

**STATE OF LOUISIANA
OFFICE OF RISK MANAGEMENT
LOSS PREVENTION
SELF-AUDIT 4.2**

➤ **1.0 - General Safety**

○ **General Information**

○ Total Number of Employees _____

☐ Full-Time _____

☐ Part-Time _____

○ Was this agency Class A or Class B during the audit period in question? _____

○ **1.1 Program**

○ **1.1.1** Is there a written general safety plan?

☐ Yes

☐ No

☐ Not Applicable

○ **1.1.1.1** Is the written general safety plan:

☐ Departmental/Generic

☐ Agency/Site-Specific

☐ Both

☐ Not Applicable

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

☐ Departmental/Generic

☐ Agency/Site-Specific

☐ Both

☐ 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: 1) distributed ANNUALLY (via printed copy and/or electronically) to ALL EMPLOYEES with such action documented, and 2) posted in the facility for review by ALL EMPLOYEES?

- ☐ Yes
- ☐ No
- ☐ Not Applicable

○ **1.1.4** Are site/task-specific 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: 1). distributed ANNUALLY (via printed copy and/or electronically) to ALL APPLICABLE EMPLOYEES with such action documented, and 2). posted in the facility for review by ALL APPLICABLE EMPLOYEES?

- ☐ Yes
- ☐ No
- ☐ Not Applicable

- **1.2 Safety Meetings and Training**

- **1.2.1** How many documented safety meetings have been conducted at this agency during the most recently completed audit/compliance review period?

CLASS A

- ☐ 0
- ☐ 1-3
- ☐ 4-6
- ☐ 7-9
- ☐ 10-11
- ☐ 12+

- **1.2.1.1** Did the agency meet the 75% attendance requirement at every meeting during the audit period?

- ☐ Yes
- ☐ No
- ☐ Not Applicable

- **1.2.1.2** Did the department and/or agency head or his/her designee meet the 100% attendance requirement during the audit period?

- ☐ Yes
- ☐ No
- ☐ Not Applicable

- **1.2.2** How many documented safety meetings have been conducted at this agency during the most recently completed audit/compliance review period?

CLASS B

- ☐ 0
- ☐ 1-2
- ☐ 3
- ☐ 4+

- **1.2.2.1** Did the agency meet the 75% attendance requirement at every meeting during the audit period?

- ☐ Yes
- ☐ No
- ☐ Not Applicable

- **1.2.2.2** 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** Does the agency have a written policy that covers Drug-Free Workplace?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.2.3.1** Is the agency conducting mandatory, documented awareness / training on the basics of, and the agency's policy on, a Drug-Free Workplace within ninety (90) days of hire?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.2.3.2** Is the agency conducting mandatory, documented awareness / training on a Drug-Free Workplace at least once every five (5) years?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.2.4** Is this audit being conducted for a Headquarters or a Field Office?
 - ☐ Headquarters
 - ☐ Field Office
 - ☐ Not Applicable
- **1.2.5-A** Has the agency's designated loss prevention coordinator received documented training in Accident Investigation?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.2.5-B** Has the agency's designated loss prevention coordinator received documented training in Inspections?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **1.2.5-C** Has the agency's designated loss prevention coordinator received documented training in Safety Meetings?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.2.5-D** Has the agency's designated loss prevention coordinator received documented training in Supervisor Responsibilities?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.2.5-E** Has the agency's designated loss prevention coordinator received documented training on Job Safety Analyses (JSAs)?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.2.6-A** Has the agency's designated loss prevention coordinator or other qualified position trained the field safety representative on Accident Investigation?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.2.6-B** Has the agency's designated loss prevention coordinator or other qualified position trained the field safety representative on Inspections?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.2.6-C** Has the agency's designated loss prevention coordinator or other qualified position trained the field safety representative on Safety Meetings?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.2.6-D** Has the agency's designated loss prevention coordinator or other qualified position trained the field safety representative on Supervisor Responsibilities?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **1.2.6-E** Has the agency's designated loss prevention coordinator or other qualified position trained the field safety representative on Job Safety Analyses (JSAs)?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.2.7** 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
- **1.2.8** Is documented, specific training provided to all employees: 1) who must perform new tasks on, and/or operate, new OR existing equipment; or 2) whose safety performance is unsatisfactory?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **1.3 Inspections**

