

## Self-Audit 3.2

### 1 General Safety

Number of Employees:

Number of Full Time Employees:

Number of Part Time Employees:

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#### 1.1 PROGRAM

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For this section, refer to [Page 5](#) in the Loss Prevention Manual, General Safety document.

##### 1.1.1 Is there a written general safety plan?

Yes       No       Not Applicable

##### 1.1.1.1 Is the written general safety plan:

Department/Generic     Agency/Site Specific     Both     Not Applicable

##### 1.1.1.2 Does it contain a management policy statement from the department/agency head?

Department/Generic     Agency/Site Specific     Both     None     Not Applicable

##### 1.1.1.3 Has the program been presented to new employees during orientation and such action been documented?

Yes       No       Not Applicable

##### 1.1.1.4 Is the program readily accessible to all employees?

Yes       No       Not Applicable

##### 1.1.2 Are there written safety responsibilities?

Yes       No       Not Applicable

**1.1.2.1 Have documented safety responsibilities been presented to all new employees initially during orientation and/or upon assignment to a position with different/additional safety responsibilities?**

Yes                       No                       Not Applicable

**1.1.3 Are there general safety rules?**

Yes                       No                       Not Applicable

**1.1.3.1 Have these rules been distributed ANNUALLY (via safety meetings, postings, etc.) TO ALL EMPLOYEES and such action documented?**

Yes                       No                       Not Applicable

**1.1.4 Are site/task specific safety rules required?**

Yes                       No                       Not Applicable

**1.1.4.1 Are there site/task specific safety rules?**

Yes                       No                       Not Applicable

**1.1.4.1.1 Have these rules been distributed ANNUALLY (via meetings, posting, etc.) TO ALL EMPLOYEES and such action documented?**

Yes                       No                       Not Applicable

**Safety Program Comments:**



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## **1.2 SAFETY MEETINGS AND TRAINING**

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For this section, refer to [Pages 6-8](#) in the Loss Prevention Manual, General Safety document.

**1.2.2.1 CLASS B: How many documented safety meetings have been conducted at this agency during the most recently completed audit/Compliance Review period?**

4+                       3                       1-2                       0                       Not Applicable

**1.2.2.2 CLASS B: Did the agency meet the 75% attendance requirement at every meeting during the audit period?**

Yes                       No                       Not Applicable

**1.2.2.3 CLASS B: Did the department and/or agency head (or his/her designee) meet the 100% attendance requirement during the audit period?**

Yes                       No                       Not Applicable

**1.2.3-a Does the agency have a written policy that covers Drug-Free Workplace?**

Yes                       No                       Not Applicable

**1.2.4.1 Is the agency conducting mandatory, documented awareness/training on the basics of and the agency's policy on a Drug-Free Workplace within 90 days of hire?**

Yes                       No                       Not Applicable

**1.2.4.2 Is the agency conducting mandatory, documented awareness/training on a Drug-Free Workplace at least once every 5 years?**

Yes                       No                       Not Applicable

**Is this audit being conducted for a Headquarters or a Field Office?**

Headquarters                       Field Office                       Not Applicable

**1.2.6.1 Has the agency's designated loss prevention coordinator received documented training in the following areas:**

**-----> Accident Investigation:**

Yes                       No                       Not Applicable

**-----> Inspections:**

Yes                       No                       Not Applicable

**-----> Safety Meetings:**

Yes                       No                       Not Applicable

**-----> Supervisor Responsibilities:**

Yes                       No                       Not Applicable

**1.2.6.2 Has the agency's designated loss prevention coordinator received documented training on Job Safety Analyses (JSAs)?**

Yes                       No                       Not Applicable

**1.2.7.1 Has the agency's designated loss prevention coordinator or other qualified position trained the field safety representative on the following:**

**-----> Accident Investigation:**

Yes                       No                       Not Applicable

**-----> Inspections:**

Yes                       No                       Not Applicable

**-----> Safety Meetings:**

Yes                       No                       Not Applicable

**-----> Supervisor Responsibilities:**

Yes                       No                       Not Applicable

**1.2.7.2 Has the agency's designated loss prevention coordinator or other qualified position trained the field safety representatives on Job Safety Analyses (JSAs)?**

Yes                       No                       Not Applicable

**1.2.8 Has the agency's loss prevention coordinator and/or representatives attended documented training at least once every five (5) years on the ORM Loss Prevention Program?**

Yes                       No                       Not Applicable

**1.2.9 Is documented, specific training provided to all employees who must perform new tasks or operate new equipment, or whose safety performance is unsatisfactory?**

Yes                       No                       Not Applicable

**Safety Meetings and Training Comments:**



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### 1.3 INSPECTIONS

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For this section, refer to [Pages 9-10](#) in the Loss Prevention Manual, General Safety document.

