RTK Coordinator Instructions

• **One** person from each employer will be the Employer Responsible RTK Official (ERRO)
• This assignment is made by your employer
• If you are assigned to be the ERRO you need to register with RTK Staff to get online access to your employer’s surveys:
  • Call the RTK Infoline at (609) 984-2202 and ask the staff to register you.
  • The RTK staff will add your name to our online system and you will receive an e-mail from “rtksurvey”. The e-mail will contain instructions and an authorization code. You will need to have a myNewJersey account set up before you call. Go to [www.nj.gov](http://www.nj.gov) to set up your account before calling. If you already have an account on myNewJersey account you should use that account logon id.
  • After you receive your e-mail with the authorization code go to myNewJersey Portal located at [www.nj.gov](http://www.nj.gov) follow instructions in this slide show and in the application.
  • If you would like to assign others one or more of the surveys to complete review slides beginning at slide 42 of this presentation.
Facility Survey Coordinator Instructions

• The ERRO will assign you one or more facility surveys to complete.
• You will receive an e-mail from “rtksurvey” with an authorization code to use.
• Review the following slides and read instructions provided in the application.
• Complete the surveys assigned to you.
• Save or submit them. Follow your RTK Coordinator’s instructions.
• NOTE: once submitted you will not be able to make changes to your survey!!
The RTK Survey online system operates through the *myNewJersey* Portal. You must have a portal account to access the RTK Survey online system.
If you already have an account then click on Login
If you need to create an account then click on Register
Follow instructions provided online
Once you are logged into the NJ Portal
Click on “enter authorization code”
Enter your authorization code from the e-mail sent to you by “rtksurvey”
After you enter your “Authorization Code” successfully the link to the RTK Survey application will appear (you will be instructed to log out and log back into the myNewJersey Portal to receive the link)

Click on the link to open the application
Click on “All Facilities, My Employer” to begin

Survey Facilities
This system is for New Jersey Public Employers who are required to complete a Right to Know Survey.

To begin, in the ‘Survey Facilities’ menu, either:
- Click the ‘All Facilities, My Employer’ item to obtain a list, in order by Facility ID, of all Facilities for your Employer.
- Click ‘Search Facilities’ to obtain a Facility Search screen, your search will be limited to your Employer’s Facilities.

View-Access Facilities
This Login provides View-Only Access to Right to Know surveys for all Facilities in the assigned Municipality or Municipalities.

To begin, in the ‘View-Access Facilities’ menu, either:
- Click ‘All Assigned Municipalities’ to obtain a list of Assigned Municipalities and a link to list the Facilities in each Municipality.
- Click ‘All Assigned Facilities’ to obtain a list, in order by Municipality and Facility Name, of all Assigned Facilities.

(If no Survey Facilities menu items are visible, click on the ‘Survey Facilities’ menu item to open the sub-menu.)
A list of all your employer’s facilities will appear. Click on “Surveys” on the far right to open the RTK Survey for that facility.

Note: Only Facilities with “Facility Status” = Active will have RTK Survey(s) to complete.
If you prefer to perform a search for a particular facility or group of facilities (i.e. all facilities from one county, city, or street, etc.) then click on “Search Facilities” and enter your search criteria.
Click on the + to open the survey and start to complete it.
You must complete all sections of the Cover Page

**Right to Know Survey**
(Meets requirements of the Workplace Survey)

<table>
<thead>
<tr>
<th>Facility ID</th>
<th>SIC / NAICS</th>
<th>Co / Mun</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>12345678901</td>
<td>9131 / 111111</td>
<td>1111</td>
<td>7/15/2014</td>
</tr>
</tbody>
</table>

**Facility Mailing Address:**

RTK Unit - Test Facility #1
ATTN: RTK COORDINATOR
ATTN: RTK COORDINATOR
135 BROAD STREET
TRENTON NJ 08625

**A. Facility Location**

RTK UNIT - TEST FACILITY #1
135 BROAD STREET
TRENTON

**B. Are there any substances or materials present at this facility that are on the Right to Know Hazardous Substance List?**

- [ ] Yes
- [x] No

**C. Number of Employees at this facility**

100

**D. Indicate the nature of the operations conducted at this facility**

- [ ] Other
- [x] Test Facility

**E. Are you reporting Products with Unknown Ingredients?**

- [ ] Yes
- [ ] No

**F. Employer Email Address**

rtksurvey@doh.state.nj.us

**G. Certification of Responsible Official**

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate and complete.