- **1.3.1** How many potential inspections were there during the most recently completed audit/compliance review period? _____
- **1.3.2** How many inspections were there during the most recently completed audit/compliance review period? _____
- **1.3.3** What percentage of 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
- **1.3.4** Were any of the inspections documented?
 - ☐ Yes
 - ☐ No
- **1.3.4.1** What type of inspection documentation is used?
 - ☐ Departmental/Generic
 - ☐ Agency/Site-Specific
 - ☐ Other

- **1.3.4.2** Does the documentation address: Building Safety?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.3.4.3** Does the documentation address: Electrical Safety?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.3.4.4** Does the documentation address: Emergency Equipment?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.3.4.5** Does the documentation address: Fire Safety?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.3.4.6** Does the documentation address: Office Safety?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.3.4.7** Does the documentation address: Storage Methods?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.3.5** Is there a method in place for employees to notify management of workplace hazards?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.3.6** Is there a method in place for repair or corrective action of workplace hazards?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **1.3.7** 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
- **1.3.7.1** Were there any deficiencies found by the State Fire Marshal during these inspections?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.3.7.1.1** Were the deficiencies corrected?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **1.4 Incident/Accident Investigations**

- **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 location-specific and/or task-specific 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
- **1.4.5** Did any incident/accident involve one or more of the following?:
 - ☐ Reasonable suspicion of employee drug or alcohol use or impairment
 - ☐ Fatality
 - ☐ Hazardous materials release
 - ☐ Not Applicable
- **1.4.5.1** Did the agency have any workers' compensation claims that required post-accident drug testing?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **1.4.5.1.1** What percentage of all workers' compensation claims involved drug testing?
 - ☐ 0% - 25%
 - ☐ 26%-50%
 - ☐ 51% - 75%
 - ☐ 76% - 100%

- **1.5 Return to Work**

- **1.5.1** Is there a written Transitional Return to Work plan?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.5.1.1** Is the written Transitional Return to Work plan:?
 - ☐ Departmental/Generic
 - ☐ Agency/Site-Specific
 - ☐ Both
 - ☐ Not Applicable
- **1.5.2** Did the agency have any lost time claims?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.5.2.1** Does the agency have form DA WC4000 available for review?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **1.6 Blood Borne Pathogens/First Aid**

- **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-A** Does the agency BBP program address the following:
Exposure Determination?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **1.6.1.2-B** Does the agency BBP program address the following:
Medical Evaluation for Affected Employees?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **1.6.1.2-C** Does the agency BBP program address the following:
Methods of Compliance?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **1.6.1.2-D** Does the agency BBP program address the following:
Awareness/Training?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **1.6.1.2-E** Does the agency BBP program address the following:
Work Practice Controls?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **1.6.2** Is the agency conducting documented employee awareness (i.e.,
Training AND the agency's policy) on BBP for low-risk employees within
ninety (90) days of hire?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **1.6.3** Is the agency conducting documented employee awareness (i.e., Training AND the agency's policy) on BBP for low-risk employees at least once every five (5) years thereafter?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.6.4** Are there any high-risk employees, as identified by the agency?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.6.4.1** Is the agency conducting documented employee training on BBP (including the agency's policy) for high-risk employees within ninety (90) days of hire?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.6.4.2** Is the agency conducting documented employee training on BBP (including the agency's policy) for high-risk employees at least once every year?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.6.5** Are spill procedures in place?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.6.6** Are spill kits maintained?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.6.7** Does the agency have a written first aid program for employees and visitors?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **1.6.8** Are first aid kits maintained?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.6.9** Does the agency location meet any of the following criteria:
a) working with night shifts or any minimal/partial crew shifts?, b) employees working in remote/isolated locations?, or c) the on-site medical facility is closed?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.6.9.1** Does the agency have someone available in these situations who is trained/able to render first aid?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **1.7 Emergency Preparedness Plan**

