Workplace Safety Program

The campus Workplace Safety Program (WSP) establishes the health and safety practices to be followed to prevent work-related injuries and illnesses. It is based on the campus Injury & Illness Prevention Program policy (IIPP), and together with the procedures and resources listed in this document, provides the implementing guidance for the IIPP.

The university empowers and expects all employees to integrate health and safety considerations into their decisions and activities. Managers and supervisors have particular responsibility for identifying and planning the controls for workplace hazards in the activities of their employees. In addition, they are responsible for allocating the resources needed to address these requirements. The goal — to prevent work-related injuries and illnesses — is best achieved through inclusive and collaborative efforts among all levels of the campus community.

The following guiding principles outline the fundamental values upon which this program is based:

1. **Everyone has a role in maintaining a healthful and safe workplace.** Each individual has a key role in ensuring their own safety and in complying with departmental safety procedures, campus policy, and governmental regulations. Supervisors who direct the activities of other individuals are responsible for ensuring that this program is adhered to in their operations and that their employees possess the experience, knowledge, skills, and abilities necessary to conduct their job duties (including research) in a safe manner in compliance with the WSP.

2. **Open two-way communication** between management and employees on health and safety issues must be actively promoted. A variety of established communication systems are available to everyone. They include safety training classes, meetings with supervisors, safety meetings and committees, anonymous safety concern reporting, and written safety communications via the web, email, and postings.

3. **Hazards are identified, evaluated, and corrected** as a routine part of planning work and, when warranted, through inspections. Using an Integrated Safety Management (ISM) approach, hazards are identified and evaluated as a routine part of planning work. Subject matter experts and resources are available from EH&S to assist with this process. Some specific hazards require advance authorizations, such as work with biohazards, toxic gases, radiation, and lasers.

   Every employee in the campus community has the right and responsibility to report a safety concern or ask for clarification regarding safety. Safety pause procedures (described in this program) are available to raise safety concerns and to gain resolution for these concerns.
4. **Work-related injuries or illnesses are treated promptly, reported, and investigated.** If a work-related injury or illness occurs, prompt first aid and medical treatment are the first priorities. Work-related injuries and illnesses are reported to supervisors and are investigated whenever appropriate. Lessons Learned are used to prevent reoccurrence by correcting unsafe or unhealthful conditions. See the Employer’s Report of Incident form to promptly report work-related injuries or illnesses.

5. **Accountability is achieved by recognizing employees who follow safe and healthful practices, and through retraining and corrective actions, when necessary.** Supervisors should both recognize good safety practices and hold employees accountable for their role(s) in safety compliance.

6. **Managers and supervisors have particular responsibility** for ensuring the safety of their employees, including providing appropriate safety training, procedures, personal protective equipment, and assessment of workspaces/workstations.

7. **The university’s WSP and related programs are documented** and readily available to all employees in a variety of formats such as safety policies and manuals, reports on Lessons Learned, Fact Sheets, Job Safety Analysis (JSA) documents, Standard Operating Procedures (SOP), and inspections.

### Procedures

1. **Responsibilities**

   Managers and supervisors are responsible for implementing the WSP. Specific responsibilities are highlighted under the “Responsibilities” section of this document.

2. **Communicating About Health and Safety**

   Open two-way communication between management and employees on health and safety issues is essential to an injury-free, productive workplace. The following system of communication is designed to facilitate a continuous flow of health and safety information between management and employees in a form that is readily understandable.

   **A. Mandatory Safety Training:** All employees are required to complete Workplace Safety Program training and supervisors are required to complete the online course titled “Supervisor Safety.” Supervisors must also determine the safety training courses that are required for their employees and update training appropriate to new job duties and new hazards. EH&S has several online tools available to assist with a safety training needs assessment (Safety Training Assessment & Records Tool - START, the Research Administration and Compliance training table, and the EH&S training website.)
B. **Supervisory Communications:** Principal Investigators, managers, and supervisors are responsible for modeling and communicating UC Berkeley’s commitment to health and safety. They are also responsible for ensuring that health and safety regulations and policies are followed and that all activities are performed with acceptable operating standards as identified in the health and safety programs and procedures relevant to the department.

