****

(Insert your company name here)

**SAFETY PROGRAM**

***Insert the creation or revision date here***

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**Management and Leadership Commitment**

The personal safety of each employee of this company is of primary importance. The prevention of work-related injuries and illness is of such consequence that it will be given precedence over operating productivity whenever necessary to protect employees.

We will maintain a safety program based on modern techniques of accident prevention in compliance with federal, state and local laws regarding accident prevention and working conditions. To be successful, our program must embody the proper attitudes toward injury prevention on the part of management and employees. It also requires cooperation in all safety matters between fellow employees.

Our objective is to provide a safety program that will keep injuries reduced to a minimum. Our Safety Program will:

* Establish and maintain safety rules which employees are required to follow;
* Conduct safety inspections to find and eliminate unsafe working conditions or practices and to comply fully with the safety standards for every job;
* Train all employees in proven safety methods and best practices;
* Implement all possible engineering and work practice controls as priority measures in controlling hazards;
* Issue and require employees to wear personal protective equipment whenever necessary to protect them against injury, when engineering and work practice controls will not eliminate risk;
* Conduct prompt and thorough incident investigations to find out what caused an accident and correct the problem to prevent reoccurrence.



(Insert name and title of executive here.)

**Duties and Responsibilities**

The success of a safety program depends upon a number of factors. The company, upper management, safety director(s), supervisors, and employees must assume a degree of responsibility to ensure the success of the program. The culture of this company will be one that puts your safety and the safety of others as our utmost priority.

**Company**The company has the duty and responsibility to provide a safe place to work that is free of recognized hazards. The company has the duty to provide the tools and training that allow you to perform your job safely and enforce safety rules and recommendations.

**Management**Company management has the duty and responsibility of supporting the company’s safety and loss control program and the company safety director by active support of the safety program, active support of those individuals responsible for safety, and by example. Location managers must create a positive safety attitude at their locations. Company management also has the duty and responsibility to implement a disciplinary policy for safety violations.

**Safety Director/Coordinator**
The appointed company safety director has the duty and responsibility to oversee the company’s corporate safety program, to conduct hazard identification and risk assessments, to develop risk control and emergency response plans, to ensure employees have necessary safety training and resources, and to make sure the corporate safety policy is followed. ***Important:*** *If the company does not have a Safety Director/Coordinator, these responsibilities shall be overseen by Management.*

**Supervisors**
Each supervisor has the duty and responsibility of being aware of corporate safety rules and regulations, actively supervising and ensuring employees perform their assigned tasks in a safe manner. The supervisor has the responsibility to make certain that employees have the necessary personal protective equipment (PPE) and ensure PPE is used by employees when required. The supervisor is responsible for seeing that any injured employee receives prompt first aid and that such injuries are immediately reported. The supervisor has the responsibility to investigate all incidents relating to their employees. The supervisor has the responsibility to ensure that employees are properly trained, that the employee is aware of hazards with their task and around the job site, and that unsafe conditions or actions are handled immediately.

**Employees**
Each employee has the duty and responsibility of following established safety rules and regulations defined in the company’s safety policy. Employees should perform their tasks in a safe manner, immediately report unsafe conditions to their supervisor, use required personal protective equipment, and seek guidance from their supervisor when in doubt about how to complete work safely. If injured on the job, the employee should inform their supervisor immediately.

**Hazard Identification and Control**

It is the responsibility of this company to identify potential hazards which may be present in the workplace.

A comprehensive workplace safety analysis should include:

1. **Hazard Identification:** Examine locations and equipment involved in the work process. List all steps required to complete a task and identify potential hazards that may occur.
2. **Risk Assessment:** Once hazards are identified, determine who may be at risk and assess the potential frequency and severity of the hazards.
3. **Risk Control:** Identify and implement solutions to eliminate or minimize the hazards.

**IMPORTANT:** Specific hazard identification and control plans should be maintained and updated regularly(for example, every business should have an emergency evacuation plan and employees should be trained on what to do if there is a fire, inclement weather, an active shooter situation, etc.).

*Visit* [*www.worksafeky.com*](http://www.worksafeky.com) *to learn more about hazard identification, risk assessment, and risk control.*

**Safety Training**

Our company is responsible for providing ongoing safety training to ensure employees are aware of workplace hazards and trained on how to effectively avoid, reduce or eliminate the risks.

Our company is committed to the following safety training goals:

* We will comply with all federal, state and local laws relating to safety training (which may include specific safety programs for hazard communication, hearing conservation, respiratory protection, lockout/tagout, confined space entry, bloodborne pathogens, motor vehicle restraints, forklift operation, etc.).
* We will educate employees on the company’s safety program, safety policy and related policies.
* We will provide comprehensive and job-specific safety training to new employees.
* We will provide ongoing training to employees.
* We will review and evaluate safety training programs on a regular basis.
* We will maintain and share documentation on the safe operation of equipment, tools and processes which may pose inherent risks.
* We will maintain documentation on all training activities.

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| **KEMI offers an extensive library of free safety resources at** [**www.worksafeky.com**](http://www.worksafeky.com)**!** |

**Responding to an Emergency**

In the event of a potentially life-threatening medical emergency, **dial 9-1-1 immediately.**

Contact any first responders such as security personnel, supervisors or others trained in CPR/first aid.

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| The following company contact(s) should be informed of emergency situations as soon as possible:**Click here to enter text.** |

**Recordkeeping and Reporting**

All safety training should be documented and maintained so it can be audited at any time.

In addition to maintaining up-to-date records of all workplace safety incidents, our company will comply with all federal, state and local laws regarding injury and illness recordkeeping.

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| **OSHA’s Recordkeeping Rule**As of January 1, 2015, all employers must report:* All work-related fatalities within 8 hours.
* All work-related inpatient hospitalizations, all amputations and all losses of an eye within 24 hours.

Employers must orally report these incidents to the Kentucky Labor Cabinet, Division of Occupational Safety and Health Compliance at (502) 564-3070. |

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| **Reporting a Claim to KEMI****Under Kentucky law (KRS 342.038), all claims must be reported to your workers’ compensation insurance carrier within** **three (3) working days of your knowledge of any work-related injury or illness.****If you are a KEMI policyholder, the fastest and easiest way to report an injury or illness to us is through our First Report of Injury form on** [**KEMI.com**](http://www.kemi.com)**. Simply login or register to use our online services and submit your injury report. If you need assistance registering for our online services, call our Center for Assistance at 1-800-640-KEMI (5364).** **Additionally, a claim may be reported by printing the First Report of Injury or Illness, or Ia-1 form, and faxing it to 859-425-7822 or mailing it to the address below:****KEMI** **ATTN: Claims Unit****250 West Main Street, Suite 900****Lexington, KY 40507-1724****A claim may also be reported by calling 1-800-640-KEMI (5364).** |

**Incident Investigation**

Following a workplace safety incident (which may include a “near miss”), a crucial step to preventing future occurrences involves identifying the root cause through a formal investigation process.

Incidents will be investigated as soon as possible after their occurrence. An investigation is not complete until all data has been analyzed and a final report is completed.

For additional resources on conducting an incident investigation, visit **worksafeky.com.**