- **1.7.1** Does the agency have a written emergency preparedness program?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.7.1.1-A** Is the written emergency preparedness program?
 - ☐ Departmental/Generic
 - ☐ Agency/Site-Specific
 - ☐ Both
 - ☐ Not Applicable
- **1.7.1.1-B** Does the plan address fire?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.7.1.1-C** Does the plan address natural disasters?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **1.7.1.1-D** Does the plan address proximity threats?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.7.1.1-E** Does the plan address terrorism?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.7.2** Are fire drills conducted at least once every twelve (12) months (including space leased/outside of your agency's control)?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **1.8 Hazardous Materials**

- **1.8.1** Has an annual, documented assessment been conducted to determine if there are any hazardous materials at any agency location covered by this audit?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.8.2** Are hazardous materials present at any agency location covered by this audit?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.8.3** Does the agency have a written hazardous materials program?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.8.3.1** Is the written hazardous materials program?:
 - ☐ Departmental/Generic
 - ☐ Agency/Site-Specific
 - ☐ Both
 - ☐ Not Applicable

- **1.8.3.2** Does the plan ensure that materials are handled properly?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.8.3.3** Does the plan ensure that materials are stored properly?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.8.3.4** Does the plan ensure that materials are disposed of properly?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.8.3.5** Does the plan ensure that Safety Data Sheets (SDS) are readily available?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.8.3.6** Does the plan ensure that proper Personal Protective Equipment (PPE) is available?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.8.3.7** Does the plan ensure that a list of hazardous materials, updated at least annually, is available at each agency location covered by this audit?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **1.8.4** Is the agency conducting appropriate documented employee training on all components of the hazard communication program, including the hazardous material inventory list and Safety Data Sheets (SDS), within thirty (30) days of hire?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **1.8.5** Is the agency conducting appropriate documented employee training on all components of the hazard communication program, including the hazardous material inventory list and Safety Data Sheets (SDS), at least annually?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
 - **1.8.6** Is the agency conducting documented employee training on hazard communication when working in a new area?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
 - **1.8.7** Is the agency conducting appropriate, documented employee training on hazard communication whenever a new material or procedure is introduced into the workplace?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
 - **1.8.8** 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
 - **1.8.9** 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
-

➤ **2.0 - Driver Safety**

- **2.1 Program**
 - **2.1.1-A** Is there a written program that includes ALL of the following components: Procedure for enrolling in the program?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **2.1.1-B** Is there a written program that includes ALL of the following components:
Definition of high-risk drivers?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **2.1.1-C** Is there a written program that includes ALL of the following components:
Procedure for identifying high-risk drivers?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **2.1.1-D** Is there a written program that includes ALL of the following components:
Driver Training?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **2.1.1-E** Is there a written program that includes ALL of the following components:
Disciplinary action for employees identified as high-risk drivers?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **2.1.1-F** Is there a written program that includes ALL of the following components:
Claims reporting?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **2.1.1-G** Is there a written program that includes ALL of the following components:
Accident investigation?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **2.1.1-H** Is there a written program that includes ALL of the following components:
Definition of state vehicles?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **2.2 Inspection and Repair of State-Owned Vehicles**

- **2.2.1** Does the agency have any state-insured or agency-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?

- ☐ 0%-19%
- ☐ 20%-39%
- ☐ 40%-59%
- ☐ 60%-79%
- ☐ 80%-99%
- ☐ 100%

- **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 preventative maintenance performed and documented?

