to: Supervisor Safety Committee Unit Other:

Oregon Military Department
Quarterly Workplace Safety Inspection

Location: Newport

Date: 10-Jan-08

Prepared by: ArlenPhillips

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Location: Newport

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