

**CAMDEN COUNTY
MUNICIPAL JOINT INSURANCE FUND**

**2022 SAFETY
MANAGEMENT
PROGRAM**



CAMDEN COUNTY MUNICIPAL JOINT INSURANCE FUND 2022 SAFETY MANAGEMENT PROGRAM

TABLE OF CONTENTS

INTRODUCTION.....	3
REQUIRED ELEMENTS TO QUALIFY FOR AWARDS.....	4
HOW THE PROGRAM WORKS	4
2022 SAFETY MANAGEMENT PROGRAM SIZE CATEGORIES	5
Safety Management Awards	6
2022 SAFETY MANAGEMENT PROGRAM CONTRACT	6
SAFETY BEST PRACTICES	8
Commitment & Accountability.....	8
Controlling Hazards.....	8
Continuing Education & Training.....	9
Communication	9
Coaching.....	9
Claims Management	9
Health & Wellness.....	9
SPECIAL RECOGNITION AWARD PROGRAM	10
Nomination Form for Special Safety Recognition	11
SAFETY MANAGEMENT PROGRAM REPORTS.....	12
Onsite Review Form.....	12
Department Safety Summary Report: First Quarter	13
Department Safety Summary Report: Second Quarter	14
Department Safety Summary Report: Third Quarter	15
Department Safety Summary Report: Fourth Quarter.....	16

INTRODUCTION

The 2022 Safety Management Program provides members of the Camden County Municipal Joint Insurance Fund with a blueprint for success with their safety programs. Best practices and suggestions are provided as we continue to promote a “Zero Harm” workplace we recognize that health and wellness efforts play a major role in safe work practices, employee morale, and claim management.

To change behaviors and to promote safety, wellness, and a “Zero Harm” work environment, we need to have both a “Top Down” and “Grassroots” led program. We remind all members that the key to an effective safety program starts with the Safety Committee. Our program incorporates several elements that are key to a safety program. Management Commitment, Controlling Hazards, Continuing Education, Communication, Coaching, and Claims Management.

Our goal is to help every member succeed in their safety program and qualify for Safety Management Awards. We encourage members to make full use of all the services provided by the MEL and JIF, including instructor-led and online training through the MEL Safety Institute, Safety Bulletins, Tool Box topics, Regional Training topics, and Law Enforcement resources, to name a few. Please reach out to your Safety Consultants if you have any questions.

Due to the ongoing restrictions required because of the COVID – 19 Pandemic and its variants, some of the plan elements are changing. Please be sure to read the plan to ensure that you are participating at the highest level.

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REQUIRED ELEMENTS TO QUALIFY FOR AWARDS

To qualify for Safety Management Awards, members must show significant participation and commitment in all the Best Practices listed on pages 8 and 9. The following elements are required to qualify for an award:

1. **Submit your Safety Committee schedule by March 1, 2022**
2. **Sign and return the 2022 Safety Contract by March 1, 2022**
3. **Attend the Safety Kickoff Webinar TBD**
4. **Send delegates to the Safety/Claims Coordinator Roundtable in 2022. Webinar Date and location TBD**
5. **Send at least one delegate to all applicable Regional Trainings**
6. **Complete the Department Quarterly Safety Summary report and submit them to J.A. Montgomery at the end of each quarter.**
7. **Place “Safety” on the governing body agenda at least once a year.**
8. **Appoint a Designated Employer Representative for CDL Drug and Alcohol testing and attend DER Training.**
9. **Select a representative from each department to serve on the safety committee.**
10. **Hold a minimum of quarterly Safety Committee Meetings during the year.**

HOW THE PROGRAM WORKS

- **The Safety Program is continued over a 12 month time period, starting in January and ending in December.**
- JIF Safety Consultants are required to review program records. This may be accomplished through a minimum of one on-site visit or a combination of in-person and online contacts. Safety Coordinators are encouraged to maintain these program records in a centrally located file. The file should contain the members: Department Safety Summary Report, Safety Committee Minutes, Hazard Inspections, Training Records, Job Safety Observations, and any other documentation that would assist with an objective evaluation of the member’s program efforts. Maintenance of this file will assist in making sure that the member receives full credit for their efforts.
- During onsite record checks, all elements of the program will be reviewed. Safety Consultants will work with members to secure a commitment of participation for any incomplete areas.
- Members will either qualify or not qualify (Pass or Fail) for a Safety Management Award. The program runs on a calendar year basis, and we will make every effort to review members at least once during the first and second halves of the year. At least one visit may be an impromptu visit without prior notice.

