DEPARTMENT OF THE ARMY
US ARMY INSTALLATION MANAGEMENT COMMAND
HEADQUARTERS, UNITED STATES ARMY GARRISON, FORT STEWART / HUNTER ARMY AIRFIELD
954 WILLIAM H. WILSON AVENUE
FORT STEWART, GEORGIA 31314-5000

REPLY TO
ATTENTION OF

IMSH-ZA

FEB 09 2015

MEMORANDUM FOR All US Army Fort Stewart/Hunter Army Airfield Civilian Employees

SUBJECT: US Army Garrison, Fort Stewart/Hunter Army Airfield (FS/HAAF) Policy Memorandum #40, Command Safety Program for Civilian Employees

1. Each civilian employee working under the auspices of the United States Army is guaranteed an environment free of workplace hazards and a workplace which is in strict conformity with US Government OSHA Safety Regulations.

2. I encourage each employee to avail themselves of the safety training opportunities set forth in the Employee Safety and Health Training Program (ESHP) and expect Supervisors and Commanders to ensure full compliance with all written program requirements.

3. A robust and timely accident reporting system is of paramount importance in the prevention of workplace accidents. I expect all members of USAG-FS/HAAF to report all accidents in a timely manner. Commanders, Department Heads, Supervisors and Civilian Employees will adhere to the guidelines contained in the Command Safety Program for Civilian Employees Standard Operating Procedures (SOP) in addressing, reporting and follow-up of all Civilian Employee accidents.

4. The rapid identification of workplace hazards and the timely investigation of Civilian Employee accidents is critical to cohesiveness and teamwork within our work areas and units. Our employees are our most important assets. Their health and wellbeing are critical to mission success.

5. My point of contact for further information or guidance is the USAG-FS/HAAF Occupational Health and Safety Director at (912) 767-8132.

KEVIN F. GREGORY
COL, FA
Commanding

Encl:
SOP - Command Safety Program
For Civilian Employees

IMCOM
SOLDIERS • FAMILIES • CIVILIANS

COMMAND SAFETY PROGRAM FOR CIVILIAN EMPLOYEES

US ARMY GARRISON
FORT STEWART/HUNTER ARMY AIRFIELD
OCCUPATIONAL HEALTH and SAFETY OFFICE
Office (912) 767-8132

***We are* THE ARMY'S HOME**

STANDING OPERATING PROCEDURE (SOP)

SUBJECT: Command Safety Program for Civilian Employees

1. Purpose. To comply with Federal Law and to ensure that employees enjoy a safe environment, free from occupational health and safety hazards. Further, to ensure timely accident reporting and investigations and ensure timely filing of Workmen's Compensation claims when appropriate.

2. Applicability. This SOP applies to United States Army Fort Stewart/Hunter Army Airfield staff offices, subordinate commands, and assigned, attached and other units and activities, for which the United States Army is their executive agency, to include all Army activities operating within the USAG-FS/HAAF area of responsibility employing Civilian Employees.

3. References: AR 385-10, The Army Safety Program, 27 November 2013.

4. Responsibilities.

a. Civilian Employees:

(1) Initiates report of accident to employee's supervisor, as soon as possible, after accident occurrence, utilizing the accident reporting procedures enumerated in Annex A, *"Accident Reporting/ Notification Procedures Flowchart for Supervisors."*

(2) Will keep the employee's supervisor current on any medical assistance rendered at the time of, or as a result of, the accident.

(3) Will attend all Occupational Safety and Health classes as directed by their supervisor and as enumerated in Annex D, *"Employee Safety and Health Training Plan".*

b. Employee's Supervisor:

(1) Once notified of an employee accident will ensure that the employee receives medical assistance if required.

(2) Will make a telephonic notification of the accident to the USAG-FS/HAAF Safety Office at (912) 767-4858, utilizing the format provided at Annex B, *"Telephonic Notification of Ground Accident".*

(3) Within seven working days will revisit the employee to determine employee's work status and ascertain needs which the employee may have as a direct result of the accident. A telephonic update will be provided to the USAG-FS/HAAF Safety Office of any changes in duty status or medical condition once it becomes known to the supervisor. The supervisor will maintain periodic contact with the employee until the employee returns to full duty status.

