# MODEL INJURY AND ILLNESS PREVENTION PROGRAM FOR NON-HIGH HAZARD EMPLOYERS

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*This is a fillable template that the employer must complete. Instructions in red font enclosed in brackets indicate where you must enter your worksite-specific information.*

Every California employer must establish, implement and maintain a written Injury and Illness Prevention (IIP) Program and a copy must be maintained at each workplace or at a central worksite if the employer has non-fixed worksites. The requirements for establishing, implementing and maintaining an effective written injury and illness prevention program are contained in Title 8 of the California Code of Regulations, Section 3203 (T8 CCR 3203) and consist of the following elements:

* Responsibility
* Compliance
* Communication
* Hazard Assessment
* Accident/Exposure Investigation
* Hazard Correction
* Training and Instruction
* Employee access to the IIP Program
* Recordkeeping

This model program has been prepared for use by employers in industries that have been determined by Cal/OSHA to be non-high hazard. You are not required to use this program. However, any employer in an industry which has been determined by Cal/OSHA as being non-high hazard who adopts, posts, and implements this model program in good faith is not subject to assessment of a civil penalty for a first violation of T8 CCR 3203.

Proper use of this model program requires the IIP Program administrator of your establishment to carefully review the requirements for each of the IIP Program elements found in this model program, fill in the appropriate blank spaces and check those items that are applicable to your workplace. The recordkeeping section requires that the IIP Program administrator select and implement the category appropriate for your establishment. Sample forms for hazard assessment and correction, accident/exposure investigation, and worker training and instruction are provided with this model program.

This model program must be maintained by the employer in order to be effective.

Read the Injury and Illness Prevention Program standard online:

**[www.dir.ca.gov/title8/3203.html](https://www.dir.ca.gov/Title8/3203.html)**



January 2021

## INJURY AND ILLNESS PREVENTION PROGRAM (IIPP) for [Name of Company]

### RESPONSIBILITY

The Injury and Illness Prevention Program (IIP Program) administrator, [enter the name of the program administrator or the job title],has the authority and responsibility for implementing the provisions of this program for [name of company]***.***

All managers and supervisors are responsible for implementing and maintaining the IIP Program in their work areas and for answering worker questions about the IIP Program.

### COMPLIANCE

All workers, including managers and supervisors, are responsible for complying with safe and healthful work practices. Our system of ensuring that all workers comply with these practices include one or more of the following checked practices:

* Informing workers of the provisions of our IIP Program.
* Evaluating the safety performance of all workers.
* Recognizing employees who perform safe and healthful work practices.
* Providing training to workers whose safety performance is deficient.
* Disciplining workers for failure to comply with safe and healthful work practices.
* [Enter information on additional means of ensuring employee compliance specific to your workplace]

### COMMUNICATION

All managers and supervisors are responsible for communicating with all workers about occupational safety and health in a form readily understandable by all workers. Our communication system encourages all workers to inform their managers and supervisors about workplace hazards without fear of reprisal.

Our communication system includes one or more of the following checked items:

* New worker orientation including a discussion of safety and health policies and procedures.
* Review of our IIP Program.
* Workplace safety and health training programs.
* Regularly scheduled safety meetings.
* Posted or distributed safety information.
* A system for workers to anonymously inform management about workplace hazards.
* Our establishment has less than ten workers and communicates with and instructs workers orally about general safe work practices and hazards unique to each worker’s job assignment.
* [Enter other methods of effective communication specific to your workplace].

### HAZARD ASSESSMENT

Periodic inspections to identify and evaluate workplace hazards shall be performed by a competent observer in the following areas of our workplace:

| **Competent Observer** | **Area** |
| --- | --- |
| [Enter name of competent observer] | [Enter name of area observed] |
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Periodic inspections are performed according to the following schedule:

1. [Enter the frequency (daily, weekly, monthly, etc.) that’s appropriate for your workplace].
2. When we initially establish our IIP Program.
3. When new substances, processes, procedures, or equipment that present potential new hazards are introduced into our workplace.
4. When new, previously unidentified hazards are recognized.
5. When occupational injuries and illnesses occur.
6. Whenever workplace conditions warrant an inspection.