Last Changed: Simi Octavia-Pole
Name: Connie Brenton
Signature: 609-984-2202
Date: 05/18/2014

**H. Police and Fire Departments**

Enter the respective phone numbers, name and addresses (Include Zip Code) of your local fire and police departments.
(Do NOT list 911 as the phone number)

**Police Department:**
Telephone Number: 609-555-1212

**Fire Department:**
Telephone Number: 609-555-1321
When you have completed entering information on the Cover page of your RTK Survey
Click on the system “SAVE” button to save your information.
You can also choose “Save And Go To List” or “Save and Go To Inventory”.
**Do NOT** Use other commands such as those in the tool box bar as they are outside this
application and will not work properly.

**DO Not use**

**Use**
If you have more than one union representing employees at this facility you can report additional unions by clicking on the link “AddEdit Information for Additional Unions” in Section I located on the Survey Cover page.
After you click on “AddEdit Information for Additional Unions” from the cover page then Click on “Add A Union” button and a new line will appear where you will enter the additional union information.

<table>
<thead>
<tr>
<th>FACILITY ID:</th>
<th>12345678001</th>
<th>SIC:</th>
<th>9131</th>
<th>NAICS:</th>
<th>111111</th>
</tr>
</thead>
<tbody>
<tr>
<td>FACILITY NAME:</td>
<td>RTK Unit - Test Facility #1</td>
<td>EMPLOYER NAME:</td>
<td>Right to Know Test Employer</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Union Information**

<table>
<thead>
<tr>
<th>Representative Name *</th>
<th>Union Name (Abbrev)</th>
<th>Local Number *</th>
<th>Address *</th>
<th>City *</th>
<th>ST *</th>
<th>Zip *</th>
<th>Telephone *</th>
<th>Ext</th>
<th>Delete Entry</th>
</tr>
</thead>
</table>

* Denotes required information

Send copies of this form along with the Right to Know Survey Update to your County Lead Agency, local health department, local fire and police departments, and Local Emergency Planning Committee.
Enter additional Union Information into the boxes provided
Then click on “Save”
Continue to “Add A Union” until all union’s are entered.
Then click on “Save and Return to Survey”
How Do I Add Products With Unknown Ingredients
Click on Products with Unknown Ingredients in section E located on the Survey Cover Page
Click on “Add A Product”
Enter Product Name, Manufacturer’s name, Address, City, State, and zip into the boxes.
After all “Products with Unknown Ingredients” information has been entered either:
Click on “Save” and then “Add A Product” continue until all products with unknown ingredients have been added OR
Click on “Save and Return to Survey”
When you are ready to enter your inventory
Click on “Save And Go To Inventory” to enter your inventory of products with
hazardous ingredients
Click on “Add Product” to begin.
Complete **ALL** Product Information
Then Click on SAVE

Enter product information into each column above then click on SAVE.
After you SAVE your product information this screen will appear

Click on “Add Substance” to add the first hazardous ingredient
NOTE: Only ingredients on the RTK Hazardous Substance List (HSL) will be accepted. If the ingredient you enter is not on the RTK HSL the system will send a message “This substance is not on the RTK HSL and is not reportable.” If no substances in your product are on the RTK HSL you cannot report the product on your RTK Survey.
To enter hazardous ingredients that are on the RTK Hazardous Substance List,

Enter the hazardous ingredients by typing into any one of three (3) boxes then hit enter.

Enter information into any one of these 3 boxes then hit enter. The remaining info should auto fill.
You must now select the % of the mixture that this ingredient represents with respect to the entire product (i.e. 100% of the mixture, 25% of the mixture, etc.) Click on “Select” in the “Mixture” Column, select the mixture %, then click “SAVE”. Check your product’s Safety Data Sheet to determine the mixture percentage of each hazardous ingredient.
To Continue Adding Products & Hazardous Ingredients: To add additional products click on “SAVE” to save the first product. Then click on “Add A Product”. A new line for product information will appear.

To add additional hazardous substances click on “SAVE” after adding your first hazardous substance ingredient. Then click on “Add Substance” add the next substance + mixture %, then click on “SAVE”
You can delete a Hazardous Chemical Ingredient by clicking on \(\boxdot\) under the Column Heading “Delete” or you can delete the entire product by clicking on “Delete Product”. Add Hazardous Chemical Ingredients and/or Products by clicking on the “Add Product”/“Add Substance” buttons. For products you want to delete from previous years you will first need to click on the “Edit” button.
**Multi-Delete Option**

(To be used when you have completed a large clean out and have multiple products to delete from your inventory.)

