

ST. LAWRENCE COUNTY SELF-INSURANCE PLAN  
48 COURT STREET  
CANTON, NEW YORK 13617  
PHONE: 315-379-2239  
FAX: 315-379-2254

Stephen D. Button  
Plan Administrator

Hattie Bice  
Secretary

Jody C. Wenzel  
Risk Manager

August 14, 2023

Charles Hooven  
Supervisor, Town of Clifton  
PO Box 252  
Newton Falls, NY 13666

Dear Supervisor Hooven,

I visited your facilities on 8/14/2023. I noted that few of the items I found at last year's inspection had been corrected. Also, I was unable to access the arena that the Clifton shares with the Town of Fine. It is my understanding that Clifton would be responsible for the cost of repairs to that facility. One of your employees did mention to me that they did not think any work had been completed since last year and that it the facility was not being used. If this is incorrect and you'd like me re-inspect, please let me know and I will make an appointment to do so.

One important finding in my reports was the absence of a current Health & Safety Manual for the Town. There are various subjects that OSHA/PESH require written policies and procedures for and I was not able to locate any. I am attaching templates for many of these policies that you can use to develop a manual. I spoke with Kelly at the Highway department and he is expecting these. I would suggest maintaining copies on the manual at all the Town's facilities.

Once complete, it is also required that your employees have annual training on these topics. I have been putting on free training sessions throughout the County over the past couple years. I have another coming up in Gouverneur on August 31<sup>st</sup>, 2023 at 9 am at the Community Center. If you'd like to send some employees, please just let me now.

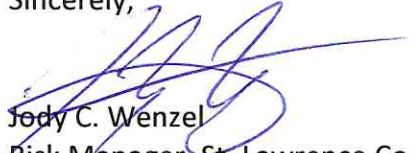
I also must point out the electrical issues at the Highway garage. There are some serious safety issues with the wiring and panel boxes that need to be addressed by an electrician as soon as possible. The front of one of the panel boxes is no longer attached and wiring is exposed.

I have attached my audit findings on the enclosed pages. Please note that each item has a location, severity rating, and space to note when the items have been addressed. Please indicate the date each item was corrected and forward a copy of these forms back to me for my files.

Each of these items was discussed at the time of the finding, but if there are any questions, please do not hesitate to reach out to me. My email address is [JWenzel@stlawco.org](mailto:JWenzel@stlawco.org) and my direct line is (315) 229-3035. You can also reach me on my cell phone at (315) 244-1363.

It was a pleasure visiting your facilities. Please do not hesitate to contact myself or this office with questions on my findings or any Worker's Compensation, training, or safety issues you may have.

Sincerely,



Jody C. Wenzel  
Risk Manager, St. Lawrence County Self-Insurance Plan

Cc: Karen Soltain, Kelly Smith, Nancy Russell



## Town of Clifton Highway Department Safety Compliance Audit

Risk Assessment Rating:	1 = Critical (Immediately)	3 = Minor (Within 60 days)	
	2 = Major (Within 30 days)	4 = Observation (Within 90 days)	
Location:	Description	Correction Date	Rating
All locations	Check fire extinguishers on a monthly basis		3
All locations	Document when new bottles are installed in eyewash		3
All locations	Label all electrical shutoffs		4
All locations	Recommend AED training for all employees		4
Electrical Room	Open junction box over electrical panels		2
Electrical Room	Electrical breakers not all labeled		3
Electrical Room	Missing breaker in "Panel 1"		3
Electrical Room	Debris and material blocking electrical panels - 36" clearance required		3
Electrical Room	Panels & wiring needs to be checked and updated by electrician, if needed		2
Mezzanine	Install chain/barrier across railing opening		2
Truck Bay	Safety clip missing from hook on hoist		3
Truck Bay	Anti-restart device required on bench grinder		3
Truck Bay	Anti-restart device required on drill press		3
Truck Bay	Load rating required on metal racks		4
Cold Storage	Load rating required on metal racks		4
Training	No records of required OSHA/PESH Annual training for required topics		4
Administrative	No written Emergency Response plan, per 29 CFR 1910.120		4
Administrative	No written certification of PPE Hazard Assessment per 29 CFR 1910.132		4
Administrative	No written Respiratory Protection Program, medical eval., fit testing per 29 CFR 1910.134		4
Administrative	No Confined Space Workplace Evaluation, per 29 CFR 1910.146		4
Administrative	No Lock Out / Tag Out program per 29 CFR 1910.147		4
Administrative	No Bloodborne Pathogen written exposure plan, per 29 CFR 1910.1030		4
Administrative	No Hazard Communication Plan, per 29 CFR 1910.1200		4
Administrative	MSDS sheets not converted to Safety Data Sheets per 29 CFR 1910.1200		3
Administrative	No Fall Protection written plan per 29 CFR 1910.500-503		4
Administrative	No Lyme Disease Prevention program per 12 NYCRR Part 800.6		4



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