2022 Safety Management Program

- The process for Special Safety Recognition Awards nominations changed slightly in 2021 and may be submitted by your RMC, Consultant, or Safety Coordinator based on Compliance with the SMP and Loss history.
- Wellness suggestions may be incorporated into the program.
- **Failure to complete any of the required elements of the Safety Management Program may result in disqualification of all or part of the incentive award.**

2022 SAFETY MANAGEMENT PROGRAM SIZE CATEGORIES

SIZE CATEGORIES			
2022 Safety Management Program Size Categories			
AUDUBON	M	HADDON HEIGHTS	L
AUDUBON PARK	S	HI-NELLA	S
BARRINGTON	M	LAUREL SPRINGS	S
BELLMAWR	L	LAWNSIDE	M
BERLIN BOROUGH	M	LINDENWOLD	M
BERLIN TOWNSHIP	M	MAGNOLIA	M
BROOKLAWN	M	MEDFORD LAKES	M
CAMDEN CITY	L	MERCHANTVILLE	M
CAMDEN PARKING AUTHORITY	M	MOUNT EPHRAIM	M
CHERRY HILL	L	OAKLYN	M
CHERRY HILL FIRE DEPARTMENT	L	PENNSAUKEN	L
CHESILHURST	S	PINE HILL	M
CLEMENTON	M	RUNNEMEDE	M
COLLINGSWOOD	L	SOMERDALE	M
GIBBSBORO	S	TAVISTOCK	S
GLOUCESTER CITY	L	VOORHEES	L
GLOUCESTER TOWNSHIP	L	WINSLOW	L
HADDON	L	WINSLOW FIRE DISTRICT #1	S
HADDONFIELD	L	WOODLYNNE	S

<u>Small</u> 35 or fewer employees	<u>Medium</u> 36 – 50 employees	<u>Large</u> More than 50 employees
S-Small	M- Medium	L-Large

SAFETY MANAGEMENT AWARDS

Level	Small	Medium	Large
QUALIFIER	\$1000	\$1500	\$2000
NON QUALIFIER	0	0	0

2022 SAFETY CONTRACT

To participate in the Safety Management Program, please sign and return the completed Safety Contract to the Safety Director by March 1, 2022.

CAMDEN COUNTY MUNICIPAL JOINT INSURANCE FUND

We, the governing body of _____ recognize the important role an effective safety program plays in lowering employee injury rates, reducing lost time accidents, and cutting insurance costs, all of which contribute to greater employee safety and lower tax rates. Health and Safety must never be compromised. Providing quality services is our number one priority, and we do so, making every effort to ensure employee and public safety. We applaud the JIF's initiative in providing many of the safety resources needed to enhance our local safety efforts, and we hereby declare our support of the JIF's safety programs. We strive to achieve an accident-free environment through a health and safety culture built on:

- **TRUST:** We respect each other's opinions and decisions and will follow through on all health and safety concerns
- **CARE:** We approach each day with the determination to care for ourselves, co-workers, and the community we serve.
- **KNOWLEDGE:** We seek the education and skills to fulfill our responsibilities.
- **COMMUNICATION:** We communicate with each other in a clear, open, and honest manner.

The public entity educates its employees with regard to appropriate conduct in the workplace and encourages employees to report workplace harassment or discrimination in all of its forms.

We have established a Safety Committee that meets at least four times a year.

We "Put Safety on the Council Agenda" at least once a year.

We keep our regulatory training and written programs current.

We conduct periodic hazard inspection surveys and Job Site Observations.

We encourage supervisors to make a "daily safety contact" with employees.

We manage our claims by reporting all claims in a timely manner, offering transitional duty, and investigating incidents and near misses.

We actively promote and support health and wellness activities.