C. **Written Safety Communications:** The [EH&S website](#) contains safety information applicable to all employees and types of work including academic research. Some examples are the [Laboratory Safety Program](#) (including [chemical safety](#) and [Chemical Hygiene Plan](#)), Biosafety Program, Shop Safety Program, Radiation Safety Program, and Laser Safety Program. The [Building Emergency Plan](#) contains contact information for the people in lead safety roles in each building. In addition, written safety notifications are distributed via email, posted on websites, or posted in buildings. Other methods of communicating pertinent health and safety information to managers and supervisors may include [Lessons Learned](#), [EH&S Fact Sheets](#), memos, and safety meeting notes.

D. **Communicating Safety Concerns:** All employees are required to report unsafe conditions to a supervisor, Department Safety Coordinator, or the Office of Environment, Health and Safety, as soon as is reasonably possible. The following list of options for reporting safety concerns is provided in order of priority and includes the option to report a concern anonymously:

1. Tell your supervisor.
2. Tell your Lab Safety Coordinator (if designated) and the Department Safety Coordinator.
3. Fill out a “Report of Unsafe Condition or Hazard” form. The form may be submitted anonymously.
4. Contact the Office of Environment, Health and Safety (EH&S) at 510-642-3073 or ehs@berkeley.edu.
5. Visit the [EH&S website](#) and click the “Anonymously report a safety concern” button to report your concern.
6. Contact Human Resources/Campus Shared Services and/or your union representative.

No employee will be retaliated against for reporting hazards or potential hazards, or for making suggestions related to health and safety. In the case of a condition, behavior, or plan that is believed to be unsafe and that requires immediate action, a “safety pause” may be requested. The procedure for a safety pause and the related escalation steps are described in the section below titled 3.C. Correcting Work-related Hazards.
E. Departmental or Building Safety Meetings: Departmental or building safety meetings are another way to disseminate safety information and to encourage discussion of safety-related issues freely and openly among managers, supervisors, and employees. Safety meetings of this type, initiated by department or building managers, may be structured and scheduled according to the needs of the unit. Topics for these meetings may include, but are not limited to, compliance with safety training, self-assessments/inspections, safety awareness campaigns, injury trends, accident investigations, safety policy recommendations, and Lessons Learned. Meeting notes should be shared throughout the department or building.

F. Campus Safety Committees and Safety Policy: Campus research oversight committees are appointed by the Vice Chancellor of Research or by other responsible parties. Routine meetings are held to review advance authorization requests, make policy decisions and recommendations, and resolve compliance issues. Written minutes are prepared and made available to affected employees. A variety of other campus safety committees address safety and encourage employee participation, including health & safety committees provided for by the applicable union contracts. They all provide vital forums for employees to express, exchange, and explore safety solutions. A list of campus safety committees is available online.

Because there are other means of communication outlined in this safety program, departments are not required to have safety committee meetings. However, departments, buildings, or other units with similar interests are encouraged to have safety committee meetings at a frequency and with a structure that is appropriate for them. To maintain effectiveness, safety committees should meet at least twice a year.

3. Identifying and Controlling Workplace Hazards

A. Integrated Safety Management: The university prevents work-related injuries and illnesses through the Integrated Safety Management (ISM) approach to planning work activities as follows:

I. Defining the Work: Outline the scope of the work.

II. Analyze Hazards: Based on the scope of the work, hazards are identified and analyzed. A Job Safety Analysis (JSA) online library and Safety Data Sheets (SDS) are available to help with this process. Additional information on hazardous materials can also be found in the campus Hazard Communication Plan flip chart for shops and in the Chemical Hygiene Plan flip chart for each laboratory. The ergonomic workstation checklist can be used to help analyze computer workstations. Off-site work hazards also need to be evaluated.