(4) The supervisor will work closely with the USAG-FS/HAAF Safety Office accident investigator ensuring that the accident site, employee training records and witnesses to the accident are available to the investigator.

(5) The supervisor will ensure that all employees for whom they are responsible attend the appropriate safety courses as enumerated in Annex D, *"Employee Safety and Health Training Plan".* Individual employee training records will be maintained by the supervisor for employees they supervise. Should the employee transfer within the organization the training record will accompany them.

c. USAG-FS/HAAF Office of Occupational Health and Safety:

(1) Will administer the Safety Program for Civilian Employees.

(2) Will conduct accident investigations on all reported workplace injuries.

(3) Will contact appropriate USAG-FS/HAAF Command Group personnel of all employee accidents within twenty-four hours of initial report being received, and will further advise of any adverse conditions related to the accident.

(4) Will complete a final *"Employee Accident/Incident Report"* (Annex C) and forward the report to the Civilian Personnel Advisory Center (CPAC) Federal Employees' Compensation Act (FECA) Representative, with findings and recommendations when appropriate, upon completion of the investigation.

(5) Will conduct all training as enumerated in Annex D, *"Employee Safety and Health Training Plan".*

(6) The USAG-FS/HAAF Director of Occupational Health and Safety will report statistics pertaining to the frequency, type of accident, location of accident, and command impact as the result of the accident at the biannual Safety and Occupational Health Council meetings.

(7) The USAG-FS/HAAF Safety Office will ensure that all required remedial actions required, related to an accident, are completed in a timely and appropriate manner in order to prevent further accident occurrences related to the type of accident reported.

(8) Will conduct an annual inspection of all Civilian Employee work spaces in accordance with the most recent Occupational Safety and Health Administration (OSHA) Regulations.

5. The point of contact for this SOP is the undersigned at (912) 767-8132.

JAMES R. BROUILLETTE
Director
USAG-FS/HAAF Occupational Health and Safety

Annex:
A. Accident Reporting/ Notification Procedures Flowchart for Supervisors
B. Telephonic Notification of Ground Accident
C. USAG-FS/HAAF Employee Safety and Health Training Plan
D. Employee Accident/Incident Report

Accident Reporting/Notification Procedures

ANNEX A

Accident/Incident Occurs

Injured employee seeks or requires medical attention

Yes →

Injured employee immediately notifies supervisor of accident. Supervisor (or other responsible person) calls 911 or DSN:767-4895/2965 (MP Desk) if emergency services care/transport needed, or otherwise ensures injured employee is transported to appropriate health care facility. Supervisor/other responsible person immediately notifies USAG-FS/HAAF Safety Office, 767-4858 or 767-8132.

No →

Supervisor completes an initial online Accident/Incident Report. See USAG-FS/HAAF Safety share point Safety web site for on-line form, or visit the Safety Office. The report must be initiated immediately by the supervisor. The USAG-FS/HAAF Safety Office will initiate an accident investigation within 24 hours of receipt. incident report.

Injury requires in-patient hospitalization or results in death.

No →

The supervisor/other responsible person notifies USAG-FS/HAAF Safety Office (767-4858) when injured employee is treated and released back to work or home.

Yes ↓

The supervisor/other responsible person in supervisory role, will immediately report it to the USAG-FS/HAAF Safety Office. **(The report to USAG-FS/HAAF Safety Director, DSN: 767-8132 or BB 912-271-7381) must be made immediately, but in no event later than eight hours, after the accident has occurred.** USAG-FS/HAAF Safety Office, once notified by the supervisor/other responsible person, will immediately report the accident and in-patient hospitalization to the USAG-FS/HAAF Command Group The USAG-FS/HAAF Safety Office will immediately initiate an accident investigation.

↓

Supervisor/other responsible person maintains contact with the patient and will notify USAG-FS/HAAF Safety Office of patient's discharge. If patient is incapacitated, the supervisor/other responsible person will make follow up contact with hospital regarding patient status and will notify USAG-FS/HAAF Safety Office of any changes in patient progress/status.

↓

The USAG-FS/HAAF Safety Office will forward a copy of the completed accident investigation and Form CA1 or L202, whichever is applicable, for each incident, within five (5) working days of accident/incident occurrence to the CPAC FECA representative.

