

CHAPTER 3 - ELEMENTS OF A COMPREHENSIVE SAFETY, HEALTH AND ENVIRONMENTAL MANAGEMENT PROGRAM

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A. INTRODUCTION

It is the goal of SI management to provide a safe and healthful working environment for its staff, volunteers and affiliated researchers and visitors. Managers and supervisors are responsible to lead by example, and demonstrate proper attitudes toward safety and health in their operations. Management must believe, commit to, and impress upon its staff the ethic that no job, program, or research project is so important or so urgent that one cannot take time to perform that function safely and in compliance with environmental regulations.

B. RESPONSIBILITIES OF DIRECTORS:

1. Establish and maintain a comprehensive Safety Program, based on the requirements of SD 419 and [Chapter 2, "Roles and Responsibilities"](#), of this *Manual*, which will include systemic policies, procedures, and practices that address all operational aspects of the organization, are auditable, and are sufficient to:
 - a. protect their employees and tenants* working within their facility from occupational safety and health hazards,
 - b. protect their assets from fire and life safety hazards, and
 - c. protect the environment from pollution due to facility operations.
2. The Director's span of control shall include ALL employees within that facility regardless of whether they are the organization's employees or tenants*.

* **"Tenants"** A Director is ultimately responsible for the health and safety of such "tenants" as SBV gift shop staff, OPS security, OFMR, VIARC docents and SIL library personnel assigned to the facility. However, the supervisory chain for those tenant organizations must also have a safety program that meets, as a minimum, the goals and objectives of SD 419. The tenant organization's safety program should reinforce and mesh with facilities where their employees work and ensure that tenant employees understand this important safety accountability to the Director. It is also the facility Director's responsibility to ensure that injuries to tenants are investigated, reported and captured on the museum's OSHA 300 Log per Chapter 7 of this *Manual*.

C. SAFETY PROGRAM ELEMENTS

Each unit's Safety Program shall address the following five elements:

1. Management Commitment;
2. Risk Management;
3. Training;
4. Injury/Incident Reporting and Investigation; and
5. Reporting and Recordkeeping.

D. MANAGEMENT COMMITMENT

Management commitment establishes the operating environment and the motivating forces that guide and resource the activities within an organization. In an effective Safety Program, management regards staff safety, property safety, and environmental protection as fundamental values of the organization and applies its commitment to the Safety Program with the same vigor as with other organizational purposes and functions. Management shall demonstrate its commitment by the following six actions.

1. **Establishment and Communication of Policy, Goals and Objectives.**
Each Director shall establish clear goals for their unit's Safety Program and objectives for meeting the requirements of SD 419, per their responsibilities defined in [Chapter 2, "Roles and Responsibilities"](#), of this *Manual*. Goals shall be established and evaluated at least annually and will include overall SI safety goals (e.g. Zero Accidents) as well as specific goals developed for individual organizational needs. Goals shall be measurable. The Director shall, on at least an annual basis, communicate the following Safety Program information to staff and tenants:
 - a. The SI's comprehensive policy on safety (SD 419),
 - b. the organization's plans and goals for implementing this policy, and
 - c. the organization's expectations of staff and tenants in reaching these safety goals.
2. **Assignment of Responsibilities & Accountability.** Each Director is to assign clear responsibilities to staff that will ensure the requirements of the Safety Program are met, as outlined in SD 419 and [Chapter 2, "Roles and Responsibilities"](#), of this *Manual*. The Director shall establish a safety committee with well-defined objectives and comprised of volunteers committed to promoting safety, and shall provide these committee members with the requisite training and support to fulfill their duties. Staff must be held accountable for performing activities or tasks that are required as part of the Safety Program. Employee performance plans should include safety elements that appropriately reflect the responsibilities of their position.

3. **Management Visibility.** The Director and unit management shall demonstrate their serious commitment to its Safety Program by actively participating in its implementation. Examples of means by which management can add visibility and credibility to its Safety Program would include: attending safety training, periodically joining safety committee meetings, conducting spot inspections, and regularly including safety topics in senior staff meetings and regular staff communications.
4. **Budgetary Commitment.** Management shall commit budgetary allocations that are necessary to ensure the success of the safety program. Examples of budgetary commitment include: listing safety as a permanent line item in the annual budget, and, where applicable, mandating that units within the organization do the same.
5. **Staff Involvement.** Directors shall seek staff and tenant input in the development, implementation and operation of the Safety Program and in decisions that affect their health and safety. This will encourage staff to commit their insight and energy to the Safety Program and to achieve the organization's goals and objectives. Safety committees are to include staff members and tenants who demonstrate commitment by volunteering and shall represent all components of each organization. Safety awards or recognition programs are good ways to encourage all staff to be involved in the safety program.
6. **Commitment to Continuous Improvement.** Each Director shall adopt a process for regular review of safety performance against compliance with SI goals, policies and procedures as well as those of its own organizational safety program goals. [Chapter 5, "Safety Assessments, Log of Deficiencies and Corrective Action Plan"](#), of this *Manual* details the self-assessment processes mandated by SI policy, which include injury and illness trend analysis and program evaluation. These assessments provide the SI safety program with an internal checks and balance process. The goal of these assessments is the continual improvement in the overall performance of the SI safety program to ensure the safest possible workplace environment.