- ☐ Yes
- ☐ No
- ☐ Not Applicable

- **2.3 Training**

- **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

2.4 Records and Forms

- **2.4.1** Is there a list of approved or unapproved drivers that has been signed and dated ANNUALLY and verified within 45 days of pulling 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

- **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

- **2.4.4.2** Have all of the DA 2041 forms been faxed/e-mailed within forty-eight (48) hours or two (2) business days to the third-party administrator's (TPA) claims unit?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
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➤ **3.0 – Bonds, Crime, & Property**

○ **3.1 Program**

- **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 of property and/or negotiable items?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **3.1.6** Are there procedures in place to address investigating losses/damages of property and/or negotiable items?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **3.1.7** Are there procedures in place to address timely reporting of losses/damages of property and/or negotiable items to the correct 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, cash boxes, and filing cabinets containing negotiable items?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **3.1.10** Is someone assigned the responsibility for keeping the program current?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **3.2 Employee Responsibility**
 - **3.2.1** Does the agency program outline employee responsibility?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
 - **3.2.2** Have only authorized employees been assigned to duties covered under the program?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
 - **3.2.3** Are employees receiving documented training in their job duties per the program?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **3.3 Security**

- **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

- **3.4 Key Control**

- **3.4.1** Is there a key/access card control policy in place?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **3.4.1.1** Does the key control policy include the following: A key/card log?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **3.4.1.2** Does the key control policy include the following: Procedures to change locks/codes?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **3.4.1.3** Does the key control policy include the following: Methods for issuing, returning, and accounting for lost/stolen keys/cards?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
 - **3.4.1.4** Does the key control policy include the following: Specifying employee responsibility/procedures for handling keys/cards?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
-

➤ **4.0 – Equipment Management**

- **4.1** Does the agency have any mechanical and/or electrical [i.e., systems/equipment that are integral to the operation of the building and/or are an affixed (i.e., hardwired and/or plumbed) part of buildings/structures] equipment?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **4.1.1 Program**
 - **4.1.1.1** Is there a written equipment management program?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
 - **4.1.1.1.1** Is the written equipment management program:?
 - ☐ Departmental/Generic
 - ☐ Agency/Site-Specific
 - ☐ Both
 - ☐ Not Applicable
 - **4.1.1.1.2** Does it address mechanical equipment?
 - ☐ 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, and is the testing documentation being maintained, for mechanical equipment?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **4.1.1.1.11** Does the program include testing procedures, and is the testing documentation being maintained, 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

- **4.1.2 Program**

- **4.1.2.1** Has a documented assessment been conducted to determine if the use of any personal protective equipment (PPE) is required?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **4.1.2.2** Is PPE required?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **4.1.2.3** Are there written procedures that address the: procurement, use, maintenance, and disposal of PPE?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **4.1.3 Work Order System**
 - **4.1.3.1** Are there written work order procedures for the following areas:
Scheduled preventive maintenance?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
 - **4.1.3.2** Are there written work order procedures for the following areas:
Reported problems?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
 - **4.1.3.3** Are all repairs documented?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
 - **4.1.3.4** Are employees aware of the written procedures for reporting problems via the work order system?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **4.1.4 Lockout/Tagout (LO/TO)**
 - **4.1.4.1** Does the agency have a written LO/TO program?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **4.1.4.2** Will any LO/TO be performed by agency personnel?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **4.1.4.2.1** For LO/TO performed by agency personnel, is there documented training for the following: Authorized Employees?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **4.1.4.2.2** For LO/TO performed by agency personnel, is there documented training for the following: Affected Employees?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **4.1.4.3** Will any LO/TO be performed by a contractor?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **4.1.4.3.1** Does the contractor have its own written LO/TO program?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **4.1.4.4** Are proper LO/TO devices available?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **4.1.5 Boilers**
 - **4.1.5.1** Does the agency have boilers that meet the criteria that mandate an inspection?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **4.1.5.1.1** Are current certificates posted at/near equipment?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **4.1.5.1.2** Have all items cited in the inspection report been corrected and documented?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **4.1.6 Elevators & Fire Service Key/Equipment Room**
 - **4.1.6.1** Does the agency have elevators?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
 - **4.1.6.1.1** Are current elevator certificates available?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
 - **4.1.6.1.2** Have ALL code violations been corrected and documented?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
 - **4.1.6.1.3** Are there written procedures outlining availability of the fire service key?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
 - **4.1.6.1.4** Has the fire service key been provided to the designated employee?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

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

☐ Yes
☐ No
☐ Not Applicable

- **4.1.7 Confined Space**

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

☐ Yes
☐ No
☐ Not Applicable

- **4.1.7.1.1** Were any confined spaces identified?