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<table>
<thead>
<tr>
<th>Product Name</th>
<th>Manufacturer</th>
<th>Purpose</th>
<th>Location</th>
<th>Container</th>
<th>Inventory</th>
<th>Unit</th>
<th>Employees Exposed</th>
</tr>
</thead>
<tbody>
<tr>
<td>WINDEX</td>
<td>SC JOHNSONS</td>
<td>Cleaning Products-General</td>
<td>STORAGE</td>
<td>Bottles or jugs (plastic)</td>
<td>10 to 99</td>
<td>Gallons - liquids</td>
<td>10</td>
</tr>
<tr>
<td>SPAY BUFF</td>
<td>INCREDIBLE</td>
<td>Cleaning Products-General</td>
<td>2ND FLOR SLOP SINK</td>
<td>Bottles or jugs (plastic)</td>
<td>1 to 9</td>
<td>Gallons - liquids</td>
<td>50</td>
</tr>
<tr>
<td>XYZ</td>
<td>123</td>
<td>Other</td>
<td>STOREROOM</td>
<td>Battery</td>
<td>1 to 9</td>
<td>Pounds - solids</td>
<td>25</td>
</tr>
<tr>
<td>SUPER GLUE</td>
<td>ELMER'S</td>
<td>Adhesives</td>
<td>ART ROOM</td>
<td>Bottles or jugs (plastic)</td>
<td>10 to 99</td>
<td>Gallons - liquids</td>
<td>30</td>
</tr>
<tr>
<td>FORTIFICATION SEAL</td>
<td>JOHN A. EARL</td>
<td>Boiler Treatment</td>
<td>BASEMENT STORAGE</td>
<td>Bottles or jugs (plastic)</td>
<td>10 to 99</td>
<td>Gallons - liquids</td>
<td>5</td>
</tr>
<tr>
<td>CLOROX</td>
<td>CLOROX COMPANY</td>
<td>Cleaning Products-General</td>
<td>JANITOR'S CLOSET</td>
<td>Bottles or jugs (plastic)</td>
<td>1 to 9</td>
<td>Gallons - liquids</td>
<td>4</td>
</tr>
<tr>
<td>ALL-PURPOSE CLEANER</td>
<td>ALL-PURPOSE</td>
<td>Cleaning Products-General</td>
<td>JANITOR'S CLOSET</td>
<td>Bottles or jugs (glass)</td>
<td>1 to 9</td>
<td>Gallons - liquids</td>
<td>2</td>
</tr>
</tbody>
</table>
Multi-Delete Option
When you have finished entering all reportable products & hazardous substances (ingredients) Click on “Validate All” to ensure there are no errors or missing information.
When you have completed your inventory page(s) and you have “SAVED” it Click on ‘Go To Survey Cover’ to Submit your survey.
Ready To Submit Your Survey??
Click on “Submit”

<table>
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<th>Date</th>
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<td>111</td>
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Facility Mailing Address:
RTK Unit - Test Facility #1
ATTN: RTK COORDINATOR
ATTN: RTK COORDINATOR
135 BROAD STREET
TRENTON NJ 08625

B. Are there any substances or materials present at this facility that are on the Right to Know Hazardous Substance List? *
   - Yes
   - No

C. Number of Employees at this facility *
   - 100

D. Indicate the nature of the operations conducted at this facility *
   - Other

E. Are you reporting Products with Unknown Ingredients? *
   - Yes
   - No
   - Add/Edit Products with Unknown Ingredients

F. Employer Email Address *
   - rtksurvey@doh.state.nj.us

G. CERTIFICATION OF RESPONSIBLE OFFICIAL
   I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate and complete.
   Last Changed By: Simi Octamia-Pole
   Name: Gimme Brenton
   Signature: ❑
   Date: 05/19/2014

H. POLICE AND FIRE DEPARTMENTS
   Enter the respective phone numbers, name and addresses (include Zip Code) of your local fire and police departments.
   (Do NOT list 911 as the phone number)

   **POLICE DEPARTMENT:**
   Telephone Number: 609-555-1212

   **FIRE DEPARTMENT:**
   Telephone Number: 609-555-1321
**Not Ready To Submit Your Survey??**

Click on “Save” and you can return to continue completing your survey at a later time.

**IMPORTANT NOTE:** To ensure data is not lost, be sure to “SAVE” your work **often** and whenever you leave your computer idle for more than a few minutes.

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**Survey Year**

(Meets requirem

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<tr>
<td>1236678001</td>
<td>0131 / 111111</td>
<td>1111</td>
<td>7/15/2014</td>
</tr>
</tbody>
</table>

**Facility Mailing Address:**

RTK Unit - Test Facility #1  
ATTN: RTK COORDINATOR  
ATTN: RTK COORDINATOR  
136 BROAD STREET  
TRENTON NJ 08625

**B.** Are there any substances or materials present at this facility that are on the Right to Know Hazardous Substance List? *  
- Yes  
- No

**C.** Number of Employees at this facility *  
Number of employees exposed or potentially exposed to hazardous chemicals at this facility *  
- 100

**D. Indicate the nature of the operations conducted at this facility.**  
- Other Nature of Operations:  

- Test Facility

**G. CERTIFICATION OF RESPONSIBLE OFFICIAL**

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate and complete.