EMPLOYEE WORKSHEET FOR TELEPHONIC NOTIFICATION OF GROUND ACCIDENT

Immediately notify Installation Safety telephonically of all Employee accidents Phone number is:
DSN 767-7878

SHADED BLOCKS ARE FOR ISO USE ONLY	A. ISO CASE NUMBER	B. TIME AND DATE OPS RECEIVED THIS REPORT			
		a. Year	b. Month	c. Day	d. Time *(local)*

1. POINT OF CONTACT FOR ACCIDENT INFORMATION	a. Name		
b. Duty ☐ Commander ☐ Safety Officer ☐ Other *(Specify)*	c. Phone Number	DSN: -	Commercial: ( ) -

TYPE ACCIDENT	3. TIME AND DATE OF ACCIDENT				4. PERIOD OF DAY	5. ON/OFF DUTY	6. TYPE OF EQUIPMENT/ MATERIAL INVOLVED
Ground ☐ Vehicle ☐ Other ☐	a. Year	b. Month	c. Day	d. Time *(local)*	☐ Day ☐ Night	☐ On-duty ☐ Off-duty	

7. UNIT	8. MACOM

9. EXACT ACCIDENT LOCATION

10. ON-POST / OFF POST?	11. MILITARY INSTALLATION NEAREST ACCIDENT SITE
☐ On-Post ☐ Off-Post	

CHECK "YES" or "NO" FOR QUESTIONS 13 THROUGH 17	YES	NO
12. EXPLOSIVES/HAZARDOUS/SENSITIVE MATERIALS INVOLVED		
13. IF YES TO #12, ARE THEY SECURE?		
14. ACCIDENT SITE SECURED IAW DA PAM 385-40?		
15. HAS ACCIDENT SCENE BEEN DISTURBED?		
16. IF YES TO #15, WERE PHOTOS ETC. MADE BEFORE DISTURBING THE SCENE?		

17. WEATHER CONDITIONS

18. PERSONNEL INVOLVED	
b. Total No. of Personnel	
19. INJURIES *(Enter # of Each)* ____ Fatalities ____ Non-Fatal Injuries	As soon as possible, the following additional information is required on all injured personnel: name, personnel classification, degree of injury.

20. ACCIDENT SYNOPSIS (What Happened)

21. NEWS MEDIA AWARE OF ACCIDENT	
☐ Yes ☐ No	

ANNEX B

Annex C USAG-FS/HAAF Employee Safety and Health Training Plan

Training Requirements

1. **Introduction:**

   a. This annex establishes the training requirements for safety support during Army garrison operations and is intended to reduce losses of manpower and equipment, thus protecting the workforce and conserving combat power.

2. **Required safety training:**

   a. All Army and civilian personnel will be provided training in those areas needed to safely and efficiently execute their task. This training will specifically address—

   (1) The PPE required.
   (2) General safety requirements particular to the operation.
   (3) Risk mitigation techniques and controls.
   (4) Special safety requirements.
   (5) Lessons learned from previous operations.
   (6) Procedures for reporting and responding to accidents.
   (7) Identification of all known and perceived hazards.

3. **Risk management training:**

   a. Leaders and managers are responsible for integrating RM into all Army processes and operations. SOH staffs will provide RM training, tools, and other related assistance. Risk reduction through application of controls by training, procedures, cautions, and warnings help reduce accident probability.

   b. Leaders and managers are to ensure that the RM process is incorporated into daily operational plans/activities.

4. **Safety and occupational health training:**

   a. All Active Army, ARNG, USAR, and DA Civilian employees will be provided the training and education necessary to achieve the skills listed in the paragraphs below. This training, as a minimum, will be according to 29 CFR 1960. Link to 29 CFR 1960 is: http://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title29/29cfr1960_main_02.tpl

   b. Each agency will provide SOH training for safety and health specialists through courses, laboratory experiences, field study, and other formal learning experiences. This training prepares them to perform the necessary technical monitoring, consulting, testing, inspecting, designing, and other

tasks related to program development and implementation, as well as hazard recognition; evaluation and control; equipment and facility design; standards; analysis of accident, injury, and illness data; and other related tasks.

c. Each agency will provide appropriate safety and health training for employees including specialized job safety and health training appropriate to the work performed by the employee (for example, clerical, printing, welding, crane operation, chemical analysis, and computer operations). Such training also will inform employees of the agency's SOH Program, with emphasis on the employees' rights and responsibilities.