III. Develop Controls: Controls include administrative controls (such as procedures, signs, and training), engineered controls, and personal protective equipment. These controls are developed and implemented to address hazards in the
workplace using a tiered approach. Low-hazard work or risks common to everyday life, such as routine office work or driving a university vehicle, may require only minimal planning to assure that standard work-related hazards are addressed (e.g., office ergonomics and safe driving practices). As the complexity of the operation and the associated hazard level increase, such as work in a shop or lab, the degree of planning increases. Waste products and streams (the route or process that products such as hazardous solids, liquids and gaseous materials take on the way to eventual disposal) are anticipated and kept to a minimum. Plausible emergencies are considered and detailed planning may be necessary. Controls for off-site work hazards and plausible emergencies should be included.

Certain activities require advance authorization, consultation, and training before performing the work. See the EH&S website for a list of activities requiring advance authorization.

IV. **Implement the Work**: Perform the planned work using the controls that have been identified.

V. **Feedback and Improvement**: Employees are expected to continually evaluate hazards and adjust the controls used to ensure that they continue to be effective. Safe work practices and behaviors are to be evaluated as a factor of an employee’s performance. Lack of compliance with health and safety policies, procedures, and expectations may result in a corrective action by the supervisor.

ISM Standard Operating Procedure (SOP) templates are available at the EH&S website to assist with writing SOPs using the ISM process.

B. **EH&S Inspections and Self-assessments**: EH&S performs routine inspections of laboratory and shop work settings and other areas as needed. Results of the inspections are provided in writing and any required corrective actions are tracked. Groups are expected to annually self-assess their workplace to assist in identifying and correcting hazards in work settings. Self-assessment forms are available from the EH&S website. Departments and groups are encouraged to share the results of their annual self-assessments with the Department Safety Coordinator and applicable safety-related groups.
C. Correcting Work-related Hazards: Work-related hazards should be corrected as quickly as possible after they are identified. Employees working in an unsafe manner should be stopped and retrained on safe practices. Unsafe equipment (including equipment that presents ergonomic risks) should be repaired or replaced. Where possible, hazardous materials should be replaced with less hazardous substances, and appropriate personal protective equipment should be provided.

Upon discovery, the area around a potentially imminent hazard should be cleared, barricaded, and posted with warning signs, and others should be notified of the situation. EH&S can provide consultation in assessing potentially unhealthy or unsafe conditions and can recommend corrective actions.

When safety disagreements of immediate concern arise, the following procedures are in place to encourage positive communication and efficient resolution of the concern. Issues that remain unresolved are elevated to the appropriate management level or research oversight committee.

Please be advised that some collective bargaining agreements have specific language pertaining to this section. Therefore, for represented employees it is important to review the health and safety provisions of the relevant collective bargaining agreements.

Safety Pause: All employees have the ability to request a safety pause to address a condition, behavior, or plan that they believe to be unsafe and that requires immediate action. This includes a situation where an employee has not received adequate instruction, personal protective equipment, and/or safety equipment. This allows employees to help prevent incidents and ensures that employees do not feel required to carry out tasks that they feel are unsafe.

A good faith request for a safety pause made under this program constitutes a "protected disclosure" under the University of California Whistleblower Protection Policy.

During a safety pause the following steps are taken:

I. Request a safety pause in a safe manner. Alert the person who is involved in or responsible for the perceived unsafe condition, behavior, or plan as soon as practicable.

II. Respectfully explain what is perceived as unsafe and express concern for the safety of the individuals involved.

III. Pause the work and attempt to resolve the alleged unsafe condition, behavior, or plan through discussion (and possible action) which should include the responsible person-in-charge, lead person, or supervisor. Resolution at the safety pause level includes acknowledgement by the person who called for the safety
pause that the situation is now acceptable as planned. The safety pause is concluded and the work may now proceed. If the person who called for the safety pause is not satisfied by the resolution, the matter will proceed to the escalation steps set forth below.