Last Changed By: Simi Octania-Pole  
Name: Ginnie Brenton  
Signature:  
Date: 05/16/2014

**H. POLICE AND FIRE DEPARTMENTS**

Enter the respective phone numbers, name and addresses (including Zip Code) of your local fire and police departments. (Do NOT list 911 as the phone number)

<table>
<thead>
<tr>
<th>POLICE DEPARTMENT:</th>
<th>FIRE DEPARTMENT:</th>
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<tbody>
<tr>
<td>Telephone Number *</td>
<td>Telephone Number *</td>
</tr>
<tr>
<td>609-555-1212</td>
<td>609-555-1321</td>
</tr>
</tbody>
</table>
Once your survey is submitted you will not be able to make changes!!

You will be able to view and print your survey

To View Submitted Survey ... Click Here
Reports for this survey
(Note: have the survey open)
There are many reports you can generate yourself. One that might be useful when completing your survey, is to generate a report sorted by location. This way you can visit the areas of the facility with a list of what is in each room.

- Select “Inventory by Product”
- Then “Sort By” change from Product Name to Location.
- Select “Generate Products Report” at the bottom right
- You can then select “Open” then from your tool bar “File” then “Print”
- Or you can “Save” the file for future use.
Survey Inventory By Product Category Report

Facility ID: 12345678006  Facility Name: RTK TEST FACILITY #6 - HIGH SCHOOL
Survey Year: 2018

Setup Screen

To Generate This Report for Specific Product Categories, Select Them Using the Selection Fields Below. To Generate This Report for All Inventory, Leave All Selection Fields Unselected.

- Products Reported in this Survey
- Manufacturers Reported in this Survey
- Purposes Reported in this Survey
- Product Locations Reported in this Survey
- Container Types Reported in this Survey
- Inventory Ranges Reported in this Survey
- Units of Measure Reported in this Survey

Sort This Report By: Product Location
Sort Direction: Ascending

Generate Products Report
Reports – All facilities

Click “Chemicals Present by EIN” if you are interested of making a list of all your facilities with inventory of a particular chemical.
For Example: generate a report of all facilities reporting gasoline in a can
Facility Inspection Search

(If your facility has been inspected by the RTK program click “Survey Facilities” to access your inspection report)

Welcome to the New Jersey Department of Health, Right to Know Program electronic survey filing system.

Survey Facilities
This system is for New Jersey Public Employers who are required to complete a Right to Know Survey.

To begin, click the 'My Facilities' item in the 'Survey Facilities' menu on the left.
(If no Survey Facilities menu items are visible, click on the 'Survey Facilities' menu item to open the sub-menu.)

View-Access Facilities
This Login provides View-Only Access to Right to Know surveys for all Facilities in the assigned County or Counties.

To begin, in the 'View-Access Facilities' menu, either:

- Click 'All Assigned Municipalities' to obtain a list of Municipalities in your Assigned County or Counties, and a link to list the Facilities in each Municipality.
- Click 'All Assigned Facilities' to obtain a list, in order by Municipality and Facility Name, of all Assigned Facilities.

(If no View-Access Facilities menu items are visible, click on the 'View Access Facilities' menu item to open the sub-menu.)
Facility Inspection Search

(Click the “search” button and your list of inspections will appear)
Select the facility inspection report you want by clicking on the green folder under view report. Then at the bottom of the page select open or save.

Click the green folder icon to open inspection report
Your facility’s inspection report will included:

- All violations found during the inspection,
- Detailed notes for each violation,
- A compliance deadline, and
- RTK program contact information
Assigning Surveys to others to complete.

- Only the Employer’s RTK Coordinator can assign others RTK surveys to complete.
- Surveys can be assigned
  - to another employee
  - to a consultant
  - to more than one person if necessary
Under the “User Management” Section ....Click on “Add User”
Under “Role” click on “Facility Survey Coordinator” or “Employer Consultant”
Complete all new user information: User Login Name, First, Last name, Title, Email
Highlight the facilities you want to transfer by left clicking on your mouse and dragging it over the facility name until it is highlighted. Then click on the key. This will assign the chosen facilities to new user.
Check that the highlighted facilities have moved from the left box to the right box.

Highlighted Facilities should have moved to the right hand side under “Facility Coordinator”
When you have finished moving the selected surveys

Click on “Add”

The system will now send an e-mail to this person with an “Authorization Code” for them to enter into their myNewJersey Portal Account
To remove a person from being able to access a survey they were once assigned...
Find the person by Clicking on List Users or User Search,
Click on the person’s name to open their “User Login Details”
Click on Status Arrow and change from “Active” to “INACTIVE”
Click on “Add”
To log out of the system click on logout
If you have questions or need help

• Please call us at (609) 984-2202
• Send us an e-mail at
  rtksurvey@doh.state.nj.us