

Bighorn-Desert View Water Agency

Board of Directors

Michael McBride, President
Judy Corl-Lorono, Vice President
David Larson, Secretary
Terry Burkhart, Director
J. Dennis Staley, Director



Agency Office
622 S. Jemez Trail
Yucca Valley, CA 92284-1440

760/364-2315 Phone
760/364-3412 Fax

Marina D West, P.G., General Manager

A Public Agency

www.bdvwa.org

FINANCE/PUBLIC RELATIONS/EDUCATION AND PERSONNEL COMMITTEE SPECIAL MEETING AGENDA

BOARD MEETING OFFICE
1720 N. Cherokee Trail, Landers, CA 92285
September 12, 2012 - 6:30 p.m.

COMMITTEE MEMBERS: Director Larson & Director McBride

The BDVWA Finance/Public Relations/Education & Personnel Committee meeting will be conducted in strict compliance with the Brown Act. Members of the Board not assigned to this Committee who attend may do so only as observers and may not participate in the meeting.

1. CALL TO ORDER
2. PLEDGE OF ALLEGIANCE
3. ROLL CALL
4. APPROVAL OF THE AGENDA

DISCUSSION AND ACTION ITEMS - The Committee and Staff will discuss the following items and provide direction to staff, if so inclined.

The Public is invited to comment on any item on the agenda during discussion of that item.

When giving your public comment, please have your information prepared, if you wish to be identified for the record then please state your name. Due to time constraints, each member of the public will be allotted three-minutes to provide their public comment.

5. **REVIEW DRAFT RESOLUTION 12R-XX ESTABLISHING AN AGENCY INJURY AND ILLNESS PREVENTION PROGRAM (IIPP)**
6. **REVIEW PROPOSAL TO US POST OFFICE FOR PERMISSION TO CONSTRUCT A DEMONSTATION GARDEN TO THEIR PROPERTY AT LANDERS LANE AND RECHE ROAD (LANDERS POST OFFICE)**
7. **CONSENT ITEMS** - The following is expected to be routine and non-controversial and will be acted on by the Committee members at one time without discussion, unless a member of the Public or a Committee member requests that an item be held for discussion or further action.
 - a. Special FPREP Committee Meeting Report, May 9, 2012
8. **CLOSED SESSION – The Committee will adjourn to closed session Pursuant to Section 54957.6: Salaries and Benefits.**
9. **CLOSED SESSION REPORT**
10. **PUBLIC COMMENT PERIOD**

Any person may address the Committee on any matter within the Agency's jurisdiction on items not appearing on this agenda.

When giving your public comment, please have your information prepared, if you wish to be identified for the record then please state your name. Due to time constraints, each member of the public will be allotted three-minutes to provide their public comment. State Law prohibits the Committee from discussing or taking action on items not included on the agenda.

11. **VERBAL REPORTS**
 - a. COMMITTEE MEMBERS' COMMENTS/REPORT
 - b. GENERAL MANAGER'S REPORT

12. **ITEMS FOR NEXT AGENDA**

13. **ADJOURNMENT**

In accordance with the requirements of California Government Code Section 54954.2, this agenda has been posted in the main lobby of the Bighorn-Desert View Water Agency, 622 S. Jemez Trail, Yucca Valley, CA not less than 72 hours if prior to a Regular meeting, date and time above; or in accordance with California Government Code Section 54956 this agenda has been posted not less than 24 hours if prior to a Special meeting, date and time above.

As a general rule, agenda reports or other written documentation has been prepared or organized with respect to each item of business listed on the agenda.

Copies of these materials and other discloseable public records in connection with an open session agenda item, are also on file with and available for inspection at the Office of the Agency Secretary, 622 S. Jemez Trail, Yucca Valley, California, during regular business hours,

8:00 A.M. to 4:30 P.M., Monday through Friday. If such writings are distributed to members of the Board of Directors on the day of a Board meeting, the writings will be available at the entrance to the Board of Directors meeting room at the Bighorn-Desert View Water Agency.

Internet: Once uploaded, agenda materials can also be viewed at www.bdvwa.org.

Public Comments: You may wish to submit your comments in writing to assure that you are able to express yourself adequately.

Per Government Code Section 54954.2, any person with a disability who requires a modification or accommodation, including auxiliary aids or services, in order to participate in the meeting, should contact the Board's Secretary at 760-364-2315 during Agency business hours.

**BIGHORN DESERT VIEW WATER AGENCY STANDING COMMITTEE
FINANCE/PUBLIC RELATIONS/EDUCATION/PERSONNEL
AGENDA ITEM SUBMITTAL**

Meeting Date: September 12, 2012

To: Financial/PR/Education/Personnel Comm. **Budgeted:** N/A
Board of Directors **Budgeted Amount:** N/A
Cost: N/A

From: Marina D. West **General Counsel Approval:** Consulted
CEQA Compliance: N/A

Subject: Consider Resolution No. 12R-XX Establishing an Agency Injury and Illness Prevention Program (IIPP)

SUMMARY

Staff has developed a new Injury and Illness Prevention Program (IIPP) based on templates provided by the Special Districts Risk Management Authority. The Agency's last update was in 1995 (Policy No. 95P-01) so a revision to the IIPP is warranted at this time.