### ACCIDENT/EXPOSURE INVESTIGATIONS

Procedures for investigating workplace accidents and hazardous substance exposures include:

1. Visiting the accident scene as soon as possible.
2. Interviewing injured workers and witnesses.
3. Examining the workplace for factors associated with the accident/exposure.
4. Determining the cause of the accident/exposure.
5. Taking corrective action to prevent the accident/exposure from reoccurring.
6. Recording the findings and corrective actions taken.

### HAZARD CORRECTION

Unsafe or unhealthy work conditions, practices or procedures shall be corrected in a timely manner based on the severity of the hazards. Hazards shall be corrected according to the following procedures:

1. When observed or discovered.
2. When an imminent hazard exists that cannot be immediately abated without endangering employee(s) and/or property, we will remove all exposed workers from the area except those necessary to correct the existing condition. Workers necessary to correct the hazardous condition shall be provided with the necessary protection.

### TRAINING AND INSTRUCTION

All workers, including managers and supervisors, shall have training and instruction on general and job-specific safety and health practices. Training and instruction is provided as follows:

1. When the IIP Program is first established.
2. To all new workers, except for construction workers who are provided training through a construction industry occupational safety and health program approved by Cal/OSHA.
3. To all workers given new job assignments for which training has not previously been provided.
4. Whenever new substances, processes, procedures, or equipment are introduced to the workplace and present a new hazard.
5. Whenever we are made aware of a new or previously unrecognized hazard.
6. To supervisors to familiarize them with the safety and health hazards to which workers under their immediate direction and control may be exposed.
7. To all workers with respect to hazards specific to each employee’s job assignment.

General workplace safety and health practices include, but are not limited to, the following:

1. Implementation and maintenance of the IIP Program.
2. Emergency action and fire prevention plan.
3. Provisions for medical services and first aid, including emergency procedures.
4. Prevention of musculoskeletal disorders, including proper lifting techniques.
5. Proper housekeeping, such as keeping stairways and aisles clear, work areas neat and orderly, and promptly cleaning up spills.
6. Prohibiting horseplay, scuffling, or other acts that tend to adversely influence safety.
7. Proper storage to prevent stacking goods in an unstable manner and storing goods against doors, exits, fire extinguishing equipment and electrical panels.
8. Proper reporting of hazards and accidents to supervisors.
9. Hazard communication, including worker awareness of potential chemical hazards, and proper labeling of containers.
10. Proper storage and handling of toxic and hazardous substances, including prohibiting eating or storing food and beverages in areas where they can become contaminated.

### EMPLOYEE ACCESS TO THE IIPP

Our employees – or their designated representatives - have the right to examine and receive a copy of our IIIPP. This will be accomplished by [Describe how this will be accomplished using either of the following two methods:

1. Provide access in a reasonable time, place, and manner, but in no event later than five (5) business days after the request for access is received from an employee or designated representative.
2. Whenever an employee or designated representative requests a copy of the Program, we will provide the requester a printed copy of the Program, unless the employee or designated representative agrees to receive an electronic copy of the Program.
3. One printed copy of the Program will be provided free of charge. If the employee or designated representative requests additional copies of the Program within one (1) year of the previous request and the Program has not been updated with new information since the prior copy was provided, we may charge reasonable, non-discriminatory reproduction costs for the additional copies.
4. Provide unobstructed access through a company server or website, which allows an employee to review, print, and email the current version of the Program. Unobstructed access means that the employee, as part of their regular work duties, predictably and routinely uses the electronic means to communicate with management or coworkers.

Also describe how you will communicate the right and procedure to access the Program to all employees]

Any copy provided to an employee or their designated representative need not include any of the records of the steps taken to implement and maintain the written IIP Program.

Where we have distinctly different and separate operations with distinctly separate and different IIPPs, we may limit access to the IIPP applicable to the employee requesting it.