1.3.2.1 Class B: How many potential inspections were there during the most recently completed audit/Compliance Review period?

1.3.2.2 Class B: How many documented inspections were there during the most recently completed audit/Compliance Review period?

1.3.2.3 Class B: What percentage of documented inspections were conducted during the most recently completed audit/Compliance Review period?

- 95-100%       90-94%       85-89%     80-84%     75-79%  
 74% and below     Not Applicable

1.3.2.4 Class B: Is an inspection documented?

- Yes       No       Not Applicable

1.3.2.4.1 Class B: What type of documentation is used?

- Departmental/Generic     Agency/Site Specific     Other     Not Applicable

1.3.2.4.2 Class B: Which topics does the documentation address:

-----> **Building Safety:**

- Yes       No       Not Applicable

-----> **Electrical Safety:**

- Yes       No       Not Applicable

-----> **Emergency Equipment:**

- Yes       No       Not Applicable

-----> **Fire Safety:**

- Yes       No       Not Applicable

-----> **Office Safety:**

Yes                     No                     Not Applicable

-----> **Storage Methods:**

Yes                     No                     Not Applicable

**1.3.2.5 Class B: Is there a method in place for employees to notify management of workplace hazards?**

Yes                     No                     Not Applicable

**1.3.2.6 Class B: Is there a method in place for repair or corrective action of workplace hazards?**

Yes                     No                     Not Applicable

**1.3.3 Was there a State Fire Marshal's inspection completed at this agency during the most recently completed audit/Compliance Review year?**

Yes                     No                     Not Applicable

**1.3.3.1 Were there any deficiencies found by the State Fire Marshal during these inspections?**

Yes                     No                     Not Applicable

**1.3.3.1.1 Were the deficiencies corrected?**

Yes                     No                     Not Applicable

**Inspection Comments:**



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**1.4 INCIDENT/ACCIDENT INVESTIGATION**

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For this section, refer to [Pages 10-11](#) in the Loss Prevention Manual, General Safety document.

**1.4.1 Do the agency's investigation procedures address the use of the DA2000/DA3000 or other equivalent form(s) regarding employee, visitor, and/or client situations?**

Yes                       No                       Not Applicable

**1.4.2 Do the agency's investigation procedures address bodily injury and/or property concerns?**

Yes                       No                       Not Applicable

**1.4.3 Has the agency had any accidents or incidents within the most recently concluded audit/Compliance Review period?**

Yes                       No                       Not Applicable

**1.4.3.1 Is the agency using the DA2000/DA3000 or equivalent form for any accident or incident?**

Yes                       No                       Not Applicable

**1.4.3.2 Are all completed DA2000/DA3000 or equivalent form(s) from the prior fiscal year for all incidents/accidents available for review by the Loss Prevention Officer?**

Yes                       No                       Not Applicable

**1.4.4 Are Job Safety Analyses (JSAs) needed at this agency?**

Yes                       No                       Not Applicable

**1.4.4.1 Are JSAs developed for incident/accident trends, death, or change in job procedures or equipment?**

Yes                       No                       Not Applicable

**1.4.4.2 Is employee training on JSAs documented at least annually?**

Yes                       No                       Not Applicable

**1.4.4.3 Are the JSAs posted in the workplace in an area accessible to all employees?**

Yes                       No                       Not Applicable

**Incident/Accident Investigation Comments:**

Section 1.5 has been intentionally removed.

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**1.6 BLOODBORNE PATHOGENS/FIRST AID**

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For this section, refer to [Page 13](#) in the Loss Prevention Manual, General Safety document.

**1.6.1 Does the agency have a written BBP program?**

Yes                       No                       Not Applicable

**1.6.1.1 Is the written BBP program:**

Departmental/Generic     Agency/Site Specific     Both     Not Applicable

**1.6.1.2 Does the agency BBP program address the following:**

**-----> Exposure Determination:**

Yes                       No                       Not Applicable

**-----> Medical Evaluation for Affected Employees:**

Yes                       No                       Not Applicable

**-----> Methods of Compliance:**

Yes                       No                       Not Applicable

**-----> Awareness/Training:**

Yes                       No                       Not Applicable

**-----> Work Practice Controls:**

Yes                       No                       Not Applicable

**Bloodborne Pathogens/First Aid Comments:**



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**1.6.2 EMPLOYEE TRAINING ON BBP**

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For this section, refer to [Page 14](#) in the Loss Prevention Manual, General Safety document.

**1.6.2.1 Is the agency conducting documented employee awareness/training on BBP for low risk employees within 90 days of hire?**

- Yes                       No                       Not Applicable

**1.6.2.1-2 Is the agency conducting documented employee awareness on BBP for low risk employees at least once every 5 years thereafter?**

- Yes  No  Not Applicable (if records are maintained at headquarters or all high risk BBP exposure)

**1.6.2.2 Are there any high-risk employees, as identified by the agency?**

- Yes                       No                       Not Applicable

**1.6.2.2.1 Is the agency conducting documented employee training on BBP for high-risk employees within 90 days of hire?**

- Yes                       No                       Not Applicable

**1.6.2.2.1-2 Is the agency conducting documented employee training on BBP for high-risk employees at least once every year?**

- Yes                       No                       Not Applicable

**1.6.3 Are spill procedures in place?**

- Yes                       No                       Not Applicable

**1.6.4 Are spill kits maintained?**

- Yes                       No                       Not Applicable

**1.6.5 Does the agency have a written First Aid program for employees and visitors?**

Yes                       No                       Not Applicable

**1.6.6 Are First Aid kits maintained?**

Yes                       No                       Not Applicable

**1.6.7 Does the agency location meet any of the following criteria:**

**\*Working with night shifts or any minimal/partial crew shifts?**

**\*Employees working in remote/isolated locations?**

**\*The on-site medical facility is closed?**

Yes                       No                       Not Applicable

**1.6.7.1 Does the agency have someone available in these situations who is trained/able to render First Aid?**

Yes                       No                       Not Applicable

**Employee Training on BBP Comments:**



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**1.7 EMERGENCY PREPAREDNESS PLAN**

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For this section, refer to [Page 15](#) in the Loss Prevention Manual, General Safety document.

**1.7.1 Does the agency have a written emergency preparedness program?**

Yes                       No                       Not Applicable

**1.7.1.1 Is the written emergency preparedness program:**

Departmental/Generic     Agency/Site Specific     Both     Not Applicable

**1.7.1.2 Does the plan address fire?**

Yes                       No                       Not Applicable

**1.7.1.3 Does the plan address natural disasters?**

Yes                       No                       Not Applicable

**1.7.1.4 Does the plan address proximity threats?**

Yes                       No                       Not Applicable

**1.7.1.5 Does the plan address terrorism?**

Yes                       No                       Not Applicable

**1.7.2 Are fire drills conducted at least once every 12 months (including space leased/outside of your agency's control)?**

Yes                       No                       Not Applicable

**Emergency Preparedness Plan Comments:**



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**1.8 HAZARDOUS MATERIALS**

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For this section, refer to [Page 16](#) in the Loss Prevention Manual, General Safety document.

**1.8.1 Has a documented assessment been conducted to determine if there are any hazardous materials at any agency location covered by this audit?**

Yes                       No                       Not Applicable

**1.8.1.1 Are hazardous materials present at any agency location covered by this audit?**

Yes                       No                       Not Applicable

**1.8.1.1.1 Does the agency have a written hazardous materials program?**

Yes                       No                       Not Applicable

**1.8.1.1.1.1 Is the written hazardous materials program:**

Generic/Departmental     Agency/Site Specific     Both     Not Applicable

**1.8.1.1.1.2 Does the plan ensure that materials are handled properly?**

Yes                       No                       Not Applicable

**1.8.1.1.1.3 Does the plan ensure that materials are stored properly?**

Yes                       No                       Not Applicable

**1.8.1.1.1.4 Does the plan ensure that materials are disposed of properly?**

Yes                       No                       Not Applicable

**1.8.1.1.1.5 Does the plan ensure that Safety Data Sheets (SDS) are available?**

Yes                       No                       Not Applicable

**1.8.1.1.1.6 Does the plan ensure that proper Personal Protective Equipment (PPE) is available?**

Yes                       No                       Not Applicable

**1.8.1.1.1.7 Is the agency conducting appropriate documented employee training on hazard communication within 30 days of hire?**

Yes                       No                       Not Applicable

**1.8.1.1.1.8 Is the agency conducting appropriate documented employee training on hazard communication at least annually?**