E. RISK MANAGEMENT PROGRAM

Facility and organizational Directors shall ensure the organization regularly and systematically identifies, assesses and controls its operational safety hazards, analyzes and reduces its risks to life, property and the environment, and prevents injuries and illnesses.

1. **Identification of Hazards and Tracking of Deficiencies.** Each Director shall establish a strategy for identifying hazards in the workplace and managing a Log of Deficiencies. Potential hazards can be identified through the Job Hazard Analysis process, safety committee input, results of safety inspections, and reports of accidents and incidents. The relative risks to staff and property can then be assessed by evaluating the severity of potential

harm and the frequency of its potential occurrence. Based on this assessment, corrective actions shall be planned and prioritized. The processes and tools for effective hazard identification and risk assessment are detailed in [Chapter 4, “Safety Risk Management Program”](#) and [Chapter 5, “Safety Assessments, Log of Deficiencies and Corrective Action Plan”](#), of this *Manual*.

2. **Corrective Action Plan.** Each Director shall establish a Corrective Action Plan that will ensure that identified hazards are eliminated or mitigated promptly, to reduce risks, according to the timetables established in [Chapter 4, “Safety Risk Management Program”](#) and [Chapter 5, “Safety Assessments, Log of Deficiencies and Corrective Action Plan”](#), of this *Manual*. The Corrective Action Plan will also be used to track the progress of corrective actions through completion.
3. **Management of Change.** Each Director must institute a planned approach to identifying and addressing changes that affect risk levels to operations or environment, such as new or modified equipment, new employees, a new chemical, etc. per [Chapter 4, “Safety Risk Management Program”](#), of this *Manual*.

F. TRAINING

Directors shall participate in management level safety training and shall ensure all staff are provided the safety skills and training necessary to conduct an effective Safety Program, work safely and maintain a safe work environment per the requirements listed in [Chapter 6, “Training”](#), of this *Manual*.

1. The SI objective is to create and cultivate positive behavior to ensure safe work practices. This is a key element of the SI “zero-injury” goal. Therefore, safety information and training must be effectively and frequently communicated to ensure that a safe work environment becomes a normal and essential part of doing business.
2. Each facility and organizational Director shall ensure, in accordance with the requirements of [Chapter 6, “Training”](#), of this *Manual*, that:
 - a. Senior management attend seminars on ways and means to lead and support their Safety Program
 - b. Safety Coordinators receive necessary skills in program management and self-assessments
 - c. Safety committee members receive required skills in self-assessments, and
 - d. Staff (including Safety Coordinators and safety committee members) receive required and necessary training on the hazard controls and environmental compliance requirements specific to their job tasks.

G. INJURY/INCIDENT REPORTING AND INVESTIGATION

Directors shall ensure injuries, illnesses and incidents are reported and investigated per the requirements of [Chapter 7, "Injury/Incident Reporting and Investigation"](#), of this *Manual* and root causes of incidents are identified in order to foster learning and enhance the programs that shall prevent similar recurrence and achieve the SI zero injury goal.

1. Each Director shall establish, maintain and follow procedures to report, investigate and document accidents, incidents, near miss events and suspected hazards; and follow up to ensure corrective actions have been taken by organizational staff. Details of these processes can be found in [Chapter 7, "Injury/Incident Reporting and Investigation"](#), of this *Manual*.
2. All accidents and incidents need to be reported, no matter how small. Determining, analyzing and comprehending the causes and circumstances involved in accidents are essential in effecting changes to prevent future occurrences. The ultimate goal for the SI is zero injuries. To realize this goal requires the dedicated efforts of everyone at the SI.

H. REPORTING AND RECORDKEEPING PROCEDURES

Directors shall ensure various reporting, recordkeeping, and retention requirements specific to each element of the organization's Safety, Health, and Environmental Program will fulfill federal and state regulatory and SI requirements per [Chapter 8, "Program Reporting and Recordkeeping Procedures"](#), of this *Manual*. This data, as submitted to the appropriate authority, shall:

1. Fulfill SI, federal and state regulatory requirements,
2. Provide the basis for effective evaluation of program trends, such as injury and illness prevention efforts; hazardous waste minimization and expenditures; inspection, testing, and maintenance reports; radiation Safety Program compliance, etc.
3. Allow for early identification of undesirable trends.