5. **Leadership training:**

a. Army leaders, commanders, directors, managers, and supervisors will be provided specialized training to enable them to properly execute their SOH and RM leadership responsibilities.

b. Additional training is available for supervisors (The Supervisor's Safety Course) https://safety.army.mil/TRAININGCOURSES/OnlineTraining.aspx and managers (The Manager's Safety Course) at the ALSM web site, https://safety.army.mil/TRAININGCOURSES/OnlineTraining.aspx a record of training will be retained in the employees training file.

6. **Additional duty/collateral duty safety personnel:**

a. Additional duty/collateral duty safety personnel are required to complete an online course, either the Additional Duty Safety Course (ADSC) or the Collateral Duty Safety Course (CDSC) https://safety.army.mil/TRAININGCOURSES/OnlineTraining.aspx These courses focus on safety responsibilities for additional duty/collateral duty safety personnel at various levels of command. The ADSC/CDSC establishes the Army standard for trained and qualified additional/collateral duty safety personnel. Course completion will also satisfy the requirements for completing a local unit safety officer course.

b. The Installation safety office will provide additional training to ADSOs/collateral duty safety officers (CDSOs) to ensure that they can sufficiently perform their ADSO/CDSO duties. Training should include command and local safety occupational health requirements; evaluation and abatement of local hazards; local procedures for reporting and investigating allegations of reprisals; the recognition of local potential hazardous conditions and environments; identification and use of Army, command, and local required SOH standards; and other appropriate rules and regulations that will assist ADSOs/CDSOs in performing their duties.

c. Additional/collateral duty safety personnel are required to complete the ADSC/CDSC within 30 days of appointment. ARNG and USAR personnel are afforded 90 days to complete the courses. The new ADSC/CDSC is hosted on the USACR/Safety Center online training management system. The USACR/Safety Center course certificates and resource compact disks are provided to users upon successful completion of the course.

7. **Educational material:**

a. Safety education materials including: posters, films, technical publications, and pamphlets are proven cost effective safety awareness tools and, therefore, will be budgeted for and used at all levels of the Army to promote safety. This provision may not be used to purchase memento or souvenir items. Educational items must contribute to the Army's safety mission. The USACR/Safety Center will provide educational material at the following link. https://safety.army.mil/MEDIA.aspx

8. **Specialized training requirements:**

a. The Commander, USACR/Safety Center is responsible for administering a program to provide safety training and education that meets the Army needs according to AR 600–3. Various functions within the Army Safety Program require specialized training. DA Pam 385–10, appendix C, contains a list of training requirements as well as the ACTEDS plan.

b. ***Radiation safety training***. The training and experience of the RSO and the alternate RSO must be commensurate with the radiation program for which they will be responsible (formal radiation training must be completed before assuming duties). The dynamic aspects of the radiation protection program require that each garrison RSO be provided radiation protection training annually to ensure that he or she is adequately trained. Annual training will be scheduled and funded by the commander according to DA Pam 385–24.

c. ***Explosives safety training***. Workers involved with explosives and ammunition will be provided training according to the requirements of DA Pam 385–64.

d. ***Chemical agent safety training***. Workers involved with chemical agent operations will be provided training according to the requirements of DA Pam 385–61.

e. ***Infectious agents and toxins safety training***. Biological workers will be provided training according to the requirements of DA Pam 385–69.