Yes                       No                       Not Applicable

**1.8.1.1.1.9 Is the agency conducting documented employee training on hazard communication when working in a new area?**

Yes                       No                       Not Applicable

**1.8.1.1.1.10 Is the agency conducting appropriate documented employee training on hazard communication whenever a new material or procedure is introduced into the work place?**

Yes                       No                       Not Applicable

**1.8.1.1.1.11 Is the agency conducting appropriate documented employee training on hazard communication whenever the Department Head, Department Safety Officer, or Supervisor determines that refresher training is in order?**

Yes                       No                       Not Applicable

**1.8.1.1.1.12 Is the agency conducting appropriate documented employee training on hazard communication with regard to the new label elements and safety data sheet formats now required of all hazardous materials manufacturers?**

Yes                       No                       Not Applicable

**Hazardous Materials Comments:**



## 2 Driver Safety

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### 2.1 PROGRAM

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For this section, refer to [Page 2](#) in the Loss Prevention Manual, Driver Safety document.

**2.1.1 Is there a written program that includes ALL of the following components?**

**-----> Procedure for enrolling employees in the program:**

Yes                       No                       Not Applicable

**-----> Definition of high-risk drivers:**

Yes                       No                       Not Applicable

**-----> Procedure for identifying high-risk drivers:**

Yes                       No                       Not Applicable

**-----> Driver training:**

Yes                       No                       Not Applicable

**-----> Disciplinary action for employees identified as high-risk drivers:**

Yes                       No                       Not Applicable

-----> **Claims reporting:**

Yes                     No                     Not Applicable

-----> **Accident investigation:**

Yes                     No                     Not Applicable

-----> **Definition of State vehicles:**

Yes                     No                     Not Applicable

**Program Comments:**



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## 2.2 INSPECTION AND REPAIR OF STATE OWNED VEHICLES

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For this section, refer to [Pages 4-5](#) in the Loss Prevention Manual, Driver Safety document.

**2.2.1 Does the agency have any state-owned vehicles?**

Yes                     No                     Not Applicable

**2.2.1.1 How many potential vehicle inspections (# of vehicles X 12) were there in the most recently completed audit/Compliance Review period?**

**2.2.1.2 How many documented vehicle inspections were conducted in the most recently completed audit/Compliance Review period?**

**2.2.1.3 What percentage of your fleet was inspected?**

100%             80-99%             60-79%             40-59%             20-39%  
 0-19%             Not Applicable

**2.2.1.4 Is documented corrective action taken on deficiencies noted on the checklist to prevent further damage or accidents?**

Yes                     No                     Not Applicable

**2.2.1.5 Is preventive maintenance performed and documented?**

Yes                       No                       Not Applicable

**Inspection and Repair of State Owned Vehicle Comments:**



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**2.3 TRAINING**

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For this section, refer to [Page 5](#) in the Loss Prevention Manual, Driver Safety document.

**2.3.1 Is documented defensive driving training provided for all agency employees authorized to drive on state business?**

Yes                       No                       Not Applicable

**2.3.2 Is initial training conducted within ninety (90) days of hire or entering the program via authorization on a DA2054 form?**

Yes                       No                       Not Applicable

**2.3.3 Is refresher training conducted once every three (3) years thereafter?**

Yes                       No                       Not Applicable

**2.3.4 Are all authorized employees who receive a conviction for a violation required to attend refresher training within ninety (90) days of conviction?**

Yes                       No                       Not Applicable

**Training Comments:**



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**2.4 RECORDS AND FORMS**

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For this section, refer to [Pages 4-6](#) in the Loss Prevention Manual, Driver Safety document.

**2.4.1 Is there a signed and dated list of approved or unapproved drivers verified by the Official Driving Record (ODR) forms?**

Yes                       No                       Not Applicable

**2.4.2 Are Driver Authorization forms (DA 2054 or other form), that have been signed and dated annually, available for review?**

Yes                       No                       Not Applicable

**2.4.3 Are Official Driving Records (ODR), which have been reviewed annually, available for review?**

Yes    No    Not Applicable (if records are maintained at headquarters)

**2.4.4 Have there been any vehicular accidents during the most recent one (1) year audit period?**

Yes                       No                       Not Applicable

**2.4.4.1 Has a Driver Accident Report Form (DA 2041) been completed for each accident?**

Yes                       No                       Not Applicable

**2.4.4.1.1 Have all of the DA 2041 forms been faxed/e-mailed within forty-eight (48) hours to the Claims Unit?**

Yes                       No                       Not Applicable

**Records and Forms Comments:**



### 3 Bonds, Crime, and Property

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#### 3.1 PROGRAM

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For this section, refer to [Pages 2-7](#) in the Loss Prevention Manual, Bonds, Crime & Property document.