An employee must provide written authorization in order to make someone their “designated representative.” A recognized or certified collective bargaining agent will be treated automatically as a designated representative for the purpose of access to the company IIPP. The written authorization must include the following information:

* + The name and signature of the employee authorizing the designated representative.
  + The date of the request.
  + The name of the designated representative.
  + The date upon which the written authorization will expire (if less than 1 year).

### RECORDKEEPING

We have checked one of the following categories as our recordkeeping policy.

* **Category 1**. Our establishment has twenty or more workers; has a workers' compensation modification rate of greater than 1.1 and is not on a designated low hazard industry list; or, is on a designated high hazard industry list. We have taken the following steps to implement and maintain our IIP Program:

1. Records of hazard assessment inspections, including the person(s) or persons conducting the inspection, the unsafe conditions and work practices that have been identified and the action taken to correct the identified unsafe conditions and work practices, are recorded on a hazard assessment and correction form.
2. Documentation of safety and health training for each worker, including the worker's name or other identifier, training dates, type(s) of training, and training providers are recorded on a worker training and instruction form. We also include the records relating to worker training provided by a construction industry occupational safety and health program approved by Cal/OSHA.

Inspection records and training documentation will be maintained according to the following checked schedule:

* For one year, except for training records of workers who have worked for less than one year which are provided to the worker upon termination of employment.
* Since we have less than ten workers, including managers and supervisors, we only maintain inspection records until the hazard is corrected and only maintain a log of instructions to workers with respect to worker job assignments when they are first hired or assigned new duties.
* **Category 2.** Our establishment has fewer than twenty workers and is not on a designated high hazard industry list. We are also on a designated low hazard industry list or have a workers' compensation experience modification rate of 1.1 or less, and have taken the following steps to implement and maintain our IIP Program:

1. Records of hazard assessment inspections.
2. Documentation of safety and health training for each worker.

Inspection records and training documentation will be maintained according to the following checked schedule:

* For one year, except for training records of workers who have worked for less than one year, which are provided to the worker upon termination of employment.
* Since we have less than ten workers, including managers and supervisors, we maintain inspection records only until the hazard is corrected and only maintain a log of instructions to workers with respect to worker job assignments when they’re first hired or assigned new duties.
* **Category 3.** We are a local governmental entity (any county, city, or district, and any public or quasi-public corporation or public agency therein) and we are not required to keep written records of the steps taken to implement and maintain our IIP Program.

## HAZARD ASSESSMENT AND CORRECTION RECORD

| Date of Inspection: [Enter date] | Person Conducting Inspection: [Enter name] |
| --- | --- |
| Unsafe Condition or Work Practice: [Provide details, including root causes] | |
| Corrective Action Taken: [Provide details, including solutions to root causes] |  |
| Date of Inspection: [Enter date] | Person Conducting Inspection: [Enter name] |
| Unsafe Condition or Work Practice: [Provide details, including root causes] | |
| Corrective Action Taken: [Provide details, including solutions to root causes] |  |
| Date of Inspection: [Enter date] | Person Conducting Inspection: [Enter name] |
| Unsafe Condition or Work Practice: [Provide details, including root causes] | |
| Corrective Action Taken: [Provide details, including solutions to root causes] |  |
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## ACCIDENT/EXPOSURE INVESTIGATION REPORT

| Date & Time of Accident: [Enter information] |
| --- |
| Location: [Provide details] |
| Accident Description: [Enter details, including all events that lead up to the incident] |
| Workers Involved: [Enter information] |
| The underlying cause(s) of the accident/exposure: [Detail all root causes] |
| Corrective Actions Taken: [Provide details, including potential solutions to the root causes] |
| Manager Responsible: [Enter name]  Date Completed: [Enter date] |

## WORKER TRAINING AND INSTRUCTION RECORD

|  |  |  |  |
| --- | --- | --- | --- |
| **EMPLOYEE NAME** | **TRAINING DATES** | **TYPE OF TRAINING** | **TRAINERS** |
| [Enter employee full name] | [Enter training date(s)] | [Enter course name(s)] | [Enter name of trainer(s)] |
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