Accepted by:

2022 Safety Management Program

 (Mayor)

 Date

 (Administrator/Clerk/Manager)

 Date

Municipality: _____

The following departments participate in the Safety Management Program:

	Department	Department Head Signature	Date
	Public Works		
	Building & Facilities Maintenance		
	Police		
	Fire		
	EMS		
	Volunteer-Fire-EMS		
	Utility / Water & Sewer		
	Parks & Recreation		
	Administrative		
	OEM		
	Safety Coordinator		

2022 Safety Committee Meetings Dates:

(Please include meeting location, date, and time. Return by March 1, 2022)

Date: Location: Time:	Date: Location: Time:	Date: Location: Time:	Date: Location: Time:
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**J. A. Montgomery Consultants Attn: Melissa Meccariello
2 Cooper Street, P. O. Box 99106, Camden, NJ 08101**

E-mail: mmeccariello@jamontgomery.com

SAFETY BEST PRACTICES

1. COMMITMENT AND ACCOUNTABILITY

- Sign and submit the 2022 safety contract by March 1, 2022**
- Submit your Safety Committee schedule by March 1, 2022**
- Send a delegate to the Safety/Claims Coordinator Roundtable in 2022. Date and Location TBD.
- Send delegate to the Safety Kickoff Webinar on TBD
- Set the tone - Management support to promote safety & wellness
- Place "Safety" on the governing body agenda at least once a year.
- Use the Safety Management Program award and optional safety budgets
- Be knowledgeable about claims frequency, Loss Time Accident Frequency (LTAF), and address safety issues promptly.
- Appoint a Designated Employee Representative and register with the CDL Clearing House
- Complete and return the quarterly Departmental summary reports**

2. CONTROLLING HAZARDS

- Inspect all municipal facilities, playgrounds, walkways, and public areas for safety concerns and take corrective action in a timely manner. Maintain written records.
- Focus on good housekeeping
- Maintain ‘Roadway, Sign, and Walkway’ Program (RSW) that includes inspections, record keeping, and prompt correction of hazards. A log of inspection items, complaints, and corrective actions maintained, and referrals made to proper authorities.
- Conduct Job Safety Observations** to identify at-risk behaviors and conditions by observing employees at work and giving immediate feedback
- Complete all outstanding Suggestions for Improvement in a timely manner. No “Important” SFIs that are more than two years old and no outstanding “Urgent” SFIs that have not been addressed.
- Maintain a written fleet safety program. Conduct annual MVR checks for drivers and abide by DOT and CDL requirements.
- Maintain and update written regulatory programs, including:
 - Hazard Communication / RTK / Central File
 - Bloodborne Pathogen Exposure Control Plan
 - Lock Out / Tag Out
 - PPE Hazard Assessments
 - Emergency Action / Fire Protection
 - Indoor Air Quality
 - Hearing Conservation Program
 - Confined Space Entry
 - Respiratory Protection Plan
 - OSHA Logs (300/ 300A)

3. CONTINUING EDUCATION AND TRAINING

- Assign MSI Training Administrator.
- Pre-Register for training when possible
- Make sure safety training is up to date.
- New hires should receive safety orientation within their first month of work.
- Participate in Regional Safety Training workshops.
- Use the safety and wellness videos from the MEL Video Library
- Have members of your Fire, Police & EMS Departments enroll in and complete “**S:ERVE Distraction Driving and Police/Fire and EMS modules**” online training program.
Optional Classes | MSI NOW:
- NJ State 4-Hour Defensive Driving Course | *Eligible for personal insurance premium discounts*
- Implicit Bias
- Preparing for First Amendment Audits

4. COMMUNICATIONS

- Promote the **Zero Harm** Concept. Start **every job/workday** with a pre-shift briefing.
- Use Tool Box meetings and Safety Videos.

<ul style="list-style-type: none"><input type="checkbox"/> Hold regular Safety Committee meetings (at least 4-6 times per year) and encourage full participation by all members. Keep written agendas and minutes.<input type="checkbox"/> Place “Wellness” on the Safety Committee agenda.<input type="checkbox"/> Maintain safety and wellness communication center and keep it current.<input type="checkbox"/> Post and review Safety Director Bulletins<input type="checkbox"/> Promote the concept of “Do No Harm” in everyday activity
<p>5. COACHING</p> <ul style="list-style-type: none"><input type="checkbox"/> Conduct Job Safety Observations to identify at-risk behaviors and conditions by observing employees and giving immediate feedback; Include ergonomic & proper body mechanics in the observations<input type="checkbox"/> Remind one another to work safely.<input type="checkbox"/> Complete or update Job Hazard Assessments and review with crew members.<input type="checkbox"/> Encourage Supervisors to attend MSI classes <u>with</u> their employees.
<p>6. CLAIMS MANAGEMENT</p> <ul style="list-style-type: none"><input type="checkbox"/> Report all claims in a timely manner (within three days of the incident).<input type="checkbox"/> Implement Transitional Duty Program.<input type="checkbox"/> Investigate incidents and “near misses” to uncover responsible conditions. Complete and submit the “<i>Supervisors Incident Report</i>” form.<input type="checkbox"/> Submit copies of the Supervisor’s incident report to the Safety Director’s office<input type="checkbox"/> Review incident reports at Safety Meetings. Assign follow-up actions, including what to do, who will be responsible, and by when.<input type="checkbox"/> Share claims summary/performance with the governing body at least annually.<input type="checkbox"/> Maintain RSW logs, inspection records, audits, and equipment inventories for all playgrounds.
<p>7. HEALTH & WELLNESS (Optional)</p> <ul style="list-style-type: none"><input type="checkbox"/> Encourage stretching as part of our daily routines<input type="checkbox"/> Hold at least one crew meeting on a wellness topic each year.<input type="checkbox"/> Promote and support health and wellness activities.