RECOMMENDATION

Staff is requesting Committee's input prior to bringing this item to the full board for further consideration.

BACKGROUND/ANALYSIS

The California Occupational Health and Safety Administration (CalOSHA) requires that employers establish, implement and maintain an effective Injury and Illness Prevention Program (IIPP). The IIPP has several mandatory components involving authority/responsibility, communication and feedback.

An Agency our size is not required to have a written plan but our insurance company, SDRMA, strongly recommends a written program and staff has complied.

The attached plan meets the CalOSHA requirements for an IIPP.

PRIOR RELEVANT BOARD ACTION(S)

9/12/1995 Policy No. 95P-05 Establishing an Agency Injury and Illness Prevention Program.

RESOLUTION NO. 12R-XX

A RESOLUTION OF THE BIGHORN-DESERT VIEW WATER AGENCY ESTABLISHING AN AGENCY INJURY AND ILLNESS PREVENTION PROGRAM

The Board of Directors of the Bighorn-Desert View Water Agency believes that the safety of all Agency personnel and the general public is one of our greatest responsibilities; and

The Board of Directors believes it to be in the best interest of the Agency and the public to fully support the safe operation of the Agency; therefore

It shall be the policy of the Board of Directors of the Bighorn-Desert View Water Agency as follows:

1. Develop and implement a comprehensive safety program throughout the Agency; and
2. To encourage all staff and the general public to fully participate in said comprehensive safety program; and
3. To develop a program that will comply with the safety criteria established and/or suggested by the Special Districts Risk Management Authority; and
4. Policy No. 95P-01 is hereby rescinded.

PASSED, APPROVED AND ADOPTED by the Board of Directors of Bighorn-Desert View Water Agency this 16th day of October 2012

By _____
Mike McBride, Board President

Attest:

David Larson, Board Secretary

BIGHORN-DESERT VIEW WATER AGENCY

INJURY & ILLNESS PREVENTION PROGRAM

Safety Policy

No function at *Bighorn-Desert View Water Agency* is so critical as to require or justify a compromise of safety and health.

We believe everyone benefits from a safe and healthy work environment. We are committed to maintaining a safe workplace and to complying with applicable laws and regulations governing safety.

To achieve this goal, the *Bighorn-Desert View Water Agency* has adopted an **Injury & Illness Prevention Program** (the IIPP). This program is everyone's responsibility as we work together to identify and eliminate conditions, practices, policies and procedures compromising safety.


To this end, each and every manager, supervisor and employee has the authority to take action to prevent mishaps.

It takes positive and genuine effort to assure a safe work environment. The alternative is wasted money and wasted time due to occupational injuries and illnesses and their associated pain and suffering.


Our expectations are everyone will:

1. Do the right thing the first time.
2. Seek to integrate safety into all tasks.
3. Avoid taking short cuts.
4. Take time to assure a safe workplace.
5. Have a safe and healthy work experience here at Bighorn-Desert View Water Agency.

Please join me in striving to achieve our ultimate goal of an injury-free organization.



General Manager



Date

Responsibilities

1. General Manager

The General Manager is responsible for overseeing the IIPP is implemented.

Duties include, but are not limited to:

- a. Ensuring all employees actively support the IIPP.
- b. Providing the funding necessary to maintain an effective and compliant safety program.

2. Department Heads and/or Managers & Supervisors

Department Heads and/or Managers & Supervisors have the responsibility of providing a safe place to work including facilities, equipment, standards and procedures, adequate supervision and recognition for a job done properly. They are responsible for training all of their employees to perform their jobs properly and safely. They teach, demonstrate, observe, and enforce compliance with established safety standards.

3. IIPP Administrator

The IIPP Administrator has the responsibility for the implementation, maintenance, and update of the IIPP.

4. Employees

Employees have the responsibility of performing their tasks properly and safely. They are to assure themselves they know how to do the job properly, and ask for additional training or assistance when they feel there is a gap in their ability, knowledge, or training. They should never undertake any task, job, or operation unless they are able to perform it safely.

Compliance

1. Management Responsibility

Management is responsible for ensuring organizational safety and health policies are clearly communicated and understood by employees. Department heads and/or managers & supervisors are expected to enforce the rules fairly and uniformly.

2. Employee Responsibility

All employees are responsible for using safe work practices, for following directives, policies and procedures, and for assisting in maintaining a safe work environment.