When a safety pause is called, it is the obligation of everyone associated with the work of concern to respect the safety pause and to participate in the resolution as appropriate.

The involved parties may request assistance from EH&S at any point in the safety pause procedure for guidance on the interpretation and application of safety practices, laws, regulations, and codes.

A safety pause is an informal process intended to encourage dialogue among the involved parties. If the parties cannot resolve the alleged safety issue, the safety issue can be taken to the next level (escalation steps) where management has the authority to make a final determination. If additional safety pause requests are made on the same topic, and the issue has already been resolved and/or a determination has been made that the work may proceed as planned, management has the authority to direct employees to continue the work. Management makes the final determination on whether a safety pause addresses a previously resolved issue.

**Escalation Steps:** The responsible supervisor is advised of the alleged unsafe condition, behavior, or plan for resolution (if not already involved). EH&S has the authority to determine if the regulatory standards have been met and to recommend appropriate action to the responsible supervisor. If communication with the responsible supervisor (including principal investigators) fails to correct the condition within a reasonable amount of time, the issue is elevated to the appropriate Director or Department Chair, followed by the applicable Senior Executive or Dean. Finally, any concerns that remain unresolved are conveyed to the appropriate Vice Chancellor(s). Management has the authority to make a final determination regarding the extent to which an issue is escalated.

Where appropriate, the applicable research oversight committee is also involved. Some of these committees are charged with providing institutional approval for specific types of work (e.g., the use of radioactive materials, biohazards, lasers, etc.); these committees may modify or withdraw their approval of the work, independent of or in combination with the escalation procedures described above.

**Stop Work Authority:** In addition to supervisors and research oversight committees, EH&S Specialists have the authority to stop work they believe to be an imminent hazard to life, health, or property. Upon use of this authority, EH&S will immediately notify the chain of command, up to and including the appropriate Vice Chancellor(s).

**Disclosure Protections:** Under the University of California Whistleblower Protection Policy, no employee shall be discriminated against for good faith reporting of health
and safety hazards to UC Berkeley or to the appropriate government agencies. All supervisors shall encourage the reporting of workplace hazards to management or EH&S.

**Anonymous Hazard Reporting:** Anyone in the campus community may report a hazard or safety concern anonymously by calling EH&S at 510-642-3073 or by submitting a safety concern on the [EH&S website](#).

### 4. Treating, Reporting, and Investigating Work-related Injuries, Illnesses, and Incidents

Employees who experience a work-related injury or illness must immediately report the incident to their supervisor. Prompt first aid and medical treatment, when appropriate, is the first priority. Supervisors must ensure that the [Employer’s Report of Incident form](#) is completed and submitted to [Be Well at Work - Disability Management](#) (within University Health Services). Departments with access to the UCOP system-wide online reporting tool [Employer’s First Report](#) shall use it for reporting and following up on incidents. EH&S must be notified immediately in case of serious injury (fatality, inpatient hospitalization, loss of any member of the body, or permanent disfigurement). If the injury occurs at night, EH&S should be notified via the UC Police Department.

If emergency medical treatment is needed, call 911 (or 510-643-3333 from a cell phone) immediately. For serious, acute, non-emergent injuries or illnesses (e.g., a laceration requiring stitches, fractured bone, ankle sprain), urgent care is available on a drop-in basis at the [Urgent Care Clinic](#) at the University Health Services, Tang Center Monday through Friday; Saturday hours are limited. On weekends and after hours, proceed to the [Alta Bates Emergency Department](#).

For injuries not requiring immediate treatment, including chronic illnesses or injuries that have been going on for longer than 2 weeks, an employee may be treated at the [Occupational Health Clinic (OHC)](#) by appointment: (510) 642-6891.

In the event of a work-related death, serious injury, or illness, the site of the accident must be preserved for investigation and EH&S will lead the investigation team and the production of the investigative report. In the event of other significant incidents, with or without injuries that have broad campus impact or include hospitalization, the supervisor will lead the investigation but EH&S must be a part of the accident investigation team. For other incidents beyond minor first aid, supervisors should conduct an investigation as appropriate. EH&S and Department Safety Coordinators are resources to help resolve safety issues and to assist with investigations.

After documenting the findings and recommended corrective actions, the supervisor will implement corrective actions. To prevent recurrence, [Lessons Learned](#) from incidents must be communicated as appropriate to the campus community when work could involve similar situations.
5. **Ensuring Compliance**

Each UC Berkeley employee is responsible for complying with safe work practices, applicable regulations, campus policies, and departmental safety procedures. Department and campus recognition programs increase awareness and support safety compliance. Supervisors are required to provide feedback on employee performance and to give a reasonable opportunity to employees to correct unsafe behavior. Willful and intentional noncompliance, or repeated failure to comply, may result in disciplinary measures up to and including termination. In accordance with the applicable personnel policy, labor contract, or student or faculty Code of Conduct, standard progressive disciplinary measures may be applicable in other situations.

6. **Safety Training Procedures and Personal Protective Equipment**

Managers and supervisors are responsible for ensuring that everyone working in their operations is appropriately trained and equipped to identify and mitigate potential hazards. This may include initial safety training, refresher training, and job-specific training when new processes, procedures, or equipment are introduced.

Assigned mandatory safety training must be completed prior to starting work. The required safety compliance training is described by topic on the [EH&S website](https://ehs.berkeley.edu), through the Safety Training Assessment and Records Tool (START) application, and at the [UC Berkeley Research Administration and Compliance safety training table](https://research-administrative-activities.berkeley.edu/safety/training). EH&S provides many safety training courses and can also provide safety training consultations to assist supervisors. The University Health Service [Be Well at Work – Ergonomics program](https://health.berkeley.edu/ergonomics) also provides additional training courses specifically on ergonomics.

The appropriate personal protective equipment must be provided when needed. See the EH&S website for information about how to obtain your [personal protective equipment (PPE)](https://ehs.berkeley.edu/whs/ppe).

7. **Record Keeping**

The university’s Workplace Safety Program is in itself documentation of the campus IIPP. Additional safety information, safety manuals, and safety documents, including Safety Data Sheets, Lessons Learned, Fact Sheets, and Job Safety Analysis documents, are available on the campus [EH&S website](https://ehs.berkeley.edu). Department documents related to the WSP should be kept in a convenient location for record keeping within a work unit or department. Each department or work unit must actively implement the WSP and maintain records as proof of compliance. These records are outlined below and must be available for inspection by campus auditors, Cal/OSHA, and any inquiring member of the department/unit upon request:

- Records of EH&S inspections, workplace self-assessments, computer workstation assessments, reports of identified unsafe conditions or work practices, and corrective actions completed.
- Accident, injury, or illness investigation reports.
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- Notes from safety meetings.
- Safety training records (including topic, date, and provider) for EH&S-provided training is recorded in the UC Learning Center. Department specific training records may be kept with the supervisor or department.

Responsibilities

Everyone:
- Has some responsibility for their workplace health and safety. While this policy and related procedures are mandatory for all UC Berkeley employees, this policy also reflects recommended behavior for all members of the campus community including non-employee students, volunteers, visitors, and the public.

All Employees:
- Comply with applicable health and safety laws and regulations, university policies, and safe work practices. Complete required safety training.
- Identify hazards and control measures to be taken whenever new operations, protocols, or materials are planned. Review the Building Emergency Plan and know what to do in the event of an emergency such as a fire or earthquake.
- May request a safety pause when appropriate. Notify the affected employees and the appropriate supervisor whenever unsafe conditions are encountered. Inform management right away if there is an injury on the job or a work-related illness.

Research Oversight Committees:
- Review and authorize certain high-hazard research activities (lasers, radioactive materials, toxic gases, biological materials, etc.). Provide guidance and enforce regulatory compliance.
- Stop work if the committee determines that the work presents an unacceptable hazard to life, health, or property.