**3.1.1 Is there a written program that addresses the prevention of property damage and/or loss?**

Yes                       No                       Not Applicable

**3.1.2 Are there procedures in place to address separation of duties?**

Yes                       No                       Not Applicable

**3.1.3 Are there procedures in place to address controlling inventories?**

Yes                       No                       Not Applicable

**3.1.4 Are there procedures in place to address purchasing procedures?**

Yes                       No                       Not Applicable

**3.1.5 Are there procedures in place to address reporting losses/damages?**

Yes                       No                       Not Applicable

**3.1.6 Are there procedures in place to address investigating losses/damages?**

Yes                       No                       Not Applicable

**3.1.7 Are there procedures in place to address timely reporting of losses to the correct ORM claims unit?**

Yes                       No                       Not Applicable

**3.1.8 Are there procedures in place to address handling negotiable items?**

Yes                       No                       Not Applicable

**3.1.9 Are there procedures in place to address securing vaults/safes?**

Yes                       No                       Not Applicable

**3.1.10 Is someone assigned the responsibility for keeping the program current?**

Yes                       No                       Not Applicable

**Program Comments:**



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**3.2 EMPLOYEE RESPONSIBILITY**

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For this section, refer to [Page 3](#) in the Loss Prevention Manual, Bonds, Crime & Property document.

**3.2.1 Does the agency program outline employee responsibility?**

- Yes                       No                       Not Applicable

**3.2.1.1 Have only authorized employees been assigned to duties covered under the program?**

- Yes                       No                       Not Applicable

**3.2.1.2 Are employees receiving documented training in their job duties per the program?**

- Yes                       No                       Not Applicable

**Employee Responsibility Comments:**



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**3.3 SECURITY**

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For this section, refer to [Page 6](#) in the Loss Prevention Manual, Bonds, Crime & Property document.

**3.3.1 Is there a comprehensive written security policy that includes but is not limited to procedures that address limited, controlled access for authorized individuals to buildings?**

Yes                       No                       Not Applicable

**3.3.2 Is there a comprehensive written security policy that includes, but is not limited to procedures that address monitoring/controlling visitor access?**

Yes                       No                       Not Applicable

**3.3.3 Is there a comprehensive written security policy that includes but is not limited to procedures that address securing all entrances and exits?**

Yes                       No                       Not Applicable

**3.3.4 Is there a comprehensive written security policy that includes but is not limited to procedures that address limiting access to data on personal computers?**

Yes                       No                       Not Applicable

**Security Comments:**



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### **3.4 KEY CONTROL**

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For this section, refer to [Pages 6-7](#) in the Loss Prevention Manual, Bonds, Crime & Property document.

**3.4.1 Is there a key/access card control policy in place?**

Yes                       No                       Not Applicable

**3.4.1.1 Does key control policy include the following:**

-----> **A key/card log?**

Yes                       No                       Not Applicable



**4.1.1.1.3 Does it address electrical equipment?**

Yes                       No                       Not Applicable

**4.1.1.1.4 Is there a current, specific inventory of ALL applicable program equipment?**

Yes                       No                       Not Applicable

**4.1.1.1.5 Are there preventive maintenance procedures for inventoried equipment?**

Yes                       No                       Not Applicable

**4.1.1.1.6 Is there a written preventive maintenance schedule for mechanical equipment?**

Yes                       No                       Not Applicable

**4.1.1.1.7 Is there a written preventive maintenance schedule for electrical equipment?**

Yes                       No                       Not Applicable

**4.1.1.1.8 Is preventive maintenance documentation being maintained for mechanical equipment?**

Yes                       No                       Not Applicable

**4.1.1.1.9 Is preventive maintenance documentation being maintained for electrical equipment?**

Yes                       No                       Not Applicable

**4.1.1.1.10 Does the program include testing procedures for mechanical equipment?**

Yes                       No                       Not Applicable

**4.1.1.1.11 Does the program include testing procedures for electrical equipment?**

Yes                       No                       Not Applicable

**4.1.1.1.12 Are maintenance and/or other designated employees trained on the written Equipment Management program?**

Yes                       No                       Not Applicable

**4.1.1.1.13 Is formal and/or on-the-job training for the operation of inventoried equipment documented?**

Yes                       No                       Not Applicable

**4.1.1.1.14 Is formal and/or on-the-job training for the operation of testing equipment documented?**

Yes                       No                       Not Applicable

**4.1.1.1.15 Is formal and/or on-the-job training for assigned maintenance duties documented?**

Yes                       No                       Not Applicable

**Program Comments:**



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#### **4.1.1.2 PERSONAL PROTECTIVE EQUIPMENT (PPE)**

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For this section, refer to [Page 6](#) in the Loss Prevention Manual, Equipment Management document.

**4.1.1.2.1 Has a documented assessment been conducted to determine if the use of any Personal Protective Equipment is required?**

Yes                       No                       Not Applicable

**4.1.1.2.1-a Is Personal Protective Equipment required?**

Yes                       No                       Not Applicable

**4.1.1.2.1.1 Are there written procedures that address the: procurement, use, maintenance, and disposal of PPE?**

Yes                       No                       Not Applicable

**Personal Protective Equipment (PPE) Comments:**



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#### 4.1.1.3 WORK ORDER SYSTEM

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For this section, refer to [Page 6](#) in the Loss Prevention Manual, Equipment Management document.

##### 4.1.1.3.1 Are there written work order procedures for the following areas:

-----> Scheduled preventive maintenance:

Yes                     No                     Not Applicable

-----> Reported problems:

Yes                     No                     Not Applicable

##### 4.1.1.3.2 Are all repairs documented?

Yes                     No                     Not Applicable

##### 4.1.1.3.3 Are employees aware of the written procedures for reporting problems via the work order system?

Yes                     No                     Not Applicable

##### Work Order System Comments:

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#### 4.1.1.4 LOCKOUT/TAGOUT (LO/TO)

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For this section, refer to [Page 7](#) in the Loss Prevention Manual, Equipment Management document.

##### 4.1.1.4.1 Will any LO/TO be performed by agency personnel?

Yes                     No                     Not Applicable

##### 4.1.1.4.1.1 Does the agency have a written LO/TO program?

Yes                     No                     Not Applicable

**4.1.1.4.1.2 For LO/TO performed by agency personnel, is there documented training for the following:**

**-----> Authorized Employees:**

Yes                       No                       Not Applicable

**-----> Affected Employees:**

Yes                       No                       Not Applicable

**4.1.1.4.2 Will any LO/TO be performed by a contractor?**

Yes                       No                       Not Applicable

**4.1.1.4.2.1 Does the contractor have their own written LO/TO program?**

Yes                       No                       Not Applicable

**4.1.1.4.3 Are proper LO/TO devices available?**

Yes                       No                       Not Applicable

**Lockout/Tagout Comments:**



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#### **4.1.1.5 BOILERS**

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For this section, refer to [Page 8](#) in the Loss Prevention Manual, Equipment Management document.

**4.1.1.5.1 Does the agency have boilers that meet the criteria which mandate an inspection?**

Yes                       No                       Not Applicable

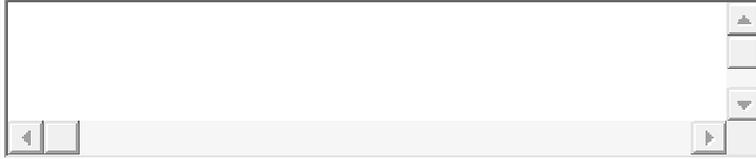
**4.1.1.5.1.1 Are current certificates posted at/near equipment?**

Yes                       No                       Not Applicable

**4.1.1.5.1.2 Have all items cited in the inspection report been corrected and documented?**

Yes                       No                       Not Applicable

**Boilers Comments:**



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**4.1.1.6 ELEVATORS & FIRE SERVICE KEY/EQUIPMENT ROOM**

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For this section, refer to **Page 8** in the Loss Prevention Manual, Equipment Management document.

**4.1.1.6.1 Does the agency have elevators?**

Yes                       No                       Not Applicable

**4.1.1.6.1.1 Are current elevator certificates available?**

Yes                       No                       Not Applicable

**4.1.1.6.1.2 Have ALL code violations been corrected and documented?**

Yes                       No                       Not Applicable

**4.1.1.6.1.3 Are there written procedures outlining availability of the fire service key?**

Yes                       No                       Not Applicable

**4.1.1.6.1.4 Has the fire service key been provided to the designated employee?**

Yes                       No                       Not Applicable

**4.1.1.6.1.5 Is the fire service key provided to the local fire department or readily accessible upon their arrival?**

Yes                       No                       Not Applicable

**Elevators & Fire Service Key/Equipment Room Comments:**



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**4.1.1.7 CONFINED SPACE**

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For this section, refer to [Page 8](#) in the Loss Prevention Manual, Equipment Management document.

**4.1.1.7.1 Has a documented assessment been performed to determine if confined spaces exist?**

- Yes                       No                       Not Applicable

**4.1.1.7.1.1 Were any confined spaces identified?**

- Yes                       No                       Not Applicable

**4.1.1.7.1.1.1 Do the identified confined spaces require a permit?**

- Yes                       No                       Not Applicable

**4.1.1.7.1.1.2 Is ALL confined space entry work contracted out?**

- Yes                       No                       Not Applicable

**4.1.1.7.1.1.2.1 Is there a written confined space entry program that covers training?**

- Yes                       No                       Not Applicable

**4.1.1.7.1.1.2.2 Is there a written confined space entry program that covers PPE?**

- Yes                       No                       Not Applicable

**4.1.1.7.1.1.2.3 Is there a written confined space entry program that covers Rescue?**

- Yes                       No                       Not Applicable

**4.1.1.7.1.1.2.4 Is there a written confined space entry program that covers Environmental Testing?**

Yes                       No                       Not Applicable

**4.1.1.7.1.1.2.5 Is there a written confined space entry program that covers Permits?**

Yes                       No                       Not Applicable

**4.1.1.7.1.1.2.6 Is all required confined space equipment available?**

Yes                       No                       Not Applicable

**4.1.1.7.1.1.2.7 Is training provided to applicable employees on Equipment?**

Yes                       No                       Not Applicable

**4.1.1.7.1.1.2.8 Is training provided to applicable employees on PPE?**

Yes                       No                       Not Applicable

**4.1.1.7.1.1.2.9 Is training provided to applicable employees on Rescue?**

Yes                       No                       Not Applicable

**4.1.1.7.1.1.2.10 Is training provided to applicable employees on Environmental Testing?**

Yes                       No                       Not Applicable

**4.1.1.7.1.1.2.11 Is training provided to applicable employees on Permits?**

Yes                       No                       Not Applicable

**4.1.1.7.1.1.3 Does the contractor have their own written confined space program?**

Yes                       No                       Not Applicable

**Confined Space Comments:**

A rectangular text input field with a light gray border. It contains a scroll bar on the right side with up and down arrow buttons, and a scroll bar on the bottom side with left and right arrow buttons. The field is currently empty.

## 5 Water Vessel

**5.1 Does the agency have any state-owned water vessels (e.g., boats, ferries, airboats)?**

Yes

No

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### 5.1.1 PROGRAM

---

For this section, refer to [Page 2](#) in the Loss Prevention Manual, Water Vessel document.

**5.1.1.1 Is there a written program that includes ALL of the following components?**

-----> **Procedure for authorizing employees in the program:**

Yes

No

Not Applicable

-----> **Definition of high-risk operators:**

Yes

No

Not Applicable

-----> **Determination of high-risk operators:**

Yes

No

Not Applicable

-----> **Operator training:**

Yes

No

Not Applicable

-----> **Disciplinary action for employees identified as high-risk operators:**

Yes

No

Not Applicable

-----> **Claims reporting:**

Yes

No

Not Applicable

-----> **Accident investigation:**

Yes

No

Not Applicable

**5.1.1.2 Is someone assigned to monitor the program?**

Yes                       No                       Not Applicable

**Program Comments:**



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**5.1.2 INSPECTIONS AND REPAIRS**

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For this section, refer to [Page 5](#) in the Loss Prevention Manual, Water Vessel document.

**5.1.2.1 Were any deficiencies found during the inspection?**

Yes                       No                       Not Applicable

**5.1.2.1.1 Have corrective actions been taken for deficiencies found during the inspection?**

Yes                       No                       Not Applicable

**5.1.2.1.1.1 Have the corrective actions been documented?**

Yes                       No                       Not Applicable

**5.1.2.2 Are there any vessels that are twenty-six (26) feet or longer?**

Yes                       No                       Not Applicable

**5.1.2.2.1 For vessels 26 feet or longer that fall under the Coast Guard jurisdiction and are used in navigable waters, have the necessary inspections been performed?**

Yes                       No                       Not Applicable

**5.1.2.2.1.1 Have corrective actions been taken for all item(s) cited?**

Yes                       No                       Not Applicable

**5.1.2.3 Is periodic, preventive maintenance, per the manufacturer's recommendations, performed and documented?**

Yes                       No                       Not Applicable

**Inspections and Repairs Comments:**



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**5.1.3 TRAINING**

---

For this section, refer to [Page 5](#) in the Loss Prevention Manual, Water Vessel document.

**5.1.3.1 Is initial training "Boat Louisiana" conducted before authorization to drive is granted and/or within ninety (90) days of hire or the employee(s) entering the program?**

- Yes                       No                       Not Applicable

**5.1.3.2 Is a refresher course conducted once every three (3) years thereafter?**

- Yes                       No                       Not Applicable

**5.1.3.3 Are all authorized employees who receive a conviction for a violation required to retake the "Boat Louisiana" or other ORM recognized course within ninety (90) days of conviction?**

- Yes                       No                       Not Applicable

**Training Comments:**



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**5.1.4 RECORDS AND FORMS**

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For this section, refer to [Pages 3-7](#) in the Loss Prevention Manual, Water Vessel document.

**5.1.4.1 Is there a signed and dated list of approved operators indicating annual verification of the operator records?**

Yes                       No                       Not Applicable

**5.1.4.2 Are the Vessel Authorization/Operator History forms (DA 2066) signed and dated annually?**

Yes                       No                       Not Applicable

**5.1.4.3 Have there been any water vessel accidents, in a commercial vessel over navigable waters, during the most recently concluded Audit/Compliance Review period?**

Yes                       No                       Not Applicable

**5.1.4.3.1 Was a Report of Marine Accident, Injury, or Death form (CG-2692) completed for each and submitted to the U.S. Coast Guard?**

Yes                       No                       Not Applicable

**5.1.4.4 Have there been any non-commercial vessels involved in an accident in any waters?**

Yes                       No                       Not Applicable

**5.1.4.4.1 Has a Louisiana Department of Wildlife and Fisheries (LDWF) Boating Accident/Investigation Report (DWF-BIR-005 OR DWF-BIR-0100P) been completed for each accident and submitted to LDWF?**

Yes                       No                       Not Applicable

**Records and Forms Comments:**



## 6 Flight Operations

**6.1 Does the agency have any state aircraft?**

Yes     No

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## 6.1.1 PROGRAM

---

For this section, refer to [Pages 2-4](#) in the Loss Prevention Manual, Flight Operations document.

### 6.1.1.1 Is there a written flight operations program?

Yes                       No                       Not Applicable

#### 6.1.1.1.1 Does the plan follow Federal Aviation Administration (FAA) regulations?

Yes                       No                       Not Applicable

### 6.1.1.2 Has the agency ever been cited by the Federal Aviation Administration (FAA)?

Yes                       No                       Not Applicable

#### 6.1.1.2.1 Have corrective actions been taken for the item(s) cited?

Yes                       No                       Not Applicable

#### 6.1.1.2.2 Have the corrective actions been documented?

Yes                       No                       Not Applicable

### 6.1.1.3 Has the agency had any incidents/accidents involving aircraft within the most recently completed audit/Compliance Review period?

Yes                       No                       Not Applicable

#### 6.1.1.3.1 Has an aircraft incident/accident statement been completed for each accident?

Yes                       No                       Not Applicable

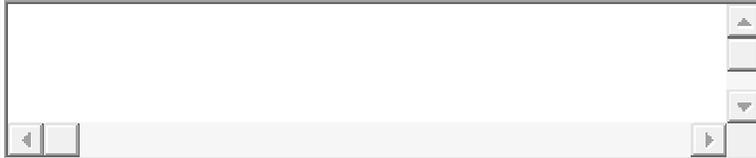
##### 6.1.1.3.1.1 Has the statement been faxed/e-mailed within forty-eight (48) hours to the Claims Unit?

Yes                       No                       Not Applicable

**6.1.1.4 Do all pilots flying state-owned and/or state-authorized private aircraft possess a commercial pilot's license?**

Yes       No       Not Applicable

**Program Comments:**

A text input field with a scroll bar and a vertical toolbar on the right side. The toolbar contains four buttons: a small square, a square with an upward-pointing triangle, a square with a downward-pointing triangle, and a square with a right-pointing triangle. The scroll bar has a left-pointing arrow, a small square, and a right-pointing arrow.