3. Performance Evaluations

- a. As part of department head and/or manager & supervisor regular performance evaluations, they are evaluated on what they have done to ensure a safe workplace for their respective employees. They are also evaluated on their positive or negative loss results.
- b. As part of employee regular performance reviews, they are evaluated on their compliance with safe work practices.

4. Recognition

Department heads, managers & supervisors and employees who make a significant contribution to the maintenance of a safe workplace, as determined by their superiors, receive written acknowledgment maintained in their personnel files.

5. Employee Training

Employees who are unaware of correct safety and health procedures are trained or retrained.

6. Employee Correction

Employees who fail to follow safe work practices and/or procedures, or who violate organizational rules or directives, are subject to disciplinary action, up to and including termination in accordance with the organization's personnel-related policies and procedures.

Managers and supervisors correct safety violations in a manner considered appropriate by organizational management.

A suggested pattern for normal correction is as follows.

- a. First Offense - The employee is given verbal counseling.
- b. Second Offense - The employee is given a written warning. The documentation outlines the nature of the offense, what action the employee must take to correct the problem, and warns the employee another violation will result in suspension.
- c. Third Offense - The employee is given a one working day suspension with pay for the purpose of considering whether s/he truly wants to be part of the organization. If yes, upon return, the employee completes an action plan for correcting their behavior and working with the organization within a positive safety culture.
- d. Termination - When an employee is terminated for safety violations, specific and documented communication as outlined above must have occurred.

Notwithstanding the above, the organization reserves the right to correct in any fashion it deems appropriate, including the right to terminate immediately an employee for a safety violation.

Communication

1. Two-Way Communication

Management recognizes open, two-way communication between management and staff on health and safety issues is essential to an injury-free, productive workplace.

2. The Organization's System of Communication

The following system of communication is designed to facilitate a continuous flow of safety and health information between management and staff in a form readily understandable.

- a. An orientation program is given to all new employees and includes a review of the IIPP and a discussion of policies and procedures employees are expected to follow. This program is documented on the *New Employee Safety Orientation Checklist*.
- b. The organization has safety meetings where safety is freely and openly discussed by all present. Such meetings are held monthly and all employees are expected to attend and are encouraged to participate in discussion. All such meetings are documented on the *Employee Meeting & Training Report Form* (or similar documentation).
- c. From time to time, written safety notifications are included with paychecks or are posted on organization bulletin boards.
- d. Other methods of communicating pertinent health and safety information are used as they are identified.

3. Safety Suggestions and Hazard Reporting

- a. All employees are encouraged to inform their supervisors, or other management personnel of any matter which they perceive to be a workplace hazard, or a potential workplace hazard. They are also encouraged to report suggestions for safety improvement.

This reporting can be done orally or preferably in writing on the *Identified Problem Report Form*. If done in writing, the notification may be given directly to the supervisor, the IIPP Administrator or other management personnel, or placed in a suggestion box.

- b. If an employee wishes to report anonymously, a hazard, safety suggestion, or other safety problem he or she can complete an *Identified Problem Report Form*, not filling in their name.
- c. **No employee shall be retaliated against for reporting hazards or potential hazards, or for making suggestions related to safety.**
- d. Management reviews all suggestions and hazard reports.
- e. If employees provide their names in regard to the notification, they are informed of what is being done - within 5 working days of receipt.

Hazard Identification & Evaluation

Inspection of the workplace is our primary tool used to identify unsafe conditions and practices. While we encourage all employees to continuously identify and correct hazards and poor safety practices, certain situations require formal evaluation and documentation.

1. Safety Inspections

Internal safety inspections are conducted periodically for all shop and maintenance facilities. Safety inspections are conducted for all office areas at least annually. Hazards found are corrected on the spot or recommendations are submitted for future corrections. Inspections are documented on the *Safety Inspection Form/Action Form*.

2. Additional Inspections

Inspections are also conducted in accordance with Cal-OSHA requirements:

- a. Whenever new substances, processes, procedures or equipment present a new safety or health hazard.

- b. Whenever management/supervision become aware of a new or previously unrecognized hazard, either independently or by receipt of information from an employee.

Injury/Illness Investigation

1. Investigation

All accidents resulting in injury or property damage, however slight, including *near-hits*, are investigated to determine the primary and contributing causes within seven working days of the initial report. This information is documented on the *Investigation Report* and analyzed to assist in obtaining corrective actions to prevent similar accidents from occurring in the future. The responsibility to see this investigation is performed rests with the IIPP Administrator.

2. Reporting

All facts, findings, and recommendations are documented on an accident investigation report. Management reviews accident investigation reports with a view towards determining adequacy of corrective action.

Correction of Hazards

When a hazard exists it is corrected on a timely basis based on the severity of the hazard. If imminent danger exists to any employees, management and supervision remove these employees from the danger at once, and personnel who are provided with the necessary safeguards correct the hazard. Documentation of hazard corrections is completed on at least one of the following forms:

1. *Identified Problem Report Form*
2. *Investigation Report Form*
3. *Safety Inspection Form/Action Plan*

Training

1. Orientation - New Employees

- a. The IIPP Administrator conducts the initial orientation on general safety within the first two days the new employee is on the job.
- b. The orientation is documented on the *New Employee Safety Orientation Checklist*.
- c. All employees are provided with a copy of the IIPP and sign the *Acknowledgment of Receipt of the Injury & Illness Prevention Program (IIPP)*.
- d. All new hires are also given a copy of the organization's *General Code of Safe Practices*, and sign the *Acknowledgment of Receipt of the General Code Of Safe Practices*.

2. Initial On-The-Job Training

When an employee first starts to work, a manager/supervisor trains the employee in all aspects of safety for the purpose of educating the new employee on the hazards of the work environment and the required safety procedures to mitigate those hazards.

The manager/supervisor conducts this training and documents it on the *Employee Meeting & Training Report Form* (or similar documentation).

3. Specific Organization-Wide Training

a. Disaster Preparedness

This training includes the organization's disaster preparation structure and how the employee fits into the structure, i.e., what the employee is to do under specific circumstances, such as fire, earthquake, medical emergency, and bomb threat.

b. First Aid, CPR, and Bloodborne Pathogen Training

Designated employees receive first aid, CPR, and bloodborne pathogen training in accordance with the American Red Cross and/or American Heart Association requirements.

c. Defensive Driver Training

All employees who may drive on organization business receive defensive driver training not more than every three years.

Driving on organization business includes driving organization vehicles as well as personal vehicles.

d. Ergonomics

All employees receive ergonomic training for their specific jobs. As a minimum, each employee receives training on proper lifting techniques and, if necessary, computer workstation design.

All specific organization-wide training is documented on the *Employee Meeting & Training Report Form* (or similar documentation).

4. Retraining

Reasons for retraining include change of job assignment, change of operations or materials, observation of poor work habits, or update of training methods. Managers, supervisors, and the IIPP Administrator perform retraining:

- a. When an existing employee changes job functions.
- b. On at least an annual basis as a refresher program.

Such training includes general workplace safety, job-specific hazards, and/or hazardous materials, as applicable.

All retraining is documented on the *Employee Meeting & Training Report Form* (or similar documentation).

5. Specialized Training

- a. Supervisors and/or employees are trained in their responsibilities for the safety and health of their employees. Such training includes both safety management and technical subjects.

Supervisors and/or employee are trained in the hazards and risks faced by the employees under their immediate direction.

- b. Managers, supervisors and the IIPP Administrator:
 - 1) Determine safety-training needs
 - 2) Implement new training programs.
 - 3) Evaluate the effectiveness of these programs.
- c. In addition, training is provided whenever:
 - 1) New substances, processes, procedures or equipment pose a new hazard and there is a lack of skill or knowledge to deal with the situation.
 - 2) Management, supervision, the IIPP Administrator become aware of a previously unrecognized hazard and there is a lack of skill or knowledge to deal with the hazard.

All specific specialized training is documented on the *Employee Meeting & Training Report Form* (or similar documentation).

Recordkeeping Summary

In coordination with other management, the IIPP Administrator is responsible for maintaining all documentation relating to the implementation of the IIPP:

1. For the purpose of displaying a tracking history of occupational safety and health programs and activities, all documents are maintained for a minimum of three years, unless otherwise stated.
2. Specific records are maintained for each of the topics within the IIPP to include, but not be limited to:
 - a. Employee Recognition and Correction
 - b. Safety Meetings and Other Safety Communication
Form – *Employee Meeting & Training Report Form* (or similar documentation).
 - c. Safety Suggestions and Hazard Reporting
Form – *Identified Problem Report Form*
 - d. Hazard Identification and Correction
Form – *Safety Inspection Form/Action Plan*
 - e. Occupational Injury & Illness Investigations
Form – *Investigation Report*
 - f. Safety Meetings and Training
Form – *New Employee Safety Orientation Checklist* – for each individual employee; filed in personnel file
Form – *Employee Meeting & Training Report Form*(or similar documentation) – for each meeting and/or training session
Form – *Record of Training Form* – *record of all training received by each employee*
 - g. Receipt of IIPP and GCSP
Form – *Acknowledgement of Receipt of the Injury & Illness Prevention*
Form – *Acknowledgement of Receipt of the General Code of Safe Practices*

Enclosures (in alphabetical order)

Forms to Implement the IIPP

1. Acknowledgement of Receipt of the General Code of Safe Practices
2. Acknowledgement of Receipt of the Injury & Illness Prevention Program
3. Employee Meeting & Training Report Form
4. Investigation Report
5. New Employee Safety Orientation Checklist
6. Record of Training Form
7. Identified Problem Report Form
8. Safety Inspection Form/Action Plan

BIGHORN-DESERT VIEW WATER AGENCY

ACKNOWLEDGMENT OF RECEIPT OF THE *GENERAL CODE OF SAFE PRACTICES*

I understand it is my duty to become thoroughly familiar with and abide by the rules and regulations identified in the *General Code of Safe Practices* (GCSP).

I received the BDVWA's GCSP on ____/____/____ (date), and I acknowledge I understand it.

Name:

Print

Signature

File: Employee Personnel File

BIGHORN-DESERT VIEW WATER AGENCY

ACKNOWLEDGMENT OF RECEIPT OF THE *INJURY & ILLNESS PREVENTION PROGRAM (IIPP)*

I understand it is my duty to become thoroughly familiar with and abide by the rules and regulations identified in the *Injury and Illness Prevention Program*.

I received BDVWA's IIPP on ____/____/____ (date), and I acknowledge I understand it.

Name:

Print

Signature

File: Employee's Personnel File

Bighorn-Desert View Water Agency

EMPLOYEE SAFETY TRAINING AND MEETING REPORT

Use of this Form

1. All safety training and meetings conducted for organization employees are documented on this form.
2. The completed form is distributed and filed as follows:
 - a. Training
 - 1) One copy is filed with the master training file for each course or session in the IIPP Administrator's files. The master file includes this form, the training course curriculum, all training handouts, and anything else pertaining to the training program.
 - 2) One copy is maintained in Human Resources where the following information is retrieved and inserted into each attendee's personnel file on the organization's *Record of Training Form*:

a) Employee name	d) Training subject
b) Employee's department	e) Whether a certificate was issued
c) Date of training	

b. Safety Meetings

This form is filed with the master meeting file for each safety meeting in the IIPP Administrator's files. The master file includes this form, the safety meeting agenda, all safety meeting handouts and anything else pertaining to the safety meeting.

Check () if the Program was <u>Training</u>	Check () if the Program was a <u>Safety Meeting</u>
Training/Safety Meeting Subject(s):	
Certificate Issued (circle answer): Yes No	
Training/Meeting Date:	Training Instructor/Meeting Leader Name(s):
Description of Training Provided or Safety Meeting Topic(s):	
Course or Meeting Handouts (attach to this form):	

BIGHORN-DESERT VIEW WATER AGENCY

INVESTIGATION REPORT (Occupational Injury or Illness)

Time is of the essence. Please be as complete and concise as possible. If you need additional space, please use additional sheets of paper and note the paragraph number and letter. The information you provide should help prevent a similar occupational injury or illness in the future.

1. WHO

1.a. Name of Injured Employee: _____

1.b. Date of Hire: _____

1.c. Normal Occupation of Employee (Job Classification):

1.d. Name(s) of Witness(es):

2. WHEN

2.a. Date of Incident: ____/____/____

2.b. Time of Incident: _____ AM _____ PM

2.c. Work Start Time: _____ AM _____ PM

2.d. Date Reported to You: ____/____/____

2.e. Time Reported: _____ AM _____ PM

2.f. Did Employee Leave Work Due to Incident? _____ Yes _____ No

2.g. Did Employee Return to Work? _____ Yes _____ No

If Yes, When (Date and Time): ____/____/____
_____ AM _____ PM

3. WHERE (Describe Where the Incident Happened):

4. WHAT

4.a. Describe the Injury or Illness, such as cut, strain, fracture, skin rash:

4.b. What Part of the Body was Affected, such as back, left wrist, right eye, lungs:

4.c. What was employee doing when injured? (Be specific by identifying tools, equipment or materials being used) Use additional paper, if necessary.

5. HOW AND WHY Did any of the following factors have anything to do with how and why the incident occurred? If you answer YES or PARTLY please provide further information. Do whatever you need to do to determine whether these factors were involved.

Factors	Yes	Partly	No
a. Lack of knowledge or skill			
b. Error			
c. Lack of (or incorrect) policies, procedures, rules			
d. Lack of (or insufficient) safety training			
e. Too many demands and/or pressures			
f. Lack of sufficient number of people to do the work			
g. Hazards			
h. Insufficient, improper, or unrepaired equipment and/or tools			
i. Incorrect design of facilities, equipment, materials			
j. Inattention			
k. In a hurry			
l. Anything else?			

6. PREVENTABILITY

In your opinion, was this incident preventable? (Circle your answer): Yes No
Why?

7. 7.a. What is the LOSS SEVERITY POTENTIAL? (Circle your answer):

Major Serious Minor

7.b. What is the PROBABLE RECURRENCE RATE? (Circle your answer):

Frequent Occasional Rare

8. CORRECTIVE ACTION What actions have or will be taken to prevent a recurrence?

Expected Completion Date

Actual Completion Date

a.

b.

c.

9. 9.a. Investigator's Name (Print): _____

9.b. Title: _____

9.c. Investigator's Signature: _____

9.d. Date: _____

10. File a copy in the employee's personnel file and any other investigation files.

Programs-ModelDocuments (IIPP-Form-InvestigationForm-2010.doc)

BIGHORN-DESERT VIEW WATER AGENCY

NEW EMPLOYEE SAFETY ORIENTATION CHECKLIST

Use of this Form

1. All new employees receive general safety orientation training. All such safety training is documented on this form.
2. The completed checklist is filed in each new employee's personnel file.
3. Check off when each topic has been covered.
4. Both the person who conducts the orientation and the employee sign and date when the orientation training has been completed.

Safety Orientation Checklist		
	Orientation Topics	Check (√) When Completed
1.	Review of the BDVWA's <i>Injury & Illness Prevention Program</i> – The instructor conducts a detailed review of this document with the employee. The employee receives a copy of the IIPP and signs for it using the receipt designed for this purpose.	
2.	Review of the company's <i>Code of Safe Practices</i> – The instructor conducts a detailed review of this document with the employee. The employee receives a copy and signs for it using the receipt designed for this purpose.	
3.	Reporting unsafe conditions and practices.	
4.	Reporting occupational injuries and illnesses.	
5.	Review of those aspects of the BDVWA's <i>Emergency Response Plan</i> pertaining to the employee.	
6.	Review of those aspects of the BDVWA's <i>Fire Protection Plan</i> pertaining to the employee.	
7.	Personal Protective Equipment.	
8.	Review of the employees' <i>right-to-know</i> about hazardous substances in their work environment and provision of information about the BDVWA's <i>Hazard Communication Program</i> , available from the IIPP Administrator.	
9.	Confined space safety awareness.	
10.	Excavation safety.	
11.	Safe use of respirators.	
12.	Fall protection requirements – heights.	
13.	Review of specific accident prevention tips on the most common types* of employee accidents to be avoided:	
13.a.	*Lifting, pushing, pulling	
13.b.	*Slip, trip and fall prevention	
13.c.	*Hand safety	
13.d.	*Use of manual and portable power tools	
13.e.	*Electrical safety	
13.f.	*Driving accident prevention	
13.g.	*Ergonomics-related injury/illness prevention	
14.	Summary of information covered.	

Instructor Name (Printed)

Employee Name (Printed)

Instructor Signature

Employee Signature

Date of Orientation: _____

BIGHORN-DESERT VIEW WATER AGENCY

IDENTIFIED PROBLEM REPORT FORM

Use of this Form

Please use this form whenever you have something to report regarding a safety matter. Your report may be based on your observation of an unsafe practice, an unsafe condition, a problem associated with managerial policies and/or procedures or some other matter. *It is the policy of BDVWA that no one will be retaliated against for submitting a safety report.* Our goal is to eliminate accidents and your help is what it is all about. Please feel free to use additional sheets of paper to describe fully your identified problem and suggestion.

Identified Problem and Suggestion

Name of Person Submitting Suggestion (optional*): _____

Telephone Number (optional*): _____

* If you provide your name and telephone number, you will be informed as to the status of your suggestion. Without this information, it will not be possible to let you the status.

Complete Description of Identified Problem - If the problem is based upon a specific circumstance, please include the date and time you saw it:

Description of Suggestion(s) – What changes do you recommend to correct the problem?

Signature of Person Reporting the Problem (optional)

Date

* * *

Investigative Response

Person Submitting Report: Please Do Not Write in this Section.

Name of Person Investigating Problem and Suggestion: _____

Results of Investigation – What was found?

Recommended Steps to Correct the Identified Problem – The recommendations may be the same as the person who submitted this form.

Signature of Investigator

Date

BIGHORN-DESERT VIEW WATER AGENCY
Safety Inspection Form/Action Plan – Location (_____)
 Page 24 of _____

Facility Inspected:	Name of Inspector (s):
Date of Inspection:	Date of Report:
# of items corrected from previous inspections:	_____ out of _____
# of items uncorrected from previous inspections:	_____
# of items uncorrected in this inspection:	_____
# of items corrected on the spot in this inspection:	(_____)
# of total items remaining uncorrected in this report:	_____
Number (%) of total items uncorrected by priority:	_____ (_____ %)
Priority – Life Threatening	_____ (_____ %)
Priority – I	_____ (_____ %)
Priority – II	_____ (_____ %)
Priority – III	_____ (_____ %)

Report Recipients: _____ , _____ , _____ , _____ , _____ , _____

For information regarding this inspection, please contact:

Key
 ✓C = Check (✓) this column when the action is corrected
 P = Priority (LT-Life Threatening, I-Urgent, II-Necessary, III-Desirable)
 \$ = Estimated amount to correct (L = \$0 to \$250, M = \$251 to \$1000, H = \$1001 +, T = Time Only)

**BIGHORN DESERT VIEW WATER AGENCY STANDING COMMITTEE
FINANCE/PUBLIC RELATIONS/EDUCATION/PERSONNEL
AGENDA ITEM SUBMITTAL**

Meeting Date: September 12, 2012

To: Financial/PR/Education/Personnel Comm. **Budgeted:** N/A
Board of Directors **Budgeted Amount:** N/A
Cost: Commitment of staff resources to
prepare proposal

From: Marina D. West **General Counsel Approval:** TBD
CEQA Compliance: N/A

Subject: Consider Proposal to US Post Office for Permission to Construct a Demonstration Garden and Other Upgrades to their Property at Landers Lane and Reche Road (Landers Post Office)

SUMMARY

Director Staley has outlined a proposed project which would serve as a public relations tool for the Agency – a demonstration garden. The purpose of the garden is to communicate to our community the benefit of using drought tolerant plants which provide color, shade and greenery but use little to no water once established. The project would also include additional enhancements intended to “attract” members of the community to the site.

Staff is seeking input from the Committee on the proposed scope of the project and whether or not the Agency should continue to pursue this idea as a mechanism for public outreach.

RECOMMENDATION

Staff is requesting Committee's input prior to bringing this item to the full board for further consideration.

BACKGROUND/ANALYSIS

Director Staley has outlined a proposed project which would serve as a public relations tool for the Agency – a small demonstration garden. The purpose of the garden is to communicate to our community the benefit of using drought tolerant plants which provide color, shade and greenery but use little to no water once established. The project would also include additional enhancements intended to “attract” members of the community to the site such as a bus stop shelter, bulletin board and historical society kiosk.

Prior to bringing this proposal forward to the Committee some initial inquiries have been made to determine if this project is even feasible. Director Staley contacted the Yucca Valley Postmaster to discuss the proposed project and did receive a positive response; however, approval must be obtained from a higher authority. The Morongo Basin Transit Authority (MBTA) has been contacted and they have indicated an initial interest in the project. Staff is awaiting feedback from MBTA after they conduct a site visit to determine the exact requirements for placing a bus stop shelter at the site. The Morongo Basin Historical Society

has been contacted and we are awaiting feedback regarding our proposal to place a "kiosk" at the site concerned with the history of the Landers area and the creation of the Landers Post Office. Lastly, in addition to the landscape enhancements, staff believes this would be a good site for an additional bulletin board for posting agency information, meeting agendas, etc. It is thought that a freestanding locking bulletin board (similar to that at the Boardroom facility) located near the newspaper stands would be appropriate.

Director Staley and General Manager West met with the Landers Association Garden Club on Saturday August 25, 2012 to introduce the proposal. The Garden Club thought that the project concept was good and they urged us to continue forward with the initial key step, Post Office approval. Staff believes that the work can be accomplished with community volunteers and donated plant materials. If needed, perhaps a community development block grant or equivalent could be sought. Maintenance could also be supported with volunteer staff facilitated by Agency involvement. Lastly, as has been done at other water districts, the Agency would be asked to commit a supply of water to the garden. Recently, Joshua Basin Water District agreed to participate in the landscape improvements to "Turtle Island" by donating water for a period of two years (until plants are established as drought tolerant). This project is much smaller in scope than the Joshua Tree project.

At this time, staff is seeking the Committee's approve of this public relations proposal. If approved, staff will complete the written proposal to the US Post Office, submit the proposal to the appropriate Post Office staff and obtain an official response either approving or denying the concept. If approval is granted, then the concept can be brought back to the Committee for further discussion and comment. Thereafter, a more specific project concept and actual commitment from project partners (MBTA, MBHS, etc.) can be brought to the full board for further consideration and approval.

PRIOR RELEVANT BOARD ACTION(S)

none

Bighorn-Desert View Water Agency

Board of Directors

Michael McBride, President
Judy Corl-Lorono, Vice President
David Larson, Secretary
Terry Burkhart, Director
J. Dennis Staley, Director



Agency Office
622 S. Jemez Trail
Yucca Valley, CA 92284-1440

760/364-2315 Phone
760/364-3412 Fax

Marina D West, P.G., General Manager

A Public Agency

www.bdvwa.org

FINANCE/PUBLIC RELATIONS/EDUCATION AND PERSONNEL COMMITTEE REGULAR MEETING REPORT

BOARD MEETING OFFICE
1720 N. Cherokee Trail, Landers, CA 92285
Wednesday, May 9, 2012 - 4:00 p.m.

COMMITTEE MEMBERS: Director Larson & President McBride

CALL TO ORDER

Director Larson called the meeting to order at 4:02 p.m.

PLEDGE OF ALLEGIANCE

Led by John Burkhart

ROLL CALL

Directors: David Larson
Michael McBride

Staff: Marina West
Michelle Corbin

APPROVAL OF THE AGENDA

Director Larson and Director McBride approved the agenda as presented.

NEW BILL PAYMENT METHOD

General Manager West gave the staff report. West stated that several customers have requested this service over the years especially customers that live out of the area.

Director Larson would like to see the Agency go ahead and implement the ACH without worrying about the having an initial 25 customers.

Anonymous asked if the bank charged for this service.

The Committee directed staff to bring to the full board.

BENEFITS FOR DIRECTORS

General Manager West gave the staff report reminding the Directors that the Agency should look at the benefits separately. The health benefits are provided by SDRMA and will not allow the Directors to receive benefits today because they were not in the original pool. Therefore the Agency will have to shop for benefits. In lieu of this the staff put together numbers from the current pricing available. The BOD must assume the maximum financial risk when searching for prices. With this in mind the cost may be as high as \$1,340 (director plus 2 or more dependents) per month per director or as low as \$515 (director only) per month.

The dental and vision benefits could cost as much as \$8100.00 per year if the maximum directors and beneficiaries joined.

Director McBride stated that he felt the dental and vision benefits were more reasonable and wondered if the Agency could exclude the spouses. He also stated that offering some type of benefit could help with attracting BOD candidates in the future.

Director Larson stated that it was clear that the health benefit is cost prohibited.

Director McBride stated that he would like the BOD to entertain the dental and vision benefits. Director Larson agreed.

Anonymous stated that having turned down the per diem, \$500.00 looks just as bad.

Anonymous asked if the insurance companies require all Board members to sign up.

The Committee directed staff to bring only the dental and vision insurance coverage to the full Board.

"Positive Pay"

General Manager West gave the staff report stating that the auditors suggested that the Agency consider adding Positive Pay as part of our bill pay process. The cost is \$53.00 per month and Union Bank is waiving the set up fees. Positive pay will help to prevent check fraud and make the check reconciliation easier.

Director Larson pointed out several reasons that he agreed with implementing positive pay.

No public comments.

The Committee directed staff to bring to the full board.

FIXED ASSET AND SURPLUS PROPERTY POLICY

General Manager West gave the staff report. Prior to now the Agency has not had a fixed asset policy. This is a policy for the Board and will help guide the staff, making it easier to inventory various assets. Both legal council and the auditor have reviewed the policy.

Director McBride stated that he also thought that we had a policy in place.

Director Larson stated that it was a well written policy and he was glad that the auditor and legal council had a chance to look at it.

No public comment.

The Committee recommended the Fixed Asset and Surplus Property Policy be brought to the full board.

HOLIDAY SCHEDULE

General Manager West gave the staff report. The staff has a set number of paid holidays each year. Christmas Eve is traditionally a very quiet day at the Agency Office. The staff is requesting the Board allow Christmas Eve day be substituted for Columbus Day. Also, Columbus Day is not always a recognized holiday. Schools and many other places of business are often open on that day; therefore many of our customers assume we are also open on Columbus Day.

Anonymous stated that it is a great idea.

The Committee directed staff to bring to the board.

FISCAL YEAR 2012/13 DRAFT BUDGET REVIEW

General Manager West gave power point presentation reviewing the proposed 2012/2013 draft budget. She began with the projected revenue, budgeting on 95% of actual water sales. She did not take into account the accounts that generally do not pay their bi-monthly basic service fee and bond debt. These accounts will go to lien eventually and are not counted on as projected revenue.

Other operating income includes delinquent bills, lock off fees, meter sales and new account fees.

One thing to note is that water sales are falling. She stated that water conservation is part of the reason but most of the drop can be attributed to home foreclosures or vacancies. Although hauled water accounts have been pretty consistent, this year the Agency is also seeing a drop in water sales.

The General Tax levy's were budgeted the same as last year due to an assumed zero increase in property valuations.

Regarding expenses by account GM West pointed out the 3.6% COLA increase and the lower maintenance fees due to having new vehicles.

No public comments.

The Committee directed staff to bring the draft budget to the full board in May for review and for consideration of approval in June.

CONSENT ITEMS

- a. Regular FPREP Meeting Report, March 14, 2012

Public comment:

Director McBride and Director Larson approved the report.

PUBLIC COMMENT PERIOD

No public comment.

VERBAL REPORTS

COMMITTEE MEMBERS' COMMENTS/REPORTS

Director McBride thanked the General Manager for such a thorough budget report

Director Larson had no report or comments.

GENERAL MANAGER'S REPORT

General Manager West reported that the Agency will be participating in an internship program offered by Copper Mountain College.

ITEMS FOR NEXT AGENDA

None.

ADJOURNMENT - Director Larson adjourned the meeting at 5:54 p.m. Director