☐ Yes
☐ No
☐ Not Applicable

- **4.1.7.1.1.1** Do the identified confined spaces require a permit?

☐ Yes
☐ No
☐ Not Applicable

- **4.1.7.1.1.2** Is ALL confined space entry work contacted out?

☐ Yes
☐ No
☐ Not Applicable

- **4.1.7.1.1.2.1** Does the contractor have its own written confined space program?

☐ Yes
☐ No
☐ Not Applicable

- **4.1.7.1.1.3** Is there a written confined space entry program that covers annual Training?

☐ Yes
☐ No
☐ Not Applicable

- **4.1.7.1.1.4** Is there a written confined space entry program that covers PPE?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **4.1.7.1.1.5** Is there a written confined space entry program that covers Rescue?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **4.1.7.1.1.6** Is there a written confined space entry program that covers Environmental Testing?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **4.1.7.1.1.7** Is there a written confined space entry program that covers Permits?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **4.1.7.1.1.8** Is all required confined space equipment available?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **4.1.7.1.1.9** Is annual training provided to applicable employees on Equipment?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **4.1.7.1.1.10** Is annual training provided to applicable employees on PPE?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **4.1.7.1.1.11** Is annual training provided to applicable employees on Rescue?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
 - **4.1.7.1.1.12** Is annual training provided to applicable employees on Environmental Testing?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
 - **4.1.7.1.1.13** Is annual training provided to applicable employees on Permits?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
-

➤ **5.0 – Water Vessel**

- **5.1** Does the agency have any state-owned water vessels (e.g., boats, ferries, airboats)?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **5.1.1 Program**
 - **5.1.1.1-A** Is there a written program that includes ALL of the following components: Procedure for authorizing employees in the program?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
 - **5.1.1.1-B** Is there a written program that includes ALL of the following components: Definition of high-risk operators?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **5.1.1.1-C** Is there a written program that includes ALL of the following components: Determination of high-risk operators?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **5.1.1.1-D** Is there a written program that includes ALL of the following components: Operator training?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **5.1.1.1-E** Is there a written program that includes ALL of the following components: Disciplinary action for employees identified as high-risk operators?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **5.1.1.1-F** Is there a written program that includes ALL of the following components: Claim reporting?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **5.1.1.1-G** Is there a written program that includes ALL of the following components: Accident investigation?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **5.1.1.2** Is someone assigned to monitor the program?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **5.1.2 Inspections and Repairs**
 - **5.1.2.1-A** Were all required monthly vessel inspections performed?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable

- **5.1.2.1-B** Were any deficiencies found during the inspection?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **5.1.2.1-B.1** Have corrective actions been taken for deficiencies found during the inspection?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **5.1.2.1-B.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

- **5.1.3 Training**

- **5.1.3.1** Is the initial "Boat Louisiana" training 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

- **5.1.4 Records and Forms**

- **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-010OP) been completed for each accident and submitted to LDWF?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
-

➤ **6.0 – Flight Operations**

- **6.1** Does the agency have any state aircraft?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **6.1.1 Program**
 - **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 FAA?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **6.1.1.2.1** Have corrective actions taken for the item(s) cited?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **6.1.1.2.1.1** 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 incident/accident?
 - ☐ Yes
 - ☐ No
 - ☐ Not Applicable
- **6.1.1.3.2** Has the statement been faxed/mailed within forty-eight (48) hours or two (2) business days to the third-party administrator's (TPA) 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