SPECIAL RECOGNITION AWARD PROGRAM

The JIF safety motto is “**Safety First in All We Do,**” but safety is more than a motto. The success of the JIF Safety Programs depends upon the proactive approach to the safety of each municipal administration, department, and individual employees.

The Special Recognition Award Program is designed to recognize departments, individuals, or teams that go beyond the core requirements of the Safety Management Program. Health and wellness activities conducted throughout the year may also qualify for special recognition awards.

Tell us about improvements that have been made to safety operations, equipment, or training or what your department did to improve employee and/or public safety in your municipality. How are you changing the way you think about safety? What are you doing to encourage wellness? Examples of such noteworthy contributions could include safety newsletters, innovative communication programs, safety awareness campaigns, process changes that help reduce accidents, outstanding individual efforts, exceptional training efforts, attainment of specialized safety-related designations, having health and wellness functions, etc.

Nominations should be submitted to the Safety Director's Office on the included form by December 31, 2022. Use additional pages if necessary. Photographs, write-ups, or other documentation may be submitted but are not required. We suggest that any nominations be discussed with your Safety Committee. Fill out a separate form for each person or department being nominated.

Nomination Form

Each Administrator, Fund Commissioner, RMC, or Safety Coordinator should fill out the nomination form on the following page to nominate the department(s) or individuals who significantly contributed to safety efforts in your town.

**CAMDEN COUNTY MUNICIPAL JOINT INSURANCE FUND
2022
NOMINATION FOR SPECIAL SAFETY RECOGNITION PROGRAM**

Municipality:

Name of Department(s) or Individual being nominated:

Describe why this Department(s) or individual is being nominated for this award. Use additional pages if necessary. Photographs, write-ups, or other documentation may be submitted but are not required.

Was this nomination discussed with the Safety Committee? If so, when?

Signature of Person submitting a nomination:

Position / Title:

Print the name of the person submitting a nomination:

Date:

Submit this form by December 31, 2022

**J. A. Montgomery Consultants Attn: Melissa Meccariello
2 Cooper Street, P. O. Box 99106, Camden, NJ 08101**

E-mail: mmeccariello@jamontgomery.com

SAFETY MANAGEMENT PROGRAM REPORTS

Camden County Municipal Joint Insurance Fund	
Period Covered: 2022-2022 <u>For On-Site Review</u>	
Municipality Name:	
Be Sure to Include the following:	
<input type="checkbox"/>	Safety Committee Meetings: Provide agendas, minutes, and attendance information from Safety Committee Meetings held during this Reporting Period (Please ensure each attendee’s department is listed along with their name).
<input type="checkbox"/>	Safety Improvement Objectives <ul style="list-style-type: none"> ▪ Provide written status on progress on safety improvement objectives
<input type="checkbox"/>	Department Summary Reports – from each department, signed and completed with copies of: <ul style="list-style-type: none"> ▪ Job Site Observation Reports ▪ Safety Inspection Reports (representative sample) ▪ Tool Box Meetings and Safety Video Training sessions ▪ List of safety training classes attended
<input type="checkbox"/>	MVR reports <ul style="list-style-type: none"> ▪ Provide a letter requesting MVRs. Provide documentation of driver hiring criteria or fleet safety program.
<input type="checkbox"/>	Accident Review Panel Provide copies of: <ul style="list-style-type: none"> ▪ Supervisor Investigation reports (representative sample) or ▪ Notes from Accident Review Committee or Safety Committee comments
Please use this page as a guide to organizing your Safety Management Program Reports. Keep all documentation in a central file to be reviewed onsite during loss control visits	

Department Safety Summary Report
_____ Department
1st Quarter Report

Does this Department have more than two employees? _____

Participation in Municipal Safety Committee

How many municipal safety committee meetings were attended by this department? _____

Job Site Observations:

How many JSO reports were completed by members of this department? _____

Attach a representative sample (at least 1 per month) of completed reports.