Office of Environment, Health & Safety:
- Develops health and safety programs, guidance, and goals to assist the university in complying with safe practices, laws and regulations. Provides technical assistance to campus units on hazard identification and assessment, required or recommended controls, and methods of implementation. Provides certain training and training materials on work-related safety and compliance.
- Assists campus units in preparation for potential emergencies. Reviews construction and renovation plans for safe and compliant design.
- Stops work upon notification or observation of an imminent hazard to life, health, or property including a significant threat to the environment. Represents the campus during inspections by regulatory authorities. Advises, participates in, or leads incident investigations depending on the severity and impact of the incident.

Director/Department Chairperson:
Promotes a positive safety culture within the department or group. Allocates resources as needed to effectively address departmental safety issues and appoints and supports a Department Safety Coordinator. Ensures facility-related safety concerns are addressed by the appropriate campus unit(s).

Encourages the prompt reporting of health and safety concerns without fear of reprisal and actively works to resolve safety concerns raised to the departmental level.

Principal Investigators/Managers/Supervisors:
- Coach subordinates on safe practices. Ensure that hazards are identified, evaluated, and controlled before activities are initiated and whenever an issue is raised. (Written procedures are required for certain activities and may be recommended for others.)
- Attend training on the health and safety hazards to which employees under their immediate direction and control may be exposed.
- Ensure that employees have successfully completed documented safety training. Evaluate, recognize, and coach employees on their adherence to health and safety program requirements as part of their ongoing job performance management.
- Enforce safety procedures, policies, and regulations through standard management practices up to and including progressive disciplinary action. Stop work if it is believed that there is an imminent hazard to life, health, or property. Investigate all injuries to identify and eliminate the cause(s).

Department Safety Coordinator (DSC):
- Communicates safety information and coordinates responses to employee health or safety related concerns. Ensures that Department Safety Committee and/or management are aware of any known safety-related issues within the department, and serves as the liaison to EH&S.
- Assists in the coordination of required health and safety training within the department. Maintains the safety meeting notes, as well as department safety postings and related safety documentation.
- Ensures that the [Building Emergency Plan](#) accurately reflects the work that is done in the building.

University Health Services:
- Treats injured employees. Maintains records and provides data upon request regarding work-related injuries and trends.
- Supports supervisors in returning employees to work as soon as possible following an injury.

Independent Contractors
- Adhere to the health and safety requirements specified in their contract under a defined scope of work.
- Monitor their work site to identify and correct any hazards.

Glossary
Advance Authorization: Prior consultation and approval that is required before proceeding with certain activities or use of certain hazardous substances or equipment. Examples that require advance authorization are: work with bio-hazardous substances, radiation, or lasers; use of internal combustion equipment; shipment of hazardous materials; use of open flames; and special events. See the EH&S website for a list of activities that may require advance authorization.

Building Emergency Plan: A building-specific plan that names the employees responsible for specific roles during an emergency. A Building Emergency Plan is required for each building and is maintained by the Building Coordinator. The plan for each building is available through the EH&S website for review.

Campus Unit: A department, office, program, institute, center, project, or other academic or administrative entity that is part of the University of California, Berkeley.

Chemical Hygiene Plan: The Chemical Hygiene Plan (CHP) is the fundamental chemical safety plan for all campus laboratories and is a Cal/OSHA requirement. All UC Berkeley laboratory personnel who work with laboratory chemicals must know and follow the guidance given in the online CHP component and the CHP flip chart, including the topics of hazardous chemicals/materials, controlling exposures, required PPE, Standard Operating Procedures, and lab safety resources.

Escalation Steps: Procedures for how to escalate safety concerns through the appropriate management chain to seek resolution.

Engineered Controls: Controls to mitigate hazards that are engineered to address the hazard, such as a chemical fume hood or shielding for a radioactive source.

Ergonomics: The science of fitting jobs to people by focusing on designing workstations, tools, and job tasks for safety and efficiency.

Hazard: Any situation or condition, identified or unidentified, that may cause injury, damage, or loss to people, property, university business, and/or the environment.

Imminent Hazard: A condition or practice that creates a hazard which could reasonably be expected to cause serious physical harm, death, or significant damage to property. This includes health hazards where there is a reasonable expectation that toxic substances are present and exposure to them will cause a potential shortening of life or a significant reduction in physical or mental capacity.

Integrated Safety Management: Integrated Safety Management (ISM) is an approach to safety that requires definition of the work being done, analysis of the hazards associated with the work, and development of controls to address the hazards. After implementing the work, feedback is sought for the purpose of continuous improvement.
**Personal Protective Equipment (PPE):** Control that is used to mitigate a hazard by providing personal protection of one’s body to prevent exposure to hazardous substances or equipment. Examples of PPE include lab coats, safety glasses, and protective shoes.

**Safety Pause:** A safety pause is a request for a brief pause to express concern for a safety issue and to seek resolution. All employees have the ability to request a safety pause if they identify a condition, behavior, or plan that they believe to be unsafe. If the safety pause does not resolve the issue, the issue must be escalated up the management chain for review. Some collective bargaining agreements specifically address this issue.

**Serious Injury Incident:** A serious injury or illness includes loss of any member of the body, any serious degree of permanent disfigurement, or any injury or illness that requires hospitalization for a period in excess of 24 hours for something other than medical observation.

**Stop Work Authority:** Supervisors and EH&S Specialists have the authority to stop work they believe is an imminent hazard to life, health, or property. Upon use of this authority, EH&S immediately notifies the chain of command, up to and including the appropriate Vice Chancellor(s).

**Supervisor:** An individual who supervises the work of a department with responsibility for quality and quantity of work. They participate in the selection, development, and evaluation of staff to ensure the efficient operation of the function, as well as supervise and follow internal policies and procedures. The definition includes faculty who have these duties.

**Tiered Approach:** Controls are designed in proportion to the hazards associated with the work. As the hazards associated with the work increase, the degree of planning increases to ensure that adequate controls are implemented to mitigate the hazards.

**Toxic gas:** Toxic gases are gases that are harmful to living things. Certain research and maintenance-related activities or processes, such as chemical mixing and welding, can result in the production or release of toxic gases. Toxicity often increases with higher concentration levels. They may also result from the biological chemical breakdown of a substance that is being stored.

**Waste stream:** Waste is generated by domestic and industrial activities and the waste stream represents the life-cycle of waste up to and including its eventual disposal. Waste can be further divided into solid, liquids and gaseous wastes. Certain types of waste are classed as hazardous and there is legislation governing the disposal of all types of waste in the U.S., including specific regulations for the handling and disposal of hazardous waste. The intervention of recycling may act to lessen the content of a waste stream as it moves down the line.

**Whistle Blower Protection Policy:** A protected disclosure is any good faith communication, oral or written, formal or informal, that discloses (or demonstrates the intention to disclose) information about: an improper governmental activity; or any condition that may significantly threaten the health or safety of employees or the public, if the disclosure or intention to disclose was made for the purpose of remedying that condition.
Workplace Safety Program (WSP): Safety program that outlines the responsibilities and procedures on how to: communicate about health and safety; identify and control workplace hazards; perform inspections and self-assessments; correct work-related hazards; treat, report, and investigate work-related injuries, illnesses, and incidents; ensure compliance; provide safety training; and maintain recordkeeping. The Workplace Safety Program is the university’s Injury and Illness Prevention Program as defined and required in state administrative law under the California Code of Regulations.

Related Documents, Policies and Resources

- Be Well at Work - Disability Management
- Be Well at Work - Ergonomics
- Campus Shared Services – Career and Limited Follow-up Information
- Environment, Health & Safety
- Enforcement of Safety Standards in Academic Environments Policy
- Injury and Illness Prevention Program Policy
- Labor Relations website
- Personal Protective Equipment Policy
- UC Learning Center
- University Health Services website
- Whistleblower Policy