9. **Army Combat Readiness/Safety Center:**

a. The USACR/Safety Center provides extensive safety training and a complete list of their available courses is located at https://safety.army.mil/TRAININGCOURSES/OnlineTraining.aspx these courses are listed under Army Learning Management System (ALMS) and ATRRS. Identify the course you need to complete, and follow the directions to launch the appropriate link.

b. Additional training is available for supervisors, managers, Collateral Duty Safety Officer's (CDSOs), and employees at the Army Learning Management System (ALMS) and ATRRS. You will need a CAC Card in order to register / enroll for these courses. Identify the course you need to complete, and follow the directions to launch the appropriate link. https://safety.army.mil/TRAININGCOURSES/OnlineTraining.aspx

c. The courses are:

(1) The Collateral Duty Safety Officer's (CDSO) Course. https://safety.army.mil/TRAININGCOURSES/OnlineTraining.aspx

(2) The Employee's Safety Course. https://safety.army.mil/TRAININGCOURSES/OnlineTraining.aspx

(3) The Manager's Safety Course. https://safety.army.mil/TRAININGCOURSES/OnlineTraining.aspx

(4) The Safety Committee Member's Safety Course. https://safety.army.mil/TRAININGCOURSES/OnlineTraining.aspx

(5) The Supervisor's Safety Course. https://safety.army.mil/TRAININGCOURSES/OnlineTraining.aspx

(6) The Composite Risk Management Basic Course. 2G-F97_DL https://safety.army.mil/TRAININGCOURSES/OnlineTraining.aspx

(7) The Composite Risk Management Civilian Basic Course. 2G-F104_DL https://safety.army.mil/TRAININGCOURSES/OnlineTraining.aspx

(8) The Commanders Safety Course. 2G-F94V3.1 https://safety.army.mil/TRAININGCOURSES/OnlineTraining.aspx

(9) The Accident Avoidance Course. https://safety.army.mil/TRAININGCOURSES/OnlineTraining/ArmyAccidentAvoidanceCourse.aspx.

(10) Workers' Compensation for Supervisors Course. http://media.cpms.osd.mil/icuc/SupervisorTraining/index.html

EMPLOYEE ACCIDENT / INCIDENT REPORT

Request No.: _____

Date of Request: _____

Please complete this form accurately and completely. If you need more space, attach an additional sheet, clearly noting the item(s) you are continuing.

Injured employee name: _____ Job title and Job No.: _____

Command / Unit: _____ Installation: _____

Work site / building: _____ Employee number: _____

Contact telephone #: _____ DSN #: _____ Date of birth: _____ Sex: M F

Type of accident/incident: _____ Time occurred: _____ Date/time began work: Date: _____ Time: _____

Date first reported: _____ Time reported: _____ To whom reported? _____

Lost working day accident? Yes / No

Date last worked: _____ Date returned to work: _____

1. Describe in full how the incident happened (including what employee was doing before and at the time of the incident, and any tools, equipment or materials being used): _____

2. Describe the injury or illness and the parts of the body affected: _____

3. Select either injury or an illness (choose only one): ☐ Injury ☐ Skin Disorder ☐ Respiratory Condition ☐ Poisoning ☐ Hearing Loss ☐ Other Illness

4. Did an object or substance cause injury? Yes No If yes, describe object/substance: _____

   If object, did it penetrate the body? Yes No _____

   If yes, was it removed from the body? Yes No If yes, who has the object? _____

5. Was personal protective equipment being used at the time of incident? Yes No If yes, describe equipment: _____

   Did the equipment fail? Yes No If yes, describe the failure: _____

6. Classify incident (choose only one):
   - ☐ Slip, trip or fall
   - ☐ Vehicle accident
   - ☐ Muscle strain or back injury
   - ☐ Assault, fight or violent act
   - ☐ Collision with object
   - ☐ Collision with human
   - ☐ Harmful substance
   - ☐ Human, animal, or insect bite
   - ☐ Other _____

7. Was CRM worksheet prepared? Yes No If yes, provide copy: _____

   By whom: _____ Title: _____

Did employee seek medical attention? Yes No If yes, date of medical attention: _____ Hospitalized overnight as in-patient? Yes No

If yes, doctor & location of treatment: _____ Treated in an emergency room? Yes No

Management section review and initials: 1. Unit Supervisor _____ 2. USAG-FS/HAAF Safety Director _____

EMPLOYEE COMPLETES/SIGNS BELOW:
I claim/do not claim for injury compensation at this time (Please circle cither claim or not claim.) YES / NO

Signature of injured employee: _____ Date signed: _____ Supervisor Name: _____

Completed by (if not employee): _____ Title: _____ Date Completed: _____

Annex D

See revers side