Safety Inspection Reports:

How many Safety Inspection Reports were completed for this department? _____

Attach representative sample (at least 1 per month) of completed Safety Inspection Reports*

Safety Training Classes

How many MSI training topics (or other safety training classes) were attended by employees from this department? _____ *List course titles below.*

- 1.
- 2.
- 3.
- 4.
- 5.

**Note: for MSI classes, only list title of class attended (no need to send Certificate)*

For non-MSI classes, provide the class title, sign-in sheets, course description, and instructor's name

Tool Box or Safety Video Training Sessions:

How many department safety meetings were held by this department? _____

Attach a representative sample (at least 1 per month) of completed sign-in sheets.

Name & Title of Person Completing this Report:

Date:

Department Safety Summary Report
_____ Department
2nd Quarter Report

Does this Department have more than two employees? _____

Participation in Municipal Safety Committee

How many municipal safety committee meetings were attended by this department? _____

Job Site Observations:

How many JSO reports were completed by members of this department? _____

Attach a representative sample (at least 1 per month) of completed reports.

Safety Inspection Reports:

How many Safety Inspection Reports were completed for this department? _____

Attach representative sample (at least 1 per month) of completed Safety Inspection Reports*

Safety Training Classes

How many MSI topics (or other safety training classes) were attended by employees from this department? _____ *List course titles below.*

- 1.
- 2.
- 3.
- 4.
- 5.

**Note: for MSI classes, only list title of class attended (no need to send Certificate)*

For non-MSI classes, provide the class title, sign-in sheets, course description, and instructor's name

Tool Box or Safety Video Training Sessions:

How many department safety meetings were held by this department? _____

Attach a representative sample (at least 1 per month) of completed sign-in sheets.

Name & Title of Person Completing this Report:

Date:

Department Safety Summary Report
_____ Department
3rd Quarter Report

Does this Department have more than two employees? _____

Participation in Municipal Safety Committee

How many municipal safety committee meetings were attended by this department? _____

Job Site Observations:

How many JSO reports were completed by members of this department? _____

Attach a representative sample (at least 1 per month) of completed reports.

Safety Inspection Reports:

How many Safety Inspection Reports were completed for this department? _____

Attach representative sample (at least 1 per month) of completed Safety Inspection Reports*

Safety Training Classes

How many MSI topics (or other safety training classes) were attended by employees from this department? _____ *List course titles below.*

- 1.
- 2.
- 3.
- 4.
- 5.

**Note: for MSI classes, only list title of class attended (no need to send Certificate)*

For non-MSI classes, provide the class title, sign-in sheets, course description, and instructor's name

Tool Box or Safety Video Training Sessions:

How many department safety meetings were held by this department? _____

Attach a representative sample (at least 1 per month) of completed sign-in sheets.

Name & Title of Person Completing this Report:

Date:

Department Safety Summary Report <hr style="width: 50%; margin: 0 auto;"/> Department 4th Quarter Report	
Does this Department have more than two employees? _____	
Participation in Municipal Safety Committee How many municipal safety committee meetings were attended by this department? _____	
Job Site Observations: How many JSO reports were completed by members of this department? _____ <i>Attach a representative sample (at least 1 per month) of completed reports.</i>	
Safety Inspection Reports: How many Safety Inspection Reports were completed for this department? _____ <i>Attach representative sample* (at least 1 per month) of completed Safety Inspection Reports</i>	
Safety Training Classes How many MSI topics (or other safety training classes) were attended by employees from this department? _____ <i>List course titles below.</i> <ol style="list-style-type: none"> 1. 2. 3. 4. 5. <p><i>*Note: for MSI classes, only list title of class attended (no need to send Certificate) For non-MSI classes, provide the class title, sign-in sheets, course description, and instructor's name</i></p>	
Tool Box or Safety Video Training Sessions: How many department safety meetings were held by this department? _____ <i>Attach a representative sample (at least 1 per month) of completed sign-in sheets.</i>	
Name & Title of Person Completing this Report:	Date: